

# The Doctor of Nursing Practice: Integrating DNP Practice into an Academic Medical Center



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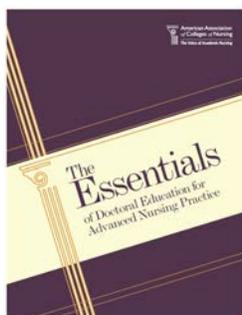
## Background

- The Doctorate of Nursing Practice (DNP) is now into its' first decade.
- The majority of DNP graduates are in positions in the acute care hospital environment, filling roles as administrators, nurse educators and advanced practice nurses <sup>1</sup>
- The impact of the DNP in the healthcare system has not been well reported.
- An OSU DNP workgroup was formed to examine current practices and roles in our healthcare system.

## DNP Workgroup Goals

To complete a gap analysis and make recommendations to nursing leadership to enhance roles and practices of DNP prepared staff.

- Examine the American College of Nursing DNP competencies in relationship to our job descriptions/roles and to our working environment.
- Examine the impact of doctorally prepared nurses in rapid translation of research findings and the implementation of evidence.
- Examine how our organization can increase nursing scholarly output and maximize nursing's' contribution to our academic medical center and the nursing community at large.
- Increase our collaborative efforts in evidence-based practice and research with the College of Nursing.
- Increase job satisfaction among doctorally prepared staff.



## Process

- Cross walk of American Colleges of Nursing *Essentials of Doctoral Education for Advanced Practice*<sup>2</sup> to compare current practices/accomplishments of DNP staff with 8 DNP Essentials.
- Examined the following for each DNP essential:
  - What are you currently contributing?
  - What could you be contributing?
  - What strategies are needed to move from current to potential accomplishments?

Essential 1: Recognize the philosophical and scientific underpinnings for the complexity of nursing practice at the doctoral level	
Current Accomplishments-What are we contributing? Provide exemplars	
Potential Contributions-What could we contribute? Provide exemplars	
Strategies to move from current to potential accomplishments	

## Results of Crosswalk

### Essential 1: Scientific Underpinnings for Practice

- Additional theoretical knowledge has enhanced practice.
- Have taken on many new leadership initiatives

### Essential 2: Organizational and System Leadership for Quality Improvement and Systems Thinking

- Desire earlier involvement in QI/process issues
- Desire involvement in QI at the highest level of organization
- Desire easier access to the data necessary to make assessments for practice changes

### Essential 3: Clinical Scholarship and Analytical Methods of EBP

- Felt they are leading EBP in the organization by "doing".
- "Protected time" for scholarly activities in the work week is needed
- Need to increase scholarly output/dissemination through publications and presentations
- Desire participation as members and Co-I on DNP/PhD research teams

## Results of Crosswalk

### Essential 4: Information Systems/Technology/Patient Care Technology and Transformations of Health Care

- Desire to be involved as frontline team members in EMR optimization
- Need to support the links between the EMR and EBP
- Enhancements for extract data from the EMR to facilitate practice changes are needed

### Essential 5: Healthcare Policy for Advocacy in Health Care

- Desire increased visibility and responsibilities on health system committees involved in local policy efforts
- Recognize the need to be involved and importance of professional contributions at the national level

### Essential 6: Interprofessional Collaboration for Improving Patient/Population Health Outcomes

- Desire for increased number of DNP appointments to major interdisciplinary health system committees
- Support opportunities for participation on national committees through release time and financial support
- Interdisciplinary scholarship/excellence days for showcasing exemplars

### Essential 7: Clinical Prevention and Population Health for Improving Nation's Health

- Desire to test new models of care delivery to decrease improve discharge processes, decreasing hospital readmissions, improving patient satisfaction
- Assume leadership roles on interdisciplinary teams involved in developing and writing clinical guidelines

### Essential 8: Advanced Nursing Practice

- Reinforce that all DNPs are considered leaders in advancing practice within their "local" setting
- Empower DNPs to identify gaps in practice and make the appropriate changes
- Eliminate organizational barriers and hierarchical decision making
- Increase focus on wellness/prevention for patients and staff

## References

- Grey M. The doctor of nursing practice: Defining the next steps. *Journal of Nursing Education*. 2013;52(8):462-465.
- American Association of Colleges of Nursing. American Colleges of Nursing position statement on the practice doctorate. 2006. Retrieved from <http://www.aacnursing.org/Portals/42/Publications/DNPEssentials.pdf>