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What is and is not a DNP project
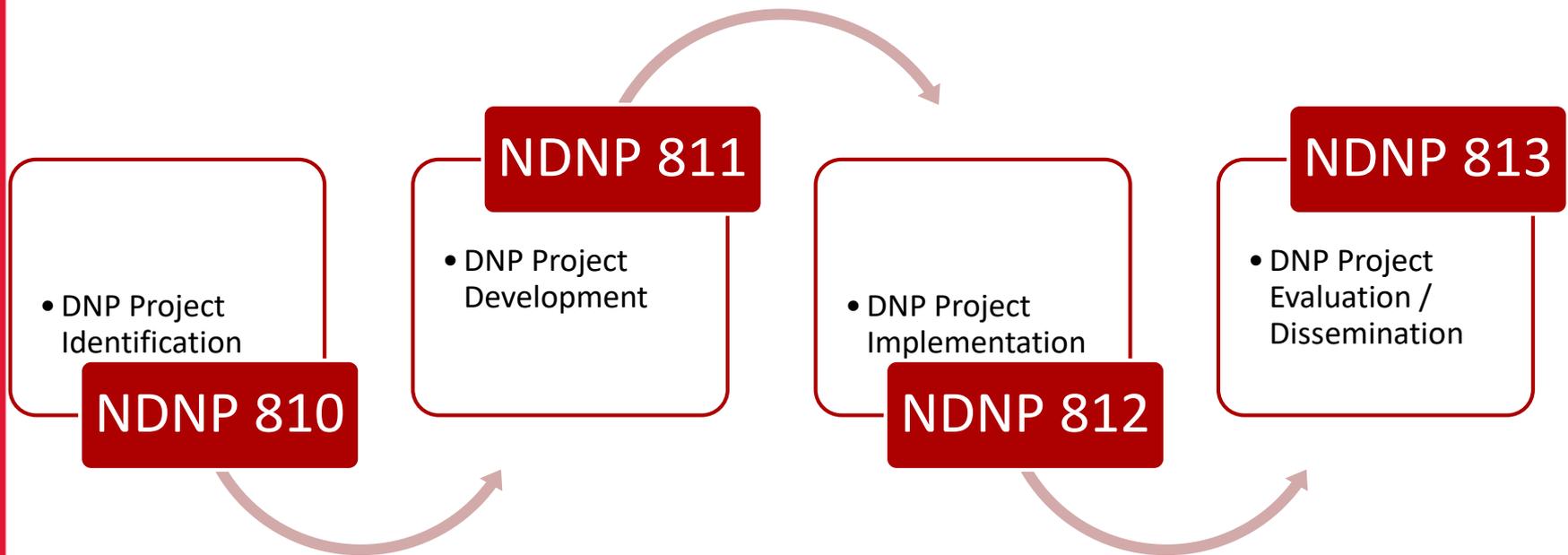
Change in Name

- Projects are no longer called a "capstone project" or "scholarly project"
- Now referred to as **DNP Projects**

UMSON DNP Project Courses

NDNP 811

NDNP 813

• DNP Project Identification

NDNP 810

• DNP Project Development

• DNP Project Implementation

NDNP 812

• DNP Project Evaluation / Dissemination

Note: The project should be identified in the Diagnosis and Management courses prior to entering NDNP 810.

University of Maryland School of Nursing

What is a DNP project?

AACN Guidelines for DNP Projects

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- The DNP Project should be the same for all students and include **planning, implementation, and evaluation** components.

- As an outcome of the program, students must have the opportunity to integrate all DNP Essentials into practice. However, all eight Essentials do not have to be demonstrated in the DNP Project.

(AACN Report from the Task Force on the Implementation of the DNP, 2015)

All DNP projects should:

a) Focus on a change that impacts healthcare outcomes either through direct or indirect care.

b) Have a systems (micro-, meso-, or macro- level) or population/aggregate focus.

c) **Demonstrate implementation** in the appropriate arena or area of practice.

d) Include a plan for sustainability (e.g. financial, systems or political realities, not only theoretical abstractions).

e) Include an evaluation of processes and/or outcomes (formative or summative).

f) Provide a foundation for future practice scholarship.

Quality Improvement

 "the combined and unceasing efforts of everyone – health care professionals, patients and their families, researchers, administrators, payers, planners, educators – to make changes that will lead to better patient outcomes, better system performance, and better professional development"

Ogrinc, G., Nelson, W.A., Adams, S.M., & O'Hara, A.E. (2013). An instrument to differentiate between clinical research and quality improvement. *IRB Ethics & Human Research* 35(5), pp. 4-5.

Quality Improvement is the Responsibility of Health Care Providers

*"QI is an ongoing process undertaken as a **consequence of health care providers' responsibility to serve their patients' interests.** This makes it very different from research."*

Baily, M.A., Bottrell, M., Lynn, J., & Jennings (2006). Special report: the ethics of using QI methods to improve healthcare quality and safety. The Hastings Center: Garrison New York.
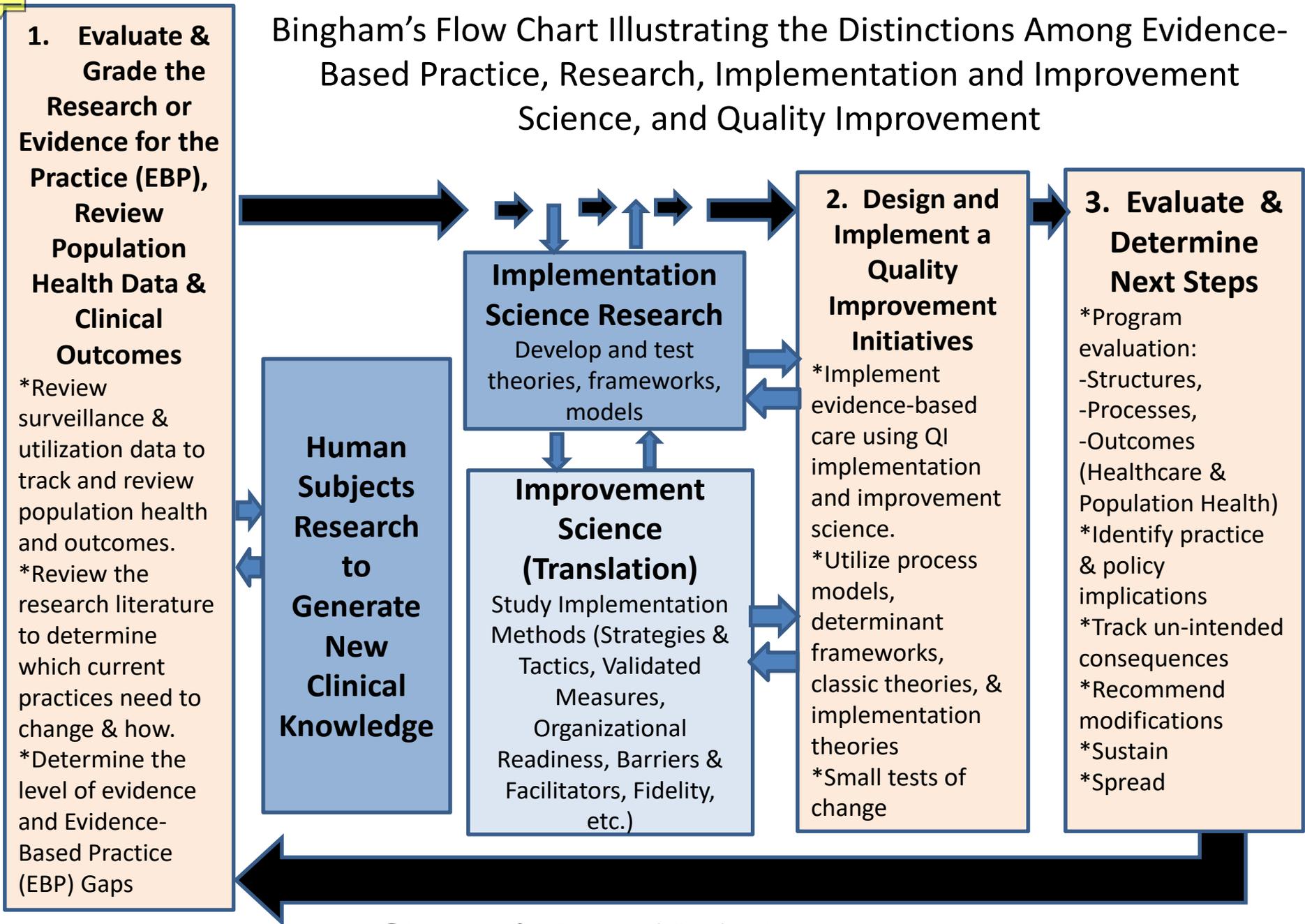
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"It has become generally understood that discovery is the domain of the former [PhD] and translation the work of the latter [DNP]."

"...translation seeks to bring evidence to bear on challenges in the real world of practice using reliable and valid evidence to improve care."

White, K.M., Dudley-Brown, S., & Terhaar, M.F. (2016). Translation of evidence into nursing and health care. Springer Publishing Company, New York, NY, pg. XV.

Bingham's Flow Chart Illustrating the Distinctions Among Evidence-Based Practice, Research, Implementation and Improvement Science, and Quality Improvement

1. Evaluate & Grade the Research or Evidence for the Practice (EBP), Review Population Health Data & Clinical Outcomes

*Review surveillance & utilization data to track and review population health and outcomes.
*Review the research literature to determine which current practices need to change & how.
*Determine the level of evidence and Evidence-Based Practice (EBP) Gaps

Human Subjects Research to Generate New Clinical Knowledge

Implementation Science Research
Develop and test theories, frameworks, models

Improvement Science (Translation)
Study Implementation Methods (Strategies & Tactics, Validated Measures, Organizational Readiness, Barriers & Facilitators, Fidelity, etc.)

2. Design and Implement a Quality Improvement Initiatives

*Implement evidence-based care using QI implementation and improvement science.
*Utilize process models, determinant frameworks, classic theories, & implementation theories
*Small tests of change

3. Evaluate & Determine Next Steps

*Program evaluation:
-Structures,
-Processes,
-Outcomes (Healthcare & Population Health)
*Identify practice & policy implications
*Track un-intended consequences
*Recommend modifications
*Sustain
*Spread

©Institute for Perinatal Quality Improvement

DNP QI projects should be based on the findings from human subjects research, implementation science research, and utilize improvement science methods.
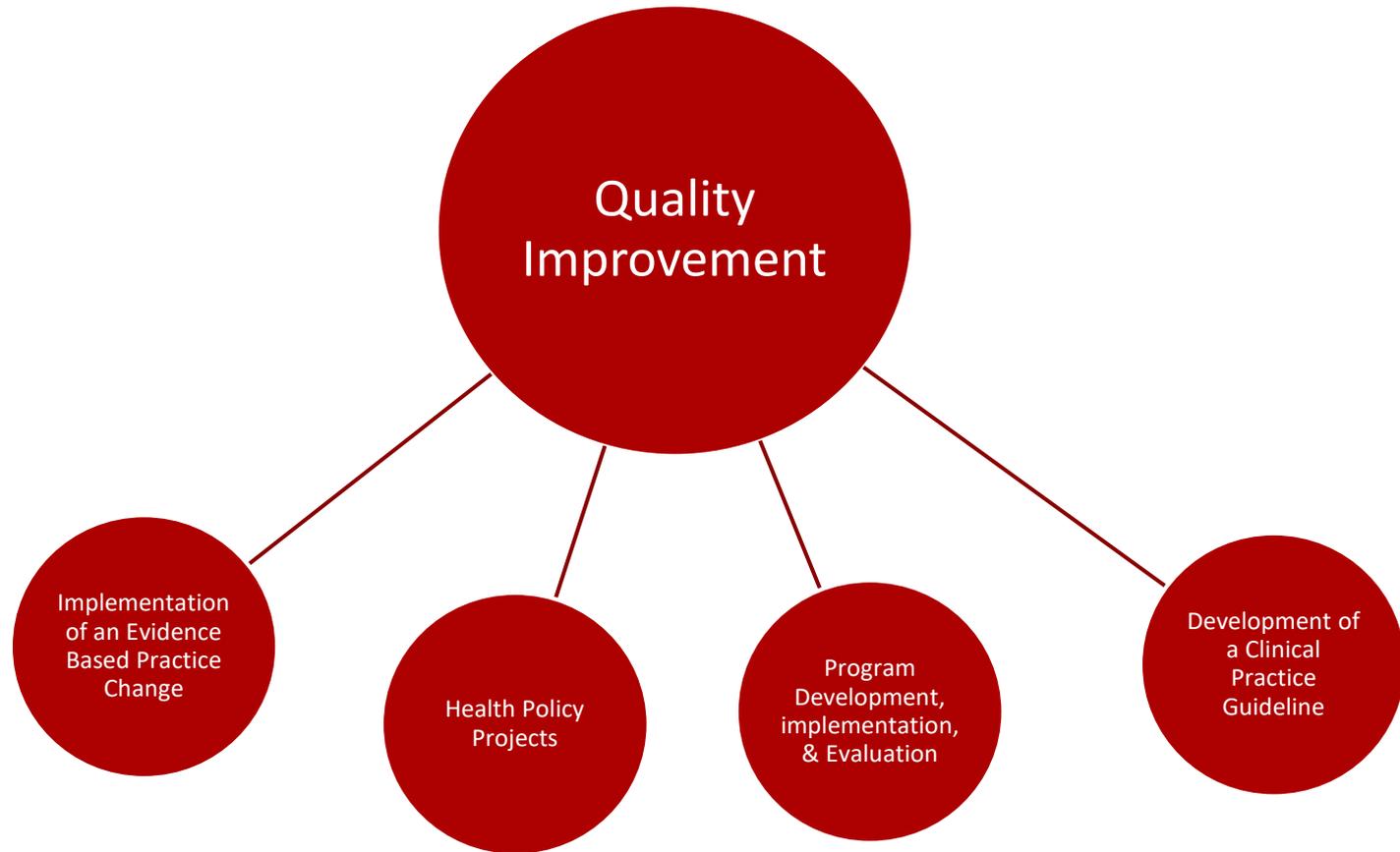
Steps in QI projects

1) Understand and summarize the current evidence related to the practice problem – make the case for why the change is needed.

2) Assess the current practice to identify gaps (communication, knowledge, workflow, etc.).

3) Utilize an Implementation Science Theoretical Framework, QI Improvement Science methods, and QI Process Models to create a plan for implementation of a practice change to address these gaps.

4) Implement, monitor, and revise plan as needed.

5) Evaluate and disseminate findings including recommendations for sustainability and possibly spread.

Types of QI Projects

Quality Improvement

Implementation of an Evidence Based Practice Change

Health Policy Projects

Program Development, implementation, & Evaluation

Development of a Clinical Practice Guideline

Examples: Implementing an Evidence Based Practice Change

- Implementing a standardized tool for reporting violence in an emergency

- Implementing an obesity clinical practice guideline in a primary care group

- Implementing an evidence-based EKG prioritization rule to decrease door-to-EKG times

- Implementing a surgical bundle to reduce surgical site infection

Examples: Health Policy Projects

- Development of a policy toolkit to support reintroduction of a nurse practitioner (NP) full practice authority bill

- Identification and removal of signatory barriers for Advanced Practice Registered Nurses

Examples: Program Development, Implementation and Evaluation

- Implementing a school based asthma action program to increase knowledge of asthma and self-care management skills among elementary school children

- Implementing a nurse-led program for the early identification of substance use disorders in primary care

- Implementing a nurse residency program for Army Public Health Nurses

Examples: Clinical Practice Guideline (CPG) Development

- Development of a CPG for **preoperative** glucose management for diabetic patients undergoing orthopedic surgery

- Development of a CPG for **intraopearative** glucose management for diabetic patients undergoing orthopedic surgery

- Development of a CPG for **postoperative** glucose management for diabetic patients undergoing orthopedic surgery

Clinical Practice Guidelines

- Implementation of a CPGs by DNP student(s) is often focused on the <u>initial stage of developing the guideline</u> with a team of experts, and then having that guideline evaluated by key stakeholders
  - Development begins with the student providing a first draft of the CPG to the team of experts and getting their input, revisions, and evaluation using the AGREE II tool
  - Evaluation of a final draft is often done through surveys and requests for feedback of key stakeholders, and seeking administrative approval of the CPG

Since the above process usually takes the entire Fall Semester, implementation of the CPG itself (e.g., with patients at a clinical site) should be reserved for a future DNP student(s) as a DNP project, or by staff and administrators in the area of practice

Group Projects

- Maximum group size 3

- Each member may work on a similar project at a different clinical site or work on a separate part of a very large project at the same site.

- While some DNP projects may be done in small groups, each student is responsible for:
  - submitting separate and distinctly different course deliverables (i.e., overview, literature review, evidence-review table, and implementation plan)

Example of Group Project
at the Same Site (Preop Center)

- Implementing a clinical practice guideline for using chlorhexidine cloths preoperatively

- Implementing electronic prescribing of preoperatove medications

- Screening preoperatively for methicillin-resistant staphylococcus aureus colonization

Example of Group Projects in Different Sites

- Using TeamSTEPPS to enhance interdisciplinary communication and team skills among a **cardiac surgery team** across two units in the same hospital

- Creating a culture of teamwork in an **emergency department** through the use of TeamsSTEPPS framework across three units in the same hospital

What is not a DNP Project?

Research

- Development and evaluation of a Vitamin D deficiency risk tool

Why not?
- This is a research study.
- The study does not focus on the expected outcomes of the DNP program, such as analysis of evidence, translation of evidence into practice, leadership etc.

Integrative and Systematic Reviews

- **An integrated review of techniques for PTSD and associated symptoms**

Why not?
- All DNP projects should be based on a thorough review of the literature.
- Integrative and systematic reviews alone do not provide opportunities for students to develop and integrate scholarship into their practice.
- All DNP projects must demonstrate implementation in the appropriate arena or area of practice.

In-service or Education Only

- Improving diabetes treatment: An in-service on clinical practice guidelines

Why not?

• Providing an in-service is not considered doctoral level work, and the evidence shows that in-services alone are not effective in bringing about a change in practice.

•All DNP projects must demonstrate implementation in the appropriate arena or area of practice.

Nursing Education

- **Use of simulation to increase knowledge retention in undergraduate nursing students**

  Why not?
  • DNP projects must provide a more direct link to patient outcomes than education provided to nursing students.
  •The target population for a DNP project cannot be nursing students.
  •The DNP is a practice degree, and education is not considered an advanced practice specialty in nursing.

Needs Assessment

- Needs assessment of high central line infection rates in a surgical ICU

Why not?
- A DNP project should not be considered unless there is enough evidence to determine that there is a need for practice change that is to be implemented.
- The IRB will not approve implementation of a practice change without the details of what the needs are and what change will be implemented.

Development of a Policy or Procedure

- Development of a policy and procedure for the use of *intranasal* fentanyl in the emergency room

  Why not?
  - All DNP projects must demonstrate implementation in the appropriate arena or area of practice.
  - There is no well established reliable and valid evaluation tool that can be used systematically for policies and procedures.
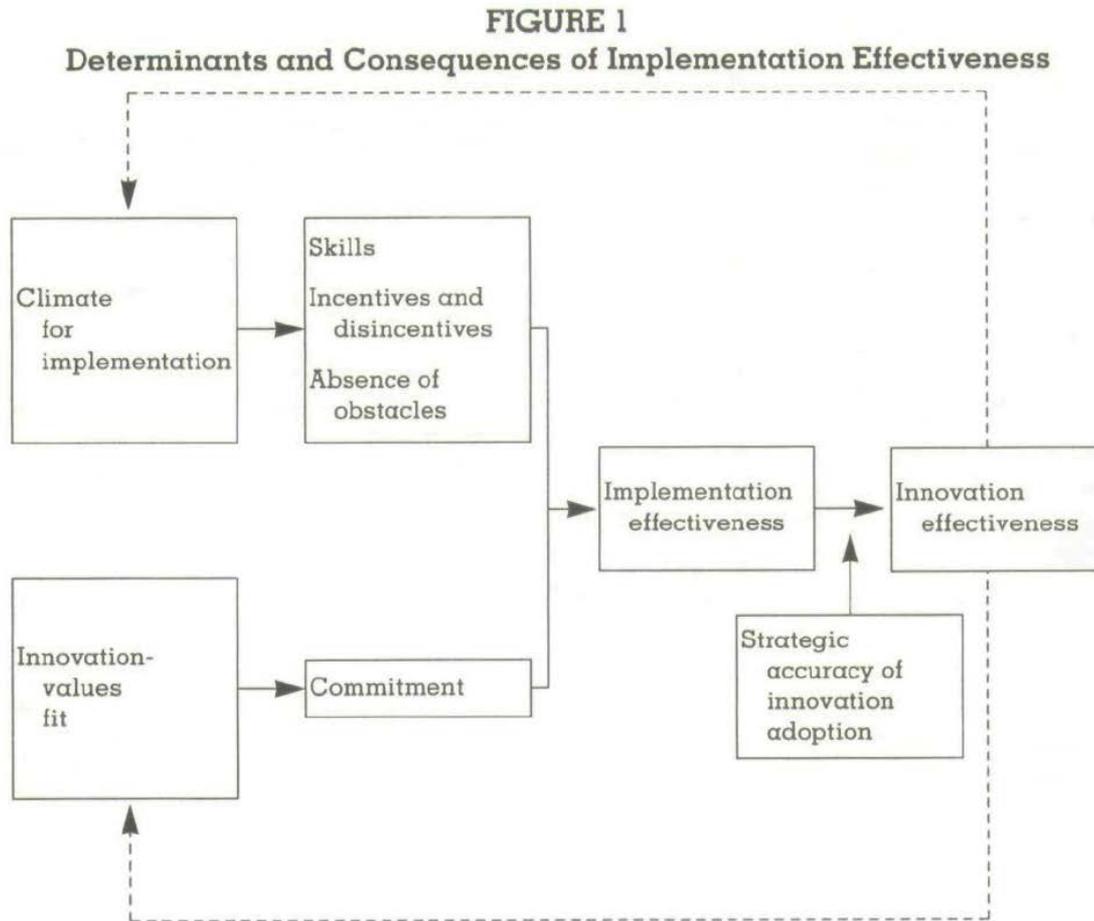
Resources for Faculty

Klein & Sorra's Implementation Framework

FIGURE 1
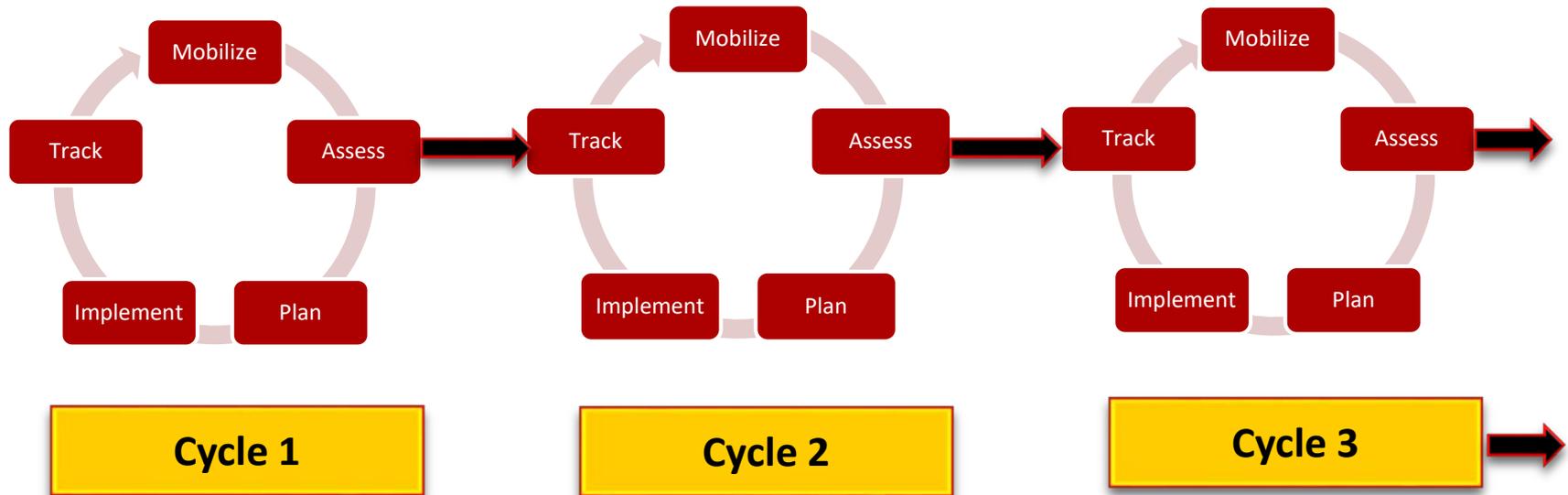**Determinants and Consequences of Implementation Effectiveness**

An example of a implementation framework that DNP Students can use to guide their implementation efforts.

Klein, K.J., & Sorra, J.S. (1996). The challenge of innovation implementation. The Academy of Management Review, 21(4), 1055-1080.

MAP-IT - A QI Process Model

Mobilize – **A**ssess – **P**lan – **I**mplement - **T**rack

Mobilize | Track | Assess | Implement | Plan

Mobilize | Track | Assess | Implement | Plan

Mobilize | Track | Assess | Implement | Plan

Cycle 1

Cycle 2

Cycle 3

Guidry, M., Vischi, T., Han, R., & Passons, O. Healthy people in healthy communities: a community planning guide using healthy people 2020. Washington, D.C., U.S. Department of Health and Human Services. The Office of Disease Prevention and Health Promotion. Accessed 8/24/17: https://www.healthypeople.gov/2020/tools-and-resources/Program-Planning

Examples of QI Tools

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- Process Flow Charts

- Fish Bone Diagrams

- Logic Models

- Driver Diagrams

QI Briefs - for Faculty

A series of QI Briefs are being developed for the DNP Faculty.

These Briefs are divided into 5 Parts:

1) QI Concepts
2) QI Project Mobilizing, Assessing, & Planning
3) QI Project Implementation & Tracking
4) Sustainability and Spread
5) Dissemination