The 2023 DNP National Conference will be Virtual

Register Today: August 10-11, 2023

See Page 18 for more information

FEATURED ARTICLE

Inter-rater Reliability of Triage Nurses

DNP

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OUTCOMES

The monthly electronic newsletter for and about nursing colleagues that improve health care outcomes.

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DNP

The mission of Doctors of Nursing Practice, Inc. is to improve healthcare outcomes by promoting and enhancing the doctoral prepared nursing professional.

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DNP Organizational Update

Surveys of DNP prepared colleagues through this newsletter suggest that diversity, equity, and inclusion are non-issues and that organizations are doing enough to assure that all citizens (employees, customers, patients, etc.) are adequately involved and needs are adequately addressed. From a DNP prepared nursing point of view, what are problems and challenges that need our attention and actions to develop sustainable interventions?

Consider these challenges that DNP prepared nursing professionals can address to create and sustain substantive healthcare outcomes:

- Compared with whites, member of racial and ethnic minorities are less likely to received preventive health services and often receive lower-quality care.
- Ethnic and racial minorities have worse health outcomes for certain conditions. (**Commonwealthfund.org**)
- Unequal treatment has been well documented (**National Academies**)
- The gap between black and white mortality for Heart Disease, Breast Cancer, and Stroke increased between 1990 and 2005. (**Commonwealthfund.org**)
- Social determinants of health point to five factors that influence health pointing to socioeconomic conditions more than race and ethnicity. These categories include:
  - **Economic Stability**,
  - **Education Access and Quality**,
  - **Health Care Access and Quality**,
  - **Neighborhood and Built Environment,** and
  - **Social and Community Context**.
- Disparities are also well documented for multiple groups both ethnic, racial, gender and sexual preference.

Are issues of diversity, equity, and inclusion adequately addressed for our patients? The data above and the literature suggests that we have a very long way to go.

How are we as individuals and organizations addressing these challenges? What actions are we taking that are showing measurable results?

These issues are the foundation of the Sixteenth National Doctors of Nursing Practice Virtual Conference taking place August 10 and 11, 2023.
Be a part of this event. Be a part of the solution.

The mission of Doctors of Nursing Practice, Inc. is to improve healthcare outcomes by promoting and enhancing the doctoral prepared nursing professional. This mission requires a multifaceted approach to include a robust communication system (the DNP Inc. Website); an online community with forums, blogs, groups, and events; a listing of all known DNP programs; a repository of DNP projects; dissemination team to support DNP colleagues to share their work; continuing education; a foundation to support DNP growth; job listings; OUTCOMES monthly electronic newsletter; and, the annual national DNP Conferences.

Monthly DNP Inc. Survey Results

Last month's survey solicited responses regarding thoughts on diversity, equity, and inclusion. We anticipated more responses showing that DEI is not as strong as anticipated. Do the responses below reflect your thoughts also?

Question 1: In my workplace, diversity and equity are practiced and integrated in our company's policies and activities.
62% very much to absolutely, 38% somewhat to not at all

Question 2: Inclusion is truly integrated into the actions and policies of my company.
54% very much to absolutely, 46% somewhat to not at all

Question 3: I have witnessed acts of prejudice in my work environment within the last 12 months.
24% very much to absolutely, 76% somewhat to not at all

Question 4: All of the organizations I encounter have similar policies and actions to address diversity, equity, and inclusion.
38% very much to absolutely, 62% somewhat to not at all

Question 5: I see that organizations may sometimes be exclusive and not include systematic approaches to embracing diversity and inclusion.
31% very much to absolutely, 69% somewhat to not at all

These quick-and-easy surveys help check the pulse and temperament of respondents. The surveys support a general understanding and appreciation of topics being discussed and examined. Please complete each month's survey to help reflect ourselves and our practice as DNP prepared nursing colleagues.

Click *HERE* to complete the March 2023 DNP Survey

Dissemination Team / Featured Repository Projects

As a university or college that provides DNP preparation, how do you support the dissemination of their final work product? Do you require any sort of posting or publication? Are their projects available to those that can benefit the most from the work?

<p style="text-align:center;color:red;">**Can colleagues and customers find the work of your students and graduate?**</p>

The DNP Project Repository is different. It is searchable by all browsers and search engines, and can be shared with stakeholders. The content is the intellectual property of the author. **University programs that are a part of the Dissemination Team support their students and graduates by providing a $5 discount for all repository uploads from their school.**

Programs that are a part of the Dissemination Team include:

Chaminade University of Honolulu	**Saint Louis University**
Charles R. Drew University	**Sentinel University**
Lourdes University	**University of Maryland**
Purdue University Global	**Wilmington University**
Sacred Heart University	
Your alma mater should be listed also!	Click **HERE** for more information.

DNP Repository Featured Scholars

The skills and dedication of DNP prepared colleagues can be seen in the work posted to the repository – a curated collection of articles. Here's a sample of what can be found in the **DNP Doctoral Project Repository**:

Improving T2DM Management in Adults Through Implementation of DSME Protocol by Suzette Rebecca Ryan, DNP, APRN, AGPCNP-C, AGCNS-BC from Touro University Nevada

Immediate Bedding in The Emergency Department by Samudio Lee Samudio, DNP, RN from Bradley University

Effectiveness of a Multimedia Educational Module for Anesthesia Providers: Integrating Best Practices to Prevent Corneal Abrasion by Hakeem K. Sanou, DNP, RN, CCRN, CRNA from Cedar Crest College

Supporting Graduate Nurses Transition to Practice: Outcomes of a Pilot Resiliency Training Program by Melanie Anne Schock, DNP, RN, CNE from Western University of Health Sciences

The Doctoral Project Repository is an archive of curated documents. This archive does not replace or presume any publication effort. Each listing is owned by the individual that uploads the completed academic scholarly practice project. This service allows you to share ideas and work products into both the scholarly and consumer communities.

For more information about the Doctoral Project Repository including methods to upload your information please visit THIS PAGE.

Are you looking for a career move?

Is your organization ready to hire a
DNP prepared nursing professional?

Click HERE for more information.

GROUPS:
Join and share thoughts and ideas with colleagues

DNPs of All Race, Creed, Ethnicity

Dual Certified DNPs

DNPs of Color - DOCS

DNP/APRN Veterans Health Care

National Indian Nurse Practitioners Association of America (NINPAA)

DNPs Seeking Positions in Academia

DNPs in Correction

BLOGS and FORUMS:
Click into the following links to join the conversation

The Controversy of the DOCTOR Title

Commission's Foundational Report on Racism in Nursing

Blind Review is Blind to Discrimination

US Lawmakers Turn Attention to Plague of Fake Journal Papers

Beyond Band Aids: An Introduction to Comprehensive Wound Management

Synchronous Telehealth Fatigue Among Healthcare Providers Survey

Mentoring and Interprofessional Collaboration

AACN Issues New Report on Doctor of Nursing Practice Education

Best and Worst States for Health Care

Teaching Tool to Inspire Nurses to Practice with Moral Courage and Compassion

Is Research Integrity Possible without Peer Review?

National Study of Nursing Faculty and Administrators' Perceptions of Professional Identity in Nursing

Strategies to move entry-level NP education to the DNP degree by 2025

Teaching Tools to Inspire Nurses to Practice with Moral Courage and Compassion

EVENTS:
Check out offerings for professional growth below. Share your event – **Click HERE**

Nursing Informatics Boot Camp – Jacksonville University, March 2023

National Association of Pediatric Nurse Practitioners 44th National Conference, March 2023

International Society of Psychiatric-Mental Health Nurses Annual Conference, March 2023

48th American Academy of Ambulatory Care Nursing Annual Conference, April 2023

Cardiovascular Nursing Symposium 29th Annual, April 2023

Continuing Education for Doctoral Prepared Nurses

Continuing Education Courses

The challenge of building and displaying continuing education offerings is almost done. DNP Inc. has been working with tech companies to assure that select continuing education is provided in an enduring environment. More will be added to this list as they are uploaded to the web site.

The Effect of an Empowerment Program on Geriatric Patients with Heart Failure (0.25h)

Impact of the Faith Community on African American Health Promotion (0.25h)

Implementation of Sepsis Education and Using the TRAP Criteria for First Responders (0.25h)

Translating DNP Policy Into Practice: A QI Pilot Initiative in Academia (0.25h)

See more offerings and information about how purchasing continuing education will help the Foundation for DNP Projects and Practice Innovation

Important Articles and Links

Four articles important to DNP colleagues have been shared in the past yet are included again in this issue of OUTCOMES as they are valuable for educational preparation and practice. Enjoy!

- *Drivers for Seeking the Doctor of Nursing Practice Degree and Competencies Acquired as Reported by Nurses in Practice*
- *Impact of Practice Scholarship as Perceived by Nurses Holding a DNP Degree*
- *Practice Scholarship Satisfaction and Impact as Perceived by DNP-Prepared Nurses*
- *Statistical, Practical and Clinical Significance and Doctor of Nursing Practice Projects*
- *Research Focused Doctoral Education in the 21st Century: Curriculum, Evaluation, and Postdoctoral Considerations*
- *Academy of Clinical Essentials: A Revolutionary Nurse Staffing and Education Model*

Do you have wisdom and insights to share?
Are you a student or recent graduate?
Do you have a brief article you wish to publish?
Please submit your work to be included in future issues of OUTCOMES.
Your shared talents help colleagues grow in our profession.

From our colleague Dan Weberg, PhD, MHI, RN: DrNurseDan

If you have not seen this colleague's name and work, you need to make a point to learn more. He has been an advocate for nursing and nursing innovation for many years. Recently he was inducted as a Fellow in the American Academy of Nursing.

He is an entrepreneur, innovator, and an inspirational spirit. **Check out his website.** Check out his services, podcasts, publications, and recommended library. Many of these texts are must-haves for DNP prepared nursing colleagues striving to make sustainable change in healthcare to improve outcomes.

Leadership in Nursing Practice: The Intersection of Innovation and Teamwork in Healthcare Systems 4th Edition

Leadership for Evidence Based Innovation in Nursing and Health Professions (2nd ed)

Managing Innovation (7th Ed)

Switch: How to Change Things When Change Is Hard

Appreciative Leadership: Building Sustainable Partnerships for Health: Building Sustainable Partnerships for Health

The Caregiver Corner

As DNPs consider how best to design a role for an Informal Caregiver, it is wise to also determine the issues and factors the Informal Caregiver believes are important. As I interviewed the eleven participants in my book, they used different words, but described the same concerns. It may be simple to leave addressing these concerns to our colleagues in home health, but their concerns deserve to be addressed at every level of healthcare. This is especially true once current or future need for an Informal Caregiver becomes apparent.

One recurrent theme related to the simple act of listening. As we consider how important it is to Informal Caregivers that Professional Caregivers listen to them, we might ask ourselves where we have heard that before. There are no "Listening 101" classes in any of our curriculums, but it should be interwoven into the classes we take at all levels of nursing. I suspect our nursing educators believe this is a quality potential nurses should possess when they are first drawn to a nursing profession.

The first Informal Caregiver featured in my book said it best. He brought listening advice to a new level. He observed that he watches healthcare professionals use their hands on a patient to assess that patient's concern. He is never sure what the healthcare professional is looking for, but they do the exam and pause to consider their findings. They use their exam and their considerations to suggest a plan for follow up or reassure the patient.

He suggested healthcare professionals use their ears and eyes in the same fashion as they use their hands. Listen to what you are being told, but also assess what you are seeing, as this will enhance your evaluation. When there is an Informal Caregiver present, this process becomes more straightforward. I believe this is profound advice that also reminds us of the importance of listening to patients and their Informal Caregivers.

Once the healthcare professional accepts the premise that the caregiver is part of the team that is caring for the patient, an effective plan of care can be made to provide the patient with the best possible outcome. Listening is really a matter of respect, a lesson best learned early in life. Therefore, it should not be surprising that there is little emphasis on something as basic as listening, in our advanced medical and nursing classes. Yet, if we had learned this lesson, why would each Informal Caregiver repeat the same mantra? An unsaid goal for my book is not to lecture healthcare professionals, but to engage them in learning the life stories of these eleven people and see that they, as well as other Informal Caregivers, are worthy of their respect, and that of our country.

"I like to listen. I have learned a great deal from listening carefully. When people talk, listen completely. Most people never listen." — Ernest Hemingway
Ernest Hemingway Quotes. (n.d.). BrainyQuote.com. Retrieved from **BrainyQuote.com**.

(See more insights and reflections of wisdom from our colleague, Dr. Rosemary Henrich, in future issues of OUTCOMES. Her work can be found on Amazon using **this link**.

Inter-rater Reliability of Triage Nurses in the Emergency Department
By Tyler L. Arvin, MSN, APRN, FNP-C, CEN

When considering the importance of triage and the nurse's role within the emergency department, there are many questions to consider. What is triage and how does it affect the department? What should the experience level of the nurse be to triage? How in-depth does the triage nurse need to be when triaging a patient? Finally, what is the inter-rater reliability of the nursing staff when triaging? These questions will be interpreted below.

Triage and the Emergency Department: Worldwide there are multiple algorithms healthcare facilities can follow when triaging patients who arrive to the emergency department. Since 2002 the American College of Emergency Physicians and the Emergency Nurses Association have studied and reviewed the Emergency Severity Index (ESI). The ESI is a 5-tier acuity system that assigns a patient one of the five different levels, i.e., 1-resuscitation or 5-nonurgent. This system utilizes nursing judgement and predicts the severity of the patient's condition, along with the resources needed to care for them (Gilboy et al., 2020). With multiple factors affecting the throughput of the department, such as overcrowding, limited beds, and lack of staff, it is imperative that the triage nurse sort and prioritize the patients appropriately. (Jeffries, 2019).

Triage Nurse Experience Level: The ENA recommends that a nurse "with a minimum of one year of emergency nursing experience" (Jeffries, 2020, p. 12) can perform the role of a triage nurse. Does this seem logical? Triage requires a combination of experience and knowledge which can be vague terms in the realm of healthcare. Many triage educational programs aim to increase "factual" knowledge to help improve decision-making, while experience is gained over time, through exposure, and concurrently increasing knowledge (Considine et al., 2007). On one hand, if a nurse with a total of 15 years of critical care experience transfers to the emergency department, this nurse would be a great candidate to triage after obtaining their one year of experience. However, if a new graduate was hired into an emergency department, would they be qualified to work a triage nurse after obtaining one year of experience? The ENA handbook for ESI mentions that the triage nurse must have an understanding and a solid knowledge base to accurately assign an acuity level. Would a first-year emergency nurse have this understanding and knowledge base?

Triaging and Inter-rater Reliability: "If triage decisions are not reliable, it is neither a safe nor an effective way of using limited health care resources" (Goransson et al., 2005, p. 433). With emergency departments becoming busier and overwhelmed, a triage nurse only has a small opportunity to assess a patient and assign an acuity level. A newer nurse, or one with less emergency experience, may not realize the subtleties that a more seasoned nurse may interpret in a short time frame because of experience levels (Sanders & Minick, 2014). A study in Sweden using the Canadian triage scoring system, like ESI, created 18 detailed patient scenarios that 7550 emergency nurses completed to test their inter-rater reliability. Collectively, 57.7% of the nurses triaged the scenarios correctly, 28.4% were over-triaged, and 13.9% were under-triaged. What can be inferred form this data is that patients may be allocated more resources than necessary, and patients may be receiving a delay in care. The scenarios based on patients who needed immediate care, 85.4% were triaged correctly insinuating that triage nurses know how to accurately recognize life-threatening situations. The scenarios that seemed to be the most troublesome, like ESI Level-3, found an almost equal disbursement of those accurately triaged, over-triaged, and under-triaged (Goransson et al., 2005). This is important because Level-3 patients make up approximately 40% of the patients seen in the emergency department and an incorrect triage can alter the flow of the department (Gilboy et al., 2020).

References

Considine, J., Botti, M., & Thomas, S. (2007). Do knowledge and experience have specific roles in triage decision-making?. *Academic emergency medicine*, *14*(8), 722-726.

Gilboy, N., Tanabe, P., Travers, D., & Rosenau, A. M. (2020). *ESI Emergency Severity Index: A Triage Tool for Emergency Department Care*. Retrieved September 7, 2022, from https://www.ena.org/docs/default-source/education-document-library/triage/esi-implementation-handbook-2020

Göransson K, Ehrenberg A, Marklund B, & Ehnfors M. (2005). Accuracy and concordance of nurses in emergency department triage. *Scandinavian Journal of Caring Sciences*, *19*(4), 432–438. https://doi-org.libproxy.eku.edu/10.1111/j.1471-6712.2005.00372.x

Jeffries, D. (2019). Emergency Department Triage: Not for the Faint of Heart. *Journal of Legal Nurse Consulting*, *30*(2), 8–13.

Sanders, S., & Minick, P. (2014). Making Better Decisions during Triage. *Emergency Nurse*, *22*(6), 14–19. https://doi-org.libproxy.eku.edu/10.7748/en.22.6.14.e1336

**Do you have experiences, expertise, talents, and insights to share?
Please submit them for publication in OUTCOMES, the monthly
electronic newsletter for and about doctoral prepared nursing practice.
info@DNPInc.org**

Bias in the hospital setting is not new, yet expectations of patients are shifting. Check out these two articles that address patient involvement and responsibility:

Mayo Clinic's 5-Step Policy for Responding to Bias Incidents
Mass General Brigham Patient Code of Conduct

Does your organization have a similar policy to address bias? Please share them **HERE**.

The Hard Truth about Staffing Shortage: They Aren't Going Away by Bari Faye Dean, Becker's Hospital Review, February 2, 2023

Coronavirus Vaccination Hesitancy: Early Education to Counter Vaccine Hesitancy/Refusal by Irene O. Oyolu, DNP, The Journal for Nurse Practitioners, Volume 19, Issue 2, March 2023 (link shared by the author)

Need for Clinical Rotation in Correctional Facilities for Nurse Practitioners by Irene O. Oyolu, The Journal for Nurse Portioners, Volume 18, Issue 7, July 2022

One Maternal Death Occurs Every 2 Minutes, by Andrew Rhoades, Healio Primay Care, February 24, 2023

Regular Vitamin D Supplements May Lower Melanoma Risk by Liam Davenport, Medscape, January 12, 2023

35% of Parents Unnecessarily Give Fever-Reducing Medicine to Children by Emma Bascom, Healio Primary Care, February 27, 2023

"A Reliable Playbook": What it Takes to Fix Telehealth's Trust Problem by Joseph Kvedar, Connected Health Pulse, February 21, 2023

Wearable Technology in Healthcare: What are the Benefits for Patients, Hospitals, and Caregivers? By João Bocas - The Wearables Expert

With One Medical in the Fold, Amazon's Healthcare Plans Take Shape by Brock E.W. Turner and Caroline Hudson, DigitalHealth Business & Technology, February 23, 2023

NPs Could Improve Access to Care, But Practice Expansions Remain Controversial by Emma Bascom, Healio Primary Care, February 23, 2023

US Republicans Target Transgender Youth Healthcare in Legislative Push by Daniel Trotta, Medscape, February 17, 2023

**Do you have articles of interest to your nursing and doctoral prepared colleagues?
Submit articles of interest to: info@DNPInc.org for inclusion in OUTCOMES –
the Monthly electronic newsletter for and about the DNP prepared nurse.**

DNP Foundation

FROM THE CLASSROOM TO THE BOARDROOM

Donate Today

Donor List

The DNP Foundation assists nursing colleagues in realizing their plans to impact health care delivery. **All donations are 100% tax-deductible**. Please share your support by clicking into the Donate Today icon to the left.
Click the Donor List icon to the right to see past donors.

There are many opportunities to donate at the individual and corporate levels.

Our profession and your colleagues thank you!

Doctoral Project Dissemination Team

Join The Dissemination Team!

Sign Up Today! **Click HERE to learn more!**

Disseminating scholarly work shares experiences to enhance practice and healthcare outcomes. A team effort and collaborative engagement in dissemination support students, graduates, patients, organizations, colleges, and all stakeholders that have an interest in the final project that is completed by DNP professional nurses.

Thank You for Checking Out the Conference Archives

Please explore select presentations (plenary, breakout, mini-podium, and/or digital poster) from past conferences. The content is pertinent and valuable today. Have a look!

Inaugural DNP Conference: 2008, Memphis, TN
Transforming Care Through Scholarly Practice
October 9 – 11, 2008
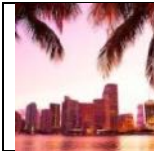
Second National DNP Conference: 2009, Miami, FL
Exemplars of DNPs in Practice and Nursing Education: Defining Ourselves September 30 – October 2, 2009

Third National DNP Conference: 2010, San Diego, CA
Innovations and Leadership
September 29 – October 1, 2010

Fourth National DNP Conference: 2011, New Orleans, LA
DNPs Impacting Health Care Policy
September 28 – 30, 2011

Fifth National DNP Conference: 2012, St. Louis, MO
Evidence-Based DNP Education
September 19 – 21, 2012

Sixth National DNP Conference: 2013, Phoenix, AZ
The DNP: Shaping Leadership, Collaboration, and Practice Improvement in Healthcare September 25-27, 2013

Seventh National DNP Conference: 2014, Nashville, TN
The DNP in Practice: The Health, the Care, and the Cost
October 8-10, 2014

Eighth National DNP Conference Seattle: 2015, Seattle, WA
*How to be a Better DNP in 3 Days*
September 16-18, 2015

Ninth National DNP Conference: 2016, Baltimore, MD
Transforming Healthcare Through Collaboration
October 5-7, 2016

Tenth National DNP Conference: 2017, New Orleans, LA
Celebrating 10 Years: Diversity & Inclusion in Practice
September 13-15, 2017

Eleventh National DNP Conference: 2018, Palm Springs, CA
Sustaining the DNP: Strategies for the Future in Clinical and Administrative Practice September 27-29, 2018
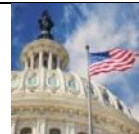
Twelfth National DNP Conference: 2019, Washington, DC
Contributions of the DNP Prepared Nurse: Policy Influencing Outcomes
August 7-9, 2019
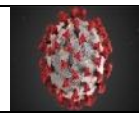
Thirteenth National DNP Conference: 2020
Cancelled due to the COVID-19 Pandemic

Fourteenth National DNP Conference: 2021, Chicago, IL
The DNP and Quality Improvement
August 11-13, 2021

Fifteenth National DNP Conference: 2022, Tampa, FL
Collaborating to Improve Health Care Outcomes
August 11-13, 2021

Also visit past sponsors and supporters

Doctoral Project Repository

An Archive of Curated Documents
Share your talents and support improved outcomes!

This archive does not replace or presume any publication effort. Each listing is owned by the individual that uploads the completed academic scholarly practice project. This service allows you to share your ideas and work product into the scholarly community and also the consumer community.

There is a one-time nominal $30 charge to post your scholarly project to this archive of curated documents. Once posted, the owner may share the URL web page address with any individual or organization desired. Each listing helps to educate patients, employers, organizations, and other stakeholders about DNP capabilities and competencies. Your posted scholarly practice doctoral project will:

- Support a collaborative engagement with practice partners and employers,
- Showcase DNP prepared professional's impact on improving outcomes,
- Disseminate DNP generated content for all interested in the theme, environment, and process of impacting the complex processes of health care delivery,
- Build a foundation for sustainable change, future practice, and the research of practice scholarship, and,
- Support the growth and development of DNP students in the process of developing their project.

If you are a student or graduate, consider this investment to help assure your work can be accessed by both colleague scholars and patients/consumers alike. Other repositories have great value, but are not accessible to those outside of academic circles.

Click HERE to Begin Submission   Click HERE to View Repository
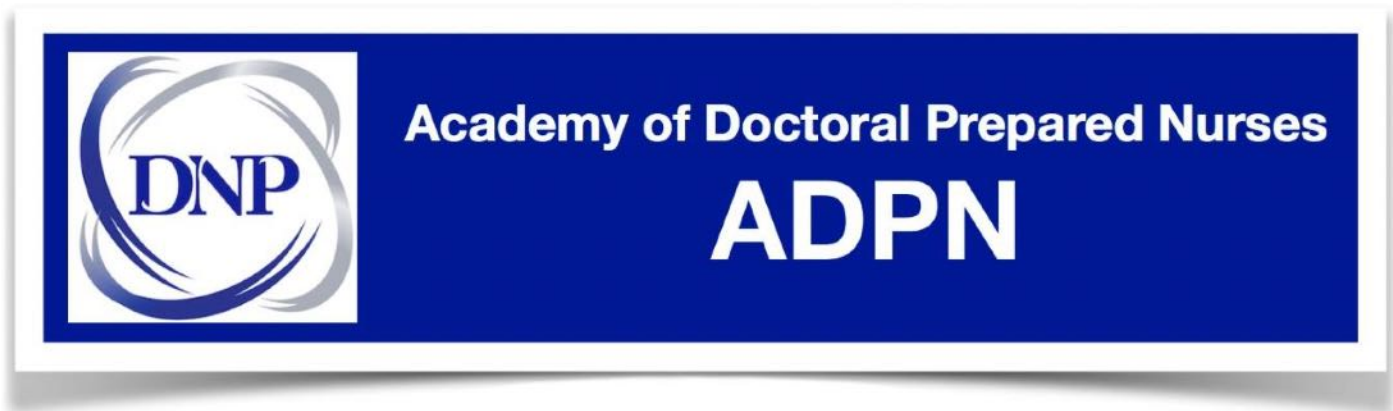
The purpose of this organization is to provide a venue and vehicle for doctoral prepared nurses to collaborate and demonstrate joint efforts to improve health care outcomes. Members will highlight and celebrate the collaboration of researchers, educators, and those that apply research to practice to improve healthcare outcomes. All doctoral prepared nurses are welcomed to contribute and support this collaborative effort.

Mission:
Improve healthcare outcomes and delivery systems through the collaboration of doctoral prepared nurses.

Vision:
1. Advance collaboration with colleagues all nursing doctorate degrees,
2. Promote the dissemination of health care services techniques that demonstrate healthcare improvements,
3. Demonstrate intra and interprofessional collaboration among all healthcare professional partners, and,
4. Integrate research-based evidence to impact healthcare services and policy nationally and internationally.

Core values include promotion of collaboration with integrity, professionalism, and dedication to improving healthcare outcomes by integrating skills sets and expertise.

The mechanisms and strategies to realize this mission and vision includes:

- Publications of findings in a dedicated peer-reviewed journal, **The Journal of the Academy of Doctoral Prepared Nurses**
- Demonstration of techniques that enhance systems to improve outcomes, and,
- Developing workshops, scholarships, and fellowships to enhance collaboration.

The Academy of Doctoral Prepared Nurses and its associated peer-reviewed journal are being developed now with the goal of opening it up for membership and participation in January 2023. Maximizing the skills and talents of collaborating doctoral prepared nurses is the overarching goal.
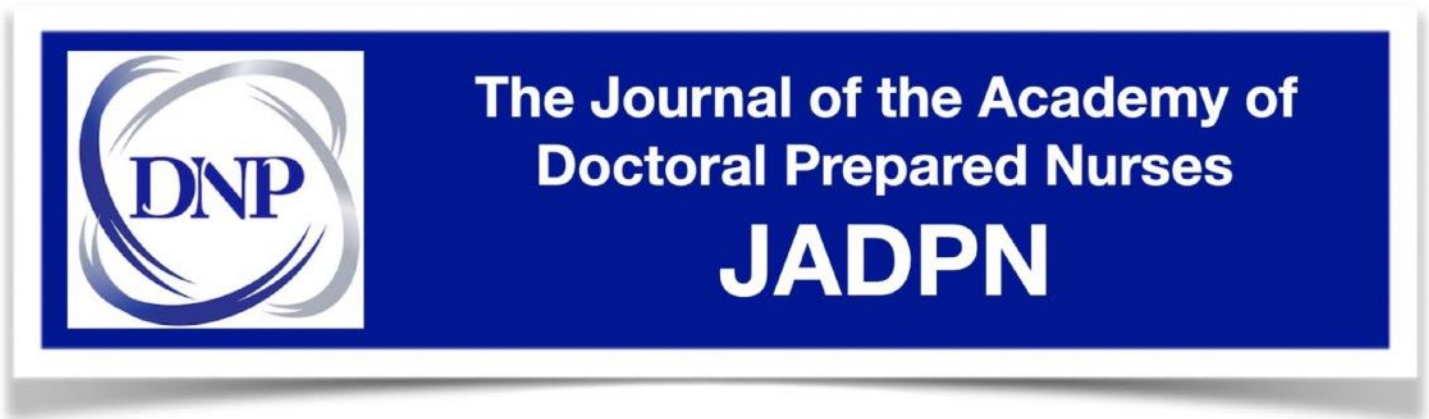
The Journal of the Academy of Doctoral Prepared Nurses (JADPN) will be an online/virtual vehicle for members of the Academy to share the work of individuals and groups that change practice or improve quality to improve healthcare outcomes.

Scope
The Journal of the Academy of Doctoral Prepared Nurses will begin as a quarterly online publication supporting the scholarly, peer-reviewed contributions of doctoral prepared nurses. It is the official journal of the Academy of Doctoral Prepared Nurses that welcomes the contributions of all doctoral prepared nurses including the DNP, PhD, EdD, DNS, DNSc, and other terminal degrees in nursing.

Core Values
The ADNP organization's core values include the promotion of collaboration with integrity, professionalism, and dedication to improving healthcare outcomes by integrating skills sets and expertise. This organization celebrates the diverse talents of doctoral prepared nurses that work in concert to improve health care delivery locally, nationally, and internationally. **JADNP** supports these values by expanding practice knowledge of all doctoral prepared nurses.

Strategic Timeline for both **ADPN and JADPN**:

First quarter 2023:   Invite and enroll select qualified colleagues to join the Academy
Second quarter 2023: Initial publication of the **JADPN**

Both the Academy of Doctoral Prepared Nurses and the Journal of the Academy of Doctoral Prepared Nurses will be entities under the parent organization Doctors of Nursing Practice, Inc., a 501(c)(3) non-profit charitable organization.

This doing-business-as creation of these services was recommended by our accounting and legal team.
Please feel free to contact us via email to share your thoughts and interests regarding both of these entities to enhance professional growth and development to improve healthcare outcomes.

**Sixteenth National DNP Conference: 2023 Virtual
Diversity, Equity, and Inclusion without Detachment and Division
August 10th & 11th 2023**

<u>Objectives</u>:
1. Identify potential dynamics of health care groups at risk of alienation
2. Recognize ramifications of a fractured approach to nursing education and practice because of a lack of diversity
3. Enhance current academic approaches to diversity and inclusion in the nursing classroom
4. Demonstrate the translation of successful academic outcomes to health care practice
5. Share practice approaches that utilize DEI practice that demonstrate improved outcomes for patients and healthcare teams.

This conference will address what creates division that impedes education and practice while generating solutions and actions to enhance our collective efforts of embracing diversity, equity, and inclusion.

Culture, gender, sexuality, ethnicity, and religious diversity are foundational concepts that may be addressed by conference faculty.

Doctoral prepared nurse driven, and/or translated initiatives are desired to demonstrate the theme and objectives of this conference. Collaboration of efforts that include professional colleagues with different educational preparation are preferred.

Be a part of this conference by: https://doctorsofnursingpractice.vfairs.com/en/
- **Signing up to be a conference committee member (Click here to send an email!)**
- **Volunteer to be an abstract peer-reviewer**
- **Prepare your abstract for a virtual presentation**