

MEDICAL UNIVERSITY OF SOUTH CAROLINA
COLLEGE OF NURSING

PROGRAM MODIFICATION

ADDITION OF AN EXECUTIVE LEADERSHIP & INNOVATIONS TRACK
TO THE DOCTORATE OF NURSING PRACTICE PROGRAM



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Board of Trustees Approved: December 12, 2014

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Name of Institution: Medical University of South Carolina

Name of Program: Executive Leadership and Innovations track, Doctorate of Nursing Practice

Program Designation: Doctoral Degree: Professional Practice

Does the program qualify for supplemental Palmetto Fellows and LIFE Scholarship awards?

No

Proposed date of implementation: August 2015

CIP Code: 51.3801

Delivery Mode: Distance education: 100% online, asynchronous

Institutional Approvals and Dates of Approval:

1. College of Nursing Faculty Assembly: September 15, 2014
2. Deans Council: October 20, 2014
3. Senior Leadership Council: November 18, 2014
4. Board of Trustees: December 12, 2014

Background Information

Provide a detailed description of the proposed modification, including its nature and purpose and centrality to institutional mission (1500 characters).

MUSC College of Nursing's (CON) Doctorate of Nursing Practice (DNP) program was originally approved by the CHE on October 6, 2008. Research and health care reform recommendations recognize the expansion of nursing roles and responsibilities (IOM, 2011). The proposed Nurse Executive Leadership and Innovations program meets the current recommendations of the American Organization of Nurse Executives (AONE), American Association of Colleges of Nursing (AACN), and the Institute of Medicine's (IOM) for preparing executive nurse leaders to transform health care (AONE, 2011; IOM, 2011). The program will focus on providing nurses the knowledge and skills to be executive leaders who are competent, entrepreneurial and can transform health care and outcomes in an ever-changing healthcare system. The core competencies for the nurse executive have been threaded throughout the proposed curriculum and include: knowledge of the health care delivery system and organizational environment: health care finance, policy, and management; communication and relationship management; and diversity and professionalism (AONE, 2011). The didactic portion of the coursework will provide the knowledge and skills nurse executives require to be successful. The executive clinical experiences will allow the nurse to refine the specialized skills, behaviors and attitudes in preparation for the advanced nurse executive role. Currently, nurses are admitted to the DNP program at two entry points, post-BSN or post-MSN. The BSN will be required for the current track, but the masters degree may be an MSN, MHA, or MBA, as these degrees address the administrative role graduates of the program will be prepared to assume.

List the objectives of the modified program (1500 characters).

1. Demonstrate expertise in advanced executive nursing practice role based on mastery of a specialized area of knowledge derived from a strong scientific foundation.
2. Use clinical scholarship and analytical methods to improve quality and safety in health care systems through organizational leadership, systems thinking, and practice management acumen.
3. Implement continuous quality improvement in patient care and provide leadership in practice and clinical decision-making through use of information systems and technology resources.
4. Foster interprofessional collaboration and teamwork in the improvement of population health outcomes.
5. Influence health care policy that determines the financing, regulation, access, and delivery of care.
6. Promote health equity in the provision of care to eliminate health disparities.

Assessment of need

Provide an assessment of the need of the program modification for the institution, the state, the region, and beyond, if applicable (1500 characters).

The MUSC CON continues to provide and refine programs of nursing education that support the University Mission to “preserve and optimize human life in South Carolina and beyond” through an “interprofessional environment” (MUSC, 2014). The US Nursing Workforce report identified only 0.4% of all nurses are doctorally prepared and the estimated growth for executive nurses was 85.9% from 2000 through 2010 (2013). Historically nurses specialized in the practice of administration but it is recognized nurses must be prepared as advanced executives with the terminal DNP degree (Swanson & Stanton, 2013; AONE, 2011) to transform health care to achieve safe, high quality care that is equitable and patient centered (AONE, 2012; IOM, 2011). In the US there are over 5000 nurses in executive positions with the responsibility to obtain best health care outcomes and innovations in care delivery (Frederickson & Nickitas, 2011). The AONE recognized DNP nurse executives must have core competencies identified above (AONE, 2011). Various organizations have identified nurse executives as increasing quality, efficiency and transparency using collaboration, informatics, quality improvement, and evidence based practices (ACHE, 2014; AONE, 2010; 2012; IOM, 2011). The DNP nurse executive is the bridge between the patient/family, community, interdisciplinary team, and administration. As RNs obtaining advanced education based on core competencies, the nurse executive will be visionary and innovative. The proposed asynchronous online program will be completed in 2 years (7 semesters) and is the only one available in South Carolina. The flexibility of online education allows students to continue working while obtaining graduate education.

Will the proposed modification impact any existing programs and services at the institution?

Yes.

If yes, explain (1000 characters).

Currently, nurses seeking a doctoral degree in health administration and leadership at MUSC may enroll in MUSC's Doctorate of Health Administration (DHA) program. This program is a generalist leadership program in health administration; it is not tailored to nurses. The addition of the Nurse Executive in Leadership and Innovations track of the DNP allows licensed nurses to be educated specifically as nurse executives. It is anticipated that initially, the introduction of this track to the DNP program may reduce the number of nurses who apply to the DHA program, but because of the large non-nursing applicant pool to the DHA program, we expect the DHA program will fill those slots with well-qualified non-nurse candidates who are interested in health administration. In addition, some licensed nurses may still elect to pursue the DHA. The addition of the DNP Leadership and Innovations track provides licensed nurses the ability to tailor their education to their career aspirations.

List of Similar Programs in South Carolina

Program Name	Institution	Similarities	Differences
Nurse Administration	Clemson University	Administrative focus	MSN degree; Traditional Program (not online)
Nurse Executive	USC – Columbia	DNP Nurse Executive, Proposed opening 2015 per newsletter	Traditional Program (not online)

Description of the Program

Projected Enrollment

Year	Fall		Spring		Summer	
	Headcount	Credit Hrs	Headcount	Credit Hrs	Headcount	Credit Hrs
2015	10	10	10	12	10	6
2016	15	10	15	12	15	6
2017	20	10	10	12	10	6
2018	15	10	10	12	10	6
2019	15	10	10	12	10	6

Curriculum

***Executive Leadership and Innovations DNP
Post-BSN Full Time Plan of Study***

Year 1, Fall Semester				
NRDNP	854	Scientific Underpinning for Practice	3 sh	(3,0,0)
NRDNP	858	Evidence-Based Practice, Quality and Safety	3 sh	(3,0,0)
NRDNP	860	Applied Epidemiology and Biostatistics in Health Care	4 sh	(4,0,0)
Year 1, Spring Semester				
NRDNP	846	Frameworks for Leadership & Interprofessional Collaboration	3 sh	(3,0,0)
NRDNP	EL5	Executive Role Practicum (135 hours – approx. 9 hrs/wk)	3 sh	(0,0,3)
NRDNP	830	Applied Health Care Economics and Finance	3 sh	(3,0,0)

NRDNP	708	Advanced Health Policy and Advocacy	3 sh	(3,0,0)
Year 1, Summer Semester				
NRDNP	836	Informatics in Health Care Delivery	3 sh	(3,0,0)
NRDNP	EL1	Delivery Systems Supporting Health Improvement Strategies	2 sh	(2,0,0)
NRDNP	890	Residency (45 clinical hours- approx. 3 hrs/wk)	1 sh	(0,0,2)
Year 2, Fall Semester				
NRDNP	EL2	Advanced Financial Management	3 sh	(3,0,0)
NRDNP	850	Organizational Theory and Health Care Systems	3 sh	(3,0,0)
NRDNP	862	Practice Inquiry and IRB	3 sh	(3,0,0)
NRDNP	890	Residency (90 clinical hours- approx. 6 hrs/wk)	2 sh	(0,0,2)
Year 2, Spring Semester				
NRDNP	EL3	Legal/Risk Management, Negotiation and Mediation	3 sh	(3,0,0)
NRDNP	EL4	Strategic Leadership, Innovations and Entrepreneurship	3 sh	(3,0,0)
NRDNP	890	Residency (135 clinical hours- approx. 9 hrs/wk)	3 sh	(0,0,3)
Year 2, Summer Semester				
NRDNP	890	Residency (270 clinical hours- approx. 18 hrs/wk)	6 sh	(0,0,7)
Year 3, Fall Semester				
NRDNP	890	Residency (225 clinical hours- approx. 16 hrs/wk)	5 sh	(0,0,3)
Minimum DNP course work			59 sh	(39,0,20)

Curriculum Changes

Note: Complete this table only if there are changes to the curriculum

Courses Eliminated from the Program	Courses Added to the Program
The courses below are eliminated from this track's requirement, not from the program	NRDNP EL1 Delivery Systems Supporting Health Improvement Strategies
NRDNP 838 Advanced Pathophysiology	NRDNP EL2 Advanced Financial Management
NRDNP 856 Advanced Clinical Assessment and Reasoning	NRDNP EL3 Legal/Risk Management, Negotiation and Mediation
NRDNP 842 Advanced Pharmacotherapeutics	NRDNP EL4 Strategic Leadership, Innovations and Entrepreneurship
NRDNP 864/865/866 Advanced Care Management I/II/III	NRDNP EL5 Executive Role Practicum
NRDNP 848B Role Practicum	

Faculty

Provide a brief explanation of any additional institutional changes in faculty and/or administrative assignment that may result from implementing the proposed program modification (1000 characters).

To meet the demands of this modified program the CON will need 1 new FTE to begin the program in and workload will be monitored to determine if additional effort is needed as the program grows. In addition, the Director of the DNP program will need .05 FTE increase to oversee this program. The current number of faculty and current FTE devoted to the DNP program are shown below. The faculty members to be hired will have experience in the RN role, administrative role and be masters-prepared with a doctorate preferred. Experience in teaching will be critical.

Faculty devoted to the DNP Degree Program
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	Full-Time	Part-Time	Total
N faculty	19	6	25
FTE	10.05	2.2	12.25

Almost all regular, tenure track faculty members (87%) are either doctorally prepared (PhD, ScD, DrPH, DNP) or currently enrolled (9%) in a doctoral program (PhD, EdD or DNP). No faculty member holds less than a master's degree, and 65% are nationally certified, including 100% of Nurse Practitioner faculty. The number of educator-researchers (21) is sufficient to further the research mission of the College, and the number of doctorally prepared faculty (41) is adequate to support doctoral programs within the College.

Resources

Identify any new library/learning resources, new instructional equipment, and new facilities or modifications to existing facilities to existing facilities needed to support the modified program (2000 characters).

The proposed program modification will not affect the physical plant's ability to support this modification in the program. The new physical plant was designed and built with the goal of increasing enrollment and adding programs over time. The Nursing Technology Center (NTC) continues to provide optimal information technology equipment and resources to support the College's faculty, staff and students. The College of Nursing web page is viewed as the portal for students and potential faculty. It is reviewed and updated on an ongoing basis. The NTC also began developing videos to assist with ongoing College of Nursing training needs.

All didactic courses will be conducted online using a learning management system (Moodle). Other online resources such as videoconferencing, Skype, Fuze, Wikis, Tegrity (course content capture system), podcast, and vodcast (video on demand clips) will be used in many of the courses. These resources facilitate and assist students in an asynchronous learning environment to gain the necessary knowledge and skills required for the DNP degree. The CON currently utilizes all these programs so no new programs or software will be needed. The library resources remain unchanged and this modification will not affect the library's ability to support the program. The library continues to serve as a major health science library for MUSC, the state of South Carolina, and the Southeast, and no new acquisitions will be needed to accommodate the additional students for the PhD degree due to this modification. Students and faculty have access to a vast amount of resources online, and preceptors are also granted access upon request. This supports online education as well as those who live locally. Net IDs and passwords are utilized so that library resources can be accessed from anywhere in the world. Alumni of the program can continue to have access if they visit the library.

Financial Support

ESTIMATED NEW

CATEGORY	1st Yr	2nd Yr	3rd Yr	4th Yr	5th Yr	TOTALS
Program Administration	\$6,370	\$6,497	\$6,627	\$6,760	\$6,895	\$33,149
Faculty and Staff Salaries	\$124,165	\$136,849	\$139,585	\$142,377	\$145,224	\$688,200
Graduate Assistants						
Equipment						
Facilities	\$6,240	\$6,365	\$6,492	\$6,622	\$6,754	\$32,473
Supplies and Materials	\$10,000					\$10,000
Library Resources						
Other:						
TOTALS	\$146,775	\$149,711	\$152,705	\$155,759	158,873	\$763,823
SOURCES OF FINANCING BY YEAR						
Tuition Funding	\$128,925	\$131,504	\$134,134	\$136,816	\$139,553	\$670,931
Program-Specific Fees	\$ 17,850	\$18,207	\$18,571	\$18,943	\$19,321	\$92,892
State Funding*						
Reallocation of Existing Funds**						
Federal Funding						
Other Funding (Specify)						
TOTALS	\$146,775	\$149,711	\$152,705	\$155,759	\$158,874	\$763,823

Budget Justification

Provide a brief explanation for the other new costs and any special sources of financing (state funding, reallocation of existing funds, federal funding, or other funding) identified in the Financial Support table (1000 characters).

Note: Only provide this budget justification if any other new costs, state funding, reallocation of existing funds, federal funding, or other funding are included in the Financial Support Table.

Costs are 100% funded through the CON. Tuition listed above assumes the following: Annual enrollment of 15 students, 70% in-state and 30% out of state. Tuition totals are based on the

FY15 MUSC tuition for full time enrollment including fees. Tuition increases of 2% per year were estimated.

Program Administration:

.05 FTE of the Director of the DNP program. Effort includes program oversight, review of program faculty, program outcomes, and program matriculation.

Faculty and Staff Salaries:

Faculty members will be hired on a part time basis to complement expertise already available in the current CON faculty. This effort, including fringe benefits, totals approximately 1 FTE and .05 FTE of an existing staff member is included. Effort will include review of applications, administration of grades, surveys, and course evaluation.

Supplies and Materials:

Two computers will be purchased to support faculty and staff assigned to the program.

Facilities:

The College is assessed \$26/square foot for space maintenance by the University. This line item will cover the three faculty/staff assigned to the program.

Evaluation and Assessment

Will the proposed modification impact the way the program is evaluated and assessed?

No.

If yes, explain (1000 characters).

Will the proposed modification affect or result in program-specific accreditation?

Yes.

If yes, explain if the modification will result in the program seeking program-specific accreditation, provide the institution's plans to seek accreditation, including the expected timeline for accreditation (500 characters).

The Commission on Collegiate Nursing Education (CCNE) accredited the current DNP program on 10/18/10. CCNE accredits at the degree level. The CON has incorporated the 2006 *DNP Essentials* into the Nurse Executive in Innovations and Leadership DNP, and will submit a CCNE substantive change once approval is received from SC CHE. The CON is preparing for a CCNE accreditation visit on 09/28-30/15. Since this is an additional DNP track there is no approval required from SACSCOC. The state board of nursing does not require notification since they only regulate pre-licensure programs.

Will the proposed modification affect or lead to licensure or certification?

Yes.

If yes, explain how the program will prepare students for licensure or certification (500 characters).

Students enrolled in the DNP in Nurse Executive in Leadership and Innovations will already be licensed registered nurses. The plan of study will prepare students as nurse executives eligible to obtain certification in Executive Nursing Practice through the American Organization of Nurse Executives (AONE). The program is based on the AONE Competencies (AONE, 2011; 2014) and the American Colleges of Health Care Executives Competencies (ACHE, 2014).

References

ACHE. (2014). *American Colleges of Health Care Executives competencies assessment tool*. Available at: https://www.ache.org/pdf/nonsecure/careers/competencies_booklet.pdf

AONE. (2011). The AONE nurse executive competencies. *Nurse Leader*, February, 1-11.

American Organization of Nurse Executives and American Association of Colleges of Nursing. (2010). *AONE Guiding Principles: For Future Patient Care Delivery*. AONE: Washington DC.

American Organization of Nurse Executives and American Association of Colleges of Nursing. (2012). *AONE Guiding Principles: For the Role of the Nurse Executive in Patient Safety*. AONE: Washington DC.

AONE. (2014). *AONE position statement on the educational preparation of nurse leaders*. Available at: <http://www.aone.org/resources/leadership%20tools/policystmnts.shtml>

Frederickson, K. & Nickitas, D. (2011). Chief nursing officer executive development: A crisis or a challenge. *Nursing Administration Quarterly*, 35(4), 344-353.

HRSA. (2013). *The US Nursing Workforce: Trends in Supply and Education*. National Center for Health Workforce Analysis. Rockville, MD: Human Resources and Services Administration.

IOM (Institute of Medicine). (2011). *The Future of Nursing: Leading Change, Advancing Health*. Washington, DC: The National Academies Press.

Medical University of South Carolina. (2014). *Mission Statement*. Available at: <http://academicdepartments.musc.edu/president/mission.html>