

OUTCOMES

THE E-NEWSLETTER OF
DOCTORS OF NURSING PRACTICE, INC.



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September 27-29, 2018



2018 FACULTY

Improving Quality Patient Experience in Healthcare

Improving quality in healthcare includes the quality of the patient experience. Today, we continue to struggle with communication between the providers and patients which can have a negative impact on their experience. This perhaps may be because the traditional model of medicine positioned the providers, not the patients, in the position of power. Patient-centered care creates an environment where the patient is a partner in their care, keeps them involved in plans and results in a better understanding and compliance rate (Locke et al., 2011).

However, the healthcare team may still overlook this important component of patient care. For example, in the Emergency Department the environment is chaotic and stressful, there are frequent interruptions, and the workload is heavy. One study found that on average, an ED provider is interrupted approximately ten times an hour (as cited in Burley, 2011, p.34). This has a direct impact on not only the amount of time providers are able to spend with their patients, but the quality of the time.

Press Ganey surveys have found that the patient's interactions with staff have a dramatic impact on the patient's overall evaluation of a hospital; Press Ganey even recommends investing in different practices to improve communication. Some of these strategies include purposeful hourly rounding, bedside shift reporting, post-discharge phone calls, use of scripts and hiring staff that have good interpersonal skills ('The Rising Tide Measure...', 2013). Investing in strategies to improve communication between the patient and the healthcare team will help organizations meet Triple Aim. Better relationships will improve the experience and improved communication will increase compliance, resulting in improved health. It then has a trickle-down effect, where increased compliance and healthier patients will decrease the cost of healthcare (Slade et al., 2015). Improving communication is such a small thing that can have a large impact on patient care.

My DNP Project revolves around improving communication with the healthcare team and patients in the Emergency Department. My research has opened my eyes about the significant impact that communication can have, not only on patient satisfaction but on patient outcomes. This has spread to my practice as a staff nurse and has made me more aware and conscientious about how well I inform and educate my patients. I continuously work towards improving my communication skills and educating my co-workers and by conducting my surveys I have already seen a change in the patient perception of communication.

References

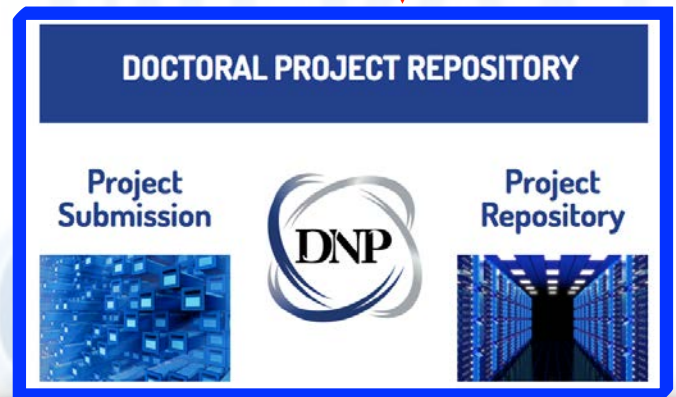
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Morgan Feuss, RN, BSN, CEN



**NEW FOR 2018
FROM *DNP, INC.***



- *Showcase DNP practice projects to share outcomes with colleagues and consumers.*
- *Educate patients, organizations and health care systems on the contributions of the DNP prepared nursing professional.*
- *Support DNP educational programs and practice partners to demonstrate the influence of the DNP prepared nurse.*
- *One time charge per student listing of \$30 to defray cost of repository development and maintenance.*



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INFORMATION**

Building the DNP Professional Nursing Community

Building the DNP Professional Nursing Community

The rate of growth of the Doctor of Nursing Practice (DNP) degree is unparalleled with any other degree seen within the discipline of nursing (American Association of Colleges of Nursing [AACN], 2010). The latest update as of June 2017 by the AACN shows the following:

- 303 DNP programs are currently enrolling students at schools of nursing nationwide, and an additional 124 new DNP programs are in the planning stages (58 post-baccalaureate and 66 post-master’s programs).
- DNP programs are now available in all 50 states plus the District of Columbia. States with the most programs (10 or more programs) include California, Florida, Illinois, Massachusetts, Minnesota, New York, Ohio, Pennsylvania, and Texas.
- From 2015 to 2016, the number of students enrolled in DNP programs increased from 21,995 to 25,289. During that same period, the number of DNP graduates increased from 4,100 to 4,855.

Growth in Practice- and Research-Focused Doctoral Programs: 2006-2016



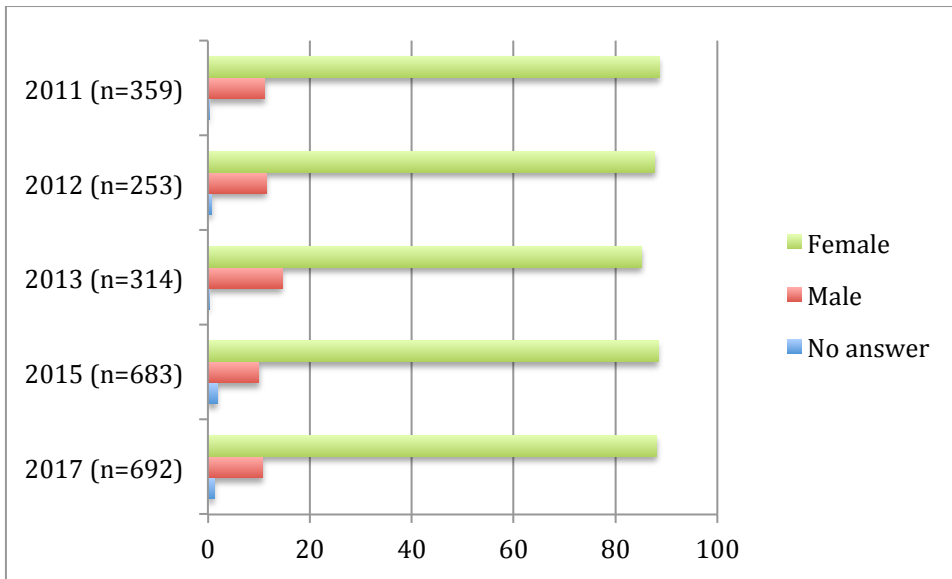
(AACN 2017).

This steady increase in the number of DNP programs and graduates, along with the leveling of the rate of growth of the PhD programs and graduates gives us pause when discussing the elements and values of building a DNP professional nursing community. There are many challenges both within and outside of the discipline of nursing that the DNP degree has catalyzed. As in the past this includes the ability to communicate issues and trends in a rapidly changing practice and academic environments. The DNP prepared nursing professional persistently infused change into the health care delivery system on many levels. This has not been a salvation or remedy to the ongoing problems of health care delivery. Nevertheless, the DNP prepared professional has proven to be an integral contributor to the practice of nursing and the delivery of health care.

The DNP Inc. organization has actively gathered data through national outcomes surveys in 2011, 2012, 2013, 2015, and 2017. Here’s a snapshot of some of the findings:

Gender of Respondents (Percentages)

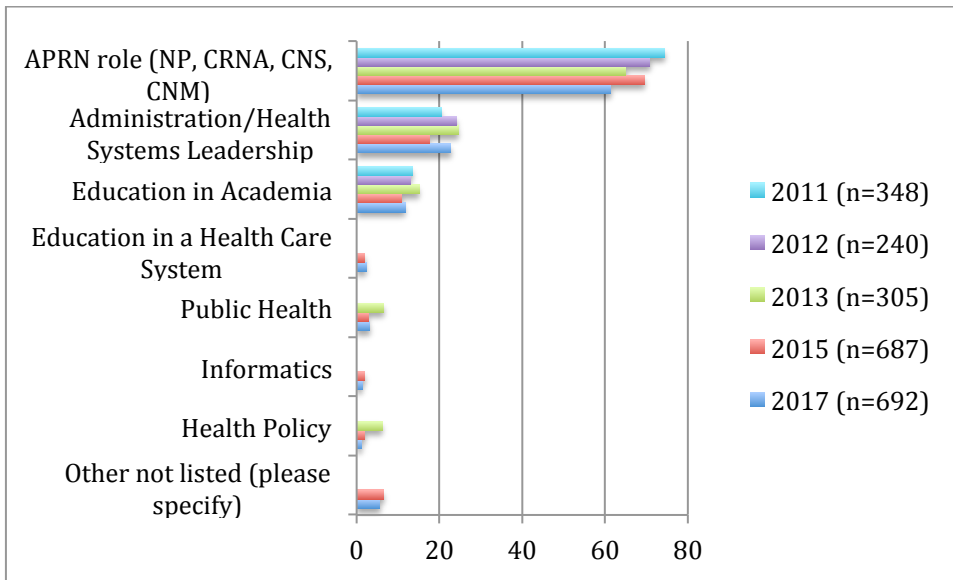
	2011 (n=359)	2012 (n=253)	2013 (n=314)	2015 (n=683)	2017 (n=692)
Female	88.6	87.7	85	88.3	88
Male	11.1	11.5	14.6	10	10.8
No answer	0.3	0.8	0.3	1.8	1.2



The percentage of males pursuing the DNP degree is higher than the percentage of males in the overall nursing profession. In 2015 9.1% of all nurses were male (Minoritynurse.com, 2015). Male graduates of DNP programs represent between 10 to 14.6% of the nurses that responded to these surveys.

DNP Program Concentrations

	2011 (n=348)	2012 (n=240)	2013 (n=305)	2015 (n=687)	2017 (n=692)
APRN role (NP, CRNA, CNS, CNM)	74.4	70.8	64.9	69.6	61.3
Administration/Health Systems Leadership	20.4	24.2	24.6	17.5	22.7
Education in Academia	13.5	12.9	15.1	10.8	11.7
Education in a Health Care System				2	2.3
Public Health			6.6	2.8	3.2
Informatics				2	1.4
Health Policy			6.2	2	1.2
Other not listed (please specify)				6.6	5.6



Survey question aimed to gather information reflecting the tracks of DNP programs provided as shared by the graduates that completed these programs. The data reflects and the graph illustrates that each year the survey took place from 2011 through 2017 that the majority of programs reflected APRN roles (Nurse practitioners, Nurse Anesthetist, Certified Nurse Midwives and Clinical Nurse Specialists). However, the trend is decreasing over time as reflected in the data that 74.4% of respondents in 2011 identified their programs as providing APRN concentration compared to 61.3% in 2017. Other program tracks including Administration and Health System Leadership have maintained a relatively consistent trend over these 5 surveys. Of note is the beginning of a trend reflecting that program tracks such as policy and informatics are decreasing in response rates.

Data from the surveys will be included in future issues of OUTCOMES. Please share this information with colleagues.

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CONVERSATIONS OVERHEARD IN THE DNP ONLINE COMMUNITY

[How long does it take to change a habit? NOT 21 Days](#) Another amazing contribution by our regular blogger, Dr. Eileen O’Grady. Worth the review to improve our own personal and professional health

[DNP job description](#) by Beverly Kosmach-Park started a long time ago still receives visitors and contributors. See what others have to say and add your insights.

[How are we addressing the reality of health/wellness needs?](#) by Faith Richardson. See what she shared and offer your insights and response.

[Need a Mentor? Willing to Mentor a Colleague?](#) There are several postings in this forum reflecting the interest of colleagues to help each other – and those that are reaching out for support. Check it out and see how you can make a difference.

[AANP, NAPNAP & NONPF Respond to KevinMD Articles about NPs.](#) A blog, KevinMD.com had a posting by Rebekah Bernard, MD on January 5, 2018. Thank you AANP, NAPNAP and NONPF for sharing such a clearly articulated response.

[Should years of clinical experience factor into the DNP selection process?](#) By Susan Rojas. She asks the value of building experience between degrees before starting a doctorate. What do you think?

DNP Groups of Interest:

- [DNP in Corrections](#)
- [DNP of Color-DOCs](#)
- [CNM/OB/GYN/WOMENHEALTH DNP](#)
- [Executive Leader DNP](#)
- [Population/Public Health DNP](#)
- [DNP Health Informatics](#)

And others.

If you know of an event that supports the growth and development of nursing colleagues, please post it to the EVENTS page. It’s free, and reaches thousands every month. Click the ADD button on [this page](#) to post an event.

ADVERTISE IN OUTCOMES



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APRIL 2018 DNP, INC SURVEY RESULTS

The April 2018 survey requested feedback regarding the use of social media. Five questions sought to gather data to better appreciate how members make the most of these communications platforms.

Question 1: I communicate with nursing and DNP colleagues using Facebook.
13% very much to absolutely, 87% somewhat to not at all

Question 2: LinkedIn is a social media platform that I use to connect with other like-minded DNP and nursing colleagues.
6% very much to absolutely, 94% somewhat to not at all

Question 3: The DNP Inc. online community provides services that support my professional efforts.
25% very much to absolutely, 75% somewhat to not at all

Question 4: I receive the right amount of emails and information to support my efforts as a DNP prepared professional.
13% very much to absolutely, 87% somewhat to not at all

Question 5: There is not enough information available about the actions and successes of the DNP prepared nurse.
52% very much to absolutely, 48% somewhat to not at all

These results show that the respondents do not have adequate access to information about the actions and successes of the DNP prepared nurse, and also are not involved in social media overall.

Click [HERE](#) to take the May 2018 survey



ORGANIZATIONAL UPDATE

A conversation with a colleague the other day was a real eye-opener. She shared that she thought there were too many services offered by the DNP Inc. organization. On one hand this makes sense as an organization should have a focus and develop expertise in delivery a set number of services. However, on the other hand, those that have earned the DNP degree, or teach in DNP programs, or are students earning this degree will attest – there is nothing simple about this degree, nursing, or the health care delivery system.

The DNP Inc. organization offers services in these categories:

- Annual Conferences
- Web site with an Online Community
- Repository of Scholarly Practice Projects
- Listing of all colleges and universities that offer the DNP degree

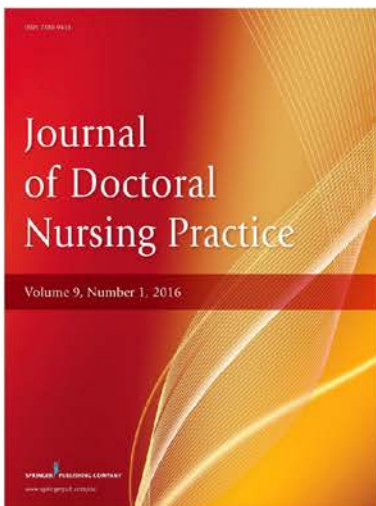
We are constantly developing and enhancing the above services and are working to build the Foundation for donations and grants to worthy colleagues. We are also building multiple resources to support the DNP student, graduate and faculty.

Click into the links near the end of this newsletter to view more services offered to you and colleagues that aim to improve outcomes by making the most of the DNP degree.

Question: Are we offering too many services? Answer: Not yet.

Useful Links

[DNP PROGRAM LIST](#)[FACULTY
RESOURCES](#)[INDIVIDUAL BLOGS](#)[VALUABLE LINKS](#)[CAREER LISTINGS](#)[GROUP PAGES](#)[DNP PROJECT
REPOSITORY](#)[MULTIPLE FORUM
TOPICS](#)[GRANTS AND
SCHOLARSHIPS](#)[ADVERTISING
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Special DNP Discounts!

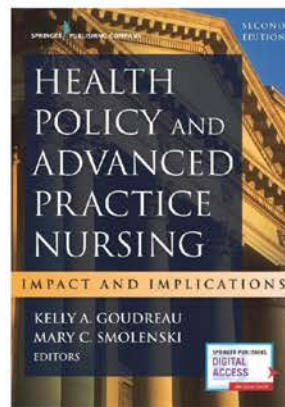
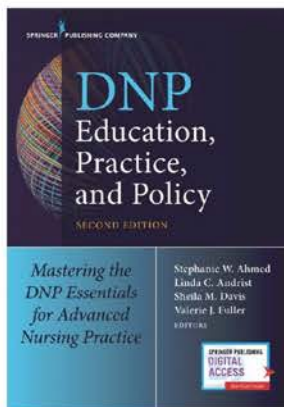
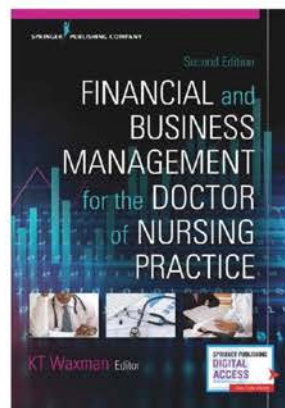
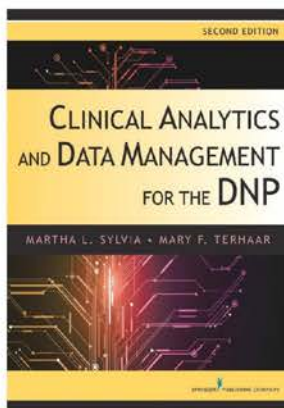
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With our winning traditions in athletics and academics, The University of Alabama has been ranked among the top 50 public universities by *U.S. News and World Report* for more than a decade. Forty percent of our freshman class scored 30 or higher on their ACT exams; and we have more than 600 national merit scholars enrolled. Our university placed 58th in the Forbes list of top U.S. employers, for all sectors of employment.

We are located in Tuscaloosa, a vibrant college community of 160,000, with a moderate climate. Our campus has been ranked as one of the most beautiful campuses in America. Come join us for a stimulating work environment and a great quality of life.

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CAREER OPPORTUNITIES FOR DNPS

Check out the DNP, Inc. Career Opportunities Page



[CLICK HERE
TO VIEW
CURRENT
JOB LISTINGS](#)

Assistant Professor, Community/Public Health Nursing
Lewis University

Clinical Assistant Professor/DNP Coordinator, School of Nursing (3722)
Idaho State University

Assistant Professor, Nursing (7567)
Idaho State University

Clinical Assistant Professor, Accelerated RN Program (7151)
Idaho State University

Clinical Assistant Professor, DNP Program (7167)
Idaho State University

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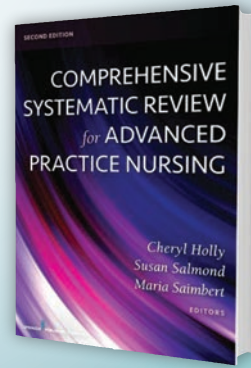
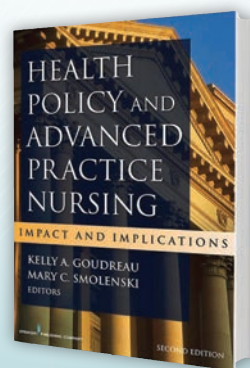
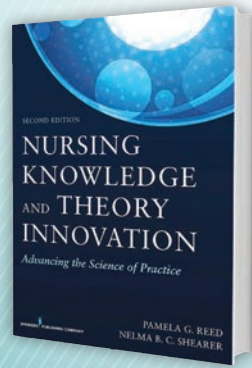
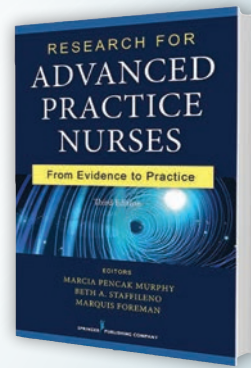
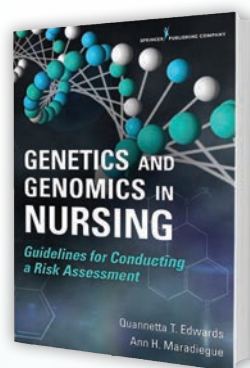
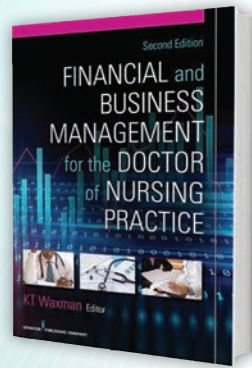
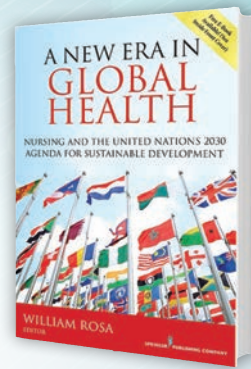
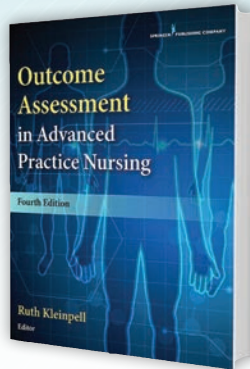
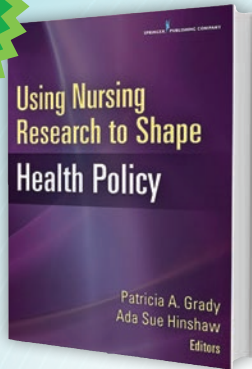
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for more information



2018 Conference Objectives

1. Identify at least one potential change in practice,
2. Explore strategies to sustain projects beyond implementation,
3. Examine opportunities to collaborate across disciplines to improve health care outcomes, and
4. Recommend strategies to apply evidence to practice

CONFERENCE HOMEPAGE

REGISTER TODAY

DNP, INC. REPOSITORY FEATURED PROJECTS

DOCTORAL PROJECT REPOSITORY

Project Submission



Project Repository



Have you see the talent and contributions of DNP prepared colleagues? Here's a sample of what can be found in the [DNP Doctoral Project Repository](#):

[Implementation of Mentorship Program in the Emergency Department](#) by Dr. Zarah Gayrama Borines, a graduate of Touro University.

[Postpartum Hemorrhage Simulation Project](#) by Dr. Carolyn L. Bottone-Post, a graduate of Regis University.

[Using Social Media to Improve Compassion Satisfaction](#) in Nursing by Dr. Cynthia Lawhorn Cain, a graduate of California Baptist University.

Is your doctoral project in the repository? Are your colleagues and graduates of your university listed? [Click here](#) to learn more and to upload your project.

2018 Call for Volunteers is Open From
April 4, 2018 - June 1, 2018



Volunteer Eligibility Criteria

1. Currently enrolled in a DNP Program at the time of the 2018 conference
2. Not scheduled or invited to present at the 2018 conference
3. Accepts responsibility for all travel, lodging and food expenses with the exception of food provided during conference hours i.e. breaks, breakfast and lunches.
4. Availability from September 26-29, 2018
5. Skilled in customer service, communication and leadership
6. Free conference registration included for all volunteers

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