

#### **MEMORANDUM**

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TO:

Chair, Faculty Senate

FROM:

Dean Terri Scandura Graduate School

Terri A Scanding

DATE:

30 April 2008

SUBJ:

Approval of Nursing Graduate Program Review

At the April 24<sup>th</sup>, 2008 meeting of the Graduate Council, the graduate program review for the School of Nursing was approved unanimously by those present.

CC: Nursing, Dean

Nursing, GPD SACS Office Faculty Senate

**Graduate School Program Review File** 



### MEMORANDUM

To:

Donna E. Shalala

President

From:

Stephen Sapp

Chair

Date:

April 30, 2008

Subject: Faculty Senate Legislation #2007-44(B) - School of Nursing and Health Studies

Proposal for a Doctorate in Nursing Practice (DNP) Degree

Herlien Doyg

The Faculty Senate, at its April 23, 2008, meeting, voted unanimously to approve the School of Nursing and Health Studies Proposal for a Doctorate in Nursing Practice (DNP) Degree ) with the proviso that the Provost shall report to the Senate on the status within three years of the establishment. Periodic reviews will be conducted by the Senate every five years. 2

The proposal is enclosed for your reference.

This legislation is now forwarded to you for your action.

SS/rh

Enclosure

cc:

Thomas LeBlanc, Executive Vice President and Provost

David J. Birnbach, Vice Provost for University Administration and Faculty Affairs

Nilda Peragallo, Dean, School of Nursing and Health Studies

Teresa Scandura, Dean, Graduate School

JoAnn Trybulski, Professor, School of Nursing and Health Studies

Legislation #95012(D) - Evaluation of New Graduate Programs

Faculty Manual section C18.2.3 "Periodic five year reviews may be conducted on all programs, centers, institutes and similar academic units as deemed appropriate by the Faculty Senate or the Executive Vice-President and Provost."

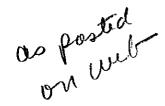
Faculty Senate Legislation #2007-44(B) – School of Nursing and Health Studies Proposal for a Doctorate in Nursing Practice (DNP) Degree

## PRESIDENT'S RESPONSE

APPROVED: DATE: My 8 wv 8 (President's Signature)
OFFICE OR INDIVIDUAL TO IMPLEMENT: <u>DEAN NEWA PERAGALLO</u>
EFFECTIVE DATE OF LEGISLATION: Immediately (if other than June 1 next following)
NOT APPROVED AND REFERRED TO:
REMARKS (IF NOT APPROVED):



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[Please contact the Senate office to view this proposal.]

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Faculty Senate Legislation #2007-44(B) – School of Nursing and Health Studies Proposal for a Doctorate in Nursing Practice (DNP) Degree

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REMARKS (IF NOT APPROVED):

[Please contact the Senate office to view this proposal.]

## UNIVERSITY OF MIAMI SCHOOL OF NURSING AND HEALTH STUDIES

PROPOSAL TO ADD
THE DOCTORATE IN NURSING PRACTICE (DNP)
DEGREE

**NOVEMBER 2007** 

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## PROPOSAL TO ADD THE DOCTORATE IN NURSING PRACTICE DEGREE (DNP)

#### 1. RATIONALE

#### a. Overview

The American Association of Colleges of Nursing (AACN) is a professional organization influencing nursing practice. The AACN accredits both nursing programs and individual nursing practitioners through its autonomous arm, the Commission on Collegiate Nursing Education (CCNE) who insures the quality and integrity of undergraduate and graduate education programs. The University of Miami School of Nursing and Health Studies (SONHS) is accredited by CCNE. In October 2004, the 617 AACN member institutions endorsed the *Position Statement on the Practice Doctorate in Nursing*, calling for moving the current level of preparation for advanced specialty nursing practice from the master's degree level to the doctorate level by the year 2015 (AACN position, 2004). Multiple faculty and deans at 226 sites participated in subsequent forums and two years later, the Essentials of Doctoral Education for Advanced Practice was published and endorsed by the AACN membership in October 2006 (*AACN Annual*, 2007, p.8).

Additionally, the National Academy of Sciences (NAS) report supported the development of a "non-research clinical doctorate in nursing." (DNP) (Advancing the Nation's, 2005 p.74) The vision for nurses prepared with the DNP is that they will be practice experts, capable of designing and evaluating practice systems and health care delivery innovations. The AACN and NAS endorsements of the DNP, plus the compelling literature in support of the DNP, have precipitated the proposed development of a Doctor of Nursing Practice (DNP) program at the University of Miami.

## b. History

The SONHS has been offering a Master of Science in Nursing (MSN) since 1980 to prepare nurses for roles as nurse practitioners and nurse executives. "Nurse practitioners (NP) are licensed independent practitioners who practice in ambulatory, acute and long term care as primary and/or specialty care providers. According to their practice specialty, they provide nursing and medical services to individuals, families, and groups." (Scope of practice, 2007, p.1) There are approximately 115,000 NPs practicing in the United States who write over 511 million prescriptions annually, 62% see three to four patients per hour, 12% see over 5 patients per hour, and each year there are approximately 6,000 new NPs (AANP workforce, 2007).

Entry level preparation to become a nurse practitioner is at the master's, post master's or doctoral level and the State of Florida requires that individuals pass a specialty certification exam to be licensed. Lately, master's preparation has become credit heavy. In today's complex clinical environment demands advanced practice nurses to have increased knowledge in the clinical and basic sciences. Thus, the credit requirements for master's programs and the clinical hour requirements for credentialing have also increased to a point where these surpass master's credit requirements and some doctoral requirements in other disciplines. This opinion of the master's

preparation is also articulated in the AACN Position Statement which says, "The time spent in master's level nursing education is not congruent with the degree earned." (Lenz, 2005) The DNP is the next step in the nurse practitioner evolutionary chain.

The DNP is a relatively new degree. The first Doctor of Nursing degree with a practice focus was created by Case Western Reserve only twenty years ago. However, the introduction of a practice-focused doctorate is not a new concept. In addition to the venerated M.D., for some time there has been a major trend in other health disciplines to move the terminal practice degree to a terminal degree as in the cases of the PharmD in pharmacy, the AuD in audiology, and the DPT in physical therapy. Nursing has historically remained one of the few disciplines in health care for which a doctorate is not regarded as the highest and desired practice credit. (Lenz, 2005)

## c. Give the exact title of the degree

The SONHS is proposing to grant a new doctorate degree, Doctor of Nursing Practice. Candidates who are awarded this degree use the initials, DNP. This will be a practice-focused terminal degree, eventually replacing the current M.S.N. for advanced nurse practitioners.

# d. Discuss the purpose and goals of the degree

The DNP program will prepare advanced practice nurses to create, administer and evaluate practice interventions and systems for health care with the focus of reducing health care disparity. Graduates of the DNP program will become experts in advanced nursing practice, focusing heavily "on practice that is innovative and evidence-based, and reflecting the application of credible research findings" (AACN Essentials, 2006, p.3).

**DNP Program Objectives** 

- 1. Integrate knowledge, theories, and concepts from the biophysical, psychosocial, analytical, and organization sciences to develop ethical health care systems and new frontiers for nursing practice which assist with the resolution of health care disparities.
- 2. Evaluate research methods and findings to create an evidence base for nursing practice and health care delivery systems that are best practices and alleviate health care disparities.
- 3. Synthesize knowledge gained from traditional and innovative learning methods to lead quality, cost effective health care collaborations addressing health care disparities.
- 4. Demonstrate expert clinical judgment and knowledge of health care systems to design, deliver and evaluate evidence based care interventions to reduce health care disparities.
- 5. Model expert nursing practice and serve as a leader and mentor to assist other nursing colleagues achieve expert nursing practice.
- 6. Employ knowledge of health care policy and economics to develop and evaluate programs to address health care disparities.

# e. Assess the demand, including existing programs, and the job market, locally, in Florida, the Southeast, nationally and internationally

Since the compelling reason for instituting this program is based on a major shift in certification requirements in advanced practice nursing, the more important question regarding demand is found on the American Academy of Nurse Practitioners (AANP) website. In the FAQ's section AANP asks, "How will the transition to the Doctor of Nursing Practice (DNP) occur?" (AANP FAQ's, 2007) From this statement, one can assume that it is not a matter if a nurse practitioner will need a DNP to practice, but how this will be accomplished?

At the time of the AACN endorsement in 2004, only one nursing program granted the DNP degree, while some others, like Columbia and Drexel Universities had DrNP degrees as a terminal, practice focused doctorate for nursing. Over 140 DNP programs are in development nation wide to add to the 65 programs currently enrolling students (AACN Doctorate of Nursing Practice talking points, 2006). In schools of nursing ranked in the top 20, 9 currently have a DNP program. Nursing schools in the following institutions have DNP programs: University of Washington, University of Rochester, University of Maryland, John Hopkins, University of Illinois, University of Pittsburg, and Case Western Reserve University. In Florida, the University of South Florida, University of Florida, and University of North Florida have DNP programs. Florida Atlantic and Barry Universities are beginning their DNP programs in August, 2008. The other major nursing program credentialing body, the Commission on Collegiate Nursing Education (CCNE), is starting the process for accrediting DNP programs (AACN Doctorate of Nursing Practice talking points, 2006).

Additionally, there is a clear shortage of doctoral-prepared clinical faculty at universities across the nation, spurring concerns about the quality of nursing education at large. The National League for Nursing notes some trends that contribute to the nursing faculty shortage. The population of nursing faculty is aging, with 75% of current U.S. faculty expected to retire by 2019 and as a result, there is increased use of part-time faculty (Valiga, 2002). Part-time faculty in nursing are often master's level prepared and may hold other positions that limit their availability or may be ineligible to teach graduate level classes. While the first choice for teaching faculty at a research institution will continue to be a doctorate in research, practice-focus doctoral prepared faculty could do much to supplement clinical faculty and raise the level of teaching.

Our community affiliates are also watching the nursing field closely as they will most definitely be affected by the change in certification for their current advanced practice nurses. As they react to this change, we need to be prepared to help them. Discussions with international nursing colleagues from the Caribbean, Mexico, and Chile have produced interest in sending their current nursing faculty to our proposed DNP program.

## f. Discuss the relationship of the program to other cognate fields

In the course of planning the curriculum, there have been discussions about the DNP proposal with faculty members from the School of Business and the School of Education. The proposed DNP curriculum's specialty focus anticipates that students will take one to three courses at the Schools of Education, Business, or the Miller School of Medicine. The courses in health care

finance and health care policy were developed with input from a faculty member from the School of Business. Discussion is ongoing with members of the UM medical faculty about sites for the practice immersion experience in the clinical track.

# g. Discuss the relationship to undergraduate and graduate programs

We anticipate that students in the undergraduate nursing program will benefit from the SONHS DNP program. DNP students can potentially serve as instructors in selected clinical areas, laboratory sessions, and classes as part of their practice immersion or technology coursework.

The recommendation from the AACN that preparation for the advanced level of nursing practice be at the DNP level indicates that eventually our master's program offerings for nurse practitioners, nurse midwives, and nurse anesthetists will be replaced by a post-baccalaureate entrance point into a DNP degree. This transitional phase will be guided by the task forces and forums that are currently in place and being implemented by AACN and AANP to address this issue. The chart below compares the current Master of Science in Nursing degree (MSN) terminal objectives and the proposed DNP degree program objectives.

MSN Objectives	DNP Objectives
1. Synthesize knowledge from the sciences, humanities, and nursing as a basis for culturally competent and safe advanced practice nursing.	1. Integrate knowledge, theories, and concepts from the biophysical, psychosocial, analytical, and organization sciences to develop ethical health care systems and new frontiers for nursing practice which assist with the resolution of health care disparities.
2. Integrate specialized knowledge and skills in a selected area of advanced practice nursing.	4. Demonstrate expert clinical judgment and knowledge of health care systems to design, deliver and evaluate evidence based care interventions to reduce health care disparities.
3. Incorporate professional ethics and justice in the development of the advanced practice role.	6. Employ knowledge of health care policy and economics to develop and evaluate programs to address health care disparities.
4. Utilize research for the improvement of nursing practice and the advancement of nursing as an academic discipline.	2. Evaluate research methods and findings to create an evidence base for nursing practice and health care delivery systems that are best practices and alleviate health care disparities.
5. Provide leadership for the improvement of health care systems.	3. Synthesize knowledge gained from traditional and innovative learning methods to lead quality, cost effective health care collaborations addressing health care disparities.
6. Promote peer and interdisciplinary collaboration for the continued growth of advanced practice nursing.	5. Model expert nursing practice and serve as a leader and mentor to assist other nursing colleagues achieve expert nursing practice.

The DNP program will be offered in addition to the school's research-focused Doctor of Philosophy Degree (Ph.D.) program that produces nurses who generate knowledge and provide the evidence base for nursing practice. There is AACN support for the value of having both research-focused and practice-focused doctorate programs at institutions. According to AACN, "practice-focused programs place greater emphasis on practice and less emphasis on theory, meta-theory, research methodology, and statistics than is apparent in research-focused programs." (AACN Doctorate of Nursing Practice talking points, 2006). Practice-focused programs include integrative practice experiences and clinical immersions.

## 2. PHYSICAL RESOURCES

## a. Survey of library holdings

## Nursing Library - Core

CINAHL Plus (Ebsco) (1937 - present)

Cumulative Index of Nursing and Allied Health Literature is the most comprehensive index to nursing and allied health literature. Selected consumer health, biomedicine, and health sciences librarianship journals also indexed. Provides access to healthcare books, nursing dissertations, selected conference proceedings, standards of professional practice, educational software and audiovisual materials in nursing.

MEDLINE (Ebsco) (1930 - present)

From the U.S. National Library of Medicine (NLM) this database contains citations and abstracts from over 4,600 biomedical journals published worldwide.

MEDLINE (Ovid) (1980 to present)

From the U.S. National Library of Medicine (NLM) this database contains citations and abstracts from over 4,600 biomedical journals published worldwide.

**PubMed** 

Open-access service of the U.S. National Library of Medicine includes citations from MEDLINE back to the 1950s. Includes links to full text articles and other related resources.

Other

BioMed Central (Dates vary by title.)

BioMed Central is an independent open access publishing house providing immediate free access to peer-reviewed biomedical research.

ERIC (CSA) (1966 - present)

The ERIC (Educational Resources Information Center) database, sponsored by the U.S. Department of Education, is the world's largest source of education research and information.

Health and Psychosocial Instruments (1985 - present)

Provides descriptions of tests, manuals, rating scales and other instruments used to assess health and behavior.

National Academy Press Digital Library (1960s - present)

Searchable multidisciplinary digital library of full-text book length research studies and policy reports by

leading experts in their fields. Includes IOM publications.

PsycINFO (1872 - present)

PsycINFO, published by the American Psychological Association, is the most comprehensive index to research journals, books and dissertations in psychology.

Sociological Abstracts (1963 - present)

Indexes and abstracts sociology and related research literature published worldwide in journals and other serial publications.

Web of Science Citation Databases (Web of Knowledge) (1984 - present)

Provides access to current and retrospective multidisciplinary information from approximately 8,700 high impact research journals published worldwide. Unique cited reference searching allows navigation forward and backward through the literature to trace a path of research.

## Dictionaries & Encyclopedias

Access Science: Encyclopedia of Science & Technology

Searchable online version of the 9th edition (2002) of McGraw-Hill Encyclopedia of Science & Technology with new and updated content added regularly.

Oxford Reference Online (Current)

Oxford Reference Online contains about 100 general and subject dictionaries, and language reference works published by Oxford University Press. The collection is fully-indexed and cross-searchable. Public Web Sites

Ace Star Model of Knowledge Transformation

From the Academic Center for Evidence-Based Nursing at the University of Texas Health Science Center, San Antonio. The Star Model is a model for understanding the cycles, nature, and characteristics of knowledge that are utilized in various aspects of evidence-based practice (EBP).

The Nursing Theory Page

From the Hahn School of Nursing and Health Science this nursing theory page provides links to nursing theorists and theories. Updated June 2006.

#### Standards

Practice standards from the American Nurses Association are available in the Reference Collection of the Otto G. Richter Library where they are shelved by call number. Use the words "scope and standards" or "nursing standards" in the IBISWEB library catalog to view titles and call numbers.

National Guideline Clearinghouse (NGC)

Public resource for evidence-based clinical practice guidelines. NGC is an initiative of the Agency for Healthcare Research and Quality (AHRQ), U.S. Department of Health and Human Services.

Registered Nurses Association of Ontario (RNAO)

Freely available nursing best practice guidelines.

Statistics

Miami-Dade County

Miami-Dade County Health Department: Disease Control Includes Monthly Disease Report and Vital and Morbidity Statistics links.

#### Florida

#### Florida Charts

Behavior risk factor data obtained by survey of adults in Florida to obtain county level estimates of health behaviors contributing to morbidity and mortality.

#### **United States**

NCHS (National Center for Health Statistics)

Major source of health statistics from the CDC. Links to tabulated state data.

#### U.S. Census Bureau

Source for population, housing, economic, and geographic data.

International

UNICEF (United Nations Children's Fund): Monitoring and Statistics Links to statistics globally and by country.

#### WHO: Research Tools

Includes links to burden of disease statistics and much more.

- b. List additional library acquisitions needed and their estimated costs.
- c. Estimate the incremental library needs per year
- d. Demonstrate that library resources are adequate not only for instruction, but for the research faculty recruited as part of the program.

At present, the libraries at the University of Miami are deemed adequate for the proposed DNP program. The DNP students would have access to the Calder Medical Library, as well as Richter library on the Coral Gable campus Access to the important journals and databases is available for the students through their computers, or through the computers in the computer lab at the Christine Schwartz Center for Nursing and Health Studies Education. A librarian has been assigned to assist students and faculty in their studies and research. There should not be any additional demand for the DNP beyond the current demand of the SONHS programs.

# e. Discuss laboratory equipment and facilities of all types which will be needed

The clinical experiences will be held at off-campus locations in the facilities and laboratories of our partners and affiliates who include: U. Miami Miller School of Medicine - Jackson Memorial Medical Center, Center for Family Studies, the newly acquired Cedars Medical Center, Sylvester Comprehensive Cancer Center U. Miami, Bascom Palmer Eye Institute and 116 other facilities in and around the counties of South Florida. Finding clinical sites for the DNP students is expected to mirror the challenges the SONHS faces in finding appropriate clinical sites and preceptors for its MSN students.

In addition, the International Academy for Simulation and Research is a simulation lab providing handson experience for students. It is located in the M. Christine Schwartz Center which houses the SONHS.

## Simulation Lab

The International Academy for Clinical Simulation and Research is the nation's first comprehensive, high-fidelity simulation center designed for nursing and health science education. Encompassing 5,500 square feet on the second and third floors of the M. Christine Schwartz Center, the academy features: a three-bed simulation suite, a seven-bed adult laboratory, a seven-bed pediatric laboratory, a micro-simulation computer lab, and a conference room. Academy facilities replicate a variety of clinical settings including ICU, CCU, ER, OR/Perianesthesia, and Neonatal ICU, and "patients" include a full complement of high-fidelity simulators representing a range of ages and ethnic groups. Ceiling-mounted cameras and other strategically placed video equipment record simulation activities for subsequent viewing and transmit activities in real time for observation by students and faculty in the academy's conference room as well as the three interlinked "smart" classrooms. The academy's 24-station micro-simulation computer laboratory enables students to practice basic skills and review patient scenarios through CD-ROM programs and Web-based resources.

3rd Floor Micro-Simulation Lab, Room 333:
20 PCs with the following specifications (20 x \$1,525.15 = \$30,503.00):
Dell Optiplex GX620 Ultra Small Form Factor PCs
20" UltraSharp Flat Panel Monitor
2GB RAM
160GB Hard Drive
8X DVD+/-RW

## f. Give estimated costs of equipment on hand.

PRODUCT	QTY	Unit Cost	Total
Oxygen Supply Tubing	100	0.75	75.00
Nasal Cannual	100	0.81	81.00
Face Mask	50	1.38	69.00
Non-Rebreather Mask	50	2.44	122.00
Venturi Mask	25	3.69	92.25
Tracheostomy Mask, Adult	6	2.44	14.64
Tracheostomy Mask, Child	6	2.63	15.78
Tracheostomy Care Tray	6	4.88	29.28
RCI Humidifier, disposable	6	2.44	14.64
Nebulizer w/Tee Mouthpiece Tubing Reservoir and Universal			
Connector	4	2.38	9.52
Nebulizer w/Elongated Adult	4	3.63	14.52
Nebulizer w/Elongated Child	4	3.63	14.52
AirLife Corrugated Tubing, 6 feet	8	2.31	18.48
Bag-Valve-MaskAdult	4	250.00	1,000.00
Bag-Valve-MaskChild	3	250.00	750.00
Bag-Valve-MaskInfant	2	195.00	390.00
Oral Airway Kit, Complete Set	3	5.31	15.93
Nasal Airway Kit, Complete Set	3	8.13	24.39
Endotracheal Tube #7	20	8.13	162.60
Endotrachael Stylete	20	6.00	120.00
Shiley Trach with Disposable Inner Cannula	10	85.63	856.30
Thomas Tube Holder—Adult	20	4.38	87.60
Thomas Tube Holder—Child	20	4.38	87.60
Cath-N-Glove Suction Kits, 14 Fr	20	1.88	37.60
Yankauer Suction, with 6 ft tubing	10	5.00	50.00

Yankauer Suction, Each No-Touch Single Catheter, 14 Fr Nipple and Nut, each Mucus Specimen Trap Sterile, Each Chest Drainage Unit, Each Thoracic Catheter, 24 Fr Respiratory Exerciser Spirometer, Each	20	3.13	62.60
	20	2.48	49.60
	10	0.94	9.40
	10	3.38	33.80
	10	108.13	1,081.30
	10	8.69	86.90
	4	9.81	39.24
PRODUCT Syringe, SafePro Plus 3cc LL, 100/box Syringe, Excel Syringe with Needle, 3cc 22g x 1, 100/box Syringe, Excel Syringe with Needle, 10cc 22g x 1, 100/box Syringe, Excel Syringe TB, 1cc 27g x .5 Luer Slip 100/box Syringe, Excel Syringe with Needle, 5cc 22g x 1.5 Syringe, Excel Syringe, Insulin PA .5cc 28g x .5" 100/box	5	30.36	151.80
	5	14.99	74.95
	5	31.24	156.20
	5	16.24	81.20
	5	28.31	141.55
	5	15.63	78.15
Needle, Excel Needle, 25g x 5/8	4	7.49	29.96
Needle, Excel Needle, 21g x 1.5" 100/box	4	7.49	29.96
Needle, Excel Needle, 18g x1	4	7.49	29.96
Non-Latex Tourniquets	20	0.24	4.80
IV, Insyte Autoguard IV Catheter (pink), 20g x 1.16 IV, Scalp Vein Butterfly, 23g x 3/4" 50/Box IV, Intraosseous Needle, 16g, each IV, Tubing, B.Braun Standard IV Tubing-Primary 113", 1-Ysite IV, Tubing, B.Braun Standard IV Tubing-Secondary 40" IV, Central Line, Triple Lumen Catheter Set 7F x 8" IV, Dressing, Central Line, Central Line Dressing Tray with non-adhearing Dressing IV, Dressing, Tegaderm Transparent Dressing, 50/box 4" x 4 3/4" IV, Alcohol Prep Pads, Medium, 200/box IV, Multi-Medication Added Label, 500/roll IV, Sharps Container, 5 quart	10	169.99	1,699.90
	4	19.99	79.96
	6	17.36	104.16
	50	6.24	312.00
	50	2.49	124.50
	6	98.54	591.24
	6	9.06	54.36
	6	74.99	449.94
	4	2.49	9.96
	4	15.63	62.52
	6	4.06	24.36
Wound, Wound Measuring Guide	5	1.25	6.25
Suture, Suture Removal Kit, Each Suture, Office and Plastic Surgery Sutures, Silk/Black Braded – C6 _ 5.0 Thickness	20	1.88	37.60
	4	32.93	131.72
Tape, Hypoallergenic Paper Surgical Tape, 2"x10y 6/Box	10	8.74	87.40
PRODUCT Solution, IV, Normal Saline 0.9%, IV Solution - 50cc Solution, IV, Normal Saline 0.9%, IV Solution - 100cc Solution, IV, Normal Saline 0.9%, IV Solution - 250cc Solution, IV, Normal Saline 0.9%, IV Solution - 500cc Solution, IV, Normal Saline 0.9%, IV Solution - 1000cc Solution, IV, Sterile Water, IV Solution - 1000cc	50	2.56	128.00
	50	2.06	103.00
	50	2.13	106.50
	50	2.25	112.50
	50	2.56	128.00
	50	30.00	1,500.00

Solution, IV, Sterile Water, IV Solution - 250cc	50	51.00	2,550.00
PRODUCT	20	5.63	112.60
Medication, Inhaler, Aero Inhaler, 7.7g/100 metered actuations	20	3.03	112.00
Medication, Oral Medicaiton Set, 1-Box of Each Oral Med (11	100	173.34	17,334.00
different) Medication, Powder for Reconstitution 10mL Vial, 10			·
Boxes/Case	100	415.15	41,515.00
Medication, 10 mL Vial, Sterile Water 10 Boxes/Case	3	415.15	1,245.45
Medication, Ampule, Ampule 2mL, Sterile Water 20 Boxes/Case	1	1,129.55	1,129.55
Medication, EpiPen Trainer	3	5.31	15.93
Medication, Heparin Training Pac - 1000u/10,000u vials, 10			
Boxes/Case	2	473.45	946.90
Medication, Insulin, Insulin 70/30	6	1.56	9.36
Medication, Insulin, Insulin NPH/Regular Insulin, u100 10mL	_	10.04	00.69
Vials Sterile Water 20 Pacs/Box	2	49.84	99.68
Medication, 2mL Vial, Sterile Water 40 Vials/Box	3	43.70	131.10
Medication, Mini Vial 2mL, Sterile Water 40 Boxes/Case	1	1,660.60	1,660.60
Medication, Optic, Optc Drops, Sterile Water 100/Box	1	180.00	180.00 24.00
Medication, Patch, Nitro Derm, Each	40	0.60	9.40
Medication, Pill Spliter	2	4.70 116.88	9.40 116.88
Medication, Pill Crusher Pro Model, Each	1	2.49	2.49
Medication, Souffle Cups, 250/Bag	1 3	2.49 1.56	4.68
Medication, Medicine Cups, 100/Case	3 2	1.30	28.12
Medication, Nitr Derm 25/Box	2	14.00	20.12
Medication, Ampule, Ampule 2mL, Sterile Water 100	2	59.45	118.90
Ampules/Box	2	39.43	110,50
Irrigation, Solution, Sterile Water Irrigation, 500 mL Plastic			
Container	30	2.99	89.70
Irrigation, Solution, Normal Saline 0.9%, 500 mL Plastic			
Container	30	2.99	89.70
Container			
PRODUCT			06.00
Safety, Irrigation, Emergency, Emergency Eye Wash Station	3	28.74	86.22
Safety, Safety Glasses, Tomahawk, Blue Frame	100	3.38	338.00
Instruments, Instrument Bundle, 37 Common Instruments	1	146.19	146.19
Instruments, Mayo Hegar Needle Holder, 8" Straight	3	5.06	15.18
Instruments, May Instrument Stand, Single-Post	1	122.49	122.49
mistranients, may matument ound, on give 2 out			
	10	16.75	157.50
Dressings, 3M Steri-Drape Basic Set-up Pack	10	15.75 `27.00	157.50 162.00
Dressings, 3M Steri-Drape Surgical Pack	6		24.05
Dressings, Dressing Change Tray with Abdominal Pad, Each	5	4.81	<b>44.UJ</b>
PRODUCT			
Wound, Wound Drainage Suction Reservoir, "Hemovac"	5	9.38	46.90
Wound, Jackson Pratt, Jackson Pratt Wound Drainage System	5	28.69	143.45
14 Ontrol androom rates and an arrange and arrange and arrange and arrange and arrange and arrange arr			

Wound, Jackson Pratt, Style Tubing Wound, Irrigation Tray with Piston Syringe	5 5	16.19 1.94	80.95 9.70
Kits, Laparoscopy Tray, Latex Free	2	73.25	146.50
Kits, Sexual Assault Evidence Collection Kit	3	18.69	56.07
Kits, Forensic Science Wound Simulation Kit	1	743.75	743.75
Kits, Irrigation, Irrigation Tray with Bulb Syringe	5	1.94	9.70
Kits, Urinary, Closed Insert Foley Tray, Sterile, 16 Fr. 5cc	,	1.74	J.10
balloon	10	13.69	136.90
Kits, Gastric, Gastric Sump Tube, 14 Fr	20	3.13	62.60
Kits, Shroud, Adult Shroud Kit	10	5.73	57.30
Kits, Sinoud, Adult Sinoud Kit	10	3.73	31.30
Patient Care, Urinal, Male	5	1.07	5.35
EQUIPMENT			
Equipment, Exam Table	2	2,000.00	4,000.00
Equipment, Hillrom 894 ICU Bed (refurbished)	7	4,797.00	33,579.00
Equipment, Birthing Bed	1	3,000.00	3,000.00
Equipment, Bedside Table, gunstock	0	247.00	0.00
Equipment, Overbed Table, gunstock	16	200.00	3,200.00
Equipment, Air-shield Critical Care Infant Warmer	1	2,340.00	2,340.00
Equipment, Revolving Stool	16	113.00	1,808.00
Equipment, Foot Stool	4	40.00	160.00
Equipment, Accu-Check Advantage Kit	2	97.00	194.00
Equipment, X-ray View Box	2	146.00	292.00
Equipment, Transfer Board	1	61.00	61.00
Equipment, Aneroid Sphygmomanometer	2	121.00	242.00
Equipment, In-Room Sharps Diposal System with Glove			
Dispenser	20	62.00	1,240.00
Equipment, IV Stand, Chrome finish Adjustable	5	31.00	155.00
Equipment, Kangaroo Feeding Pump (Refurbished)	2	267.00	534.00
Equipment, IMED PC-2TX Dual Channel IV Pump (Refurbished)	4	866.00	3,464.00
Equipment, Gemini Alaris PC-4 Channel IV Pump (Refurbished)	2	1,399.00	2,798.00
Equipment, Isolation Cart	$\overline{1}$	716.00	716.00
Equipment, Medication Cart	2	1,171.00	2,342,00
Equipment, Emergency Cart Adult	2	1,146.00	2,292.00
Equipment, Emergency Cart Pedi		1,146.00	1,146.00
Equipment, Brosleow Pedi Emergency Kit	2	1,650.00	3,300.00
Equipment, Zoll Defibrillator	2	6,324.00	12,648.00
Equipment, Nu-Trach Cricothyroid Kit	2	170.00	340.00
Equipment, Laryngeal Mask, Size 4	2	199.50	399.00
Equipment, Combitube Training Kit Airway	4	82.50	330.00
Equipment, Macintosh Laryngoscope Set	4	229.00	916.00
Equipment, Miller Laryngoscope Set	4	267.00	1,068.00
Equipment, Wire Shelving	6	300.00	1,800.00
ndarburant II wa puari mb	•	200.00	-,
SIMULATORS		60 000 00	(0.000.00
Simulators, METI	1	68,000.00	68,000.00
Simulators, METI Pedi	1	68,000.00	68,000.00
Simulators, SimMan	4	29,800.00	119,200.00

Simulators, SimMan Nursing Kits for Training	2	6,309.00	12,618.00
Simulators, SimBaby	2	29,800.00	59,600.00
Simulators, Hal	1	19,995.00	19,995.00
Simulators, Hal 2 Touch Screen Monitors	1	2,000.00	2,000.00
Simulators, Noel - Birthing and OB Emergency	2	15,995.00	31,990.00
Simulators, Noer - Briting and OB Emergency Simulators, Virtual IV - Adult & Infant (Package of 4 systems, 2	-	,	•
	1	44,000.00	44,000.00
adult and 2 child)	Ô	160.00	0.00
Simulators, Microsimulation for all students	0	99.00	0.00
Simulators, Heart Code ACLS System	0	99.00	0.00
Simulators, Heart Code ACLS Anywhere			0.00
Simulators, Virtual Clinical Excursions Development	0	100,000.00	0.00
COMPUTERS			
Computer, Dell Desktop XPS600	26	1,619.00	42,094.00
Computer, Dell Laptop-Inspiron 9300	6	1,249.00	7,494.00
Computer, Monitor Regular	40	479.00	19,160.00
Computer, Monitor Large	2	1,199.00	2,398.00
Computer, Laser Printer	4	1,799.00	7,196.00
	50	50.00	2,500.00
Computer, Microphone	20		•
TOTAL			\$672,721.73

## g. Space

The four-story M. Christine Schwartz Center features classrooms and clinical practice labs, seminar and conference rooms, a computer lab, and a simulation academy, all equipped with the latest technology. The first three floors of the 53,000-square-foot facility opened in fall 2006 at an approximate cost of \$16.3 million including maintenance endowment. The fourth floor is currently under construction for an estimated cost of \$4.2 million including the maintenance endowment.

Three "smart" high-technology classrooms offer an interactive learning environment and opportunities for distance instruction with clinical and educational partners around the globe. Each room features multifunctional presentation technology, allowing faculty to utilize the full range of computer-based instructional capabilities. Two side-by-side rooms on the first floor, 1,740 square feet each with a seating capacity of 96 individuals per room, are linked electronically to an 88-seat, 1,330-square-foot room on the third floor, creating a large "cyber auditorium." With a combined total of 280 seats, this "cyber auditorium" is available for classes and presentations by visiting speakers. A fourth floor of the building is under construction.

The Schwartz Center allows for scheduling of all doctoral classes in the building. There is a need for doctoral students to have a communal office/lounge area within the Schwartz Center. With the completion of the fourth floor, this should be possible.

# h. List any other physical resources such as office equipment, necessary to the proposal.

At the present time, the existing office equipment is sufficient for the new program.

## i. Estimate incremental laboratory equipment for succeeding years.

The equipment will be adequate for the program as the simulation lab is shared by undergraduate and graduate students.

#### 3. CURRICULUM

#### Overview

The AACN has provided schools of nursing with "The Essentials of Doctoral Education for Advanced Nursing Practice" whose guidelines were used in the curriculum development for the proposed DNP program. The document outlines eight foundational curricular elements and competencies that should be present in all DNP programs. The depth and focus of the core competencies, however will vary according to the particular specialty or role for which the student is preparing. These Essentials are:

- 1. Scientific Underpinnings for Practice
- 2. Organizational and Systems Leadership for Quality Improvement and Systems Thinking
- 3. Clinical Scholarship and Analytical Methods for Evidence-Based Practice
- 4. Information Systems/Technology and Patient Care Technology for the Improvement and Transformation of Health Care
- 5. Health Care Policy for Advocacy in Health Care
- 6. Interprofessional Collaboration for Improving Patient and Population Health Outcomes
- 7. Clinical Prevention and Populations Health for Improving the Nation's Health
- 8. Advanced Nursing Practice

The following chart maps the proposed DNP courses against the AACN's DNP Essentials.

### **DNP Courses with ANCC DNP Essentials**

DNP Courses	LiScientific Underpinnings for Practice	II:Organizational and Systems Leadership	III:Clinical Scholarship & Analytical Methods EB	IV:Technology for Info Systems and Patient Care	V:Health Care Policy for Advocacy	VI:Interprofessional Collaboration	VILClinical Prevention and Population Health	VIII:Advanced Nursing Practice
Evolution of Nursing Practice & Application of Theory in Practice	X					Х		X
Research I: Evaluating the Evidence for Practice			X		<u> </u>			
Population Based Health & Health Care Disparities		X				X	X	
Health Care Economics & Health Care Financing		X						
Technology in Advanced Nursing Practice			<u> </u>	X				
Research II: Biostatistical Applications		<u> </u>	X		<u> </u>			
Health Care Organization, Policy, and Effecting Change		X	<u> </u>		X	ļ	ļ	
Capstone I	X	X		<u> </u>	<u> </u>	X	Ĺ	X
Capstone II	X	X	X	X	X	X	<u> </u>	X
Specialty Cognate	X	Ĺ	<u> </u>					X
International Health		X		L	X	X	X	
Practice Immersion	X	X		$\mathbf{X}$	1	X	X	X

# b. List the major division or divisions of the discipline in which graduate degree work will be offered.

UMSONHS is an NIH funded Center for Minority Health. We have a PhD program to generate knowledge and provide the evidence base for nursing practice. This is our practice doctorate to prepare advanced nursing practitioners to create, administer and evaluate practice interventions and systems for health care with the focus of reducing health care disparity. There will be 3 tracks, clinical, education, administration Specialty cognates will be the only division of the discipline for the DNP core curriculum. These will correspond to the specialty areas in the field of advanced practice nursing. As nursing specialties evolve over time and new specialties emerge in the field, DNP students will have more choices of specialties in their curriculums.

# c. Evaluate the adequacy of your present undergraduate and graduate curricular structure for the proposed degree

The students who will be admitted to this program will be a licensed registered nurse and already have a master's degree in a specialty area. We will need to remain in compliance with our certifying body's (CCNE through the AACN) recommendations. Eventually, students will have a bachelor's degree and need specialty area courses before taking the core courses of the DNP program. This will provide a conduit from the undergraduate curriculum directly into the DNP, much the way the BSN currently transitions into the MSN program now. If progressing from

BSN to DNP, DNP nurses will be prepared to sit for the national specialty certifications for which they are qualified.

Until the MSN is completely phased out, graduate level classes will be offered for the master's and doctoral levels (DNP and PhD). Since the target date is 2015, this will give the SONHS several years to effectively transition.

d. List any anticipated additions, deletions and changes in your current curricular structure resulting from this new proposal. For each item, list the faculty involved

All of the courses for the DNP program are new. Course syllabi include information about the faculty who are planned to teach in the program.

e. List any current, anticipated, or agreed upon cooperative interdisciplinary work with other components of the University or with any extramural agency as pertinent to the program

See 1d, above

f. Provide a detailed description of the proposed program including program requirements

## 1) Prerequisites

Prospective students must have a current RN license and a MSN degree. Candidates with a non-nursing master's degree will be evaluated on a case by case basis. Prospective students for the clinical track must hold national certification as a nurse practitioner, nurse midwife, or nurse anesthetist

## 2) Courses

The proposed post master's DNP program consists of 3 semesters of full time study. The curriculum is composed of 38 credit hours of which 28 are didactic and 560 clinical hours. The courses are planned to be offered in a weekend format, monthly with web enhancement. The first class is anticipated to start in January, 2009. Part time options will be allowed, however some of the courses have prerequisite courses; these must be completed prior to taking certain courses. This will permit a wider market for the degree, as well as permitting students to maintain employment opportunities. These features are essential for us to remain competitive with other DNP programs locally and nationwide.

See Table 1 for the DNP courses. Course descriptions and syllabi can be found in Appendix A

## 3) Examinations

Examinations in each course will be used to assess student's ability to learn didactic material and apply this theoretical knowledge in practice. Projects or papers are planned as additional evaluative tools.

## 4) Capstone experience

There is no dissertation required in the DNP, as it is a practice focused doctorate. However, students are required to demonstrate mastery of expert practice knowledge by a capstone project, conducted over the last 2 semesters. This capstone project will require students to apply theory, supported by evidence and expert knowledge of nursing practice in completing a scholarly project of the student's or agency's choice. We will partner with community agencies and health care organizations who have need for a practice change initiative. Students will design and implement a practice change initiative under the direction of a faculty member and preceptor. DNP students will write a report of the experience, detailing the process and an evaluation of the project at the time of completion of the second semester.

## 5) Curriculum

Table 1 Proposed DNP

DNP Courses		Credits
Research I: Evaluating the	evidence for practice	3
Research II: Biostatistical	Applications for Advanced	3
Practice Nursing	1 II . 141	13
Population based Health ar	d Health care dispartites	_
Effecting Change in Health	Care Organizations &	3
Health Care Policy		
The Evolution of Nursing	Practice & Application of	3
Theory in Nursing Practice	<b>;</b>	
International Health		2
Technology in Advanced I	Practice Nursing 1 clinical	3
Ci	edit 4x14=56 clinical hrs.	<u> </u>
Health Care Economics &	Financing	3
Specialty focused cognate		3
	Experience 5 clinical credits	6
1	20x14=280 clinical hrs	
Capstone DNP project	4 clinical credits	6
	16x14 = 224 clinical hrs	

# 6) Sample track(s) for the degree

Proposed Curriculum Plan - Clinical & Administration Track# Credits

110posed Carriedada 2 ma					
·	Semester I				
3	Evolution of Nursing Practice and Application of Theory in Nursing Practice				
3	Research I: Evaluating the evidence for practice				
3	Population based Health and Health Care Disparities				
3	Health Care Economics and Health Care Financing				
	Semester II				
3	Capstone I				
3	Technology in Advanced Practice Nursing				
3	Research II: Biostatistical Applications for Advanced Practice Nursing				
3	Effecting Change in Health Care Organizations & Health Care Policy				
	Semester III				
3	Specialty Cognate				
2	International Health				
3	Capstone II				
6	Practice Immersion				
Total Credits 38					

Proposed Curriculum Plan - Education Track

# Credi	
	Semester I
3	Evolution of Nursing Practice and Application of Theory in Nursing Practice
	Research I: Evaluating the evidence for practice
3	Population based Health and Health Care Disparities
3	Specialty Education Cognate*
	Semester II
3	Capstone I
3	Technology in Advanced Practice Nursing
3	Research II: Biostatistical Applications for Advanced Practice Nursing
3	Specialty Education Cognate*
	Semester III
3	Specialty Education Cognate*
2	International Health
3	Capstone II
6	Practice Immersion
Total (	Credits 38

<sup>\*</sup> Specialty cognates must be graduate level courses in adult education theory & pedagogy, tests and measurements, or curriculum design.

7) Course descriptions (Syllabi are found in Appendix A)

The Evolution of Nursing Practice & Application of Theory in Nursing Practice This course is an overview of the conceptual foundations of nursing science and nursing practice. Knowledge from basic and applied sciences and ethics as well as the history of the global evolution of nursing practice are examined.

**Health Care Economics and Financing** 

This course is an overview of health care financing and core concepts of health care economics.

Research I: Evaluating the Evidence for Practice

This course is an analysis of evidence-based nursing practice. During the course, students acquire the knowledge base to resolve clinical practice problems and direct evidence-based practice.

Population Based Health and Health Care Health Disparities

This course is an overview of knowledge from nursing, public health and other disciplines for population based assessment. The importance of cultural and ethical dimensions in program development is included.

Effecting Change in Health Care Organizations & Health Care Policy

An exploration of health care organizations and health care policy, and how change is effected in both. Health care policy and planning to address health care disparities at the local, state, and federal levels will be explored. Organizational diagnosis, organizational change, and ethical dimensions of public policy formulations and implementation will be highlighted.

Technology in Advanced Practice Nursing

An exploration of the various aspects of the evolving technology to improve and transform health care and advanced practice nursing. This course prepares DNP nursing students to design, select and use technology to support, manage, and improve patient care and health care systems.

Research II: Biostatistical Applications for Advanced Practice Nursing

This course is an overview of the basic statistical concepts and computer applications related to healthcare, nursing, and biomedical research. A basic examination of parametric and nonparametric statistics in program evaluation, process outcomes, and/or basic research studies is included

Capstone I

The capstone project is a required synthesizing initiative for students to apply theory, supported by evidence and expert knowledge of nursing practice, by completing a scholarly project of the student's or agency's choice. Students may design a practice change initiative under the direction of a faculty member and preceptor.

## International Health

This course covers diverse topics that affect the health of the population and advanced practice

nursing internationally.

**Practice Immersion Experience** 

This course contains individually precepted learning experiences across the spectrum of advanced practice nursing in a variety of settings. Students will have either clinically focused, education focused or administration focused role immersion experiences.

Capstone II

This second capstone course is the implementation and evaluation of developed in Capstone 1.

## 1) Proposed schedule 2009

### # Credits

## Spring

- 3 Evolution of Nursing Practice and Application of Theory in Nursing Practice
- 3 Research I: Evaluating the evidence for practice
- 3 Population based Health and Health Care Disparities
- 3 Health Care Economics and Health Care Financing\*(for educator track, specialty cognate- see below).

#### Summer

- 3 Capstone I
- 3 Technology in Advanced Practice Nursing
- 3 Research II: Biostatistical Applications for Advanced Practice Nursing
- 3 Effecting Change in Health Care Organizations & Health Care Policy or Education cognates\*

#### Fall

- 3 Specialty Cognate
- 2 International Health
- 3 Capstone II
- 6 Practice Immersion

<sup>\*</sup> for the education track, these courses will be replaced by 2 additional specialty cognates, for a total of 3 for the education track. These specialty cognates must be graduate level courses from the School of Education in adult education theory & pedagogy, tests and measurements, or curriculum design.

# a. What kinds of teaching will prevail (i.e clinical, classroom, independent research, seminars, etc. and in what proportion?

The faculty of the SONHS is guided by professional pedagogical standards as set forth in (a) The Essentials of Master's Education for Advanced Practice Nursing (AACN, 1998); (b) Nursing: The Scope and Standards of Practice (ANA, 2004); (c) Florida Statutes, Chapter 464 and Florida Administrative Code, Chapter 64B9; and (d) Criteria for the Evaluation of Nurse Practitioner Programs (NTF, 2002). Teaching methods for courses include lecture, multimedia presentations, clinical and preceptor experiences, and simulation. Preceptor experiences for the students are individualized and will occur in a variety of settings appropriate for the student's specialty and course. In addition, courses may be delivered online in accordance with the University's guidelines.

## b. Indicate the potential distribution of graduate students among advisors.

A faculty advisor will be assigned to each student for the duration of the program. The faculty advisor's role in the DNP program is one of professional role modeling, support, advising on choice of specialty cognate courses, and advising on potential employment opportunities. The student's faculty advisor may also serve as the faculty of record for the student's capstone courses.

# c. Describe any colloquia series, special seminars, or conferences, which will be held.

DNP students will be encouraged to attend continuing education conferences as a method of socialization into their new role. Professors in some courses may require attendance at a specialty organization's monthly meetings as part of course requirements.

We are in the process of establishing an interdisciplinary seminar series for our master's students. We anticipate that the DNP students will be included in this series, as a way of building collaboration with peers and across disciplines. The DNP students will also have the opportunity to attend lectures and grand rounds at the medical center.

#### 4. FACULTY

# a. Include a complete vitae for each member of the department who will participate in the program.

Table 2 lists the faculty members who are eligible to participate in the proposed DNP. Curriculum vitae for full time faculty members are found in Appendix B

Table 2
Eligible DNP Faculty

Name	Terminal Degree	Rank	Area of Expertise
Dr. Rosina Cianelli	PhD Nursing	Associate Professor	International Health
Dr. Joseph DeSantis	PhD Nursing	Assistant Professor	Pediatric NP
Maite Garrido	MSN	Instructor	Education, Family NP
Jeanne Gottleib	MSN (PhD candidate)	Instructor	Nurse Midwife
Dr. Rosemary Hall	PhD Nursing	Associate Professor	Population based Health

Elaine Kauschinger	MSN (PhD candidate)	Instructor	Family NP
Dr. Denise Korniewicz	PhD Nursing	Professor	Research
Dr. Todd Ambrosia	PhD, DNSc Nursing	Associate Professor	Research, Family NP
Dr. Donna Shalala	PhD	Professor	Policy
Joanna Sikkema	MSN	Instructor	Acute Care NP
Annette Torres	MSN	Lecturer	Family NP
Dr. JoAnn Trybulski	PhD Nursing	Assistant Professor	Practice Issues
Dr. Doris Ugarriza	PhD Nursing	Associate Professor	Psych Mental Health NP
Dr. Steve Ullman	PhD	Professor	Health Care Economics

## b. Estimate the need for additional faculty

We are anticipating recruiting 1 additional faculty member for the DNP program. We have 1 master's prepared faculty who has started a DNP program and another who is in the process of completing applications to attend a DNP program.

c. Describe the interaction with other graduate programs, i.e. extradepartmental thesis and dissertation committees.

There are no changes anticipated from our current arrangement, as this program does not require a thesis or dissertation.

### 5. STUDENTS

- a. Estimate the number of students in the program and the pool from which they will come.
- b. Describe requirements for admission to and retention in each degree.
- c. Describe the need for and scientific use of teaching assistants and research assistances. Include the number of each and stipends.

We are planning to recruit 6 students in the initial cohort. Thereafter, 8- 10 students are expected to be admitted each fall semester. The anticipated enrollment is 20- 25 students in the first years of the program. As this is an emerging trend in nursing doctoral education, it is difficult to predict exact numbers. However, the formal adoption of the AACN requirements for certification in 2015 will increase the demand for the DNP degree, thereby having a positive impact on numbers. Classes for the proposed DNP will be held at the University on weekends. This will permit recruitment from a national pool of candidates.

# 1) Admission Requirements:

Prospective students must have a current RN license and a MSN degree. Candidates with a non-nursing master's degree will be evaluated on a case by case basis. Prospective students for the clinical track must hold national certification as a nurse practitioner, nurse midwife, or nurse anesthetist. All candidates must have an undergraduate GPA of

at least 3.0 on a 4.0 scale, and score at least 1000 combined verbal and math on the GRE exam. Three letters of recommendation are also required.

## 2) Retention in the program:

Students must maintain a minimum UM GPA of 3.0 (4.0 scale). Any student who fails to maintain a 3.0 will be placed on probation and has one additional semester to bring the average to 3.0. If a student fails to attain a UM GPA of 3.0 at the end of the probationary semester will be dismissed from the program and the UMSONHS. In addition, a student must have a grade of "B" to pass a course. If a course grade is less than a "B", the student must retake the course. A student is allowed to retake only one course. Failure to attain a "B" the second time a student takes a course or getting less than a "B" in a second course will result in the student's dismissal from the program and the UMSONHS.

We will primarily reserve our TA and RA positions for our PhD students. However, if additional positions are available, the DNP students will be considered.

### 6. ADMINISTRATION

- a. Estimate the administrative increments imposed by this program
- b. Describe the arrangements for administration and for academic direction of the program as it pertains to the following:
- 1) Need For Additional Secretarial Help
  The Office of the Dean of the SONHS makes staffing level determinations and coordinates
  secretarial support for the faculty and administration. We anticipate that we will need an
  additional administrative support person for the DNP program.
- 2) Office Equipment And Supplies

The SONHS is organized by department. Office supplies are ordered by staff as necessary and office equipment purchases are coordinated through the SONHS Business Director's office.

3) Travel and other funds

Faculty may request travel funds to attend conferences and meetings. The requests are reviewed and approved by the Dean of the SONHS. Planning is underway to incorporate input from the Associate Deans into a yearly travel allocation for each program.

4) The day to day administration of the program

The Associate Dean of Master's and DNP Programs is charged with the day to day administration of the master's and the DNP programs. The faculty works with the associate dean in the areas of advising and in academic matters. A program director has been assigned to the Nurse Anesthesia

program and lead faculty to the other specialty NP tracks. The Director of Graduate Admissions and her/his coordinator support the Associate Dean handling graduate student recruitment, admissions, registration, graduation, evaluation, and other duties as assigned.

# c. The academic policy-making mechanisms used to implement the program including the criteria for membership in the faculty of the program.

We currently have academic policy making mechanisms in place. Governance of the SONHS is articulated in the School of Nursing and Health Studies Faculty Handbook and the University of Miami Faculty Handbook. There is a Graduate Academic Standing, Admission, and Progressions committee, as well as a Graduate Faculty committee to assist with policy decisions. Initially, faculty members must hold a doctoral degree, or have an MSN with a area of specialization required to meet the instructional needs of the curriculum. Once we have a sufficient number of DNP prepared faculty, faculty members must hold a practice- focused or research—focused doctoral degree.

#### 9. BUDGET

## a. Three year projected budget

Faculty are shared across multiple programs and have varying teaching loads, based on whether they are tenured, tenure track, or clinical track. This makes exact calculation of costs a challenge. The chart below contains best estimates, given the multiple variables. We are projecting modest enrollment initially, as the experience of DNP programs in other university varies. Many programs have 30 students in each class, some have cohorts of 6 on a rolling admission basis. We prefer modest projections. However, if the recruitment is robust and we have 10 qualified candidates for the first cohort, we will not cap admissions at 6.

# School of Nursing & Health Studies Doctoral In Nursing Practice (DNP) Three Year Budget (2009-2011)

	2008-09	2009-10	2010-11	Total - 3 Year Projections
Projected Income (See Exhibit A)	330,636	462,880	668,272	1,461,788
Expenses				
Compensation Faculty	358,626	364,254	376,640	1,099,520
Administration One Secretary (1/2 Time) Program Director (25%)	20,431 33,989	21,123 35,146	21,838 36,341	63,392 105,476
Total Compensation	413,047	420,522	434,819	1,268,388
Other Program Expenses	51,500	53,045	54,636	159,181
Total Expenses	464,547	473,567	489,455	1,427,569
Net	(\$133,911)	(\$10,687)	\$178,817	\$34,219

Notes:

Tuition income reflects a 5% yearly increase

Compensation includes salary plus fringe benefits and reflects a yearly 3% salary increase.

Exhibit A
Tuition Income

Taltion income			
# of Credits	Price per credit	# of Students	Amount of Tuition Income
12	1,424	6	102,528
12	1,424	6	102,528
14	1,495	6	125,580
12	1,495	8	143,520
12	1,495	8	143,520
14	1,570	8	175,840
12	1,570	11	207,240
12	1,570	11	207,240
14	1,648	11	253,792
	12 12 14 12 12 14 12 14 12	# of Credits	# of Credits Price per credit # of Students  12 1,424 6 12 1,424 6 14 1,495 6 12 1,495 8 12 1,495 8 14 1,570 8  12 1,570 11 12 1,570 11

Exhibit b

FTE Required per Semester

# of Credits	FTE <sup>(1)</sup>
12	2.00
12	2.00
14	2.33
	12

<sup>(1)</sup> Tenure Track Faculty teaches six credits per semester

## b. Comparisons of competing programs

Comparison of the proposed UM DNP with other high quality programs.

The curriculum for the UM DNP was developed according to the AACN *DNPEssentials*. Some of the programs listed below predate the publication of the *Essentials* document and may not have all the curricular elements recommended by the AACN for DNP programs. The total cost for tuition per student is \$54,112 (38 credits, \$1424/credit) and is very competitive, given the higher credit requirements of some of the institutions. Table 3 compares the credits of the proposed UM DNP with 5 other AAU Schools.

Table 3 Comparison of Credits in other AAU Schools' DNP

Name	#credits	Med School
U of Washington	45	X
Columbia	40	X
U of Rochester	60 (approx.)	X
Case Western	27	X

		1
University of Maryland	1 38	i X
Officeration of many and	1 20	1
l .		

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## APPENDIX A - Proposed DNP Course Syllabi

### SEMESTER I

Course Number & Title:

NUR XXX The Evolution of Nursing Practice &

Application of Theory in Nursing Practice

Allocation of Credit:

3 credits, lecture (3 consecutive clock hours/week) lecture

Placement in Curriculum:

First semester, DNP

Faculty Responsible:

Dr. JoAnn Trybulski

Catalog Description:

This course is an overview of the conceptual foundations of nursing science and nursing practice. Knowledge from basic and applied sciences and ethics as well as the history of the global evolution of nursing practice are examined.

## Course Objectives:

- 1. Discuss the contributions from ethics and the psychosocial, biophysical, and organizational sciences to the development of nursing science.
- 2. Analyze how theories and concepts influence and enhance the development of nursing practice.
- 3. Examine the historical challenges to the evolution of nursing science and nursing practice.
- 4. Explore how the evolution of nursing science and practice impact the creation of new practice roles.

Course Number & Title:

Nursing XXX

Health Care Economics and Financing

Number of Credits and Clock Hours:

3 credits, lecture (3 consecutive clock hours per week)

Placement in Curriculum:

First Semester, DNP

Faculty Responsible:

Dr. Ullman - Business School

Prerequisites:

TBA

Co requisites:

**TBA** 

Course Description:

This course is an overview of health care financing and core concepts of health care economics.

Course Objectives:

- 1. Describe basic principles of health care economics.
- 2. Discuss the most common modes of health care financing and reimbursement mechanisms.
- 3. Evaluate the financial aspects inherent in practice initiatives.
- 4. Construct practice initiatives that assist with the resolution of health care disparities according to effective health care financing and economic principles.

Topics: Health care Financing, Reimbursement, Financial barriers, Cost containment mechanisms, market forces impacting health care economics, Practice and systems financial design and monitoring, ethics of health care financial decisions.

Course Number & Title:

Nursing XXX

Research I: Evaluating the Evidence for Practice

Number of Credits and Clock Hours: Placement in Curriculum:

3 credits, lecture (3 consecutive clock hours per week)

First Semester

Faculty Responsible:

Dr. Denise Korniewicz

Prerequisites: Co requisites:

Course Description:

This course is an analysis of evidence-based nursing practice. During the course, students acquire the knowledge base to resolve clinical practice problems and direct evidence-based practice.

- 1. Explain the steps in implementation of an evidence-based research project to address health care disparities.
- 2. Discuss the concepts of translational research and it's relationship to evidence-based practice.
- 3. Synthesize evidence-based practice guidelines, the existing knowledge base, and knowledge of the change process to determine when to initiate an evidence-based practice change.
- 4. Critique the evidence base for a variety of practice systems.
- 5. Evaluate clinical outcomes of an evidence-based practice research project or a change in clinical practice.
- 6. Evaluate the ethical components of the nursing research process.

Course Number & Title:

NUR XXX Population Based Health and Health

Care Health Disparities

Allocation of Credit:

3 credits, lecture (3 consecutive clock hours/week)

Placement in Curriculum:

First semester, DNP

Faculty Responsible:

Dr. Rosemary Hall

Co or pre requirements:

Effecting change in Health Care Organizations & Health Care Policy

Catalog Description:

This course is an overview of knowledge from nursing, public health and other disciplines for population based assessment. The importance of cultural and ethical dimensions in program development is included.

- 1. Synthesize knowledge from nursing, public health, and related disciplines for population based assessment leading to program development.
- 2. Compare nursing, public health, and other models of community assessment.
- 3. Identify the process of a needs assessment in a population or aggregate.
- 4. Evaluate care delivery models or strategies using accepted benchmarks of care for their impact on health care disparities, integrating ethical and cultural dimensions.

#### SEMESTER II

Course Number & Title:

**Nursing XXX** 

Effecting Change in Health Care Organizations &

Health Care Policy

Number of Credits and Clock Hours:

3 credits, lecture (3 consecutive clock hours per week)

Placement in Curriculum:

Second Semester

Faculty Responsible:

Drs. Donna Shalala & Steve Ullman

Course Description:

An exploration of health care organizations and health care policy, and how change is effected in both. Health care policy and planning to address health care disparities at the local, state, and federal levels will be explored. Organizational diagnosis, organizational change, and ethical dimensions of public policy formulations and implementation will be highlighted.

- 1. Describe organizational culture as it relates to various health care organizational structures.
- 2. Discuss the role of selected agencies, levels of government, individuals and interest groups in influencing health care policy.
- 3. Analyze health care policy proposals from the perspectives of multiple stakeholders involved in policy decisions.
- 4. Propose quality improvement strategies that effect and sustain change in organizations and policy.
- 5. Develop strategies to advocate for equity and ethical practices in health care policy and health care delivery systems.
- 6. Evaluate health care organizations and policy for the ability to address health care disparities.

Course Number & Title:

NUR 6XX Technology in Advanced Practice Nursing

Number of

Credits

2 credits, lecture (2 consecutive clock hours per week)
1 credit, clinical (4 clock hours per week, 56 hours total)

Placement in Curriculum:

Second Semester

Faculty:

Maite Garrido, MSN, APRN, BC

Prerequisites: Description:

Admission to Doctorate in Nursing PracticeCourse
An exploration of the various aspects of the evolving technology to
improve and transform health care and advanced practice nursing. This
course prepares DNP nursing students to design, select and use technology
to support, manage, and improve patient care and health care systems.

Course Objectives:

- 1. Demonstrate ability to use varied modes of technology in health care education, administration, or care delivery.
- 2. Evaluate modes of technology for use as components in a cost effective health care system.
- 3. Employ simulation technology in the varied roles of advanced practice nursing.
- 4. Examine the ethical dilemmas inherent in use of varied modes of health care technologies.
- 5. Synthesize varied modes of technologies to deliver consumer health care information.

Topics:

Include: telemedicine

computerized records
distance education techniques
patient monitoring techniques
simulation technology for patients, patients' families,
educators, and health care providers
legal issues & ethical issues related to modes of
technology
electronic medical records
clinical database design, evaluation

development of consumer health information

Course Number & Title:

**Nursing XXX** 

Research II: Biostatistical Applications for Advanced

Practice Nursing

Number of Credits and Clock Hours: Placement in Curriculum:

3 credits, lecture (3 consecutive clock hours per week)

Second Semester

Faculty Responsible:

**TBA** 

Prerequisites:

**TBA** 

Co requisites:

**TBA** 

Course Description:

This course is an overview of basic statistical concepts and computer applications related to healthcare, nursing, and biomedical research. A basic examination of parametric and non-parametric statistics in program evaluation, process outcomes, and/or basic research studies is included.

- 1. Assess requirements and assumptions of the various statistical procedures used in outcomes research.
- 2. Identify perspectives, specific aims, processes, applications, and data analysis procedures for parametric and non-parametric statistics.
- 3. Perform and interpret basic statistical analyses using computer statistical programs such as SPSS.
- 4. Evaluate various biostatistics used to study health and vulnerable populations.
- 5. Select appropriate biostatistical methods for a program or process improvement project.

Course Number & Title

NUR 6XX Capstone I

Number of Credits and Clock

Hours

1 credit lecture (1 lecture hour/week)

2 credits clinical (8 clinical hours/week) Total:112 hours

Placement in Curriculum:

Second Semester

Faculty:

Prerequisites:

Multiple faculty ( each student has a faculty supervisor)
Health Care Economics and Health Care Financing

The Evolution of Nursing Practice & Application of Theory in Nursing Practice

Research I

Population Based Health and Health Care Disparities

Pre or Co requisites

Effecting change in Health Care Organizations & Health Care Policy,

Course Description

The capstone project is a required synthesizing initiative for students to apply theory, supported by evidence and expert knowledge of nursing practice, by completing a scholarly project of the student's or agency's choice. Students may design a practice change initiative under the direction of a faculty member and preceptor.

**Course Objectives** 

- 1. Analyze existing models of care delivery and evidence based practice to improve healthcare outcomes.
- 2. Develop a care delivery initiative that addresses health care disparities.
- 3. Employ effective communication and collaboration skills in intraprofessional and interprofessional teams.
- 4. Integrate clinical expertise, leadership, technology, policy, research and business practice in the development of an evidence –based practice project.
- 5. Plan the financial, clinical or educational components of the project.

Topics

problem identification, interdisciplinary collaboration, evaluation of theories and evidence-based clinical practice, community needs assessment, program design and development

#### SEMESTER III

Course Number & Title:

**Nursing XXX** 

International Health

Number of Credits and Clock Hours:

2 credits, lecture (2 consecutive clock hours per week)

Placement in Curriculum:

Third Semester

Faculty Responsible:

Dr. Rosina Cianelli

Course Description:

This course covers diverse topics that affect the health of the population and advanced practice nursing internationally.

Course Objectives:

- 1. Analyze world health indicators and multidimensional forces that influence health care.
- 2. Discuss how health care delivery has changed internationally and how these changes are connected to advanced practice nursing.
- 3. Examine the relationship among culture, gender, spirituality, and ethics, as factors that influence the health practices of health care providers and patients internationally.
- 4. Discuss immigration issues and how immigration policies affect the utilization and design of nursing and health care systems.
- 5. Evaluate the global forces shaping and transforming global health care health systems and the role of nursing in this transformation.

Topics include:

Health care delivery systems, epidemiological indicators, disease management, gender, culture, ethics, spirituality, integrated medicine, and various countries' immigration policies

Course Number & Title:

NUR XXX Practice Immersion Experience

Number of Credits and Clock Hours:

1 credit, lecture (1 consecutive hour/week)

5 credits, clinical (20 clock hours per week, total of 280 clinical hours)

Placement in Curriculum: Faculty Responsible:

Third Semester, DNP Elaine Kauschinger, PhD(c)

Prerequisites:

DNP courses listed in first and second semester,

Pre or Co requisites:

International Health

Catalog Description:

This course contains individually precepted learning experiences across the spectrum of advanced practice nursing in a variety of settings. Students will have either clinically focused, education focused or administration focused role immersion experiences.

- 1. Develop professional interaction and partnerships to facilitate evidence based care and quality patient outcomes.
- 2. Design evidence based interventions to address health care disparities.
- 3. Demonstrate conceptual ability and technical competence for the selected advanced practice nursing role.
- 4. Synthesize knowledge of organizations and health care policy to influence health care and /or delivery of health care that is ethical and cost effective.
- 5. Create interdisciplinary collaborations that promote change in health care systems.

Course Number & Title

NUR 6XX Capstone II

Number of Credits and Clock

Hours

1 credit lecture (1 clock hour)

2 credits clinical (8 clinical clock hours/week) Total:112 hours

Placement in Curriculum:

Third Semester

Faculty:

Prerequisites

Multiple faculty (each student has a faculty supervisor)

Capstone I

**Course Description** 

This second capstone course is the implementation and evaluation of the

project developed in Capstone 1.

**Course Objectives** 

- 6. Implement a care delivery initiative to address health care disparities.
- 7. Appraise effective communication and collaboration skills in intraprofessional and interprofessional teams.
- 8. Integrate clinical expertise, leadership, technology, policy, research and business practice in the implementation of an evidence –based practice project.
- 9. Evaluate the financial, clinical or educational components relative to the project and the current and future needs of the patient population.

**Topics** 

Project management, Delivery of intervention, Evaluation of outcomes, policy and guidelines

"School of Nursing and Health Studies Proposal for a Doctorate in Nursing Practice (DNP) Degree"
FS agenda item 4-23-08
Page 41 of 41

APPENDIX B - Eligible DNP Faculty Curriculum Vitae

# **Faculty Senate Office**

From:

**Faculty Senate Office** 

Sent:

Monday, May 05, 2008 9:51 AM

To: Subject: Sapp, Stephen ADPC notes

Attachments:

2007-45(D)WomenandMinoritiesCommitteeReport.doc; 2007-44(B)

DrNursingPracticeDegree.doc

1) Legislation that has passed the Senate (attached):

Faculty Senate Legislation #2007-44(B) – School of Nursing and Health Studies Proposal for a Doctorate in Nursing Practice (DNP) Degree (pending President's approval) FYI – proposals are not included on our website, copies available from our office.

Faculty Senate Legislation #2007-45(D) – Women and Minorities Committee Report (President approval not required)

- 2) New senators elected see our web site for postings, and fyi, an email was sent to all deans and their assistants
- 3) Current officers were re-elected.
- 4) Reminder there are no Senate meetings during the summer, please let them know as an FYI deans are included on the email reminders as an information item only, our calendar is posted on our website, check it periodically as dates MAY change.
- 5) Reminder since this is a very common misunderstanding any new business that comes before the Senate, must first come before the General Welfare Committee, check our website for dates.
- 6) Is it appropriate to let them know that there are 7 faculty members who have appealed to the TRB this year?

That's all from us, Robyn

Faculty Senate Office
University of Miami
325 Ashe Administration Building
1252 Memorial Drive
Coral Gables, FL 33146
(305) 284-3721
Fax: (305) 284-5515
www.miami.edu/fs

# **Faculty Senate Office**

From:

Faculty Senate Office

Sent:

Thursday, May 01, 2008 3:10 PM

To:

Peragallo, Nilda P; Scandura, Teresa Anne; Trybulski, JoAnn T

Cc: Subject: Faculty Senate Office
Faculty Senate Legislation

Attachments:

2007-44B [DNP Degree].pdf

Attached is your copy of legislation #2007-44 that was sent to the President. This legislation requires Presidential approval before it goes to the Board of Trustees for their approval. I will send you a copy once the legislation has been approved by the President.

Thank you, Robyn

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# April 23, 2008 Faculty Senate minutes

The meeting, held in the BankUnited Center Hurricane 100 Room, opened at 3:32 p.m.

#### CHAIR'S REMARKS

The Chair highlighted his written Chair's Remarks and reminded Senate members to be mindful of the microphones and keep excessive noise away from mikes and also reminded them to speak loudly when addressing the body.

#### PRESIDENT'S REMARKS

The President explained that the Serpentine lot is being constructed and should be ready by fall, and the new building by the BankUnited Center is taking longer than usual. Next year the freshmen living on campus will not be allowed to bring cars, and to help them get around, UM will be selling old-fashioned bicycles with foot brakes.

She addressed the security concerns both on Medical campus and Gables campus, noting that cameras will be installed around campus, without invading anyone's privacy, and she reminded members to take basic precautions such as locking offices and stowing personal belongings out of sight.

The President commented on the major incident of cyber-theft on March 17 regarding tape data theft. The company truck that collects our data for storage was robbed and our tapes were taken. She noted that the theft was most likely random, and since the experts found that the tapes were not able to be opened, she feels that most likely the data were not compromised. Although it is not required that UM disclose the theft, we decided that there was a responsibility to let patients know. Since then, UM is looking at other secure ways to store our information. Joe Natoli stated that there was a task force to look at these issues across the University that will report in the fall. The President entertained questions from the floor.

There was discussion about the tragic death of a female student and the circumstances surrounding that event.

There was discussion on the "green" initiative, and Alan Fish was named as the contact person.

The Strategic Plan will go before the Board of Trustees on May 2. If approved the plan will cover five years, but it will be re-evaluated annually and the Board will reaffirm the plan each year

The President reported on the two dean searches at the Law School and Rosenstiel.

#### APPROVAL OF TODAY'S AGENDA

Item B3 was removed from the agenda because the GWC asked that wider consultation with certain other groups within the University be made before the proposal comes to the Senate and that has not been completed.

The meeting agenda passed unanimously.

#### APPROVAL OF MINUTES OF MARCH 26, 2008

The minutes of March 26, 2008, passed unanimously.

**OTHER ANNOUNCEMENTS** Steven Green, Senator from Arts and Sciences, thanked two retiring colleagues for their distinguished service to the University: Dr. Roosevelt Thomas, Vice President for Human Resources, and Professor Kamal Yacoub, Professor of Electrical and Computer Engineering.

#### UPDATE ON NEW STAFF COMPENSATION PLAN

Joe Natoli, Senior Vice President for Business and Finance, summarized the need for the new compensation plan. He explained the rates for people who are paid on grants and for people who are at the maximum in their band.

Roosevelt Thomas was presented with a letter from the Chair, thanking him for his years of service. Dr. Thomas then proceeded with an overview of the compensation plan. He pointed out the 18 pay bands with market-based salary ranges, which were consolidated from the current 242 pay categories, job families, and job titles. His staff has spent many hours making sure that people are appropriately categorized into the different bands. It will take two to three years to implement the plan fully so that all employees fall within the appropriate bands. He explained that this does not apply to faculty salaries. He and Debbie Wedderburn, Assistant Vice President, Human Resources, entertained questions from the floor, including the plans for on-line staff evaluations in the future.

# PROPOSED CRITERIA FOR DISTINGUISHED PROFESSORSHIPS

With the unanimous endorsement of the General Welfare Committee for action by the Faculty Senate, Dr. Thomas LeBlanc, Executive Vice President and Provost, detailed the efforts of the University to recruit senior faculty, combined with an anonymous donation for distinguished professorships. He gave an overview of the background materials. There was discussion on the process of how the distinguished faculty are chosen, and it was agreed that the word "voting" would be removed and that sentence modified to "after consultation with the full professors in the department." The last sentence of this section was changed to "once a decision has been made by the President."

A motion was made to approve the proposal. The motion was approved.

# SCHOOL OF NURSING AND HEALTH STUDIES PROPOSAL FOR A DOCTORATE IN NURSING PRACTICE (DNP) DEGREE

With the unanimous endorsement of the General Welfare Committee for action by the Faculty Senate, School of Nursing and Health Studies Dean Nilda Peragallo and Professor JoAnn Trybulski presented the proposal and pointed out that this program prepares nurses for clinical practice and not primarily for research and teaching as does the PhD already offered by the School. Many other

top schools have DNP programs, and about 140 others are planning to start such a program. This program is proposed with clinical, administration, and education tracks in it, and the Dean of the Miller School of Medicine has written a letter of support. Questions came from the floor about the number of faculty available to teach, and several Senators from the Miller School offered their endorsement for developing this program at the beginning of the trend toward DNPs, pointing out how important nurses are to healthcare.

A motion was made to approve the proposal. The motion was approved unanimously.

#### OTHER ANNOUNCEMENTS

Dean James Tien, College of Engineering, Member of the National Academy of Engineering, and a Distinguished Professor, was introduced and spoke briefly.

# FACULTY SENATE WOMEN AND MINORITIES COMMITTEE REPORT

Victoria Mitrani, Chair of the Women and Minorities Committee, presented the committee's report on women and minority faculty at the University and diversity issues. She then entertained questions and comments from the floor. It was suggested to drop "Gables and Rosenstiel" from the last sentence. It was agreed that the chair of the committee will convey to the School Council of the Miler School the sentiments of the objectives and goals that were highlighted in this report.

With the unanimous recommendation of the General Welfare Committee for action by the Faculty Senate with changes that have been incorporated into the report, *a motion was made and seconded* to approve bullets one and four, with four amended by dropping the "at Gables and RSMAS campuses." The motion was *approved unanimously*.

The Chair thanked the committee chair for her hard work on this report, for chairing the committee so effectively, and for working to improve the situation of women and minorities at UM.

#### REPORT OF THE NOMINATING COMMITTEE

Norman G. Einspruch, Chair of the Nominating Committee (which also included Marvin Dawkins, Patty Byers, Lynne Fieber, and Lenny Koniaris), presented the slate of officers that the committee proposes:

Chair:

Norman Altman and Stephen Sapp

First Vice Chair:

Sherrill Hayes and Tom Steinfatt

Second Vice Chair:

Tony Allegro and Rene Sacasas

#### INFORMATION ITEMS – COMMITTEE REPORTS

The Chair commented on the Tenure Review Board report that because of the change in the tenure clock and the date that denial letters went out, this is a year of transition. It is possible that some of the tenure review cases may be extended into the fall, depending on the availability of all of those involved.

He reminded members to volunteer and encourage their constituents to complete the volunteer forms for committee service. Committees are a great way to introduce faculty to the governing process.

"FS Meeting Minutes of April 23, 2008"
8-27-08 FS agenda item
Page 4 of 4

He thanked retiring senate members Kamal Yacoub, Lynn Durel, and Peter Tarjan for their past service and expressed appreciation for all of the Senate members who will not be returning to the Senate next year.

The meeting adjourned at 5:45 p.m. with a reminder that the new Senate will meet in one week at 4:00 p.m. for the sole purpose of electing next year's Senate officers and General Welfare Committee.

Respectfully Submitted, Robyn Hardeman Secretary of the Faculty Senate

# FACULTY SENATE MEETING AGENDA

# **For Senate Members Hurricane 100 Room BankUnited Center** April 23, 2008-3:30 P.M.

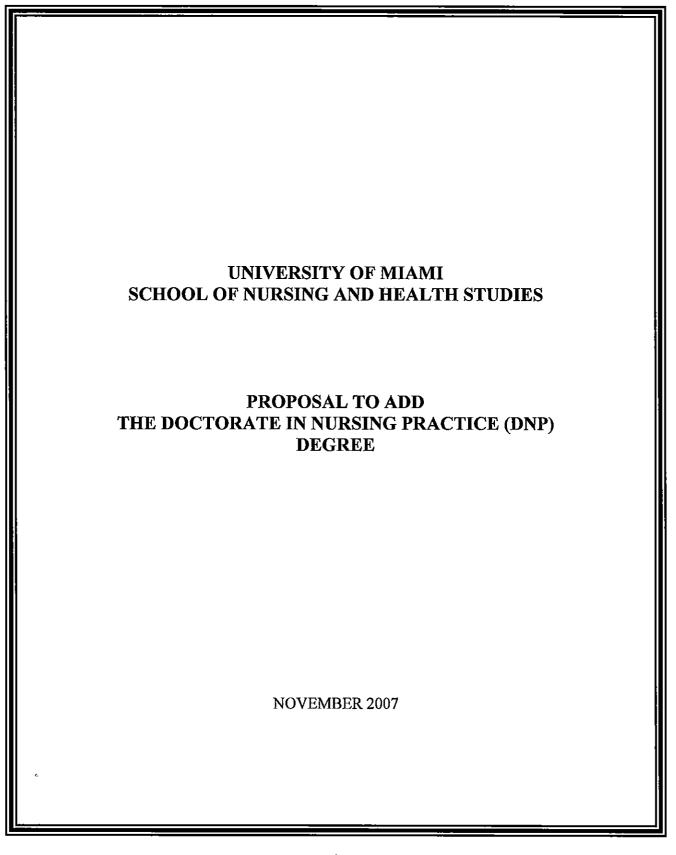
**CLICK HERE** for an agenda package of all materials except B4. CLICK HERE to print B4 (48 pages) (just click and print)

A.		Introductory Matters	Approx. Time
	A1.	Chair's remarks	3:30
	A2.	President's remarks	3:35
	A3.	Approval of today's agenda	3:55
	A4.	Approval of minutes of March 26, 2008	4:00
	A5.	Other announcements	4:05
В.	B1.	General Matters ## Update on New Staff Compensation Plan – INFORMATION ITEM – R. Thomas, D. Wedderburn	4:10
	B2.	# Proposed Criteria for Distinguished Professorships - T. LeBlanc	4:30
	В3.	# School of Communication Request for a Name Change from Communication Studies Program to Communication and Social Interaction M. Beatty	4:45
	B4.	# School of Nursing and Health Studies Proposal for a Doctorate in Nursing Practice (DNP) Degree # additional materials - J. Trybulski	4:55
	B5.	# Faculty Senate Women and Minorities Committee Report; # Diversity Report- Professor Victoria Mitrani	5:10
C.	C1.	Other Business Report of the Nominating Committee	5:35
D.	D1.	Information Items  #Various Annual Committee Reports (information items)  a) Tenure Review Board	5:40
		b) Committee on Rank Salary and Conditions of Employment	
		c) Budget and Compensation Committee	
		d) Facilities and Planning	
		e) <u>Academic Standards</u>	
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# related materials included

## materials will be sent separately

REMINDER: April 30<sup>th</sup>, Election Meeting, 4:00 p.m. (please note time)



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# PROPOSAL TO ADD THE DOCTORATE IN NURSING PRACTICE DEGREE (DNP)

#### 1. RATIONALE

#### a. Overview

The American Association of Colleges of Nursing (AACN) is a professional organization influencing nursing practice. The AACN accredits both nursing programs and individual nursing practitioners through its autonomous arm, the Commission on Collegiate Nursing Education (CCNE) who insures the quality and integrity of undergraduate and graduate education programs. The University of Miami School of Nursing and Health Studies (SONHS) is accredited by CCNE. In October 2004, the 617 AACN member institutions endorsed the *Position Statement on the Practice Doctorate in Nursing*, calling for moving the current level of preparation for advanced specialty nursing practice from the master's degree level to the doctorate level by the year 2015(AACN position, 2004). Multiple faculty and deans at 226 sites participated in subsequent forums and two years later, the Essentials of Doctoral Education for Advanced Practice was published and endorsed by the AACN membership in October 2006 (AACN Annual, 2007, p.8).

Additionally, the National Academy of Sciences (NAS) report supported the development of a "non-research clinical doctorate in nursing." (DNP) (*Advancing the Nation's*, 2005 p.74) The vision for nurses prepared with the DNP is that they will be practice experts, capable of designing and evaluating practice systems and health care delivery innovations. The AACN and NAS endorsements of the DNP, plus the compelling literature in support of the DNP, have precipitated the proposed development of a Doctor of Nursing Practice (DNP) program at the University of Miami.

#### b. History

The SONHS has been offering a Master of Science in Nursing (MSN) since 1980 to prepare nurses for roles as nurse practitioners and nurse executives. "Nurse practitioners (NP) are licensed independent practitioners who practice in ambulatory, acute and long term care as primary and/or specialty care providers. According to their practice specialty, they provide nursing and medical services to individuals, families, and groups." (Scope of practice, 2007, p.1) There are approximately 115,000 NPs practicing in the United States who write over 511 million prescriptions annually, 62% see three to four patients per hour, 12% see over 5 patients per hour, and each year there are approximately 6,000 new NPs (AANP workforce, 2007).

Entry level preparation to become a nurse practitioner is at the master's, post master's or doctoral level and the State of Florida requires that individuals pass a specialty certification exam to be licensed. Lately, master's preparation has become credit heavy. In today's complex clinical environment demands advanced practice nurses to have increased knowledge in the clinical and basic sciences. Thus, the credit requirements for master's programs and the clinical hour requirements for credentialing have also increased to a point where these surpass master's credit

requirements and some doctoral requirements in other disciplines. This opinion of the master's preparation is also articulated in the AACN Position Statement which says, "The time spent in master's level nursing education is not congruent with the degree earned." (Lenz, 2005) The DNP is the next step in the nurse practitioner evolutionary chain.

The DNP is a relatively new degree. The first Doctor of Nursing degree with a practice focus was created by Case Western Reserve only twenty years ago. However, the introduction of a practice-focused doctorate is not a new concept. In addition to the venerated M.D., for some time there has been a major trend in other health disciplines to move the terminal practice degree to a terminal degree as in the cases of the PharmD in pharmacy, the AuD in audiology, and the DPT in physical therapy. Nursing has historically remained one of the few disciplines in health care for which a doctorate is not regarded as the highest and desired practice credit. (Lenz, 2005)

# c. Give the exact title of the degree

The SONHS is proposing to grant a new doctorate degree, Doctor of Nursing Practice. Candidates who are awarded this degree use the initials, DNP. This will be a practice-focused terminal degree, eventually replacing the current M.S.N. for advanced nurse practitioners.

## d. Discuss the purpose and goals of the degree

The DNP program will prepare advanced practice nurses to create, administer and evaluate practice interventions and systems for health care with the focus of reducing health care disparity. Graduates of the DNP program will become experts in advanced nursing practice, focusing heavily "on practice that is innovative and evidence-based, and reflecting the application of credible research findings" (AACN Essentials, 2006, p.3).

#### **DNP Program Objectives**

- 1. Integrate knowledge, theories, and concepts from the biophysical, psychosocial, analytical, and organization sciences to develop ethical health care systems and new frontiers for nursing practice which assist with the resolution of health care disparities.
- 2. Evaluate research methods and findings to create an evidence base for nursing practice and health care delivery systems that are best practices and alleviate health care disparities.
- 3. Synthesize knowledge gained from traditional and innovative learning methods to lead quality, cost effective health care collaborations addressing health care disparities.
- 4. Demonstrate expert clinical judgment and knowledge of health care systems to design, deliver and evaluate evidence based care interventions to reduce health care disparities.
- 5. Model expert nursing practice and serve as a leader and mentor to assist other nursing colleagues achieve expert nursing practice.

- 6. Employ knowledge of health care policy and economics to develop and evaluate programs to address health care disparities.
  - e. Assess the demand, including existing programs, and the job market, locally, in Florida, the Southeast, nationally and internationally

Since the compelling reason for instituting this program is based on a major shift in certification requirements in advanced practice nursing, the more important question regarding demand is found on the American Academy of Nurse Practitioners (AANP) website. In the FAQ's section AANP asks, "How will the transition to the Doctor of Nursing Practice (DNP) occur?" (AANP FAQ's, 2007) From this statement, one can assume that it is not a matter if a nurse practitioner will need a DNP to practice, but how this will be accomplished?

At the time of the AACN endorsement in 2004, only one nursing program granted the DNP degree, while some others, like Columbia and Drexel Universities had DrNP degrees as a terminal, practice focused doctorate for nursing. Over 140 DNP programs are in development nation wide to add to the 65 programs currently enrolling students (AACN Doctorate of Nursing Practice talking points, 2006). In schools of nursing ranked in the top 20, 9 currently have a DNP program. Nursing schools in the following institutions have DNP programs: University of Washington, University of Rochester, University of Maryland, John Hopkins, University of Illinois, University of Pittsburg, and Case Western Reserve University. In Florida, the University of South Florida, University of Florida, and University of North Florida have DNP programs. Florida Atlantic and Barry Universities are beginning their DNP programs in August, 2008. The other major nursing program credentialing body, the Commission on Collegiate Nursing Education (CCNE), is starting the process for accrediting DNP programs (AACN Doctorate of Nursing Practice talking points, 2006).

Additionally, there is a clear shortage of doctoral-prepared clinical faculty at universities across the nation, spurring concerns about the quality of nursing education at large. The National League for Nursing notes some trends that contribute to the nursing faculty shortage. The population of nursing faculty is aging, with 75% of current U.S. faculty expected to retire by 2019 and as a result, there is increased use of part-time faculty (Valiga, 2002). Part-time faculty in nursing are often master's level prepared and may hold other positions that limit their availability or may be ineligible to teach graduate level classes. While the first choice for teaching faculty at a research institution will continue to be a doctorate in research, practice-focus doctoral prepared faculty could do much to supplement clinical faculty and raise the level of teaching.

Our community affiliates are also watching the nursing field closely as they will most definitely be affected by the change in certification for their current advanced practice nurses. As they react to this change, we need to be prepared to help them. Discussions with international nursing colleagues from the Caribbean, Mexico, and Chile have produced interest in sending their current nursing faculty to our proposed DNP program.

# f. Discuss the relationship of the program to other cognate fields

In the course of planning the curriculum, there have been discussions about the DNP proposal with faculty members from the School of Business and the School of Education. The proposed DNP curriculum's specialty focus anticipates that students will take one to three courses at the Schools of Education, Business, or the Miller School of Medicine. The courses in health care finance and health care policy were developed with input from a faculty member from the School of Business. Discussion is ongoing with members of the UM medical faculty about sites for the practice immersion experience in the clinical track.

# g. Discuss the relationship to undergraduate and graduate programs

We anticipate that students in the undergraduate nursing program will benefit from the SONHS DNP program. DNP students can potentially serve as instructors in selected clinical areas, laboratory sessions, and classes as part of their practice immersion or technology coursework.

The recommendation from the AACN that preparation for the advanced level of nursing practice be at the DNP level indicates that eventually our master's program offerings for nurse practitioners, nurse midwives, and nurse anesthetists will be replaced by a post-baccalaureate entrance point into a DNP degree. This transitional phase will be guided by the task forces and forums that are currently in place and being implemented by AACN and AANP to address this issue. The chart below compares the current Master of Science in Nursing degree (MSN) terminal objectives and the proposed DNP degree program objectives.

MSN Objectives	DNP Objectives
Synthesize knowledge from the sciences,     humanities, and nursing as a basis for culturally     competent and safe advanced practice nursing.	1. Integrate knowledge, theories, and concepts from the biophysical, psychosocial, analytical, and organization sciences to develop ethical health care systems and new frontiers for nursing practice which assist with the resolution of health care disparities.
Integrate specialized knowledge and skills in a selected area of advanced practice nursing.	4. Demonstrate expert clinical judgment and knowledge of health care systems to design, deliver and evaluate evidence based care interventions to reduce health care disparities.
3. Incorporate professional ethics and justice in the development of the advanced practice role.	6. Employ knowledge of health care policy and economics to develop and evaluate programs to address health care disparities.
4. Utilize research for the improvement of nursing practice and the advancement of nursing as an academic discipline.	2. Evaluate research methods and findings to create an evidence base for nursing practice and health care delivery systems that are best practices and alleviate health care disparities.
5. Provide leadership for the improvement of health care systems.	3. Synthesize knowledge gained from traditional and innovative learning methods to lead quality, cost effective health care collaborations addressing health care disparities.

for the continued growth of advanced practice 1	5. Model expert nursing practice and serve as a leader and mentor to assist other nursing colleagues achieve expert nursing practice.
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The DNP program will be offered in addition to the school's research-focused Doctor of Philosophy Degree (Ph.D.) program that produces nurses who generate knowledge and provide the evidence base for nursing practice. There is AACN support for the value of having both research-focused and practice-focused doctorate programs at institutions. According to AACN, "practice-focused programs place greater emphasis on practice and less emphasis on theory, meta-theory, research methodology, and statistics than is apparent in research-focused programs." (AACN Doctorate of Nursing Practice talking points, 2006). Practice-focused programs include integrative practice experiences and clinical immersions.

#### 2. PHYSICAL RESOURCES

# a. Survey of library holdings

#### Nursing Library - Core

## CINAHL Plus (Ebsco) (1937 - present)

Cumulative Index of Nursing and Allied Health Literature is the most comprehensive index to nursing and allied health literature. Selected consumer health, biomedicine, and health sciences librarianship journals also indexed. Provides access to healthcare books, nursing dissertations, selected conference proceedings, standards of professional practice, educational software and audiovisual materials in nursing.

#### MEDLINE (Ebsco) (1930 – present)

From the U.S. National Library of Medicine (NLM) this database contains citations and abstracts from over 4,600 biomedical journals published worldwide.

#### MEDLINE (Ovid) (1980 to present)

From the U.S. National Library of Medicine (NLM) this database contains citations and abstracts from over 4,600 biomedical journals published worldwide.

#### **PubMed**

Open-access service of the U.S. National Library of Medicine includes citations from MEDLINE back to the 1950s. Includes links to full text articles and other related resources.

#### <u>Other</u>

#### BioMed Central (Dates vary by title.)

BioMed Central is an independent open access publishing house providing immediate free access to peer-reviewed biomedical research.

#### **ERIC** (CSA) (1966 – present)

The ERIC (Educational Resources Information Center) database, sponsored by the U.S. Department of Education, is the world's largest source of education research and information.

### Health and Psychosocial Instruments (1985 – present)

Provides descriptions of tests, manuals, rating scales and other instruments used to assess health and behavior.

### National Academy Press Digital Library (1960s - present)

Searchable multidisciplinary digital library of full-text book length research studies and policy reports by leading experts in their fields. Includes IOM publications.

#### PsycINFO (1872 - present)

PsycINFO, published by the American Psychological Association, is the most comprehensive index to research journals, books and dissertations in psychology.

#### Sociological Abstracts (1963 – present)

Indexes and abstracts sociology and related research literature published worldwide in journals and other serial publications.

# Web of Science Citation Databases (Web of Knowledge) (1984 - present)

Provides access to current and retrospective multidisciplinary information from approximately 8,700 high impact research journals published worldwide. Unique cited reference searching allows navigation forward and backward through the literature to trace a path of research.

#### Dictionaries & Encyclopedias

#### Access Science: Encyclopedia of Science & Technology

Searchable online version of the 9th edition (2002) of McGraw-Hill Encyclopedia of Science & Technology with new and updated content added regularly.

#### Oxford Reference Online (Current)

Oxford Reference Online contains about 100 general and subject dictionaries, and language reference works published by Oxford University Press. The collection is fully-indexed and cross-searchable. Public Web Sites

## Ace Star Model of Knowledge Transformation

From the Academic Center for Evidence-Based Nursing at the University of Texas Health Science Center, San Antonio. The Star Model is a model for understanding the cycles, nature, and characteristics of knowledge that are utilized in various aspects of evidence-based practice (EBP).

#### The Nursing Theory Page

From the Hahn School of Nursing and Health Science this nursing theory page provides links to nursing theorists and theories. Updated June 2006.

#### Standards

Practice standards from the American Nurses Association are available in the Reference Collection of the Otto G. Richter Library where they are shelved by call number. Use the words "scope and standards" or "nursing standards" in the IBISWEB library catalog to view titles and call numbers.

#### National Guideline Clearinghouse (NGC)

Public resource for evidence-based clinical practice guidelines. NGC is an initiative of the Agency for Healthcare Research and Quality (AHRQ), U.S. Department of Health and Human Services.

# Registered Nurses Association of Ontario (RNAO)

Freely available nursing best practice guidelines.

**Statistics** 

#### Miami-Dade County

Miami-Dade County Health Department: Disease Control Includes Monthly Disease Report and Vital and Morbidity Statistics links.

#### Florida

#### Florida Charts

Behavior risk factor data obtained by survey of adults in Florida to obtain county level estimates of health behaviors contributing to morbidity and mortality.

#### **United States**

NCHS (National Center for Health Statistics)

Major source of health statistics from the CDC. Links to tabulated state data.

#### U.S. Census Bureau

Source for population, housing, economic, and geographic data.

International

#### UNICEF (United Nations Children's Fund): Monitoring and Statistics

Links to statistics globally and by country.

#### WHO: Research Tools

Includes links to burden of disease statistics and much more.

- b. List additional library acquisitions needed and their estimated costs.
- c. Estimate the incremental library needs per year
- d. Demonstrate that library resources are adequate not only for instruction, but for the research faculty recruited as part of the program.

At present, the libraries at the University of Miami are deemed adequate for the proposed DNP program. The DNP students would have access to the Calder Medical Library, as well as Richter library on the Coral Gable campus Access to the important journals and databases is available for the students through their computers, or through the computers in the computer lab at the Christine Schwartz Center for Nursing and Health Studies Education. A librarian has been assigned to assist students and faculty in their studies and research. There should not be any additional demand for the DNP beyond the current demand of the SONHS programs.

# e. Discuss laboratory equipment and facilities of all types which will be needed

The clinical experiences will be held at off-campus locations in the facilities and laboratories of our partners and affiliates who include: U. Miami Miller School of Medicine - Jackson Memorial Medical Center, Center for Family Studies, the newly acquired Cedars Medical Center, Sylvester Comprehensive

Cancer Center U. Miami, Bascom Palmer Eye Institute and 116 other facilities in and around the counties of South Florida. Finding clinical sites for the DNP students is expected to mirror the challenges the SONHS faces in finding appropriate clinical sites and preceptors for its MSN students.

In addition, the International Academy for Simulation and Research is a simulation lab providing handson experience for students. It is located in the M. Christine Schwartz Center which houses the SONHS.

#### Simulation Lab

The International Academy for Clinical Simulation and Research is the nation's first comprehensive, high-fidelity simulation center designed for nursing and health science education. Encompassing 5,500 square feet on the second and third floors of the M. Christine Schwartz Center, the academy features: a three-bed simulation suite, a seven-bed adult laboratory, a seven-bed pediatric laboratory, a micro-simulation computer lab, and a conference room. Academy facilities replicate a variety of clinical settings including ICU, CCU, ER, OR/Perianesthesia, and Neonatal ICU, and "patients" include a full complement of high-fidelity simulators representing a range of ages and ethnic groups. Ceiling-mounted cameras and other strategically placed video equipment record simulation activities for subsequent viewing and transmit activities in real time for observation by students and faculty in the academy's conference room as well as the three interlinked "smart" classrooms. The academy's 24-station micro-simulation computer laboratory enables students to practice basic skills and review patient scenarios through CD-ROM programs and Web-based resources.

3rd Floor Micro-Simulation Lab, Room 333:
20 PCs with the following specifications (20 x \$1,525.15 = \$30,503.00):
Dell Optiplex GX620 Ultra Small Form Factor PCs
20" UltraSharp Flat Panel Monitor
2GB RAM
160GB Hard Drive
8X DVD+/-RW

#### f. Give estimated costs of equipment on hand.

PRODUCT	QTY	<b>Unit Cost</b>	Total
Oxygen Supply Tubing	100	0.75	75.00
Nasal Cannual	100	0.81	81.00
Face Mask	50	1.38	69.00
Non-Rebreather Mask	50	2.44	122.00
Venturi Mask	25	3.69	92.25
Tracheostomy Mask, Adult	6	2.44	14.64
Tracheostomy Mask, Child	6	2.63	15.78
Tracheostomy Care Tray	6	4.88	29.28
RCI Humidifier, disposable	6	2.44	14.64
Nebulizer w/Tee Mouthpiece Tubing Reservoir and Universal			
Connector	4	2.38	9.52
Nebulizer w/Elongated Adult	4	3.63	14.52
Nebulizer w/Elongated Child	4	3.63	14.52
AirLife Corrugated Tubing, 6 feet	8	2.31	18.48
Bag-Valve-MaskAdult	4	250.00	1,000.00
Bag-Valve-MaskChild	3	250.00	750.00

Bag-Valve-MaskInfant	2	195.00	390.00
Oral Airway Kit, Complete Set	3	5.31	15.93
Nasal Airway Kit, Complete Set	3	8.13	24.39
Endotracheal Tube #7	20	8.13	162.60
Endotrachael Stylete	20	6.00	120.00
Shiley Trach with Disposable Inner Cannula	10	85.63	856.30
Thomas Tube Holder—Adult	20	4.38	87.60
Thomas Tube Holder—Child	20	4.38	87.60
Cath-N-Glove Suction Kits, 14 Fr	20	1.88	37.60
Yankauer Suction, with 6 ft tubing	10	5.00	50.00
· · · · · · · · · · · · · · · · · · ·	20	3.13	62.60
Yankauer Suction, Each			
No-Touch Single Catheter, 14 Fr	20	2.48	49.60
Nipple and Nut, each	10	0.94	9.40
Mucus Specimen Trap Sterile, Each	10	3.38	33.80
Chest Drainage Unit, Each	10	108.13	1,081.30
Thoracic Catheter, 24 Fr	10	8.69	86.90
Respiratory Exerciser Spirometer, Each	4	9.81	39.24
PRODUCT			
Syringe, SafePro Plus 3cc LL, 100/box	5	30.36	151.80
Syringe, Excel Syringe with Needle, 3cc 22g x 1, 100/box	5	14.99	74.95
Syringe, Excel Syringe with Needle, 10cc 22g x 1, 100/box	5	31.24	156.20
Syringe, Excel Syringe TB, 1cc 27g x .5 Luer Slip 100/box	5	16.24	81.20
Syringe, Excel Syringe with Needle, 5cc 22g x 1.5	5	28.31	141.55
Syringe, Excel Syringe, Insulin PA .5cc 28g x .5" 100/box	5	15.63	78.15
Syringe, Excel Syringe, insulin FA .5cc 26g x .5 100/00x	J	13.03	70.13
No. 46 Event Mondle 25 av 5/0	4	7.40	20.06
Needle, Excel Needle, 25g x 5/8	4	7.49	29.96
Needle, Excel Needle, 21g x 1.5" 100/box	4	7.49	29.96
Needle, Excel Needle, 18g x1	4	7.49	29.96
	• •		
Non-Latex Tourniquets	20	0.24	4.80
IV, Insyte Autoguard IV Catheter (pink), 20g x 1.16	1 <b>0</b>	169.99	1,699.90
IV, Scalp Vein Butterfly, 23g x 3/4" 50/Box	4	19.99	79.96
IV, Intraosseous Needle, 16g, each	6	17.36	104.16
IV, Tubing, B.Braun Standard IV Tubing-Primary 113", 1-Ysite	50	6.24	312.00
IV, Tubing, B.Braun Standard IV Tubing-Secondary 40"	50	2.49	124.50
IV, Central Line, Triple Lumen Catheter Set 7F x 8"	6	98.54	591.24
IV, Dressing, Central Line, Central Line Dressing Tray with non-	U	70.54	J)1,27
	6	9.06	54.36
adhearing Dressing	6		
IV, Dressing, Tegaderm Transparent Dressing, 50/box 4" x 4 3/4"	6	74.99	449.94
IV, Alcohol Prep Pads, Medium, 200/box	4	2.49	9.96
IV, Multi-Medication Added Label, 500/roll	4	15.63	62.52
IV, Sharps Container, 5 quart	6	4.06	24.36
Wound, Wound Measuring Guide	5	1.25	6.25
0 . 0 . D . 177 D 1	20	1.00	07.60
Suture, Suture Removal Kit, Each	20	1.88	37.60
Suture, Office and Plastic Surgery Sutures, Silk/Black Braded -	4	32.93	131.72

# $C6 \_ 5.0$ Thickness

Tape, Hypoallergenic Paper Surgical Tape, 2"x10y 6/Box	10	8.74	87.40
PRODUCT Solution, IV, Normal Saline 0.9%, IV Solution - 50ce Solution, IV, Normal Saline 0.9%, IV Solution - 100cc Solution, IV, Normal Saline 0.9%, IV Solution - 250cc Solution, IV, Normal Saline 0.9%, IV Solution - 500cc Solution, IV, Normal Saline 0.9%, IV Solution - 1000cc Solution, IV, Sterile Water, IV Solution - 1000cc Solution, IV, Sterile Water, IV Solution - 250cc	50 50 50 50 50 50 50	2.56 2.06 2.13 2.25 2.56 30.00 51.00	128.00 103.00 106.50 112.50 128.00 1,500.00 2,550.00
PRODUCT Medication, Inhaler, Aero Inhaler, 7.7g/100 metered actuations Medication, Oral Medicaiton Set, 1-Box of Each Oral Med (11	20	5.63	112.60
different)	100	173.34	17,334.00
Medication, Powder for Reconstitution 10mL Vial, 10 Boxes/Case Medication, 10 mL Vial, Sterile Water 10 Boxes/Case Medication, Ampule, Ampule 2mL, Sterile Water 20 Boxes/Case Medication, EpiPen Trainer Medication, Heparin Training Pac - 1000u/10,000u vials, 10 Boxes/Case Medication, Insulin, Insulin 70/30 Medication, Insulin, Insulin NPH/Regular Insulin, u100 10mL Vials Sterile Water 20 Pacs/Box Medication, 2mL Vial, Sterile Water 40 Vials/Box Medication, Mini Vial 2mL, Sterile Water 40 Boxes/Case Medication, Optic, Optc Drops, Sterile Water 100/Box Medication, Patch, Nitro Derm, Each Medication, Pill Spliter Medication, Pill Crusher Pro Model, Each Medication, Souffle Cups, 250/Bag Medication, Medicine Cups, 100/Case Medication, Nitr Derm 25/Box Medication, Ampule, Ampule 2mL, Sterile Water 100 Ampules/Box	100 3 1 3 2 6 2 3 1 1 40 2 1 1 3 2	415.15 415.15 1,129.55 5.31 473.45 1.56 49.84 43.70 1,660.60 180.00 0.60 4.70 116.88 2.49 1.56 14.06	41,515.00 1,245.45 1,129.55 15.93 946.90 9.36 99.68 131.10 1,660.60 180.00 24.00 9.40 116.88 2.49 4.68 28.12
Irrigation, Solution, Sterile Water Irrigation, 500 mL Plastic Container	30	2.99	89.70
Irrigation, Solution, Normal Saline 0.9%, 500 mL Plastic Container	30	2.99	89.70
PRODUCT Safety, Irrigation, Emergency, Emergency Eye Wash Station Safety, Safety Glasses, Tomahawk, Blue Frame	3 100	28.74 3.38	86.22 338.00

Instruments, Instrument Bundle, 37 Common Instruments	1	146.19	146.19
Instruments, Mayo Hegar Needle Holder, 8" Straight	3	5.06	15.18
Instruments, May Instrument Stand, Single-Post	1	122.49	122.49
Dressings, 3M Steri-Drape Basic Set-up Pack	10	15.75	157.50
Dressings, 3M Steri-Drape Surgical Pack	6	27.00	162.00
Dressings, Dressing Change Tray with Abdominal Pad, Each	5	4.81	24.05
PRODUCT Wound, Wound Drainage Suction Reservoir, "Hemovac" Wound, Jackson Pratt, Jackson Pratt Wound Drainage System Wound, Jackson Pratt, Style Tubing Wound, Irrigation Tray with Piston Syringe	5	9.38	46.90
	5	28.69	143.45
	5	16.19	80.95
	5	1.94	9.70
Kits, Laparoscopy Tray, Latex Free Kits, Sexual Assault Evidence Collection Kit Kits, Forensic Science Wound Simulation Kit Kits, Irrigation, Irrigation Tray with Bulb Syringe Kits, Urinary, Closed Insert Foley Tray, Sterile, 16 Fr. 5cc balloon Kits, Gastric, Gastric Sump Tube, 14 Fr Kits, Shroud, Adult Shroud Kit	2	73.25	146.50
	3	18.69	56.07
	1	743.75	743.75
	5	1.94	9.70
	10	13.69	136.90
	20	3.13	62.60
	10	5.73	57.30
Patient Care, Urinal, Male	5	1.07	5.35
EQUIPMENT Equipment, Exam Table Equipment, Hillrom 894 ICU Bed (refurbished) Equipment, Birthing Bed Equipment, Bedside Table, gunstock Equipment, Overbed Table, gunstock Equipment, Air-shield Critical Care Infant Warmer Equipment, Revolving Stool Equipment, Foot Stool Equipment, Foot Stool Equipment, Accu-Check Advantage Kit Equipment, X-ray View Box Equipment, Transfer Board Equipment, Aneroid Sphygmomanometer Equipment, In-Room Sharps Diposal System with Glove	2	2,000.00	4,000.00
	7	4,797.00	33,579.00
	1	3,000.00	3,000.00
	0	247.00	0.00
	16	200.00	3,200.00
	1	2,340.00	2,340.00
	16	113.00	1,808.00
	4	40.00	160.00
	2	97.00	194.00
	2	146.00	292.00
	1	61.00	61.00
	2	121.00	242.00
Dispenser Equipment, IV Stand, Chrome finish Adjustable Equipment, Kangaroo Feeding Pump (Refurbished) Equipment, IMED PC-2TX Dual Channel IV Pump (Refurbished) Equipment, Gemini Alaris PC-4 Channel IV Pump (Refurbished) Equipment, Isolation Cart Equipment, Medication Cart Equipment, Emergency Cart Adult Equipment, Emergency Cart Pedi	20 5 2 4 2 1 2 2	62.00 31.00 267.00 866.00 1,399.00 716.00 1,171.00 1,146.00 1,146.00	1,240.00 155.00 534.00 3,464.00 2,798.00 716.00 2,342.00 2,292.00 1,146.00

Equipment, Brosleow Pedi Emergency Kit	2	1,650.00	3,300.00
Equipment, Zoll Defibrillator	2	6,324.00	12,648.00
Equipment, Nu-Trach Cricothyroid Kit	2	170.00	340.00
Equipment, Laryngeal Mask, Size 4	2	199.50	399.00
Equipment, Combitube Training Kit Airway	4	82.50	330.00
Equipment, Macintosh Laryngoscope Set	4	229.00	916.00
Equipment, Miller Laryngoscope Set	4	267.00	1,068.00
Equipment, Wire Shelving	6	300.00	1,800.00
SIMULATORS			
Simulators, METI	1	68,000.00	68,000.00
Simulators, METI Pedi	1	68,000.00	68,000.00
Simulators, SimMan	4	29,800.00	119,200.00
Simulators, SimMan Nursing Kits for Training	2	6,309.00	12,618.00
Simulators, SimBaby	2	29,800.00	59,600.00
Simulators, Hal	1	19,995.00	19,995.00
Simulators, Hal 2 Touch Screen Monitors	1	2,000.00	2,000.00
Simulators, Noel - Birthing and OB Emergency	2	15,995.00	31,990.00
Simulators, Virtual IV - Adult & Infant (Package of 4 systems, 2			
adult and 2 child)	1	44,000.00	44,000.00
Simulators, Microsimulation for all students	0	160.00	0.00
Simulators, Heart Code ACLS System	0	99.00	0.00
Simulators, Heart Code ACLS Anywhere	0	99.00	0.00
Simulators, Virtual Clinical Excursions Development	0	100,000.00	0.00
COMPUTERS			
Computer, Dell Desktop XPS600	26	1,619.00	42,094.00
Computer, Dell Laptop-Inspiron 9300	6	1,249.00	7,494.00
Computer, Monitor Regular	40	479.00	19,160.00
Computer, Monitor Large	2	1,199.00	2,398.00
Computer, Laser Printer	4	1,799.00	7,196.00
Computer, Microphone	50	50.00	2,500.00
TOTAL			\$672,721.73

# g. Space

The four-story M. Christine Schwartz Center features classrooms and clinical practice labs, seminar and conference rooms, a computer lab, and a simulation academy, all equipped with the latest technology. The first three floors of the 53,000-square-foot facility opened in fall 2006 at an approximate cost of \$16.3 million including maintenance endowment. The fourth floor is currently under construction for an estimated cost of \$4.2 million including the maintenance endowment.

Three "smart" high-technology classrooms offer an interactive learning environment and opportunities for distance instruction with clinical and educational partners around the globe. Each room features multifunctional presentation technology, allowing faculty to utilize the full range of computer-based instructional capabilities.. Two side-by-side rooms on the first floor, 1,740 square feet each with a seating capacity of 96 individuals per room, are linked electronically to an 88-seat, 1,330-square-foot room on the

third floor, creating a large "cyber auditorium." With a combined total of 280 seats, this "cyber auditorium" is available for classes and presentations by visiting speakers. A fourth floor of the building is under construction.

The Schwartz Center allows for scheduling of all doctoral classes in the building. There is a need for doctoral students to have a communal office/lounge area within the Schwartz Center. With the completion of the fourth floor, this should be possible.

## h. List any other physical resources such as office equipment, necessary to the proposal.

At the present time, the existing office equipment is sufficient for the new program.

## i. Estimate incremental laboratory equipment for succeeding years.

The equipment will be adequate for the program as the simulation lab is shared by undergraduate and graduate students.

#### 3. CURRICULUM

#### a. Overview

The AACN has provided schools of nursing with "The Essentials of Doctoral Education for Advanced Nursing Practice" whose guidelines were used in the curriculum development for the proposed DNP program. The document outlines eight foundational curricular elements and competencies that should be present in all DNP programs. The depth and focus of the core competencies, however will vary according to the particular specialty or role for which the student is preparing. These Essentials are:

- 1. Scientific Underpinnings for Practice
- 2. Organizational and Systems Leadership for Quality Improvement and Systems Thinking
- 3. Clinical Scholarship and Analytical Methods for Evidence-Based Practice
- 4. Information Systems/Technology and Patient Care Technology for the Improvement and Transformation of Health Care
- 5. Health Care Policy for Advocacy in Health Care
- 6. Interprofessional Collaboration for Improving Patient and Population Health Outcomes
- 7. Clinical Prevention and Populations Health for Improving the Nation's Health
- 8. Advanced Nursing Practice

The following chart maps the proposed DNP courses against the AACN's DNP Essentials.

# **DNP Courses with ANCC DNP Essentials**

DNP Courses	L.Scientific Underpinnings for Practice	II:Organizational and Systems Leadership	III:Clinical Scholarship & Analytical Methods EB	IV:Technology for Info Systems and Patient Care	V:Health Care Policy for Advocacy	VI:Interprofessional Collaboration	VII:Clinical Prevention and Population Health	X VIII:Advanced Nursing Practice
Evolution of Nursing Practice & Application of Theory in Practice	X					X		X
Research I: Evaluating the Evidence for Practice			Х					
Population Based Health & Health Care Disparities		X		<u> </u>		_X_	X	
Health Care Economics & Health Care Financing		X						
Technology in Advanced Nursing Practice	ļ			X				
Research II: Biostatistical Applications			X					
Health Care Organization, Policy, and Effecting Change		X			X			
Capstone I	X	X		X		X		X
Capstone II	X	X	X	X	Х	X		X
Specialty Cognate	X							X
International Health		X			Х	X	X	
Practice Immersion	X	Х		X		X	X	X

# b. List the major division or divisions of the discipline in which graduate degree work will be offered.

UMSONHS is an NIH funded Center for Minority Health. We have a PhD program to generate knowledge and provide the evidence base for nursing practice. This is our practice doctorate to prepare advanced nursing practitioners to create, administer and evaluate practice interventions and systems for health care with the focus of reducing health care disparity. There will be 3 tracks, clinical, education, administration Specialty cognates will be the only division of the discipline for the DNP core curriculum. These will correspond to the specialty areas in the field of advanced practice nursing. As nursing specialties evolve over time and new specialties emerge in the field, DNP students will have more choices of specialties in their curriculums.

# c. Evaluate the adequacy of your present undergraduate and graduate curricular structure for the proposed degree

The students who will be admitted to this program will be a licensed registered nurse and already have a master's degree in a specialty area. We will need to remain in compliance with our certifying body's (CCNE through the AACN) recommendations. Eventually, students will have a bachelor's degree and need specialty area courses before taking the core courses of the DNP

program. This will provide a conduit from the undergraduate curriculum directly into the DNP, much the way the BSN currently transitions into the MSN program now. If progressing from BSN to DNP, DNP nurses will be prepared to sit for the national specialty certifications for which they are qualified.

Until the MSN is completely phased out, graduate level classes will be offered for the master's and doctoral levels (DNP and PhD). Since the target date is 2015, this will give the SONHS several years to effectively transition.

d. List any anticipated additions, deletions and changes in your current curricular structure resulting from this new proposal. For each item, list the faculty involved

All of the courses for the DNP program are new. Course syllabi include information about the faculty who are planned to teach in the program.

e. List any current, anticipated, or agreed upon cooperative interdisciplinary work with other components of the University or with any extramural agency as pertinent to the program

See 1d, above

f. Provide a detailed description of the proposed program including program requirements

#### 1) Prerequisites

Prospective students must have a current RN license and a MSN degree. Candidates with a non-nursing master's degree will be evaluated on a case by case basis. Prospective students for the clinical track must hold national certification as a nurse practitioner, nurse midwife, or nurse anesthetist

#### 2) Courses

The proposed post master's DNP program consists of 3 semesters of full time study. The curriculum is composed of 38 credit hours of which 28 are didactic and 560 clinical hours. The courses are planned to be offered in a weekend format, monthly with web enhancement. The first class is anticipated to start in January, 2009. Part time options will be allowed, however some of the courses have prerequisite courses; these must be completed prior to taking certain courses. This will permit a wider market for the degree, as well as permitting students to maintain employment opportunities. These features are essential for us to remain competitive with other DNP programs locally and nationwide.

See Table 1 for the DNP courses. Course descriptions and

syllabi can be found in Appendix A

#### 3) Examinations

Examinations in each course will be used to assess student's ability to learn didactic material and apply this theoretical knowledge in practice. Projects or papers are planned as additional evaluative tools.

# 4) Capstone experience

There is no dissertation required in the DNP, as it is a practice focused doctorate. However, students are required to demonstrate mastery of expert practice knowledge by a capstone project, conducted over the last 2 semesters. This capstone project will require students to apply theory, supported by evidence and expert knowledge of nursing practice in completing a scholarly project of the student's or agency's choice. We will partner with community agencies and health care organizations who have need for a practice change initiative. Students will design and implement a practice change initiative under the direction of a faculty member and preceptor. DNP students will write a report of the experience, detailing the process and an evaluation of the project at the time of completion of the second semester.

# 5) Curriculum

**Table 1 Proposed DNP** 

DNP Courses	Credits
Research I: Evaluating the evidence for practice	3
Research II: Biostatistical Applications for Advanced	3
Practice Nursing	
Population based Health and Health care disparities	3
Effecting Change in Health Care Organizations &	3
Health Care Policy	
The Evolution of Nursing Practice & Application of	3
Theory in Nursing Practice	
International Health	2
Technology in Advanced Practice Nursing 1 clinical	3
credit 4x14=56 clinical hrs.	
Health Care Economics & Financing	3
Specialty focused cognate	3
DNP Practice Immersion Experience 5clinical credits	6
20x14=280 clinical hrs	

Capstone DNP project	4 clinical credits	6
	16x14 = 224 clinical hrs	

### 6) Sample track(s) for the degree

Proposed Curriculum Plan - Clinical & Administration Track# Credits

_	Semester I
3	Evolution of Nursing Practice and Application of Theory in Nursing Practice
3	Research I: Evaluating the evidence for practice
3	Population based Health and Health Care Disparities
3	Health Care Economics and Health Care Financing
	Semester II
3	Capstone I
3	Technology in Advanced Practice Nursing
3	Research II: Biostatistical Applications for Advanced Practice Nursing
3	Effecting Change in Health Care Organizations & Health Care Policy
	Semester III
3	Specialty Cognate
2	International Health
3	Capstone II
6	Practice Immersion
Fotal C	Credits 38

Proposed Curriculum Plan - Education Track

# Cred	its				
	Semester I				
3	Evolution of Nursing Practice and Application of Theory in Nursing Practice				
3	Research I: Evaluating the evidence for practice				
3	Population based Health and Health Care Disparities				
3	Specialty Education Cognate*				
	Semester II				
3	Capstone I				
3	Technology in Advanced Practice Nursing				
3	Research II: Biostatistical Applications for Advanced Practice Nursing				
3	Specialty Education Cognate*				
	Semester III				
3	Specialty Education Cognate*				
2	International Health				
3	Capstone II				

6 Practice Immersion

**Total Credits 38** 

- \* Specialty cognates must be graduate level courses in adult education theory & pedagogy, tests and measurements, or curriculum design.
  - 7) Course descriptions (Syllabi are found in Appendix A)

# The Evolution of Nursing Practice & Application of Theory in Nursing Practice

This course is an overview of the conceptual foundations of nursing science and nursing practice. Knowledge from basic and applied sciences and ethics as well as the history of the global evolution of nursing practice are examined.

### Health Care Economics and Financing

This course is an overview of health care financing and core concepts of health care economics.

### Research I: Evaluating the Evidence for Practice

This course is an analysis of evidence-based nursing practice. During the course, students acquire the knowledge base to resolve clinical practice problems and direct evidence-based practice.

### Population Based Health and Health Care Health Disparities

This course is an overview of knowledge from nursing, public health and other disciplines for population based assessment. The importance of cultural and ethical dimensions in program development is included.

### Effecting Change in Health Care Organizations & Health Care Policy

An exploration of health care organizations and health care policy, and how change is effected in both. Health care policy and planning to address health care disparities at the local, state, and federal levels will be explored. Organizational diagnosis, organizational change, and ethical dimensions of public policy formulations and implementation will be highlighted.

### **Technology in Advanced Practice Nursing**

An exploration of the various aspects of the evolving technology to improve and transform health care and advanced practice nursing. This course prepares DNP nursing students to design, select and use technology to support, manage, and improve patient care and health care systems.

### Research II: Biostatistical Applications for Advanced Practice Nursing

This course is an overview of the basic statistical concepts and computer applications related to healthcare, nursing, and biomedical research. A basic examination of parametric and non-parametric statistics in program evaluation, process outcomes, and/or basic research studies is included

#### Capstone I

The capstone project is a required synthesizing initiative for students to apply theory, supported

by evidence and expert knowledge of nursing practice, by completing a scholarly project of the student's or agency's choice. Students may design a practice change initiative under the direction of a faculty member and preceptor.

### **International Health**

This course covers diverse topics that affect the health of the population and advanced practice nursing internationally.

### **Practice Immersion Experience**

This course contains individually precepted learning experiences across the spectrum of advanced practice nursing in a variety of settings. Students will have either clinically focused, education focused or administration focused role immersion experiences.

### Capstone II

This second capstone course is the implementation and evaluation of developed in Capstone 1.

### 1) Proposed schedule 2009

### # Credits

### **Spring**

- 3 Evolution of Nursing Practice and Application of Theory in Nursing Practice
- 3 Research I: Evaluating the evidence for practice
- 3 Population based Health and Health Care Disparities
- 3 Health Care Economics and Health Care Financing\*(for educator track, specialty cognate- see below).

#### Summer

- 3 Capstone I
- 3 Technology in Advanced Practice Nursing
- Research II: Biostatistical Applications for Advanced Practice Nursing
- 3 Effecting Change in Health Care Organizations & Health Care Policy or Education cognates\*

### Fall

- 3 Specialty Cognate
- 2 International Health
- 3 Capstone II
- 6 Practice Immersion

\* for the education track, these courses will be replaced by 2 additional specialty cognates, for a total of 3 for the education track. These specialty cognates must be graduate level courses from the School of Education in adult education theory & pedagogy, tests and measurements, or curriculum design.

# a. What kinds of teaching will prevail (i.e clinical, classroom, independent research, seminars, etc. and in what proportion?

The faculty of the SONHS is guided by professional pedagogical standards as set forth in (a) The Essentials of Master's Education for Advanced Practice Nursing (AACN, 1998); (b) Nursing: The Scope and Standards of Practice (ANA, 2004); (c) Florida Statutes, Chapter 464 and Florida Administrative Code, Chapter 64B9; and (d) Criteria for the Evaluation of Nurse Practitioner Programs (NTF, 2002). Teaching methods for courses include lecture, multimedia presentations, clinical and preceptor experiences, and simulation. Preceptor experiences for the students are individualized and will occur in a variety of settings appropriate for the student's specialty and course. In addition, courses may be delivered online in accordance with the University's guidelines.

### b. Indicate the potential distribution of graduate students among advisors.

A faculty advisor will be assigned to each student for the duration of the program. The faculty advisor's role in the DNP program is one of professional role modeling, support, advising on choice of specialty cognate courses, and advising on potential employment opportunities. The student's faculty advisor may also serve as the faculty of record for the student's capstone courses.

c. Describe any colloquia series, special seminars, or conferences, which will be held.

DNP students will be encouraged to attend continuing education conferences as a method of socialization into their new role. Professors in some courses may require attendance at a specialty organization's monthly meetings as part of course requirements.

We are in the process of establishing an interdisciplinary seminar series for our master's students. We anticipate that the DNP students will be included in this series, as a way of building collaboration with peers and across disciplines. The DNP students will also have the opportunity to attend lectures and grand rounds at the medical center.

### 4. FACULTY

a. Include a complete vitae for each member of the department who will participate in the program.

Table 2 lists the faculty members who are eligible to participate in the proposed DNP. Curriculum vitae for full time faculty members are found in Appendix B

### Eligible DNP Faculty

Name	Terminal Degree	Rank	Area of Expertise
Dr. Rosina Cianelli	PhD Nursing	Associate Professor	International Health
Dr. Joseph DeSantis	PhD Nursing	Assistant Professor	Pediatric NP
Maite Garrido	MSN	Instructor	Education, Family NP
Jeanne Gottleib	MSN (PhD candidate)	Instructor	Nurse Midwife
Dr. Rosemary Hall	PhD Nursing	Associate Professor	Population based Health
Elaine Kauschinger	MSN (PhD candidate)	Instructor	Family NP
Dr. Denise Korniewicz	PhD Nursing	Professor	Research
Dr. Todd Ambrosia	PhD, DNSc Nursing	Associate Professor	Research, Family NP
Dr. Donna Shalala	PhD	Professor	Policy
Joanna Sikkema	MSN	Instructor	Acute Care NP
Annette Torres	MSN	Lecturer	Family NP
Dr. JoAnn Trybulski	PhD Nursing	Assistant Professor	Practice Issues
Dr. Doris Ugarriza	PhD Nursing	Associate Professor	Psych Mental Health NP
Dr. Steve Ullman	PhD	Professor	Health Care Economics

### b. Estimate the need for additional faculty

We are anticipating recruiting 1 additional faculty member for the DNP program. We have 1 master's prepared faculty who has started a DNP program and another who is in the process of completing applications to attend a DNP program.

c. Describe the interaction with other graduate programs, i.e. extradepartmental thesis and dissertation committees.

There are no changes anticipated from our current arrangement, as this program does not require a thesis or dissertation.

### 5. STUDENTS

- a. Estimate the number of students in the program and the pool from which they will come.
- b. Describe requirements for admission to and retention in each degree.
- c. Describe the need for and scientific use of teaching assistants and research assistances. Include the number of each and stipends.

We are planning to recruit 6 students in the initial cohort. Thereafter, 8-10 students are expected to be admitted each fall semester. The anticipated enrollment is 20-25 students in the first years of the program. As this is an emerging trend in nursing doctoral education, it is difficult to predict exact numbers. However, the formal adoption of the AACN requirements for certification in 2015 will increase the demand for the DNP

degree, thereby having a positive impact on numbers. Classes for the proposed DNP will be held at the University on weekends. This will permit recruitment from a national pool of candidates.

### 1) Admission Requirements:

Prospective students must have a current RN license and a MSN degree. Candidates with a non-nursing master's degree will be evaluated on a case by case basis. Prospective students for the clinical track must hold national certification as a nurse practitioner, nurse midwife, or nurse anesthetist. All candidates must have an undergraduate GPA of at least 3.0 on a 4.0 scale, and score at least 1000 combined verbal and math on the GRE exam. Three letters of recommendation are also required.

### 2) Retention in the program:

Students must maintain a minimum UM GPA of 3.0 (4.0 scale). Any student who fails to maintain a 3.0 will be placed on probation and has one additional semester to bring the average to 3.0. If a student fails to attain a UM GPA of 3.0 at the end of the probationary semester will be dismissed from the program and the UMSONHS. In addition, a student must have a grade of "B" to pass a course. If a course grade is less than a "B", the student must retake the course. A student is allowed to retake only one course. Failure to attain a "B" the second time a student takes a course or getting less than a "B" in a second course will result in the student's dismissal from the program and the UMSONHS.

We will primarily reserve our TA and RA positions for our PhD students. However, if additional positions are available, the DNP students will be considered.

### 6. ADMINISTRATION

- a. Estimate the administrative increments imposed by this program
- b. Describe the arrangements for administration and for academic direction of the program as it pertains to the following:
- 1) Need For Additional Secretarial Help

The Office of the Dean of the SONHS makes staffing level determinations and coordinates secretarial support for the faculty and administration. We anticipate that we will need an additional administrative support person for the DNP program.

### 2) Office Equipment And Supplies

The SONHS is organized by department. Office supplies are ordered by staff as necessary and office equipment purchases are coordinated through the SONHS Business Director's office.

### 3) Travel and other funds

Faculty may request travel funds to attend conferences and meetings. The requests are reviewed and approved by the Dean of the SONHS. Planning is underway to incorporate input from the Associate Deans into a yearly travel allocation for each program.

### 4) The day to day administration of the program

The Associate Dean of Master's and DNP Programs is charged with the day to day administration of the master's and the DNP programs. The faculty works with the associate dean in the areas of advising and in academic matters. A program director has been assigned to the Nurse Anesthesia program and lead faculty to the other specialty NP tracks. The Director of Graduate Admissions and her/his coordinator support the Associate Dean handling graduate student recruitment, admissions, registration, graduation, evaluation, and other duties as assigned.

# c. The academic policy-making mechanisms used to implement the program including the criteria for membership in the faculty of the program.

We currently have academic policy making mechanisms in place. Governance of the SONHS is articulated in the School of Nursing and Health Studies Faculty Handbook and the University of Miami Faculty Handbook. There is a Graduate Academic Standing, Admission, and Progressions committee, as well as a Graduate Faculty committee to assist with policy decisions. Initially, faculty members must hold a doctoral degree, or have an MSN with a area of specialization required to meet the instructional needs of the curriculum. Once we have a sufficient number of DNP prepared faculty, faculty members must hold a practice- focused or research –focused doctoral degree.

#### 9. BUDGET

### a. Three year projected budget

Faculty are shared across multiple programs and have varying teaching loads, based on whether they are tenured, tenure track, or clinical track. This makes exact calculation of costs a challenge. The chart below contains best estimates, given the multiple variables. We are projecting modest enrollment initially, as the experience of DNP programs in other university varies. Many programs have 30 students in each class, some have cohorts of 6 on a rolling admission basis. We prefer modest projections. However, if the recruitment is robust and we have 10 qualified candidates for the first cohort, we will not cap admissions at 6.

# School of Nursing & Health Studies Doctoral in Nursing Practice (DNP) Three Year Budget (2009-2011)

	2008-09	2009-10	2010-11	Total - 3 Year Projections
Projected Income (See Exhibit A)	330,636	462,880	668,272	1,461,788

Expenses

<b>Compensation</b> Faculty	358,626	364,254	376,640	1,099,520
Administration				
One Secretary (1/2 Time)	20,431	21,123	21,838	63,392
Program Director (25%)	33,989	35,146	36,341	105,476
Total Compensation	413,047	420,522	434,819	1,268,388
Other Program Expenses	51,500	53,045	54,636	159,181
Total Expenses	464,547	473 <u>,</u> 567	489,455	1,427,569
Net	<u>(</u> \$133,911)	(\$10,687)	\$178,817	\$34,219

### Notes:

Tuition Income reflects a 5% yearly increase

Compensation includes salary plus fringe benefits and reflects a yearly 3% salary increase.

Exhibit A
Tuition Income

ration income				
# of Credits	Price per credit	# of Students	Amount of Tuition Income	
12	1,424	6	102,528	
12	1,424	6	102,528	
14	1,495	6	125,580	
12	1,495	8	143,520	
12	1,495	8	143,520	
14	1,570	8	175,840	
12	1,570	11	207,240	
12	1,570	<b>1</b> 1	207,240	
14	1,648	11	253,792	
	12 12 14 12 12 12 14 12 14	# of Credits credit  12 1,424 12 1,424 14 1,495 12 1,495 12 1,495 14 1,570 12 1,570 12 1,570	# of Credits credit # of Students  12 1,424 6 12 1,424 6 14 1,495 6 12 1,495 8 12 1,495 8 14 1,570 8  12 1,570 11 12 1,570 11	

Exhibit b

FTE Required per Semester

	# of Credits	FTE (1)
Spring	12	2.00
Summer	12	2.00
Fall	14	2.33

<sup>(1)</sup> Tenure Track Faculty teaches six credits per semester

### b. Comparisons of competing programs

Comparison of the proposed UM DNP with other high quality programs.

The curriculum for the UM DNP was developed according to the AACN *DNPEssentials*. Some of the programs listed below predate the publication of the *Essentials* document and may not have all the curricular elements recommended by the AACN for DNP programs. The total cost for tuition per student is \$54,112 (38 credits, \$1424/credit) and is very competitive, given the higher credit requirements of some of the institutions. Table 3 compares the credits of the proposed UM DNP with 5 other AAU Schools.

Table 3 Comparison of Credits in other AAU Schools' DNP

Name	#credits	Med School
U of Washington	45	X
Columbia	40	X
U of Rochester	60 (approx.)	X
Case Western	27	X
University of Maryland	38	X

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### APPENDIX A - Proposed DNP Course Syllabi

### **SEMESTER I**

Course Number & Title:

NUR XXX The Evolution of Nursing Practice &

Application of Theory in Nursing Practice

Allocation of Credit:

3 credits, lecture (3 consecutive clock hours/week) lecture

Placement in Curriculum:

First semester, DNP

**Faculty Responsible:** 

Dr. JoAnn Trybulski

Catalog Description:

This course is an overview of the conceptual foundations of nursing science and nursing practice. Knowledge from basic and applied sciences and ethics as well as the history of the global evolution of nursing practice are examined.

### **Course Objectives:**

- 1. Discuss the contributions from ethics and the psychosocial, biophysical, and organizational sciences to the development of nursing science.
- 2. Analyze how theories and concepts influence and enhance the development of nursing practice.
- 3. Examine the historical challenges to the evolution of nursing science and nursing practice.
- 4. Explore how the evolution of nursing science and practice impact the creation of new practice roles.

Course Number & Title:

**Nursing XXX** 

Health Care Economics and Financing

Number of Credits and Clock Hours:

3 credits, lecture (3 consecutive clock hours per week)

Placement in Curriculum:

First Semester, DNP

**Faculty Responsible:** 

Dr. Ullman – Business School

Prerequisites:

**TBA** 

Co requisites:

**TBA** 

**Course Description:** 

This course is an overview of health care financing and

core concepts of health care economics.

### **Course Objectives:**

- 1. Describe basic principles of health care economics.
- 2. Discuss the most common modes of health care financing and reimbursement mechanisms.
- 3. Evaluate the financial aspects inherent in practice initiatives.
- 4. Construct practice initiatives that assist with the resolution of health care disparities according to effective health care financing and economic principles.

Topics: Health care Financing, Reimbursement, Financial barriers, Cost containment mechanisms, market forces impacting health care economics, Practice and systems financial design and monitoring, ethics of health care financial decisions.

Course Number & Title:

**Nursing XXX** 

Research I: Evaluating the Evidence for Practice

Number of Credits and Clock Hours:

3 credits, lecture (3 consecutive clock hours per week)

Placement in Curriculum:

First Semester

Faculty Responsible:

Dr. Denise Korniewicz

Prerequisites: Co requisites:

**Course Description:** 

This course is an analysis of evidence-based nursing practice. During the course, students acquire the knowledge base to resolve clinical practice problems and direct evidence-based practice.

### Course Objectives:

- 1. Explain the steps in implementation of an evidencebased research project to address health care disparities.
- Discuss the concepts of translational research and it's relationship to evidence-based practice.
- 3. Synthesize evidence-based practice guidelines, the existing knowledge base, and knowledge of the change process to determine when to initiate an evidence-based practice change.
- 4. Critique the evidence base for a variety of practice systems.
- 5. Evaluate clinical outcomes of an evidence-based practice research project or a change in clinical practice.
- 6. Evaluate the ethical components of the nursing

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research process.

Course Number & Title:

NUR XXX Population Based Health and Health

Care Health Disparities

**Allocation of Credit:** 

3 credits, lecture (3 consecutive clock hours/week)

Placement in Curriculum:

First semester, DNP

Faculty Responsible:

Dr. Rosemary Hall

Co or pre requirements:

Effecting change in Health Care Organizations &

Health Care Policy

**Catalog Description:** 

This course is an overview of knowledge from nursing, public health and other disciplines for population based assessment. The importance of cultural and ethical dimensions in program development is included.

**Course Objectives:** 

- 1. Synthesize knowledge from nursing, public health, and related disciplines for population based assessment leading to program development.
- 2. Compare nursing, public health, and other models of community assessment.
- 3. Identify the process of a needs assessment in a population or aggregate.
- 4. Evaluate care delivery models or strategies using accepted benchmarks of care for their impact on health care disparities, integrating ethical and cultural dimensions.

### SEMESTER II

Course Number & Title:

**Nursing XXX** 

Effecting Change in Health Care Organizations &

Health Care Policy

Number of Credits and Clock Hours:

3 credits, lecture (3 consecutive clock hours per week)

Placement in Curriculum:

Second Semester

Faculty Responsible:

Drs. Donna Shalala & Steve Ullman

**Course Description:** 

An exploration of health care organizations and health care policy, and how change is effected in both. Health care policy and planning to address health care disparities at the local, state, and federal levels will be explored. Organizational diagnosis, organizational change, and ethical dimensions of public policy formulations and implementation will be highlighted.

### **Course Objectives:**

- 1. Describe organizational culture as it relates to various health care organizational structures.
- 2. Discuss the role of selected agencies, levels of government, individuals and interest groups in influencing health care policy.
- 3. Analyze health care policy proposals from the perspectives of multiple stakeholders involved in policy decisions.
- 4. Propose quality improvement strategies that effect and sustain change in organizations and policy.
- 5. Develop strategies to advocate for equity and ethical practices in health care policy and health care delivery systems.
- 6. Evaluate health care organizations and policy for the ability to address health care disparities.

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Course Number

& Title:

NUR 6XX Technology in Advanced Practice Nursing

Number of Credits

2 credits, lecture (2 consecutive clock hours per week)
1 credit, clinical (4 clock hours per week, 56 hours total)

Placement in Curriculum:

Second Semester

Faculty:

Maite Garrido, MSN, APRN, BC

Prerequisites: Description:

Admission to Doctorate in Nursing Practice Course

An exploration of the various aspects of the evolving technology to improve and transform health care and advanced practice nursing. This course prepares DNP nursing students to design, select and use technology to support, manage, and improve patient care and health care systems.

Course Objectives:

- 1. Demonstrate ability to use varied modes of technology in health care education, administration, or care delivery.
- 2. Evaluate modes of technology for use as components in a cost effective health care system.
- 3. Employ simulation technology in the varied roles of advanced practice nursing.
- 4. Examine the ethical dilemmas inherent in use of varied modes of health care technologies.
- 5. Synthesize varied modes of technologies to deliver consumer health care information.

Topics:

Include: telemedicine

computerized records

distance education techniques patient monitoring techniques

simulation technology for patients, patients' families,

educators, and health care providers

legal issues & ethical issues related to modes of

technology

electronic medical records

clinical database design, evaluation

development of consumer health information

Course Number & Title:

Nursing XXX

Research II: Biostatistical Applications for Advanced

**Practice Nursing** 

Number of Credits and Clock Hours:

3 credits, lecture (3 consecutive clock hours per week)

Placement in Curriculum:

Second Semester

**Faculty Responsible:** 

**TBA** 

Prerequisites:

**TBA** 

Co requisites:

**TBA** 

**Course Description:** 

This course is an overview of basic statistical concepts and computer applications related to healthcare, nursing, and biomedical research. A basic examination of parametric and non-parametric statistics in program evaluation, process outcomes, and/or basic research studies is included.

**Course Objectives:** 

- 1. Assess requirements and assumptions of the various statistical procedures used in outcomes research.
- 2. Identify perspectives, specific aims, processes, applications, and data analysis procedures for parametric and non-parametric statistics.
- 3. Perform and interpret basic statistical analyses using computer statistical programs such as SPSS.
- 4. Evaluate various biostatistics used to study health and vulnerable populations.
- 5. Select appropriate biostatistical methods for a program or process improvement project.

Course Number & Title

NUR 6XX Capstone I

**Number of Credits and Clock** 

1 credit lecture (1 lecture hour/week)

Hours

2 credits clinical (8 clinical hours/week) Total:112 hours

Placement in Curriculum:

Second Semester

Faculty:

Prerequisites:

Multiple faculty ( each student has a faculty supervisor) Health Care Economics and Health Care Financing

The Evolution of Nursing Practice & Application of Theory in Nursing Practice

Research I

Population Based Health and Health Care Disparities

Pre or Co requisites

Effecting change in Health Care Organizations & Health Care Policy,

**Course Description** 

The capstone project is a required synthesizing initiative for students to apply theory, supported by evidence and expert knowledge of nursing practice, by completing a scholarly project of the student's or agency's choice. Students may design a practice change initiative under the direction of a faculty member and preceptor.

### **Course Objectives**

- 1. Analyze existing models of care delivery and evidence based practice to improve healthcare outcomes.
- 2. Develop a care delivery initiative that addresses health care disparities.
- 3. Employ effective communication and collaboration skills in intraprofessional and interprofessional teams.
- 4. Integrate clinical expertise, leadership, technology, policy, research and business practice in the development of an evidence –based practice project.
- 5. Plan the financial, clinical or educational components of the project.

### **Topics**

problem identification, interdisciplinary collaboration, evaluation of theories and evidence-based clinical practice, community needs assessment, program design and development

### **SEMESTER III**

Course Number & Title:

**Nursing XXX** 

International Health

Number of Credits and Clock Hours:

2 credits, lecture (2 consecutive clock hours per week)

Placement in Curriculum:

Third Semester

Faculty Responsible:

Dr. Rosina Cianelli

Course Description:

This course covers diverse topics that affect the health of the population and advanced practice nursing internationally.

**Course Objectives:** 

- 1. Analyze world health indicators and multidimensional forces that influence health care.
- 2. Discuss how health care delivery has changed internationally and how these changes are connected to advanced practice nursing.
- 3. Examine the relationship among culture, gender, spirituality, and ethics, as factors that influence the health practices of health care providers and patients internationally.
- 4. Discuss immigration issues and how immigration policies affect the utilization and design of nursing and health care systems.
- 5. Evaluate the global forces shaping and transforming global health care health systems and the role of nursing in this transformation.

Topics include:

Health care delivery systems, epidemiological indicators, disease management, gender, culture, ethics, spirituality, integrated medicine, and various countries' immigration policies

Course Number & Title:

NUR XXX Practice Immersion Experience

Number of Credits and Clock Hours:

1 credit, lecture (1 consecutive hour/week)

5 credits, clinical (20 clock hours per week, total of

280 clinical hours)

Placement in Curriculum: Faculty Responsible:

Third Semester, DNP Elaine Kauschinger, PhD(c)

Prerequisites:

DNP courses listed in first and second semester,

Pre or Co requisites:

International Health

**Catalog Description:** 

This course contains individually precepted learning experiences across the spectrum of advanced practice nursing in a variety of settings. Students will have either clinically focused, education focused or administration focused role immersion experiences.

**Course Objectives:** 

- 1. Develop professional interaction and partnerships to facilitate evidence based care and quality patient outcomes.
- 2. Design evidence based interventions to address health care disparities.
- Demonstrate conceptual ability and technical competence for the selected advanced practice nursing role.
- 4. Synthesize knowledge of organizations and health care policy to influence health care and /or delivery of health care that is ethical and cost effective.
- 5. Create interdisciplinary collaborations that promote change in health care systems.

Course Number & Title

NUR 6XX Capstone II

**Number of Credits and Clock** 

1 credit lecture (1 clock hour)

Hours

2 credits clinical (8 clinical clock hours/week) Total:112 hours

Placement in Curriculum:

Third Semester

Faculty: Prerequisites

Multiple faculty (each student has a faculty supervisor)

Capstone I

**Course Description** 

This second capstone course is the implementation and evaluation of the project developed in Capstone 1.

**Course Objectives** 

- 6. Implement a care delivery initiative to address health care disparities.
- 7. Appraise effective communication and collaboration skills in intraprofessional and interprofessional teams.
- 8. Integrate clinical expertise, leadership, technology, policy, research and business practice in the implementation of an evidence —based practice project.
- 9. Evaluate the financial, clinical or educational components relative to the project and the current and future needs of the patient population.

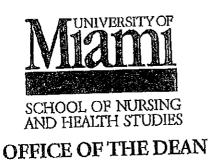
**Topics** 

Project management, Delivery of intervention, Evaluation of outcomes, policy and guidelines

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APPENDIX B - Eligible DNP Faculty Curriculum Vitae

Mailing Address: P.O. Box 248153 Coral Gables, PL 33124-3850



5030 Brunson Dr. Coral Gables, FL 33146 Telephone: 305-284-2107 Fax: 305-667-3787

# MEMORANDUM

TO:

**Faculty Senate** 

General Welfare Committee

From:

Dean Nilda (Nena) P. Peragalio, DrPH, RN, FAAN

School of Nursing and Health Studies

Date:

April 15, 2008

RE:

Doctorate in Nursing Practice Proposal – Budget

This memo will confirm that I have reviewed and approved the budget for the above-referenced program.

Thank you for your consideration.

### Doctor of Nursing Practice (DNP) Programs

The following universities are currently accepting students into Doctor of Nursing Practice programs.

Arizona State University

Case Western Reserve University (OH)

Catholic University of America

Chatham University (PA)

College of St. Catherine (MN)

College of St. Scholastica (MN)

Columbia University (NY)

Drexel University (PA)

A hybrid program combining the professional practice doctorate and the academic research doctorate.

Duke University (NC)

Fairleigh Dickinson University (NJ)

Florida Atlantic University

George Washington University

Georgia Southern University

Governors State University (IL)

Johns Hopkins University (MD)

Medical College of Georgia

MGH Institute for Health Professions (MA)

Minnesota State University at Moorehead

North Dakota State University

Oakland University (MI)

Oregon Health & Science University

Pace University (NY)

Purdue University (IN)

Regis College (MA)

Robert Morris University (PA)

Rush University (IL)

Rutgers, The State University of New Jersey

Saint Louis University (MO)

Samford University (AL)

Simmons College (MA)

Texas Christian University

Texas Tech University Health Sciences Center

Texas Woman's University

Thomas Jefferson University (PA)

Touro University (NV)

University of Arizona

University of Central Florida

University of Colorado at Colorado Springs

University of Colorado at Denver and Health Sciences Center

University of Connecticut

University of Florida

University of Illinois at Chicago

### University of Iowa

University of Kansas

University of Kentucky

University of Maryland

University of Massachusetts Amherst

University of Medicine and Dentistry of New Jersey

University of Minnesota

University of Missouri-Kansas City

University of North Florida

University of Pittsburgh (PA)

University of Portland

University of Rochester (NY)

University of San Francisco

University of South Alabama

University of South Carolina

University of South Florida

University of Tennessee Health Science Center

University of Texas Health Science Center at Houston

University of Toledo (OH)

University of Utah

University of Virginia

University of Washington

Vanderbilt University (TN)

Wayne State University (MI)

Waynesburg University (PA)

West Virginia University

Western University of Health Sciences (CA)

Wichita State University (KS)

Winona State University (MN)

Wright State University (OH)

In addition to those mentioned above, more than 140 additional nursing schools are considering starting DNP programs nationwide. AACN will update this list as new DNP programs open and begin accepting students.

For more information on DNP programs, read AACN's <u>Position Statement</u> on the <u>Practice Doctorate in Nursing</u> and the updated <u>Frequently Asked Ouestions</u> reference.

Last Update: April 15, 2008

# General Welfare Committee April 9, 2008 3:30 p.m. (School of Law Library-Conference Room, 4<sup>th</sup> floor)

### CLICK HERE to print the total agenda package

- 1. Chair's remarks (3:30)
- 2. # Review of draft Faculty Senate Meeting Minutes of March 26, 2008 (3:35)
- 3. # Proposal of a Name Change from Richter Library to University of Miami Libraries W. Walker (3:40)
- 4. Proposal to Revise Latin Honors T. LeBlanc (3:50)
- 5. ## Proposed Criteria for Distinguished Professorships T. LeBlanc, D. Birnbach (4:10)
- 6. # <u>Update on the New Staff Compensation Plan</u> R. Thomas, D. Wedderburn (4:25)
- 7. # School of Communication request for a Name Change from Communication Studies
  Program to Communication and Social Interaction M. Beatty (4:40)
- 8. # School of Nursing and Health Studies Proposal for a Doctorate in Nursing Practice (DNP) Degree J. Trybulski (4:50)
- 9. # Faculty Senate Women and Minorities Committee Report; # Diversity Report- V. Mitrani (5:05)

# related material included ## materials will be sent separately

# UNIVERSITY OF MIAMI SCHOOL OF NURSING AND HEALTH STUDIES

PROPOSAL TO ADD
THE DOCTORATE IN NURSING PRACTICE (DNP)
DEGREE

NOVEMBER 2007

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# PROPOSAL TO ADD THE DOCTORATE IN NURSING PRACTICE DEGREE (DNP)

### 1. RATIONALE

### a. Overvlew

The American Association of Colleges of Nursing (AACN) is a professional organization influencing nursing practice. The AACN accredits both nursing programs and individual nursing practitioners through its autonomous arm, the Commission on Collegiate Nursing Education (CCNE) who insures the quality and integrity of undergraduate and graduate education programs. The University of Miami School of Nursing and Health Studies (SONHS) is accredited by CCNE. In October 2004, the 617 AACN member institutions endorsed the Position Statement on the Practice Doctorate in Nursing, calling for moving the current level of preparation for advanced specialty nursing practice from the master's degree level to the doctorate level by the year 2015(AACN position, 2004). Multiple faculty and deans at 226 sites participated in subsequent forums and two years later, the Essentials of Doctoral Education for Advanced Practice was published and endorsed by the AACN membership in October 2006 (AACN Annual, 2007, p.8).

Additionally, the National Academy of Sciences (NAS) report supported the development of a "non-research clinical doctorate in nursing." (DNP) (Advancing the Nation's, 2005 p.74) The vision for nurses prepared with the DNP is that they will be practice experts, capable of designing and evaluating practice systems and health care delivery innovations. The AACN and NAS endorsements of the DNP, plus the compelling literature in support of the DNP, have precipitated the proposed development of a Doctor of Nursing Practice (DNP) program at the University of Miami.

### b. History

The SONHS has been offering a Master of Science in Nursing (MSN) since 1980 to prepare nurses for roles as nurse practitioners and nurse executives. "Nurse practitioners (NP) are licensed independent practitioners who practice in ambulatory, acute and long term care as primary and/or specialty care providers. According to their practice specialty, they provide nursing and medical services to individuals, families, and groups." (Scope of practice, 2007, p.1) There are approximately 115,000 NPs practicing in the United States who write over 511 million prescriptions annually, 62% see three to four patients per hour, 12% see over 5 patients per hour, and each year there are approximately 6,000 new NPs (AANP workforce, 2007).

Entry level preparation to become a nurse practitioner is at the master's, post master's or doctoral level and the State of Florida requires that individuals pass a specialty certification exam to be licensed. Lately, master's preparation has become credit heavy. In today's complex clinical environment demands advanced practice nurses to have increased knowledge in the clinical and basic sciences. Thus, the credit requirements for master's programs and the clinical hour requirements for credentialing have also increased to a point where these surpass master's credit

requirements and some doctoral requirements in other disciplines. This opinion of the master's preparation is also articulated in the AACN Position Statement which says, "The time spent in master's level nursing education is not congruent with the degree earned." (Lenz, 2005) The DNP is the next step in the nurse practitioner evolutionary chain.

The DNP is a relatively new degree. The first Doctor of Nursing degree with a practice focus was created by Case Western Reserve only twenty years ago. However, the introduction of a practice-focused doctorate is not a new concept. In addition to the venerated M.D., for some time there has been a major trend in other health disciplines to move the terminal practice degree to a terminal degree as in the cases of the PharmD in pharmacy, the AuD in audiology, and the DPT in physical therapy. Nursing has historically remained one of the few disciplines in health care for which a doctorate is not regarded as the highest and desired practice credit. (Lenz, 2005)

### c. Give the exact title of the degree

The SONHS is proposing to grant a new doctorate degree, Doctor of Nursing Practice. Candidates who are awarded this degree use the initials, DNP. This will be a practice-focused terminal degree, eventually replacing the current M.S.N. for advanced nurse practitioners.

# d. Discuss the purpose and goals of the degree (mission statement)

The DNP program will prepare advanced practice nurses to create, administer and evaluate practice interventions and systems for health care with the focus of reducing health care disparity. Graduates of the DNP program will become experts in advanced nursing practice, focusing heavily "on practice that is innovative and evidence-based, and reflecting the application of credible research findings" (AACN Essentials, 2006, p.3).

### **DNP Program Objectives**

- 1. Integrate knowledge, theories, and concepts from the biophysical, psychosocial, analytical, and organization sciences to develop ethical health care systems and new frontiers for nursing practice which assist with the resolution of health care disparities.
- 2. Evaluate research methods and findings to create an evidence base for nursing practice and health care delivery systems that are best practices and alleviate health care disparities.
- 3. Synthesize knowledge gained from traditional and innovative learning methods to lead quality, cost effective health care collaborations addressing health care disparities.
- 4. Demonstrate expert clinical judgment and knowledge of health care systems to design, deliver and evaluate evidence based care interventions to reduce health care disparities.
- 5. Model expert nursing practice and serve as a leader and mentor to assist other nursing colleagues achieve expert nursing practice.

6. Employ knowledge of health care policy and economics to develop and evaluate programs to address health care disparities.

e. Assess the demand, including existing programs, and the job market, locally, in Florida, the Southeast, nationally and internationally (market analysis)

Since the compelling reason for instituting this program is based on a major shift in certification requirements in advanced practice nursing, the more important question regarding demand is found on the American Academy of Nurse Practitioners (AANP) website. In the FAQ's section AANP asks, "How will the transition to the Doctor of Nursing Practice (DNP) occur?" (AANP FAQ's, 2007) From this statement, one can assume that it is not a matter if a nurse practitioner will need a DNP to practice, but how this will be accomplished?

At the time of the AACN endorsement in 2004, only one nursing program granted the DNP degree, while some others, like Columbia and Drexel Universities had DrNP degrees as a terminal, practice focused doctorate for nursing. Over 130 DNP programs are in development nation- wide to add to the 45 programs currently enrolling students (AACN Doctorate of Nursing Practice talking points, 2006). In schools of nursing ranked in the top 20, 9 currently have a DNP program. Nursing schools in the following institutions have DNP programs: University of Washington, University of Rochester, University of Maryland, John Hopkins, University of Illinois, University of Pittsburg, and Case Western Reserve University. In Florida, the University of South Florida, University of Florida, and University of North Florida have DNP programs; Barry University is developing a DNP program. DNP programs are popular; in some of these institutions, there are more than 40 DNP students. In the local market, Case Western University offers their DNP in Tampa. Florida Atlantic University is planning to start enrolling students in their DNP in August, 2008. The other major nursing program credentialing body, the Commission on Collegiate Nursing Education (CCNE), is starting the process for accrediting DNP programs (AACN Doctorate of Nursing Practice talking points, 2006).

Additionally, there is a clear shortage of doctoral-prepared clinical faculty at universities across the nation, spurring concerns about the quality of nursing education at large. The National League for Nursing notes some trends that contribute to the nursing faculty shortage. The population of nursing faculty is aging, with 75% of current U.S. faculty expected to retire by 2019 and as a result, there is increased use of part-time faculty (Valiga, 2002). Part-time faculty in nursing are often master's level prepared and may hold other positions that limit their availability or may be ineligible to teach graduate level classes. While the first choice for teaching faculty at a research institution will continue to be a doctorate in research, practice-focus doctoral prepared faculty could do much to supplement clinical faculty and raise the level of teaching.

Additionally, our community affiliates are also watching the nursing field closely as they will most definitely be affected by the change in certification for their current advanced practice nurses. As they react to this change, we need to be prepared to help them. Discussions with international nursing colleagues from the Caribbean, Mexico, and Chile have produced interest in sending their current nursing faculty to our proposed DNP program.

#### f. Discuss the relationship of the program to other cognate fields

In the course of planning the curriculum, there have been discussions about the DNP proposal with faculty members from the School of Business and the School of Education. The proposed DNP curriculum's specialty focus anticipates that students will take one to three courses at the Schools of Education, Business, or the Miller School of Medicine. The courses in health care finance and health care policy were developed with input from a faculty member from the School of Business. Discussion is ongoing with members of the UM medical faculty about sites for the practice immersion experience in the clinical track.

#### g. Discuss the relationship to undergraduate and graduate programs

We anticipate that students in the undergraduate nursing program will benefit from the SONHS DNP program. DNP students can potentially serve as instructors in selected clinical areas, laboratory sessions, and classes as part of their practice immersion or technology coursework.

The recommendation from the AACN that preparation for the advanced level of nursing practice be at the DNP level indicates that eventually our master's program offerings for nurse practitioners, nurse midwives, and nurse anesthetists will be replaced by a post-baccalaureate entrance point into a DNP degree. This transitional phase will be guided by the task forces and forums that are currently in place and being implemented by AACN and AANP to address this issue. The chart below compares the current Master of Science in Nursing degree (MSN) terminal objectives and the proposed DNP degree program objectives.

MSN Objectives	DNP Objectives
1. Synthesize knowledge from the sciences, humanities, and nursing as a basis for culturally competent and safe advanced practice nursing.	1. Integrate knowledge, theories, and concepts from the biophysical, psychosocial, analytical, and organization sciences to develop ethical health care systems and new frontiers for nursing practice which assist with the resolution of health care disparities.
2. Integrate specialized knowledge and skills in a selected area of advanced practice nursing.	4. Demonstrate expert clinical judgment and knowledge of health care systems to design, deliver and evaluate evidence based care interventions to reduce health care disparities.
3. Incorporate professional ethics and justice in the development of the advanced practice role.	6. Employ knowledge of health care policy and economics to develop and evaluate programs to address health care disparities.
4. Utilize research for the improvement of nursing practice and the advancement of nursing as an academic discipline.	2. Evaluate research methods and findings to create an evidence base for nursing practice and health care delivery systems that are best practices and alleviate health care disparities.
5. Provide leadership for the improvement of health care systems.	3. Synthesize knowledge gained from traditional and innovative learning methods to lead quality, cost effective health care collaborations addressing health care disparities.

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for the continued growth of advanced practice	5. Model expert nursing practice and serve as a leader and mentor to assist other nursing colleagues achieve expert nursing practice.

The DNP program will be offered in addition to the school's research-focused Doctor of Philosophy Degree (Ph.D.) program that produces nurses who generate knowledge and provide the evidence base for nursing practice. There is AACN support for the value of having both research-focused and practice-focused doctorate programs at institutions. According to AACN, "practice-focused programs place greater emphasis on practice and less emphasis on theory, meta-theory, research methodology, and statistics than is apparent in research-focused programs." (AACN Doctorate of Nursing Practice talking points, 2006). Practice-focused programs include integrative practice experiences and clinical immersions.

#### 2. PHYSICAL RESOURCES

### a. Survey of library holdings

#### Nursing Library - Core

CINAHL Plus (Ebsco) (1937 - present)

Cumulative Index of Nursing and Allied Health Literature is the most comprehensive index to nursing and allied health literature. Selected consumer health, biomedicine, and health sciences librarianship journals also indexed. Provides access to healthcare books, nursing dissertations, selected conference proceedings, standards of professional practice, educational software and audiovisual materials in nursing.

MEDLINE (Ebsco) (1930 - present)

From the U.S. National Library of Medicine (NLM) this database contains citations and abstracts from over 4,600 biomedical journals published worldwide.

MEDLINE (Ovid) (1980 to present)

From the U.S. National Library of Medicine (NLM) this database contains citations and abstracts from over 4,600 biomedical journals published worldwide.

PubMed

Open-access service of the U.S. National Library of Medicine includes citations from MEDLINE back to the 1950s. Includes links to full text articles and other related resources.

#### Other 1

BioMed Central (Dates vary by title.)

BioMed Central is an independent open access publishing house providing immediate free access to peerreviewed biomedical research.

ERIC (CSA) (1966 - present)

The ERIC (Educational Resources Information Center) database, sponsored by the U.S. Department of Education, is the world's largest source of education research and information.

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Health and Psychosocial Instruments (1985 – present)

Provides descriptions of tests, manuals, rating scales and other instruments used to assess health and behavior.

National Academy Press Digital Library (1960s – present)

Searchable multidisciplinary digital library of full-text book length research studies and policy reports by leading experts in their fields. Includes IOM publications.

PsycINFO (1872 - present)

PsycINFO, published by the American Psychological Association, is the most comprehensive index to research journals, books and dissertations in psychology.

Sociological Abstracts (1963 - present)

Indexes and abstracts sociology and related research literature published worldwide in journals and other serial publications.

Web of Science Citation Databases (Web of Knowledge) (1984 - present)

Provides access to current and retrospective multidisciplinary information from approximately 8,700 high impact research journals published worldwide. Unique cited reference searching allows navigation forward and backward through the literature to trace a path of research.

#### Dictionaries & Encyclopedias

Access Science: Encyclopedia of Science & Technology

Searchable online version of the 9th edition (2002) of McGraw-Hill Encyclopedia of Science & Technology with new and updated content added regularly.

Oxford Reference Online (Current)

Oxford Reference Online contains about 100 general and subject dictionaries, and language reference works published by Oxford University Press. The collection is fully-indexed and cross-searchable. Public Web Sites

Ace Star Model of Knowledge Transformation

From the Academic Center for Evidence-Based Nursing at the University of Texas Health Science Center, San Antonio. The Star Model is a model for understanding the cycles, nature, and characteristics of knowledge that are utilized in various aspects of evidence-based practice (EBP).

The Nursing Theory Page

From the Hahn School of Nursing and Health Science this nursing theory page provides links to nursing theorists and theories. Updated June 2006.

#### Standards

Practice standards from the American Nurses Association are available in the Reference Collection of the Otto G. Richter Library where they are shelved by call number. Use the words "scope and standards" or "nursing standards" in the IBISWEB library catalog to view titles and call numbers.

National Guideline Clearinghouse (NGC)

Public resource for evidence-based clinical practice guidelines. NGC is an initiative of the Agency for Healthcare Research and Quality (AHRQ), U.S. Department of Health and Human Services.

## Registered Nurses Association of Ontario (RNAO)

Freely available nursing best practice guidelines.

#### Statistics 5 4 1

Miami-Dade County

Miami-Dade County Health Department: Disease Control Includes Monthly Disease Report and Vital and Morbidity Statistics links.

#### <u>Florida</u>

Florida Charts

Behavior risk factor data obtained by survey of adults in Florida to obtain county level estimates of health behaviors contributing to morbidity and mortality.

#### **United States**

NCHS (National Center for Health Statistics)

Major source of health statistics from the CDC. Links to tabulated state data.

#### U.S. Census Bureau

Source for population, housing, economic, and geographic data.

International

## UNICEF (United Nations Children's Fund): Monitoring and Statistics Links to statistics globally and by country.

#### WHO: Research Tools

Includes links to burden of disease statistics and much more.

- b. List additional library acquisitions needed and their estimated costs.
- c. Estimate the incremental library needs per year
- d. Demonstrate that library resources are adequate not only for instruction, but for the research faculty recruited as part of the program.

At present, the libraries at the University of Miami are deemed adequate for the proposed DNP program. The DNP students would have access to the Calder Medical Library, as well as Richter library on the Coral Gable campus Access to the important journals and databases is available for the students through their computers, or through the computers in the computer lab at the Christine Schwartz Center for Nursing and Health Studies Education. A librarian has been assigned to assist students and faculty in their studies and research. There should not be any additional demand for the DNP beyond the current demand of the SONHS programs.

# e. Discuss laboratory equipment and facilities of all types which will be needed

The clinical experiences will be held at off-campus locations in the facilities and laboratories of our partners and affiliates who include: U. Miami Miller School of Medicine - Jackson Memorial Medical Center, Center for Family Studies, the newly acquired Cedars Medical Center, Sylvester Comprehensive Cancer Center U. Miami, Bascom Palmer Eye Institute and 116 other facilities in and around the counties of South Florida. Finding clinical sites for the DNP students is expected to mirror the challenges the SONHS faces in finding appropriate clinical sites and preceptors for its MSN students.

In addition, the International Academy for Simulation and Research is a simulation lab providing handson experience for students. It is located in the M. Christine Schwartz Center which houses the SONHS.

#### Simulation Lab

The International Academy for Clinical Simulation and Research is the nation's first comprehensive, high-fidelity simulation center designed for nursing and health science education. Encompassing 5,500 square feet on the second and third floors of the M. Christine Schwartz Center, the academy features: a three-bed simulation suite, a seven-bed adult laboratory, a seven-bed pediatric laboratory, a microsimulation computer lab, and a conference room. Academy facilities replicate a variety of clinical settings including ICU, CCU, ER, OR/Perianesthesia, and Neonatal ICU, and "patients" include a full complement of high-fidelity simulators representing a range of ages and ethnic groups. Ceiling-mounted cameras and other strategically placed video equipment record simulation activities for subsequent viewing and transmit activities in real time for observation by students and faculty in the academy's conference room as well as the three interlinked "smart" classrooms. The academy's 24-station micro-simulation computer laboratory enables students to practice basic skills and review patient scenarios through CD-ROM programs and Web-based resources.

3rd Floor Micro-Simulation Lab, Room 333:
20 PCs with the following specifications (20 x \$1,525.15 = \$30,503.00):
Dell Optiplex GX620 Ultra Small Form Factor PCs
20" UltraSharp Flat Panel Monitor
2GB RAM
160GB Hard Drive
8X DVD+/-RW

# f. Give estimated costs of equipment on hand.

DD OD I CUT	QTY	Unit Cost	Total
PRODUCT	100	0.75	75.00
Oxygen Supply Tubing	100	0.81	81.00
Nasal Camual	50	1.38	69.00
Face Mask	50	2,44	122.00
Non-Rebreather Mask	25	3.69	92.25
Venturi Mask	6	2,44	14.64
Tracheostomy Mask, Adult		2.63	15.78
Tracheostomy Mask, Child	6	4.88	29.28
Tracheostomy Care Tray	6		14.64
RCI Humidifier, disposable	6	2.44	14.04
Nebulizer w/Tee Mouthpiece Tubing Reservoir and Universal		0.00	0.60
Connector	4	2,38	9.52
Nebulizer w/Elongated Adult	4	3.63	14.52
Nebulizer w/Blongated Child	4	3.63	14.52
AirLife Corrugated Tubing, 6 feet	8	2.31	18.48
Bag-Valve-MaskAdult	4	250.00	1,000.00
Bag-yarye-iyiaskxduit	3	250.00	750.00
Bag-Valve-MaskChild	2	195.00	390.00
Bag-Valve-MaskInfant	3	5.31	15.93
Oral Airway Kit, Complete Set	3	8.13	24.39
Nasal Airway Kit, Complete Set	20	8,13	162.60
Endotracheal Tube #7	20	0,10	

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			1 age xx 01 4
Endotrachael Stylete	20	6.00	120.00
Shiley Trach with Disposable Inner Cannula	10	85.63	856.30
Thomas Tube Holder—Adult	20	4.38	87.60
Thomas Tube Holder—Child	20	4.38	87.60
Cath-N-Glove Suction Kits, 14 Fr	20	1.88	37.60
Yankauer Suction, with 6 ft tubing	10	5.00	50.00
Yankauer Suction, Each	20	3,13	62.60
No-Touch Single Catheter, 14 Fr	20	2.48	49.60
Nipple and Nut, each	10	0.94	9.40
Mucus Specimen Trap Sterile, Each	10	3,38	33.80
	10	108.13	1,081.30
Chest Drainage Unit, Each	10	8.69	86.90
Thoracic Catheter, 24 Fr	4	9,81	39.24
Respiratory Exerciser Spirometer, Each	7	7,01	33141
PRODUCT			
Syringe, SafePro Plus 3cc LL, 100/box	5	30.36	151.80
Syringe, Excel Syringe with Needle, 3cc 22g x 1, 100/box	5	14.99	74.95
Syringe, Excel Syringe with Needle, 10cc 22g x 1, 100/box	5	31.24	156.20
Syringe, Excel Syringe TB, 1cc 27g x .5 Lucr Slip 100/box	5	16.24	81.20
Syringe, Excel Syringe with Needle, 5cc 22g x 1.5	5	28.31	141.55
Syringe, Excel Syringe, Insulin PA .5cc 28g x .5" 100/box	5	15.63	78.15
5)50,51,51,51			
Needle, Excel Needle, 25g x 5/8	4	7.49	29.96
Needle, Excel Needle, 21g x 1.5" 100/box	4	7.49	29,96
Needle, Excel Needle, 18g x1	4	7.49	29.96
Non-Latex Tourniquets	20	0.24	4.80
THE A STATE OF THE CONTROL OF THE STATE OF T	10	169.99	1,699.90
IV, Insyte Autoguard IV Catheter (pink), 20g x 1.16	4	19.99	79.96
IV, Scalp Vein Butterfly, 23g x 3/4" 50/Box	6	17.36	104.16
IV, Intraosseous Needle, 16g, each	50	6.24	312.00
IV, Tubing, B.Braun Standard IV Tubing-Primary 113", 1-Ysite	50 50	2,49	124.50
IV, Tubing, B.Braun Standard IV Tubing-Secondary 40"	5 <b>u</b> 6	98.54	591.24
IV, Central Line, Triple Lumen Catheter Set 7F x 8"	O	90.34	391.24
IV, Dressing, Central Line, Central Line Dressing Tray with non-	6	9.06	54.36
adhearing Dressing	6	74.99	449.94
IV, Dressing, Tegaderm Transparent Dressing, 50/box 4" x 4 3/4"	4	2.49	9.96
IV, Alcohol Prep Pads, Medium, 200/box	4	15.63	62.52
IV, Multi-Medication Added Label, 500/roll			24.36
IV, Sharps Container, 5 quart	6	4.06	24.30
Wound, Wound Measuring Guide	5	1.25	6.25
Suture, Suture Removal Kit, Bach	20	1.88	37.60
Suture, Office and Plastic Surgery Sutures, Silk/Black Braded -			
C6_5.0 Thickness	4	32.93	131.72
Tape, Hypoallergenic Paper Surgical Tape, 2"x10y 6/Box	10	8.74	87.40
Tapo, Lypoanor Somo Lapor Dargiour Lapo, 2 ALO, OSOR			

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Solution, IV, Normal Saline 0.9%, IV Solution - 50cc	50	2.56	128.00
Solution, 14, Rolling Sainte 0,970, 14 Solution 100cc	50	2.06	103.00
Solution, IV, Normal Saline 0.9%, IV Solution - 100cc	50	2.13	106.50
Solution, IV, Normal Saline 0.9%, IV Solution - 250cc		2.25	112.50
Solution, IV, Normal Saline 0.9%, IV Solution - 500cc	50		
Solution, IV, Normal Saline 0.9%, IV Solution - 1000cc	50	2.56	128.00
Solution, IV, Sterile Water, IV Solution - 1000cc	50	30.00	1,500.00
Solution, IV, Sterile Water, IV Solution - 250cc	50	51.00	2,550.00
Solution, 21, Solution 1. West, 200			
PRODUCT			
Medication, Inhaler, Aero Inhaler, 7.7g/100 metered actuations	20	5.63	112.60
Medication, Oral Medicaiton Set, 1-Box of Each Oral Med (11			
	100	173.34	17,334.00
different)			•
Medication, Powder for Reconstitution 10mL Vial, 10	100	415.15	41,515.00
Boxes/Case		415.15	1,245.45
Medication, 10 mL Vial, Sterile Water 10 Boxes/Case	3		1,129.55
Medication, Ampule, Ampule 2mL, Sterile Water 20 Boxes/Case	1	1,129.55	
Medication, EpiPen Trainer	3	5.31	15.93
Medication, Heparin Training Pac - 1000u/10,000u vials, 10			
Boxes/Case	2	473.45	946.90
Medication, Insulin, Insulin 70/30	6	1.56	9.36
Medication, Insulin, Insulin NPH/Regular Insulin, u100 10mL	-		
Medication, misum, misum Nrth Regular misum, a roo room	2	49.84	99.68
Vials Sterile Water 20 Pacs/Box	3	43.70	131.10
Medication, 2mL Vial, Sterile Water 40 Vials/Box			
Medication, Mini Vial 2mL, Sterile Water 40 Boxes/Case	1	1,660.60	1,660.60
Medication, Optic, Opte Drops, Sterile Water 100/Box	1	180,00	180.00
Medication, Patch, Nitro Derm, Each	40	0.60	24.00
Medication, Pill Spliter	2	4.70	9.40
Medication, Pill Crusher Pro Model, Each	1	116.88	116.88
	1	2.49	2.49
Medication, Souffle Cups, 250/Bag	3	1.56	4.68
Medication, Medicine Cups, 100/Case	2	14.06	28.12
Medication, Nitr Derm 25/Box	4	14.00	20132
Medication, Ampule, Ampule 2mL, Sterile Water 100	^	50.45	110.00
Ampules/Box	2	59.45	118.90
Irrigation, Solution, Sterile Water Irrigation, 500 mL Plastic			20 40
Container	30	2.99	89.70
Irrigation, Solution, Normal Saline 0.9%, 500 mL Plastic			
Container	30	2.99	89.70
Containo			
PRODUCT			
G. C. Juliantian Empressay Empressay Eve Wash Station	3	28.74	86.22
Safety, Irrigation, Emergency, Emergency Eye Wash Station	100	3.38	338.00
Safety, Safety Glasses, Tomahawk, Blue Frame	100	5.50	330.00
	1	146.19	146,19
Instruments, Instrument Bundle, 37 Common Instruments	1	•	15.18
Instruments, Mayo Hegar Needle Holder, 8" Straight	3	5,06	
Instruments, May Instrument Stand, Single-Post	1	122.49	122.49
· ·			
			1 555 77.0
Dressings, 3M Steri-Drape Basic Set-up Pack	10	15.75	157.50
<del>-</del> -			

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			TOBO ATOT -
De de Grant Duana Surgical Pack	6	27.00	162.00
Dressings, 3M Steri-Drape Surgical Pack Dressings, Dressing Change Tray with Abdominal Pad, Each	5	4.81	24.05
Dressings, Dressing Change Tray Will Hodolinia 2 22,			
מחווריד			
PRODUCT Wound, Wound Drainage Suction Reservoir, "Hemovac"	5	9.38	46.90
Wound, Jackson Pratt, Jackson Pratt Wound Drainage System	5	28.69	143.45
Wound, Jackson Flatt, Jackson Flatt Whing	5	16.19	80.95
Wound, Jackson Pratt, Style Tubing Wound, Irrigation Tray with Piston Syringe	5	1,94	9.70
Wound, Irrigation Tray with Tiston Syrings			
Tell I amangager Track I ofov Free	2	73.25°	146.50
Kits, Laparoscopy Tray, Latex Free Kits, Sexual Assault Evidence Collection Kit	3	18.69	56.07
Kits, Forensic Science Wound Simulation Kit	1	743.75	743.75
Kits, Forensic Science Would Billiam Terry with Rulh Springe	5	1.94	9.70
Kits, Irrigation, Irrigation Tray with Bulb Syringe  Kits, Irrigation, Irrigation Tray with Bulb Syringe			
Kits, Urinary, Closed Insert Foley Tray, Sterile, 16 Fr. 5cc	10	13.69	136.90
balloon	20	3.13	62.60
Kits, Gastric, Gastric Sump Tube, 14 Fr	10	5.73	57.30
Kits, Shroud, Adult Shroud Kit			
(36)	5	1.07	5,35
Patient Care, Urinal, Male	,		
EQUIPMENT	2	2,000.00	4,000.00
Equipment, Exam Table	7	4,797.00	33,579.00
Equipment, Hillrom 894 ICU Bed (refurbished)	1	3,000.00	3,000.00
Equipment, Birthing Bed	ō	247.00	0.00
Equipment, Bedside Table, gunstock	16	200.00	3,200.00
Equipment, Overbed Table, gunstock	î	2,340.00	2,340,00
Equipment, Air-shield Critical Care Infant Warmer	16	113.00	1,808.00
Equipment, Revolving Stool	4	40.00	160.00
Equipment, Foot Stool	2	97.00	194.00
Equipment, Accu-Check Advantage Kit	2	146.00	292.00
Equipment, X-ray View Box	1	61.00	61.00
Equipment, Transfer Board	2	121.00	242.00
Eduiament Aperoid Sphygmomanometer	4	121.00	
Equipment, In-Room Sharps Diposal System with Glove	20	62.00	1,240.00
Dienenser	5	31.00	155.00
Equipment, IV Stand, Chrome finish Adjustable	2	267.00	534.00
Reviewent Vangaroo Feeding Pump (Kefurbisheu)		866.00	3,464.00
Taniament IMED PC-2TX Dual Channel IV Pump (Returbished	) 2	1,399.00	2,798.00
Equipment, Gemini Alaris PC-4 Channel IV Pump (Returbished)	) ~	716.00	716.00
Equipment, Isolation Cart	1 2	1,171.00	2,342.00
Equipment, Medication Cart	2	1,146.00	2,292.00
Equipment, Emergency Cart Adult		1,146.00	1,146.00
Ravinment Emergency Cart Pedi	1	1,650.00	3,300.00
Equipment, Brosleow Pedi Emergency Kit	2	6,324.00	12,648.00
Raninment, Zoll Defibrillator	2	170.00	340.00
Equipment, Nu-Trach Cricothyroid Kit	2		399.00
Equipment, Laryngeal Mask, Size 4	2	199,50	330.00
Equipment, Combitube Training Kit Airway	4	82.50	916.00
Equipment, Macintosh Laryngoscope Set	4	229.00	1,068.00
Equipment, Miller Laryngoscope Set	4	267.00	1,000.00

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			0
Equipment, Wire Shelving	6	300.00	1,800.00
SIMULATORS			
Simulators, METI	1	68,000.00	68,000.00
Simulators, METI Pedi	1	68,000.00	68,000.00
Simulators, SimMan	4	29,800.00	119,200.00
Simulators, SimMan Nursing Kits for Training	2	6,309.00	12,618.00
Simulators, SimBaby	2	29,800.00	59,600.00
Simulators, Hal	1	19,995.00	19,995.00
Simulators, Hal 2 Touch Screen Monitors	1	2,000.00	2,000.00
Simulators, Noel - Birthing and OB Emergency	2	15,995.00	31,990.00
Simulators, Virtual IV - Adult & Infant (Package of 4 systems, 2			
adult and 2 child)	1	44,000.00	44,000.00
Simulators, Microsimulation for all students	0	160.00	0.00
Simulators, Heart Code ACLS System	0	99.00	0.00
Simulators, Heart Code ACLS Anywhere	0	99,00	0.00
Simulators, Virtual Clinical Excursions Development	0	100,000.00	0.00
Simulators, Virtual Chineal Execusiona Development	-	·	
COMPUTERS			10.004.00
Computer, Dell Desktop XPS600	26	1,619.00	42,094.00
Computer, Dell Laptop-Inspiron 9300	6	1,249.00	7,494.00
Computer, Monitor Regular	40	479.00	19,160.00
Computer, Monitor Large	2	1,199.00	2,398.00
Computer, Laser Printer	4	1,799.00	7,196.00
Computer, Microphone	50	50.00	2,500.00
Computer, interophene			+
TOTAL			\$672,721.73

#### g. Space

The four-story M. Christine Schwartz Center features classrooms and clinical practice labs, seminar and conference rooms, a computer lab, and a simulation academy, all equipped with the latest technology. The first three floors of the 53,000-square-foot facility opened in fall 2006 at an approximate cost of \$16.3 million including maintenance endowment. The fourth floor is currently under construction for an estimated cost of \$4.2 million including the maintenance endowment.

Three "smart" high-technology classrooms offer an interactive learning environment and opportunities for distance instruction with clinical and educational partners around the globe. Each room features multifunctional presentation technology, allowing faculty to utilize the full range of computer-based instructional capabilities. Two side-by-side rooms on the first floor, 1,740 square feet each with a seating capacity of 96 individuals per room, are linked electronically to an 88-seat, 1,330-square-foot room on the third floor, creating a large "cyber auditorium." With a combined total of 280 seats, this "cyber auditorium" is available for classes and presentations by visiting speakers. A fourth floor of the building is under construction.

The Schwartz Center allows for scheduling of all doctoral classes in the building. There is a need for doctoral students to have a communal office/lounge area within the Schwartz Center. With the completion of the fourth floor, this should be possible.

h. List any other physical resources such as office equipment, necessary to the proposal.

At the present time, the existing office equipment is sufficient for the new program.

i. Estimate incremental laboratory equipment for succeeding years.

The equipment will be adequate for the program as the simulation lab is shared by undergraduate and graduate students.

#### 3. CURRICULUM

#### a, Overview

The AACN has provided schools of nursing with "The Essentials of Doctoral Education for Advanced Nursing Practice" whose guidelines were used in the curriculum development for the proposed DNP program. The document outlines eight foundational curricular elements and competencies that should be present in all DNP programs. The depth and focus of the core competencies, however will vary according to the particular specialty or role for which the student is preparing. These Essentials are:

- 1. Scientific Underpinnings for Practice
- 2. Organizational and Systems Leadership for Quality Improvement and Systems Thinking
- 3. Clinical Scholarship and Analytical Methods for Evidence-Based Practice
- 4. Information Systems/Technology and Patient Care Technology for the Improvement and Transformation of Health Care
- 5. Health Care Policy for Advocacy in Health Care
- 6. Interprofessional Collaboration for Improving Patient and Population Health Outcomes
- 7. Clinical Prevention and Populations Health for Improving the Nation's Health
- 8. Advanced Nursing Practice

The following chart maps the proposed DNP courses against the AACN's DNP Essentials.

# DNP Courses with ANCC DNP Essentials

DINF Courses with Africe Divi				_				
	L.Scientthe Underpinnings for Practice	II:Organizational and Systems Leadership	IIClinical Scholarship & Analyfical Methods EB	IV:Technology for Info Systems and Patient Care	ViHealth Care Policy for Advocacy	VI-Interprofessional Collaboration	VII-Clinical Prevention and Population Mealth	X VIII-Advanced Nursing Practice
DNP Courses	👸	≝_	胄	È	3	5.	EZ.	_124
Evolution of Nursing Practice & Application of Theory in Practice	X			]		X		X
Research I: Evaluating the Evidence for Practice			X	<u> </u>	<u> </u>	<u> </u>		<b> </b>
Population Based Health & Health Care Disparitles		Х	<u> </u>	<u> </u>	<u> </u>	X	X	<b>\</b>
Health Care Economics & Health Care Financing		X	<u> </u>	<u> </u>	<u> </u>	<del> </del>	<b>↓</b>	
Technology in Advanced Nursing Practice		<u> </u>	<u> </u>	X	<del> </del> -	<del> </del>	<u> </u>	
Research II: Biostatistical Applications		<u>L</u>	X	1	<u> </u>	<b>↓</b> —	<u> </u>	<del> </del>
Health Care Organization, Policy, and Effecting Change		X	<u> </u>	<u> </u>	X	<del> </del>	<b>↓</b>	<del> </del>
Capstone I	X	X	<del> </del>	X	<u> </u>	X	<del> </del>	X
Capstone II	X	X	X	X	X	X	<del>↓</del>	X
Specialty Cognate	X		1	<u> </u>	<del>-</del>	<u> </u>	<del> </del>	X
International Health		X	<u> </u>		X	X	X	<u> </u>
Practice Immersion	X	Х	<u> </u>	X	1	X	X	X

# b. List the major division or divisions of the discipline in which graduate degree work will be offered.

UMSONHS is an NIH funded Center for Minority Health. We have a PhD program to generate knowledge and provide the evidence base for nursing practice. This is our practice doctorate to prepare advanced nursing practitioners to create, administer and evaluate practice interventions and systems for health care with the focus of reducing health care disparity. There will be 3 tracks, clinical, education, administration Specialty cognates will be the only division of the discipline for the DNP core curriculum. These will correspond to the specialty areas in the field of advanced practice nursing. As nursing specialties evolve over time and new specialties emerge in the field, DNP students will have more choices of specialties in their curriculums.

# c. Evaluate the adequacy of your present undergraduate and graduate curricular structure for the proposed degree

The students who will be admitted to this program will be a licensed registered nurse and already have a master's degree in a specialty area. We will need to remain in compliance with our certifying body's (CCNE through the AACN) recommendations. Eventually, students will have a bachelor's degree and need specialty area courses before taking the core courses of the DNP program. This will provide a conduit from the undergraduate curriculum directly into the DNP, much the way the BSN currently transitions into the MSN program now. If progressing from

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BSN to DNP, DNP nurses will be prepared to sit for the national specialty certifications for which they are qualified.

Until the MSN is completely phased out, graduate level classes will be offered for the master's and doctoral levels (DNP and PhD). Since the target date is 2015, this will give the SONHS several years to effectively transition.

d. List any anticipated additions, deletions and changes in your current curricular structure resulting from this new proposal. For each item, list the faculty involved

All of the courses for the DNP program are new. Course syllabi include information about the faculty who are planned to teach in the program.

e. List any current, anticipated, or agreed upon cooperative interdisciplinary work with other components of the University or with any extramural agency as pertinent to the program

See 1d, above

f. Provide a detailed description of the proposed program including program requirements

#### 1) Prerequisites

Prospective students must have a current RN license and a MSN degree. Candidates with a non-nursing master's degree will be evaluated on a case by case basis. Prospective students for the clinical track must hold national certification as a nurse practitioner, nurse midwife, or nurse anesthetist

#### 2) Courses

The proposed DNP program consists of 3 semesters of full time study. The curriculum is composed of 38 credit hours of which 28 are didactic and 560 clinical hours. The courses are planned to be offered in a weekend format, monthly with web enhancement. The first class is anticipated to start in January, 2009. We will begin another cohort in Fall, 2009 and every fall thereafter. Part time options will be allowed, however some of the courses have prerequisite courses; these must be completed prior to taking certain courses. This will permit a wider market for the degree, as well as permitting students to maintain employment opportunities. These features are essential for us to remain competitive with other DNP programs locally and nationwide.

See Table 1 for the DNP courses. Course descriptions and syllabi can be found in Appendix  $\bf A$ 

### 3) Examinations

Examinations in each course will be used to assess student's ability to learn didactic material and apply this theoretical knowledge in practice. Projects or papers are planned as additional evaluative tools.

## 4) Capstone experience

There is no dissertation required in the DNP, as it is a practice focused doctorate. However, students are required to demonstrate mastery of expert practice knowledge by a capstone project, conducted over the last 2 semesters. This capstone project will require students to apply theory, supported by evidence and expert knowledge of nursing practice in completing a scholarly project of the student's or agency's choice. We will partner with community agencies and health care organizations who have need for a practice change initiative. Students will design and implement a practice change initiative under the direction of a faculty member and preceptor. DNP students will write a report of the experience, detailing the process and an evaluation of the project at the time of completion of the second semester.

## 5) Curriculum

Table 1 Proposed DNP

DND Clauren		Credits
DNP Courses	evidence for practice	3
Research II: Evaluating the Research III: Biostatistical A	Applications for Advanced	3
Practice Nursing Population based Health an	d Health care disparities	3
Effecting Change in Health	Care Organizations &	3
Health Care Policy The Evolution of Nursing I	Practice & Application of	3
Theory in Nursing Practice	·	12
International Health Technology in Advanced I	Practice Nursing 1 clinical redit 4x14=56 clinical hrs.	3
		3
Health Care Economics &	1 manoing	3
Specialty focused cognate DNP Practice Immersion	Experience 5 clinical credits 20x14=280 clinical hrs	6
Capstone DNP project	4 clinical credits 16x14 = 224 clinical hrs	6

# 6) Sample track(s) for the degree

Proposed Curriculum Plan – Clinical & Administration Track# Credits

Propose	d Curriculum Plan – Chnical & Auhumstration Tracks Credits				
_	Semester I				
3	Evolution of Nursing Practice and Application of Theory in Nursing Practice				
3	Research I: Evaluating the evidence for practice				
3	Population based Health and Health Care Disparities				
3	Health Care Economics and Health Care Financing				
	Semester II				
3	Capstone I				
3	Technology in Advanced Practice Nursing				
3	Research II: Biostatistical Applications for Advanced Practice Nursing				
3	Effecting Change in Health Care Organizations & Health Care Policy				
	Semester III				
3	Specialty Cognate				
2	International Health				
3	Capstone II				
6	Practice Immersion				
Total (	Total Credits 38				

Proposed Curriculum Plan - Education Track

# Credit	s
	Semester I
3	Evolution of Nursing Practice and Application of Theory in Nursing Practice
3	Research I: Evaluating the evidence for practice
3	Population based Health and Health Care Disparities
3	Specialty Education Cognate*
	Semester II
3	Capstone I
3	Technology in Advanced Practice Nursing
3	Research II; Biostatistical Applications for Advanced Practice Nursing
3	Specialty Education Cognate*
	Semester III
3	Specialty Education Cognate*
2	International Health
3	Capstone II
6	Practice Immersion
Total C	Credits 38

<sup>\*</sup> Specialty cognates must be graduate level courses in adult education theory & pedagogy, tests and measurements, or curriculum design.

7) Course descriptions (Syllabi are found in Appendix A)

The Evolution of Nursing Practice & Application of Theory in Nursing Practice This course is an overview of the conceptual foundations of nursing science and

nursing practice. Knowledge from basic and applied sciences and ethics as well as the history of the global evolution of nursing practice are examined.

Health Care Economics and Financing

This course is an overview of health care financing and core concepts of health care economics.

Research I: Evaluating the Evidence for Practice

This course is an analysis of evidence-based nursing practice. During the course, students acquire the knowledge base to resolve clinical practice problems and direct evidence-based practice.

Population Based Health and Health Care Health Disparities

This course is an overview of knowledge from nursing, public health and other disciplines for population based assessment. The importance of cultural and ethical dimensions in program development is included.

Effecting Change in Health Care Organizations & Health Care Policy

An exploration of health care organizations and health care policy, and how change is effected in both. Health care policy and planning to address health care disparities at the local, state, and federal levels will be explored. Organizational diagnosis, organizational change, and ethical dimensions of public policy formulations and implementation will be highlighted.

Technology in Advanced Practice Nursing

An exploration of the various aspects of the evolving technology to improve and transform health care and advanced practice nursing. This course prepares DNP nursing students to design, select and use technology to support, manage, and improve patient care and health care systems.

Research II: Biostatistical Applications for Advanced Practice Nursing

This course is an overview of basic statistical concepts and computer applications related to healthcare, nursing, and biomedical research. A basic examination of parametric and nonand/or basic research parametric statistics in program evaluation, process outcomes, studies is included

Capstone I

The capstone project is a required synthesizing initiative for students to apply theory, supported by evidence and expert knowledge of nursing practice, by completing a scholarly project of the student's or agency's choice. Students may design a practice change initiative under the direction of a faculty member and preceptor.

#### **International Health**

his course covers diverse topics that affect the health of the population and advanced practice nursing internationally.

**Practice Immersion Experience** 

This course contains individually precepted learning experiences across the spectrum of advanced practice nursing in a variety of settings. Students will have either clinically focused, education focused or administration focused role immersion experiences.

Capstone II

This second capstone course is the implementation and evaluation of developed in Capstone 1.

## 1) Proposed schedule 2009

#### # Credits

#### Spring

- 3 Evolution of Nursing Practice and Application of Theory in Nursing Practice
- 3 Research I: Evaluating the evidence for practice
- 3 Population based Health and Health Care Disparities
- 3 Health Care Economics and Health Care Financing\*(for educator track, specialty cognate- see below).

#### Summer

- 3 Capstone I
- 3 Technology in Advanced Practice Nursing
- Research II: Biostatistical Applications for Advanced Practice Nursing
- 3 Effecting Change in Health Care Organizations & Health Care Policy or Education cognates\*

#### Fall

- 3 Specialty Cognate
- 2 International Health
- 3 Capstone II
- 6 Practice Immersion

<sup>\*</sup> for the education track, these courses will be replaced by 2 additional specialty cognates, for a total of 3 for the education track. These specialty cognates must be graduate level courses from the School of Education in adult education theory & pedagogy, tests and measurements, or curriculum design.

a. What kinds of teaching will prevail (i.e clinical, classroom, independent research, seminars, etc. and in what proportion?

The faculty of the SONHS is guided by professional pedagogical standards as set forth in (a) The Essentials of Master's Education for Advanced Practice Nursing (AACN, 1998); (b) Nursing: The Scope and Standards of Practice (ANA, 2004); (c) Florida Statutes, Chapter 464 and Florida Administrative Code, Chapter 64B9; and (d) Criteria for the Evaluation of Nurse Practitioner Programs (NTF, 2002). Teaching methods for courses include lecture, multimedia presentations, clinical and preceptor experiences, and simulation. Preceptor experiences for the students are individualized and will occur in a variety of settings appropriate for the student's specialty and course. In addition, courses may be delivered online in accordance with the University's guidelines.

b. Indicate the potential distribution of graduate students among advisors.

A faculty advisor will be assigned to each student for the duration of the program. The faculty advisor's role in the DNP program is one of professional role modeling, support, advising on choice of specialty cognate courses, and advising on potential employment opportunities. The student's faculty advisor may also serve as the faculty of record for the student's capstone courses.

c. Describe any colloquia series, special seminars, or conferences, which will be held.

DNP students will be encouraged to attend continuing education conferences as a method of socialization into their new role. Professors in some courses may require attendance at a specialty organization's monthly meetings as part of course requirements.

We are in the process of establishing an interdisciplinary seminar series for our master's students. We anticipate that the DNP students will be included in this series, as a way of building collaboration with peers and across disciplines. The DNP students will also have the opportunity to attend lectures and grand rounds at the medical center.

#### 4. FACULTY

a. Include a complete vitae for each member of the department who will participate in the program.

Table 2 lists the faculty members who are eligible to participate in the proposed DNP. Curriculum vitae for full time faculty members are found in Appendix B

Table 2
Eligible DNP Faculty

Name	Terminal Degree	Rank	Area of Expertise
Dr. Rosina Cianelli	PhD Nursing	Associate Professor	International Health
Dr. Joseph DeSantis	PhD Nursing	Assistant Professor	Pediatric NP
Maite Garrido	MSN	Instructor	Education, Family NP
Jeanne Gottleib	MSN (PhD candidate)	Instructor	Nurse Midwife
Dr. Rosemary Hall	PhD Nursing	Associate Professor	Population based Health
Elaine Kauschinger	MSN (PhD candidate)	Instructor	Family NP

To the state of th	PhD Nursing	Professor	Research
Dr. Denise Korniewicz		Professor	Epidemiology
Dr. Barbara Luke	ScD	Professor	Policy
Dr. Donna Shalala	PhD	Instructor	Acute Care NP
Joanna Sikkema	MSN	Lecturer	Family NP
Annette Torres	MSN	Assistant Professor	Practice Issues
Dr. JoAnn Trybulski	PhD Nursing		Psych Mental Health NP
Dr. Doris Ugarriza	PhD Nursing	Associate Professor	Health Care Economics
Dr. Steve Ullman	PhD	Professor	Health, Care Donomines

# b. Estimate the need for additional faculty

We are anticipating recruiting 2 additional faculty members for the DNP program. We have 2 master's prepared faculty who are in the process of completing applications to attend a DNP program.

c. Describe the interaction with other graduate programs, i.e. extradepartmental thesis and dissertation committees.

There are no changes anticipated from our current arrangement, as this program does not require a thesis or dissertation.

#### 5. STUDENTS

- a. Estimate the number of students in the program and the pool from which they will come.
- b. Describe requirements for admission to and retention in each degree.
- c. Describe the need for and scientific use of teaching assistants and research assistances.

  Include the number of each and stipends.

We are planning to recruit 6 students in the initial cohort. Thereafter, 8-10 students are expected to be admitted each fall semester. The anticipated enrollment is 20-25 students in the first years of the program. As this is an emerging trend in nursing doctoral education, it is difficult to predict exact numbers. However, the formal adoption of the AACN requirements for certification in 2015 will increase the demand for the DNP degree, thereby having a positive impact on numbers. Classes for the proposed DNP will be held at the University on weekends. This will permit recruitment from a national pool of candidates.

# 1) Admission Requirements:

Prospective students must have a current RN license and a MSN degree. Candidates with a non-nursing master's degree will be evaluated on a case by case basis. Prospective students for the clinical track must hold national certification as a nurse practitioner, nurse midwife, or nurse anesthetist. All candidates must have an undergraduate GPA of

at least 3.0 on a 4.0 scale, and score at least 1000 combined verbal and math on the GRE exam. Three letters of recommendation are also required.

#### 2) Retention in the program:

Students must maintain a minimum UM GPA of 3.0 (4.0 scale). Any student who fails to maintain a 3.0 will be placed on probation and has one additional semester to bring the average to 3.0. If a student fails to attain a UM GPA of 3.0 at the end of the probationary semester will be dismissed from the program and the UMSONHS. In addition, a student must have a grade of "B" to pass a course. If a course grade is less than a "B", the student must retake the course. A student is allowed to retake only one course. Failure to attain a "B" the second time a student takes a course or getting less than a "B" in a second course will result in the student's dismissal from the program and the UMSONHS.

We will primarily reserve our TA and RA positions for our PhD students. However, if additional positions are available, the DNP students will be considered.

#### 6. ADMINISTRATION

- a. Estimate the administrative increments imposed by this program
- b. Describe the arrangements for administration and for academic direction of the program as it pertains to the following:
- 1) Need For Additional Secretarial Help
  The Office of the Dean of the SONHS makes staffing level determinations and coordinates
  secretarial support for the faculty and administration. We anticipate that we will need an
  additional administrative support person for the DNP program.
- 2) Office Equipment And Supplies

The SONHS is organized by department. Office supplies are ordered by staff as necessary and office equipment purchases are coordinated through the SONHS Business Director's office.

3) Travel and other funds

Faculty may request travel funds to attend conferences and meetings. The requests are reviewed and approved by the Dean of the SONHS. Planning is underway to incorporate input from the Associate Deans into a yearly travel allocation for each program.

4) The day to day administration of the program

The Associate Dean of Master's and DNP Programs is charged with the day to day administration of the master's and the DNP programs. The faculty works with the associate dean in the areas of advising and in academic matters. A program director has been assigned to the Nurse Anesthesia

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program and lead faculty to the other specialty NP tracks. The Director of Graduate Admissions and her/his coordinator support the Associate Dean handling graduate student recruitment, admissions, registration, graduation, evaluation, and other duties as assigned.

c. The academic policy-making mechanisms used to implement the program including the criteria for membership in the faculty of the program.

We currently have academic policy making mechanisms in place. Governance of the SONHS is articulated in the School of Nursing and Health Studies Faculty Handbook and the University of Miami Faculty Handbook. There is a Graduate Academic Standing, Admission, and Progressions committee, as well as a Graduate Faculty committee to assist with policy decisions. Initially, faculty members must hold a doctoral degree, or have an MSN with a area of specialization required to meet the instructional needs of the curriculum. Once we have a sufficient number of DNP prepared faculty, faculty members must hold a practice- focused or research—focused doctoral degree.

#### 9. BUDGET

#### a. Three year projected budget

Faculty are shared across multiple programs and have varying teaching loads, based on whether they are tenured, tenure track, or clinical track. This makes exact calculation of costs a challenge. The chart below contains best estimates, given the multiple variables. We are projecting modest enrollment initially, as the experience of DNP programs in other university varies. Many programs have 30 students in each class, some have cohorts of 6 on a rolling admission basis. We prefer modest projections. However, if the recruitment is robust and we have 10 qualified candidates for the first cohort, we will not cap admissions at 6.

	#students	tuition	faculty cost	admin support	overhead	net profit/loss
spring 2009	6	97200	120000	12000	10000	-44800
sum 2009	6	97200	120000	12000	10000	-44800
fall 2009	14	226800	240000	12000	12000	-37200
spring 2010	8	108000	120000	12000	10000	-24010
sum 2010	8	108000	120000	12000	10000	-24010
fall 2010	18	270000	240000	12000	12000	6000
	10	162000	120000	12000	10000	20000
spring 2011 sum 2011	10	162000	120000	12000	10000	20000
sum 2011 fall 2011	20	324000	240000	12000	13000	59000

# b. Comparisons of competing programs

Comparison of the proposed UM DNP with other high quality programs.

The curriculum for the UM DNP was developed according to the AACN DNPEssentials. Some of the programs listed below predate the publication of the Essentials document and may not

have all the curricular elements recommended by the AACN for DNP programs. The total cost for tuition per student is \$51300 (38 credits, \$1350/credit) and is very competitive, given the higher credit requirements of some of the institutions. Table 3 compares the credits of the proposed UM DNP with 5 other AAU Schools.

Table 3 Comparison of Credits in other AAU Schools' DNP

Name	#credits	Med School
U of Washington	45	X
Columbia	40	X
U of Rochester	60 (approx.)	X
Case Western	27	X
University of Maryland	38	X

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# APPENDIX A - Proposed DNP Course Syllabi

#### SEMESTER I

Course Number & Title:

NUR XXX The Evolution of Nursing Practice &

Application of Theory in Nursing Practice

Allocation of Credit:

3 credits, lecture (3 consecutive clock hours/week) lecture

Placement in Curriculum:

First semester, DNP

Faculty Responsible:

Dr. JoAnn Trybulski

Catalog Description:

This course is an overview of the conceptual foundations of nursing science and nursing practice. Knowledge from basic and applied sciences and ethics as well as the history of the global evolution of nursing practice are examined.

## Course Objectives:

 Discuss the contributions from ethics and the psychosocial, biophysical, and organizational sciences to the development of nursing science.

2. Analyze how theories and concepts influence and enhance the development of nursing practice.

3. Examine the historical challenges to the evolution of nursing

evolution of nursing science and nursing practice.

4. Explore how the evolution of nursing science and practice impact the creation of new practice roles.

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Course Number & Title:

**Nursing XXX** 

Health Care Economics and Financing

Number of Credits and Clock Hours:

3 credits, lecture (3 consecutive clock hours per week)

Placement in Curriculum:

First Semester, DNP

Faculty Responsible:

Dr. Ullman - Business School

Prerequisites:

TBA

Co requisites:

TBA

Course Description:

This course is an overview of health care financing and core concepts of health care economics.

Course Objectives:

- 1. Describe basic principles of health care economics.
- 2. Discuss the most common modes of health care financing and reimbursement mechanisms.
- 3. Evaluate the financial aspects inherent in practice initiatives.
- 4. Construct practice initiatives that assist with the resolution of health care disparities according to effective health care financing and economic principles.

Topics: Health care Financing, Reimbursement, Financial barriers, Cost containment mechanisms, market forces impacting health care economics, Practice and systems financial design and monitoring, ethics of health care financial decisions.

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ourse Number & Title:

Nursing XXX

Research I: Evaluating the Evidence for Practice

Number of Credits and Clock Hours: Placement in Curriculum:

3 credits, lecture (3 consecutive clock hours per week)

First Semester

Faculty Responsible:

Dr. Denise Korniewicz

Prerequisites: Co requisites:

Course Description:

This course is an analysis of evidence-based nursing practice. During the course, students acquire the knowledge base to resolve clinical practice problems and direct evidence-based practice.

- 1. Explain the steps in implementation of an evidence-based research project to address health care disparities.
- 2. Discuss the concepts of translational research and it's relationship to evidence-based practice.
- 3. Synthesize evidence-based practice guidelines, the existing knowledge base, and knowledge of the change process to determine when to initiate an evidence-based practice change.
- 4. Critique the evidence base for a variety of practice systems.
- Evaluate clinical outcomes of an evidence-based practice research project or a change in clinical practice.
- 6. Evaluate the ethical components of the nursing research process.

Course Number & Title:

NUR XXX Population Based Health and Health

Care Health Disparities

**Allocation of Credit:** 

3 credits, lecture (3 consecutive clock hours/week)

Placement in Curriculum:

First semester, DNP

Faculty Responsible:

Dr. Rosemary Hall

Co or pre requirements:

Effecting change in Health Care Organizations & Health Care Policy

Catalog Description:

This course is an overview of knowledge from nursing, public health and other disciplines for population based assessment. The importance of cultural and ethical dimensions in program development is included.

- 1. Synthesize knowledge from nursing, public health, and related disciplines for population based assessment leading to program development.
- 2. Compare nursing, public health, and other models of community assessment.
- Identify the process of a needs assessment in a population or aggregate.
- 4. Evaluate care delivery models or strategies using accepted benchmarks of care for their impact on health care disparities, integrating ethical and cultural dimensions.

#### SEMESTER II

Course Number & Title:

**Nursing XXX** 

Effecting Change in Health Care Organizations &

Health Care Policy

Number of Credits and Clock Hours:

3 credits, lecture (3 consecutive clock hours per week)

Placement in Curriculum:

Second Semester

Faculty Responsible:

Drs. Donna Shalala & Steve Ullman

Course Description:

An exploration of health care organizations and health care policy, and how change is effected in both. Health care policy and planning to address health care disparities at the local, state, and federal levels will be explored. Organizational diagnosis, organizational change, and ethical dimensions of public policy formulations and implementation will be highlighted.

- 1. Describe organizational culture as it relates to various health care organizational structures.
- 2. Discuss the role of selected agencies, levels of government, individuals and interest groups in influencing health care policy.
- Analyze health care policy proposals from the perspectives of multiple stakeholders involved in policy decisions.
- 4. Propose quality improvement strategies that effect and sustain change in organizations and policy.
- 5. Develop strategies to advocate for equity and ethical practices in health care policy and health care delivery systems.
- 6. Evaluate health care organizations and policy for the ability to address health care disparities.

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Course Number & Title:

NUR 6XX Technology in Advanced Practice Nursing

Number of Credits 2 credits, lecture (2 consecutive clock hours per week)
1 credit, clinical (4 clock hours per week, 56 hours total)

Placement in Curriculum:

Second Semester

Faculty:

Maite Garrido, MSN, APRN, BC

Prerequisites: Description: Admission to Doctorate in Nursing Practice Course
An exploration of the various aspects of the evolving technology to
improve and transform health care and advanced practice nursing. This
course prepares DNP nursing students to design, select and use technology
to support, manage, and improve patient care and health care systems.

Course Objectives:

- 1. Demonstrate ability to use varied modes of technology in health care education, administration, or care delivery.
- 2. Evaluate modes of technology for use as components in a cost effective health care system.
- 3. Employ simulation technology in the varied roles of advanced practice nursing.
- 4. Examine the ethical dilemmas inherent in use of varied modes of health care technologies.
- 5. Synthesize varied modes of technologies to deliver consumer health care information.

Topics:

Include: telemedicine

computerized records

distance education techniques patient monitoring techniques

simulation technology for patients, patients' families,

educators, and health care providers

legal issues & ethical issues related to modes of

technology

electronic medical records

clinical database design, evaluation

development of consumer health information

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Course Number & Title:

**Nursing XXX** 

Research II: Biostatistical Applications for Advanced

Practice Nursing

Number of Credits and Clock Hours:

3 credits, lecture (3 consecutive clock hours per week)

Placement in Curriculum:

Second Semester

Faculty Responsible:

Dr. Barbara Luke

Prerequisites:

TBA

Co requisites:

**TBA** 

Course Description:

This course is an overview of basic statistical concepts and computer applications related to healthcare, nursing, and biomedical research. A basic examination of parametric and non-parametric statistics in program evaluation, process outcomes, and/or basic research studies is included.

- 1. Assess requirements and assumptions of the various statistical procedures used in outcomes research.
- 2. Identify perspectives, specific aims, processes, applications, and data analysis procedures for parametric and non-parametric statistics.
- 3. Perform and interpret basic statistical analyses using computer statistical programs such as SPSS.
- 4. Evaluate various biostatistics used to study health and vulnerable populations.
- 5. Select appropriate biostatistical methods for a program or process improvement project.

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Course Number & Title

NUR 6XX Capstone I

Number of Credits and Clock

lock 1 cre

1 credit lecture (1 lecture hour/week)

Hours 2

2 credits clinical (8 clinical hours/week) Total:112 hours

Placement in Curriculum:

Second Semester

Faculty:

Prerequisites:

Multiple faculty (each student has a faculty supervisor) Health Care Economics and Health Care Financing

The Evolution of Nursing Practice & Application of Theory in Nursing Practice

Research I

Population Based Health and Health Care Disparities

Pre or Co requisites

Effecting change in Health Care Organizations & Health Care Policy,

Course Description

The capstone project is a required synthesizing initiative for students to apply theory, supported by evidence and expert knowledge of nursing practice, by completing a scholarly project of the student's or agency's choice. Students may design a practice change initiative under the direction of a faculty member and preceptor.

Course Objectives

- 1. Analyze existing models of care delivery and evidence based practice to improve healthcare outcomes.
- 2. Develop a care delivery initiative that addresses health care disparities.
- 3. Employ effective communication and collaboration skills in intraprofessional and interprofessional teams.
- 4. Integrate clinical expertise, leadership, technology, policy, research and business practice in the development of an evidence —based practice project.
- 5. Plan the financial, clinical or educational components of the project.

Topics

problem identification, interdisciplinary collaboration, evaluation of theories and evidence-based clinical practice, community needs assessment, program design and development

#### SEMESTER III

Course Number & Title:

Nursing XXX

International Health

Number of Credits and Clock Hours:

2 credits, lecture (2 consecutive clock hours per week)

Placement in Curriculum:

Third Semester

Faculty Responsible:

Dr. Rosina Cianelli

Course Description:

This course covers diverse topics that affect the health of the population and advanced practice nursing internationally.

Course Objectives:

- 1. Analyze world health indicators and multidimensional forces that influence health care.
- 2. Discuss how health care delivery has changed internationally and how these changes are connected to advanced practice nursing.
- 3. Examine the relationship among culture, gender, spirituality, and ethics, as factors that influence the health practices of health care providers and patients internationally.
- Discuss immigration issues and how immigration policies affect the utilization and design of nursing and health care systems.
- Evaluate the global forces shaping and transforming global health care health systems and the role of nursing in this transformation.

Topics include:

Health care delivery systems, epidemiological indicators, disease management, gender, culture, ethics, spirituality, integrated medicine, and various countries' immigration policies

Course Number & Title:

NUR XXX Practice Immersion Experience

Number of Credits and Clock Hours:

1 credit, lecture (1 consecutive hour/week)
5 credits, clinical (20 clock hours per week, total of
280 clinical hours)

Placement in Curriculum: Faculty Responsible:

Third Semester, DNP Elaine Kauschinger, PhD(c)

Prerequisites:

DNP courses listed in first and second semester,

Pre or Co requisites:

International Health

Catalog Description:

This course contains individually precepted learning experiences across the spectrum of advanced practice nursing in a variety of settings. Students will have either clinically focused, education focused or administration focused role immersion experiences.

- 1. Develop professional interaction and partnerships to facilitate evidence based care and quality patient outcomes.
- 2. Design evidence based interventions to address health care disparities.
- 3. Demonstrate conceptual ability and technical competence for the selected advanced practice nursing role.
- 4. Synthesize knowledge of organizations and health care policy to influence health care and /or delivery of health care that is ethical and cost effective.
- 5. Create interdisciplinary collaborations that promote change in health care systems.

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Course Number & Title

NUR 6XX Capstone II

Number of Credits and Clock Hours 1 credit lecture (1 clock hour)

2 credits clinical (8 clinical clock hours/week) Total:112 hours

Placement in Curriculum:

Third Semester

Faculty: Prerequisites Multiple faculty (each student has a faculty supervisor) Capstone I

**Course Description** 

This second capstone course is the implementation and evaluation of the project developed in Capstone 1.

Course Objectives

- 6. Implement a care delivery initiative to address health care disparities.
- 7. Appraise effective communication and collaboration skills in intraprofessional and interprofessional teams.
- 8. Integrate clinical expertise, leadership, technology, policy, research and business practice in the implementation of an evidence—based practice project.
- 9. Evaluate the financial, clinical or educational components relative to the project and the current and future needs of the patient population.

Topics

Project management, Delivery of intervention, Evaluation of outcomes, policy and guidelines

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APPENDIX B - Eligible DNP Faculty Curriculum Vitae

Mailing Address: P.O. Box 248153 Coral Gables, FL 33124-3850 "School of Nursing and Health Studies Proposal for a Doctorate in Nursing Practice (DNP) Degree"
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SCHOOL OF NURSING AND HEALTH STUDIES

## OFFICE OF THE DEAN

March 31, 2008

Dear Members of the General Welfare Committee:

The Doctorate In Nursing Practice (DNP) is our discipline's practice focused doctorate. The major nursing accreditation body, the American Association of Colleges of Nursing in their 2002 position statement on the DNP wrote "The growing complexity of health care, burgeoning growth in scientific knowledge, and increasing sophistication of technology have necessitated master's degree programs that prepare APNs (advanced practice nurses), including nurse practitioners, to expand the number of didactic and clinical clock hours." In addition, a report from the National Academy of Sciences contained language that recommended the development of a "non-research clinical doctorate in nursing". The vision for nurses prepared with the DNP is that they will be practice experts, capable of designing and evaluating health care delivery innovations. The trend in nursing education is to recognize the DNP degree as preparation for these nursing practitioners. Nationwide the 617 AACN member institutions have endorsed a proposal to move advanced specialty nursing practice preparation to the doctoral level by 2015.

The proposal for the School of Nursing and Health Studies Doctorate in Nursing Practice degree has been reviewed by our Graduate Faculty, the curriculum committee, and our School Council. Suggestions from the members of each of these bodies have been incorporated into our proposal, and this proposal has been approved unanimously. We ask you to consider our proposal to add the Doctorate in Nursing Practice degree. Initially, we plan to offer this degree as a post- Master's degree.

Sincerely,

Nilda (Nena) P. Peragallo, DrPH, RN, FAAN

#### **Faculty Senate Office**

From:

Hardeman, Robyn

Sent:

Monday, June 09, 2008 1:15 PM

To:

Faculty Senate Office

Subject:

FW: e-Veritas

Robyn Hardeman Secretary of the Faculty Senate 325 Ashe Administration Building Loc: 4634 Phone: 305-284-3721

Phone: 305-284-3721 Fax: 305-284-5515

From: University Communications [umcommunications@MIAMI.EDU]

Sent: Monday, June 09, 2008 12:12 PM
To: EVERITAS-HTML@LISTSERV.MIAMI.EDU

Subject: e-Veritas

If you have problems reading this, visit <a href="http://www.miami.edu/news/everitas/2007-08/06-09-08.html">http://www.miami.edu/news/everitas/2007-08/06-09-08.html</a>

Study in Science cites human impact on ocean and atmosphere

New doctoral program in nursing practice starts January

EAP course; Setting Personal Goals

# ENERITAS

For the Faculty and Staff of the University of Miami

Monday, June 9, 2008



# Study in *Science* cites human impact on ocean biology and global atmosphere

Since the 1980's, Joseph M.
Prospero, professor of marine and atmospheric chemistry at the Rosenstiel School of Marine and Atmospheric Science, has pioneered studies in the worldwide measurement of aerosols, fine particles suspended in the atmosphere and carried by winds. His team's work focuses on the aerosol chemistry of the marine atmosphere and their data play a

**Sporting Some Support** 

Randy Shannon, UM's head football coach, stops for a quick display of 'Canes spirit with USAF A1C Jeremy Rivera during a seven-day Morale Entertainment and Armed Forces Entertainment tour that stopped at Scott Air Force Base in Illinois, Landstuhl Regional Medical Center in Germany, the USS Nassau at sea, Al Udeid air base and Camp As Sayliaha in Qatar, the Naval Service Center in Bahrain, and a U.S. air base in Southwest Asia. The tour concluded with a visit with President George W. Bush at the White House on Memorial Day. Shannon joined other NCAA head football coaches, Mark Richt from Georgia, Tommy Tuberville from Auburn, Jack Siedlecki from Yale, and Charlie Weis from Notre Dame, during the journey.

central role in a paper that appears in the May 16 issue of *Science*, "Impacts of Atmospheric Anthropogenic Nitrogen on the Open Ocean."

Scientists have long known that biological processes in the ocean play an important role in the global carbon cycle. Algae and other forms of marine life take up carbon dioxide and nutrients from ocean surface waters and, through the process of photosynthesis, reproduce and grow rapidly in total mass. This process draws carbon dioxide from the atmosphere and partially offsets the growth of carbon dioxide from human activities. Every year approximately one-third of the carbon dioxide released into the atmosphere because of human activities is taken up by the oceans. Consequently any processes that affect the ocean uptake of carbon dioxide can have an effect on global warming. To learn more, click here.

Longtime law school professor Alan Swan killed in car accident

School of Law professor Alan Swan, 74, who joined the University's faculty in 1972, was killed Sunday morning in an automobile accident in Miami. His wife, Mary Joe, was also seriously injured in the accident.

Swan, who taught thousands of students during his career, was planning to retire at the end of the fall 2008 semester. He was the law school's senior expert on private international law and international trade, and for many years served as chair of the school's LL.M. program in international law. He was the author of the most widely used text on international business transactions.

Swan received a B.A. degree from Albion College and a J.D. from the University of Chicago in 1957.

Swan received a B.A. degree from Albion College and a J.D. from the University of Chicago in 1957. He served as an associate for the New York law firm of Milbank, Tweed, Hadley & McCloy, and was assistant general counsel for the Agency for International Development. Before joining UM, he was an assistant vice president and lecturer in law at University of Chicago.

For more information, visit the School of Law Web site.



els file Mursing DNP legislation

#### New doctoral program in nursing practice starts January

The School of Nursing and Health Studies will offer a new Doctorate in Nursing Practice program beginning in January 2009, which will prepare expert nurse practitioners to design, administer, and evaluate practice interventions and health care systems, with a special focus on reducing health care disparities. Equally important, the program will help to address the national nursing shortage by increasing the number of clinical experts qualified to teach at the graduate and undergraduate levels. "The past decade has seen a growing interest in practice-focused doctoral programs in nursing to complement the research-focused Ph.D.," says Dean Nilda Peragallo, in announcing the new program. "National trends are driving the demand for professionals in many fields to hold practice doctorates. Our program will educate

advanced practice nurses who are capable of implementing the science developed by Ph.D.prepared nurses and teaching safe, clinically current practice to the next generation of nursing students."

To learn more, click here. Get ready for hurricane season

Hurricane season has started—and now's the time to review your hurricane plan for your home and workplace. Plans for your safety, property, and office can be found on the University's Emergency Preparedness Web site, www.miami.edu/prepare. Use this Web site to prepare and stay informed regarding hurricanes and other emergencies.

#### After-inventory summer sale at The Lowe Art Museum Store

The Lowe Art Museum Store is offering a 20 percent discount to all UM employees with a valid 'Cane Card on store purchases over \$5 from now through Thursday, June 19. Find unique gifts for art lovers of all ages—coffee-table books, one-of-a-kind jewelry designs, exquisite stationery, creative educational toys, and much more. Museum hours are from 10 a.m. to 5 p.m., Tuesday, Wednesday, Friday, and Saturday: 12 to 7 p.m. on Thursday; and 12 to 5 p.m. on Sunday, For more information. call 305-284-6988.

#### **Employee Assistance Program: Setting Personal Goals**

Setting personal goals is a vital part of accomplishment and helps with personal as well as business planning. This Leadership Academy course will help emerging leaders identify their values, set principle-based goals, and develop an appropriate action plan to achieve these goals. Attend the session on Tuesday, June 10 from 1 to 2:30 p.m. in the Dominion Parking Garage, Professional Development and Training Office Training Room, suite 155. For more information, call 305-243-3090. Attend the same course on the Coral Gables campus on Wednesday, June 25 from 1 to 2:30 p.m. in the Max Orovitz Building, Personal Development and Training Office, room 139. For more information, call 305-284-5110. Individuals must complete the corresponding online CBL prior to enrolling in the course on either campus. To register for the session, visit ulearn.miami.edu and follow the instructions to log-on.

#### Behavior Interviewing

One of the best strategies for retaining employees is ensuring the right candidate is in the best job role. Behavioral Interviewing is a research-based method of choosing the best candidate by using

Hurricanes win Super Regional and advance to College World Series Junior Yonder Alonso homered and senior Enrique Garcia pitched six effective innings as Miami defeated Arizona 4-2 and won their Super Regional Series Sunday night. The victory means that the Hurricanes will advance to their 23rd College World Series in Omaha, Nebraska, next weekend.

Miami's three first-inning runs stood as the Hurricanes (52-9) won the series two games to

"It was a very tough Super Regional." Miami head coach Jim Morris said, "Every game came down to the end. It's great to know we're going back to Omaha,"



Out of the park: Junior Yonder Alonso homered in Miami's 4-2 win last night. Now the 'Canes head to Omaha.

Reliever Carlos Gutierrez, a red shirt junior, pitched the final 1 1/3 innings for his 13th save of the season. Arizona, which won the series opener Friday, stranded seven runners in scoring position.

To learn more, click here. For College World Series ticket information, click here.

behavioral questioning techniques to determine future performance. This is a core requirement for any hiring manager. A session will occur on **Thursday, June 19** from 1 to 4 p.m. in the Dominion Parking Garage, Professional Development and Training Office Training Room, suite 155. Individuals must complete the corresponding online CBL prior to enrolling in the course. To register, visit <u>ulearn.miami.edu</u> and follow the instructions to log-on. For more information, call **305-243-3090**.

# A LA CARTE

UM á la carte features healthy recipes submitted by members of the UM community. If you have a recipe you would like to share, send it to e-veritas@miami.edu.

**Mango Chutney** 

Sarah Artecona, assistant vice president and assistant to the senior vice president of Business and Finance, presents her family's mango chutney recipe adapted from noted biologist David Fairchild's original.



Historically, Fairchild used mangos cultivated at his home, The Kampong, in Coconut Grove. Many of the mango trees he used still grow today at Fairchild Tropical Botanic Garden and Four Fillies Farm.

#### Ingredients:

Servings: 108 (4 large servings per half-pint jar)

- 2.5 tablespoons salt
- 1.5 tablespoons whole mustard seed
- 1.5 tablespoons cinnamon
- 1.5 tablespoons ground cloves
- 1 teaspoon red pepper flakes
- 10 pound mangos, peeled and chopped (use half green and half ripe for best flavor)
- 1.5 pounds currants
- 3 three-ounce packages slivered almonds
- 1 eight-ounce package candied ginger, chopped
- 1.5 cups bell pepper, chopped
- 1.5 cups, onions, chopped
- 1.5 cloves garlic, mashed
- 2.5 lbs. light brown sugar
- 1 quart cider vinegar
- 1 quart red wine vinegar
- \*Also need 27 half-pint jars

#### Directions:

In two large, deep pots bring sugar, vinegar, salt, and spices to a rolling boil. Add all other ingredients and bring to a boil again. Reduce heat, simmer, and stir occasionally to prevent sticking. Chutney is ready when mangos become translucent and mixture becomes golden brown. Ladle into hot, sterilized jars. Make sure to clean rims with a wet cloth before sealing jars. Do not completely close jars until they have cooled.

Nutrition Notes: This recipe is a rich source of Vitamin C, beta-carotene (a form of vitamin A), potassium, and calcium. It's low in calories and fat, has 2 grams of fiber, and is a tasty condiment for vegetables, meats, and poultry dishes.

Nutritional Analysis (per serving): 110 calories, 25 grams carbohydrates (86 percent), 1 gram protein (4 percent), 1.5

**Intensive Geriatric Training** 

Register now for the 2008 Intensive Geriatric Training that will be held July 21-23 at the Miami VA Medical Center. This three-day conference will allow for health care providers in a variety of disciplines to be trained in the delivery of efficient interdisciplinary team care in order to meet the health care needs of older adults. Guest speakers include E. Douglas Beach, secretary of the Florida Department of Elder Affairs, and Natalie Mullett, the deputy director for the Florida Council on Compulsive Gambling. Upon completion of this program, participants will be better able to

grams fat (10 percent).

Our nutritional analysis is prepared by Lisa Dorfman, UM sports nutritionist and lecturer for the Department of Exercise Science at the School of Education.

discuss the specific and combined roles of the interrelated health care disciplines that address geriatric health needs, describe an effective interdisciplinary team, identify appropriate community resources for working with this population, discuss the continuing challenges of preventing and assessing medication errors in older adults, and describe an effective aging sensitivity training experience.

In addition, 20 hours of continuing education will be offered for the following disciplines: medicine, nursing, occupational therapy, physical therapy, social work, mental health, psychology, administration, podiatric medicine, and nutrition. Discounted registration fees for UM and Jackson Memorial Hospital employees makes the training \$100 for all three days. For a full agenda of events, visit <a href="www.miami.edu/magec">www.miami.edu/magec</a>. For more information, call 305-355-9123 or e-mail magec@med.miami.edu.

#### Finish your degree at UM

Attend a Bachelor of General Studies (BGS) information session on **Thursday**, **June 19** at 6 p.m. in Allen Hall, room 101. The BGS is a part-time program designed specifically for individuals who work and who have delayed or interrupted their education. This is a great opportunity to hear about the many features of this adult-friendly UM degree, which also offers the option of completing the last 45 credits through Saturday classes, leaving weeknights and lunch hours free. Attend this information session and meet the dean along with program advisors. Refreshments will be served. To R.S.V.P., call **305-284-2727** or visit <a href="https://www.miami.edu/bgsdegree">www.miami.edu/bgsdegree</a>.

#### Coral Gables Wellness Center summer golf league

Play a round of golf at the Biltmore for only \$21 by joining the Coral Gables Wellness Center summer golf league beginning June 12. Play every Thursday (except July 3) through July 31, with tee times at 4 p.m. and 4:09 p.m. You must register on or before the Monday prior to the Thursday you wish to play. For more information, call 305-284-8518 or e-mail <a href="mailto:intramurals@miami.edu">intramurals@miami.edu</a>. To register, visit the Coral Gables Wellness Center, room 210.

# FOR YOUR BENEFIT

Take advantage of the health and wellness programs offered by Benefits Administration

#### Humana recent mailing error

Humana recently attempted to mail some members a letter notifying them of the reprocessing of a 2008 medical claim. Unfortunately, the letter did not contain the full content. If you received a letter from Humana that did not include an explanation of purpose, please disregard. The letter should have explained that a 2008 medical claim had been reprocessed on your



behalf. The correct version of the letter was mailed by Humana last week. If you have any questions or concerns regarding this letter please contact Benefits Administration at www.miami.edu/benefits/ask.

2007 Health Care Flexible Spending Accounts reimbursement claims due by June 15 Participants enrolled in a 2007 health care flexible spending account must submit claim forms by

Saturday, June 15 for claims incurred between Janûary 1, 2007 and March 15, 2008. Fax the claim reimbursement form to 1-877-369-5616. You may only fax one claim form and its documentation per transmission. To download the Humana FSA claim reimbursement form click <a href="https://example.com/here.co

#### June is Men's Health Month

According to the Centers for Disease Control and Prevention, women are more likely to visit the doctor for annual examinations and preventive services than men. During Men's Health Month in June, take the time to learn about early detection and prevention of common health issues. Based on age, health history, lifestyle, and other important factors, you and your health care provider can determine how often you need to be examined and screened for certain diseases and conditions. Routine exams and screenings can help save lives. Remember, if you are a member of the Humana medical plan, many of your preventive care visits are free, including an annual prostate exam if you are over the age of 45. Also, starting this July, the Urology Department at the Miller School of Medicine will begin a weekly prostate cancer clinic that will be held every Monday from 8:30 to 11 a.m. To schedule an appointment call 305-243-6090. Humana members may view a list of free preventive care benefits here. To read more about men's health month, click here.

If you have questions about any of your UMatter Benefits, visit <u>www.miami.edu/benefits/ask</u> and complete the online form.

Risks of brain surgery

## **TALKINGPOINTS**

100 days of Cuban leadership

"This is discipline. This is efficiency. This is order. This is not grandstanding. This is the old generation clinging to power in Cuba, unwilling to open up the political process."

Jaime Suchlicki, director of the Institute for Cuban and Cuban-American Studies, on festivities for Raul Castro's 100th day as president of Cuba and his birthday in comparison to comparable events under Fidel.

> WTVJ NBC 6 June 4

"The main risks that we would be concerned about would be—since it is on the left side of the brain—is for some loss of speech function. And that it could be...the decreased ability to understand speech

of speech function. And that it could be...the decreased ability to understand speech [or] speak words properly. It may include difficulty using numbers, reading, or writing. A risk may also include decreased vision to the right side of their visual field and motor weakness of their right face, arm, and leg."

Deborah Heros, associate professor of clinical neurology and neuro-oncology at the Miller School of Medicine, on the risks involved in the brain surgery on U.S. Senator Edward Kennedy to remove a cancerous tumor.

WebMD June 3 A walk-a-day keeps the back pain away
"Norestics are berrible

"Narcotics are horrible for people with back, bone, and joint pain. They don't relieve the pain, and they actually worsen the quality of life and make them more sensitive to pain."

Mark Brown, professor and chairman emeritus of the Department of Orthopaedics and Rehabilitation at the Miller School of Medicine, on the tendency for individuals who suffer from minor back pain to resort to medication rather than exercise. Brown's recent book is Conquer Back and Neck Pain: Walk it Off.

The Miami Herald June 3

# EXTRA CREDIT

if you're tooking for lively discussions on timely topics, here's where to find seminars, lectures, classes, and programs available to faculty and staff.

Tuesday, June 10 Book Presentation: Conquer Back and Neck Pain: Walk it Off. Mark D. Brown, professor and chairman emeritus in the Department of Orthopaedics and Rehabilitation, presents his book at 8 p.m. at Books and Books, 265 Aragon Avenue, Coral Gables.

Tuesday, June 10 The Jay Weiss Center for Social Medicine and Health Equity Grand Rounds Series. Judge Steve Leifman, special advisor on criminal justice and mental health for the Supreme Court of Florida, will present "Transforming Florida's Mental Health System" at 12 p.m. at the Rosenstiel Medical Science Building, third-floor auditorium. Lunch will be provided. For more information, e-mail <a href="mailto:Khoughton@med.miami.edu">Khoughton@med.miami.edu</a> or visit <a href="mailto:www.jayweisscenter.org">www.jayweisscenter.org</a>.

Tuesday, June 10 "Upcoming Challenges: From Molecular Imaging to Promotion of

Cardiovascular Health." The Cardiovascular Division presents Valentin Fuster, director of Mount Sinai Heart and the Zena and Michael A. Wiener Cardiovascular Institute at Mount Sinai Medical Center, New York. The event occurs from 12 to 1 p.m. at the Lois Pope LIFE Center, seventh-floor auditorium.

Thursday, June 12 "A.C.E Your Career." Frank Kelly, M.B.A. '07, who was selected as America's Best Dressed Real Man by the editors of *Esquire* live on the *Today* show and has been able to garner national media exposure by appearing live on CNBC, ABC, and NBC as a guest commentator, has been identified as a credible source on managing your personal image and projecting a positive attitude and confidence. Attend this presentation at 6:30 p.m. at the Storer Auditorium. To register, visit this Web site. UM faculty, staff, students, alumni, and NSHMBA members are admitted for \$10, all others are \$20.

Friday, June 13 Friday Noon Lecture Series/LEND Advocacy Talks. Sakina Butt's discussion will address the educational needs of children with sickle cell disease and will include a discussion of the cognitive functions of children after having a stroke. Butt will outline how adults may advocate for their children's needs within the educational system. Melissa Merrick's talk will focus on child protection and domestic violence. The discussions will take place from 12 to 1 p.m. at the Mailman Center for Child Development, room 3023. Lunch will be provided on a first-come, first-served basis. For more information, call 305-243-4466 or e-mail wcastro@med.miami.edu.

Saturday, June 14 "Brain Tumor Talks: Medication and Side Effects." Deborah Heros, physician leader of neurological cancer and member of the Neurological Cancer Site Disease Group at UM/Sylvester, presents from 12 to 1 p.m. at the Deerfield Best Western Hotel, 1050 East Newport Center Drive, Deerfield Beach.

**Saturday, June 21** "Fighting Digestive Cancers." Bach Ardalan, chair of the Stomach and Esophageal Site Disease Group at UM/Sylvester and professor of medicine at the Miller School of Medicine, presents from 12 to 1 p.m. at the Deerfield/Best Western Hotel, 1050 East Newport Center Drive, Deerfield Beach.

Monday, June 23 Department of Medicine Research Conference Series. Jochen Reiser, professor and chief in the Division of Nephrology and Hypertension, will present "Molecular Regulations of the Kidney Filtration Barrier" at 12 p.m. at the MTSL Building, conference room. Lunch will be provided. For more information, e-mail <a href="mailto:zrodriguez@med.miami.edu">zrodriguez@med.miami.edu</a> or visit <a href="mailto:www.med.miami.edu/medicine/x522\_xml">www.med.miami.edu/medicine/x522\_xml</a>.

Wednesday, June 25 Interdisciplinary Stem Cell Institute Seminar. Guochang Fan, research instructor and assistant professor in the Department of Pharmacology and Cell Biophysics at the University of Cincinnati College of Medicine, presents "Hsp20 and MicroRNAs320: Novel Regulators of Cardio Protection" at 12 p.m. in the Clinical Research Building, conference room 1179. For more information, call 305-243-7999 or e-mail gbisbal@med.miami.edu.

Friday, June 27 Second Annual Interdisciplinary Stem Cell Institute Symposium. The Interdisciplinary Stem Cell Institute hosts its 2nd Annual Symposium at University of Miami Hospital, South Building, first-floor conference room. The symposium brings together leading experts to discuss novel data on the latest cutting-edge advancements in the field of stem cell research. Discussions with prominent speakers occur from 7:30 a.m. to 5 p.m. Breakfast and Lunch is provided. Refreshments will be provided during closing remarks of keynote speakers. The conference is seeking poster participation by UM researchers who can showcase recent findings of their research in stem cell biology. Presenters should make their posters both informative and visually interesting. The due date for poster submissions, including abstracts, is Friday, June 13, and should be e-mailed to <a href="mailto:spettigrew@med.miami.edu">spettigrew@med.miami.edu</a>. Attendance is free; registration is required. For more information and registration, e-mail <a href="mailto:spettigrew@med.miami.edu">spettigrew@med.miami.edu</a>.

# TIME OUT

When it's time to relax, check out this listing of University-sponsored concerts, art shows, theatre, and cultural programs.

**Friday, June 13 through Sunday, June 15** *CJ7*. Hong Kong film director Stephen Chow's (*Kung Fu Hustle* and *Shaolin Soccer*) latest offering is a unique, family-friendly film about a struggling widower who gives his only son a strange green orb that transforms into a peppy alien. When this fascinating and strange new pet enters their lives, they learn a poignant lesson about the true nature of family and the things money can't buy. The film screens at Cosford Cinema on Friday at 7 p.m., Saturday at 6 p.m., and Sunday at 4 and 8 p.m. Tickets are \$8 for general admission and are \$6 for seniors, UM faculty, staff, and alumni. For more information, visit <u>com.miami.edu/cosford</u>.

Friday, June 13 through Sunday, June 15 Rear Window. Alfred Hitchcock's classic in which

both the story and visual perspective are dictated by the protagonist's imprisonment in his apartment, where he and the audience observe the lives of his neighbors. The film screens at Cosford Cinema on Friday at 8:45 p.m., Saturday at 2, 4, and 8 p.m., and Sunday at 2 and 6 p.m. Tickets are \$8 for general admission and are \$6 for seniors, UM faculty, staff, and alumni. For more information, visit com.miami.edu/cosford.

Friday, June 27 "Excavating Egypt: Great Discoveries From The Petrie Museum Of Egyptian Archaeology, University College London." Attend a lecture from 7 to 8 p.m. presented by Stephen P. Harvey, director of the Ahmose and Tetisheri Project and adjunct assistant professor in the Department of Anthropology, Stony Brook University, followed by a preview of Eternal Egypt: Photography from the Permanent Collection and a reception from 8 to 10 p.m. Both events occur at the Lowe Art Museum. The lecture is free and open to the public, but regular admission to the reception is \$10, admission for students is \$5. The reception is free for Lowe members. Enjoy light fare and music by Middle Eastern guitar player Pablo Mendoza and cocktails by Bacardi.



# www.miami.edu/veritas



Editor, e-Veritas Robert Yunk **Executive Director of** Communications Todd Ellenberg, APR Assistant Vice President for Communications and Marketing P. David Johnson Vice President for University Communications Jacqueline R. Menendez Published by University Communications

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#### POSSIBLE MEETING PLACES

Admissions	Ext. 5766 (holds 10)			
7.01113310113	Date 3700 (Holds 10)			
Biology, 217 Cox (Cathy)	Ext 3973 (holds ~20)			
Casa Bacardi (downstairs)				
Communication, 4029 Wolfson – Jackie	Ext. 1088 (table - 14; room - 25)			
-Dean Shapiro's office (2nd floor) X 5234				
-Dr. Hofman's office (Gall, 3rd floor)				
- Dean Prilletensky's office ( 4th floor) X 3420				
Engineering,	Ext. 2404, Dean's lecture hall, MCA 202, (holds 76)			
-Industrial Engineering (holds ~15)				
-Mechanical Engineering (X 2571, EB215, holds ~15)				
-Electrical Engineering (X3291)				
-Biomedical Engineering (X2445, 219D, holds ~10)				
English -Ashe , 427	Ext. 2182 (holds 25-30)			
Foreign Lauguages & Literatures 521E Achs	Ent 4050 m (   1 th. (L-11- 12)			
Foreign Languages & Literatures, 523E Ashe Graduate School, Alyssia Moreno (Nursing)	Ext. 4858 x-1, Lily (holds ~12)			
Law, Pat Santa-Coloma, 4th floor conference rm.	Ext. 2904 (table seats 15)			
Sits outside 4th floor conf rm: X1362-Eileen Russell and	Ext. 3978 (holds 35-40) James (A.V. x 3801)			
X4438 Gloria Lastres	James (A.v. x 5501)			
Library, Cuban Heritage Collect. Conf., 2nd floor	Gladys, X4008 (seats 22-1 table & chairs)			
Library, 3rd floor Conf. Rm	Lianui X3551			
Lowe Art Gallery	Liamii A5551			
McLamore Executive Dining Room	Blanca Ripoll X4643 (holds ~ 75)			
Philosophy, 735 Ashe (7th floor)	Ext. 4757 (holds ~8) other room is larger			
Tanosophy, 133 Asite (1 11001)	(AM's only)			
Physics - Library, 3 <sup>rd</sup> Conf. Rm.	Ext. 2323 (holds 35)			
1 nyawa - Edulat 340 Come Kini	Lixi. 2323 (notus 33)			
Religion- Ashe, Ada Orlando, room 705	Ext. 4733 (holds 15)			
	Zam ives (assets te)			
Storer Auditorium	Blanca, x-4643 (holds ~350)			
UC, Linda	Ext. 4351 (suitable for Senate meeting)			
Physical Therapy, Jean, 5th floor conf. Room, Plummer	Ext. 4535 (holds ~ 27)			
W.H. C. I. M.H. Cl. D.	D. (MCA. (L. L.)			
Wellness Center, John Tallon, Classroom B	Ext. 1763 (holds ~ 60)			
	<del></del>			
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Med. Campus – Steve Vasilas, 6-6001, Lois Pope Med. Campus – Tara 6-6868 – Mailman

#### **Faculty Senate Office**

From:

Sanderson, Taber

Sent:

Tuesday, June 03, 2008 5:31 PM

To:

Faculty Senate Office

Subject:

RE: DNP materials for Academic Affairs call

£10 log. #2007-44 614/08-RH-Edded to meb page

It stops with the Executive Committee. No further approval is needed. The full board will ratify the action(s) in October but it is good to go.

Taber Sanderson Office of the Board of Trustees University of Miami Gables One Tower 1320 South Dixie Highway, Suite 1230 Coral Gables, Florida 33146 305-284-4025 305-284-2021 (fax)

----Original Message----

From: Faculty Senate Office

Sent: Tuesday, June 03, 2008 5:19 PM

To: Sanderson, Taber

Subject: RE: DNP materials for Academic Affairs call

Hi Taber, Can you clarify - does it now need to go to the full board before it is officially approved, or does this make it officially approved?

Thanks, Robyn

Faculty Senate Office University of Miami 325 Ashe Administration Building 1252 Memorial Drive Coral Gables, FL 33146 (305) 284-3721 Fax: (305) 284-5515 www.miami.edu/fs

----Original Message----

From: Sanderson, Taber

Sent: Tuesday, June 03, 2008 12:44 PM

To: Faculty Senate Office

Subject: FW: DNP materials for Academic Affairs call

Robyn - this was approved at Executive.

Thanks!! Taber Sanderson Office of the Board of Trustees University of Miami Gables One Tower 1320 South Dixie Highway, Suite 1230 Coral Gables, Florida 33146 305-284-4025