

<p><b>The 2023 DNP National Conference will be Virtual</b></p> <p><b>Register Today:</b> <b><u>August 10-11, 2023</u></b></p> <p>See Page 20 for more information</p>	 <p><b>What Providers Should Know about Palliative Care</b></p>	 <p>Visit us at: <a href="http://www.DNPInc.org">www.DNPInc.org</a></p>	 <p><b>ADVERTISE IN OUTCOMES TODAY!</b></p>
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# OUTCOMES

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

**Table of Contents**

Topic	Page
<i>DNP Organizational Update</i>	<b>2</b>
<i>Monthly DNP Inc. Survey Results</i>	<b>3</b>
<i>Dissemination Team / Repository Featured Practice Scholars</i>	<b>4</b>
<i>Important DNP Student Surveys: Please Complete to Support Student Colleagues</i>	<b>5</b>
<i>Online Community Links and Opportunities: Groups – Blogs – Forums – Events</i>	<b>6</b>
<i>Continuing Education for Doctoral Prepared Nurses</i>	<b>7</b>
<i><b>The Caregiver Corner (A valuable on-going column)</b></i>	<b>8</b>
<i><b>What Providers Should Know about Palliative Care</b></i>	<b>9</b>
<i>Important Articles and Links - - Are you Low on Vitamin D?</i>	<b>10</b>
<i>Multiple articles from outside sources – pertinent to DNP prepared practice</i>	<b>11-12</b>
<i>DNP Foundation / Dissemination Team</i>	<b>13</b>
<i>Conference Archives and Select Sponsors</i>	<b>14-16</b>
<i>Doctoral Project Repository</i>	<b>17</b>
<i><b>Academy of Doctoral Prepared Nurses</b></i>	<b>18</b>
<i><b>The Journal of the Academy of Doctoral Prepared Nurses</b></i>	<b>19</b>
<i><b>2023 National Doctor of Nursing Practice Conference</b></i>	<b>20</b>



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

**VALUABLE LINKS**

<a href="#">Doctoral Project Repository</a>	<a href="#">University DNP Programs</a>	<a href="#">Dissemination Team</a>	<a href="#">DNP Foundation Donor Options</a>
<a href="#">Join the Mailing List</a>	<a href="#">DNP Online Community</a>	<a href="#">Advertising Packages</a>	<a href="#">Contact Us</a>

## ***DNP Organizational Update***



Strategic plans are tough. We all have experience in developing and implementing strategic plans, yet sometimes variables such as the reliability of vendors and companies required to implement these strategies can be confounding (and frustrating). Building the infrastructure for change – so that plans can be implemented to see progress that can lead to a measurable outcome is the expectation. Does this sound familiar? All that have worked on a doctorate degree, regardless of the particular designation, have encountered these challenges. Well, the DNP Inc. organization is not different. In fact, we are facing and address these challenges.

First, thank you to all that are reading OUTCOMES. The number of people that have opted-in to our mailings has grown significantly and we are happy to expand the scope and delivery of this free monthly electronic newsletter. More links to more stories pertinent to doctoral prepared practice are included each issue. Please review what is offered and click into the link to view more information. As stated, this is a newsletter – not a peer-reviewed journal. But that is coming in the future.

Topics impacting practice are reflected in society – and also the other way around. Intolerance, bullying, racism, bigotry, and a push from political leaders to slight and suppress segments of our population impact how we address our patients effectively. Here's a brief example. A federal court ruled that insurance companies and employers are not required to pay for PrEP (to avoid HIV infection). For every 1% decrease in the availability of this preventative medication, about 1,2000 are likely to become infected. A medication that is easily available is not being provided for reasons that are reflective of bias, bigotry, and intolerance. As a result, the cost of caring for future infections will be much higher than the medication. Does this sound illogical to you? This is one example of many policy choices that negatively impact health to this and many other populations. Are we – as doctoral prepared nurses – in a place to influence these changes? I believe that we are.

One way to see how we are addressing diversity, equity, and inclusion is to explore what works and what does not. What are the barriers to helping our patient and patient populations find access to care that addresses their problems without bias and bigotry? These are easy questions to ask, but difficult to answer. We shine a light on these and other dynamics in this area in the 16<sup>th</sup> National Doctors of Nursing Practice Conference taking place virtually on August 10 and 11, 2023.

**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 in our work environments. It looks like we (as a group) are taking DEI concepts seriously in where we work. Do the responses below reflect your thoughts also?

Question 1: My work environment embraces diversity, equity, and inclusion.  
70% very much to absolutely, 30% somewhat to not at all

Question 2: Some of my co-workers/colleagues minimize these concepts and believe they are not worth pursuing.  
9% very much to absolutely, 91% somewhat to not at all

Question 3: My work location has a department dedicated to diversity, equity, and inclusion for the company staff and customers (patients, students, etc.).  
57% very much to absolutely, 43% somewhat to not at all

Question 4: I do not see a problem regarding diversity and do not believe actions or interventions are needed beyond what is currently in place.  
22% very much to absolutely, 78% somewhat to not at all

Question 5: I belong to an organization that is exclusive to a specific ethnicity or race.  
0% very much to absolutely, 100% 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 April**  
**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?

### **Can colleagues and customers find the work of your students and graduate?**

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:

<a href="#"><u><b>Chaminade University of Honolulu</b></u></a>	<a href="#"><u><b>Saint Louis University</b></u></a>
<a href="#"><u><b>Charles R. Drew University</b></u></a>	<a href="#"><u><b>Sentinel University</b></u></a>
<a href="#"><u><b>Lourdes University</b></u></a>	<a href="#"><u><b>University of Maryland</b></u></a>
<a href="#"><u><b>Purdue University Global</b></u></a>	<a href="#"><u><b>Wilmington University</b></u></a>
<a href="#"><u><b>Sacred Heart University</b></u></a>	
Your alma mater should be listed also!	Click <a href="#"><u><b>HERE</b></u></a> 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\*\*](#):

[\*\*Post-Traumatic Stress Disorder in Nursing Populations: Implications for Practice\*\*](#) by Patricia M. Schofield, DNP, RN, CA-SANE/CP-SANE from Bradley University

[\*\*Patient Education and Medication Adherence in Chronic Obstructive Pulmonary Disease: The Effects of Education Related to Exacerbation Events\*\*](#) by Amelia Schreibman, DNP, ANP-BC from Grand Canyon University

[\*\*Increase Confidence in New Graduate Nurses Using High Fidelity Simulation\*\*](#) by Margaret V. Schwimer, DNP, MSN, RN from Touro University Nevada

[\*\*Predictors Of Substance Use Recidivism Among Arkansas\*\*](#) Nurses by Karen L. Davis, DNP, RN, CNE Union University

**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\*\*](#).**

## Important DNP Student Surveys: Please Complete to Support Colleagues

We have all been there (or are currently in the process) of collecting data to address elements of our respective doctoral projects. Many projects could not take place without the support of colleagues. Even with survey fatigue we ask you to extend your consideration and kindness for students in the process of collecting information. Here are two worthy projects. Click the title to be taken to that page and learn more about their projects:

[\*\*The Influences That Promote Identification and Response of Trafficked Persons by Nurses with A Doctor of Nursing Practice Degree\*\*](#) by Shaneke Pryce, a DNP student at Molloy University.

[\*\*A Qualitative Project on the Lived Mental Health Experiences of Minority DNP Students\*\*](#) by Qween Ti'ye, a DNP student at Regis College

**In keeping with the mission of DNP Inc. to improve healthcare outcomes by promoting and enhancing the doctoral prepared nursing professional, we welcome the opportunity to support our colleagues. Please share your time and expertise to help in this process also.**

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



Flight from SFO to JFK, Medical emergency in row 3. Flight attendant: “is there a doctor on board?” Person stands up and walks to the front. “Hi I am a doctor how can I help?”

Flight attendant: “this passenger is unconscious, is breathing weird and vomited”

Doctor: “I’m an ophthalmologist, I probably can’t help much”

Flight attendant: “well that’s confusing. Doctor. “

Another passenger makes their way to the issue. “Hi, I’m Pat. I’m a critical care nurse practitioner how can I help? “Proceeds to address the medical issues. BTW - Pat is also a doctorate prepared clinician.

Don’t tell me “doctor” isn’t confusing for the 100 specialties of physicians too. The role is physician and likely more specifically an “ologist”. So, use that term to clear it up for patients. A psychiatrist should not run a code blue but if only introducing themselves as “doctor” could create role confusion. Your role is RN, or Radiologist/physician or pharmacist etc. “Doctor” is a modifier not a role. And a damn well-earned modifier. **Patients want role clarification not ego clarification.**

State your role and if needed your academic preparation to them. In collegial settings call me by my name or address me as my academic preparation depending on the norm. I will do the same. Don’t tell me this is about patient confusion when it’s really about power, ego and billing rights. We have more pressing issues to fight than ego. Let’s move on.

**Are you looking for a career move?  
Is your organization hiring DNP prepared nurses?**

[Click HERE for More Information](#)

<b>Doctors of Nursing Practice Online Community: Join these discussions</b>
<b>GROUPS:</b>
<i>Join and share thoughts and ideas with colleagues</i>
<a href="#"><u>DNPs of All Race, Creed, Ethnicity</u></a>
<a href="#"><u>Dual Certified DNPs</u></a>
<a href="#"><u>DNPs of Color - DOCS</u></a>
<a href="#"><u>DNP/APRN Veterans Health Care</u></a>
<a href="#"><u>National Indian Nurse Practitioners Association of America (NINPAA)</u></a>
<a href="#"><u>DNPs Seeking Positions in Academia</u></a>
<a href="#"><u>DNPs in Correction</u></a>
<b>BLOGS and FORUMS:</b>
<i>Click into the following links to join the conversation</i>
<a href="#"><u>The Controversy of the DOCTOR Title</u></a>
<a href="#"><u>Commission’s Foundational Report on Racism in Nursing</u></a>
<a href="#"><u>Blind Review is Blind to Discrimination</u></a>
<a href="#"><u>US Lawmakers Turn Attention to Plague of Fake Journal Papers</u></a>
<a href="#"><u>Beyond Band Aids: An Introduction to Comprehensive Wound Management</u></a>
<a href="#"><u>Synchronous Telehealth Fatigue Among Healthcare Providers Survey</u></a>
<a href="#"><u>Mentoring and Interprofessional Collaboration</u></a>
<a href="#"><u>AACN Issues New Report on Doctor of Nursing Practice Education</u></a>
<a href="#"><u>Best and Worst States for Health Care</u></a>
<a href="#"><u>Teaching Tool to Inspire Nurses to Practice with Moral Courage and Compassion</u></a>
<a href="#"><u>Is Research Integrity Possible without Peer Review?</u></a>
<a href="#"><u>National Study of Nursing Faculty and Administrators’ Perceptions of Professional Identity in Nursing</u></a>
<a href="#"><u>Strategies to move entry-level NP education to the DNP degree by 2025</u></a>
<a href="#"><u>Teaching Tools to Inspire Nurses to Practice with Moral Courage and Compassion</u></a>
<b>EVENTS:</b>
<i>Check out offerings for professional growth below. Share your event – <b>Click HERE</b></i>
<a href="#"><u>Nursing Informatics Boot Camp – Jacksonville University, March 2023</u></a>
<a href="#"><u>National Association of Pediatric Nurse Practitioners 44<sup>th</sup> National Conference, March 2023</u></a>
<a href="#"><u>International Society of Psychiatric-Mental Health Nurses Annual Conference, March 2023</u></a>
<a href="#"><u>48<sup>th</sup> American Academy of Ambulatory Care Nursing Annual Conference, April 2023</u></a>
<a href="#"><u>Cardiovascular Nursing Symposium 29<sup>th</sup> Annual, April 2023</u></a>

## ***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.



**[DNP Leaders Leveraging A Strategic Vision And Blueprint To Transform To An Evidence-Based Organization \(1.0h\)](#)**

**[Implementation Of an Evidence-Based Fall Prevention Educational Program in The Long-Term Care Facility \(1.0h\)](#)**



**[DNP's Worst Nightmare – When Quality Improvement Fails \(1.0h\)](#)**

**[Evaluation Of an Individualized Patient Education Checklist and Teach-Back Method in Postpartum Education \(1.0h\)](#)**



**[See more offerings and information about how purchasing continuing education will help the Foundation for DNP Projects and Practice Innovation](#)**

## The Caregiver Corner



This week, I found myself in a stressful situation. It resolved quickly but made me think about the stress Informal Caregivers experience. Their stressors are frequently felt over many years. LeRoy (2014), and others link high levels of stress hormones in the body to “Caregiver Syndrome.” There is further concern these periods of stress may result in as many as 70% of Informal Caregivers over 70, dying before their care recipient (LeRoy, 2014). This is at a higher rate than their peers, but even younger informal caregivers appear to be at higher risk for life threatening diseases.

Although there has been extensive research on this topic, we have no definitive answers. The medical community needs to look for ways to determine the actual health risks for all Informal Caregivers. Because “Caregiver Syndrome” is not formally recognized, few medical providers specifically address stress when they see the caregiver or the recipient of their care. The COVID pandemic made the issue of stress experienced by Professional Caregivers come to the forefront. Perhaps this will encourage the exploration of effective measures to deal with stress and those measures can also be suggested to Informal Caregivers. Providers need to ask Informal Caregivers if they are experiencing stress. Signs of stress include fatigue to the point of exhaustion, sleeplessness, depression, anxiety and even over-reacting in family situations.



As I reviewed the interviews with the Informal Caregivers featured in my book and looked for their take on stress. Everyone admitted to high degrees of stress most of the time. In some cases, the causes of their stress are predictable, but other times, these causes were

surprising. These Informal Caregivers reported stress related to complex issues like medication administration and skin care. These are things varied medical disciplines can address and improve Informal Caregivers’ understanding. The first step is recognition that stress is an issue with about all Informal Caregivers.

Worry concerning the care recipients’ nutrition was commonly reported. This is another area where varied healthcare disciplines can step in and instruct Informal Caregivers. Even with families where there are adequate resources, this responsibility weighed heavily. Informal Caregivers talked about getting up every day with their first thought being what food was in the home, what their patient would want to eat or even be able to eat. Several reported specific instances where they left their patient in the care of a relative for a few hours, only to return home and find the patient had not been fed or had been offered food they could not eat.

One factor I had not considered earlier when thinking about stressors and Informal Caregivers needs special consideration. Informal Caregivers face daily stressors that can overwhelm them. Just imagine, these stressors are felt while caring for someone they love, and, in most cases, someone who is not likely to get well. Caregiver stress deserves increased scrutiny, and I intend to discuss additional aspects in this forum.

Source: CNN, article by Andree LeRoy, MD, 2014.



## ***What Providers Should Know about Palliative Care***

Palliative care has been an available service to patients and families for several years yet there remains much to learn about what this specialty can provide. As DNP leaders and healthcare providers, we must keep ourselves up to date on best practices and assist our patients to the best resources available that will improve their health and quality of life. Lack of knowledge about palliative services and misconceptions remain the greatest barriers. Not many other specialties in medicine must work so hard to prove its value like palliative does. Even hospice services with its many persisting misconceptions seems to have a more clear-cut direction in care. As DNP leaders, having knowledge of palliative services and when to utilize it can provide our patients with the right care at the right time.

According to the Center to Advance Palliative Care (2022) palliative care services are for individuals with chronic, life-limiting, or terminal illnesses with care being focused on providing relief from the symptoms and stress of the illness with the goal to improve quality of life for both the patient and the family. Palliative care is usually provided by a specially trained team of doctors, nurses and other specialists who work together with a patient's other doctors to provide an extra layer of support. Palliative care is based on the needs of the patient, not on the patient's prognosis. The National Institute on Aging (2022) states it is appropriate at any age or stage in a serious illness and can be provided along with curative treatment.

Given that palliative care can cover such a wide span throughout the disease process may confuse providers on when to consult their services. CAPC (2022) provides a general palliative referral criterion to include one or more of the following:

- New diagnosis of life-limiting illness for symptom control, patient/family support
- Declining ability to complete activities of daily living
- Weight loss
- Progressive metastatic cancer
- Two or more hospitalizations for illness within three months
- Difficult-to-control physical or emotional symptoms
- Patient, family or physician uncertainty regarding prognosis or treatment options
- Patient or family requests for futile care or DNR order conflicts
- Conflicts or uncertainty regarding the use of non-oral feeding/hydration in cognitively impaired, seriously ill, or dying patients
- Limited social support in setting of a serious illness (e.g., homeless, no family or friends, chronic mental illness, overwhelmed family caregivers)
- Patient, family or physician request for information regarding hospice appropriateness
- Patient or family psychological or spiritual/existential distress

A consult order is required once the need for palliative services has been identified. In most cases the order is placed by the MD/PA/APRN. In some facilities a palliative consult order can be placed by an RN if the patient meets specific criteria. Palliative care now has expanded its service options and is often available in hospitals, rehab facilities, long term care, palliative clinics, and in home services. Obviously, some geographical areas may have varied or limited access to palliative care.

As leaders in healthcare, we should also be quick to stamp out common misconceptions about palliative services when the opportunity presents itself. As an experienced Certified Hospice and Palliative Nurse (CHPN) there have been many occurrences in my career where patients, family members, and even providers have created missed opportunities based on misconceptions of palliative care. The most common misconceptions usually involve palliative being the same as hospice care or equivalent to comfort care, must mean the patient is dying or that nothing else can be done, promotes euthanasia or will make death occur sooner, and is only for those with cancer.

What palliative care does provide is clarification of the patient's desires, goals, and decisions, provides support for the patient and family, increases understanding of treatment plans and options, improves quality of life, and provides symptom control (Palomar Health, 2022).

In conclusion, the lack of knowledge and misconceptions concerning palliative care continue to act as barriers to patients suffering from life-limiting, chronic, or terminal illnesses. Palliative care can provide many benefits. As DNP leaders and providers, it is our duty to stay up to date on what resources are available to our patients and eliminate any misconceptions that prevent our patients from receiving the right care at the right time.

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April McDonald, MSN, CHPN, APRN, FNP-BC, Eastern Kentucky University

## 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 21<sup>st</sup> Century: Curriculum, Evaluation, and Postdoctoral Considerations\*\*\*](#)
- [\*\*\*Academy of Clinical Essentials: A Revolutionary Nurse Staffing and Education Model\*\*\*](#)

## ***Are you low on vitamin D? Experts say deficiency could increase susceptibility to illness***

The northern latitude in North Dakota and Minnesota means that during the winter, the sun's rays are so weak that they don't allow people to make vitamin D, increasing the risk of deficiency.

By Beth Sanford, DNP, RN

Read the rest of this articles by a DNP colleague with passion, focus, and dedication to make a difference. Click the title or image.



**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](mailto:info@DNPInc.org)**

**[Interpersonal Racism Drives Heart Disease Risk for Black Women](#)** by Regina Schaffer, Helio March 2, 2023

**[Assessing the Impact of One Million COVID-19 Deaths in America: Economic and Life Expectancy Losses](#)** by Sachin, S, Goosby, E., and Reed, M. J. A., Scientific Reports, February 22, 2023

**[It Has Finally Happened! Utah has NO restrictions to practice and is going FPA with AANP!](#)** by Melissa J. Hinton, Utah Nurse Practitioners, March 3, 2023

**[Rural Texas Needs Health Care Providers, Why is a Texas Law Still Standing in the Way?](#)** By Vickie Brooks, the Gilmer Mirror, February 23, 2023

**[Nurses With a Doctorate in Nursing Practice \(DNP\) Should Not Call Themselves “Doctor” in a Clinical Setting](#)** by Gary Gaddis, Missouri Medicine, 2022 Jul-Aug; 119(4): 314–320.

**[What Makes Health Care Workers Stay in Their Jobs?](#)** by Patrick T. Ryan and Thomas H. Lee, Harvard Business Review, March 2, 2034

**[Workers secure raises: Where, how much and when](#)** by Kelly Gooch, Becker’s Hospital Review, February 21, 2023

**[10 states with the largest dips in travel nurse pay](#)** by Kelly Gooch, Becker’s Hospital Review, March 2, 2023

**[Assessing the impact of one million COVID-19 deaths in America: economic and life expectancy losses](#)** by Silva, Goosby, and Reid, Scientific Report, February 22, 2023

**[The New Crisis of Increasing All-Cause Mortality in US Children and Adolescents](#)** by Woolf, Wolf, and Rivara, March 13, 2023, JAMA.

**[The disagreement about the role of nurse practitioners and physician assistants](#)** by The Journal of Healthcare Contracting, March 21, 2023

**[AI in health care: Meeting HIPAA standards with ChatGPT](#)** by Harvey Castro, KevinMD.com, February 8, 2023

**[Statistical, practical and clinical significance and Doctor of Nursing Practice projects](#)** by Carpenter and Waldrup, Wiley Online Library, October 4, 2021

**[Unearned authorship pervades science](#)** by Chawla, Nature, January 5, 2023

**[4 Bills to Remove Nurse Practitioner Restrictions Gain Government Support](#)** by A Roberts, Nurse.org. March 3, 2023

**[UPMC nurse lost job for speaking publicly about staffing shortages, labor complaint says](#)** by R. Deto, Triblive, March 10, 2023

**[Nurse degree scheme raises legal questions for hospitals](#)** by M. Bean, Becker's Hospital Review, March 8, 2023

**[3 nurse CEOs on combating assumptions, getting ahead of skill gaps](#)** by Carbajal and Gooch, Becker's Hospital Review, March 10, 2023

**[How to Handle the Loss of Health Insurance](#)** – an excerpt of the book How to Avoid Being a Victim of the American Healthcare System by D. Wilcox, Daily Business Journal, March 8, 2023

**[Mark Raymond Jr: Broken Healthcare System is Leaving Millions Behind](#)** by R. Dillard, docwirenew, March 9, 2023

**[Even Mild COVID Is Hard on the Brain](#)** by M. Brooks, Medscape Neurology, March 6, 2023

**[Black People Less Likely to Receive Dementia Meds](#)** by M. Brooks, Medscape Neurology, March 3, 2023

**[The state of mental health, burnout, mattering and perceived wellness culture in Doctorally prepared nursing faculty with implications for action](#)** by B. Melnyk and L.S. Strait, Worldviews of Evidence-Based Nursing, March 2, 2023

**[Research focused doctoral nursing education in the 21st century: Curriculum, evaluation, and postdoctoral considerations](#)** by T. Weaver, S. Lott, P. McMullen, C. Leaver, G. Zangaro, and R. Rosseter, Journal of Professional Nursing, V 44, Jan-Feb, 2023, Pgs 38-53.

**[Samsung looks to bring telehealth to TVs](#)** by N. Schwartz, Becker's Hospital Review, January 4, 2023

**[Mayo Clinic picks up stake in startup making pill-sized robot](#)** by G. Bruce, Becker's Hospital Review, January 5, 2023

**[Amazon will be the biggest threat to health systems' core business: Survey](#)** by N. Diaz, Becker's Hospital Review, January 4, 2023

**[Future Surge in Diabetes Could Dramatically Impact People Under 20 in U.S.](#)** by Centers for Disease Control and Prevention, December 29, 2022

Do you have articles of interest to your nursing and doctoral prepared colleagues?  
Submit articles of interest to: [info@DNPInc.org](mailto: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



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!

Donor List



## 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



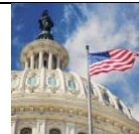
**Ninth National DNP Conference: 2016, Baltimore, MD**  
***Transforming Healthcare Through Collaboration***  
 October 5-7, 2016



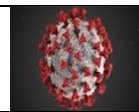
**Tenth National DNP Conference: 2017, New Orleans, LA**  
*Celebrating 10 Years: Diversity & Inclusion in Practice*  
September 13-15, 2017



**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*



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 <p>Duke University School of Nursing Doctor of Nursing Practice</p>	 <p>EXXAT</p>
 <p>SPRINGER PUBLISHING COMPANY We are proud to have Springer Publishing Company's support and participation in this inaugural DNP conference.</p>	 <p>SINCE 2000 ELNEC END-OF-LIFE NURSING EDUCATION CONSORTIUM Advancing Palliative Care</p>
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## 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.

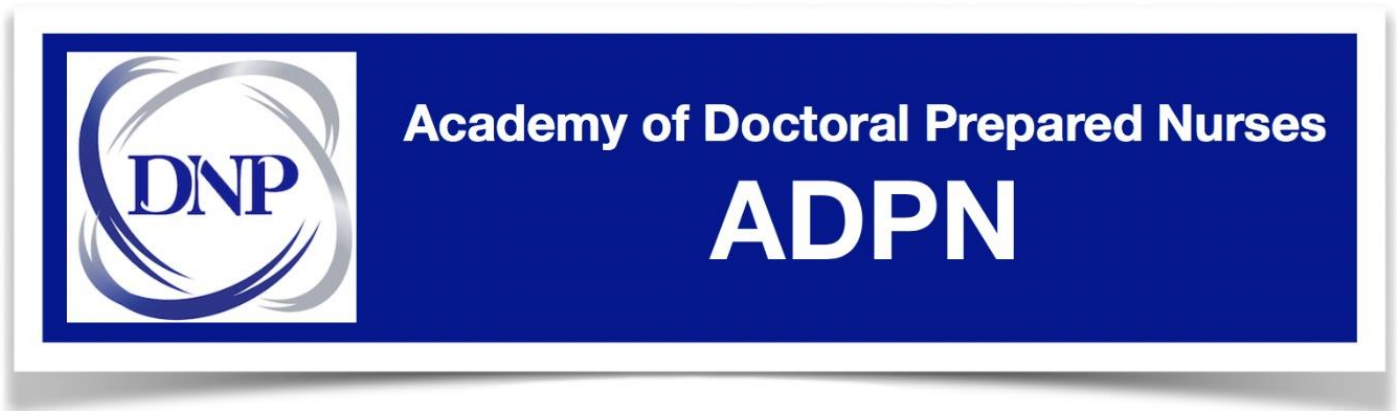
There is a one-time nominal \$30 charge to post your scholarly project to this archive of curated documents. Once posted, the owner may share the URL web page address with any individual or organization desired. Each listing helps to educate patients, employers, organizations, and other stakeholders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

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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:**

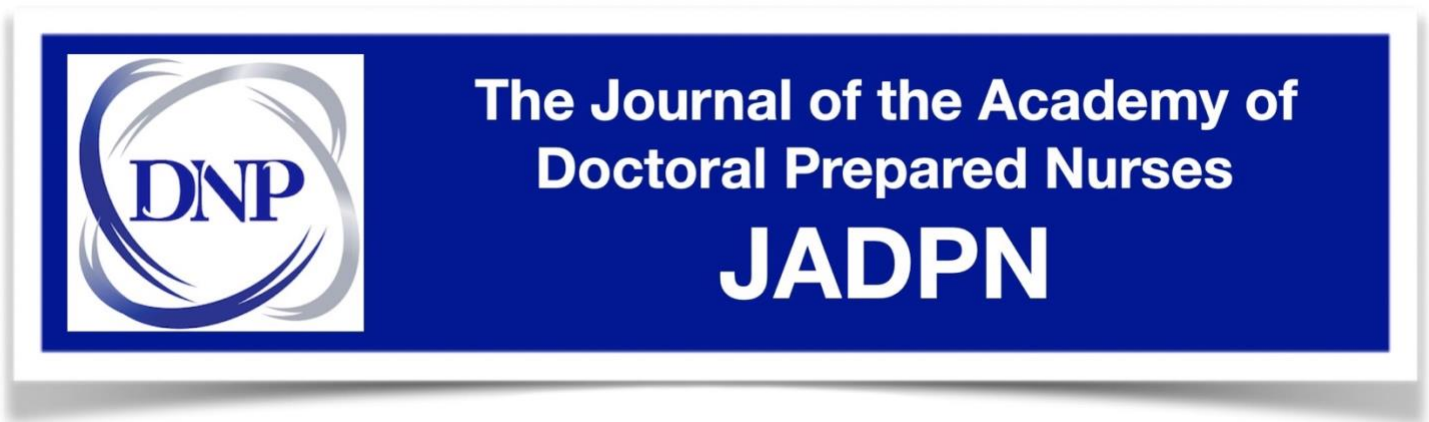
1. Advance collaboration with colleagues all nursing doctorate degrees,
2. Promote the dissemination of health care services techniques that demonstrate healthcare improvements,
3. Demonstrate intra and interprofessional collaboration among all healthcare professional partners, and,
4. Integrate research-based 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 the 3<sup>rd</sup> Quarter of 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**

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**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



### **Objectives:**

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/>

- Volunteer to be an abstract peer-reviewer ([Click here to send an email!](#))
- Prepare your abstract for a virtual presentation

