

PARTNERSHIP



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GOSHEN
COLLEGE

Doctor of Nursing Practice

Student Handbook

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INTRODUCTION

Welcome to Eastern Mennonite University (EMU) & Goshen College (GC) post-MSN Doctor of Nursing Practice (DNP) program. During this program, you will participate in many learning activities which will guide you as you conduct your DNP final project. You bring rich experiences from your professional practice, skills and knowledge that you will continue to build upon in this program.

This handbook provides policies and practices to support successful knowledge acquisition and achievement of your academic goals as you complete the requirements for the degree of Doctor of Nursing Practice. The policies have been developed by the DNP Management Committee from EMU and GC and are effective during the current academic year. These policies may be subject to change and student will be notified.

The DNP is a practice doctorate that focuses “heavily on practice that is innovative and evidence-based” (AACN, 2006, p. 3). The ultimate deliverable for this program is completion of the DNP final project. You will collaborate with an organization to identify and address a real-world clinical or health-related issue.

The DNP Essentials (AACN, 2006) provide the foundation for the curriculum. Each course in the program addresses at least one of the eight foundational essentials. The eight essentials are:

- Essential I: Scientific Underpinnings for Practice
- Essential II: Organizational and Systems Leadership for Quality Improvement and Systems Thinking
- Essential III: Clinical Scholarship and Analytical Methods for Evidence-Based Practice
- Essential IV: Information Systems/Technology and Patient Care Technology for the Improvement and Transformation of Health Care
- Essential V: Health Care Policy for Advocacy in Health Care
- Essential VI: Interprofessional Collaboration for Improving Patient and Population Health Outcomes
- Essential VII: Clinical Prevention and Population Health for Improving the Nation’s Health
- Essential VIII: Advanced Nursing Practice

VISION & MISSION

Mission

The EMU & GC DNP Partnership seeks to prepare nurse leaders to serve and lead at the highest level of nursing practice as informed, articulate, culturally sensitive, compassionate, and responsible professional nurses. Such nurse leaders reflect the values of stewardship, human flourishing, sacred covenant, and peacemaking as foundational to promoting change within the healthcare setting. The program educates students from the perspective of the Anabaptist heritage and belief structures of both schools.

Philosophy

The philosophy of the GC & EMU DNP Partnership is based on the commonly held holistic nursing philosophies of both Goshen College and Eastern Mennonite University's nursing programs. Integrated with this focus of viewing persons, health, and environment in a holistic manner, the partnership program has adopted the concepts of stewardship, human flourishing, sacred covenant, and peacemaking as core threads that are embodied in the developing character and work of the nurse.

Preparation of professional nurses at the DNP level requires the development of leadership capacities. The DNP graduate influences health care outcomes through directing care strategies for individuals and populations [Student Learning Outcome (SLO) #6], leading interprofessional teams toward improved healthcare systems, [SLO #2] providing leadership through engagement with health policy [SLO #5], and utilizing information for the transformation of healthcare [SLO #4]. As with other DNP programs, this practice-focused doctoral program is designed to prepare nurse leaders for the highest level of leadership [SLO #1] in practice that is innovative and evidence-based, reflecting translational science at its best [SLO #3]. The EMU & GC DNP Partnership graduate demonstrates leadership through an emphasis on population health promotion of vulnerable populations, formation of a covenantal relationship with clients and groups, and The Core Value Concepts:

Stewardship is understood as a call to living within the biblical themes of creation, redemption, and discipleship. Management of fiscal resources as well as care of creation are some of the prime practices within the concept of stewardship in an Anabaptist context.¹

Human Flourishing is an emerging self-actualized well-being. The process of personal formation occurs within the context of the larger family and community. As students transform through the journey of one's own human flourishing, they promote the flourishing of those in their care.²

Sacred Covenant is a philosophical approach to nursing that recognizes the interweaving of art, science, and spirit within the sacred ministry of health care and health promotion. The practice of nursing as sacred covenant recognizes the holy spaces within relationships between nurse and client, whether individual, family, or community. The commitments of these relationships recognize all persons as created by God with human dignity and worth, working within a dynamic interdependent system of care.³

Peacemaking is a way of life based in the ethics of Anabaptist values of doing justice, and practicing reconciliation.⁴ As nurses experience human connectedness, opportunities for building peace and justice emerge.⁵ Living as peacemakers is an expression of rightness and goodness in love as participants in a world often filled with uncertainty and fear.⁵

¹ The Confession of Faith in an Anabaptist Perspective states “We believe that everything belongs to God, who calls us as the church to live as faithful stewards of all that God has entrusted to us” (*Confession of Faith in a Mennonite Perspective. Article 21. Christian Stewardship. Retrieved from <http://mennoniteusa.org/confession-of-faith/christian-stewardship/>*). Additional information on stewardship retrieved from <http://gameo.org/index.php?title=Stewardship&oldid=143454>.

²See also National League for Nursing (NLN) Competencies for Graduates of Nursing Programs, retrieved from <http://www.nln.org/docs/default-source/default-document-library/human-flourishing-final.pdf?sfvrsn=0>

³ O’Brien, M.E. (2017). *Spirituality in Nursing* (6th ed.). Burlington, MA: Jones & Bartlett Learning.

⁴ Confession of Faith in a Mennonite Perspective article 22

⁵ Dossey, B.M. & Keegan, L. (2016). *Holistic nursing: A handbook for practice* (7th ed.). Burlington, MA: Jones & Bartlett Learning. prevention that is consistent with both EMU’s and GC’s mission of producing servant-leaders for the church and the world.

OVERVIEW OF THE PROGRAM

The EMU and GC DNP program builds on The Essentials of Doctoral Education for Advanced Nursing Practice (AACN, 2006). This post-MSN DNP program offers an innovative approach in the development of nurse leaders who are prepared for the complexities of the current and ever-evolving healthcare environment. The program includes 33 credit hours in 10 courses. The last three of the ten courses comprise the DNP project.

Students take one course at a time in a 7-week format with the exception of the second DNP project course which is taken over a full 15-week semester. The program is nine semesters (33 months) with an accelerated six-semester option available (22 months). (See Appendix A for the two plans of study.)

Students in the program may be MSN-prepared nurse executives, nursing administration, or nurse leaders, or they may be APRNs (nurse practitioners, nurse midwives, registered nurse anesthetists, or clinical nurse specialists).

Graduates will complete a minimum of 600 practicum hours. One credit hour equals 60 practicum hours.

Practicum hours are included in the following courses:

- NURS 700: Foundations for DNP Scholarship. 20 hours writing an executive summary.
- NURS 704: Biostatistics. 20 hours doing a statistical application project.
- NURS 712: Organizational & Systems Leadership. 20 hours conducting a systems or organizational assessment.
- NURS 800: DNP Project Development. 120 hours developing the project.
- NURS 802: DNP Project Implementation. 300 to 420 hours implementing the project.
- NURS 804: DNP Project Analysis & Dissemination. 120 hours to analyze and disseminate the project.

ADMISSION REQUIREMENTS

1. Earned a Master's in Nursing degree from a CCNE- or NLNAC-accredited program with a cumulative GPA of 3.3 or higher.
 - a. Applicants without a GPA from their MSN program will be evaluated on an individual basis. .
2. Provide documentation of post-baccalaureate supervised practice hours from an accredited MSN program. If there are fewer than 400 supervised practice hours, the DNP program will be tailored to achieve the required minimum of 1,000 hours of post-baccalaureate supervised practice.
3. Evidence of an unencumbered RN license in the state of practice. (State of practice must be part of the SARA compact.)
4. Completed reference form from three (3) individuals who are able to address the applicant's ability to succeed in a DNP program. Individuals completing the reference form should be from among the following:
 - a. Nurse faculty member who has knowledge of the applicant's academic ability;
 - b. A professional work-related colleague or supervisor;
 - c. If practicing as an APRN, at least one should be from an APRN;
 - d. If practicing as a nurse leader/executive, one should be from a supervisor who can address the applicant's leadership abilities.
5. Personal essay of 500 words or less that describes the applicant's career goals related to pursuing the clinical doctorate. The essay addresses the applicant's current thoughts on their preferred focus for the evidenced-based scholarly project.
6. Current resume or curriculum vitae.
 - a. Evidence of currency in nursing practice
7. Interview with the Program Co-Directors via video-conferencing.

ADDITIONAL REQUIREMENTS FOR INTERNATIONAL STUDENTS

Language Test Requirement

An official TOEFL or IELTS score report is required for international applicants whose native language is not English. For the TOEFL, a score of at least 100 on the Internet-based or 600 on the written-based test is required. For the IELTS, a minimum score of 6.5 is required. Copies and faxes are not accepted as official documents; we must receive test scores directly from the testing service.

Transcript Evaluation

Applicants who complete post-secondary education outside of the U.S. must submit a NACES member evaluation credential of your foreign transcript with your application. The evaluation report must show that your non-U.S. education is equivalent to a U.S. bachelor's degree and/or master's degree in nursing to be considered for admission.

Educational Credential Evaluators, Inc. (ECE). www.ece.org 414-289-3400

For nurses educated outside of the U.S., proper documentation is required through the Commission on Graduates of Foreign Nursing Schools (CGFNS). www.cgfns.org

STUDENT LEARNING OUTCOMES

1. Practices at the highest level of nursing, integrating nursing theory and nursing science with knowledge from ethics, the biophysical, psychosocial, analytical, and organizational sciences. **CCNE DNP Essential I, VIII**
2. Demonstrates advanced leadership skills in interprofessional collaborative teams for quality improvement, improvement of patient and population outcomes and meeting system level challenges. **CCNE DNP Essential II,VI, VIII**
3. Employs analytical skills and translational science for the improvement of quality and safety in healthcare. **CCNE DNP Essential III, VIII**
4. Utilizes information technology for the improvement and transformation of healthcare. **CNE DNP Essential IV, VIII**
5. Demonstrates knowledge of healthcare policy to provide leadership for advocacy and education that shapes the future of healthcare. **CCNE DNP Essential V, VIII**
6. Applies population health methodologies to design, implement and evaluate health promotion/disease prevention interventions and healthcare delivery models. **CCNE DNP Essential VII, VIII**

TRANSFER CREDIT POLICY

Transcripts will be evaluated on an individual basis. A maximum of 6 credit hours of comparable graduate level coursework from an accredited college or university may be transferred upon review of syllabus with the consent of the Co-Directors of the DNP program. Courses considered for transfer must have a grade distinction of B (not B-) or higher. Comparable is defined as courses that fulfill the requirements for the program to which the student will be enrolled.

NON-DEGREE SEEKING STUDENTS

On rare occasions, a student may desire to take one or two courses in the program without an intent to pursue a degree. This is possible through application for Non-Degree Seeking status and upon approval by the Program Co-Directors . Students with non-degree seeking status may take up to six credit hours total, and are not eligible for financial aid. When a student reaches 6 hours and wants to continue taking classes, he or she must complete a regular application for admission to the DNP program and will be considered for degree-seeking status at that time. Degree-seeking students will have priority for limited enrollment courses.

Admission requirements for non-degree seeking students include:

- Earned a Master's degree with a cumulative GPA of 3.3 or higher.
- TOEFL minimum score of 100 on the Internet-based or 600 on the written-based test (if English is not the native language)

Application process includes:

- Completion of the Graduate Nursing Student Program Application (Non-Degree Seeking)
- Submission of official transcripts from all Associate, Baccalaureate and Master's programs attended
- Interview with one of the Co-Directors of the DNP program
- A current professional resume

GRADUATION REQUIREMENTS

- Completion of 33 credit hours accepted by Goshen College and Eastern Mennonite University for the Doctor of Nursing Practice degree
- Completion of courses as listed in the DNP curriculum plan including successful completion of DNP project
- Full financial settlement

TIME LIMITS FOR COMPLETING DEGREE REQUIREMENTS

All work for a graduate degree must be completed within six years from the date of matriculation to the graduate program. To request an extension of the time limit, the student must submit a written request to the Program Co-Directors specifying the amount of time needed and the reasons an extension is necessary. The Co-Directors, in consultation with the program faculty, will notify the student in writing of the decision on an extension request. The student must maintain continuous enrollment until all degree requirements have been met. NURS898: Final Project Research & Writing is a one-credit hour course that can be taken as many times as needed and will meet the requirement of continuous enrollment.

LEAVE OF ABSENCE POLICY

Students whose enrollment is interrupted may apply for a leave of absence (LOA) at the time of their withdrawal. Formal requests for an LOA should be made through the Co-Directors. The Co-Director of the enrolling school will notify director of financial aid, accounting and registrar's offices about the leave. If the leave extends for more than one calendar year from the date of withdrawal, the student will need to reapply for admission to the program. All students who take courses elsewhere during their leave also must apply for readmission.

DISMISSAL FROM THE PROGRAM

The DNP program reserves the right to dismiss a student who displays behaviors determined inappropriate to the practice of professional nursing. Behaviors for dismissal may include but are not limited to: plagiarism; unsafe clinical practice; conduct that poses a threat to the well-being of self, others, and/or property; breach of confidentiality; and defamation. Any student who defames anyone by oral (slander) or written (libel) statements may also be subject to legal actions. The behaviors identified as inappropriate will be documented and discussed with the student. The course professor will meet with the DNP Co-Directors to review the behaviors of concern. If it is determined that the behaviors are inappropriate, the student will be dismissed by the Co-Directors of the DNP program. The Co-Directors will notify the student in writing of the effective date of the dismissal and provide the reason for dismissal.

GRADUATE FULL-TIME ENROLLMENT

A graduate student taking 6 credit hours or more in a given semester is considered full-time.

APPLICATION FOR GRADUATION REQUIRED

Candidates for degrees must follow the rules by the degree-granting school.

ACADEMIC GRIEVANCE POLICY

Refer to the grievance policy of the degree-granting school.

CONFIDENTIALITY

Graduate students are expected to follow the ANA Code of ethics 3.1 which states that, "the nurse advocates for an environment that provides for sufficient physical privacy, including auditory privacy for discussions of a personal nature and policies and practices that protect the confidentiality of information." (*ANA Code of ethics*, 2008, p. 152).

COMPUTING SKILLS & TECHNOLOGY

Students in the DNP program are expected to:

- Have access to a personal computer with the most current version of Microsoft Office which includes Word, Powerpoint, and Excel.
- Have daily email access using the email account through the school in which you were admitted.
- Use Moodle course management software program.
- Have word processing and presentation software literacy.
- Technology requirements:
 - High-speed internet connection
 - Microsoft Office
 - Webcam
 - Headset with microphone

LATE ASSIGNMENTS

Submission of late papers or other written work will impact your letter grade. Each syllabus will define the impact of late assignments on the letter grade.

CHANGES TO SYLLABUS

Course faculty reserve the right to make changes to the syllabus and assignments as needed with proper notification given to course participants.

ACADEMIC INTEGRITY

Eastern Mennonite University and Goshen College expect all students and faculty members to practice academic integrity. Honesty, trust, fairness, respect and responsibility are essential building blocks in creating a vital learning community. They are also the foundation for lifelong integrity.

Academic dishonesty is considered a serious breach of the Community Standards. Academic dishonesty is any act that misrepresents academic work or interferes with the academic work of others. It includes (not an all-inclusive list):

- plagiarism (giving the impression that the another person's work is your own)
- cheating on assignments or exams
- falsification of data
- submission of the same (or substantially the same) paper in more than one course without the prior consent of all professors concerned
- depriving others of necessary academic resources
- sabotaging another student's work

Consequences of academic dishonesty are based upon the severity of the offense, course expectations and other variables. Consequences for individual offenses may range from re-doing the assignment to dismissal from the program. All instances of academic dishonesty are reported to the Program Co-Directors.

Refer to the degree-granting school's policy for further details.

GRADING PLANS AND CONTINUANCE POLICIES

Grading Plan

All required courses are taken for letter grades. **Successful completion of a DNP course requires a grade of B (not B-) or above.**

The following range for determining grades will be used:

94-100	= A	80-81.9	= C+
92-93.9	= A-	74-79.9	= C
90-91.9	= B+	72-73.9	= C-
84-89.9	= B	Below 72	= F
82-83.9	= B-		

Only one course may be repeated in the curriculum.

Incomplete Grades

I = Incomplete. A grade of “I” (incomplete) may be given at the professor’s discretion. Students must be earning a passing grade at the time of the request for an “I” grade. It is to be given rarely and not to accommodate the student who, through carelessness or poor planning, does not complete course work in the given time. The student will work with the professor to establish a plan for completion of the course. Incomplete grades are expected to be resolved within seven weeks after the end of the course in which it was received.

W = Withdrawal: After the drop/add deadline, dropping a course is permitted until 60 per cent through the course or term. A “W” will be entered on the permanent record. Withdrawals after the 60 per cent date results in the grade earned.

Academic Requirements for Continuation in the Program

The academic record will be reviewed at the end of each semester and summer term. The academic requirements for continuation in the program are applied during these time periods.

A grade of B or above in all courses is required for continuation in the DNP program. A grade of B- or below may interrupt the student’s plan of study. Courses may be repeated only once. The number of repeated courses is limited to one course.

Any person beginning the DNP program, who does not take courses for more than one calendar year, will need to apply for readmission to the program.

STANDARDS FOR WRITTEN PAPERS

The Departments of Nursing at Eastern Mennonite University and Goshen College have adopted APA as the standard for style. Use APA style for all papers.

Writing style should be of collegiate quality. For assistance with grammar, you will find a writing handbook helpful.

Papers must be typed using computer word processing, printed on 8 1/2" x 11" paper, in clear, dark print, double-spaced, and with a font of 12 Times New Romans. Include a title page unless instructed otherwise. Note that page numbering begins with the title page. Number all pages in the upper right-hand corner. Place a double-spaced, correctly formatted list of references, titled References, on a separate page at the end of the paper.

RESIDENCY REQUIREMENT

The DNP program consists of two required residencies - one within the first weeks of the program and the other at the end of the program. The first residency provides an orientation to the program as well as in-depth content for the first course. Students meet and learn to know each other as well as meeting many of the professors that will be teaching their courses. Students are required to contact Information Technology Services at their enrolling institution prior to the beginning of the first course to ensure computer and internet capability.

The last residency comes at the end of the program. Students will present the current state of their DNP Project. It is also a time for wrap-up of the program and saying good-bye to classmates and professors.

PRE-PRACTICUM REQUIREMENTS

Students are responsible for meeting the requirements of the institution where they complete their practicum hours. This is done at the student's expense.

BEHAVIOR IN THE PROFESSIONAL SETTING

Agency Policies

Students may use a variety of agencies for practicum experience. It is the responsibility of the student to learn what each agency's policies and dress code are and to follow those policies while in that agency.

Telephone Calls

While in the practicum setting, telephones will be used for business purposes only.

Cell phones, Pagers, Computers, and Personal E-Devices

Electronic devices should be used with professional discretion.

Injury

A student injured while enrolled in the DNP program is responsible for the costs of that injury. Students must file claims with their personal insurance company to cover the costs of treatment.

DNP PROJECT

DOCUMENTATION OF PRACTICUM HOURS

“All students must complete sufficient time in supervised practice hours to integrate and demonstrate the new skills and knowledge needed to achieve the *DNP Essential* outcomes” (AACN, 2015, p. 9). The DNP Project Lead Faculty checks in with the student regularly to ensure progress toward completion.

The following designation is used to determine the number of practicum hours required for each course credit hour.

- One credit hour = 60 practicum hours.

Upon completion of coursework in the DNP Program, students will complete 600 practicum hours in these courses:

- NURS 700 - 20 hours (executive summary)
- NURS 704 - 20 hours (statistical application)
- NURS 712 - 20 hours (systems analysis)
- NURS 800 - 120 hours (development of the project)
- NURS 802 - 300 hours (implementation of the project)
- NURS 804 - 120 hours (analysis & dissemination of the project)

Options for completion of the requisite 1000 (minimum) practicum hours:

1. Students may provide documentation of up to 400 faculty supervised practice hours from their MSN program. Documentation should be a letter on official school letterhead from someone that is able to attest to the number of supervised practicum hours completed by the student.
2. Students who have fewer than 400 faculty supervised practice hours from their MSN program may choose from these options:
 - a. Students may enroll in NURS 690: DNP Practicum Hours for up to 9 credit hours.
 - b. Students may enroll in NURS 802: DNP Project Implementation for up to 2 extra credit hours.

Expectations for completion of practicum hours:

1. Students may do their project in their places of employment. It is up to the student to arrange the details with the employer. The program does not manage this.
 - a. Typically, time working on the project will be separate and distinct from regular employment responsibilities.
 - b. However, students may include work during paid time if it is part of developing a new project or new role pertinent to their job duties and by permission of project chair and employer.
2. Students will log their hours on the Practicum Hours Log Sheet (see Appendix K). This document is part of the final submission for the DNP Project.
3. Student is responsible to work with the Program Co-Directors to ensure that a fully executed affiliation agreement is in place for the site in which the practicum hours are completed.

NOTE: Failure to have a fully executed affiliation agreement in place may result in loss of practicum hours logged at that site.

Students document and track their practicum hours on the Practicum Hours Log Sheet. (See Appendix K). Following are *some* examples of time that might count toward practicum hours [this is not a comprehensive list]:

- Participation in or observation of meeting time with practice experts
- Planning meetings to determine goals and strategies for developing and implementing the project
- Attending seminars related to the project question
- Meeting with consultants/experts related to the project question.
- Periodic meetings with DNP lead faculty to monitor progress of project.
- Learning new leadership and advanced practice skills appropriate to the project
- Evaluating and analyzing data for the project
- Development of tools for assessment and evaluation related to the project
- Participating in work within the organization that is related to the project
- Poster or podium presentation of findings at a professional conference, in the organization, or to stakeholders.
- In-services for staff related to implementation of the project recommendations
- Any activity that affects change in the practicum setting
- Design and development of the DNP project proposal and DNP Final project.
 - Writing of these documents does not count toward the hours.

Time spent working on classroom assignments do not count toward the DNP practicum hours unless otherwise designated.

THE DNP PROJECT

The DNP program culminates in the successful completion of the DNP Project. The DNP project demonstrates the student's ability to synthesize learning acquired throughout the program into a scholarly deliverable. Additionally, the project validates the student's "intellectual ability, knowledge in the subject area, and contributions to nursing" (Moran, Burson, & Conrad, 2017, p. 10).

OVERVIEW OF DNP PROJECT STEPS TO COMPLETION:

1. In collaboration with the Program Co-Directors, identify your DNP Project Team. This should begin in N700: Foundation for Clinical Scholarship.
2. You will complete and track your practicum hours throughout the program.
3. Once your project team has been identified, meet regularly to process your DNP Project question and ultimately your proposal.
4. Write your project proposal and prepare for your oral project defense.
5. Complete the NIH online training modules as part of seeking IRB approval or exemption through EMU or GC. This is to be completed no later than the start of N802: DNP Project Implementation.
6. If required by the facility in which your project will take place, obtain IRB approval or exemption from the facility's IRB. You may not begin project implementation or data collection until documentation of IRB approval or exemption is formally obtained.
7. Implement and analyze your DNP Project.
8. Write your final project report.
9. Successfully defend your project.
10. Submit all required documents.

COMPOSITION OF PROJECT TEAM

Each student works with Program Co-Directors to identify their DNP Project Team who works with them to complete the DNP Final Project. Some general responsibilities of the Project Team are:

- Participate in team meetings when called by the Project Leader
- Review and critique drafts of the DNP Project Proposal and the final DNP Project

Students must seek approval from the DNP Lead Faculty (or, in the absence of an assigned Lead Faculty, DNP Program Co-Directors) prior to adding the practice mentor to the project team. The practice mentor's CV/resume must be provided to the Program Co-Directors.

Make-up and responsibilities of the DNP Project team:

- DNP Student (referred to as the Project Leader)
 - Schedules regular meetings. At minimum, these meetings should occur at least every 7 weeks.
 - Sets agenda for all meetings.
 - Communicates clearly with the project team about agendas and the status of the project
 - Communicates regularly with the DNP Lead Faculty, especially when there are questions or concerns that come up.
- DNP Lead Faculty - assigned by the program in consultation with the student
 - Acts as the process expert
 - Communicates with the Practice Mentor at least twice a semester.
 - Regularly reviews student's DNP Essentials grid ensuring that the student is on-target and completing scholarly work
 - Provides resources to the student as requested
 - Assumes ultimate responsibility that the project meets the requirements of the AACN DNP essentials
 - Qualifications and duties:
 - Must be doctorally prepared
 - Must have the ability to oversee the project from beginning to completion including ensuring IRB compliance; preparation of the DNP project proposal, development, implementation, evaluation, dissemination, and final written DNP project report
 - Lead the processes of oral defense for project proposal and oral defense of the final project
 - Provide timely feedback which includes: responding to emails within 48 hours; returning submissions of work within 5 business days; responding to the project proposal manuscript within 10 business days; and responding to the final manuscript of the DNP Project within 10 business days. Exceptions to this timeline may be negotiated between student and lead faculty.
 - Document student progress towards completion of the DNP Project (see Appendix J: Checklist for Items Due from Student)
 - Required to be present (physically or virtually) for the proposal defense and final oral defense
 - Determines, along with the DNP Project Team, adequacy of the final DNP Project

- File the following documents with the program:
 - I. Practice Expert/Mentor agreement (Appendix I)
 - II. Check-list of completed tasks (Appendix J)
 - III. Practicum Hours Log Sheet (Appendix K)
 - IV. DNP Project Proposal Oral Defense Results Form (Appendix L)
 - V. DNP Final Project Oral Defense Results Form (Appendix M)
- DNP Student - assigned by the program
 - Provides peer review. This is more than simply affirming the Project Leader's work.
 - Attend Project team meetings either in-person or virtually
- Practice Expert/Mentor - chosen by student
 - Qualifications:
 - Should be a member of the organization (or a similar organization) in which the project is being conducted.
 - Is not required to be a RN or have doctoral preparation
 - Practice mentor/expert must be approved by the lead DNP faculty
 - Communicates with the lead DNP faculty at least twice a semester
 - Serves as content expert
 - Advises Project Leader in the site requirements for doing the project
 - Advises Project Leader in the logistics of conducting the project
 - Provide timely feedback which includes responding to emails within 72 hours
 - Required to be at the proposal defense and final defense (in-person or virtual)
 - Must sign the agreement for Practice Expert/Mentor (see Appendix I). The signed agreement is submitted to the DNP Lead Faculty and becomes a part of the student's permanent file.
- (optional) a 2nd DNP Student - chosen by the student
 - If the Project Leader wishes to include additional student participation, upon approval of the DNP faculty member, another student may be added to the team.
 - Another student may have experience, knowledge, or expertise that the Project Leader may find beneficial to the project completion. In this case, the Project Leader may invite another the DNP student to participate in the project.
 - The 2nd student becomes a permanent part of the DNP Team.

Faculty Communication with Practice Mentor

Communication with Practice Mentors is considered vital to a successful outcome for the student, the mentor, and the DNP program. A welcome email outlining the student's approval to start the site activities, the date of anticipated start/finish, and the faculty's contact information will be provided at the beginning of the semester (or upon approval of the DNP Practice Expert/Mentor Agreement form [Appendix I]). Practice Mentors are encouraged to contact the Lead Faculty at any time during the Practicum to address negative issues immediately and to provide suggestions for program improvement.

A certificate of appreciation is provided to all preceptors at the end of the student's completion of the DNP project courses.

Evaluation of Student Performance

The DNP Lead Faculty name and contact information will be provided by the DNP Student to the practice mentor. Should Practice Mentors have any concerns or questions regarding student performance or other issues which arise during the practicum experience, please contact the Lead Faculty. The DNP Lead Faculty keeps a log of the meetings with the student which becomes part of the evaluation of the student. The practice mentor will complete an evaluation of student performance at the end of the DNP Project. The final evaluation and grade is the responsibility of the faculty.

Request to Change Composition of DNP Project Team

Changes to the composition of the DNP Project Team may occasionally be required. To change the team composition, the DNP student will submit a letter of request to the Program Co-Directors stating:

- The reason that a change is needed
- The member who is being replaced and who will replace them
- The composition of the new DNP Project Team

This letter should be signed by the student and the Lead Faculty (old and new if the Lead Faculty is being replaced).

TYPES OF DNP PROJECTS:

The DNP Project provides an opportunity for the student to add to the body of knowledge gained through evidence-based-practice activities. The DNP Project may take on various forms and may include the following (this is not an all-inclusive list):

1. Quality Improvement – “a systematic and continuous process that leads to measurable improvement in healthcare” (Moran, Burson, & Conrad, 2017, p. 135).
2. Evidence-Based Practice – integrating clinical expertise (practice) with the best research (evidence) in the development of the best patient care.
3. Program Development & Evaluation – development of a program addressing needs in healthcare and evaluation of the effectiveness of that program.
4. Translating evidence into practice
5. Clinical or practice-based inquiry
6. Healthcare delivery innovation – development of an innovative approach to healthcare delivery
7. Demonstration project – these test and measure the effects of program changes in real-world situations
8. Healthcare policy analysis (Moran, Burson, & Conrad, 2017, p.144).
9. Generating new evidence or knowledge

According to AACN (2015), all DNP projects should:

1. Focus on a change that impacts healthcare outcomes either through direct or indirect care.
2. Have a systems (micro-, meso-, or macro- level) or population/aggregate focus.
3. Demonstrate implementation in the appropriate arena or area of practice.
4. Include a plan for sustainability (e.g. financial, systems or political realities, not only theoretical abstractions).
5. Include an evaluation of processes and/or outcomes (formative or summative).
DNP Projects should be designed so that processes and/or outcomes will be evaluated to guide practice and policy. Clinical significance is as important in guiding practice as statistical significance is in evaluating research.
6. Provide a foundation for future practice scholarship. (p. 4)

INSTITUTIONAL REVIEW BOARD (IRB) APPROVAL

All DNP Projects must seek IRB approval from the school's IRB through which they are enrolled. If the IRB determines the study is an *exempted* study, a letter stating this exempt status must be submitted to the Program Co-Directors. Many projects may require IRB submission at the organization in which the project will be conducted. It is the student's responsibility to obtain IRB approval or exemption from the organization and submit that documentation to the Program Co-Directors. Documentation of IRB approval or exempt status must be provided from the organization.

THE DNP PROJECT PROPOSAL

The DNP final project **proposal** includes two things:

1. A scholarly paper (see Appendix C & D)
2. An oral presentation/defense to the DNP Project team (see Appendix E for the rubric)

The proposal is presented in-person or virtually to the student's project team who gives final approval for the proposal. The project proposal paper is due two (2) weeks prior to the date of the defense. This oral defense is a formal presentation following the standards of a formal, scholarly presentation. All members of the DNP Project Team are expected to attend the oral defense in-person or virtually.

The student will have 30 minutes to present the proposal with additional time for questions. The proposal may be:

1. Accepted in full
 - a. Once the DNP Project Proposal is approved, the student becomes eligible for candidacy status.
2. Accepted with major or minor revisions
 - a. The student has two weeks in which to submit the revised Project Proposal to the DNP Project Team.
 - b. If the team approves the revision, the student becomes eligible for candidacy status.
 - c. If the team does not approve of the Project Proposal after the revisions have been made, the student and Lead Faculty will meet with the Program Co-Directors to discuss the consequences which may range from writing a completely new proposal to dismissal from the program.
3. Rejected.
 - a. If the proposal is rejected, the student must significantly revise the original or develop a new proposal.
 - b. A subsequent re-defense meeting will be scheduled.

- c. If the proposal is rejected a second time, the student and the Lead Faculty team member will meet with the Program Co-Directors to discuss the consequences which may range from writing a completely new proposal to dismissal from the program.

Upon approval of the proposal by the project team, each member will sign the DNP Project Proposal Oral Defense Results Form (See Appendix L).

NOTE: Continuation in coursework is not dependent on completion of the DNP Project Proposal.

FORMAT FOR THE DNP FINAL PROJECT

The DNP **Final** Project is the culmination of the student's doctoral studies. It provides evidence of the student's readiness as an expert clinician who is prepared for direct or indirect care in advanced practice and in clinical leadership.

A complete DNP Final Project includes:

1. A final scholarly paper (see Appendix F and H)
2. A public oral presentation/defense
 - a. The presentation will be open to the public.
 - b. Anyone in the audience may ask questions of the presenter.
3. All DNP Projects will be archived in the EMU/GC DNP Project digital repository.

Satisfactory completion of these items is an indicator of readiness for graduation from the DNP program.

Final Project Oral Defense

You have worked hard and learned many things to get to this point. One of the remaining tasks for you as you demonstrate your expertise related to your DNP Project question is to tell the community what you have learned. You and your project team will schedule a time for you to give an oral defense of your project and your findings. This is critical evidence that you are worthy of the title of expert clinician.

After all of the requirements for the DNP have been met and the DNP Project Team agree that the Final Project is complete, a time will be scheduled for the oral defense. The final DNP Project paper must be delivered at least two (2) weeks prior to the scheduled time for the oral defense. All members of the DNP Project Team are expected to attend the oral defense in-person or virtually. You are responsible for arranging a mutually acceptable time.

The DNP project defense is open to the public.

You will have 30 minutes to present your project to the audience. After your presentation, the audience may ask questions for up to 15 minutes. Following the presentation and public questions, the DNP Project Team meets in private with the student for additional question period. The outcome of the oral defense is one of three determinations:

1. Accepted in full
 - a. Once the DNP Project is approved, the student becomes eligible for graduation.
2. Accepted with major or minor revisions
 - a. The student has two weeks in which to submit the revised written Project to the DNP Project Team.
 - b. If the team approves the revision, the student becomes eligible for graduation.
 - c. If the team does not approve of the written Project after the revisions have been made, the student and Lead Faculty will meet with the Program Co-Directors to discuss the consequences which may range from writing a completely new proposal to dismissal from the program.
3. Rejected.
 - a. If the project is rejected, the student must significantly revise the original project or develop a new project proposal.
 - b. A subsequent re-defense meeting will be scheduled.
 - c. If the project is rejected again, the student and the Lead Faculty team member will meet with the Program Co-Directors to discuss the consequences which may range from writing a completely new project proposal to dismissal from the program.

Upon approval of the proposal by the project team, each member will sign the DNP Final Project Oral Defense Results Form (See Appendix M).

As you prepare for your public oral defense, keep these things in mind:

- Arrive early so that you can ensure that your Powerpoint presentation is properly uploaded.
- This is a formal presentation. It is your responsibility to maintain that level of formality throughout the presentation.
- Dress professionally in business attire.
- You will have 30 minutes to present your project.
 - Be concise in your presentation with the majority of the time focusing on the clinical relevance of your project.
 - Maintain eye contact with your audience throughout your presentation.

- Avoid reading from your notes or from your power points.
- Be sure that your Powerpoint slides follow the standards for scholarly presentations.
- After you have presented, the audience will have an opportunity to ask questions.
 - You may be challenged on your project.
 - Be prepared to support your project's purpose, your method, the outcomes, and your analysis of the data without becoming defensive or argumentative.
 - Be succinct in your responses citing data from your project to support your response.
 - Avoid circular responses to questions.

DISSEMINATION OF DNP PROJECT

Dissemination of the DNP Project is expected. Examples may include (not a comprehensive list):

- Publish in a peer-reviewed journal
- Poster or podium presentation at a professional conference
- Oral or written executive summary presented to stakeholders or leadership team at the practicum site
- Development of a webinar presentation or video
- Publish in a non-refereed lay publication
- Presentation to the public

Even if the project is not fully completed, students will present their project to their cohort, faculty, and other DNP students in the final course. This is a requirement for graduation.

The final residency will be conducted at each school. The student will decide at which campus they will participate.

POLICY ON PUBLICATION

Students are encouraged to submit publications from their DNP project. Authorship discussions with your DNP Lead Faculty should occur early on in the DNP Project Process. In the event that a student decides that they do not want to publish, the rights will transfer to the DNP Lead Faculty, one year after a successful DNP Project Defense. This means that the DNP Lead Faculty could publish the work as first author and the student would be recognized as the second author.

REFERENCES

- American Association of Colleges of Nursing. (2006). *The essentials of doctoral education for advanced nursing practice*. Washington, DC: AACN. Retrieved from:
<http://www.aacn.nche.edu/publications/position/DNPEssentials.pdf>
- American Association of Colleges of Nursing. (2015). *The Doctor of Nursing Practice: Current issues and clarifying recommendations: Report from the task force on the implementation of the DNP*. Retrieved from: <http://www.aacn.nche.edu/aacn-publications/white-papers/DNP-Implementation-TF-Report-8-15.pdf>
- Moran, K., Burson, R., & Conrad, D. (2017). *The doctor of nursing practice scholarly project: A framework for success* (2nd ed.). Burlington, MA: Jones & Bartlett Learning.

APPENDICES

APPENDIX A: PLANS OF STUDY

PLAN OF STUDY - Primary

	Spring (Semester 1) Session 3	Summer (Semester 2) Session 5
	N700: Foundations for Clinical Scholarship <i>Residency in Week 3</i> Includes 20 practicum hours 3 credits	N704: Biostatistics & Epidemiology Includes 20 practicum hours 3 credits
Fall (Semester 3) Session 2	Spring (Semester 4) Session 4	Summer (Semester 5) Session 6
N710: Healthcare Policy 3 credits	N702: Health Information Technology 3 credits	N706: Population Health 3 credits
Fall (Semester 6) Session 1	Spring (Semester 7) Sessions 3 & 4	Summer (Semester 8) Sessions 5 & 6
N708: Translational Science 3 credits	N712: Organizational & Systems Leadership Includes 20 practicum hours 3 credits N800: DNP Project Development Includes 120 practicum hours 3 credits Total Credits: 6	N802 DNP Project Implementation Includes 300 practicum hours 6 credits Total Credits: 6
Fall (Semester 9) Session 1		
N804: DNP Project Analysis & Dissemination Includes 120 practicum hours 3 credits Total Credits: 3		

PLAN OF STUDY - Accelerated

	Spring (Semester 1)	Summer (Semester 2)
	N700: Foundations for Clinical Scholarship Residency in Week 3 Includes 20 practicum hours 3 credits N702: Health Information Technology 3 credits Total Credits: 6	N704: Biostatistics & Epidemiology Includes 20 practicum hours 3 credits N706: Population Health 3 credits Total Credits: 6
Fall (Semester 3)	Spring (Semester 4)	Summer (Semester 5)
N710: Healthcare Policy 3 credits N708: Translational Science 3 credits Total Credits: 6	N712: Organizational & Systems Leadership Includes 20 practicum hours 3 credits N800: DNP Project Development Includes 120 practicum hours 3 credits Total Credits: 6	N802 DNP Project Implementation Includes 300 practicum hours 6 credits Total Credits: 6
Fall (Semester 6)		
N804: DNP Project Analysis & Dissemination Includes 120 practicum hours 3 credits Total Credits: 3		

APPENDIX B: DNP ESSENTIALS COMPETENCY TABLE

DNP ESSENTIALS COMPETENCY TABLE

DNP ESSENTIALS

This table provides documentation of student’s progress toward and, ultimately, competency in each of the eight DNP Essentials. Students should begin documenting progress toward meeting the competencies in the first DNP course.

Student Name: _____ Student ID #: _____

DNP Project Title: _____

Name of DNP Project Team members:

Lead Faculty: _____

Practice Expert/Mentor: _____

DNP Student (peer): _____

Other (optional): _____

DNP Essential & Competency	Course Number & Learning Objective	Explanation of how the objective supports development of the competency
I. Scientific Underpinnings for Practice		
1. Integrate nursing science with knowledge from ethics, the biophysical, psychosocial, analytical, and organizational sciences as the basis for the highest level of nursing practice.		
2. Use science-based theories and concepts to: <ul style="list-style-type: none"> • determine the nature and significance of health and health care delivery phenomena • describe the actions and advanced strategies to enhance, alleviate, and ameliorate health and health care delivery phenomena as appropriate • evaluate outcomes. 		
3. Develop and evaluate new practice approaches based on nursing theories and theories from other disciplines.		
Organizational & Systems Leadership for Quality Improvement & Systems Thinking		
1. Develop and evaluate care delivery approaches that meet current and future needs of patient populations based on scientific findings in nursing and other clinical sciences, as well as organizational, political, and economic sciences.		

2. DNP Essential & Competency	Course Number & Learning Objective	Explanation of how the objective supports development of the competency
3. Ensure accountability for quality of health care and patient safety for populations with whom they work. <ol style="list-style-type: none"> a. Use advanced communication skills/processes to lead quality improvement and patient safety initiatives in health care systems. b. Employ principles of business, finance, economics, and health policy to develop and implement effective plans for practice-level and/or system-wide practice initiatives that will improve the quality of care delivery. c. Develop and/or monitor budgets for practice initiatives. d. Analyze the cost-effectiveness of practice initiatives accounting for risk and improvement of health care outcomes. e. Demonstrate sensitivity to diverse organizational cultures and populations, including patients and providers. 		
4. Develop and/or evaluate effective strategies for managing the ethical dilemmas inherent in patient care, the health care organization, and research.		
III. Clinical Scholarship & Analytical Methods for Evidence-Based Practice		
1. Use analytic methods to critically appraise existing literature and other evidence to determine and implement the best evidence for practice.		
2. Design and implement processes to evaluate outcomes of practice, practice patterns, and systems of care within a practice setting, health care organization, or community against national benchmarks to determine variances in practice outcomes and population trends.		
3. Design, direct, and evaluate quality improvement methodologies to promote safe, timely, effective, efficient, equitable, and patient-centered care.		
2. Apply relevant findings to develop practice guidelines and improve practice and the practice environment.		
DNP Essential & Competency	Course Number &	Explanation of how the objective supports

	Learning Objective	development of the competency
3. Use information technology and research methods appropriately to: <ul style="list-style-type: none"> • collect appropriate and accurate data to generate evidence for nursing practice • inform and guide the design of databases that generate meaningful evidence for nursing practice • analyze data from practice • design evidence-based interventions • predict and analyze outcomes • examine patterns of behavior and outcomes • identify gaps in evidence for practice 		
4. Function as a practice specialist/consultant in collaborative knowledge-generating research.		
5. Disseminate findings from evidence-based practice and research to improve healthcare outcomes.		
IV. Information Systems/Technology & Patient Care Technology for the Improvement and Transformation of Health Care		
1. Design, select, use, and evaluate programs that evaluate and monitor outcomes of care, care systems, and quality improvement including consumer use of health care information systems.		
2. Analyze and communicate critical elements necessary to the selection, use and evaluation of health care information systems and patient care technology.		
3. Demonstrate the conceptual ability and technical skills to develop and execute an evaluation plan involving data extraction from practice information systems and databases.		
4. Provide leadership in the evaluation and resolution of ethical and legal issues within healthcare systems relating to the use of information, information technology, communication networks, and patient care technology.		
DNP Essential & Competency	Course Number &	Explanation of how the objective supports

	Learning Objective	development of the competency
5. Evaluate consumer health information sources for accuracy, timeliness, and appropriateness.		
V. Health Care Policy for Advocacy in Health Care		
1. Critically analyze health policy proposals, health policies, and related issues from the perspective of consumers, nursing, other health professions, and other stakeholders in policy and public forums.		
2. Demonstrate leadership in the development and implementation of institutional, local, state, federal, and/or international health policy.		
3. Influence policy makers through active participation on committees, boards, or task forces at the institutional, local, state, regional, national, and/or international levels to improve health care delivery and outcomes.		
4. Educate others, including policy makers at all levels, regarding nursing, health policy, and patient care outcomes.		
5. Advocate for the nursing profession within the policy and healthcare communities.		
6. Develop, evaluate, and provide leadership for health care policy that shapes health care financing, regulation, and delivery.		
7. Advocate for social justice, equity, and ethical policies within all healthcare arenas.		
VI: Interprofessional Collaboration for Improving Patient and Population Health Outcomes		
1. Employ effective communication and collaborative skills in the development and implementation of practice models, peer review, practice guidelines, health policy, standards of care, and/or other scholarly products.		
2. Lead interprofessional teams in the analysis of complex practice and organizational issues.		
DNP Essential & Competency	Course Number & Learning Objective	Explanation of how the objective supports development of the competency

3. Employ consultative and leadership skills with intraprofessional and interprofessional teams to create change in health care and complex healthcare delivery systems.		
VII: Clinical Prevention and Population Health for Improving the Nation's Health		
1. Analyze epidemiological, biostatistical, environmental, and other appropriate scientific data related to individual, aggregate, and population health.		
2. Synthesize concepts, including psychosocial dimensions and cultural diversity, related to clinical prevention and population health in developing, implementing, and evaluating interventions to address health promotion/disease prevention efforts, improve health status/access patterns, and/or address gaps in care of individuals, aggregates, or populations.		
3. Evaluate care delivery models and/or strategies using concepts related to community, environmental and occupational health, and cultural and socioeconomic dimensions of health.		
VIII: Advanced Nursing Practice		
1. Conduct a comprehensive and systematic assessment of health and illness parameters in complex situations, incorporating diverse and culturally sensitive approaches.		
2. Design, implement, and evaluate therapeutic interventions based on nursing science and other sciences.		
3. Develop and sustain therapeutic relationships and partnerships with patients (individual, family or group) and other professionals to facilitate optimal care and patient outcomes.		
4. Demonstrate advanced levels of clinical judgment, systems thinking, and accountability in designing, delivering, and evaluating evidence-based care to improve patient outcomes.		
DNP Essential & Competency	Course Number & Learning Objective	Explanation of how the objective supports development of the competency

5. Guide, mentor, and support other nurses to achieve excellence in nursing practice.		
6. Educate and guide individuals and groups through complex health and situational transitions.		
7. Use conceptual and analytical skills in evaluating the links among practice, organizational, population, fiscal, and policy issues.		

APPENDIX C: DNP PROJECT PROPOSAL OUTLINE

- I. Title Page
- II. Table of Contents
- III. Figures and Tables List
- IV. Introduction
 - A. Problem statement
 - B. Purpose with specific objectives
 - C. Congruence with organizational/system strategic plan
 - D. Facilitators and barriers
- V. Literature review
 - A. Summary of the literature search
 1. Include search strategies, keywords, inclusion and exclusion criteria
 - B. Supports the problem statement
 - C. Identifies gaps in the literature
- VI. Conceptual and theoretical framework
 - A. Identify the theoretical underpinnings of the project that supports change
- VII. Methodology
 - A. Participants
 - B. Setting
 - C. Tools and/or instruments
 - D. Project Plan
 1. Detailed description of the interventions
 2. Outcomes that will be measured
 3. Resources needed
 4. Timeline
 - E. IRB approval (from the school and, if needed, from the organization)
- VIII. Evaluation Plan
 - A. Plan for data collection
 - B. Plan for data analysis
- IX. References
- X. Appendices

APPENDIX D: DNP PROJECT PROPOSAL - RUBRIC FOR THE PAPER

Student Name _____ Date _____

Printed Name _____

Title of Project _____

Element	Comments	Pass/Fail
Introduction: <ul style="list-style-type: none"> ● The problem is clearly identified ● The purpose statement is clear with specific objectives ● The project is congruent with organizational strategic plan ● Explain the relevance to nursing practice ● Anticipated facilitators and barriers are addressed 		
Literature Review: <ul style="list-style-type: none"> ● The summary of literature demonstrates thorough evaluation of the literature ● Supports the problem statement ● Supports the identified gap in the knowledge 		
Theoretical Framework: <ul style="list-style-type: none"> ● Provides underpinnings for change ● Provides a framework for the project 		
Methods: <ul style="list-style-type: none"> ● The needs and feasibility assessment adequately identify the organizational issues ● Project design is conducive to successful implementation of the proposal ● Setting is identified ● Population/sample are identified ● Tools/instruments selected will accurately measure the intended outcomes ● A detailed description of the project intervention is provided ● Identifies a reasonable timeline for project implementation and completion ● Human Subject protection is addressed (IRB approval or exemption) ● If applicable: <ul style="list-style-type: none"> ○ Cost benefit and market analysis or business and financial plan is identified ○ Budget is identified 		
Element	Comments	Pass/Fail

<p>Evaluation:</p> <ul style="list-style-type: none"> ● Plan for data collection is articulated ● Plan for data analysis is articulated 		
<p>APA/Scholarliness:</p> <ul style="list-style-type: none"> ● Correct APA format ● Writing is logical and coherent ● Transitions are smooth and effective ● Proper APA mechanics, style, and quality ● No (or few) spelling, punctuation, or grammatical errors ● Writing is organized, clear, and concise 		

APPENDIX E: DNP PROJECT PROPOSAL - RUBRIC FOR THE ORAL DEFENSE

Student Name

Date

Printed Name

Title of Project

Element	Met	Not Met	Comments
A. The gap in practice, problem, and purpose are clearly articulated, worthy of doctoral study, and within the scope of the DNP role.			
B. The DNP Project Proposal applies leadership skills to lead healthcare systems and/or teams to improve the health outcomes of individuals, communities, or populations through interdisciplinary collaboration and implementation of high-quality and cost-effective practice changes.			
C. The DNP Project proposal has the potential to advance nursing practice and promote positive social change in individuals, society, systems, and/or communities.			
D. Presenter maintained professional manner throughout including good eye contact. Did not read from prepared notes.			
E. Presentation was professional, well-prepared, clear, and concise.			
F. Presentation stayed within the time limit.			
G. Response to questions and challenges were concise, thorough, and not defensive.			

APPENDIX F: DNP SCHOLARLY PROJECT - OUTLINE FOR THE PAPER

- I. Title Page
- II. Executive Summary
- III. Table of Contents
- IV. Figures and Tables List
- V. Introduction
 - A. Problem statement
 - B. Purpose with specific objectives
 - C. Congruence with organizational/system strategic plan
 - D. Relevance to nursing practice
 - E. Facilitators and barriers
- VI. Literature review
 - A. Summary of the literature search
 1. Include search strategies, keywords, inclusion and exclusion criteria
 - B. Supports the problem statement
 - C. Identifies gaps in the literature
- VII. Conceptual and theoretical framework
 - A. Identify the theoretical underpinnings of the project that supports change
- VIII. Methods
 - A. Needs assessment
 - B. Project design
 - C. Setting
 - D. Population/sample
 - E. Tools and/or instruments that were used
 - F. Project plan including the timeline
 - G. IRB approval or documentation of exempt status
- IX. Evaluation
 - A. Data analysis
 - B. Key findings
- X. Discussion
 - A. Summary of major findings and outcomes
 - B. Limitations
 - C. Implications for the organization

D. Implications for practice change, future research, and health policy change

XI. Conclusion

A. What are the significance to healthcare and/or practice?

XII. Dissemination

A. The plan for dissemination is clear and reasonable

XIII. References

XIV. Appendices

APPENDIX G: DNP SCHOLARLY PROJECT - RUBRIC FOR THE PAPER

Student Name _____ Date _____

Printed Name _____

Title of Project _____

Element	Comments	Pass/Fail
Executive Summary: <ul style="list-style-type: none"> ● Concise (no longer than one page) ● Problem, purpose, conclusions, and recommendations are clearly stated ● Is self-sufficient, i.e. does not refer to the body of the report 		
Introduction: <ul style="list-style-type: none"> ● The problem is clearly identified ● The purpose statement is clear with specific objectives ● The project is congruent with organizational strategic plan ● Relevance to nursing practice is adequately addressed ● Facilitators and barriers are addressed 		
Literature Review: <ul style="list-style-type: none"> ● The summary of literature demonstrates thorough evaluation of the literature ● Supports the problem statement ● Supports the identified gap in the knowledge 		
Theoretical Framework: <ul style="list-style-type: none"> ● Provides underpinnings for change ● Provides a framework for the project 		
Methods: <ul style="list-style-type: none"> ● The needs and feasibility assessment adequately identified the organizational issues ● Project design was conducive to successful implementation of the proposal ● Setting was appropriate ● Population/sample provided significant data ● Tools/instruments selected were accurate measures of the intended outcomes ● Timeline for project was accurate ● Human Subject protection was maintained and ethical standards were adhered to throughout the project addressed ● If applicable: <ul style="list-style-type: none"> ○ Cost benefit and market analysis or business and financial plan was completed 		
Evaluation: <ul style="list-style-type: none"> ● The results were obtained and analyzed ● Key findings were clearly defined 		
Element	Comments	Pass/Fail
Discussion:		

<ul style="list-style-type: none"> ● Major findings and outcomes were summarized ● Limitations are clearly identified ● Implications to the organization are clearly identified ● Implications for practice change, future research, and/or health policy change are explained 		
<p>Conclusion:</p> <ul style="list-style-type: none"> ● The value of the DNP Project to foster change in healthcare is clearly identified and is relevant 		
<p>Dissemination:</p> <ul style="list-style-type: none"> ● The plan for dissemination is clear and reasonable 		
<p>APA/Scholarliness:</p> <ul style="list-style-type: none"> ● Correct APA format ● Writing is logical and coherent ● Transitions are smooth and effective ● Proper APA mechanics, style, and quality ● No (or few) spelling, punctuation, or grammatical errors ● Writing is organized, clear, and concise 		

APPENDIX H: DNP SCHOLARLY PROJECT - RUBRIC FOR THE ORAL DEFENSE

Student Name _____ Date _____

Printed Name

Title of Project

Element	Met	Not Met	Comments
A. The gap in practice, problem, and purpose are clearly articulated, worthy of doctoral study, and within the scope of the DNP role.			
B. The DNP Project applies leadership skills to lead healthcare systems and/or teams to improve the health outcomes of individuals, communities, or populations through interdisciplinary collaboration and implementation of high-quality and cost-effective practice changes.			
C. The DNP Project has the potential to advance nursing practice and promote positive social change in individuals, society, systems, and/or communities.			
D. Presenter maintained professional manner throughout including good eye contact. Did not read from prepared notes.			
E. Presentation was professional, well-prepared, clear, and concise.			
F. Presentation stayed within the time limit.			
G. Response to questions and challenges were concise, thorough, and not defensive.			

APPENDIX I: DNP PRACTICE EXPERT/MENTOR AGREEMENT

The DNP Practice Expert/Mentor is an essential part of the DNP Project Team. You act as liaison between the student and the organization. In this role, you facilitate the student's navigation through the organization's processes to ensure student success. These are some of the specific criteria related to this role:

1. Should be a member of the organization (or a similar organization) in which the project is being conducted.
2. Is not required to be a RN or have doctoral preparation
3. Serves as content expert
4. Review the Project Leader's personal goals for the project implementation.
5. Is not expected to edit the student's work
6. Advises Project Leader in the site requirements for doing the project
7. Advises Project Leader in the logistics of conducting the project
8. Provide timely feedback which includes responding to emails within 72 hours
9. Communicates with the DNP Project Lead Faculty throughout the semester regarding the Project Leader's progress toward goal attainment.
10. Provide a current CV/resume
11. Verify accuracy of the student's attendance log. It is the responsibility of the student to maintain accuracy of the log. Practice Mentors are requested to verify students' attendance to Practicum hours during the semester evaluation. A log for verification of attendance is also required and will be provided by the student (see Appendix K).
12. Complete Practice Mentor's evaluation of student
13. Required to be at the proposal and final defense (in-person or virtual)
14. The DNP Project Lead Faculty will contact the Practice mentor at the beginning and end of each semester.

Student Name

Date

Student Printed Name

Title of Project

I agree to serve as the DNP Practice Expert/Mentor for the duration of the DNP Project.

Expert/Mentor Name

Date

Expert/Mentor Printed Name

Title

**APPENDIX J: CHECKLIST FOR ITEMS DUE
SIGNIFYING COMPLETION OF PROGRAM REQUIREMENTS**

Student Name: _____ Student ID #: _____

DNP Project Title: _____

Name of DNP Project Team members:

Lead Faculty: _____

Practice Expert/Mentor: _____

DNP Student (peer): _____

Other (optional): _____

The DNP Project Team Lead Faculty will track the items that are due from the student using this form. The form will be submitted, along with all of the required documents, at the end of the program. This form becomes a part of the student’s permanent record indicating partial achievement of program requirements for degree conferral.

ITEM	Date Submitted	Faculty Initials
✓Fully executed valid Affiliation Agreement with the organization where the practicum hours will be completed. (Student is responsible for confirming with the Program Co-Directors that an agreement is in place. Failure to do so prior to logging practicum hours may result in a loss of those hours.)		
✓DNP Practice Mentor/Expert signed agreement		
✓Statement from GC or EMU IRB that the project is exempt or approved		
✓Statement from the site’s IRB that the project is exempt or approved (as appropriate)		
✓		
✓DNP Project Proposal Oral Defense Results Form		
✓DNP Final Project Oral Defense Results Form		
✓Documentation of at least 600 practicum hours		
✓Satisfactory completion of all coursework		
✓Completed DNP Essentials Grid		

Signature of lead faculty

Date

APPENDIX L: DNP PROJECT PROPOSAL - ORAL DEFENSE RESULTS FORM

_____, _____ has successfully
(Name of Student) (Student ID #)

defended her/his DNP Project Proposal titled: _____.
The project has been approved for implementation.

DNP Lead Faculty Date

Practice Expert/Mentor Date

DNP Student Member Date

DNP Program Co-Director Date

DNP Program Co-Director Date

APPENDIX M: DNP FINAL PROJECT - ORAL DEFENSE RESULTS FORM

_____, _____ has successfully
(Name of Student) (Student ID #)

defended her/his DNP Project Proposal titled: _____
and is ready for conferral of degree.

Oral defense approved Date: _____

Final Paper approved Date: _____

DNP Lead Faculty Date

Practice Expert/Mentor Date

DNP Student Member Date

DNP Program Co-Director Date

DNP Program Co-Director Date