FOURTH EDITION

The Doctor of Nursing Practice Project

A Framework for Success

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DEDICATION

In dedication to my family... my husband Dave for always believing in me; my parents, James and Margaret Porrett, for their valuable life lessons; my son David, daughter-in-law Amy, daughter Nicole, and son-in-law Steven for continuing to inspire me; my sisters Lori and Lisa for their unwavering support; and my grandchildren Caleb, Ana, Ayla, Ella, and Connor for the absolute joy that they have brought to my life... I am blessed.

-Katherine Moran

This book is dedicated to my husband Steve, who has supported every endeavor along the way. Thank you for being an exemplary partner for every facet of our life and a wonderful role model for our children, Lisa and Schuyler. Special thanks to my parents, Bev and Don, for always encouraging and believing in me.

-Rosanne Burson

I dedicate this book to my husband and lifelong partner, Alan J. Conrad, MD. He has always valued higher education and has encouraged me, as well as our sons, Paul and Mark, to prepare for our respective professions. He has made it possible and walked alongside me as I pursued each nursing degree from diploma to DNP. He is my mentor and collaborator in exemplifying the art and science of excellence in providing primary health care.

I also dedicate this book to my parents, Daniel and Carol Koval, who provided the foundation of instilling the values of hard work, dedication, and perseverance, as well as encouragement throughout my lifetime.

-Dianne Conrad

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Project Exemplars with Theoretical Frameworks

The following project exemplars are available in the eBook:

- **Exemplar 1:** Creating a PICU Culture Wherein Error Disclosure Communication is Appropriate and Effective
- **Exemplar 2:** Assessing Feasibility of ECHO⁺ FASD for Increasing Access to Fetal Alcohol Spectrum Disorder (FASD) Diagnosis
- **Exemplar 3:** Implementation of Multi-Modal Opt-Out Program to Improve Screening, Referrals, and Engagement to a Dedicated Oncology Tobacco
- **Exemplar 4:** Passing Life On: An Organ Procurement Organization Medical Center Collaboration to Improve the Organ Donation Process

[†] Extension for Community Healthcare Outcomes

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Foreword

Cynthia McCurren, PhD, RN

A decade of collegial collaboration with the authors (Drs. Moran, Burson, and Conrad) has led to a high degree of professional respect for them, and thus it is an honor to write the Foreword for the fourth edition of their text, *The Doctor of Nursing Practice Project: A Framework for Success.* The first edition of this text was published in 2014. At that time, the implementation and adoption of the Doctor of Nursing Practice (DNP) degree was in a period of rapid evolution. There was limited guidance for students and faculty to chart a path for a successful DNP practice project. How the project was operationalized across degree programs was inconsistent and variable. Thus, a "framework for success" for the practice project was a major contribution to fill a void. From the inception of the idea to develop this text, the authors have consistently applied to each edition (first through third) their own collective experiences as DNP-prepared professionals and the evolving understanding of the issues impacting the desired goal of DNP graduates. In writing this foreword, a reflection of the past to the present is helpful, especially in highlighting significant revisions the authors have made in this fourth edition.

The launching of the Doctor of Nursing Practice degree began in 2004 when the member schools of The American Association of Colleges of Nursing (AACN) endorsed the *Position Statement on the Practice Doctorate in Nursing* (AACN, 2004). This decision called for moving the level of preparation necessary for advanced nursing practice from the master's degree to the doctorate level. The position statement was the culmination of research and consensus-building by an AACN Task force, responding to three key Institute of Medicine (IOM) reports: *To Err Is Human: Building a Safer Health System* (1999); *Crossing the Quality Chasm: A New Health System for the 21st Century* (2001); and *Health Professions Education: A Bridge to Quality* (2003). Collectively these publications brought to light serious concerns in the U.S. healthcare system related to safety, effectiveness, patient-centeredness, timeliness, efficiency, and equity; and called for realignment of expected competencies of all healthcare students to ensure intentional preparation of graduates for transforming health care in the United States.

With consideration of these significant factors in health care, and that nursing education must be reenvisioned to ensure graduates possess the knowledge and skills for 21st century health care, the AACN membership endorsed in 2006 the *Essentials of Doctoral Education for Advanced Nursing Practice* (AACN, 2006). Therein, the required curricular elements and competencies were defined for the DNP degree. A DNP Tool Kit (AACN, 2022a) was developed to inform development and implementation of DNP degree programs within AACN member schools.

In order for the transformation of health care to occur in the United States, nursing would need to be a formidable contributor. This was made clear in the 2010 Institute

of Medicine/Robert Wood Johnson Foundation report, *The Future of Nursing (FON): Leading Change, Advancing Health* (IOM, 2010). This report reinforced the movement in nursing education to prepare nurses for the highest level of practice, recommending that the number of doctorally prepared nurses (practice and research-focused) be doubled by the year 2020. The FON Committee was charged to identify the roles nursing should assume to address the increasing demand for safe, high-quality, and effective health care, and bring about transformation. Four key messages were formulated, to include, "*Nurses should achieve higher levels of education and training through an improved education system that promotes seamless academic progression.*"

Doctor of Nursing Practice degree programs began to proliferate and numbered 274 by 2014. The AACN was astutely following the successes and challenges that arose with the rapid growth, ever mindful of monitoring metrics to assess if DNP programs were achieving expected outcomes. It was in 2014 that the AACN Board of Directors commissioned the RAND Corporation to conduct a national study to examine progress made by nursing schools in transitioning to the practice doctorate. In 2015, the report, titled The DNP by 2015: A Study of the Institutional, Political, and Professional Issues that Facilitate or Impede Establishing a Post-Baccalaureate Doctor of Nursing Practice Program (Auerbach et al., 2015) was released, supporting agreement among the majority of nurse educators about the value of the DNP for preparing for advanced nursing practice. This report informed ongoing dialogue about the DNP and accentuated the need to clarify curricular and practice expectations, scholarship, and academic/practice partnerships. The AACN Board of Directors charged a task force with the development of a white paper that would clarify the purpose of the DNP final scholarly product and the clinical learning practice hour requirements; and identify innovations to promote successful collaborative practice strategies. The outcome of this task force was the 2015 White Paper: The Doctor of Nursing Practice: Current Issues and Clarifying Recommendations (AACN, 2015). Also in 2015, AACN commissioned Manatt Health to complete a national study on optimizing nursing's role to enhance clinical practice and strengthen practice and research partnerships. A report of this study, Advancing Healthcare Transformation: A New Era for Academic Nursing (AACN, 2016) was released in March 2016, providing a strategic framework for engaging health systems leadership with university presidents and chancellors in the collaborative work needed to advance innovation, align resources, and enhance public health.

An additional key AACN document that has served to influence the evolving understanding of the DNP degree requirements and practice project is the 2018 position statement, *Defining Scholarship for Academic Nursing* (AACN, 2018). The traditional definition of research was broadened and stated as follows:

Nursing scholarship is the generation, synthesis, translation, application, and dissemination of knowledge that aims to improve health and transform health care. Scholarship is the communication of knowledge generated through multiple forms of inquiry that inform clinical practice, nursing education, policy, and healthcare delivery. Scholarship is inclusive of discovery, integration, application, and teaching (Boyer, 1999). The hallmark attribute of scholarship is the cumulative impact of the scholar's work on the field of nursing and health care.

The authors incorporated in their first three editions of the text the evolving context and lessons learned to frame their thinking related to the DNP practice project, and used the collective insight that had been brought forth. Most recently in 2021 and 2022, there were four other major releases that now inform their fourth edition.

The Essentials: Core Competencies for Professional Nursing Education (AACN, 2021) were approved by the AACN membership in April 2021. The journey had begun in 2017 when AACN charged a task force to clarify preferred educational pathways and preparation necessary to be successful in evolving expectations of nursing professionals. In 2019, AACN's Vision for Academic Nursing (AACN, 2019) was released and served to inform the charge of the next task force appointed to reenvision the Essentials (the Essentials are published by AACN to provide the educational expectations for college/university degrees in nursing). This task force was comprised of 36 nurse leaders representing education and practice, committed to "listening to understand" and deep reflection that eventually revealed the realities within the profession that must be addressed so that we may be united as transformational leaders in health care. The new Essentials are grounded in an emphasis on nursing as a discipline, clarity of our professional identity, the benefits of a liberal education, and the principles of competency-based education. The Essentials framework is composed of 10 domains, with expected competencies for each domain that represent professional nursing practice, applicable across practice settings. Subcompetencies are made explicit for each domain and competency statement, with Level 1 subcompetencies for entry into practice and Level 2 subcompetencies for advanced nursing practice. The new Essentials represent a landmark time for nursing, a shared vision for the profession, clarity for the expectations of graduates, and a disciplined approach to nursing education informed by the demands and needs of practice/society. They look to the future, informed by the rapid changes needed in clinical care, nursing education, nursing leadership, population health, and nursing-community partnerships.

As the new Essentials were being developed, there was also a significant undertaking taking place, building on the 2010 Future of Nursing report. Distinguished members of an interdisciplinary expert committee conducted a consensus study, identifying nursing's role in the next decade amidst rapid change occurring across all sectors of society affected by health and well-being. The National Academy of Medicine released The Future of Nursing 2020–2030: Charting a Path to Achieve Health Equity in 2021 (National Academies of Sciences, Engineering, and Medicine, 2021). Under development prior to the onset of the COVID-19 pandemic, and completed in 2021, the charge to nurses is heavily influenced by the impact of this global event. The emphasis is on the critical importance of health to all aspects of life, with attention to the social determinants of health, health equity, and health outcomes. Key messages focus on addressing systemic inequities and persistent health disparities, built on a strengthened nursing capacity and expertise. Nurses are called to have a major influence on aligning public health, social services, and public policies. Among many salient recommendations, are themes also consistent with the Essentials: (a) shared agenda for education, practice and policy; (b) lifting barriers to expand the contributions of nursing; (c) strengthening nursing education so graduates can identify and act on the complex social, economic, and environmental factors, using experiential learning that ensures competency achievement that can affect change.

Nursing science remains at the core of the profession to inform practice, and in 2020, AACN convened a task force to revise the AACN's 2010 position statement

related to the research-focused doctorate, to articulate a preferred vision of PhD education in nursing. *The Research-Focused Doctoral Program in Nursing: Pathways to Excellence* position statement was released in 2022 (AACN, 2022b). While this document is focused on the PhD in nursing, there is relevant content that informs thinking about the learner in the DNP degree program and the practice project. It is noted that the academic preparation leading to the PhD and the DNP are distinct yet share similarities. Concepts identified in the updated 2021 *Essentials* are relevant to PhD and DNP educational preparation, for example ethics, health policy, and social determinants of health. Both groups of doctorally prepared nurses have unique competencies, that when brought together in collaboration can foster the integration of research into practice, yielding higher impact and better outcomes. This perception adds further insight for the DNP project.

Dialogue has continued in the profession about the DNP, and despite efforts to standardize educational endeavors, concerns continued to emerge. These were made explicit from intentional conversations conducted by the task force for reenvisioning the Essentials. Many current realities related to the DNP were made evident: There is great variability in DNP educational programs, including variability in program length, scope, expectations, and quality; and that students, graduates, faculty, and employers often struggle to articulate that which differentiates MSN and DNP graduates. Ever mindful of the need to ensure systematic inquiry, the Board of Directors for AACN agreed in July 2020 to launch a national study to assess the current state of graduates from Doctor of Nursing Practice (DNP) programs. Focusing on nurses in practice and academia, the study examined the current utilization of DNP-prepared nurses, including employer, faculty, and student perceptions of DNP preparation, and the impact of DNPs on patient and system outcomes, quality of care, leadership, education, and policy development. The study was conducted by IMPAQ, with the final report released in June 2022, The State of Doctor of Nursing Practice Education in 2022 (AACN, 2022c). As a context, the challenges noted in the 2015 report by the RAND Corporation were reviewed, to include market demand, institutional barriers, state policy and regulatory constraints, and resource and financial factors. Even though seven years have passed, these challenges persist; the perceptions identified by the task force for reenvisioning the Essentials were confirmed, with expanded validation and insight. DNP curricula and skill sets of graduates continue to vary. Some relevant findings: (a) there is significant variability in how the DNP project is implemented among programs; (b) challenges among graduates included limited time to devote to the DNP project; (c) improvements suggested by graduates included the need to focus on large-scale systems changes in the curricula, add business-related classes in areas of finance, project management, and process improvement; (d) employers want to hire graduates who understand how to translate science to practice, implement quality improvement policies, and understand systems change on a larger scale; (e) employers reflected on the value of the DNP degree, suggesting rigor of the DNP project and clearly differentiate between the MSN and DNP skill sets; (f) employers suggested increasing the practicum hour requirements, limit the online programs, increase the focus on business education (finance and statistics), and increase emphasis on policy and legislation. Overall, the variation in programs was reported to lead to confusion regarding what skills and value DNP graduates bring, the inability to distinguish DNP graduates from other nurses with advanced degrees, and finally that DNP

graduates themselves struggle with explaining their unique skill set and how to capitalize in practice. Seven recommendations were made:

- Clarify the goals and identity of the DNP degree.
- Examine curriculum and rigor of DNP programs and DNP projects.
- Engage with APRN certification organizations.
- Educate employers about the unique skill sets and value of DNP graduates.
- Develop processes for measuring DNP process and system-level outcome data.
- Conduct research to isolate the impact of DNP graduates on patient and system-level outcomes.
- Encourage academic-practice partnerships.

Coming full circle, it was the serious concerns in the U.S. healthcare system related to safety, effectiveness, patient-centeredness, timeliness, efficiency, and equity noted in the 2001 Institute of Medicine report that ignited the profession of nursing to take action. Based on the transformation needed in health care, nursing was called to prepare graduates at a higher level, hard wiring into their approach to practice a systems perspective, quality improvement, and patient-centered care. The need to keep persisting in the refinement of the DNP degree with intentionality, to ensure the intended outcomes, is made evident in a recent publication: Mirror, Mirror 2021—Reflecting Poorly: Health Care in the U.S. Compared to Other High-Income Countries (Commonwealth Fund, 2021). This is but one report among many that summarizes harsh realities that have persisted over 20 years after the call to action to transform U.S. health care. An analysis of 71 performance measures across five domains (access to care, care processes, administrative efficiency, equity, and healthcare outcomes) was conducted, comparing 11 high-income countries. The United States ranked last overall, despite spending far more of its gross domestic product on health care. To note, the United States was last on access to care, administrative efficiency, equity, and healthcare outcomes. The COVID-19 pandemic made these realities ever more painful.

It can be seen with clarity now the influence of the fourth edition of *The Doctor* of Nursing Practice Project: A Framework for Success. It reflects the deep understanding possessed by the authors related to the Doctor of Nursing Practice (DNP) degree, and the significance of the DNP project as a degree requirement. The authors' understanding and revisions in this latest edition are influenced by the evolving context of health and health care in the United States and globally, the expectation of contributions from the discipline of nursing to bring about transformation, and the responses from nursing education. The fourth edition of *The Doctor of Nursing Practice Project* is now front and center as a "north star" to guide the relevancy of the project that is the culminating experience in the DNP degree education. Recommendations from *The State of Doctor of Nursing Practice Education in 2022* (AACN, 2022c) are addressed to include ensuring rigor of the DNP project; leveraging academic/practice partnerships to ensure the unique skill set and value of DNP graduates is understood; and using systematic strategies to measure and disseminate the impact of DNP projects on patient and system-level outcomes.

The Doctor of Nursing Practice project emerges as a critical link to ensuring the achievement of competencies that distinguish the DNP graduate, but more importantly that can serve as a powerful learning experience to impact the "harsh realities" in health care that MUST be addressed. In 2021, there were 394 DNP degree programs in the United States and 40,834 students (AACN, 2022c). One project can make a difference—imagine the impact of 40,834 projects to bring about change, and continue to multiply by the number of DNP graduates that have entered the workforce and will continue to do so. In Chapter 5 of the updated text, the authors drive home the importance of pursuing relevancy of the project by "strengthening the systems thinker perspective to understand the phenomenon of interest; and connecting 'problem identification' as it relates to the balance/interconnection of organizational, policy, professional, and population need."

Throughout this updated fourth edition of the text, revised chapters reveal additional examples of how the evolving context of health care and nursing education is incorporated. Highlights are as follows that substantiate strengths:

- The importance of the DNP project and practice scholarship is explained as a driving force to foster achievement of the goals of the *Future of Nursing 2020–2030*, the IOM Aims, the new AACN 2021 *Essentials*, and the connection to *Healthy People 2030* (Office of Disease Prevention and Health Promotion, n.d.).
- A connection is made to health systems science (Skochelak et al., 2021).
- The Level 2 sub-competencies for advanced level nursing from the new AACN *Essentials* are introduced and practice scholarship is stressed in the context of the research/theory/practice continuum. Scholarship in practice is emphasized as important to impact health outcomes and health delivery.
- With policy and advocacy as concepts in the new AACN *Essentials*, the authors emphasize how policy influences all levels of health care, expanding on population health and the social determinants of health.
- The need for business acumen, financial analysis, and engagement with stakeholders is stressed to validate the identified problem of interest.
- Skills for project development, implementation, and evaluation are provided, to include insight for effective strategies for group projects.
- The importance of collaboration and practice partnerships is stressed, along with attention to sustainability and sequential projects.
- A new chapter focuses on evaluation methods and plans for analysis, all to reinforce the importance of rigor and validity of the project.

Overall, there is clear emphasis on the value and impact of practice doctorate scholarship—the resounding strength of this text that will be invaluable for students, faculty, and DNP graduates as they continue to make a difference in health care throughout their careers. This text ensures that nurses are not just told to contribute to healthcare transformation, but they are guided to know how. My respect for the authors is reinforced by the significance of their work.

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Preface

Healthcare reform has been on the minds of many individuals across the United States since the introduction of the Patient Protection and Affordable Care Act in 2010. As decisions are made about implementing reform, it is important to thought-fully consider how we as a nation will meet the healthcare needs of the people. Regardless of the outcome, it is clear that the availability of highly educated nurses to care for individuals is imperative to the health of our nation.

The Institute of Medicine (IOM) and the Robert Wood Johnson Foundation (RWJF) have recognized the need to strengthen the largest component of the healthcare workforce—nurses—to become partners and leaders in improving the delivery of care and the healthcare system as a whole (IOM, 2010, p. ix). Both the IOM and RWJF agree that accessible, high-quality care cannot be achieved without exceptional nursing care and leadership and, as such, have partnered in creating the RWJF Initiative on the Future of Nursing to explore challenges central to the future of the nursing profession (IOM, 2010, p. ix). Two specific recommendations coming from this report that are relevant involve (1) ensuring nurses achieve higher levels of education and training and (2) ensuring nurses become full partners with physicians and other healthcare professionals in redesigning health care. In 2021, the renamed IOM, the National Academies of Sciences, Engineering, and Medicine (2021) released The Future of Nursing 2020-2030 report that reinforced and expanded on prior recommendations with an emphasis on achieving health equity for all, as well as the central role that nurses play in addressing the healthcare needs of the population.

In 2004, the American Association of Colleges of Nursing (AACN) recognized the need to develop nurses as healthcare leaders and subsequently released a position statement advocating that by 2015, a doctor of nursing practice (DNP) degree be required for advanced practice nurses. Since that time, schools of nursing across the nation have introduced this terminal degree into their respective programs (AACN, 2011).

One universal requirement for any DNP candidate, regardless of the institution attended, is the successful completion of a DNP project that uses evidence-based practice (EBP) for improved delivery of care, patient outcomes, and clinical systems management (AACN, 2004). The requirements for the DNP project are similar to the dissertation requirement for the PhD candidate insofar as both require rigorous scholarly work. The difference is in the focus; for the PhD candidate, the focus is generally on knowledge generation and discovery, whereas the focus for the DNP student is to apply this knowledge in some meaningful way to ultimately serve the needs of society. As mentioned in Chapter 3, Scholarship in Practice, both types of scholars contribute to knowledge generation and are interdependent to fully impact health.

Unfortunately, there are limited comprehensive resources available to guide students in completing the DNP project. Therefore, there is a need for a book that

not only explores the journey the student embarks on when completing scholarly work, but also a book that provides a framework for success. For these reasons, this book was designed and written by advanced practice nurses who have earned a DNP degree especially for nurses working toward that end.

Some of the unique features of this book include clearly identified learning objectives at the beginning of each chapter, multiple examples to help illustrate key points, and significant features that are highlighted for easy reference. Where applicable, chapters conclude with impact statements, key messages, and an action plan to help the student through the DNP project development and implementation process.

The authors are proud to include work from DNP scholars across the country that are highlighted in various chapters throughout the book, such as in Chapter 5 where the student will find wonderful examples of theoretical frameworks that were used to guide their projects. There are also project tools incorporated in each chapter where applicable, and a dedicated DNP Project Toolkit is available online that includes tools and templates that the DNP student may find useful when embarking on the project process. These downloadable tools and templates are available within the Navigate course. The authors encourage students to disseminate their work for the good of nursing and the health of our nation. Ultimately, this book is a demonstration of intraprofessional collaboration of DNP-prepared nurses with PhD colleagues as contributing authors, to produce a resource for enhancing the nursing profession.

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Purpose

The purpose of this book is to provide a road map for DNP students to use on their journey from project conception through completion and dissemination. The goal is to introduce a *process* that will enable DNP students to work through their projects in a more effective, efficient manner and will assist in resolving the current variability of DNP projects within DNP programs around the country. This book is not intended to be prescriptive. Rather, it was developed from a broad, inclusive perspective to address the varying needs of DNP students across the country. The authors hope that it will be useful for practical application and that it gives a framework for the scholarly work process.

This book will also serve as an aid to assist faculty who are mentoring, counseling, or coaching students on the process of completing DNP scholarly work. Finally, this resource will assist preceptors and mentors of DNP students in health organizations as many DNP projects are completed within these systems.