



Doctor of Nursing Practice (DNP) Program Handbook

UNIVERSITY OF ROCHESTER

SCHOOL OF NURSING

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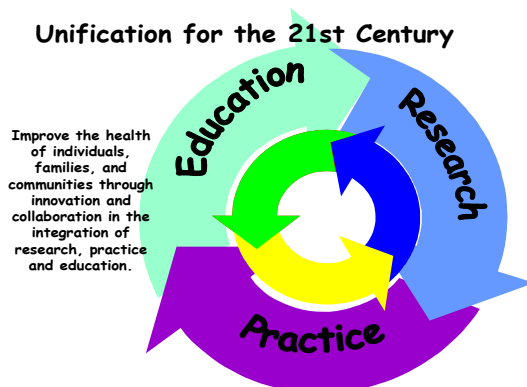
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TABLE OF CONTENTS

	Pages
I Overview of the DNP Curriculum	2
II DNP Program Learning Outcomes	4
III The DNP Curriculum	5-6
A. DNP Program Coursework	
B. DNP Project Credits	
C. Electives	
D. Prerequisites and Recommended Course Sequencing	
E. Clinical Practicum for Advanced Nursing Practice (NUR 592)	
IV. DNP Program Milestones	6-8
A. Forming a DNP Project Committee.....	6
B. DNP Project Proposal Defense	6
C. Pre-Implementation DNP Project Approval Processes.....	8
1. Completion of CITI Training	
2. Institutional Review Board Review of DNP Project	
3. SMH Nursing Practice Approval of DNP Projects.....	9
D. DNP Project Implementation and Final Defense.....	10
E. Cumulative Scholarly Paper	11
F. Graduation Criteria	11
V. Overview of DNP Project Development in Practicum Courses	11
A. DNP Project Forms and Resources.....	12
VI. Student and DNP Project Committee Responsibilities During Practicum Courses	13-14
A. Role of DNP Project Committee Chair.....	14
B. Role of DNP Committee Member	14
C. Role of DNP Student	14
VII. Annual DNP Project Day	14-16
VIII. Administrative Support for DNP Program and Students	16-17
A. Administrative Responsibility for the DNP Program.....	16
B. DNP Subcommittee Membership and Responsibilities.....	16
C. DNP Office Staff Support.....	16
D. Faculty Advisors and Program Planning.....	16
E. University ID Card.....	17
F. University Parking.....	17
G. Student Work Space and Equipment.....	17
H. Computer access to library and internet resources and email.....	17
I. Printer access.....	17
J. Photocopying.....	16
K. Keys.....	16
L. Campus Security	16
IX. Registration Procedures and Requirements	18
X. Policies on Good Academic Standing and Progression in the Program	18-19
XI. Resources to Enhance Your DNP Learning Experience	19
XII. Learning Opportunities to Enrich your Academic Clinical Training Experience	19-20
XIII. Building Your Scholarly Career: Presentations, Publications, and Funding	21
XIV. Appendices	22-41
Key Personnel and Offices	Inside back cover

I Overview of the DNP Curriculum

- A. **Conceptual framework and philosophy.** The Unification Model, which has guided University of Rochester nursing curricula since Dr. Loretta Ford introduced it during her tenure as Dean, has been revised to include not only the basic interdependent model components of education, practice, and research but also systems and leadership, both of which are central to the practice doctorate. An updated model, *The Unification Model for the 21st Century*, provides an underlying philosophical orientation and organizational structure for operationalizing the DNP curriculum content, which is consistent with *The Essentials of Doctoral Education for Advanced Nursing Practice* (AACN, 2006).



Equally important and complementary to the curriculum content is the nature of the learning milieu and the quality of teacher-student relationships in the Doctor of Nursing Practice (DNP) program. These process aspects of the curriculum are guided by a theory of motivation, the **self-determination theory (SDT)**. Two decades of empirical work with SDT in educational settings has resulted in the following findings: 1) autonomously motivated students (i.e. those who are fully present and engaged in their learning because they want to more fully understand and explore phenomena of interest to them as compared to control-motivated students or those students who are pursuing a task/assignment/degree for the sake of “getting a ticket punched”) achieve higher academic outcomes, perceive themselves as more competent and as having greater self-worth, prefer and experience more pleasure from optimal challenges, generate more creativity, and are more likely to remain in school; and 2) students flourish when their teachers support their autonomy (rather than try to control their behavior with rewards and punishments). Autonomy supportive teachers teach because they inherently enjoy working with students, actively engage students in learning and try to understand their students’ perspectives, offer students options rather than dictates, answer questions and provide rationales, avoid defensiveness, and experience teaching as a mutually beneficial learning experience for both teacher and student. Investigators who explore autonomy supportive learning environments have found that students enjoy the following educational benefits when teachers are autonomy supportive (in comparison to students with controlling teachers): higher academic achievement and greater conceptual understanding; greater perceived competence and higher self-esteem; greater flexibility in thinking and information processing information that is more active; greater creativity; and higher rates of retention. For an overview of this research, see Reeve (2002).

Part of the quality chasm in healthcare is related to the larger system forces that undermine nurses’ autonomous motivation for pursuing excellence in providing clinical care. Indeed, the complexity and weaknesses of our healthcare system drive the need for the DNP (AACN, 2006). Several studies in both educational and healthcare settings support the conclusion that autonomy supportive teachers cultivate autonomously motivated students. Our practice doctorate curriculum is enacted through an autonomy supportive milieu, staffed with faculty members who specifically choose to work in the program and who value autonomy supportive approaches to teaching. University of Rochester DNP graduates are nurses who internalize the value of autonomy supportive approaches to teaching and learning, and who, in turn, can advocate for and lead the development of autonomy supportive clinical environments, care models, etc. Such clinical environments are inherently patient-centered, a central component of the vision for health professions education advocated by the *Institute of Medicine in Health Professions Education: A Bridge to Quality* (2003). Furthermore, investigators guided by SDT have demonstrated improved clinical outcomes including greater sustained health behavior change (e.g. smoking cessation, weight loss, adherence to diabetic regimens, etc.) and greater satisfaction with care when clinical care is delivered in autonomy supportive environments (Williams, 2002). Using SDT to complement The Unification Model uniquely defines the University of Rochester DNP and distinguishes our program from practice doctorates offered in other universities.

References

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Reeve, J. (2002). SDT applied to educational settings. In E. L. Deci & R. M. Ryan (Eds), *Handbook of Self-Determination research*. Rochester, NY: The University of Rochester Press.

Williams, G. C. (2002). Improving patients' health through supporting the autonomy of patients and providers. In E. L. Deci & R. M. Ryan (Eds), *Handbook of Self-Determination research*. Rochester, NY: The University of Rochester Press.

- B. Didactic Coursework/DNP Practicum.** Students entering the DNP Program with a baccalaureate degree complete coursework and clinical hours that prepare them as a nurse practitioner in their chosen specialty practice area or as a clinical nurse leader. Students entering the DNP program with a clinical master's degree typically complete a full year of coursework (part-time; 2 courses/semester) before beginning the clinical practicum component of the DNP curriculum (DNP courses). Students complete a total of 1000 clinical hours post baccalaureate or 500 hours post master's degree. Total program completion time for part-time post-master's students is 3 years and for post-baccalaureate students 5-6 years including summer sessions. The plan of study is mapped out with the advisor before starting coursework.

Clinical practicums (NUR 576, NUR 577, NUR 578) provide experiences that build on each student's knowledge and skills in an identified area of specialty practice related to the DNP Essentials. Students work with faculty to develop individualized semester objectives to achieve DNP competencies and enhance their ability to tackle a particular practice challenge. Documentation of practicum experiences in the DNP practicum log (appendix) include those in direct care and indirect care such as participation in clinical conferences, grand rounds, training seminars, advocacy work, and networking with clinical scholars. During the DNP practicum courses, students design, implement, and evaluate a clinical practice or health policy project under the guidance of a DNP committee.

Students completing the DNP program part-time typically are able to maintain full-time employment while completing the curriculum. All students should plan time for reading and writing outside of class hours.

- C. DNP Project.** The DNP project involves the design, implementation, and evaluation of innovative initiatives to improve clinical practice and/or influence health policy. DNP Projects are conducted independently during DNP practicum courses under the guidance of each student's DNP committee and in close collaboration with practice partners and mentors. Students are required to follow the protocols and policies of practice administration in accessing and using clinical data as well as obtaining IRB approval. Documentation of the project is a cumulative scholarly paper from which a publishable manuscript can be developed and publicly defended with a private critique in the final semester.

II DNP Program Goal and Learning Outcomes (PLOs)

The DNP program learning outcomes reflect integration and application of the knowledge and skills obtained in the program based on the DNP Essentials (AACN. 2006). The goal of the DNP program is to prepare clinical scholars and practice leaders who *transform* healthcare delivery, *optimize* health outcomes for diverse populations, and *generate* practice knowledge to advance the discipline of nursing.

At the completion of the program, the DNP graduate will be prepared to:

FOCUS AREA	Program Learning Outcomes
Scholarly Inquiry	1. Employ clinical scholarship, implementation science, and healthcare analytics to advance evidence-based practice at the individual, organizational, community, or population level through systematic investigation of an identified practice issue. DNP Essential: I, III, IV, VII, VIII DNP Course: 509, 570*, 464, 466, 571, 572, 574, [576, 577, 578] = DNP Practica
Healthcare Transformation	2. Drive organizational and systems innovation to improve patient outcomes and optimize healthcare delivery. DNP Essential: II, IV DNP Course: 470, 464, 471, 574, DNP Practica
Leadership.	3. Emerge as practice leaders that utilize collaborative, consultative, and leadership skills on intraprofessional and interprofessional teams to achieve high quality, high-value patient-centered care. DNP Essential: VI, III, II DNP Course: 573, 574, 470, 572, DNP Practica 4. Develop leadership skills to effectively advocate for policy initiatives related to healthcare economics, regulation, access, and delivery. DNP Essential: V DNP Course: 464, 471, 575, DNP Practica
Advanced Nursing Practice	5. Integrates advanced nursing knowledge and specialty competencies with clinical scholarship in an identified area of nursing practice DNP Essential: VIII, III DNP Course: DNP Practica, (masters core and specialty coursework)

* course sunsetted spring, 2018

MS specialties: AGA-47 credits/672 clinical hrs; AGP-45 credits/672 clinical hrs; FNP-55 credits/672 clinical hrs; FMH-54 credits/616 clinical hrs; PNP-45 credits/616 clinical hrs; CNL-35 credits/480 clinical hrs.

III The DNP Curriculum

A. **DNP Program Coursework.** The required post-master's DNP courses are listed below. Coursework required for the post BSN DNP degree will vary according to the Master's specialty program. If a required course has been taken prior to matriculation with a grade of B- or better, it will satisfy the course requirement. Students may take up to 10 credits as a non-matriculated student.

COURSE #	COURSE NAME	CREDITS
NUR 564	I Quality, Safety & Informatics	4
NLX 467	Population Health	3
NUR 573	Interprofessional Partnerships	3
NUR 509	Clinical Data Management for the DNP Practice	3
NLX 473	Healthcare Financial Management	3
NUR 571	Theory and Conceptual Foundations for Clinical Scholarship	3
NUR 572	Appraisal and Application of Evidence in Healthcare	3
NUR 574	Project Management for Systems Innovation	3
NUR 575	Health Policy Development and Political Change	3
NUR 576	DNP Practicum I	3 (2)*
NUR 577	DNP Practicum II	3 (2)*
NUR 578	DNP Practicum III	2*
NUR 578	DNP Practicum III	2*
NUR 578	DNP Practicum III	1*

Total program credits will vary depending on specialty area of practice.

*DNP Clinical/Practicum hours may vary as needed to reach 1000 post-BS (56 hours = 1 clinical credit)

B. **DNP project credits.** NUR 576 and NUR 577 each include two clinical credits (112 DNP practicum hours). With permission of course faculty, the student may carry over additional clinical hours to the subsequent DNP practicum course if they exceed the clinical hour requirement (ie.112) and activities are congruent with course and student objectives. NUR 578 is a variable credit course usually taken over three semesters beginning in the summer immediately following NUR 577. Students may however, enroll in NUR 578 credits concurrently with NUR 577, with the permission of the committee chair and the DNP program director. In rare circumstances, students needing additional time beyond the anticipated final semester of coursework to complete and defend their DNP projects will continue to enroll in NUR 578 until program completion. In such circumstances, the number of credits carried beyond the final semester of coursework will be negotiated between the student, his or her advisor and the DNP program director. A contract between the student and supervising faculty member must be completed each semester a student registers for NUR 578 that identifies goals for the semester along with a work plan outlining how the student intends to meet these goals. If the student does not successfully complete DNP project defense by the end of the anticipated final semester (per degree plan) in NUR 578, she/he must continue to register for one credit hour of NUR 578 for each subsequent semester until the DNP project final defense is completed.

C. **Elective Courses.** Students are permitted to take an additional elective course to enhance preparation in an expressed area of interest. Electives are chosen with the assistance of the advisor. These courses may be chosen from any graduate level offering in the University. Courses outside of the U of R must be approved by the program director in advance of registration. For courses offered by University departments, consult the Graduate Resources, available on the Graduate Studies website at <http://www.rochester.edu/GradBulletin/>. Available SON elective courses are listed on the SON website under registration. Course descriptions for all courses can be found in the Graduate Bulletin or on the SON website.

D. **Prerequisites and Recommended Course Sequencing**

, NUR 509, NUR 572 are pre-co requisites for NUR 574
NUR 574 is a pre-requisite for NUR 576.
NUR 576 & NUR 577 are pre-requisites for NUR 578.

DNP program matriculation is pre-requisite for NUR 574, NUR 576, NUR 577, & NUR 578.

SON matriculation is required for **NUR 573**

MS-DNP students may not enroll in NUR 574 or begin DNP practicum courses until successful completion of all required MS coursework.

E. **Clinical Practicum for Advanced Nursing Practice (NUR 592).** In rare circumstances, students may negotiate with clinical faculty to complete an independent clinical practicum in the student's area of interest. In such circumstances, students are responsible for identifying a University faculty member with the appropriate expertise and willingness to supervise an independent clinical practicum to oversee the practicum experience. Prior to registering for the practicum, a statement of the proposed activity for NUR 592 Clinical Practicum for Advanced Nursing Practice form (on G-public) must be completed by the student and faculty and approved by the DNP Program Director and Associate Dean for Education and Student Affairs.

IV DNP Program Milestones: Policies and Guidelines

A. **Forming a DNP Project Committee.** Each DNP Project committee will consist of **two faculty members and one non-SON** individual based on the potential of the committee members to guide the proposed project. Working with course faculty and current academic advisors, the DNP project committee chair is identified during DNP Practicum I. The addition of remaining committee members may be made as early as desired but should be first discussed with chair and finalized by the end of DNP Practicum II. **The program director must approve the DNP Project committee members.** Once selected, **the DNP committee chair becomes the student's academic advisor for the remainder of the program.**

A DNP project committee consists of a minimum of two doctorally-prepared and an individual outside the School of Nursing who has expertise related to the student's clinical focus area.

Committee members may continue to serve on the committee up to one year after leaving or retiring from the University, if they have agreed to continue working with the student and agree to attend the final defense. After the 1-year mark, a former or emeritus faculty member may not continue as one of the three official members but may be retained as a member in addition to the two faculty required.

Once the selected committee chair has agreed to serve in NUR 576, the student completes the ***DNP Senior Advisor form*** and submits to the DNP Program Administrative Assistant (AA). The committee chair will now serve as the student's advisor.

Following identification of additional committee members in NUR577, the student submits the ***DNP Project Committee Formation Form*** to the DNP Program AA who prepares a memo from the DNP Program Director and Associate Dean for Education and Student Affairs confirming the DNP Project committee (copied to the office of Student Affairs). Curriculum vitae/resume (including email and other contact information) from the outside (non SON) member should accompany the committee formation request.

B. **DNP Project Proposal Defense**

The hallmark of the DNP program of study is the development of a DNP project in which the student designs, implements, and evaluates an innovative initiative to improve clinical practice in their proposed project setting and/or

influence health policy. Students are eligible to orally defend their DNP project proposal, following the completion of course requirements in NUR 577. The purpose of the DNP proposal defense is to provide an opportunity for students to demonstrate synthesis of knowledge acquired in the first two clinical practicum experiences and other DNP coursework. Students must successfully complete the proposal defense before submitting an IRB application and project implementation. During the proposal defense, students receive feedback and answer questions regarding their planned scholarly project. Thus, the experience supports the development and refinement of the DNP project.

1. Once the student is ready for the DNP proposal defense, based on discussion with the DNP committee chair, the student should inform the DNP Program AA who will schedule the presentation. Completion is encouraged during the summer following NUR 577, however, the project proposal defense must be completed by **September 15** of the final year of study. If the student is unable to meet this deadline, he/she must submit a written letter to the DNP Program Director explaining reasons for not meeting this program milestone.

The inability to defend the DNP proposal by **September 15** may influence the student's graduation date.

2. **Composition of DNP Project Proposal Defense Committee.** Committee members typically include all members of the student's DNP project committee, an additional faculty member representing the doctoral faculty (selected by the program director) and the DNP Program Director. If appropriate, representatives from the student's relevant practice area may be asked to join the proposal defense committee at the invitation of the DNP Program Director and/or the Associate Dean for Education and Student Affairs.

3. **One week prior to the scheduled exam**, students will send the updated version of the cumulative scholarly paper (reflecting work completed in NUR 576 and NUR 577) and slide presentation to each participant of the proposal defense committee.

4. **DNP Project Proposal Defense Format**

- a. The student's advisor welcomes and introduces attendees, and briefly reviews the format of the defense. **Proposal defenses are open to students, faculty, and others interested in attending.**

- b. The student presents the DNP project proposal in a **30 minute** slide presentation which reflects synthesized learning from the student's course work and clinical practicum experiences to date related to development of their proposed project.

- c. At the conclusion of the presentation, a brief question and answer session will be offered to attendees after which the public portion of the proposal defense will end. Members of the DNP Proposal Defense Committee will offer feedback, ask questions, and dialogue with the student about the strengths and any potential concerns about the proposed DNP project. Thirty to sixty minutes are reserved for committee discussion during the proposal defense.

- d. At the conclusion of the discussion, faculty members will excuse the student to discuss the student's presentation.

- e. Students will then return to the proceedings where committee members (led by the committee chair) will share their assessment and offer feedback.. An evaluation rubric (see Appendix) will be completed by each member of the DNP Project Proposal Defense Committee with recommendations to:

- 1) **Accept the proposal** with no/minor revisions. The DNP Committee Chair will file approval of the Project Proposal with the Doctoral Program AA. The student can proceed with submission of IRB application.

- 2) **Conditionally accept with substantive revisions.** The student will make recommended revisions and resubmit to the DNP Committee Chair within one month of the proposal defense. Following approval of the revised proposal by the DNP Committee Chair, the student will proceed with submission of the IRB application. This revised date will become the completion date.

- 3) **Reject the proposal.** The student must develop a significantly revised or new proposal. The DNP Committee Chair will work with the student on the revision. The DNP Project Proposal Defense Committee will review the new proposal and all prior steps will be repeated.

- f. A written summary is prepared by the DNP Committee Chair sent to the student and filed in the student's academic record. The summary serves as the formal notice of the proposal defense outcome to the student and is used to guide implementation of the DNP project.

Suggestions for the DNP Project Proposal Defense. Students need to be prepared to explain a thoughtful rationale for each aspect of their DNP design congruent with the DNP scholarly paper guidelines and proposal defense rubric. Areas of emphasis include:

1. An ability to articulate a concise synthesis of the background literature in the clinical area of focus.
2. A persuasive argument succinctly summarizing the importance, clinical need, support, and feasibility of the proposed project.
3. Identification of a conceptual framework guiding the project including its relationship to implementation, methods and outcome measures.
4. Congruence between project aim(s), objectives, and outcomes.
5. A project design that permits the student to efficiently introduce a practice or policy innovation including an evaluation plan consistent with the chosen conceptual framework and congruent with the written scholarly project guidelines.
6. Description of relevant contextual factors: setting, anticipated facilitators and barriers to project implementation, and interprofessional collaboration.
7. Clear plan for data collection, security and analysis,
8. Attention to cost burden of project implementation, potential for cost savings, and economic implications for sustainability.
9. Attention to ethical considerations related to protection of participants' rights and welfare.

Consequences of failure

1. A remediation plan will be developed with the student's DNP committee chair and the program director.
2. The student may not progress with the IRB application until s/he successfully defends the DNP project proposal.
3. Should the student fail the DNP project defense a second time, the student will need to meet with the DNP program director and DNP subcommittee; a second failure may result in involuntary separation from the program.

C. Pre-Implementation: DNP Project Approval Processes: SMH Nursing Practice and URM C RSRB Approval

1. Completion of CITI Training. All DNP students must complete (unless they already have CITI certification) an educational program on human subjects' protection prior to the completion of DNP Practicum 1. Once completed, students should provide a copy of the certification letter to the DNP program office as well as DNP Practicum I faculty. Information for obtaining CITI certification can be found at (<https://www.citiprogram.org>).

DNP committee members must have current CITI certification at the time of DNP project proposal submission to the IRB.

2. Institutional Review Board Review of DNP Projects. Students must obtain Institutional Review Board (IRB) approval prior to implementing their DNP projects. The DNP committee chair as Principal Investigator (PI) and student as Co-PI/ study coordinator electronically submit the application following an internal review of the DNP project proposal within the SON. The UR IRB is the Research Subjects Review Board (RSRB). www.urmc.rochester.edu/rsrb/. Although DNP projects are typically non-experimental (ie. not deemed to be human subjects' research) the IRB will, nonetheless, review each DNP project proposal to ensure full consideration of potential participants. In addition, publication of project findings typically requires IRB review.

Submission of IRB applications follows:

- successful completion of the DNP proposal defense
- review of the DNP project proposal by the SON DNP Project Liaison (Dr. Margaret Carno)
- SON internal sign off (by Dr. Margaret Carno)
- Department sign off by any other department (ex. Emergency Department) if appropriate

IRB submission process for DNP Projects:

During/immediately following DNP Practicum II:

- 1) Create your IRB Online Submission System (ROSS) account:
 - a. Go to <http://www.rochester.edu/ohsp/rsrb/> and email the IRB through the "contact us" link requesting a ROSS account.
 - b. You will receive an email response providing a link to your new account with login credentials.
 - c. Follow the login instructions and select "New Application".
- 2) Begin preliminary work on IRB application listing the chair as PI and DNP student as Co PI
- 3) Receive other department IRB signoff as appropriate pending conversation with DNP Project Liaison (Reminder: PI/committee members must have current CITI certification).

4) Other department signoffs

*An immediate workaround would be to provide a comment in the online submission system if the title information for the PI under the Contacts tab is not correct and/or fully representative of their role at the UR. This will provide notice to those that review the submission, as well as documentation of what the PI's appropriate title/role is at the UR. If someone is TAR we do require documentation from their dept. chair that supports their role as PI.

Following successful completion of Project Proposal Defense:

- 5) Incorporate feedback from DNP Project Committee and proposal defense into scholarly paper and send updated version to the DNP IRB faculty liaison for **preliminary** scientific merit consultation.
- 6) After incorporating any additional feedback, upload the following in Section 1 *Study Identification Information, Protocol & Measures*, 1.3:
 - a. DNP Scholarly paper **in place of** the study protocol in Section 1. *Study Identification Information, Protocol & Measures*, 1.3.
 - b. All project instruments, consent form, data collection tools.
 - c. Completed DNP IRB checklist **initialed by both student and chair** (see Appendix).
- 7) Complete remainder of application, however, application will not be submitted in ROSS until scholarly paper is *formally* reviewed by the SON:
 - a. Send scholarly paper and all project forms/instruments (see 4c), to Administrative Assistant for Associate Dean for Research.
 - b. AA sends materials to designated SON faculty member to complete formal scientific merit review who completes the review within 5 days and returns to Research AA.
 - c. Once received, the Research AA sends review to PI/student who will consider recommendations (if any).
 - d. Following final review, the chair as PI submits IRB application electronically
 - e. Once submitted to the IRB, final SON signoff is completed in advance of IRB review
- 8) The IRB will then complete their review and notify the student/PI with project approval or if there are any outstanding questions or need for additional information to complete the review.

Requirements for ongoing IRB supervision/reporting will be dependent on determination of project approval status (ex. Not deemed human subjects research, exempt, expedited, etc).

A sample IRB application (exempt) is available as a reference in the Appendix.

To request assistance from the Research Facilitation Group with your application, and or design and consultation request please send an email to: SON_ResearchSupport@URMC.Rochester.edu

3. SMH Nursing Practice Approval of DNP Projects

All proposed DNP projects implemented at Strong Memorial Hospital (SMH) or an affiliated URMC outpatient clinic need to be reviewed by the Nursing Practice Committee prior to implementation. Please review URMC-SMH [10.2 Project Policy for Requesting and Obtaining Hospital, Nursing, or Family Data](#), carefully for more details. <https://urmc-smh.policystat.com/policy/3058965/latest/>

During DNP Practicum II (in consultation with DNP Committee Chairperson)

- 1). Obtain written support (an email confirmation is adequate) for project from relevant practice and administrative leadership (e.g., Nurse Manager, Medical Director, Unit Educator, Administrator, Director of Nursing). Clarify with the service Director of Nursing who else will need to approve the project. Keep a list of names, roles, dates of communication with each party.
- 2). If any part of the proposed project will include an educational component, meet with the service-specific Nursing Education Council (NEC) representative to discuss the educational content/delivery methods/timeline. Contact information for unit/service leadership and educators is available from Center for Nursing Professional Development > Nursing Practice Orientation under the [Resources > Unit and Phone List](#) tab.
- 3). After consulting with DNP committee chair/committee members, consider consultation with Dr. Mary Carey (Mary_Carey@urmc.rochester.edu), Director of the Nursing Research Center at Strong Memorial Hospital , to review instruments (i.e., surveys/questionnaires, focus group or interview questions, etc.), and discuss proposed project methods.
- 4). Using the *Nursing Practice Project Submission System Tip Sheet** below, begin the online application in REDCap™ using [Nursing Practice Project Submission System](#). Once you begin, you may return at any time to finish with a return code. Save/share the return code with your DNP Committee Chairperson for their review/approval before final submission. All materials should be submitted no later than one week prior to Nursing Practice Project Review Committee meeting.

5). Whenever possible, the DNP student and/or chairperson should attend the Nursing Practice Project Committee review meeting to provide a brief (< 5 minute) summary of the project and answer any questions. Contact Brandon Qualls (273-2133) to obtain schedule of meeting dates/times. To avoid delays in DNP project implementation, it is strongly suggested that students submit all materials and schedule the review meeting in advance of the DNP project proposal defense. Any revisions that occur during the defense can be communicated via email to Mary_Carey@urmc.rochester.edu

During DNP Practicum III

6). At the completion of the project, upload the final version of the DNP project cumulative scholarly paper in the same REDCap™ project folder using [Nursing Practice Project Submission System](#). If you forgot your return code, contact Brandon Qualls (273-2133) to have it reset. Materials (abstracts, slides, manuscripts) need to be peer-reviewed by the Nursing Practice Project Review Committee prior to dissemination.

*Nursing Practice Project Submission System Tip Sheet

What you will need for the application:

1. Contact information and credentials for project contact and all members of the project team.
2. Project information
 - a. Type (staff, student, faculty)
 - b. What it is for (academic project, CAS project, leadership internship, research internship, etc.)
 - c. Title
 - d. Proposal/abstract (background, purpose, methods, etc.)
 - e. Expected outcomes
 - f. Measurements
 - g. 2– 3 references to support your project.
 - i. If the project is evidence-based practice, provide research articles as references.
 - ii. If the project is not evidence-based practice, provide references such as policies, procedures, guidelines, laws, etc.
 - h. Subject involved
 - i. Unit(s) and service(s) the project is being conducted on
 - j. Proposed start and end dates
 - k. Keywords (3 – 5)
3. Have you applied for external funding (if so, describe)?
4. Your dissemination plans
 - a. If submitting a manuscript, which journal.
5. Does the project have an educational intervention component (if yes then)?
 - a. Educational methodology
 - b. Name of educator consulted
 - c. Educational plan
6. Will you be using surveys?
 - a. Provides a copy of survey
7. Do you need Institutional Review Board (IRB) approval?
 - a. IRB information (principal investigator name, department, application status, study number, review level, etc.)
8. Is this related to an academic program?
 - a. Academic program information (type of program, student name, institution, etc.)
9. Acknowledge that all data is propriety and permission needs to be sought before dissemination.

D. DNP Project Implementation and Final Defense. Once the proposal has been successfully defended and the student receives required approval from practice administration and the IRB, students implement their projects independently under guidance of the DNP project chair/committee during NUR 578. Successful completion of the DNP project includes a slide presentation that is defended orally as well as completion of a cumulative scholarly paper written over the three DNP Practicum courses (see below). The purpose of the oral defense is to demonstrate that the student has designed and implemented a clinical project and has satisfactorily presented appropriate and effective arguments based on relevant and convincing clinical evidence. The presentation and defense of a DNP project before a group of faculty, clinical experts, and peers, is the pinnacle of DNP scholarship.

- a. Once all members of the DNP project committee agree that the student is ready to defend the project, the student informs the DNP Program Director and the DNP Program AA. The DNP AA will schedule the final DNP project defense date. Completion of the defense must be no later than **April 20** in order for students to graduate in May. The DNP AA will secure a room and send out announcements for this public defense as appropriate. **Students are expected to send their presentation slides and cumulative scholarly paper to their committee members and DNP Program Director one week before the final defense.**

- b. **Final DNP Defense Format.** At the appointed time, the chair welcomes the attendees, introduces the committee members and student including highlights from the student's CV. The proposal presentation by the student is **30 minutes** and followed by a 10-15 minute period for questions from attendees other than committee members.

At the conclusion of the open defense, the attendees will be excused from the room so that the committee can continue with the closed question and answer period with the student after which the student will be asked to leave the room during the committee's deliberation. When completed, the student will return to discuss the outcome of the defense with the committee and program director. Once the student has successfully defended the DNP project, he or she should revise the cumulative scholarly paper (if necessary) according to any suggested revisions offered by the committee. An electronic copy of the final completed paper, including a completed **DNP Project sign off form** (see Appendix) with the signature of the student's DNP Committee Chair, must be received in the DNP Program office prior to graduation. The sign off form will then be forwarded to the SON Registrar. Should the committee deem the project defense unsatisfactory, the student will work with her or his chair and DNP Program Director to develop a remediation plan.

- E. **Cumulative Scholarly Paper.** The cumulative scholarly paper is written over the three practicum courses and reflects the student's cumulative work on the DNP project. This begins with 1) the literature synthesis in an identified area of interest, as well as selection of a potential theoretical/conceptual framework to guide the project in NUR 576; 2) continuing to project design (methods) in NUR 577; and 3) culminating in project implementation, evaluation (analysis of results), and dissemination plans following DNP project completion in NUR 578.

The cumulative scholarly paper guidelines (Appendix) are reviewed with the students at the beginning of each practicum semester. The paper is used to develop a manuscript suitable for publication according to journal-specific requirements and under the guidance of the student's DNP Committee chair in the final semester of the program. Students should discuss potential journal selection with their chairs to assess the appropriate venue for dissemination of the project findings and review the selected journal's format guidelines for manuscript submission. The first draft of the cumulative scholarly paper will be submitted in NUR 578 by **March 15** with the final paper due no later than **April 15**.

- F. **Graduation Criteria.** The members of the student's DNP committee determine if the student has successfully met graduation criteria. These include: **successful oral defense of the DNP project, completion of the cumulative scholarly paper, and an approved plan for dissemination of the student's scholarly work.**

To participate in Commencement, all required paperwork must be submitted by the specified April deadline, or the student's name will not be submitted to the Board of Trustees.

V. Overview of DNP Project Development in Practicum Courses

The purpose of the DNP Project is for the student to synthesize and demonstrate mastery of the knowledge acquired and skills developed within the DNP curriculum through the design, implementation and evaluation of an innovation to improve the practice environment and or influence health policy.

The goal of the project is for the student to demonstrate advanced leadership as a change agent and clinical scholar who affects change, and strengthens healthcare delivery and practice. The project should reflect an applied integration of the scientific underpinnings of practice, ethical practices, health policy, population health, technology, informatics, and organizational sciences. The student is also expected to collaborate interprofessionally to critically appraise the practice setting and develop, implement, and evaluate an evidence-based, theoretically-guided healthcare intervention or innovation to improve practice outcomes.

Students should discuss potential DNP project ideas with their advisors and other faculty members. Students also are encouraged to conduct preliminary literature searches in their chosen topic area and to write about various aspects of their topic in classes throughout the program. These strategies enhance clinical scholarship and expertise in a focused practice issue and help prepare them for the rigorous work of designing, implementing and successfully defending their DNP projects.

NUR 576 - DNP Practicum I

The formal work on the project begins in NUR 576 with a comprehensive literature search in the student's area of interest. Students are encouraged to think very broadly about their topic, narrowing and refining as the project develops. The search informs the development of a literature synthesis paper that serves as the evidentiary and theoretical background for the DNP project. During this first DNP practicum course, the DNP committee chairperson is selected with guidance from course faculty and the student's advisor. The chair also serves as the student's academic advisor until graduation.

NUR 577 - DNP Practicum II

Designing a project that addresses a practice problem or opportunity for improvement in the student's setting begins in NUR 577. With the support of the student's chair and course faculty, the remaining members of the DNP project committee are identified. The committee assists the student in finalizing the clinical question from which the DNP project will be developed and remains the guiding force for the design, development, and implementation of the DNP project. It is imperative that the student establish relevance and value of the proposed project to the practice setting early on and receive endorsement of practice and administrative leaders for the project.

Following completion of the student's project proposal design in NUR 577 and confirmation by the DNP committee that the student is ready to defend the proposal, the student works with the DNP Program AA to schedule the Project Proposal Defense. This consists of a formal oral defense of the project proposal in an approximate 30-minute oral slide presentation to a group of faculty consisting of: the student's DNP committee, the DNP program director, and a fourth SON faculty member designated by the program director. A specific rubric will be utilized to evaluate the project proposal defense. (Appendix) The proceeding is open to faculty, practice colleagues, peers and others. The proposal defense should occur in the summer following NUR 577 but must be completed before **September 15** of the student's final year in the program.

NUR 578- DNP Practicum III

Upon successful completion of the DNP project proposal defense, the student submits the IRB proposal to the URM RSRB as well as any other IRB of a non-URMC institution, if appropriate, in advance of project implementation. DNP projects being conducted at SMH will also need to be reviewed by SMH's Nursing Practice Project Review Committee as well as have the support of practice leadership (if appropriate). (See previous description of approval process.)

Pending IRB approval and support from practice leaders, the DNP project is implemented and evaluated in the final year of the program under the guidance of the DNP project chair/committee. The project culminates in the final oral defense of the project, no later than **April 15th of the last semester** and completion of a cumulative scholarly paper from which a publishable manuscript will be written based on the manuscript requirements for the student's designated journal. A specific rubric is utilized to evaluate the final defense presentation (Appendix).

DNP Project Forms and Resources

Practicum Course(s)	Source	Location
I,II,III	Semester Practicum Objectives Form	DNP office
I,II,III	Excel DNP Practicum Log	DNP office
I,II,III	DNP Clinical Hours Documentation Form (completed by DNP Practicum course faculty)	DNP office
I,II,III	Cumulative Scholarly Paper Guidelines	DNP office
II,III	Project Management Table	DNP office
I	Committee Chair Selection Form	DNP office
II	DNP Committee Formation Form	DNP office
II	DNP Project Proposal Defense Rubric	DNP office
II	DNP Project Proposal Defense Summary Form	DNP office
II	IRB Checklist for DNP Projects	DNP office
II	IRB Application Exemplar	DNP office
III	DNP Project Final Defense Rubric	DNP office
III	DNP Project Final Sign Off Form	DNP office

(Forms can be found in handbook appendix)

VI. Student and DNP Committee Responsibilities during DNP Practicum Courses

Course	Activities		Outcome
	Student	Chair	
NUR 576	<ul style="list-style-type: none"> Complete Literature Synthesis and Introduction section of Cumulative Scholarly Paper (CSP). Obtain CITI certification. Identify DNP Project Committee Chair by end of course; submit chair selection form to DNP AA. Invite chair to final class presentation Review completed semester objectives and clinical log with chair at end of the semester prior to Bb submission to 576 faculty 	<ul style="list-style-type: none"> Meet with student to review area of interest/potential project. Become acquainted with DNP Project guidelines. Attend final class presentation. Discuss DNP Day presentation. 	<ul style="list-style-type: none"> Literature synthesis paper (introduction section CSP guidelines). PPT presentation (ROL and conceptual framework). DNP committee chair becomes student advisor.
NUR 577	<ul style="list-style-type: none"> Review individual semester objectives with chair at beginning of semester. Identify remaining committee members; submit DNP committee formation form to DNP AA. Schedule regular meetings with chair +/- committee. Work with chair/course faculty to refine and finalize practice inquiry question and project design. Develop project methods; (design/data management plan), finalize theoretical framework, and review working drafts with chair Update literature review as necessary to support ongoing project development. Open ROSS account. Obtain project support letters from practice/administrative leaders Begin SMH Redcap approval process Review completed semester objectives and clinical log with chair at end of the semester prior to Bb submission to 577 course faculty. 	<ul style="list-style-type: none"> Review/approve semester objectives and clinical log. Approve DNP project; provide ongoing input and guidance related to project design and CSP drafts. Provide input and guidance for selection of theoretical framework. Maintain regular communication with student. Work with student on Redcap application 	<ul style="list-style-type: none"> Finalization of DNP project and committee. Completion of methods section of CSP (Intro/methods). Completion of PPT (intro/methods). Creation of ROSS account. Substantive progress/completion of SMH nursing practice Redcap approval process
NUR 578 summer	<ul style="list-style-type: none"> Review semester objectives with chair at beginning of semester. Schedule Project Proposal Defense with DNP AA; distribute CSP and PPT to participants one week in advance. Work collaboratively with chair on IRB application. Submit RedCap application for Nursing Practice Review -if not completed in 577. Review completed semester objectives and clinical log with chair at end of the semester prior to Bb submission to 578 course faculty. 	<ul style="list-style-type: none"> Review/approve objectives and clinical log at beginning/end of semester. Determine readiness for proposal defense; confirm distribution of materials one week in advance of proposal defense. Oversee proposal defense; summarize committee recommendations; guide remediation/revision efforts if needed. Work collaboratively on IRB application; approve/submit final application as PI. Work collaboratively on RedCap application; +/- attend nursing practice committee review of project. 	<ul style="list-style-type: none"> Successful completion of proposal defense by 9/15. IRB approval Nursing Practice approval (if appropriate) Project implementation
NUR 578 fall	<ul style="list-style-type: none"> Review semester objectives with chair at beginning of semester. Complete proposal defense by 9/15; obtain IRB/Nursing Practice approval. Implement DNP project. Review completed objectives and clinical log with chair at end of the semester prior to Bb submission to 578 course faculty. 	<ul style="list-style-type: none"> Review/approve semester objectives and clinical log at beginning/end of semester. Work collaboratively on IRB application; approve/submit final application as PI. Work collaboratively on RedCap application; +/- attend nursing practice review of project. Maintain ongoing communication during project implementation. 	<ul style="list-style-type: none"> Successful completion of proposal defense by 9/15^h IRB approval Nursing Practice approval (if appropriate) Project implementation
NUR 578 spring	<ul style="list-style-type: none"> Review semester objectives with chair at beginning of semester. Complete project implementation and analyze results. Disseminate findings with project setting. Complete CSP Prepare for final defense; distribute materials one week in advance. Identify journal; develop manuscript. Review completed objectives and clinical log with chair at end of the semester prior to Bb submission to 578 course faculty. 	<ul style="list-style-type: none"> Review/approve semester objectives and clinical log at beginning/end of semester. Provide input and guidance for interpretation of project results and completion of CSP. Determine readiness for final defense; confirm distribution of materials one week in advance. Oversee final defense; complete project sign off form. Assist with journal selection and manuscript development. Confirm completion of graduation requirements 	<ul style="list-style-type: none"> Project completion and analysis of results Completion of CSP Manuscript/dissemination plan Successful oral defense by 4/15 Completion of 1000 post BS clinical hours

	<ul style="list-style-type: none"> • Confirm completion of graduation requirements: 1000 post-BS clinical hours, successful oral defense of DNP project, submission of CSP signed off by chair, approved dissemination plan (by chair) 		
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A. Role of DNP Committee Chair

1. Mentors student throughout the DNP Project Process: project development, preparation of the DNP proposal, project implementation and evaluation, cumulative scholarly paper and dissemination plans (manuscript preparation, other)
 - a. committee chairs will have Bb access in NUR 576, 577, and 578.
 - b. review guidelines for cumulative scholarly paper
 - c. mentor student for DNP Day presentation
2. Reviews and approve individual semester objectives, DNP practicum activities, and DNP clinical hours (DNP log) for each DNP practicum course (I, II, III).
3. Collaborates with student to schedule ongoing committee meetings to facilitate project development, project proposal defense date, and final project defense date.
4. Communicates effectively with DNP project committee members and DNP practicum faculty.
5. Provides ongoing feedback to student on written drafts of scholarly paper in a timely manner.
6. Oversees IRB application process; serve as PI or Co-PI on student's DNP project ,
7. Oversees SMH Nursing Practice Review (if appropriate) of DNP project proposal.
8. Leads project proposal defense and synthesizes proposal defense feedback, supports student completion of needed project revisions ; leads final defense proceedings and ensures that all revisions are completed; provides final sign off following completion of DNP project and verifies satisfactory completion of graduation requirements

B. Role of DNP Committee Members

1. Work collaboratively with student/chair and other committee member(s) to support DNP project development
2. Critique drafts of the developing DNP Project proposal.
3. Participate in committee review and approval of the oral project proposal and final defense presentations.
4. Provide feedback to student on written drafts of cumulative scholarly paper in a timely manner.
5. Communicate concerns to student and committee chair in a timely manner.

C. Role of DNP Student:

1. Develops a scholarly project based on an identified area of need within a specialized area of practice under the guidance of a DNP project committee during DNP Practicum courses.
2. Maintains consistent and effective communication with committee chair; establishes project timeline and reviews progress toward goals with committee chair on an ongoing basis.
3. Collaborates with committee chair to schedule ongoing committee meetings as well as determines date for proposal defense and final project defense.
4. Generates and submits all forms as required to DNP program administrative assistant.

VII. Annual DNP Project Day

Each January, a day-long event is held on campus to give each student an opportunity to present a podium presentation or poster, to fellow students, faculty, and clinicians followed by discussion and critique. This day of scholarship provides a forum for exchange of ideas and suggestions to strengthen students' practice innovation proposals by creating a conference-like venue to develop presentation and critique skills. This annual event encourages students to work with their committee chairs/committees to plan their presentations, showcase their areas of student clinical interest for URM staff, SON faculty and fellow students. The DNP Program Office will notify students with the date at the beginning of the academic year and periodically, thereafter.

Benefits of DNP Day specifically for students are:

1. Students have a target date by which to pull together a summary of their progress in planning and/or implementing their projects.
2. Students work closely with their committee chairs to develop their presentation, which moves both of their thinking forward.
3. Advisors and students hear other practitioner's and faculty's thoughts on the students' plans.
4. Students get input from and exposure to a wide range of clinicians and faculty to consult or add to their committees.
5. Students receive feedback from their colleagues in other cohorts.
6. Clinicians and faculty are brought together in dialogue and can role model effective critique.

Participation is open to any DNP student but is expected for students o enrolled in practicum courses. Advisors/Chairs are also expected to attend at least their advisee's presentation and all URMIC clinicians, faculty and students are welcome. The day includes networking time and a luncheon.

Podium presentations (slide presentation) will be given by students who are developing their projects in the DNP practicum courses (DNP Practicum I,II,III).

1. **Students who have completed NUR 576 –DNP I-** will present a summary of their literature synthesis describing a clinical problem and its significance, a focused clinical question with possible project design and potential conceptual/theoretical framework. This will be a **15-minute** podium presentation with an additional 5 minute question and answer period.
2. **Students who are currently enrolled in NUR 578–DNP III** should include a complete project design, including a conceptual/theoretical framework, implementation procedures, as well as a thoughtful evaluation plan. They may also include any preliminary project results in their presentation if available. This will be a **25 minute** podium presentation with an additional 5 minute question and answer period.

Tips for preparing for DNP Day. It is expected that some points of your DNP project plan are not yet finalized. The earlier you are in the program, the less you are expected to have your project plan developed. The purpose of DNP day is to advance your scholarly thinking and receive input from your peers, clinicians and faculty.

If you are giving a presentation, plan on about one slide per minute of your talk. The area that usually needs to be succinctly summarized is the literature synthesis—the maximum would be 2-3 slides. Use headings like: **Background & Significance, Literature Synthesis, Local Problem, Conceptual/Theoretical Framework, Project Aim(s) and Objectives, Project Design, and Data Management Plan.** Slide presentations should be emailed to the DNP program AA several days in advance. Do not use full sentences on the slides—just phrases (key concepts/main points) that you will then expand upon.

Do not prepare a script to read. It is much more effective to summarize the content on the slide in your spoken language rather than your written language. Practice your presentation at a normal pace to be sure you can complete the presentation in the allotted timeframe, including acknowledgments and side comments.. The timekeeper will cut off students and faculty who go beyond the time limits for the presentation and the critique.

Presentation content should contain appropriate citations on each slide using APA format, however, **complete reference lists do not need to be included at the end of the presentation.** You should have a copy of your cumulative scholarly paper with you for references if necessary.

Meet with your chair/advisor to plan your presentation/poster

This is essential for these reasons:

1. Your advisor provides ongoing guidance for your project development and, therefore, should be well versed and up-to-date with latest project developments.
2. Your advisor can provide additional support and clarification of project status while answering audience questions.
3. Practicing, your presentation in front of your advisor is the best simulation of what it will feel like to give it in front of a wider audience.

You should plan to attend the full day. You are each other's main and supportive audience, and it will be instructive to hear what colleagues from other cohorts are planning for their projects. Chairs know that they are expected to be there for your presentation or make other arrangements for someone to support you and take notes in their absence. Other faculty and clinicians will come in and out, like in a real clinical or research conference, attending the topics they are interested in.

VIII. Administrative Support for the DNP Program

A. Administrative responsibility for DNP program.

Administrative leadership for SON DNP program rests with the DNP Program Director, who also is the current Associate Dean for Education and Student Affairs, who in turn reports to the Dean of the School of Nursing. The DNP program is subject to all the rules and regulations for graduate study within the SON and University of Rochester.

B. **DNP Subcommittee – Membership and responsibilities**

DNP curricula, courses, policies, and procedures are developed, guided, and evaluated by a DNP Subcommittee of the Curriculum Committee. DNP subcommittee membership includes: (a.) 2 elected faculty with experience in the program who serve 2 year terms, (b) CNL specialty program director (c) course faculty for DNP practicum courses, (d) DNP student representatives appointed by the DNP Program Director in collaboration with the Associate Dean for Education and Student Affairs (non-voting position). The DNP Program Director chairs the DNP Subcommittee, and the Associate Dean for Education and Student Affairs is an *ex officio* member. The Master's Program Director is a standing member of the DNP Subcommittee. In addition to the standing members, faculty involved with course work under revision will be invited to participate in DNP subcommittee activities during the academic year.

This committee makes policy and procedural recommendations about the program curriculum, admissions, and requirements for progression and academic performance; responds to student issues and concerns; and makes recommendations on individual student admission and progression. The meetings consist of an open portion with participation of the student representative, and a closed portion held without the student representative in which individual student progression issues and applicants are discussed.

Working within existing University and School of Nursing policies, the DNP Subcommittee reviews new DNP course offerings and revisions of existing course objectives, course descriptions, titles, prerequisite course work, course offerings, and course content and makes recommendations to the Curriculum Committee. The DNP Subcommittee recommends policy regarding student admission and progression and forwards recommendations to the Student Affairs Committee.

For administration of the master's coursework components of the DNP program, the DNP Program Director and the DNP Subcommittee work in collaboration with the Master's Program Director and the Master's Subcommittee.

C. DNP Office Staff support.

The DNP program office is located in HWH 4w-122A with an Administrative Assistant (AA) available from 8 am – 4:30 pm daily. Admitted students should contact the DNP Program AA, Denise Harris (Wofford), at (585) 275-5121 to set up a meeting to review administrative support information. The DNP program AA manages student communication, and maintains program materials including: chair/committee formation forms, DNP Day materials, DNP project proposal/defense materials, practicum objectives/ log. The AA also provides supplies for the students' shared space and access to the DNP student shared offices (2) 4w110 & 4w111. Arrangements for access to the office(s) should be made through Denise Harris (Wofford).

D. Faculty Advisors and Program Planning.

The DNP Program Director assigns each student an academic advisor soon after admission. A program of study (degree plan) should be developed in conjunction with the advisor before the first semester of study and submitted to the registrar through SON DB. Any changes in the program of study should be updated in SON DB degree plan. Students should plan to meet with their advisors prior to the start of every semester to ensure that degree plans remain current and to provide ongoing review/guidance of planned program of study.

Students who have not yet started practicum courses should meet at least once a semester with their advisor, at the student's initiation, to discuss academic progress with their advisors including the exploration of potential DNP project ideas, practice opportunities such as interdisciplinary seminars, conferences, and collaborations, and resources available for academic and personal support. Students enrolled in Practicum courses should meet regularly with their DNP project chair and full committee as needed by mutual agreement.

If a student desires a change in advisor during the program, or the advisor leaves the school or becomes unable to continue, the student should discuss alternatives with the current advisor and DNP Program Director. When a change is approved, the DNP program AA will send a letter on behalf of the DNP program director and the Associate Dean for Education and Student Affairs to the student, old advisor, new advisor, and the office of Student Affairs notifying them of the change. Once the student forms her/his DNP project committee, the chairperson of the committee will serve as the student's advisor.

E. University ID card.

Your ID card not only identifies you as a legitimate presence in the School and Medical Center, store funds for photocopying, sign out library books, and other purposes. See Student Handbook.

F. University parking

Once you have your ID card, you may go to the parking office and get a parking permit. The Parking Management Center, located at 70 Goler House, is [open by appointment only](#), Monday through Friday. For more information contact parking@rochester.edu or (585) 275-4524. Do not park in the small HWH parking lot at any time. UR Parking Authority regularly tickets cars without HWH lot stickers.

G. Student Work Space and Equipment.

Doctoral study offices. The School of Nursing has dedicated office space for DNP students. Please see the DNP AA, Denise Wofford who will assist with accessing shared office space. Since the two dedicated DNP offices may be used by several students, students are reminded to maintain security of data files, be sure to close all programs, and properly shut down computer equipment. In addition, there is a kitchen for doctoral students in the 4th floor doctoral studies area. Students are asked to keep kitchen areas clean to prevent pest infestations.

H. Computer access to library and internet resources and email.

Each student will receive a user name and password, a university email account, and personal electronic storage space on the shared "H-drive" server. All campus internet resources can be accessed remotely (including from home with your own internet service provider). The SON's Information Systems department (x5-8883) assigns these resources and can provide instructions for access from campus and home

You should check your university email daily for any important messages from the Program Director and/or administrators.

I. Printer access

Students are encouraged to obtain electronic copies of scholarly materials whenever possible and similarly to submit their working drafts electronically for review whenever possible to reduce waste and excessive expense. Due to the extremely heavy use of the doctoral area printer and materials, a printing fee may be instituted at any point to offset the increasing cost to the school for these resources. Please think before you print. Work on becoming comfortable skimming your search results and electronic articles on the computer screen. Use the printer only when it is necessary to print a hard copy.

J. Photocopying

Copiers are available for student use in Helen Wood Hall and Miner Library. All copiers require a pre-paid copy card, purchased in the Miner Library. The UR ID card also may be used to store funds for copying.

K. Keys

If you lose or do not return a key that is assigned to you, you will incur a charge of \$15 or the current cost to replace that key.

L. Campus security

The Advisory Committee on Campus Safety will provide upon request all campus crime statistics as reported to the United States Department of Education (USDOE). The statistics are available from the USDOE at <http://ope.ed.gov/security/> and from the University at <http://www.security.rochester.edu/>. You can also obtain a hard copy of the most recent report, *Think Safe*, by contacting University Security Services at 585-275-3340.

IX Registration Procedures and Requirements

Course registration. Course registration is generally completed in April for the summer semester, August for the fall semester, and November for the spring semester. There is a fee for late registration. Late registration dates are posted by the Registrar.

Fulltime and part-time status. Full-time status requires registration for 12 or more credits per semester, UNLESS the

student is also involved in lab or clinical experiences, research or teaching assistantships, or DNP project credits, in which case 9 credits constitutes full-time enrollment. Full-time status carries with it several fees that are not required of part-time students, including health and activity fees, and health insurance unless the student waives this coverage. Proof of alternative insurance coverage is needed each year to waive additional University student health insurance fees.

X Policies on Good Academic Standing and Progression in the Program

Unless specified otherwise, all policies and procedures for both the Master's program and the DNP program apply to post-baccalaureate DNP students.

Professional and academic honesty. Academic and professional integrity are of paramount importance at the University and in professional life. Students are obligated to know the expectations for academic integrity upon entry into the program and will be held to these expectations in all academic activities. Please become familiar with this section in the School of Nursing Student Handbook.

Satisfactory academic performance. A satisfactory grade is B- or higher. Minimum grades for courses or clinical work are "B-" or "S". The student will be required to repeat the course for final grades below B-. Any grade below a B- will result in a review of the student's academic performance by the DNP Subcommittee and the Student Affairs Committee, and warrants academic probation. Probation status will be removed when the student receives grades of B- or higher for 9 credit hours of subsequent graduate study. If a DNP student is in the MS portion of their program, both MS and DNP program subcommittees review the academic performance. A second grade below B- may result in a suspension from the program, or separation (involuntary withdrawal) from the program. The DNP Subcommittee (and MS Subcommittee if relevant) will make a recommendation to the Student Affairs Committee, which will base a decision on the student's total academic performance.

If a DNP student receives a grade of E or W/E (failing at time of withdrawal) in a course, the DNP Subcommittee will make one of two recommendations to the Student Affairs Committee. The recommendations will be to either (a) allow the student to repeat the course (the next time it is offered) or (b) separate the student from the program. Re-application is permitted after involuntary separation, but readmission is unlikely unless substantial change in academic approach can be demonstrated.

Please note that failure to maintain satisfactory academic progress may result in the loss of eligibility for federal, state, and/or institutional aid. We recommend that you work closely with your advisor and course instructors to address academic concerns as soon as possible to optimize academic success.

Grades of "Incomplete". A student who anticipates difficulty in completing the requirements for a course within the semester can request from the course instructor an extension of time to complete the course requirements prior to the course deadlines. Granting of an incomplete contract is at the discretion of the course instructor. An incomplete contract includes the date by which all work will be completed and must be signed by the instructor and Program Director. The instructor will enter a grade of "I" for the semester. When the work is completed, the grade will be changed to IA, IB, etc., indicating that an incomplete grade has been resolved.

If the student anticipates being unable to meet a previously negotiated due date, a *Request for Extension on Previous Incomplete Contract Form* may be submitted to the course instructor.. An incomplete contract may not be granted in lieu of a failing grade.

Extension of time to complete the DNP program. Students have 7 years after matriculation with a BS degree or 5 years after entry with an MS degree to complete the DNP program.

If the DNP project defense is not completed by the end of the final allotted year, a letter requesting an extension of time to complete the program must be submitted to the DNP Program Director. Requests for extension should describe progress in meeting degree requirements and the reason for the need for an extension, as well as a detailed plan and timetable for completing degree requirements. The extension request should be co-signed or accompanied by a supporting letter or email from the student's committee chair. The student must remain enrolled in at least one credit of NUR 578 until project completion.

All requests for extension are reviewed by the DNP Subcommittee and are subject to approval by the Associate Dean for Education and Student Affairs. The approved extension duration will vary depending on the individual student's situation. Requests for additional extensions are contingent upon continuous progress toward degree completion in accordance with the student's detailed projected plan for completion. Failure to meet milestones over several program extensions can be cause for separation from the program.

Leaves of Absence. Leave time may be granted for personal or professional reasons and is limited to one to two (1-2) semesters. If a student does not foresee being able to return to the program in one year, voluntary withdrawal (see below) is the better option. Time spent on a leave of absence is counted toward the time limit for completion of degree requirements.

A leave of absence requires completion of a Change in Status form and approval of the student's advisor and the DNP Program Director. If approved, the Registrar will register the student for NUR 985; the student will be expected to pay the associated fee. The fee is waived if the student provides documentation of registration at another university for coursework to be applied to the University of Rochester degree. Students registered for NUR 985 are not eligible for student health insurance and should explore the impact on loan deferment.

Voluntary and involuntary withdrawal. Voluntary withdrawal is an appropriate action if a student feels unable to achieve satisfactory performance in the DNP program and has exhausted the option for a leave of absence or does not foresee being able to return to satisfactory performance within one year. The student may reapply to the program after withdrawal. The application for re-admission will be considered with the student's prior academic performance taken into account.

Involuntary withdrawal, or administrative separation, may be incurred as a result of persistent failure to achieve satisfactory academic performance or progression based on program requirements listed above, or as a result of a serious violation of School or University policy. Please see the SON Student Handbook for further information.

Readmission to the DNP program. An applicant's readiness for readmission is evaluated on an individual basis, using criteria and materials that the Program Director in consultation with other faculty determines to be relevant to that applicant's situation. These may include evidence of scholarly progression in the interim, documentation of improved study skills, a revised professional goal statement, a literature review on the selected clinical topic, a proposal outlining a clinical innovation, or other materials. At least one interview will also be required. The requested documentation should demonstrate the applicant's readiness to return. Once a student is readmitted, courses taken more than 5 years prior to the application for readmission will be evaluated to determine whether they can still be counted toward the degree.

XI Resources to Enhance Your DNP Learning Experience

Employee benefits. Students (both fulltime and part-time) who are hospital employees at SMH or elsewhere and who are eligible for tuition benefits typically use these benefits toward tuition costs. The website for SMH benefit information is <http://www.rochester.edu/working/hr/benefits/tuition/>.

Other funding sources. The DNP program strongly supports and facilitates student applications for funding for DNP study. External funding applications should be reviewed with the student's advisor and the DNP Program Director prior to submission. Students are also encouraged to contact the Student Affairs office to guide them through the financial aid application process. In addition to helping the student submit the strongest possible application, faculty involvement is important because there may be university regulations that affect the processing of some applications.

XII Learning Opportunities to Enrich your Academic Clinical Training Experience

Center for Research Support. The SON Center for Research Support -formerly the Center for Research and Evidence-Based Practice (CREP) - established in 1995, offers comprehensive support to School of Nursing faculty and students, in order to:

- facilitate the research and scholarly development of the School of Nursing faculty and their intra- and interdisciplinary collaborators.
- provide training opportunities for pre- and postdoctoral fellows in all phases of the research process.
- advance research dissemination and evidence-based practice.
- Provide support to the Centers of Excellence
 - Elaine Hubbard Center for Nursing Research on Aging
 - Center for Research Implementation and Translation

The center provides support from two groups at the School of Nursing:

Research Facilitation Group

These are a comprehensive, vertically integrated set of services designed to speed research development by making experts and resources readily accessible to the investigator at each phase of the research process.

- **Consultation Design:** mentorship, biostatistician consultation, sample size determination, design and methods, proposal development
- **Project Management:** recruitment, IRB support, management of Information system (MIS)
- **Technical Support:** instrument development, database design, data management/processing, computer assisted data gathering (QDS), on line data collection, development of observational coding systems, variable creation and psychometric evaluation
- **Data Gathering:** interviewer training, data collection, focus groups

Clinical and Research Grand Rounds. The Center for Research Support sponsors regular research forums and development sessions for the presentation and sharing of research methods, conceptualization, study design and findings. The purpose of these forums is to enhance community collaboration pertaining to ongoing research and methodological issues as well as to enhance knowledge development in conducting research and utilizing research results. Announcement of meeting times and place appear in email communication to the SON. Faculty, doctoral students, post-doctoral fellows, clinical nurses and other interested persons are encouraged to present and attend. Contact the Center for Research Support at (585) 275- to obtain a schedule.

Sovie Institute for Advanced Practice Innovation and Scholarship

In recognition of this highly desirable resource and the need to assure that APNs also receive the mentoring and support needed to achieve professional goals, SMH allocated financial and personnel resources toward the creation of the Sovie Institute for Advanced Practice Innovation and Scholarship. The Center, which opened in November 2006, is named in honor of Margaret Sovie, PhD, RN, FAAN, the former Director of Nursing at SMH and a pioneer in the establishment of advanced nursing practice in acute care.

The Sovie Institute is located in SMH. The Institute has four functional units that focus on regulatory and credentialing needs, education, professional development and coaching, research and evidence-based practice and practice model innovation.

The *education core* focuses on the educational and professional development needs of APNs. The Institute staff is responsible for professional development and coaching and works closely with Nursing Practice's Leadership Institute to facilitate professional development and coaching initiatives. Some of these activities include individual career planning, communication skills and team building, assisting with publications and presentations, and mentoring programs.

The *regulatory core* focuses on credentialing, certification, licensure and various other regulatory requirements.. A direct link has been established with the Medical Staff Office to assure that all credentialing procedures are consistent across all areas of the Medical Center

The *practice development and innovation functional unit* is responsible for working with individual practices to identify areas in which NP productivity, workload, and outcomes can be improved. Through this core, innovative practice models are identified and benchmarked within SMH and outside SMH to assure that NP practice is current and state-of-the-art. Activities related to research and evidence-based practice fall within the practice development and innovation unit. The Institute aligns its activities closely with the Clinical Nursing Research Center and others in the Medical Center that focus on research and evidence-based practice (EBP) initiatives.

Expertise concerning certification has been developed among Institute staff to assure that the Institute can serve as a resource for nurses who are seeking initial certification or obtaining recertification. Recertification notices are sent to APNs and information available through the School of Nursing is updated to assure that all required information is obtained. The Institute also acts as a resource for information pertaining to state licensure, prescriptive authority and drug enforcement administration (DEA) numbers.

XIII Building Your Scholarly Career: Presentations, Publications, and Funding

The Importance of Scholarly Productivity. The most significant professional contributions of DNP-prepared individuals are the results of their clinical scholarly work- disseminated in presentations and publications- which become part of the scientific foundation for clinical practice. Typically, the work is first presented at a professional conference to gather feedback from peers and then submitted for publication in a peer-reviewed journal. Scholarly productivity of students during and after completion of the program is one of the main measures of quality in doctoral programs and is tracked by the SON.

A *curriculum vitae*, or CV, is a scholar's record of all scholarly work, and takes the place of a resume as a career-long record of achievements. During the DNP program, students should begin building their CVs and establishing track

records as active clinical scholars. The main activities to focus on are presentations, publications, policy initiatives, leadership (professional/academic) and service (committees/community/professional/administrative). Students also are encouraged to prepare presentations and manuscripts for publication from their course assignments, including integrative literature reviews, innovative approaches to clinical problems including program evaluation, and position papers on practice and/or policy issues. Faculty can provide guidance as to which work is suitable for further development into a presentation or manuscript for publication.

Grant funding can be sought for scholarship support of DNP study, and for completion of the DNP project. Grant funding is awarded by professional associations, such as AACN charitable foundations, local organizations such as churches and community groups, state government agencies such as the Department of Health or the Office of Mental Health, and the offices and institutes of NIH. Even small awards are considered important achievements for DNP students. Most require an application, sometimes quite detailed, and most accept applications only a few times each year. Students are encouraged to seek out these opportunities in advance of finalizing the DNP project proposal, so that deadlines can be anticipated.

The DNP Office keeps track of students' scholarly achievements for program evaluation as well as to support requests for funding for scholarly work. Please notify the program director and the program office when you have a paper accepted for presentation or publication, and if you are awarded any grant or scholarship funding.

Authorship of Publications. All individuals contributing to a manuscript for publication should be acknowledged. Major conceptual and writing contributions must be recognized by inclusion of the individual's name as an author. For clinical or research publications, substantial input to the formulation of the problem, creation of the design or intervention protocol, organization and conduct of the analyses, or interpretation of the results; or writing of a major portion of the publication, constitute such a contribution.

Authorship (and order of authors) for DNP scholarly work should be mutually agreed to by the student, committee chair, members and others in advance of manuscript preparation,

Accepting authorship for a publication entails accepting responsibility for the accuracy, originality, proper acknowledgement, and ethical implications of the content of the publication.

Acknowledgments on Student-Authored Publications. Descriptions of contributions that do not necessarily warrant authorship should be acknowledged in the text or a footnote. Such contributions may include data collection, coding or entry, running requested analyses. Manuscripts bearing identification of the UR should be reviewed with a member of the faculty prior to submission.

Students whose work is supported by external funding either to themselves or mentors should and in the case of federal funding must acknowledge that support using approved language and notify the publisher on submission that the work if published must be submitted to the federal public access source according to federal requirements (if NIH-funded).

XIV DNP Student Handbook Appendices

Forms and Resources:

1. DNP Practicum objectives grid (individual semester objectives for corresponding DNP practicum course)
 2. DNP Practicum Hours spreadsheet (email Denise Wofford to obtain formatted log).
 3. Clinical Hours Documentation Form DNP I, DNP II, DNP III
 4. Cumulative Scholarly Paper guidelines
 5. DNP Project Senior Advisor Form
 6. DNP Project Committee Formation Form
 7. DNP Project Proposal rubric
 8. DNP Project Proposal Defense Summary form
 9. DNP Final Project rubric
 10. DNP Project Sign Off Form
- IRB exempt application exemplar (email Denise Wofford to obtain formatted log)



University of Rochester School of Nursing
 NUR 576 Semester Practicum Objectives

Name
 Fall, Year



112 DNP Practicum Hours will be completed to achieve the following objectives:

Objective	Proposed Activities	DNP Essential Domain	Completed Activities



University of Rochester School of Nursing

NUR 577 Semester Practicum Objectives

Student Name

Spring, Year

112 DNP Practicum Hours will be completed to achieve the following objectives:

Objective	Proposed Activities	DNP Essential	Completed Activities

Please check to confirm: My DNP Project committee chair has reviewed and approved these objectives and has reviewed my DNP Practicum II log.



University of Rochester School of Nursing

NUR 578 Semester Practicum Objectives

Student Name

Semester, Year

____ DNP practicum hours will be completed to achieve the following objectives:

Objective	Proposed Activities	DNP Essential	Completed Activities

Please check to confirm: My DNP Project committee chair has reviewed and approved these objectives and has reviewed my Practicum III Log.



**University of Rochester School of Nursing
Doctor of Nursing Practice Program
DNP Practicum Hours Documentation**

Course: NUR 576

DNP Practicum I

Semester:

Course Faculty:

Student's Name:

This confirms that _____ completed 112 hours of clinical experience in fulfillment of the clinical requirements for NUR 576:

Course faculty signature

Date

_____ hours to be carried over to _____



**University of Rochester School of Nursing
Doctor of Nursing Practice Program
DNP Practicum Hours Documentation**

Course: NUR 577 DNP Practicum II Semester:

Course Faculty:

Student's Name:

This confirms that _____ completed 112 hours of clinical experience in fulfillment of the clinical requirements for NUR 577:

Course faculty signature

Date

_____ hours to be carried over to _____



**University of Rochester School of Nursing
Doctor of Nursing Practice Program
DNP Practicum Hours Documentation**

Course: NUR 578 DNP Practicum III Semester:

Course Faculty:

Student's Name:

This confirms that _____ completed _____ hours of clinical experience in fulfillment of the clinical requirements for NUR 578:

Course faculty signature

Date

_____ hours to be carried over to _____

DNP Project Cumulative Scholarly Paper Guidelines 2018

Course	Section	Description
576	Title	Describes the project, population and setting.
578	Abstract	Summarizes key project information in one paragraph (250 words) Project topic, Methods, Results, Conclusions.
	INTRODUCTION	<i>Why did you start?</i>
576	Introduction to Problem	Why did you select this area of interest for your scholarly project? (frames the clinical issue being studied).
576	Background/Significance	a. What are the important foundational concepts/areas that need to be discussed? What is the significance of the problem to: patients, the delivery and outcomes of care, nursing, & healthcare systems?
576 (all)	Literature Synthesis	Summarize a synthesized review of the literature about the problem of concern: i. Review to include: Methods of Review, Appraisal of the Evidence, Discussion (strengths, weaknesses, gaps, and limitations, opportunities (make the case for the proposed project).
576	Theoretical Framework (can be used to organize literature synthesis, project design, or implementation)	a. Identify the theory//model/framework to guide/inform project development and/or project implementation. b. Discuss major theoretical concepts and potential applicability to DNP project. c. Explain how the theory/model will be used in your scholarly project. i. include diagram or schematic representation of theory/framework in appendix.
576	Local Problem	Briefly, describe the nature, magnitude, and severity of the problem in the project setting (identifies project's purpose)
577	Inquiry Question	State precisely the primary question and any secondary questions that the intervention is being designed to answer
577	METHODS	<i>What did you do?</i>
577	Aim(s), & Objectives of Scholarly Project	a. Describe overall aim(s) of intervention (most projects will have one overarching aim). b. Identify specific project objectives that are explicitly related to project aim(s): (Objectives are measurable actions which support project aim; use SMART format: specific, measurable, attainable, relevant, time-bound).
577	Context	a. Describe the project setting and population. b. Describe data (quantitative/qualitative) which provide project rationale or pre-intervention baseline (organizational/needs assessment, survey, focus group, SWOT, gap analysis etc). c. Identify project facilitators (support, advocacy) and potential barriers. d. Describe the role of interprofessional collaboration (IPC) in project design/implementation. e. Describe how the TMF was used to develop the intervention
577	Project Design & Methods	a. Identify the study design. b. Participants: Inclusion/exclusion criteria and recruitment plan. c. Describe the intervention in sufficient detail that others could reproduce it; include diagrams/charts in appendix as needed. d. If intervention includes an educational component, please include education plan: content description/outline, participant learning outcomes, length of program, method of delivery, evaluation/participant feedback materials.) e. Discuss sustainability considerations in project design. f. Discuss application of the TMF to project implementation. i. Include diagram/schematic integrating the TMF into the DNP project e. Provide project timeline in appendix
577	Methods of Evaluation (Measures)	a. Identify measures chosen for studying processes and outcomes of the intervention(s), including rationale for choosing them. b. Describe data collection tools and instruments used in intervention; include a discussion of psychometric properties (such as reliability and validity) as appropriate. c. Include project measures table in appendix (PMAT?)
	Data Management & Security	a. Describe aspects of design related to maintaining data integrity and security during project implementation. b. Who will collect data? Who will have access to study data (confidentiality)? c. Who will perform data analysis? d. How/where will data be stored?
577	Data Analysis Plan	a. Describe methods used to evaluate project data. b. Specify which methods of analysis will be used for each project outcome.
577	Ethical issues	a. Describe ethical aspects of project implementation b. Address URM RSRB approval plan and outside IRB application process if applicable. c. Include specific department/unit approval process.
577	Resources/Budget	a. Include project budget and projected sustainability budget. b. Describe funding sources, if any, and role of the funding organization in design, implementation, interpretation, and publication of study.

578	RESULTS	<i>How did project implementation go? What did you find?</i>
	Outcomes	<p>a. Implementation process:</p> <ul style="list-style-type: none"> i. Explain the actual course of events related to project implementation. ii. Describe how the actual plan compared to initial plan (implementation fidelity), any unintended consequences, and most important lessons learned. <p>b. Analysis of project outcome data:</p> <ul style="list-style-type: none"> i. Report findings for all process and outcome measures (quantitative/qualitative). ii. Include summary of any missing data. (do not restate if unchanged, summarize events) iii. Include well-designed tables and graphs that support the discussion of findings and clearly display data.
578	DISCUSSION	<i>What do the findings mean?</i>
	Interpretation	<p>a. Summarize key findings:</p> <ul style="list-style-type: none"> i. Discuss project impact on individuals/system. ii. Identify the most important successes and difficulties in implementation. iii. Explore possible reasons for differences between observed and expected outcomes, if any. <p>b. Compare project/study results with relevant findings of others' work.</p> <p>c. Discuss the usefulness of the theoretical framework to project implementation.</p>
	Limitations	<p>a. Highlight project limitations.</p> <p>b. Identify efforts made to minimize and adjust for limitations (if applicable).</p>
	Implications	<p>a. Recommendations for Practice</p> <ul style="list-style-type: none"> i. Discuss the significance of the project to your setting. Will change be sustainable? ii. Identify potential intervention modifications to improve future performance (iterative change). iii. Review actual financial cost of the intervention and future sustainability. iv. Consider whether the intervention could be effective/useful in other settings (transferability). v. Explore potential project implications at the individual, unit, system, and organizational levels if appropriate. <p>b. Recommendations for Future Practice Inquiry</p> <ul style="list-style-type: none"> i. Consider opportunities for interdisciplinary and intradisciplinary collaboration related to area of interest. ii. Identify potential areas of future scientific/practice inquiry. iv. Discuss plans to disseminate project findings (within setting, institution, publication, presentation) <p>c. Recommendations for Health Policy</p> <ul style="list-style-type: none"> i. Identify relevant healthcare policy/regulatory issues related to project and or area of interest. ii. Discuss opportunities for policy development/reform at the unit, system, local, regional, and national levels as appropriate.
578	Conclusion	Consider overall practical usefulness (impact) of the intervention and contribution to setting. What are the next steps?

* Note Scholarly project guidelines. adapted from "Publication Guidelines for Quality Improvement in Health Care: Evolution of the SQUIRE Project," by F. Davidoff, et al, (2008), *Quality & Safety in Health Care*, 17, p. i3. Copyright 2008 by BMJ Publishing Group Ltd and the Health Foundation.

Section Headings for Cumulative Scholarly Paper

Course	Section Heading	
All	Title Page	
578	Abstract	
576	Introduction	NUR 576
576	Background/Significance	
576, 577, 578	Literature Synthesis <ul style="list-style-type: none"> ▪ Methods of Review ▪ Appraisal of the Evidence ▪ Discussion 	
576, 577, 578	Theoretical Framework (can also be used to organize literature review if appropriate)	
576	Local Problem	
577	Inquiry Question	NUR 577
577	Intended Improvement <ul style="list-style-type: none"> ▪ Aims, Objectives 	
577	Methods <ul style="list-style-type: none"> ▪ Context ▪ Project Design & Methods ▪ Methods of Evaluation ▪ Data Management & Security ▪ Data Analysis Plan ▪ Ethical Considerations ▪ Resources/ Budget 	
578	Results <ul style="list-style-type: none"> ▪ Project Implementation ▪ Project Outcomes 	NUR 578 focus
578	Discussion <ul style="list-style-type: none"> ▪ Interpretation ▪ Limitations ▪ Implications 	
578	Conclusion	
All	APA <ul style="list-style-type: none"> • References • Tables • Figures • Appendix (literature table, theory/intervention diagram, PMAT) 	



**University of Rochester School of Nursing
Doctor of Nursing Practice Program**

DNP Senior Advisor Form

Student Name: _____

Date: _____

DNP Senior Advisor: _____

Title and Credentials: _____

Student Signature: _____

DNP Senior Advisor Signature: _____

DNP Director Signature: _____

Please submit signed form to AA Denise Harris (Wofford) via email at denise_harris@urmc.rochester.edu or drop off to office 4w122A.



DNP Project Committee Formation

Student Name: _____

DNP Committee Chair: _____

Date Committee formed: _____

Additional Committee members*: Include CV for the non-SON member

Name: _____ Credentials: _____

_____ Credentials: _____

_____ Credentials: _____

Student Signature: _____

Chair Signature: _____

Program Director Signature: _____ Date: _____

Lydia D. Rotondo, DNP, RN, CNS
Associate Dean for Education and Student Affairs
Director, DNP Program
Associate Professor of Clinical Nursing

****including email and other contact information***

Please give signed form to AA Denise Wofford. You can send document via email denise_harris@urmc.rochester.edu or drop off to office 4w122A.

Doctor of Nursing Practice Project Proposal Evaluation Framework

Student's Name: _____

Date: _____

Project Title: _____

	Satisfactory	Satisfactory with /Revisions	Unsatisfactory	Comments
INTRODUCTION/PROBLEM				
Background information describes: <ul style="list-style-type: none"> ▪ the focused need or problem. ▪ significance & relevance of problem. 				
Literature review: <ul style="list-style-type: none"> ▪ organized into an integrated synthesized summary. ▪ adequately supports the project & intervention. 				
Importance of problem to local context and key stakeholders clearly described.				
Framework (theoretical/conceptual/implementation) is evident and applicable.				
Major concepts defined and relate to proposed project.				
METHOD				
Project Aim(s) clearly described.				
Objectives stated in feasible and measurable terms and congruent with project aim.				
Scope of project realistic and appropriate.				
Setting and participants clearly described.				
Proposed intervention clearly described; <ul style="list-style-type: none"> ▪ includes clear rationale for actions/implementation plan. ▪ plan congruent with project objectives/aim. ▪ includes feasible project timeline. 				
Potential facilitators/barriers identified.				
Areas of interprofessional collaboration identified.				
Data Management Plan delineated: <ul style="list-style-type: none"> ▪ Measures (process/outcome) identified and linked to project objectives/aim ▪ Data collection tools/measures including psychometric described properties if appropriate. 				

	Satisfactory	Satisfactory with /Revisions	Unsatisfactory	Comments
METHOD				
Ethical aspects and protection of participant rights and welfare addressed (including data integrity/security).				
Project Budget/Anticipated Resources identified.				
Other:				

Overall Evaluation:

- a. Accept the proposal.** DNP Committee Chair will file approval of the Project Proposal on behalf of the Doctoral Committee with the Doctoral Program Administrative Assistant. The student can proceed with submission of RSRB application.
- b. Conditionally accept with revisions.** The student will make recommended revisions and resubmit to Committee chair within one month of the proposal defense. Following approval of revised proposal by Committee Chair, the student can proceed with submission of RSRB application.
- c. Reject the proposal.** The student must develop a significantly revised or new proposal. The Committee Chair will work with the student on the revision. The DNP Committee will review the new proposal and all prior steps will be repeated.

Evaluator Recommendations

Evaluator Signature with Credentials: _____

Adapted from Rutgers University School of Nursing, DNP Capstone Project Guidelines. Retrieved March 1, 2016



The University of Rochester School of Nursing
(Student Name)
DNP Project Proposal Defense Review

Date of DNP Project Proposal Defense _____

The committee and additional participating faculty members concluded that **(Student Name)** passed the qualifying exam and successfully defended his/ her DNP Project proposal. **(Student Name)** demonstrated mastery of DNP course content to date. **(Student Name)** also demonstrated understanding of concepts integral to conceptualizing and designing a clinical project that has potential for improving clinical practice by.

Project Title:

Strengths of the defense included:

-
-
-
-
-

Areas for refinement in project implementation, final defense and paper:

-
-
-
-
-
-

DNP project defense committee members' name and credentials:

Doctor of Nursing Practice Final Project Evaluation Framework

Student's Name: _____

Date: _____

Project Title: _____

	Satisfactory	Satisfactory with Revisions	Unsatisfactory	Comments
INTRODUCTION/PROBLEM				
Background information describes: <ul style="list-style-type: none"> ▪ the focused need or problem. ▪ significance & relevance of problem 				
Literature review : <ul style="list-style-type: none"> ▪ organized into an integrated synthesized summary. ▪ adequately supports the project & intervention. 				
Importance of problem to local context and key stakeholders clearly described.				
Framework (theoretical/conceptual/implementation) is evident, applicable, and integrated throughout project.				
METHOD				
Project Aim(s) clearly described.				
Objectives stated in feasible and measurable terms and congruent with project aim.				
Setting and participants clearly described.				
Intervention clearly described; includes clear rationale for actions and project timeline.				
Implementation process/tools/measures clearly described.				
Ethical aspects and protection of participant rights and welfare addressed (including data integrity/security).				
Data Management is coherent & consistent with project plan. <ul style="list-style-type: none"> ▪ Measures (process/outcome) are linked to project objectives/aim. ▪ Data collection tools/instruments support measures and project objectives/aim. 				
Method of analysis clearly described for each measurement.				
RESULTS				
Findings organized in appropriate format and presented effectively.				
Findings linked to problem, project aim, objectives and evaluation plan.				
Described the extent to which project objectives were achieved.				
Addressed key facilitators and barriers that impacted the project's objectives.				
Described any unintended consequences (both positive and negative), if applicable.				
Project resources/budget addressed.				

	Satisfactory	Satisfactory with Revision	Unsatisfactory	Comments
RECOMMENDATIONS/IMPLICATIONS				
Discussed project strengths/limitations.				
Discussed project impact on key stakeholders, healthcare system, potential other settings (transferability) and student.				
Included recommendations related to identified facilitators/barriers and unintended consequences, if applicable.				
Discussed any anticipated intervention modifications as well as future areas of practice inquiry and/or health policy consideration.				
Discussed financial costs/savings (if relevant) and intervention sustainability.				
OVERALL EVALUATION				
Extent to which student demonstrated <i>practice inquiry skills</i> including appraising and translating evidence.				
Ability of student to <i>articulate state of current knowledge</i> as it relates to advanced practice nursing in the health care system.				
Extent to which student <i>integrated scientific curiosity and inquiry</i> in project completion.				
Extent to which student analyzed issues and provided critique of advanced nursing <i>practice</i> and the <i>health care system</i> within the project.				
Evidence of student's ability to engage in <i>collaborative partnership(s)</i> in designing and implementing DNP project.				

Overall Evaluation

- a. Satisfactory.** The student will submit the final presentation slides and final cumulative project paper to the Doctoral Program Assistant, pending final approval of the Committee Chair. Once submitted, the DNP Committee Chair will complete the DNP project sign off form and return to the Doctoral Program Assistant confirming that DNP project requirements for graduation have been met.
- b. Conditionally approve the DNP Project with revision.** The student will complete the recommended revisions to presentation and/or cumulative project paper and submit to the Committee Chair for approval within two weeks. The student will submit the revised materials (slides as well as a final copy of the cumulative project paper) to the Doctoral Program Assistant. The Committee Chair will then complete the DNP project sign off form and return to the Doctoral Program Assistant confirming that the project requirements for graduation have been met.
- c. Unsatisfactory.** Working with the Committee chair and members, a remediation plan will be developed for identified deficiencies. The student will complete the recommended revisions and pending approval of the Committee Chair will reschedule a final project defense which must be successfully defended; all prior steps will be repeated to confirm that project requirements for graduation eligibility are met.

Evaluator Recommendations

Evaluator Signature with credentials: _____



DNP PROJECT SIGN OFF FORM

Name of Student has satisfactorily completed a DNP Project entitled:

Project Title:

I have reviewed the final cumulative scholarly paper as submitted and confirm that this student's DNP project satisfies graduation requirements.

Committee Chair Name

Date

Key Personnel and Offices

DNP Program Director	Lydia Rotondo	HWH 3W155 276-5424
DNP Program Support, Admin. Assistant Assistance with obtaining access to shared DNP offices Coordination of milestone events (defenses, commencement, special events)	Denise Wofford	HWH 4W122A 275-5121
Registration Requirements & Process	Andrea Chamberlain	HWH 2w140 275-8832
Forms: Petitions to transfer courses Status Change Drop/Add forms Incomplete grade contracts and extensions	Student Affairs Office	HWH 2w140 275-8832
Computer Hardware & Software	Peter Moore	HWH 3W320 275-8883
Education Administrator	Tracy Korts	HWH 3W161 273-4697
Administrator/Coordinator of Research Operations Research resources/information Funding opportunities information	Toby Stroud	HWH 2W148 275-8055
Institutional Review Board Approval (DNP Project Liaison)	Margaret Carno	HWH 3W309 273-4743