Nursing is currently undergoing an educational paradigm shift - and great controversy - with the doctor of nursing practice degree (DNP). While many argue that nursing does not need another tier of educational preparation, others contend that the DNP degree has been a long-anticipated innovation. As enrollment in DNP programs increases, debate about the issues surrounding the degree will be heated. Understanding the facts will help to ensure that the debate is based on accurate information and not misconstrued perceptions.

**The DNP Defined**
The DNP is a terminal doctorate degree for nursing practice. It is a practice-focused degree, rather than a research-focused degree (PhD).

Advanced practice nursing includes several specialty roles in which nurses function at an advanced level of practice. These roles include, but are not limited to, nurse practitioner, clinical nurse specialist, nurse midwife and nurse anesthetist. Advanced practice nurses use their advanced knowledge and skills within their specialty roles to provide care to individuals, families and communities.

The DNP is considered to be the highest level of preparation for nursing practice for any nurse who functions in various nursing practice roles. These roles may include leadership, research, clinical practice, policy and advocacy, education or, ideally, an integration of these roles.

The DNP is not intended to increase level of clinical expertise. Current master's degrees have more than adequately prepared nurses to function in advanced practice roles. Instead, the DNP offers additional preparation to enable nurses to improve health care delivery. The current health care environment is complex and ever changing. Advanced preparation, which gives nurses the additional tools to improve health care delivery, will only empower nursing to meet the needs of health care now and in the future.

**Evolution of Doctoral Education in Nursing**
The notion of a practice-focused doctorate in nursing is not new. Early doctorates earned by nurses were actually offered outside of nursing. These included the EdD (Doctor of Education) degree and the PhD degree in basic science fields, such as anatomy and physiology. The first nursing-related doctoral program originated in 1924 at Teacher's College at Columbia University in New York and consisted of an EdD designed to prepare nurses to teach at the college level. The EdD continued to be the mainstay of doctoral education for nursing well into the 1960s. The first PhD in nursing was offered in 1934 at New York University. The PhD degrees for nurses earned elsewhere continued to be in nursing-related fields, such as psychology, sociology and anthropology. This trend continued until actual nursing PhD degrees became more popular in the 1970s. The first practice-focused doctorate, the Doctor of Nursing Science (DNS) degree, originated at Boston University and "focused on the development of nursing theory for a practice discipline." Although the DNS was initially proposed as a practice or professional doctorate, over time, the curriculum requirements became very similar to a PhD.

Another attempt to develop a practice-focused doctorate was made in 1979 when the Nursing Doctorate (ND) was introduced at Case Western Reserve followed by the University of Colorado, Rush University and South Carolina University.
Unfortunately, enrollment in these programs did not flourish.

In 2002, the American Association of Colleges of Nursing (AACN) Board of Directors formed a taskforce to examine the current progress of practice doctorates in nursing. In 2004, AACN published a position statement on the practice doctorate and recommended that the Doctor of Nursing Practice (DNP) degree become the terminal degree for nursing practice by the 2015.

Eventually, AACN also developed Essentials of Doctoral Education for Advanced Nursing Practice, which serves as a guide for curriculum development and to promote uniformity for the degree. (See table.) The development of DNP programs has been astonishing. Currently, there are approximately 80 DNP programs across the country and more than 50 in development.\(^{1}\)

**Drivers of the DNP Degree**

Through the DNP, nursing has stepped up to recent challenges to make health care safer, more effective, more efficient and more equitable.\(^{18,19}\) While current master's degrees prepare nurses to be expert clinicians, educators and administrators, preparation at the practice-doctorate level will enable nurses to become experts at information technology, synthesizing and integrating evidenced-based practices and collaborating across health care disciplines. The expertise garnered in a DNP program will further enable nursing to meet the challenges of health care in the 21st century.

The National Organization of Nurse Practitioner Faculties (NONPF) Practice Task Force summarized the most frequently cited additional drivers for a practice doctorate in nursing:

- parity with other professions that are prepared by a practice doctorate
- a need for longer programs, which both reflect the credit hours invested in master's degrees as well as accommodate additional information
- the need to satisfy current needs for nursing faculty
- the need to meet demands of an increasingly complex health care system through additional preparation at the doctoral level.\(^{20}\)

**Roles of DNP Graduates**

DNP graduates may assume roles that are clearly defined, such as clinician or nurse administrator, or more ideally, roles that integrate the expertise garnered in a DNP program. The DNP program prepares nurses to become experts at information technology, integration and implementation of evidenced-based practice, evaluation and implementation of policy, and leadership.

For instance, as an expert clinician, DNP graduates may find themselves in a position to affect policy at a systems level. They also can use their practice expertise in nursing education to mentor others to integrate practice and education.

Finally, DNP graduates may partner with PhD counterparts to develop and implement evidenced-based practices that are grounded in practice.

Can master's-prepared nurses also integrate these roles? Yes, of course they can. However, the expertise obtained in these areas through a DNP program will augment the clinical expertise nurses already possess and give them additional knowledge and skills to become experts in information technology, evidenced-based practice, leadership and policy. The IOM has called for these changes in health care professionals' preparation.\(^{19}\) Further, these additional skills are needed to meet the demands of an ever-changing health care environment.

**The Future**

Nursing education is shifting. As enrollment in DNP programs increases, it becomes more certain that the DNP is the beginning of a paradigm change. However, it would be remiss not to mention the issues associated with this accelerating growth of DNP programs.

First, curricula should be uniform in order to establish credibility among DNP programs.

Second, faculty shortage is already an issue. The AACN reported that schools of nursing turned away 41,683 applicants across the country in 2005 primarily as a result of insufficient numbers of faculty to teach the students.\(^{21}\) Ideally, DNP graduates will begin to fill these vacancies in nursing education. Who better to teach future nurses than those who practice?

Finally, it remains to be seen whether the momentum of enrollment in DNP programs will continue. It will largely depend on the success and activity of DNP graduates. It should also be mentioned that the DNP degree is not yet a requirement, but a recommendation. Those who do not currently pursue this degree will be "grandfathered" and able to practice. The target date for the DNP to become standard for advanced nursing practice is 2015.\(^{8}\)
Regardless of the issues, nursing should not shy away from change, but embrace it. The demands of health care delivery are changing, and nursing has always progressed to meet social needs.

Nursing needs experts in every area of practice. The DNP degree is designed to prepare expert clinicians to meet the challenges of health care delivery in the 21st century. Furthermore, nursing is a practice discipline - it's time for a terminal degree reflective of this.

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