

CLEMSON UNIVERSITY
COLLEGE OF HEALTH, EDUCATION AND HUMAN DEVELOPMENT
SCHOOL OF NURSING

PROGRAM PLANNING SUMMARY
TO THE SOUTH CAROLINA COMMISSION ON HIGHER EDUCATION
TO OFFER A NEW DEGREE
DOCTOR OF NURSING PRACTICE (DNP)

Date of Submission: February 15, 2014

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Classification: College of Health, Education and Human Development, School of Nursing

Name of Program: Doctor of Nursing Practice

Concentrations/Options/Tracks: Advanced Practice Nursing Focus, Leadership Focus

Designation, type, and level of degree: Doctor of Nursing Practice (DNP)

CIP Code: 51.3818

Implementation Date: January 2015

Number of Credit Hours: 36

Program Length (years): 3 semesters of full time study; six semesters of part-time study

Methodology (traditional, online, blended): Online courses, with one or two days for a immersion experience and the annual evidence-based practice symposium

Site of delivery: University Center of Greenville

Purpose

The purpose of the Doctor of Nursing Practice (DNP) program is to prepare graduates to assume leadership roles in nursing and health care both at the system and direct patient care levels, contribute to the development of the knowledge base relevant to nursing, translate research to advance the discipline of nursing, improve healthcare quality and safety, and collaborate in interdisciplinary research and practice. Prospective students who are advanced practice nurses (nurse practitioner and clinical nurse specialist), nurse educators and nurse executives with a master's degree in nursing will be eligible to enter the program and work toward the DNP.

Justification

Clemson University School of Nursing (SON) undertook the development of the DNP Program to provide nursing education at the highest level of scientific knowledge and practice expertise to address current and emerging healthcare needs and concerns about quality patient outcomes within complex healthcare environments (IOM, 1999, 2001, 2003 & 2010). Beginning in 1979, the movement toward the practice doctorate was designed to produce the most competent nursing clinicians possible to meet United States (U.S.) healthcare needs (AACN, 2004). According to the AACN and the IOM, enrolling more nurses into the doctoral nursing programs must be a priority because of the critical need for nurses to serve as primary care providers, faculty and leaders within the health care systems (AACN, 2011). In 2012, the U.S. Bureau of Labor Statistics (BLS) reported that job growth in the healthcare sector was outpacing the growth realized in 2011, accounting for one out of every 5 new jobs created this year. The report further projects the job growth for nurse practitioners (NPs) will increase by 57% by 2025. SC ranked second among states with the least overall health score improvement from 1990-2006 (United Health Foundation, 2007). According to United Health Foundation's *America's Health Ranking* (2012), South Carolina (S.C.) ranked 44th in overall health. This report and *Investing in America's Health* (RWJF, 2013) revealed S.C. had high rates of infant mortality, low birth weight infants, children living in poverty, and adults with obesity, diabetes, hypertension, high cholesterol, stroke, and smoking. The BLS notes that advanced practice nursing roles will be in high demand, particularly in medically underserved areas.

Professional credentialing standards are increasing to meet the demands of an increasing complex healthcare environment, and public expectations of quality and safety. Member schools affiliated with the American Association of Colleges of Nursing (AACN) endorsed the Position Statement on the Practice Doctorate in Nursing, stating "practice focused doctoral programs prepare graduates for the highest level of nursing practice beyond the initial preparation in the discipline" (2004, p. 8). Data from a *Special Survey on Vacant Faculty Positions* released by the AACN in October 2012 show a national faculty vacancy rate of 7.6% with most (88.3%) requiring or preferring a doctoral degree. According to the US General Accounting Office, the mean age of registered nurses is 47 years, while the mean age of nurse educators is 52 years. This report predicted that 75% of current nursing faculty would retire before 2020. Of the 0.5% of S.C. nurses that hold a doctoral degree, 83% are 50 or older. In 2010, AACN reaffirmed

the 2004 recommendation that specialty nursing practice transition to the doctoral level by 2015. According to the Office of Healthcare Workforce Research for Nursing, only 0.5% of all RNS in S.C. hold doctoral degrees (2010). *The Position Statement on the Preferred Vision of the Professoriate in Baccalaureate and Graduate Nursing programs* (AACN, 2008) stated "...faculty with primary responsibility for the oversight of courses in baccalaureate, master's and doctoral nursing programs will have doctoral education." The IOM and RWJF report, *The Future of Nursing: Leading Change, Advancing Health* (2010), called for the doubling of nurses with doctorates by 2020 to expand the numbers of nurse faculty and researchers, with attention to increasing diversity.

At the Doctoral Education Conference, Kirschling (2013) reported DNP programs increased from 26 in 2006 to 217 in 2012. To meet current and emerging healthcare needs as well as the call for doctorally prepared nurse faculty, enrollment in DNP programs grew from approximately 170 to 11,575 students during the same time period. By 2012, there were 1,858 DNP graduates. As of October, 2013, 100 DNP programs were in development. The Commission on Collegiate Nursing Education (CCNE) accreditation focuses on the quality of educational programs within institutions, including DNP programs. Clemson University baccalaureate and master's programs in nursing are accredited by CCNE through 2020. Currently, there are 210 CCNE accredited DNP programs (CCNE, 2014). The Doctor of Nursing Practice (DNP) will be the first practice doctorate offered by Clemson University. The University currently offers 42 Doctor of Philosophy (PhD) degrees and two Education Specialist degrees (EdS). The School of Nursing offers an interdisciplinary doctorate (iPhD) in Healthcare Genetics that prepares future leaders in the field of healthcare genetics focusing on practice and bench science, health policy and ethics. The DNP curriculum is focused on evidence-based practice, leadership, healthcare policy and advocacy, interprofessional collaboration and expert clinical, advanced nursing practice. (Chism, 2010).

USC (2013) offers post-BSN or post-MSN DNP program entry for clinical and leadership. It is five semesters (33 credits) and delivered online with visits to Columbia, S.C. MUSC (2013) offers post-BSN and post-MSN entry. It is four semesters (36 credits). Clemson University's DNP program will be post-masters, 36 credit hours, with an Advanced Practice Nurse (APN) Focus or Leadership Focus. Utilizing a variety of instructional approaches and technology, DNP students will engage with iPhD students in a genetics course and actively participate in a community of scholarly inquiry, including online delivery of coursework, campus immersion experiences, and clinical education in primary care practice sites, health care institutions and agencies, and educational institutions located near their place of residence.

Program Demand and Productivity

An online DNP interest survey was conducted in November, 2013 on the SON website. There were 63 respondents, all S.C. residents. Most were nurse practitioners (98%). 66% were interested in pursuing a DNP degree. Half were interested in starting a DNP program within 1-2 years and 72% within five years. Most respondents preferred part-time study (49%) to full-time study (23%). Hybrid course delivery was selected by 49% and online delivery by 37%. A post-master's DNP program with an APN Focus will optimally position Clemson University SON to transition current Master's Program APN specialty options to the DNP when the 2015 recommendation becomes a requirement. In addition to the APN Focus, offering a Leadership Focus for nurse educator and nurse executive students will maintain the current enrollment of 100 graduate students. The DNP program will admit 25 students the first two years. Enrollment projections are: 90% APN Focus; 30% full-time & 70 % part-time; attrition 10% or less. Thereafter, the number of students admitted will be based on a target enrollment of 50 students in the program (2015-2019) with 33 graduates annually in 2019 and beyond.

Employment Opportunities for Graduates

According to the AACN and the IOM, enrolling more nurses into the doctoral nursing programs must be a priority because of the critical need for nurses to serve as primary care providers, faculty and leaders

within the health care systems (AACN, 2011). In 2012, the U.S. Bureau of Labor Statistics (BLS) reported that job growth in the healthcare sector was outpacing the growth realized in 2011, accounting for one out of every 5 new jobs created this year. The report further projects the job growth for nurse practitioners (NPs) will increase by 57% by 2025. DNP-prepared nurses can positively impact the nurse faculty shortage and provide areas of expertise that are not currently addressed. South Carolina ranks as one of the unhealthiest states in the nation on many health indicators, including diabetes, obesity, hypertension, and infant mortality. Additionally, SC ranked second among states with the least overall health score improvement from 1990-2006 (United Health Foundation, 2007). The BLS notes that advanced practice nursing roles will be in high demand, particularly in medically underserved areas.

At a time when the nation needs the number of nurses to grow, faculty shortages at nursing school programs across the country are of critical concern. Data from a *Special Survey on Vacant Faculty Positions* released by the AACN in October 2012 show a national faculty vacancy rate of 7.6% with most (88.3%) requiring or preferring a doctoral degree. According to the US General Accounting Office, the mean age of registered nurses is 47 years, while the mean age of nurse educators is 52 years. This report predicted that 75% of current nursing faculty would retire before 2020. Of the 0.5% of S.C. nurses that hold a doctoral degree, 83% are 50 or older. Nurse faculty shortages are likely to continue and that employment opportunities for doctoral-prepared APN and nurse educator faculty will remain strong. DNP prepared nurses play an important role in alleviating S.C. workforce needs by filling APN positions focused on the task of addressing the state's overwhelming healthcare needs, assuming leadership roles in healthcare facilities and serving as nurse educators.

Curriculum

The DNP program will be a terminal practice degree in Nursing with two foci, **Advanced Practice Nurse (APN) Focus** (NP & CNS) and **Leadership Focus** (nurse educator & nurse executive). Guided by the AACN DNP Essentials (2006), the DNP program will prepare students to analyze systems of care and provide leadership in dynamic healthcare systems to improve patient safety and quality of care. In addition, APN students will be prepared to practice at the highest clinical level and implement evidence based culturally competent care. The DNP program requires 36 graduate semester hours and completion of 1000 clinical practice hours and may be completed in 3 semesters of full-time or 6 semesters of part-time study. Students will attend an immersion experience at the beginning of the program and an annual evidence-based practice symposium. All students will complete theoretical and methodological coursework with 8 semester hours of capstone & residency.

At the conclusion of the DNP Program, graduates will be able to:

- 1) Demonstrate relationship centered nursing leadership to improve the health care, health status, and health outcomes of individuals, families, communities and populations while addressing health disparities;
- 2) Integrate biopsychosocial, cultural, organizational/systems, informatics, ethical and legal knowledge with nursing science as a foundation for expert clinical nursing practice;
- 3) Engage in collaborative partnerships/collaborative inquiry/interdisciplinary collaboration to frame problems, design and implement evidence-based interventions, and evaluate outcomes;
- 4) Formulate health promotion, disease prevention and treatment strategies that translate and integrate genetics, individual behaviors and lifestyle factors, family, community and culture, social and economic forces, and public and person health systems addressing access, quality and safety;
- 5) Transform practice through knowledge reflection, knowledge-based resources, information technology/informatics, strategic resource management and evidence based practice research;
- 6) Translate knowledge for application in the delivery of advanced nursing practice; nursing education and healthcare systems leadership;
- 7) Implement changes based on evaluation of health systems, health policy, and nursing science in response to social, political, economic and ethical issues;
- 8) Evaluate the impact of change on complex health or education systems including individuals and populations.

Articulation and Inter-institutional Cooperation

Clemson University School of Nursing is interested in working collaboratively with the University of South Carolina and the Medical University of South Carolina on resource sharing and supporting DNP students in exploring PhD options at these institutions.

Estimate of Costs

The DNP Program is designed to be self-sustaining based on revenue generated from tuition and fees. In addition to instruction, initial costs will include non-recurring expenses of a qualified, out-of-state consultant to review the program; program marketing to inform Master's prepared nurses in SC and nationally about the program; and fees related to a new program application to the Collegiate Commission on Nursing Education (CCNE). The non-recurring costs will total \$15,250 in 2015-2016.