

Promoting Clinical Scholarship in DNP Programs

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ABSTRACT

There are limited Doctor of Nursing Practice (DNP) program evaluation data reported, despite the exponential growth of enrolled students and graduates over the past decade. Program evaluation related to scholarship, curriculum, DNP project, and leadership among students and faculty is needed as educational leaders develop and revise programs. This article describes curricular strategies to promote the scholarly formation of Adult-Gerontology Advanced Practice Registered Nurse students, summative data from 2 cohorts, and discusses lessons learned and recommendations.

Keywords: clinical scholarship, Doctor of Nursing Practice program, faculty development, program evaluation

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INTRODUCTION

The number of Doctor of Nursing Practice (DNP) programs and graduates has increased significantly in the last several years.

Currently, there are 303 programs enrolling students across 48 states, with 124 programs under development.¹ The Essentials for Doctoral Education for Advanced Nursing Practice guide the development of curricula.² However, at this point, there are limited reports of summative program evaluation data that would be useful to help educators evaluate and improve curricula. Program evaluation data related to scholarship, curriculum, DNP project, and leadership among students and faculty are needed as educational leaders develop and revise programs. Therefore, the purpose of this article is to: 1) describe the curricular strategies designed, implemented, and evaluated in 1 program as a means to promote the scholarly formation of Adult-Gerontology Advanced Practice Registered Nurses (AG APRN) DNP students; 2) to analyze summative data following implementation of this curriculum; and 3) to discuss lessons learned and recommendations.

BACKGROUND

Two challenges are evident in the preparation of DNP students in APRN programs: the need to prepare APRNs to practice at the highest level of

nursing to address the complex needs of the population; and the need to prepare APRNs as leaders and scholars.

Furthermore, the recent American Association of Colleges of Nursing (AACN) Task Force Report³ on the Implementation of the DNP defines scholarship as “the mechanism that provides knowledge development within a discipline” and highlights that nurses with a practice-focused doctorate “are prepared to generate new knowledge through practice innovation.”^{3(p.2)} Recently, the National Organization of Nurse Practitioner Faculties published a white paper emphasizing that developing NP students as clinical scholars is central to the DNP education of nurse practitioners.⁴ Therefore, developing a DNP curriculum that integrates the requisite knowledge and skills of clinical scholarship concurrent with the knowledge and skills of APRN practice is important.

Program evaluation data are needed to develop DNP curricula that align with the AACN taskforce report and with the National Organization of Nurse Practitioner Faculties white paper. However, published reports are limited.

Faculty at the University of Tennessee Health Science College of Nursing (Memphis, TN) conducted a formative and summative evaluation of their DNP program.⁵ The summative evaluation included

an exit survey 1 week prior to graduation ($n = 57$) and a postgraduate survey 1 year after graduation ($n = 31$). The faculty, faculty-student relationships, the curriculum, and Web-mediated teaching were identified as program strengths. More recently, Brown and Kaplan⁶ evaluated graduate perspectives from the first 3 DNP cohorts immediately following program completion. Confidential interviews ($n = 22$) were conducted over the phone using a semi-structured guide consisting of 11 questions. Study findings included 5 themes: 1) students and faculty as co-learners; 2) explaining the DNP; 3) thinking differently about practice; 4) navigating the capstone; and 5) building bonds with other students. Hlabse and colleagues⁷ also found that classmates were viewed as a major support for DNP students. They conducted a nationwide online survey involving DNP students and graduates ($n = 172$). Survey respondents identified 2 supportive factors influencing program success: program design (flexibility and format) and relationships (student, faculty, and advisor). Terhaar and Sylvia⁸ also reported that an evaluation of scope and rigor of 80 DNP projects guided improvements in the curriculum that resulted in positive, measureable outcomes.

Program Overview

In 2012, the College of Nursing transitioned all APRN programs to the DNP degree. The program prepares DNP students with the knowledge and skills to practice at the highest level of nursing practice, translate evidence to improve health care outcomes, and to lead in complex health care systems. Therefore, the Adult-Gerontology (AG) APRN curricula was designed to align with the Essentials of Doctoral Education for Advanced Nursing Practice,² AG Primary and Acute Care Nurse Practitioner Competencies,⁹ and Nurse Practitioner Core Competencies.⁹ The courses are sequenced intentionally to promote integrative learning and prepares students to lead a DNP project. The goal of the DNP project is to translate current best evidence to improve the quality of health care. The process includes the design, implementation, and evaluation of a project that addresses a real-world clinical problem. The program culminates in a residency

experience of 420 hours for the acute care students and 336 hours for the primary care students, a written final paper in a publishable format, and a formal presentation of the DNP project final report.

CURRICULAR STRATEGIES

Creating and sustaining an intellectual community is essential to promote students' intellectual curiosity, progressive learning, and formation as scholars.¹⁰ We established several key strategies to promote our students' socialization as scholars, practitioners, and leaders, such as establishing a DNP seminar, developing faculty DNP advisors, and building collaborative practice partnerships. These strategies are consistent with the Report from the Task Force on the Implementation of the DNP.³ Table 1 describes the curricular strategies and alignment with the AACN task force recommendations.

DNP Seminar

A DNP seminar was developed to: 1) promote collaborative learning; 2) enhance students' intellectual curiosity; and 3) provide a mechanism for peer mentoring. The DNP seminar is offered throughout the development, implementation, and evaluation of the DNP project. The seminar topics are sequenced to support students' scholarly formation as they move through the stages of DNP project proposal (Table 1). Seminar topics reflect some of the challenging aspects of promoting students formation as clinical scholars, such as analyzing and synthesizing the literature, developing a rigorous evaluation plan, and scholarly dissemination. These challenges were identified based on student and faculty feedback, as well as reported in the literature.⁸

The DNP seminar enables students and faculty to cultivate relationships and promotes a positive culture that supports feedback and critique. Evidence suggests that building connections and coaching among students can contribute to successful outcomes.^{6,7} Early in the DNP seminar sequence, students present their "problem statements" to their peers and faculty. Typically students provide robust critique of each other's work, which promotes intellectual risk taking. Also, students from the previous cohort year participate throughout the seminar, which promotes peer mentoring. Students receive anticipatory

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