



September 23, 2015

W. Randy Smith, PhD
Vice Provost for Academic Programs, Office of Academic Affairs

M. Scott Herness, PhD
Interim Vice Provost for Graduate Studies and Dean of the Graduate School

Dear Drs. Smith and Herness:

This letter provides documentation for OAA and Graduate School records pertaining to the January 2015 Ohio Board of Regents approval of a proposal to lower minimum credits for the College of Nursing Doctorate of Nursing Practice (DNP) program. The following items are attached in order to this letter as follows:

1. Ohio Board of Regents January 23, 2015 approved meeting minutes that include approval (see p. 8 of 9) for the DNP program credit reduction petition
2. The initial (November 2014) and full (December 2014) petitions from the College of Nursing to the Ohio Board of Regents to request the DNP program credit reduction
3. Spring/Summer 2015 DNP program reconfiguration planning (subsequent to January 2015 OBR approval)
 - a. Review and adjustments to DNP courses and curriculum – key activities
 - b. DNP program reconfiguration transition plans
 - c. Credits-to-clinical hours calculations
 - d. Minimum part-time sample curriculum plan
 - e. Minimum full time sample curriculum plan
 - f. OAA brief format revised course syllabi

Thank you for your review of these materials and please let me know if you need any additional information.

Sincerely,

Celia E. Wills, PhD, RN
Graduate Studies Chairperson & College Secretary; Associate Professor

Copy: Dr. Cindy Anderson, Associate Dean for Academic Affairs and Educational Innovation
Dr. Bernadette Melnyk, Dean
Dr. Margaret Graham, Vice Dean
Dr. Joyce Zurmehly, DNP Program Director



Board of Regents
University System of Ohio

John R. Kasich, Governor
John Carey, Chancellor

FINAL APPROVED Summary Meeting Minutes of the Regents' Advisory Committee on Graduate Study

Ohio Board of Regents

25 South Front Street

7th Floor Main Conference Room #7-001

Columbus, Ohio 43215

January 23, 2015

CALL TO ORDER:

The meeting was called to order at approximately 9:30 a.m. by Chair Patricia Komuniecki of the University of Toledo. The following universities were represented: University of Akron, Bowling Green State University, Case Western Reserve University, Central State University, University of Cincinnati, Cleveland State University, University of Dayton, Kent State University, Miami University, Ohio State University, Ohio University, University of Toledo, Wright State University and Youngstown State University. The representatives for the Northeast Ohio Medical University (NEOMED) and Shawnee State University were absent.

MINUTES:

The minutes of the November 21, 2014 meeting were unanimously endorsed as written.

INFORMATION ITEMS APPROVED VIA E-VOTE:

Ohio State University request for Online delivery of the M.S. in Welding Engineering ***Endorsed by RACGS on December 31, 2014**

Ohio State University request for Online delivery of the Doctor of Nursing Practice ***Endorsed by RACGS on December 31, 2014**

Ohio State University request for Online delivery of the Master of Science in Nursing ***Endorsed by RACGS on 12/31/2014**

ADDENDUM TO THE MINUTES RE THE OSU MSN REQUEST:

Dr. Scott Herness requested an addendum to the minutes. His institution unintentionally omitted one of the fourteen specializations of the MSN circulated to RACGS and OBR staff in his request to receive a formal letter from the Ohio Board of Regents as proof of state authorization to offer these programs in an online delivery format. Dr. Herness will submit the missing specialization as a Delivery Change Request form to Ms. Char Rogge of the Chancellor's staff so that she can write a letter on his behalf. Ohio State University request for Online delivery of the Master of Agriculture Extended Education
***Endorsed by RACGS on December 31, 2014**

INFORMATION ITEMS FOR ENDORSEMENT:

REQUEST FOR DEGREE NAME CHANGE (TITLE CHANGE):

University of Cincinnati request for a Degree Name Change from Doctor of Philosophy- Regional Development Planning to Doctor of Philosophy- Urban and Regional Futures ***Endorsed by RACGS on January 23, 2015**

Miami University request for a Degree Name Change from International Joint Master's degree in Population and Social Gerontology to Master of Arts in Population and Social Gerontology, Mahidol University ***Endorsed by RACGS on January 23, 2015**

REQUEST FOR PROGRAM INACTIVATION:

Cleveland State University request for Program Inactivation of the M.S. in Industrial and Manufacturing Engineering ***Endorsed by RACGS on January 23, 2015**

REQUEST FOR NEW OFF-SITE LOCATION FOR EXISTING PROGRAM:

Miami University request to offer the existing M.Ed. in School Leadership at a New Off-Campus location: Mercer County Educational Service Center, 441 E. Market Street, Celina, Ohio ***Endorsed by RACGS on January 23, 2015**

REQUEST FOR OFF-SITE DELIVERY OF EXISTING PROGRAM:

Ohio University request to offer existing Master's of Higher Education Administration at Chillicothe campus ***Endorsed by RACGS on January 23, 2015**

REQUEST FOR ONLINE DELIVERY FORMAT:

Wright State University request to offer the existing M.Ed. in Educational Technology with a concentration in Health Professions Applications in an Online or Blended/Hybrid Delivery format

***Endorsed by RACGS on January 23, 2015**

REQUEST TO CONTINUE OFFERING EXISTING PROGRAM IN AN ONLINE DELIVERY FORMAT:

Youngstown State University request to continue offering the existing Master of Health and Human Services degree in an Online delivery format ***Endorsed by RACGS on January 23, 2015**

GLOBALIZATION INITIATIVE IN THE STATE OF OHIO:

Ms. Lauren McGarity of the Chancellor's staff provided an update on the Ohio Global Reach to Engage Academic Talent (GREAT) report prepared by the Ohio Board of Regents, in accordance with House Bill 484, containing Chancellor John Carey's Recommendations for Ohio's Postsecondary Globalization Initiative. Language for the budget bill was submitted to the Governor and the General Assembly on December 31, 2014. The report is available online on the main page of the OBR web site.

Ms. McGarity said the report currently is under consideration with the general assembly, and so forth. The Governor's office and the Chancellor have chosen to submit legislative language to codify the recommendations into law. Delegations are scheduled as early as next week to meet with OBR on the policy.

In offering the policy recommendations online, and as a helpful web site tool for students, Ms. McGarity said she wants to make a distinction between the undergraduate and graduate level programs so that we are appealing to both camps. To help her identify the program categories on the web for students to choose from, she sought suggestions from RACGS. Examples such as graduate level programs in business, healthcare, scientific research, humanities, etc., were provided. Chair Komuniecki commented that the graduate college websites at the RACGS member universities are very comprehensive and would have degree lists available if that would be useful to her team.

Ms. McGarity said that undergraduate programs will be rolled-out first, then graduate programs (in phases). This gives ample time for RACGS to provide input on the development of graduate program information for the web site.

Recommendations requiring legislative action:

- Amend state law to eliminate the barrier which limits driving privileges of international postsecondary students in Ohio
- Establish the infrastructure for a state-level, statewide consortium
- Direct the consortium to develop and implement a strategic plan to achieve the three-pronged policy framework

Ms. McGarity said that if the budget bill is approved by the legislature on July 1, 2015, it would go into effect ninety days later.

Chair Komuniecki said RACGS will communicate with Ms. McGarity through Ms. Char Rogge of the Chancellor's staff for graduate level input.

REQUEST FOR NEW DEGREE PROGRAMS:

Wright State University Ph.D. in Interdisciplinary Applied Science and Math: Faculty from Wright State University presented the Ph.D. in Interdisciplinary Applied Science and Math degree program. Following the presentation and a round of questions and answers, there was a motion to approve the proposal, and it was moved and seconded. RACGS voted unanimously in favor of the program in a fourteen "Yes," zero "No" vote. The representatives for NEOMED and Shawnee State University were absent.

Associate Vice Chancellor, Dr. Stephanie McCann of the Chancellor's staff, will take the Wright State University Ph.D. in Interdisciplinary Applied Science and Math program request to the Chancellor for final approval.

Miami University Request to Split Three Specializations in the Existing M.S. in Computational Science and Engineering into Two New Separate Degree Programs:

- **M.S. in Computational Electrical and Computer Engineering**
- **M.S. in Computational Mechanical Engineering**

On behalf of the faculty of the College of Engineering and Computing, Associate Dean Dr. Douglas Troy of Miami University presented the M.S. in Computational Electrical and Computer Engineering degree program, and the M.S. in Computational Mechanical Engineering degree program. Following the presentation and a round of questions and answers, faculty member, Dr. Douglas Troy, confirmed that there will be no changes to the curriculum, and there are adequate resources to offer the programs. The original, existing M.S. in Computational Science and Engineering degree will be suspended in a year or two as part of a phased process.

The University of Akron's representative, Dr. Mark Tausig, expressed concern that Miami University will need to come back the RACGS in one or two years to request changes because the new degree titles are not as reflective of the degree designations as desired.

The University of Dayton's representative, Dr. Bradley Duncan, expressed a concern over the title of the degree specific to: "and computer" that in his opinion should be dropped out of the degree title. Dr. Duncan said this is not an accurate reflection of the degree name and is an outdated title. He recommended making a title change to "computational electrical engineering." He also suggested splitting the programs into three degrees instead of two. He said that this is low hanging fruit for Miami University.

Dr. Ann Frymier of Miami University said that it is unlikely her institution will come back with three new degree programs because the resources are not there to do so.

A discussion ensued over what RACGS should approve for the offerings requested at today's meeting. Dr. Mark Tausig of the University of Akron stated that RACGS can only vote today to approve (or disapprove) what has been submitted by the institution. He suggested voting on the two new degrees as submitted, with the potential for a degree title change form to be submitted in the future.

There was a motion to approve the proposal for a Master of Science in Computational Electrical and Computer Engineering degree as submitted and it was moved seconded. RACGS voted in favor of the program in a twelve "Yes," two "No" vote. The representatives for NEOMED and Shawnee State University were absent.

Associate Vice Chancellor, Dr. Stephanie McCann of the Chancellor's staff, will take the Miami University Master of Science in Computational Electrical and Computer Engineering program request to the Chancellor for final approval.

There was a motion to approve the proposal for a Master in Computational Mechanical Engineering degree as submitted, and it was moved and seconded. RACGS voted in favor of the program in a fourteen "Yes," zero "No" vote. The representatives for NEOMED and Shawnee State University were absent.

Associate Vice Chancellor, Dr. Stephanie McCann of the Chancellor's staff, will take the Miami University Master of Science in Computational Mechanical Engineering program request to the Chancellor for final approval.

CURRICUNET:

Dr. Stephanie McCann of the Chancellor's staff provided an update on CurricUNET. Because of delays in the full launch of the educator preparation programs, OBR is waiting to launch other areas of CurricUNET (including the RACGS functions). She noted that an upcoming major effort is needed to prepare for the launch that includes the back load of data for existing degree programs at each institution. OBR is working with the USO institutions' information systems staff to compare what the OBR has in HEI with what the universities have in their records. She said that it will be a busy year in CurricUNET. Ms. Char Rogge of the Chancellor's staff shared that she is working with a new representative at CurricUNET for development of the RACGS site, and it is being re-worked. It is not yet testable, but progress is being made. Chair Komuniecki asked if the tentative late spring launch of 2015 for RACGS programs is unlikely, and Dr. McCann confirmed that it will not be feasible.

PROFESSIONAL SCIENCE MASTER'S PROGRAMS:

Dr. Scott Herness of The Ohio State University updated the Committee on a potential PSM System for Ohio (e.g., sharing of resources, an annual meeting, the development of a web site for Ohio PSMs). He said that he and Chair Komuniecki were asked to prepare a one-page paper on what is a PSM, and they submitted it to Vice Chancellor Dr. Stephanie Davidson of the Chancellor's staff. On January 20, 2015, Dr. Davidson met with Ms. Dawn Larzerlere of the Governor's office, Dr. Stephanie McCann of the Chancellor's staff, and Ms. Cheryl Hay who is Deputy Chancellor for Higher Education Workforce Alignment of the Ohio Board of Regents. Dr. Herness and Chair Komuniecki anticipate that a meeting will be arranged soon to talk to Ms. Hay about next steps to help PSM students get out into the workforce. He asked the membership if there are programs in the pipeline at the RACGS campuses. Chair Komuniecki spoke of several programs that may be offered at the University of Toledo by the fall. Dr. Zoller Booth of Bowling Green State University spoke of their recently approved Geospatial program as a possible future PSM.

COUNCIL OF GRADUATE SCHOOLS (CGS) CONFERENCE:

Chair Komuniecki asked the membership if they wished to share key takeaways from the December 2014 Annual CGS Meeting that might be useful for RACGS to discuss. Dr. Mary Ann Stephens of Kent State University said that the tone of the plenary sessions was not optimistic for higher education. "It seemed to be gloomy news for higher education, and it does not seem like it will change anytime soon because of re-districting (she referred to the census) and partisan stalemates affecting the budget." What she heard is that their task is to sharpen the message of graduate education and career pathways. Similarly, the takeaway Dr. Margaret Zoller Booth of Bowling Green State University heard is: "We must be advocates for graduate education. Our jobs are going to be more and more about lobbying advocacy for graduate education." Dr. Zianping Zhu of Cleveland State University said that he was asked to be a

presenter for a plenary session on graduate enrollment data. He asked how many of the graduate deans have been involved in the enrollment management, and if they are feeling under pressure to bring-in more graduate students. The collective answer was "Yes!"

LENGTH OF DOCTORAL PROGRAM CREDIT HOURS: STATUS OF REVISIONS TO OBR ACADEMIC PROGRAM MANUAL:

Dr. Stephanie McCann of the Chancellor's staff said that the language revisions RACGS requested specific to Ph.D.'s was submitted in time to meet the deadline for the final version of the OBR Academic Program Approval Manual to be posted to the OBR web. However, finalization of the document has been held-up because of a SARA addendum that needs to be added. Once that has been done, it will be re-posted to the web.

DOCTORAL SSI:

Chair Komuniecki said that no vote will be taken today on discussion for the doctoral SSI formula because more conversation is needed.

Dr. Stephanie McCann asked the membership to recall that Ms. Penelope Parmer of the Chancellor's staff had shared a spreadsheet with the initial proposal formula change of 25% Course Completion (v. historical; 50% Degree Completion (v. Degree Cost); 25% R/D Expenditure, and this is the revised proposal that RACGS supports. (The historic formula is 55%; 30%; 15%.) Dr. McCann asked: "What are the guiding principles for how this money should be distributed? And keep in mind that the state is looking at completions and getting people out into the workforce; that has been the big focus." She asked if RACGS has been able to talk to their IR offices. There was consensus that not everyone has done so. Chair Komuniecki asked if it is too soon to go to our campuses to get this a little clearer. Should RACGS get conversations on the table as soon as possible? Dr. Stephanie McCann felt that is not too soon to ask the IR offices to look at it.

Dr. William Ayres of Wright State University asked for clarification if the cost of degree adjustment had been taken out of the formula. He said that RACGS immediately requested for it to be put back into the formula, but he is not sure if RACGS saw it placed back into the formula. Dr. Mark Tausig of the University of Akron recalled that Ms. Parmer did put the cost of degree adjustment back into the formula. Chair Komuniecki asked Dr. Stephanie McCann to please verify this with Ms. Parmer, and she agreed to do so.

Chair Komuniecki noted that NEOMED has been included in the doctoral formula for 2016 and will receive a fixed amount.

Dr. Stephanie McCann advised that if the cost of degree is not in the formula, it needs to be re-done to be re-run. Chair Komuniecki said the charge for action to RACGS is to bring this back for discussion at the next meeting in March by completing the following items at your campuses:

- What are the guiding principles for how the money should be distributed?
- Provide definitions on completions

The changes will need to be made in order to run the numbers again.

OLD BUSINESS:

Discussion of the petitions to reduce the credit hour limit for DNP programs at the University of Cincinnati and The Ohio State University. There was consensus from RACGS to accept the petitions from the University of Cincinnati and The Ohio State University to lower minimum credits awarded to their institution's DNPs. Dr. Charles Rozek of Case Western Reserve University had to leave the RACGS meeting early, so he submitted his institution's votes in advance of his departure in support of the University of Cincinnati's petition to lower minimum credits awarded to the UC DNP, and The Ohio State University's petition to lower minimum credits awarded to the OSU DNP.

Dr. Komuniecki noted that the RACGS Guidelines are undergoing a further language and text clean-up pertaining to removal of outdated text (e.g., "RACGS shall report to the Board.") RACGS currently reports to the Chancellor on graduate program recommendations. Ms. Char Rogge will circulate the guidelines in advance of the March meeting for final discussion and approval of the revised Guidelines.

NEW BUSINESS:

Chair Komuniecki called for formal degree presentations for the March 27, 2015 RACGS meeting:

- Case Western Reserve University: Master of Science in Patent Practice
- Ohio State University: Master's in Quantitative Risk Management

Program presentations tentatively scheduled for May:

- Ohio State University: Master's in Applied Economics: May 29, 2015
- Kent State Master's in Pedagogy and Athletic Training: May 29, 2015

Dr. Mark Tausig of the University of Akron asked: "Could we discuss ideas at the March meeting about content for the curriculum of doctoral programs that can be re-oriented, what that content should be, and how it maintains academic standards at the same time (to retain an academic focus to the

program)?" Chair Komuniecki agreed that the topic focused on the fundamental changes occurring in doctoral education would be a good one for the March RACGS meeting.

Chair Komuniecki asked the membership if they will consider preparing information to assist Ms. Lauren McGarity of the Chancellor's staff on her charge to RACGS concerning international graduate student data. She proposed to prepare information as a group, or as a working group, perhaps as an e-mail conversation so that RACGS can report-out between now and at the March meeting. To do this, RACGS needs to know what the international population is at the graduate level, at the RACGS institutions. She said this will be useful information to have as we talk to Lauren. Dr. Scott Herness of The Ohio State University made the point that there are three charges made in the recommendations, and RACGS may have something at their campuses that is happening from perhaps one or so of the three recommendations listed. Chair Komuniecki said it would be helpful to provide a snapshot of what is happening at our campuses, and then share it at the March meeting so that RACGS does not have to create a document.

Dr. Margaret Zoller Booth of Bowling Green State University asked if there can be a conversation and direction at the March meeting about policy for Graduate Assistant funding. Chair Komuniecki said that it is a local control issue, and it is not in the RACGS Guidelines, nor in the OBR Academic Program Approval Manual. Chair Komuniecki agreed to add it to the March agenda.

With no other business at hand, the meeting was adjourned.



THE OHIO STATE UNIVERSITY

December 8, 2014

Dr. Scott Herness
Associate Dean, Graduate School
250 University Hall
230 North Oval Mall
Columbus, OH 43210-1366

Dear Dr. Herness:

This letter is to request a petition of the Ohio Board of Regents to allow a reduction of the minimum credit hours for the OSU College of Nursing Doctorate of Nursing Practice (DNP) program, as follows:

- To change the minimum post-masters credit hours requirement from 50 to 36 credits
- To change the minimum post-baccalaureate credit hours requirement from 88 to 73 credits

This petition is submitted pursuant to the November 21, 2014 Ohio Board of Regents discussion of an initial request of the OSU College of Nursing to reduce the minimum total credits for Nursing Doctorate of Nursing Practice (DNP) program. This current petition provides rationale and supporting materials for the specific credit reductions for the OSU DNP program that are referenced above. The following materials are attached as appendices:

Appendix A – November 2014 DNP program credit reduction (initial request)

Appendix B – Rationale for proposed revisions; current and proposed minimum sample curriculum plans

Appendix C – Course descriptions and objectives

Please let me know if you need any additional information and thank you for your review of this request.

Sincerely,

Dr. Celia E. Wills, Graduate Studies Committee Chairperson & College Secretary; Associate Professor

Copy: Dr. Cindy Anderson, Associate Dean for Academic Affairs and Education Innovation, College of Nursing

Dr. Bernadette Melnyk, Dean, College of Nursing

Dr. Margaret Graham, Vice Dean, College of Nursing

Dr. Joyce Zurmehly, DNP Program Director

Appendix A

November 2014 DNP Program Credit Reduction (initial request)



November 7, 2014

Dr. Scott Herness
Associate Dean, Graduate School
250 University Hall
230 North Oval Mall
Columbus, OH 43210-1366

Dear Dr. Herness:

This letter requests a petition of the Ohio Board of Regents (OBR) by the Graduate School to allow reducing the 50 credit minimum post-masters graduate credit hours requirement for the OSU College of Nursing Doctorate of Nursing Practice (DNP) program. The specific rationale for this petition is as follows:

- Per the 2014-2015 Graduate School Handbook, Professional Doctoral programs VII.17, Credit Hours subsection, p. 31, it is stated, *"If a master's degree has been earned by the student, then a minimum of 50 graduate credit hours beyond the master's degree is required."* The College of Nursing Doctorate of Nursing Practice (DNP) program is currently approved by OBR for a minimum of 50 post-masters credit hours based on this policy. However, a review of the credit hours requirements of other DNP programs offered in Ohio, the CIC, and the OSU College of Nursing aspirational nursing schools/colleges (comparison tables are included on p. 3 of this letter) shows that each comparison DNP program has significantly fewer than the minimum 50 credits that is required by OSU. There is a range of 31 to 45 post-masters credit hours for comparison DNP programs, with an average minimum of 38 credits for comparison DNP programs in Ohio, and 34 – 35 credits for DNP programs offered within CIC and aspirational institutions outside Ohio. Thus, there is a significant discrepancy in the required minimum credits for the OSU DNP program as compared to DNP programs offered in other Ohio and benchmark CIC and aspirational schools/colleges.
- The relatively large number of credits for the OSU College of Nursing DNP program is also not consistent with the Commission on Collegiate Nursing Education (CCNE) accreditation recommendations for DNP programs. The OSU DNP program is accredited by CCNE, which relies on the American Association of Colleges of Nursing (AACN) *Essentials of Doctoral Education for Advanced Practice Nursing* (2006)¹ seminal task force report that provides the curricular expectations for DNP programs. The AACN (2006) *Essentials* report (p. 19) provides the following guidance on DNP curricular elements and structure: *"Post-master's programs should be designed based on the DNP candidate's prior education, experience, and choice of specialization.... DNP programs, particularly post-master's options, should be efficient and manageable with regard to the number of credit hours required, and avoid the development of unnecessarily long, duplicative, and/or protracted programs of study."*

¹ American Association of Colleges of Nursing. (2006). *The Essentials of Doctoral Education for Advanced Practice Nursing*. Available online at: <http://www.aacn.nche.edu/publications/position/DNPEssentials.pdf>



- The relatively large number of post-masters credits required for the OSU DNP program is not competitive for achieving the significant growth in enrollments in the DNP program as envisioned in the College of Nursing Strategic Plan (2011-2016) Teaching and Learning Strategic Focus Area: Program Excellence through Innovative Growth. Prospective applicants to DNP programs have multiple programs options from which to choose. Other considerations being equal, prospective students are more likely to select programs of study that can be completed in a shorter period of time with relatively fewer credits.

In context of these considerations, the College of Nursing wishes to realign the total minimum credits for the College of Nursing DNP program to be more consistent with the minimum average credits for benchmark DNP programs within and outside Ohio.

A letter of support from the College of Nursing leadership is attached as p. 4 of this petition.

Please let me know if you need any additional information, and thank you for your review of this request.

Sincerely,

Dr. Celia E. Wills, Graduate Studies Committee Chairperson & Associate Professor

Copy: Dr. Cindy Anderson, Associate Dean for Academic Affairs and Education Innovation, College of Nursing

Dr. Bernadette Melnyk, Dean, College of Nursing

Dr. Margaret Graham, Vice Dean, College of Nursing

Dr. Joyce Zurmehly, DNP Program Director

CIC and Aspirational Nursing Schools/Colleges DNP Program Credits Comparison Table

University	Post-Masters Minimum Total Credits
Indianapolis University School of Nursing*	37
Michigan State University	36
Pennsylvania State College of Nursing	43
Purdue University	41
Rutgers University College of Nursing	35
University of Illinois-Chicago College of Nursing*	45
University of Iowa College of Nursing	31
University of Michigan-Ann Arbor School of Nursing*	37
University of Minnesota-Twin Cities School of Nursing*	37
University of Pittsburgh School of Nursing*+	36
University of Wisconsin-Madison School of Nursing	32
* OSU aspirational institution + Non-CIC aspirational institution	Range of Credits: 31 – 45 Average Credits: 34 - 35

Ohio Nursing Schools/Colleges DNP Program Credits Comparison Table

University	Post-Masters Minimum Total Credits
Case Western Reserve University School of Nursing	34
Kent State University School of Nursing	37
University of Cincinnati School of Nursing	45
Wright State University/ The University of Toledo School of Nursing	36
	Range of Credits: 34 – 45 Average Credits: 38



November 7, 2014

M. Scott Herness
Graduate School
250D University Hall
230 N. Oval Mall
Columbus, OH 43210

Dear Dr. Herness:

This letter is to express the full support of the College of Nursing leadership for the attached petition in regard to reducing the minimum number of credits for the Doctorate of Nursing Practice (DNP) program in the College of Nursing.

The College of Nursing Strategic Mission is to revolutionize healthcare and promote the highest levels of wellness in individual and communities throughout the nation and globe through innovative and transformational education, research, and evidence-based clinical practice. To achieve our mission in transformational education, we need to increase our student enrollment to meet the market demand for clinical nurse experts and leaders with doctoral degrees. However, the current relatively large number of credits required for our DNP program is not fully competitive with the lesser numbers of credits required by other Ohio DNP programs and our CIC and aspirational benchmark comparison schools/colleges of nursing. Our national accrediting standards also provide guidance on the design of DNP programs to be appropriately efficient, including the number of required credit hours.

Thank you very much for your consideration of this important request.

Warm regards,

Bernadette Mazurek Melnyk, PhD, RN, CPNP/PMHNP, FNAP, FAAN
Associate Vice President for Health Promotion
University Chief Wellness Officer
Dean, College of Nursing

Cindy Anderson, PhD, CRNP, FNAP, FAHA, FAAN
Associate Dean for Academic Affairs and Educational Innovation

Appendix B

Rationale for Proposed Revisions

Current and Proposed Minimum Sample Curriculum Plans

Rationale for Proposed Revisions

As described in the November 2014 petition to the Ohio Board of Regents (see **Appendix A**), the rationale to reduce the minimum required credits in the OSU DNP program is based on several key concerns:

- There is currently a significant discrepancy in the required minimum credits for the OSU DNP program as compared to DNP programs offered in other Ohio and benchmark CIC and aspirational schools/colleges
- The relatively large number of credits for the OSU DNP program is not consistent with the Commission on Collegiate Nursing Education (CCNE) accreditation recommendations for DNP programs
- The relatively large number of credits for the OSU DNP program is not competitive for achieving the significant growth in enrollments in the DNP program as envisioned in the College of Nursing Strategic Plan (2011 – 2016) Teaching and Learning Strategic Focus Area: Program Excellence Through Innovative Growth

The proposed revisions to reconfigure the DNP program curriculum plans will realign the total credit hours while also using this important opportunity to further strengthen the core curriculum in relation to accreditation standards and desired DNP program growth. Beyond these goals, the proposed curricular reconfiguration has additional potential advantages:

- Enhances emphasis on essential elements and commonalities of the DNP program across specialty track (Clinical Expert, Nurse Executive) and level of program entry (post-baccalaureate, post-masters) in relation to the American Association of Colleges of Nursing (2006) *Essentials of Doctoral Education for Advanced Practice Nursing* (<http://www.aacn.nche.edu/publications/position/DNPEssentials.pdf>) and OSU College of Nursing DNP program outcomes
- Improves the efficiency and timeliness of program completion
- Improves access to preceptors via reducing some clinical hours in coursework other than the Clinical Immersion courses
- Fewer required credits may result in significantly reduced financial costs to students
- Improved efficiency of program administration may result in reduced costs to the College of Nursing
- The revised core curriculum supports the future possibility of efficiently adding specialization tracks beyond the currently-approved Clinical Expert and Nurse Executive specialties as consistent with strategic program growth

The proposed reconfigured DNP program retains the same seven program outcomes that emphasize practice at the highest level of nursing and leadership skills at the systems level, which are:

- Practice at the highest level of nursing, integrating and applying knowledge from the sciences with the fields of organizational management, ethics, health policy, and information technology
- Demonstrate leadership skills in organizational and health systems management to improve the safety and quality of health care
- Apply analytical skills and translational science methodologies to practice-focused scholarship
- Provide leadership in inter-professional collaborative teams to improve health outcomes for individuals, populations, and systems
- Demonstrate high levels of skill in health promotion and disease prevention strategies for individuals, populations, and systems
- Develop skill in the analysis and shaping of health policy
- Demonstrate skill in the application of ethical decision-making frameworks to resolving ethical dilemmas for individuals, populations, and systems

Process for Revisions and Faculty Approval

The DNP Program Director, Dr. Joyce Zurmehly, in collaboration with the College of Nursing Graduate Studies Committee (GSC) and DNP Subcommittee of the GSC: (a) reviewed the existing curriculum plans; (b) analyzed existing course objectives and course content for potential areas of redundancy and appropriateness of depth and breadth of coverage of concepts in relation to DNP program outcomes and the American Association of Colleges of Nursing (2006) *Essentials of Doctoral Education for Advanced Practice Nursing* that are used to guide course development; and, (c) analyzed clinical hours components of courses (other than the Clinical Immersion courses taken during the last year of the DNP program) to identify potential areas for reductions in course credits. The main outcome of this review was the recommendation for a net reduction of 14 to 15 credit hours in the DNP program.

In December 2014, the proposed credit reduction received the unanimous approval of the DNP Subcommittee, the Graduate Studies Committee, and the College of Nursing faculty. The faculty vote affirms the belief of the College of Nursing faculty and leadership that the proposed reconfiguration of the DNP program will achieve streamlining of redundancy of course objectives and content and better meet the standards of accrediting body guidance on efficiency of DNP program requirements, as balanced with maintaining a high quality DNP program at a world class university.

Summary of Proposed Course and Credit Hour Changes

1. Nurse Executive specialty track
 - a. Reduction of total credit hours from 51 to 36
 - b. Reduction of course credits for 6 Nursing Practice courses (NURSPRCT 8402, 8404, 8480, 8500, 8781, and 8782)¹ and Business Finance 7750 from 3 to 2 credits, including reduction of some course-based clinical hours
 - c. Deletion of two courses with significant content redundancy (NURSPRCT 8403 - Innovation and Complexity Foundations for the DNP Nurse, and NURSPRCT 8600 – The Culture of Systems: A Context of Organizational Peak Performance) that also overlap substantially with content for NURSPRCT 8402 and 8404
 - d. Removal of the requirement to take NURSPRCT 8490 - Health Promotion in the Age of Personalized Health for the Nurse Executive specialization track
2. Clinical Expert specialty track
 - a. Reduction of total credit hours from 50 to 36
 - b. Reduction of course credits for 5 courses (NURSPRCT 8402, 8480, 8500, 8781, and 8782) from 3 credits to 2 credits
 - c. Removal of the requirement to take NURSPRCT 8404 - Nurse Executive Leadership at the Corporate Level
 - d. Removal of the requirement for two elective courses
3. Bachelor of Science in Nursing to Doctorate in Nursing Practice (BSN-to-DNP) track
 - a. Reduction of total minimum credit hours from 88 to 73
 - b. Reduction of course credits for 5 courses (NURSPRCT 8402, 8480, 8500, 8781, and 8782) from 3 credits to 2 credits
 - c. Removal of the requirement to take NURSPRCT 8404 - Nurse Executive Leadership at the Corporate Level
 - d. Removal of the requirement for two elective courses

Specific rationale for changes listed above is as follows:

1. Nurse Executive specialty track
 - a. Deletion of NURSPRCT 8403 - This course has an emphasis on analysis of contemporary innovation theories and complexity science. A review of course objectives and content revealed significant redundancy of NURSPRCT 8403 with NURSPRCT 8404, as well as NURSPRCT 8402.
 - b. Deletion of NURSPRCT 8600 – This course focuses on culture theories in healthcare and the impact of culture on organizational structure, relationship, and outcomes. A review of course objectives and content showed significant overlap with NURSPRCT 8404.
 - c. Removal of the requirement to take NURSPRCT 8490 – This course focuses on social determinates of health disparities and health behaviors and strategies to improve outcomes. While the content is important and remains in both the Clinical Expert specialization and in the BSN-to-DNP track, this course is more challenging to integrate into the Nurse Executive specialty track as a requirement

¹ Course titles and descriptions are included in **Appendix C** on pp. 16-17

and is less central for the focus of the Nurse Executive. Students still will be able to take NURSPRCT 8490 as an elective course within the Nurse Executive specialty track.

2. Clinical Expert specialty track
 - a. Removal of the requirement to take NURSPRCT 8404 - This course is intended to build upon leadership development content from NURSPRCT 8402 that emphasizes the analysis of a Nurse Executive role, as opposed to the Clinical Expert role at the corporate level within complex healthcare systems, and therefore is less central for the Clinical Expert specialty track. Students still will be able to take NURSPRCT 8404 as an elective course within the Clinical Expert specialty track.
 - b. Removal of the requirement for two elective courses - A review of similar DNP programs revealed less than three required elective courses as the norm for DNP programs. One elective course remains in the proposed reconfiguration.
3. Bachelor of Science in Nursing to Doctorate in Nursing Practice (BSN-to-DNP) track
 - a. Removal of the requirement to take NURSPRCT 8404 - This course is intended to build upon leadership development content from NURSPRCT 8402 that emphasizes the analysis of a Nurse Executive role, as opposed to the Clinical Expert role at the corporate level within complex healthcare systems, and therefore is less central for the Clinical Expert specialty track. Students still will be able to take NURSPRCT 8404 as an elective course within the Clinical Expert specialty track.
 - b. Removal of the requirement for two elective courses - A review of similar DNP programs revealed less than three required elective courses as the norm for DNP programs. One elective course remains in the proposed reconfiguration.

Current and Proposed Minimum Sample Curriculum Plans

The table below lists the page numbers in (this) **Appendix B** for current and proposed minimum curriculum plans and credit hours, by each DNP program option (Nurse Executive, Clinical Expert, BSN-to-DNP). See **Appendix C** (starting on p. 15) for course descriptions and objectives.

	Course Numbers, Titles, Credit Hours	Sample Fulltime Curriculum Plan	Sample Part Time Curriculum Plan
Nurse Executive specialty track	p. 6	p. 7	p. 8
Clinical Expert specialty track	p. 9	p. 10	p. 11
BSN-to-DNP track	p. 12	p. 13	p. 14

Nurse Executive (post-masters) Specialty Track
Course Numbers, Course Titles, and Minimum Course Credit Hours

Course Number	Course Title	Current Credits	Proposed Credits
NRSPRCT 8402	Innovation and Leadership Development for the DNP Nurse	3	2
NRSPRCT 8403	Innovation and Complexity Foundations for the DNP Nurse	3	(deleted)
NRSPRCT 8404	Nurse Executive Leadership at the Corporate Level	3	2
NRSPRCT 8480	Quality Improvement in Doctoral Nursing Practice	3	2
NRSPRCT 8490	Health Promotion in the Age of Personalized Health	2	Optional
NRSPRCT 8500	Health Policy for Doctoral Nursing Practice	3	2
NRSPRCT 8510	Ethics in Healthcare Practice, Research, and Policy	2	2
NRSPRCT 8600	The Culture of Systems: a Context of Organizational Peak Performance	3	(deleted)
NRSPRCT 8610	Informatics for Leadership in Health and Health Care	2	2
NRSPRCT 8781	Methods and Measurement in Clinical Nursing Science	3	2
NRSPRCT 8782	Foundations of Evidence---based Practice	3	2
NRSPRCT 8783	Implementing, Facilitating, and Sustaining EBP	2	3
NRSPRCT 8784	Disseminating Evidence to Advance Best Practices, Policy, and Outcomes	2	1
BUSFIN 7750	Healthcare Finance	3	2
NRSPRCT 8898	DNP Clinical Immersion I	7	7
NRSPRCT 8898	DNP Clinical Immersion II	7	7
	TOTAL MINIMUM CREDITS	51	36

Nurse Executive (post-masters) Specialty Track
Sample Fulltime Curriculum Plan
36 credits minimum

Year 1			
	Autumn	Spring *	Summer *
	NP 8782 Foundations of evidence-based practice (2)	NP 8480 Quality Improvement (2)	NP 8610 Informatics for leadership in health and health care (2)
	NP 8781 Methods measurement science (2)	NP 8500 Health policy (2)	NP 8404 Nurse executive leadership at the corporate level (2)
	NP 8402 Innovation and Leadership Development for the DNP Nurse (2)	N 8510 Ethics in (2)	
		BUSFIN 7750 Applied Finance for the Doctor of Nursing Practice (2)	
Year 2			
	Autumn	Spring	Summer
	NP 8783 Implementing, facilitating and sustaining EBP (3)	NP 8784 Disseminating evidence to advance best practices, policy and outcomes (1)	
	NP 8898 DNP Clinical Immersion I (7)	NP 8898 DNP Clinical Immersion II (7)	

*** Shaded header denotes completion of full-time residency requirement**

Nurse Executive (post-masters) Specialty Track
Sample Part Time Curriculum Plan
36 credits minimum

Year 1			
	Autumn	Spring *	Summer *
	NP 8782 Foundations of evidence-based practice (2)	NP 8480 Quality Improvement (2) NP 8500 Health policy (2) N 8510 Ethics (2) NP 8402 Innovation and Leadership Development for the DNP Nurse (2)	NP 8610 Informatics for leadership in health and health care (2) NP 8404 Nurse executive leadership at the corporate level (2)
Year 2			
	Autumn	Spring	Summer
	NP 8781 Methods measurement science (2) BUSFIN 7750 Applied Finance for the Doctor of Nursing Practice (2)	NP 8783 Implementing, facilitating and sustaining EBP (3)	NP 8784 Disseminating evidence to advance best practices, policy and outcomes (1)
Year 3			
	Autumn	Spring	Summer
	NP 8898 DNP Clinical Immersion I (7)	NP 8898 DNP Clinical Immersion II (7)	

* Shaded header denotes completion of full-time residency requirement

Clinical Expert (post-masters) Specialty Track
Course Numbers, Course Titles, and Minimum Course Credit Hours

Course Number	Course Title	Current Credits	Proposed Credits
NRSPRCT 8402	Innovation and Leadership Development for the DNP Nurse	3	2
NRSPRCT 8404	Nurse Executive Leadership at the Corporate Level	3	Optional
NRSPRCT 8480	Quality Improvement in Doctoral Nursing Practice	3	2
NRSPRCT 8490	Health Promotion in the Age of Personalized Health	2	2
NRSPRCT 8500	Health Policy for Doctoral Nursing Practice	3	2
NRSPRCT 8510	Ethics in Healthcare Practice, Research, and Policy	2	2
NRSPRCT 8610	Informatics for Leadership in Health and Health Care	2	2
NRSPRCT 8781	Methods and Measurement in Clinical Nursing Science	3	2
NRSPRCT 8782	Foundations of Evidence---based Practice	3	2
NRSPRCT 8783	Implementing, Facilitating, and Sustaining EBP	2	3
NRSPRCT 8784	Disseminating Evidence to Advance Best Practices, Policy, and Outcomes	2	1
NRSPRCT 8898	DNP Clinical Immersion I	7	7
NRSPRCT 8898	DNP Clinical Immersion II	7	7
Elective		3	2
Elective		3	Optional
Elective		3	Optional
	TOTAL MINIMUM CREDITS	51	36

Clinical Expert (post-masters) Specialty Track
Sample Fulltime Curriculum Plan
36 credits minimum

Year 1 Clinical Expert Full-Time			
	Fall	Spring *	Summer *
	NP 8402 Innovation and Leadership (2) NP 8782 Foundations of evidence-based practice (2) NP 8781 Methods measurement science (2)	NP 8480 Quality Improvement (2) NP 8490 Health promotion (2) NP 8500 Health policy (2) NP 8510 Ethics in (2)	NP 8610 Informatics for leadership in health and health care (2) Elective (2)
Year 2			
	Fall	Spring	Summer
	NP 8783 Implementing, facilitating and sustaining EBP (3) NP 8898 DNP Clinical Immersion I (7)	NP 8784 Disseminating evidence to advance best practices, policy and outcomes (1) NP 8898 DNP Clinical Immersion II (7)	

* Shaded header denotes completion of full-time residency requirement

Clinical Expert (post-masters) Specialty Track
Sample Part Time Curriculum Plan
36 credits minimum

Year 1 Clinical Expert Part-Time			
	Fall	Spring *	Summer *
	NP 8402 Innovation and Leadership (2) NP 8782 Foundations of evidence-based practice (2)	NP 8480 Quality Improvement (2) NP 8490 Health promotion (2) NP 8500 Health policy (2) N 8510 Ethics in (2)	NP 8610 Informatics for leadership in health and health care (2)
Year 2			
	Fall	Spring	Summer
	NP 8781 Methods measurement science (3) Elective (2)	NP 8783 Implementing, facilitating and sustaining EBP (3)	NP 8784 Disseminating evidence to advance best practices, policy and outcomes (1)
Year 3			
	Fall	Spring	Summer
	NP 8898 DNP Clinical Immersion I (7)	NP 8898 DNP Clinical Immersion II (7)	

* Shaded header denotes completion of full-time residency requirement

BSN-to-DNP (post-baccalaureate) Track
Course Numbers, Course Titles, and Minimum Course Credit Hours

Course Number	Course Title	Current Credits	Proposed Credits
NRSPRCT 8402	Innovation and Leadership Development for the DNP Nurse	3	2
NRSPRCT 8404	Nurse Executive Leadership at the Corporate Level	3	Optional
NRSPRCT 8480	Quality Improvement in Doctoral Nursing Practice	3	2
NRSPRCT 8490	Health Promotion in the Age of Personalized Health	2	2
NRSPRCT 8500	Health Policy for Doctoral Nursing Practice	3	2
NRSPRCT 8510	Ethics in Healthcare Practice, Research, and Policy	2	2
NRSPRCT 8610	Informatics for Leadership in Health and Health Care	2	2
NRSPRCT 8781	Methods and Measurement in Clinical Nursing Science	3	2
NRSPRCT 8782	Foundations of Evidence---based Practice	3	2
NRSPRCT 8783	Implementing, Facilitating, and Sustaining EBP	2	3
NRSPRCT 8784	Disseminating Evidence to Advance Best Practices, Policy, and Outcomes	2	1
NRSPRCT 8898	DNP Clinical Immersion I	7	7
NRSPRCT 8898	DNP Clinical Immersion II	7	7
Elective		3	2
Elective		3	Optional
Elective		3	Optional
N7450	Pathophysiology	5	5
N7410	Advanced Health Assessment	3	3
N7470	Advanced Pharmacology	4	4
	Specialty Support courses (various)	2 - 7	2 - 7
	Specialty Clinical Practicum I	7 - 11	7 - 11
	Specialty Clinical Practicum II	8 -12	8 -12
	Specialty Clinical Practicum III	8 - 12	8 - 12
	Midwifery/Women's Health Practicum	10 - 11	10 - 11
	RANGE OF CREDITS	88 - 116	73 - 101
	TOTAL MINIMUM CREDITS	88	73

BSN-to-DNP (post-baccalaureate) Track
Sample Fulltime Curriculum Plan
73 credits minimum

Year 1 BSN to DNP Full-time			
	Fall *	Spring *	Summer
	N 7450 Pathophysiology of Altered Health States (5) NP 8402(8400)/7400 Innovation and Leadership Development for the DNP Nurse (2) N 8510/7440 Ethics in healthcare practice, research & policy (2) NP 8782(8780) Foundations of evidence-based practice (2) Specialty Support Courses (2-7)	N 7410 Advanced Health Assessment (3) N 7470 Advanced Pharmacology in Nursing (4) NP 8490/7490 Health promotion in the age of personalized health care (2) NP 8480/7480 Quality Improvement in doctoral nursing practice (2) N 8510/7440 Ethics in healthcare practice, research & policy (2) Specialty Support Courses (2-7)	NP 8610(8520)/7520 Informatics for leadership in health and health care (2) Specialty Practicum (7-11)
Year 2			
	Fall	Spring	Summer
	NP 8781 Methods and measurement in clinical nursing science (2) Specialty Practicum (8-12)	NP 8500/7500 Health policy for doctoral nursing practice (2) Specialty Practicum (8-12)	Midwifery/Women's Health Practicum IV (10-11)
Year 3			
	Fall	Spring	Summer
	NP 8783 Implementing, facilitating and sustaining EBP (3) N8898 DNP Clinical Immersion I (7)	N8784 Disseminating evidence to advance best practices, policy and outcomes (1) N8898 DNP Clinical Immersion II (7)	

* Shaded header denotes completion of full-time residency requirement

BSN-to-DNP (post-baccalaureate) Track
Sample Part Time Curriculum Plan
73 credits minimum

Year 1 BSN to DNP Part-Time			
2014	Fall	Spring	Summer
	N 7450 Pathophysiology of Altered Health States (5)* NP 8782/8780 Foundations of evidence-based practice (2)	NP 8490/7490 Health promotion (2) NP 8480/7480 Quality I(2) Specialty Support Course (2-7)	NP 8610 Informatics for leadership in health and health care (2)
Year 2			
2015	Fall	Spring	Summer
	NP 8402 Innovation and Leadership Development for the DNP Nurse (2) N 8510/7440 Ethics in healthcare practice, research & policy (2)	N 7410 Advanced Health Assessment (3)* N 7470 Advanced Pharmacology in Nursing (4)*	Specialty Practicum (7-11)
Year 3			
2016	Fall *	Spring *	Summer
	Specialty Practicum (8-12)	Specialty Practicum (8-12)	NMW Practicum IV (10-11)
Year 4			
2017	Fall	Spring	Summer
	NP 8781 Methods and measurement in clinical nursing science (2) Elective (2)	NP 8500/7400 Health policy for doctoral nursing practice (2) NP 8783 Implementing, facilitating and sustaining EBP (3)	N8784 Disseminating evidence to advance best practices, policy and outcomes (1)
Year 5			
2018	Fall	Spring	Summer
	N8898 DNP Clinical Immersion I (7)	N8898 DNP Clinical Immersion II (7)	

* Shaded header denotes completion of full-time residency requirement

Appendix C

Course Descriptions and Objectives

DNP Course Descriptions

NRSPRCT 8193 Individual Studies (Variable credit, 1-6)

Advanced individual studies in selected areas for the DNP student. Prereq: Admission to the DNP program, or permission of instructor. Repeatable to a maximum of 6 cr hrs or 2 completions. This course is graded S/U. (CE, NE, BSN)

NRSPRCT 8402 Innovation and Leadership Development for the DNP Nurse (3 credits)

Examination of leadership development to maximize innovation and positive organizational impact with an exploration of own leadership development. Prereq: Enrollment in DNP program, or permission of instructor. (CE, NE, BSN)

NRSPRCT 8403 Innovation and Complexity Foundations for the DNP Nurse (3 credits)

Examination of the demands for innovations in thinking and solutions to pressing problems in nursing and health care with an emphasis on analysis of contemporary innovation theories and complexity science. Prereq: NRSPRCT 8402. (CE, NE)

NRSPRCT 8404 Nurse Executive Leadership at the Corporate Level (3 credits)

Analysis of the nurse executive position at the corporate level from a complexity leadership perspective with an emphasis on leadership theory and applications in complex healthcare systems. Prereq: NRSPRCT 8403. (CE, NE, BSN)

NRSPRCT 8480 Quality Improvement in Doctoral Nursing Practice (3 credits)

Advanced concepts in collaboration, design, leadership, implementation and evaluation of quality improvement initiatives. Prereq: Admission to the DNP program, or permission of instructor. Not open to students with credit for NURSPRCT 940.02. (CE, NE, BSN)

NRSPRCT 8490 Health Promotion in the Age of Personalized Health Care (2 credits)

Critical analysis of social determinants of health contributing to health disparities, their synthesis with theories of health behavior, and development of strategies to improve health outcomes. Prereq: Admission to the DNP program, or permission of instructor. Not open to students with credit for NURSPRCT 913. (CE, NE, BSN)

NRSPRCT 8500 Health Policy for Doctoral Nursing Practice (3 credits)

Analysis of policy and advocating for change that impacts health at institutional, local, state and federal levels. Prereq: Admission to the DNP program, or permission of instructor. Not open to students with credit for NURSPRCT 940.03. (CE, NE, BSN)

NURSING 8510 Ethics in Healthcare Practice, Research and Policy (2 credits)

Study of the central ethical dilemmas facing Nursing in health care practice, research, and policy. Prereq: Grad standing in Nursing or permission of instructor. Not open to students with credit for NURSING 755. (CE, NE, BSN)

NRSPRCT 8600 The Culture of Systems: Creating a Context for Organizational Peak Performance (3 credits)

Analysis of cultural theories in health care and the impact of culture on organizational structure, relationships, evaluation, and outcomes. Prereq: NRSPRCT 8402. (NE)

NRSPRCT 8610 Informatics for Leadership in Health and Healthcare (3 credits)

Analysis of theories and design as applied to health informatics, evaluation electronic health information resources and patient care technology, and application in DNP practice. Prereq:

Admission to the DNP program, or permission of instructor. (CE, NE, BSN)

NRSPRCT 8781 Methods and Measurement in Clinical Nursing Science (3 credits)

Theory and survey of research methods and measurement issues related to clinical nursing science. Prereq: Admission to the DNP program, or permission of instructor. Not open to students with credit for NURSPRCT 951 or 952. (CE, NE, BSN)

NRSPRCT 8782 Foundations of Evidence-Based Practice (EBP) (3 credits)

Examination of the development and impact of evidence-based practice on health outcomes and the roles of the DNP in integrating evidence into practice and leading organizational change. Prereq: Admission to the DNP program, or permission of instructor. (CE, NE, BSN)

NRSPRCT 8783 Implementing, Facilitating, and Sustaining EBP (2 credits)

Application of EBP principles and the change process to implement, facilitate, evaluate, and sustain evidence-based-practice changes to improve healthcare. Prereq: NRSPRCT 8781 and 8782. (CE, NE, BSN)

NRSPRCT 8784 Disseminating Evidence to Advance Best Practices, Policy, and Outcomes in EBP (2 credits)

Internalization of the roles and responsibilities of the DNP in EBP through dissemination of evidence. Prereq: NRSPRCT 8783. (CE, NE, BSN)

NRSPRCT 8898 DNP Clinical Immersion (7 credits)

Integration and synthesis of knowledge and practice experiences designed to achieve essential and specialty components of the DNP role. Prereq: Successful completion of DNP Professional Examination. Repeatable to a maximum of 21 credits. (CE, NE, BSN)

Course	Descript	Obj 1	Obj 2	Obj 3	Obj 4	Obj 5	Obj 6	Obj 7
8402 Innovation and Leadership Development for the DNP Nurse	Analysis of leadership theories for the Nurse Executive in the creation of complex healthcare system innovation.	Articulate the benefits and challenges of oneself as a leader and describe the steps towards achieving individual peak performance. 1	Analyze the role of the leader in innovation.2	Formulate methods to evaluate levels of self-knowledge and create action steps towards enhancing self-knowledge for leadership development.3	Compare and contrast the theoretical principles of chaos and complexity and apply the concepts through an examination of their relationship to risk, role clarity, peak performance, and innovation. 4	Generate priorities and an action plan for one's leadership development in the DNP program. 5		
8403 Innovation and Complexity Foundations for the DNP Nurse	Examination of the demands for innovations in thinking and solutions to pressing problems in nursing and health care with an emphasis on analysis of contemporary innovation theories and complexity science.	Analyze current challenges in the healthcare system and the multiple situations that require effective change and innovation1	Compare and contrast contemporary change and innovation theories used in nursing and healthcare from the perspective of nurse leaders. 2	Articulate a conceptual definition of innovation relevant to nursing and healthcare systems based on analysis of cross-disciplinary theories and supporting evidence.3	Evaluate the nature of complexity science as it relates to change and innovation in healthcare systems and structures. 4	Analyze studies using innovation theories in healthcare and their relationship to coordinating, integrating, and facilitating accountability of care systems. 5	Compare and contrast the utility of diverse change and innovation theories for nursing systems of practice.6	Analyze the role of the nurse leader as an advocate for creating meaningful strategic and operational change and innovation in healthcare.7
8404 Nurse executive leadership at the corporate level	Analysis of the nurse executive position at the corporate level from a complexity leadership perspective with an emphasis on leadership theory and applications in complex healthcare systems.	Analyze leadership theories for foundations, assumptions, mediators, moderators, ethical considerations, and utility in healthcare.1	Critique theories of leadership within a complexity framework comparing and contrasting the roles of traditional and complexity leaders.2	Evaluate and integrate peak performance principles into the individual and team performance processes.3	Analyze complexity leadership role development specific to behaviors, values, ethics, power and authority, accountability, change facilitation and conflict management within complex healthcare	Analyze leadership skills in the dynamics of collaboration as it relates to the development and maintenance of innovative teams and health work environments.5	Conceptualize a team initiative from problem identification through gap analysis, synthesis and application of complexity leadership principles based on an existing healthcare leadership issue.6	
8600 The culture of systems: creating a context of organization peak performance	Analysis of cultural theories in health care and the impact of culture on organizational structure, relationships, evaluation, and outcomes.	Analyze cultural theories across diverse disciplines and identify common characteristics, ethical considerations, similarities, differences and common applications.1	Analyze contemporary organizational culture theories using elements of traditional concept analysis processes and describe the potential for supporting organizational innovation and change from and evidence-driven	Assess organizational culture instruments for congruency with the evaluation of emerging theories of innovation, emphasizing validity, utility and effectiveness in advancing organizational culture.3	Articulate an evidence-driven organizational model integrating culture, innovation, change and leadership supportive of advancing health, nursing practice and quality.4			
8490 Health promotion in the age of personalized health care	Critical analysis of the social determinants of health contributing to health disparities, their synthesis with theories of health behavior, and development of strategies to improve health outcomes.	Analyze critical differences in reported health status among culturally and ethnically diverse populations.1	Critically analyze the underlying psychosocial mechanisms responsible for differences in health and health outcomes across culturally and ethnically diverse populations.2	Evaluate social determinants of selected self-care health behaviors in populations of interest.3	Analyze issues related to personalized health care in order to optimize health outcomes.4	Critically examine the theoretical underpinnings that may explain differences in access to and use of health care services across culturally and ethnically diverse populations.5	Generate systems level approaches to promoting health in populations of interest.6	
8500 Health Policy for doctoral nursing practice	Analysis of policy and advocating for change that impacts health at the institutional, local, state, and federal levels.	Critically analyze health policy proposals, health policies, and related issues from the perspective of consumers, nursing, other health professionals, and other stakeholders in policy and public forums.1	Demonstrate leadership in the development and implementation of institutional, local, state, federal, and/or international health policy.2	Influence policy makers through active participation on committees, boards, or task forces at the institutional, local, state, regional, national, and/or international levels to improve health care	Advocate for the nursing profession within the policy and health care communities.4	Develop, evaluate, and provide leadership for health policy that shapes health care financing, regulation, and delivery.5	Advocate for social justice, equity, and ethical policies within all health care arenas.6	
8610 Informatics for leadership in health and health care	Analysis of theories and design as applied to health informatics, evaluation of electronic health information resources and patient care technology, and application in DNP practice.	Analyze theories and principles that are used to inform the design and use of electronic health records and information systems.1	Evaluate the quality of online healthcare informatics resources using guidelines from the health sciences and information sciences.2	Determine whether health care information systems meet usability principles for good system design that supports clinical effectiveness and patient safety.3	Use data to inform health program designs and evaluation.4	Analyze ethical considerations in the access and use of digital information.5		

8510	Study of the central ethical dilemmas facing nursing in health care practice, research, and policy.	Identify the central ethical dilemmas facing nursing within the current health care arena.1	Analyze the strengths and weaknesses of major conflicting positions on these dilemmas.2	Formulate and articulate a reasoned position on these dilemmas.3	Evaluate ethical methods of decision making.4	Evaluate ethical decision making from a personal and organizational perspective and analyze how these two perspectives may conflict.5	Describe the purpose of an ethics committee in health care delivery systems. 1	
Ethics in healthcare practice, research, and policy								
8781	Theory and survey of research methods and measurement issues related to clinical nursing science. The AACN Essentials of Doctoral Education for Advanced Nursing Practice (2006) were used to guide course development.	Evaluate the link between theory and research.1	Critique the application of quantitative, qualitative, and mixed method research paradigms.2	Evaluate the congruence of research questions, design and methods.3	Evaluate quantitative and/or qualitative and mixed method approaches to sampling, procedures, measurement, and analysis.4	Analyze issues related to the ethical conduct of research.5		
Methods and measurement in clinical nursing science								
8480	Advanced concepts in collaboration, design, leadership, implementation and evaluation of quality improvement initiatives.	Critically examine national and international priorities for quality improvement in health care.1	Explore the literature on quality improvement issues and interventions relevant to the student's population.2	Evaluate areas of congruence between national and international quality improvement priorities and those of the student's population.3	Develop expertise in the use of advanced collaborative skills in leading interdisciplinary assessment for identifying and selecting the foci for quality improvement initiatives for the student's population of interest.4	Apply the Quality Improvement Model in a proposed QI project relevant to the student's population.5		
Quality Improvement in doctoral nursing practice								
8782	Examination of the development and impact of evidence-based practice on health outcomes and the roles of the DNP in integrating evidence into practice and leading organizational change.	Integrate EBP knowledge and skills into planned strategies for improving health care delivery, driving organizational change and improving patient outcomes.1	Differentiate the key steps in the EBP process.2	Critique evidence-based theories for their strengths and weaknesses.3	Analyze the role of EBP in creating a platform for meeting the DNP nursing essentials for nursing inquiry, inter-professional collaboration and quality improvement.4			
Foundations of EBP								
8783	Application of EBP principles and the change process to implement, facilitate, evaluate, and sustain evidence-based practice changes to improve health care.	Use change theories and innovative change strategies to support the implementation of evidence-based practice change.1	Utilize EBP in practice change implementation, outcomes measurement and sustainability strategies related to a specific clinical practice problem.2	Develop strategies to enhance organizational readiness for evidence-based practice.3	Develop strategies for mentoring others in mentoring and sustaining EBP.4	Synthesize the role of the DNP as a healthcare leader in creating supportive contexts and cultures for EBP among interdisciplinary groups of colleagues and within complex organizations.5		
Implementing, facilitating and sustaining EBP								
8784	Internalization of the roles and responsibilities of the DNP in EBP through dissemination of evidence.	Synthesize the role of EBP in creating a platform for meeting the DNP essential skills for nursing inquiry, inter-professional collaboration and quality improvement.1	Apply advanced steps of the EBP process to influence clinical practice and/or healthcare policy.2	Demonstrate the use of media and innovative strategies for broad dissemination of innovation and evidence produced through EBP change.3	Generate priorities for healthcare leaders to consider in developing organizational goals, responding to population health changes, and setting research priorities.4			
Disseminating evidence to advance best practice, policy. And outcomes								

8898								
DNP Clinical Immersion I	Integration and synthesis of knowledge and practice experiences designed to help students achieve essential and specialty components of the DNP role.	Analyze complex environmental and social processes as they affect the health of individuals, populations and/or systems.1	Synthesize the relationships among diverse factors that have an impact on the management of complex problems.2	Critically analyze multi-disciplinary research in designing interventions and/or health policy.3	Integrate evidence-based research and theoretical models into the creation of health promotion programs, quality improvement efforts, and/or health policy development.4	Evaluate the outcomes and impact of intervention and management strategies.5	Provide leadership in addressing ethical dilemmas.6	Demonstrate leadership excellence in the student's area of expertise in practice and health policy.7

Review and Adjustments to DNP Courses and Curriculum

Spring/Summer 2015

Following the Ohio Board of Regents (OBR) approval of the initial credit reduction petition in early Spring 2015, the Graduate Studies Committee (GSC), DNP Subcommittee of the GSC, and faculty involved in teaching in the DNP program completed a systematic review of the existing courses and adjustments of the sample part-time and fulltime plans of study. The key activities are summarized in the table below.

February 2015	<ul style="list-style-type: none">• Spreadsheet table prepared that included current DNP course descriptions, objectives, and crosswalk table of course objectives to AACN (2006) DNP Essentials• Columns in table completed by DNP faculty to propose revisions to course titles, descriptions, objectives, credits, as appropriate, and to remap the revised course objectives to the DNP Essentials• Principal components analysis done of table to identify areas of discreteness and significant overlap (= redundancy) of course content, with additional recommendations made for refinement of proposed course revisions• GSC, DNP Subcommittee, DNP course faculty meet for full day workshop to review and further refine the proposed course revisions and sample fulltime and part-time plans of study
March 2015	<ul style="list-style-type: none">• Revised courses and sample plans of study reviewed and approved by the DNP Subcommittee, Graduate Studies Committee, and the eligible voting faculty
August/September 2015	<ul style="list-style-type: none">• College of Nursing received the official Minutes of the Ohio Board of Regents (OBR) documenting full approval for the DNP Credit Reduction Petition• Additional refinements to course credits and sample plans of study were made to accommodate needs of students with varying numbers of Masters and Doctoral level clinical hours at DNP program entry – see p. 3-4 for Credits-to-Clinical Hours Calculations• Final sample part-time and fulltime plans of study were approved by the DNP Subcommittee, Graduate Studies Committee, and the eligible voting faculty• Course change requests for Spring 2016 implementation of the reconfigured DNP program were submitted by the College Secretary and approved at the university level
Autumn 2015	<ul style="list-style-type: none">• College Secretary to submit remaining course change requests for revised and new DNP courses• College Secretary to upload DNP program revision documentation to OAA curriculum.osu.edu portal• Date TBD – report to Council on Academic Affairs (CAA)

DNP Program Reconfiguration Transition Plans

The reconfigured part-time and full-time post-masters sample plans of study are attached on the next pages. The total minimum number of post-masters credits is reduced from 50 to 37 credits as consistent with the Spring 2015 OBR-approved minimum of 36 post-masters credits.

The revised DNP course sequence has been implemented as of Autumn 2015, the reduced credits for courses will be implemented starting in Spring 2016, and the reduced credits for courses will apply in full for students matriculating as of Autumn 2016.

Other key points of the transition plans for the reconfigured DNP program are summarized in the table below.

Semester/Year of Program Entry	Program Transition Information
Autumn 2015	<ul style="list-style-type: none">Nursing Practice 8402, 8403, and 8781 will be offered for 3 credits, respectively, instead of 2 credits, respectively.Students will take a Nursing Practice Individual Studies course (NursPrct 8193) in Spring 2016, or a Nursing Group Studies course (NursPrct 8194) for 2 credits for selected DNP-oriented finance contentFollowing Autumn 2016, objectives for selected DNP-oriented finance content (see attached draft syllabus) will be included in selected existing DNP courses that will be updated to include these objectivesThe attached reconfigured plans of study with reduced course credits otherwise will be followed fully, including the replacement of NursPrct 8783 and 8784 courses with the new NursPrct 8896 and 8897 courses, respectively
Autumn 2014	<ul style="list-style-type: none">Fulltime and part-time students who will be graduating at end of Spring 2016 and 2017, respectively, will generally remain on the existing (non-reconfigured) plans of study, in order to take the needed number of credits of NursPrct 8898 (Clinical Immersion) to obtain at least 500 DNP clinical hoursOut-of-sequence students who require courses other than NursPrct 8898 (Clinical Immersion) or NursPrct 8998 (DNP Final Project) courses will have a gap analysis done to inform an individualized plan of study, with any remaining required courses taken within the reduced credit reconfigured DNP program
Autumn 2013 or earlier (including out-of-sequence)	<ul style="list-style-type: none">A gap analysis of the individual plan of study will be done to identify remaining required courses and remaining numbers of clinical hours to be completed.

Credits-to-Clinical Hours Calculations

DNP Program Reconfiguration

Masters Level Clinical Hours

Each post-masters student must have a minimum of 500 clock hours at the Masters level, and an additional 500 clock hours at the Doctoral level, for a total of 1,000 clock hours minimum.

For those who do not have the minimum of 500 Masters level clock hours at DNP program entry, these hours must be obtained during the DNP program.

This will be achieved by the new NursPrct 8896 and 8897 courses that will replace the existing NursPrct 8783 and 8784 courses, which are re-envisioned primarily as clinical courses. A student who takes NursPrct 8896 three times for 3 credits, and NursPrct 8897 twice for 3 credits would obtain a total of 506.25 clinical hours, which meets the 500 minimum requirement for Masters level clinical hours. These courses include a set of competency-based modules that vary from Masters to Doctoral level. Modules also can be completed to meet the doctoral clinical hours requirement (see [Doctoral Level Clinical Hours](#) section below).

Doctoral Level Clinical Hours

For the minimum 500 clinical hours for the DNP program (beyond the 500 minimum clinical hours at the Masters level), these hours will be obtained via two course contexts: (1) completion of doctoral level modules within NursPrct 8896 and NursPrct 8897 for up to 125 doctoral level clinical hours; and, (2) the DNP Clinical Immersion coursework in the final year of the DNP program for a minimum of 375 doctoral level clinical hours. Students who are not able to obtain at least 125 doctoral level clinical hours via NursPrct 8896/8897 will need to enroll for Individual Studies (NP8193) to complete any remaining balance of doctoral clinical hours that is needed to complete the required minimum 500 clinical hours.

To achieve these needs for minimum numbers of clinical hours within preserving the 37 total minimum credit hours for the reconfigured DNP program, the following refinements will be made to the attached sample (part-time and fulltime) plans of study that were developed in February 2015:

- Eliminate the Proposal Development Individual Studies (NursPrct 8193; 1 credit)
- Eliminate the previously-proposed College of Business Finance course (2 credits; not yet developed or offered) and incorporate key content elsewhere within existing courses
- Reduce the credit for NursPrct 8600 from 2 to 1 credit
- Change the Professional Seminar on scholarly writing (NursPrct 8890; 1 credit) in Year 1 to an elective course – students with needs for writing skills development would be strongly encouraged to take this course
- For the part-time plan of study, required courses from Summer of Year 2 were redistributed into Autumn and Spring of Year 2

See next page for details of credits-to-hours calculations for NursPrct 8896 and 8897.

2,250 clinical minutes = 1 credit hour = 37.5 clock hours

Clinical Credits	Clock Hours
0.5 credit	18.75 hours
1 credit	37.5 hours
1.5 credits	56.25 hours
2 credits	75 hours
2.5 credits	93.75 hours
3 credits	112.5 hours

NursPrct 8896 – Practice Inquiry I – variable credit (2-3 credits; 0.5 didactic, 1.5 to 2.5 clinical)

- All students will take 8896 at least once for at least 2 credits
- All students take 8896 for the first time in Spring of Year 1
- Students may repeat 8896 in Summer of Year 1 and Autumn of Year 2 as needed
- A total of 168.75 to 281.25 clinical clock hours are obtained via 8896

NursPrct 8896 Clinical Credits	Clock Hours – 1st enrollment	Clock Hours – 2nd enrollment	Clock Hours – 3rd enrollment	Clinical Clock Hour Totals
1.5 credits	56.25 hours	56.25 hours	56.25 hours	3 x 56.25 hours = 168.75 hours
2 credits	75 hours	75 hours	75 hours	3 x 75 hours = 225 hours
2.5 credits	93.75 hours	93.75 hours	93.75 hours	3 x 93.75 = 281.25 hours

NursPrct 8897 – Practice Inquiry II – variable credit (1-3 credits; 0 didactic, 1-3 clinical)

- All students will take 8897 at least once for at least 1 credit
- Part-time students take 8897 for the first time in Summer of Year 2; may repeat 8897 in Autumn of Year 3 as needed
- Fulltime students take 8897 for the first time in Summer of Year 1; may repeat 8897 in Autumn of Year 2 as needed
- A total of 75 to 225 clinical clock hours are obtained via 8897

NursPrct 8897 Clinical Credits	Clock Hours – 1st enrollment	Clock Hours – 2nd enrollment	Clinical Clock Hour Totals
1 credit	37.5 hours	37.5 hours	2 x 37.5 hours = 75 hours
1.5 credits	56.25 hours	56.25 hours	2 x 56.25 hours = 112.5 hours
2 credits	75 hours	75 hours	2 x 75 hours = 150 hours
2.5 credits	93.75 hours	93.75 hours	2 x 93.75 = 187.5 hours
3 credits	112.5 hours	112.5 hours	2 x 112.5 = 225 hours

DNP Curriculum Reconfiguration Post-Masters Overall Minimum Part Time Curriculum Plan for Clinical Expert and Nurse Executive Track

Part-time and Fulltime sample plans of study approved by the DNP subcommittee and the GSC – February 26, 2015, and revised on August 18, 2015; approved by the Faculty on September 9, 2015

Year 1	Autumn	Credits	Spring**	Credits	Summer**	Credits	Total Credits
	Science of Practice Innovation (NP8403)	2	EBP (NP8782)	2	QI (NP8480)	2	
	Leadership (NP8402)	2	Health Policy (NP8500)	2	Informatics (NP8610)	2	
	Professional Seminar (NP8890)	+	Ethics (N8510)	2			
			Practice Inquiry I* (NP8896)	3			
		4+		9		4	17
Year 2	Autumn		Spring		Summer		
	Methods and Measurement (NP8781)	2	CE or NE Specialty Course (NP8404 or NP8490)	2			
	CE or NE Specialty Course (NP8600 or elective)+	1	Practice Inquiry II* (NP8897)	3			
			DNP Professional Exam				
		3		5			8
Year 3	Autumn		Spring		Summer		
	DNP Final Project (NP8998)	1	DNP Final Project (NP8998)	1			
	Clinical Immersion (NP8898)	5	Clinical Immersion (NP8898)	5			
		6	Graduate in May	6			12
Totals		12		17		8	Total = 37

N = Nursing; NP = NursPrct; CE = Clinical Expert specialty track; NE = Nurse Executive specialty track

* NursPrct 8896 and 8897 replace NursPrct 8783 and 8784, respectively ; ** Year 1 Spring (9 credits) + Summer (4 credits) meets the minimum credits for the Graduate School full time residency requirement

+ Students with writing skills development needs will be strongly encouraged to take NP8890 (Professional Seminar; new course) for 1 credit during the first semester of the DNP program

DNP Curriculum Reconfiguration Post-Masters Overall Minimum Full Time Curriculum Plan for Clinical Expert and Nurse Executive Track

Year 1	Autumn**	Credits	Spring**	Credits	Summer	Credits	Total Credits
	Science of Practice Innovation (NP8403)	2	EBP (NP8782)	2	QI (NP8480)	2	
	Leadership (NP8402)	2	Health Policy (NP8500)	2	Informatics (NP8610)	2	
	Professional Seminar (NP8890)	+	Ethics (NP8510)	2	Practice Inquiry II (NP8897)*	3	
	Methods and Measurement (NP8781)	2	Practice Inquiry I* (NP8896)	3	CE or NE Specialty Course (NP8600 or elective)+	1	
			CE or NE Specialty course (NP8404 or NP8490)	2			
			DNP Professional Exam				
		6+		11		8	25
Year 2	Autumn		Spring		Summer		
	DNP Final Project (NP8998)	1	DNP Final Project (NP8998)	1			
	Clinical Immersion (NP8898)	5	Clinical Immersion (NP8898)	5			
		6	Graduate in May	6			12
Totals		12		17		8	Total = 37

N = Nursing; NP = NursPrct; CE = Clinical Expert specialty track; NE = Nurse Executive specialty track

* NursPrct 8896 and 8897 replace NursPrct 8783 and 8784, respectively

** Year 1 Spring (11 credits) + Summer (8 credits) meets the minimum credits for the Graduate School full time residency requirement

+ Students with writing skills development needs will be strongly encouraged to take NP8890 (Professional Seminar; new course) for 1 credit during the first semester of the DNP program

Brief Format Revised Course Syllabi

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THE OHIO STATE UNIVERSITY

GRADUATE SCHOOL

DEPARTMENT OF NURSING

Nursing Practice 8402

Innovation and Leadership Development for the DNP Nurse

2 credits

Course Description

Examination of leadership development to maximize innovation and positive organizational impact with an exploration of own leadership development.

Prerequisites

Enrollment in the DNP program, or permission of instructor.

Objectives

- Analyze the evolution of conceptual definitions and theories of both traditional and contemporary leadership principles.
- Formulate a useful definition of self-leadership relevant to leading nursing and healthcare systems based on analysis of traditional and contemporary theories of leadership with supporting evidence.
- Evaluate personal leadership strengths and opportunities and the utility of available theories of leadership as a foundation for leading nursing and healthcare systems.
- Apply leadership capacity and opportunities to the processes associated with creating a context for sustaining innovation and change dynamics in organizations.
- Generate a leadership development plan for continuing self-development and growth in personal leadership.

Content Topic List

Course Overview

- Doctor of Nursing Practice and the AACN Essentials of Doctoral Education for Advanced Nursing Practice
- Introduction to innovation and leadership
- Developing as an executive leader
- Cultivating big picture thinking

Leadership, Complexity and Innovation

- Leadership self-assessment
- Past leadership theories and outcomes
- Complexity leadership and the life of systems
- Innovation theory development and translation into action
- Change, innovation, resistance to change
- Energy management for optimal performance

Risk-taking for Growth

THE OHIO STATE UNIVERSITY
GRADUATE SCHOOL
DEPARTMENT OF NURSING
Nursing Practice 8403
Science of Practice Innovation
2 credits

Course Description

Scientific underpinnings for analyzing clinical situations in conjunction with appraising data, theories and concepts that guide nursing practice at the clinical doctoral level.

Prerequisites

Enrollment in the DNP program, or permission of instructor.

Objectives

- Analyze methods of identifying clinical situations or problems that influence the quality of care.
- Analyze a clinical situation or problem by using process models to identify relevant variables and their interconnections.
- Analyze how frameworks, guidelines, and pathways are used to understand clinical situations or problems, inform methods of inquiry, and interpret inquiry results.
- Critique practice frameworks, guidelines and pathways with respect to their theoretical, conceptual, and practical foundations.

Content Topic List

- Critical appraisal of the literature related to students' areas of clinical or executive expertise
- Evidence-based practice models
- Theories and frameworks for clinical practice and leadership in nursing and healthcare
- Concept mapping
- Analysis of theories and theoretical frameworks in relation to clinical practice change

THE OHIO STATE UNIVERSITY

GRADUATE SCHOOL

DEPARTMENT OF NURSING

Nursing Practice 8404

Nurse Executive Leadership

2 Credit Hours

Course Description: Analysis of the role of the DNP nurse executive within complex healthcare systems

Prerequisites: NURSPRCT 8403

Objectives:

1. Explore communication and relationship building competencies for the executive nurse leader within a complex healthcare system.
2. Analyze the DNP leadership role in creating and sustaining a high reliability organization.
3. Analyze the executive nurse leader role in strategic planning and management.

Course Topics:

Leadership Theories

- Analysis of leadership theories and their utility from the executive perspective in healthcare systems
- Application of leadership theories and their utility from the executive perspective in healthcare systems
- “Facilitators” and “barriers” to effective intra-disciplinary and inter-disciplinary team-based collaboration
- Leadership of change and innovation
- Creation of healthy work environments

Complexity Leadership

- Analysis and application of complex adaptive system principles to leadership roles
- Ethical considerations in application of complexity in leadership roles
- Advocacy and policy concepts in leadership roles
- Establishing a leadership perspective in problem identification and frame for integration of systems concepts and the application of leadership.

Professional Role Analysis

- Integrate knowledge of leadership self-assessment and the goals of the healthcare system
- Adjustment and adaptation of leadership approaches including use of influence, team management and advancing change
- Identify and integrate the principles of peak performance into executive leader role analysis
- Analyze the characteristics and behaviors of leadership with inter-professional and intra-professional teams

Integration of Teamwork Leadership into Complexity Leadership

- Synthesize and utilize leadership skills in the dynamics of collaboration
- Development and maintenance of innovative teams and health work environments
- Problem to solution: source of problem, differentiate perceived problem from core problem and differences between the two

Model Creation and Application

- Skill development in leading team initiative
- Problem identification, analysis, synthesis and application of theory
- Preparation of formal recommendation for action to the leadership of a health care organization

THE OHIO STATE UNIVERSITY

GRADUATE SCHOOL

DEPARTMENT OF NURSING

Nursing Practice 8480

Quality Improvement for the Doctor of Nursing Practice

2 credits

Course Description

Advanced concepts in collaboration, design, and leadership as they relate to the implementation and evaluation of quality improvement initiatives.

Prerequisites

Enrollment in the DNP program, or permission of instructor.

Objectives

- Critically examine national and international priorities for quality improvement in health care.
- Appraise the literature on quality improvement priorities and initiatives relevant to the student's population/practice setting.
- Evaluate areas of congruence between national and international quality improvement priorities and those of the student's population/practice setting.
- Integrate the principles of effective leadership, collaboration, and interdisciplinary teamwork into the process of quality improvement in the student's population/practice setting.
- Apply the Quality Improvement Model to a proposed QI project relevant to the student's population/practice setting.

Content Topic List

- Introduction to quality improvement
- Internal and external drivers of quality
- Variation in measurement in healthcare
- Quality measurement
- Achieving quality through patient-centered and family-centered care
- The issue of disparity and quality
- Patient safety and systems design
- Driving quality through leadership and team building
- Ethical principles of QI
- Organizational accountability for quality in healthcare

OHIO STATE UNIVERSITY
Graduate School
Department of Nursing
Nursing Practice 8490
Health Promotion in the Age of Personalized Health and Health Care
2 Credit Hours

Prerequisites

Enrollment in the DNP program, or permission of instructor.

Course Description:

Critical analysis of population-based factors that impact personal health and care including the social determinants of health contributing to health disparities, their synthesis with health behavior theories, and the evidence-based strategies to change behavior and improve outcomes.

Course Objectives:

The student will:

- Analyze critical differences in reported health status among culturally and ethnically diverse populations.
- Critically analyze the underlying psychosocial mechanisms responsible for differences in health and health outcomes across culturally and ethnically diverse populations.
- Evaluate social determinants of selected self-care health behaviors in populations of interest.
- Analyze issues related to personalized health care in order to optimize health outcomes.
- Critically examine the theoretical underpinnings that may explain differences in access to and use of health care services across culturally and ethnically diverse populations.
- Generate systems level approaches to promoting health in populations of interest.

Content Topic List

- The Glass and McAfee Model: A Framework for understanding health
- Genetics – The riverbed of individual health
- Epigenetics of stress response: Above and below the stream
- Racial and ethnic disparities in health
- Disparities in access
- Poverty and health
- Epidemiology – The broad view in numbers
- Lifespan health development perspectives
- Theories of health promotion
- Systematic planning for health promotion
- Program evaluation
- Education for health

**THE OHIO STATE UNIVERSITY
GRADUATE SCHOOL**

DEPARTMENT OF NURSING

Nursing 8500

Nursing Policy for Doctoral Nursing Practice

2 Credit hours

Prerequisite: Enrollment in the DNP program, or permission of instructor.

Course Description

Principles of policy-making at the institutional, local, state, and federal levels to influence policy change affecting health care.

Objectives

Upon completion of the course, the student will be able to:

1. Evaluate linkages between the elements of the policy process to clinical practice and professional advocacy issues.
2. Apply theoretical concepts of policy-making to develop strategies for influencing policy decisions.
3. Apply theoretical concepts to the critical analysis of issues encountered in the health care system and potential policy solutions to address those issues.
4. Apply ethical principles to policy analysis and design.

Content Topic List

- Defining policy, identifying the role of the DNP in establishing policy
- Analysis of policies at the institutional level
- Analysis of policies at the state level
- Analysis of policies at the federal level
- Agenda setting
- Influencing health policy
- Financing health care
- Impact on health policy changes on advanced practice
- Impact of health policy changes on quality of care
- Impact of health policy changes on reimbursement

THE OHIO STATE UNIVERSITY
GRADUATE SCHOOL
DEPARTMENT OF NURSING
Nursing Practice 8600
Organizational Culture
1 credit

Course Description

Analysis of complex culture in health care and the impact on organizational structure, relationships, evaluation, and outcomes.

Prerequisites

Enrollment in the DNP program, or permission of instructor. NursPrct 8402.

Objectives

- Analyze cultural competencies across disciplines and identify common characteristics.
- Analyze a contemporary system and describe the potential for supporting organizational innovation and change from an evidence-driven perspective.
- Assess an appropriate instrument for evaluation of organization congruency emphasizing validity, utility and effectiveness in advancing organizational culture.
- Develop an evidence-driven business strategy including financial management, human resource management, and strategic management within a complex care system.

Content Topic List

- Overview and assessment of major culture organizational theories
- Analysis of organizational culture theories
- Organizational culture tool assessment
- Developing an evidence-driven theoretical organizational culture model
- Application and evaluation of organizational culture model effectiveness and sustainability

THE OHIO STATE UNIVERSITY
GRADUATE SCHOOL
DEPARTMENT OF NURSING
Nursing Practice 8610
Informatics for Leadership in Health and Healthcare
2 credits

Course Description

Health informatics, the evaluation of electronic health information resources and patient care technology, and application in DNP practice. Related policy, ethical, privacy, and disparity concerns related to access and use of healthcare data.

Prerequisites

Enrollment in the DNP program, or permission of instructor.

Objectives

- Analyze theories and principles that are used to inform the design and use of electronic health records and information systems.
- Develop information and communication technology literacy using guidelines from health and information sciences.
- Evaluate the user experience of healthcare information and communication technologies and its impact on individual/organizational effectiveness and efficiency.
- Integrate healthcare organizational data with systems-level innovations and evaluations.

Content Topic List

- Introduction to nursing informatics and relationship to DNP role
- Nursing informatics competencies
- National trends and healthcare informatics
- Evaluating healthcare resources
- Patients and participatory healthcare
- Usability
- Telehealth and emerging medical devices
- Ethics involved with data security and privacy in the information age
- Project management frameworks in technology projects
- Business intelligence
- Knowledge and expertise management

THE OHIO STATE UNIVERSITY

GRADUATE SCHOOL

DEPARTMENT OF NURSING

Nursing Practice 8781

Methods and Measurement for Clinical Practice Scholarship

2 credits

Course Description

Concepts and principles of practice scholarship methods and measurement for doctoral level nursing practice.

Prerequisites

Enrollment in the DNP program, or permission of instructor.

Objectives

- Evaluate linkages between theory, clinical problems, practice scholarship, and evidence-based clinical practice change.
- Analyze practice scholarship methods used to design and implement changes in clinical practice.
- Analyze ethical issues in the design and implementation of practice-based scholarly projects.
- Apply clinical scholarship concepts and principles to the design of methods and measurement for the DNP Final Project.

Content Topic List

- Contrasting goals of clinical practice change versus generating new scientific knowledge
- Vocabulary of clinical nursing science
- Role of theory in practice scholarship
- Types and diversity of DNP scholarly projects
- Appraisal of literature with emphasis on interpretation of findings for application to practice
- Types of scholarly project designs
- Statistical versus clinical significance
- DNP project sampling considerations
- Ethical considerations in DNP project design and implementation
- Quality of measurement in DNP project design
- Project design tools, implementation and dissemination of project results

**THE OHIO STATE UNIVERSITY
GRADUATE SCHOOL
DEPARTMENT OF NURSING
NURSING PRACTICE 8782**

Foundations of Evidence-based Practice (EBP)

2 credits

Prerequisites: Enrollment in the DNP program, or permission of instructor

Course Description:

Examination of the development and impact of evidence-based practice on health outcomes and the roles of the DNP in integrating evidence into practice.

Objectives

Upon completion of the course, the student will be able to:

1. Integrate EBP knowledge and skills into planned strategies for improving health care delivery, driving organizational change and improving patient outcomes.
2. Differentiate the key steps of the EBP process.
3. Critique-evidence-based theories for their strengths and weaknesses.
4. Analyze the role of EBP in creating a platform for meeting the DNP essentials for nursing inquiry, inter-professional collaboration and quality improvement.

Content Topic List

- EBP
 - Importance of EBP
 - Historical overview
 - Initiatives to advance EBP
 - DNP role and EBP
 - American Association of Colleges of Nursing DNP Essentials related to EBP
- EBP Theories and Frameworks
 - Components of EBP –external and internal
 - Types
 - Facilitators and barriers
 - Application
- Steps in EBP
 - Overview of the steps
 - Background and significance
 - Development of clinical questions for practice
 - Critique of clinical questions
- Critical Appraisal of Evidence
 - Pragmatics of finding relevant literature for a specific clinical question
 - Critical appraisal of evidence versus critique

- -Exhaustive literature search
 - Critical appraisal of quantitative evidence
 - Critical appraisal of qualitative evidence
 - Synthesis of relevant evidence for a specific clinical question
- Development of an EBP in the Context of own Focus in the DNP program
 - Mentoring by academic advisor
 - Delineating the focus of doctoral project
- -Rationale and significance of proposed doctoral project in relation to the DNP Essentials and healthcare priorities
 - Preliminary critical appraisal of evidence pertaining to proposed doctoral project

THE OHIO STATE UNIVERSITY
GRADUATE SCHOOL
DEPARTMENT OF NURSING
Nursing Practice 8890
Doctor of Nursing Practice Professional Seminar
1 credit

Course Description

Development of scholarly writing and peer review skills in scholarly nursing practice.

Prerequisites

Enrollment in the DNP program, or permission of instructor.

Objectives

- Demonstrate skill in writing a publishable scholarly document such as a health policy document, editorial, or clinical protocol.
- Analyze approaches to providing constructive peer review and critique for scholarly writing.

Content Topic List

- How to write in a concise, informative, scholarly manner
- Writing components of scholarly work
 - Introduction (problem, purpose significance)
 - Review of the literature, background, or supporting constructs
 - Discussion, conclusion, future recommendations
- Composing feedback that exhibits 5 elements of constructive peer feedback

**THE OHIO STATE UNIVERSITY
GRADUATE SCHOOL
DEPARTMENT OF NURSING**

Nursing Practice 8896

Practice Inquiry I

3 credits (0.5 credit didactic; 1.5 to 2.5 credits clinical)

Course Faculty

Course Description

Application of evidence-based practice (EBP) principles and the change process to implement, facilitate, evaluate, and sustain EBP changes to improve healthcare.

The AACN Essentials of Doctoral Education for Advanced Nursing Practice (2006) were used to guide course development.

Prerequisites

Enrollment in the DNP program, or permission of instructor.

Objectives

1. Critically analyze emerging clinical patterns and problems within a practice setting, health care organization, or community.
2. Develop strategies to evaluate and apply evidence-based practice within the system of interest.
3. Using an interdisciplinary team approach, integrate nursing practice at an advanced level, including philosophy, policy, and ethics to determine the significance of the health care phenomenon of interest.
4. Evaluate the role of the DNP as a healthcare leader in creating supportive contexts and cultures for evidence-based practice (EBP) among interdisciplinary groups of colleagues within complex organizations.

Content Topic List

- Approaches for practice-focused inquiry
- Application of beginning elements of EBP principles
- Change process
- PICOT problem statements
- Reviewing literature
- DNP-led implementation and facilitation of evidence-based practice changes
- Mentorship
- Leadership

**THE OHIO STATE UNIVERSITY
GRADUATE SCHOOL
DEPARTMENT OF NURSING**

Nursing Practice 8897

Practice Inquiry II

1 to 3 credits (1 – 3 credits clinical)

Course Faculty

Course Description

Examination of the roles and responsibilities of the DNP in use of EBP methods and dissemination of evidence to influence clinical practice change, building upon knowledge and skills in Practice Inquiry I (NursPrct 8896).

The AACN Essentials of Doctoral Education for Advanced Nursing Practice (2006) were used to guide course development.

Prerequisites

Enrollment in the DNP program, or permission of instructor. NursPrct 8896.

Objectives

- Synthesize the role of EBP (evidence-based practice) in creating a platform for meeting the DNP essential skills for nursing inquiry, interprofessional collaboration and quality improvement.
- Demonstrate leadership in practice that has the potential to improve health care outcomes, address gaps in care, and promote delivery of high quality advanced nursing care.
- Demonstrate the application of evidence-based practice in the evaluation of health outcomes.
- Design and analyze strategies to promote dissemination of evidence in relation to quality patient care outcomes.

Content Topic List

- DNP role
- Power of dissemination
- Own responsibilities
- Shared responsibilities
- Ethical issues
- Being an innovative leader in promoting best practices
- Dissemination of EBP
- Critique and feedback
- Leveraging the media to disseminate best practices in health care
- Dissemination of EBP outcomes to influence health policy
- Health policy issue briefs
- Presenting evidence to legislators and stakeholders
- Development of policy guidelines