BOARD OF HIGHER EDUCATION

REQUEST FOR COMMITTEE AND BOARD ACTION

COMMITTEE: Academic Affairs NO.: AAC 11-37

COMMITTEE DATE: May 31, 2011

BOARD DATE: June 7, 2011

APPLICATION OF UNIVERSITY OF MASSACHUSETTS DARTMOUTH TO AWARD THE DOCTOR OF NURSING PRACTICE

MOVED: The Board of Higher Education hereby approves the application of

University of Massachusetts Dartmouth to award the Doctor of

Nursing Practice.

Upon graduating the first class for this program, the University shall submit to the Board a status report addressing its success in reaching

program goals as stated in the application and in the areas of

enrollment, curriculum, faculty resources, and program effectiveness.

Authority: Massachusetts General Laws Chapter 15A, Section 9(b)

Contact: Dr. Francesca Purcell, Associate Commissioner for Academic and P-

16 Policy

BOARD OF HIGHER EDUCATION

University of Massachusetts Dartmouth

Doctor of Nursing Practice

INTENT AND MISSION

The University of Massachusetts Dartmouth (UMD) filed an expedited application to offer the Doctor of Nursing Practice (DNP). The purpose and goals of the proposed program are to prepare DNP graduates for careers as adult primary care nurse practitioners or adult health or community health clinical nurse specialists with the skills to lead interdisciplinary teams and implement population-focused and evidenced-based health interventions. In addition, DNP graduates will be prepared to improve and transform health care through systems leadership, research translation, advanced clinical knowledge, and preparation as nurse educators. The DNP course work includes translation research methods, theory, health policy, population health, informatics, systems leadership, leadership residencies, and capstone projects to achieve the goals for the DNP and to meet national accreditation and certification standards.

The proposed program has been approved by the University's internal governance procedures and was approved by the University of Massachusetts Board of Trustees on February 23, 2011. The letter of intent was circulated on March 1, 2011. No responses were received.

The Doctor of Nursing Practice (DNP) degree program proposal is consistent with the University of Massachusetts Dartmouth (UMD) and College of Nursing (CON) mission and strategic plan. UMD is seeking to expand graduate programs to fulfill its mission as a vibrant public university acting as an intellectual catalyst for regional economic, social, and cultural development. The CON seeks to provide vision and leadership that advances the practice of nursing in a dynamic healthcare environment and to advance the health of individuals, families and communities, and addresses the demand for nurse leaders in Southeastern Massachusetts.

NEED AND DEMAND

The proposed DNP program was developed in response to the American Association of Colleges of Nursing (AACN) initiative that the DNP replace the Master of Science in Nursing (MSN) as the entry level for nurse practitioner practice by 2015. In 2015 any nurse must hold a Doctor of Nursing Practice to be eligible to take the certification examination which is the precursor to being licensed as an advanced practice nurse. All nursing schools that operate graduate programs are in the process of changing the MSN to the DNP because of national standards. The proposed DNP program will be built using the resources in the existing MS program. The MSN will continue to be offered at UMass Dartmouth; however, it can no longer be used for licensure as a nurse practitioner.

According to the America College of Physicians, due to a shortage of primary care providers and a lack of interest among MDs to enter into primary care practice, the number of nurse practitioners in the U.S. has increased steadily at a rate of more than 9% per year since 1995 and is expected to continue to grow as the U.S. population ages. In addition, health reform is predicted to increase the demand for primary health care. This creates further opportunities for nurse practitioners.

According to the U.S. Department of Health and Human Services, Massachusetts will have an estimated 25,382 unfilled nursing positions by 2020. According to Massachusetts Health and Human Services, nurse faculty vacancy rates averaged 6% (32 FTE) in 2005-2006 and 11% (58.5 FTE) in 2006-2007. The program will help grow the numbers of clinical faculty and will address the overall shortage of nurses in Massachusetts.

ACADEMIC AND RELATED MATTERS

Admission

The proposed DNP program will target both traditional and nontraditional enrollments by admitting students via three avenues: 1. the "direct path;" 2. the Graduate Admission Program (GAP); and 3. the Post-MS path. The direct path is for nurses with a bachelor's degree in nursing from an accredited program who seek a graduate degree in nursing. The GAP Program is for nurses who hold an associate's degree in nursing and a baccalaureate degree in another field. The Post-MS DNP path is for certified nurses who hold an MS or Post Master's Certificate in nursing from UMD or another accredited college of nursing.

In addition to UMD admission criteria, applicants to the proposed Doctor of Nursing Practice program will be required to meet the following criteria:

- Achieved a GPA of 3.0 in undergraduate study;
- Hold a Bachelor of Science degree in nursing from a program accredited by the NLNAC or CCNE. Registered Nurses with a bachelor's degree in a related field may seek admission through the GAP program;
- Hold a current license to practice professional nursing in MA or be eligible to obtain a license;
- Submit a professional writing sample;
- Submit three references that document competence and leadership in professional nursing practice.
- Have completed an approved basic statistics course that includes descriptive and inferential statistics.

Enrollment

	# of Students Year 1 2011-12	# of Students Year 2 2012-13	# of Students Year 3 2013-14	# of Students Year 4* 2014-15
New Full Time	1	1	1	1
Continuing Full Time	0	1	2	3
New Part Time	14	20	20	20
Continuing Part Time	0	14	34	58
Totals	15	36	57	82

Curriculum (Attachment A)

The proposed DNP curriculum builds on the MS curriculum and consists of a minimum of 63 credits, of which 27 are new DNP courses. The 27 credits of new course work will build on knowledge and competencies that students acquire during the beginning stages of the program. The new courses will address areas of didactic content that have been deemed essential for advanced practice nurses by the American Association of Colleges of Nursing (e.g., informatics, population health, health policy, system leadership, evidence-based practice).

DNP students will choose from one of three specialties. The adult nurse practitioner specialty will prepare advanced practice nurses who will function as an adult primary care nurse practitioner and manage primary and chronic health problems in adult populations. The community health clinical specialty will prepare community health clinical specialists working in diverse populations and complex healthcare system. And the adult health clinical specialty will prepare graduates to work in medical-surgical nursing and complex healthcare systems

Students will complete a professional portfolio documenting attainment of the DNP competencies; in addition to classroom and experiential learning in a specific clinical areas of practice, the student completes a DNP residency; a three-semester structured experiential learning component with health care systems leaders, informaticists, and quality improvement leaders; and a scholarly research project that is focused on improving the quality of care and patient outcomes.

Direct path and GAP students may elect to "time out" and receive a MS degree while retaining the option to resume study and complete the proposed DNP at a later date.

Clinical and Licensure Information

The first three clinical placements in the DNP program will remain consistent with the clinical rotations that are currently in place for the MS students. Additional placements will involve health systems level quality and safety management and implementing systematic change. The University plans to expand its affiliations with local health systems state and local health departments, long term care providers and home care and other community based service agencies for these placements.

Graduates of the DNP Program will be eligible to take American Nurses Credentialing Center certifying examinations for Advanced Practice in Adult Nurse Practitioner, Adult Health Clinical Specialist or Public Health Clinical Specialist. This certification is the basis for licensure as advanced practice registered nurses in most states. Other agencies have or are in the process of developing certification examinations. The program will be designed to meet these criteria as well.

Student Learning Outcomes

DNP graduates will be accountable for the following learning objectives:

MS/DNP	Outcomes
Essentials	
VIII Clinical prevention & population health	Model practice that demonstrates respect for human dignity, ethical responsibility, interpersonal connectedness, and equity to promote health and reduce risk.
VII Collaboration to improve pt and pop outcomes	Master communication, collaboration, and consultation strategies to address complex health issues in a variety of forums and formats.
Quality improvement and safety	Evaluate outcomes using accepted professional standards and evidence-based benchmarks to improve quality within and across systems.
	Create a culture of safety for consumers and staff and contribute to continuous quality improvement initiatives
IV Translating & integrating scholarship into practice	Translate evidence, clinical judgment, research findings, and theoretical perspectives to improve practice, care environments and maximize health outcomes.
I Scientific & humanistic background	Synthesize scientific knowledge and humanistic perspectives in a variety of roles and areas of practice.
VI Health policy and advocacy	Influence nursing practice and health policy to shape care delivery, addressing gaps resulting from growing healthcare needs, at the local, state, national, and international levels.

II	Use organizational and system leadership in collaboration with
Organizational	interdisciplinary team members and community partners to
and System	promote health, guide clients through the illness experience, and
leadership	improve the health system.
V	Integrate effective use of informatics and technology to support
Informatics	quality improvement initiatives, clinical decision-making, and safe
and HC	care.
technologies	
IX	Assume a leadership role in advancing, fostering, and maintaining
Master's level	nursing values and standards in a variety of settings and roles for
nursing	individuals, populations, and systems.
practice	

In addition, the DNP graduates are accountable for the following learning outcomes:

- 1. Assume the advanced practice nurse role as adult primary care nurse practitioners or adult health or community health clinical nurse specialists;
- 2. Demonstrate expert knowledge of complex health problems
- 3. Demonstrate competency in working with diverse populations, complex healthcare systems and clinical nursing education;
- 4. Improve and transform client care by
 - a. Collaboration with members of interdisciplinary teams.
 - b. Implementation of population-focused and evidenced-based health interventions, and
 - c. Measurement of outcomes of interventions / strategies at both the individual and community aggregate levels.

RESOURCES AND BUDGET

Faculty and Administration

The DNP program will administered through existing structures at UMD. A DNP Program Committee composed of the DNP faculty and the graduate program director will oversee the major components of the program, including student admission and progression, curriculum development, program evaluation and quality control.

Two additional full-time, tenure-track, doctoral prepared adult nurse practitioners will be hired (in fall 2011 and fall 2012, respectively). Additionally, a half-time staff member will be hired to coordinate clinical placements.

Library, Information Technology, Facilities and Equipment

The DNP program will use resources from the current MS program and will not require any additional facilities, equipment, library resources or IT support. These resources will be augmented in future years as the program develops.

Fiscal (Appendix B)

The University outlined the budget for the program for the first four years of enrollment.

PROGRAM EFFECTIVENESS

The University submitted goals and objectives for the proposed program as demonstrated in the table below.

Goal	Measurable Objective	Strategy for Achievement	Timetable
Recruitment of Faculty	1 FT, Tenure track, doctoral prepared Adult Nurse Practitioner 1 FT, Tenure track, doctoral prepared Adult Nurse Practitioner 5 staff to coordinate clinical	Advertise locally, online & in <i>Higher Education</i> in March 2011 Advertise locally & online in Summer 2011	Hire for Fall 11 semester Hire for Fall 12 semester Hire for Spring
Recruitment of	placements 15 BS to DNP students (1st	Revise web site and	12 semester Fall 11
Students	cohort) 5 Post MS DNP students	handbooks Fall 2010 Design & print brochures December 2010	Spring 12
		Conduct monthly Information Sessions - ongoing	
Curriculum fully developed & implemented		DNP coordinator, Graduate Program Director, the DNP	To be offered the first time in:
·	NUR 508 Healthcare Economics Spring 11 review & approval	Subcommittee and the Graduate Program Committee will develop	Summer 12
	NUR 515 Fall 11 review & approval	and implement this schedule to assure the roll out of the DNP	Spring 13 Spring13
	NUR 772 Spring 12 review &	Program.	
	approval by		Spring 14
	NUR 773 Fall 12 review & approval		Summer 14 Summer 14
	NUR 770 Spring 13 review & approval by		Cummer 14

	NUR 771 Spring 13 review & approval by		
CCNE Accreditation	Develop systematic plan for evaluation Faculty conduct on-going end of course evaluations and prepare end of course summary reports	Evaluation Committee, Graduate Program Committee, Faculty organization	Spring 11 Ongoing, each semester
	Subcommittee of Graduate Program Committee summarizes reports and looks for trends or systematic problems		Ongoing, annually
	Graduate Program Committee reviews reports and takes action as needed.		Ongoing annually
Graduate First Cohort of Post- MS DNP Students	80% of first cohort (n=4) will complete part-time study in 5 semesters per program of study		May 2014 graduation
Graduate First Cohort of BS- DNP Students	80% of the first cohort (n=12) will complete part-time study in 5 years including 4 summer sessions per program of study		May 2015 graduation Successful completion of ANCC Certification Examinations

EXTERNAL REVIEW AND INSTITUITONAL RESPONSE

The proposed program was reviewed by Elizabeth R. Lenz, Ph.D., R.N., F.A.A.N. and Gail Melkus EdD, C-ANP, FAAN. Both reviewers expressed support for the program: the curriculum addresses program goals and the need for doctoral programs to prepare advanced nurses is clearly documented. Most of their recommendations involved the University needing to provide greater clarification of its plans; however, some suggestions were made for improvement, notably in the areas of faculty and staffing.

Dr. Lenz recommended the addition of either 1.5 or 2.0 FTE and the addition of a non-faculty part-time staff member to coordinate clinical placements. In response, the University has modified its plans to hire a second doctorally prepared faculty member and a part-time staff member, rather than a part-time lecturer, to coordinate clinical placements. This arrangement will help to distribute responsibility for the program across additional staff members and promote program quality.

STAFF ANALYSIS AND RECOMMENDATION

Department staff thoroughly reviewed all documentation submitted by UMD and external reviewers. Staff recommendation is for approval of the Doctor of Nursing Practice.

Upon graduating the first class for this program, the University shall submit to the Board a status report addressing its success in reaching program goals as stated in the application and in the areas of enrollment, curriculum, faculty resources and program effectiveness.

ATTACHMENT A: CURRICULUM OUTLINE

Course Number	Course Title		Credit Hours
NUR 500	Theoretical Foundations for Advanced	Nursing Practice	3
NUR 508	Healthcare Economics and Managing I Finances	Healthcare	3
NUR 511	Translating Research Evidence to Adv. Practice	ance Nursing	3
NUR 520	Healthcare System		3
NUR 547	Promoting the Health of Populations		3
NUR 550	Pathophysiological Bases for Advance	d Practice Nursing	3
NUR 552	Assessment for Advanced Practice Nu	rsing	3
NUR 553	Clinical Pharmacology		3
NUR 557	Introduction to Primary Care		2
NUR 558	Practicum I: Primary Care I		3 clinical
NUR 605	Statistical Analysis		3
NUR 656	Primary Care II		2
NUR 657	Practicum II: Primary Care II	3 clinical	
NUR 658	Advanced Nursing Management of Illno Phenomena	2	
NUR 659	Practicum III: Advanced Nursing Mana Related Phenomena	3 clinical	
NUR 770	Residency: Health Systems Change		9 clinical
NUR 771	Evidence Based Application: Scholarly	Project	4
NUR 772	Doctor of Nursing Practice Seminar I		4
NUR 773	Doctor of Nursing Practice Seminar I		4
	Sub Tota	l Required Credits	63
Elective Co	urses (Total # courses required = 0) (at		needed)
	Sub Tot	tal Elective Credits	0
	Curriculum Summary		
Total nu	umber of courses required for the degree	19	
	Total credit hours required for degree	63	
Prerequisite, Cor None	ncentration or Other Requirements:		

Required (Core) Courses in the DNP Community Health Clinical Nurse Specialist Program (Total # courses required = 19)				
Course Number	Course Title	Credit Hours		
NUR 500	Theoretical Foundations for Advanced Nursing Practice	3		
NUR 508	Healthcare Economics and Managing Healthcare Finances	3		
NUR 511	Translating Research Evidence to Advance Nursing Practice	3		
NUR 520	Healthcare System	3		
NUR 540 or	Epidemiology or	3		
NUR 585	Environmental Health			
NUR 547	Promoting the Health of Populations	3		
NUR 548	Advanced Community Health Nursing Practicum I: Promoting the Health of Populations	3 clinical		
NUR 550	Pathophysiological Bases for Advanced Practice Nursing	3		
NUR 552	Assessment for Advanced Practice Nursing	3		
NUR 553	Clinical Pharmacology	3		
NUR 681	Advanced Community Health Nursing II: Assessment and Planning for Population Health	2		
NUR 682	Practicum: Advanced Community Health Nursing II: Assessment and Planning for Population Health	3 clinical		
NUR 683	Advanced Community Health Nursing III: Program Implementation and Evaluation for Population Health	2		
NUR 684	Advanced Community Health Nursing III Practicum: Program Implementation and Evaluation for Population Health	3 clinical		
NUR 770	Residency: Health Systems Change	9 clinical		
NUR 771	Evidence Based Application: Scholarly Project	4		
NUR 772	Doctor of Nursing Practice Seminar I	4		
NUR 773	Doctor of Nursing Practice Seminar I	4		
	64			
	Curriculum Summary			
Total num	nber of courses required for the degree 19			
	Total credit hours required for degree 64			
Prerequisite, Concentration or Other Requirements: None				

Course Number	Course Title	Credit Hours
NUR 500	Theoretical Foundations for Advanced Nursing Practice	3
NUR 508	Healthcare Economics and Managing Healthcare Finances	3
NUR 511	Translating Research Evidence to Advance Nursing Practice	3
NUR 518	Scope and Outcomes of Advanced Practice Nursing	3
NUR 519	Adult Health Practicum I: Standards and Outcomes of Advanced Practice Nursing	3 clinical
NUR 520	Healthcare System	3
NUR 547	Promoting the Health of Populations	3
NUR 550	Pathophysiological Bases for Advanced Practice Nursing	3
NUR 552	Assessment for Advanced Practice Nursing	3
NUR 553	Clinical Pharmacology	3
NUR 605	Statistical Analysis	3
NUR 621	Perspectives on the Illness Experience	3
NUR 622	Adult Health Practicum II: Perspectives on the Illness Experience	3 clinical
NUR 623	Advanced Nursing Practice in Complex Health Systems	3
NUR 624	Adult Health Practicum III: Advanced Nursing Practice in Complex Health Systems	3 clinical
NUR 770	Residency: Health Systems Change	9 clinical
NUR 771	Evidence Based Application: Scholarly Project	4
NUR 772	Doctor of Nursing Practice Seminar I	4
NUR 773	Doctor of Nursing Practice Seminar I	4
	Sub Total Required Credits	66
	Curriculum Summary	
Total nu	imber of courses required for the degree 19	
	Total credit hours required for degree 66	
Prerequisite. Con	ncentration or Other Requirements: None	

ATTACHMENT B: BUDGET

One Time/ Start Up Costs		Annual Expenses			
<i>Op 000.0</i>	Cost Categories	Year 1	Year 2	Year 3	Year 4
	Full Time Faculty (Salary & Fringe) • 1 full time, tenure track, doctoral prepared, Adult Nurse Practitioner to assist in developing and implementing courses in Fall 2011 • 1 additionalfull time, tenure track, doctoral prepared, Adult Nurse Practitioner to assist in developing and implementing coursesin Fall 2011. Salary \$85,000 Fringe 32% = \$27200	\$112,20 0	\$224,40 0	\$224,40 0	\$224,400
	Staff (part-time) Clinical Placement Coordinator \$35,000 salary plus fringe	0	\$46,200	\$46,200	\$46,200
	General Administrative Costs • Credits will increase from 42 to 64; time in program from 3/4 to 5/6 years or part-time study • Office space, computer, equipment and supplies for 1.5 faculty	0	0	0	0
	Instructional Materials, Library Acquisitions • Material for 25 extra credits	0	0	0	0
	Facilities/Space/Equipment • No additional				
	Field & Clinical Resources				
\$1000 \$3000	Marketing • Brochures • Advertising	\$500	\$500	\$500	\$500

\$5000	Web page				
	Other (Specify)				
\$9,000	TOTALS	\$112,20	\$271,10	\$271,10	271,100
		0	0	0	

One Time/Start- Up Support		Annual Income			
	Revenue Sources	Year 1	Year 2	Year 3	Year 4
	Grants HRSA Advanced Nursing Education Grant	\$15,000	\$15,000	\$15,000	\$15,000
	Tuition • 15 admission to BS to DNP /year	\$12,432	\$24,864	\$37,296	\$49,728
	5 admissions to post MS DNP / yr All part-time (6 credits /semester) One in five are out of state 2009-10 tuition	\$6,169	\$12,338	\$18,507	\$24,676
	Fees • 15 admission to BS to DNP /year • 5 admissions to post MS DNP / yr All part-time (6 credits /semester) One in five are out of state 2009-10 Fees	\$74,634 \$24,878	\$149,26 8 \$49,756	\$223,90 2 74,634	\$298,536 \$99,512
	Departmental	0	0	0	0
	Reallocated Funds	0	0	0	0
	Other (specify)	0	0	0	0
	TOTALS	133, 113	351,208	369,236	487,452