

## **Doctor of Nursing Practice (DNP) Program Plan 2024**

**Name of Academic Program- School of Nursing:** Doctor of Nursing Practice (DNP)

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### **Mission of School and How It Relates to the University:**

The School of Nursing (SON) mission is consistent with the University mission. The University mission is *“CSU Pueblo’s success will be measured by the resilience, agility, and problem-solving abilities of our diverse student population and the ways in which our graduates are able to navigate work in a rapidly changing world”*. The mission of the School of Nursing (SON) is *to prepare graduates for professional positions as safe, competent and caring nurses to meet the healthcare needs of diverse populations*

### **Mission/Philosophy Statement:**

The mission of the School of Nursing (SON) is *to prepare graduates for professional positions as safe, competent, and caring nurses to meet the healthcare needs of diverse populations*. SON faculty developed the mission, philosophy, organizing framework and expected student learning outcomes March 18, 2011, and revised in November 2016.

The Colorado State University-Pueblo School of Nursing shares the mission and philosophy of the University, which focuses on education, scholarly activity, and service. The school’s philosophy is dedicated to the pursuit of higher learning grounded in the arts, sciences, and humanities.

Caring is considered the central concept of the nursing curriculum. The nursing faculty of CSU-Pueblo is committed to modeling caring behavior to students on the belief that when students experience caring, they learn to care for others. Caring has been defined as the “essence of nursing” (Leininger, 1988), a process, and a behavior that can be taught and learned. Caring requires the “offering of self” (Scotto, 2003); intellectually, physically, psychologically, and spiritually.

Nursing is the synthesis of science and art, which addresses health promotion and maintenance across the lifespan and fosters the development of the nurse’s professional identity, integrity, and leadership. The practice of patient-centered care includes respect for individual dignity and consideration of cultural and ethical beliefs and values. The nurse advocates for patients and families in ways that promote mutual respect and self-management. Nursing care is provided in collaboration with the patient, the family, and members of the health care team. The nurse displays a spirit of inquiry by examining evidence to improve quality of care, promote safety and improve patient outcomes. Nursing judgment is integral to making competent decisions related to the provision of safe and effective nursing care. Effective communication skills using both technological and human means is essential to nursing care.

Education is an interactive experiential process that occurs between teacher, learner, and the environment with an emphasis on student centered learning. A variety of educational experiences is essential and allows the learner to integrate knowledge, skills, and attitudes. The faculty is responsible for facilitating, maintaining, and evaluating the learning process. Learners

are expected to be self-directed, active inquirers, responsible for their own learning and evaluation of educational experiences. Learners move from relative dependence to greater independence in preparation for assuming the professional role and promoting growth as a life-long learner.

## Organizing Framework

The faculty ascribes to the core competencies for nursing and nursing education identified by the (2003) Institute of Medicine (IOM) and the (2012) Graduate-Level Quality and Safety Education for Nurses (QSEN) project. QSEN competencies provide the organizing curriculum framework including patient-centered care, teamwork and collaboration, evidence-based practice, quality improvement, safety, and informatics for the expected student outcomes. The graduate nursing program and student outcomes are congruent with the American Association of Colleges of Nursing's (AACN) *The Essentials of Doctoral Education for Advanced Nursing Practice* (2006) and *Essentials of Master's Education for Advanced Practice Nursing* (2021). Organization and administration, students, curriculum, resources, facilities, services, faculty, and program evaluation for the nurse practitioner emphases are congruent with the *National Task Force on Quality NP Education* (2022) and *AACN Common Advanced Practice Registered Nurse (APRN) Doctoral-Level Competencies* (2021). Additionally, specific educational role specific emphasis competencies, outcomes, goals, and course objectives were developed based on:

- *National Organization of Nurse Practitioner Faculties (NONPF) Nurse Practitioner Core Competencies* (2022)
- *National Organization of Nurse Practitioner Faculties (NONPF) Population-focused Nurse Practitioner Competencies: Family/Across the Lifespan and Psychiatric-Mental Health* (2013)
- *National Organization of Nurse Practitioner Faculties (NONPF) and Adult/Gerontology Acute Care Nurse Practitioner Competencies* (2016)
- *American Nurses Association Code of Ethics for Nurses with Interpretive Statements* (2015)

## Graduate Student Learning Outcomes

The CSU–Pueblo Doctor of Nursing Practice (DNP) with an emphasis in one of three BSN-DNP Nurse Practitioner emphasis programs (AGACNP, AGACNP/ FNP or PMHNP) or MS-DNP Population Health curriculum are designed to prepare a graduate who will:

1. Integrate evidence-based practice, ethical decision making and technology into advanced nursing practice.
2. Conduct scholarly inquiry to influence health outcomes of individuals, aggregates, and populations.
3. Organize interprofessional collaboration to provide safe, quality patient-centered care.
4. Assume a leadership role in transforming health care systems, policies, and standard of care.

The DNP major in nursing is congruent with the mission of the university and college since it meets the need for a career-oriented profession that serves the health care needs of diverse populations while being committed to excellence. Student Learning Outcomes (SLOs)

relate to the mission and flow through the organizing framework and are based on the national competencies for advanced nursing practice. The SON faculty discussed and identified the need for assistance to plan and implement ongoing assessment regarding Department of Nursing curriculum and End-of-Program Student learning Outcomes for the graduate program and to make recommendations for the DNP nursing program. A consultant was utilized in 2013 to review the systematic plan evaluation (SPE) to develop and implement new EOPSLOs for the master's and anticipated DNP program. Through the consultant-led process, three EOPSLOs were identified using the established standards for master's and post-master's certificate programs. The faculty identified four EOPSLOs for the DNP programs including the advanced nursing practice competencies, role-specific professional standards and guidelines, and any graduate national certification requirements. These components were broad and in 2016, the graduate faculty selected and prioritized components consistent with the organizing framework standards, competencies and from the EOPSLOs for the DNP emphasis options that were submitted as part of the CSU System Chancellor new program funding opportunity. These interrelated SLO components will be evaluated within specific course assignments. The faculty prioritized components are:

- EOPSLO 1.A., Best current practice, and ways of knowing, based on rationale for practice
- EOPSLO 1.A., Standards and Guidelines
- EOPSLO 1.A., Patient Wishes/ Cultural Sensitivity
- EOPSLO 1.B., ANA Code of Ethics
- EOPSLO 2.A., Individual Health Outcomes Chronic Illness
- EOPSLO 2.B., Aggregate Health Outcomes Chronic Illness
- EOPSLO 2.C., Population Health Outcomes Chronic Illness
- EOPSLO 3.A., Health care Systems and Teams
- EOPSLO 3.A., Inter/Intra-Professional Communication
- EOPSLO 3.A., Interdisciplinary Teamwork (Committees)
- EOPSLO 3.B., Standards and Guidelines
- EOPSLO 3.B., Role-Specific Competencies
- EOPSLO 3.C., Vulnerable Populations
- EOPSLO 3.C., Respect for Patients' Preferences, Values, and Needs
- EOPSLO 4.A., Change Agent

DNP Congruency Among Graduate Nursing EOPSLOs, SPE Components and Essentials in Education		
EOPSLOs	Components (SPE Priorities)	AACN DNP Essentials

1. Integrate evidence-based practice, ethical decision making and technology into advanced nursing practice	<b>1.A. Best Current Evidence</b>  <i>(Priority) Best current practice and ways of knowing based on rationale for practice</i> <i>(Priority) Standards and Guidelines</i> Communications <i>(Priority) Patient Wishes/ Cultural Sensitivity</i> Research and use evidence to drive daily practice Advocacy Resources at point of care		<b>I.</b> Scientific Underpinnings for Practice <b>III.</b> Clinical Scholarship and Analytical Methods for Evidence-Based Practice <b>V.</b> Health Care Policy for Advocacy in Health Care <b>VI.</b> Interprofessional Collaboration for Improving Patient and Population Health Outcomes <b>VII.</b> Clinical Prevention and Population Health for Improving the Nation’s Health <b>VIII.</b> Advance Nursing Practice
	<b>1.B. Ethical Decision-making</b>  Ethical decision making (dilemmas) <i>(Priority) ANA Code of Ethics</i> IRB/ Consent Ethical Principles evident in delivery of patient care		<b>II.</b> Organizational and Systems Leadership for Quality Improvement and Systems Thinking <b>V.</b> Health Care Policy for Advocacy in Health Care <b>VIII.</b> Advance Nursing Practice
	<b>1.C. Technology</b> HIT in evidence-based patient care (Informatics) Current Technology to communicate and deliver patient care Up-to-date Resources and Documentation HIPAA Equipment and Information Systems		<b>IV.</b> Information Systems/Technology and Patient Care Technology for the Improvement and Transformation of Health Care <b>VIII.</b> Advance Nursing Practice
2. Conduct scholarly inquiry to influence health outcomes of individuals, aggregates and populations	<b>2.A. Individuals</b>	Health Maintenance Health Promotion Disease Prevention <i>(Priority) Chronic Illness</i> Palliative Care Terminal Care	<b>I.</b> Scientific Underpinnings for Practice <b>II.</b> Organizational and Systems Leadership for Quality Improvement and Systems Thinking <b>III.</b> Clinical Scholarship and Analytical Methods for Evidence-Based Practice <b>IV.</b> Information Systems/Technology and Patient Care Technology for the Improvement and Transformation of Health Care <b>V.</b> Health Care Policy for Advocacy in Health Care <b>VI.</b> Interprofessional Collaboration for Improving Patient and Population Health Outcomes <b>VII.</b> Clinical Prevention and Population Health for Improving the Nation’s Health <b>VIII.</b> Advance Nursing Practice
	<b>2.B. Aggregates</b>		
	<b>2.C. Populations</b>		
3. Organize interprofessional collaboration to provide safe, quality, patient-centered care	<b>3.A. Interprofessional Collaboration</b>  <i>(Priority) Health care Systems and Teams</i> <i>(Priority) Inter/Intra-Professional Communication</i> <i>(Priority) Interdisciplinary Teamwork (Committees)</i> Multiple Resources and Referrals Stakeholder Roles		<b>II.</b> Organizational and Systems Leadership for Quality Improvement and Systems Thinking <b>III.</b> Clinical Scholarship and Analytical Methods for Evidence-Based Practice <b>IV.</b> Information Systems/Technology and Patient Care Technology for the Improvement and Transformation of Health Care <b>V.</b> Health Care Policy for Advocacy in Health Care <b>VI.</b> Interprofessional Collaboration for Improving Patient and Population Health Outcomes <b>VII.</b> Clinical Prevention and Population Health for Improving the Nation’s Health <b>VIII.</b> Advance Nursing Practice

	3.B. Safety and Quality  Do no Harm <b>(Priority)</b> <i>Standards and Guidelines</i> <b>(Priority)</b> <i>Role-Specific Competencies</i> Patient Outcomes Graduate-Level QSEN Competencies	<b>II.</b> Organizational and Systems Leadership for Quality Improvement and Systems Thinking <b>III.</b> Clinical Scholarship and Analytical Methods for Evidence-Based Practice <b>IV.</b> Information Systems/Technology and Patient Care Technology for the Improvement and Transformation of Health Care <b>V.</b> Health Care Policy for Advocacy in Health Care <b>VI.</b> Interprofessional Collaboration for Improving Patient and Population Health Outcomes
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		<b>VII.</b> Clinical Prevention and Population Health for Improving the Nation's Health <b>VIII.</b> Advance Nursing Practice
	3.C. Patient-centered care  Advocacy <b>(Priority)</b> <i>Vulnerable Populations</i> <b>(Priority)</b> <i>Respect for patient Preferences, Values and Needs</i> Cultural Sensitivity Holism	<b>I.</b> Scientific Underpinnings for Practice <b>V.</b> Health Care Policy for Advocacy in Health Care <b>VI.</b> Interprofessional Collaboration for Improving Patient and Population Health Outcomes <b>VII.</b> Clinical Prevention and Population Health for Improving the Nation's Health <b>VIII.</b> Advance Nursing Practice
4. Assume a leadership role in transforming health care systems, policies and standards of care	4.A. Leadership  <b>(Priority)</b> <i>Change Agent</i> Role in policy change Professional Integrity Transformational Leadership Style Quality Improvement Communication Ethics	<b>II.</b> Organizational and Systems Leadership for Quality Improvement and Systems Thinking <b>III.</b> Clinical Scholarship and Analytical Methods for Evidence-Based Practice <b>VII.</b> Clinical Prevention and Population Health for Improving the Nation's Health <b>IV.</b> Information Systems/Technology and Patient Care Technology for the Improvement and Transformation of Health Care <b>V.</b> Health Care Policy for Advocacy in Health Care <b>VI.</b> Interprofessional Collaboration for Improving Patient and Population Health Outcomes  <b>VII.</b> Clinical Prevention and Population Health for Improving the Nation's Health <b>VIII.</b> Advance Nursing Practice

DNP Congruency Among Graduate Nursing EOPSLOs, SPE Components and Graduate-Level QSEN Competencies (2012)		
EOPSLOs	Components (SPE Priorities)	Graduate-Level QSEN (Knowledge, Skills and Attitudes/ Actions)

1. Integrate evidence-based practice, ethical decision making and technology into advanced nursing practice	<b>1.A. Best Current Evidence</b>  <i>(Priority) Best current practice and ways of knowing based on rationale for practice</i> <i>(Priority) Standards and Guidelines</i> Communications <i>(Priority) Patient Wishes/ Cultural Sensitivity</i> Research and use evidence to drive daily practice Advocacy Resources at point of care	Quality Improvement Safety Teamwork and Collaboration Patient-centered Care Evidence-Based Practice (EBP) Informatics
	<b>1.B. Ethical Decision-making</b>  Ethical decision making (dilemmas) <i>(Priority) ANA Code of Ethics</i> IRB/ Consent Ethical Principles evident in delivery of patient care	Quality Improvement Safety Teamwork and Collaboration Patient-centered Care Evidence-Based Practice (EBP) Informatics
	<b>1.C. Technology</b> HIT in evidence-based patient care	Quality Improvement Safety

	Current Technology to communicate and deliver patient care Up-to-date Resources and Documentation HIPAA Equipment and Information Systems		Teamwork and Collaboration Patient-centered Care Evidence-Based Practice (EBP) Informatics
2. Conduct scholarly inquiry to influence health outcomes of individuals, aggregates and populations	2.A. Individuals	Health Maintenance Health Promotion Disease Prevention <i>(Priority) Chronic Illness</i> Palliative Care Terminal Care	Quality Improvement Safety Teamwork and Collaboration Patient-centered Care Evidence-Based Practice (EBP) Informatics
	2.B. Aggregates		
	2.C. Populations		
3. Organize interprofessional collaboration to provide safe, quality, patient-centered care	3.A. Interprofessional Collaboration  <i>(Priority) Health care Systems and Teams</i> <i>(Priority) Inter/Intra-Professional Communication</i> <i>(Priority) Interdisciplinary Teamwork (Committees)</i> Multiple Resources and Referrals Stakeholder Roles		Quality Improvement Safety Teamwork and Collaboration Patient-centered Care Evidence-Based Practice (EBP) Informatics
	3.B. Safety and Quality  Do no Harm <i>(Priority) Standards and Guidelines</i> <i>(Priority) Role-Specific Competencies</i> Patient Outcomes Graduate-Level QSEN Competencies		Quality Improvement Safety Teamwork and Collaboration Patient-centered Care Evidence-Based Practice (EBP) Informatics
	3.C. Patient-centered care  Advocacy <i>(Priority) Vulnerable Populations</i> <i>(Priority) Respect for patient Preferences, Values and Needs</i> Cultural Sensitivity Holism		Quality Improvement Safety Teamwork and Collaboration Patient-centered Care Evidence-Based Practice (EBP) Informatics
4. Assume a leadership role in transforming health care systems, policies and standards of care	4.A. Leadership  <i>(Priority) Change Agent</i> Role in policy change Professional Integrity Transformational Leadership Style Quality Improvement Communication Ethics		Quality Improvement Safety Teamwork and Collaboration Patient-centered Care Evidence-Based Practice (EBP) Informatics

## Curriculum:

See attached curriculum maps for BSN-DNP Nurse Practitioner emphases: Adult/Gerontology Acute Care Nurse Practitioner, Adult/Gerontology Acute Care/Family Nurse Practitioner, Psychiatric-Mental Health Nurse Practitioner, and the MS-DNP (Population Health) emphasis area. The end-of-program student learning outcomes are used to organize the curriculum, guide the delivery of instruction, and direct learning activities. The updated *DNP Curriculum Map* 2018-2019 for each emphasis by the graduate faculty, originally developing as part of the 2016 Chancellor's new program proposal. The Curriculum Maps use the EOPSLO's program outcomes, expected student learning outcomes, advanced nursing competencies, and established professional standards and guidelines. The course descriptions, content, specific core and role specific professional competencies, and professional standards and guidelines are described in the DNP content map.

In fall 2016, the faculty developed the curriculum map to accurately reflect the level at which students should be performing in their final synthesis courses to meet end-of-program (EOPSLO) 1-4. The current level of expectation was listed as ‘competent’ but is now listed as ‘proficient’. Faculty use the curriculum map as a guide, and consequently evaluates it on a regular basis. Assessment and evaluation tools are reviewed by the graduate faculty to determine their adequacy in measuring course, student learning and program outcomes. The final summative evaluation of students’ achievement of all EOPSLOs congruent with the Essentials of Doctor of Nursing Practice (DNP) education, Masters Essentials education, emphasis track option role-specific competencies and each program outcome is assessed using:

- Comprehensive Examination (BSN-DNP) DNP, Master’s Essentials, and emphasis Role-Specific Competencies
- Standardized questions in the final cumulative written exam (BSN-DNP) DNP, Master’s Essentials, and emphasis Role-Specific Competencies
- DNP Project (All DNP students)
- DNP Emphasis Program Portfolio (All DNP students)

### **Assessment Methods**

The DNP program has an ongoing dynamic, systematic, comprehensive plan to evaluate end-of-program student learning outcomes (EOPSLOs), and role-specific professional competencies (RSPCs). Faculty utilize direct and indirect measures of student learning to assess the selected End-of-Program SLO components. The SPE addresses the need for timely curricular and other program changes, assists faculty in maintaining consistency within the curriculum, and facilitates the continuously changing contemporary practice demands for the Doctor of Nursing Practice students. These methods are used for the ongoing systematic program evaluation required by the Accreditation Commission for Education in Nursing (ACEN) to guide formative assessment measurements to identify curriculum and program focus areas. Attached are the Systematic Program Evaluation (SPE) templates for the End-of-Program SLO’s.

Students are provided with opportunities to be involved in the assessment process through participation in course evaluations, Curriculum and Evaluation Committee, graduate and general faculty meeting and informal sharing of ideas.

### **Program Outcomes**

1. Eighty percent of graduates will:

- Complete the program within one and one-half times the length of the program
- Express satisfaction with the program
- Pass national certification exam the first time
- Be employed in role-related professional practice within six months to one year

2. Eighty percent of employers will express satisfaction with graduates’ job performance.

### **Assessment Results:**



Graduate faculty will analyze and interpret data during an annual fall semester faculty meeting. Results/recommendations will be reported to the nursing department at the first spring general faculty meeting. Students have opportunity to participate in the various committees/meetings. Formative and Summative continuous evaluation and improvement methods will be used to achieve program outcomes including national certification exam pass rates, program student and employer satisfaction. Faculty collect formative and summative data throughout the academic year and analyze outcome measurements every fall semester for the previous year. Scheduled meetings throughout the academic year provide opportunities to discuss best practice and annually reevaluate formative and summative assessment methods. As needs are identified, action is taken to implement with best practice based on national guidelines and competencies. Results are disseminated to the advisory board twice each year, annual university assessment and ACEN accreditation reports. Students are notified through written notification via annual updates to the Graduate Nursing Student handbook, blackboard course postings and/or emails with any resulting changes in policies or curriculum, Students complete a self-evaluation for each program course evaluating their progress toward SLOs and education essentials via course grades and applicable clinical practicum evaluations.

### **Continuous Processes:**

Data will be collected on the priority components for a minimum of 3 years for the BSN-DNP and MS-DNP starting with the ACEN DNP Candidacy approval December 12, 2019. Faculty can identify any new priority components to be added to assessment annually based on the Student Learning and Program Outcomes, current best practice, data trends and issues/concerns occurring within courses and/ or program.

The associate dean, the graduate faculty and the curriculum and evaluation committee of the school of nursing are responsible for monitoring the ongoing systematic program evaluation and improvement process and for ensuring that the results from each year provide the springboard for the following year's action plans. To ensure ongoing assessment process, the associate dean maintains a Systematic Master Evaluation Calendar which indicates when data will be collected, reviewed, and reported. The evaluation plan for the Doctor of Nursing Practice program student learning outcomes indicates the collection methods to be used.

## References

- American Association of Colleges of Nursing (AACN) QSEN Education Consortium *Graduate- Level QSEN Competencies: knowledge, skills and attitudes* (2012). Accessed at <https://qsen.org/competencies/graduate-ksas/>
- American Association of Colleges of Nursing's (AACN) *Essentials of Doctor of Nursing Practice* (2006) Accessed at <https://www.aacnnursing.org/DNP/DNP-Essentials>
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- National League for Nursing *Core Competencies of Nurse Educators with Task Statements* (2005).

Accessed at [www.nln.org/profdev/corecompetencies.pdf](http://www.nln.org/profdev/corecompetencies.pdf)

National Organization of Nurse Practitioner Faculty Competencies Accessed at <http://www.nonpf.org/general/custom.asp?page=14>

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	Courses	Integrate evidence-based practice (EBP), ethical, decision making and technology into advanced nursing practice	Conduct scholarly inquiry to influence health outcomes of individuals, aggregates and populations	Organize interprofessional collaboration to provide safe, quality patient centered care	Assume a leadership role in transforming health systems, policies and standards of care	Level of Expertise (Adapted Benner) & Teaching/Learning Strategies
<b>Year 1</b> Fall	504 NSG Writing & Presentation skill - 1	AB/ PA, PR, DS				<b>Advanced Beginner</b> (AB)= Perform with guidance <b>Competent (C)</b> = Aware of long-term goals and analytical thinking <b>Proficient (P)</b> = Recognize, plan  <b>Teaching/Learning Strategies:</b> D= Demonstration Sim= Simulation DS= Discussion EX= Exam CS= Case Study PR= Presentation PA= Paper J= Journal EV= Eval forms P= Portfolio M= Manuscript D= Defense
	505 Biostatistics and Research - 3	AB/ CS, EX, DS, P				
	507 Advanced Practice Roles - 2	AB/ PR, PA, J, EV, P			AB/PA/DS	
	508 Adv Practice Theory - 3	AB/PR, PA, P	AB/PR, PA, P			
Spring	562 Advanced Assessment - 2	AB/ CS, Sim, D, EX, P				
	562 L Advanced Assessment - 1	AB/ Sim, D, P				
	712 EBP & Research - 3	C/PA, P	AB/PA, P			
	748 Health Care Policy & Law – 4 <i>(1cr – 45 hr. DNP Practicum)</i>	C/CS, PA, DS, P		AB/CS, PA, DS, P	C/CS, PA, DS, P	
Summer	551 Health Promotion - 2	AB/CS, PA PR, P	AB/CS, PA, PR, P			
	571 Informatics - 2	C/ PA, PR, CS, DS, P	C, PA, PR, CS, DS, P	AB/ PA, PR, CS, DS, P	AB/ PA, PR, CS, DS, P	
	714 Epidemiology - 3	P/ PA, PR, CS, P	P/ PA, PR, CS, P	C/ PA, PR, CS, P	C/ PA, PR, CS, P	
<b>Year 2</b> Fall	552 Adv Pathophysiology - 3	AB/ EX, CS, DS, P				
	561 Adv Pharmacology - 3	AB/ EX, CS, DS, P				
	716 Health Care Business & Finance – 4 <i>(1cr – 45 hr. DNP Practicum)</i>	AB, CS, PA, DS, PR, P	C, PA, PR, P	C/ PA, PR, P		
Spring	610 Diagnostic Reasoning – 2	C/ CS, DS, P		AB/CS, DS, P		
	613L Acute Care Skills Lab - 2	AB/DS, EX, P	AB/S, EX, P			
	718 Organizational Systems and Ldr- 4 <i>(1cr – 45 hr. DNP Practicum)</i>	AB, CS, PA, DS, PR, P		C/ PA, DS, PR, CS, P	AB/CS, PR, DS, P	
Summer	614L Acute Care Skills Lab II - 1	C/ D, Sim, P		C/ D, Sim, P		
	641 AGACNP I - 3	AB/E, CS, Sim, DS, PR, PA, P	AB/PA, DS, P	AB/CS, P	AB/CS, PR, DS, P	
	661 Family I - 2	AB/E, CS, Sim, DS, PR, PA, P	AB/PA, DS, P	AB/CS, P	AB/CS, PR, DS, P	
	801 DNP Seminar – 1	P/PA, PR, P	P/PA, PR, P	AB/PA, PR, P	AB/PA, PR, P	
<b>Year 3</b> Fall	642 AGACNP II - 2	AB/E, CS, Sim, DS, PR, PA, P	AB/PA, DS, P	AB/CS, P	AB/CS, PR, DS, P	
	642L AGACNP Practicum II - 4	AB/J, EV, P	AB/CS, J, P	AB/ EV, P	AB/J, CS, P	
	662 Family II - 2	AB/E, CS, Sim, DS, PR, PA, P	AB/PA, DS, P	AB/CS, P	AB/CS, PR, DS, P	
	636L FNP Practicum - 2	AB/J, EV, P	AB/CS, J, P	AB/ EV, P	AB/J, CS, P	
	802 DNP Project Practicum- 3 <i>(1cr – 45 hr. DNP Practicum)</i>	P/ EV, P, J, CS	P/ EV, P, J, CS	AB/ EV, P, J, CS, P	AB/ EV, P, J, CS, P	
Spring	643 AGACNP III - 2	C/E, CS, Sim, DS, PR, PA, P	C/PA, DS, P	C/CS, P	C/CS, PR, DS, P	
	643L AGACNP Practicum III - 2	C/J, EV, P	C/CS, J, P	C/ EV, P	C/J, CS, P	
	663 Family III - 2	C/E, CS, Sim, DS, PR, PA, P	C/PA, DS, P	C/CS, P	C/CS, PR, DS, P	
	636L FNP Practicum - 3	C/J, EV, P	C/CS, J, P	C/ EV, P	C/J, CS, P	
	803 DNP Project Practicum – 3 <i>(2cr – 90 hr. DNP Practicum)</i>	C/PA, PR, P	C/PA, PR, P	C/PA, PR, P	C/PA, PR, P	
Summer	644 AGACNP IV - 2	C/E, CS, Sim, DS, PR, PA, P	C/PA, DS, P	C/CS, P	C/CS, PR, DS, P	
	644L AGACNP Practicum IV - 2	C/J, EV, P	C/CS, J, P	C/ EV, P	C/J, CS, P	
	664 Family IV - 1	C/E, CS, Sim, DS, PR, PA, P	C/PA, DS, P	C/CS, P	C/CS, PR, DS, P	
	636L FNP Practicum - 2	C/J, EV, P	C/CS, J, P	C/ EV, P	C/J, CS, P	
	804 DNP Project Practicum – 2 <i>(1cr – 45 hr. DNP Practicum)</i>	P/ EV, P, J, CS	P/ EV, P, J, CS	C/ EV, P, J, CS	C/ EV, P, J, CS	
Year 4 Fall	645 AGACNP V - 1	C/E, CS, Sim, DS, PR, PA, P	C/PA, DS, P	C/CS, P	C/CS, PR, DS, P	
	645L AGACNP Practicum V - 2	C/J, EV, P	C/CS, J, P	C/ EV, P	C/J, CS, P	
	665 Family V - 1	C/E, CS, Sim, DS, PR, PA, P	C/PA, DS, P	C/CS, P	C/CS, PR, DS, P	
	636L FNP Practicum - 2	C/J, EV, P	C/CS, J, P	C/ EV, P	C/J, CS, P	
	805 DNP Project Practicum – 3 <i>(2cr – 90 hr. DNP Practicum)</i>	P/PA, PR, P	P/PA, PR, P	P/PA, PR, P	P/PA, PR, P	

Spring	807 AGAC/ FNP DNP Project Practicum – 10 <b>(4cr. AGACNP practicum 3cr. FNP practicum 3cr. DNP practicum)</b>	P/EV, P, J, CS, M, D	P/ EV, P, J, CS, M, D	P/ EV, P, J, CS, M, D	P/ EV, P, J, CS, M, D	
Summer	*Optional NSG 636L FNP practicum - 1-13 *Optional NSG 810L DNP project Practicum – 1	P/EV, P, J, CS, M, D	P/ EV, P, J, CS, M, D	P/ EV, P, J, CS, M, D	P/ EV, P, J, CS, M, D	

<b>BSN-DNP AGACNP/ FNP Totals</b>	<b>Total Lab Hours</b>	<b>120</b>	
	<b>Total Required AGACNP Practicum Hours</b>	<b>780</b>	
	<b>Total Required FNP Practicum Hours</b>	<b>780</b>	
	<b>Total DNP Practicum Hours</b>	<b>540</b>	
	<b>Total Clinical Hours</b>	<b>2100</b>	
	<b>Total Required Credit Hours</b>	<b>104</b>	

1 Family Nurse Practitioner students must complete a total of 13 semester hours of Family Practicum, the recommended sequence to graduate in eleven semesters is: Summer (Year 2) [NSG 636L](#) FNP Practicum (1-13 c.h.) – 1 semester hours, /Fall (Year 3) NSG 636L – 2 semester hours /Spring (Year 3) [NSG 636L](#) FNP Practicum (1-13 c.h.) – 2 semester hours, /Summer (Year 3) [NSG 636L](#) FNP Practicum (1-13 c.h.) – 1 semester hours. /Fall (Year 4) [NSG 636L](#) FNP Practicum (1-13 c.h.)-2 semester hours/Spring (Year 4) [NSG 807L](#) Final DNP Practicum AGACNP/FNP (10 c.h.)-4 semester hours. Students are required to take a minimum of 1 semester hour of Family Practicum starting summer of Year 2, a change to the degree plan must be approved by the Graduate Nursing Program Coordinator.

BSN DNP Adult/Geriatric Acute Care Nurse Practitioner (AGACNP) Curriculum Map (Hybrid)						
	Courses - Credits	Integrate evidence-based practice (EBP), ethical, decision making and technology into advanced nursing practice	Conduct scholarly inquiry to influence health outcomes of individuals, aggregates and populations	Organize interprofessional collaboration to provide safe, quality patient centered care	Assume a leadership role in transforming health systems, policies and standards of care	Level of Expertise (Adapted Benner) & Teaching/Learning Strategies
Year 1 Fall	504 NSG Writing & Presentation Skills - 1	AB/ PA, PR, DS				Advanced Beginner (AB) = Perform with guidance Competent (C) = Aware of long-term goals and analytical thinking Proficient (P) = Recognize, plan  <b>Teaching/Learning Strategies:</b> D= Demonstration Sim= Simulation DS= Discussion EX= Exam CS= Case Study PR= Presentation PA= Paper J= Journal EV= Eval forms P= Portfolio M= Manuscript D= Defense
	505 Biostatistics and Research - 3	AB/ CS, EX, DS, P				
	507 Advanced Practice Roles - 2	AB/ PR, PA, J, EV, P			AB/PA/DS	
Spring	508 Adv Practice Theory - 3	AB/PR, PA, P	AB/PR, PA, P			
	562 Advanced Assessment - 2	AB/ CS, Sim, D, EX, P				
	562 L Advanced Assessment - 1	AB/ Sim, D, P				
	712 EBP & Research - 3	C/PA, P	AB/PA, P			
	748 Health Care Policy & Law – 4 (1cr – 45 hr. DNP Practicum)	C/CS, PA, DS, P		AB/CS, PA, DS, P	C/CS, PA, DS, P	
Summer	551 Health Promotion- 2	AB/CS, PA PR, P	AB/CS, PA, PR, P			
	571 Informatics - 2	AB/ PA, PR, CS, DS, P	C, PA, PR, CS, DS, P	AB/ PA, PR, CS, DS, P	AB/ PA, PR, CS, DS, P	
	714 Epidemiology - 3	P/ PA, PR, CS, P	P/ PA, PR, CS, P	C/ PA, PR, CS, P	C/ PA, PR, CS, P	
Year 2 Fall	552 Adv Pathophysiology - 3	AB/ EX, CS, DS, P				
	561 Adv Pharmacology – 3	AB/ EX, CS, DS, P				
	716 Health Care Business & Finance – 4 (1cr – 45 hr. DNP Practicum)	AB, CS, PA, DS, PR, P	C, PA, PR, P	C/ PA, PR, P		
Spring	610 Diagnostic Reasoning – 2	AB/ CS, DS, P		AB/CS, DS, P		
	613L Acute Care Skills Lab - 2	AB/DS, EX, P		AB/S, EX, P		
	718 Organizational Systems and Leadership – 4 (1cr – 45 hr. DNP Practicum)	AB, CS, PA, DS, PR, P		C/ PA, DS, PR, CS, P	AB/CS, PR, DS, P	
Summer	614L Acute Care Skills Lab II - 1	C/ D, Sim, P		C/ D, Sim, P		
	641 AGACNP I - 3	AB/E, CS, Sim, DS, PR, PA, P	AB/PA, DS, P	AB/CS, P	AB/CS, PR, DS, P	
	801 DNP Seminar - 1	P/PA, PR, P	P/PA, PR, P	AB/PA, PR, P	AB/PA, PR, P	
Year 3 Fall	642 AGACNP II - 2	AB/E, CS, Sim, DS, PR, PA, P	AB/PA, DS, P	AB/CS, P	AB/CS, PR, DS, P	
	642L AGACNP Practicum II - 4	AB/J, EV, P	AB/CS, J, P	AB/EV, P	AB/J, CS, P	
	802 DNP Project Practicum (1cr – 45 hr. DNP Practicum)	P/EV, P, J, CS	P/ EV, P, J, CS	AB/ EV, P, J, CS, P	AB/ EV, P, J, CS, P	
Spring	643 AGACNP III - 2	C/E, CS, Sim, DS, PR, PA, P	C/PA, DS, P	C/CS, P	C/CS, PR, DS, P	
	643L AGACNP Pract III - 2	C/J, EV, P	C/CS, J, P	C/EV, P	C/J, CS, P	
	803 DNP Project Practicum – 3 (2cr – 90 hr. DNP Practicum)	C/PA, PR, P	C/PA, PR, P	C/PA, PR, P	C/PA, PR, P	
Summer	644 AGACNP IV - 2	C/E, CS, Sim, DS, PR, PA, P	C/PA, DS, P	C/CS, P	C/CS, PR, DS, P	
	644L AGACNP Pract IV - 2	C/J, EV, P	C/CS, J, P	C/EV, P	C/J, CS, P	
	804 DNP Project Practicum -2 (1cr – 45 hr. DNP Practicum)	P/EV, P, J, CS	P/ EV, P, J, CS	C/ EV, P, J, CS	C/ EV, P, J, CS	
Year 4 Fall	645 AGACNP V - 1	C/E, CS, Sim, DS, PR, PA, P	C/PA, DS, P	C/CS, P	C/CS, PR, DS, P	
	645L AGACNP Pract V - 2	C/J, EV, P	C/CS, J, P	C/EV, P	C/J, CS, P	
	805 DNP Project Practicum – 3 (2cr – 90hr. DNP Practicum)	P/PA, PR, P	P/PA, PR, P	P/PA, PR, P	P/PA, PR, P	
Spring	806 DNP Project Practicum – 6 (3cr. AGACNP clinicals, 3cr. DNP practicum)	P/EV, P, J, CS, M, D	P/ EV, P, J, CS, M, D	P/ EV, P, J, CS, M, D	P/ EV, P, J, CS, M, D	
Summer	*Optional NSG 810L DNP project	P/EV, P, J, CS, M, D	P/ EV, P, J, CS, M, D	P/ EV, P, J, CS, M, D	P/ EV, P, J, CS, M, D	

	Practicum – 1					
<b>Totals</b>	<b>Total Lab Hours</b>	<b>120</b>				
	<b>Total Required AGACNP Clinical Hours (1cr. = 60hrs)</b>	<b>780</b>				
	<b>Total DNP Practicum Hours (1cr.=45hrs)</b>	<b>540</b>				
	<b>Total Practicum Hours</b>	<b>1320</b>				
	<b>Total Program Credits</b>	<b>83</b>				



<b>BSN DNP Psychiatric-Mental Health Nurse Practitioner (PMHNP) Curriculum Map (Hybrid)</b>						
	Courses	Integrate evidence-based practice (EBP), ethical, decision making and technology into advanced nursing practice	Conduct scholarly inquiry to influence health outcomes of individuals, aggregates and populations	Organize interprofessional collaboration to provide safe, quality patient centered care	Assume a leadership role in transforming health systems, policies and standards of care	Level of Expertise (Adapted Benner) & Teaching/Learning Strategies
<b>Year 1</b> Fall	504 NSG Writing & Presentation Skill - 1	AB/ PA, PR, DS				<b>Advanced Beginner (AB)</b> = Perform with guidance <b>Competent (C)</b> = Aware of long-term goals and analytical thinking <b>Proficient (P)</b> = Recognize, plan  <b>Teaching/Learning Strategies:</b> D= Demonstration Sim= Simulation DS= Discussion EX= Exam CS= Case Study PR= Presentation PA= Paper J= Journal EV= Eval forms P= Portfolio M= Manuscript D= Defense
	505 Biostatistics and Research -3	AB/ CS, EX, DS, P				
	507 Advanced Practice Roles -2	AB/ PR, PA, J, EV, P			AB/PA/DS	
	508 Adv Practice Theory -3	AB/PR, PA, P	AB/PR, PA, P			
Spring	562 Advanced Assessment -2	AB/ CS, Sim, D, EX, P				
	562 L Advanced Assessment - 1	AB/ Sim, D, P				
	712 EBP & Research -3	C/PA, P	AB/PA, P			
	748 Health Care Policy & Law – 4 <b>(1cr – 45 hr. DNP Practicum)</b>	C/CS, PA, DS, P		AB/CS, PA, DS, P	C/CS, PA, DS, P	
Summer	551 Health Promotion -2	AB/CS, PA PR, P	AB/CS, PA, PR, P			
	571 Healthcare Informatics -2	C/ PA, PR, CS, DS, P	C, PA, PR, CS, DS, P	AB/ PA, PR, CS, DS, P	AB/ PA, PR, CS, DS, P	
	714 Epidemiology - 3	P/ PA, PR, CS, P	P/ PA, PR, CS, P	C/ PA, PR, CS, P	C/ PA, PR, CS, P	
<b>Year 2</b> Fall	552 Adv Pathophysiology -3	AB/ EX, CS, DS, P				
	561 Adv Pharmacology - 3	AB/ EX, CS, DS, P				
	716 Health Care Business & Finance -4 <b>(1cr – 45 hr. DNP Practicum)</b>	AB, CS, PA, DS, PR, P	C, PA, PR, P	C/ PA, PR, P		
Spring	676 Theoretical MH - 2	AB/PR, PA	AB/PR, PA			
	677 Psychopharmacology - 2	C/DS, PR, CS	C/DS, PR, CS	AB/ DS, PR, CS		
	718 Organizational Systems and Ldr – 4 <b>(1cr – 45 hr. DNP Practicum)</b>	AB, CS, PA, DS, PR, P		C/ PA, DS, PR, CS, P	AB/CS, PR, DS, P	
Summer	678 Psych Assess & Evaluation - 2	AB/ CS, PA		AB/CS, PA		
	679 Psych Diff Dx - 2	AB/ CS, DS, Sim		AB/CS, DS		
	801 DNP Seminar - 1	P/PA, PR, P	P/PA, PR, P	AB/PA, PR, P	AB/PA, PR, P	
<b>Year 3</b> Fall	651 PMHNP I - 2	AB/E, CS, Sim, DS, PR, PA, P	AB/PA, DS, P	AB/CS, P	AB/CS, PR, DS, P	
	651L PMHNP Practicum I - 2	AB/J, EV, P	AB/CS, J, P	AB/EV, P	AB/J, CS, P	
	802 DNP Project Practicum – 3 <b>(1cr – 45 hr. DNP Practicum)</b>	P/EV, P, J, CS	P/ EV, P, J, CS	AB/ EV, P, J, CS, P	AB/ EV, P, J, CS, P	
Spring	652 PMHNP II - 2	C/E, CS, Sim, DS, PR, PA, P	AB/PA, DS, P	AB/CS, P	AB/CS, PR, DS, P	
	652L PMHNP Practicum II - 2	C/J, EV, P	C/CS, J, P	C/EV, P	C/J, CS, P	
	803 DNP Project Practicum – 3 <b>(2cr – 90hr. DNP Practicum)</b>	C/PA, PR, P	C/PA, PR, P	C/PA, PR, P	C/PA, PR, P	
Summer	653 PMHNP III - 3	C/E, CS, Sim, DS, PR, PA, P	AB/PA, DS, P	C/CS, P	ABCS, PR, DS, P	
	653L PMHNP Practicum III - 3	C/J, EV, P	C/CS, J, P	C/EV, P	C/J, CS, P	
	804 DNP Project Practicum – 2 <b>(1cr – 45 hr. DNP Practicum)</b>	P/EV, P, J, CS	P/ EV, P, J, CS	C/ EV, P, J, CS	C/ EV, P, J, CS	
<b>Year 4</b> Fall	654 PMHNP IV - 3	P/E, CS, Sim, DS, PR, PA, P	C/PA, DS, P	P/CS, P	C/CS, PR, DS, P	
	654L PMHNP Practicum IV - 3	C/J, EV, P	C/CS, J, P	C/EV, P	C/J, CS, P	
	805 DNP Project Practicum - 3 <b>(2cr – 90 hr. DNP Practicum)</b>	P/PA, PR, P	P/PA, PR, P	P/PA, PR, P	P/PA, PR, P	
Spring	808 PMHNP DNP Project Practicum - 6 <b>(3 cr. PMHNP Practicum 3 cr. DNP practicum)</b>	P/EV, P, J, CS, M, D	P/ EV, P, J, CS, M, D	P/ EV, P, J, CS, M, D	P/ EV, P, J, CS, M, D	

Summer	*Optional NSG 810L DNP practicum - 1					
<b>Totals</b>	<b>Total Lab Hours</b>	<b>30</b>				
	<b>Total Clinical PMHNP Practicum Hours</b>	<b>780</b>				
	<b>Total DNP Practicum Hours</b>	<b>540</b>				
	<b>Total Practicum Hours</b>	<b>1320</b>				
	<b>Total Required Program Credits</b>	<b>87</b>				

MS DNP Population Health Curriculum Map						
	Courses	Integrate evidence-based practice (EBP), ethical, decision making and technology into advanced nursing practice	Conduct scholarly inquiry to influence health outcomes of individuals, aggregates and populations	Organize interprofessional collaboration to provide safe, quality patient centered care	Assume a leadership role in transforming health systems, policies and standards of care	Level of Expertise (Adapted Benner) & Teaching/Learning Strategies
Year 1 Fall	504 NSG Writing & Presentation Skills -1	AB/ PA, PR, DS				Advanced Beginner (AB) = Perform with guidance Competent (C) = Aware of long-term goals and analytical thinking Proficient (P) = Recognize, plan  <b>Teaching/Learning Strategies:</b> D= Demonstration Sim= Simulation DS= Discussion EX= Exam CS= Case Study PR= Presentation PA= Paper J= Journal EV= Eval forms P= Portfolio M= Manuscript D= Defense
	505 Biostatistics and Research - 3	AB/ CS, EX, DS, P				
	716 Health Care Business & Finance – 4 (1cr – 45 hr. DNP Practicum)	AB, CS, PA, DS, PR, P	C, PA, PR, P	C/ PA, PR, P		
	801 DNP Seminar - 1	P/PA, PR, P	P/PA, PR, P	AB/PA, PR, P	AB/PA, PR, P	
Spring	712 EBP & Research - 3	C/PA, P	AB/PA, P			
	718 Organizational Systems and Leadership – 4 (1cr – 45 hr. DNP Practicum)		C/ CS, PA, DS, PR, P			
	748 Health Care Policy & Law – 4 (1cr – 45 hr. DNP Practicum)	C/CS, PA, DS, P		AB/CS, PA, DS, P	C/CS, PA, DS, P	
	809L DNP Project Practicum - 1	AB/EV, P, J, CS, M, D	AB/ EV, P, J, CS, M, D	AB/ EV, P, J, CS, M, D	AB/ EV, P, J, CS, M, D	
Summer	714 Epidemiology - 3	P/ PA, PR, CS, P	P/ PA, PR, CS, P	C/ PA, PR, CS, P	C/ PA, PR, CS, P	
	809L DNP Project Practicum - 2	C/EV, P, J, CS, M, D	C/ EV, P, J, CS, M, D	C/ EV, P, J, CS, M	C/ EV, P, J, CS, M, D	
	709L DNP Project Practicum – 1-5 Gap hrs as needed. Approved by chair	C/EV, P, J, CS, M, D	C/ EV, P, J, CS, M, D	C/ EV, P, J, CS, M	C/ EV, P, J, CS, M, D	
Year 2 Fall	809L DNP Project Practicum - 3	P/EV, P, J, CS, M, D	P/ EV, P, J, CS, M, D	P/ EV, P, J, CS, M	P/ EV, P, J, CS, M, D	
	709L DNP Project Practicum – 1-5 Gap hrs as needed. Approved by chair	P/EV, P, J, CS, M, D	P/ EV, P, J, CS, M, D	P/ EV, P, J, CS, M	P/ EV, P, J, CS, M, D	
Spring	809L DNP Project Practicum - 3	P/EV, P, J, CS, M, D	P/ EV, P, J, CS, M, D	P/ EV, P, J, CS, M	P/ EV, P, J, CS, M, D	
	709L DNP Project Practicum – 1-5 Gap hrs as needed. Approved by chair	P/EV, P, J, CS, M, D	P/ EV, P, J, CS, M, D	P/ EV, P, J, CS, M	P/ EV, P, J, CS, M, D	
Summer	810L DNP Project Practicum – 1 (optional)	P/EV, P, J, CS, M, D	P/ EV, P, J, CS, M, D	P/ EV, P, J, CS, M	P/ EV, P, J, CS, M, D	
	709L DNP Project Practicum – 1-5 Gap hrs as needed. Approved by chair	P/EV, P, J, CS, M, D	P/ EV, P, J, CS, M, D	P/ EV, P, J, CS, M	P/ EV, P, J, CS, M, D	
Totals	Total Lab Hours	0				

	<b>Total DNP Practicum Hours</b>	<b>540-720 (Gap Analysis Practicum Hours)</b>
	<b>Total Practicum Hours</b>	<b>540-720</b>
	<b>Total Program Credits</b>	<b>32-50 (Gap Analysis Practicum Hours)</b>