

OUTCOMES

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September 27-29, 2018



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Editor:

David Campbell-O'Dell DNP

2018 FACULTY

The Shortage of Mental Health Care Providers

As I write this, I'm sitting on the beach in a little slice of Florida. It's less than a week since the latest school shooting – the latest one happened on Valentine's Day at Marjory Stoneman Douglas High School in Parkland, Florida. Seventeen lives were lost but countless lives were changed.

Perhaps one of the most astounding statistics was that this was the 18th school shooting of 2018. Wait a minute – 18 school shootings since January 1st, 2018? Yes – this isn't a typo. In the first 44 days of 2018. There have been school shootings in Seattle, WA, Los Angeles, CA, San Bernadino, CA, Sierra Vista, AZ, Maplewood MN, Dearborn, MI, St. Johns, MI, Benton, KY, Denison, TX, Italy, TX, Marshall, TX, Gentilly, LA, Mobile, AL, Winston-Salem, NC, Philadelphia, PA, Oxon Hill, MD, and Bronx, NY.

There are many theories as to why there are so many school shootings but as health care providers, we can't help but think about the Mental Health Systems Act (MHSA) of 1980.

In October 1980, then President Jimmy Carter signed the MHSA. Once enacted, the MHSA would continue the federal community mental health centers program and it also included a provision for federal grants “for projects for the prevention of mental illness and the promotion of positive mental health.” The MHSA was considered landmark legislation in mental health care policy.

But the MHSA was not to be. In November 1980, Ronald Regan was elected president and he repealed the MHSA shortly after. Was this the start of today's mental health care provider shortage?

President Trump has offered some funding for mental health programs including spending \$10 billion to address “opioids and serious mental illness.” This includes funding for block grants to allow states to address mental illness and new support for mental health measures supported by the medical community.

But policy experts in the area of mental health have opined that this is not enough. Furthermore, the demand for psychiatric services has escalated. The National Council for Mental Health published a report in March 2017 that evaluated the need for psychiatric services.

This report found many issues regarding the lack of available mental health services. For example, the lack of health care services has resulted in significant delays to treatment. This leads to reduced quality of care, low patient satisfaction, poor patient outcomes, reduction in the workforce and higher costs. Outpatient mental health care providers have an overcrowded schedule with shorter appointment times that are scheduled back to back.

In hospital emergency departments (EDs), lack of access to psychiatric services stands out among all other medical diagnoses, averaging up to 23 hours for some dispositions. The resulting extended waits impacts the full scope of care in the ED.

Hospital beds have been eliminated due to lower rates of reimbursement compared to other medical or surgical procedures and due to difficulty recruiting psychiatric mental health care providers to staff the inpatient units.

Contact your legislator today and advocate for more funding for mental health services and mental health care providers.



**Jill Beavers-Kirby
DNP, MS, ACNP-BC**

received her Doctorate of Nursing Practice at The Ohio State University in May 2011. She currently serves Coordinator of Nurse Practitioner Programs and Associate Professor at Mount Carmel College of Nursing; she has served in this role since November, 2015. She also serves as a Visiting Professor for Chamberlain University in

2014. She has been a Board Certified Acute Care Nurse Practitioner since 2005 and she is also Board Certified as an Adult Nurse Practitioner. She has worked in a variety of patient settings most recently in hematology working with patients who had leukemia and lymphoma. She is licensed as a Registered Nurse in 12 states which permits her to educate students across the U.S. She has an extensive teaching history which includes Health Policy, Health Assessment, and Transition to Professional Roles for Nurse Practitioners. Dr. Beavers-Kirby is a founder, past president, and president elect for the Council for Ohio Health Care Advocacy (COHCA). She is also a devoted patient advocate and is actively involved with the Ohio Nurses Association Legislative Committee and she is an Ambassador for the Arthritis Foundation Policy.



**NEW FOR 2018
FROM *DNP, INC.***



- *Showcase DNP practice projects to share outcomes with colleagues and consumers.*
- *Educate patients, organizations and health care systems on the contributions of the DNP prepared nursing professional.*
- *Support DNP educational programs and practice partners to demonstrate the influence of the DNP prepared nurse.*
- *One time charge per student listing of \$30 to defray cost of repository development and maintenance.*



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DNP Survival Tips from a DNP Student

When I applied to my doctorate program (BSN-DNP), I had only one full year of experience on a telemetry unit. I always knew I wanted to pursue higher education after my BSN but did not expect to embark on my doctorate journey so close to finishing nursing school. I remember receiving the acceptance letter and being mixed with excitement and extreme anxiety. I was now not only preparing to enroll in a graduate program full time but also continue working at my nursing job full time.

At orientation, a moment really stood out. One of the professors told us that this experience would change us. She stressed how we would leave this program a completely different person. She said the experiences would test us and push us to develop a new version of ourselves. I'm sure I wasn't the only one who did not truly believe her. I had already gone through very transformative experiences in my four-year bachelor's program and transition into a new nurse. Those experiences tested me mentally, physically, and emotionally. I could not yet see the growth potential I still had.

Fast forward to where I am now, preparing to graduate in May, I can say with absolute certainty that she was right. The doctorate journey will test you in a way undergraduate nursing and a new nursing job does, but aids in developing you in ways not experienced before. So, I will share some helpful words of wisdom to help future doctorate students about to embark on this journey.

There are three main things to remember and truly work on to make it through the demands of a doctorate program while balancing your job, family and social life. The first is learning how to ask for help. This is a hard thing for many nurses, I know. When you start working as a new nurse, and then again as a graduate student, you need to learn how to delegate responsibilities. Delegate household chores to your partner or children, ask parents to help with your kids or your pets on days you need to study or work late, and do not turn away help when it is offered. You will become overwhelmed with the amount of work and time it consumes from your daily life and help is necessary to complete routine tasks like grocery shopping, laundry or cooking. The sooner you ask for help and accept it, the more time you can dedicate to your studies without feeling overwhelmed.

The second pearl of wisdom is to find a support system within your cohort or program. That can be a professor or group of students, regardless of who it is, find someone who understands what you are going through and will be there to help you get through it. There will be a time when you do not perform as well as you wanted on an OSCE, or you fail an exam. You will need these people to keep you on track and push you to keep trying. The doctorate journey is very unique and there is no one who will understand it better than your classmates or faculty. Not everyone in your life will support your journey; co-workers or family members may question why you are choosing to go back to school. It is those peers and professors who understand your motivation in your doctorate journey that will be the ones to remind you to continue, even when you have moments that you just want to quit.

My last piece of advice is to find time to do something for yourself. You will become consumed by attempting to balance work, life and school. Asking for help will help this balance but it doesn't take away the need for you to find time for yourself. You need to dedicate time doing something that makes you happy and healthy, at least once a week. This can be as simple as taking thirty minutes from your day, a few days a week, to exercise, go for a run or walk the dog. It can be in the form of taking a relaxing bubble bath, going to paint night with friends or going to dinner with your partner. Regardless of what it is, it needs to be for you and your mental and physical health. Even though this is mentioned last, this step is the most important because we cannot make it through the demands of daily life and help others if we do not take care of ourselves first.

I hope this can help you through your doctorate journey. The BSN-DNP is a new path in nursing and I choose to be a trailblazer! Surround yourself with others who are going through the same experience and understand how you are feeling. All the emotions, the stress, and trials are transformative, and at the end of this journey you will be a different person than the one who started the program. Be proud of your choice to pursue this demanding degree and utilize the three steps to help make it through your experience a little easier.



Michelle Santoro, BSN, RN, PCCN
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CONVERSATIONS OVERHEARD IN THE DNP ONLINE COMMUNITY

[AANP, NAPNAP & NONPF Respond to KevinMD Articles about NPs.](#) A blog, KevinMD.com had a posting by Rebekah Bernard, MD on January 5, 2018. Thank you AANP, NAPNAP and NONPF for sharing such a clearly articulated response.

[Figuring Out the Capstone Project](#), posted by Gabrielle Johnson. She is asking for your support and feedback. Can you help her with her request?

[Should years of clinical experience factor into the DNP selection process?](#) By Susan Rojas. She asks the value of building experience between degrees before starting a doctorate. What do you think?

[My Doctor is a Nurse Practitioner](#), by Brittany Enders still garners responses from members of the DNP online community. See what others are saying.

[Explaining the DNP? Has anyone conquered this monster?](#) By Cheryl Patrice Harris is well stated and is challenging for all of us. Have a look and respond.

[Is it Apathy or Lack of Understanding for the DNP Degree?](#) By Cindy Sneller. She started this conversation about 3 years ago and it is still a topic of interest to many. See what you think and join the discussion.

DNP Groups of Interest:

- [Ohio DNP Network](#)
- [California Organization of DNPs](#)
- [Metropolitan NY, New Jersey & Connecticut DNPs](#)
- [Midwest DNP Clinical Scholars](#)
- [Michigan DNPs](#)
- [Doctors of Nursing Practice in Nevada](#)
- And others.

February, March and April 2018 Events:

- [American Nurses Association National Conference](#)
- [AACN: Nursing Advancement Professionals Conference and Deans Annual Meeting](#)
- [QACN: Graduate Nursing Admissions Professionals Conference](#)
- [2018 ISPN Psychopharmacology Institute and Annual Conference](#)
- [The Art of Life Care Planning](#)
- [AACN: Business Officers of Nursing Schools Annual Meeting](#)

If you know of an event that supports the growth and development of nursing colleagues, please post it to the EVENTS page. It's free, and reaches thousands every month. Click the ADD button on [this page](#) to post an event.

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FEBRUARY 2018 DNP, INC SURVEY RESULTS

February 2018 Survey Results: Sustaining the DNP after graduation.

The February 2018 survey requested feedback from graduates to gauge their thoughts on how the DNP degree is being applied to practice after graduation. The majority of respondents see an improvement in practice as a result of earning this degree. See what you think.

Question 1: The theme of the 2018 National DNP Conference is sustaining the DNP: Strategies for the Future in Clinical and Administrative Practice. In my experience doctorally prepared practice is sustaining the foundations of DNP education?

72% very much to absolutely, 28% somewhat to not at all

Question 2: My practice improved as a result of my professional contributions secondary to DNP educational preparation?

76% very much to absolutely, 24% somewhat to not at all

Question 3: Regardless of my role (clinical or administrative) I see trends that indicate an improvement in practice is taking place as a result of the DNP prepared nurse.

73% very much to absolutely, 27% somewhat to not at all

Question 4: I appreciate the benefits of strategies started as a DNP student in my practice setting.

70% very much to absolutely, 30% somewhat to not at all

Question 5: I see that practice improvements are more sustainable by my actions as a DNP prepared nursing professional.

76% very much to absolutely, 24% somewhat to not at all

What do you think? Do these findings reflect your point of view?

Click [HERE](#) to take the March 2018 survey



ORGANIZATIONAL UPDATE

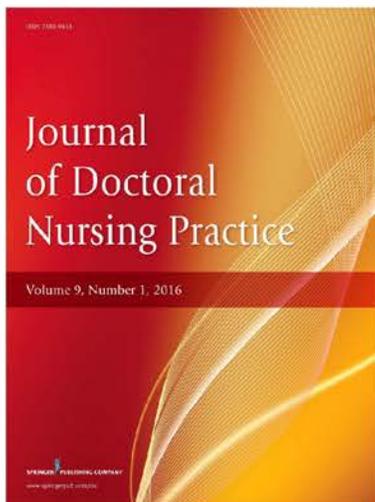
The Doctors of Nursing Practice organization could not exist without the contributions and efforts of volunteers and interested groups to help advance the caliber and quality of the DNP prepared professional. There are numerous organizations throughout the country that strive to accomplish the same goals as others regionally and nationally. We at DNP Inc. are proud to be a part of the processes that support and enhance the professionalism of all involved.

The mission of DNP Inc. is to improve health care outcomes by promoting and enhancing the doctorally prepared nursing professional. This is accomplished through multiple channels and opportunities including: Annual Conferences, Continuing Education, Scholarly Practice Project Repository, Listing of DNP Programs, DNP Foundation, and the DNP Online Community. All are welcomed to participate in any and all of these services to assure the on-going growth and development of the discipline and improved outcomes resulting from the skills and talents of doctorally prepared nursing professionals.

The repository of scholarly practice projects continues to grow while we are in the process of inviting speakers to this year's National DNP conference. Join in and see which service is best to support your efforts.

Useful Links

[DNP PROGRAM LIST](#)[FACULTY RESOURCES](#)[INDIVIDUAL BLOGS](#)[VALUABLE LINKS](#)[CAREER LISTINGS](#)[GROUP PAGES](#)[DNP PROJECT REPOSITORY](#)[MULTIPLE FORUM TOPICS](#)[GRANTS AND SCHOLARSHIPS](#)[ADVERTISING OPTIONS](#)



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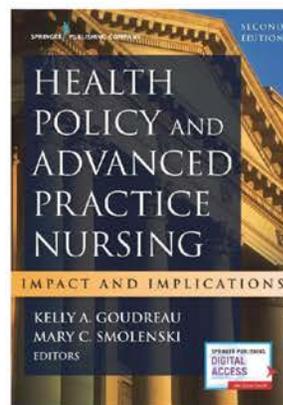
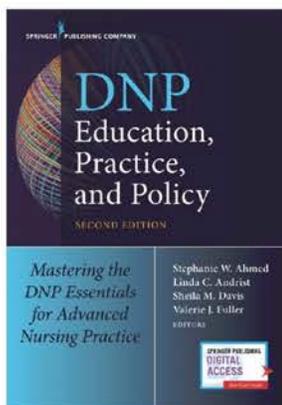
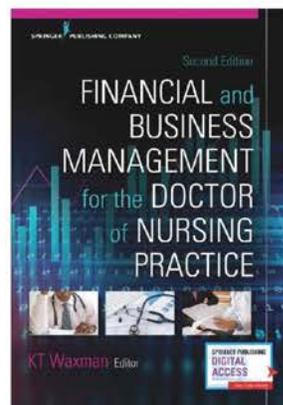
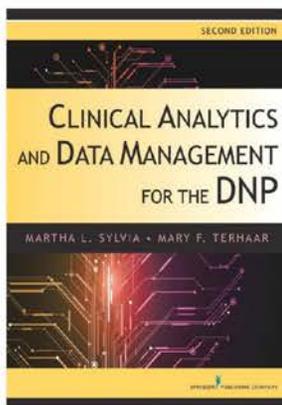
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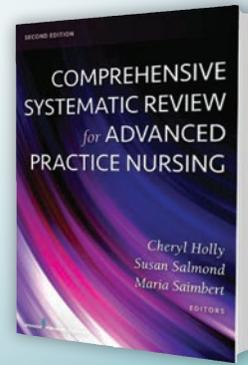
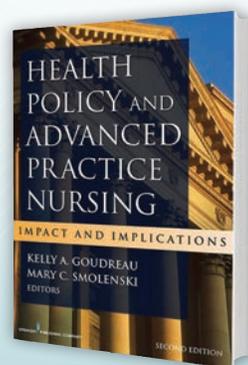
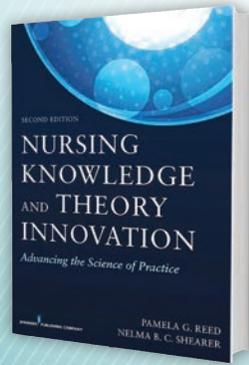
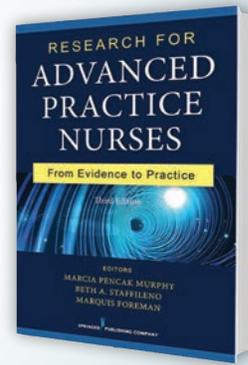
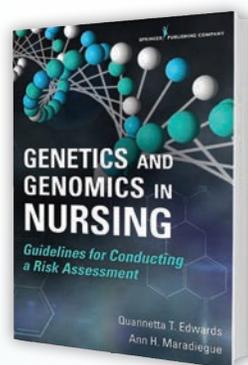
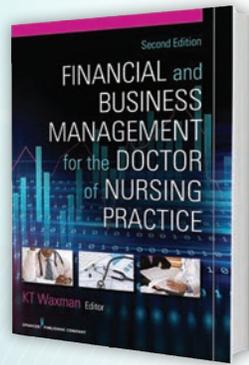
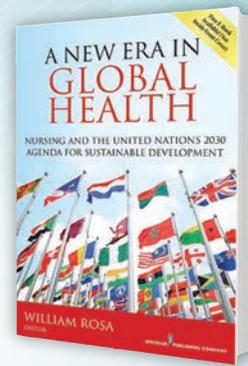
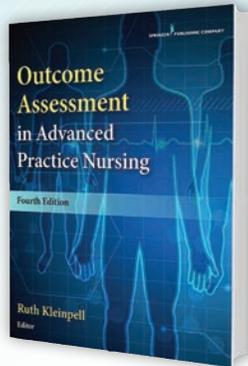
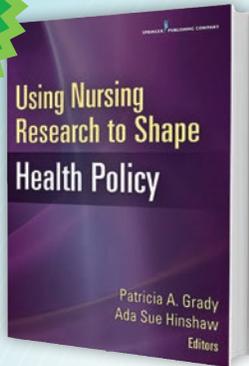
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for more information



2018 Conference Objectives

1. Identify at least one potential change in practice,
2. Explore strategies to sustain projects beyond implementation,
3. Examine opportunities to collaborate across disciplines to improve health care outcomes, and
4. Recommend strategies to apply evidence to practice

CONFERENCE HOMEPAGE

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DNP, INC. REPOSITORY FEATURED PROJECTS

DOCTORAL PROJECT REPOSITORY

Project Submission



Project Repository



Have you see the talent and contributions of DNP prepared colleagues? Here's a sample of what can be found in the [DNP Doctoral Project Repository](#):

[Smoking Cessation before Surgery and Effective Airway Management: Patient Education and Empowerment](#), by Dr. Esther O. Akindayomi from [Touro University](#).

[Using Social Media to Improve Compassion Satisfaction in Nursing](#), by Dr. Cynthia Lawhorn from [California Baptist University](#).

[Spina Bifida Association NEO Educational Summit: Building Collaborative Ties to Create Seamless Access from Pediatric to Adult Services](#), by Dr. Suzanne Marie Fortuna, from [Ursuline College](#).

Is your doctoral project in the repository? Are your colleagues and graduates of your university listed? [Click here](#) to learn more and to upload your project.