

COVER PAGE

INSTITUTION: Indiana State University

COLLEGE: College of Nursing, Health, and Human Services

DEPARTMENT: Advanced Practice Nursing

DEGREE PROGRAM TITLE: Doctor of Nursing Practice

FORM OF RECOGNITION TO BE AWARDED/DEGREE CODE: Doctor of Nursing Practice /DNP

SUGGESTED CIP CODE: 51.1699

LOCATION OF PROGRAM/CAMPUS CODE: Terre Haute, IN/ 00180700

PROJECTED DATE OF IMPLIMENTATION: Fall Semester 2010

**DATE PROPOSAL WAS APPROVED BY
INSTITUTIONAL BOARD OF TRUSTEES:** December 18, 2009

**SIGNATURE OF AUTHORIZING
INSTITUTIONAL OFFICER**

DATE

**DATE RECEIVED BY COMMISSION FOR
HIGHER EDUCATION**

COMMISSION ACTION

(DATE)

A. ABSTRACT

Doctor of Nursing Practice (DNP)
Indiana State University, Terre Haute, Indiana
Offered through distance online internet technology

Objectives:

The DNP program will prepare registered nurses to provide care as advanced practice providers with a special emphasis on rural and underserved populations. The curriculum focuses on the development of advanced practice competencies in caring for clients, families, populations, and communities, to evaluate, develop, and implement programs and policy in multiple healthcare settings. The preparation of nurses with a terminal clinical degree will also provide additional individuals for nursing faculty positions. This program is part of the initiatives for inter-professional education in conjunction with the Rural Health Innovation Collaborative (RHIC) for improved patient access, safety, and quality care for rural and underserved populations.

Clientele to be Served:

The DNP program will serve nurses with a Master of Science in nursing currently practicing as nurse practitioners with a desire to work in underserved and rural communities, or in nursing education. The Advanced Practice Nursing Department at Indiana State University (ISU) currently enrolls approximately 90 new family nurse practitioners students annually. These loyal ISU students wish to continue to study at an institution where they already understand the system and feel supported by the faculty and staff. Another student clientele includes the nurse educators who also want a terminal practice degree. Many nursing programs such as Indiana State University are recognizing the DNP for tenure track faculty positions. The national nursing faculty shortage will be lessened with the expansion of the DNP educational opportunity. Graduates of the DNP program will be able to replace retiring faculty at Indiana State and other universities in Indiana and around the nation. Nursing student enrollment is increasing at ISU and other universities. Currently, ISU has over 1000 nursing students and during the next five years approximately 25-30% of our faculty will retire, thus the need for the DNP is demonstrated.

Curriculum:

The DNP program will require 85 post baccalaureate graduate credit hours and a total of 1200 hours of supervised clinical preceptorship. A post-master's nurse practitioner who enters the DNP program will be required to complete a minimum of 39 credit hours at Indiana State University. Students entering prior to 2015 must have completed a master's degree to be eligible to enroll in the DNP program and may apply a maximum of 48 graduate credits and 700 hours of formal clinical supervised hours from their master's degree toward the degree requirement. Consistent with other DNP programs and the American Association of Colleges of Nursing and the National Organization of Nurse Practitioner Faculty there is no dissertation requirement. The program does include a rigorous scholarly project with a focus on the scholarship of research application for credit hours.

Employment Opportunities:

Opportunities for doctorally prepared nurses exist in the areas of clinical practice, leadership roles, consulting, and education. This is in alignment with the strategic plan of the University and the initiatives for higher education in Indiana. Doctorally-prepared nurses are equipped to meet the challenges of the community in leadership roles and to fill the demand for clinical experts in the nursing education.

B. Program Description

1. Describe the proposed program and state its objectives.

Presently, in these early years of the 21st century, America's rural and underserved areas are under siege. The predominant theme is one of change, and in many places the perception is not entirely positive. Some places have had decades of stability, most recently followed by change, either insidious or tumultuous. Some of the change was the result of incremental national policy modifications, causing gradual change that was more easily accommodated. Other more rapid change, such as those wrought by the collapse of a rural and urban industry such as mines closing and major manufacturing plants closing, have caused substantial economic and socio-cultural upset for certain rural and underserved communities and populations. Since the early 1970s, many rural and urban areas, after suffering years of outmigration and resultant population decline, have reversed this trend. Increasing urban access to rural areas, the presence of local amenities and resources, and other factors have made such places attractive to retirees, tourists, service industry workers, and even families seeking a slower-paced lifestyle. Urban areas who face outmigration are not gaining the momentum to bounce back from its losses, and many communities continue to suffer from economic stagnation, decline, and population decreases. These changes have most certainly had a detrimental impact on the health and healthcare needs of both rural and other underserved populations. A major challenge for doctorally-prepared rural nurses in the 21st century will be to develop a body of knowledge and expertise to provide for these different populations and to develop health care strategies for their evolving needs.

Meeting the health needs of rural and underserved populations requires more than a superficial understanding of the environment in which they live. Effectively assessing individuals and populations requires using different disciplines, philosophies and paradigms. This assessment skill is essential to the provision of quality nursing and healthcare. Nursing needs to go beyond itself to adapt, synthesize, and create its own paradigm of health in the rural landscape. Our way of "seeing" needs to become focused differently.

The rural and declining urban landscapes are creations of human activities, in constant state of change, always in the process of becoming. These landscapes are transformed by great and small decisions, near and afar. Agriculture is no longer the dominant force altering the landscape of rural areas and big industry is no longer dominating urban communities. Changes in needs and values of the inhabitants will continually alter the landscapes in which rural and underserved people live, in turn effecting relative health. The doctorally prepared nurse at the Doctorate of Nursing Practice (DNP) level can appreciate these needs and values and play a part in guiding future change for the benefit of rural and underserved populations.

The Wabash Valley in the West Central region has 11 rural counties of which 8 are either Medically Underserved Areas (MUAs) or Health Professional Shortage Areas (HPSAs) (L. Anderson, personal communication, June 26, 2009). The multifaceted health care needs of Indiana citizens in poor rural counties are growing throughout the state. The DNP program will help to address the health care needs of these underserved and rural populations. There will be a solid evidence-based practice foundation that will explore the research utilized in health care for

rural and underserved populations. From this base, students will explore existing health care research as it applies to rural and underserved populations. Students will seek ways to influence the quality of health care through epidemiological incidence and the *Healthy People 2020* findings as well as approaches toward cure and prevention of health problems. The rural health practicum will focus on the resolution and study of health problems specific to a population and on better understanding the social-political mechanisms in existence so that the DNP graduate can influence positive change. The outcomes of practice showing health care disparities placed on certain groups in rural and underserved areas—women, children, elderly, and minorities—will be evaluated and published by students and faculty.

Indiana State University (ISU) will work with the other state universities in demonstrating capabilities and standards of practice for this role. The DNP role takes evidence-based research and interprets it for practice. It evaluates the efficacy of the research that nurse researchers and others have conducted. Our Indiana State University nursing faculty are a blend of PhD and DNP graduates as well as MSN prepared practitioners. This is a needed phenomenon as we move to the DNP program. The 39 credit-hour program is designed to build on the 48-51 credit-hours (with 765 clinical practice hours) in the FNP concentration of the Indiana State MS in nursing for 1500 hrs of total clinical practice. The competencies of this new practitioner are based on the National Organization of Nurse Practitioner Faculty (NONPF) *Practice Doctorate NP Competencies* (2006) in Appendix B, and the American Association of Colleges of Nursing (AACN) *DNP Essentials* (2006).

The DNP is representative of the scholarship of practice much like other practice professions—physicians, psychologists, lawyers, pharmacists, and physical therapists. A number of societal, scientific, and professional developments have stimulated this major paradigm change in graduate nursing education. One major impetus for change was the AACN's decision in October 2004 to adopt the goal that preparation for specialization in nursing should occur at the doctoral level by 2015 (DNP Roadmap Task Force Report, [AACN] 2006).

The degree is not the role. This DNP program will work with the communities it serves in the discovery of how to improve health care practices, how to identify practice needs, and then how to disseminate findings. In such ways the role and its associated practice will further develop. The journal, *Clinical Scholars Review: The Journal of Doctoral Nursing Practice*, is produced by Columbia School of Nursing and published by Springer Publishing Company, will be one in which we will promote publications by faculty and students. How and when certification of this role will occur is an ongoing discussion—certification is viewed as a means of distinction to patients and payers as well as a way of assuring the public of quality and reliable standards for these new clinical nurse experts. The AACN is committed to upholding the 2015 date as the last year that the American Nurses Credentialing Center will certify master's level advanced practice nurses.

In 2006, the Indiana State University FNP program surveyed its graduates on the program's strengths and weakness. Also an added question was: *Are you planning on furthering your education through doctoral study (if no prior doctorate)?* Of the 42 graduates, 38 planned to continue their education (2 already had a doctorate; 1 was working on a doctorate) and 35 would do their program at ISU if one existed in the next 5-10 years. Over the last few years the

faculty have attended meetings discussing the varied ways to structure the DNP curriculum. Our faculty are utilizing AACN's template of post-master's preparation with the FNP as the master's concentration. The curriculum and courses are designed to develop doctorally-prepared nurses who are evidence-based practice experts, dynamic leaders, and change agents in the profession of nursing.

Student Learning Outcomes:

1. Integrate scientific knowledge to influence health policy and decision-making through leadership, collaboration, and interprofessional action at the organizational, local, regional, national, and global levels.
2. Develop and evaluate care delivery approaches that meet current and future needs of patient populations based on scientific findings in nursing and other clinical sciences, as well as organizational, political, and economic sciences.
3. Use analytic methods to critically appraise existing literature and other evidence to determine and implement the best evidence for clinical practice.
4. Design, select, use, and evaluate programs that evaluate and monitor outcomes of care, care systems, and quality improvement including consumer use of health care information systems.
5. Advocate for social justice, equity, and ethical policies within all healthcare arenas.
6. Employ effective communication and collaborative skills in the development and implementation of practice models, peer review, practice guidelines, health policy, standards of care, and/or other scholarly products.
7. Synthesize concepts related to clinical prevention and population health in developing, implementing, and evaluating interventions to address health promotion/disease prevention efforts, in care of individuals, aggregates, or populations.
8. Demonstrate independent advanced practice clinical judgment, systems thinking, and accountability in designing, delivering, and evaluating evidence-based care to improve patient outcomes.

2. Describe admission requirements, anticipated student clientele, and student financial support

a. Admission Requirements:

Applicants must meet the admission requirements for the College of Graduate and Professional Studies. Applicants must also meet the following requirements:

- A minimum graduate grade point average of 3.0 on a 4.0 scale.
- Have an unencumbered license as a registered nurse and advanced practice registration in the state of practice.

- Have national certification as a family nurse practitioner.
- Meet all health clearance, criminal background checks, and other requirements for clinical practice.
- Have a minimum of two years nursing clinical experience prior to enrolling in clinical courses.
- Provide a 2-3 page sample of written scholarly work.
- TOFFEL of 550 or greater, if English is not the native language spoken.

Admission Process. Applicants who seek admission to the DNP program must first achieve admission through the College of Graduate and Professional Studies at the University level. Once application for graduate studies is attained and all materials have been received by the Department of Advanced Practice Nursing, the applicant may be considered for admission to the DNP program. Admission to the DNP program will be competitive with consideration given to Indiana State alumni and Indiana residents.

Progression.

- A satisfactory score on a written competency exam administered by the Department must be completed prior to the semester of rural residency;
- Maintains a cumulative GPA of 3.0 or greater

Dismissal.

- May have one semester of probationary status if the cumulative GPA is less than 3.0; more than one semester will result in dismissal from the program.

- b. Prerequisite coursework and degree.** Applicants must have successfully graduated from an accredited master's degree program in Nursing as well as have successfully completed a graduate level research and statistics course. Plans of study will be individually designed based on master's degree and certification as a Family Nurse Practitioner in order to meet all the program and university requirements. Those applicants who have not completed a Family Nurse Practitioner program of study will be required to complete the Family Nurse Practitioner certificate prior to starting the DNP courses.
- c. Needs of specific students.** This program is designed for both the full-time graduate student and the part-time graduate student. The Scholarly Project courses must be completed in the designated sequence. The residency must be taken during the last semester of the program. A graduate student may enroll in the other courses as available. Most nursing graduate courses are only taught once a year.
- d. Enrollment restrictions.** Initially, enrollment will be limited to 20 students. The maximum number of full-time students admitted to this program will be 10 full-time students and 10 part-time students. If fewer full-time graduate students apply, the number of part-time students will be increased to a comparable number. Permitting only a small number of students in the initial phases will promote a supportive environment at the highest quality for both students and faculty as this new clinical doctoral role emerges. A gradual increase in enrollment numbers is expected based on future requirement that all advanced practice nurses be prepared at the doctoral level and will occur as resources are further

evaluated. Criteria utilized for selecting applicants will be based on graduate admission criteria, DNP application criteria, as well as individual ratings by the Application and Review Committee on written scholarly work, personal interview, and reference letters. Consideration is given to Indiana residents, and alumni of Indiana State University. There is not a tuition differential for out-of-state online distance students.

- e. **Student financial support.** Various forms of financial support exist for eligible students including grants and loans. Many employers offer student incentives for tuition reimbursement. Students may also apply for an assortment of scholarships offered by local agencies as well as national organizations to assist them in furthering their education. Furthermore, many students will be eligible to receive monies from the Division of Nursing Traineeships through the U.S. Department of Health and Human Services, Health Resources and Services Administration. Indiana State University has been successful in receiving these traineeships for many years. Funding is based on enrollment numbers, allowing those students enrolled in graduate clinical-based nursing courses to apply the traineeship toward tuition, fees, and textbooks.

3. Describe the proposed curriculum

a. Requirements

Curriculum will include a minimum of 39 post master’s credit hours with a minimum of 500 clinical hours in a variety of settings. Typical program length will be between five semesters for full-time plans of study and seven semesters for part time plans of study.

Core Courses

HLTH 612	Epidemiology	3 credit hours
NURS 822	Organizational Informatics	3 credit hours
NURS 842	Health Policy Leadership	3 credit hours
NURS 825	Analytical Methods	3 credit hours

DNP Cognate Courses

NURS 810	Community Health Planning	3 credit hours
NURS 840	Culturally Competent Care	3 credit hours
NURS 850	Rural/Underserved Residency	3 credit hours

Guided Elective

XXX	Nursing Education (Curriculum, Assessment, Methods) or Nursing Administration (Finance)	3 credit hours
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DNP Scholarship of Practice Courses

NURS 891	Scholarly Project I	3 credit hours
NURS 892	Scholarly Project II	3 credit hours
NURS 893	Scholarly Project III	3 credit hours
NURS 894	Scholarly Project IV	3 credit hours
NURS 895	Capstone Scholarly Project	3 credit hours

Total 39 credit hours

- b. Sample Curriculum.** The DNP curriculum sequencing of course by semester is listed below for both the full-time and part-time plans of study. A program of study grid that includes the Family Nurse Practitioner Master’s Program is included in Appendix A.

Full-Time Plan of Study

First Year – Fall Semester

HLTH 612	Epidemiology	3 credit hours
NURS 810	Community Health Planning	3 credit hours
NURS 891	Scholarly Project I	<u>3 credit hours</u>
		Total 9 credit hours

First Year – Spring Semester

NURS 822	Organizational Informatics	3 credit hours
NURS 825	Analytical Methods	3 credit hours
NURS 892	Scholarly Project II	<u>3 credit hours</u>
		Total 9 credit hours

Second Year- Summer Semester

NURS 893	Scholarly Project III	<u>3 credit hours</u>
		Total 3 credit hours

Second Year – Fall Semester

NURS 842	Health Policy Leadership	3 credit hours
NURS 840	Culturally Competent Care	3 credit hours
NURS 894	Scholarly Project IV	<u>3 credit hours</u>
		Total 9 credit hours

Second Year – Spring Semester

NURS 850	Rural/Underserved Residency	3 credit hours
NURS 895	Capstone Scholarly Project	3 credit hours
XXX	Guided Elective	<u>3 credit hours</u>
		9 credit hours

TOTAL 39 credit hours

Part Time Plan of Study

First Year – Fall Semester

NURS 810	Community Health Planning	3 credit hours
NURS 891	Scholarly Project I	<u>3 credit hours</u>
		Total 6 credit hours

First Year – Spring Semester

NURS 822	Organizational Informatics	3 credit hours
NURS 825	Analytical Methods	<u>3 credit hours</u>
		Total 6 credit hours

Second Year – Summer Session		
NURS 892	Scholarly Project II	<u>3 credit hours</u>
		Total 3 credit hours
Second Year – Fall Semester		
HLTH 612	Epidemiology	3 credit hours
NURS 893	Scholarly Project III	<u>3 credit hours</u>
		Total 6 credit hour
Second Year – Spring Semester		
XXX	Guided Elective	3 credit hours
NURS 894	Scholarly Project IV	<u>3 credit hours</u>
		Total 6 credit hours
Third Year – Fall Semester		
NURS 842	Health Policy Leadership	3 credit hours
NURS 840	Culturally Competent Care	<u>3 credit hours</u>
		Total 6 credit hour
Third Year – Spring Semester		
NURS 850	Rural/Underserved Residency	3 credit hours
NURS 895	Capstone Scholarly Project	<u>3 credit hours</u>
		Total 6 credit hours
		Total 39 credit hours

- c. Existing courses.** The forming of the new college has provided a dynamic opportunity to utilize the skills and knowledge of expert faculty from the previous Health and Human Performance College in a synergistic manner. HLTH 612 Epidemiology is an existing course that will be a required course for the DNP program.
- d. New courses.** None of the courses in this program of study will be provided by a sponsoring campus. All the DNP courses were approved through the policies as established by the College of Nursing, Health, and Human Services and Indiana State University. The program was approved by the graduate faculty of the Department of Advanced Practice Nursing, the faculty committees of the College of Nursing, Health, and Human Services, Dean of the College, New Graduate Program Task Force, Graduate Council, Faculty Senate, Provost and Vice President of the University, and the Board of Trustees.
- e. Courses delivered by other institutions.** All DNP courses will be delivered by Indiana State University.
- 4. Describe the form of recognition.**
- a. Type of Degree.** Students who complete the program will be awarded the Doctor of Nursing Practice (DNP). The degree awarded is consistent with the *Essentials of Doctoral Education for Advanced Nursing Practice* document published by the American Association of Colleges of Nursing (AACN).

b. Suggested CIP Code. CIP code for the DNP program is 51.1699.

c. Student diploma. The information that will appear on the student’s diploma will be the Doctor of Nursing Practice, Indiana State University, College of Graduate and Professional Studies, Terre Haute, Indiana.

5. List program faculty and administrators.

a. Existing Faculty and Administration. The table lists the name, highest academic degree, rank, specialization, and nature of appointment for the administrators and faculty directly involved in the program.

Name	Degree	Rank	Specialization	Appointment
Administration				
Richard Williams	Ph.D.	Dean	Leadership Curriculum Physiology	Full-time
Marcia Miller	PhD MSN	Associate Dean/ Executive Director for Nursing Associate Professor	Informatics Statistics Educational Theory Curriculum Dev. Leadership Research	Full-time
Debra Mallory	PhD WHNP NCC-BC	Professor Chairperson, Advanced Practice Nursing Department	Nurse Practitioner WHNP Theory Women’s Health	Full-time
Faculty				
Susan Eley	PhD APRN-BC	Assistant Professor	Nurse Practitioner FNP Public Health Technology, Distance Education Evidence Based Practice	Full-time
Marcee Everly	ND CNM, NCC-BC	Assistant Professor	Certified Nurse Midwife/OB Leadership Research	Full-time
Roseanne Fairchild	PhD, MSN, RN	Assistant Professor	Nurse Educator, Emergency Nursing	Full-time

Julie Fine	PhD FNP APRN-BC	Associate Professor	Nurse Practitioner FNP Research Patient Assessment Informatics Theory	Full-time
Betsy Frank	PhD	Professor	Theory Administration Health Policy Leadership, Research	Full-time
C. Suzanne Gosse	PhD	Assistant Professor	Education Critical Thinking Health Policy Leadership	Full-time
Lea Hall	MSN PhD c APRN-BC	Assistant Professor	Nurse Practitioner FNP Educational Theory, Technology, Distance Education, Adult Health	Full-time
Cherie Howk	PhD APRN-BC	Assistant Professor	Nurse Practitioner FNP, Assessment, Behavioral Health, Research	Full-time
Tennyson Mgutshini	PhD	Associate Professor	Health Policy Global Culture	Full-time
Cha-Nam Shin	PhD	Associate Professor	Research	Full-time
Lucy White	DNS FNP	Associate Professor	Pharmacotherapeutics Research	Full-time

b. New faculty requirements

One new faculty for a twelve month, tenure/tenure track position, has been requested for the 2010 program start. The faculty person must have a proven research platform and be able to mentor students in research methods. The new faculty member will be required to teach two courses per semester and mentor three scholarly projects. ISU will also utilize current faculty and staff within the nursing programs and utilize available resources and faculty from the newly formed College of Nursing, Health, and Human Services.

6. Describe needed learning resources

a. Available and needed learning resources. The Cunningham Memorial Library supports the educational and research missions of Indiana State University by providing the collections, services, and environments that lead to intellectual discovery, creativity, and the exchange of ideas. The library collections include more than two million items. Graduate students may check out most items for 120 days and may renew most items a maximum of three times. Document delivery services are available for distance education students. For items unavailable at the Indiana State University library, students may request that the items be borrowed from another library through interlibrary loan.

The library supports the College of Nursing, Health, and Human Services in areas such as adult health, informatics, community health, education, administration, or family nurse practitioner. The collection includes a number of books, CDs, DVDs, videotapes, and other materials on health and nursing. The ISU Library is a federal government depository, receiving approximately 52% of the materials available from the GPO (Government Printing Office), including the National Institutes of Health.

Preference is given to collecting journals and periodicals in an online format. The library has 1002 online health journal subscriptions available to students and faculty. More than 24 online databases include records for health-related journals, magazines, newspapers, and other sources. In addition, the library subscribes to 214 more databases that include research on topics such as culture, business administration, technology, and education.

Reference and instructional services are available for distance education students. New students learn about the library research process through online interactive library tutorials and research guides. Reference assistance is available in a variety of ways: by phone, by e-mail, or by reference-chat during regular library hours.

Shelley Arvin, M.I.S., is the library liaison to the nursing program and the distance education coordinator for the library. She has completed a Health Science Librarianship course from Indiana University Purdue University Indianapolis (IUPUI) and has taken nursing librarian workshops at Medical Libraries Association conferences. Her masters in information science taught her technology skills in addition to general library concepts and theories. She has a degree in biology and three years prior experience as a nursing librarian at Indiana University-Purdue University Fort Wayne. She is collaborating with the Indiana State University Writing Center tutors to provide aid to online students with their writing needs. She has also provided reference sessions to distance education students using online meeting software. As distance education coordinator for the library, Ms Arvin is responsible for being the source of information on distance education for the library, identifying potential challenges and suggesting solutions. Cunningham Memorial Library is committed to the success of the College of Nursing, Health, and Human Services.

- b. Consequences of unmet learning resources.** There will be a request for one additional full-time faculty person to serve as the director of the DNP program. As with the current nursing graduate clinical courses there is a \$500 Clinical Nursing Education and Faculty Fee. This fee may be used for educational resources, adjunct faculty, and travel related to student clinical education. There is a need to continue with the current resources and budgetary allowances and for the evaluation of those resources and continuation or procurement of additional learning resources to fill identified needs. Our faculty work closely with the library and will continue to update holdings of all kinds in the electronic realm especially since the students will be distance learners.

7. Describe other program strengths

- a. Special/distinctive features.** The Indiana State University has had a fully accredited graduate nursing program since 1989. The ISU faculty and staff have been pioneers in high quality distance education. The program is nationally recognized for providing an excellent master's level education program via on site and distance learning formats. Indiana State

University has been listed in the *U.S. News and World Report* as one of the top 100 graduate nursing programs in the United States for more than three years. In this current edition of *U.S. News and World Report*, IU and ISU are now the only two master programs from Indiana in the top 100 graduate nursing programs. Graduate exit surveys and alumni surveys meet and exceed benchmarks established by the nursing programs accreditation criterion. Graduates of the master's program have exceeded all benchmarks for certification pass rates with 100% for the last three years. Certification has been 100% through AACN for last 5 years. AANP has also been at 100% for last reporting year.

The nursing program has more than 260 graduate students. It is anticipated that a significant number of DNP students will come from Indiana State University graduates and from advance practice nurses living and working in underserved and rural communities. The Indiana State University Office of Technology has continued to serve the faculty and students in the nursing program as we are among the leaders in distance education on campus. The Blackboard server, Elluminate and Tegrity technology for presentations, and the use of webcams are used to facilitate synchronous and asynchronous learning.

- b. Collaborative arrangements.** The College has a Contract Coordinator who is dedicated to the management of contracts and preceptor agreements. Contracts are sent through the University Legal Counsel and placed as board items. These meet the Indiana State Board of Nursing criteria for a clinical agency. Signed preceptor agreements are reviewed by faculty for appropriate site and credentials of preceptors. Those approved are kept in a locked file and entered into a database.

C. Program Rationale

1. Institutional Factors

- a. Compatibility with institutional mission.** Indiana State University has launched into a new partnership titled the Rural Health Innovation Collaborative (RHIC). The RHIC represents a unique opportunity to align the resources and strategic directions of several Indiana institutions to address the challenge to improve health care in rural and underserved communities. The College of Nursing, Health, and Human Services is leading this commitment with the development of three new graduate programs. These three programs are the Doctorate of Nursing Practice, the Master's of Physician Assistant Studies, and the Doctorate in Physical Therapy. These three programs have been designed to provide interdisciplinary collaboration and efficient graduate curricula. The driving considerations for these programs has been to increase the number of primary care health professionals, increase the Indiana professional workforce, and build programs with strong student demand. The special identity for Indiana State University is to be noted for a tradition of strong community engagement and service learning. The three new programs being proposed will clearly strengthen our identity and bring a new vitality to the University image.

Indiana State University has been preparing for this growth stage through the vetted process of program prioritization and strategic planning. ISU has cut majors, cut courses, and revamped general education. The University with new leadership is now ready to enter into

a new phase of carefully planned expansion. Supporting the DNP will provide an avenue to meet the above mentioned goals and to also develop nurse educators. The benefits of additional doctoral-prepared nurses will enhance the University's abilities in teaching, research, and service.

- b. Planning process.** The planning process for the DNP program was started in 2006 with information seeking at the regional and national level through participation in leadership meetings. The nursing program leadership understood the importance of identifying Indiana State University need for developing a mission that was congruent with the FNP program already in existence and the need to develop a sustainable program that will meet the national requirements for advance practice nursing (see letters from AACN and Dr. Michael Carter, consultant). The leadership sought funding through grants and strategically planned in the budget and resources to facilitate the development of the DNP program. A task force comprised of nursing faculty has been meeting to proceed with the planning of the DNP program and seek input from all faculty in a transparent and collaborative environment. The timeline for the DNP program is listed below. Please refer to Table C.1.1.

Table C.1.1 Planning Process for DNP Program

TIMELINE	DNP PLANNING ACTIVITY
Spring 2006	Survey conducted with graduates for doctoral interest
May 2006	Exploration of DNP Essentials
May 2007	DNP Faculty Taskforce formed Evaluation and Assessment Director Review Distance Education Feasibility
October 2007	Benchmarking of other DNP Programs
November 2007	Framework of DNP Program started
December 2007	Competencies for DNP developed
January 2008	Obtained ISU Administrative support
March 2008	Development of syllabi and content mapping
April 2008	Finalization of DNP budgetary resources
August 2008	Consultation for the DNP development with Dr. Michael Carter, University of Tennessee, Health Science Center
October 2008	Finalize syllabi
September 2008	Meeting with new Dean of College of Nursing, Health, and Human Services to discuss his role
Fall 2008	Syllabi sent to consultant Approval process beginning in the nursing program
January 2009	Report from consultant on syllabi
December 2009	Finish process with College, Graduate Council, and Faculty Senate for University approval and submission to Indiana Commission for Higher Education

During the past several years the nursing faculty have attended many AACN and NONPF workshops on the DNP role and development of curriculum.

- c. **Impact of the proposed program.** It is anticipated that there will be increased interest and application in the existing master's program, as the DNP program provides further educational opportunities to continue post graduate education with a focus on rural and underserved populations. Preliminary interest from previous ISU graduates and graduates from other institutions remains high as requirements for advance practice move to doctoral preparation. Serving the West Central area of Indiana which is a large rural and underserved population, has been part of the nursing programs mission from the development of the current FNP program, and this will continue to be the focus of the DNP program.
- d. **Impact on Utilization of Existing Resources.** A master's FNP concentration will be the pre-requisite courses for the DNP. Applicants who have not met admission requirements to the DNP will be given the opportunity to enroll in the master's program and will be able to progress into the DNP in a seamless and systematic manner to obtain their terminal practice degree (DNP).

2. **Student Demand**

Post MS family nurse practitioner will be students in the DNP program. It will be available with the majority of students wanting full-time enrollment but there will also be a part-time option. It will be expected that students will be from Indiana and throughout the United States. Currently, there are four nursing programs that have ICHE approval. The faculty of all the programs will publish findings on their DNP graduates and the essential role for DNP practice in advanced nursing healthcare clinics, private practices, rural health and federally qualified clinics, community health centers, hospitals, schools of nursing, health policy agencies, and state and national healthcare systems, and industries. There will be numerous presentations about how DNP graduates at both the state and national level are mitigating the nursing faculty shortage.

- a. **Derivation of enrollment projections.** As mentioned previously, a survey conducted in 2006 of our own graduates indicates strong interest in our DNP program to pursue their continuing education and lifelong learning needs. It is anticipated that initial enrollment will include 20 students, with 10 full-time and 10 part-time per cohort. Indiana State University is able to more accurately track the total graduate students, FNP graduates, and previous post-master's FNP graduates. Unfortunately, for several years only the post-master's graduates were reported as FNP graduates to the Indiana Commission of Higher Education. The table below reflects the recent growth in graduates from the Department of Advanced Practice Nursing at Indiana State University.

Total MS NURS Graduates	FNP Graduates	Post Master's FNP
2007	40	1
2008	68	8

- b. **Enrollment and Completion Data.**

The MS in nursing students who enter the FNP concentration go full-time and complete the requirements within 16 months. The core can be completed at a slower pace and this is

sometimes necessary. Our enrollment to graduation for the FNP masters is 95% with only 4 students in last 5 years who have had to drop out and return due to personal or family illness, family responsibilities, or military service. These have only been brief time frames of 12 months or less.

3. Transferability

There are no unique agreements with any other institutions regarding transfer of students or credits beyond the master's degree. ISU has always allowed a course equivalency evaluation of previous course work.

4. Access to graduate and professional programs

Not applicable.

5. Demand and employment factors

- a. Geographic region to be served.** The primary geographic region to be served by the ISU-DNP program is Indiana and the Mid-western United States.
- b. Review of literature.** Recent report from the Indiana Workforce Development Coalition (INWDC) indicated that there was a 21% increase in the number of MSN graduates in Indiana from 2006 to 2007. The shortage of faculty was evident in the INWDC report that indicated a large number of potential undergraduate nursing students were being turned away from Indiana nursing programs due to the inability to fill nursing faculty positions (46% of the nursing schools responding to the survey reported open faculty positions). Offering the DNP program will provide an option for the expert clinician interested in teaching to meet the education requirements for nursing faculty.
- c. Potential employers.** Clinics, hospitals, public health clinics, urgent care clinics, school districts, private industry and Veterans Administration. It is expected that clinicians prepared with a DNP will have the ability to demonstrate their worth based on the additional leadership, economic, and policy knowledge and skills they will acquire in the DNP. Rural health and Federally Qualified health clinics, public health agencies, academic institutions, state and federal agencies and industries will be eager to hire these graduates. Nurses with doctorates of all types—PhD, DNS, DNSc, and DNP are in demand throughout every state. These graduates will have the evidence based practice and leadership to be change agents in any agency. They will look at new and better ways to create health care delivery systems meeting the needs of their particular population.
- d. Independent needs analysis.** An independent needs analysis was not conducted. A recap of the literature is presented:
 - According to the American Association of Colleges of Nursing, 49,948 qualified applicants were turned away from baccalaureate and graduate nursing programs in 2008 primarily due to a lack of faculty. Of those potential students, nearly 7,000 were students pursuing a master's or doctoral degree in nursing, which is the education level required to teach.
 - According to the Indiana Nursing Workforce Development Coalition, *Summary Report Year 2008 Statewide Survey of Nursing Programs*, a total of 2,596 qualified nursing

students were not admitted. In this same report the nursing programs reported at the time of the survey, that there were 43 seats available for Indiana DNP programs and in that same reporting cycle 50 students were admitted.

- According to *High-wage, High-demand Occupations 2006-2016* the state of Indiana is projected to have 459 positions for doctoral degree nurse educators.
- According to the Indiana Center for Health Policy currently 98% of rural counties fail to meet the U.S. benchmark for an adequate ratio of primary care specialists per 100,000 population.

- e. **Program experience.** Established in 1963, the Indiana State University nursing program admitted its first graduate students in 1986. The graduate program received initial accreditation by the National League for Nursing in 1989 and continuing accreditation by the National League for Nursing Accrediting Commission in 2004 for eight years.

The original on campus master's program prepared nurses for advanced nursing practice in the tracks of adult health or community health. The on campus family nurse practitioner role was added in 1994. In 2005, the family nurse practitioner program transitioned to a distance learning program. Indiana State University has offered EdD and PhD programs in Education, Higher Education Administration, and Technology.

6. Regional, state, and national factors

- a. **Comparable programs in the region and state.** A PhD nursing program is offered by Indiana University. The PhD is a research degree whereas the DNP is a clinical practice degree. DNP programs in the state of Indiana are at Purdue University, Ball State, and the University of Southern Indiana. There are numerous DNP programs starting throughout the country. This role is not only as a health care primary provider but as an elite change agent and policy creator. With the establishment of a DNP program at Indiana State University a unique relationship with a graduate student is established that can lead to a Teaching Assistantship, a graduate stipend, or a scholarship. The arrangement of teaching a clinical section in exchange for graduate tuition provides another pool of clinical nurse educators and online educators. This arrangement has worked very well for master's students and will expand with the additional recruitment of doctoral students. This is a critical part of the faculty succession plan for the Indiana State University nursing departments. Administrators are mindful that there are several DNP programs in the state but this is about funding and growing our own next generation of nursing experts.
- b. **External agencies.** The American Association of Colleges of Nursing (AACN) has been instrumental in the national initiation and development of DNP programs. AACN published the *Essentials of Doctoral Education for Advanced Nursing Practice* in November 2006 and provides direction for the curriculum, the expected outcomes for the program, the evaluation of the program, and budgetary requirements. The National League for Nurses Accreditation Commission (NLNAC) is the nursing accrediting body for baccalaureate and master nursing programs and will be the accrediting body for DNP programs

D. Program Implementation and Evaluation

Implementation

The DNP program will be marketed through presentation, newsletters, alumni publications and brochures for current baccalaureate and master's nursing students. The nursing website and distance education website will be updated to provide information on the DNP program. We anticipate that our first students will be admitted and start the program fall semester of 2010. Twenty post-master's students will be admitted annually. Advanced Nursing Education Grant submitted annually through HRSA will provide support of the DNP program. The DNP program will seek internal funding for an additional faculty position.

Evaluation

The design of this DNP program was constructed based on the following evaluation criteria: 1) quality and efficiency; 2) appropriateness of the program offering; 3) availability of similar programs; 4) personal and social utility; 5) student demand; 6) student access; 7) flexibility of program design; 8) market demand; 9) inter-institutional and inter-departmental cooperation; 10) flexibility of providing instruction.

1) Quality and efficiency

The Department of Advanced Practice Nursing extensively reviews the current master plan criteria for total program evaluation. These evaluation procedures will be applied to the DNP program and include evaluation procedures: course evaluation, faculty evaluations, preceptor evaluation of student, student evaluation of clinical and preceptor experiences, student evaluation of learning resources, support, advising, distance education and technology, exit surveys, student satisfaction, employment rates, employer surveys, and alumni surveys. Student retention and graduation rates are compiled and analyzed annually. The nursing division at ISU receives annual reports from both certifying bodies on pass rates. Development of a DNP examination has been recently discussed at the national level but, dialogue is continuing without a consensus having yet been reached. All these evaluation procedures are necessary to provide extensive ongoing evaluation that express competency, achievement, and areas of recommended changes.

Evaluation forms will be adapted to include specific DNP program outcomes and DNP graduate and employer surveys. The DNP Curriculum Taskforce Committee has been established to review evaluation results and make necessary curriculum changes. In addition, the NCA best practice for standards electronic degree offerings are also assessed for regional accreditation.

2) Appropriateness of program offering to institution's identity and mission

The appropriateness of this DNP offering to the identity and mission of the University is based on "...recognized for excellence in experiential learning and engagement..." and also, "...selected master and doctoral programs primarily in professional areas". The DNP as a clinical doctorate requires students to be involved in primary health care settings. The scholarly project and the residency courses actively involve the students with their communities through meaningful service. The DNP also supports the offering of a doctoral program in a professional area.

3) Availability of similar programs

First, it is important to note that there are a total of 42 public and independent undergraduate nursing programs in the state of Indiana. Indiana also has 21 graduate nursing programs offering various concentrations and post-master's certificates. Nationally, professional healthcare disciplines are rapidly morphing master's education into the more independent clinical doctorate degree for greater patient access and more equitable payment reimbursement. Every graduate nursing program in Indiana will soon need to decide if it is going to implement the transition or phase out their graduate program. The question is not, "Are five DNP programs in Indiana too many?" but rather the more forward looking question we need to contemplate is, "Will twenty-one DNP programs be enough for the State of Indiana?" The most relevant issue is to consider the right blend for now. Considering that Indiana has long been a leading national provider for higher education, all major state universities should be encouraged to bridge this transition. This would include the addition of Indiana State and Indiana University to the existing list consisting of Purdue University, Ball State University, and University of Southern Indiana. Regional campuses with academic autonomy and robust graduate enrollments should also be favorably considered when each program is developmentally ready.

4) Personal and social utility

Earning a clinical practice doctorate will allow the individual to pursue additional career opportunities in both practice settings and nursing education. The social utility will be the increase in the number of primary care providers that have sensitivity to the rural and underserved populations.

5) Student demand

Student demand will increase as seamless post-baccalaureate nursing education becomes the career path in healthcare professions. High quality online programs that offer flexible course offerings will continue to be in high demand by students.

6) Student access

Student access is based on the availability of a computer, internet access, and a partnership with a clinical facility for the student's scholarly project and clinical residency. Indiana State University has offered graduate nursing education since 1986, and has offered online nursing education for over fifteen years. Indiana State has the technology support and faculty skills to expand to the DNP level.

7) Flexibility of program design

One of the strengths of the Indiana State DNP program is that it offers both full-time and part-time options. This adds greater flexibility for the adult learner that may already be working and have family responsibilities.

8) Market demand

Based on internal surveys of currently enrolled Indiana State students (approximately 30% of graduate students), and the number of telephone and e-mail inquiries (a range of 6 to 12 inquiries per month with no advertisement), there is a strong market demand for a DNP program at Indiana State University.

9) Inter-institutional and inter-departmental cooperation

Regrettably, there has not been strong inter-institutional cooperation. Students are loyal to their university and wish to continue working with faculty they know and trust. By contrast, the formation of the new College of Nursing, Health, and Human Services has built a strong resource of faculty talent and research interest. Many of the new courses in the triad of graduate programs proposed at Indiana State will serve students in the doctorate in physical therapy and physician assistant program once approved.

10) Flexibility of providing instruction

The design of online instructional methods includes quality learning through digital video streaming, Powerpoint presentations with audio interpretation through Elluminate, live educational chat rooms, selected readings, electronic web sources, interactive faculty and student discussion boards with problem based learning, group projects, and student presentations. Research conducted with Indiana State undergraduate students has indicated that there is no significant difference in the level of learning and competencies between campus students and online students. Every effort is made to provide content for the visual, auditory, and kinetic learner through high quality content delivery and coordinated clinical partnerships with preceptors.

E. Tabular Information

1. Table 1: Enrollment and Completion Data—see following page 21
Calculations on Table one are based on 10 full-time and 10 part-time students
There is a 25% increase tuition difference for online distance out-of state students.
2. Table 2A and 2B: Cost and Revenue Data—see following pages 22 and 23
One new full-time twelve month faculty line has been requested to serve as the Program Director. The equivalent of one full-time nine month faculty line will be allocated to this program from existing graduate faculty. A total of nine credit hours will be taught by graduate adjunct faculty annually. This new program will share the existing resources of one Administrative Assistant and one Student Support Specialist for the department.
As with all graduate nursing clinical courses, there is a \$500 *Clinical Education and Faculty Fee* per one clinical course each semester.
2. Table 3: New Program Proposal Summary—see following page 24

Table 1 Program Enrollments and Completions
Annual totals by Fiscal Year (Use SIS Definitions)

Campus: Indiana State University
 Program: Doctor of Nursing Practice (DNP)
 Date: November 20, 2009

	Total Year 1 FY 2010-2011	Total Year 2 FY 2011-2012	Total Year 3 FY 2012-2013	Total Year 4 FY 2013-2014	Total Year 5 FY 2014-2015
A. PROGRAM CREDIT HOURS GENERATED					
1. Existing Courses	<u>30</u>	<u>480</u>	<u>780</u>	<u>780</u>	<u>780</u>
2. New Courses	<u>270</u>	<u>180</u>	<u>0</u>	<u>0</u>	<u>0</u>
TOTAL	<u>300</u>	<u>660</u>	<u>780</u>	<u>780</u>	<u>780</u>
B. FULL-TIME EQUIVALENTS (FTE's)					
1. FTE's generated by Full-Time Students	<u>10</u>	<u>20</u>	<u>20</u>	<u>20</u>	<u>20</u>
2. FTE's generated by Part-Time Students	<u>5</u>	<u>10</u>	<u>15</u>	<u>15</u>	<u>15</u>
TOTAL	<u>15</u>	<u>30</u>	<u>35</u>	<u>35</u>	<u>35</u>
3. On-campus Transfer FTE's	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
4. New-to-Campus FTE's	<u>15</u>	<u>30</u>	<u>35</u>	<u>35</u>	<u>35</u>
C. PROGRAM MAJORS (HEADCOUNT)					
1. Full-time students	<u>10</u>	<u>20</u>	<u>20</u>	<u>20</u>	<u>20</u>
2. Part-time students	<u>10</u>	<u>20</u>	<u>30</u>	<u>30</u>	<u>30</u>
TOTAL	<u>20</u>	<u>40</u>	<u>50</u>	<u>50</u>	<u>50</u>
3. On-campus Transfers	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
4. New-to-campus Majors	<u>20</u>	<u>40</u>	<u>50</u>	<u>50</u>	<u>50</u>
5. In State	<u>10</u>	<u>20</u>	<u>25</u>	<u>25</u>	<u>25</u>
6. Out-of-State	<u>10</u>	<u>20</u>	<u>25</u>	<u>25</u>	<u>25</u>
D. PROGRAM COMPLETIONS	<u>0</u>	<u>10</u>	<u>20</u>	<u>20</u>	<u>20</u>

Table 2A
Total Direct Program costs and Sources of Program Revenues

Campus: Indiana State University
 Program: Doctor of Nursing Practice (DNP)
 Date: November 20, 2009

	Total Year 1 FY 2010-2011		Total Year 2 FY 2011-2012		Total Year 3 FY 2012-2013		Total Year 4 FY 2013-2014		Total Year 5 FY 2014-2015	
	FTE	Cost	FTE	Cost	FTE	Cost	FTE	Cost	FTE	Cost
A. TOTAL DIRECT PROGRAM COSTS										
1. Existing Departmental Faculty Resources	<u>1</u>	<u>\$100,000</u>	<u>1</u>	<u>\$100,000</u>	<u>1</u>	<u>\$100,000</u>	<u>1</u>	<u>\$100,000</u>	<u>1</u>	<u>\$100,000</u>
2. Other Existing Resources		<u>\$30,000</u>		<u>\$30,000</u>		<u>\$30,000</u>		<u>\$30,000</u>		<u>\$30,000</u>
3. Incremental Resources (See Table 2B)		<u>\$265,000</u>		<u>\$260,700</u>		<u>\$260,900</u>		<u>\$266,100</u>		<u>\$261,300</u>
TOTAL		<u>\$395,000</u>		<u>\$390,700</u>		<u>\$390,900</u>		<u>\$396,100</u>		<u>\$391,300</u>
B. SOURCES OF PROGRAM REVENUES										
		Total Year 1 FY 2010-2011		Total Year 2 FY 2011-2012		Total Year 3 FY 2012-2013		Total Year 4 FY 2013-2014		Total Year 5 FY 2014-2015
1. Reallocation		<u>\$130,000</u>		<u>\$130,000</u>		<u>\$130,000</u>		<u>\$130,000</u>		<u>\$130,000</u>
2. New-to-campus Student Fees		<u>\$103,600</u>		<u>\$224,400</u>		<u>\$261,800</u>		<u>\$261,800</u>		<u>\$261,800</u>
3. Other (non-state)		<u>\$15,000</u>		<u>\$45,000</u>		<u>\$50,000</u>		<u>\$50,000</u>		<u>\$50,000</u>
4. New State Appropriations:										
a. Enrollment change funding		<u>0</u>		<u>0</u>		<u>0</u>		<u>0</u>		<u>0</u>
b. Other State Funds		<u>0</u>		<u>0</u>		<u>0</u>		<u>0</u>		<u>0</u>
TOTAL		<u>\$248,600</u>		<u>\$399,400</u>		<u>\$441,800</u>		<u>\$441,800</u>		<u>\$441,800</u>

Table 2B
Total Direct Program Costs and Sources of Program Revenues

Campus: Indiana State University
 Program: Doctor of Nursing Practice (DNP)
 Date: November 20, 2009

	Total Year 1 FY 2010-2011		Total Year 2 FY 2011-2012		Total Year 3 FY 2012-2013		Total Year 4 FY 2013-2014		Total Year 5 FY 2014-2015	
	FTE	Cost	FTE	Cost	FTE	Cost	FTE	Cost	FTE	Cost
1. PERSONAL SERVICES										
a. Faculty	2.5	\$228,500	2.5	\$228,500	2.5	\$228,500	2.5	\$228,500	2.5	\$228,500
b. Support Staff	1	\$30,000	1	\$30,000	1	\$30,000	1	\$30,000	1	\$30,000
c. Graduate Teaching Assistants	0	\$0	0	\$0	0	\$0	0	\$0	0	\$0
TOTAL	3.5	\$258,500	3.5	\$258,500	3.5	\$258,500	3.5	\$258,500	3.5	\$258,500
2. SUPPLIES AND EQUIPMENT										
a. General Supplies/Equipment		\$1,000		\$1,200		\$1,400		\$1,600		\$1,800
b. Recruiting		\$0		\$0		\$0		\$0		\$0
c. Travel		\$500		\$1,000		\$1,000		\$1,000		\$1,000
d. Library/Acquisitions		\$0		\$0		\$0		\$0		\$0
TOTAL		\$1,500		\$2,200		\$2,400		\$2,600		\$2,800
3. EQUIPMENT										
a. New Equipment Necessary for Program		\$5,000		\$0		\$0		\$0		\$0
b. Routine Replacement		\$0		\$0		\$0		\$5,000		\$0
TOTAL		\$5,000		\$0		\$0		\$5,000		\$0
4. FACILITIES										
5. STUDENT ASSISTANCE										
a. Graduate Fee Scholarships		\$0		\$0		\$0		\$0		\$0
b. Fellowships		\$0		\$0		\$0		\$0		\$0
TOTAL		\$0		\$0		\$0		\$0		\$0
SUM OF ALL INCREMENTAL DIRECT COSTS		\$265,000		\$260,700		\$260,900		\$266,100		\$261,300

Table 3
New Program Proposal Summary
November 20, 2009

1. Prepared by Institution: Indiana State University

Institution Location: Terre Haute, IN

Program: Doctor of Nursing Practice (DNP)

Proposed CIP Code: 51.1699

	Total Year 1 FY 2010-2011	Total Year 2 FY 2011-2012	Total Year 3 FY 2012-2013	Total Year 4 FY 2013-2014	Total Year 5 FY 2014-2015
Enrollment Projections (Headcount)					
Full-Time	<u>10</u>	<u>20</u>	<u>20</u>	<u>20</u>	<u>20</u>
Part-Time	<u>10</u>	<u>20</u>	<u>30</u>	<u>30</u>	<u>30</u>
TOTAL	<u>20</u>	<u>40</u>	<u>50</u>	<u>50</u>	<u>50</u>
Enrollment Projections (FTE)					
Full-Time	<u>10</u>	<u>20</u>	<u>20</u>	<u>20</u>	<u>20</u>
Part-Time	<u>5</u>	<u>10</u>	<u>15</u>	<u>15</u>	<u>15</u>
TOTAL	<u>15</u>	<u>30</u>	<u>35</u>	<u>35</u>	<u>35</u>
Degree Completion Projections	<u>0</u>	<u>10</u>	<u>20</u>	<u>20</u>	<u>20</u>
New State Funds Requested (Actual)	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>
New State Funds Requested (Increases)	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>
II. Prepared by CHE					
New State Funds to be considered for recommendation (Actual)	<u>\$</u>	<u>\$</u>	<u>\$</u>	<u>\$</u>	<u>\$</u>
New State Funds to be considered for recommendation (Increases)	<u>\$</u>	<u>\$</u>	<u>\$</u>	<u>\$</u>	<u>\$</u>

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APPENDICES

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APPENDIX A
Indiana State University Doctor of Nursing Practice Program of Study

Year 1 SUMMER SESSION			FALL SEMESTER			SPRING SEMESTER		
Number	Course Title	Credits	Number	Course Title	Credits	Number	Course Title	Credits
			NURS 601	Health care Perspectives	3	NURS 633	Nursing Research	3
			NURS 605	Nursing Theory Development	3	NURS 645	Pharmacology for the Family Nurse	3
			HLTH 604	Research Design and Data Analysis	3	BIO 633	Advanced Pathophysiology	3
				Term Total	9		Term Total	9
				Running Total	9		Running Total	18
Year 2 SUMMER SESSION			FALL SEMESTER			SPRING SEMESTER		
Number	Course Title	Credits	Number	Course Title	Credits	Number	Course Title	Credits
NURS 624	Health Assessment & Promotion *	2+2	NURS 644	Theoretical Foundations of Family *	3+4	NURS 664	Theoretical Foundations Family *	3+5
NURS 635	Family Nurse Practitioner Role	1	NURS 646	Diagnostic Lab	1			
				Term Total	5		Term Total	8
				Running Total	23		Running Total	39
Year 3 SUMMER SESSION			FALL SEMESTER 2010			SPRING SEMESTER 2011		
Number	Course Title	Credits	Number	Course Title	Credits	Number	Course Title	Credits
NURS 670	FNP Preceptorship *	0+5	HLTH 612	Epidemiology	3	NURS 822	Organizational Informatics	3
NURS 675	Family Nurse Practitioner Role II	1	NURS 810	Community Health Planning	3	NURS 825	Analytical Methods	3
NURS 699	Thesis	6	NURS 891	Scholarly Project I *	1+2	NURS 892	Scholarly Project II *	0+3
or NURS 698	Culminating Project	3						
or NURS 697	Evidence Based Practice Project	3						
				Term Total	9 / 12		Term Total	9
				Running Total	48 / 51		Running Total	75/78
Year 4 SUMMER SESSION 2011			FALL SEMESTER 2011			SPRING SEMESTER 2012		
Number	Course Title	Credits	Number	Course Title	Credits	Number	Course Title	Credits
NURS 893	Scholarly Project III *	0+3	NURS 842	Health Policy Leadership	3	NURS 850	Rural/Underserved Residency	0+3
			NURS 840	Culturally Competent Care	3	NURS 895	Capstone Scholarly Project *	0+3
			NURS 894	Scholarly Project IV *	0+3	XXXX	Guided Elective	3
				Total Term	3		Total Term	9
				Running Total	78/81		Running Total	96/99

APPENDIX B

Practice Doctorate NP Competencies Developed by the National Panel convened by NONPF

I. Competency Area: Independent Practice

1. Practices **independently** by assessing, diagnosing, treating, and managing **undifferentiated patients**
2. Assumes full accountability for actions as a **licensed independent practitioner**

II. Competency Area: Scientific Foundation

3. Critically analyzes data for practice by integrating knowledge from arts and sciences within the context of nursing's philosophical framework and scientific foundation
4. Translates research and data to anticipate, predict, and explain variations in practice

III. Competency Area: Leadership

5. Assumes increasingly complex leadership roles
6. Provides leadership to foster **interprofessional** collaboration
7. Demonstrates a leadership style that uses critical and reflective thinking

IV. Competency Area: Quality

8. Uses best available evidence to enhance **quality** in clinical practice
9. Evaluates how organizational, structural, financial, marketing, and policy decisions impact cost, quality, and accessibility of health care
10. Demonstrates skills in **peer review** that promote a **culture of excellence**

V. Competency Area: Practice Inquiry

11. Applies clinical investigative skills for evaluation of health outcomes at the patient, family, population, **clinical unit**, systems, and/or community levels
12. Provides leadership in the translation of new knowledge into practice
13. Disseminates evidence from inquiry to diverse audiences using multiple methods

VI. Competency Area: Technology & Information Literacy

14. Demonstrates information literacy in **complex decision making**
15. Translates technical and scientific health information appropriate for user need
16. Participates in the development of clinical information systems

VII. Competency Area: Policy

17. Analyzes ethical, legal, and social factors in policy development
18. Influences **health policy**
19. Evaluates the impact of **globalization** on health care policy development.

VIII. Competency Area: Health Delivery System

20. Applies knowledge of organizational behavior and systems.
21. Demonstrates skills in negotiating, consensus building, and partnering.
22. **Manages** risks to individuals, families, populations, and health care systems.
23. Facilitates development of **culturally relevant** health care systems.

IX. Competency Area: Ethics

24. Applies ethically sound solutions to complex issues

Full Document available to download from

<http://www.nonpf.org/NONPF2005/PracticeDoctorateResourceCenter/PDresource.htm>.

American Association of Colleges of Nursing (AACN) DNP Essentials

- I. Scientific Underpinnings for Practice
- II. Organizational and Systems for Quality Improvement and Systems Thinking
- III. Clinical Scholarship and Analytic Methods for Evidence-based Practice
- IV. Information Systems/Technology and Patient Care Technology for Improvement and Transformation of Health Care
- V. Health Care Policy for Advocacy in Health Care
- VI. Interprofessional Collaboration for Improving Patient and Population Health Outcomes
- VII. Clinical Prevention and Population Health
- VIII. Advanced Nursing Practice

From: *The Essentials of Doctoral Education for Advanced Nursing Practice* available to download from <http://www.aacn.nche.edu/DNP/index.htm>.

The National Organization of Nurse Practitioner Faculties
1522 K Street, NW, Ste. 702
Washington, DC 20005
www.nonpf.org

APPENDIX C

Report of Review of DNP Proposal

For

Indiana State University

Department of Nursing

Michael Carter, DNSc, FAAN, FNP-BC

University Distinguished Professor

The University of Tennessee Health Science Center

The faculty of the Department of Nursing of Indiana State University propose developing and implementing a new Doctor of Nursing Practice (DNP) degree program. The Department has a long and rich history of offering both the BSN and MSN degrees. Graduates of the programs are successful in meeting the health care needs of the region, the state and beyond.

This proposal is well designed and timely. Over the past several years, the profession has been moving toward the practice doctorate for advanced practice nursing (APN) programs. The faculty report that they have followed this movement and have carefully considered the policy statements of the American Association of Colleges of Nursing (AACN) that all APN programs convert to the DNP by 2015. In addition, the National Organization of Nurse Practitioner Faculties (NONPF) has taken the position that the DNP is the required degree for nurse practitioner education while not setting a target date. Substantial national debate has taken place concerning this evolution but the outcome has been that the DNP will be the only acceptable degree for APN preparation in the future. Currently, AACN reports that over 70 programs are admitting students to the DNP and 140 additional programs are planning DNP programs. The conversion from the MSN to the DNP as the desired preparation of APNs has been quick in a

way seldom seen in higher education and especially in nursing. Clearly, Indiana State University will need to begin offering this degree if they wish to remain current and viable in preparing nurse practitioners.

Overall, this proposal is an excellent approach to meet the needs of the profession and the unique student clientele of the University. Beginning as a post-MSN program and then moving into an entry program is appropriate as the faculty develop the education, scholarship, financial, and policy base that will be required for future preparation. The substantial use of on-line education approaches is both commendable and important to meet the needs of the adult learner and particularly those who have an interest in rural and underserved populations. These students are often the least able to stop practice and relocate to an education program. If they do relocate, the likelihood of returning to a rural community decreases.

A review of the proposal was provided for the planning group in early August. This review focused on the degree to which the proposal meets the elements set forth in the document by AACN, *The Essentials of Doctoral Education for Advanced Nursing Practice*. In addition, NONPF has published their document, *Practice Doctorate Nurse Practitioner Entry-Level Competencies* and this has been used as well to guide the development of this proposal. These two documents will serve as the basis for accreditation of the program by the Commission of Collegiate Nursing Education and such accreditation is critical to the success of the program and its graduates. The proposal has addressed most of these requirements and the faculty are now working on updating the proposal to reflect the few remaining requirements.

There are areas for larger university consideration. Building the program of clinical scholarship as a part of the expected faculty assignment is not currently a part of the operations of the College or the Department. Faculty members have developed individual practice

arrangements but for the most part these are outside the usual faculty expectations. In my opinion this has led to the disconnect between faculty's clinical practice as required for maintaining skill and abilities and their establishment of a larger program of clinical scholarship that more fully engages faculty, staff, and students in designing and testing methods and models of care delivery. This can be created and the faculty are dedicated to achieving this. Mentoring students so that they become competent in independent practice will be a new requirement for the faculty. This will require faculty who practice independently as well. The commitment of the faculty to preparing students for care to rural and underserved populations is highly commendable but it is incumbent on the faculty to create such models in their own practices that are both high quality and cost effective.

The Department has a clinical operation that is used as a laboratory for various students. To date, this has not been operated as an income generating facility and this will likely need to be altered. This lab can serve as the focal point for several of the future DNP faculty is building their program of clinical scholarship. But, fees must be paid and an acceptable business plan put into place to demonstrate to future students that these services can be of high quality and pay their way even with underserved clientele.

In summary, I believe that this proposal is an excellent proposal. The few areas for improvement can be easily achieved. The Nursing Department should be encouraged to move quickly to obtain full approval and begin the program as soon as possible.

Appendix D

American Association
of Colleges of Nursing



January 31, 2008

Esther Acree, MSN, RN
Co-Interim Dean, College of Nursing, Health and Human Services
Indiana State University
749 Chestnut Street
Terre Haute, IN 47809

Dear Ms. Acree:

I am writing in response to your request for a letter of support from the American Association of Colleges of Nursing (AACN) for the planned Doctor of Nursing Program (DNP) at your university. AACN is pleased to reaffirm in this letter our commitment to the development of DNP programs in our member institutions and to reinforce our adopted position of October 2004 that the DNP be the graduate degree to prepare nurses for entering advanced specialized nursing practice.

As you are aware, the DNP position statement which AACN's members adopted was the outgrowth of two years of study regarding the changing health care environment, the remarkable growth of credit expectations for master's level programs in nursing in response to this changing health care system, and the need to produce advanced nursing clinicians able to address the complex care needs of this environment. Following the adoption of this position paper, a strong community response has emerged with over 100 institutions indicating they are in development phases for the DNP. Additionally, 58 schools of nursing have already initiated DNP programs and are enrolling students. Schools nationwide which have initiated DNP programs are reporting sizable and competitive student enrollment.

Your efforts to develop a DNP program are evidence of your responsiveness to this changing dynamic in health care and your commitment to preparing the most sophisticated and skilled nursing professionals for today and the future. This work is also supported by the National Academy of Science which has advocated for the development of professional/practice doctorates in nursing as a route to advanced clinical work in nursing. Employers are quickly recognizing the unique contribution these expert nurses are making in the practice arena, certification bodies have all agreed to credential DNP graduates, and the demand DNP-prepared nurses continues to grow.

We look forward to hearing that Indiana State University has begun enrolling DNP students and offer our support for any consultation you may require to implement this important program.

Sincerely,

Jeanette Lancaster, PhD, RN, FAAN
President

ADVANCING HIGHER EDUCATION IN NURSING

American Association of Colleges of Nursing
One Dupont Circle NW, Suite 530 · Washington, DC 20036 · 202-463-6930 tel / 202-785-8320 fax
www.aacn.nche.edu

West Central Indiana Area Health Education Center

Louise A. Anderson, M.S.N., R.N., Director

Landsbaum Center for Health Education
1433 N 6 ½ Street, Room 205
Terre Haute, Indiana 47807
www.indstate.edu/wciahec

812-237-4365
812-237-9688
812-237-3926 (fax)



November 23, 2009

Dr. Richard "Biff" Williams
Indiana State University CNHHS
Nursing Bldg Room 412
749 Chestnut St.
Terre Haute, IN 47809

Dear Dr. Williams,

I write in support of the development and implementation of a Doctorate of Nursing Practice (DNP) Program at Indiana State University. WCI-AHEC has recently conducted a health care workforce needs assessment in Indiana with an emphasis on West Central Indiana. As part of the assessment, 71% of participants at a May 2009 Health Summit indicated there was a shortage of advanced practice nurses (APN) in our 11-county AHEC region. 2007 Indiana Professional Licensing Data indicate a ratio of 25.5 APNs per 100,000 population in Indiana but a ratio of only 19.6/100,000 in West Central Indiana. Twenty-five key informant interviews were conducted in the 11-county area as part of the assessment; five informants responded that nurse practitioners were needed.

The Kaiser Family Foundation 2009 data provides numbers of advanced practice nurses in each of the 50 states, District of Columbia and the United States. Indiana ranks 24th in licensed APNs. The remaining federal Region V states rank as follows: Illinois, 14th; Michigan, 16th; Minnesota, 22nd; Ohio, 10th; and Wisconsin, 20th. Indiana's southern neighboring state, Kentucky, ranks 26th.

Advanced practice nurses have proven to increase access to care for many patients and provide high quality, cost efficient and outcome oriented care in collaboration with physicians and other health disciplines. Chronic disease co-morbidities in an aging population and the increased complexity of the healthcare system have served as the basis for the American Association of Colleges of Nursing's (AACN) decision to call for moving the current level of preparation necessary for advanced nursing practice from the master's degree to the doctorate-level by the year 2015.

Indiana State University currently offers a masters degree to prepare advanced practice nurses. Adding the DNP to its current educational programming will allow current and future students to be prepared at the required entry level and continue to decrease the shortage in the advanced nursing practice profession.

Sincerely,

Louise A. Anderson, MSN, RN



November 25, 2009

Dr. Richard Williams, Dean
College of Nursing, Health, and Human Services
Indiana State University
Nursing Building
749 Chestnut Street
Terre Haute, IN 47809

Dear Doctor Williams:

I am writing in response to the request for a letter of support from the Indiana State Nurses Association (ISNA) for the proposed Doctor of Nursing Practice (DNP) at Indiana State University. ISNA supports the need for additional nursing practice doctoral programs in Indiana.

The shortage of nurses is well known at the local, state, national, and international levels. Critical shortages for providers of care exist within underserved and rural communities. Shortages also exist for qualified nurse faculty.

There are many opportunities for doctoral prepared nurses in the areas of clinical practice, leadership roles, and education. Doctoral prepared nurses are equipped to meet the challenges of the community and to fill the demand for experts in the areas of nursing practice and nursing education.

This challenge presents an opportunity for Indiana State University to respond to the increasing demand for access to health care particularly in underserved and rural areas of Indiana.

Sincerely,

Barbara Kelly, MSN, RN, President
Indiana State Nurses Association

BBK/ECK

cc: Ernest C. Klein, Jr., CAE
ISNA Executive Director



COLLEGE OF APPLIED SCIENCES AND TECHNOLOGY
SCHOOL OF NURSING

November 24, 2009

To Whom It May Concern:

I am writing this letter in support of the Doctorate in Nursing Practice (DNP) program Indiana State University School of Nursing is proposing to develop. The American Association of Colleges of Nursing (AACN) has set a goal to move entry level education for nurse practitioners to the DNP. All Schools of Nursing that want to continue to provide nurse practitioner education will need to transition to the DNP. Master's programs will no longer be able to provide this education. While the date for this transition has not been set it is apparent AACN is committed to instituting this entry level change.

Nurse practitioners are crucial to assuring all Indiana residents have access to quality primary care services. This role will become even more important with proposed health care reform. All current masters nurse practitioner programs in Indiana are healthy with most having waiting lists for enrollment. Looking to the future, it is anticipated that there is ample room for all of us to move forward with the transition to the DNP. These programs will prepare advanced practice nurses to be leaders not only in providing direct patient care but also in interdisciplinary teams to promote safe, high quality, cost-effective, patient-centered care at organization and systems levels.

Sincerely,

Beth Kelsey, EdD, WHNP-BC
Interim NP/DNP Program Director
School of Nursing
Ball State University
Muncie, IN 47306-0265
765-285-5761
bkelsey@bsu.edu

APPENDIX E
Indiana State University
College of Nursing, Health, and Human Services
Doctor of Nursing Practice
Faculty Qualification Information

Name: Richard B. Williams Ph.D., ATC Dean, College of Nursing, Health and Human Services	Office Phone: 812-237-3683 Email: Biff.williams@indstate.edu
Degrees / School: BS Weber State University 1994 MS Indiana State University 1995 PhD New Mexico State University 1998	Research Interest: <ul style="list-style-type: none"> • Athletic Training Education • Administration • Injury Prevention • Evidence-Based Practice
Professional Activities: <ol style="list-style-type: none"> 1. Professor, Indiana State University –Dean of the College 2. Indiana Area Health Education Center Advisory Board 3. Member, National Athletic Trainers’ Association 	
Presentations and Publications (Selected): <p>Williams R.B., Duong P.T., Buechler, J. (2010). Achieving Results for the Future through Interdisciplinary Health Education. National Rural Health Association's 33rd Annual Conference. May 20, 2010. Savannah Georgia.</p> <p>Miller, K, Knight KL, Williams R.B., (2008). Athletic Trainers’ Perceptions of Pickle Juice’s Effects on Exercise Associated Muscle Cramps. <u>Athletic Therapy Today</u>. 13, (5), 31-34.</p> <p>Finn, K.J., Dolgener, F., Williams, R.B., (2004). Ingestion of carbohydrates following certification weigh-in did not benefit college wrestlers. <u>Journal of Strength and Conditioning Research</u>. 18 (2), 328-333.</p> <p>Williams, R.B., Hadfield, O.D., (2003). Attributes of Curriculum Athletic Training Programs Related to the Passing Rate of First Time Certification Examinees. <u>Journal of Allied Health</u>, 32, (4), 240-245.</p> <p>Williams, R.B., Hudson, M.B., & Evans, T.A. (2003). Recognition and prevention of injuries in sport rock climbing. <u>Journal of Physical Education, Recreation, and Dance</u>. 74 (9), 29-32.</p> <p>Williams, R.B. (2001). Recognition of Movement Injuries in Children. <u>JOPHERD</u>, 72 (6), 29-31, 37.</p>	
Relevant teaching experience: Teach Evidence-Based Practice/Athletic Training Teach Administration	Clinical Practice: Certified Athletic Trainer

Indiana State University
College of Nursing, Health, and Human Services
Doctor of Nursing Practice
Faculty Qualification Information

<p>Name: Marcia Ann Miller Executive Director for Nursing Associate Dean for Academics</p>	<p>Office Phone: 812-237-8997 Email: Marcia.Miller@indstate.edu</p>
<p>Degrees / School: Ph.D. Leadership in Higher Education Indiana State University, Terre Haute, IN MSN Psychiatric Nursing Clinical Specialist Saint Xavier College, Chicago, IL MA Counseling Psychology Ball State University, Muncie, IN BSN Nursing Ball State University, Muncie, IN</p>	<p>Research Interest:</p> <ul style="list-style-type: none"> • Curriculum • Nursing Education • Psychiatric Nursing • Distance Education
<p>Professional Activities:</p> <ol style="list-style-type: none"> 4. Member of the Educational Sub-committee for the Indiana State Board of Nursing 5. Member of Indiana Deans and Directors 6. Member of Sigma Theta Tau International 7. Member of the Indiana State Nurses Association 8. Member of National League for Nursing 	
<p>Presentations and Publications Othello Syndrome (in press) Miller, M. (2008). Psychiatric nursing. Indianapolis, IN: The College Network.</p>	
<p>Relevant teaching experience: Nursing graduate courses: Health Promotion Education Nursing undergraduate courses: Leadership, Capstone, Psychiatric Nursing,</p>	<p>Clinical Practice: None at this time</p>

Indiana State University
College of Nursing, Health, and Human Services
Doctor of Nursing Practice
Faculty Qualification Information

<p>Name: Debra L. Mallory, NP-BC, PhD Professor, Dept. of Advanced Practice Nursing Indiana State University</p>	<p>Office Phone: 812-227-2591 Email: Debra.Mallory@indstate.edu</p>
<p>Degrees / School: PhD Texas Woman's University MSN Indiana University BSN Texas Christian University</p> <p>Certification: Women's Health Care Nurse Practitioner National Certification Corporation Basic Life Support American Heart Association RN, Indiana State Board of Nursing Health Professions Bureau</p>	<p>Research Interest:</p> <ul style="list-style-type: none"> • Women's health care in primary practice; • clinically-based bedside research; • effective strategies for distance education; caring practices in the nursing environment;
<p>Professional Activities:</p> <ol style="list-style-type: none"> 9. Professor & Chairperson, Department of Advanced Practice Nursing, Indiana State University, College of Nursing, Health, and Human Services. 10. President and program coordinator, Society of Advanced Practice Nurses 11. Indiana State Nurses Association/American Nurses Association 12. National Organization of Nurse Practitioner Faculty 13. National League of Nursing 	
<p>Presentations and Publications:</p> <ul style="list-style-type: none"> • Improving Visual Estimation of Blood Volume on Peripads. <u>MCN, The American Journal of Maternal/Child Nursing</u>. Vol. 22, No. 06, November/December 1997, 294-298. • Sexual Harassment in the Hospital. <u>Revolution: The Journal of Nurse Empowerment</u>. Winter 1993, 64-65, 95-96. • Postpartum Bleeding. <u>NAACOG's Clinical Issues in Perinatal and Women's Health Nursing: Bleeding in Women</u> in Deborah W. Perlis, (ed.) Philadelphia: Lippincott, Vol. 2, No. 3, 1991, 402-409. • Standardized Assessment of Blood Loss. <u>MCN, The American Journal of Maternal/Child Nursing</u>. Vol. 15, No. 04, July/August 1990, 241-244. • The Birth System in Germany. <u>Journal of Obstetric, Gynecologic, and Neonatal Nursing</u>. Vol. 14, No. 1, January/February 1985, 45-49. 	
<p>Relevant teaching experience: Indiana State University College of Nursing, Health, & Human Services nursing courses</p>	<p>Clinical Practice: Advanced Women's Healthcare St. Ann's Gynecology Clinic (volunteer) United States Naval Reserves Nurse Corps</p>

Indiana State University
College of Nursing, Health, and Human Services
Doctor of Nursing Practice
Faculty Qualification Information

<p>Name: Susan M. Eley PhD., MS, FNP-BC. Assistant Professor Director Family Nurse Practitioner Program</p>	<p>Office Phone: 812-237-7918 Email: Susan.eley@indstate.edu</p>
<p>Degrees / School: PhD. Indiana State University M.S. University of Illinois B.S.N. Southern Illinois University</p> <p>Certification: ANCC FNP Certification , AANP, ACLS</p>	<p>Research Interest:</p> <ul style="list-style-type: none"> • Family Health • Evidence Based Practice • Health Promotion • Childhood Obesity
<p>Professional Activities:; CON/HHS Building Committee member Jan 2009-present, DNP Taskforce Chair Dean Search Committee, Search Committee Faculty Search Committee Member Shriner’s Crippled Children’s screening Foster Grandparents Physical Examinations Sycamore Nursing Center 32 hours Group Home Physicals 24 hours Sycamore Nursing Center, Head Start Physicals Sycamore Nursing Center, Pediatric Clinic Sycamore Nursing Center, Women’s Clinic Sycamore Nursing Center</p>	
<p>Presentations and Publications:</p> <ul style="list-style-type: none"> • Advance Journal for Nurse Practitioner Specialty Issue Spring 2010: <u>Impact of Continuous Positive Airway Pressure on Insulin Resistance in Adult Patients with Obstructive Sleep Apnea</u> by Susan M. Eley PhD, FNP-BC, Jules Sybert MS, FNP-S, & Lea Hall MS, FNP-BC • Poster Presentation Sigma Theta Tau Bi-Annual International Convention Indianapolis, IN Oct 31, 2009 <u>Hip Hop Sex Education Curriculum in Collaboration with Lea Hall, Bilita Williams, and Carly Lyn Clyatt.</u> • Poster Presentations American Academy of Nurse Practitioners Nashville, TN June 2009 Poster Presentations; <u>Dash Diet to Better Health</u> in Collaboration with Lea Hall, Katie Bennett, and Anna Rawdon, <u>Bioidentical HRT vs exogenous HRT result in improved vasovagal symptoms with reduced incidence of breast cancer?</u> in Collaboration with Margo McMahon and Robin Belanger • Poster Presentation Univ. of Southern Indiana 13th Annual Research & Evidence Based Practice in Health Care Conference for Wed. April 22, 2009 for poster presentation on <u>Childhood Overweight and Obesity: Using Motivational Interviewing in Primary Prevention</u> by Susan Dunlap MS, RN FNP-S, Roxanne Hanington MS, RN FNP-S, Lea Hall MSN, Asst Professor, & Dr. Susan M. Eley Asst. Professor May 2009 	
<p>Relevant teaching experience: Graduate Faculty N624 Health Assessment and Health Promotion for APN; N635, N675 Family Nurse Practitioner Role I & II; N644 & N664 Theoretical Foundations of Family Health Care Nursing: Management of Common Chronic and Acute Health Problems I & II; N670 FNP Preceptorship; N646 Diagnostic Laboratory for APN; N697 Evidence Based Practice Course; N633 Nursing Research</p>	<p>Clinical Practice: Dr’s Arora and Arora Internal Medicine and Family Practice & Prompt Care Provider Hospital Privileges 1985-present St. Anthony Memorial Hospital Effingham IL</p>

Indiana State University
College of Nursing, Health, and Human Services
Doctor of Nursing Program
Faculty Qualification Information

<p>Name: Marcee Everly Assistant Professor</p>	<p>Office Phone: 812-237-2322 Email: meverly1@indstate.edu</p>
<p>Degrees / School: ND Nursing University of Colorado, Denver, CO MSN Nurse Midwifery University of Colorado, Denver, CO BS Preprofessional Biology; Chemistry University of Nevada, Las Vegas, NV</p>	<p>Research Interest:</p> <ul style="list-style-type: none"> • Women’s health • Nursing Education • Midwifery • Clinical Simulations
<p>Professional Activities:</p> <p>14. Member of the American College of Nurse Midwives</p> <p>15. Member of Sigma Theta Tau International</p> <p>16. Member of National League of Nurses</p> <p>17. Member of American Association of College Nursing</p>	
<p>Presentations and Publications</p> <p>5/2009 “Comparison of patient satisfaction with care from Certified Nurse Midwives in hospital settings to Free-standing birth center settings.” Poster presentation, American College of Nurse-Midwives, 54th Annual Meeting and Exposition, Seattle, WA</p>	
<p>Relevant teaching experience: Nursing undergraduate courses: Nursing Care of the Childbearing Family, clinical and didactic</p>	<p>Clinical Practice: Maternal Health Clinic, Terre Haute, IN Healthnet, Indianapolis, IN</p>

Indiana State University
College of Nursing, Health, and Human Services
Doctor of Nursing Practice
Faculty Qualification Information

Name: Roseanne Fairchild, Ph.D., MSN, RN Assistant Professor, Advanced Practice Nursing	Office Phone: 812-237-3480 Email: roseanne.fairchild@indstate.edu
Degrees / School: Ph.D. Indiana University School of Nursing MSN Indiana University BA Butler University Certification: Nurse Educator Emergency Nursing	Research Interest: <ul style="list-style-type: none"> • Health Services Research • Patient Safety • Cost Effectiveness Analysis of Quality Improvement Interventions in the Critical Access/Rural Hospital Settings
Professional Activities: <ol style="list-style-type: none"> 1. Indiana Rural Health Association (IRHA): Established a formal Research Working Group for ISU-Indiana Rural Health Association-HealthCare Excel to initiate and sustain a rural healthcare research agenda for critical access and rural hospitals across the state of Indiana. 2. West Central Indiana-Area Health Care Education Committee (WCI-AHEC): Conducting a Needs Assessment in continuing education for nursing staff in hospitals and long-term care facilities for an 11-county area in Central Indiana, 2009-2010. 3. Sigma Theta Tau International, Honor Society of Nursing: Member, Fellowship and Biennial Convention Planning Committees, 2004 – present. 	
Presentations and Publications: <ol style="list-style-type: none"> 1. “The TIGER Initiative in Health Informatics for Rural Hospitals in Central Indiana”, for the 3rd Annual Nurse Faculty – Nurse Executive Summit, Scottsdale, AZ, December, 2009. 2. Caring in the Midst of Complexity: Practical Ethical Theory and Model for Nurses’ Ethical Reasoning Skills in Clinical Practice, Midwest Nursing Research Society, Guaranteed Ethics Symposium, April, 2006. 3. Nurse Motivation, Cognitive Style and Perceptions of Safety Culture in Medical Surgical Units: Evidence toward the Development of a Human Performance Quality Nursing Care Delivery Model, Podium presentation, Sigma Theta Tau International Biennial Convention: Evidence-Based Practice, Indianapolis, Indiana, Nov. 14, 2005. 4. Fairchild, R. (2009). “Caring in the Midst of Complexity: Practical Ethical Theory for Nurses”, manuscript accepted for publication, <i>Nursing Ethics</i> (issue pending). 5. Moody, R.C., Pesut, D.J., & Harrington, C.F. (2006). “Creating Safety Culture on Nursing Units: Human Performance and Organizational System Factors That May Make a Difference”, <i>Journal of Patient Safety</i>, 2 (4). 6. Moody, R.C. & Pesut, D.J. (2006). “The Motivation to Care: Application and Extension of Motivation Theory to Professional Nursing Work”. <i>Journal of Health, Organization, and Management</i>, 20 (1). 	
Relevant teaching experience: Baccalaureate and Graduate Nursing Programs, Indiana University School of Nursing; Graduate Nursing Practice Program, Indiana State Univ	Clinical Practice Experience: Emergency Department, Traumatic Brain Injury, Oncology/Hospice Nursing

Indiana State University
College of Nursing, Health, and Human Services
Doctor of Nursing Practice
Faculty Qualification Information

<p>Name: Julia M Fine, RN, PhD, FNP-BC Associate Professor</p>	<p>Office Phone: 812-237-2667 Email: j-fine@indstate.edu</p>
<p>Degrees / School: FNP certificate, post-Master's: Ball State University, Muncie, Indiana. Ph.D. The University of Texas at Austin, Graduate Studies in Nursing concentration in parent-child nursing and statistical methods. M.S.N. Indiana University, Indianapolis, Major: Perinatology. B.S.N.(with high honors) The University of Texas at Austin B.A. The University of Texas at Austin, Major: Anthropology</p>	<p>Research Interest:</p> <ul style="list-style-type: none"> • Diversity in nursing clinical education • International health care • Forensic nursing • Lifestyle Change Programs/Coronary health improvement
<p>Professional Activities:</p> <ul style="list-style-type: none"> • CODA Board of Directors (Council on Domestic Abuse) • Sexual Assault Response Team of Vigo County • Maple Center Board of Directors • Atsina Charity Medical Clinic Board of Directors (Accra, Ghana) • ISU Faculty Senate, Executive Committee 	
<p>Presentations and Publications:</p> <p>Maternal/Child and Perinatal core titles (2005). <i>Doody's Core Titles in the Health Sciences (DCT)</i>. Chicago: Doody Enterprises, Inc.</p> <p>Maternal/Child and Perinatal core titles (2004). <i>Doody's Core Titles in the Health Sciences (DCT)</i>. Chicago: Doody Enterprises, Inc.</p> <p>Fine, J.M., Baker, J.K., Borchers, D.A., Cochran, D.T., Kaltofen, K.G., Orcutt, N., Peacock, J.A., et al. (2001). Kathryn E Barnard: Parent-child interaction model. In A. Marriner-Tomey & M. R. Alligood (Eds.). <u>Nursing Theorists and Their Work</u> (5th ed.). St. Louis: C. V. Mosby/ Harcourt Health Sciences.</p> <p>Fine, J.M., Baker, J.K., Borchers, D.A., Cochran, D.T., Kaltofen, K.G., Orcutt, N., Peacock, J.A., et al. (1998). Kathryn E Barnard: Parent-child interaction model. In A. Marriner-Tomey (Ed.). <u>Nursing Theorists and Their Work</u> (4th ed.). (pp. 423-438), St. Louis: C. V. Mosby Co.</p> <p>Murray, M., Fine, J.M.B., & Vogler, J. (1997). Chapter 1: Electronic fetal monitoring: Purpose, predictions, and practice implications (pp. 1-22). In M. Murray, <u>Antepartal and Intrapartal Fetal Monitoring</u> (2nd ed.). Albuquerque, NM: Learning Resources International.</p> <p>Fine, J.M. (1995). Dilemmas of pink and blue: Discussion of gender roles in childbirth education. <u>Journal of Perinatal Education</u>, 4 (2), 7-10.</p>	
<p>Relevant teaching experience:</p> <p>Health Assessment and Health Promotion Family Nurse Practitioner Role I Information Technology Literacy for Healthcare (N108) Nursing Care of the Childbearing Family (N330) Research/Theoretical Basis for Nursing Practice (N322) Introduction to Healthcare Informatics (N400X/500X) Transition L.P.N. to B.S.N. (N208)</p>	<p>Clinical Practice:</p> <p>Union Hospital Maternal Health clinic Johnson Nichols Clinic, Greencastle, IN Minute Clinic Indianapolis, IN St. Ann Clinic, Terre Haute, IN</p>

Indiana State University
College of Nursing, Health, and Human Services
Doctor of Nursing Practice
Faculty Qualification Information

Name: Betsy Frank, RN, PhD, ANEF Professor	Office Phone: 812-237-3481 Email: Betsy.Frank@indstate.edu
Degrees / School: BSN Ohio State University 1968 MN University of Washington 1970 PhD University of Utah 1982	Research Interest: <ul style="list-style-type: none"> • Nursing Education • Nursing Administration • Spirituality in Healthcare • Evidence-Based Practice
Professional Activities: <ol style="list-style-type: none"> 18. Professor, Indiana State University –teach in graduate and undergraduate nursing programs 19. Region 9 Coordinator of Sigma Theta Tau 2005-2009 20. Fellow of the American Academy of Nurse Educators 21. Continuing Education Reviewer for Indiana State Nurses Association 22. Union Hospital Patient Satisfaction Committee 	
Presentations and Publications (Selected): <p>Frank, B. (2010). Critical thinking and decision making. In D. Huber (Ed.). <i>Leadership and nursing care management</i> (4th ed).</p> <p>Frank, B. (In press). No nursing student left untested. In L. Caputi (Ed.). <i>Teaching Nursing: The Art and Science</i>(2nd ed.).</p> <p>Frank, B. (2009). [Review of the Book: <i>Nursing education: Foundations for practice excellence</i>] <i>Nursing Education Perspectives</i>,30, 50.</p> <p>Frank, B. (2008). Chapter 2: Enhancing nursing education through effective academic-service partnerships. In M. Oermann (Ed.) <i>Annual review of nursing education</i> ,6, 25-43.</p> <p>Frank, B. (2008). [Review of the Book: <i>Teach beyond your reach: An instructor’s guide to to developing running successful distance learning classes, workshops training sessions and more</i>]. <i>Nursing Education Perspectives</i>,28, 292.</p> <p>Frank, B (2009). Teaching students with disabilities. In D. Billings & J. Halstead (Eds.) <i>Teaching in nursing: A guide for faculty</i> (3rd Ed.)</p> <p>Frank, B. (2007). Motivating yourself and others for a satisfying career. In. R. A. Jones (Ed). <i>Nursing leadership and management: Theories, processes and practice</i> (29-38). Philadelphia: F. A. Davis.</p>	
Relevant teaching experience: Teach Evidence-Based Practice/Nursing Research Teach Nursing Leadership Teach Healthcare Finance	Clinical Practice:

Indiana State University
College of Nursing, Health, and Human Services
Doctor of Nursing Practice
Faculty Qualification Information

<p>Name: Lea R. Hall, RN, MS, FNP-BC Assistant Professor, Advanced Practice Nursing</p>	<p>Office Phone: 812-237-7916 Email: lea.hall@indstate.edu</p>
<p>Degrees / School: M.S. Indiana State University B.S.N. University of Alabama at Birmingham</p> <p>Certification: American Nurse Credentialing Center, FNP</p>	<p>Research Interest:</p> <ul style="list-style-type: none"> • Distance Education • Diabetes Education
<p>Professional Activities:</p> <p>23. Assistant Professor, Indiana State University, Advanced Practice Nursing Department 24. Family Nurse Practitioner, HPW Center for Diabetes with Providence Medical Group</p>	
<p>Presentations and Publications:</p> <ol style="list-style-type: none"> 1. <i>Childhood Overweight and Obesity: Using Motivational Interviewing in Primary Prevention</i>, University of Southern Indiana 13th Annual Research and Evidence Based Practice in Healthcare Conference, April 2009 2. <i>Bio-identical hormone vs. traditional hormone therapy for relief of vaso-vagal symptoms related to menopause</i>, American Association of Nurse Practitioners Conference, June 2009 3. <i>The Dash to better health: Utilizing behavioral interventions to decrease blood pressure and reliance on medication for the treatment of hypertension</i>, American Association of Nurse Practitioners Conference, June 2009 4. <i>Hip-hop sex ed: Teenage pregnancy among American adolescents</i>, Sigma Theta Tau Conference, October 2009 	
<p>Relevant teaching experience: 6 years experience in graduate education, distance education.</p>	<p>Clinical Practice: HPW Center for Diabetes with Providence Medical Group, Family Nurse Practitioner</p>

Indiana State University
College of Nursing, Health, and Human Services
Doctor of Nursing Practice
Faculty Qualification Information

<p>Name: Cherie G. Howk, PhD, FNP-BC Assistant Professor Advanced Practice Nursing Department</p>	<p>Office Phone: 812-237-7919 Email: Cherie.Howk@indstate.edu</p>
<p>Degree/School: PhD Rush University, Chicago Illinois PM /FNP Indiana State University MS Adult Health Nursing Indiana State University BS Nursing Indiana State University AD Nursing Indiana Central University, Indianapolis</p>	<p>Research Interest:</p> <ul style="list-style-type: none"> • Depression in Women • Physiological Aspects of Depression in various populations • Teaching Online • Edutainment
<p>Certifications: American Nurses Credentialing Center: Certified as a Family Nurse Practitioner Certification Number 275737-22; Certified from April 1, 2007 to March 31, 2012. CAOCH Certified Occupational Hearing Conservationalist NIOSH Approved Spirometry Certification OSHA Technician Level Certification</p>	
<p>Professional Activities: Member and Rotating Secretary CHHS Executive Committee Member of DNP Task force Editorial Review Group Chair for Doody Enterprises, Inc. Rater in the McMaster Online Rating of Evidence System Member, Sigma Theta Tau, Lambda Sigma Chapter</p>	
<p>Presentations and Publications:</p> <ul style="list-style-type: none"> • Presentation: Indiana Rural Health Association ‘Bioterrorism and Primary Care Providers’ Response’ (6/11/09) • Book Review: Beach: Disaster Preparedness and Management (5/15/2009) • Chapters Review: Hensley: NP Coach (10/1/08) • Book Review: Howk, C. (2008) Book Review: Disaster Nursing and Emergency Preparedness. Veenema, T. (2007). Springer Publishing Co., New York. • Chapter: Howk, C. (2002) Psychodynamic Nursing: Hildegard E. Peplau. In Tomey, A. (2002), <u>Nursing Theorists</u>, Mosby: St. Louis. 	
<p>Relevant Teaching Experience: Online and in class teaching of Graduate FNP Courses: 624, 635, 644, 646, 664, 670, 675 Online teaching of Graduate Nursing Research 633 Online and in class teaching of Undergraduate Psychiatric Nursing Online teaching of Undergraduate Assessment</p>	<p>Clinical Practice: Hamilton Center Vigo County Jail through October 2009 Union Hospital Occupational Health Center prn</p>

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Name: Cha-Nam Shin, PhD, RN	Office Phone: 812-237-3682 Email: cshin1@indstate.edu
Degrees / School: PhD in Nursing Saint Louis University MPA in Nursing HanYang University BSN Korea National Open University Diploma in Nursing Margaret Pritchard Nursing College Certification: Indiana State Board of Nursing Missouri State Board of Nursing New York State Board of Nursing	Research Interest: <ul style="list-style-type: none"> • Health Promotion via Physical Activity and Healthy Eating • Diversity Issues in Health • Measurement and Methods
Professional Activities: 25. Assistant Professor of Nursing, Indiana State University, August 2008 to present 26. Sigma Theta Tau International Honor Society of Nursing, 2006 to present 27. Midwest Nursing Research Society, 2006 to present 28. International Orem Society for Nursing Science and Scholarship, 2007 to present	
Presentations and Publications: Shin, C. (September 11-12, 2009). <i>Health and Physical Activity of Korean American Adults</i> . Poster presented at the 18 th Annual Convention of Academy of Medical-Surgical Nurses 2009, Washington, D.C. Shin, C., & Lach, H. (March 28, 2009). <i>Predictors of Healthy Eating in Korean American Adults</i> . Poster presented at the Poster Discussion Forum at the 33 rd Midwest Nursing Research Society Annual Research Conference for 2009, Minneapolis, MN. Shin, C., & Lach, H. (March 29, 2008). <i>Physical Activity in Korean American Adults</i> . Poster presented at the 32 nd Midwest Nursing Research Society Annual Research Conference, Indianapolis, IN. Shin, C., & Lach, H. (March 25, 2007). <i>Psychometric Analysis of the SF-12 Health Survey in Older Adults</i> . Poster presented at the 31 st Midwest Nursing Research Society Annual Research Conference, Omaha, NE. Shin, C. (2007). Linking specific self-care deficit nursing theory concepts with the literature on family dinner. <i>Self-Care & Dependent-Care Nursing</i> , 15(1), 12-20.	
Relevant teaching experience: Nursing Research Course for Master's students, August 2008 to present	Clinical Practice: None

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<p>Name: Loretta Lucille White Associate Professor Advanced Practice Nursing</p>	<p>Office Phone: 812-237-3486 Email: Lucy.White@indstate.edu</p>
<p>Degrees / School: Post Masters University Southern Indiana Evansville, IN DNS Indiana University Indianapolis, IN MSN Indiana State University Terre Haute, Indiana BSN Indiana State University Terre Haute, Indiana ADN Indiana State University Terre Haute, Indiana</p>	<p>Research Interest:</p> <ul style="list-style-type: none"> • Caring/Uncaring Behavior • Advanced Nursing Practice • Emergency Nursing
<p>Professional Activities: 29. Member of the Society of Advanced Practice Nurses 30. Member of Sigma Theta Tau International 31. Member of National League for Nursing</p>	
<p>Presentations and Publications White, L.L. (2006). Preparing for clinical: Just in time. <i>Nurse Educator</i> 31(2), 57-60. <i>Assessment & Skills Update for Nurses Returning to the Workplace: Insertion of Intravenous Line and Practice</i> (Nov 16, 2004). Landsbaum Center for Health Education. <i>Contemporary Ethics Issues in Health Care, Research, and Practice: Case Studies and Ethical Issues in Nursing, in Psychiatry, and in Research</i> (Apr, 2005). Landsbaum Center for Health Education.</p>	
<p>Relevant teaching experience: Nursing graduate courses: Pharmacology for Family Nurse Practitioners; Family Nurse Practitioner Role I; Evidence Based Practice Nursing undergraduate courses: Pharmacology; Medical/Surgical Nursing; Nursing Research</p>	<p>Clinical Practice: None at this time</p>