

To: IPFW Senate

From: Graduate Subcommittee  
Maneesh Sharma, Chair

Date: November 26, 2012

Re: Proposal for the Doctor of Nursing Practice

The Graduate Subcommittee supports the proposal for the Doctor of Nursing Practice, and finds that the proposal requires no Senate review. The committee voted (five) for and (zero) against in passing this proposal. The committee requests that item be included as an agenda item for the December senate meeting.

Any questions regarding this proposal can be directed to Maneesh Sharma.

New Degree Program  
Signature Page

Degree Title: Doctor of Nursing Practice

Name of academic unit offering the new degree:

- Department of Nursing, Indiana University - Purdue University Fort Wayne
  - College of Nursing, Purdue University Calumet
  - School of Nursing Purdue University West Lafayette
- \*already approved to offer the DNP degree but will support this system program

Include signatures from all involved programs:

1. Indiana University - Purdue University Fort Wayne:

*Lee-Ellen Kirkhorn* 9-19-13  
 Signature of Department Chair: Lee-Ellen Kirkhorn  
 Department of Nursing  
 Date

*Ann M Oberfell* 9/20/13  
 Signature of Academic Dean  
 College of Health and Human Services  
 Date

2. Purdue University Calumet:

*Joni Walker* 10/7/13  
 Signature of Department/Unit Head  
 Department of Nursing  
 Date

*Peggy Gerard* 10/7/13  
 Signature of Academic Dean: Peggy Gerard  
 College of Nursing  
 Date

*Joy Colwell* 10/7/13  
 Signature of Director of Graduate Program: Joy Colwell  
 Date

Purdue University West Lafayette

*Jamie K...* 10/7/13  
 Signature of Department/Unit Head (type name)  
 Department of Nursing  
 Date

\_\_\_\_\_  
 Signature of Academic Dean  
 (Name of College/School) Date

Approval Recommended by the Graduate Council:  
 \_\_\_\_\_  
 Date

\_\_\_\_\_  
 Dean of the Graduate School Date

\_\_\_\_\_  
 Provost Date

## ***PROPOSAL***

### **System-Wide Collaboration to Deliver the Doctor of Nursing Practice at Purdue University Calumet Campus, Hammond and Indiana University-Purdue University, Ft. Wayne**

*Peggy S. Gerard, Interim Vice Chancellor for Academic Affairs and  
Dean, College of Nursing, Purdue University Calumet*

*Lee-Ellen Kirkhorn, Head, Department of Nursing,  
Indiana University Purdue University, Fort Wayne*

*Jane M. Kirkpatrick, Associate Dean, College of Health and Human Services and  
Head, School of Nursing, Purdue University, West Lafayette*

*Carol Sternberger, Associate Vice Chancellor for Faculty Development,  
Indiana University Purdue University, Fort Wayne*

## Program Description

### **System-Wide Collaboration to Deliver the Doctor of Nursing Practice at Purdue University Calumet Campus, Hammond and Indiana University-Purdue University, Ft. Wayne**

The nursing programs at Purdue's campuses have collaborated to propose an innovative graduate degree program unlike any other offered by Purdue or any other university in the state of Indiana, a system-wide implementation of the Doctor of Nursing Practice degree. Specifically, we are proposing to extend the existing Doctor of Nursing Practice (DNP) curriculum currently offered at Purdue West Lafayette to the Calumet and Fort Wayne campuses. We propose that the program will be delivered as a primarily online program with limited intensive face-to-face experiences on student's home campus and supervised residency/practica experiences. This proposed approach will increase access to the DNP program while providing efficiencies across the Purdue system in a time of a national nursing faculty shortage. This application is a request for:

- authority to offer the DNP degree at the Fort Wayne and Calumet campuses of Purdue University using a collaborative system-wide primarily online instructional format, and
- approval for the West Lafayette program to offer their existing on-campus DNP program in a primarily online instructional format.

The proposed system-wide delivery of the DNP program is to provide an efficient, accessible, and cost-effective path to the professional doctorate for practicing nurses and recent master's graduates who are interested in advancing their careers in the healthcare industry or teaching at one of the many institutions preparing undergraduate nurses for practice. Demand for nurses with professional doctorates in both academia and healthcare institutions are high and growing. Currently, there are a limited number of DNP programs in Indiana, particularly in the northern part of the state. These programs are at maximum capacity and are unable to accommodate the many nurses seeking a DNP degree. The system-wide access to the DNP degree will meet demand for a high quality and affordable Purdue practice doctorate degree for Indiana residents living near the regional campuses and in other areas of the state.

This expansion of Purdue's role in delivering DNP education fulfills a local, state, and national need for nurses prepared to transform healthcare. DNP graduates assume leadership positions in healthcare and education. The DNP program prepares nurses to lead transformative change in healthcare. Graduates acquire scientific, organizational, leadership, and economic knowledge that allows them to plan, manage and deliver cost-effective, evidence-based care. Graduates of DNP programs are prepared to meet the health care needs of vulnerable populations, including the growing number experiencing health disparities. The DNP is a practice doctorate not a research doctorate. The DNP does not prepare graduates for a research career; nurses whose goal is to work as a researcher will need to complete a PhD degree. As a practice doctorate, the DNP is similar to practice doctorates common to other disciplines like pharmacy and audiology.

The nursing programs at the Calumet, Fort Wayne and West Lafayette campuses have collaborated successfully since 1997 to offer graduate education to nurses living near these campuses. This formal collaboration has expanded educational options to Indiana nursing students by sharing valuable faculty resources and a common core of courses while avoiding unnecessary duplication of low enrolled courses and curriculum options.

The creation of a collaborative model for a system-wide delivery of the Purdue DNP degree has the support of the Dean of the College of Health and Human Sciences at West Lafayette, the Dean of the College of Health and Human Services at Fort Wayne, the Dean of the College of Science at Purdue North Central, the Chancellors from Calumet, Fort Wayne and North Central campuses and the President of Purdue University (see Appendix 5 for letters of support).

## **1. Characteristics of the Program**

### **a. Campuses Offering the Program**

We propose an expansion of the current DNP program offered at West Lafayette to include the Calumet and Fort Wayne campuses in order to create a system-wide program access. (Purdue North Central plans to participate on a different timetable, as described in Appendix 13.) We propose that each campus will have the authority to admit, enroll and graduate students following agreed upon consistent admission and progression standards. Because of the sustained success of our collaborative efforts for the Master of Science degrees, we are confident that the faculties and staff can continue to work together in synergy. The nursing programs at the Calumet and Fort Wayne campuses have been offering graduate nursing education since 1983 at Calumet and since 1996 at Fort Wayne. The West Lafayette campus launched the first DNP program in Indiana in 2005.

The West Lafayette faculty fully endorses increased access to Purdue DNP education as discussed in this proposal. The system-wide collaboration will provide efficiencies by using the currently accredited curriculum from West Lafayette and expanding distance access to the courses. Through their collaboration, faculty across the Purdue campuses will be able to offer core courses to more students while adding unique cognate specializations from each regional campus. Thus all Purdue campuses will contribute to expanded graduate education opportunities across the Indiana and surrounding regions. West Lafayette will continue to offer the full DNP program, in the model that is currently accredited but will transition the on-campus program to a primarily online delivery with limited intensive face-to-face experiences. In addition, they will support the expansion of the DNP on the regional campuses and participate in the system-wide delivery of the DNP.

West Lafayette will share the accredited DNP curriculum, provide program oversight during the developmental phases of the program expansion, and share their expertise gained from their experience offering the degree. The Calumet and Fort Wayne campuses will seek accreditation of their programs from the same body, the Commission on Collegiate Nursing Education, which currently accredits the West Lafayette campus. This accreditation will reflect the system collaboration for the DNP. Initially, a faculty member from Purdue West Lafayette will serve as a system-wide coordinator, working with DNP program directors at each campus to assure consistency in admissions, progression, graduation requirements, core course consistency, program evaluation, and faculty development across the campuses. After a developmental period of five years, the coordinating process will be evaluated and the coordinator position may be rotated among the campuses.

Faculty at the West Lafayette campus are committed to collaborate with regional campus partners to offer courses, receive students from their campuses to fully enroll West Lafayette courses, as well as to enroll their students in Calumet and Fort Wayne campuses courses.

Students will be able to efficiently and seamlessly progress through the curriculum while taking advantage of the strengths of each campus.

Although this proposal requests authority for Calumet and Fort Wayne to admit and graduate students from the Purdue system DNP program, North Central has developed a plan to gradually increase their faculty's experience with graduate education in nursing with the goal of eventually becoming a full partner in this collaboration. As part of this plan, some North Central nursing faculty will begin to teach and co-teach courses in Purdue master's programs and serve as members of DNP student project committees. As their experience in graduate education increases, they will begin to co-teach some of the DNP courses.

#### b. Scope of Delivery

As delineated above, the scope of delivery is statewide. The system-wide collaboration will meet the regional demands for DNP preparation by expanding access in the northern part of Indiana. Because we are proposing to deliver a primarily online program, we expect that students from other states, particularly those close to Indiana, will also find a Purdue DNP program attractive.

#### c. Mode of Delivery

Our alumni and other respondents to our needs assessments have clearly expressed that they prefer a primarily asynchronous online format with very limited on-campus experiences. The majority of program participants will be working nurses. To meet student needs, we plan to offer the degree using a combination of primarily online didactic courses with limited intensive face-to-face experiences on the student's home campus along with supervised residency/practica experiences. Students will be able to select their residency/practica experiences within their own geographic location as available. This promotes excellent learning opportunities while limiting travel. The online learning format provides economical access to the degree and allows for innovative learning experiences and flexibility for the adult learner. Both the Fort Wayne and Calumet faculties have extensive experience in designing, delivering and assessing online programs. While the online learning environment offers the potential for enrolling students from any state, the regional campuses intend to market the program primarily to their alumni and their respective surrounding regions.

The West Lafayette DNP program plans to transition from the current mix of on-campus and online course delivery to a primarily online didactic approach as described above. This change will facilitate sharing of courses to students across the participating campuses. West Lafayette nursing faculty has increased the number of courses available by distance and is committed to fully subscribing these courses before new sections are opened.

The system-wide DNP collaboration will initially be offered as a post-master's degree on the regional campuses. To date, the vast majority of post-master's students at the West Lafayette campus have been fully employed (Appendix 2). As such, we expect students who will enroll in the program at the Calumet and Fort Wayne campuses will very likely be working while attending the program and require a flexible yet rigorous approach to their learning.

#### d. Other Delivery Aspects

This degree is a practice degree, and as such, requires a minimum of 1000 clinical hours post-baccalaureate. Post-master's students with an advanced practice master's degree (nurse practitioner, clinical nurse specialist, nurse midwifery, and nurse anesthesia) will already have at a minimum 500 clinical hours completed toward the hours required. Students work independently with an on-site preceptor selected by the student and approved by faculty to complete the additional required clinical hours for the DNP. These residency/practica experiences will take place in the student's geographic area and would be supervised and overseen by a designated faculty member from campus offering the course.

#### e. Academic Units Offering Program

The School of Nursing in West Lafayette currently offers an accredited DNP program and seeks approval to offer courses online as part of this system-wide collaboration. As we propose, the College of Nursing at the Calumet campus and the Department of Nursing at Fort Wayne will also grant the doctoral degree program as part of this collaboration with the authority to admit, enroll, and graduate students from the DNP program at their campuses. While Purdue North Central is not seeking to offer the DNP degree at this time, we anticipate some of their approved graduate nursing faculty will help to teach courses and participate on graduate committees. This will contribute to the system-wide program, provide growth opportunities for North Central's nursing faculty, and prepare the North Central campus to offer the program when ready.

A governance structure established for the collaborative effort will ensure consistency across all campuses on admission, progression, curriculum, and degree completion requirements as already established at the West Lafayette campus. Collaborating principles are discussed on page 24. Following approval of this proposal, a comprehensive Memorandum of Understanding will be developed that will outline the relationship amongst the campuses including governance processes and all conditions to the system-wide collaboration.

## **2. Rationale for the Program**

### a. Institutional Rationale

Purdue University has four campuses, Indiana University-Purdue University Fort Wayne (IPFW), Purdue Calumet, Purdue North Central, and the main campus, West Lafayette. Over the past year, faculty members and administrators from all four campuses have worked together to develop a plan to improve system effectiveness and efficiency through increased cooperation among the campuses. More information on that plan is provided in Appendix 1.

The plan to improve the Purdue system has multiple key goals, two of which are to build system-wide graduate programs and establish a system-wide online education organization. The collaboration to offer a Doctor of Nursing Practice (DNP) on three of Purdue's campuses with plans to prepare the fourth campus to be part of the degree program at the appropriate time is an excellent example of a system-wide effort that helps fulfill Purdue's mission. It is an ideal candidate for a pilot of Purdue system collaboration. First, it builds on the solid foundation of a successful Graduate Nursing Consortium formed in 1997 by the Calumet, Fort Wayne, and West

Lafayette campuses to offer master's degrees in nursing. Second, West Lafayette already has a highly regarded accredited DNP program that can serve as the model for the system-wide effort. Both the Purdue Calumet and IPFW programs have specialized expertise not currently available on the other campuses that can be shared through online courses.

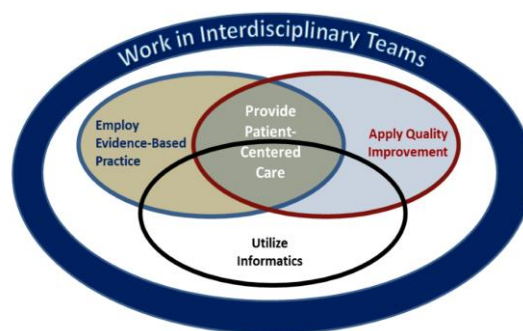
Purdue University is a land-grant institution dedicated to providing a quality education to Indiana's citizens and contributing to the State's economic and community development, including the health and well-being of its citizens. All Purdue University campuses contribute to this mission. The collaboration to offer a Doctor of Nursing Practice (DNP) on three of Purdue's campuses with plans to prepare faculty from the fourth campus for involvement in the degree program is an excellent example of a system-wide effort that helps fulfill Purdue's mission. A broad representation of Purdue support units have collaborated to address system components necessary to implement the proposed system-wide collaborative effort, including representatives from the academic programs, business office, registrar, bursar, department of financial aid, and graduate school.

We expect almost all of the DNP students to be practicing nurses working in Indiana, with many of them working in a region served by one of the Purdue campuses. To seamlessly expand the West Lafayette offerings to all 3 campuses, the West Lafayette campus seeks authority from the Indiana Commission on Higher Education to offer primarily online program with limited intensive face-to-face experiences on student's home campus and supervised residency/practica experiences. Historically, nursing students who continue to work while they take classes have remained in the area after finishing their degrees. Thus the DNP program will be educating Indiana residents who are likely to remain in the state, serving its citizens after graduation.

#### *Rationale for Proposing a System-Wide Collaborative Program*

Today's healthcare demands that nurses can provide direct, evidence-based care and also be full partners in improving systems of care. The DNP degree evolved from the idea that nurses prepared with a practice-based doctoral degree will advance and transform nursing and healthcare through direct care, leadership and interprofessional partnering.

The Institute of Medicine (IOM) has issued several reports recommending the need for health professionals to have educational experiences involving multiple members of the health care team that incorporate evidence-based practice, quality improvement, and informatics (Institute of Medicine, 2003, p.45). Figure 1 depicts the overlap of core competencies for health professionals (IOM, 2003, p. 46). Calling for the reconceptualization of health professions education, the IOM supports innovative solutions and substantive reform in the practice and education environments.





**Figure 1: Overlap of Core Competencies for Health Professionals**

Interprofessional education will be a focus area for this system-wide collaboration for the DNP. Each participating campus brings different strengths to this collaboration thus expanding interprofessional learning opportunities for students and graduating DNP students prepared to implement the IOM core competencies.

The College of Nursing at Purdue University Calumet is home to the Indiana Center for Evidenced Based Nursing Practice, a collaborating center of the Joanna Briggs Institute, a growing, international collaboration involving nursing, medical and allied health researchers, clinicians, academics and quality managers across 40 countries in six continents. Faculty fellows from the Center currently collaborate on projects with an interprofessional group of scholars in Canada, Australia, Brazil, Taiwan, China, Europe, the United Kingdom and other countries. DNP students enrolled at any participating campus will have opportunities to collaborate with other disciplines on projects related to evidence synthesis, translation and utilization.

IPFW Department of Nursing and the Indiana University (IU) School of Medicine-Fort Wayne began participating in an interprofessional initiative designed to develop competencies in collaborative, patient-centered teamwork in the spring of 2012. DNP students enrolled in the system collaboration will experience an innovative and sustainable curriculum of integrated, interprofessional educational experiences in partnership with the IU School of Medicine-Fort Wayne, Mirro Family Research and Education Center, the Midwest Alliance for Health Education, and health-related disciplines at IPFW. Interdisciplinary faculty will coordinate curricular and clinical experiences.

The DNP program at Purdue West Lafayette was designed to offer interdisciplinary education and practice experience with a focus on healthcare engineering and public health and homeland security. Students have the opportunity to engage in interdisciplinary collaboration among faculty, hospitals, community leaders, and policy makers. This DNP program is uniquely situated to provide leadership in solving complex clinical problems through its partnership with the Regenstrief Center for Healthcare Engineering, the College of Pharmacy, the Purdue University Homeland Security Institute, and the Center on Aging and the Life Course.

#### *Consistency of Proposed Program with Purdue University Calumet Mission*

One of the missions of Purdue University Calumet is to "...selectively offer graduate education in areas of strong student interest and community need as well as faculty expertise" (Strategic plan 2013, p. 2-see Appendix 1). As evidenced by student, alumni and community feedback, the proposed DNP program addresses an area of strong student interest and community need. College of Nursing faculty members, in conjunction with faculty across the Purdue system possess the expertise needed to deliver this program. Related to this component of the PUC mission statement is the first goal from the 2013 to 2018 strategic plan that relates to academic excellence. Specifically this goal states, "Advancing academic excellence is the foundation of all we do at Purdue University Calumet. Students, faculty, and staff are driven by the pursuit of personal and intellectual growth through academic programs of distinction. Degree programs and university resources center on providing students opportunities and challenges as they prepare for future success" (Strategic Plan 2013, p. 3). Providing the DNP program at the Calumet campus addresses this strategic goal by offering a degree program that provides opportunities for qualified master's prepared nurses to advance their education in accordance with professional recommendations and future potential mandates. The DNP program currently offered on the West Lafayette campus is recognized as a high quality program. Expanding the DNP program to the Calumet campus will partially contribute toward meeting this goal.

The second goal of the PUC 2013 to 2018 Strategic Plan relates to learning and discovery and states, “Collaborative work and research give students a rich learning environment and cultivate a lifetime of community involvement and leadership. Expanding our commitment to experiential learning and support for integration of teaching and research opportunities are essential to student success in our fast-changing, 21<sup>st</sup> century society” (Strategic Plan 2013, p. 4). The proposed DNP program includes a rich Practice Inquiry Project experience requiring students to work in partnership with healthcare organizations in their community. Students apply principles of evidence-based practice to examine and implement strategies addressing problems and concerns identified by healthcare partners/preceptors. These experiences link students with the community in a real way that expands opportunities for collaboration and scholarship. Thus, the DNP program would directly support PUC’s goal of learning through engagement and discovery.

*Consistency of Proposed Program with Indiana Purdue University, Fort Wayne Mission*

The proposed DNP program is designed in concert with the mission of IPFW. IPFW’s mission is to address higher education needs through a broad range of undergraduate, graduate, and continuing education programs. The proposed Doctor of Nursing Practice (DNP) is in alignment with the mission to serve higher education needs through graduate education. IPFW’s mission also speaks to the needs of the region including those of local and regional practicing professional nurses who have determined a need to attain a professional practice doctorate. The university supports excellence in teaching and learning. The mission statement directly speaks to “... advance and share knowledge through research and creative endeavor.” Unique features of the proposed program include provision of several direct and specific interdisciplinary health opportunities to “work with the community to develop intellectual, cultural, economic, and human resources.” The goal is to produce clinically sound and competent advanced practice nurses with the skills and dispositions needed to serve in leadership capacities in their respective fields (see Appendix 1).

Key elements of the proposed program are implementing evidence-based practice measuring outcomes to transform healthcare into learning environments. Students apply acquired knowledge and skills to patient-centered care and systems of care. The current IPFW Strategic plan (2008 through 2014, p. 13) emphasizes fostering learning and creation of knowledge (Goal #1).

The proposed program is designed as a practice-focused professional doctoral program to prepare clinical experts in a specialized field. The curriculum emphasizes healthcare informatics, leadership and interdisciplinary collaboration among faculty, hospitals, community leaders, and policy makers. The program speaks to Goal #2 of the current IPFW Strategic plan, which is to develop quality of place and experience (Strategic plan, p. 12).

This proposed DNP program is uniquely situated to provide leadership in solving complex clinical problems through its partnership with the proposed Mirro Family Research and Education Center associated with Parkview Health in Fort Wayne, Indiana and with clinical experts from Parkview Health and Lutheran Network. The proposed program speaks to Goal #3 of the strategic plan which is to contribute to the development of the Northeast Indiana Region. The proposed program of study centers on knowledge and skill building in the areas of scholarly practice, practice improvement, innovation and testing of care delivery models, evaluation of health outcomes, health policy, leadership in healthcare delivery and quality improvement. As evidenced by student, alumni, and community feedback, the program addresses areas of strong student interest and community need. IPFW Department of Nursing faculty, in partnership with faculty from the College of Health and Human Services, Doermer School of Business,

Department of Sociology, and the Department of Public Policy possess the expertise needed to deliver this program. The recommendations from the Institute of Medicine, which include interprofessional education, are embedded throughout the MS curriculum and will be expanded in the DNP program. In summary, the proposed DNP program is in direct alignment with IPFW Mission and Goals and with the values of excellence in teaching, student learning research and creative endeavor and regional development (Strategic Plan, P. 3)

b. State Rationale

The state priorities in *Reaching Higher, Achieving More*, are aimed primarily at undergraduate education; however, we are able to address the following priorities as they relate to a system-wide collaboration for delivery of the DNP. The program will be student-centered by broadening access to a high-demand degree throughout the state. The profession of nursing has specified that the DNP is the preferred degree for advanced practice nursing. Students understand this goal and have expressed the desire to pursue the DNP. Unless DNP programs are expanded in Indiana, students will be unable to achieve their goals and Indiana will fall further behind in the number of nurses with doctoral degrees (see section 2c). Graduate students in nursing are typically working fulltime and need the flexibility of an online program. Our “proactive advising” insures that students receive intensive and individualized attention to stay on track to graduation while managing their busy lives. We have designed the program to meet the workforce demands of a changing healthcare landscape. Graduates of the DNP program will have the knowledge and skills sought by healthcare organizations looking for nurses with the capacity to provide care through expanded practice and the leadership skills to transform learning healthcare systems.

The system-wide DNP will address the goal of clear and efficient pathways for on-time college completion as follows:

- **Implement highly structured, cohort-based programs for high-demand degrees that serve high proportions of low-income and working students.**

The program is highly structured and will enroll annual cohorts. The online format allows working students to remain employed. At the Calumet campus, students are typically quite diverse in terms of socio-economic background typical of the urban region. All graduates will have enhanced income earning potential. DNP-prepared nurses earn salaries between 5 and 10% more than their master’s prepared counterparts (AACN, <https://www.aacn.nche.edu/media-relations/fact-sheets/dnp>, retrieved on April 11, 2013.)

- **Promote on-time degree maps that articulate clear pathways for students to earn a certificate within one year, an associate degree within two years and a bachelor’s degree within four years.**

Although the DNP is a graduate program, faculty are cognizant of the need for clear pathways and timely graduation. We have a clearly articulated pathway for students to follow to achieve their graduation goals in a timely manner (see Appendix 10 - course map table), specifically 2 years fulltime and 3 years part time. It is expected that most students will be part-time taking approximately 6 hours per semester; a very reasonable part-time trajectory for a practice doctoral degree.

- **Ensure availability and capacity of required courses to enable students to graduate on time.**

Online delivery of courses with limited intensive on-campus sessions creates efficiencies across the Purdue system, increases the ability to attract a full complement of students in each DNP course offering, and provides greater opportunity for students, the majority whom are working professionals. To meet this recommendation, we plan to increase capacity in all courses (shared curriculum and flexibility among faculty expertise); fully enroll required courses each term; offer courses more frequently; and share specialized faculty resources efficiently across campuses.

The system-wide DNP will meet the goal related to productivity as follows:

- **Emphasize high-quality instruction as the central priority and mission of each campus and ensure that resources are aligned accordingly.**

To insure high quality instruction in the DNP program, faculty who teach in the Purdue system DNP program will be required to complete a digital learning certificate program based on the Quality Matters Criteria. Both the Fort Wayne and Calumet campuses have offered these faculty development programs for several years and most faculty are already certified. The campuses have made a commitment to supporting high-quality instruction by requiring that all faculty teaching online courses and all newly hired faculty complete this training. A comprehensive assessment plan will be implemented to evaluate the quality of all courses offered in the DNP curriculum (see section 7).

- **Promote inter-institutional collaboration to reduce duplication of academic programs and services.**

The DNP will be the first doctoral level system-wide program collaboration within the Purdue University system. Through a coordinated system-wide delivery, efficiencies will be realized while providing students opportunities to leverage the unique strengths of each campus. The collaboration will enable all campuses to do more together than as separate entities.

The curriculum, admission standards, tuition, and graduation requirements will be consistent across the Purdue system. Each participating campus will have authority to grant the degree for students who have a majority of coursework (over 50%) on their campus. Each of the regional campuses will build on existing faculty and resources to offer the courses necessary for a student to complete a DNP at that campus, and will collaborate with West Lafayette for additional courses. The Calumet and Fort Wayne nursing programs will each develop and teach one or two specialty courses and electives that reflect the individual campus's unique expertise in order to provide a rich variety of options for students across the system. To promote a seamless process, DNP students will enroll using a common website through which they can contact advisors to help them with program decisions. Each student will select the campus at which he or she would like to enroll, will be counted as a student at that campus, and will be counted as a graduate of that campus provided that more than 50% of the courses (on-campus or online) are taken from that campus. The long-term goal is for

a student enrolled at one campus to take online courses from any of the participating campuses without having to enroll at that other campus. A DNP program tuition rate will be consistent across all campuses.

- **Expand statewide and interstate compacts in joint purchasing and shared services** (e.g., technology, equipment, energy, payroll, etc.).

To promote a seamless process, DNP students will enroll using a common website through which they can contact advisors to help them with program decisions. A student enrolled at one campus may take online courses from any of the participating campuses without having to enroll at that other campus. It is the goal of this program to implement centralized registration, financial aid, and payment when system structures have been put in place.

A system-wide DNP will meet the goals of quality as follows:

- **Expand the use of quality assessments that provide comparable measures of student learning outcomes** (see section 5d, page 28).

The campuses will use the same accreditation agency for the DNP and will therefore share comparable measures of learning outcomes. Since the campuses will share the same curriculum, the coordinator and campus directors will help insure that each campus will participate in a collaborative review and continuous program improvement. Measures for review will include, but not be limited to persistence and graduation rates.

- **Embrace accelerated models with defined learning outcomes to safeguard quality.**

The system-wide DNP program will offer courses online thus creating efficiencies across the Purdue system, and increasing the ability to attract a full complement of students in the DNP courses. Online delivery places students at the center of their learning and allows the flexibility they need for anytime, anyplace teaching and learning. The system-wide approach enhances flexibility and access to specialty foci offered at each campus. Faculty will use research-based instructional strategies. Faculty will be certified by the Quality Matters program that is based upon the best available evidence related to online teaching and learning. The assessment strategies also reflect best available evidence (see section 5). Accreditation processes insure to the public that graduates of the program meet quality standards and students understand the promise of the return on their investment.

c. Evidence of Labor Market Need

i. *National, State, or Regional Need*

Advanced Practice Nurses (APNs) have a history of providing high quality healthcare in both outpatient and inpatient settings and have served successfully as faculty in undergraduate programs of nursing. For many years, APNs have been educated primarily in master's degree programs. However a multitude of factors are necessitating additional preparation for APNs including the rapid expansion of knowledge underlying advanced practice; the increasing complexity of patient care and the healthcare system; national initiatives to improve the

quality and safety of health care; impending shortages of nursing personnel which requires leaders who are able to design new models of care; critical shortages of doctorally-prepared nursing faculty; and increasing educational expectations for the preparation of other members of the healthcare team. The DNP degree prepares APNs to meet these challenges with the acquisition of scientific, organizational, leadership, and economic knowledge that allows for the planning and delivery of cost-effective, evidence based care. The acquisition of these skills also prepares DNPs to meet the health care needs of vulnerable populations. Less than 1% of nurses hold doctorates and the Institute of Medicine has called for doubling the number of nurses with doctorates by 2020 (Kirschling, 2013).

In 2004, the member schools affiliated with the American Association of Colleges of Nursing (AACN) voted to make the preferred level of educational preparation for APNs, including nurse practitioners (NPs) and clinical nurse specialists (CNSs), the DNP instead of the Master's degree. This change was recommended to take effect by 2015. In 2010, AACN reaffirmed the call to transition all APN education from the master's to the practice doctorate by 2015. Following the 2004 vote, master's programs across the country began the process of transitioning their APN master's program to the DNP. To date, over 220 nursing programs across the country now offer DNP programs and several more reported planning to open programs (AACN <https://www.aacn.nche.edu/dnp/program-schools>, retrieved on March 22, 2013). In August of 2013, AACN announced it is launching a study to identify barriers to transitioning APN preparation programs from master's degree programs to the DNP. Results of this study will be used to facilitate the transition of **all** APN master's degree programs to the DNP. Offering the DNP program on the regional campuses of Calumet and Fort Wayne is consistent with the national AACN recommendations.

#### ii. *Preparation for Graduate Programs or Other Benefits*

The proposed system-wide DNP program will provide improved access to a professional doctorate for practicing nurses and recent master's graduates who are interested in advancing their careers in the healthcare industry or teaching at one of the many institutions preparing nurses for practice. Demand for nurses with professional doctorates in both academia and healthcare institutions is high and growing. Graduates of the program will have enhanced income earning potential, as DNP-prepared nurses earn salaries between 5 and 10% more than their master's prepared counterparts (AACN, <https://www.aacn.nche.edu/media-relations/factsheets/dnp>, retrieved on April 11, 2013).

Additionally, graduates of DNP programs will be eligible to continue their education if they enroll in PhD programs.

Through the system-wide DNP, the Calumet and Fort Wayne campuses will expand opportunities for nurses to pursue the professional clinical doctorate. The West Lafayette campus student cohorts will remain stable and West Lafayette anticipates growth in their enrollment only in the courses that will be specifically taught to support the system-wide collaboration.

#### iii. *Summary of Indiana DWD and/or U.S. Department of Labor Data*

The need for improvement in Hoosier health is clear. The Commonwealth fund recently released a 2012 scorecard data that allows comparisons of many health indicators by city and state. Significant health disparity exists in the northern regions of Indiana. For example, for

overall ranking of Gary, Indiana's health is 256 of 306 and is in the bottom quartile of health in the United States; Fort Wayne is 169 and Lafayette is 190 of 306, both falling in the third quartile (Radley, How, Fryer, McCarthy and C. Schoen, 2012). These data point to the need to develop a workforce that can improve access to care, improve systems of care and provide care to the citizens of Indiana. DNP graduates are well-suited to improve these disparities (see Appendix 2).

As of the submission date for this proposal, the Department of Workforce Development in Indiana has not studied the labor market demand for DNP graduates. However, the economic need for a system-wide DNP is clear. DNP graduates, including nurse practitioners, clinical nurse specialists, and nurse executives, may be employed in a variety of areas including primary care, healthcare organizations, and schools of nursing. (Please see Appendix 2 for the employment of the West Lafayette DNP graduates to date).

Nurse practitioners have provided and continue to provide primary health care to many Indiana residents and are the second largest group of primary care clinicians in the state. However, the number of primary care providers, including nurse practitioners, is about half the recommended number of 100 per 100,000 required to provide access to primary care (Lewis, Sheff, Zollinger, & Allen, 2012). In addition to the current need, an increasing number of NPs will be needed to coordinate and provide direct care to the large number of residents across the state who will soon receive healthcare benefits under the Patient Protection and Affordable Care Act.

Improvements in health result in fewer lost days and contribute positively to economic development. Nurse practitioners who hold a DNP degree are better prepared to assure quality outcomes in this patient population. Clinical nurse specialist (CNS) and nurse executive graduates have been instrumental in improving quality of care and designing care innovations that reduce costs while preserving or improving quality. There is an emerging need for CNSs and Nurse Executives with doctoral preparation to lead efforts to reduce cost of hospitalization and improve health outcomes. These DNP prepared nurses also earn between 5 and 10% more than their master's prepared counterparts (AACN, <https://www.aacn.nche.edu/media-relations/fact-sheets/dnp>, retrieved on April 11, 2013-see Appendix 2.)

Another employment opportunity for DNP graduates is in nursing education. The Institute of Medicine Report on the Future of Nursing projects 5,000 to 5,500 nursing faculty jobs to remain unfilled over the next 15 years at all levels of nursing education. Nurses prepared with a DNP will be eligible to fill some of those roles, particularly as clinical faculty. Since 2008, the West Lafayette campus has produced 33 DNP graduates. Most of these graduates continue to work in Indiana in clinical leadership and executive roles, as advanced practice nurses providing direct care in a variety of primary care facilities and filling critical gaps in nursing education (see Appendix 2, Table 2.1: Employment Patterns of West Lafayette DNP Program Graduates).

In 2010, the Institute of Medicine's Future of Nursing Report made a clear case for increased numbers of nurses prepared at the doctoral level. They demonstrated the rapid growth in DNP programs that had begun in 2004 and this trend will need to grow and be sustained (Appendix 2).

iv. *National, State, or Regional Studies*

National Trends/Data.

With the implementation of the Patient Protection and Affordable Care Act, the Bureau of Labor Statistics projects a net job growth of almost 3 million healthcare jobs by 2020. Nurses prepared for advanced practice will most certainly play a large role in filling this gap. While master's prepared nurses will help alleviate this gap in the short term, the profession is directing that a clinical doctorate is necessary to provide the level of care necessary.

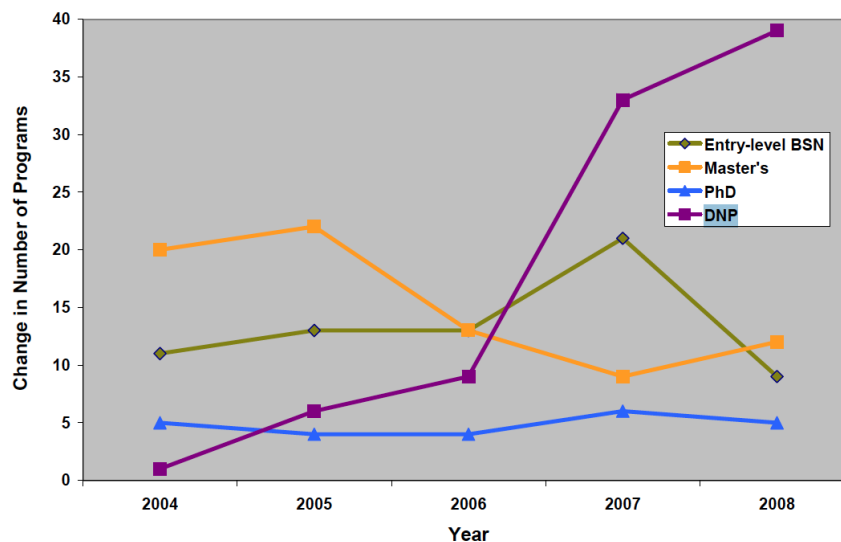
Despite no national data regarding the labor market need, the American Association of Colleges of Nursing's (AACN) 2004 initiative to make the DNP degree the preferred level of educational preparation for APNs established the need for DNP programs. In 2010, AACN reaffirmed the call to transition all APN education from the master's to the practice doctorate by 2015 although accreditation and certification bodies have not moved to enforce this requirement. Following the 2004 vote, master's programs across the country rapidly began the process of transitioning their APN master's program to the DNP. To date, over 225 nursing programs across the country now offer DNP programs more than 100 schools are considering opening DNP program (AACN <https://www.aacn.nche.edu/dnp/program-schools> accessed July 24, 2013). DNP programs reside in universities with Carnegie classifications ranging from Master's-M, Master's-L, Research-H and Research-VH. It is clear that the precedent has been set for offering DNP programs at "\*Master's large" institutions similar to Purdue Calumet and Ft. Wayne. Details regarding Carnegie Classifications for universities currently offering the DNP degree are presented in table 1.

**Table 1 Carnegie Classifications and DNP Programs**

<b>Carnegie Classifications</b>	<b>Number of Universities with DNP Programs</b>
Baccalaureate/Diverse and Arts & Sciences	2
Master's Small	4
Master's Medium	16
*Master's Large	67
Doctoral Research Universities	19
Research University/High Research Activity	43
Research University/Very High Research Activity	41
Special Focus Institution/Health	7
Special Focus Institution/ Medicine	21
Total	220



The growth in DNP programs nation-wide has been rapid (see figure below from the Future of Nursing report). Despite this growth, Indiana has lagged in the development of DNP programs with only 6 programs listed on the AACN website.



**FIGURE 4-7** Growth trends in different nursing programs.  
 NOTE: BSN = bachelor’s of science in nursing; DNP = doctor of nursing practice.  
 SOURCES: AACN, 2005, 2006, 2007, 2008a, 2009b.

(Figure from *The Future of Nursing: Leading Change, Advancing Health*  
<http://www.nap.edu/catalog/12956.html>)

Since the expansion of DNP programs began, it is apparent that DNP programs fulfill a local, state and national need for APNs who are prepared to transform healthcare as they assume leadership positions in healthcare and education. According to AACN, the number of DNP programs and capacity in these programs must expand significantly to meet anticipated needs.

State Trends/Data

In Indiana, the need for DNP prepared nurses is also crucial. A recent study completed by the Education Committee of the Indiana Action Coalition: Transforming Health Care (2013) found there are inadequate opportunities for doctoral nursing education in the state of Indiana. A comparison of the numbers of graduates from PhD and DNP programs in Indiana with four states (Washington, Massachusetts, Arizona, and Tennessee) whose population is similar to Indiana’s found that Indiana graduated the lowest number of DNPs and PhDs.

The timing is right for Purdue University to begin offering DNP programs at the Calumet and IPFW campuses to meet the educational needs of advanced practice and master’s prepared nurses. This strategy would significantly increase access while providing a more affordable option for nurses living near those campuses. Private universities near the Purdue Calumet and IPFW campuses currently offering the DNP are at maximum capacity and have long waiting lists. This proposed collaboration across the Purdue system addresses the need in the communities near our regional campuses. Online access makes the Purdue DNP accessible to

nurses throughout Indiana and other states where distance education agreements have been developed. (See Appendix 3 for details regarding the concentration distribution of APNs throughout the state.)

### Regional Trends/Data

Currently a mix of eight state-supported universities and small private colleges offer the DNP. Within the Purdue system, only the West Lafayette campus offers the DNP degree and enrollments and program options are limited due to resource and faculty constraints. These limitations exist in contrast to the relatively large number of master's prepared nurses that have graduated from campuses across the Purdue system and who represent a significant pool of potential applicants. Many of these potential applicants reside in the northern part of the state where no state-supported programs exist. Additionally, state supported programs are absent from the most highly populated areas of the state, creating an educational disparity. For example, Lake County and Allen County are the second and third most highly populated counties in the state. St. Joseph County lies between these counties and is the fifth highest populated county in the state. Because there is a direct relationship between population density and numbers of registered nurses and advanced practice nurses (Sheff, Kochhar & Zollinger, 2013), the pool of potential applicants to a state-supported DNP program is significant. Finally, there are currently 15 master's degree programs in Indiana that generate over 600 graduates on an annual basis. Qualified graduates from those institutions would be welcome to apply to the DNP program at any Purdue campus that offers the degree.

#### *v. Surveys of Employers or Students and Analyses of Job Postings*

Clear evidence exists in support of offering the DNP degree at the regional campuses of Purdue. Healthcare organizations near these campuses and alumni of the Calumet and Fort Wayne baccalaureate and master's programs have voiced their support and have indicated their desire to pursue the DNP degree at these campuses. The following is campus specific information related to the need to offer the DNP programs at the regional campuses.

#### Purdue University Calumet

During a three-month period in the spring of 2013, we surveyed active students and alumni of the College of Nursing's baccalaureate (including the RN to BS program) and master's programs. The results demonstrate avid interest and an urgent need for a DNP degree at the Calumet campus. The main finding is that 292 respondents said that if Purdue Calumet were to offer the DNP degree they are very likely or likely to apply and they would apply within 6 years, with the largest portion wanting to apply within 2-4 years. The most frequent motivation is to advance their career, to meet future educational requirements to remain an advanced practice nurse and to become a nurse educator. See Appendix 4 for specific findings.

#### Indiana University-Purdue University, Fort Wayne

IPFW conducted a similar needs assessment and surveyed their RN to BS student population as well as baccalaureate and master's students and alumni. A total of 75 online

respondents were very likely or likely to apply for the DNP if IPFW were to offer the degree. The largest portion would plan to apply within the next 4 years (69%) and 31% plan to apply in the next 2 years. In addition, at the graduate student orientation in August 2013 a brief survey was conducted. Of the 44 respondents completing the survey, 9 indicated they intended to pursue a DNP and 15 were unsure but may pursue the degree.

Universities near the Purdue Calumet and IPFW campuses currently offering the DNP are at maximum capacity and have long waiting lists. Offering of a system-wide DNP program would significantly increase access while providing a more affordable option for nurses living near these campuses and throughout the state of Indiana.

vi. Letters of Support (see Appendix 5)

Purdue University Calumet

Support for the DNP program by Calumet campus constituents has been strong. We obtained letters of support from healthcare leaders in our region and the chancellor. These letters of support are located in Appendix 5.

Indiana University-Purdue University, Fort Wayne

Healthcare agencies, research centers, and IVY Tech strongly support the DNP program and look forward to collaborating with IPFW. These letters of support are located in Appendix 5.

**3. Cost of and Support for the Program**

a. Costs

i. *Faculty and Staff* (supporting data in Appendix 6)

All of the current faculty participating in the existing DNP program at the West Lafayette campus and faculty at the Calumet and Fort Wayne campuses who are expected to contribute to the proposed online DNP program hold full-time regular appointments and have earned a PhD or DNP degree. Additionally, all of these faculty members who will teach in the DNP program at the Calumet and Fort Wayne campuses have experience teaching at the master's level and several have taught courses that are in the required plan of study for the DNP program and/or have served on DNP project committees or doctoral dissertation committees at Purdue West Lafayette or other research intensive universities. In fact, the majority of faculty members are quite senior and have decades of experience in graduate education.

As delineated in Appendix 6, Table 6.2, faculty at the West Lafayette campus will teach 93% of the courses in the program to their students while faculty at Fort Wayne plan to teach 86% of the courses in the program and faculty at Purdue Calumet plans to teach 79% of the courses in the program. In order to develop faculty expertise in teaching at the doctoral level, the experienced DNP faculty from the WL campus will mentor doctorally prepared faculty at the Fort Wayne and Calumet campuses during the first few years of the program and will be a required member of DNP Project Committees at all campuses. All DNP core courses taught by faculty at the Fort Wayne or Calumet campuses for the first time will be team taught with a

faculty member from West Lafayette or faculty will be given assistance from West Lafayette faculty to develop the course and prepare to teach it. As mentioned earlier, a West Lafayette faculty member will be assigned the role of DNP System Coordinator for the first several years of system-wide program implementation. The list of required courses and campus instructors are provided in Appendix 6, Table 6.1. To gain experience teaching at the doctoral level, faculty from the Calumet and Fort Wayne campuses will begin serving on DNP project committees alongside faculty from Purdue West Lafayette's DNP program. In addition, doctorally prepared nursing faculty teaching at the Purdue North Central campus are seeking Graduate Faculty status and are available to assist with course and clinical instruction.

We anticipate that a total of 11 new faculty positions and 3 staff positions will be needed during the first three years of the program, 3 faculty (one each year) and one clerical staff at Fort Wayne, 4 faculty (one each year) and 1 clerical staff at Calumet and 4 faculty and 1 clerical staff beginning the first year in West Lafayette. Table 6.3 lists descriptions of new faculty and staff positions we anticipate we will need during the first three years of implementation. Please see Appendix 6, Table 6.4 for a list of Calumet faculty and their qualifications for teaching in the DNP program. Table 6.5 lists Fort Wayne faculty and their qualifications. These tables contain the name of the faculty and their credentials, rank, specialty areas, experience in graduate education and anticipated course responsibilities in the DNP program.

#### Central Administrative Unit

The role of the DNP Centralized Administrative Unit (CAU) will be to serve as the liaison among the campuses that are participating in the system-wide delivery of the DNP Program. The structure of the CAU will consist of a 50.0 CUL Coordinator who will hold faculty rank at one of the campuses participating in the program and a Clerical position that will provide administrative support to the Coordinator and to the participating campuses as needed. Initially, the CAU will be managed at the West Lafayette campus.

#### Purdue University Calumet

Program support will be ramped up over a four-year period using a combination of existing and new faculty positions. Four new positions will support this program as well as replace the instructional needs in existing programs as faculty shift their time to the DNP program. As such, the costs of new faculty positions costs are “net” of the combined need for the proposed DNP program, our existing programs and what is currently available.

Over a four year ramp up period four additional faculty positions will be required at an estimated cost of \$80,000 each plus employee benefits. For the first of these positions, 30% FTE will be allocated to serve as Campus Program Director for which an additional administrative stipend and a partial summer appointment will be provided.

Full time clerical support of \$30,000 plus employee benefits will be allocated to support this program's students and accreditation administrative support requirements.

#### Indiana University-Purdue University, Fort Wayne

Program support will be ramped up over a three-year period using a combination of existing and new faculty positions. Three new positions will support this program as well as replace the instructional needs in existing programs previously provided by faculty time now allocated here. All costs associated with the program will be supported by revenue generated by the program with additional income to balance the budget from internal reallocations.

Over the three-year ramp-up period three additional faculty positions will be required at an estimated cost of \$93,000 each plus employee benefits.

Full time clerical support of \$ 30,000 plus employee benefits will be allocated to support this program's students and accreditation administrative support requirements

West Lafayette

Existing program support of the current DNP program will be fully utilized to meet the needs on the West Lafayette campus. Program support will be ramped up over a four-year period with four new faculty positions to support growth and system-wide implementation. The four additional tenure/tenure track faculty positions are estimated using an average, academic year faculty salary of \$95,335 per 100.0 CUL plus employee benefits. Of these positions, 50.0 CUL will be allocated to serve as the DNP System-wide Coordinator position. Summer stipends for instruction are estimated at 10.55% per 3 credit hour course.

In addition to the current clerical support, 50.0 CUL additional clerical staff will be hired to support the DNP System-wide needs.

ii. Facilities (please see tables in Appendix 7 and 8)

Purdue University Calumet

Since this program is conducted primarily on line no additional physical facilities are needed. Office space for the additional faculty members and support staff will be provided from current space inventory.

Indiana University-Purdue University, Fort Wayne

Since this program is conducted primarily on line no additional physical facilities are needed. Office space for the additional faculty members and support staff will be provided from current space inventory.

West Lafayette

Since this program is conducted primarily on line no additional physical facilities are needed. Office space for additional faculty members and support staff will be provided from current space inventory.

iii. *Other Capital Costs* (please see tables in Appendix 7 and 8)

Purdue University Calumet

Appropriate computer and other technology will be provided for new faculty and support staff position. Existing technology infrastructure and normal upgrades necessary to support existing programs should be sufficient to support this program as well. No other significant capital costs should be required.

Indiana University-Purdue University, Fort Wayne

Appropriate computer and other technology will be provided for new faculty and support staff position. Existing technology infrastructure and normal upgrades necessary to support existing programs should be sufficient to support this program as well. No other significant capital costs should be required.

### West Lafayette

Appropriate computer and other technology will be provided for new faculty and support staff position. Existing technology infrastructure and normal upgrades necessary to support existing programs should be sufficient to support this program as well. No other significant capital costs should be required.

- b. Support
  - i. Nature of support

### Purdue University Calumet

Program will share existing administrative support structure both with the College of Nursing and general university administration. Program will be supported by generated tuition and fees and university general funds.

### Indiana University-Purdue University, Fort Wayne

Program will share existing administrative support structure both with the College of Nursing and general university administration. Program will be supported by generated tuition and fees and university general funds.

### West Lafayette

Program will share existing administrative support structure both with the College of Nursing and general university administration. Program will be supported by generated tuition and fees and university general funds.

- ii. Special Fees above Baseline Tuition

We analyzed the current tuition and fees charged for other similar primarily online DNP programs in Indiana and surrounding states that were considered to be most competitive by potential students. The institutions reviewed included Ball State, Indiana University, Indiana State University, the University of Southern Indiana, the University of Illinois at Chicago, Indiana Wesleyan University, and Valparaiso University. The FY 2014 tuition and fee rates for the main competitor programs clustered around \$693 - \$777 per credit hour for resident students and \$777 - \$1,634 per credit hour for nonresident students.

The recommended per credit hour fee for the Purdue DNP program is \$725 for residents and \$950 for non-residents. Due to the labor intensive nature of residency/practica courses, particularly the cognate residencies and the two Practice Inquiry Project courses, an additional residency/practica fee of \$100 per credit hour has also been recommended. Six of the DNP program's seventeen courses will be assessed the residency/practica fee. These rates will be applied consistently by all participating Purdue campuses.

The proposed fee rates are anticipated to cover a significant portion of the instructional and administrative costs in steady state. A greater investment will be required for the initial implementation and start-up costs as the program ramps up at each campus. Each campus will assume financial responsibility for any budget requirements not covered from fee revenue through reallocations from internal resources.

#### 4. Similar and Related Programs

##### a. List of Programs and Degrees Conferred

According to the website of the American Association of Colleges of Nursing (<http://www.aacn.nche.edu/dnp/program-schools#IN>, retrieved on June 7, 2013) six institutions in Indiana currently offer DNP degrees: Ball State, Indiana State, IUPUI, Purdue-West Lafayette, University of Southern Indiana, and Valparaiso University. These six institutions awarded 32 DNP degrees in 2011, with 6 of those coming from Purdue-West Lafayette. Indiana Wesleyan and University of Indianapolis also offer a DNP program but were not included in the AACN list. The proposed system-wide DNP will include the current program at West Lafayette. It is not anticipated that the proposed program would have a formal relationship with similar programs at other universities. Although the major content areas in the Purdue DNP program are similar to other programs in the State, the proposed system-wide collaborative for the Purdue DNP program offers unique features not available in by other programs such as the collaboration with the Regenstrief Center for Healthcare Engineering and the Indiana Center for Evidence-Based Nursing Practice: A Joanna Briggs Collaborating Center. In addition, most existing DNP programs are at or near full capacity.

##### b. List of Similar Programs Outside Indiana

Over **34** educational institutions in the contiguous states of Illinois, Ohio and Michigan offer DNP programs that are taught primarily online with intensive on-campus sessions, similar to the proposed system-wide DNP program. These programs are listed below.

- In Illinois, a total of **9** colleges and universities offer an online DNP including Governor's State University, Kaplan University, Lewis University, Loyola University, Rush University, St. Francis Medical Center College of Nursing, Southern Illinois University Edwardsville, the University of Illinois at Chicago, and the University of St. Francis.
- **Nine** colleges and universities in Ohio currently offer an online DNP degree including Case Western Reserve University, College of Mount St. Joseph, Kent State University, the Ohio State University, the University of Cincinnati, the University of Toledo, Ursuline College, Walsh University and Wright State University.
- In Michigan, **9** colleges and universities offer the DNP degree including 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, and Wayne State University.
- **Seven** universities in Kentucky also offer the DNP including Bellarmine University, Eastern Kentucky University, Frontier Nursing University, Murray State University, Northern Kentucky University, the University of Kentucky and Western Kentucky University.

c. Articulation of Associate/Baccalaureate Programs (Appendix 9 not applicable)

The proposed system-wide DNP program will initially be offered as a post-master's option and in the future a post-baccalaureate option will also be available. As such, it will not articulate directly with associate degree programs.

d. Collaboration with Similar or Related Programs on Other Campuses

A system-wide DNP program is a logical extension of the Graduate Nursing Consortium that was created in 1997 when the College of Nursing at Purdue Calumet brought their master's in nursing program to nurses living in communities near the West Lafayette and Fort Wayne campuses. Through this consortia arrangement, the nursing programs at West Lafayette and Fort Wayne began to participate in teaching graduate courses and eventually were approved to offer their own master's degrees. Since its creation, the Purdue Graduate Nursing Consortium has significantly increased access to affordable master's education to nurses throughout the state. It has provided an efficient and effective way to use the expertise of doctorally prepared nursing faculty across the Purdue system while increasing the program options available to nursing students. The DNP collaborative effort will benefit from these past experiences by generating improvements in multiple systems across the campuses that will enhance not only the DNP student experience, but that can be applied to other units at Purdue who might endeavor to accomplish a similar collaboration.

Table 3: Evidence of Consortium Course Sharing in Master's Programs 2004/5 -2013

Year	Calumet→ WL	WL→ Calumet	WL→IPF W	IPFW→ WL	Calumet→ IPFW	IPFW→ Calumet
2004/5	NUR 50200 NUR 50700	∅	∅	∅	NUR 50200 NUR 50500 NUR 50700	∅
2005/6	NUR 50200	∅	∅	∅	NUR 50200	∅
2006/7	∅	∅	∅	∅	NUR 50200 NUR 50700	∅
2007/8	∅	∅	∅	∅	NUR 50200	∅
2008/9	∅	∅	∅	∅	NUR 50200 NUR 50700 NUR 50000	NUR 65300 NUR 65000 NUR 65100 NUR 52300 NUR 55500
2009/1 0	∅	∅	∅	∅	NUR 50200 NUR 50300 NUR 50000	NUR 52500 NUR 65000 NUR 65100 NUR 55500
2010/1 1	∅	∅	NUR 50700 NUR 51100 NUR 54200	∅	NUR 50200	NUR 52500 NUR 65000 NUR 65100 NUR 55500
2011/1 2	∅	∅	NUR 50700	∅	NUR 50200	NUR 52500 NUR 65300



Year	Calumet→ WL	WL→ Calumet	WL→IPF W	IPFW→ WL	Calumet→ IPFW	IPFW→ Calumet
						NUR 52100
2012/1 3	∅	∅	NUR 50700	NUR 52500	∅	NUR 52500 NUR 65000 NUR 65100
2013/1 4	∅	∅	NUR 50700	NUR 52500	∅	NUR 65300

As indicated in this document, efforts to expand the current West Lafayette DNP program rest upon the existing collaborative relationship among the three campuses. Collaboration among these campuses began approximately 15 years ago and led to expanded educational options for Indiana graduate nursing students by sharing courses and specialty options. Enrollment growth in the West Lafayette Adult NP program and differences in program options reduced the need for collaboration between the West Lafayette and Calumet campuses after 2006. This collaboration will continue with the planning and implementation of a system-wide DNP program. Over the next year, the administrators and faculty of the nursing programs at the Calumet and Fort Wayne campuses will continue to work closely with the Head and graduate faculty of the DNP program in West Lafayette. This work will include collaboration on curriculum and course development and a schedule of course offerings. Plans are currently in place for graduate faculty from the regional campuses to begin serving on committees for DNP students enrolled in the West Lafayette program. In addition, all Purdue graduate nursing programs will work collaboratively toward establishment of a system-wide DNP program.

The collaboration among the three campuses of Calumet, Ft. Wayne, and West Lafayette will include sharing a common curriculum and approach to program administration as well as sharing a common approach to evaluation while each campus retains authority to admit and graduate their own cohorts of students. Additionally, new standing committees and additional structural support will be created to offer and manage the program.

The following principles guide the collaborative effort from the campuses:

- Each campus will offer the DNP curriculum already approved and implemented on the West Lafayette campus.
- Current admission and progression requirements and policies for the DNP program will be used by all participating campuses.
- Each participating\* campus will have the option to develop one or more specialty courses based on the faculty expertise.
- Ongoing development, implementation and evaluation of the DNP program will be the responsibility of all participating nursing units within the Purdue system.
- Administration for the DNP Program will ensure equal representation from all participating campuses and will accommodate differences in campus cultures, mission and student needs.
- A system-wide coordinator based on the West Lafayette campus will work with DNP program directors at each campus to assure consistency in admissions, progression, graduation requirements, core course consistency, program evaluation, and faculty development across the campuses. After a developmental period of five years, the coordinating process will be evaluated and the coordinator position may be rotated among the participating campuses.

- A DNP Program Committee will be comprised of the Coordinator, DNP Program Directors and one faculty representative from each participating campus. The Deans/Heads of the participating nursing programs will serve as ex officio members without vote. This committee will be responsible for activities such as reviewing program outcomes and proposed curriculum changes, reviewing proposed changes to admission standards and policies, reviewing progression policies, and monitoring admissions and courses enrollments. Unanimous agreement will be required prior to instituting any changes.
- All participating campuses will assess program quality, student learning and other outcomes required by accrediting organization(s) using standardized formats. Until the DNP programs at Purdue Calumet and Purdue Fort Wayne obtain CCNE accreditation for their programs, the initiation of data collection in collaboration with campus directors will be driven by the coordinator, and outcomes synthesized by the coordinator and disseminated to the program committee for review and action as appropriate.
- A DNP Administrative Coordinating Council consisting of the administrators of each participating nursing program, the DNP Coordinator, the Directors of each participating campus DNP program and a representative from the Purdue Graduate School will meet at least annually to review the progress of the collaboration, review program outcomes and assist in troubleshooting system issues. When needed, the Coordinating Council will create multi-campus task forces to make recommendations for system policies or practices needed to support the DNP system collaboration. These teams may be comprised of representatives from finance, registrar's office, financial aid, student services, Graduate School, technology and technology support and continuing education.
- Students will seek admission to the campus of their choice, receive academic credit and graduate from that campus.
- Students will access all program and course information, online learning platforms, library resources and students services through a common Purdue DNP website.
- Students will experience a seamless integration of support and service regardless of their home campus.
- Student services and support will be comprehensive and appropriate to the needs of online students. Each participating program will be responsible for providing academic support and ancillary services to students who are admitted to their program.
- A collaborating agreement which outlines operating policies and procedures will be developed with input from experts representing the registrar's offices, business offices, financial aid, continuing education and the Graduate School.
- DNP program support functions (oversight of student data and financial transactions, program website design and maintenance, communications, program management support) will be managed by a DNP program office housed at one of the participating campuses.
- DNP program financial support will come from student enrollments in courses and from in-kind contributions from participating campuses and nursing programs.

- A negotiated common credit hour fee will be charged for all courses taken as part of the DNP curriculum.
- A negotiated revenue distribution plan will determine allocations to support instructional and student services costs at the teaching institution, costs of admitting and enrolling students, and system costs associated with the collaboration.
- Course development, delivery costs, and instructional costs will be the responsibility of the individual participating institutions.
- All participating campuses will retain their current authorization to offer master's degrees.

\*participating units or campuses refers to the Purdue campuses that have been authorized to offer the degree as part of this system-wide collaboration

## **5. Quality and Other Aspects of the Program**

The current DNP program offered at West Lafayette allows for three types of prospective students: post-baccalaureate nurses, current MS in nursing students, and advanced practice nurses who have completed their MS degrees. The focus of the system-wide DNP program will be nurses who have completed their MS degrees.

The current post-baccalaureate DNP program in West Lafayette integrates the existing master's curriculum, which totals 46-49 credit hours, and incorporates the AACN's (1996) recommended thematic areas of Graduate Nursing Core, Advanced Practice Nursing Core, and Specialty Core. These hours are added to 37 credit hours in the DNP to total 83 post-baccalaureate semester credit hours. Included are 630 hours of supervised clinical preceptorship (MS program) and an 896-hour residency (DNP program) for a total of 1,526 hours of supervised clinical practice, a health policy residency, and cognate residencies.

The post-master's DNP program consists of 43 credits in addition to credits taken toward the MS degree. Included in the program are 896 hours of residency/practica focused on health policy, cognate and practice inquiry. The specific curriculum plan listing required courses and cognates to be offered at the regional campuses can be found in Appendix 10, Table 10.1. A sample full time plan of study is located in Appendix 10, Table 10.2.

We plan to offer the post-master's DNP program on a three-year part-time basis as the option preferred through needs assessment surveys we performed. The post-master's DNP program is also currently available on a three-year basis from the W. Lafayette campus. Therefore, the program will transition well to the regional campuses. The curriculum plan for completing the program part-time over a three-year period of time is located in Appendix 10, Table 10.3.

a. Credit Hours Required/Time to Completion

Students admitted to the post-master's DNP program must have a master's degree in nursing. The post-master's DNP track consists of 43 credit hours. See Appendix 10, Table 10.4 for detail on admission requirements, and Table 10.5 for description of the curriculum and list of approved courses.

b. Exceeding the Standard Expectation of Credit Hours

The credit hour expectation does not apply to this program because it is a graduate as opposed to an associate/baccalaureate degree program.

c. Program Competencies or Learning Outcomes

The learning outcomes for the proposed system-wide collaborative program will be consistent with the West Lafayette DNP learning outcomes. These outcomes reflect the AACN Essentials of Doctoral Education for Advanced Nursing Practice and are listed below. Upon successful completion of the DNP, the graduate will be able to:

- Evaluate systems responses to health and illness as a basis for the promotion, restoration and maintenance of health and functional abilities and the prevention of illness
- Integrate advanced knowledge of nursing theories, related sciences and humanities, and methods of inquiry in the care diverse populations
- Design quality, cost effective nursing interventions based on the knowledge of interrelationships among person, environment, health and nursing
- Measure outcomes to evaluate nursing and health systems in diverse settings
- Demonstrate role competence as a Doctor of Nursing Practice in providing care to individuals and families including rural and vulnerable populations
- Translate research to support evidenced-based practice for diverse populations
- Initiate changes in the healthcare system through the implementation and evaluation of health policies that strengthen the healthcare delivery system
- Apply systems concepts to prevent and solve complex healthcare delivery problems

d. Assessment

Assessment will be the responsibility of all participating campuses. Our assessment plan is holistic and will include these target areas: program, course, course delivery technology, instructor, and individual student learning outcomes. Data will be analyzed by each campus and the system. In addition, each campus will assess the DNP program as a whole using the current West Lafayette program evaluation plan based on the Commission on Collegiate Nursing Education (CCNE) accreditation standards. The specific CCNE evaluation plan to be followed is listed on the next page.

**Program Evaluation Plan - DNP Program**

<b>PROGRAM OUTCOMES</b>		
<b>Outcome Measures</b>	<b>Frequency of Evaluation</b>	<b>Evaluation Methods</b>
Program Goals	Annually	School of Nursing Program Evaluation Plan Graduate Curriculum Evaluation Plan
Curriculum	Annually	School of Nursing Program Evaluation Plan Graduate Curriculum Evaluation Plan
Clinical sites, faculty, preceptors	Every semester	PICES Preceptor, clinic practicum, clinical site, course/faculty evaluation forms
<b>GRADUATE STUDENT OUTCOMES</b>		
<b>Outcome Measures</b>	<b>Frequency of Evaluation</b>	<b>Evaluation Methods</b>
Certification Pass Rates (*applies to the post-baccalaureate DNP)	Annually	Certification Exams (AANP, ANCC, Pediatric Nursing Certification Board, etc).
Graduation Rate	Annually	Numbers of students completing the program
Practice/Position in area of Specialty	Upon graduation	New Graduate Employment Information Form
	3 years	3-Year Post-Graduation Employment Survey
Employer Satisfaction	1 year	1- and 3-year employer satisfaction surveys
	3 years	
Graduate Satisfaction with Preparation	Upon graduation	Exit Survey for Graduate Students
	1 year	1-year survey of graduates
Professional activity	1 year	80% of students have membership in professional organization 1- and 3-year survey of graduates
	3 years	

In addition to the CCNE evaluation plan, we plan to use both formative and summative metrics to evaluate courses and online program components. Formative measurement is important to make mid-course and mid-program corrections to enable student success. Because we intend to offer this program using innovative technologies for asynchronous online delivery, we will assess the quality of the online learning environment and strategies as part of the learning process and outcomes.

Programmatically, we will continuously assess for improvement of course, instruction and learning outcomes. We will use the Sloan Consortium (Sloan-C) Quality Framework and Pillars (Moore, 2005) to assess the quality of the online program. The Sloan-C framework is appropriate for course and programmatic assessment and is organized around five pillars of quality including learning effectiveness, cost effectiveness and institutional commitment, access and faculty and student satisfaction.

We will use the Quality Matters (QM) assessment rubric to certify instructors for online teaching and to periodically assess individual courses. Funded through a FIPSE grant, a consortium of higher education institutions developed the QM framework and rubric after reviewing the literature of best practices. It is now a well-established approach to assessing the quality of online education (<https://www.qualitymatters.org/higher-education-program>). See Appendix 12, Table 12.1 for details on elements of the planned QM assessment process.

e. Licensure and Certification

As a post-master's degree program, most graduates will not be prepared for a license or certification. All students will need to hold a valid registered nurse license as a criterion of admission. Applicants, who are not certified at the time of application, may be required to complete coursework leading to certification as is current practice in West Lafayette.

f. Placement of Graduates

The West Lafayette campus has graduated 32 DNP students since its first graduating class of 2007 (Appendix 2, Table 2.1). Graduates are working in the following healthcare roles: nursing university or clinical education (14), advanced nursing practice (10), clinical director (4), executive level nursing (2) and one student is pursuing a PhD and employed at the Centers for Disease Control and Prevention. All but six alumni are employed in Indiana. We anticipate that graduates will find similar placements (see Appendix 2). Nationally, DNP prepared nurses earn between 5 and 10% more than their master's prepared counterparts (AACN, <https://www.aacn.nche.edu/media-relations/fact-sheets/dnp> , retrieved on April 11, 2013.)

g. Accreditation

Accreditation is a requirement of programs of nursing to ensure that graduates are eligible to be fully licensed and certified. While no certification exists for those pursuing a post-master's DNP, accreditation of all programs is nonetheless desirable, necessary and expected by potential employers. Accreditation indicates that the program has met quality standards and communicates that quality to students, the public and policy makers

The DNP program at West Lafayette is fully accredited by the Commission on Collegiate Nursing Education (CCNE). The existing master's programs at Calumet and Fort Wayne are

fully accredited by the Accreditation Commission for Nursing Education (ACEN), formerly known as the National League for Nursing Accrediting Commission. The Calumet campus was just re-accredited in 2012. To expedite initial accreditation, the Calumet and Fort Wayne programs will submit a planned substantive change to ACEN under the category of “addition of a program with a different level of credentials than previously offered” (<http://www.acenursing.net/resources/GuidelinesSubChange.pdf>). After the first year of the program, the Calumet and Fort Wayne campuses will seek accreditation through CCNE.

## 6. Projected Headcount and FTE Enrollments and Degrees Conferred

See tables below for enrollment projections and projected degrees conferred for Purdue University Calumet, Indiana University Purdue University Fort Wayne, and Purdue West Lafayette as part of this collaborative system-wide DNP.

Table 6A

Institution/Location: Purdue University Calumet

Program: Collaborative System-Wide DNP

	Year #1 FY 2014	Year #2 FY 2015	Year #3 FY 2016	Year #4 FY 2017	Year #5 FY 2018
Enrollment Projections (Headcount)	15	31	50	53	55
Enrollment Projections (FTE)	6.3	15.8	21.5	22.8	23.4
Degree Completions Projections	0	0	14	15	17

Table 6B

Institution/Location: Indiana University - Purdue University Fort Wayne

Program: Collaborative System-Wide DNP

	Year #1 FY 2014	Year #2 FY 2015	Year #3 FY 2016	Year #4 FY 2017	Year #5 FY 2018
Enrollment Projections (Headcount)	10	19	28	33	37
Enrollment Projections (FTE)	4.2	8.0	11.8	13.9	15.5
Degree Completions Projections	0	0	9	9	9



Table 6C

Institution/Location: Purdue University West Lafayette

Program: Collaborative System-Wide DNP

	Year #1 FY 2014	Year #2 FY 2015	Year #3 FY 2016	Year #4 FY 2017	Year #5 FY 2018
Enrollment Projections (Headcount)	15	29	43	43	43
Enrollment Projections (FTE)	6.8	13.1	19.4	19.4	19.4
Degree Completions Projections	0	0	14	14	14

Table 6D

Summary Table

Program: Collaborative System-Wide DNP

	Year #1 FY 2014	Year #2 FY 2015	Year #3 FY 2016	Year #4 FY 2017	Year #5 FY 2018
Enrollment Projections (Headcount)	40	79	121	129	135
Enrollment Projections (FTE)	17.3	36.9	52.7	56.1	58.3
Degree Completions Projections	0	0	37	38	40
Instruction at Another Campus (FTE)	7.4	10.9	7.9	6.6	7.8

## References

- Kirschling, J. (2013). *Designing DNP programs to meet required competencies – context for the conversation*. [PowerPoint slides] Retrieved from: <http://www.aacn.nche.edu/dnp/JK-2013-DNP.pdf> .
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# Appendices

**Appendix 1**  
**Institution Mission and Strategic Plans**

## **Purdue System Mission and Goals**

A dozen teams of about 10 members each, including faculty, staff, and administrators representing all four campuses, worked for five months to draft a Purdue System Plan which has been submitted to President Daniels. The plan consists of a mission statement, operating principles, and goals in eight important areas. This section of Appendix 1 is a very brief summary of the document that the team prepared.

The Purdue System, as a whole, has a dual mission. As Indiana's Land-Grant institution, Purdue is to provide access to affordable, practical, high-quality education to Indiana's citizens. As an internationally recognized institution of higher education, Purdue conducts cutting edge research and prepares global leaders. Each campus in the System contributes to the mission in different ways, and when multiple campuses collaborate doing so yields a better result.

Operating principles are statements of how the campuses will work together effectively. A dozen operating principles are specified in the draft, but the flavor of those principles is captured in the first one: Purdue University will operate as a system, with overarching objectives being to ensure that (1) the teaching, learning, discovery, and engagement functions of each campus are enhanced as a result of collaboration with the other Purdue System campuses and affiliated units, (2) costs are minimized by avoiding unnecessary duplication of services and administrative functions, and (3) Purdue is a leader in innovation and economic development while meeting the needs of all students.

Finally, the plan lists system-wide goals in eight key areas. Those areas are: (1) student access and success, (2) quality of education, (3) online education, (4) graduate education, (5) student mobility and preparation, (6) affordability and efficiency, (7) knowledge creation and dissemination, and (8) engagement.

### **Links to Institution Mission and Strategic Plans**

Following are links to campus missions and strategic plans. Analysis of the proposed program in relation to the linked resources is available in the narrative portion of this document.

- The Calumet campus strategic plan can be located at <http://webs.purduecal.edu/strategicplan/files/2013/05/strategic-plan-2013-18.pdf>
- The IPFW strategic plan can be located at <https://www.ipfw.edu/dotAsset/127540.pdf>
- The West Lafayette strategic plan can be located at [http://www.purdue.edu/strategic\\_plan/documents/StrategicPlanBrochure.pdf](http://www.purdue.edu/strategic_plan/documents/StrategicPlanBrochure.pdf)

**Appendix 2**  
**Workforce Data**

## **Section 1: Links to National Recommendations and Healthcare Data**

The impetus for expanding the current Purdue W. Lafayette DNP degree program does not arise from labor force data. Instead, the rationale for expanding this program can be found in national recommendations and health outcomes data. Following are several documents that provide data and address the need to expand the DNP program.

### **Data Source 1: American Association of Colleges of Nursing (AACN) (2013). Fact Sheet: The Doctor of Nursing Practice**

Although practice doctorates have been in existence for some time, recommendations to begin vigorous expansion of these programs began in 2004 with AACN's publication of a position statement on the practice doctorate. Since that time, the number of DNP programs has greatly increased across the country. The AACN continues to promote the growth of DNP programs and monitors the number of programs and graduates. The document linked below provides details regarding program growth. Additionally, details regarding the rationale for expanding DNP programs can be found in this document.

Retrieved from:

<http://www.aacn.nche.edu/media-relations/fact-sheets/DNPFactSheet.pdf>

### **Data Source 2: Institute of Medicine (2010). The Future of Nursing: Leading Change, Advancing Health Report Recommendations**

Key messages from the Institute of Medicine's (IOM) report indicate that nurses should advance their education and be fully recognized as a force for redesigning healthcare in America. Additionally, nurses should also be involved in workforce planning and policy. The report calls for doubling the number of nurses with doctoral degrees by 2020; expanding opportunities for nurses to lead and improve practice and systems; and preparing nurses to lead change efforts for the purpose of advancing healthcare. The DNP degree is an ideal educational foundation for achieving these goals. Following is a link to the 2010 Institute of Medicine Future of Nursing recommendations.

Retrieved from:

<http://www.iom.edu/~media/Files/Report%20Files/2010/The-Future-of-Nursing/Future%20of%20Nursing%202010%20Recommendations.pdf>

### **Data Source 3: Commonwealth Fund (2013). Scorecard on State Health System Performance for Low-Income Populations**

The Commonwealth Fund published a report outlining health indicators for the nation. Details on these indicators are also available at the state level. In the low-income population, Indiana ranks poorly in comparison to other states in most of the key indicators. For example, with respect to indicators focused on "Healthy Lives," 36% of the low-income population smokes. This percentage places Indiana 46<sup>th</sup> among the 50 states. Similarly, Indiana ranks 31<sup>st</sup> with respect to the percent of the low-income



population that is obese, 34<sup>th</sup> in infant mortality, and 39<sup>th</sup> in the percent of adults reporting fair/poor health. With respect to “Potentially Avoidable Hospital Use,” Indiana ranks 43<sup>rd</sup> in the category of potentially avoidable emergency department visits among Medicare beneficiaries and 33<sup>rd</sup> in the category of potentially avoidable hospitalizations from respiratory disease among adults. One way for Indiana to address these problems is to greatly increase the pool of nurses who hold DNP degrees. With an extensive preparation in practice and systems improvement, graduates of DNP programs are uniquely positioned to address the urgent healthcare needs within our state. The full scorecard containing information about the state of Indiana can be accessed at the following link.

Retrieved from:

<http://www.commonwealthfund.org/~media/Files/HSDC/Low%20Income%20Population%20Scorecard/IN.pdf>

## Section 2: Employability of W. Lafayette DNP Graduates to Date

Although workforce data demonstrating need does not currently exist, it is readily apparent that graduates of the current DNP program offered by W. Lafayette are readily employable. These graduates hold a wide variety of advanced practice and leadership positions as outlined in the following table.

**Table 2.1 Employment Patterns of West Lafayette DNP Program Graduates**

NAME	DNP Practice Inquiry Project Title	Graduate Date	Current Employment
Melanie Braswell	Reducing Surgical Site Infections	May, 2007	LifeBridge Health. Sinai Hospital OR, Baltimore, MD.
Kathleen Schafer	Identifying Eating Disorders in Young Female Athletes: Preventing Female Athlete Triad	May, 2007	Purdue Univ. School of Nursing, Assistant Professor
Kathryn Rapala	The Impact of a Frontline Patient Safety Program on Nursing Turnover	May 2008	Aurora Health, Dir. of Clinical Risk Management, Milwaukee, WI
Ruth Ann Smolen	Knowledge, Satisfaction, and Confidence, Levels of Simulation Education	Aug. 2008	Purdue Univ. School of Nursing Assistant Professor
Polly Royal	Nurses Working Overtime and Risk for Cardiovascular disease	Aug. 2008	IU Health Arnett Hospital
Mike Criswell	Critical Care Nurse’s Attitudes and Perceptions Regarding Unrestricted Family visitation in an Intensive Care Unit	Aug. 2008	IU Health Arnett Hospital
Susan	Vibrational Frequencies in Wound	Dec. 2008	IU Health, Indianapolis,

<b>NAME</b>	<b>DNP Practice Inquiry Project Title</b>	<b>Graduate Date</b>	<b>Current Employment</b>
McAlister	Healing		IN, Director, IU Health Hospice
Jennifer Coddington	Quality of Care and Policy Barriers to Providing Health Care at a Pediatric Nurse Managed Clinic	May 2009	Clinical Assistant Professor, Director , DNP Program, Director PNP Master's Program, Co-clinical Director NCNC Clinics
Laura Beamer	Preventive and Screening Health Behaviors in the Presence of a Family History of Cancer	May 2009	Centegra Oncology Services, Sage Cancer Center
Mary Ann Caswell	Evaluation of the impact of High-fidelity Simulation on Competence and confidence in Knowledge Transference by Nursing Students	May 2009	Professor, SUNY Canton University
Deborah Koester	Identification of Factors that Impact Delivery of Essential Public Health Services in Indiana Local Public Health Systems	May 2009	Office for State, Tribal, Local and Territorial Support, Centers for Disease Control and Prevention; continuing toward PhD in public administration
Karen Williams	Open Access Scheduling in a Community Health Clinic	Aug. 2009	Dean, School of Nursing Anderson University
Terry Ridge	A Randomized Comparative Trial between Standard Office Visits and Group Office Visits in adults with Type 2 Diabetes	Aug. 2009	ANP, American Health Network
Deanna Staples	Emergency Preparedness: An After Action Analysis of the 2009 Kentucky Ice Storm	Dec. 2009	Faculty (Homeland Security), Austin Peay State University, Clarksville, TN
Diane Deberry	Risk for Postoperative Complications in Older Patients Undergoing Elective Hip and Knee Arthroplasty	May 2010	Medical Surgical Clinical Educator, Flagstaff Medical Center
Mary Browning	Ambulatory Patient Safety Culture: A Staff Perspective	May 2010	Vice President, Nursing Ambulatory Services, Community Health Network
Yvonne Culpepper	Differences in Staff's Perception of Safety Cultures over Time	May 2010	Vice President of Nursing/CNO Hendricks Community Health
Cheryl Erler	Organizational Variables and	Aug. 2010	Assistant Professor,

<b>NAME</b>	<b>DNP Practice Inquiry Project Title</b>	<b>Graduate Date</b>	<b>Current Employment</b>
	Perceived Patient Safety of Health Care Providers in a Critical Care Transport Program		IUPUI
Rachel Waltz	The Impact of Using a Waterless Milk Warming System on Necrotizing Enterocolitis Gastric Residuals, GI Symptoms, O2 Consumption, Weight Gain and Length of Stay in the Neonatal Intensive Care Unit	Dec. 2010	Assistant Professor, IUPUI
Inn Savkihini	The Association between parental Psychological Stress and Negative Health Outcomes in their Children, Age 13-18 Years old	Dec. 2010	Associate Course Instructor, St. Elizabeth School of Nursing
Sheila Abebe	Utilizing Value Stream Mapping to Assess Workflow Inefficiency in a Pain Management Clinic	Dec. 2010	Director of Integrated Care, management at IU Health Indianapolis, IN
Becky Horn	Drug Recovery Retention in Women Who Participated in Prenatal Substance Treatment	Dec. 2010	Clinical Instructor, St. Elizabeth School of Nursing
Sharon Stoten	The Effectiveness of Using Video Camera's to Access Nurse Practitioner Students in a Clinical Setting	Dec. 2010	Clinical Assistant Professor, IUPUI
Christine Balt	Development, Implementation, and Evaluation of an Evidence-Based Guideline for Anal Cancer Screening in Persons with HIV Infection	Aug. 2011	HIV Nurse Practitioner, Wishard Health Services
Lynn Nuti	No-Shows in Outpatient Diabetes	Aug. 2011	ANP for Purdue Student Health. Relocated to Boston, Fall, 2013
Lori Beck	What Areas of Preparedness does within Health Services Identify for Planning and Response to Pandemics	Aug. 2011	Community Hospital Oncology Practice
Marjorie McCaskey	Transferring Central Line Care Evidence into Practice on Pediatric Acute Care Units	Aug. 2011	IU Health, Riley Hospital for Children
Judith Young	Nursing Workload Measurement Approaches and Nurse Staffing	Dec. 2011	IUPUI School of Nursing
Earlie Hale	Stool Consistency in Older Adults	Dec. 2011	Roudebush VA
Youngsook	Non-Urgent Emergency Room	Dec. 2012	FNP at Minute Clinic and

<b>NAME</b>	<b>DNP Practice Inquiry Project Title</b>	<b>Graduate Date</b>	<b>Current Employment</b>
“Theresa” Olsson	Visits by Medicaid Adults and Promotion of Primary Care Provider Benefits		Active Military
Susan Colosimo	Exploring Elderly Veterans Recall of their Medications	Dec. 2012	NP, Roudebush VA
Lisa Guzman	Evidence Based pain Management	May 2013	Director, Blue Skies Hospice
Denise Ferrell	Ethnic Minority Student Nurses’ Perceptions of their Educational Ability to Persist Toward Degree Completion	Aug. 2013	Faculty, University of Indianapolis

## **Appendix 3**

### **National, State, or Regional Studies**

## State Data Supporting the Need for Expanding the DNP Degree

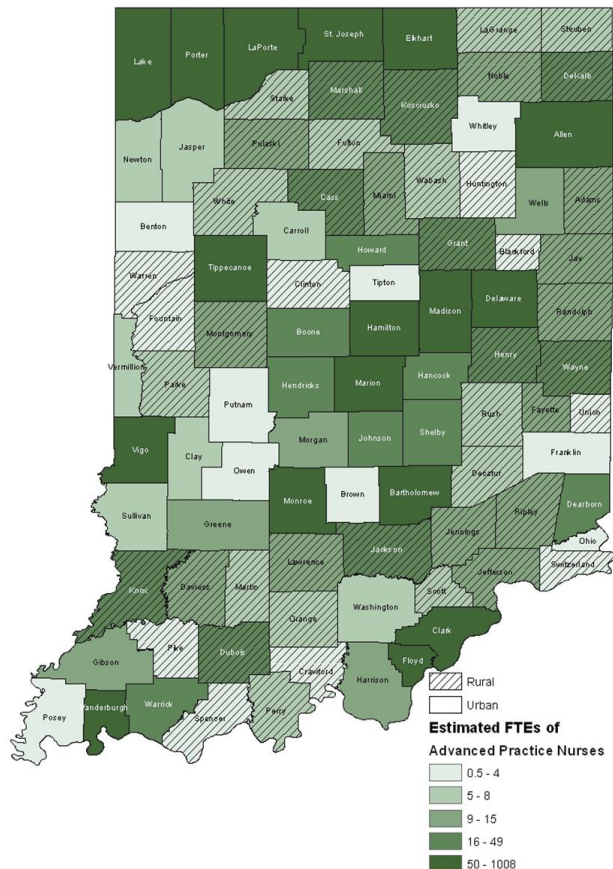
### Data Source 1: Education Subcommittee on Nursing Data (2013). An Overview of the Nursing Workforce, Educational Capacity and Future Demand for Nurses in the State of Indiana

According to a recently published report of the status of the nursing workforce and education in Indiana, the need for expanding access to doctoral education in the state is apparent. There are currently six DNP programs in the state. In 2011, there were 199 students enrolled in these programs and 32 graduates. In comparison, in 2011, there were 15 schools offering master's degrees in nursing across the state that enrolled 2,434 students and graduated 616. This document can be accessed at the following link: [http://www.ic4n.org/wp-content/uploads/2013/06/Final-report\\_Indiana-Nursing-Data\\_IAC-Education-Subcommittee.pdf](http://www.ic4n.org/wp-content/uploads/2013/06/Final-report_Indiana-Nursing-Data_IAC-Education-Subcommittee.pdf)

### Data Source 2: State-Wide Distribution of Advanced Practice Nurses

Advanced practice nurses make up the primary pool of potential applicants to an expanded system-wide DNP program. As apparent in the map presented below, large concentrations of APNs are located in the northern tier of the state. The northern tier represents the primary service area for the Calumet and Fort Wayne campuses.

Retrieved from: Sheff, Z.T., Kochhar, K. & Zollinger, T.W. (2013), <http://www.hwic.org/resources/details.php?id=13560>



## **Appendix 4**

### **Surveys of Employers or Students and Analyses of Job Postings, Detail**

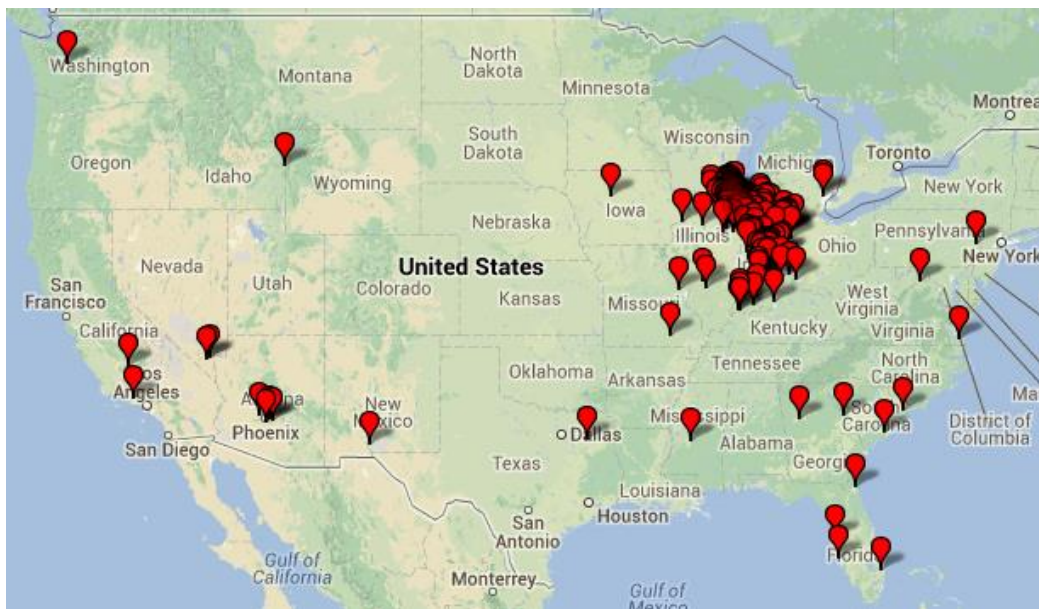
## Section 1: Calumet Campus Needs Assessment

Faculty from the College of Nursing at the Calumet campus conducted a needs assessment using an online survey format in the Spring of 2013. The results of the survey demonstrated a high level of interest in a Calumet campus-based DNP program. The results of this survey are presented below.

**1. Who are the respondents and where do they live?** We surveyed active students and alumni with active mail or electronic addresses using 3 phases of invitation to participate. The median time in nursing was 7 years with a range of 0-40 years.

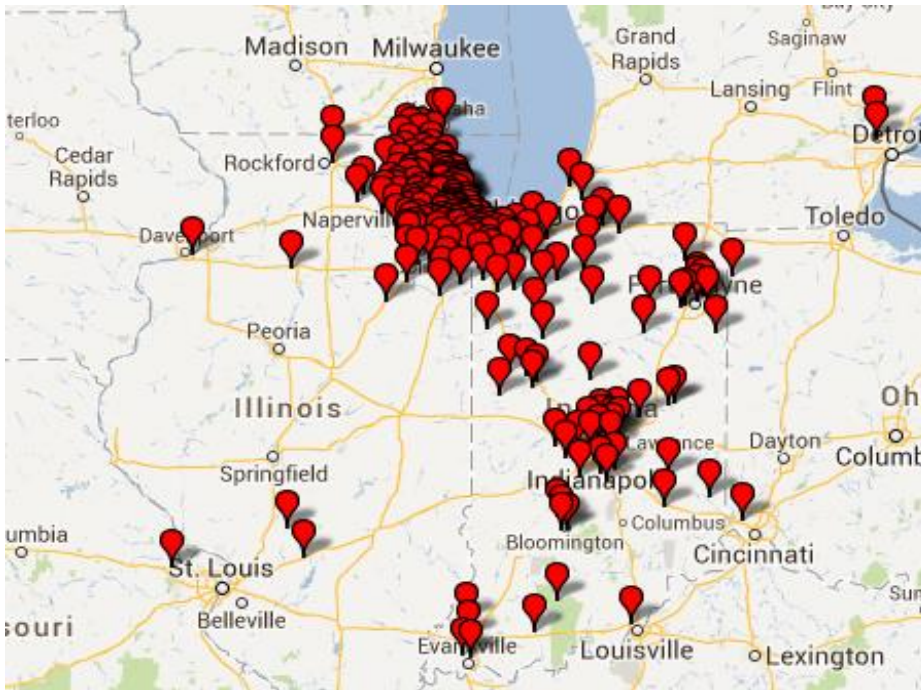
Because of our online programs, we received interest from students and alumni from across the nation but the largest concentrations were in the Chicago area and Northwest Indiana (see map of distribution of respondents' zip codes).

**Figure 1:** Calumet needs survey respondents by zip code-national distribution (each dot = one respondent)





**Figure 2:** Calumet needs survey respondents by zip code-Interest in the greater Chicago and Northwest Indiana area (each dot = one respondent)



**2. What is the potential applicant pool?** We surveyed both our RN to BS student population as well as baccalaureate and master’s active students and alumni. A total of 297 respondents were very likely or likely to apply for the DNP if Purdue Calumet were to offer the degree. The largest portion would plan to apply within the next 2 years.

**3. What is the reputation of Purdue University Calumet?** Respondents grade the reputation of PUC’s School of Nursing very positively with 91% of the 570 respondents ranking the School’s reputation as outstanding or very good. These data speak to the confidence that respondents have in the School and this perception supports their confidence in our ability to offer the DNP degree.

**4. What are the preferences for course delivery?** Most students, who were likely to apply to PUC, expressed a desire for entirely online delivery with only very occasional on-campus sessions (no more than x1/semester) or hybrid (combination of face-to-face and online courses).

Course Delivery Preference	Very likely or Likely to Apply to PUC
Entirely traditional face-to-face	26 (07%)
Hybrid-combination of online and face-to-face	126 (36%)
Mostly online with occasional on-campus session	203 (57%)

**5. What are the potential barriers to pursuing a DNP degree?** We asked respondents to rate potential barriers on a sliding scale of 0 (no barrier) to 10 (insurmountable barrier). Cost, time

and multiple family requirements were the most important potential barriers for completing a DNP degree:

Barrier	Mean value (SD)
Cost	7.3 (2.3)
Time	5.8 (2.3)
Multiple family requirements	4.8 (2.7)

## Section 2: Fort Wayne Campus Needs Assessment

Faculty from the Department of Nursing at IPFW conducted a needs assessment using an online survey format in the spring of 2013. The results of the survey demonstrated a high level of interest in an IPFW campus-based DNP program. The results of the survey are presented below.

1. **Who are the respondents and where do they live?** We surveyed current graduate students and alumni with active mail or electronic addresses using 2 phases of invitation to participate. The median time in nursing was 13 with a range of 1 – 30 years. Figure 3 displays the zip code distribution. There was one additional respondent in Arizona and one in California that are not displayed on the map. The numbers in the pins indicate the number of respondents in a specific zip code.

**Figure 3:** IPFW electronic needs survey respondents by zip code.



2. **What is the potential applicant pool?** We surveyed our RN to BS student population as well as baccalaureate and master’s students and alumni. A total of 75 online respondents

were very likely or likely to apply for the DNP if IPFW were to offer the degree. The largest portion would plan to apply within the next 4 years (69%) and 31% plan to apply in the next 2 years. In addition, at the graduate student orientation in August 2013 a brief survey was conducted. Of the 44 respondents completing the survey, 9 indicated they intended to pursue a DNP and 15 were unsure but may pursue the degree..

3. **What is the reputation of IPFW?** Respondents grade the reputation of IPFW’s Department of Nursing very positively with 90 % of 119 respondents ranking the department’s reputation as outstanding or very good. These data speak to the confidence that respondents have in the Department and this perception supports their confidence in our ability to offer the DNP degree.
4. **What are the preferences for course delivery?** Most students, who were likely to apply to IPFW, expressed a desire for entirely online delivery with only very occasional on-campus sessions (no more than x1/semester) or hybrid (combination of face-to-face and online courses).

Course Delivery Preference	Very likely or Likely to Apply to IPFW
Entirely traditional face-to-face	5 (4%)
Hybrid-combination of online and face-to-face	52 (44%)
Mostly online with occasional on-campus session	62 (52%)

5. **What are the potential barriers to pursuing a DNP degree?** We asked respondents to rate potential barriers on a sliding scale of 0 (no barrier) to 10 (insurmountable barrier). Cost, time and multiple family requirements were the most important potential barriers for completing a DNP degree:

Barrier	Mean value (SD)
Cost	5.67 (2.32)
Time	5.31 (2.07)
Multiple family requirements	5.2 (2.3)

**Appendix 5**  
**Letters of Support**

## **Section 1. Purdue University Calumet Letters of Support\***

- Chancellor Thomas Keon, Purdue University Calumet
- Gail Smith-Estes, Dean, School of Nursing, Northwest Region – Gary and Valparaiso Campuses
- Carol Schuster, Chief Nursing Officer, Northern Indiana Region, Franciscan Alliance
- John Gorski, Chief Operating Officer, Community Healthcare Systems: Community Hospital of Munster, St. Mary Medical Center, St. Catherine Hospital

\*note there is no letter of support from Peggy S. Gerard, Dean, College of Nursing and Interim Vice Chancellor for Academic Affairs/Provost since she is one of the authors of the proposal

September 23, 2013

Indiana Commission of Higher Education  
10 West Ohio Street  
Suite 550  
Indianapolis, IN 46204-1984

I am pleased to offer my letter of support for the College of Nursing's proposal to initiate a system-wide delivery of the Doctor of Nursing Practice (DNP) program. A system-wide DNP program is a logical extension of the Graduate Nursing Consortium created in 1997 to increase access to affordable master's education to nurses throughout the State.

Indiana, like most other states, will need increasing numbers of advanced practice nurses (APN) to coordinate and provide direct care to its residents who will soon receive healthcare benefits under the Affordable Care Act. Until recently, APNs were typically educated in master's degree programs. However, member schools of the American Association of Colleges of Nursing (AACN), a professional education organization for nursing programs, have voted to make the Doctor of Nursing Practice (DNP) the preferred level of education for APNs beginning in 2015.

Purdue University is a land-grant institution dedicated to providing a quality education to Indiana's citizens and contributing to the State's economic and community development, including the health and well-being of its citizens. Almost all of the Doctor of Nursing Practice (DNP) students are expected to be practicing nurses working in Indiana, with many of them working in a region served by a Purdue campus offering the DNP.

The College of Nursing at Purdue University Calumet is well positioned to offer a DNP program and to collaborate with the program on the West Lafayette campus on a system-wide implementation of the DNP. The College has offered master's degrees in nursing since 1983 and has many doctorally prepared faculty who have experience teaching at the graduate level. In addition, the faculty members have extensive experience in distance education and are certified in distance learning. A needs assessment conducted by Purdue University Calumet found overwhelming support and interest in a DNP program at Purdue University Calumet.

Purdue University Calumet is excited about the prospect of the proposed system-wide delivery of the Doctor of Nursing Practice program that builds on the success of the Graduate Nursing Consortium at Calumet, IPFW, and West Lafayette.

Sincerely,



Thomas L. Keon

cc: P. Gerard



September 23, 2013

Indiana Commission of Higher Education  
10 West Ohio Street  
Suite 550  
Indianapolis, IN 46204-1984

I am writing in support of Purdue University Calumet's College of Nursing proposal for initiating a Doctor of Nursing Practice (DNP) in collaboration with other Purdue campuses. Purdue Calumet's College of Nursing has a long history of providing a high quality graduate education in nursing both on campus and online.

Demand for nurses with professional doctorates in both academia and healthcare institutions is high and growing. Establishing a DNP program in Northwest Indiana would increase the pool of doctorally-prepared faculty needed to educate qualified applicants to area nursing schools. Unfilled nursing faculty positions, as well as the projected retirement of current faculty poses a threat to the nursing workforce. Graduates of this program would be eligible to teach at Ivy Tech's nursing program, and help ease the shortage of qualified nursing faculty in Northwest Indiana.

As master's level APN programs transition to the Doctor of Nursing Practice, AACN is requesting that barriers to this transition be identified. Purdue Calumet's proposal addresses these barriers considering ease of accessibility, clear entrance requirements, and demonstrates ongoing collaboration with local healthcare institutions. The plan for online delivery provides greater opportunity for students, the majority whom are working professionals.

I fully support the Purdue University Calumet's College of Nursing proposal for initiating a Doctor of Nursing Practice (DNP).

Sincerely,

*Professor Gail Smith-Estes, MSN, RN, FNP, CNS, CLNC*

Gail Smith-Estes, MSN, RN, FNP, CNS, CLNC  
Dean and Professor, School of Nursing  
Northwest Region – Gary and Valparaiso Campuses

1440 EAST 35TH AVENUE  
GARY, INDIANA 46409  
219-981-1111

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September 23, 2013

Indiana Commission of Higher Education  
10 West Ohio Street  
Suite 550  
Indianapolis, IN 46204-1984

DOCTOR OF NURSING PRACTICE PROGRAM

I am pleased to offer my letter of support for the College of Nursing's proposal to initiate a system-wide delivery of the Doctor of Nursing Practice (DNP) program. Indiana, like most other states, will need increasing numbers of advanced practice nurses (APN) to coordinate and provide direct care to its residents who will soon receive healthcare benefits under the Affordable Care Act.

The College of Nursing and the hospitals in the Franciscan Alliance have a long history of strong collaboration that began in 1965 when the St. Margaret Hospital School of Nursing transitioned its diploma program to an Associate Degree program in nursing at Purdue University Calumet. Our organizations have collaborated to establish the Catherine McCauley and St. Clare indigent clinics and two College nurse practitioners continue to work in these clinics and mentor FNP students. Franciscan St. Margaret-Mercy provides a clinical instructor to the College of Nursing and numerous employees serve as preceptors to College of Nursing graduate students. Purdue University Calumet's College of Nursing has a reputation of providing knowledgeable and highly competent nursing graduates at both the baccalaureate and master's levels. Franciscan Alliance employs many Purdue University Calumet nursing graduates in our inpatient facilities throughout Northwest Indiana. In addition, many of our clinics employ graduates of the Family Nurse Practitioner program.

In this increasingly complex healthcare environment, it is essential to prepare Advanced Practice Nurses (APNs) who provide high-quality evidence-based health care, and serve as leaders and change agents for our health care system. The push from the American Association of Colleges of Nursing (AACN) to make the DNP the preferred level of education for APNs necessitates that nurses in the Calumet region have access to a high quality education. Purdue University Calumet's College of Nursing is well positioned to offer a DNP program with a reputation of educating high quality advanced practice nurses for many years.

I look forward to hearing the announcement that Purdue Calumet's College of Nursing has received approval to offer the Purdue DNP program.

Respectfully yours,



Carol Schuster, RN, BSN, MBA  
CNO, Northern Indiana Region  
CNO/VP Patient Services  
Franciscan St. Anthony Health

CROWN POINT  
1201 South Main Street  
Crown Point, IN 46307  
PH: 219 738 2100





## Community Foundation Of Northwest Indiana, Inc.

Community Hospital  
St. Catherine Hospital  
St. Mary Medical Center

September 25, 2013

Indiana Commission of Higher Education  
10 West Ohio Street  
Suite 550  
Indianapolis, IN 46204-1984

I am writing in support of Purdue University Calumet's College of Nursing proposal for initiating a Doctor of Nursing Practice (DNP) in collaboration with other Purdue campuses. Purdue University Calumet's College of Nursing has an excellent reputation of providing a quality nursing education at both the graduate and undergraduate level. For that reason, hospitals and medical clinics in Northwest Indiana are eager to employ nursing graduates from Purdue University Calumet.

Purdue Calumet's College of Nursing administrators, faculty and students have a long-standing record of collaboration with Northwest Indiana healthcare facilities, serving as board members, clinicians, and providing service to the community. This cooperative effort has made an impact on the health and safety of the residents of Northwest Indiana as exemplified by the work of the Northwest Indiana Hospital Safety Coalition.

In this increasingly complex healthcare arena, it is essential to prepare Advanced Practice Nurses (APNs) who provide high-quality health care, and serve as change agents for our dynamic health care system. The push from the American Association of Colleges of Nursing (AACN) to make the DNP the preferred level of education for APNs necessitates that nurses in the Calumet region have access to a high quality education. Purdue University Calumet's College of Nursing is well positioned to offer a DNP program with a reputation of educating high quality advanced practice nurses for many years.

I look forward to hearing the announcement that Purdue Calumet's College of Nursing is starting a DNP program.

Sincerely,

John C. Gorski  
Chief Operating Officer  
Community Healthcare System

JCG/bjb

901 MacArthur Blvd., Munster, Indiana 46321 / Phone: 219-836-1600

[www.comhs.org](http://www.comhs.org)

## **Section 2. Indiana University-Purdue University, Fort Wayne Letters of Support**

- Ann M. Obergfell, Dean of College of Health and Human Services
- Judy, Boerger, Senior Vice President, Chief Nurse Executive, Parkview Regional Medical Center
- Diane L Springer, Chief Nursing Officer/Vice President, Lutheran Health Network
- Jeffrey R. Anderson Vice Chancellor for Academic Affairs, Indiana University Purdue University, Fort Wayne
- Vicky L. Carwein, Chancellor, Indiana University Purdue University, Fort Wayne
- Fen-Lei Chang, Director and Associate Dean, Indiana University School of Medicine-Fort Wayne
- Jerrilee K. Mosier, Ivy Tech Community College Northeast



COLLEGE OF HEALTH AND HUMAN SERVICES

September 20, 2013

To whom it may concern:

In 2010, the Institute of Medicine (IOM) held a Forum on the Future of Nursing: Education. The forum determined that an aging and more diverse population coupled with complex health needs and expanding health care technology has increased the need for nurses to work in teams of providers from different areas of expertise. To ensure that nurses are prepared to meet these challenges of the healthcare industry, the education system must adapt by providing high quality education from basic to advanced levels. It needs to ensure that there is adequate capacity to educate the right number of nurses across all levels with the right competencies and skills while enabling seamless progression to higher levels of education.

In response to this need, the doctorate of nursing practice (DNP) was established to address the demands of our nation's dynamic and complex healthcare environment. Currently, advance practice nurses, including nurse practitioners are educated at the master's level. The sweeping changes in healthcare dictate the education of advance practice nurses with a degree at the practice doctorate level to better meet the needs in this ever changing landscape.

The DNP curriculum proposed by IPFW offers an innovative way to meet the challenges of a turbulent healthcare system in collaboration with the other Purdue nursing colleges and schools. The proposed degree offers interdisciplinary courses which address the need for nurses to work in teams and collaborate with health care professionals and other community social service agencies for a more holistic approach to health and healthcare delivery. These courses will draw on the expertise of professional colleagues in the liberal arts, business, engineering and medicine as well as other disciplines in the health sciences.

As Dean of the College of Health and Human Services at IPFW, I am committed to supporting the program and establishing it as the source for innovative and collaborative advanced nursing education in Northeast Indiana.

Sincerely,

Ann M. Obergfell, JD, RT(R)



# PARKVIEW

## REGIONAL MEDICAL CENTER

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September 25, 2013


To Whom It May Concern:

In alignment with the national movement in advance practice nursing education; IPFW is creatively collaborating with the other Purdue nursing schools to offer the doctorate of nursing practice (DNP) at Fort Wayne. Offering the post-master's degree for the DNP is a pathway for the master's prepared nurses to earn a professional (practice) doctorate that focuses on the interprofessional and practice partnerships. The DNP will allow them to practice at the highest level of nursing practice.

The complexity of healthcare and the rapid pace of scientific advancements in diagnostic and treatment approaches all for the translation of the new science into the care of patients and communities. The DNP will be an interprofessional and collaborative effort among not only the Purdue campuses but among the healthcare industry in our state.

Parkview Health has been a long-term partner with the nursing department at IPFW. Parkview strongly supports the proposal for IPFW to offer the DNP degree. As one of the largest employers in the state Parkview employs many IPFW nursing graduates from the B.S. and M.S. programs. Parkview will pursue hiring qualified DNP graduates from IPFW.

Thank you,

  
Judy Boerger, MSN  
Senior Vice President  
Chief Nursing Executive



September 3, 2013

To Whom It May Concern:

Lutheran Hospital is a proud supporter of the IPFW nursing department. The graduates of IPFW are highly educated, professional, and motivated as they provide evidence-based patient care and serve in leadership roles at Lutheran Hospital.

When IPFW expanded their nursing master's program, we supported the need for the specialties of nursing education, nurse executive, women's health nurse practitioner, and adult-gerontology primary care nurse practitioner. Now, we strongly support the doctorate of nursing practice (DNP) program. The DNP graduates will educate nurses who are much better prepared to address the complex and dynamic needs of healthcare through their advanced knowledge of leadership, economics, health policies, and informatics. The delivery of cost-effective care for vulnerable populations is essential for the health and well-being of the community and the state of Indiana.

The opportunity for IPFW to collaborate with the other Purdue campuses in the delivery of the DNP demonstrates a commitment to the state to share resources while being able to grant the degrees at each campus. The ability for IPFW to grant the DNP is essential for our community as national professional organizations have introduced mandates for the DNP to be the entry level for advance practice nurses.

As Chief Nursing Officer of a large hospital, I expect IPFW to be leaders in nursing education. The DNP is important for IPFW to remain leaders and drive innovation. Having a university offer practice doctorates is a recruitment tool for the hospital and other healthcare providers. Lutheran Hospital celebrates interdisciplinary healthcare; the DNP will expand our interdisciplinary research and patient care teams. We look forward to our partnership extending to the DNP students and faculty.

Please feel free to contact me if you have any questions.  
Thank you.

Sincerely,



Diane L. Springer, RN, BSN, MS  
Chief Nursing Officer/ Vice President

LUTHERAN HOSPITAL  
7950 W. JEFFERSON BLVD., FT. WAYNE, IN 46804  
P: 260 435-7001 | W: [LutheranHealth.net](http://LutheranHealth.net)



VICE CHANCELLOR FOR ACADEMIC AFFAIRS

September 18, 2013

To Whom it May Concern:

The doctorate of nursing practice (DNP), a clinical doctorate, was established to address the demands of our nation's dynamic and complex healthcare environment. Currently, advance practice nurses, including nurse practitioners are educated at the master's level. The intent of the sweeping change is to educate advance practice nurses with a terminal degree at the practice doctorate level to prepare nurses for the changing healthcare landscape.

Nurses who earn the DNP are clinical scholars who conduct translational research, design continuously improved systems of care through enhanced organizational performance based on quality improvement models, and demonstrate advanced knowledge of informatics to execute data extraction from electronic health records, databases, and other communication networks.

The Institute of Medicine (IOM) issued several reports regarding the quality and safety of the American healthcare system. The IOM (2010) report, recommended, "Nurses should achieve higher levels of education and training through an improved education system that promotes seamless academic progression." Students entering the M.S. to D.N.P. program will develop the knowledge, skills, and super ties as a clinical scholar and transformational leader, allowing them to practice at the highest level of nursing practice. IPFW is positioned to offer the DNP and enjoy the collaboration with the other Purdue nursing colleges and schools.

As the Vice Chancellor for Academic Affairs, I am committed to supporting the development of this degree program and establishing it as a premiere program in northeast Indiana.

Sincerely,

Jeffrey R. Anderson, Ph.D.  
Vice Chancellor for Academic Affairs



OFFICE OF THE CHANCELLOR

INDIANA UNIVERSITY—PURDUE UNIVERSITY FORT WAYNE

September 6, 2013

To Whom It May Concern:

The Doctorate of Nursing Practice (DNP), a clinical doctorate, was established to address the growing demands of our nation's dynamic and complex healthcare environment. Patient care needs are increasingly complicated; thus, there are national concerns about the quality of care, ability to meet the healthcare needs for vulnerable populations, and the need to improve patient safety. An increased level of scientific knowledge and practice expertise is needed to assure high quality patient outcomes and to determine innovation in healthcare delivery.

In alignment with the national movement in advanced nursing education, IPFW is collaborating with other Purdue University campuses in the design of a DNP program. The collaboration offers a unique model that allows each campus to have the authority to admit, enroll, and graduate its students. Currently, IPFW offers accredited undergraduate and masters programs. The DNP will build on the graduate program providing a pathway for master's prepared nurses to earn a professional (practice) doctorate. The program is designed for nurses employed in clinical practices and positions that support clinical practice-administration, organizational management, leadership and policy.

IPFW is poised to advance interdisciplinary healthcare education, work with a variety of healthcare educators and providers, as well as participate in interprofessional clinical and translational research studies. Our graduates will be employed in a variety of healthcare arenas. With healthcare the largest employer in northeast Indiana and IPFW the largest higher education institution and the only public university in the region, there is no question that our DNP graduates will readily acquire positions in our area as do the majority of our undergraduate and master's graduates.

As a nurse myself, prepared at the doctoral level, I know the vital role the DNP graduate will play in the delivery of the health care of the future. I fully support and endorse the proposal to implement a Doctorate of Nursing Practice program at Indiana University-Purdue University Fort Wayne.

Sincerely,

Vicky L. Carwein  
Chancellor

2101 EAST COLISEUM BOULEVARD, FORT WAYNE, INDIANA 46805-1499  
p: 260-481-6103 v ipfw.edu

IPFW is an Equal Opportunity/Equal Access University.



## INDIANA UNIVERSITY

### SCHOOL OF MEDICINE-FORT WAYNE

On the campus of Indiana University-Purdue University Fort Wayne

September 12, 2013

This is a letter of support for the proposal to establish a DNP program at IPFW. Fort Wayne is the second largest city in the state of Indiana. It has an energetic and collaborative health care community. A DNP program can promote comprehensive and longitudinal care to all of the citizens in the area of northeast Indiana. It provides proper channels for the further development and career advancement in the nursing care profession. With the enrollment of advanced graduate level nursing students and recruitment of staff and faculty members, it helps to stimulate our regional economic growth.

The nursing program at IPFW has a solid tradition of collaboration with Indiana University School of Medicine-Fort Wayne (IUSM-FW). In the past four years, IUSM-FW has completed the expansion of class size from 16 to 32 and expansion of a first two year curriculum into a full four year education program leading to a MD degree. This expansion provides many additional opportunity of collaboration between our nursing program and our regional medical school. The two main areas of collaboration are inter-professional education and inter-professional research.

As a good example of inter-professional research, during the summer months of 2013, a graduate level nursing student worked with a medical student under the guidance of a medical school faculty studied the issue of falling in our elderly population. Patient characteristics and contributing risk factors were identified. Based on the findings, a multi-disciplinary fall prevention clinic is being established with the support of Parkview Hospital. The unique features of this collaboration include translation of our research findings into patient care practice. In addition, it provides great opportunity for graduate nursing students and medical students to work within a team of nurses, physicians, social worker, neuropsychologist, physical therapist, and pharmacist to provide best longitudinal patient care.

In the area of inter-professional education, we have further expansion of collaboration with Manchester College of Pharmacy, University of St Francis Physician Assistant program, and Fort Wayne Medical Education Family Practice Residency program. We have established regular team based learning sessions with the participation of students from all of these higher education institutions. Students are better prepared for team based clinical practice after their graduation from respective programs.

IUSM-Fort Wayne will also provide support for instruction in areas of basic and clinical medical sciences and research methodology for the DNP program.

2101 E. Coliseum Blvd., Fort Wayne, IN 46805-1499 (260) 481-6730 FAX (260) 481-6408





# INDIANA UNIVERSITY

SCHOOL OF MEDICINE-FORT WAYNE

On the campus of Indiana University-Purdue University Fort Wayne

We support enthusiastically the establishment of DNP program at IFPW.

Sincerely yours,

Fen-Lei Chang, MD, PhD

Director and Associate Dean  
Professor of Neurology  
Lutheran Foundation Professor of Cardiovascular Disease  
Indiana University School of Medicine-Fort Wayne  
2101 E Coliseum Blvd  
Fort Wayne, IN 46805  
260-481-6730



September 3, 2013

Indiana Commission of Higher Education  
10 West Ohio Street  
Suite 550  
Indianapolis, IN 46204-1984

I have recently learned that Indiana University Purdue University-Fort Wayne (IPFW) is planning to offer a Doctor of Nursing Practice (DNP) program locally as a Purdue degree with a focus on leadership, informatics, epidemiology, and health policy. Through IPFW, Purdue has a long history of educating well qualified nurses for the local community and surrounding areas. Ivy Tech Community College Northeast has enjoyed a good relationship with IPFW as a transfer partner for our PN and ASN programs.

As identified in the Institute of Medicine report of 2010, The Future of Nursing: Leading Change, Advancing Health, there is a need to radically transform nursing education to prepare nurses to meet societal needs in the near future. Currently, there are a very limited number of DNP programs in the state that are close enough for local nurses to continue their education. We are pleased to have an opportunity for our students as well as our faculty to continue their education at a state supported university and to be able to participate in a DNP program with a practice focus. Our regional community needs a DNP program that focuses on advanced practice for nurses. As more nurses obtain advanced practice degrees, there will be more faculty to teach future nurses and more advanced practice nurses to assist in meeting the needs of an ever changing society.

Ivy Tech Community College Northeast supports the IPFW proposal to develop a practice based terminal degree for nurses in Fort Wayne, Indiana.

Sincerely,

  
Jerrilee K. Mosier, Ed.D.

3800 NORTH ANTHONY BOULEVARD  
FORT WAYNE, INDIANA 46805-1489  
260-482-9171  
FAX 260-480-4177  
WWW.IVYTECH.EDU

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### **Section 3. West Lafayette Letter of Support for Participation in System-Wide Collaboration**

- Christine M. Ladisch, Dean, College of Health and Human Sciences, Purdue University

September 23, 2013

To Whom It May Concern;

The College of Health and Human Sciences, which is the academic home for the School of Nursing, Purdue West Lafayette, fully endorses the proposal to form a system-wide collaboration to deliver the Doctor of Nursing Practice (DNP) degree at West Lafayette, Hammond, and Fort Wayne. This unique and creative endeavor will offer affordable access to the degree across Purdue's system and beyond, as well as increased capacity to meet student demand. Through the preparation of highly skilled advance practice nurses, the program will also help address the critical, growing need for doctorally prepared nurses in communities across the state and nationally. This multi-campus collaborative offering also lends efficiencies through use of a common core curriculum, distance courses, and shared teaching.

The curriculum proposed for the DNP is based upon the existing DNP degree at West Lafayette. The consistency achieved in the curriculum to be offered on the three campuses is vital, not only for the efficiencies anticipated, but also for safeguarding West Lafayette's current CCNE (Commission for Collegiate Nursing Education) accreditation status as a fully-delivered DNP from the West Lafayette campus.

We are pleased to be a part of the proposed collaboration. Specific contributions to the project include (1) sharing our accredited curriculum in order to assist the regional campuses in their ability to offer the DNP, (2) providing access to needed West Lafayette based courses, and (3) mentorship of regional campus faculty during the program building phase.

Finally, I wish to acknowledge the time, effort, and good will invested by the many individuals involved in this project. I am confident that the nursing programs on the three campuses involved can continue to work together to serve our students well. Their cooperation and their work have been stellar, and the result could be groundbreaking.

Sincerely,



Christine M. Ladisch  
Dean, College of Health and Human Sciences  
Purdue University  
110 Stone Hall  
West Lafayette, IN 47907

## **Appendix 6**

### **Faculty and Staff Detail**

**Table 6.1: Purdue University System DNP Courses with Potential Instructors**

Course Name	Credit	West Lafayette	Calumet	IPFW
<b>DNP Leadership Core (12 credits)</b>				
NUR 63200 Health Policy: Local to Global*	3	Janet Thorlton Jenny Coddington	Leslie Rittenmeyer Susan Misner	Carol Crosby
NUR 59900 Economics and Finance for Health Care	3	Cheryl Erler	X	Zafar Nazarov
NUR 62500 History, Ethics and Innovations	3	Karen Foli Karen Yehle	Michelle Block	Lee-Ellen Kirkhorn Ann Obergfell
NUR 52500 Interdisciplinary Healthcare Informatics	3	X	Beth Vottero	Tammy Toscos
<b>DNP Evidence Based Practice Core (12 Credits)</b>				
NUR 59900 Epidemiology	3	Randy Black	X	X (possible future hire)
NUR 62600 Biostatistics	3	Laura Sands Kathy Abrahamson	X -possible Psych/soc faculty in future	Rebecca Reeder
NUR 62400 Evidence Based Practice	3	TEAM TAUGHT Laura Sands Janet Thorlton	TEAM TAUGHT Lisa Hopp Jane Walker	TEAM TAUGHT Susan Ahrens Becky Jensen Nila Reimer
NUR 59900 System Approaches in Healthcare	3	Sara McComb	X	X
<b>Cognate (3 credits - select 1 course) * Current curriculum also requires a 2 credit elective current request in to graduate school to eliminate the additional 2 credit elective</b>				
PWL NUR 599 Transitions and Quality Improvement	3	Karen Yehle Karen Foli K. Abrahamson		
PUC Translation Science	3		Lisa Hopp Jane Walker Dolores Huffman	
IPFW Technology Focus	3			Tammy Toscos

Course Name	Credit	West Lafayette	Calumet	IPFW
<b>Residencies (8 credits)</b>				
NUR 67300 Health Policy Residency	2	Pam Aaltonen Kathleen Abrahamson Azza Ahmed Karen Chang Jennifer Coddington Susan DeCrane Nancy Edwards Karen Foli Jane Kirkpatrick Sara McComb Laura Sands Janet Thorlton Karen Yehle	Michelle Block Taryn Eastland Lisa Hopp Dolores Huffman Peggy Gerard Kathleen Kleefisch Lynn Miskovich Susan Misner Ellen Moore Cheryl Moredich Leslie Rittenmeyer Beth Vottero Jane Walker Gail Wegner	Susan Ahrens Connie Carunchia Carol Crosby Linda Finke Rebecca Jensen Lee-Ellen Kirkhorn Heather Krull Ann Obergfell Deb Poling Nila Reimer Carol Sternberger
Residency 1 NUR 68000 (Direct Practice Mgmt.) or NUR 68300 (Homeland Sec./PH)	3	Pam Aaltonen Kathleen Abrahamson Azza Ahmed Karen Chang Jennifer Coddington Susan DeCrane Nancy Edwards Karen Foli Jane Kirkpatrick Sara McComb Laura Sands Janet Thorlton Karen Yehle	Michelle Block Taryn Eastland Lisa Hopp Dolores Huffman Peggy Gerard Kathleen Kleefisch Lynn Miskovich Susan Misner Ellen Moore Cheryl Moredich Leslie Rittenmeyer Roseanne Such Beth Vottero Jane Walker Gail Wegner	Susan Ahrens Connie Carunchia Carol Crosby Linda Finke Rebecca Jensen Lee-Ellen Kirkhorn Heather Krull Ann Obergfell Deb Poling Nila Reimer Carol Sternberger
Residency 2 NUR 68300 (Direct Practice Mgmt.) or NUR 68500 (Homeland Sec./PH)  <i>Note: current request in to graduate school to eliminate this residency for NP students.</i>	3	Pam Aaltonen Kathleen Abrahamson Azza Ahmed Karen Chang Jennifer Coddington Susan DeCrane Nancy Edwards Karen Foli	Michelle Block Taryn Eastland Lisa Hopp Dolores Huffman Peggy Gerard Kathleen Kleefisch Lynn Miskovich Susan Misner Ellen Moore	Susan Ahrens Connie Carunchia Carol Crosby Linda Finke Rebecca Jensen Lee-Ellen Kirkhorn Heather Krull Ann Obergfell Deb Poling

		Jane Kirkpatrick Sara McComb Laura Sands Janet Thorlton Karen Yehle	Cheryl Moredich Leslie Rittenmeyer Roseanne Such Beth Vottero Jane Walker Gail Wegner	Nila Reimer Carol Sternberger
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Course Name	Credit	West Lafayette	Calumet	IPFW
<b>DNP Evidence Based Practice Inquiry Project (6 credits)</b>				
DNP Practice Inquiry Project I NUR 68700	3	Pam Aaltonen Kathleen Abrahamson Azza Ahmed Karen Chang Susan DeCrane Nancy Edwards Karen Foli Jane Kirkpatrick Sara McComb Laura Sands Janet Thorlton Karen Yehle	Michelle Block Taryn Eastland Lisa Hopp Dolores Huffman Peggy Gerard Susan Misner Leslie Rittenmeyer Beth Vottero Jane Walker	Susan Ahrens Riddhi Doshi Linda Finke Becky Jensen Lee-Ellen Kirkhorn Deb Poling Carol Sternberger Tammy Toscos
DNP Practice Inquiry Project II NUR 68900	3	Pam Aaltonen Kathleen Abrahamson Azza Ahmed Karen Chang Susan DeCrane Nancy Edwards Karen Foli Jane Kirkpatrick Sara McComb Laura Sands Janet Thorlton Karen Yehle	Michelle Block Taryn Eastland Lisa Hopp Dolores Huffman Peggy Gerard Susan Misner Leslie Rittenmeyer Beth Vottero Jane Walker	Susan Ahrens Riddhi Doshi Linda Finke Becky Jensen Lee-Ellen Kirkhorn Deb Poling Carol Sternberger Tammy Toscos



**Table 6.2: Summary of Course Accessibility by campus**

The following summary is based on the premise that WL will be offering all courses (with the exception of Healthcare Informatics) and that classes will be filled before opening new sections. It is possible, depending on total student numbers that there will be fewer sections.

Campus	Leadership Core	EBP Core	Cognates	Residencies	Project	Elective (2 cr)	Total Credit Hrs planned at start-up*
West Lafayette	9	12	3	8	6	2	40/43
Purdue Calumet	12	3	3	8	6	2	34/43
IPFW	12	6	3	8	6	2	37/43

**New Faculty Positions Required**

With respect to faculty resources, new faculty positions will need to be added to the Calumet, IPFW and WL campuses. Following is a description of the new positions required at each campus.

**Table 6.3: New Faculty Position Requirements**

Campus	New Faculty - Year 1	New Faculty – Year 2	New faculty – Year 3
Calumet	1 PhD, DNP	1 PhD	1 PhD, 1 DNP
IPFW	1 PhD	1 PhD	1DNP
West Lafayette	2 PhD	1 PhD	1 PhD

**Table 6.4: Purdue University Calumet Doctor of Nursing Practice Program Faculty**

<b>Faculty Name</b>	<b>FT/PT</b>	<b>Date of Initial Appointment and Rank</b>	<b>Doctoral Degrees, Focus Area and Institution</b>	<b>Specialty Area(s)</b>	<b>Experience in Graduate Education</b>	<b>Potential Course Assignments in DNP Program</b>
Block, Michelle	FT	2006 Associate Professor	PhD, Nursing Loyola University, Chicago, Illinois  MS, Nursing, Purdue University Calumet, Hammond, Indiana	Risk Perception in Cardiovascular Disease  Nursing Ethics  Nursing Theories	NUR 50000 Theories and Ethics  NUR 51000 Research and Evidence-Based Nursing Practice	NUR 62500 History, Ethics and Innovations of Healthcare Delivery Systems
Eastland, Taryn	FT	2012 Assistant Professor	Post. Doc., University of Illinois, Chicago  PhD, University of Illinois at Chicago	Instrument Development  Prostate Cancer Screening in African Americans	NUR 50300 Advanced Health Assessment  NUR 51000 Research and Evidence-Based Nursing Practice	NUR 62400 Evidence Based Practice  Serve on DNP Practice Inquiry project committees
Gerard, Peggy	FT	1984 Professor Dean	PhD, Nursing Rush University, Chicago, Illinois  MS, Nursing, University of Illinois at Chicago, Illinois  BS, Nursing Rush University, Chicago, Illinois	Health Promotion  Health Literacy  Cardiovascular Nursing	NUR 51000 Research and Evidence-Based Nursing Practice  NUR 51100 Health Promotion for Advanced Nursing Practice	NUR 62400 Evidence Based Practice  Chair DNP Practice Inquiry project committees

<b>Faculty Name</b>	<b>FT/PT</b>	<b>Date of Initial Appointment and Rank</b>	<b>Doctoral Degrees, Focus Area and Institution</b>	<b>Specialty Area(s)</b>	<b>Experience in Graduate Education</b>	<b>Potential Course Assignments in DNP Program</b>
Hopp, Lisa	FT	1992 Professor	PhD, Nursing University of Illinois at Chicago  MS, Nursing, University of Illinois at Chicago	Physiology and Pathophysiology  Critical Care Nursing  Evidence Based Nursing Practice	NUR 59900 Pathophysiologic Concepts I and II  NUR 60200 Critical Care CNS I  NUR 630 Critical Care CNS II  NUR 51000 Research and Evidence-Based Nursing Practice	NUR 62400 Evidence Based Practice  NUR XXX Proposed course in Evidence Translation
Huffman, Dolores	FT	1982 Associate Professor	PhD, Nursing Loyola University, Chicago, Illinois  MS, Nursing, St. Xavier University, Chicago, Illinois	Health Promotion  Community Health  Evidence Based Nursing Practice	NUR 51000 Research and Evidence-Based Nursing Practice	NUR 62400 Evidence Based Practice
Kleefisch, Kathleen	FT	2007 Assistant Professor	DNP, Valparaiso University, Valparaiso, Indiana  MSN, Nursing, Valparaiso University, Valparaiso, Indiana	Family Nurse Practitioner Practice  Women's Health	NUR 61300 Primary Care of the Young Family  NUR 61300 Primary Care of the Young Family Practicum	Serve on DNP Practice Inquiry project committees

<b>Faculty Name</b>	<b>FT/PT</b>	<b>Date of Initial Appointment and Rank</b>	<b>Doctoral Degrees, Focus Area and Institution</b>	<b>Specialty Area(s)</b>	<b>Experience in Graduate Education</b>	<b>Potential Course Assignments in DNP Program</b>
Miskovich, Lynn	FT	1981 Associate Professor	DNP, Valparaiso University, Valparaiso, Indiana  MS, Nursing St. Xavier University, Chicago, Illinois	Community/Public Health Nursing  Adult Nurse Practitioner	NUR 62200 Primary Care of the Aging Family  NUR 62300 Primary Care of the Aging Family Practicum	NUR 67300 Health Policy Residency
Misner, Susan	FT	2012 Assistant Professor	PhD, Nursing University of Illinois at Chicago, Illinois  MS, University of Illinois at Chicago, Illinois	Public Health Nursing  Evidence Based Practice	NUR 51000 Research and Evidence-Based Nursing Practice	NUR 62400 Evidence Based Practice  NUR 67300 Health Policy Residency
Moore, Ellen	FT	1978 Associate Professor	DNP, Valparaiso University, Indiana  MS, Nursing, Governor's State University, Illinois		NUR 61300 Primary Care of the Young Family Practicum	Serve on DNP Practice Inquiry project committees
Moredich, Cheryl	FT	2002 Associate Professor	DNP, Valparaiso University, Indiana  MS, Nursing, Purdue University Calumet, Hammond, Indiana	Women's Health	NUR 50300 Advanced Health Assessment	Serve on DNP Practice Inquiry project committees

<b>Faculty Name</b>	<b>FT/PT</b>	<b>Date of Initial Appointment and Rank</b>	<b>Doctoral Degrees, Focus Area and Institution</b>	<b>Specialty Area(s)</b>	<b>Experience in Graduate Education</b>	<b>Potential Course Assignments in DNP Program</b>
Rittenmeyer, Leslie	FT	1982 Professor	PsyD, Adler School of Professional Psychology, Chicago, Illinois MS, St. Xavier University, Chicago, Illinois		NUR 50000 Theories and Ethics NUR 50500 Sociocultural Influences on Health NUR 656 Health, Policy, Organization and Finance	NUR 62500 History, Ethics and Innovations of Healthcare Delivery Systems NUR 656 Health, Policy, Organization and Finance NUR 67300 Health Policy Residency
Vottero, Beth	FT	2009 Assistant Professor	PhD, Education Capella University MSN, Nursing, University of Phoenix	Informatics Education	NUR 52500 Nursing Informatics NUR 662 Teaching Strategies for Nursing	NUR 52500 Nursing Informatics
Walker, Jane	FT	1992 Associate Professor	PhD, Nursing University of Illinois at Chicago MSN, Indiana University Indianapolis, IN BSN, Indiana University, Indianapolis, IN	Adult Health Health Literacy Evidence Based Practice Healthcare Quality	NUR 60000 Adult Health CNS I NUR 61800 Adult Health CNS II NUR 501 Foundations of Advanced Practice Nursing Served on thesis committees for students at WL and PUC campus	NUR 62400 Evidence Based Practice

<b>Faculty Name</b>	<b>FT/PT</b>	<b>Date of Initial Appointment and Rank</b>	<b>Doctoral Degrees, Focus Area and Institution</b>	<b>Specialty Area(s)</b>	<b>Experience in Graduate Education</b>	<b>Potential Course Assignments in DNP Program</b>
Wegner, Gail	FT	1976 Associate Professor	DNP, Valparaiso University MS, St. Xavier University, Chicago, Illinois	Mental Health Nursing Healthcare Quality and Safety	NUR 51000 Research and Evidence-Based Nursing Practice	Serve on DNP Practice Inquiry project committees
New faculty	FT		PhD DNP		Experience teaching doctoral levels courses	Multiple course assignments
New faculty	FT		PhD			Multiple course assignments
New faculty	FT		PhD			Multiple course assignments
New faculty	FT		DNP			Serve on DNP Practice Inquiry project committees

\*All PhD prepared faculty can Chair committees and DNP prepared faculty can serve on committees for the DNP Project, courses NUR 68700 and NUR 68900.

**Table 6.5: Indiana University-Purdue University Fort Wayne (IPFW) Doctor of Nursing Practice Program Faculty**

<b>Faculty Name</b>	<b>FT/PT</b>	<b>Date of Initial Appointment and Rank</b>	<b>Doctoral Degrees, Focus Area and Institution</b>	<b>Specialty Area(s)</b>	<b>Experience in Graduate Education</b>	<b>Potential Course Assignments in DNP Program</b>
Lee-Ellen Kirkhorn	FT	July 2013 Professor Chair of Nursing	PhD Ethics in Nursing Gonzaga University Spokane, Washington	Nursing Ethics Nursing Theories	Taught in DNP program at a previous institution	NUR 62500 History, Ethics and Innovations of Healthcare Delivery Systems
Susan Ahrens	FT	Jan 2008 Associate Professor Nursing	PhD Medical College of Ohio, Toledo, Ohio	Health Disparities Chronic Illness Critical Care Evidence-Based Practice	NUR 55500 Health Disparities: Care of Vulnerable Populations  NUR 52300 Nursing Research and Evidence-Based Practice  NUR 52100 Theoretical Constructs	NUR 62400 Evidence Based Practice
Connie Carunchia	FT	2013 Assistant Clinical Professor Nursing	DNP 2014 Purdue	Gerontology	NUR 50300 Advanced Health Assessment  NUR 50700 Physiologic Concepts for Advanced Practice Nursing	NUR 503000 Health Assessment  NUR 50700 Physiologic Concepts for Advanced Practice Nursing
Carol Crosby	FT	Aug 2009 Clinical	DNP University of	Health Policy Organizational and	NUR 65000 Concepts for the	NUR 67300 Health Policy

<b>Faculty Name</b>	<b>FT/PT</b>	<b>Date of Initial Appointment and Rank</b>	<b>Doctoral Degrees, Focus Area and Institution</b>	<b>Specialty Area(s)</b>	<b>Experience in Graduate Education</b>	<b>Potential Course Assignments in DNP Program</b>
		Assistant Professor Nursing	Illinois-Chicago Executive Leadership	Leadership Theories Finance in Healthcare Performance Improvement Inter professional Education/Collaboration Patient Safety	Nurse Executive  NUR 65100 Role of the Nursing Executive in Creating an Environment for Professional Practice  NUR 65200 Role of the Nurse Executive in Managing Nursing Practice  NUR 65300 Financial Management  NUR 59900 Interdisciplinary Patient Safety  NUR 56500 Managed Care	Residency  NUR 65600 Health, Policy, Organization and Finance
Becky Jensen	FT	Aug 2001 Director of Simulation and Research and Associate Professor	PhD, Indiana University, Indianapolis	Clinical Reasoning; Simulation Nursing Education	NUR 55800 Instructional Methods  NUR 68400 Education Practicum	NUR 62400 Evidence Based Practice



<b>Faculty Name</b>	<b>FT/PT</b>	<b>Date of Initial Appointment and Rank</b>	<b>Doctoral Degrees, Focus Area and Institution</b>	<b>Specialty Area(s)</b>	<b>Experience in Graduate Education</b>	<b>Potential Course Assignments in DNP Program</b>
		Nursing			Taught Pediatrics and Roles in Graduate FNP program at another University	
Heather Krull	FT	July 2010 Assistant Clinical Professor Nursing	DNP Ball State University, Muncie, Indiana	Adult Nurse Practitioner Pulmonary Medicine Tobacco Sleep Medicine GI Medicine Acute Care	NUR 50300 Advanced Health Assessment  NUR 68200 Synthesis and Application  NUR 51300 Health Promotion in Special Populations  NUR 53200/53300 Acute Illness: Adult Gero Health Practice/ Preceptorship  NUR 54200/54300 Chronic and Commonly Recurring Conditions: Adult Health Gero Health Practice	NUR 67300 Health Policy Residency  NUR 65600 Health, Policy, Organization and Finance
Deb Poling	FT	Aug 2011 Director of Graduate	PhD Nursing Education University of	Family Health Nursing Education Pediatrics	NUR 68200 Synthesis and Application	NUR 68000 Direct Practice Residency I

<b>Faculty Name</b>	<b>FT/PT</b>	<b>Date of Initial Appointment and Rank</b>	<b>Doctoral Degrees, Focus Area and Institution</b>	<b>Specialty Area(s)</b>	<b>Experience in Graduate Education</b>	<b>Potential Course Assignments in DNP Program</b>
		Nursing	Northern Colorado Greeley, Colorado FNP-BC, CNE	Case Management Diabetes Renal Disease Interprofessional Education Family Theory Cystic Fibrosis/Asthma	NUR 56100 Advanced Teaching Strategies Taught pediatrics in FNP program prior to IPFW	NUR 68100 Direct Practice Residency II Serve on DNP Practice Inquiry Committees
Nila Reimer	FT	Aug 2005 Continuing Lecturer, Nursing	PhD <sup>(c)</sup> , Indiana University, Indianapolis	Evidence Based Practice Health Care Quality Indicators	NUR 65000 Concepts for the Nurse Executive  NUR 65100 Role of the Nursing Executive in Creating an Environment for Professional Practice  NUR 65200 Role of the Nurse Executive in Managing Nursing Practice	NUR 62400 Evidence Based Practice
Tammy Toscos	FT	Aug 2011 Assistant Professor Informatics/Nursing	PhD, Informatics Indiana University, Bloomington	Informatics Human Factors Health Services Research Human-Computer Interaction	NUR 52500 Nursing Informatics	NUR 52500 Interdisciplinary Health Informatics  NUR XXX00 Informatics Cognate
Linda Finke	FT	July 2006	PhD, Educational	Health Policy	NUR 55700	Serve on DNP

<b>Faculty Name</b>	<b>FT/PT</b>	<b>Date of Initial Appointment and Rank</b>	<b>Doctoral Degrees, Focus Area and Institution</b>	<b>Specialty Area(s)</b>	<b>Experience in Graduate Education</b>	<b>Potential Course Assignments in DNP Program</b>
		Professor Nursing Senior Director of Inter-professional Education and Practice	Leadership, Miami University, Oxford, Ohio	Practice Management Mental Health/Psychiatric Nursing Evaluation Research	Curriculum Development  NUR 55900 Role of Nurse Educator  NUR 56000 Evaluation of Learning Environments Psych mental health courses in IUPUI Graduate program	Practice Inquiry project committees
Ann Obergfell	FT	July 2011 Professor Radiography Dean of College of Health & Human Services	JD Louisville School of Law, University of Louisville, Kentucky	Law and Ethics	Taught graduate courses at a previous institution	NUR 62500 History, Ethics and Innovations of Healthcare Delivery Systems
Carol Sternberger	FT	Aug 1990 Professor Nursing Associate Vice Chancellor for Faculty Development	PhD, Instructional Design and Educational Computing, Purdue University West Lafayette	Instructional Design and Educational Computing Research	NUR 68200 Synthesis and Application  NUR 68400 Nurse Educator Practicum  NUR 56100 Advanced Teaching	Serve on DNP Practice Inquiry project committees

Faculty Name	FT/PT	Date of Initial Appointment and Rank	Doctoral Degrees, Focus Area and Institution	Specialty Area(s)	Experience in Graduate Education	Potential Course Assignments in DNP Program
					Methods in Nursing Education  NUR 52300 Nursing Research and Evidence-Based Practice	
Rebecca Reeder	FT	2013 Visiting Instructor in Sociology	PhD, Sociology, Biostatistics University of Cincinnati, Cincinnati, Ohio	Biostatistics	Graduate education experience at a prior institution	NUR 62600 Biostatistics
Zafar Nazarov	FT	2013 Assistant Professor of Economics	PhD, Economics, University of North Carolina	Health Economics	Graduate education experience at a prior institution	NUR 59900 Economics and Finance for health Care
Kris Howard	PT	2013 Limited Term Lecturer	PharmD University of West Virginia	Pharmacology	NUR 50200 Pharmacotherapeutics for Advanced Practice Nursing	Pharmacology
New faculty	FT		PhD	Informatics		Informatics
New faculty	FT		PhD	Nursing		Multiple course assignments
New faculty	FT		DNP	Nursing		Serve on DNP Practice Inquiry project committees

**\*All PhD prepared faculty can Chair committees and DNP prepared faculty can serve on committees for the DNP Project, courses NUR 68700 and NUR 68900. DNP Residency and Practice Inquiry Faculty from the Local Research Community:**

Additional faculty available to serve on DNP Practice Inquiry Project Committees:

- Fen Lei Chang, MD, PhD
- Michael Mirro, MD
- Robert Plant, PhD
- Riddhi Doshi, PhD

**Appendix 7 and 8**  
**Facilities and Other Capital Costs Detail**

**Table 7.1**  
**Cost of and Support for the Program**  
**Purdue University Calumet**  
**Detail on Direct Program Costs**  
**Purdue System-wide DNP**

	Total Year #1	FY 2014	Total Year #2	FY 2015	Total Year #3	FY 2016	Total Year #4	FY 2017	Total Year #5	FY 2018
	FTE	Cost	FTE	Cost	FTE	Cost	FTE	Cost	FTE	Cost
<b>1. Faculty and Staff</b>										
b. Faculty	<u>1.7</u>	<u>\$210,618.00</u>	<u>2.8</u>	<u>\$348,930.00</u>	<u>4.0</u>	<u>\$486,278.00</u>	<u>4.2</u>	<u>\$504,828.00</u>	<u>4.28</u>	<u>\$517,788.00</u>
c. Limited Term Lecturers	<u>0.1</u>	<u>\$3,391.00</u>	<u>0.2</u>	<u>\$3,875.00</u>	<u>0.2</u>	<u>\$4,844.00</u>	<u>0.2</u>	<u>\$4,844.00</u>	<u>0.20</u>	<u>\$4,844.00</u>
d. Staff	<u>1.0</u>	<u>\$40,500.00</u>	<u>1.0</u>	<u>\$40,500.00</u>	<u>1.0</u>	<u>\$40,500.00</u>	<u>1.0</u>	<u>\$40,500.00</u>	<u>1.00</u>	<u>\$40,500.00</u>
Total	<u>2.9</u>	<u>\$254,509.00</u>	<u>3.9</u>	<u>\$393,305.00</u>	<u>5.2</u>	<u>\$531,622.00</u>	<u>5.4</u>	<u>\$550,172.00</u>	<u>5.5</u>	<u>\$563,132.00</u>
<b>2. Supplies and Expense</b>										
a. General Supplies/Expenses		<u>\$5,000.00</u>		<u>\$5,000.00</u>		<u>\$5,000.00</u>		<u>\$5,000.00</u>		<u>\$5,000.00</u>
b. Recruiting		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>
c. Travel		<u>\$890.00</u>		<u>\$1,839.00</u>		<u>\$2,966.00</u>		<u>\$4,034.00</u>		<u>\$2,551.00</u>
d. Library		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>
e. Other		<u>\$8,800.00</u>		<u>\$8,800.00</u>		<u>\$8,800.00</u>		<u>\$8,800.00</u>		<u>\$8,800.00</u>
Total Supplies and Expenses		<u>\$14,690.00</u>		<u>\$15,639.00</u>		<u>\$16,766.00</u>		<u>\$17,834.00</u>		<u>\$7,551.00</u>
<b>3. Equipment</b>										
a. Additional Lab Equipment		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>
b. Fellowships		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>
Total Equipment		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>
<b>4. Student Assistance</b>										
a. Graduate Fee Scholarships		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>
b. Fellowships		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>
Total Student Assistance		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>
<b>Sum of All Direct Program Costs</b>		<u>\$269,199.00</u>		<u>\$408,944.00</u>		<u>\$548,388.00</u>		<u>\$568,006.00</u>		<u>\$570,683.00</u>

**Table 7.2**  
**Cost of and Support for the Program**  
**Purdue University Fort Wayne**  
**Detail on Direct Program Costs**  
**Purdue System-wide DNP**

	<u>Total</u> <u>Year #1</u>	<u>FY 2014</u>	<u>Total</u> <u>Year #2</u>	<u>FY 2015</u>	<u>Total</u> <u>Year #3</u>	<u>FY 2016</u>	<u>Total</u> <u>Year #4</u>	<u>FY 2017</u>	<u>Total</u> <u>Year #5</u>	<u>FY 2018</u>
	<u>FTE</u>	<u>Cost</u>	<u>FTE</u>	<u>Cost</u>	<u>FTE</u>	<u>Cost</u>	<u>FTE</u>	<u>Cost</u>	<u>FTE</u>	<u>Cost</u>
<b>1. Faculty and Staff</b>										
b. Faculty	<u>2.1</u>	<u>\$198,589.42</u>	<u>2.7</u>	<u>\$261,364.42</u>	<u>2.8</u>	<u>\$277,058.17</u>	<u>2.6</u>	<u>\$261,657.04</u>	<u>2.6</u>	<u>\$262,070.14</u>
c. Limited Term Lecturers	<u>0.3</u>	<u>\$2,872.13</u>	<u>0.5</u>	<u>\$6,263.11</u>	<u>0.7</u>	<u>\$8,685.23</u>	<u>0.8</u>	<u>\$11,056.95</u>	<u>0.8</u>	<u>\$15,141.37</u>
d. Staff	<u>1.0</u>	<u>\$40,500.00</u>	<u>1.0</u>	<u>\$40,500.00</u>	<u>1.0</u>	<u>\$40,500.00</u>	<u>1.0</u>	<u>\$40,500.00</u>	<u>1.00</u>	<u>\$40,500.00</u>
Total	<u>3.3</u>	<u>\$291,961.55</u>	<u>4.2</u>	<u>\$308,127.53</u>	<u>4.4</u>	<u>\$326,243.40</u>	<u>4.3</u>	<u>\$313,213.99</u>	<u>4.4</u>	<u>\$317,711.51</u>
<b>2. Supplies and Expense</b>										
a. General Supplies/Expenses		<u>\$5,000.00</u>		<u>\$5,000.00</u>		<u>\$5,000.00</u>		<u>\$5,000.00</u>		<u>\$5,000.00</u>
b. Recruiting		<u>\$5,000.00</u>		<u>\$5,000.00</u>		<u>\$5,000.00</u>		<u>\$0.00</u>		<u>\$0.00</u>
c. Travel		<u>\$593.25</u>		<u>\$1,127.18</u>		<u>\$1,661.11</u>		<u>\$2,491.67</u>		<u>\$2,728.97</u>
d. Library		<u>\$5,000.00</u>		<u>\$5,000.00</u>		<u>\$5,000.00</u>		<u>\$5,000.00</u>		<u>\$5,000.00</u>
e. Other		<u>\$2,000.00</u>		<u>\$2,000.00</u>		<u>\$2,000.00</u>		<u>\$0.00</u>		<u>\$0.00</u>
Total Supplies and Expenses		<u>\$17,593.25</u>		<u>\$18,127.18</u>		<u>\$18,661.11</u>		<u>\$12,491.67</u>		<u>\$12,728.97</u>
<b>3. Equipment</b>										
a. Additional Lab Equipment		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>
b. Fellowships		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>
Total Equipment		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>
<b>4. Student Assistance</b>										
a. Graduate Fee Scholarships		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>
b. Fellowships		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>
Total Student Assistance		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>
<b>Sum of All Direct Program Costs</b>		<u>\$259,554.80</u>		<u>\$326,254.71</u>		<u>\$344,904.51</u>		<u>\$325,705.66</u>		<u>\$330,440.48</u>



**Table 7.3**  
**Cost of and Support for the Program**  
**Purdue University West Lafayette**  
**Detail on Direct Program Costs**  
**Purdue System-wide DNP**

	Total Year #1	FY 2014	Total Year #2	FY 2015	Total Year #3	FY 2016	Total Year #4	FY 2017	Total Year #5	FY 2018
	FTE	Cost	FTE	Cost	FTE	Cost	FTE	Cost	FTE	Cost
<b>1. Faculty and Staff</b>										
b. Faculty	<u>2.3</u>	<u>\$275,487.00</u>	<u>4.3</u>	<u>\$447,674.00</u>	<u>6.3</u>	<u>\$688,085.00</u>	<u>6.3</u>	<u>\$688,085.00</u>	<u>6.3</u>	<u>\$688,085.00</u>
c. Limited Term Lecturers	<u>0.0</u>	<u>\$0.00</u>	<u>0.0</u>	<u>\$0.00</u>	<u>0.0</u>	<u>\$0.00</u>	<u>0.0</u>	<u>\$0.00</u>	<u>0.0</u>	<u>\$0.00</u>
d. Staff	<u>0.5</u>	<u>\$22,925.00</u>	<u>0.5</u>	<u>\$22,925.00</u>	<u>0.5</u>	<u>\$22,925.00</u>	<u>0.5</u>	<u>\$22,925.00</u>	<u>0.5</u>	<u>\$22,925.00</u>
Total	<u>2.8</u>	<u>\$298,412.00</u>	<u>4.8</u>	<u>\$470,599.00</u>	<u>6.8</u>	<u>\$711,010.00</u>	<u>6.8</u>	<u>\$711,010.00</u>	<u>6.8</u>	<u>\$711,010.00</u>
<b>2. Supplies and Expense</b>										
a. General Supplies/Expenses		<u>\$5,000.00</u>		<u>\$5,000.00</u>		<u>\$5,000.00</u>		<u>\$5,000.00</u>		<u>\$5,000.00</u>
b. Recruiting		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>
c. Travel		<u>\$1,187.00</u>		<u>\$2,373.00</u>		<u>\$4,153.00</u>		<u>\$4,153.00</u>		<u>\$4,153.00</u>
d. Library		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>
e. Other		<u>\$5,450.00</u>		<u>\$7,650.00</u>		<u>\$9,850.00</u>		<u>\$9,850.00</u>		<u>\$9,850.00</u>
Total Supplies and Expenses		<u>\$11,637.00</u>		<u>\$15,023.00</u>		<u>\$19,003.00</u>		<u>\$19,003.00</u>		<u>\$19,003.00</u>
<b>3. Equipment</b>										
a. Additional Lab Equipment		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>
b. Fellowships		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>
Total Equipment		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>
<b>4. Student Assistance</b>										
a. Graduate Fee Scholarships		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>
b. Fellowships		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>
Total Student Assistance		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>
<b>Sum of All Direct Program Costs</b>		<u>\$310,049.00</u>		<u>\$485,622.00</u>		<u>\$730,013.00</u>		<u>\$730,013.00</u>		<u>\$730,013.00</u>

**Table 7.4**  
**Cost of and Support for the Program**  
**Summary**  
**Detail on Direct Program Costs**  
**Purdue System-wide DNP**

	<u>Total Year #1</u>	<u>FY 2014</u>	<u>Total Year #2</u>	<u>FY 2015</u>	<u>Total Year #3</u>	<u>FY 2016</u>	<u>Total Year #4</u>	<u>FY 2017</u>	<u>Total Year #5</u>	<u>FY 2018</u>
	<u>FTE</u>	<u>Cost</u>	<u>FTE</u>	<u>Cost</u>	<u>FTE</u>	<u>Cost</u>	<u>FTE</u>	<u>Cost</u>	<u>FTE</u>	<u>Cost</u>
<b>1. Faculty and Staff</b>										
b. Faculty	<u>6.6</u>	<u>\$760,448.86</u>	<u>10.3</u>	<u>\$1,133,722.86</u>	<u>13.6</u>	<u>\$1,527,175.61</u>	<u>13.6</u>	<u>\$1,530,324.48</u>	<u>13.7</u>	<u>\$1,543,697.58</u>
c. Limited Term Lecturers	<u>0.4</u>	<u>\$6,263.13</u>	<u>0.7</u>	<u>\$10,138.11</u>	<u>0.9</u>	<u>\$13,529.23</u>	<u>1.0</u>	<u>\$15,900.95</u>	<u>1.0</u>	<u>\$19,985.37</u>
d. Staff	<u>3.0</u>	<u>\$139,675.00</u>	<u>3.0</u>	<u>\$139,675.00</u>	<u>3.0</u>	<u>\$139,675.00</u>	<u>3.0</u>	<u>\$139,675.00</u>	<u>3.0</u>	<u>\$139,675.00</u>
Total	<u>10.0</u>	<u>\$906,386.99</u>	<u>14.0</u>	<u>\$1,283,535.97</u>	<u>17.5</u>	<u>\$1,680,379.84</u>	<u>17.6</u>	<u>\$1,685,900.43</u>	<u>17.7</u>	<u>\$1,703,357.95</u>
<b>2. Supplies and Expense</b>										
a. General Supplies/Expenses		<u>\$19,000.00</u>		<u>\$19,000.00</u>		<u>\$19,000.00</u>		<u>\$19,000.00</u>		<u>\$19,000.00</u>
b. Recruiting		<u>\$5,000.00</u>		<u>\$5,000.00</u>		<u>\$5,000.00</u>		<u>\$5,000.00</u>		<u>\$5,000.00</u>
c. Travel		<u>\$2,670.25</u>		<u>\$5,339.18</u>		<u>\$8,780.11</u>		<u>\$10,678.67</u>		<u>\$9,432.97</u>
d. Library		<u>\$5,000.00</u>		<u>\$5,000.00</u>		<u>\$5,000.00</u>		<u>\$5,000.00</u>		<u>\$5,000.00</u>
e. Other		<u>\$68,650.00</u>		<u>\$70,850.00</u>		<u>\$73,050.00</u>		<u>\$71,050.00</u>		<u>\$62,250.00</u>
Total Supplies and Expenses		<u>\$100,320.25</u>		<u>\$105,189.18</u>		<u>\$110,830.11</u>		<u>\$105,728.67</u>		<u>\$95,682.97</u>
<b>3. Equipment</b>										
a. Additional Lab Equipment		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>
b. Fellowships		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>
Total Equipment		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>
<b>4. Student Assistance</b>										
a. Graduate Fee Scholarships		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>
b. Fellowships		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>
Total Student Assistance		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>		<u>\$0.00</u>
<b>Sum of All Direct Program Costs</b>		<u>\$1,006,707.24</u>		<u>\$1,388,725.15</u>		<u>\$1,791,209.95</u>		<u>\$1,791,629.10</u>		<u>\$1,799,040.92</u>

## **Appendix 9**

### **Articulation of Associate/Baccalaureate Programs, Detail**

Note: This information is not applicable for the current proposal.

## **Appendix 10**

### **Credit Hours Required/Time To Completion, Detail**

**Table 10.1: List of Post-Master’s DNP Courses – 41 Credits plus 2 credit Elective = 43 Credits**

Course Name	Credit Hours	Lab Hours
<b>3 P’s (11 Credits) – Prerequisite Courses</b>		
NUR 50700 Pathophysiology**	4	
NUR 50300 Health Assessment **	3	
NUR 50200 and NUR 51200 (ANP) and 51400 (PNP) Pharmacology**	4	
<b>Leadership Core (12 credits)</b>		
NUR 63200 Health Policy: Local to Global*	3	
NUR 59900 Economics and Finance for Health Care	3	
NUR 62500 History, Ethics and Innovations	3	
NUR 52500 Nursing Informatics	3	
<b>Evidence Based Practice Core (12 Credits)</b>		
NUR 59900 Epidemiology	3	
NUR 62600 Biostatistics	3	
NUR 62400 Evidence Based Practice	3	
NUR 59900 System Approaches in Healthcare	3	
<b>Cognate Courses (3 credits) (Select 1 course)</b>		
Cognate I – WL Transitions and Quality Improvement	3	
Cognate I – PUC Translation Science	3	
Cognate I – IPFW Technology in Healthcare	3	
<b>Residencies (8 hours)</b>		
NUR 67300 Health Policy Residency	2	128
DNP Cognate Residency I NUR 68000 (Direct Practice Mgmt.) or NUR 68300 (Homeland Sec./PH)	3	192
DNP Cognate Residency 2 NUR 68300 (Direct Practice Mgmt.) or NUR 68500 (Homeland Sec./PH)	3	192
<b>Evidence Based Practice Inquiry Project (6 credits)</b>		
DNP Practice Inquiry Project I NUR 68700	3	192
DNP Practice Inquiry Project II NUR 68900	3	192
<b>Elective (2 credits)</b>		

\*may be waived for students who had an equivalent course in their master’s program

\*\*required for non-APN students (estimated 50% of cohort)

**Table 10.2: Full - Time plan of study**

**Purdue University, DNP Program Partnership  
Year 1**

<b>Fall Semester Courses</b>	<b>Course Type Didactic or Practicum</b>	<b>Credit Hours</b>	<b>Lab Hours</b>	<b>Campus of Origin</b>
NUR 63200 Health Policy: Local to Global* or elective course	Didactic	3	0	PWL, PUC, IPFW
NUR 59900 Economics and Finance for Health Care	Didactic	3	0	PWL, IPFW
NUR 59900 Epidemiology	Didactic	3	0	PWL
NUR 50700 Pathophysiology**	Didactic	4	0	PWL, IPFW
<b>Spring Semester Courses</b>	<b>Course Type Didactic or Practicum</b>	<b>Credit Hours</b>	<b>Lab Hours</b>	<b>Campus of Origin</b>
NUR 62400 Evidence Based Practice	Didactic	3	0	PWL, PUC, IPFW
NUR 67300 Health Policy Residency	Practicum	2	128 residency hours	PWL, PUC, IPFW
NUR 50300 Health Assessment **	Didactic and Practicum	3	45 Clinical hours	PWL, PUC, IPFW
Elective	Didactic	2	0	PWL, PUC, IPFW

*Each campus will offer one cognate; systems Approaches to Engineering will be a core course*

<b>Summer Session Courses</b>	<b>Course Type Didactic or Practicum</b>	<b>Credit Hours</b>	<b>Lab Hours</b>	<b>Campus of Origin</b>
NUR 59900 System Approaches in Healthcare	Didactic	3		PWL
Cognate I – WL Transitions and Quality Improvement	Didactic	3		PWL
Cognate I – PUC Translation Science	Didactic	3		PUC
Cognate I – IPFW Technology focus	Didactic	3		IPFW

**Table 10.2 Full-Time Plan of Study, Continued**  
Year 2

<b>Fall Semester Courses</b>	<b>Course Type Didactic or Practicum</b>	<b>Credit Hours</b>	<b>Lab Hours</b>	<b>Campus of Origin</b>
NUR 62600 Biostatistics	Didactic	3	0	PWL IPFW
NUR 52500 Nursing Informatics* or elective	Didactic	3	0	PUC IPFW
DNP Cognate Residency I	Practicum	3	192	PWL PUC IPFW
<b>Spring Semester Courses</b>	<b>Course Type Didactic or Practicum</b>	<b>Credit Hours</b>	<b>Lab Hours</b>	<b>Campus of Origin</b>
NUR 62500 History, Ethics and Innovations	Didactic	3	0	PUC PWL IPFW
DNP Cognate Residency I I	Practicum	3	192	PWL PUC IPFW
NUR 50200 (FNP) or NUR 50200 and NUR 51200 (ANP) and 51400 (PNP) Pharmacology** OR	Didactic	50200= 3 credits 51200/ 51400= 1 credit		PWL PUC IPFW
DNP Practice Inquiry Project I NUR 68700 +	Practicum	3	192	PWL PUC IPFW
<b>Summer Session Courses</b>	<b>Course Type Didactic or Practicum</b>	<b>Credit Hours</b>	<b>Lab Hours</b>	<b>Campus of Origin</b>
DNP Practice Inquiry Project II NUR 68900 +	Practicum	3	192	PWL PUC IPFW

+ PWL faculty on each team initially.

\*waived for students who had an equivalent course in their master's program

\*\*required for non-APN students (estimated 50% of cohort)

**Table 10.3 Part-Time Plan of Study**

NOTE: Part-time plan of study below is for students who completed APN master's program  
Year 1

<b>Fall Semester Courses</b>	<b>Course Type Didactic or Practicum</b>	<b>Credit Hours</b>	<b>Lab Hours</b>	<b>Campus of Origin</b>
NUR 63200 Health Policy: Local to Global* or elective course	Didactic	3	0	PWL, PUC, IPFW
NUR 59900 Economics and Finance for Health Care	Didactic	3	0	PWL, IPFW
Elective	Didactic	2	0	PWL, PUC, IPFW
<b>Spring Semester Courses</b>	<b>Course Type Didactic or Practicum</b>	<b>Credit Hours</b>	<b>Lab Hours</b>	<b>Campus of Origin</b>
NUR 62400 Evidence Based Practice	Didactic	3	0	PWL, PUC, IPFW
NUR 67300 Health Policy Residency	Practicum	2	128 residency hours	PWL, PUC, IPFW
<b>Summer Session Courses</b>	<b>Course Type Didactic or Practicum</b>	<b>Credit Hours</b>	<b>Lab Hours</b>	<b>Campus of Origin</b>
NUR 59900 System Approaches in Healthcare	Didactic	3		PWL
NUR 59900 Epidemiology	Didactic	3	0	PWL

*Systems Approaches in Healthcare will be a core course*

Year 2

<b>Fall Semester Courses</b>	<b>Course Type Didactic or Practicum</b>	<b>Credit Hours</b>	<b>Lab Hours</b>	<b>Campus of Origin</b>
NUR 62600 Biostatistics	Didactic	3	0	PWL IPFW
NUR 52500 Nursing Informatics* or elective	Didactic	3	0	PUC IPFW
<b>Spring Semester Courses</b>	<b>Course Type Didactic or Practicum</b>	<b>Credit Hours</b>	<b>Lab Hours</b>	<b>Campus of Origin</b>
NUR 62500 History, Ethics and Innovations	Didactic	3	0	PUC PWL IPFW
DNP Cognate Residency I	Practicum	3	192	PWL PUC IPFW



*Each campus will offer one cognate; students complete one cognate from selection*

<b>Summer Session Courses</b>	<b>Course Type Didactic or Practicum</b>	<b>Credit Hours</b>	<b>Lab Hours</b>	<b>Campus of Origin</b>
Cognate I – WL Transitions and Quality Improvement	Didactic	3		PWL
Cognate I – PUC Translation Science	Didactic	3		PUC
Cognate I – IPFW Technology focus	Didactic	3		IPFW
DNP Cognate Residency I I	Practicum	3	192	PWL PUC IPFW

Year 3

<b>Fall Semester Courses</b>	<b>Course Type Didactic or Practicum</b>	<b>Credit Hours</b>	<b>Lab Hours</b>	<b>Campus of Origin</b>
DNP Practice Inquiry Project 1 NUR 68700+	Practicum	3	192 hours	PWL PUC IPFW
<b>Spring Semester Courses</b>	<b>Course Type Didactic or Practicum</b>	<b>Credit Hours</b>	<b>Lab Hours</b>	<b>Campus of Origin</b>
DNP Practice Inquiry Project II NUR 68900 +	Practicum	3	192	PWL PUC IPFW

+ PWL faculty on each team initially

## Table 10.4 Admission Requirements

Applicants who meet the following criteria are eligible for admission:

- Graduation from an accredited baccalaureate program in nursing. International students must graduate from a nursing program that has undergone comparable review and must score a minimum of 213 on the computer-based TOEFL.
- A minimum undergraduate nursing cumulative Grade Point Average of 3.0, on a four-point scale, or equivalent "B" average. **Note:** Applicants not meeting this criterion may be considered for conditional admission status.
- All master's degree-seeking students to the School of Nursing must take the Graduate Record Examination (GRE). For information, test dates, and application forms, visit [www.gre.org](http://www.gre.org).
- Evidence of current registered nurse licensure in the State of Indiana.
- Evidence of successful completion (3.0 on a 4.0 scale) of an upper division statistics course (300-500 level) taken within the last 5 years. Or, this may be taken concurrent with the first semester of graduate coursework.
- Evidence of successful completion of a physical assessment course or equivalent.
- A personal interview with a graduate program faculty advisor.
- Basic computer competency including word processing and use of Internet.

The following documents must be submitted:

- The Graduate School Application Form. This is to be completed on-line at the Graduate School Web site: [www.purdue.edu/gradschool](http://www.purdue.edu/gradschool)).
- Two official (original) transcripts from each school attended.
- A 300-500 word essay, which addresses your purpose for undertaking graduate study in nursing, reasons for choosing Purdue, career goals, and research interests.
- Three letters of recommendation evaluating your scholarly potential (Available from the Graduate School Office). At least one recommendation must be from a professor of nursing. If you have been out of school for more than 5 years, you may substitute a direct manager for professor.
- A curriculum vita or resumé.
- A copy of current registered nurse license.
- Proof of application fee payment.

## Table 10.5 Description of Curriculum and List of Approved Courses

The DNP curriculum is organized around the AACN Essentials for Doctoral Education for Advanced Nursing Practice. All students are required to take the Leadership Core, Evidence-based Practice Core, Cognates/Cognate Residencies, and complete an Evidence-Based Practice Inquiry Clinical Project. To establish a strong nursing knowledge foundation, students who are not advanced practice nurses are required to take NUR 50200--Pharmacotherapeutics in Primary Care, NUR 50300--Advanced Health Assessment, and NUR 50700--Physiologic Concepts for Advanced Practice Nursing or equivalent. Elective courses and cognates are selected by the student in collaboration with the committee chair or faculty advisor to build their area of expertise. A sample part-time plan of study is located in Appendix 10, Table 10.3.

Courses that contribute to the Essentials are listed below:

**Advanced Practice Nursing Curriculum** (for post- master's APNs this will already be completed)

**Leadership Core** consists of 12 credit hours and consists of the following courses:

NUR 63200 Health Policy: Local to Global (3 cr)  
NUR 59900 Economics and Finance for Healthcare (3 cr)  
NUR62500 History, Ethics and Innovations (3 cr)  
NUR52500 Interdisciplinary Healthcare Informatics (3 cr)

**Evidence-based Practice Core:** 12 credits

NUR 59900 Epidemiology (3cr)  
NUR 62600 Biostatistics (3 cr)  
NUR62400 Evidence Based Practice (3 cr)  
NUR 59900 System Approaches in Healthcare (3cr)

The evidence-based practice core focuses on developing skills to systematically evaluate published evidence for the purpose of making recommendations about systems and practice innovation that would improve system efficiency while simultaneously improving patient outcomes.

**Cognate courses:** (3 cr) Typically students select one three-credit cognate courses, depending on their area of interest. Examples of cognate options include Transitions and Quality Improvement (West Lafayette), Translation Science (Calumet) and Technology in Healthcare (Fort Wayne). The courses at the Calumet and Fort Wayne campuses are under development. Both cognate areas represent specific areas of strength and faculty expertise at the respective campuses (see Appendix 6).

**Cognate Residencies:** (8 cr) one of the cognate residencies includes a 2 credit Health Policy residency that includes 128 clinical hours; students utilize leadership, motivation, and influence to evaluate and promote relationships within organizations that influence healthcare policy. Students take 6 additional residency credits and an additional 384 residency hours.

**Elective** (2 cr) students select an elective course to fulfill the 43-credit requirement.

**Evidence Based Practice Inquiry Clinical Project:** (6 cr). The DNP program culminates with a 6 credit and 384 clinical hours. Evidence Based Practice Inquiry project. Students develop, implement, and evaluate an evidence-based practice inquiry project aimed at improving a selected healthcare practice and systems. Each project must incorporate systems concepts, health policy, and healthcare economics.

## **Appendix 11**

### **Exceeding the Standard Expectation of Credit Hours, Detail**

Note: This information is not applicable for the current proposal

**Appendix 12**  
**Quality Matters Program Assessment Detail**

The Quality Matters rubric allows assessment of the design of individual courses, the learning management system and quality of instruction. It can be used to continuously improve courses and the learning outcomes through peer and self-assessment. Based on a comprehensive review of the literature, it focuses how faculty introduce the course (introductions, building community, explaining navigation, etc), design of learning objectives and their alignment with activities and assessment, assessment of learning, quality of instruction an materials, learner engagement and interaction, course technology, learner support and accessibility/accommodation. The Calumet and Fort Wayne campuses already use the QM mechanisms to develop and certify faculty for online teaching. In addition, faculty will use the QM rubric to periodically self-assess that their online courses continue to meet these evidence-based recommendations for excellence in online teaching.

Table 12.1 Elements of Course level assessment

- (Sloan-C learning effectiveness) Faculty will use an array of formative classroom assessment techniques appropriate for the learning environment. For example, online discussions will be assessed using rubrics that judge the quality of the substantive discussion as well as the degree of student engagement. Other formative and summative assessments of knowledge gain will include rubric-driven evaluation of papers, projects and assignments as well as examinations as measurement of learning objective achievement.
- (Sloan-C student satisfaction) Students will evaluate their satisfaction with every course and its instruction using standard methods that currently exist on each participating campus. These satisfaction surveys will be used to continuously improve courses and instruction as well as provide a metric for faculty performance evaluation.
- (Sloan-C faculty satisfaction) Indicators of faculty satisfaction include their willingness to continue to participate in online classes, participation in development and voluntary assessment of their courses and feedback to the curricular bodies for improvements.
- Faculty will use the QM standards to self-assess the design of new courses and redesign of existing courses. In addition, they will self-assess ongoing courses at least biennially.
- The curriculum will include a capstone project that faculty advisors will carefully assess at least at the following stages: problem/question development, protocol/proposal, implementation and evaluation. The project will culminate with a juried evaluation by a committee of faculty and content experts.

## **Appendix 13**



## **Summary of Projected Steps by Purdue North Central Toward Participation in the System-Wide Collaboration on DNP**

Over the next 5 to 7 years, Purdue North Central plans to implement the following plan:

- Qualified doctorally prepared nursing faculty at PNC will obtain graduate faculty status
- Doctorally prepared nursing faculty will co-teach courses in Purdue master's programs and serve as a members of DNP student project committees
- Additional doctorally prepared nursing faculty with graduate level teaching experience will be hired
- PNC faculty will at first co-teach with experienced graduate teaching faculty from Purdue Calumet, IPFW, and West Lafayette, utilizing these faculty as mentors
- PNC will add a master's in nursing
- PNC faculty will teach classes needed for the DNP. These classes will be determined by program need as well as the educational and clinical expertise of the faculty
- PNC will report and detail their capabilities and resources to all authorizing bodies to participate fully in the DNP