Title:
Integrating the Doctor of Nursing Practice in Practice Settings: Implications for Clinical Outcomes and Scholarship

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Session Title:
The Doctor of Nursing Practice: Reflections on the Past and the Vision for the Future
Slot:
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11:05 AM

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Doctorate of Nursing Practice, Executive Nursing Leadership and Organizational Change

References:


Abstract Summary:
Our academic medical center has experienced a rapid increase in the number of DNP prepared staff. We examined the best practices and strategies to determine what outcomes were potentially impacted and what difference moving to a more doctorally prepared staff had on the practice environment.

Learning Activity:

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<th>LEARNING OBJECTIVES</th>
<th>EXPANDED CONTENT OUTLINE</th>
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<td>The learner will discuss strategies to support the Doctorate of Nursing Practice (DNP) prepared nurse in transitioning from an academic program into the practice setting.</td>
<td>1. A discussion of the current roles of the advanced practice nurse in our organization. 2. A discussion of the current structure of our organization with respect to advanced nursing practice.</td>
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The learner will examine organizational strategies to document and maximize the outcomes and contributions of the Doctorate of Nursing Practice (DNP) prepared nurse into an academic medical center. 1. A discussion of the process used to examine the strength and professional needs of our newly prepared DNP staff. 2. A overview of the conclusions and recommendations of our organizational DNP workgroup.

Abstract Text:

The Doctorate of Nursing Practice (DNP) has now moved into its’ first decade of existence. Early discussions among nursing thought leaders were focused on promoting the development, assessment and evaluation of DNP curriculums to meet the American Associations of the Colleges of Nursing (AACN) recommendations (Melnyk, 2013). As the profession of nursing has gained experience with the DNP graduates, we are entering the next phase of discussion; the integration and operationalization of the role within healthcare systems. Nurse leaders in academic and practice settings have the opportunity to collaborate on ways to identify and measure the impact of this new level of education on the outcomes that matter most in today’s health care delivery system. To date, there is still a gap in demonstrating the outcomes of the DNP in patient care and healthcare delivery system transformations.

As a result of our increased collaboration with our College of Nursing, our academic medical center has experienced a rapid increase in the number of DNP prepared staff. The DNP roles in our health care system have crossed all areas of nursing practice including senior and mid-level nurse leaders, advanced practice nurses, and nurse educators. To effectively measure the difference that the addition of DNP nurses made we examined the best practices and strategies to determine what outcomes were potentially impacted, and what difference moving to a more doctorally influenced nursing practice environment had on staff.

One best practice was the formulation of a DNP workgroup open to all DNP prepared nurses in our health system. The goal of this group was to complete a gap analyses and make recommendations to enhance roles and practice to the Chief Nurse Executive’s Council. The DNP workgroup aimed to: (1) examine the AACN DNP competencies in relation to our job descriptions/roles and to our working environment; (2) examine the impact of DNP prepared nurses in rapid translation of research findings and the implementation of evidence; (3) 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; (4) increase our collaborative efforts in evidence-based practice and research with the College of Nursing and; (5) increase job satisfaction among doctorally prepared staff. To achieve this, we did a crosswalk comparing the current job descriptions of our DNP prepared nurse leaders, nurse practitioners, clinical nurse specialists and nurse educators with the core competencies of The Essentials of Doctoral Education for Advanced Nursing Practice. Working in smaller subgroups by job title, the following questions were examined for each of the eight AACN DNP competencies: (1) What are we currently accomplishing within our current job descriptions/roles?; (2) What could we potentially accomplish?; and (3) What strategies could we apply to enhance our accomplishments and maximize our contributions to the organization? After reviewing the work of each subgroup, we identified eight major themes. Using these themes, we reviewed the literature and prepared recommendations for the Chief Nurse Executive’s Council.