Are we all on the same page of growth and development with the intent of improving healthcare outcomes? This is a tough question to answer and cannot be addressed in isolation. The work completed by colleagues around the country is demonstrating improvements, yet is the change enough to turn the tide of the rankings of outcomes found here in the United States compared to other countries? Collaboration, inter disciplinary efforts, and refining our skills by identifying competencies are ongoing challenges. Please join your peers at the 9th National Doctors of Nursing Practice Conference to learn more, and share your thoughts so that we can all grow collectively in our efforts to improve health care delivery.
The Ninth National Doctors of Nursing Practice Conference: Baltimore

This month’s featured faculty presenter at the 2016 National DNP Conference in Baltimore is
Marisa Wilson,
DNSc MHSc RN-BC CPHIMS

Dr. Marisa L. Wilson is a board certified informatician with an interest in health information technology policy, implementation, and positive patient outcome and clinical efficiency supported by technology. She spent over 15 years as a nurse clinician working in acute physical rehabilitation, medical-surgical, and telemetry units. In addition, Dr. Wilson spent over 25 years as an analyst, project leader and manager implementing information systems in public health and acute care with settings.

Transforming Healthcare Through Collaboration

Baltimore Marriott
Inner Harbor at Camden Yards
October 5-7, 2016

Join colleagues at this year’s event to celebrate successful methods of collaboration to improve health care outcomes and explore future opportunities and challenges.

This activity has been submitted to the Western Multi-State Division for approval to award nursing contact hours. The Western Multi-State Division is accredited as an approver of continuing nursing education by the American Nurses Credentialing Center’s Commission on Accreditation. For more information regarding contact hours, please call Stephen Campbell-O’Dell at 1-888-651-9160 option 2. 19 to 21 CE’s anticipated.
SAVE THE DATE
09. 15-17. 2016
Lahey Hospital & Medical Center
Boston, MA

9th ANNUAL Advanced Practice Provider (APRN & PA)
Leadership Summit

A national forum for healthcare leaders and clinicians to share information, develop a consistent platform and
map out solutions for universal and reoccurring struggles involving the administrative, managerial, policy and
practice aspects of advanced practice (advanced practice nursing roles and physician assistants)

WHO SHOULD ATTEND?
✓ Advanced practice administrators, managers, leads/chiefs, chairs of shared
governance/nursing/medical councils & committees
✓ Hospital and healthcare administrators and executives, physician leaders, and
nursing leaders involved directly or indirectly with advanced practice
✓ Chief Nursing Officers (CNOs), Chief Medical Officers (CMOs), Directors of
Nursing (DONs), Chief/Chairs of Departments, Patient Care Directors, Nurse
Managers, and Clinical Nurse Leaders (CNLs)
✓ Advanced Practice Providers (APPs): PAs, NPs, CNMs, CRNAs, and CNSs
✓ Other clinicians involved with APRNs & PAs (e.g., physicians, nurses,
pharmacists)

HOST & SPONSORING INSTITUTION: Lahey Hospital & Medical Center
HOTEL: TBD
REGISTRATION FEE:
Pre-Conference Workshop (Thurs)
$120* (refreshments included); $104 (10% discount, APPex members)
*workshop discount when registered for conference also; $250 for workshop day only
Conference (Fri-Sat)
$350 (breakfast & lunch included); $315 (10% discount, APPex members)

REGISTER ONLINE: www.APPexecutives.org/app-leadership-summit/summit/registration
Conferences > Advanced Practice Provider Leadership Summit > 2016 Summit > Registration
Questions? Email: events@APPexecutives.org
50% of respondents did NOT disseminate the work from their scholarly practice project to key stakeholders and organizations.

52% of respondents relayed that the work product as a result of doctoral education is making a difference in the work setting.

Similarly, 52% of respondents can see a measurable improvement in practice as a result of DNP educational preparation.

When asked if the DNP prepared nurse has demonstrated positive results from observations in the work environment, only 47% agree or strongly agree. The remaining respondents (53%) see a demonstration of results somewhat, minimally or not at all.

74% of respondents shared that if they could do it over again, they would again pursue the DNP degree (26% said they would not).

These results are from an informal survey and are lacking the rigor of a scientific study. Nevertheless, the findings are sobering and reflect thoughts of colleagues that shared their perspectives in the June 2016 survey.

Click HERE to take the July 2016 survey.
ORGANIZATIONAL UPDATE

It takes a village. We all know this phrase yet it is very true when it comes to building a vehicle and infrastructure to assist in the growth and development of a segment of our discipline. Thank you to all that contribute, offer support, encouragement and words of wisdom as DNP Inc. continues to expand to meet the professional developmental needs of the doctorally prepared nurse. Identifying and agreeing on the competencies of DNP prepared practice is taking place with the support and efforts of numerous organizations including the AACN. It’s great to see our world moving fast and grow.

The projects repository is going through beta testing to iron out small problems, while the team is working to improve communications and processes designed to support all interested in the practice doctorate degree in nursing.

CONVERSATIONS OVERHEARD IN THE DNP ONLINE COMMUNITY:

The DNP may see you now... “I would rather see a physician.”
Do you find yourselves needing to overcome barriers when it comes to the public’s perspective on nurse practitioners?
http://doctorsofnursingpractice.ning.com/forum/topics/the-dnp-may-see-you-now-i-would-rather-see-a-physician

Professional Image and the DNP
What do you do to enhance the image of nursing?
http://doctorsofnursingpractice.ning.com/forum/topics/re-professional-image-and-the-dnp

Commercial Aviation and the Effect of Cabin Altitude on Health and Chronic Illness
This educational survey will take you less than 10 minutes. As the title suggests, it deals with cabin pressurization on commercial airlines (my background) and how it affects various acute and chronic medical conditions.
Professional nurses who earn the doctor of nursing practice (DNP) degree are prepared to provide healthcare services at the highest level within the nursing discipline. Because this degree is the culmination of efforts by the American Association of Colleges of Nursing (AACN), much of the information published by this organization provides a comparison of the DNP degree to other degrees. The AACN’s expectations of DNP education in comparison to the PhD research degree have been well articulated, but do these documents thoroughly describe what this practice degree is capable of delivering?

A Look Back

Before the DNP became a reality, the practice doctorate in nursing was a clinical degree. The DNS, DSN, DNSc and ND degrees represent efforts to create a terminal clinical degree within nursing. These degrees were accepted and realized with varying levels of success. The DNP degree, however, has resonated with more nurses in practice and academia and is now the established terminal practice degree in nursing. The intentions of the degree may have been construed as the natural progression for the nurse practitioner, and the literature does support this belief. As a result, many initiatives and collaborations have paved the way for the DNP degree to become the entry degree of practice for all advanced practice nurses.

Is the DNP degree exclusive to nurse practitioners? Reviewing university and college programs that provide DNP education, it’s obvious that the DNP degree is a great fit for nurses in executive or leadership roles within healthcare systems. It’s also a great fit for nurses in the world of informatics, since systems and patient outcomes are evolving rapidly due to changes in technology. Similarly, practice outcomes are influenced by policy. A DNP-prepared professional in the realm of policy can also influence patient outcomes and practice.

As a collective of advanced practice nurses in all areas of clinical practice, holding hands with nurse executives, informaticians and experts in policy has the potential to alter systems and improve outcomes. Collaborative practice within the community of DNP graduates, intradisciplinary work with researchers, along with interdisciplinary work in the healthcare system, also promote the opportunity to improve patient and practice outcomes.

What about our colleagues in academia? Are nurse educators being left out of the picture? Is a master’s-prepared nurse currently working in academia a good fit for the DNP degree? These and other similar questions have been buzzing for several years, and so far have not resulted in a response of universal acceptance. As noted above, the DNP degree — by its title alone — connotes nursing practice. Is the act of being an educator nursing practice? To answer this, let’s compare and contrast what is happening in nursing education and practice with other disciplines that offer a terminal practice degree.
What About the “P” in the DNP Degree cont’d.

Terminal Degrees
The discipline of medicine requires faculty to earn a terminal practice degree or a research degree to teach medical students. This is true with the disciplines of pharmacy, physical therapy, occupational therapy, social work, psychology and law. To teach the discipline at the highest level, the faculty must be educated and participating in the practice and/or the research of the discipline. Do other disciplines offer degrees in educating that degree? Is there a degree of jurisprudence education that doesn’t require the JD designation? Do medical schools produce a degree in physician education that does not require the terminal degree?
The foundational question that many in our discipline are facing is: What does the ‘P’ in DNP represent? The AACN clearly articulates that practice reflects improved patient outcomes and/or practice enhancement that improves delivery systems. The PhD-prepared nurse has a great vantage point of seeing the world as a researcher in order to produce new knowledge that could enhance practice, but that degree preparation doesn’t necessarily reflect practice implementation. The DNP-prepared nursing professional, as a result of educational preparation, is poised to demonstrate practice in the discipline. Both the DNP and PhD lend themselves to enhancing nursing education by virtue of applying research techniques and findings, as well as practice expertise, to the act of teaching. Nursing students at all levels are elevated by this dual approach of enhancing the discipline while enhancing nursing services.
To colleagues who are struggling with the idea of nursing education being a practice, the tide is changing. The expectations for nursing education will be based on demonstrating proficiencies of the nursing discipline and then applying this foundational knowledge to education. Nursing academics have a great challenge and opportunity ahead to support and enhance nursing education with knowledge, experience including practice and research talents. Connecting this with the art and science of pedagogy will propel us forward. The preparation of more nurses with terminal practice or research degrees in nursing enriches our discipline. Expertise in teaching is an art, a science, and without a doubt a talent that is not exclusive to any discipline.

David G. Campbell-O’Dell, is the president of Doctors of Nursing Practice, Inc.
Hello everyone,
Recently I had the pleasure of meeting with Dr. Bernadette Melnyk who shared a flyer asking for help to disseminate information about Million Hearts. Click here to view the blog in the DNP Online Community. Please review and be a part of this great initiative.

As part of the national Millions Hearts initiative, the Health Behavior Expert Panel's Million Hearts Committee of the American Academy of Nursing is asking nurses to complete a 15-minute anonymous online health and wellness survey. The survey will provide important information on the current health and health lifestyle behaviors of nurses in order to gain perspective on how best to improve their cardiovascular health and wellness. Since nurses have higher rates of diabetes, obesity, hypertension and depression than physicians, it is important for us to join together in assessing and promoting the cardiovascular health and wellbeing of our nation's most critical healthcare workforce. Your completion of the survey is greatly appreciated. After completing the survey, you will have access to free modules that will be helpful in promoting your optional health and wellness. Please access the survey by visiting this website: https://osu.az1.qualtrics.com/jfe/form/SV_07cTxoEd0R8Tw0Z