Nursing Organization Collaboration with DNP Prepared Nurses: How to Move the Profession Forward and Assist DNPs With Advocacy

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Moderator

Objectives

1. Describe the DNPs' impact in a number of national and international organizations focused on transformation through leadership and change management.

2. Identify at least four exemplars from the distinguished panel presenters on how DNPs have created partnerships through their organizational experience and expertise.

DNP Impact and Transformational Change

Meet our Panel:

- Tonya L. Appleby, DNP, CRNP
- Karen S. Kesten DNP, APRN, CCRN-K, CCNS, CNE
- Juli Maxworthy, DNP, MSN/MBA, RN, CNL, CPHQ, CPPS, CHSE
- KT Waxman, DNP, MBA, RN, CNL, CENP, CHSE, FAAN

UNIVERSITY *of* MARYLAND
UPPER CHESAPEAKE HEALTH

DNP & Advocacy in Clinical Practice

Tonya L. Appleby, DNP, CRNP
Clinical & Administrative Coordinator for Advanced
Practice Clinicians

University of Maryland Upper Chesapeake Medical Center
University of Maryland Harford Memorial Hospital

AANP Maryland State Representative 2014 – 2016
Past President Nurse Practitioner Association of Maryland

Overview - Advocacy

- Nurse Practitioner Association of Maryland (NPAM)
  - District Director x 6 years
  - President-Elect, 2012
  - President, 2013
  - Past President, 2014

- American Association of Nurse Practitioners (AANP)
  - Maryland State Representative, 2014 -2016

Overview - Clinical

➢ Acute Care & Geriatric Nurse Practitioner since for 16 years

➢ 13 years - Emergency Medicine

➢ 10 years – Clinical Faculty at the University of Maryland School of Nursing

University of Maryland Upper Chesapeake Health

Upper Chesapeake Medical Center

Harford Memorial Hospital

Overview – Current Role

- ➤ Hospitalist Medicine
  - ▪ ~190 patients on service
  - ▪ Teams of physicians with NPs & PAs
  - ▪ Nights (14 hours) independently run by NPs & PAs
  - ▪ Directly manage 30 NPs & Pas
  - ▪ 80 hours administrative
  - ▪ 80 hours clinical

- ➤ Leader for all NPs and PAs at both University of Maryland Upper Chesapeake Medical Center & Harford Memorial Hospital (130 NPs & Pas)

Overview – Current Role

➢ Report directly to the Chief Medical Officer

➢ NP representation with voting privileges on the Medical Executive Committee

➢ Serve on the Clinical Chiefs Committee

  ▪ Committee of Department Chairs

➢ Successfully separated the NPs & PAs from the Physician-led Peer Review

  ▪ Established our own NP & PA peer review committee

➢ Successfully fought for language change regarding classification of NPs & PAs

  ▪ Banned terms Mid-level provider, physician extender & non-physician provider

Overview – Current Role

- ➢ NP representation on the University of Maryland Community Medical Group Board of Directors (UMCMG)
  - ~ 550 FTEs of NPs & PAs
  - Serve on the Quality & Performance Improvement Committee

Key Milestones - Advocacy

➢ 2010 – Fought to have a 17 page Collaborative Agreement abolished.

  ▪ 1 page Attestation - as a negotiation

➢ 2015 – Testified in front of the House Government Operations Committee to eliminate the Attestation

  ▪ Passed!!!

  ▪ Full Practice Authority State effective October 1, 2015

Advocacy Continues

- Despite Full Practice Authority, many NPs do not work to "Top of Licensure"
  - Many hospitals do not have NPs billing independently
  - "Ghost Provider"
- Compensation Models are antiquated
- Reimbursement across States vary
  - Maryland is unique
  - Health Service Cost Review Commission (HSCRC)

Pearls to guide your practice

➢ If you're not sitting at the table, you're on the menu!

➢ If you don't see your interests being represented, ask!
- A simple "why" can generate change
- Have your 30 second elevator pitch ready at all times
- Lead by example
- Be an expert in your craft
- Exercise emotional intelligence

Thank You!
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NURSING ORGANIZATION COLLABORATION WITH DNP PREPARED NURSES: HOW TO MOVE THE PROFESSION FORWARD AND ASSIST DNPS WITH ADVOCACY

Karen S. Kesten DNP, APRN, CCRN-K, CCNS, CNE

Director of Educational Innovations

American Association *of* Colleges *of* Nursing
ADVANCING HIGHER EDUCATION IN NURSING

Overview DNP Advocacy

- First DNP hired at American Association of Colleges of Nursing in 2013
- Setting educational standards
- National thought leader tables
- Director of Educational Innovations
- Director of Faculty Initiatives

Advocacy for DNPs and APRNs

- *Liaison to RAND study on DNP by 2015*
  RAND report
- *APRN Clinical Training Task Force*
  White Paper
- *Implementation of the DNP Task Force*
  White Paper

American Association *of* **Colleges** *of* Nursing
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Advocacy: New Task Forces

- *AACN Competency Based Education for Doctoral Prepared APRNs Work Group*

- *Defining the Scholarship of Academic Nursing*

  Practice scholarship

Advocacy: National Tables

- LACE
- APRN Round Table
- NCSBN
- Nurses on Boards Coalition
- CDC, FDA

Moving the Profession Forward

- Leadership
- Collaboration
- Communication
- Organizational Behavior
- Scholarship
- Advocacy

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Background of Nursing at the University of San Francisco (USF)

- USF, San Francisco's first university, was established by the Jesuits in October 1855.

- The Sisters of Mercy brought their mission to San Francisco in 1854. Supporting this mission, the nursing program at USF was established in 1948 within the College of Arts and Sciences as a cooperative effort with the Sisters. The program allowed registered nurses from nearby St. Mary's Hospital to earn their baccalaureate degrees. Accredited by the NLN in 1958, the School of Nursing and Health Professions was the first private nursing program in California.

- Our focus is "Change the World from Here"

Background on Sigma Theta Tau International (STTI)

In 1922, six nurses founded the Honor Society of Nursing, Sigma Theta Tau International (STTI) at the Indiana University Training School for Nurses, which is now the Indiana University School of Nursing.

The founders chose the name from the Greek words storgé, tharsos, and timé, meaning love, courage, and honor.

Sigma Theta Tau's Membership Includes

- More than 135,000 active members

- Members reside in more than 85 countries

- 39 percent hold master's and/or doctoral degrees

- 51 percent are in staff positions

- 19 percent are administrators or supervisors

- 18 percent are faculty/academics

- 12 percent are in advanced practice

STTI's 2015-2017 President's Call to Action

Influence Through Advocacy
- Develop advocacy expertise
- Engage in advocacy
- Foster advocacy partnerships

Influence Through Policy
- Engage in policy initiatives
- Lead policy change

Influence Through Philanthropy
- Contribute time and talent
- Generate charitable donations

Influence Through Lifelong Learning
- Develop personally and professionally
- Use STTI resources

Interest in STTI's Virginia Henderson Global Nursing e-Respository

- Meeting at AACN Doctoral Conference luncheon of Jesuit Institutions in 2016

- Realized that there was an opportunity to develop a community site on the STTI Virginia Henderson's Global Nursing e-Respository

- USF taking the lead in working with the staff at STTI to develop and implement a community for students and faculty

Background: University of San Francisco's Current Repository System

- Submission of final project write up to identified librarian

- Projects uploaded every semester

- Expectation of all graduates to submit

- Challenges

How the Repository is Different

The Henderson Repository differs from a research database in that, while it may contain previously published items in accordance with publisher/journal self-archiving policies, it will also contain previously unpublished items. These resources include, but are not limited to:

♦ Conference papers/presentation slides

♦ Datasets

♦ Dissertations

♦ Doctor of Nursing Practice final projects

♦ Faculty-created learning objects

♦ Technical reports

♦ Theses

The Repository is FREE!

- It is a **free**, online service that collects, preserves, and disseminates digital materials related to all aspects of nursing research
- In 2012, the repository expanded to include full-text submissions
- Unlike a scholarly journal, the Henderson Repository is not bound by parameters such as topic limitations, page allowances and a set publication schedule
- The repository also **allows the author or authors to retain copyright to their work**
- Items submitted to the collections under the Independent Submissions Community are **peer-reviewed** to ensure quality control standards are met
- 888.634.7575 (U.S./Canada toll free)
- +1.317.634.8171 International
- email to repository@stti.org

Virginia Henderson
Global Nursing e-Repository

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FAQs
Benefits
Policies and Guidelines
Submitting Content
Using Search
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Personal Profile

STTI LINKS

Int'l Nurse Researcher Hall of Fame
Nursing Knowledge International
Remembering Virginia Henderson
STTI Research Grants

Virginia Henderson International Nursing e-Repository >

Communities & Collections

Shown below is a list of communities and the collections and sub-communities within them. Click on a name to view that community or collection home page.

[Expand All] [Collapse All]

+ *Sigma Theta Tau International (STTI)* 16378

+ *STTI Chapters - Events* 14

+ *Independent Submissions* 67

+ *Nursing Organizations - Events* 50

+ *Nursing Organizations - Resource Papers* 65

+ *Schools of Nursing* 93

+ *Open Access Nursing Journals* 2

+ *Individual Abstract Submissions* 0

+ *Registry of Nursing Research Conference Abstracts* 10874

+ *Test Community* 0

Conclusion

- STTI has been a wonderful supporter of the DNP

- Highly recommend submitting abstracts for consideration at STTI events

- We are excited about the opportunity to provide a global eRepository for our DNP students to utilize to promote their great work

Thank You!

Juli Maxworthy
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Overview

- About the University of San Francisco
- Executive Leader DNP Overview
- Program Details
- Practicum and residency to prepare for practice

- About the American Organization of Nurse Executives
- How competencies are woven throughout the program
- Conclusion

Executive Leader DNP (EL-DNP)

- Masters degree (MSN, MBA, MPH, MHA)

- Masters in nursing not required

- Currently in an executive role

- Emerging leader, wishing to move into an executive role

- Oversight of multiple units, areas, clinics or service lines

- Program is 6 semesters year round

Program Details

- 11 intensive "teaching weekends" in San Francisco

    - Thursday noon through Saturday noon

- Students complete online coursework in between each meeting, extending their effectiveness without putting their careers on pause

- Curriculum aligned with DNP essentials **and** AONE Nurse Executive Competencies

American Organization of Nurse Executives (AONE)

- Mission is to shape health care through innovative and expert nursing leadership
- Vision is: Global Nursing Leadership-One Voice Advancing Health
- Influences legislation and public policy
- Provides resources to nurse leaders
- Annual meeting each year, over 3,000 attend
- Over 10,000 member organization
- Established Nurse Executive Competencies

Who Are Our Students and Where Are They From?

- Practice, industry and education

- Chief nursing officers, Chief operating officers

- Deans and Directors, Educators

- Consultants

- From California, Florida, New York, Ohio, Massachusetts, Oregon, Washington, Colorado, Arkansas, Arizona and Saudi Arabia

- Average age is 48– oldest grad was 70

Graduates

Over 150 students in our DNP program (DNP, FNP, ELDNP)

ELDNP: We have graduated 48

2012: (cohort #1): 16
2013: (cohort #2): 10
2014: (cohort #3):   9
2015: (cohort #4): 13
2016: (cohort #5):   8
2017: (cohort #6): 14
2018: (cohort #7): projected 16

Employment and Trends

Numbers:

- 100% of our students are employed (unless retired!)
- If, in transition, jobs secured through networking or interim jobs secured

Trends for ELDNP degree:

- Promotions and new jobs for graduates
- CNO, COO, Magnet coordinator, Director of large service lines, Director of Clinics

Practicum and Residency to Prepare for Practice

- 1,000 hours of practicum over 6 semesters focused on executive leadership; begins first semester

- Qualifying project is a manuscript submitted to a peer-reviewed journal and a project prospectus

- Final semester is residency at practicum site to wrap up and write up project

Evidence-Based Change Project

A practice application-oriented project in which students demonstrate their clinical and scholarly expertise through the development of a relevant, practice-related project to affect change or improve outcomes in the clinical setting at the macro-level

Sample Projects

- Improving Nurse Executive Informatics Competencies: Implementation of a Toolkit

- Implementation of a Nurse Navigator Program utilizing staff nurses

- The Leadership Practice Circle Program and Toolkit: An Evidence- Based Approach to Leadership Development in HealthCare

- Development and Implementation of Nurse Executive Competencies for a Large HMO

Lessons Learned

- Need an experienced faculty that have been in leadership roles for credibility
- Faculty need to be available on the weekends as this is when the students work
- Organization needs to support the project
- Organization needs to OK the use of its name in project paper
- Students come with a plethora of experience
- They learn from one another
- We need to remind them to leave their ego at the door

Thank You!

Dr. KT Waxman
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How are you making a difference?

Distinguished Panel:

- Tonya L. Appleby, DNP, CRNP
- Karen S. Kesten DNP, APRN, CCRN-K, CCNS, CNE
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