

Discussion Paper: Doctor of Nursing Practice



In October 2004, the American Association of Colleges of Nursing (AACN) published a position paper focusing on the issue of converting the terminal degree for advanced practice nursing from the Master's to the Doctor of Nursing Practice (DNP) by the year 2015. To that end, two task forces consisting of members of AACN have been created to develop: 1. "Essentials for the DNP", similar to the Essentials currently in use for Nurse Practitioner (NP) Master's Programs, and 2. the "Road Map" which will propose a process for smoothly accomplishing this goal by 2015. The concept of a practice or clinical doctorate has been under discussion within the NP community since 2001 when the National Organization of NP Faculties (NONPF) established a task force to examine the issues from the NP educational perspective. The American Academy of Nurse Practitioners (AANP) and the American Academy of Nurse Practitioners Certification Program have been participants in these activities as they have unfolded.

The rationale for the shift in the academic preparation of nurses in advanced practice focuses on several issues, including the observation that advanced practice nursing is currently one of only a few health care disciplines that prepare their practitioners at the master's rather than the doctoral level. Most disciplines that prepare licensed independent practitioners (LIPs) such as podiatrists, psychologists, optometrists, pharmacists, osteopaths, medical doctors and dentists prepare them at the clinical doctoral level. Moreover, it is clear that the course work currently required in NP master's programs is equivalent to that of other clinical doctoral programs. It is important however, that the transition to clinical doctoral preparation for NPs be conducted so that master's prepared NPs will not be disenfranchised or denigrated in any way.


The following issues, therefore, will need to be addressed in order for the preparation of NPs at the clinical doctoral level to be developed in a logical and equitable fashion.

1. The quality of the preparation of current master's and post-master's NP programs must not be compromised. NPs have demonstrated their skills in providing high quality care to their patients regardless of gender, age or socio-economic status. The conversion of NPs programs that offer a doctorate in nursing practice should not change that fact. NPs provide safe, high quality care in all specialties and practice sites in which they are involved.
2. The transition to the new title must be handled smoothly and seamlessly, so that there will not be a negative impact on NP practice and sound patient care and that parity will be maintained.
3. Additional requirements, if any, made in the DNP programs should reflect areas where increased depth has been recognized to enhance NP practice.

Administration
P.O. Box 12846
Austin, TX 78711
p 512.442.4262
f 512.442.6469
www.aanp.org

Office of Health Policy
P.O. Box 40130
Washington, DC 20016
p 202.966.6414
f 202.966.2856

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Revised 2007

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4. Skilled clinical practice must be maintained as the foundation of all NP educational programs.
 5. Issues related to parity, providing reasonable methods for currently prepared NPs to obtain the DNP if desired and prevention of discrimination in reimbursement, must be addressed.
 6. Programs should be developed based upon agreed upon standards and guidelines. The premature development of programs should be avoided.
 7. Accreditation standards need to be maintained to ensure the preparation of safe, highly qualified clinicians who can be certified and recognized in the regulatory arena.
 8. Programs should remain accessible and affordable to qualified applicants, in order to maintain an adequate number of highly qualified NP clinicians to contribute to the health of their communities.

The conversion of existing master's programs to practice doctorate programs can add strength to programs, to NP practice and recognition in the health care arena. The development of such programs must be conducted in a manner that allows for smooth transitioning.

AANP is dedicated to and continues to address these issues as steps are taken to implement activities that would lead to the development of DNP NP educational programs in the future.

References:

American Association of Colleges of Nursing (2004). *AACN position statement on the practice doctorate in nursing.* Washington, D.C.: Author.

American Association of Colleges of Nursing (2006). *The Essentials of Doctoral Education for Advanced Practice Nurses.* Retrieved December 2006 from <http://www.aacn.nche.edu/DNP/pdf/Essentials.pdf>.

American Association of Colleges of Nursing (2006). *DNP Roadmap Task Force Report.* Retrieved December 2006 from <http://www.aacn.nche.edu/DNP/pdf/DNProadmapreport.pdf>.

NONPF (2006). *Practice doctorate nurse practitioner entry-level competencies.* Retrieved December 2006 from <http://nonpf.com/NONPF2005/PracticeDoctorateResourceCenter/CompetencyDraftFinalApril2006.pdf>