Title

A proposal for a Self-Supporting Professional Graduate Degree Program in Nursing
Leaving to the Doctor of Nursing Practice at the University of California, San Francisco.

Date of Preparation

January 11, 2016
March 2, 2016 (revised)

Contact Information Sheet

*Jyu-Lin Chen, RN PhD FAAN (Program Director for Proposed DNP Program)
Associate Professor
Department of Family Health Care Nursing
Box 0606
(415) 502-6015
jyu-lin.chen@ucsf.edu

Annette Carley, RN DNP NNP PNP (Associate Program Director for Proposed DNP Program)
Department of Family Health Care Nursing
Box 0606
(415) 476-3388
annette.carley@ucsf.edu

Mike Henseler (Assistant to the Dean)
Office of the Dean
Box 0604
(415) 476-1805
mike.henseler@ucsf.edu

*Academic Senate
# TABLE OF CONTENTS

**EXECUTIVE SUMMARY** ................................................................................................................. 4

**SECTION 1: INTRODUCTION** ........................................................................................................ 7

1.1 Aims and Objectives...................................................................................................................... 7
1.2 Historical Development............................................................................................................... 9
1.3 Timetable .................................................................................................................................. 16
1.4 Relation to Existing Campus Programs..................................................................................... 16
1.5 Interrelationship with Other UC Campuses............................................................................. 20
1.6 Program Administration............................................................................................................. 21
1.7 Program Evaluation Plan.......................................................................................................... 22

**SECTION 2: PROGRAM** ................................................................................................................. 23

2.1 Preparation for Admission........................................................................................................ 23
2.2 Foreign Language Requirement............................................................................................... 24
2.3 Program of Study..................................................................................................................... 24
2.4 DNP Clinical Residency and Evaluation (Replaces Field Examination)................................. 29
2.5 DNP Residency and Project Course Sequence Evaluation (Replaces Qualifying Examination) 29
2.6 DNP Scholarly Project (Replaces Thesis/Dissertation)............................................................. 29
2.7 DNP Scholarly Project Presentation (Replaces Final Examination)........................................ 30
2.8 Explanation of Special Requirements.................................................................................... 31
2.9 Relationship of Master’s and Doctor’s Programs...................................................................... 31
2.10 Special Preparation for Careers in Teaching.......................................................................... 32
2.11 Sample Program..................................................................................................................... 32
2.12 Normative Time from Matriculation to Degree....................................................................... 33

**SECTION 3: PROJECTED NEED** ................................................................................................. 33

3.1 Student Demand for the Program............................................................................................ 33
3.2 Opportunities for Placement of Graduates............................................................................. 34
3.3 Importance to the Discipline.................................................................................................. 35
3.4 Ways in Which the Program will Meet the Needs of Society.................................................. 35
3.5 Relationship of the Program to Research and/or Professional Interests of Faculty................ 36
3.6 Program Differentiation........................................................................................................... 36

**SECTION 4: FACULTY** .................................................................................................................... 37

**SECTION 5: COURSES** ................................................................................................................ 37

**SECTION 6: RESOURCE REQUIREMENTS** ................................................................................ 38

6.1 FTE Faculty............................................................................................................................. 38
6.2 Library Acquisition.................................................................................................................... 38
6.3 Computing Costs..................................................................................................................38
6.4 Equipment...........................................................................................................................38
6.5 Space and Other Capital Facilities......................................................................................39
6.6 Other Operating Costs........................................................................................................39

SECTION 7: GRADUATE STUDENT SUPPORT.....................................................................39

SECTION 8: GOVERNANCE.................................................................................................43

SECTION 9: CHANGES IN SENATE REGULATIONS.............................................................43

APPENDICES

APPENDIX A: KEY DIFFERENCES BETWEEN DNP AND PHD PROGRAMS
APPENDIX B: AACN LIST OF SCHOOLS OF NURSING WITH DNP PROGRAMS
APPENDIX C: LETTERS OF SUPPORT
APPENDIX D: DNP SCHOLARLY PROJECT EXEMPLARS
APPENDIX E: PROGRAM BYLAWS
APPENDIX F: PROGRAM BUDGET
APPENDIX G: PROPOSED ADVISORY BOARD
APPENDIX H: COURSE SYLLABI
APPENDIX I: CAMPOS INC MARKET SURVEY (2013)
APPENDIX J: UPDATED UCSF MARKET SURVEY (2015)
APPENDIX K: FACULTY BIOSKETCHES
APPENDIX L: PROJECTED FACULTY WORKLOAD (PROGRAM YEARS 0, 1, & 2)

TABLES

Table 1: DNP Programs in California.........................................................................................12
Table 2: Nursing School Rankings, U.S. News and World Report............................................14
Table 3: Proposed UCSF DNP Program Faculty....................................................................16
Table 4: Projected Student Enrollments..................................................................................23
Table 5: Sample UCSF DNP Degree Program Curriculum......................................................32
Table 6: Recent Gifts to the UCSF School of Nursing............................................................32

FIGURES

Figure 1: Key Differences in DNP and PhD.................................................................11
A proposal for a Self-Supporting Professional Graduate Degree Program in Nursing Leading to the Doctor of Nursing Practice at the University of California, San Francisco.

EXECUTIVE SUMMARY

Introduction: The Doctor of Nursing Practice (DNP) degree is a professional practice-focused doctorate designed to develop competencies for advanced clinical and leadership roles in nursing. The need for a practice-focused doctoral program was highlighted in 2004 when the American Association of Colleges of Nursing (AACN) recommended the establishment of the DNP as the professional, practice-focused doctoral degree in nursing. The AACN had recommended that the DNP be the required credential for nurses seeking Advanced Practice Registered Nursing (APRN) certification, including the roles of Clinical Nurse Specialist, Nurse Practitioner, Certified Nurse Midwife and Certified Registered Nurse Anesthetist. In accordance with the AACN recommendation, the establishment of the UCSF DNP Degree Program will be beneficial to UCSF and the UC system and will be responsive to the changing health care environment. This program will increase opportunities to prepare APRNs to meet the demands of an increasingly complex and changing healthcare landscape. The program and innovative curriculum will capitalize on the educational richness of the campus, represent a strong educational brand unrivaled in the state, and present a model of fiscal sustainability. The UCSF DNP Degree Program is poised to enroll in 2017 pending all appropriate approvals.

Program Administration: There will be a DNP Program Director who will be responsible for implementation, governance and program accreditation. A senate faculty member will hold this leadership position. In addition there will be an Associate DNP Program Director, who will be the liaison between students and campus administration, will maintain records of student progress, and will provide oversight for program faculty. A senate or non-senate faculty member may hold this position. DNP Program Faculty will teach and contribute to the program based on their clinical and academic expertise. The curriculum overseen by the program faculty will include courses as well as live campus immersion and DNP project experiences. Administrative and technology support staff will support admissions, recruitment, course scheduling, coursework development and maintenance, technology use and faculty needs.

The UCSF DNP Degree Program is proposed as a self-supporting program (SSP). Tuition has been set to ensure an adequate operational portfolio, while ensuring marketability of the program. A mechanism for growing future program faculty will be developed. All program operations will be supported by the DNP program budget.

This program has a substantial online component, and will require approval from the Western Association of Schools and Colleges (WASC). Additionally accreditation will be obtained from the Commission on Collegiate Nursing Education (CCNE). This body will provide an ongoing evaluation framework to assure program quality. The program will be subject to ongoing evaluation processes consistent with the standards and
practices of the campus, including adequacy of program content and processes to appropriately prepare graduates for an expected career trajectory.

**Program Admission, Design & Entry Requirements:** Application to the UCSF DNP Degree Program will be overseen and administered by the program staff and leadership. The anticipated enrollment for Year 1 is 18 students with an increase to stable enrollment of 30 students by year 3. Because this is a post-Master’s program, it will build on master’s level competencies in clinical practice, scholarship, leadership, and advocacy. Students will be mentored in their roles through residencies with nursing leaders and/or leaders in senior healthcare management positions, overseen by program faculty.

The program design enhances marketability. Multiple distributive learning strategies will be used for the curriculum including synchronous and asynchronous learning with both online and face-to-face learning encounters. Approximately half of the coursework, including eight core courses and components of four project courses will be delivered using web-based strategies. On-site intersession courses will be held at the beginning (DNP Prologue), midpoint (DNP Intersession) and conclusion (DNP Epilogue) of the curriculum to provide students with the opportunity to interact directly with peers and faculty, and support mentorship and team building. The DNP Intersession course, at program midpoint, will coincide with the DNP residency and project course series as well as entry of the next incoming student cohort. The mentored DNP residency will occur live at a clinical site. A total of 51 quarter units will be required for graduation, and the seven-quarter post-Master’s curriculum can be completed in less than two years. Select optional elective courses will be developed to support additional expertise in clinical and academic teaching.

**Relationship of DNP to other programs:** Proposed coursework for the UCSF DNP Degree Program builds on the clinical, research, leadership and policy content of the current Master’s program. It complements the PhD program as well as other campus programs by providing opportunities for collaboration around the generation and translation of research. The program as depicted is not anticipated to interfere with the enrollment or resource allocation of existing programs. As presented the UCSF DNP Degree Program will provide students with an enriched educational experience and exposure to faculty and other resource expertise in evidence-based practice, translational research, leadership, and policy as well as clinical expertise across the lifespan.
## UCSF DNP Degree Program Sample Curriculum

<table>
<thead>
<tr>
<th>Quarter 1</th>
<th>Quarter 2</th>
<th>Quarter 3</th>
<th>Quarter 4</th>
</tr>
</thead>
<tbody>
<tr>
<td>DNP Prologue (2 u)</td>
<td>Methods &amp; Measurements for Translational Practice Inquiry (3 u)</td>
<td>Adv. Health Policy &amp; Advocacy (3 u)</td>
<td>Transforming Healthcare Through Inter-professional Collaboration (3 u)</td>
</tr>
<tr>
<td>Critical Appraisal of Evidence-Based Practice (3 u)</td>
<td>*Elective (1-2 u)</td>
<td>DNP Project 1: Conceptualization &amp; Planning (1 u)</td>
<td>DNP Residency (2 u)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Quarter 5</th>
<th>Quarter 6</th>
<th>Quarter 7</th>
</tr>
</thead>
<tbody>
<tr>
<td>DNP Intersession (2 u)</td>
<td>DNP Project III: Project Implementation (1 u)</td>
<td>DNP Epilogue (2 u)</td>
</tr>
<tr>
<td>DNP Project II: Project Proposal (1 u)</td>
<td>DNP Residency (5 u)</td>
<td>DNP Project IV: Project Evaluation (1 u)</td>
</tr>
<tr>
<td>DNP Residency (5 u)</td>
<td>*Elective (1-2 u)</td>
<td>DNP Residency (5 u)</td>
</tr>
</tbody>
</table>

8 6-8* 7 8

Total: 51-55 units*

*Elective courses can contribute 1-2 optional units per year
SECTION 1. INTRODUCTION

The Doctor of Nursing Practice (DNP) has evolved since 2004 to become the recommended terminal practice degree in nursing. Accreditation of DNP programs began in 2008, and there are currently 264 programs enrolling nationally according to the latest data generated by the American Association of Colleges of Nursing (AACN). Growth of DNP programs nationally has been steady and represents recognition of the need for a terminal clinical doctorate that parallels this standard in other health professions. The UCSF DNP Degree Program, with a focus on collaborative leadership will join other professional doctorate programs including but not limited to the Doctor of Pharmacy (PharmD), Doctor of Physical Therapy (DPT) and Doctor of Medicine (MD). Establishment of this program not only supports a terminal clinical practice degree but also supports strategic opportunities for collaborative inter-professional relationships at the terminal clinical practice level at UCSF and beyond.

This UCSF DNP Degree Program proposal seeks to establish this new degree program as a self-supporting program within the University of California (UC) educational system. The proposed terminal practice degree program will build on the knowledge base consistent with a nursing-focused Master of Science (MS) degree and will be offered as a post-Master’s program for nurses who are currently prepared to function at an advanced level of practice or who are nationally certified by the appropriate certification body for their specialty.

At this time no UC campus offers the DNP degree. The proposed degree program will be the first offering of a post-Master’s DNP within the UC system and will represent a unique practice degree that meets professional nursing recommendations. The UCSF DNP Degree Program will leverage the clinical, teaching and research expertise of the UCSF School of Nursing and deliver a curriculum utilizing a hybrid non-traditional format.

1.1 AIMS AND OBJECTIVES

The DNP degree is a terminal practice degree designed to develop competencies for advanced clinical and leadership roles. At their highest level, leadership, health system knowledge and quality, as well as health-care policy are the competencies emphasized in a DNP program. The DNP Essentials (published by the national accrediting body, the American Association of Colleges of Nursing (AACN) provide foundation for curriculum and address eight competencies (AACN, 2006):

- Scientific Underpinnings for Practice
- Organizational and Systems Leadership for Quality Improvement and Systems Thinking
- Clinical Scholarship and Analytical Methods for Evidence-Based Practice
The UCSF DNP Degree Program will require a combination of didactic and clinical content with additional practice units as DNP residency. Designed to enroll at the post-Master’s level, the curriculum is projected to require seven (7) quarters for completion and can be completed in less than two calendar years. The curricular unit load and duration is consistent with other established DNP programs. As recommended by the AACN in their Position Statement on the Practice Doctorate in Nursing, emphasis will be placed on advanced clinical and leadership roles (AACN, 2004) including inter-professional collaboration. In addition to core coursework that meets the DNP Essentials requirements, optional coursework will be made available to students seeking additional competency in clinical and academic teaching. Though not required for DNP curricula as established by the AACN’s DNP Essentials, exposure to teaching-focused coursework is consistent with recommendations from the Institute of Medicine (IOM) and others to address a growing faculty shortage (Robert Wood Johnson Foundation, n.d.). AACN has recently noted that DNP students who will seek teaching roles will need additional expertise in pedagogy and educational strategies (AACN, 2015; AACN, 2015b). It is anticipated that these optional courses will appeal to many learners with current or projected teaching roles, and will add to the sustainability of a pool of potential faculty available to teach in our own program as well. It will also add to a pool of experts poised for roles as inter-professional leaders on our campus and beyond. The expected target audience for the UCSF DNP Degree Program is those nurses currently prepared to function at an advanced level of practice or who are nationally certified by the appropriate certification body for advanced practice in their specialty.

Learning Outcomes of the UCSF DNP Degree Program:
Upon completion of the UCSF DNP Degree Program curriculum, and as consistent with AACN expectations, the DNP graduate will be able to:

1. Demonstrate advanced levels of clinical judgment, systems thinking and accountability in designing, delivering and evaluating evidence-based care to improve patient outcomes.
2. Integrate nursing science, science-based theory and systems knowledge into the development and evaluation of new practice approaches to care.
3. Employ advanced communication skills and processes to lead quality improvement and safety initiatives.
4. Apply analytic methods to the critical appraisal of literature and other evidence to develop and support best practice.
5. Disseminate data from evidence-based practice and research to support improvements in health outcomes.

6. Convene and lead inter-professional, collaborative stakeholder teams to create change and advance positive health outcomes.

7. Generate, evaluate and articulate innovative solutions to complex care issues.

8. Analyze the impact of local, national and global health policy on determinants of care decisions.

9. Support cost and resource efficiency, quality and accessibility of health care for diverse client groups.

10. Advocate for nursing and socially and ethically relevant policy in health care design and delivery.

11. Support and effectively lead quality improvement initiatives that enhance safe, quality and evidence driven care.

12. Effectively synthesize data from research, practice evidence and other credible sources to drive care recommendations and policy (AACN, 2006b)

1.2 HISTORICAL DEVELOPMENT

Historical development of the field.

Doctoral programs in nursing can be categorized into two foci: research-focused and practice-focused and both can effectively coexist. Historically, the majority of doctoral programs in nursing were research-focused, including the PhD and other degrees such as DNS and DNSc that primarily focused on generating nursing science and theory. Practice-focused programs, as noted by AACN, were developed to prepare nursing leaders for roles that directly influence care outcomes and are founded in nursing science. Practice-focused, according to AACN, includes nursing interventions such as direct patient care, management of populations, administration of health systems, and implementation of health policy. The DNP degree is the current recommended practice-focused degree, and compares to practice-focused degrees offered by other disciplines such as the Doctor of Dental Surgery (DDS), Doctor of Psychology (PsyD), Doctor of Medicine (MD), Doctor of Audiology (AudD), Doctor of Physical Therapy (DPT), and Doctor of Pharmacy (PharmD) (AACN, 2006; AACN, 2006b). By moving in the direction that parallels movement in these other disciplines nursing can be poised to address the dynamic needs of the national health care system, improve patient safety and reduce costs by preparing expertly skilled providers and leaders.

The need for a practice-focused doctoral degree has existed for some time and recently gained impetus not only within the profession but also within the broader health science community. The complexity of today’s healthcare environment demands a high level of scientific knowledge and expert practice skill to meet quality patient care needs and optimize positive health
outcomes. Multiple regulatory bodies and authorities have called for re-envisioning the preparation of providers who will have roles in healthcare, including the IOM, Joint Commission on Accreditation of Hospitals and Robert Wood Johnson Foundation. The National Academy of Sciences, in a 2005 report, *Advancing the Nation’s Health Needs: NIH Research Training Programs*, recommended the development of a non-research clinical doctorate that would prepare expert practitioners who would additionally add to the pool of clinical faculty (AACN, 2015). The AACN vision of development of the DNP degree as a terminal practice degree is consistent with this call for action.

In 2004 AACN acknowledged the influence of many factors when setting the DNP degree as the recommended terminal practice degree. Following substantial study, in association with multiple nursing professional organization stakeholders AACN determined that the DNP represented a necessary practice standard for preparation of advanced practice providers and leaders, and set 2015 as a target implementation date. Among those factors were increasing patient complexity and expectations for care delivery, national concerns about safety and quality, nursing provider shortages driving redesign of care delivery, and nursing faculty shortages. AACN proposed that the DNP be the required credential for nurses interested in seeking training and certification in advanced practice nursing roles such as Nurse Practitioner (NP), Clinical Nurse Midwife (CNM), Certified Registered Nurse Anesthetist (CRNA) and Clinical Nurse Specialist (CNS).

Many nursing organizations have endorsed the AACN’s recommendation for a terminal clinical practice degree. The National Organization of Nurse Practitioner Faculties (NONPF) endorses the degree recommendation and has developed practice competencies and a curriculum (NONPF, 2006; NONPF, 2015). The American Association of Nurse Anesthetists (AANA) endorses the recommendation and will require the DNP degree for certification of Nurse Anesthetists by 2025 (AANA, 2015). The National Association of Clinical Nurse Specialists endorses the practice degree and supports implementation by 2030 (NACNS, 2015). The DNP is a degree and not a role and advanced practice nursing providers in NP, CNM, CRNA and CNS roles who have achieved the Master’s degree and/or specialty certification prior to 2015 will not be required to seek the DNP. However, many nurses are choosing to obtain this advanced preparation to provide added depth to their practice and leadership roles (AACN, 2015). The UCSF DNP Degree Program can address this market interest and professional practice development need.

The 2010 IOM report, *The Future of Nursing* recommended that nursing schools/programs enhance efforts to increase the number of nurses with a doctorate by 2020, to contribute to nursing faculty, research and diversity. It was recommended that schools solicit support from funders (private and public), administrators and accrediting bodies. The proposed UCSF DNP Degree Program, endorsed by school faculty and administration is poised to meet this IOM recommendation. It will focus on the translation of research into advanced clinical practice to improve health outcomes. Working collaboratively with PhD-prepared nurses and other
professional colleagues, the DNP-degree prepared nurse can support health care that meets current practice expectations (Robert Wood Johnson Foundation, 2011).

**Figure 1: Key Differences in DNP and PhD**

As depicted in Figure 1, there are key conceptual differences between the practice-focused DNP and the research-focused PhD degrees. Program objectives, learner outcomes, and focus of scholarship are different for the DNP compared with the PhD, which is traditionally focused on academic and research-based endeavors. According to AACN, DNP-prepared nurses enhance care through practice improvements, policy change and practice scholarship; the PhD prepared nurse develops new knowledge and creates the foundation for advancing nursing science (AACN, 2006; AACN, 2006b). Additional contrast points between the DNP and the PhD are summarized in Appendix A.

However, while there are differences in education, training and focus of DNP and PhD-prepared nurses, we see these roles as complementary and envision opportunities for reciprocal sharing of experiences and coursework that leverages one another’s strengths. Graduates of a DNP program will be the liaisons for the translation of research into practice. They are prepared for an
advanced practice career with expanded preparation in practice, application of scientific evidence to practice, and familiarity with policy change for the improvement of healthcare. The critical analysis and synthesis of scientific evidence for application to practice, or evidence-based practice (EBP), is the essence of scholarship for the DNP. DNP programs admitting post-Master’s students, as will be the proposed entry for the UCSF DNP Degree Program, build on the Master’s level competencies in clinical practice, scholarship, leadership, and advocacy (AACN, 2006; AACN, 2006b). As nursing leaders with specialized expertise UCSF DNP Degree Program graduates can contribute by mentoring students in their areas of specialization. Integrated teaching opportunities will enhance their expertise in this role domain. Further, with additional elective coursework in educational pedagogy graduates will also be able to pursue faculty-teaching positions and directly contribute to the growth of nursing locally and nationally.

Since publication of the AACN recommendation of the DNP as the terminal clinical practice degree in 2004, there has been steady development of DNP programs to satisfy the national need. According to AACN, as of June 2015 there were 264 DNP programs enrolling students nationally and sixty additional programs are in the planning stages (Appendix B lists currently enrolling DNP degree programs). These programs represent 48 states as well as the District of Columbia. According to AACN data from 2013-14, enrollment in DNP programs increased from 14,688 to 18,352 (AACN, 2015).

Currently, California has eight DNP degree programs located at private institutions, including: Azuza Pacific University, Brandman University, Loma Linda University, National University, Samuel Merritt University, University of San Diego, University of San Francisco and Western University. In addition, the California State University (CSU) system offers the DNP degree through one of two consortium programs: Southern CA CSU DNP Consortium (Fullerton, Long Beach and Los Angeles campuses), and Northern Consortium (Fresno and San Jose campuses). [http://www.aacn.nche.edu/media-relations/fact-sheets/dnp](http://www.aacn.nche.edu/media-relations/fact-sheets/dnp). The California-based programs are indicated in Table 1 below.

Table 1
DNP Programs in California

<table>
<thead>
<tr>
<th>Program</th>
<th>Program units</th>
<th>Duration</th>
<th>Entry/Curricular model</th>
</tr>
</thead>
<tbody>
<tr>
<td>Azuza Pacific University</td>
<td>39 semester units</td>
<td>2 years</td>
<td>Post-MS</td>
</tr>
<tr>
<td>Brandman University</td>
<td>33 semester units*</td>
<td>21 months Post-MS</td>
<td>Post-BS; Post-MS* online with live intensives</td>
</tr>
<tr>
<td>CSU Northern Consortium Doctor of Nursing Practice. (Fresno, San Jose)</td>
<td>37 semester units; 39 semester units with electives; required intensives on rotating</td>
<td>5 semesters; 21 months</td>
<td>Post-MS Online with live intensives</td>
</tr>
<tr>
<td>Camps/University</td>
<td>Campus Units</td>
<td>Length</td>
<td>Delivery and Curriculum Details</td>
</tr>
<tr>
<td>------------------------------------------------------</td>
<td>-------------------------------------</td>
<td>--------</td>
<td>---------------------------------</td>
</tr>
<tr>
<td>CSU Southern Consortium (Fullerton, Long Beach, Los Angeles)</td>
<td>36-39 semester units</td>
<td>5 semesters; 21 months</td>
<td>Post-MS Live on-campus semesters 1-3; online with 3-5 campus intensives semesters 4-5</td>
</tr>
<tr>
<td>Loma Linda University</td>
<td>65 quarter units</td>
<td>3 years</td>
<td>Post-MS; hybrid curriculum</td>
</tr>
<tr>
<td>National University</td>
<td>45-54 quarter units*</td>
<td>NA</td>
<td>Post-BS; Post-MS* Online</td>
</tr>
<tr>
<td>Samuel Merritt University</td>
<td>35 semester units (post-MS)</td>
<td>6 semesters; 2 years</td>
<td>Post-BS; Post-MS online</td>
</tr>
<tr>
<td>University of San Diego</td>
<td>34 semester units (post-MS)</td>
<td>2-3 years</td>
<td>Post-BS; Post-MS live</td>
</tr>
<tr>
<td>University of SF</td>
<td>51-52 semester units</td>
<td>2 years</td>
<td>Post-BS; Post-MS; Live immersion weekends</td>
</tr>
<tr>
<td>Western University</td>
<td>34-40 semester units</td>
<td>2-3 years</td>
<td>Post-MS; Online; 2 immersions/semester</td>
</tr>
</tbody>
</table>

The CA-based DNP degree programs listed above represent both Master’s and Post-Master’s entry programs. The proposed UCSF DNP Degree Program will allow degree completion upon post-Master’s entry in less than two years, and will include both flexible online and interspersed live-immersion delivery to optimize faculty support and development of a community of learning for students. It will also capitalize on direct availability of faculty experts to provide an unrivaled educational experience.

Despite the exceptional growth of the DNP and programs nationally, it is important for UCSF School of Nursing to develop the proposed program. Rather than merely representing a competitor program, it represents acknowledgement of an important national movement in nursing. According to the U.S. Bureau of Labor Statistics, growth in advanced practice roles such as CRNAs, CNMs and NPs is expected to increase by over thirty percent by 2022, a rate faster than the average across all other occupations. This growth will be driven by health care legislation, focus on preventive health and demand for care from an aging population living longer (U.S. Bureau of Health Statistics, 2015). Though there has been growth in California-based DNP programs there remains a need in California to offer this advanced preparation for nurses assuming or continuing in critical clinical roles as leaders.

By offering the DNP Degree Program, UCSF School of Nursing can respond to this anticipated growth of providers and clinical leaders in need of advanced clinical training and expertise in working with inter-professional teams. Further, UCSF must participate to sustain its position as a nationally recognized nursing program. Of the current top ten ranked U.S. nursing schools,
According to the most recent U.S. News & World Report (2015), all but two have active DNP degree programs and another is currently undergoing development (Table 2). UCSF School of Nursing, currently ranked second in this review of nursing programs does not offer the DNP degree. This prestigious ranking is potentially at risk due to the lack of a DNP degree program in the school’s repertoire of nursing program offerings.

### Table 2

<table>
<thead>
<tr>
<th>Ranking</th>
<th>School</th>
<th>DNP degree program offered</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>University of Pennsylvania</td>
<td>*No</td>
</tr>
<tr>
<td>2 (tied)</td>
<td>John's Hopkins University</td>
<td>Yes</td>
</tr>
<tr>
<td>2 (tied)</td>
<td>UCSF</td>
<td>No</td>
</tr>
<tr>
<td>4</td>
<td>University of Washington</td>
<td>Yes</td>
</tr>
<tr>
<td>5</td>
<td>University of Pittsburgh</td>
<td>Yes</td>
</tr>
<tr>
<td>6 (tied)</td>
<td>Duke University</td>
<td>Yes</td>
</tr>
<tr>
<td>6 (tied)</td>
<td>New York University</td>
<td>Yes</td>
</tr>
<tr>
<td>6 (tied)</td>
<td>University of Maryland-Baltimore</td>
<td>Yes</td>
</tr>
<tr>
<td>6 (tied)</td>
<td>University of Michigan-Ann Arbor</td>
<td>Yes</td>
</tr>
<tr>
<td>10</td>
<td>Emory University</td>
<td>Yes</td>
</tr>
</tbody>
</table>

*DNP Program under development

The UCSF DNP Degree Program will allow the education of nurses in the advanced practice role to meet the demands of the ever-changing healthcare landscape. In addition to capitalizing on the educational richness of the school, it will represent a strong educational brand unrivaled within the state, and present a model for fiscal sustainability. The added versatility of a hybrid delivery design, thoughtfully incorporating both live and distance-based learning strategies optimizes access to multiple faculty and school resources.

The establishment of the UCSF DNP Degree Program will be beneficial to UCSF School of Nursing, UCSF campus and the UC system because it will acknowledge this important complementary preparation that benefits other graduate and post-graduate nursing programs, and does not compromise UC’s core missions of research and academic rigor. The program will be positioned to capitalize on the educational richness at the UCSF campus and its multiple professional schools. As shown in Figure 1, the DNP program will be positioned to leverage the intersection with the PhD program in supporting a unified goal of improved patient, population and policy outcomes.
As noted by the program endorsees (Appendix C) the UCSF DNP Degree Program offers the potential for collaboration in teaching for cross-program faculty, coursework sharing and collaboration in learning for cross-program students, within the limitations of a self-supporting program model. UCSF has an established Inter-professional Health Education (IPHE) Program that forges relationships in campus learners throughout their program of study and across the professional schools on campus. The DNP student may have an active role in leading inter-professional teams of learners as part of the IPHE curriculum. Another active inter-professional program administered by the School of Nursing, the Master’s in Healthcare Administration (MS-HAIL) offers additional potential opportunities for shared coursework experiences and leadership for DNP students. Many DNP students will be working professionals and their experiences and expertise will provide valuable mentoring for other learners who are just embarking on a professional career.

As more DNP programs enroll and graduate clinical leaders, outcomes of this advanced preparation are becoming evident. As indicated by AACN (2015) employers have now recognized the importance of DNP-prepared expert nurses in the practice setting, and demand is growing. According to a 2011 salary survey, DNP-prepared Nurse Practitioners earn $8,576 more than Master’s-prepared Nurse Practitioners (AACN, 2015). DNP graduates hold positions in a variety of settings, and many continue in their prior work setting in advanced leadership roles. DNP prepared leaders have roles in Magnet initiatives and in developing new leadership models, often originating at their places of employment (Doctors of Nursing Practice, 2015).

DNP-prepared advanced practice nurses are contributing to the translation of science and research into clinical practice, and have demonstrated rigor in development, implementation and dissemination of practice-focused projects and data across healthcare settings. Examples of publicly presented and published DNP Scholarly Projects include implementation of clinical practice guidelines, development of new procedural protocols, evaluation of new curricular models, feasibility testing of midrange theories, improving provider compliance with action plans, and collaborative counseling. These and other innovative initiatives and projects have already shaped care practice and can contribute to enhanced health outcomes and care efficiencies (Doctors of Nursing Practice, 2015; Morris, et al., 2014; Stacy, et al., 2014).

Appendix D provides a representative compilation of DNP Scholarly Projects completed by students as part of their DNP programs of study.

UCSF DNP Faculty. Faculty in the UCSF School of Nursing, both existing faculty and additional faculty who may have a role in the DNP degree program, have strengths in clinical practice, educational scholarship, global health practice and healthcare policy at the local, state, and national levels. All proposed DNP faculty have experience in curriculum development and developing and implementing online coursework. The expertise of the proposed faculty (Table
3) will support and enrich the high quality educational experience of students, who can also benefit from strategic intra-and-inter-professional collaborations available within UCSF.

Table 3
Proposed UCSF DNP Degree Program Faculty

<table>
<thead>
<tr>
<th>Faculty Member</th>
<th>Title</th>
<th>Proposed Role with DNP Program</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jyu-Lin Chen PhD CNS FAAN</td>
<td>Associate Professor Academic Senate</td>
<td>Program Director, Program Faculty</td>
</tr>
<tr>
<td>Annette Carley DNP NNP-BC PPCNP-BC</td>
<td>Health Sciences Clinical Professor</td>
<td>Assoc. Program Director, Program Faculty</td>
</tr>
<tr>
<td>Roxanne Garbez PhD ACNP-BC</td>
<td>Health Sciences Clinical Professor; Vice Chair, Department of Physiological Nursing</td>
<td>Program Faculty</td>
</tr>
<tr>
<td>Mary Lynch MS PNP-BC FAAN DNP Student</td>
<td>Health Sciences Clinical Professor; Director, Acute Care Pediatric NP Specialty</td>
<td>Program Faculty</td>
</tr>
<tr>
<td>JoAnne Saxe DNP ANP-BC FAAN</td>
<td>Health Sciences Clinical Professor; Director, Adult Gerontology NP Specialty</td>
<td>Program Faculty</td>
</tr>
<tr>
<td>Laura Wagner PhD GNP-BC FAAN</td>
<td>Assistant Professor</td>
<td>Program Faculty</td>
</tr>
</tbody>
</table>

In addition to these program faculty resource strengths, many additional School of Nursing faculty members have active interests in research and/or robust programs of research that offer outstanding potential opportunities for translational research for DNP students. Among those areas of research with potential for translation and collaboration with DNP students are: symptom management in chronic lung disease, lung cancer stigma, simulation and virtual worlds, pediatric obesity, epidemiology, firefighter occupational health, preventive women’s health and health inequities.

1.3 TIMETABLE

The UCSF DNP Degree Program is prepared to recruit and admit the first cohort of students in academic year 2017-18 pending approvals. Due to the large percentage of distance-based content used to deliver the curriculum, it is anticipated that approval will be sought from the Western Association of Schools and Colleges (WASC). Once enrolling, students the program will seek accreditation from the Commission on Collegiate Nursing Education (CCNE). It is anticipated that the UCSF DNP Degree Program approval process can be initiated in fall 2015-early 2016.

1.4 RELATION TO EXISTING CAMPUS PROGRAMS
The IOM report *The Future of Nursing* indicates patient safety and the quality of healthcare can be supported by educating health professionals in interdisciplinary teams that deliver patient-centered care while emphasizing evidence-based practice, quality improvement and use of informatics. This emphasis is based on evidence summarized in the IOM reports that patient safety and quality of care are fostered when professionals understand and appreciate the roles of their professional colleagues and effectively communicate and work together (Institute of Medicine, n.d.).

There are advantages to UCSF offering a DNP degree program in parallel with other existing campus degree programs. In 2008 the UC Academic Senate recognized the need to address development of professional doctorate programs in response to changes in profession licensure standards and recommendations. A task force charged with addressing this issue reported that:

> “PhD-granting research universities have significant advantages for offering professional doctorates. They are accustomed to offering doctoral-level training. When professional doctorates and Ph.D. programs are paired within a single disciplinary area (e.g. a Ph.D. in Nursing Science and Doctor of Nursing Practice), it is possible to create a strong complementarity. The missions and audiences of the programs can be differentiated, and the potential exists for strong interchange among students and faculty with different orientations, especially within the vocabulary of engaged or translational research.” (UC Academic Senate, 2008, p. 10).

The UCSF DNP Degree Program will encourage intra-professional collaboration within nursing and inter-professional collaboration among the other UCSF professional schools, including the Schools of Medicine, Pharmacy, Dentistry and Physical Therapy to create professional learning opportunities for all students in health-related programs. The DNP curriculum will allow the post-Master’s student to expand their knowledge and application of evidence-based practice and allow collaboration with faculty in many other fields, including healthcare and business, information science, and law.

The UCSF DNP Degree Program will operate in parallel to existing Master’s and Doctoral programs within the School of Nursing, as continued active enrollments in these programs are anticipated at this time. However, as the DNP degree becomes more established as the recommended terminal practice degree these enrollments may change nationally and at UCSF. A recent RAND report, commissioned by AACN, documented a national movement toward offering the DNP degree, and primarily offering it as a post-Baccalaureate (BSN) entry. Currently less than 15% of schools offering advanced practice registered nursing (APRN) preparation do so at the BSN-to-DNP level. However this report demonstrated that an additional 27% of schools with current Master’s-level APRN programs expect to convert these programs to BSN-to-DNP programs within the next few years (Auerbach, et al., 2014). The UCSF DNP
Degree Program will be established to enroll as a post-Master’s program to capitalize on our existing competitive Master’s program. Once established it is envisioned that alternate entry into the program (such as post-Baccalaureate DNP) can be developed, consistent with the anticipated movement in other advanced practice nursing programs nationally. At this time AACN recommends rather than mandates the DNP as entry-level preparation for advanced practice roles. This allows UCSF School of Nursing the opportunity to develop and grow a quality and sustainable DNP Degree Program that can benefit the school and its students.

The proposed program has strengths that can build upon work already underway in the School of Nursing, especially related to development of innovative programs. The UCSF School of Nursing is an early adopter of online curricula, and Moodle™ as a learning management system (LMS) is integrated into the majority of nursing courses. One notable example of successful online program development in the UCSF School of Nursing is the *Master of Science in Healthcare Administration and Interprofessional Leadership* program. Established in 2013 this innovative program, overseen by Professor Mary Louise Fleming RN PhD, is designed for professionals who are committed to roles as healthcare leaders and who will work to improve access, affordability, quality, safety and sustainability of healthcare organizations. This innovative program uses an external vendor, *Colloquy*, to manage and deliver a rigorous curriculum (University of California, San Francisco, 2016). Dr. Fleming has agreed to serve on the UCSF DNP Degree Program Advisory Board and will be a valuable resource for program development and visioning.

The proposed UCSF DNP Degree program will utilize internally-managed, distance-based learning strategies, including Moodle™ as the learning management system (LMS) for delivery of the online components of the curriculum. The proposed program faculty members have collective expertise in curriculum development and use of distance-based education strategies, and all have expertise with the application of Moodle™ LMS. For example, from 2008-2011 Dr. Carley and Ms. Lynch utilized distance-based educational strategies including Moodle™ LMS, web-conferencing and video-conferencing to develop and deliver a novel bi-campus model of Advanced Practice Neonatal Nursing education that partnered students from UCSF School of Nursing with students from the University of Hawaii, Manoa. More recently, from 2011-15 Ms. Lynch developed and implemented a distance-based model using similar technology strategies to educate Acute Care Pediatric Nurse Practitioner students integrating student cohorts from the UCSF campus with those based at the University of California, Irvine. Coursework and distance-based strategies developed and tested with these novel programs continue to be used in current pediatric and neonatal programs.

O’Neil and colleagues (2014) state that the use of online learning strategies in nursing curricula requires attention to elements that increase its effectiveness. These authors describe seven elements for effective online learning including: establishing consistent contact between learner and faculty, creating cooperation and reciprocity among learners, providing prompt feedback,
ensuring time on task, setting clear expectations, using active learning principles and offering
diverse ways of learning. These authors further note that distance-based learners participate on
three levels: student-to-faculty, student-to-student and student-to-content (O’Neil, Fisher &
Rietschel, 2014). The proposed UCSF DNP Degree Program curriculum utilizes both live and
distance-based instruction and has been developed to be consistent with the principles noted
above to support student success. Communication will be supported by select live immersion
opportunities for students to interact with each other as well as with faculty; for online and
hybrid coursework, multiple communication strategies will be used including chats and
discussion forums and web-conferencing through a password protected portal. During web-
conferencing and other online work students will be subdivided into smaller learning groups to
provide additional opportunities for engagement with both content and each other. Controlled
student-to-faculty ratios throughout the program of study, especially during project and residency
courses, will amplify this small learning group interaction. Expectations of students will be high
for all forms of instruction, whether online, hybrid or live and students will be expected to
interact directly with content at hand as well as complete preparatory work to enrich their own
learning and the collaborative learning experience with others. Time on task is an important
concept in online learning (O’Neil, Fisher & Rietschel, 2014) and expectations for in-class as
well as pre-class preparatory work will be clearly indicated in the final course syllabi. Feedback
will occur live/synchronously as well as asynchronously as enabled by the technology used in the
distance-based coursework.

The program endeavors to be flexible and convenient for anticipated working professionals.
Student success will be proportional to the level of involvement with learning activities, whether
live/synchronous or asynchronous, and a variety of active learning approaches will be used to
appeal to diverse learner expectations including those of both auditory and visual learners. The
direct involvement of a program-supported curriculum designer and management team will best
assure that pedagogically sound learning strategies are applied to engage student participants and
support their success. O’Neil and colleagues (2014) note the importance of adequate
infrastructure support to effectively deliver a curriculum that includes distance-based strategies,
including supports such as course management software and user support (O’Neil, Fisher &
Rietschel, 2014). The UCSF School of Nursing has developed supports to ensure effective
delivery of distance-based coursework, in conjunction with the UCSF Collaborative Learning
Environment. The School of Nursing recently established the \textit{Education and Curricular
Innovation Hub (Hub)} to provide strategic support for improved processes with teaching,
curricular development and effective integration for technology into nursing education for the
school. Dr. Carley was appointed to the role of Faculty Champion to guide the development of
the Hub, in partnership with faculty, staff, school governance and leadership and other campus
supports. Additional key roles in the Hub include the Hub Coordinator and the Education
Technologist. The Hub Coordinator is responsible for implementing process improvements to
support education and curricular innovation as well as use of education technology and
curriculum management resources. The Hub Coordinator is the liaison with campus partners to
identify collaborative educational opportunities, manage vendor relationships, leverage resources and showcase innovation, as well as provide direct faculty consultation with curriculum development. The Hub Coordinator has extensive expertise in instructional design, curriculum development, integration of education technology, learner assessment and faculty/staff training and development. The Hub Education Technologist supports the work of the Hub under the direction of the Hub Coordinator, and develops course delivery strategies, manages implementation and maintenance of course management tools and other technologies. The Hub Coordinator and Education Technologist will be able to advise and consult with the DNP Degree program faculty and curriculum design and management team. As noted by program referee G. Persily (Appendix C), these supports will contribute to the success of implementation and sustainability of the program.

1.5 INTERRELATIONSHIP WITH OTHER UC CAMPUSES

While the UCSF DNP Degree Program will operate independently of the other campuses, it will welcome cross-campus collaboration that can be achieved within the limitations of a self-supporting program. Four of the UC campuses offer graduate degrees in nursing, though none yet offer the DNP degree.

University of California at Davis (UCD): The Betty Irene Moore School of Nursing offers the Master of Science and Doctor of Philosophy degrees in nursing. Applicants are admitted through the Nursing Science & Healthcare Leadership Group that includes faculty from the School of Nursing and the UC Davis Health System, schools, colleges and departments. Recently, UC Davis School of Nursing was approved to begin admissions for a nurse practitioner and physician assistant program, demonstrating the School’s ability to establish inter-professional relationships and meet the changing needs of healthcare.

University of California at Irvine (UCI): The Program in Nursing Science at UC Irvine offers a Bachelor of Science, Master of Science and Doctorate degrees in Nursing Science as well as a post-graduate certificate program for Nurse Practitioners. The program has also recently collaborated with the UCSF School of Nursing to deliver a dual campus Acute Care Pediatric Nurse Practitioner degree program. This program and others demonstrates the ability of program faculty to successfully develop distance-learning resources and utilize cutting edge technology.

University of California at Los Angeles (UCLA): The School of Nursing at UCLA offers degrees in nursing at the pre-licensure, post-licensure and doctoral levels. Additionally, UCLA offers Master of Science in Nursing (MSN.) in several specialty areas and post-Master’s certificate programs. Ranked #8 in NIH research funding, UCLA School of Nursing is home to several NIH Centers that investigate the unique needs of vulnerable and under-represented
populations with particular emphasis in the adult, geriatric and oncology populations. The UCLA School of Nursing is committed to transformative research that improves healthcare.

University of California at San Francisco (UCSF): The School offers pre-licensure and post-licensure nursing programs, as well as two doctoral programs—the PhD in Nursing as well as a collaborative Nurse Scientist program leading to the PhD in Sociology. The School’s Master’s program includes diverse specialty foci such as Primary and Acute Care, Health Policy and Occupational/Environmental Health. Students enhance their learning through activities in a state-of-the-art Teaching Learning Center and a Center for Inter-professional Healthcare Education, and faculty are supported through a recently developed Education Hub. Faculty members pursue collaborative research and have developed and sustained nationally acclaimed faculty practice sites dedicated to diverse and under-served populations. The School of Nursing at UCSF is ranked #1 in NIH research funding and has a demonstrated commitment to innovative research and global healthcare leadership.

Currently, no campus within the UC system offers the DNP degree, and UCSF will be the first campus to do so. Its unique hybrid format with online coursework and live course intensives will be a novel enterprise and a model format for future programmatic offerings in the School of Nursing and on campus. It will also serve as a model for the other UC nursing schools/programs who wish to develop this terminal practice degree; this will allow the potential for future cross-campus collaboration and program/resource sharing that can benefit all of the programs.

1.6 PROGRAM ADMINISTRATION

Administratively the UCSF DNP is designed to reflect the needs of the campus and allow flexibility of implementation. All administrators and faculty of the program will be subject to the program governance as stated in the program by-laws (Appendix E) and all faculty and administrative personnel will be compensated from the DNP program budget (Appendix F). The program will be administratively housed within the Dean’s office.

DNP Program Advisory Board: An advisory board comprised of the DNP leadership (Program Director/Assistant Program Director) and inter-professional leaders and stakeholders will provide consultation during development and ongoing decision support during implementation. The group will meet as needed to facilitate communication, problem solving and continuity. The roster of proposed advisory board members is included in this proposal (Appendix G).

DNP Program Director: The UCSF DNP Program Director will be responsible for the implementation, governance and accreditation of the program, and may choose to teach in the program. The UCSF DNP Program Director has oversight of the DNP Associate Director and has primary responsibility for facilitating consensus among the DNP Faculty. The UCSF DNP
Program Director reports directly to the School of Nursing Dean, and will escalate any appropriate issues to the Dean or Dean’s designee. The directorship will be held by a senate faculty in keeping with UC system policy, and will be held for 3-5 years.

**Associate DNP Program Director:** An Associate DNP Director will work closely with and report directly to the DNP Program Director and will be the liaison between the students and campus administration. The Associate DNP Director will maintain records of student progress, as well as the teaching responsibilities of the participating program faculty. The Associate DNP Director, who may be senate or non-senate status, may also teach in the program.

**DNP Program Faculty:** Qualified faculty who have expressed interest in teaching will be eligible to teach in the program, based on their clinical, academic and research expertise. The proposed UCSF DNP Degree Program faculty members are presented in Table 3.

**DNP Program Administrative and Development Support:** Administrative staff will be responsible for admissions, recruitment, course scheduling, student counseling/advisement support and evaluation. Curriculum development support staff will be responsible for program development, maintenance and information technology support.

1.7 Program Evaluation Plan

**External Evaluation.** The program is founded on the AACN *Essentials of Doctoral Education for Advanced Nursing Practice* and inclusion of the AACN *DNP Essential Curricular Elements and Competencies* (AACN, 2006b; NONPF, 2006). These documents form the basis for program evaluation. Once the UCSF DNP Degree Program has received UC-system-wide approval, the program will seek national accreditation from CCNE. The commission will provide an ongoing evaluation framework to assure program quality. The process for CCNE accreditation takes approximately two years with accreditation occurring by the time of graduation of the first class. Due to the substantial amount of distance-based instruction in the UCSF DNP Degree Program curriculum, additional approval will be sought from WASC prior to enrollment.

**Internal Evaluation.** In addition, the UCSF DNP Degree Program will be subject to several evaluative processes consistent with the standards and practices of the campus:

- Evaluation processes that will include administrative, faculty, student, and employer review of the adequacy of program content and processes to appropriately prepare graduates for the expected career trajectory. Data will be collected and analyzed by program administrative staff, in consultation with program leadership.
- Academic Senate evaluation of the UCSF DNP Degree Program that will occur as part of the scheduled evaluation of graduate programs. Because it is a new self-supporting
program, the UCSF DNP Degree Program anticipates review according to expected timelines and policies for self-supporting programs.

SECTION 2. PROGRAM

2.1 PREPARATION FOR ADMISSION

Prospective students will apply to the UCSF DNP Degree Program as post-Master’s students according to the application process in place within the Office of Student Affairs. Applicant files will be reviewed by an admission panel of DNP program faculty members, in consultation with program leadership. The program will oversee and support the DNP residency and DNP projects for all of the students. While acknowledging that the preponderance of applicants will likely be of female gender due to the nature of the nursing profession the program is committed to the recruitment of a diverse student body (e.g. age, race/ethnicity, gender). The UCSF DNP Degree Program will enroll a cohort of 18 students in program year 1, and will ramp up enrollments to a maximum of 30 students in program year 30. See Table 4 below for projected student enrollments

<table>
<thead>
<tr>
<th>Program Year</th>
<th>Incoming Students</th>
<th>Continuing Students</th>
<th>Total Students</th>
</tr>
</thead>
<tbody>
<tr>
<td>Year 1</td>
<td>18</td>
<td>0</td>
<td>18</td>
</tr>
<tr>
<td>Year 2</td>
<td>24</td>
<td>18</td>
<td>42</td>
</tr>
<tr>
<td>Year 3</td>
<td>30</td>
<td>24</td>
<td>54</td>
</tr>
<tr>
<td>Year 4</td>
<td>30</td>
<td>30</td>
<td>60</td>
</tr>
<tr>
<td>Year 5 &amp; Beyond</td>
<td>30</td>
<td>30</td>
<td>60</td>
</tr>
</tbody>
</table>

Entry requirements for the post-Master’s DNP Degree Program include the following:

**Required:**
- Master’s degree in nursing or equivalent, documented by an official transcript from each college or university attended
- Minimum cumulative GPA of 3.4 (0-4 scale) for Master’s coursework
- TOEFL scores for international applicants and those whose native language is not English; a minimum TOEFL score set by the campus will be honored
- Evidence documenting completion a minimum of 500 clinical hours during the applicant’s Master’s program or previous post-Master’s program; APRN national certification in one of the recognized APRN roles will satisfy this requirement
• Active, unrestricted RN licensure for practice in the state where DNP residency work will occur
• A resume or curriculum vitae detailing work history, professional and volunteer activities appropriate to the advanced practice role
• Three confidential letters of recommendation from colleagues who are able to address both academic abilities and work-related experience
• A goal statement (maximum of 1000 words) describing the applicant’s professional goals and rationale for applying to the program
• Criminal background check with evidence of clearance from all states of residence within the previous three year period
• Upper-division statistics course completed within 3 years of admission to the program

Preferred:
• Verification of APRN national certification in one of the recognized APRN roles (Nurse Practitioner, Clinical Nurse Specialist, Nurse Anesthetist or Nurse Midwife) preferred
• One year of experience in advanced practice role preferred

A personal interview with a writing sample (instead of the GRE) will be required of all applicants considered for admission. Acceptance to the program will be based on review of all materials and results of the interview process.

**Future Admission Criteria.** We propose that the entry criteria may change as the program enrolls successive cohorts and progresses toward the goal of being self-supporting. The first cohort of new students will enter as described above. In addition to anticipated external applicants, this will capitalize on the existing Master’s program at the School of Nursing for potential students. Subsequent admission criteria may include post-Baccalaureate entry for those who are Registered Nurses (RNs) to support program sustainability and respond to market need. If alternate program entry is proposed at a later date, the additional curriculum and clinical units will be modified as needed and appropriate UCSF campus, UC system and accreditation approvals will be obtained as indicated.

**2.2 FOREIGN LANGUAGE REQUIREMENT**

There is no foreign language requirement for the proposed UCSF DNP Degree Program. Proficiency in a language other than English is desirable but not required.

**2.3 PROGRAM OF STUDY**

**a. Specific field of emphasis.** The UCSF DNP Degree Program will build on Master’s level advanced practice preparation. Students will integrate competencies for advanced nursing
practice roles in clinical practice, leadership, health policy, collaborative practice and education as well as further develop their scholarship capacity in the area of evidence-based practice.

Areas of clinical practice and organizational focus will vary depending on the career trajectory of the individual student. Students will be mentored in clinical and/or organizational roles through residencies with senior nursing and inter-professional clinical leaders as well as individuals in senior healthcare management positions. These residencies may take place at or near the student’s work setting or place of residence, but will be held separate from compensated work hours. UCSF DNP Degree Program faculty will provide mentorship and facilitate the residency processes throughout the student’s program. All graduates will receive the DNP degree.

b. Plan(s). The UCSF DNP Degree Program is proposed as a professional degree program. A three-member committee will evaluate an oral defense.

c. Unit Requirements. A total of 51-quarter units will be required for program completion. This number of units is within the range of units required by the majority of DNP programs nationally. The UCSF DNP Degree Program builds on a previously accomplished Master’s degree. This distinguishes our program from some DNP programs that admit nurses who only hold an undergraduate degree, but require a substantially higher number of units to achieve the DNP degree.

d. Required and Elective Courses. Course requirements are founded on consensus documents for DNP education from AACN and NONPF. A total of 51-quarter units are required to complete the UCSF DNP Degree Program, and include both didactic and clinical residency units. Twenty-four didactic units will be delivered exclusively online and an additional ten units will be delivered by hybrid instruction using both live and online strategies. Combined these distance-based strategies provide approximately 40% of the total instructional hours of the curriculum. The remaining 17 units will provide live instruction as clinical residency experiences, and contribute the remaining 60% of total instructional hours of the curriculum. Required course work for the proposed UCSF DNP Degree Program is shown below. Abbreviated course syllabi for non-elective courses are found in Appendix H. In addition to the required coursework, electives may be taken as approved by the program leadership to support additional competency in teaching or other areas of interest.

1. Concepts and Contemporary Issues for the DNP: This required online course will develop the critical thinking skills of the DNP student in evaluating the state of nursing science and its impact on practice. Scientific theories and conceptual frameworks forming the foundations of knowledge and clinical scholarship in doctoral nursing practice will be presented. Middle range theories and concepts across disciplines will be evaluated for their translational utility for clinical interventions and patient outcomes.
2. **Critical Appraisal of Evidence-Based Practice (EBP):** This required online course is designed to provide the DNP student with the skills to critically appraise and translate evidence into practice. Evidence-based practice appraisal frameworks are used to promote understanding of scientific information and support critical decision-making in healthcare.

3. **Methods and Measurement for Translational Practice Inquiry:** This required online course appraises advanced concepts in research methods and measurement strategies that are applicable to support the advanced practice nurse to access, evaluate and utilize data from various sources. Research, quality improvement initiatives, and information technology origins will be discussed as they relate to improving care delivery and practice.

4. **Improving Health Outcomes through Quality Improvement and Patient Safety:** This required online course provides an inter-professional focus in the sciences of quality improvement and patient safety within healthcare settings. The history and evolution of the quality movement, theories and thought leaders, current quality of care issues, eliminating health disparities, culturally and linguistically appropriate services, research and innovations, intervention strategies, and instruments will be addressed. In addition, discussion will include analysis of quality management system models in healthcare. Special focus will be placed on the role of the advanced practice nurse leader in developing and leading clinical quality and safety initiatives.

5. **Advanced Health Policy and Advocacy:** This required online course focuses on critical analysis of health policy in support of strategic action and advocacy. The course will cover health policy analysis within the context of economic, legal, social justice, and ethical issues and stimulate debate for decision-making and action. Students will partner with professional and/or community agencies to apply and evaluate health policy interventions and policies related to current healthcare issues.

6. **Organizational Systems and Health Economics:** This required online course is designed to expose the DNP student to a wide variety of organizational types and a foundational understanding of how healthcare is financed in the United States. Students will explore various types of healthcare organizations and delivery systems. Healthcare finance will be discussed at national and practice levels. Students will lead in-depth discussions of healthcare resources, institutional change, and the effect on the U.S. Healthcare Delivery System.

7. **Transforming Healthcare Through Inter-professional Collaboration:** This required online course is designed to acquaint DNP students with contemporary issues in the healthcare professions and expose students to inter-professional collaborative practice concepts and competencies. Students will discuss the various barriers and facilitators in achieving a model collaborative practice and explore innovative opportunities to change current practice. Students will also explore and challenge their personal belief systems and identify potential barriers to collaboration in a team environment. The class will
discuss the relationship between inter-professional education, practice and healthcare outcomes and prepare DNP graduates to assume a leadership role.

8. **Advanced Concepts in Clinical Prevention & Population Health:** This required online course enables the DNP student to integrate, synthesize and apply concepts associated with health promotion, disease prevention, and chronic health problems. Epidemiologic and biostatistical principles will be emphasized as applicable to the care of communities, and culturally diverse and vulnerable populations.

9. **Immersion Series—Prologue, Intersession, and Epilogue:** This required in-person intensive series is designed to meet the professional development of DNP students as they progress through the program. In the first intensive, *Prologue*, the student will be introduced to the UCSF DNP Degree Program, including student support services, curriculum overview, educational approach, learning expectations, ethics and academic integrity. Students will also be introduced to principles of teamwork, communication and teaching-learning theories that will be applied throughout the program of study. During the second intensive, *Intersession*, students will explore and define competencies expected of the DNP. Additionally students will present and receive faculty and peer feedback on their DNP Scholarly Project and Proposal. Recommendations related to practical data collection approaches and data analysis will also be emphasized. During the final intensive, *Epilogue*, students will assess the acquisition of DNP competencies through the presentation of their DNP Scholarly Project, self-reflection via a career plan and critical evaluation of their DNP program. The immersion series is in-person and attended by the entire cohort.

10. **DNP Project Series:** The purpose of the required DNP Project Series is to provide structured didactic content and application for the student’s DNP Scholarly Project. The DNP Scholarly Project is a key element of the DNP degree program and represents a terminal synthesis of data related to an identified practice issue. The four DNP Project Series courses will occur sequentially and each course will be held in parallel to the student’s DNP residency hours. Students must successfully complete each project series course in sequence to progress in the program. The courses will be delivered live and/or via distance-based strategies according to the needs of the student cohort and faculty mentor.

11. **DNP Residency:** AACN requires a minimum of 1,000 post-Baccalaureate hours of mentored clinical and/or organizational leadership experience for the awarding of a DNP degree. Prior to admission applicants must complete a minimum of 500 hours from an advanced practice Master’s degree or post-Master’s certification program. These 500 clinical practice hours will be accepted as part of the 1,000 required hours. The remaining hours will be obtained while a student in the UCSF DNP Degree Program (510 hours or 17 quarter units). Students must maintain and present documentation demonstrating the number of residency hours and quality of the experience throughout the program.
a. As part of the 500 hours of practice residency, students will be expected to complete 90 hours of a mentored teaching practicum that may occur in the academic or clinical setting. This requirement recognizes the need to develop clinically expert nursing teachers and faculty, and will be individualized to the student’s goals and plans. Program faculty will oversee this experience.

b. The DNP Residency is an individualized, mentored experience that addresses an identified clinical issue of interest to the student. Placement of students for the residency and practicum experiences will be individualized to assure learning opportunities with mentors addressing healthcare issues and populations applicable to the student’s career trajectory. The site of the DNP Residency may be the student’s place of employment, but experiences and accumulated DNP Residency hours will be held separately from compensated employment hours. An individualized plan for site and learner evaluation during these DNP Residency experiences will be determined by the clinical mentor, in agreement with UCSF DNP Degree Program faculty.

c. Formal teaching coursework will not be required as part of the DNP program, although a mentored teaching practicum experience will form a portion of the DNP Residency. Optional elective coursework will be developed for interested students to complement these teaching experiences, and support expertise in both clinical and academic teaching for those students who wish more intensive content in these areas.

12. **Proposed elective courses:** Optional elective coursework will be developed for interested students to complement the teaching experiences that form part of the residency, and support expertise in both clinical and academic teaching for those students who wish more intensive content in these areas.

a. **Large and small group teaching (Proposed elective course):** This course will support success and satisfaction in teaching for current or aspiring faculty. Students will identify and critically evaluate strategies that support effective large/small group teaching and identify appropriate learner assessments. Effective use of technology to support large/small group teaching will be incorporated into discussion.

b. **Clinical, procedural and simulation-based teaching (Proposed elective course):** This course will support development of effective skills that support the learning process and clinical reasoning in learners. Students will gain an understanding of the influence of learning styles, learning environment and teaching strategies on success of learning as an outcome. Use of strategies such as simulation-based learning to support both beginning and seasoned learners will be explored.
2.4 DNP CLINICAL RESIDENCY AND EVALUATION (REPLACES FIELD EXAMINATION-WRITTEN AND/OR ORAL)

UCSF DNP Degree Program students will be expected to complete a total of 1,000 post-Baccalaureate clinical practice hours to satisfy curricular expectations set by AACN. For those entering as post-Master’s students this is anticipated to require an additional 510 hours (or 17 quarter units). DNP Residency practice hours may occur at the student’s site of employment, or an advanced practice nursing residency site. If the hours are completed at the student’s employment site these hours must be held distinct from regular employment hours. If the hours are completed in an advanced practice nursing residency site, the student must have adequate protected time to successfully complete their residency-focused work. In most cases the student will select a mentor in the clinical setting who will help assure successful implementation and dissemination of the DNP Scholarly Project. Mentors will participate in student evaluations and their alignment with the DNP Essentials and will maintain active communication with the UCSF DNP Degree Program faculty. Successful completion of each DNP Residency course is mandatory prior to moving forward to the next course in sequence.

The School of Nursing currently oversees several Nurse Practitioner residency experiences at local institutions. In discussion with leadership from the San Francisco Veteran’s Administration (SFVA) facility, for example, Post-Master’s DNP student residencies for APRNs designed to develop leadership skills would be welcomed (personal communication, T. Keene). Similar experiences are likely at other community agencies, and can be more fully explored once approval of the UCSF DNP Degree Program is assured.

2.5 DNP RESIDENCY AND PROJECT COURSE SEQUENCE EVALUATION (REPLACES QUALIFYING EXAMINATIONS-WRITTEN AND/OR ORAL)

Successful progression through each of the DNP Residency and DNP Project series courses is mandatory prior to moving forward to the next course in sequence. Evidence of student performance and eligibility to move forward to the next course in sequence will be determined by evaluation of the student’s log of clinical residency experiences, site visits to evaluate performance, written evaluation from both faculty and the clinical site mentor, and ongoing communication between the student, clinical site mentor and program faculty.

2.6 DNP SCHOLARLY PROJECT (REPLACES THESIS AND/OR DISSERTATION)

In lieu of a thesis or dissertation, a Scholarly Project will be required for this professional degree. Project is the current preferred titling for the summative work produced by the DNP program student (NONPF, 2014). In preparation for developing this DNP Scholarly Project, students will complete a DNP Project Proposal and present this to their DNP Committee. Once approved the
student will begin work on their DNP Scholarly Project. The DNP Scholarly Project will require students to demonstrate a synthesis of evidence-based practice in a practice area specific to their specialty and interest. The student will present a formal defense of the completed work to the DNP Committee. Development of a formal manuscript suitable for publication will also be supported but not required.

The DNP Scholarly Project requires a synthesis of leadership, policy, quality, management, and clinical learning experiences. Each student will collaborate with an agency, ideally their current clinical setting to address a real-world problem or health issue. DNP Scholarly Projects will be encouraged in the key domains of UCSF School of Nursing faculty research and practice strengths in order to support strong mentorship. Strong professional writing and public speaking skills are expected as part of the DNP Scholarly Project. Institutional Review Board (IRB) approval, from both UCSF (i.e. CHR) and the proposed clinical site of the DNP Scholarly Project, if indicated by IRB criteria, will be required for the respective students, in accordance with policy and requirements at each setting. Copies of all IRB approvals associated with the DNP Scholarly Project shall be provided to and maintained securely on file with UCSF DNP Degree Program materials.

The DNP Committee will consist of a minimum of three members; a minimum of two approvals from DNP Committee members will be required for the student to proceed toward degree completion. The Chair of the DNP Committee must be a DNP Degree Program faculty member (PhD or DNP prepared). A second member must be either a DNP Degree Program or UCSF School of Nursing faculty member prepared at the doctorate level (PhD or DNP). The third member of the committee may be faculty in the School of Nursing or may be external to the school, and need not have a doctorate. This third member may be a mentor from the site of the DNP Scholarly Project or another professional colleague with sufficient content expertise and knowledge of the expectations of the DNP Scholarly Project. Additional clinical mentors or inter-professional colleagues are encouraged to participate as non-voting members of the student’s DNP Committee. The Associate DNP Program Director approves nomination and modifications of the DNP Committee.

Successful completion of the DNP Project coursework series will be necessary in order for the student to plan, implement and evaluate the DNP Scholarly Project. DNP faculty approval is required to progress to DNP Project Implementation. The Associate PD will confer with the student’s DNP Committee members and render the final decision on student ability to move forward. Appendix D provides examples of DNP Scholarly Projects from other institutions that have been defended, presented and/or published.

2.7 DNP SCHOLARLY PROJECT PRESENTATION (REPLACES FINAL EXAMINATION)
The DNP Proposal will be completed during the DNP Project series and approved by the student’s DNP Committee. Students will submit the final written document of the DNP Scholarly Project for approval and provide an oral defense presentation. The written document and oral presentation will include the following: background and significance; needs assessment; synthesis of the literature; project methods; project results and evaluation; project discussion including implications for advanced nursing practice in the areas of practice, policy, research, and education. Preparation and submission of a formal manuscript suitable for publication will be supported.

Successful completion of the DNP Scholarly Project is judged by approval of at least two of the three-member DNP Committee. If there is a lack of agreement the Associate DNP Program Director will decide the outcome. If the Associate DNP Program Director is already a member of the DNP Committee, another DNP faculty member will be sought to decide the outcome.

2.8 EXPLANATION OF SPECIAL REQUIREMENTS OVER AND ABOVE ACADEMIC SENATE MINIMUM REQUIREMENTS

There are no special requirements over and above academic senate minimum requirements.

2.9 RELATIONSHIP OF MASTER’S AND DOCTORAL PROGRAMS

Proposed coursework for the UCSF DNP Degree Program builds on the clinical, research, leadership and policy coursework in the Master’s degree and is designed as a post-Master’s program. Students in the DNP program will benefit from faculty expertise in evidence-based and translational research, clinical expertise across the lifespan, as well as leadership and policy experience. The self-supporting UCSF DNP Degree Program will financially compensate its own faculty, staff and administrations. Interested, qualified and available faculty from current nursing programs will be invited to participate according to the program needs and campus/school policy. We envision opportunities for sharing of coursework across programs, if possible within the expectations for self-supporting programs. For example, several DNP courses (Appendix H) that form the curriculum have potential for sharing and enhancing the curriculum for the current PhD program including: Concepts and Contemporary Issues for the DNP, Critical Appraisal of Evidence-Based Practice and Methods and Measurement for Translational Practice Inquiry. A fourth course, Transforming Healthcare Through Inter-Professional Collaboration has potential for sharing with the current MS-HAIL program as well as other inter-professional curricula.

It is anticipated that a DNP Program Council will be convened to assist with curricular and governance issues, in parallel to existing Program Councils that support the Master’s Entry Program in Nursing (i.e. MEPN Council), Master’s Program (i.e. Master’s Program Council (MPC) and Doctoral Programs (i.e. Doctoral Program Council (DPC)).
2.10 SPECIAL PREPARATION FOR CAREERS IN TEACHING

There is no special preparation for a teaching career within the UCSF DNP Degree Program since the focus is on clinical expertise, evidence-based research, leadership skill, and health policy. However, teaching threads and experiences are woven throughout the curriculum to build skill in program participants. Graduates of the UCSF DNP Degree Program will be eligible to serve as faculty in practice-focused Master’s degree and DNP programs and as clinical mentors to future undergraduate and graduate students. Pursuing additional development in teaching methodology for those seeking teaching careers will be encouraged, and this will be proposed initially as optional elective coursework. These curricular supports are consistent with the recommendation of the 2010 IOM *Future of Nursing* report that addresses doubling the number of nurses with a doctorate by 2020, to add to the number of nurse faculty and researchers.

2.11 SAMPLE PROGRAM

A sample program is shown in Table 5. The program is designed to permit students, who are anticipated to be working professionals, to maintain employment. The curricular structure increases marketability for this self-supporting program. With the permission of the UCSF DNP Degree Program leadership (i.e. PD and/or APD), students who wish to reduce their course load in the second year may postpone the DNP Project course sequence and DNP Residency experiences into a third year.

<table>
<thead>
<tr>
<th>Year</th>
<th>Quarter 1</th>
<th>Quarter 2</th>
<th>Quarter 3</th>
<th>Quarter 4</th>
</tr>
</thead>
<tbody>
<tr>
<td>YEAR I</td>
<td>DNP Prologue (2 u)</td>
<td>Methods &amp; Measurements for Translational Practice Inquiry (3 u)</td>
<td>Advanced Health Policy &amp; Advocacy (3 u)</td>
<td>Transforming Healthcare Through IP Collaboration (3 u)</td>
</tr>
<tr>
<td>YEAR I</td>
<td>Critical Appraisal of EBP (3 u)</td>
<td>*Elective (1-2 units)</td>
<td>DNP Project I: Conceptualization &amp; Planning (1 u)</td>
<td>DNP Clinical Residency (2 u)</td>
</tr>
<tr>
<td><strong>Quarter Units:</strong> 8</td>
<td><strong>Quarter Units:</strong> 6-8*</td>
<td><strong>Quarter Units:</strong> 7</td>
<td><strong>Quarter Units:</strong> 8</td>
<td></td>
</tr>
<tr>
<td><strong>Quarter 5</strong></td>
<td><strong>Quarter 6</strong></td>
<td><strong>Quarter 7</strong></td>
<td><strong>Quarter 8</strong></td>
<td></td>
</tr>
<tr>
<td>YEAR II</td>
<td>DNP Intersession (2 u)</td>
<td>DNP Project III: Project Implementation (1 u)</td>
<td>DNP Epilogue (2 u)</td>
<td></td>
</tr>
<tr>
<td>YEAR II</td>
<td>DNP Project II: DNP</td>
<td>DNP Residency (5 u)</td>
<td>DNP Project IV:</td>
<td></td>
</tr>
</tbody>
</table>
### Proposal (1 u)

<table>
<thead>
<tr>
<th></th>
<th>Project Evaluation (1 u)</th>
</tr>
</thead>
<tbody>
<tr>
<td>DNP Residency (5 u)</td>
<td>DNP Residency (5 u)</td>
</tr>
<tr>
<td>Quarter Units: 8</td>
<td>Quarter units: 6-8*</td>
</tr>
</tbody>
</table>

*Up to 4 units of approved elective coursework may be added to the curricular units

### Section 3. Projected Need

#### 3.1 Student Demand for the Program

The demand for the DNP degree is significant and the number of schools offering the degree continues to expand. AACN reports enrollment in DNP programs increased from 9,094 to 11,575 between 2011 and 2012 (AACN, 2015).

California nurses have expressed interest in enrolling in a DNP Degree Program if offered within the UC system. For example, members of the California Association of Nurse Practitioners in Los Angeles, Orange, Riverside, and San Bernardino counties were asked by survey if they were interested in earning a DNP if it was offered at the UCI campus. Positive responses were received from 41 (43.6%) of the 94 NPs responding to the survey; another 17 (18.1%) indicated they might be interested. At UCLA, of 153 alumni surveyed 76.1% supported the planning of a DNP at UCLA and 51.7% were more likely to pursue a DNP rather than a PhD. Additionally, 44.4% preferred a post-Master’s DNP offered in a hybrid format. At UCSF, Master’s graduates were polled in 2011 and 2012 regarding their interest in the DNP. Of those polled in the 2011 sample, 54 (47%) of 116 stated that if a post-Master’s DNP program were offered at UCSF they would be interested in attending. In 2012, 42 (45%) of the 93 alumnae polled indicated interest in attending a post-Master’s DNP program if it were offered at UCSF.

In California, however, opportunities for achieving the DNP degree are currently limited to eight private universities and two California State University consortium programs. In October of 2013, Campos Inc. conducted an online survey of 101 APRNs in California to determine interest

#### 2.12 Normative Time From Matriculation to Degree

The normative time from matriculation to degree is seven quarters (21 months) for the post-Master’s UCSF DNP Degree Program. From admission to advancement to candidacy (completion of DNP Scholarly Project Proposal): six quarters. From advancement to candidacy to filing the DNP Scholarly Project: one quarter minimum, ten quarters maximum. The maximum time for degree completion is four (4) years.
in a UC-system DNP Degree Program while it was envisioned as a four-campus effort. The majority of respondents believed a DNP education would help them develop knowledge and skills to practice their profession at a higher level. They also viewed the DNP degree as necessary and likely to be required in the profession in the future. In comparison to institutions in California that offer the DNP degree (i.e. Azuza Pacific University, Brandman University, CSU Northern Consortium, CSU Southern Consortium, Loma Linda University, National University, Samuel Merritt University, University of San Diego, University of San Francisco and Western University), UC-system nursing programs were viewed overall as reputable and there was a strong positive response to the potential for a DNP program. Purchase intent analyses suggested sufficient market potential and viability to support moving forward with development of the program (Appendix I).

An important finding from the Campos Inc. survey was that UCSF School of Nursing was the most highly rated of all compared institutions, including the programs that currently offer the DNP degree as well as the other three UC-system schools/programs. This supports UCSF’s role as an appropriate inaugural school to develop and implement the UCSF DNP Degree Program in the UC-system. However, because the currently proposed program will be developed at one UC-system school, a follow-up survey was conducted to establish continued market interest in a UCSF DNP Degree Program. Data from this survey suggests there is market interest in the UCSF DNP Degree Program as described, as well as interest in future entry such as post-Baccalaureate. Seventy-six respondents indicated a plan or possible plan to enroll in a DNP degree program within the next 2-3 years (76/85 responses; 89%), and for those completing the survey the majority (62/70 responses; 89%) would enroll in the UCSF DNP Degree Program as described. Results also demonstrated an interest in alternate program entry, for example post-Baccalaureate entry. Specifically 49% of respondents to this question favored post-Master’s entry as described, while the remaining 51% were interested in post-Baccalaureate entry. This finding suggests that once established as a post-Master’s entry program, in parallel to the existing School of Nursing programs, there is market potential for developing a post-Baccalaureate UCSF DNP Degree Program. This would support ongoing growth of the program (Appendix J)

3.2 OPPORTUNITIES FOR PLACEMENT OF GRADUATES

Graduates of the UCSF DNP Degree Program, in most cases, are expected to be employed professionals. For those who are not currently employed or are planning to change employment, the Bureau of Labor Statistics reports that job opportunities for RNs are excellent with high growth rates. As noted previously advanced practice roles including NP, CRNA and CNM are expected to be in high demand (U.S. Bureau of Labor Statistics, 2015). This demand for expert clinical practice providers parallels a continuing shortage of faculty for nursing programs. Graduates of the UCSF DNP Degree Program will be highly sought after as faculty in
professional nursing programs to teach courses in their specialties and areas of expertise. Locally and regionally the DNP degree-prepared advanced practice nurse is anticipated to be highly valued to support quality, safety and clinical practice initiatives. Support letters for the UCSF DNP Degree Program can be found in Appendix C.

3.3 IMPORTANCE TO THE DISCIPLINE

One of the most significant contributions of the DNP to the discipline of nursing is the enhancement of the relationship between academics and clinicians in the area of research as well as practice. As noted by AACN, the DNP degree supports development of new models of collaboration between academics and clinicians in the areas of practice and research (AACN, 2015). Graduates of DNP programs have the unique ability to enhance the academic research mission because of their preparation in translating research findings into practice. They are also able to identify practice issues amenable to new and further research and participate as practice-focused members of research teams.

DNPs will complement other faculty in the education and mentoring of undergraduate and graduate students. The complementary and blending roles will provide opportunities for the development of new educational models and testing of emerging roles. Practice innovations and improved healthcare as well as a richer learning environment for students are expected outcomes. Graduates of DNP programs will also help to alleviate the nursing faculty shortage as they participate in leadership roles in the clinical education of students (AACN, 2015b). Though the AACN DNP Essentials rubric that establishes the recommended curriculum for the UCSF DNP Degree Program does not expressly endorse teaching as a competency, the opportunity for teaching experiences and elective coursework available in clinical and academic teaching supports development of future clinical teaching experts and faculty.

3.4 WAYS IN WHICH THE PROGRAM WILL MEET THE NEEDS OF SOCIETY

The UCSF DNP Degree Program addresses societal needs for high-quality, cost-effective nursing providers and healthcare organization leaders. The proposed program is designed to develop competencies for advanced nursing practice roles in clinical practice and leadership to meet the needs of the ever-increasing complexities in delivering healthcare to individuals as well as populations. The DNP emphasizes the highest level of practice understood in terms of direct care to individuals and populations, and in terms of expert clinical intervention in the leadership of direct care policies and programs (AACN, 2015). The national demands for a higher level of preparation for advanced practice nurses to care for patients and to take a more active role in leadership, education, and clinical practice has created the need for the nursing profession to develop a clinical doctorate. DNP graduates are in a unique position to assure that research
evidence is translated appropriately to benefit practice and policy across the entire healthcare arena.

3.5 RELATIONSHIP OF THE PROGRAM TO RESEARCH AND/OR PROFESSIONAL INTERESTS OF FACULTY

The professional interests and abilities of the program faculty parallel the emphases on clinical expertise, graduate nursing education, leadership, health policy involvement, collaboration, and evidence-based practice and research required for the proposed UCSF DNP Degree Program. The proposed program will provide multiple opportunities for faculty to address current and trending research and data through engaging students in didactic and clinical courses. This collaboration would increase exposure to new and emerging topics and ideas leading to gratifying educational experiences and progression of both students and faculty. In addition to those directly involved as DNP program faculty, additional UCSF School of Nursing faculty with active programs of research can be encouraged to contribute to the potential foci of translational research for DNP students.

3.6 PROGRAM DIFFERENTIATION

The proposed UCSF DNP Degree Program will build on the strengths of the current Master’s curriculum and complement the PhD program. Differences between the clinically focused DNP and research-focused PhD degree are summarized in Figure 1. PhD degree graduates are committed to a research career to develop new knowledge for the discipline that forms the foundation for the advancement of nursing science. DNP graduates are committed to translation of research evidence into practice, and improvements in healthcare through practice, policy change, and practice scholarship.

Students in the UCSF DNP Degree Program will have an enriched educational experience. Clinical practice, evidence-based practice, and the generation of new knowledge for the science are interdependent. The development of additional graduate level courses for the DNP degree may provide elective opportunities for graduate students in all programs. The opportunities to learn together will broaden and strengthen all of the programs.

Core faculty interested in and able to teach the UCSF DNP Degree Program students have been identified and will be augmented as needed by hiring additional faculty with funds from program revenues, as noted in the program budget (Appendix F). Program emphases will attract a strong cohort of highly qualified graduate students to the school, and may also provide the impetus to develop additional nursing and inter-professional program activities at UCSF or within the greater UC system.
SECTION 4. FACULTY

The UCSF DNP Degree Program is poised to enroll students in the 2017-18 academic year pending approvals. Faculty members have been identified to directly support the program and include both DNP and PhD-prepared experts, including one Academic Senate member who will serve as Program Director. Program faculty will be compensated from program revenues as buyout, and there is no anticipated negative impact on the research productivity of faculty. As the program grows it will continue to recruit additional faculty to more optimally represent all four APRN roles. Biosketches of faculty who are proposed to teach in the program are included in Appendix K.

SECTION 5. COURSES

The UCSF DNP Degree Program will designate senate and non-senate faculty responsible for course work as appropriate to their expertise. Compensation for faculty overseeing course work will be accounted for in the program budget.

Course syllabi can be found in Appendix H. A proposed plan for coursework coverage and faculty workload is included as Appendix L. Six faculty have been identified as interested and available at program initiation, and will be utilized at various FTE from 0.1 to 0.4 FTE. The proposed plan initiates with program year 0, to allow coursework development prior to student enrollment. For Program Year 1, with an incoming cohort of 18 students projected, faculty teaching the eight core courses have sole faculty of record (FOR) responsibility for courses. Beyond year 1, as student enrollments ramp up, there will be a co-faculty of record for these core courses as well as residency and project courses. The addition of co-faculty for the project series courses and residency courses will aim to achieve a student-to-faculty ratio of 6-8:1 to optimize mentoring, advising and evaluation. The budget supports 1.8 additional faculty FTE in program year 2 to support additional incoming student numbers. Thereafter faculty FTE will be added to achieve a program student-to-faculty ratio of 14:1.

Support for curriculum development and implementation begins in program year 0. Every course has two quarters of start-up development allocated, and faculty will be able to make use of a full time curriculum designer to develop the courses. Following initial course development, a curriculum manager will assist FORs with course adjustments. A single quarter is allocated for course refreshment at the second time of offering, at which time each course will have a Co-FOR assigned. The curriculum includes both live and online courses, and the curriculum designer and curriculum manager have substantial expertise with distance-based learning. The Moodle ™ LMS will be utilized for online course delivery, and both student and FOR support will be assured by a help-desk supported through the program budget. A support letter from the Director
overseeing the UCSF Collaborative Learning Environment (Gail Persily) is included in Appendix C.

SECTION 6. RESOURCE REQUIREMENTS

6.1 FTE FACULTY

The UCSF DNP Degree Program is responsible for development and implementation of all coursework including online courses, live immersions and clinical residency/project courses. All faculty compensation to support the program will be derived from the DNP program budget and its revenue stream. Eligible and interested faculty who wish to teach in the program will be encouraged as meets program needs and as able to be compensated from the DNP budget. Appendix F demonstrates the projected program budget, and includes estimated faculty costs beginning in program year 0 (development year), followed by program enrollment starting in program year 1. In program year 2, 1.8 FTE will be added to the program to support increased faculty needs due to increased student enrollments. Faculty numbers will level off in program year 4 at 4.2 faculty FTE for a projected student enrollment of 60.

6.2 LIBRARY ACQUISITION

As indicated in the support letter from Karen Butter (Appendix C), there are no anticipated budgetary needs or library acquisition needs projected to support the UCSF DNP Degree Program.

6.3 COMPUTING COSTS

All students will be expected to have a computer and Internet access. Anticipated campus supports for computer needs for program staff have been accounted for in the DNP budget. The budget for the self-supporting UCSF DNP Degree Program includes operational costs specific to the program (Appendix F). This program contains a curriculum that is substantially online, and all applicants will be required to have personal access to computers and the Internet. The DNP budget has accounted for dedicated laptops for curriculum support in the budget to be used by program faculty and staff. The online delivery of the curriculum will be managed through the UCSF Collaborative Learning Environment, supported by dedicated program administrative support and a dedicated curriculum designer.

6.4 EQUIPMENT

The UCSF DNP Degree Program will not require specialized equipment such as training aids or high fidelity simulators. Faculty computer needs are addressed in the DNP program budget.
6.5 SPACE AND OTHER CAPITAL FACILITIES

Core support for the UCSF DNP Degree Program will come from the School of Nursing Dean’s office.

6.6 OTHER OPERATING COSTS

The UCSF DNP Degree Program is proposed as a self-supporting program, and as such cannot use state funds. The program, in agreement with leadership from the school and campus will negotiate their level of deficit spending. As indicated in the budget document, start-up loan funding has been requested, totaling $800,000.00 that will be repaid according to the indicated budget plan. The proposed student fee for the UCSF DNP Degree Program will be $61,985.00 to complete the entire program in seven quarters.

Based upon program resources, projected enrollment in Year 1 will be 18 students. This will increase to 24 and then 30 students for Year 2 and 3 respectively, and stabilize at 30 incoming students per annum. Once operational the program will explore ways to increase program revenue, including increasing target enrollment projections or seeking alternate funding sources. Enrollments in the UCSF DNP Degree Program will not dictate enrollment plans or faculty utilization for the other academic programs in the school.

The UCSF DNP Degree Program will require administrative support, as addressed in the program budget. Administrative support personnel will be responsible for program, faculty, and student support and will report to faculty and program leadership as relevant to the scope of work. Compensation for program administrative support will be accounted for in the program budget.

SECTION 7. GRADUATE STUDENT SUPPORT

EMPLOYER SUPPORT Based on our anticipated student demographic, we estimate that some DNP students will be employed at institutions that provide tuition allowance, reimbursement or stipends for education and training. This is consistent with other DNP programs nationally, and may support or supplement other forms of aid (Degree Prospects, LLC, 2016; Personal communication, M. Schorn, February 24, 2016). The UCSF School of Nursing Dean and associates have had preliminary discussions with some local institutions that have indicated intent to provide professional development and would strongly advocate for a program of UCSF School of Nursing’s stature for their nursing employees.

DIRECT FINANCIAL SUPPORT For those not receiving aid from an employer, we anticipate that some will require financial aid consistent with national norms (Degree Prospects, LLC, 2016).
The UCSF School of Nursing has a dedicated Senior Director of Development, Lynnette Teti, who has been consulted about strategizing ways to support ongoing program and student support needs. In consultation with Ms. Teti strategies can include: (1) creating an advisory council dedicated to fundraising, (2) reaching out to relevant board members and corporate sponsors, (3) meeting with local DNP degree holders to solicit advice, direct support or leverage key contacts, and (4) disseminating information about the DNP program locally and regionally, including to alumni, faculty and friends. The UCSF School of Nursing has a record of success with fundraising and securing funding to support student aid. Some recent major gifts that support student aid are indicated below and include gifts and endowments directed at the PhD, Global Health, Master’s Entry in Nursing (MEPN) and Diabetes Programs.

Table 6: Recent Gifts to the UCSF School of Nursing

<table>
<thead>
<tr>
<th>PhD Student Scholarship</th>
<th>Global Health Program Student Scholarship</th>
<th>MEPN Student Scholarship</th>
<th>Diabetes Program Student Scholarship &amp; Program Support</th>
</tr>
</thead>
<tbody>
<tr>
<td>$200,000.00 current use gift</td>
<td>$500,000.00 endowed scholarship</td>
<td>$300,000.00 gift</td>
<td>$1,500,000.00</td>
</tr>
<tr>
<td>$5,000.00 single donor gift</td>
<td></td>
<td>$225,000.00 gift</td>
<td></td>
</tr>
</tbody>
</table>

(Source: L. Teti, UCSF School of Nursing Dean’s Office)

The School of Nursing will continue efforts with fundraising, including efforts to secure funding to support the DNP program and aid for DNP program students.

**DNP PROGRAM-GENERATED SUPPORT** The UCSF DNP Degree program will set aside $1,000.00 per enrolled student to be applied toward student aid. It is anticipated that this can be accumulated with a goal of creating a pooled aid fund of need-based as well as merit-based aid over time (Appendix F). For example, with an incoming initial cohort of 18 students, $18,000.00 will be set aside toward an aid fund in program year one. The following year, with a total student cohort of 42 students (18 continuing and 24 incoming students), an additional $42,000.00 will be set aside, and the combined total can begin to be distributed as partial aid (e.g. 1-2 need-based and 1-2 merit-based partial scholarships per annum).

**ADDITIONAL FINANCIAL AID OPPORTUNITIES** The UCSF School of Nursing provides information and assistance regarding various financial aid opportunities including any financial aid directly available to students, employment opportunities and referrals to student loan programs and
organizations that can assist with providing financial assistance. We will provide financial aid information on various private, non-profit and governmental sources. Since some applicants may also be from the international community, we will provide information on resources specific to international students. The following organizations and programs provide financial aid for which DNP students are likely to have eligibility:

**The U.S. Department of Health and Human Services (DHHS), Health Resources and Services Administration (HRSA)** administers programs providing traineeships, scholarships, and loan repayment programs for graduate students in nursing. Information can be accessed at: [http://www.hrsa.gov/loanscholarships/](http://www.hrsa.gov/loanscholarships/)

**Scholarships for Disadvantaged Students.** The *Scholarships for Disadvantaged Students* program provides scholarships to full-time, financially needy students from disadvantaged backgrounds who are enrolled in health professions programs, including undergraduate and graduate nursing education programs. Participating schools select scholarship recipients, make reasonable determinations of need, and provide scholarships not to exceed the cost of student fees/tuition, reasonable educational expenses, and reasonable living expenses.

**Nursing Student Loan Program.** The *Nursing Student Loan* program is a campus-based opportunity similar to others authorized under Title IV of the Higher Education Act, particularly the Federal Perkins Loan. Educational institutions are eligible to apply for the funds if they offer programs leading to diploma, associate degree, baccalaureate degree, or graduate degrees in nursing. Students apply directly to the institution for funding.

**Nurse Faculty Loan Program.** Though the UCSF DNP Degree Program does not specifically aim to educate nursing faculty, students who complete teaching experiences and/or who take elective coursework related to clinical and academic teaching are eligible for these loans. [http://www.hrsa.gov/grants/nflp/description.htm](http://www.hrsa.gov/grants/nflp/description.htm)

**Direct unsubsidized loan/Stafford or Direct PLUS loans**

**Foundation Scholarships:**

- **American Nurse Practitioner Foundation**
- **Nurses Educational Funds (NEF) Scholarships**

Contact: Nurses Educational Funds, Inc.
304 Park Avenue South
11th Floor
March of Dimes Graduate Scholarships
Awarded to member of AWHONN or NANN, with focus on maternal-child nursing
Contact: Education Services
March of Dimes
1275 Mamaroneck Ave.
White Plains, NY 10605
http://marchofdimes.com

American Cancer Society
Awarded to applicant conducting cancer research
The American Cancer Society
Extramural Grants Department
250 Williams Street NW, 6th Floor
Atlanta, GA 30303-1002
800-227-2345
http://cancer.org

Johnson & Johnson/AACN
Minority Nurse Faculty Scholars
Awarded to minority students who agree to teach nursing after graduation
http://www.aacn.nche.edu/students/scholarships/minority

Foundation for Research in Nursing Education (FRNE)
Awarded to members of NANN or ANN, with focus on neonatal nursing

NAPNAP Foundation Richardson DNP Scholarship
Awarded to NAPNAP members pursuing DNP education
http://www.napnapfoundation.org/grantsscholarships/grantsscholarships

UCSF School of Nursing:

These financial aid programs are available to UCSF School of Nursing students. Details of these programs/scholarships can be retrieved from:
http://nursing.ucsf.edu/admissions-financial-aid/financial_aid
-Hubert Bell Allen Scholarship
This is available to doctoral students studying adult heart failure

-UCSF Nursing Alumni Association Scholarship
This scholarship is available to UCSF School of Nursing alumni pursuing advanced degrees

SECTION 8. GOVERNANCE

The UCSF DNP Degree Program will be offered by the UCSF School of Nursing. The UCSF School of Nursing currently offers other graduate nursing degrees.

SECTION 9. CHANGES IN SENATE REGULATIONS

No changes to Senate Regulations are required. Since the DNP Degree has not been previously awarded at any UC campus, the approval of this new degree will need final approval by the UC System-wide Academic Assembly, and will also require a review by WASC due to the high percentage of on-line coursework and content.
REFERENCES


http://www.aacn.nche.edu/dnp/roadmapreport.pdf

American Association of Colleges of Nursing (AACN, 2006b). The Essentials of Doctoral Education for Advanced Practice Nurses. Retrieved from:
http://www.aacn.nche.edu/dnp/Essentials.pdf

http://www.aacn.nche.edu/dnp/about/talking-points

American Association of Colleges of Nursing (AACN, 2015b). Nursing Faculty Shortage. Fact Sheet. Retrieved from:
www.aacn.nche.edu/media-relations/fact-sheets/nursing-faculty-shortage


http://www.aacn.nche.edu/dnp/DNP-Study.pdf


APPENDIX A

KEY DIFFERENCES BETWEEN DNP AND PHD PROGRAMS

(AACN CONTRAST GRID)
# APPENDIX A

## AACN Contrast Grid of the Key Differences between DNP and PhD/DNSc/DNS Programs

<table>
<thead>
<tr>
<th></th>
<th><strong>DNP</strong></th>
<th><strong>PhD/DNS/DNSc</strong></th>
</tr>
</thead>
</table>
| **Program of Study**   | **Objectives** Prepare nurse specialists at the highest level of advanced practice  
**Competencies** See AACN *Essentials of the DNP* (in draft, 2006)                                                                 | **Objectives** Prepare nurse researchers  
**Content** See *Indicators of Quality in Research-Focused Doctoral Programs in Nursing* (2001) |
| **Students**           | Commitment to practice career  
Oriented toward improving outcomes of care                                                                                                   | Commitment to research career  
Oriented toward developing new knowledge                                             |
| **Program Faculty**    | **Practice doctorate and/or expertise in area in which teaching**  
**Leadership experience in area of specialty practice**  
**High level of expertise in specialty practice congruent with focus of academic program**                                              | **Research doctorate in nursing or related field**  
**Leadership experience in area of sustained research funding**  
**High level of expertise in research congruent with focus of academic program** |
| **Resources**          | Mentors and/or precepts in leadership positions across a variety of practice settings  
Access to diverse practice settings with appropriate resources for areas of practice  
Access to financial aid  
Access to information and patient-care technology resources congruent with areas of study | Mentors and/or precepts in research settings  
Access to research settings with appropriate resources  
Access to dissertation support dollars  
Access to information and research technology resources congruent with program of research |
<table>
<thead>
<tr>
<th>Program Assessment &amp; Evaluation</th>
<th>Program Outcome Health care improvements and contributions via practice, policy change, and practice scholarship</th>
<th>Program Outcome Contributes to healthcare improvements via the development of new knowledge, and other scholarly products that provide the foundation for the advancement of nursing science Oversight by the institution’s authorized bodies (i.e., graduate school) and regional accreditors</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Receives accreditation by specialized nursing accreditor Graduates are eligible for national certification exam</td>
<td></td>
</tr>
</tbody>
</table>

APPENDIX B

AACN LIST OF SCHOOLS OF NURSING WITH DNP PROGRAMS

(AACN, 2015)
APPENDIX B

DOCTOR OF NURSING PRACTICE (DNP) DEGREE PROGRAMS
ASSOCIATION OF AMERICAN UNIVERSITIES (AAU) MEMBER UNIVERSITIES INDICATED WITH (•)
SOURCE: AACN, 2015

ALABAMA (6)
• Samford University
• The University of Alabama
• The University of Alabama in Huntsville
• Troy University
• University of Alabama at Birmingham
• University of South Alabama

• Western University of Health Sciences

COLORADO (6)
• American Sentinel University
• Colorado Mesa University
• Regis University
• University of Colorado at Colorado Springs
• University of Colorado Denver
• University of Northern Colorado

ALASKA (0)

ARIZONA (3)
• Arizona State University
• Northern Arizona University
• University of Arizona*

ARKANSAS (2)
• University of Arkansas
• University of Arkansas for Medical Sciences

CONNECTICUT (6)
• Fairfield University
• Quinnipiac University
• Sacred Heart University
• University of Connecticut
• University of Saint Joseph
• Yale University*

DISTRICT OF COLUMBIA (2)
• Catholic University of America
• George Washington University

CALIFORNIA (11)
• Azusa Pacific University
• Brandman University
• California State University - Fresno
• California State University - Fullerton
• California State University - Los Angeles
• Loma Linda University
• National University
• Samuel Merritt University
• University of San Diego
• University of San Francisco

FLORIDA (11)
• Barry University
• Florida Atlantic University
• Florida International University
• Florida State University
• Jacksonville University
• NOVA Southeastern University
• University of Central Florida
• University of Florida*
• University of Miami
• University of North Florida
• University of South Florida
GEORGIA (5)
- Brenau University
- Georgia Baptist College of Nursing of Mercer University
- Georgia College & State University
- Georgia Health Sciences University
- Georgia Southern University

HAWAII (1)
- University of Hawaii at Hilo

ILLINOIS (9)
- Governors State University
- Kaplan University
- Lewis University
- Loyola University Chicago
- Rush University
- Saint Francis Medical Center College of Nursing
- Southern Illinois University Edwardsville
- University of Illinois at Chicago
- University of St. Francis

INDIANA (6)
- Ball State University
- Indiana State University
- Indiana University-Purdue University (Indianapolis)*
  - Purdue University*
  - University of Southern Indiana
  - Valparaiso University

IOWA (3)
- Allen College
- Clarke University
- University of Iowa*

KANSAS (3)
- University of Kansas*
- Washburn University
- Wichita State University

KENTUCKY (7)
- Bellarmine University
- Eastern Kentucky University
- Frontier Nursing University
- Murray State University
- Northern Kentucky University
- University of Kentucky
- Western Kentucky University

LOUISIANA (5)
- Louisiana State University Health Sciences Ctr
- Loyola University New Orleans
- Southeastern Louisiana University
- Southern University and A&M College
- The University of Louisiana at Lafayette

MAINE (1)
- University of Southern Maine

MARYLAND (5)
- Coppin State University
- Johns Hopkins University*
- Salisbury University
- Uniformed Services University of the Health Sciences
- University of Maryland*

MASSACHUSETTS (9)
- MGH Institute for Health Professions
- Northeastern University
- Regis College
- Simmons College
- University of Massachusetts Amherst
- University of Massachusetts Boston
- University of Massachusetts Dartmouth
- University of Massachusetts Lowell
- University of Massachusetts Worcester
MICHIGAN (9)
- Grand Valley State University
- Madonna University
- Michigan State University*
- Oakland University
- Saginaw Valley State University
- University of Detroit Mercy
- University of Michigan*
- University of Michigan-Flint
- Wayne State University

MINNESOTA (10)
- Augsburg College
- Capella University
- Metropolitan State University
- Minnesota State University - Mankato
- Minnesota State University at Moorhead
- Saint Catherine University
- The College of St. Scholastica
- University of Minnesota*
- Walden University
- Winona State University

MONTANA (1)
- Montana State University-Bozeman

NEBRASKA (2)
- Creighton University
- University of Nebraska Medical Center

NEVADA (3)
- Touro University
- University of Nevada-Las Vegas
- University of Nevada-Reno

NEW JERSEY (8)
- Fairleigh Dickinson University
- Felician College
- Monmouth University
- Rutgers, The State University of New Jersey*
- Saint Peter's College
- Seton Hall University
- University of Medicine and Dentistry of New Jersey
- William Paterson University

NEW MEXICO (1)
- New Mexico State University

NEW YORK (12)
- Binghamton University
- Columbia University*
- Daemen College
- D’Youville College
- Hunter College of CUNY
- New York University*
- Pace University
- St. John Fisher College
- Stony Brook University*
- University at Buffalo*
- University of Rochester*
- Upstate Medical University
NORTH CAROLINA (1)
• Duke University*

NORTH DAKOTA (1)
• North Dakota State University

OHIO (11)
• Case Western Reserve University*
• College of Mount Saint Joseph
• Kent State University
• The Ohio State University*
• Otterbein University
• The University of Akron
• University of Cincinnati
• University of Toledo
• Ursuline College
• Walsh University
• Wright State University

OKLAHOMA (1)
• The University of Oklahoma

OREGON (2)
• Oregon Health & Science University
• University of Portland

Pennsylvania (15)
• Carlow University
• Chatham University
• DeSales University
• Drexel University (hybrid)
• Duquesne University
• La Salle University
• Robert Morris University
• Temple University
• Thomas Jefferson University
• University of Pittsburgh*
• Villanova University
• Waynesburg University
• Widener University
• Wilkes University
• York College of Pennsylvania

RHODE ISLAND (1)
• University of Rhode Island

SOUTH CAROLINA (2)
• Medical University of South Carolina
• University of South Carolina

SOUTH DAKOTA (1)
• South Dakota State University

TENNESSEE (7)
• Belmont University
• East Tennessee State University
• Union University
• University of Tennessee-Chattanooga
• University of Tennessee Health Science Center
• University of Tennessee-Knoxville
• Vanderbilt University*

TEXAS (10)
1. Baylor University
2. Texas Christian University
3. Texas Tech University Health Sciences Center
4. Texas Woman's University
5. University of Texas-Arlington
6. University of Texas-El Paso
7. University of Texas Health Science Center at Houston
8. University of Texas Health Science Center - San Antonio
9. University of Texas Medical Branch-Galveston
10. University of the Incarnate Word

UTAH (2)
• Rocky Mountain University of Health Professions
• University of Utah
VIRGINIA (6)
- George Mason University
- Marymount University
- Old Dominion University
- Radford University
- Shenandoah University
- University of Virginia*

WASHINGTON (3)
1. Seattle University
2. University of Washington*
3. Washington State University

WEST VIRGINIA (1)
- West Virginia University

WISCONSIN (6)
1. Concordia University
2. Marquette University
3. University of Wisconsin-Eau Claire
4. University of Wisconsin-Madison*
5. University of Wisconsin-Milwaukee
6. University of Wisconsin-Oshkosh

WYOMING (1)
- University of Wyoming

American Association of Colleges of Nursing. *DNP Program Schools.*
(http://www.aacn.nche.edu/dnp/program-schools) Updated 2015
APPENDIX C

LETTERS OF SUPPORT
October 15, 2015

Graduate Council
University of California, San Francisco

Dear Council Members:

I am pleased to support the proposal to establish a Doctor of Nursing Practice (DNP) program at the University of California, San Francisco. This program will leverage the expertise of School of Nursing faculty and represent an important step in collaboration on our campus and beyond. This initiative is consistent with the goal of establishing the DNP as an expected degree for Advanced Practice Registered Nurses by 2015, set forth by the American Association of Colleges of Nursing (AACN). It will support development of nurse leaders at the highest level of clinical practice, with expertise in decision-making, quality assurance, systems thinking and teamwork. This can benefit the School of Nursing as well as the greater healthcare community.

The DNP program has been developed in agreement with local as well as UC-system wide support for innovative educational strategies and the UCSF Graduate Division will award the degree. The curriculum will be enriched by the expertise of program faculty who contribute strength in clinical practice, research, leadership and policy at the local, regional, national and international level. It is anticipated that this exceptional expertise will enrich the educational experience for DNP students, who will also benefit from additional intra-professional and inter-professional collaborative opportunities at UCSF and beyond.

The proposed innovative curriculum will utilize distance-based strategies, including web-conferencing and other web-based work as well as limited face-to-face immersion experiences; these select live sessions will build a learner community as well as expose DNP students to faculty and campus resources. DNP learners will be aligned with a core group of faculty mentors, directly supported by the program, as well as encouraged to take advantage of other campus learning opportunities.

I can attest to the strength of this academic program as well as its viability, sustainability and importance for the UCSF School of Nursing.

Sincerely,

David Vlahov, RN, PhD, FAAN
Dean and Professor
UCSF School of Nursing
January 16, 2016

Jason Rock PhD
Chairperson, UCSF Graduate Council
513 Parnassus Avenue, Medical Sciences
San Francisco, CA 94143

Dear Dr. Rock:

As Associate Dean for Academic Programs in the School of Nursing, I am pleased to provide this letter of support for the School of Nursing Doctor of Nursing Practice (DNP), self-sustaining degree program. The DNP program will complement the outstanding programs currently offered in our UCSF School of Nursing, already ranked among the top ten nursing schools in the U.S.

Similar to clinical doctorates in other disciplines, e.g. the Doctor of Pharmacy (PharmD), Doctor of Medicine (MD) or Doctor of Physical Therapy (DPT) this terminal clinical practice degree reflects movement in the nursing profession to address changes in healthcare and health consumer needs. It is essential to the mission of our School to develop clinical nursing leaders to manage and deliver care for increasingly complex patients in complicated and diverse practice settings. The DNP clinical practice leader will join interprofessional colleagues in delivery of expert evidence-based and evidence-influenced high quality patient care.

Faculty participating in the DNP degree program will include nursing leaders with expertise in evidence-based clinical practice and teaching. The faculty will work with a team of educational technologists and instructional designers to carefully develop a hybrid curriculum combining highly interactive online coursework with live learning experiences and concentrated systems-based residency opportunities. The program is designed for post-Master’s entry, and is a natural extension of our current Master of Science program, for those graduates, alumna, and practicing advanced practice nurses who are interested in advancing their clinical careers to the next level.

I believe the proposal, including budget, curriculum, faculty/staff complement, and student enrollment projections, are sound and the community interest in a UCSF DNP Program is strong. Therefore, I fully support the proposal and look forward to working with Drs. Jyu-Lin Chen and Annette Carley, in the implementation of the DNP program for our School.

Very Truly Yours,

Judith L. Martin-Holland, PhD, MPA, RN, CNS, FNP, FAAN
Associate Dean, Academic Programs & Diversity Initiatives
January 15, 2016

David Vlahov RN PhD FAAN  
Dean and Professor  
UCSF School of Nursing  
2 Koret Way  
San Francisco, CA 94143

Dear Dr. Vlahov:

As Associate Professor in the School of Nursing and proposed Program Director for the Doctor of Nursing Practice (DNP) program I pledge me unequivocal support for the program. The faculty workgroup has worked diligently to create an innovative program and curriculum that should appeal to graduate learners and that has a high likelihood of sustainability.

I served as the chair at Doctoral Program Council (DPC) in the School of Nursing for two years. During these two years, DPC had reviewed the curriculum, made changes in the curriculum and we also received good reviews from the external program reviewers. I am familiar with advanced nursing education, especially doctoral program. The DNP program will establish a needed clinical practice doctorate program for the school of nursing and complements our other training programs, and faculty programs of research.

The program leadership and Dean’s office are committed to developing a sustainable program that can also develop future faculty. Once approved strategies will be developed to better support student aid as well as develop creative training linkages with community partners.

Jyu-Lin Chen, PhD, RN, CNS, FAAN  
UCSF, School of Nursing
January 15, 2016

Annette Carley, DNP, RN
Clinical Professor
Family Health Care Nursing
UCSF School of Nursing

Dr. Carley,

As you know, the Library strongly supports the proposed UCSF Doctor of Nursing Practice (DNP) program.

I personally have been involved in several discussions regarding the significant technology components of offering this program and have been impressed with the thoroughness of the consideration of these issues. We are pleased to have the program use the Collaborative Learning Environment (CLE), managed here at the Library, and our related support services.

Our educational technologies team has a long-standing relationship with the School of Nursing. Our team is currently working to coordinate our services with the new SON Education Technology and Curricular Innovation HUB and finding that collaboration very valuable and productive.

I look forward to working with you and the DNP team to embark on this new project.

Sincerely,

[Signature]
Gail Persily
Director, Educational Technologies Initiatives
April 4, 2015

Annette Carley, DNP, RN
Clinical Professor
Family Health Care Nursing
UCSF School of Nursing
Chair, DNP Workgroup

Dr. Carley,

The UCSF Library strongly supports the proposed UC Doctor of Nursing Practice (DNP) program.

The UCSF Library has worked closely with the School of Nursing in supporting the Masters and Doctoral Nursing students as they advance through their degree programs. This includes library-lead classes in searching and managing the literature and preparatory work for beginning a thesis or dissertation. In addition to expert staff to work with students and faculty the UCSF Library has a strong collection of materials in nursing and related fields to support the new program. For the most the materials are now electronic to better serve students regardless of their physical location and time of day. We assume that existing collections will serve the new program with no anticipated budgetary needs.

The UCSF Library is pleased to partner with the School of Nursing in the development and implementation of the DNP program. The Library provides a range of services for the four UCSF professional schools and the graduate division and manages space that supports clinical simulation, clinical skills development, interprofessional education and innovations in teaching and learning.

Please don’t hesitate to contact me if you have further questions.

Sincerely,

Karen Butter
University Librarian and
Assistant Vice Chancellor, Library Services and Instructional Technology
September 15, 2015

Annette Carley, RN, MS, NP
Family Health Care Nursing
School of Nursing
Box 0606
2 Koret Way, Nursing Room 405M
San Francisco, CA 94143

Dear Ms. Carley (Annette),

I am pleased to submit this letter of strong support for the UCSF Doctor of Nursing Practice (DNP) degree program. The DNP program will build upon outstanding MS, MEPN and PhD programs in the highly ranked School of Nursing at the University of California, San Francisco. Faculty from existing successful programs will teach learners in online and onsite course meetings.

Much like the Doctor of Physical Therapy degree (DPT), the DNP degree reflects the changes that are underway in healthcare. Advances in clinical treatments are enabling survival of trauma or disease. Rapidly accumulating data make it necessary for practitioners to be facile in data retrieval and analysis, in order to translate evidence into practice. The best healthcare is team-based, and DNP students will be welcomed as they join students in medicine, dentistry, physical therapy and pharmacy training in interprofessional care at UCSF.

I am pleased to see the combination of online and onsite instruction in the proposal. I envision opportunities for our DPT students to participate in courses such as Advance Concepts in Clinical Prevention and Population Health, Organizational Systems and Health Economics, and Transforming Healthcare through Interprofessional Collaboration. Our faculty may also contribute to topical discussion groups in these courses.

Please call on me if I may be of assist. Best wishes with your application.

Sincerely,

[Signature]

Kimberly S. Topp, PT, PhD
September 28, 2015

Annette Carley, RN, MS, NP
Family Health Care Nursing
School of Nursing Box 0606
2 Koret Way, Nursing Room 405M
San Francisco, CA 94143

Dear Annette,

I am pleased to submit this statement of support for the UCSF Doctor of Nursing Practice (DNP) degree program. Similar to the Doctor of Pharmacy (PharmD) degree for the pharmacy profession, the DNP program reflects a contemporary educational approach to advanced nursing training. It represents the next wave of innovations – in both content and methodology - in a program already known for highly ranked postgraduate training.

The DNP proposal provides an opportunity to re-norm campus-wide educational terminologies toward shared doctoral level expectations. The DDS, MD, PharmD, and DPT programs provide this foundation for dentistry, medicine, pharmacy, and physical therapy, with nursing currently as an outlier. The DNP will allow us to better explore our interprofessional curricular efforts through engaging scope of practice discussions.

The UCSF School of Nursing has long been a pioneer in educational methods – especially with modular, online instruction. Building upon this trend in the DNP program will ensure that many of the DNP courses will be accessible to pharmacy as well as nursing learners. And as the PharmD is currently undergoing major curricular redesign, this opens the door for robust planning about intentional collaborations in areas such as pharmacology, therapeutics, and prescribing.

In summary, the School of Pharmacy supports the strong proposal for the UCSF DNP program and looks forward to innovating with you. If I can provide any further support, please do contact me.

Sincerely,

Tina Penick Brock, RPh, MS, EdD
Associate Dean, Global Health & Educational Innovations
UCSF School of Pharmacy
October 2, 2015

David Vlahov, RN, PhD
Dean & Professor
UCSF School of Nursing
2 Koret Way
San Francisco, CA 94143

Dear Dean Vlahov:

I am excited to learn that the UCSF School of Nursing is developing a Doctor of Nursing Practice (DNP) degree program. The American Nurses Credentialing Center (ANCC) recommends establishment of the DNP as the terminal clinical practice degree and I envision many of our nurses seeking this degree. This innovative program supports an important linkage to the medical center campuses. The progressive format that delivers content both online and via live immersion sessions is appealing for applicants seeking a flexible program to accommodate their work schedules.

DNP graduates are practice leaders who can support quality and innovation in clinical practice. These highly skilled providers have additional background in evidence-based practice, translational science and systems-based practice. They can also facilitate development and sustainment of initiatives that improve patient care outcomes. One important initiative that may benefit from the influence of the DNP-prepared nurse is the Magnet® recognition program sponsored by ANCC. In 2012 UCSF Medical Center and UCSF Benioff Children's Hospital were awarded Magnet® status in recognition of the commitment to patient care quality, nursing excellence and professional nursing practice innovation. We have an obligation to support and sustain this excellence in our providers and staff. It is easy to envision the DNP having a role in the shared governance Synergy model we have created to address this goal.

An essential component of the DNP curriculum is the development and implementation of a scholarly practice project. DNP projects vary in focus and can include topics such as transition to practice models; interprofessional communication; team building and safety; clinical care bundles; interactive leadership models; and many others that improve care outcomes. DNP students frequently identify practice issues at their workplace and it is expected that this will occur at UCSF as well. This will not only benefit the student, but will contribute to practice excellence and innovation at UCSF and beyond.
I support the vision of the UCSF School of Nursing in developing this terminal practice degree program.

Sincerely,

Sheila Antrum, RN, MHSA, NEA-BC

[Signature]

President & Chief Nursing Officer
UCSF Medical Center
February 23, 2016

David Vlahov, PhD
Professor and Dean
UCSF School of Nursing

Dear Dean Vlahov,

As Interim Director of the University of California Irvine Program in Nursing Science, I am pleased to offer my strong support for the proposal for a new degree program, a Doctor of Nursing Practice (DNP), at the UCSF School of Nursing. The UCSF DNP addresses the demand in the profession for a practice doctorate, and it will join many other top tier schools that have added this degree option. I also understand that the DNP will be a self-supporting program that will not use any state-supported funds. I expect that the funds from the DNP will be critical to providing essential support for the school’s academic mission.

Nationally, schools of nursing have embraced the DNP, with over 264 programs in 48 states graduating over 3,000 DNP-prepared nurses annually\(^1\). I am pleased that UCSF School of Nursing, as a top public school of nursing will now join others to provide this degree. As you know, UC Irvine has strongly supported DNP program development at the University of California for several years. We share your vision to prepare nurses at the doctoral level with a blend of clinical, organizational, economic, and leadership skills who will significantly impact health care outcomes. Our shared decision across the UC Schools of Nursing to develop and implement this innovative program stems from the need for UC to re-envision graduate nursing education in order to prepare our future nurse clinicians, educators, and leaders. The DNP curriculum builds on content in our current master’s programs to provide doctoral preparation in evidence-based practice, quality improvement, leadership, policy advocacy, informatics, and systems thinking. As the UC has a rich history of preparing the nation’s leading nurse scientists, I believe UC Schools of Nursing are ideally suited to prepare nurses for the highest level of nursing practice.

UC Irvine’s Program in Nursing Science enthusiastically supports the development of the DNP program at UCSF to enhance the capacity of nurses who are well equipped to implement scientific knowledge and practice expertise to assure quality patient outcomes. Your leadership in moving the DNP degree forward here at the UC is greatly appreciated. Please let me know if there is anything we can do to support your progress.
Sincerely,

E. Alison Holman, PhD, FNP
Associate Professor and Interim Director

February 24, 2016

David Vlahov, PhD, RN, FAAN
Professor and Dean
UCSF School of Nursing

Dear Dean Vlahov,

As a Dean at the University of California, Los Angeles (UCLA) School of Nursing, I am pleased to support the proposal for a new degree program, a Doctor of Nursing Practice (DNP), at the University of California, San Francisco (UCSF) School of Nursing. The UCSF DNP addresses the demand in the profession for a practice doctorate, and it will now join all of the other top tier schools that have added this degree option with great success. This is consistent with the recommendation made by the Institute of Medicine in its 2010 report on *The Future of Nursing: Leading Chang, Advancing Health* that we need to double the number of nurses with doctorates in the US by 2020.

As you know, the UCLA School of Nursing also is proposing a DNP to meet the demands from the profession and our alumni. This is currently under review by the Academic Senate on our campus. DNP programs at research-intensive universities such as ours will attract students for the DNP who want to develop innovative approaches to knowledge translation to solve health problems to improve health.

Similar to our proposal, I understand that the DNP at UCSF will be a self-supporting program that will not use any state-supported funds. I expect that the funds from the DNP will be critical to providing the critical support for the school’s academic mission.

Nationally, schools of nursing are embracing the DNP. I am glad that UCSF School of Nursing, as a top school of nursing will now join others and provide this degree. I look forward to having the University of California having at least two such programs in the system in the near future.

Sincerely,

Linda Sarna, PhD, RN, FAAN
Interim Dean & Professor
Lulu Wolf Hassenplug Endowed Chair
UCLA School of Nursing
2-256 Factor
700 Tiverton Avenue
Los Angeles, CA 90095
310 825-9621
APPENDIX D

DNP SCHOLARLY PROJECT EXEMPLARS
DNP Scholarly Projects: Representative Projects and DNP Programs

Abioye-Akanji, O. Prevention and management of type 2 diabetes among African immigrants in the United States: Using a culturally tailored educational intervention with a focus on dietary plan, physical activity, and stress management (University of Massachusetts, Amhearst; http://scholarworks.umass.edu/nursing_dnp_capstone/)

Barnes, E. Implementing clinical practice guideline recommendations to address adult obesity: A practice change in primary care (West Virginia University; info@doctorsofnursingpractice.org)


Bennett, M. Cardiopulmonary resuscitation decisions in nursing home residents (Wright State University; info@doctorsofnursingpractice.org)

Brewer, T. Pediatric nurses’ attitudes and knowledge regarding the provision of breastfeeding support in a pediatric medical center (Case Western Reserve University; info@doctorsofnursingpractice.org)

Bullard, K. An innovative workforce plan: Recently graduated nurses as super users for EHR implementation in a multi-hospital organization (University of San Francisco; http://repository.usfca.edu/dnp/)

Cairns, C. The evaluation of a depression screening protocol in a pediatric primary care office (Ohio State University; https://kb.osu.edu/dspace/handle/1811/48671)

Campbell, C. Improv to improve interprofessional communication, team building, patient safety and patient satisfaction (University of San Francisco; http://repository.usfca.edu/dnp/)

Chafin, W. “Nurse retention in a correctional facility: A study of the relationship between the nurses’ perceived barriers and benefits” (Old Dominion University; info@doctorsofnursingpractice.org)

Coleman, J. Preoperative assessment of the older adult having surgery for cancer: Information to improve postoperative care (Johns Hopkins University School of Nursing; info@doctorsofnursingpractice.org)

Davidson, J. Facilitated sensemaking: Feasibility testing of a new midrange theory for family care in the ICU (Case Western Reserve University; info@doctorsofnursingpractice.org)
Dowling, D. Making a difference in the magnet environment: DNP contributions (Case Western Reserve University; info@doctorsofnursingpractice.org)

Edeker, J. Polycystic ovarian syndrome: A management algorithm for primary care providers (University of Iowa; info@doctorsofnursingpractice.org)

Enlow, W. DNP Essentials are instrumental to consensus-building for effective health care policy advocacy (Columbia University School of Nursing; info@doctorsofnursingpractice.org)

Ferguson-Parker, L. Health literacy: The road to improved health outcomes (Loyola University; info@doctorsofnursingpractice.org)

Gossett, J. Improving care delivery and communication during hospital rounds using quality improvement methodology: A multidisciplinary team approach (Ohio State University; https://kb.osu.edu/dspace/handle/1811/48671)

Gruhl, E. Motivational interviewing education for San Mateo County’s adolescent healthcare providers: Focus on healthy diet and physical activity (University of San Francisco; http://repository.usfca.edu/dnp/)

Hande, K. Measuring endoscopic performance for colorectal cancer prevention quality improvement in a gastroenterology practice (Vanderbilt University School of Nursing; info@doctorsofnursingpractice.org)

Hardin-Pierce, M. Academic practice partnership: Collaborating to improve quality in acute care services (University of Kentucky College of Nursing; info@doctorsofnursingpractice.org)

Holbrook, H. Exploring the value of group and traditional obstetrical appointments to reduce health disparity (University of San Francisco; http://repository.usfca.edu/dnp/)

Johnson, M. Pre-discharge assessment of postpartum depression (University of Alabama, Birmingham; info@doctorsofnursingpractice.org)

Lawson, K. School-based asthma education program: A research translation project (University of Massachusetts, Amherst; http://scholarworks.umass.edu/nursing_dnp_capstone/)

Lome, B. Trauma nurse practitioner workload intensity tool (Brandman University; info@doctorsofnursingpractice.org)

Manfredi, A. *The design, implementation and evaluation of a technology solution to improve discharge planning communication in a complex patient population* (University of San Francisco; http://repository.usfca.edu/dnp/)

Mansfield, V. *Asthma education and care coordination in the medical home* (University of Massachusetts, Amheast; http://scholarworks.umass.edu/nursing_dnp_capstone/)

Mariotti, N. *Development and implementation of a succession plan for the nursing department in a community hospital* (University of San Francisco; http://repository.usfca.edu/dnp/)


McGrath, C. *The use of fresh whole blood and its effect on survival rates in massive trauma: Review of a war trauma database* (Vanderbilt University School of Nursing; http://www.nursing.vanderbilt.edu/dnp/scholarlyproject.html)


Penkalski, M. *Provider adherence to evidence-based asthma guidelines in a community health center* (Missouri State University; info@doctorsofnursingpractice.org)

Perschke, A. *Examining and reducing distractions and interruptions during medication administration on a pediatric medical surgical inpatient unit: A translation study* (Johns Hopkins University School of Nursing; info@doctorsofnursingpractice.org)

Polack, J. *An evaluation of the efficacy and safety of a protocol to premedicate neonates for elective or semi-urgent intubations in a newborn intensive care unit* (West Virginia University; info@doctorsofnursingpractice.org)

Renner-Bangura, J. *Increasing influenza vaccination rates in children attending an urban family health clinic: A pilot project* (Vanderbilt University School of Nursing; http://www.nursing.vanderbilt.edu/dnp/scholarlyproject.html)

Sheppard, M. *Assessment of off-label usage of antipsychotics in middle Tennessee nursing homes* (Vanderbilt University School of Nursing; http://www.nursing.vanderbilt.edu/dnp/scholarlyproject.html)
Tiso, A. Mandates and influenza vaccination for healthcare workers: What is the impact on vaccine uptake and declination rates? (George Washington University School of Nursing; https://nursing.gwu.edu/archives)


Whitmore, J. Newborn umbilical cord care: An evidence based quality improvement project (University of San Francisco; http://repository.usfca.edu/dnp/)
APPENDIX E

PROGRAM BYLAWS
UCSF SCHOOL OF NURSING
DOCTOR OF NURSING PRACTICE (DNP) PROGRAM

BYLAWS

PART I. FUNCTIONS

1. The Faculty of the School of Nursing at the University of California San Francisco shall govern the UCSF DNP Degree Program pursuant to the rules and coordinating powers of the Academic Senate of the University of California, and the Standing Orders of the Regents respecting graduate study.

PART II. MEMBERSHIP

2. Membership to the Faculty of the UCSF DNP Degree Program is defined as members of the Academic Senate by Divisional Bylaw 45 (A).

PART III. OFFICERS

3. The Officers of the Faculty shall consist of a DNP Program Director and an Associate DNP Program Director. The DNP Program Director shall be selected by the Dean of the UCSF School of Nursing in the spring quarter for a three-year term commencing September 1; the DNP Program Director will be Chair of the UCSF DNP Degree Program Executive Committee. Should the position of the Director become vacant (e.g. due to illness, resignation, or re-assignment to other duties) the Dean shall elect a new Director (Chair) to serve out the term of the vacated Chair. The Vice Chair shall be elected for a one-year term by the UCSF DNP Executive Committee from its membership.

PART IV. MEETINGS OF THE FACULTY

1. The UCSF DNP Degree Program faculty shall meet in-person or via video-conferencing at least once quarterly after a call by the UCSF DNP Degree Program Director with a minimum of one week’s notice prior to each meeting.

2. The Faculty may meet at other times with at least five instructional days’ notice, except as provided for by Bylaw 16 (Suspension of rules- need to renumber). The meeting will transpire after:

   a) A call to meeting by the Director, and
   b) Delivery of a written request for a meeting to the Director. The request must be:
      i) Signed by at least three voting members of the DNP Degree Program faculty, and
ii) Acted on within 24 hours by the scheduling of a meeting to take place within five calendar days from receipt of request.

3. The Chair of the UCSF DNP Degree Program Executive Committee will preside at all DNP faculty meetings. In the absence of the Chair, the Vice Chair will preside at the meetings. Should the Vice Chair also be absent, another member of the UCSF DNP Degree Program Executive Committee will preside.

4. Robert’s Rules of Order (newest edition) shall govern the meetings in all instances not covered by the Bylaws.

5. The order of the agenda of the UCSF DNP Degree Program faculty meetings may be altered by vote of two-thirds of the voting faculty present at the meeting.

6. Actions or measures considered at a meeting of the UCSF DNP Degree Program faculty must be submitted via a mail ballot when:
   a. Requested by 25% of the voting members present at a meeting of the program faculty or five members, whichever is smaller.
   b. Requested in writing by five UCSF DNP Degree Program faculty members within ten calendar days after distribution of the minutes of the meeting at which the action was taken or the measure considered.

PART V. QUORUM

1. One-third of the voting members of the UCSF DNP Degree Program faculty shall constitute a quorum

PART VI. COMMITTEES

1. The UCSF School of Nursing Dean or his/her designate are ex officio members without vote except as herein designated.

2. UCSF DNP Degree Program Faculty Executive Committee
   a. Membership
      i. Voting membership on the UCSF DNP Degree Program Executive Committee shall be in conformity with Bylaw 45(A).
      ii. The Chair of the UCSF DNP Degree Program Executive Committee
      iii. The UCSF DNP Degree Program Associate Director
iv. The UCSF School of Nursing Dean or designee who is a member of the Academic Senate Faculty shall serve as an ex officio, non-voting member.

v. One representative from the UCSF campuses' non-Senate Faculty elected bi-annually from among them shall serve as a member with a recorded (advisory) vote.

b. Duties

i. Advise the Deans on matters concerning the budget for the UCSF DNP Degree Program.

ii. Consider matters of substantial concern to the UCSF DNP Degree Program faculty with respect to matters delegated to it in the Bylaws or by subsequent action.

iii. Coordinate and oversee the business of the UCSF DNP Degree Program faculty.

iv. Receive and review reports from the UCSF DNP Degree Program Associate Director.

v. Have general jurisdiction over the admissions and curricular program offerings and conduct of instruction and requirements for degree.

vi. Implement rules and regulations prescribed by the UCSF DNP Degree Program faculty.

vii. Report to the at large faculty at the UCSF School of Nursing at least quarterly.

c. Meetings

i. The UCSF DNP Degree Program Executive Committee shall meet at least once monthly at the call of the Chair of the Committee, or at the written request of a majority of its membership.

ii. The Chair of the UCSF DNP Degree Program Executive Committee will preside at all DNP Executive Committee meetings. In the absence of the Chair, the Vice Chair will preside. Should the Vice Chair become unavailable another member of the UC DNP Executive Committee will preside.

d. Quorum

i. A simple majority of voting members shall constitute a quorum.

PART VII. BALLOT VOTING
3. Ballot voting shall occur in the event of voting for Curricular changes.

a. Voting for Curricular Changes
   i. Upon receipt of curricular changes from the appropriate program committees by December 1, the UCSF DNP Degree Program Executive Committee Chair in consultation with the UCSF DNP Degree Program Executive Committee shall issue a ballot to faculty members by February 1 for any changes for the subsequent Fall quarter.
   ii. A simple majority of eligible academic senate members voting on said issue will constitute a carrying vote.

PART VIII. SUSPENSION OF RULES

1. The rules of the UCSF DNP Degree Program faculty may be suspended by vote of the UC DNP Faculty provided that not more than thirty percent (30%) of voting members present objection to such suspension.

PART IX. AMENDMENT OF BYLAWS

1. The foregoing Bylaws may be added to, amended, or repealed at any regular or special meeting by a two-thirds (2/3) vote of all the voting members present provided that written notice of amendment shall have been sent to each member of the DNP Degree Program faculty at least five working days previous to the meeting at which the amendment is to be moved. No amendment shall be made that is inconsistent with legislation of the Academic Senate.
APPENDIX F

PROGRAM BUDGET
APPENDIX G

PROPOSED ADVISORY BOARD
Proposed Advisory Board
UCSF DNP Degree Program

Karen Butter ML
University Librarian & Assistant Vice-Chancellor
University of California, San Francisco

Tina Penick Brock RPh MS EdD
Associate Dean, Global Health & Educational Innovations
School of Pharmacy
University of California, San Francisco

Doug Carlson JD
University Registrar
University of California, San Francisco

Garrett Chan RN PhD
Clinical Associate Professor, Medicine & Emergency Medicine
Stanford University

Mary Louise Fleming RN PhD
Clinical Professor & Academic Coordinator, MS-HAIL Program
School of Nursing
University of California, San Francisco

Terry Keene DNP FNP ARPD
EdPACT Center Co-Director
San Francisco VA Health Care System

Gail Persily MLIS
Director, Educational Technology Initiatives
UCSF Library & Center for Knowledge Management
University of California, San Francisco

Kimberly Topp PhD PT
Professor & Chair, Physical Therapy & Rehabilitation Science
School of Medicine
University of California, San Francisco
APPENDIX H

COURSE SYLLABI
COURSE SYLLABI

University of California, San Francisco
School of Nursing
DNP Degree Program

Course Title/#: Concepts and Contemporary Issues for the DNP

Course Credit: Three (3) quarter units

Course Description:
This online course will develop the critical thinking skills of the DNP student in evaluating the state of nursing science and its impact on practice. Scientific theories and conceptual frameworks forming the foundations of knowledge and clinical scholarship in doctoral nursing practice will be presented. Middle range theories and concepts across disciplines will be evaluated for their translational utility for clinical interventions and patient outcomes.

Course Objectives:
1. Examine middle range theories that apply to advanced nursing practice.
3. Selection and critique of appropriate theories or concepts for their impact on a clinical question.

Learner Outcomes:
1. Critically evaluate theories and frameworks and their impact on patient outcomes.
2. Critically analyze research evidence and theories to articulate a relevant practice question.
3. Demonstrate professional writing competencies.

Suggested Course Topics:
- Clinical scholarship: DNP vs. PhD
- Current state of the nursing science
- Models & theories across disciplines in the areas of:
  - Vulnerable populations
  - Transitions theory
  - Caring
  - Cultural competency & agency
  - Health promotion
  - Ethics
  - Health behavior & disparities
  - Education & learning
  - Leadership & organization
  - Social justice
  - Health policy
- Translating theory & research into practice:
  - IOM report & role of the DNP
  - Application of research to a clinical question
Grading:
Letter Grade

Suggested Assessment Strategies:
• Scholarly paper with faculty and peer review
• On-line peer discussions

Suggested Textbooks:


Course Title/#: Critical Appraisal of Evidence Based Practice (EBP)

Course Credits: Three (3) Quarter Units

Course Description:
This online course is designed to provide the DNP with the skills to critically appraise and translate evidence into practice. Evidence-based practice appraisal frameworks are used to promote understanding of scientific information and support critical decision-making in healthcare.

Course Objectives:
1. Compare and contrast the evidence-based practice paradigm with other research paradigms.
2. Develop clinically relevant, focused questions.
3. Expand information literacy skills for locating best available evidence.
4. Critically appraise quantitative and qualitative research studies using an evidence-based practice framework.
5. Apply measurement principles to critical appraisal of measurement instruments.
6. Integrate critical appraisal of evidence, clinical judgment, and patient preferences to determine applicability of evidence to practice, education, administration, or informatics.
7. Evaluate the effectiveness of using an evidence base for advanced practice

Learner Outcomes:
1. Demonstrate professional writing competencies.
2. Develop the question(s) relevant to the DNP project problem.
3. Complete literature review on selected topic.
4. Critically appraise the literature and how to identify the “best” body of evidence.
5. Synthesize the literature using critical appraisal tools and tables.
6. Have a strong knowledge base of EBP in the student’s chosen area of practice inquiry.

Suggested Course Topics:
- Introduction to Evidence-Based Practice (EBP)
- DNP role & EBP
- Developing Clinical Questions: Thinking about your DNP clinical question via Population/patient problem, Intervention, Comparison, Outcome and Timeframe (PICOT) framework
- Evidence Based Study Designs & Hierarchy of Evidence
- Critical Appraisal Tools and Critical Appraisal Tables
- Levels of Evidence II and III:
  - Analysis & Appraisal Experimental/Quasi-Experimental Designs in Clinical Practice
- Level of Evidence IV
  - Analysis & Appraisal of Non-Experimental Designs in Clinical Practice
• Levels of Evidence IV
  o Analysis & Appraisal of Diagnosis in Clinical Practice
• Level of Evidence I
  o Analysis & Appraisal of Meta-Analysis/Systemic Review in Clinical Practice
• Level of Evidence V
  o Analysis & Appraisal of Clinical Practice Guidelines in Clinical Practice

Grading:
Letter grade

Suggested Assessment Strategies:
• PICOT Exercise
• Scholarly paper with faculty and peer review
• On-line peer discussions

Suggested Textbooks:


Course Title/#: Methods and Measurement for Translational Practice Inquiry
Course Credit: Three (3) Quarter Units

Course Description:
This online course provides advanced concepts on research methods and measurement strategies that are applicable to support the advanced practice nurse to access, evaluate, and utilize data from various sources including research, quality improvement initiatives, and information technology origins to achieve improvements in care delivery and practice.

Course Objectives:
1. Design and implement processes to evaluate outcomes of practice, practice patterns, and systems of care within a practice setting, health care organization, or community against national benchmarks to determine variances in practice outcomes and population trends.
2. Demonstrate the conceptual ability and technical skills to develop and execute an evaluation plan involving data extraction from practice information systems and databases.
3. Apply relevant findings to develop practice guidelines and improve practice and the practice environment.
4. Examine the foundations of implementation science for application to improving health care improvements.

Learner Outcomes:
1. Gain familiarity with various data sources and related methods and measurement strategies relevant to these sources.
2. Design and utilize health care relevant databases for analysis of practice trends as an information source to improve practice outcomes.
3. Use information technology and research methods appropriately to collect and report data relevant to nursing practice.
4. Design and implement processes to evaluate outcomes of practice, practice patterns, and systems of care within a practice setting, health care organization, or community against national benchmarks to determine variances in practice outcomes and population trends.
5. Design, direct, and evaluate quality improvement methodologies to promote safe, timely, effective, efficient, equitable, and patient-centered care.

Suggested Course Topics:
- Collection of appropriate and accurate data to generate evidence for nursing practice
- Guiding the design of databases that generate meaningful evidence for nursing practice
  - Information technology solutions to databases and research support
- Data analysis from practice
- Designing evidence-based interventions
- Predicting and analyzing outcomes
- Examination of patterns/trends of behavior/practice and outcomes
- Improving Clinical Outcomes
• Improving Safety and Quality
• Dissemination goals /strategies
• Translation of Evidence for Impact to Clinical Practice, Leadership, Education and Health Policy

Grading:
Letter Grade

Suggested Assessment Strategies:
• Scholarly paper with faculty and peer review
• On-line peer discussions

Suggested Textbooks:


University of California, San Francisco  
School of Nursing  
DNP Degree Program

Course Title/#: Improving Health Outcomes through Quality Improvement and Patient Safety

Course Credit: Three (3) Quarter Units

Course Description: 
This online course provides an interdisciplinary background in the sciences of quality improvement and patient safety within healthcare settings. The history and evolution of the quality movement, theories and thought leaders, current quality of care issues, eliminating health disparities, culturally and linguistically appropriate services, research and innovations, intervention strategies, and instruments will be addressed; as well as an analysis of quality management system models in health care. Special focus will be placed on the role of the advanced practice nurse leader in developing and leading clinical quality and safety initiatives.

Course Objectives:
1. Assess healthcare settings to determine existing quality and safety processes, outcomes, and measures; and organizational alignment with current national quality/safety indicators and best clinical practices.
2. Design, implement, and evaluate programs that assess and monitor outcomes of care, care systems, and quality improvement including consumer use of health care information systems.
3. Demonstrate professional accountability for advanced nursing practice competencies in quality and safety management to improve health outcomes of culturally diverse patient populations.
4. Analyze political, economic, cultural, ethical, and legal issues associated with healthcare quality and safety improvement.
5. Analyze major approaches to quality and safety management including measurement of nurse-sensitive patient care outcomes.
6. Employ advanced communication skills to lead quality improvement and patient safety initiatives in healthcare systems.
7. Apply principles of change management, systems thinking and clinical microsystem theory to develop and implement practice-level and system-level quality improvement and patient safety initiatives.
8. Evaluate the impact of health information technology to improve quality and safety.
9. Use data, including nurse-sensitive measures, to monitor and improve quality and safety outcomes of care in healthcare systems.

Learner Outcomes:
1. Use quality improvement and patient safety theories and methodologies to guide quality improvement and patient safety projects in your practice.
2. Accurately complete a systems-based needs assessment.
3. Execute the steps of the clinical Microsystems assessment approach, identify solutions and evaluative approaches.
4. Identify applications of health information technology improvements.
5. Identify the QSEN competencies for baccalaureate and graduate nursing education and how to apply the KSAs (Knowledge, Skills, Attitudes) of competencies to a microsystem

Suggested Course Topics:
1. Application of Institute for Healthcare Improvement (IHI) Open School Basic Certification of Completion Online Modules
2. Role of the Nurse Leader/Educator in Quality and Safety Education for Nurses (QSEN) related competencies
3. Quality improvement and patient safety: processes and tools
4. Electronic and personal health records, telemedicine, safety reporting systems
5. Data measurement, analysis and management
6. Political, economic, cultural, ethical, and legal issues associated with healthcare quality and safety improvement.

Grading:
Letter Grade

Suggested Assessment Strategies:
• IHI certification
• Scholarly paper with faculty and peer review
• On-line peer discussions

Suggested Textbooks:


University of California, San Francisco
School of Nursing
DNP Degree Program

Course Title/#: Advanced Health Policy and Advocacy

Course Credit: Three (3) Quarter Units

Course Description:
This online course focuses on critical analysis of health policy in support of strategic action and advocacy. The course will cover health policy analysis within the context of economic, legal, social justice, and ethical issues and stimulate debate for decision-making and action. Students will partner with professional and/or community agencies to apply and evaluate health policy interventions and policies related to current health care issues.

Course Objectives:
1. Review current federal and state health care laws and policies.
2. Analyze the cost, quality and access of health care with emphasis on policy development.
3. Utilize public datasets for health services and outcomes research.
4. Apply knowledge of the policymaking process and political action to current legislative and regulatory issues.
5. Examine current issues in health care reform.

Learner Outcomes:
1. Analyze the context for current health policy formation, with the profession, health care system, and society
2. Synthesize a model for policy analysis that integrates the diversity of legal, political, social justice, economic, and ethical factors
3. Systematically analyze health policy issues to identify alternative solutions and strategies
4. Operationalize the leadership role of the DNP in advocacy for health system change through policy initiatives
5. Evaluate the impact of health policy changes on nursing and health care system practices, as well as health status of populations

Suggested Course Topics:

- Introduction to Health Policy Development and Analysis in the US Health Care System
- The Economics of Health Care
- Financing of Health Care: Private
- Financing of Health Care: Public
- Health Status and Access to Care
- Health Care Labor Issues
- Patient and Health Care Workforce Safety
- Reforming the US Health Care System (Past and Present Battles)
- Current Political Activities and Health Care
• International Health Issues: Policy Implications
• The Role of the DNP in Health Reform

Grading:
Letter grade

Suggested Assessment Strategies:
• Policy issue paper with faculty and peer review
• Policy brief with faculty and peer review
• On-line peer discussions

Suggested Textbooks:


University of California, San Francisco
School of Nursing
DNP Degree Program

Course Title/#: Organizational Systems and Health Economics
Course Credit: Three (3) quarter units

Course Description:
This online course is designed to expose the DNP student to a wide variety of organizational types and a foundational understanding of how healthcare is financed in the United States. Students will explore various types of healthcare organizations and delivery systems. Healthcare finance will be discussed at national and practice levels.

Course Objectives:
1. Examine and discuss the major issues and trends that impact the delivery of health care in the United States and other industrialized countries
2. Analyze selected theories of organizational structure, culture and philosophy as they relate to nursing and health care organizations.
3. Analyze economic, social and political forces in organizations that impact policy and decision-making in health care delivery systems related to quality management and clinical outcomes.
4. Recognize the relationship(s) between process improvement and health-related outcomes.
5. Evaluate organizational change theories for effectiveness in planning interventions.
6. Integrate concepts of quality improvement programs into the role and functions of patient care services administration to promote team development and facilitate provision of high quality health care.
7. Explore role of DNP as Project Director/Project Manager and financial and budgetary implications and expectations

Learner Outcomes:
1. Distinguish key features of organizational types and organizational theories
2. Critically evaluate healthcare organizations in relation to organizational type and specific theories
3. Discuss the changing healthcare delivery systems in the U.S. and impact on health
4. Analyze adaptive systems in healthcare organizations
5. Describe the globalization of health and international organizational development
6. Identify ethical issues related to organizational types
7. Describe how healthcare is financed in the U.S.
8. Demonstrate understanding of fiscal management and the role of the DNP in practice settings - acute care, ambulatory care, home health, and skilled nursing
9. Demonstrate professional presentation competencies
10. Articulate role of DNP in developing and managing financial resources and budgets
Suggested Course Topics:
- Organizations and Organizational Theories
- Rational, natural, and open systems
- Analysis of how institutional environments shape organizational forms, structures, and processes
- U.S. healthcare delivery systems
  - Collaborative practice models
  - Independent private practice
  - Specialty Practice (hospital, SNF, Hospice, Home care)
  - Nurse Run Clinics
  - Patient Centered Medical Home
- Processes that shape organizational populations: Ecological and adaptive change
- Ethical Considerations
- Institutional environments and organizational legitimacy
- Healthcare financing in the United States
- Billing, coding, and documentation in various practice environments
- DNP accountability in managing fiscal matters
- Budget planning

Grading:
Letter Grade

Suggested Assessment Strategies:
- On-line case study discussions
- Quizzes
- Mid-term and final examinations

Suggested Textbooks & Resources:


ICD-10 Code Book - current on-line edition

Course Title/#: Transforming Healthcare through Inter-professional Collaboration: The Road to Person-Centered and Safe Care

Course Credits: Three (3) Quarter Units

Course Description:
This online course is designed to acquaint DNP students with contemporary issues in the healthcare professions and expose students to inter-professional collaborative practice concepts and competencies. Barriers and facilitators to achieving a model collaborative practice will be debated and innovative opportunities to change current practice explored. Students' personal belief systems about high-level collaboration and team performance will be explored. The relationship between inter-professional education, practice and healthcare outcomes and processes to prepare DNP graduates to assume leadership roles will be addressed. Students will discuss the various barriers and facilitators in achieving a model collaborative practice and explore innovative opportunities to change current practice. Students will also explore and challenge their personal belief systems and identify potential barriers to high level collaboration in a team environment. The class will discuss the relationship between inter-professional education, practice and healthcare outcomes and prepare DNP graduates to assume a leadership role.

Course Objectives:
1. Recognize the importance of inter-professional teams and employ effective communication and collaboration skills.
2. Critically analyze facilitators and barriers to high quality inter-professional team leadership within a complex practice and organizational environment.
3. Construct appropriate inter-professional teams for a variety of complex healthcare delivery systems.
4. Apply inter-professional concepts to existing working relationships.
5. Conduct self assessment of conflict resolution skills.

Learner Outcomes:
1. Define inter-professional collaboration.
2. Describe and discuss the IPEC Core Competencies for Inter-professional Collaborative Practice.
3. Describe and discuss Team-Based Competencies: Building a Shared Foundation for Education and Clinical Practice.
4. Identify social, professional and legal barriers to collaborative practice.
5. Conduct a force field analysis on the barriers and facilitators related to inter-professional collaboration.
6. Identify the 7 principles of Fierce Conversations.
7. Demonstrate successful conflict resolution strategies to use with teams.
8. Identify personal strengths and weaknesses related to inter-professional collaboration in order to prepare the student for leadership role.
9. Discuss collaborative practice impact on health outcomes, including quality of care and safety.
Suggested Course Topics:
- What is Inter-professional Collaboration?
- Where does the DNP fit in the team? - Critical review of recent IOM Reports
- IPEC Core Competencies
- Team-Based Competencies
- Force Field Analysis: Exploring Environmental Facilitators and Barriers
- Creating the Model Collaborative Practice
- Fierce Conversations: Interrogating reality to tackle your toughest challenges
- Conflict Resolution
- Collaborative practice and health outcomes: Is there a relationship?

Grading:
Letter Grade

Suggested Assessment Strategies
- On-line inter-professional case discussions
- Scholarly paper with faculty and peer review

Suggested Textbooks:


University of California, San Francisco  
School of Nursing  
DNP Degree Program

Course Title/#: Advanced Concepts in Clinical Prevention & Population Health

Course Credits: Three (3) Quarter Units

Course Description:
This online course enables the DNP to integrate, synthesize and apply key concepts introduced in previous coursework so that the DNP student can incorporate the core components of the Clinical Prevention and Population Health Framework into their practice. The four components of the Clinical Prevention and Population Health Framework: evidence-based practice, clinical preventive service and health promotion, health systems and policy, and population health and community aspects of practice will be emphasized through a focus on current health issues.

Course Objectives:
1. Assess population health problems via descriptive epidemiology and biostatistics principles and concepts.
2. Analyze evidence that supports current clinical prevention and health promotion recommendations.
4. Synthesize research, theoretical and communication concepts introduced in previous coursework, including psychosocial dimensions and cultural diversity, and interprofessional engagement, to the area of clinical prevention and population health
5. Develop, implement, and evaluate evidenced-based clinical prevention and health promotion assessments and plans for vulnerable and under-served individuals, families and communities.
6. Evaluate healthcare systems and care delivery strategies using concepts related to community, quality improvement, environmental and occupational health, and cultural and socioeconomic dimensions of health.

Learner Outcomes:
1. Recognize the determinants of health and disease, including genetic, behavioral, socioeconomic, cultural, and racial that may influence healthcare access and quality.
2. Cultivate an inter-professional approach in the development of strategies to bring together multifaceted resources to improve the health of the population and vulnerable groups within the population.
3. Examine how regulatory, legislative, and public policy in private and public arenas influences the promotion of health in individuals, communities and in the general population.

Suggested Course Topics:
- Population health and disease in the U.S. and globally: an epidemiological analysis
  - Incidence and Prevalence
  - Common Measures of Disease Frequency and their Sources
  - Crude, Characteristic-Specific and Adjusted or Standardized Rates
- Population health and disease in the U.S. and globally: a micro-, meso- and macro- system analysis
- Addressing health inequities in the United States and globally
- Intra- and inter-professional engagement in clinical prevention and population health
- Clinical prevention and population health approaches and strategies
  - Grading
  - Measures of impact
  - Controversies
- Risk assessment, communication and management
- Shared decision-making and patient-centered care
- Approaches to behavior change that incorporate diverse patient perspectives
- Advanced counseling strategies for behavior change
- Implementation and evaluation of preventive and health promotion care: individual, family and community

**Grading:**
Letter Grade

**Suggested Assessment Strategies:**
- Online case study discussions
- Quizzes
- Simulated clinical experiences: risk communication, shared decision-making and counseling strategies

**Suggested Textbooks:**


University of California, San Francisco
School of Nursing
DNP Degree Program

Course Title/#: DNP Prologue
Course Credits: Two (2) Quarter Units

Course Description:
This course provides an introduction to the Doctor of Nursing Practice (DNP) Program, and provides students with an immersive learning experience that will expose them to the educational foundation needed for academic success. Course will be delivered onsite at one of the UC campuses with real-time and virtual activities.

Course Objectives:
1. Highlight DNP program goals, including an overview of the DNP Essentials, DNP curriculum and expected learning outcomes
2. Explore learning and leadership styles, and the various teaching and communication strategies that complement the identified styles
3. Identify student support services that will help to assure a healthy and productive student experience in the DNP Program
4. Explore educational technologies employed in the DNP Program
5. Demonstrate graduate level composition skills to include:
   a. Identifying strengths and gaps in one's own writing skills
   b. Creating written products that have evidence of data synthesis and constructive thinking.
   c. Accurately representing and making sense of key concepts of scientific reading through analysis, synthesis, evaluation, interpretation, reflection and problem solving.
   d. Gathering, selecting, and organizing information from multiple sources to identify patterns, differences, and overlap.
6. Identify resources and methods to perform successful literature searches and reviews
7. Evaluate baseline knowledge of methods and summary statistics
8. Conduct a self-appraisal of one's own teaching/learning skills and identify shortfalls.
9. Demonstrate basic teaching and presentation skills.

Learner Outcomes:
1. Describe an initial clinical problem that the learner would like to explore in the DNP program.
2. Delineate learning goals and an e-portfolio framework around the goals, learning and leadership styles and preliminary clinical problem statement.
3. Produce 1-3 written products that demonstrate ability to critique one's own writing.
4. Document a successful literature search and review for selected clinical topics.
5. Demonstrate competence in basic academic writing skills.
6. Demonstrate basic knowledge of methods and summary statistics.
7. Identify a topic to teach and develop course objectives, learner outcomes, teaching techniques and strategies for that topic.
8. Develop and conduct a 10 minute presentation on learner's area of interest.
Suggested Course Topics:
- Welcome and faculty introductions
- Student introductions - 1 minute elevator speech
- DNP Essentials and curriculum overview
- Clinical problem and the DNP Project
- Adult learning theories and application
- Learning and leadership styles inventory
- Learning goals
- E-portfolio
- Team-based communications: live and virtual
- Use of education technologies
- Academic integrity and ethical behavior - Ethics case studies
- Project Design Overview- Problem-solving and decision-making: experiential and evidence-based approaches
- Methods and statistics review; self-assessment of knowledge and plan to address gaps
- Use and abuse of Descriptive Statistics
- Writing Camp
- Practice and critique of basic writing
- Literature searches and reviews - begin construction of Table of Evidence
- Review scientific writing and produce a written product
- 10 minute topic presentation to class
- Construct an e-portfolio

Grading:
Satisfactory/Unsatisfactory

Suggested Assessment Strategies:
- oral presentation
- peer and faculty-reviewed writing sample

Suggested Textbooks:


Course Title/#: DNP Intersession

Course Credits: Two (2) Quarter Units

Course Description:
This course provides opportunities for the Doctor of Nursing Practice (DNP) student to present and receive faculty and peer feedback on their DNP project proposal. Recommendations related to practical data collection approaches and data analysis will also be emphasized in this course. Course will be delivered onsite at one of the UC campuses with real-time and virtual activities.

Course Objectives:
1. Assess DNP DNP project proposals.
2. Highlight relevant approaches to data collection and analysis.

Learner Outcomes:
1. Provide constructive feedback to peers so that their colleagues can effectively address the respective clinical problem.
2. Describe corrective actions and other considerations needed for implementing and evaluating their DNP project.
3. Select appropriate approaches for collecting and evaluating data for their DNP projects.

Suggested Course Topics:

Day 1.
• Attend and critique student DNP Project presentations (peer-reviewed)
• Critical reflection
• Best teaching practices and use of technology
• Faculty advising time to prepare for presentations
• Student time to work on proposal revision

Day 2
• Student DNP Project proposal presentations
• Group discussions of projects
• DNP Project implementation: steps and strategies
• Data collection procedures and tools
• DNP Project evaluation: steps and data analysis

Day 3
• Faculty advising time
• Student work time
• Opportunity for year 1 & 2 students to meet (peer mentoring)

Grading:
Satisfactory/Unsatisfactory

Suggested Assessment Strategies:
- DNP Project proposal oral presentation
- Peer and faculty evaluation of presentations

Suggested Textbooks:


University of California, San Francisco
School of Nursing
DNP Degree Program

Course Title/#: DNP Epilogue

Course Credits: Two (2) Quarter Units

Course Description:
This course will allow Doctor of Nursing Practice (DNP) students the opportunity to develop DNP competency through the presentation of their DNP project, self-reflection via a career plan and a critical evaluation of their DNP program. Course will be delivered onsite at one of the UC campuses with real-time and virtual activities.

Course Objectives:
1. Assess DNP DNP projects
2. Identify elements of a career plan
3. Discuss plans for assuring that the DNP project results are disseminated into practice
4. Evaluate the University of California DNP program

Learner Outcomes:
1. Provide constructive feedback to peers so that their colleagues can fully appreciate lessons learned from the projects and effectively and broadly disseminate project findings
2. Develop a career plan.
3. Share constructive feedback to faculty about the University of California DNP program

Suggested Course Topics:

Day 1.
- Student DNP project poster presentations
- Peer to peer feedback regarding project presentations

Day 2.
- Student DNP project poster presentations
- Peer to peer feedback regarding project presentations
- Faculty advisement
- DNP panel presentation: career opportunities and planning
- UC DNP Program evaluation
- Poster awards

Grading:
Satisfactory/Unsatisfactory

Suggested Assessment Strategies
-DNP project poster presentations
-Peer-review of posters
Suggested Textbooks:


University of California, San Francisco
School of Nursing
DNP Degree Program

Course Title/#: DNP Project Course I: Project Conceptualization and Planning
Course Credit: One (1) Quarter Unit

Course Description:
This course will assist Doctor of Nursing Practice students in gaining the knowledge, skills, and abilities necessary to develop an evidence-based project proposal and plan, which addresses a practice issue affecting a chosen microsystem. The purpose of the DNP Project courses is to provide structured didactic content and application of the Student’s DNP Project. This is the first of four DNP Project Courses that will occur sequentially and each course will be held in parallel to the student’s DNP residency hours.

Course Objectives:
1. Demonstrate an understanding of models of DNP leadership roles and competencies.
2. Articulate professional goals for the future DNP Leader.
3. Finalize an area of interest for DNP project.
4. Identify necessary resources, including appropriate faculty mentors to ensure success.
5. Synthesize knowledge of a clinical problem.
6. Identify inputs, outputs, impacts and outcomes related to the identified problem.
7. Identify potential sources for funding/support if needed.
8. Learn about the Human Subjects Ethics requirements.
9. Critique the work of others through peer-review constructively.

Learner Outcomes:
1. Have a foundational understanding of DNP roles and leadership opportunities.
2. The student will have completed a logic model for their DNP project.
3. The student will have finalized their DNP Project idea.
4. Connected with mentors and stakeholders in the student’s DNP project site.
5. The student will have engaged in at least one speaking opportunity about their DNP project idea.
6. The student will have engaged in at least one peer review activity.

Suggested Course Topics:
- Developing the DNP Project Proposal: Strategic Planning and Logic Modeling
- Project Funds, Barriers and Facilitators
- The Role of the DNP and Competencies

Grading:
Satisfactory/Unsatisfactory

Suggested Assessment Strategies:
-On-line discussions of DNP projects
-Faculty and peer evaluation of DNP project (in development)

Suggested Textbooks & Resources:


University of California, San Francisco
School of Nursing
DNP Degree Program

Course Title/#: DNP Project Course II: DNP Project Proposal

Course Credit: One (1) Quarter Unit

Course Description:
This course will assist Doctor of Nursing Practice students in developing a full proposal that reflects synthesis of the student's knowledge from prior coursework and work in an area of interest or expertise under the direction of a faculty mentor. The purpose of the DNP Project course series is to provide structured didactic content and application of the student's DNP Project. This course is the second of four sequential courses held in parallel to the student's DNP residency hours.

Course Objectives:
1. Build on professional mentorship relationships
2. Synthesize knowledge of a clinical problem and the related inputs, outputs, impacts and outcomes
3. Develop an evidence-based proposal that focuses on interprofessional practice and cultural relevance, demonstrating integration of requisite skills of research, writing, and clinical expertise.
4. Mobilize resources to facilitate successful completion of project.
5. Identify challenges and barriers to successful completion.
6. Evaluate the work of others through peer review constructively.
7. Participate in self-reflection of the work through reflective journaling activities.

Learner Outcomes:
At the end of the course, the student will have:
1. Completed their full proposal.
2. Completed at least one peer review exercise.
3. Engaged in at least one speaking opportunity about the student's DNP Project proposal.

Suggested Course Topics:
- Writing the DNP Project Proposal: Ethics and Scientific Writing
- Preparing for the Proposal Submission: Peer Review, Public Speaking

Grading:
Satisfactory/unsatisfactory

Suggested Assessment Strategies:
-On-line discussions of DNP projects
-Faculty and peer evaluation of DNP project (in development)

Suggested Textbooks & Resources:


Course Title/#: DNP Project Course III: DNP Project Implementation

Course Credit: One (1) Quarter Unit

Course Description:
This course will assist Doctor of Nursing Practice students in continued development of knowledge, skills, and abilities to implement the chosen DNP proposal. Students will assume a role of leadership in inter-professional collaboration, consultation, and partnership. Students will receive direction from a faculty mentor and peer feedback as they become engaged in the microsystem where they are implementing their DNP Project. The purpose of the DNP Project courses is to provide structured didactic content and application of the Student’s DNP Project. This course is the third of four sequential courses held in parallel to the student’s DNP residency hours.

Course Objectives:
1. Build upon professional mentorship relationships.
2. Implement the clinical evidence-based interventions outlined in the proposal.
3. Apply Kern’s model of curricular development to goals, objectives, choice of teaching strategies, and implementation and evaluation plan for educational component of the DNP Project
4. Identify and address challenges and barriers to successful completion.
5. Participate in self-reflection of the work through reflective journaling activities.
6. Participate in peer review activities.
7. Participate in at least one public speaking opportunity.

Learner Outcomes:
By the end of the course, the student should have completed all information gathering and introduced the change outlined in the DNP proposal.

Suggested Course Topics:
Implementing an evidenced-based project:
- Steps and Activities
- Marketing
- Conflict Resolution
- Interprofessional Collaboration
- Measuring Processes and Performance

Grading:
Satisfactory/Unsatisfactory
Suggested Assessment Strategies:
-On-line discussions of DNP projects
-Faculty and peer evaluation of DNP project (in development)

Suggested Textbooks & Resources:


University of California, San Francisco
School of Nursing
DNP Degree Program

Course Title/#: DNP Project Course IV: DNP Project Evaluation

Course Credit: One (1) Quarter Unit

Course Overview:
This course is designed to assist Doctor of Nursing Practice students in the completion of an evidence-based project. Students will complete the implementation phase, evaluate the project, and write the final DNP project. Students will receive individual direction from a faculty mentor and peer feedback as they write the final paper. Students will also be mentored in making professional presentations and writing for publication. This course is the last of four sequential courses held in parallel to the student’s DNP residency hours.

Course Objectives:
1. Synthesize the knowledge gained through the DNP Project
2. Evaluate the project
3. Identify lessons-learned and areas for ongoing change
4. Participate in public speaking
5. Evaluate the work of others through peer review in a thoughtful and constructive manner

Learner Outcomes:
1. At the end of the course, the student will be ready to submit the DNP project for approval and oral defense.
2. Be able to reflect on and discuss their transformational change of discussing the role of the DNP and nursing leadership.
3. Participate in at least one public speaking opportunity.
4. Participate in at least one peer review activity.

Suggested Course Topics:
• Evaluating and Completing the Project: Interpreting and Presenting Findings
• Writing the Final Proposal
• Presenting a Persuasive Discussion with Implications for Policy, Practice, Research and Education
• Coaching
• Preparing a Manuscript for Publication

Grading:
Satisfactory/Unsatisfactory
Recommended Textbooks:


APPENDIX I

CAMPOS INC. INITIAL MARKET SURVEY

October 2013
Quantitative Research Report

UC DNP Assessment Study

University of California, Irvine Extension

Job # 13-345

October 18, 2013
Contents

Background and Methodology ................................................................. 1
  Background and Objectives .............................................................. 1
  Methodology ..................................................................................... 2
Summary of Findings ........................................................................... 3
  Major Findings .................................................................................. 3
  Detailed Findings .............................................................................. 4
Appendix A: Aggregate Findings ......................................................... 12
Appendix B: Questionnaire ................................................................. 17
Background and Methodology

Background and Objectives

The nursing profession is undergoing major structural changes. Within the next several years, it is expected that a Doctor of Nursing Practice (DNP) degree may be a required credential for nurses interested in seeking certification in advanced practice roles, including Nurse Practitioner. Currently there are 217 DNP programs in the United States, a reflection both of this reality and a preference among nurses to earn a doctoral degree that is more practice-focused, rather than research-focused.

University of California Irvine’s (UCI) nursing program is partnering with other nursing programs in the University of California (UC) system to implement a hybrid DNP program with eight courses taught in an on-line format interspersed over seven quarters with three in-person immersion experience. UCI wanted to conduct a market research study among prospective students to validate this concept and demonstrate that there is sufficient interest in it.

The objectives of the study are as follows:

- Determine awareness and perceived reputation of competitive nursing programs offered in California, including:
  - Azusa Pacific University
  - Brandman University
  - California State University, Fresno/San Jose State University
  - California State University, Fullerton/LA/Long Beach
  - Loma Linda University
  - National University
  - Samuel Merritt University
  - University of California, Irvine
  - University of California, Los Angeles
  - University of California, Davis
  - University of California, San Francisco
  - University of San Francisco
  - University of San Diego
  - Western University of Health Sciences

- Assess the perceived reputation of UC system’s nursing programs as a whole relative to a competitive set of peer institutions.
- Measure level of interest in DNP programs and attitudes about them.
- Measure level of interest in a UC system offered DNP program as described in the concept definition.
- Identify key benefits.
- Identify key barriers.
- Determine purchase intent.
- Assess reaction to stated price of $55,000.
Methodology

University of Irvine, California Extension (UC) commissioned Campos Inc to conduct an **online survey** among 101 Advanced Practice Registered Nurses in the state of California to determine interest level in a new UC Doctor of Nursing Practice (DNP) degree described as follows:

The University of California seeks to establish a multi-campus collaborative Doctor of Nursing Practice (DNP) degree program. Offered jointly by all four nursing programs in the UC system (UCI, UCLA, UCD and UCSF), it will be a two-year hybrid program, with eight core courses (two from each campus) taught in an online format, interspersed with three in-person immersion experiences. The new DNP program will be taught by respective leading faculty at each campus and will offer the practice-based curriculum designed specifically to prepare nurses for advanced clinical practice and leadership roles at their institutions as well as to more capably manage increasingly complex health care delivery systems and influence public policy.

All respondents belong to a demographically and Census-balanced U.S. health professionals' panel of over 100,000 respondents who agree to periodically conduct surveys for a small incentive. Of the 101 respondents:

- 76 are Nurse Practitioners. (Note: 3 of these already earned a DNP degree and were dropped from the study).
- 14 are Clinical Nurse Specialists.
- 4 are Certified Nurses Anesthetists.
- 7 have Master's degrees in Nursing but fall outside the categories above.
Summary of Findings

Major Findings

1. Awareness and perceived reputation of UCSF’s and UCLA’s nursing programs are higher than UCD’s and UCI’s. The latter two schools have lower awareness and perceived reputation than several competitors.

2. With the exception of “value-for-the-money,” nursing programs offered across the UC system are rated higher than peer institutions on important attributes. The UC System’s nursing programs are viewed as reputable and leaders in the field.

3. Most APRNs believe a DNP education will help them develop knowledge and practical skills and practice their profession at a higher level. A large majority of APRNs are interested in learning more about a DNP degree program, which they view as necessary and likely to be required in the future.

4. Most APRNs respond positively to the description of a new UC System DNP Program, believing that it will prepare them for advanced clinical practice and leadership roles. Interest in the program is fairly high and respondents like the online format.

5. Purchase intent calculations based on questions pertaining to “likelihood to apply” and “likelihood to attend if accepted” strongly suggest that there is sufficient market potential and viability to move forward with the UC System DNP program at an acceptable cost.

6. Feedback from APRNs indicates an acceptable price point for the UC System DNP Program well below the tested $55,000 cost. Careful consideration must be given to developing an acceptable cost structure, given that many applicants say they would need government and educational loans to pay for the program. However, APRNs who are more informed of market conditions are more accepting of higher price points, and the online format was perceived positively, which may support an upward shift in price point.
I. Awareness and perceived reputation of UCSF's and UCLA’s nursing programs are higher than UCD's and UCI's. UCD and UCI have lower awareness and perceived reputation than several competitors.

Awareness and Reputation

The level of awareness of UC System universities that offer nursing programs varies. Awareness of UCSF (53%) and UCLA (52%) is much higher than UCD and UCI (both 34%). CSU Fullerton/LA/Long Beach enjoys the highest awareness.

UCSF’s Nursing Program has the best reputation (94% either excellent or very good), followed by UCLA (88%). Perceived reputations of UCD’s and UCI’s nursing programs are lower (77% and 70% respectively) and are eclipsed by several non-UC System universities.

Awareness: Which of the following nursing programs are you familiar with? (14 Universities listed)?
Reputation: % excellent + % very good for Nursing Program
2. With the exception of "value-for-the-money," nursing programs offered across the UC system are rated higher than peer institutions on important attributes. The UC System's nursing programs are viewed as reputable and leaders in the field.

Comparison of Nursing Programs

Nursing programs offered at UC universities are perceived to be of higher quality and more advantageous to students in career development. It is only value-for-the-money that a majority of respondents rated UC System nursing programs as the same or worse compared to peer institutions.

Please compare the nursing programs offered across the UC System (UC Davis, UC San Francisco, UC Irvine, and UCLA) to all other peer institutions in California collectively, which is defined as the Competitive Set.
3. Most APRNs believe a DNP education will help them develop knowledge and practical skills and practice their profession at a higher level. A large majority of APRNs are interested in learning more about a DNP degree program, which they view as necessary and likely to be required in the future.

Attitudes Toward and Interest in DNP Programs

More than 3 in 5 respondents (61%) said they were either very interested (20%) or somewhat interested (41%) in learning more about a DNP degree Program. In fact, nearly one-third (31%) have made inquiries to a university in California about a DNP Program.

As the chart below illustrates, more than 7 in 10 respondents believe that DNP education provides nurses with needed knowledge and skills and helps meet a demonstrated need. A majority of respondents believe such a degree will allow them to practice at the highest level and open up career opportunities.

Contrary to what some observers say, 57% of respondents see DNP program as necessary.

<table>
<thead>
<tr>
<th>Statement</th>
<th>Strongly Agree</th>
<th>Somewhat Agree</th>
<th>Somewhat Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>DNP education provides nurses with the knowledge and skills to meet the</td>
<td>30%</td>
<td>44%</td>
<td>17%</td>
<td>9%</td>
</tr>
<tr>
<td>challenges of an increasingly complex health care system</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>DNP educated nurses help meet the need for more primary care providers,</td>
<td>26%</td>
<td>45%</td>
<td>15%</td>
<td>14%</td>
</tr>
<tr>
<td>nurse faculty and nurse leaders</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>A DNP degree will allow me to practice my profession at the highest level</td>
<td>26%</td>
<td>46%</td>
<td>18%</td>
<td>10%</td>
</tr>
<tr>
<td>A DNP degree will open up career opportunities for me</td>
<td>19%</td>
<td>36%</td>
<td>30%</td>
<td>15%</td>
</tr>
<tr>
<td>DNP programs are unnecessary</td>
<td>11%</td>
<td>32%</td>
<td>26%</td>
<td>31%</td>
</tr>
</tbody>
</table>

Please rate how much you agree or disagree with the following statements.

It is noteworthy that 75% of respondents are aware that, by 2015, it is expected that the DNP may be the required credential for nurses interested in seeking advanced certification in advanced practice roles.
4. Most APRNs respond positively to the description of a new UC System DNP Program, believing that it will prepare them for advanced clinical practice and leadership roles. Interest in the program is fairly high and respondents like the online format.

**Reaction to a New UC System DNP Program**

Respondents were read a description of the new UC System DNP Program and were asked how well the program would prepare nurses for the advanced clinical practice and leadership roles. In response, nearly 2 in 3 respondents (64%) said either "extremely well" or "very well" and only 6% said "not very well" or "not well at all." This is positive.

When asked how interested they were in the program, 70% expressed some level of interest: 28% either extremely or very interested and an additional 42% somewhat interested. Only 30% said not very interested or not interested at all. These levels of interest are encouraging.

![Graph 1: Preparing Nurses for Advanced Clinical Practice and Leadership](#)

![Graph 2: Interest Level](#)

Based on the description above, how well do you think the new UC DNP program will prepare nurses for the advanced clinical practice and leadership roles?

Based on the description above, how interested are you in the program?

The facts that were identified as most positive about the description were its online format (57%), the fact that it is a 2-year program (35%) and offers practice-based content and instruction (30%).
5. Purchase intent calculations based on questions pertaining to “likelihood to apply” and “likelihood to attend if accepted” strongly suggest that there is sufficient market potential and viability to move forward with the UC System DNP program at an acceptable cost.

**Likelihood to Apply/Attend if Accepted**

Respondents were asked how likely they would be to apply to the DNP Program and how likely they would be to attend if accepted.

Results show that nearly half (48%) of respondents expressed some likelihood to apply to the program and 2 in 3 (68%) expressed some likelihood to attend the program if accepted.

As discussed in the Purchase Intent section below, these should be considered fairly strong numbers.

<table>
<thead>
<tr>
<th>Likely to Apply to Program, Based on Description</th>
<th>Likely to Attend Program If Accepted</th>
</tr>
</thead>
<tbody>
<tr>
<td>Extremely likely</td>
<td>Very likely</td>
</tr>
<tr>
<td>7%</td>
<td>9%</td>
</tr>
</tbody>
</table>

Based on the description above, how likely are you to apply to this program?  Based on the description above, how likely are you to attend this program if accepted?

**Purchase Intent**

Quantitative studies based on random sampling, as this study was, provide the opportunity to project findings from a sample (respondents) to a larger group (all APRNs in California). Knowing perceived likelihood to apply to or attend a program allows researcher to estimate purchase intent, based on what is called a discount model. For example, if a certain percentage of respondents say they are extremely likely to take an action (such as apply), past research indicates that only 75% actually will. The same logic applies to those who say very likely (67% of those actually will) and somewhat likely (50% of those actually will). Using discount weight allows for more conservative and more accurate projection.

Past research shows that a purchase intent exceeding 35 is consider strong – in most cases a recommendation to proceed with the product or service follows. A purchase intent exceeding a score of 40 is considered very strong.
Based on the question *How likely are you to apply to this program?*, the **purchase intent for the UC System DNP Program is calculated at 27.8**. It is much higher for nurses 45 years of age and younger (32.8) compared to nurses over the age of 45 (24.2). Younger nurses are much more likely to say they would apply to the program. These purchase intent numbers are to be considered moderate.

Based on the question *How likely are you to attend this program if accepted?*, the **purchase intent for the UC System DNP Program is calculated at 43.4**. Again, it is much higher for nurses 45 years of age and younger (49.6) compared to nurses over the age of 45 (40.0). These purchase intent numbers should be considered very strong.

**What to Make of the Purchase Intent Calculations**

The discrepancy between “apply” and “attend if accepted” likely caused by an underlying assumption or possibly belief among some respondents that they might not be accepted if they applied. After all, research results suggested that the UC System has a prestigious reputation.

The purchase intent model assumes that organization will adequately market and advertise the product and this would include using messaging and communications to overcome barriers associated among some potential students that is worth their while to apply (that they would be strongly considered).

Given that, Campos Inc’s professional opinion is that the DNP Program has sufficient market potential, based on purchase intent calculations as long as it if offered at an acceptable cost (the cost issue is dealt with in the next major finding).

It is worth noting that if one uses the conservative number of 15,000 APRNs as the universe of all possible applicants in the state of California and then applies the lower purchase intent number (27.8%) for the UC DNP Program, that results in 4,170 applicants. Even if the UC DNP Program secured only what is referred to as a “fair share” of these applicants (9.09% based on number of programs in the state), that would result in 379 applicants. Given the projected size of the annual class, these calculations demonstrate strong market potential and, on the part of the US DNP Admissions, an opportunity to screen applicants and accept those of the highest caliber.
6. Feedback from APRNs indicates an acceptable price point for the UC System DNP Program well below the tested $55,000 cost. Careful consideration must be given to developing an acceptable cost structure, given that many applicants say they would need government and educational loans to pay for the program.

**Determining Price Sensitivity**

To determine optimal price preference, or what applicants would be willing to pay for a UC System DNP degree program, Campos Inc employed the Van Westendorp Price Sensitivity Model. It is based on the following four questions:

- At what price would you consider the DNP degree offered by the UC system to be so expensive that you would not consider attending there?
- At what price would you consider the DNP degree offered by the UC system to be priced so low that you would feel the quality couldn’t be very good?
- At what price would you consider the DNP degree offered by the UC system as starting to get expensive but not out of the question, so you would have to give some thought to attending there?
- At what price would you consider the DNP degree offered by the UC system to be a bargain and/or a great buy for the money?

Calculations yielded an **optimal price ranging from $17,500-$18,300**, based on the following:

- Cost is so EXPENSIVE would not consider – $23,040
- Cost is so LOW the quality is NOT very good – $5,470
- Cost is EXPENSIVE but would still consider – $14,860
- Cost is BARGAIN/GREAT PRICE for the money – $10,800

Additional survey results also demonstrate concerns over cost:

- When informed that the average cost of a DNP program at California peer institutions is $41,100, only 19% of respondents said they expected a DNP program offered through the UC system to be more expensive. In fact, 64% said they expected it to be less expensive.
- Nearly all (94%) respondents said they would consider a cost of $55,000 for a 2-year program offered by the UC system to be expensive – 69% said very expensive.
- 91% of respondents said that price or cost would be a major barrier in considering applying.
- 44% of respondents said they would need to secure government or educational loans to pay for a DNP program, in addition to money available from saving and earnings.
Price Sensitivity: Additional Considerations

It is important to point out that the optimal price is higher for certain major sub-groups of respondents, such as the (a) 33% of those who have made actual inquiries to universities about existing DNP Programs and are therefore more informed, (b) 41% who were highly interested in UC’s DNP Program, (c) 39% who work at private hospitals or at a private practice, (d) 56% of those who are interested in learning more about DNP programs, and (e) nurses under the age of 45.

<table>
<thead>
<tr>
<th>Sub-Group</th>
<th>%</th>
<th>Optimal Pricing</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Low</td>
</tr>
<tr>
<td>All respondents</td>
<td>100%</td>
<td>$17,500</td>
</tr>
<tr>
<td>Made inquiries about DNP programs</td>
<td>33%</td>
<td>$22,200</td>
</tr>
<tr>
<td>Highly interested in UC’s DNP Program</td>
<td>41%</td>
<td>$21,000</td>
</tr>
<tr>
<td>Work at private hospitals/private practices</td>
<td>39%</td>
<td>$20,200</td>
</tr>
<tr>
<td>Interested in learning more about DNP Programs</td>
<td>56%</td>
<td>$19,360</td>
</tr>
<tr>
<td>Nurses under the age of 45</td>
<td>35%</td>
<td>$18,600</td>
</tr>
</tbody>
</table>

The major takeaway from this sub-group analysis is that there is willingness to pay a higher price among APRNs who are more informed of market conditions (e.g. have made actual inquiries to universities with DNP Programs) or share other characteristics such as interest level in DNP Programs, workplace (private) and age. An inference from the study is that many APRNs are not as yet aware of the prices of DNP Programs offered at California Universities. This likely caused a downward shift in optimal pricing.

Additionally, the research showed that what stood out most about UC’s proposed DNP Program definition is that it was offered online. This indicates that the largely online format offered by the UC system would likely cause an upward shift in optimal pricing.

Price Sensitivity: Top Segment Analysis

The most promising sub-segment is those APRNs who said (1) they were VERY interested in learning more DNP Programs and (2) they had made inquiries to universities about DNP Programs. This group represents 10% of the sample. This group’s optimal pricing ranges from $32,220-$37,820. Thus, a smaller, energized and interested constituency would be willing to pay a great deal more.

The projected market size of applicants for this sub-group alone, based on the purchase intent model described above and assumptions about number of applicants and fair share, is between 61 and 102, on an annual basis.
# Appendix A: Aggregate Findings

## I. AWARENESS

<table>
<thead>
<tr>
<th>Which of the following nursing programs are you familiar with?</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>California State University, Fullerton/ LA/Long Beach</td>
<td>54</td>
</tr>
<tr>
<td>University of California, San Francisco</td>
<td>53</td>
</tr>
<tr>
<td>University of California, Los Angeles</td>
<td>52</td>
</tr>
<tr>
<td>Azusa Pacific University</td>
<td>46</td>
</tr>
<tr>
<td>University of San Francisco</td>
<td>42</td>
</tr>
<tr>
<td>Loma Linda University</td>
<td>41</td>
</tr>
<tr>
<td>University of San Diego</td>
<td>37</td>
</tr>
<tr>
<td>University of California, Irvine</td>
<td>34</td>
</tr>
<tr>
<td>University of California, Davis</td>
<td>34</td>
</tr>
<tr>
<td>Samuel Merritt University</td>
<td>32</td>
</tr>
<tr>
<td>California State University, Fresno/San Jose State University</td>
<td>30</td>
</tr>
<tr>
<td>National University</td>
<td>21</td>
</tr>
<tr>
<td>Western University of Health Sciences</td>
<td>19</td>
</tr>
<tr>
<td>Brandman University</td>
<td>11</td>
</tr>
<tr>
<td>Not familiar with any of these</td>
<td>7</td>
</tr>
</tbody>
</table>

## II. PERCEIVED REPUTATION

<table>
<thead>
<tr>
<th>How would you rate the overall REPUTATION of the nursing programs offered at ...</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>% Excellent + Very Good</td>
<td></td>
</tr>
<tr>
<td>University of California, San Francisco</td>
<td>94</td>
</tr>
<tr>
<td>University of California, Los Angeles</td>
<td>88</td>
</tr>
<tr>
<td>University of San Francisco</td>
<td>85</td>
</tr>
<tr>
<td>Loma Linda University</td>
<td>82</td>
</tr>
<tr>
<td>University of California, Davis</td>
<td>77</td>
</tr>
<tr>
<td>University of San Diego</td>
<td>71</td>
</tr>
<tr>
<td>Western University of Health Sciences</td>
<td>71</td>
</tr>
<tr>
<td>University of California, Irvine</td>
<td>70</td>
</tr>
<tr>
<td>California State University, Fullerton/ LA/Long Beach</td>
<td>66</td>
</tr>
<tr>
<td>Azusa Pacific University</td>
<td>65</td>
</tr>
<tr>
<td>California State University, Fresno/San Jose State University</td>
<td>64</td>
</tr>
<tr>
<td>Samuel Merritt University</td>
<td>62</td>
</tr>
<tr>
<td>Brandman University</td>
<td>44</td>
</tr>
<tr>
<td>National University</td>
<td>18</td>
</tr>
</tbody>
</table>

## III. COMPARING NURSING PROGRAMS: UC SYSTEM VS COMPETITORS

<table>
<thead>
<tr>
<th>Please compare the nursing programs offered across the UC System (UC Davis, UC San Francisco, UC Irvine, UCLA) to all other peer institutions in California collectively, which is defined as the Competitive Set.</th>
<th>UC system much better %</th>
<th>UC and Comp. set about the same %</th>
<th>Comp. set somewhat or much better %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Quality of faculty</td>
<td>72</td>
<td>20</td>
<td>8</td>
</tr>
<tr>
<td>Reputation in the nursing field</td>
<td>69</td>
<td>20</td>
<td>11</td>
</tr>
<tr>
<td>Quality of programs</td>
<td>66</td>
<td>22</td>
<td>12</td>
</tr>
<tr>
<td>Offers career advancement</td>
<td>59</td>
<td>30</td>
<td>11</td>
</tr>
<tr>
<td>Provides new opportunities</td>
<td>56</td>
<td>36</td>
<td>8</td>
</tr>
<tr>
<td>Prepares me for a leadership position</td>
<td>54</td>
<td>37</td>
<td>9</td>
</tr>
<tr>
<td>Value-for-the-money</td>
<td>47</td>
<td>27</td>
<td>26</td>
</tr>
</tbody>
</table>
IV. INTEREST IN LEARNING MORE ABOUT DNP PROGRAMS

<table>
<thead>
<tr>
<th>How interested are you in learning more about DNP degree programs?</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very interested</td>
<td>20</td>
</tr>
<tr>
<td>Somewhat interested</td>
<td>41</td>
</tr>
<tr>
<td>Not very interested</td>
<td>20</td>
</tr>
<tr>
<td>Not at all interested</td>
<td>19</td>
</tr>
</tbody>
</table>

V. AGREE STATEMENTS

<table>
<thead>
<tr>
<th>Please rate how much you agree or disagree with the following statements.</th>
<th>Agree %</th>
<th>Disagree %</th>
</tr>
</thead>
<tbody>
<tr>
<td>DNP education provides nurses with the knowledge and skills to meet the challenges of an increasingly complex health care system</td>
<td>74</td>
<td>26</td>
</tr>
<tr>
<td>A DNP degree will allow me to practice my profession at the highest level</td>
<td>73</td>
<td>27</td>
</tr>
<tr>
<td>DNP educated nurses help meet the need for more primary care providers, nurse faculty and nurse leaders</td>
<td>71</td>
<td>29</td>
</tr>
<tr>
<td>A DNP degree will open up career opportunities for me</td>
<td>55</td>
<td>45</td>
</tr>
<tr>
<td>DNP programs are unnecessary</td>
<td>43</td>
<td>57</td>
</tr>
</tbody>
</table>

VI. CONSIDERATION OF DNP PROGRAMS

<table>
<thead>
<tr>
<th>Have you recently made inquiries to any universities about a DNP program?</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>33</td>
</tr>
<tr>
<td>No</td>
<td>67</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Which university/universities have you . . . ?</th>
<th>Contacted about a DNP program</th>
<th>Plan on applying to</th>
</tr>
</thead>
<tbody>
<tr>
<td>Axusa Pacific University</td>
<td>9</td>
<td>3</td>
</tr>
<tr>
<td>Brandman University</td>
<td>6</td>
<td>2</td>
</tr>
<tr>
<td>California State University, Fresno/San Jose State University</td>
<td>6</td>
<td>5</td>
</tr>
<tr>
<td>California State University, Fullerton/ LA/Long Beach</td>
<td>19</td>
<td>4</td>
</tr>
<tr>
<td>Loma Linda University</td>
<td>6</td>
<td>2</td>
</tr>
<tr>
<td>National University</td>
<td>6</td>
<td>4</td>
</tr>
<tr>
<td>Samuel Merritt University</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>University of San Francisco</td>
<td>28</td>
<td>2</td>
</tr>
<tr>
<td>University of San Diego</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>Western University of Health Sciences</td>
<td>6</td>
<td>2</td>
</tr>
<tr>
<td>Other</td>
<td>34</td>
<td>4</td>
</tr>
<tr>
<td>Not sure yet</td>
<td>*</td>
<td>33</td>
</tr>
<tr>
<td>I don't plan on applying to</td>
<td>*</td>
<td>48</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Were you aware that, by 2015, it is expected that the DNP may be the required credential for nurses interested in seeking advanced certification in advanced practice roles?</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>75</td>
</tr>
<tr>
<td>No</td>
<td>25</td>
</tr>
</tbody>
</table>
### VII. EVALUATING UC DESCRIPTION

<table>
<thead>
<tr>
<th>Based on the description above, how well do you think the new UC DNP program will prepare nurses for the advanced clinical practice and leadership roles?</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Extremely well</td>
<td>21</td>
</tr>
<tr>
<td>Very well</td>
<td>43</td>
</tr>
<tr>
<td>Somewhat well</td>
<td>30</td>
</tr>
<tr>
<td>Not very well</td>
<td>3</td>
</tr>
<tr>
<td>Not well at all</td>
<td>3</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Which fact(s) stand out as most positive to you about this description?</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Online format</td>
<td>57</td>
</tr>
<tr>
<td>Two year program</td>
<td>35</td>
</tr>
<tr>
<td>Practice-based content and instruction</td>
<td>30</td>
</tr>
<tr>
<td>Offered through UC nursing programs</td>
<td>18</td>
</tr>
<tr>
<td>Prepares nurses for leadership roles</td>
<td>18</td>
</tr>
<tr>
<td>Hybrid system</td>
<td>17</td>
</tr>
<tr>
<td>Taught by leading faculty</td>
<td>17</td>
</tr>
<tr>
<td>Prepares nurses to influence public policy</td>
<td>15</td>
</tr>
<tr>
<td>UC quality</td>
<td>15</td>
</tr>
<tr>
<td>Immersive experiences</td>
<td>12</td>
</tr>
<tr>
<td>Prepares nurses to manage health care delivery systems</td>
<td>11</td>
</tr>
<tr>
<td>None of these facts stand out as positive to me</td>
<td>3</td>
</tr>
</tbody>
</table>

### VII. CALLS-TO-ACTION FOR PROGRAM

<table>
<thead>
<tr>
<th>Based on the description above, how interested are you in this program?</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Extremely interested</td>
<td>11</td>
</tr>
<tr>
<td>Very interested</td>
<td>17</td>
</tr>
<tr>
<td>Somewhat interested</td>
<td>42</td>
</tr>
<tr>
<td>Not very interested</td>
<td>15</td>
</tr>
<tr>
<td>Not at all interested</td>
<td>15</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Based on the description above, how likely are you to apply to this program?</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Extremely likely</td>
<td>7</td>
</tr>
<tr>
<td>Very likely</td>
<td>9</td>
</tr>
<tr>
<td>Somewhat likely</td>
<td>32</td>
</tr>
<tr>
<td>Not very likely</td>
<td>30</td>
</tr>
<tr>
<td>Not likely at all</td>
<td>22</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Based on the description above, how likely are you to attend this program if accepted?</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Extremely likely</td>
<td>16</td>
</tr>
<tr>
<td>Very likely</td>
<td>32</td>
</tr>
<tr>
<td>Somewhat likely</td>
<td>20</td>
</tr>
<tr>
<td>Not very likely</td>
<td>17</td>
</tr>
<tr>
<td>Not likely at all</td>
<td>15</td>
</tr>
</tbody>
</table>
If you attended UC’s or any other DNP program, would it likely be . . . ?

<table>
<thead>
<tr>
<th></th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full-time</td>
<td>9</td>
</tr>
<tr>
<td>Part-time</td>
<td>79</td>
</tr>
<tr>
<td>Not sure</td>
<td>12</td>
</tr>
</tbody>
</table>

If you attended UC’s or any other DNP program, how would you pay for it?

<table>
<thead>
<tr>
<th></th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Government/educational loans</td>
<td>44</td>
</tr>
<tr>
<td>Earnings</td>
<td>30</td>
</tr>
<tr>
<td>Saving</td>
<td>28</td>
</tr>
<tr>
<td>Not sure</td>
<td>18</td>
</tr>
<tr>
<td>Bank loans</td>
<td>13</td>
</tr>
<tr>
<td>Other</td>
<td>7</td>
</tr>
<tr>
<td>Family gift/loans</td>
<td>3</td>
</tr>
</tbody>
</table>

VIII. PRICE SENSITIVITY

<table>
<thead>
<tr>
<th>Scenarios</th>
<th>$</th>
</tr>
</thead>
<tbody>
<tr>
<td>At what price would you consider the DNP degree offered by the UC system to be so expensive that you would not consider attending there?</td>
<td>23,040</td>
</tr>
<tr>
<td>At what price would you consider the DNP degree offered by the UC system to be priced so low that you would feel the quality couldn’t be very good</td>
<td>5,470</td>
</tr>
<tr>
<td>At what price would you consider the DNP degree offered by the UC system as starting to get expensive but not out of the question, so you would have to give some thought to attending there?</td>
<td>14,900</td>
</tr>
<tr>
<td>At what price would you consider the DNP degree offered by the UC system to be a bargain and/or a great buy for the money?</td>
<td>10,800</td>
</tr>
</tbody>
</table>

IX. COMPARISON COSTING

<table>
<thead>
<tr>
<th>The average cost of a DNP program at California peer institutions is $41,100. Compared to these peer institutions, would you expect a DNP program offered through the UC system to be . . . ?</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Much more expensive</td>
<td>11</td>
</tr>
<tr>
<td>A little more expensive</td>
<td>9</td>
</tr>
<tr>
<td>About the same</td>
<td>17</td>
</tr>
<tr>
<td>A little less expensive</td>
<td>29</td>
</tr>
<tr>
<td>A lot less expensive</td>
<td>34</td>
</tr>
</tbody>
</table>

Based on the description above, would you consider a total cost of $55,000 for this 2-year program offered by the UC system to be . . . ?

<table>
<thead>
<tr>
<th></th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very expensive</td>
<td>68</td>
</tr>
<tr>
<td>Somewhat expensive</td>
<td>26</td>
</tr>
<tr>
<td>About right</td>
<td>5</td>
</tr>
<tr>
<td>Not very expensive</td>
<td>1</td>
</tr>
<tr>
<td>A lot less expensive</td>
<td>0</td>
</tr>
<tr>
<td>How much of a barrier is each of the following to you in terms of considering applying to the UC DNP Program?</td>
<td>Major Barrier %</td>
</tr>
<tr>
<td>---------------------------------------------------------------</td>
<td>-----------------</td>
</tr>
<tr>
<td>Price or cost</td>
<td>91</td>
</tr>
<tr>
<td>Don’t have the time</td>
<td>48</td>
</tr>
<tr>
<td>Don’t see the value for my professional career</td>
<td>47</td>
</tr>
<tr>
<td>Preference for other programs</td>
<td>8</td>
</tr>
<tr>
<td>Hybrid format</td>
<td>6</td>
</tr>
</tbody>
</table>
Appendix B: Questionnaire

The survey should only take about 10 minutes of your time to complete. We assure you that your opinions are strictly confidential and your name and/or any other personally identifiable information will not be associated with your responses to the survey.

We thank you in advance for your participation.

1. Are you currently enrolled in a Doctor of Nursing Practice (DNP) program? 
   Yes............................................................................................................. 1  TERMINATE
   No............................................................................................................. 2

2. Which of the following best describes you? Select one response
   Nurse Practitioner................................................................................. 1
   Clinical Nurse Specialist................................................................. 2
   Nurse Midwife.................................................................................. 3
   Certified Nurse Anesthetist........................................................... 4
   Other (specify)____________________________________________________ 5

3. Which of the following nursing programs are you familiar with? Select all that apply
   Azusa Pacific University............................................................... 01
   Brandman University........................................................................ 02
   California State University, Fresno/San Jose State University...... 03
   California State University, Fullerton/LA/Long Beach.............. 04
   Loma Linda University..................................................................... 05
   National University.......................................................................... 06
   Samuel Merritt University.............................................................. 07
   University of California, Irvine...................................................... 08
   University of California, Los Angeles.......................................... 09
   University of California, Davis....................................................... 10
   University of California, San Francisco........................................ 11
   University of San Francisco......................................................... 12
   University of San Diego................................................................. 13
   Western University of Health Sciences......................................... 14
   Not familiar with any of these......................................................... 15  GO TO Q6

4. How would you rate the overall reputation of the nursing programs offered at [Insert from Q3]? (Program grid where 5=Excellent, 4=Very good 3=Good, 2=Fair, 1=Poor, 6=Not sure)
5. Please compare the nursing programs offered across the UC System (UC Davis, UC San Francisco, UC Irvine, UCLA) to all other peer institutions in California collectively, which is defined as the Competitive Set. (Program grid where 1=UC system is much better, 2=UC system is somewhat better, 3=UC and competitive set about the same, 4=Competitive set is somewhat better, 5=Competitive set is much better, 6=Not sure)—ROTATE ORDER
   a. Quality of programs
   b. Quality of faculty
   c. Value-for-the-money
   d. Offers career advancement
   e. Provides new opportunities
   f. Prepares me for a leadership position
   g. Reputation in the nursing field

6. How interested are you in learning more about DNP degree programs?
   Very interested.................................................................4
   Somewhat interested.......................................................3
   Not very interested..........................................................2
   Not at all interested..........................................................1
   Not sure.............................................................................5

7. Please rate how much you agree or disagree with the following statements. (Program grid where 4=Strongly agree, 3=Somewhat agree, 2=Somewhat disagree, 1=Strongly disagree, 5=Not sure)—ROTATE ORDER
   a. DNP education provides nurses with the knowledge and skills to meet the challenges of an increasingly complex health care system
   b. DNP educated nurses help meet the need for more primary care providers, nurse faculty and nurse leaders
   c. A DNP degree will open up career opportunities for me
   d. A DNP degree will allow me to practice my profession at the highest level
   e. DNP programs are unnecessary

8. Have you recently made inquiries to any universities about a DNP program?
   Yes......................................................................................1
   No............................................................................................2   GO TO Q10
9. Which university/universities have you contacted about a DNP program? Select all that apply
   Azusa Pacific University ........................................... 01
   Brandman University .............................................. 02
   California State University, Fresno/San Jose State University .... 03
   California State University, Fullerton/LA/Long Beach ........... 04
   Loma Linda University ............................................ 05
   National University .............................................. 06
   Samuel Merritt University ....................................... 07
   University of San Francisco .................................... 12
   University of San Diego ......................................... 13
   Western University of Health Sciences ......................... 14
   Other (specify) .................................................... 15

10. Which university/universities do you plan on applying to for a DNP program? Select all that apply
    Azusa Pacific University ........................................... 01
    Brandman University .............................................. 02
    California State University, Fresno/San Jose State University .... 03
    California State University, Fullerton/LA/Long Beach ........... 04
    Loma Linda University ............................................ 05
    National University .............................................. 06
    Samuel Merritt University ....................................... 07
    University of San Francisco .................................... 12
    University of San Diego ......................................... 13
    Western University of Health Sciences ......................... 14
    Other (specify) .................................................... 15
    Not sure yet ..... ................................................... 16
    I don’t plan on applying to any .................................. 17
    I’ve already applied to a university/universities .............. 18

(If Q10=18, ask Q11; otherwise, GO TO Q14)

11. Which university/universities have you applied to for a DNP program? Select all that apply
    Azusa Pacific University ........................................... 01
    Brandman University .............................................. 02
    California State University, Fresno/San Jose State University .... 03
    California State University, Fullerton/LA/Long Beach ........... 04
    Loma Linda University ............................................ 05
    National University .............................................. 06
    Samuel Merritt University ....................................... 07
    University of San Francisco .................................... 12
    University of San Diego ......................................... 13
    Western University of Health Sciences ......................... 14
    Other (specify) .................................................... 15
(For Q12, only show those selected in Q11)

12. Which DNP program do you plan to enroll at? Select one response
   Azusa Pacific University.............................................01
   Brandman University....................................................02
   California State University, Fresno/San Jose State University..03
   California State University, Fullerton/LA/Long Beach...........04
   Loma Linda University..................................................05
   National University....................................................06
   Samuel Merritt University..........................................07
   University of San Francisco.........................................12
   University of San Diego.............................................13
   Western University of Health Sciences..............................14
   Other (specify)..................................................................15
   I'm not sure where I am going to enroll.............................16  GO TO Q14

13. When do you plan on enrolling at [Insert from Q12]? Select one response
   Fall 2013..........................................................................1
   Spring 2014.......................................................................2
   Fall 2014..........................................................................3
   Spring 2015.......................................................................4
   Fall 2015 or later...............................................................5
   Haven't decided yet..........................................................6

14. Were you aware that, by 2015, it is expected that the DNP may be the required credential for nurses interested in seeking advanced certification in advanced practice roles?
   Yes..............................................................................1
   No..................................................................................2

Please read the description of a new DNP program below. You will be asked a series of questions about it.

The University of California seeks to establish a multi-campus collaborative Doctor of Nursing Practice (DNP) degree program. Offered jointly by all four nursing programs in the UC system (UCI, UCLA, UCD and UCSF), it will be a two-year hybrid program, with eight core courses (two from each campus) taught in an online format, interspersed with three in-person immersion experiences. The new DNP program will be taught by respective leading faculty at each campus and will offer the practice-based curriculum designed specifically to prepare nurses for advanced clinical practice and leadership roles at their institutions as well as to more capably manage increasingly complex health care delivery systems and influence public policy.

(Show description above at top of the screen for Q15–Q19, Q27)
15. Based on the description above, how well do you think the new UC DNP program will prepare nurses for the advanced clinical practice and leadership roles?
   - Extremely well ................................................................. 5
   - Very well ................................................................. 4
   - Somewhat well .......................................................... 3
   - Not very well ............................................................ 2
   - Not well at all ........................................................... 1

16. Which fact(s) stand out as most positive to you about this description? Select up to three
   ROTATE ORDER
   - Offered through UC nursing programs ................................ 01
   - Two year program ..................................................... 02
   - Hybrid system ............................................................ 03
   - Online format ............................................................. 04
   - Immersive experiences .............................................. 05
   - UC quality ................................................................. 06
   - Practice-based content and instruction ......................... 07
   - Taught by leading faculty ........................................... 08
   - Prepares nurses for leadership roles ...................... 09
   - Prepares nurses to manage health care delivery systems . 10
   - Prepares nurses to influence public policy .............. 11
   - None of these facts stand out as positive to me ........ 12

17. Based on the description above, how interested are you in this program?
   - Extremely interested ...................................................... 5
   - Very interested ........................................................... 4
   - Somewhat interested .................................................. 3
   - Not very interested .................................................... 2
   - Not at all interested .................................................... 1
   - Not sure ................................................................. 6

18. Based on the description above, how likely are you to apply to this program?
   - Extremely likely .......................................................... 5
   - Very likely ................................................................. 4
   - Somewhat likely ......................................................... 3
   - Not very likely ........................................................... 2
   - Not likely at all ........................................................ 1
   - Not sure ................................................................. 6
19. Based on the description above, how likely are you to attend this program if accepted?
   Extremely likely ................................................................. 5
   Very likely ........................................................................ 4
   Somewhat likely ............................................................... 3
   Not very likely .................................................................. 2
   Not likely at all ................................................................. 1
   Not sure ............................................................................. 6

20. If you attended UC's or any other DNP program, would it likely be . . . ?
   Full-time ......................................................................... 1
   Part-time ........................................................................... 2
   Not sure ............................................................................. 3

21. If you attended UC's or any other DNP program, how would you pay for it? Select all that apply
   Government/educational loans ........................................ 1
   Bank loans ......................................................................... 2
   Savings .............................................................................. 3
   Earnings ............................................................................ 4
   Family gift/loans ................................................................ 5
   Other (specify) .................................................................. 6
   Not sure ............................................................................. 7

22. At what price would you consider the DNP degree offered by the UC system to be so expensive that you would not consider attending there?
   $ _ _ .000

23. At what price would you consider the DNP degree offered by the UC system to be priced so low that you would feel the quality couldn't be very good?
   $ _ _ .000

24. At what price would you consider the DNP degree offered by the UC system as starting to get expensive but not out of the question, so you would have to give some thought to attending there?
   $ _ _ .000

25. At what price would you consider the DNP degree offered by the UC system to be a bargain and/or a great buy for the money?
   $ _ _ .000
26. The average cost of a DNP program at California peer institutions is $41,100. Compared to these peer institutions, would you expect a DNP program offered through the UC system to be . . . ?
   Much more expensive.........................................................5
   A little more expensive....................................................4
   About the same..............................................................3
   A little less expensive......................................................2
   A lot less expensive........................................................1
   Not sure............................................................................6

27. Based on the description above, would you consider a total cost of $55,000 for this two-year DNP program offered by the UC system to be . . . ?
   Very expensive..................................................................5
   Somewhat expensive..........................................................4
   About right.........................................................................3
   Not very expensive............................................................2
   Not at all expensive............................................................1
   Not sure............................................................................6

28. How much of a barrier is each of the following to you in terms of considering applying to the UC DNP Program. (Program grid where 3=Major barrier, 2=Minor barrier, 1=Not a barrier at all)—ROTATE ORDER
   a. Price or cost
   b. Hybrid format
   c. Don't see the value for my professional career
   d. Preference for other programs
   e. Don’t have the time

These final three questions are for classifications purposes only.

29. In which of the following healthcare settings do you currently work? Select one response
   Private hospital.................................................................1
   Public hospital.................................................................2
   Medical clinic....................................................................3
   Private practice/physician's office......................................4
   Other (specify)___________________________________________5
30. Which of the following categories contains your age?
   18 to 34 years ......................................................... 1
   35 to 44 years ......................................................... 2
   45 to 54 years ......................................................... 3
   55 to 64 years ......................................................... 4
   65 years or older .................................................... 5

31. For how long have you worked as a nurse?
   1 to 3 years ............................................................... 1
   4 to 5 years ............................................................... 2
   6 to 10 years ............................................................ 3
   11 to 15 years ......................................................... 4
   16 to 20 years ......................................................... 5
   More than 20 years .................................................. 6
APPENDIX J

UPDATED UCSF MARKET ANALYSIS

September 2015
View Results

Surveys Started: 85
Surveys Completed: 72

Add a Filter to This Report...

Show Style Editor

1. Are you considering enrolling in a Doctor of Nursing Practice (DNP) degree program in the next 2-?

2. If "yes", what type of program are you interested in?

3. The University of California, San Francisco seeks to establish a Doctor of Nursing Practice (DNP)...

4. Please provide any additional comments to help us understand your needs/interests.

5. For additional information or to be contacted by one of the UCSF School of Nursing faculty, please...

6. Are you considering enrolling in a Doctor of Nursing Practice (DNP) degree program in the next 2-?

1. Yes
2. Maybe
3. No

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>Maybe</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Count</td>
<td>42</td>
<td>34</td>
<td>9</td>
</tr>
<tr>
<td>%</td>
<td>49%</td>
<td>40%</td>
<td>11%</td>
</tr>
</tbody>
</table>

Total Responses: 85

Min Value: 1
Max Value: 3
Mean: 1.61
Variance: 0.45
Standard Deviation: 0.67
2. If "yes" what type of program are you interested in?

1. Are you considering enrolling in a Doctor of Nursing Practice (DNP) degree program in the next 2-

2. If "yes", what type of program are you interested in?

3. The University of California, San Francisco seeks to establish a Doctor of Nursing Practice (DNP).

4. Please provide any additional comments to help us understand your needs/interests.

5. For additional information or to be contacted by one of the UCSF School of Nursing faculty, please.

- Post-Master's program
- Post-Baccalaureate program

<table>
<thead>
<tr>
<th></th>
<th>Post-Master's program</th>
<th>Post-Baccalaureate program</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total</td>
<td>36</td>
<td>48%</td>
</tr>
<tr>
<td>1</td>
<td>Post-Master's program</td>
<td>36</td>
</tr>
<tr>
<td>2</td>
<td>Post-Baccalaureate</td>
<td>48%</td>
</tr>
<tr>
<td></td>
<td>program</td>
<td>51%</td>
</tr>
<tr>
<td></td>
<td>72</td>
<td>100%</td>
</tr>
<tr>
<td>Min Value</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Max Value</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>Mean</td>
<td>1.5</td>
<td></td>
</tr>
<tr>
<td>Variance</td>
<td>0.14</td>
<td></td>
</tr>
<tr>
<td>Standard Deviation</td>
<td>0.50</td>
<td></td>
</tr>
<tr>
<td>Total Responses</td>
<td>72</td>
<td></td>
</tr>
</tbody>
</table>
1. Are you considering enrolling in a Doctor of Nursing Practice (DNP) degree program in the next 2...

2. If 'yes', what type of program are you interested in?

3. The University of California, San Francisco seeks to establish a Doctor of Nursing Practice (DNP).

4. Please provide any additional comments to help us understand your needs/interests.

5. For additional information or to be contacted by one of the UCSF School of Nursing faculty, please...
UCSF School of Nursing  
Doctor of Nursing Practice (DNP) Program  
Interest Survey

Are you considering enrolling in a Doctor of Nursing Practice (DNP) degree program in the next 2-3 years?

- Yes
- Maybe
- No

If "yes", what type of program are you interested in?

- Post-Master's program
- Post-Baccalaureate program

The University of California, San Francisco seeks to establish a Doctor of Nursing Practice (DNP) degree program. This proposed hybrid program will include both online courses and three in-person immersion experiences. It can be completed in less than two years for those applicants who already possess a Master's. The new program will offer a practice-based curriculum designed to prepare nurses for advanced clinical practice and leadership roles at their institutions as well as to more capably manage increasingly complex health care delivery systems and influence public policy.

Would you consider enrolling in the program as described above?

- Yes
- No

Please provide any additional comments to help us understand your needs/interests.

For additional information or to be contacted by one of the UCSF School of Nursing faculty, please provide your contact information below. Thank you for your time.
APPENDIX K

FACULTY BIOSKETCHES
**BIOGRAPHICAL SKETCH**

Provide the following information for the Senior/key personnel and other significant contributors in the order listed on Form Page 2. Follow this format for each person. **DO NOT EXCEED FOUR PAGES.**

<table>
<thead>
<tr>
<th>NAME</th>
<th>POSITION TITLE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chen, Jyu-Lin</td>
<td>Associate Professor</td>
</tr>
</tbody>
</table>

| eRA COMMONS USER NAME (credential, e.g., agency login) | Chen, Jyu-Lin |

**EDUCATION/TRAINING** *(Begin with baccalaureate or other initial professional education, such as nursing, include postdoctoral training and residency training if applicable.)*

<table>
<thead>
<tr>
<th>INSTITUTION AND LOCATION</th>
<th>DEGREE</th>
<th>MM/YY</th>
<th>FIELD OF STUDY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Meiho Junior College of Nursing, Pingtung, Taiwan</td>
<td>Diploma</td>
<td>06/92</td>
<td>Nursing</td>
</tr>
<tr>
<td>University of Dubuque, Dubuque, IA</td>
<td>BS</td>
<td>06/95</td>
<td>Nursing</td>
</tr>
<tr>
<td>University of Minnesota, Minneapolis, MN</td>
<td>MS</td>
<td>06/96</td>
<td>Pediatric and Family Nursing</td>
</tr>
<tr>
<td>University of California, San Francisco, San Francisco, CA</td>
<td>PhD</td>
<td>06/02</td>
<td>Pediatric Nursing</td>
</tr>
</tbody>
</table>

**A. Personal Statement**

I am a bilingual and bicultural pediatric nurse scientist with experience and expertise in child health behaviors, cultural competence and obesity prevention and management. In the past 12 years, I have worked closely with the Chinese community in San Francisco Bay Area and conducted multiple studies including web-based intervention with Chinese and Chinese-American adolescents and their families in the area of childhood obesity prevention and management.

I am also a leader in advancing doctoral education at UCSF and in Asia. As the past chair of both the Nursing Faculty Council and Doctoral Program Council at UCSF I have evaluated the Ph.D. program and provided recommendations on the integration of technology with teaching and was instrumental in initiating development of the DNP. As a representative of the University of California International Education Committee, I review all the international exchange programs to make sure they meet necessary educational criteria. I have provided consultations, which led to the modifications and adaptations in advanced nursing education in Taiwan and China.

**B. Positions and Honors**

**Positions and Employment**

- 1992-1993: Staff Nurse, An-Kang Rehabilitation Center, Kaohsiung, Taiwan
- 1997-1999: Staff Nurse, Pediatric Intensive Care Unit, China Medical Teaching College Hospital, Taichung, Taiwan
- 1998-1999: Nursing QA Coordinator, Nursing, China Medical Teaching College Hospital, Taichung, Taiwan
- 2002-2003: Post-graduate Researcher, School of Nursing, University of California, San Francisco
- 2003-2009: Assistant Professor, School of Nursing, University of California, San Francisco
- 2009-present: Associate Professor, School of Nursing, University of California, San Francisco

**Other Experience and Professional Memberships**

- 2000-present: Society of Behavioral Medicine
- 2000-present: Sigma Theta Tau International
- 2002-2008: American Obesity Association
- 2002-present: Western Institute of Nursing
- 2003-2008: American Diabetes Association
- 2003-2008: Society of Pediatric Nurses
2004-2013 American Heart Association
2007-present Asian Pacific Islander Nurse Association

Honors
1998 Excellent Nursing Practice Award, China Medical College Hospital, Taiwan
2000 Sigma Theta Tau International Honor Society of Nursing
2001 Century Club Award, University of California, San Francisco, School of Nursing
2001 Graduate Student Research Award, University of California, San Francisco
2001 University of California, Non-resident Scholarship
2001 University of California, Regents Scholarship
2009 Nominee: Graduate Students’ Association Faculty Mentorship Award
2014 Fellow of the American Academy of Nursing

C. Selected Peer-Reviewed Publications
D. Research Support

On-going Research Support

UCSF School of Nursing Research Grant  Chen (PI)  08/01/2013-12/30/2014
Home-based & technology-centered childhood obesity prevention for low-income immigrant families with young children
This study aims to adapt and implement an evidence-based, family-based and technology-centered intervention to prevent obesity in young Chinese American children from low-income families with overweight mothers.

University of California University Community Partnership Grant  Chen. A (PI)  07/01/2014-06/30/2015
UCSF-Family Connections Injury Prevention Program, Part III
This service learning project allows Interprofessional learners to work with staff at Family Connections to develop a continuation of the evidence-based service learning project related to pedestrian injury prevention for the elderly and children.
Role: Co-PI

Hong Kong Research Grant Council  Lee (PI)  09/01/2014-08/31/2016
Effectiveness of a school-based weight management program for overweight and obese students with mild intellectual disability: A randomized controlled trial
The aim of this study is to evaluate the effectiveness of a school-based weight management program integrated with social factors in collective efficacy of social learning theory in reducing body weight, through changes in the physical activity and nutrition behaviors of overweight and obese students (8-16 years old) with mild intellectual disability in special schools.
Role: Co-Investigator (intervention consultation)

1 D09HP269580100  Shapiro (PI)  08/01/2014-07/31/2017
Health Resource and Services Administration HRSA Interprofessional Nurse Practitioner Education for the Collaborative Care of Children with Chronic Conditions (INPEC5)
This project addresses the current gap in care of underserved children with multiple chronic conditions (MCC) through enhanced interprofessional nurse practitioner (NP) education and training of a diverse pediatric health care provider work force.
Role: Faculty Evaluator (Outcome evaluation)

22808  Shapiro (PI)  07/01/2014-06/30/2016
Atlantic Philanthropies Lessons Learned from UCSF and Elev8 Oakland's Partnership on Sustaining School Based Health Care
This project describes school-based health center and full service community schools by documenting and disseminating lessons about improving the quality of health care and developing financing options.
Role: Faculty (intervention evaluation)

ANF4491  Chen (PI)  09/01/2014-08/31/2015
American Nurses Foundation viStart Smart for Teens: Novel mHealth weight management in primary care setting
The purposes of this study are to adapt the Fitbit applications for providing tailored feedback for overweight and/or obese adolescents in smartphone and internet program, and to integrate Fitbit data into the electronic medical records (EMR) in primary care clinics.

Completed Research Support

Sigma Theta Tau, Alpha Eta Chapter  Chen (PI)  05/01/2001-05/01/2002
Factors Associated With Childhood Obesity in Chinese-Americans: A Pilot Study (Dissertation pilot)

Pacific Rim Research Program Mini-Grant, University of California; Graduate Student Research Award, UCSF; UCSF School of Nursing dissertation funds  Chen (PI)  08/01/2001-07/31/2002
Factors Associated With Children's Health in Taiwan and the U.S.
UC Pacific Rim Research Program
Predictors of Changes in Body Mass Index Among Taiwanese Children

UCSF School of Nursing Research Grant and Sigma Theta Tau Research Grant  Chen (PI) 06/01/2003-06/01/2004
Body Composition, Physical Fitness and Cardiovascular Disease (CVD), Risk Factors in Chinese-American Children

KL2 RR024130
NIH/ National Center for Research Resources (NCRR) An interactive multimedia educational program for weight management in overweight Chinese-American children (ABC Study)
Role: Clinical Research Scholar

A103265 Chen (PI) 01/01/2006-12/31/2007
Chinese Community Health Care Association Grant, CCHC Individualized Educational Intervention In Childhood Obesity Prevention in Chinese-Americans

Hellman Family Award for Early Career Development  Chen (PI) 07/01/2007-07/01/2009
Individual tailored internet-based obesity prevention for Chinese American adolescents

A114385 06/01/2010-05/30/2011
International Sigma Theta Tau, Research Grant: A Pilot Study of a Healthy Weight Management Program in Chinese-American Children

UCSF University Community Partnerships (UCP) Grants Program
Chen (PI) 07/01/2011-06/30/2012
iStart Smart: Promoting health and weight management in the primary care clinic for overweight and obese Chinese-American children

A117602 08/01/2011-07/31/2012
UC Pacific Rim Research Program: Childhood obesity in young Chinese children: Multidiscipline Team Research Planning

UCSF University Community Partnerships (UCP) Gran Program
Chen, A (PI) 07/01/2012-06/30/2013
Injury Prevention in Family Connection Centers
Role: Co-PI

A122693 07/01/2013-06/30/2014
Safeway Foundation Grant: iStart Smart: healthy weight management in primary care setting for overweight, low-income, immigrant children

A103265 07/01/2013-06/30/2014
Safeway Foundation Grant: Home-based & technology-centered childhood obesity prevention for low-income immigrant families with young children

University of California, University Community Partnership Grant
Chen, A (PI) 08/01/2013-07/31/2014
UCSF-Family Connections Injury Prevention Program, Part II
Role: Co-PI
Completed Research Support

Sigma Theta Tau, Alpha Eta Chapter 05/01/2001-05/01/2002
Factors Associated With Childhood Obesity in Chinese-Americans: A Pilot Study (Dissertation pilot)
Role: PI

Pacific Rim Research Program Mini-Grant, University of California; Graduate Student Research Award, UCSF; UCSF School of Nursing dissertation funds 08/01/2001-07/31/2002
Factors Associated With Children's Health in Taiwan and the U.S.
Role: PI
03T-PRRP-2-5 07/01/2003-06/30/2005
UC Pacific Rim Research Program
Predictors of Changes in Body Mass Index Among Taiwanese Children
Role: PI

UCSF School of Nursing Research Grant and Sigma Theta Tau Research grant 06/01/2003-06/01/2004
Body Composition, Physical Fitness and Cardiovascular Disease (CVD), Risk Factors in Chinese-American Children
Role: PI

KL2 RR024130 07/01/2005-06/30/2009
NIH National Center for Research Resources (NCRR) An interactive multimedia educational program for weight management in overweight Chinese-American children (ABC Study)
Role: Clinical Research Scholar

A103265 01/01/2006-12/31/2007
Chinese Community Health Care Association Grant, CCHCA Individualized Educational Intervention In Childhood Obesity Prevention in Chinese-Americans
Role: PI

Hellman Family Award for Early Career Development 07/01/2007-07/01/2009
Individual tailored internet-based obesity prevention for Chinese American adolescents
Role: PI

A114385 06/01/2010-05/30/2011
International Sigma Theta Tau, Research Grant A Pilot Study of a Healthy Weight Management Program in Chinese-American Children;
Role: PI

UCSF University Community Partnerships (UCP) Grants Program Chen (PI) 07/01/2011-06/30/2012
iStart Smart: Promoting health and weight management in the primary care clinic for overweight and obese Chinese-American children
This project will partner with North East Medical Services (NEMS), a non-profit community health center targeting the underserved Asian immigrant population in San Francisco, to explore the feasibility of implementing an 8-week weight management program for overweight and obese Chinese children. The intervention aims to reduce body mass index and improve healthy lifestyles. As part of the project, we will develop a clinical toolkit to screen for obesity, eating habits, and physical activity levels, as well as a guide to enhancing communication with children and caregivers. This collaboration will lead to the development of a larger research grant to test the efficacy of a comprehensive obesity management program for underserved new immigrants in the primary care setting.
Role: PI

A117602 Chen (PI) 08/01/2011-07/31/2012
UC Pacific Rim Research Program Childhood obesity in young Chinese children: Multidiscipline Team Research Planning
The purpose of this planning project is to bring together researchers and clinicians from different disciplines (nursing, pediatric medicine, and public health) from the United States, Mainland China, and Taiwan to share their research findings, synthesize literature on childhood obesity among Chinese children, and identify study aims for collaborative research projects. Support from this planning grant will allow the team members to meet, share research findings, synthesize literature, plan for collaborative research studies, and disseminate the results of a systematic review of the literature at the annual conference of the Society of Behavioral Medicine.
Role: PI

UCSF University Community Partnerships (UCP) Grant Program Chen (PI) 07/01/2012-06/30/2013
Injury Prevention in Family Connection Centers
Role: Co-PI
A122693  
Safeway Foundation Grant  
viStart Smart: healthy weight management in primary care setting for overweight, low-income, immigrant children  
Role: Co-PI  
07/01/2013-06/30/2014

A103265  
Safeway Foundation Grant  
Home-based & technology-centered childhood obesity prevention for low-income immigrant families with young children  
Role: Co-PI  
07/01/2013-06/30/2014

University of California, University Community Partnership Grant  
UCSF-Family Connections Injury Prevention Program, Part II  
Chen, A (PI)  
08/01/2013-07/31/2014

Role: Co-PI
BIOGRAPHICAL SKETCH

Provide the following information for the Senior/Key personnel and other significant contributors in the order listed on Form Page 2.  
Follow this format for each person.  DO NOT EXCEED FOUR PAGES.

NAME  
Carley, Annette, Mary

POSITION TITLE  
HS Clinical Professor

eRA COMMONS USER NAME (credential, e.g., agency login)

EDUCATION/TRAINING  (Begin with baccalaureate or other initial professional education, such as nursing, include postdoctoral training and residency training if applicable.)

<table>
<thead>
<tr>
<th>INSTITUTION AND LOCATION</th>
<th>DEGREE (if applicable)</th>
<th>MM/YY</th>
<th>FIELD OF STUDY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Russell Sage College, Troy, NY</td>
<td>B.S.</td>
<td>06/76</td>
<td>Nursing</td>
</tr>
<tr>
<td>University of California, San Francisco, CA</td>
<td>M.S.</td>
<td>06/85</td>
<td>Perinatal Nursing</td>
</tr>
<tr>
<td>University of California, San Francisco, CA</td>
<td>Post-Masters PNP</td>
<td>06/98</td>
<td>Pediatric Nursing</td>
</tr>
<tr>
<td>Brandman University, Irvine, CA</td>
<td>DNP</td>
<td>12/14</td>
<td>Pediatric Nursing</td>
</tr>
</tbody>
</table>

A. Personal Statement

As a clinical professor with both neonatal and pediatric advanced practice nursing experience and certification I have responsibility for didactic and clinical teaching, and curriculum development for the neonatal and pediatric specialties. In the clinical setting I directly mentor neonatal and pediatric students in the term and intensive care nursery settings during their practicum experiences. From 2008-11 I was lead faculty overseeing a SF-based student cohort participating in a bi-campus neonatal training program. I developed a curriculum using distance education technologies and online coursework I developed is currently incorporated into the neonatal/pediatric specialty curricula. In addition to ongoing departmental service my recent campus activities have included: Advanced Practice Peer Council (member and facilitator, 2009-now), Education Technology Strategic Planning Workgroup (member, 2011-12), Simulation and Scholarship Committee (member, 2011-now), Committee on Educational Technology (member, 2014-now) and Interprofessional Health Education Program (facilitator, 2012-now). I recently completed an educational scholarship program administered by the UCSF School of Medicine (Teaching Scholars) as one of four School of Nursing Scholars and am currently participating in a faculty leadership program, CORO, that will support my leadership development. In 2014 I completed my DNP degree which allowed me to develop and test an online educational intervention that supported self-efficacy and clinical reasoning in advanced practice nursing students. These experiences and activities will prepare me for assuming an active leadership role in the proposed UCSF DNP Degree Program.

B. Positions and Honors

Positions and Employment

<table>
<thead>
<tr>
<th>Year</th>
<th>Position and Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>1990-2000</td>
<td>Neonatal Nurse Practitioner, Nursing, University of Calif.</td>
</tr>
<tr>
<td>1995-2006</td>
<td>Assistant Clinical Professor, Nursing, University of Calif.</td>
</tr>
<tr>
<td>1996-1997</td>
<td>Neonatal Nurse Practitioner, Kaiser Permanente Medical C.</td>
</tr>
<tr>
<td>1997-1999</td>
<td>Advanced Practice Nurse, Alta Bates Medical Center, Berkeley CA</td>
</tr>
<tr>
<td>1999-2000</td>
<td>Pediatric Nurse Practitioner, Gary E. Bean MD &amp; Associates</td>
</tr>
<tr>
<td>2007-2011</td>
<td>Associate Clinical Professor, Nursing, University of Calif.</td>
</tr>
<tr>
<td>2007-2011</td>
<td>NRP Instructor, Fast Response Incorporated, Berkeley CA</td>
</tr>
<tr>
<td>2011-present</td>
<td>Clinical Professor, Nursing, University of Calif.</td>
</tr>
</tbody>
</table>

Other Experience and Professional Memberships

<table>
<thead>
<tr>
<th>Year</th>
<th>Organization and Chapter/Institution</th>
</tr>
</thead>
<tbody>
<tr>
<td>1996-present</td>
<td>Sigma Theta Tau International, Alpha Eta Chapter (STTI/AE)</td>
</tr>
<tr>
<td>1998-present</td>
<td>NRP Regional Trainer, AAP</td>
</tr>
<tr>
<td>2001-present</td>
<td>Academy of Neonatal Nursing (ANN)</td>
</tr>
<tr>
<td>2003-present</td>
<td>Editorial Consultant (Neonatal Network Journal), ANN</td>
</tr>
</tbody>
</table>
2006-present National Association of Neonatal Nurses (NANN)
2008-2010 Neonatal Nursing Scope & Standards of Practice Task Force, NANN
2008-present National Association of Neonatal Nurse Practitioners (NANNP)
2009-2009 NNP Education Standards Task Force Member, NANNP
2009-present National Organization of Nurse Practitioner Faculties (NONPF)
2010-2014 Executive Committee Member, ANN
2010-present Bay Area Simulation Collaborative (BASC) member
2011-present National Association of Pediatric Nurse Practitioners (NAPNAP)

Honors
1996 AlphaEta Chapter, Member, Sigma Theta Tau International
2009 Excellence in Educational or Curricular Innovation Award, UCSF School of Nursing
2012 Teaching Scholar, UCSF School of Medicine
2013 Cooke Award for the Scholarship of Teaching and Learning (co-awarded to D. Fiore, M. Lynch and S. Van Osdo), UCSF Academy of Medical Educators
2014 Bayada Award for Nursing Education Innovation, Bayada Inc., /Drexel University
2014 Richardson DNP Scholarship, National Association of Pediatric Nurses & Practitioners

C. Selected Peer-Reviewed Publications

D. Research Support
On-going Research Support
UCSF Instructional Training Grant
Fiore (PI) 06/01/2012-12/31/2015
Key principles of high quality inter-professional team communication:
A web-based interactive curriculum
This grant funded development of a novel online curriculum to support teamwork and effective communication. It will be piloted in conjunction with an existing Pediatric Mock Code program at UCSF Benioff Children's Hospital, and be made broadly available to provide teambuilding and team communication support. Role: Collaborator, non-salaried

Completed Research Support
Faculty Training Grant, #302-0062 08/01/2010-08/01/2011
Technology Integration Program for Nursing Education & Practice (TIP-NEP), Competitive selection grant, administered by Duke University
The ePortfolio implementation project
This competitive selection training grant allowed a team of three nursing collaborators to attend a faculty development program and develop an exemplar electronic portfolio which was showcased during MS coursework at UCSF. Electronic portfolios were subsequently integrated into the neonatal curriculum. Role: Team leader
D09HP09066 Kennedy (PI) 07/01/2008-06/30/2011
Dept. of Health & Human Services, HRSA, Division of Nursing/Limiting health disparities in at-risk infants: NeoRISK Project
This training grant supported a dual-campus program to develop NNP providers in CA and HI. I participated in initial grant development, ongoing development and implementation of the curriculum and interim and summative project evaluation.
Role: Lead faculty, SF-based cohort

University Community Partners Grant 07/01/2008-07/01/2009
University Community Partnership Council Partners in Food and Fitness
This grant supported development and implementation of a health and nutrition fair at three SFUSD high schools in conjunction with the school nurse
Role: Co-director, w/ SFUSD
Biographical Sketch – Roxanne Garbez, Health Sciences Clinical Professor

eRA Commons User Name:

<table>
<thead>
<tr>
<th>EDUCATION/TRAINING</th>
<th>DEGREE</th>
<th>YEAR(s)</th>
<th>FIELD OF STUDY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Santa Clara University, Santa Clara, CA</td>
<td>BS</td>
<td>1979</td>
<td>Biology</td>
</tr>
<tr>
<td>University of Arizona, Tuscon, AZ</td>
<td>BSN</td>
<td>1983</td>
<td>Nursing</td>
</tr>
<tr>
<td>University of California, San Francisco</td>
<td>MS</td>
<td>1995</td>
<td>Nursing, Critical Care Trauma CNS</td>
</tr>
<tr>
<td>University of California, San Francisco</td>
<td>Post-Masters Certificate</td>
<td>1998</td>
<td>Nursing, Acute Care Nurse Practitioner</td>
</tr>
<tr>
<td>University of California, San Francisco</td>
<td>PhD</td>
<td>2008</td>
<td>Nursing</td>
</tr>
</tbody>
</table>

A. Personal Statement
I have been faculty in the Acute Care Nurse Practitioner Program (ACNP) at University of California, San Francisco since 1999, and in the last 14 years have become increasingly involved in activities important to both my department, the Department of Physiological Nursing (DPN), and the School of Nursing. I became ACNP Specialty Director in 2006 and have worked to innovate and expand both the master’s and post-master’s programs. Campus wide I have contributed to interdisciplinary education by acting as a co-facilitator for small group seminars that are part of the UCSF SOM Foundations of Patient Care (FPC). I was appointed DPN Vice Chair in 2009 and have represented the department on multiple committees and task forces including Primary Health Care Committee, CCNE/BRN task force, Search Committees and Dean’s Council. I continue to serve as Comprehensive Exam coordinator and Chair of the Specialty Director Committee as well as serving on the Faculty Recruitment committee. In 2011 I was appointed Co-Director for the Cardiovascular Clinical Nurse Specialist Program, and am currently also working with faculty in the Critical Care Trauma Clinical Nurse Specialist Program. In 2012, as a member of the UCSF SON Self Sustaining Programs Task Force committee, I served as point person for the subcommittee examining viability of increasing the number of post-master’s programs within UCSF School of Nursing. This task force carried over into the current DNP Task Force examining the feasibility of instituting a self sustaining DNP program that incorporates four UC campuses. I have peer reviewed publications of which two are based on my dissertation research, and have done multiple presentations at the local, regional, national and international level.

B. Positions and Honors

Positions and Employment:

<table>
<thead>
<tr>
<th>Year</th>
<th>Institution</th>
<th>Position</th>
<th>Division</th>
</tr>
</thead>
<tbody>
<tr>
<td>1983-89</td>
<td>San Jose Medical Center</td>
<td>Staff/Charge Nurse</td>
<td>Emergency</td>
</tr>
<tr>
<td>1989-91</td>
<td>Doctor’s Medical Center</td>
<td>Staff/Charge Nurse</td>
<td>Emergency</td>
</tr>
<tr>
<td>1994-98</td>
<td>Memorial Medical Center</td>
<td>Flight Nurse</td>
<td>Mediflight</td>
</tr>
<tr>
<td>1995-97</td>
<td>St. Joseph’s Medical Center</td>
<td>Clinical Nurse Specialist</td>
<td>Emergency</td>
</tr>
<tr>
<td>1998-present</td>
<td>Memorial Medical Center</td>
<td>Nurse Practitioner</td>
<td>Emergency</td>
</tr>
<tr>
<td>1999-07</td>
<td>UC San Francisco</td>
<td>Assistant Clinical Professor</td>
<td>SON</td>
</tr>
<tr>
<td>Year</td>
<td>Institution</td>
<td>Position</td>
<td>Division</td>
</tr>
<tr>
<td>--------------</td>
<td>-----------------</td>
<td>-------------------------------</td>
<td>------------</td>
</tr>
<tr>
<td>2006-present</td>
<td>UC San Francisco</td>
<td>ACNP Program Director</td>
<td>SON</td>
</tr>
<tr>
<td>2007-12</td>
<td>UC San Francisco</td>
<td>Associate Clinical Professor</td>
<td>SON</td>
</tr>
<tr>
<td>2008-12</td>
<td>UC San Francisco</td>
<td>Associate Clinical Professor</td>
<td>SOM WOS</td>
</tr>
<tr>
<td>2009-present</td>
<td>UC San Francisco</td>
<td>Vice Chair DPN</td>
<td>SON</td>
</tr>
<tr>
<td>2011-present</td>
<td>UC San Francisco</td>
<td>CV CNS Program Co-Director</td>
<td>SON</td>
</tr>
<tr>
<td>2012-present</td>
<td>UC San Francisco</td>
<td>Clinical Professor</td>
<td>SON</td>
</tr>
</tbody>
</table>

Honors and Awards: (Selected from 11 awards)

- 2006: SOM Foundations of Patient Care Essential Core Teaching Award (nominated)
- 2008: School of Nursing Faculty Excellence in Teaching Award – Supportive Environment
- 2008: Excellence in Teaching Award from 2008 Graduating Master’s Students
- 2012: Excellence in Teaching Award from 2012 Graduating Master’s Students (nominated)

C. Selected publications

BIOGRAPHICAL SKETCH

Provide the following information for the Senior/key personnel and other significant contributors in the order listed on Form Page 2. Follow this format for each person. DO NOT EXCEED FOUR PAGES.

NAME
Lynch, Mary, Elizabeth

POSITION TITLE
HS Clinical Professor

eRA COMMONS USER NAME (credential, e.g., agency login)

EDUCATION/TRAINING (Begin with baccalaureate or other initial professional education, such as nursing, include postdoctoral training and residency training if applicable.)

<table>
<thead>
<tr>
<th>INSTITUTION AND LOCATION</th>
<th>DEGREE (if applicable)</th>
<th>MM/YY</th>
<th>FIELD OF STUDY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Thomas Jefferson University, School of Nursing, Philadelphia, PA</td>
<td>RN Diploma</td>
<td>06/73</td>
<td>Nursing</td>
</tr>
<tr>
<td>Rhode Island College, Providence, RI</td>
<td>B.S.</td>
<td>06/82</td>
<td>Nursing</td>
</tr>
<tr>
<td>University of California, San Francisco, San Francisco, CA</td>
<td>M.S.</td>
<td>06/85</td>
<td>Pediatric Nursing</td>
</tr>
<tr>
<td>University of California, San Francisco, San Francisco, CA</td>
<td>Post-Masters: PNP</td>
<td>06/94</td>
<td>Pediatric Nursing</td>
</tr>
<tr>
<td>University of California, Berkeley, Berkeley, CA</td>
<td>M.P.H.</td>
<td>06/95</td>
<td>Public Health: Maternal-Child</td>
</tr>
<tr>
<td>University of California, Berkeley, Berkeley, CA</td>
<td></td>
<td>06/01</td>
<td>Public Health: Maternal-Child DrPH</td>
</tr>
<tr>
<td>Frances Payne Bolton School of Nursing, Case Western University, Cleveland, OH</td>
<td>present</td>
<td></td>
<td>Nursing: DNP</td>
</tr>
</tbody>
</table>

A. Personal Statement

In my role as a Clinical Professor in FHCN, I am responsible for implementing complex course content that supports graduate nursing students in the Neonatal, Acute and Primary Care Pediatric and Family Nurse Practitioner Specialty Programs. I have been instrumental in the development and funding of two HRSA Training Grants in 2005 and 2010 that supported the implementation of the Acute Care Pediatric Nurse Practitioner Program and have functioned in the role as Specialty Coordinator since the inception of the program. In addition, to my teaching at UCSF, I have also implemented a substantial amount of clinical teaching in acute and critical care facilities in the San Francisco Bay Area that enhance student learning through practice at the bedside. I also have been invited to present papers and/or had abstracts selected to present at a number of international, national and regional conferences that have been consistently evaluated highly. I co-authored two funded HRSA training grants in 2008 and 2011 and was the Project Director for these grants that reflected innovations in technological applications to nursing education and collaborative educational endeavors in California and Hawaii. I provide clinical consultation at UCSF Medical Center and UCSF Benioff Children's Hospital and am a member of the Patient Safety Fellows Committee that analyzes clinical nursing practice issues and safety and the Nursing Professional Development Committee which supports professional role development and quality care in nursing practice. In addition, I also was instrumental in supporting quality improvement for perinatal care in over 30 hospitals in the North Coast/East Bay Regions of the Regional Perital Programs of California from 2002-2014. I am currently a nursing faculty representative for the development of interventions, research proposals, and clinical projects for an interprofessional team of faculty from the four schools at UCSF working in collaboration with the Global Health Program at UCSF and the School of Public Health at UC Berkeley on the Roatan Project. To date, I have been the faculty mentor for seven nursing students who were Global Scholar students and supported three UCSF nursing students on site at Public Hospital Roatan, Honduras to assess nursing practice and readiness innovative and resource-efficient educational interventions. I am currently completing my DNP at Case Western Reserve University with an expected completion in 2016.

B. Positions and Honors
Positions and Employment

1973-1976  Night Ward Sister, Nursing, Temple Street Children's Hospital, Dublin, Ireland
1978-1980  Research Nurse, Diabetes in Pregnancy, School of Medicine, Brown University & Women & Infants Hospital, Providence, RI
1981-1982  Staff Nurse, PICU, Nursing, Rhode Island Hospital, Providence, RI
1982-1984  Admin Nurse, ICN, Nursing, University of California, San Francisco, San Francisco, CA
1985-1986  Pediatric Clinical Instructor, School of Nursing, Samuel Merritt College of Nursing, Oakland, CA
1985-1987  Visiting Lecturer, Department of Physiologic Nursing, University of California, San Francisco, San Francisco, CA
1986-1989  Neonatal Clinical Nurse Specialist, Nursing, Children's Hospital Medical Center, Oakland, CA
1987-1991  Assistant Clinical Professor, Department of Physiologic Nursing, University of California, San Francisco, San Francisco, CA
1991-1997  Associate Clinical Professor, Department of Family Health Care Nursing, University of California, San Francisco, San Francisco, CA
1994-2012  Specialty Coordinator: Advanced Practice Neonatal Nursing, Department of Family Health Care Nursing, University of California, San Francisco, School of Nursing, San Francisco, CA
1997-present  Health Science: Clinical Professor, Department of Family Health Care Nursing, University of California, San Francisco, School of Nursing, San Francisco, CA
2002-2008  Director: North Coast Perinatal Access System Program, Department of Family Health Care Nursing, University of California, San Francisco, School of Nursing, San Francisco, CA
2003-2009  Specialty Coordinator: Advanced Practice Pediatric Nursing, Department of Family Health Care Nursing, University of California, San Francisco, School of Nursing, San Francisco, CA
2005-2008  Project Coordinator, Acute Care Pediatric Nurse Practitioner, Department of Family Health Care Nursing, University of California, San Francisco, School of Nursing, San Francisco, CA
2005-present  Specialty Coordinator, Acute Care Pediatric Nurse Practitioner, Department of Family Health Care Nursing, University of California, San Francisco, School of Nursing, San Francisco, CA
2008-2011  Project Coordinator: NeoRISK Project, Department of Family Health Care Nursing, University of California, San Francisco, School of Nursing, San Francisco, CA
2008-2014  Director: Regional Perinatal Program: North Coast & East Bay Perinatal Program, Department of Family Health Care Nursing, University of California, San Francisco, School of Nursing, San Francisco, CA
2011-2015  Project Coordinator: Complex Pediatric Conditions & Care Transitions, Department of Family Health Care Nursing, University of California, San Francisco, School of Nursing, San Francisco, CA
2011-present  Co-Chair, Cross Campus Committee, UC Systemwide: Schools of Nursing, University of California Office of the President, Cross-Campus School of Nursing Faculty Group
2012-2013  Faculty Consultant: PICU-NP RoleDevelopment, Nursing, Benioff Children's Hospital, University of California, San Francisco
2013-present  Director: Nurse Practitioner Faculty, Department of Family Health Care Nursing, University of California, San FranciscoSON: Nurse Practitioner Faculty Group
2014-2015  Member: Knowledge Transfer Working Group, Campus, University of California, San Francisco: Preterm Birth Initiative

Other Experience and Professional Memberships

1987-2007  University of California, Alumni Association
1991-present  Society of Pediatric Nursing
1994-present  National Organization of Nurse Practitioner Faculty
2000-2002  National Board Member, National Network of Immunization Nurses and Associates (NNINA)
2002-2005  Board MemberVice President, UCSF Nursing Alumni Association
2004-2008  National Board MemberSecretary, Society of Pediatric Nursing
2007-2008  National Association of Pediatric Nurse Practitioners (NAPNAP) and National Association of
Faculty of Pediatric Nurse Practitioner Programs

2008-present
Fellow: American Academy of Nursing
2008-present
National Organization of Nurse Practitioner Faculty (NONPF)
2011-present
National Association of Pediatric Nurse Practitioners (NAPNAP) and Children in Disasters and Global Health Special Interest Groups:
2013-present
National SPN Representative: SPN and NAPNAP Collaborative Task Force on the Revision of National Pediatric Nursing Scope and Standards.
2014-2015
National Task Force Member: Development of Selection Criteria for Global Health Award;
National Association of Pediatric Nurse Practitioners

Honors

2004 FHCN Nomination for UCSF Campus Teaching Award, UCSF School of Nursing: FHCN
2008 UCSF Innovative Curriculum Development Award, UCSF School of Nursing
2008 UCSF Teaching Leave Award for Clinical Faculty, UCSF School of Nursing
2008 American Academy of Nursing: Fellow, American Academy of Nursing
2012 UCSF Innovative Curriculum Development Award, UCSF School of Nursing
2012 Honorary Research Fellow: Massey University, New Zealand, Massey University, New Zealand
2012 Fellow: UCSF CORO Faculty Leadership Collaborative, UCSF-CORO; Chancellor’s Council on Faculty Life
2013 UCSF Academy of Medical Educators Cooke Award for the Scholarship of Teaching and Learning, University of California, San Francisco: Academy of Medical Educators

C. Selected Peer-Reviewed Publications


D. Research Support

Completed Research Support

D09HP22630 Rehm
Dept of Health and Human Services, HRSA, Division of Nursing: The TransRISK Project supported the education and training of Acute Care Pediatric Nurse Practitioner (ACPNP) study for nurses throughout California. The focus of this funding is to prepare ACPNPs to work with chronically and acutely ill children experiencing transitions in age, development, illness acuity and/or environment. This Project also supported the first academic program collaboration between the Schools of Nursing at UCSF and UC Irvine and incorporates the use of web-based and video-teleconference technology for state-wide ACPNP study. Role: Project Coordinator.

11-10004 Lynch

07/01/2011-06/30/2015

07/01/2011-06/30/2014
California Department of Health Services, MCAHv Regional Perinatal Programs of California: North Coast East Bay Regional System. This grant supports the implementation of quality improvement measures to enhance the care given to pregnant women and newborn infants in 35 hospitals/birth centers in Northern California. I am responsible for directing and implementing the scope of work and for implementing priorities set by the MCAH Branch for care giving to pregnant women and newborn infants.

Role: Project Director

U772MC00032-01 UCSF Instructional Improvement Grant: Fiore 07/01/2012-06/30/2013
Key Principles of High-Quality Inter-professional Team Communication: A Web-based Interactive Curriculum
This grant supported the development of a Team-based module for interprofessional communication.
Role: Co-PI

D09HP09066 Kennedy 07/01/2008-06/30/2011
This training grant supported a unique collaboration between the Schools of Nursing at UCSF and the University of Hawaii, Manoa to facilitate a technology-supported curriculum for Neonatal Nurse Practitioner training and to improve this workforce in California and Hawaii.
Role: Project Coordinator.

08-85002 Lynch 07/01/2008-06/30/2011
California Department of Health Services, MCAHv and Regional Perinatal Programs of California: North Coast Perinatal Access System. This grant supports the implementation of quality improvement measures to enhance the care given to pregnant women and newborn infants in 21 hospitals/birth centers in Northern California and in 12 affiliates supporting clinical care for pregnant women with diabetes.
Role: Project Director

08-85004 Lynch 07/01/2008-06/30/2011
California Department of Health Services, MCAHv Regional Perinatal Programs of California: East Bay Perinatal System. This grant supports the implementation of quality improvement measures to enhance the care given to pregnant women and newborn infants in 14 hospitals/birth centers in Northern California and in 10 affiliates supporting clinical care for pregnant women with diabetes.
Role: Project Director

2R01 NR05345 Lee 08/01/2004-07/31/2007
National Institute of Nursing Research. ;Sleep Disruption in New Parents: An Intervention Trial. This investigation examined the sleep patterns of mothers and their infants in relation to childhood immunizations normally given at two months of age. My role in this investigation was to consult on the immunization process for these infants and to guide the research assistants on their work with the mothers and infants.
Role: Immunization Consultant

10888392-101-UCABD DeBattista 07/01/2002-06/30/2007
First Five Commission of San Mateo County. The Preemie Project: Improving Outcomes for Infants Born Prematurely in San Mateo County. This Project involved a medical-legal-community collaborative to identify infants and families at risk for health and social challenges. My role was to develop and implement the evaluation plan for the Project, conduct interviews with Project families and focus groups with the Project Collaborative, analyze and interpret Project outcomes, and support the completion of annual reports.
Role: Evaluator/Consultant.
Biographical Sketch – JoAnne Saxe, Health Sciences Clinical Professor
eRA Commons User Name: josaxe

<table>
<thead>
<tr>
<th>EDUCATION/TRAINING</th>
<th>DEGREE</th>
<th>YEAR(s)</th>
<th>FIELD OF STUDY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Syracuse University, Syracuse, NY</td>
<td>BSN</td>
<td>1976</td>
<td>Nursing</td>
</tr>
<tr>
<td>University of California, San Francisco, CA</td>
<td>MS</td>
<td>1982</td>
<td>Nursing, Adult Nurse Practitioner (ANP)</td>
</tr>
<tr>
<td>Rush University</td>
<td>DNP</td>
<td>2009</td>
<td>Nursing, Educational Leadership</td>
</tr>
</tbody>
</table>

A. Personal Statement
I have been dedicated to educating advanced practice nurses (APN) since 1985. I have made seminal contributions to the advancement of graduate advanced practice nursing education through the development and implementation of innovative curricula and teaching methods, successful faculty practice models, and quality improvement models that have established best practices for nurse practitioner education and practice and interprofessional education and care. I regularly consult with nursing faculty from around the world on emerging trends in APN education and practice. As the Director of the UCSF Adult Gerontology Nurse Practitioner program, I am responsible for administering a highly acclaimed NP program. I also bring expertise via ongoing involvement at the National Organization of Nurse Practitioner Faculties. Additionally, I advocate for the health needs of vulnerable populations by participating in quality improvement initiatives through participation in various San Francisco Safety Net workgroups. I have numerous publications and professional presentations that emphasize my teaching and practice contributions. I have also authored several grants to support UCSF’s mission in the areas of teaching, practice and service, several of which I have directed.

B. Positions and Honors.
Positions and Employment:
1976-1977: Coronary Care/Medical Intensive Care Staff & Charge Nurse; and General Medicine Staff R.N., Johns Hopkins Hospital, Baltimore, MD
1978-1980: Coronary Care Staff, Charge & Research Nurse, UCSF, Moffitt Hospital, S.F., CA
1983-1989: ANP-General Medical Clinic, Kaiser Permanente, Walnut Creek, CA
1998: Assistant Professor-Hong Kong University, Department of Nursing Studies, Hong Kong
1985-now: Health Sciences (HS) Clinical Professor series since 1985; Full HS Clinical Professor (1999-present), School of Nursing, UCSF, S.F., CA
Other Experience: Consultation (selected from over 40 consultations)
2002-2013 Quality NP Education Consultant for National Organization of NP Faculties
2011- Nurse-led Clinics in the United States, Chinese University, Hong Kong, China
2012- Advanced Practice Nursing: Roles, Responsibilities, Outcomes and Innovations, Chinese University, Hong Kong, China
Honors and Awards (selected out of 18 awards)
1995; 1998; 2009: Excellence in Teaching Award, School of Nursing, UCSF, S.F. CA.
2005: Outstanding Faculty Practice Award, NONPF, Chicago, IL
2011: Fellow for the American Academy of Nursing
2013: Overall Teaching Excellence Award School of Nursing, UCSF, S.F. CA.
C. Selected publications


D. Training Support (Active grants: 3 and Completed grants: 17)

*Active*

2011-2015: Faculty (10%) - VA Centers of Excellence in Primary Care Education- Department of Veterans Affairs, Veterans Health Administration, Veterans Administration Office of Academic Affiliations ($5,000,000). The purpose of this grant is to educate interprofessional trainees in the delivery of primary care through team based patient centered care.

2013 - 2016: Project Director (30% yr. 1, 25% yr 2 & 3). Interprofessional Adult Gerontology Education for Nurse Practitioners (IAGE-NP). Department of Health and Human Services, Health Resources and Service Administration, Advanced Nursing Education Grant Program($845,781.00). The overall purpose of this project is to expand and improve the primary care workforce capacity for care of adults across the lifespan with an emphasis on the care of older adults with multiple chronic conditions through interprofessional education for Adult Gerontology Nurse Practitioners (AGNP).

2014-2015: Project Director (30 %). An Approach to Interprofessional Collaborative Practice Serving Elders, HRSA, Nurse Education, Practice, Quality and Retention ($462, 792). The purpose of this project is to ensure the viability of the original grant, which was focused on developing an interprofessional collaborative practice (IPCP) model within a primary care environment.

*Completed (Selected)*

2008 – 2013: Co-project Director (10%) – Glide Health Services (GHS), Nurse Managed Clinic Grant, Department of Health and Human Services, Nurse Education, Practice and Retention Program, ($2,746,127). The purpose of this training is to expand and enhance primary health care and wellness services to a medically underserved, predominantly homeless client population.
2010 – 2013: Co-author and Faculty Liaison (20%) - Expansion of the GHS Nurse Managed Health Center. Department of Health and Human Services, Nurse Education, Practice and Retention Program ($1,497,320). The purpose is to support nursing leadership and clinical expertise to achieve the clinic’s mission of practice and practice-based learning for nursing students.

2011 Team STEPPS Master Trainer Preparation. Duke University School of Medicine Agency for Healthcare Research and Quality (AHRQ) and Dept. of Defense June 27-29.

2011-2014: Co- author, faculty (10%); P.D. from 01/14-06/14 - CA Residency Program NP Graduates, Department of Health and Human Services, Health Resources and Service Administration ($1,126,406.00). The purpose of this grant is to develop a post graduate NP residency program at GHS, a UCSF affiliated nurse managed primary care clinic.

2011-2014: Co-Project Director (no salary support) - NP residency stipends at GHS. The Felton Foundation ($75,000). The purpose is to provide funding for the NP residents at GHS, a UCSF affiliated nurse managed primary care clinic.

2013-2014: Co-director (no salary support) of the UCSF’s Interprofessional Education Instructional Improvement Grant, Deepening patient-centered interviewing and counseling for behavior change skills through interprofessional team-based learning ($16,000.00). The purpose of this project is to assist faculty in refining a highly effective and evidenced-based Counseling for Behavior Change Workshop for students from the four health profession schools. The revision will include the incorporation of interprofessional, team-based behavior change learning experiences, enhanced performance evaluation of learners, and detailed dissemination and sustainability plans.
BIOGRAPHICAL SKETCH

Provide the following information for the Senior/key personnel and other significant contributors. Follow this format for each person. DO NOT EXCEED FIVE PAGES.

NAME: Laura Michelle Wagner

eRA COMMONS USER NAME (credential, e.g., agency login): lauwagner

POSITION TITLE: Assistant Professor

EDUCATION/TRAINING (Begin with baccalaureate or other initial professional education, such as nursing, include postdoctoral training and residency training if applicable. Add/delete rows as necessary.)

<table>
<thead>
<tr>
<th>INSTITUTION AND LOCATION</th>
<th>DEGREE (if applicable)</th>
<th>Completion Date MM/YYYY</th>
<th>FIELD OF STUDY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Case Western Reserve University, Cleveland, OH</td>
<td>BSN</td>
<td>05/1997</td>
<td>Nursing</td>
</tr>
<tr>
<td>University of Pennsylvania, Philadelphia, PA</td>
<td>MSN</td>
<td>08/1999</td>
<td>Gerontological Nurse Practitioner</td>
</tr>
<tr>
<td>Emory University, Atlanta, GA</td>
<td>PhD</td>
<td>12/2004</td>
<td>Nursing</td>
</tr>
</tbody>
</table>

A. Personal Statement

Since 1998, my program of research has focused on improving resident safety in nursing homes. Specifically, this research focuses on helping nurses and other staff members to improve nursing care processes by providing more efficient, evidence-based, and ethical care. I have carried out multiple federally-funded studies in nursing home settings using mixed methodologies, including analyses of administrative databases, intervention research on side rail reduction and adverse event reporting, qualitative focus groups and observational research on falls, survey design, and chart reviews both at a national and regional level. I am the lead author of the landmark report "Broadening the Patient Safety Agenda to Include Long-Term Care Services," which highlights issues such as falls as an under-researched issue in health care. I have received awards for my research on patient safety in nursing homes, including the 2008 Springer Publishing Award in Geriatric Nursing Research; I was also the 2nd recipient of a Canadian Institutes of Health Research New Investigator in Aging Career Award. I am also a long-time faculty member of the Safer Healthcare Now! Falls collaborative in Canada which is a national initiative funded by the Canadian Patient Safety Initiative to reduce falls in healthcare settings. As a result of my temporary residence in Canada from 2005-2010, I was ineligible to apply for AHRQ funding, although I continued to be quite productive in receiving federal funding in both Canada and the U.S., including an R03 AHRQ funded project which I led (as co-I) on examining adverse event reporting systems in U.S. nursing homes. The current application builds on my program of patient safety research in improving systems of care specific to falls management.

B. Positions and Honors

Principal Positions Held
2010-2012 Assistant Professor, College of Nursing, New York University, New York, New York.
2012-Present Assistant Professor, School of Nursing, Department of Community Health Systems, University of California, San Francisco

Other Positions Held Concurrently
2005-2012 Assistant Professor, Faculty of Nursing, School of Graduate Studies & Health Policy Management and Evaluation, University of Toronto, Toronto, Ontario, Canada
2012-Present Associate Director, School of Nursing, UCSF School of Nursing Hartford Center of Geriatric Nursing Excellence

Honors and Awards
2014 Western Institute of Nursing/American Nurses Foundation Scholar Award recipient
2013 UCSF Hellman Family Awards for Early-Career Faculty
2013 Baycrest Annual staff recognition "Excellence through teamwork BRAVO leadership team" award
2013 Winner of the 2013 Rehabilitation Nursing Journal Editor's Choice Award for lead authorship of article, "Impact of voluntary accreditation on short-stay rehabilitation measures in U.S. nursing homes"
2013 Winner of 2013 MEDSURG Nursing Journal Research for Practice Writer's Award for co-authorship of article, "Patient safety in medical-surgical units: Can nurse certification make a difference?"
2013 Fellow in the American Academy of Nursing
2009 Canadian Institutes of Health Research, New Investigator Award in Aging
2008 Springer Award in Geriatric/Gerontologic Nursing Research
2007 Selected as a "Baycrest Nurse Hero" at the Baycrest Centre for Geriatric Care
2006 National Institutes of Health and National Institute on Aging Research Summer Institute for New Investigators, Aspen Wye River, July 8-14, 2006 plus Pre-Conference Workshop for Nurses

Professional Organizations
1996-present Sigma Theta Tau International Nursing Honor Society, Alpha Mu Chapter
1998-present Gerontological Society of America
1998-present American Geriatrics Society
1999-present Gerontological Advanced Practice Nurses Association
2013-present American Academy of Nursing/American Nurses Association

Other Experiences
2008-2011 Data Safety and Monitoring Board, Baycrest, Co-Chair for study "An open-label pilot study of the effects of acute Memantine administration on FDG-PET in frontotemporal dementia," PI: Tiffany Chow, MD.
2009-2010 Expert Advisor, Osteoporosis Training of Health Care Professionals in Long-Term Care Homes and Quality Care Improvement Outcomes. A. Papaioannou (PI).
2010-2011 Chair, Registered Nurses Association of Ontario, Best Practice Guideline Development-Alternatives for Restraint Use
2010-2011 Member, National Quality Forum Skilled Nursing Facilities Technical Advisory Panel for Serious Reportable Events in Healthcare.
2011-present Member, University of Pittsburgh Data Safety and Monitoring Board, "Enhancing the Detection Management of Adverse Drug Events in the Nursing Home" Grant Number: R01HS018721-01. Principal Investigator's Name: Steven M. Handler, MD, PhD
2011-present Faculty Member, Canadian Patient Safety Institute and Safer Healthcare Now "Falls and Falls Injury Prevention" initiative. Includes authoring the "Getting Started Kit: Reducing FIs and Injuries from Falls."
2013-2015 Committee Member, Rothschild Foundation; Person Centered Care Planning Task Force to provide guidance to CMS on Resident Choice and Patient Safety
2013-present  Committee Member, Financial Effects of Health Information Technology in Long Term Care Settings. National Institute on Aging Grant (R03 AG046671-01). Mark Unruh, PI
2014-present  Member, ASTM International and Consumer Products Safety Commission. F15.70. Adult Portable Bedrails Standard

C. Contributions to Science

1. My early research included my role as a co-investigator on the physical restraint and bed siderail clinical trials. The findings from these studies were that we could effectively reduce side rails without increasing the incidence of falls. The research also identified that these frail nursing home residents have a high prevalence of contractures and also are high users of care transitions in their last weeks of life. The research has served as a foundation for the current interest in care transitions, the lack of advanced care planning, and the high utilization of emergency department visits. The impact of the research has also resulted in policy changes regarding side rail use in nursing homes, informed guidance statements from the Food and Drug Administration Hospital Bed Safety Workgroup; my current participation as a member of the ASTM International/Consumer Products Safety Commission work to develop a standard for portable bedrails; and my leadership to develop an international best practice guideline for restraint alternatives.


2. Specific to my research on falls in nursing homes, after the Institute of Medicine “To Err is Human” was published, I was fortunate to have been a team member of the only long term care focused Developmental Center for Evaluation and Research in Patient Safety funded by AHRQ (PI: J. Ouslander). I was also the PI of inaugural funding from the Canadian Patient Safety Institute to examine fall in nursing homes, the only study funded specific to long term care settings. The research I led from both of these endeavors identified several areas of concern regarding the systems of care processes related to falls. This research noted that nursing homes lack effective, evidence-based, fall risk assessment tools; nursing homes could improve care planning falls intervention and their evaluation of falls. Finally, I implemented a menu-driven falls incident reporting system in nursing homes and found that nursing homes who utilized this system had improved medical record documentation and quality improvement activities. The impact of the research is on an international level: I participated as a member of a technical expert panel with the National Quality Forum to expand the list of serious reportable events to long term care; I am a faculty member of the Canada-wide Safer Healthcare Now! Falls Collaborative, which is a national effort to prevent falls in long term care; I participate nationally on the Quality and Safety Education for Nurses (QSEN) Initiative; and regionally, I frequently collaborate with the California Association of Health Facilities to educate providers regarding safety in long term care.


3. I am also the PI on a project to examine the linkages between voluntary accreditation (e.g. Joint Commission) and outcomes in long term care settings. Using primary data collection of accreditation status of nursing homes and linking these to administrative databases such as Nursing Home Compare and the Online Survey Certification and Reporting (OSCAR). This research concluded that accredited nursing homes experience lower deficiency citations, better quality outcomes (e.g., less pressure ulcers), higher perceptions of patient safety culture, and better patient safety quality measures (e.g., falls). The impact of this work so far is that one article was chosen as the 2013 Rehabilitation Nursing Journal Editor’s Choice Award; long term care insurers in states such as Illinois now provide incentives for nursing homes who are Joint Commission Accredited; and I was invited to serve as a member of the Project Leadership Team on the Joint Commission’s AHRQ R13 to examine high reliability principles to infection control systems of care in long term care.


Complete List of Published Work in UCSF CTSI Profiles:  [http://profiles.ucsf.edu/laura.wagner](http://profiles.ucsf.edu/laura.wagner)

D. Research Support

Ongoing Research Support

UCSF Hellman Family Fellows Foundation 07/01/2013 - 06/30/2015

Improving Communication of Adverse Events in Nursing Homes

Role: PI

American Nurses Foundation 09/01/2013 - 08/31/2015

Improving Communication of Adverse Events and Errors in Nursing Home Settings

Role: PI

BHPR in Health Resources and Services Administration (HRSA) 07/01/2013 - 06/30/2016

Advanced Nursing Education Program

Role: Director of Evaluation

UCSF Health Workforce Research Center 2013-2017

Cooperative Agreement U.S. Bureau of the Health Professions Health Resources and Services Administration (HRSA)

Role: Co-I

Completed Research Support

National Council for State Boards of Nursing 11/01/2011 – 1/31/2015

Impact of an Internationally Educated Nurse Workforce on Patient Safety Care Processes and Outcomes in Nursing Homes

Role: PI

Canadian Institutes of Health Research 2009 - 2012

Baycrest Research about Volunteering (BRAVO)

Role: Co-I

Alzheimer Society of Canada 03/01/2010 - 02/28/2012

Disparities in Nursing Care Processes: A focus on adverse event communication with cognitively impaired nursing home resicents

Role: PI
Canadian Institutes of Health Research  
Disclosure of Adverse Events in Nursing Home Settings  
Role: PI  
2009-2010

Canadian Institutes of Health Research  
Communicating about Nursing Errors in Nursing Home Settings  
2009-2010

Ontario Research Coalition  
Implications for Improving Mobility and Maximizing Safety  
2009-2010

Agency for Healthcare Research & Quality  
Survey of Incident Reporting Systems in Nursing Homes  
R03-HS 016546-01  
Role: Co-I  
2007-2009

Health Canada  
The potential of routinely collected assessment information for  
Safety indicators in residential care settings  
Role: Co-I  
2009

Canadian Institutes of Health Research  
Connecting Research & Care: Improving Safety in Long Term Care  
Role: PI  
2009

Canadian Institutes of Health Research  
Let’s Talk Safety in Nursing Homes: Café Scientifique  
Role: PI  
2008

American Nurses Foundation  
Nurses attitudes toward safety culture in nursing homes  
Role: PI  
2006-2008

Agency for Healthcare Research & Quality  
R03-HS-14663-01  
Use of Incident Reports to Assess Falls in Nursing Homes  
Role: PI  
2004
APPENDIX L

FACULTY WORKLOAD

(PROGRAM YEARS 0, 1 & 2)
## Appendix L: Projected Faculty Workload (Program Year 0, 1 & 2)

<table>
<thead>
<tr>
<th>Program Year</th>
<th>Faculty</th>
<th>Faculty FTE</th>
<th>Course Load (Su, Fa, Wi, Sp)</th>
<th>Screening Advising</th>
</tr>
</thead>
<tbody>
<tr>
<td>2016-17 Program Year 0 (0.6 FTE)</td>
<td>Faculty A *Clinical</td>
<td>0.2 FTE</td>
<td>Courses prepped: Concepts &amp; Contemporary Issues (3 u; Fall) Prologue (Co-FOR, 2 u; Fall)</td>
<td>Screening</td>
</tr>
<tr>
<td></td>
<td>Faculty B *Clinical</td>
<td>0.1 FTE</td>
<td>Courses prepped: Critical Appraisal EBP (3 u; Fall)</td>
<td>Screening</td>
</tr>
<tr>
<td></td>
<td>Faculty C *Clinical</td>
<td>0.0</td>
<td>No course preparation</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Faculty D *Clinical</td>
<td>0.1 FTE</td>
<td>Courses prepped: Prologue (Co-FOR, 2 u; Fall)</td>
<td>Screening</td>
</tr>
<tr>
<td></td>
<td>Faculty E *Ladder rank</td>
<td>0.1 FTE</td>
<td>Courses prepped: Methods &amp; Measurements (3 u; Winter)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Faculty F *Ladder rank</td>
<td>0.1 FTE</td>
<td>Courses prepped: Improving Health Outcomes QI/Safety (3 u; Winter)</td>
<td></td>
</tr>
<tr>
<td>Faculty</td>
<td>FTE</td>
<td>Courses taught and prepped:</td>
<td>Screening/Advising</td>
<td></td>
</tr>
<tr>
<td>-----------</td>
<td>-------</td>
<td>---------------------------------------------------------------------------------------------</td>
<td>--------------------</td>
<td></td>
</tr>
</tbody>
</table>
| **Faculty A** | **0.4 FTE** | Concepts & Contemporary Issues (3 u; Fall)  
Prologue (Co-FOR, 2 u; Fall)  
Courses prepped only:  
Transforming Healthcare IP Collaboration (3 u; Su)  
Residency I (Co-FOR, 2 u; Summer)  
Residency II (Co-FOR, 5 u; Fall) | 4-6                |
| **Faculty B** | **0.3 FTE** | Courses taught & prepped:  
Critical Appraisal EBP (3 u; Fall)  
Organizational Systems/Health Economics (3 u; Spring)  
Courses prepped only:  
Project II (Co-FOR; 1 u; Fall) | 3-5                |
| **Faculty C** | **0.2 FTE** | Courses taught: & preppped:  
Health Policy/Advocacy (3 u; Spring)  
Courses prepped only:  
Adv. Clinical Prevention/Population Health (3 u; Su)  
Intersession (Co-FOR; 2 u; Fall) | 2-3                |
| **Faculty D** | **0.15 FTE** | Courses taught & prepped:  
Prologue (Co-FOR, 2 u; Fall)  
Courses prepped only:  
Intersession (Co-FOR; 2 u; Fall)  
Project II (Co-FOR, 1 u; Fall) | 1-3                |
| **Faculty E** | **0.1** | Courses taught & prepped:  
Methods & Measurements (3 u; Winter)  
Project I (Co-FOR, 1 u; Spring) | 1-2                |
| **Faculty F** | **0.1** | Courses taught & prepped:  
Improving Health Outcomes QI/Safety (3 u; Winter)  
Project I (Co-FOR, 1 u; Spring) | 1-2                |
<table>
<thead>
<tr>
<th>Faculty</th>
<th>FTE</th>
<th>Courses taught and prepped:</th>
<th>Screening/Advising</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>0.4</td>
<td>Courses &amp; Contemporary Issues (Co-FOR, 3 u; Fall)</td>
<td>4-6</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Prologue (Co-FOR, 2 u; Fall)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Transforming Healthcare, IP Collaboration (Co-FOR, 3 u; Su)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Epilogue (Co-FOR, 2 u; Spring)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Residency I (Co-FOR, 2 u; Summer)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Residency II (Co-FOR, 5 u; Fall)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Residency III (Co-FOR, 5 u; Winter)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Residency IV (Co-FOR, 5 u; Spring)</td>
<td></td>
</tr>
<tr>
<td>B</td>
<td>0.3</td>
<td>Courses taught and prepped:</td>
<td>3-5</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Critical Appraisal EBP (Co-FOR, 3 u; Fall)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Organizational Systems/Health Economics (Co-FOR, 3 u; Spring)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Project I (Co-FOR, 1 u; Spring)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Project II (Co-FOR, 1 u; Fall)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Project III (Co-FOR, 1 u; Winter)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Project IV (Co-FOR, 1 u; Spring)</td>
<td></td>
</tr>
<tr>
<td>C</td>
<td>0.2</td>
<td>Courses taught and prepped:</td>
<td>2-3</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Health Policy/Advocacy (Co-FOR, 3 u; Spring)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Advanced Clinical Prevention/Population Health (Co-FOR, 3 u; Summer)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Residency I (Co-FOR, 2 u; Summer)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Residency II (Co-FOR, 5 u; Fall)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Residency III (Co-FOR, 5 u; Winter)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Residency IV (Co-FOR, 5 u; Spring)</td>
<td></td>
</tr>
<tr>
<td>D</td>
<td>0.15</td>
<td>Courses taught and prepped:</td>
<td>1-2</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Prologue (Co-FOR, 2 u)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Intersession (Co-FOR, 2 u; Fall)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Epilogue (Co-FOR, 2 u; Spring)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Project III (Co-FOR, 1 u; Winter)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Project IV (Co-FOR, 1 u; Spring)</td>
<td></td>
</tr>
<tr>
<td>E</td>
<td>0.1</td>
<td>Courses taught and prepped:</td>
<td>1-2</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Methods &amp; Measurements (Co-FOR, 3 u; Winter)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Project I (Co-FOR, 1 u; Spring)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Project II (Co-FOR, 1 u; Fall)</td>
<td></td>
</tr>
<tr>
<td>F</td>
<td>0.1</td>
<td>Courses taught and prepped:</td>
<td>1-2</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Improving Health Outcomes QI/Safety (Co-FOR, 3 u; Winter)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Project I (Co-FOR, 1 u; Spring)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Project II (Co-FOR, 1 u; Fall)</td>
<td></td>
</tr>
</tbody>
</table>
| 2018-19 Program year 2 (1.8 additional FTE) | Faculty G *Clinical | 1.0 FTE | Concepts & Contemporary Issues (Co-FOR, 3 u; Fall)  
Transforming Healthcare, IP Collaboration (Co-FOR, 3 u; Spring)  
Improving Health Outcomes QI/Safety (Co-FOR, 3 u; Winter)  
Health Policy/Advocacy (Co-FOR, 3 u; Spring)  
Project I (Co-FOR, 1 u; Spring)  
Project II (Co-FOR, 1 u; Fall)  
Project III (Co-FOR, 1 u; Winter)  
Project IV (Co-FOR, 1 u; Spring) | Screening  
Advising 10 |
|---|---|---|---|---|
| Faculty H *Clinical | 0.8 FTE | Critical Appraisal of EBP (Co-FOR, 3 u; Fall)  
Methods & Measurements (Co-FR, 3 u; Winter)  
Organizational Systems/Health Economics (Co-FOR, 3 u; Spring)  
Advanced Clinical Prevention/Population Health (Co-FOR, 3 u; Summer)  
Intersession (Co-FOR, 2 u; Fall)  
Epilogue (Co-FOR, 2 u; Spring) | Screening  
Advising 8-10 |