Education news

Nursing Doctoral Programs Prepare Nurses for Leadership Roles

By Jennifer Larson, NurseZone feature writer

The nursing shortage isn’t the only problem plaguing the nursing profession these days. The profession often finds itself shut out of crucial health policy decision-making.

Many experts say that it’s crucial to address nursing’s lack of parity with other health care professionals at the policy-making table. To that end, some nursing educators are promoting clinical doctorate programs as one way to prepare nurses to be leaders and to give them the opportunity to achieve equality with other doctorally-prepared professionals, such as physicians, pharmacists, and—by next year—physical therapists.

"I believe that we need more nurses with leadership and advanced skills to deal with what’s ahead, because it’s going to be more and more complicated," said Carolyn A. Williams, Ph.D., RN, past president of the American Association of Colleges of Nursing and dean of the University of Kentucky School of Nursing.

According to Williams, nursing is no longer solely about providing care to a patient at the bedside. It has progressed to incorporate the analysis of data, evidence-based practice and the creation of systems of care. And nurses must be appropriately educated to do these things in a health care environment that increasingly demands more from them.

An advanced degree with a clinical focus may be the solution. The American Association of Colleges of Nursing decided to explore the potential of clinical nursing doctorate programs a few years ago. The association formed a Task Force on Indicators of Quality on Doctoral Programs, which disbanded last year, and the current Task Force on the Professional Clinical Doctorate to analyze research and examine existing nursing doctorate programs and programs in development.

Sandra Edwardson, Ph.D., RN, chairwoman of the Task Force on the Professional Clinical Doctorate program, noted that more schools are beginning to offer some version of a clinical doctorate program.

Unlike a Ph.D. program, a clinical nursing doctoral program offers nurses the opportunity to sharpen their leadership and management skills to be used in a clinical environment, rather than for research. But the types of degrees offered by some of those schools vary, from DSN to DNS to DN to ND to DNP. Indeed, it is easy to be confused by the types of degrees offered by the aforementioned universities.

There are doctoral programs planned for at least 11 schools of nursing, according to the AACN. Four other universities already offer ND, or nursing doctoral, degrees: Rush University in Chicago, Illinois; the University of Colorado Health Sciences Center in Denver; Case Western
Reserve University in Cleveland, Ohio and the University of South Carolina in Columbia.

The University of Kentucky’s Doctorate of Nursing Practice (DNP) program is in its second year, and the University of North Dakota just began accepting students into its new doctoral program in January. The University of South Florida enrolled its first class of students in a new bachelor’s-to-doctorate program in August 2002 to help nurses who already have an undergraduate degree obtain their doctoral degree in four years.

According to the National League for Nursing Accrediting Commission, “a post baccalaureate nursing doctorate curriculum provides for entry into professional nursing practice and preparation for initial licensure. Graduates are prepared to practice within and across diverse healthcare settings.”

Indeed, the University of Colorado’s ND program is an entry-to-practice program, but the ND programs of Rush University, Case Western and the University of South Carolina are not. The University of Kentucky’s DNP is a post-master’s doctoral program but it has many elements in common with the ND programs at Rush, Case Western and South Carolina.

One of the goals of the AACN task force is to determine the role of the nurse with the clinical doctorate, including finding a consensus to stem any confusion arising from the “alphabet soup of letters” from various degrees, Edwardson said.

One element that all existing nursing doctoral programs seem to have in common is the emphasis on developing leadership skills in students. In the past, some nurses watched in frustration as they were passed over for leadership positions in favor of candidates with an M.B.A. but no nursing or patient care skills.

“I think the ND will be competing more and more with people prepared as health care administrators or people with business backgrounds who take health care leadership positions,” said Opal Brown, Ph.D., RN, associate dean for academic affairs at the University of South Carolina College of Nursing. “The nurse doctorate will be another alternative for these leadership positions and will make a wonderful contributions because of their nursing background.”

In fact, a key element required by most of the programs is a project that sharpens their clinical leadership skills.

At Case Western Reserve University, the students prepare to become clinical leaders by exploring an issue and conducting clinical research on that topic. Eventually, the students prepare a thesis that might propose a policy change or a business plan, based on their research and experiences.

At Rush University, the doctoral students develop health programs that would make a difference in their home communities, said dean Kathleen Andreoli, DSN, RN. Although students complete their regular coursework online, the health program requires them to present their business plan, budget and evaluation tools directly to the school’s faculty and dean, who provide feedback.

“It’s a practical project in the work world that will make a difference in the people that they serve,” Andreoli noted, adding that a nurse with this type of preparation could be a boon for a clinic or practice that needs a leader with experience in budgeting and resource management.

It’s possible that the existing and future nursing doctoral programs will continue to develop over time.
With the exception of Case Western Reserve University’s ND program, which was born in 1979, and Rush University’s program, which began in 1989, most of the existing clinical doctorate programs are still very young.

The University of South Carolina began admitting students to its ND program in 1999. The DNP program at the University of Kentucky is only in its second year of operation, with about 30 students are currently enrolled. The first class is expected to graduate in 2005.

The programs at Case Western Reserve and Rush have already evolved over the years.

The ND program at the Bolton School of Nursing at Case Western Reserve began as an entry-to-practice program for people with non-nursing baccalaureate degrees. The college reorganized the program in 1990 to become a four-year program in which students prepare for basic entry-to-practice during the first two years and then complete the master’s and clinical doctoral courses in the subsequent years.

“The whole purpose of the degree is to prepare leaders for clinical practice,” said Theresa Standing, Ph.D., RN, the program’s director.

According to Andreoli, the program at Rush was conceived as an advanced practice degree program and was converted to a professional doctorate two years ago. The first class since the conversion enrolled in January 2002, and students now complete all their coursework for an ND online.

More clinical nursing doctorate programs at other universities could be on the horizon.

“I do believe we’re going to see more clinical doctorates,” Williams predicted. “I think it’s a recognition of the importance of nursing practice.”

The doctorally prepared nurse will be pivotal in designing the architecture of clinical care, she added. “These people are going to have a major role in making that happen in the future.”

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