



## BOARD OF REGENTS

### SUMMARY OF ITEM FOR ACTION, INFORMATION OR DISCUSSION

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**TOPIC:** Salisbury University: Doctor of Nursing Practice (DNP)

**COMMITTEE:** Education Policy

**DATE OF COMMITTEE MEETING:** June 2, 2010

**SUMMARY:** The proposed Doctor of Nursing Practice program is in direct response to the AACN 2015 mandate to transition advanced nurse practitioner education to the doctoral level. The National Research Council report (2005) recommended that the practice doctorate be developed to increase the pool of advanced practice nurses and clinical faculty, thus allowing greater numbers of students to enter the nursing field, and providing greater access to primary care providers for the general public. The program addresses the growing need for advanced-practice nurses with special skills in managing complex health needs in a cost effective and collaborative manner. The curriculum emphasizes the use of evidence-based practice and technology to guide administrative and clinical decisions and policy development.

With the recent passage of health care reform legislation, there will be a significant increase in demand for nurse practitioners to provide lower-cost primary care services especially in rural areas and inner cities. This increased demand coupled with the DNP credential requirement for nurse practitioners supports the need for SU's DNP program. At present, there are no opportunities to obtain the DNP degree on the Eastern Shore of Maryland. The closest programs in the region include: University of Maryland (Baltimore), Johns Hopkins, George Washington University, and Catholic University. There are no DNP programs in Delaware. According to the AACN (2010), from 2008 to 2009, the number of students enrolled in DNP programs nearly doubled from 3,415 to 5,165. Despite the opening of 28 new DNP programs in 2009 for a total of 120 nationwide, over 1000 qualified applicants were turned away from doctoral programs (AACN, 2009). The need for SU's DNP program is clearly evident.

Based upon surveys conducted by SU, the audience for the proposed post-master's DNP program is expected to consist of three populations of students: a) Master's-prepared advanced practice nurses (nurse practitioners and clinical nurse specialists) who live and work on the Eastern Shore, including southern Delaware, who will be seeking the terminal degree without having to travel; b) Recent graduates of the SU family nurse practitioner program who wish to be optimally credentialed for their future advancement - the SU family nurse practitioner track is the largest among the Department's graduate tracks and considerable interest from these graduates is expected; and c) Master's-prepared advanced practice nurses who wish to be employed as clinical faculty. The audience for the proposed post-baccalaureate DNP program is likely to be graduates of SU's baccalaureate nursing program, especially for students in SU's second-BS degree in Nursing. Some graduates from other BS programs in Nursing would be welcome. In addition, recent expansion of SU's second-degree BS program may provide a substantial pool of highly able applicants as these students continue in graduate study at a higher rate than first degree BS students (Seldomridge and DiBartolo, 2005).

**ALTERNATIVE(S):** The Regents may not approve the program or may request further information.

**FISCAL IMPACT:** No additional funding is necessary. The program will be supported through

tuition, reallocation of funds, and grants.

**CHANCELLOR'S RECOMMENDATION:** That the Committee on Education Policy recommend that the Board of Regents approve the proposal from Salisbury University to offer the Doctor of Nursing Practice.

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COMMITTEE RECOMMENDATION: Approval.

DATE: June 2, 2010

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BOARD ACTION:

DATE:

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SUBMITTED BY: Irwin Goldstein (301) 445-1992 irv@usmd.edu

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**UNIVERSITY SYSTEM OF MARYLAND INSTITUTION PROPOSAL FOR**

- New Instructional Program
- Substantial Expansion/Major Modification
- Cooperative Degree Program

**Salisbury University**

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Institution Submitting Proposal

**Doctor of Nursing Practice**

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Title of Proposed Program

**Doctor of Nursing Practice**

**Fall 2012**

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Degree to be Awarded

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Projected Implementation Date

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Proposed HEGIS Code

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Proposed CIP Code

**Nursing**

**Dr. Lisa Seldomridge, Chair  
Dr. Molly Parsons, Director, Graduate  
and 2<sup>nd</sup> Degree Programs**

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Department in which program will be located

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Department Contact

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Contact Phone Number

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Contact E-Mail Address

*Diane D. Allen*

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Signature of President or Designee

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May 11, 2010

Date

## **A. Mission: Describe how the program related to the institution's approved mission.**

Salisbury University proposes a Doctor of Nursing Practice (DNP) in the Department of Nursing that aligns with SU's mission to provide graduate education for professional programs and meet the workforce needs of the State and region. The changing demands of healthcare require the highest level of scientific knowledge and practice expertise to assure quality patient outcomes. With anticipated and actual shortages of primary care physicians and an aging population, the need for advanced practice nurses (more specifically, nurse practitioners and clinical nurse specialists) to provide complex health care services will be greater than ever (American College of Physicians, 2009).

Beginning in 2015, educational programs accredited by the American Association of Colleges of Nursing (AACN) must offer the DNP as the basic preparation for advanced practice nurses or risk forfeiting their accreditation. Further, the DNP may help alleviate the nursing faculty shortage in the state by preparing expert practitioners who could also serve as clinical faculty. The move to doctoral preparation for advanced practice nurses is consistent with the educational trend in other health professions on direction of other health profession. Pharmacy (PharmD), Psychology (PsyD), Physical Therapy (DPT), and Audiology (AudD) all offer practice doctorates.

## **B. Characteristics of the proposed program:**

**1. Describe how this program meets a regional or statewide need consistent with the Maryland State Plan for Postsecondary Education:** The proposed DNP is in direct response to the AACN 2015 mandate to transition advanced nurse practitioner education to the doctoral level. The National Research Council report (2005) recommended that the practice doctorate be developed to increase the pool of advanced practice nurses and clinical faculty, thus allowing greater numbers of students to enter the nursing field, and providing greater access to primary care providers for the general public. According to the U.S. Bureau of Labor and Statistics, there is a projected shortfall of over one million registered nurses by 2016 (Dohm & Shniper, 2007). "Filling the nursing shortage is among Maryland's most critical workforce needs" (DLLR News, 2009) with an estimated 2,300 or more new registered nurses needed to fill gaps in the state. In addition, the national need for "health diagnosing and treating practitioners" (nurse practitioners) is projected to increase by 11.8% from 2006 to 2016 (Dohm & Shniper, 2007). The Association of American Medical Colleges suggests that between 2006 and 2025, an additional 150,000 nurse practitioners and physicians assistants will be required to reduce the demand for primary care physicians by 25% (Dill and Salsberg, 2005). Finally, the shortage of nursing faculty across the nation and at Maryland's universities has become urgent as well (DLLR News, 2009). According to the AACN Special Survey on Vacant Faculty Positions (2009), the national nurse faculty vacancy rate is 6.6% with most positions requiring or preferring a doctoral degree. A total of 803 faculty vacancies were identified at campuses with baccalaureate and/or graduate programs across the U.S. In addition to existing vacancies, campuses cited the need to create an additional 279 faculty positions to accommodate student demand (AACN, 2009).

With the recent passage of health care reform legislation, there will be a significant increase in demand for nurse practitioners to provide lower-cost primary care services especially in rural areas and inner cities. This increased demand coupled with the DNP credential requirement for nurse practitioners beginning in 2015 supports the need for SU's DNP program. At present, there are no opportunities to obtain the DNP degree on the Eastern Shore of Maryland. The closest programs in the region include: University of Maryland (Baltimore), Johns Hopkins, George Washington University, and Catholic University. There are no DNP programs in Delaware. According to the AACN (2010), from 2008 to 2009, the number of students enrolled in DNP programs nearly doubled from 3,415 to 5,165. Despite the opening of 28 new DNP programs in 2009 for a total of 120 nationwide, over 1000 qualified applicants were turned away from doctoral programs (AACN, 2009). The need for SU's DNP program is clearly evident.

**2. State the educational objectives of the proposed program:** The Doctor of Nursing Practice will prepare graduates to provide complex care for patients and families, groups and communities. Graduates will be adept at improving healthcare systems and may address the RN shortage by working as clinical faculty. DNP graduates will function at the highest level of nursing practice, and will:

- evaluate and apply scientific knowledge and evidence-based practice measures to improve health care outcomes for individuals and populations;
- utilize current research and technology to improve health care delivery systems;
- collaborate with multidisciplinary professionals to improve health care outcomes of populations;
- serve as advanced practice nurse leaders in clinical and administrative positions, promoting improved healthcare outcomes;
- evaluate healthcare policy and practices, and promote quality improvement and safety measures at all levels of health care;
- and, advocate for ethical principles in health care policy, focused on improving health care outcomes for all.

**3. Description of the Proposed Program:** The DNP addresses the growing need for doctorally prepared advanced-practice nurses with special skills in managing complex health needs in a cost effective and collaborative manner. The curriculum emphasizes the use of evidence-based practice and technology to guide administrative and clinical decisions and policy development. DNP graduates will practice at the highest level whether working with individuals, groups, or organizations and serve as leaders in health care in the State and region.

Initially the program will be offered in a cohorted sequence (minimum of 10 students) as a 38 credit post-master's option for students who already hold advanced certification as nurse practitioners, clinical nurse specialists, nurse midwives, or nurse anesthetists. Designed for working professionals, the program is expected to begin in fall 2012 may be completed in three years with students taking six credits per semester. Students, who join the program after the cohort begins or take fewer courses per semester, will take slightly longer to finish. A second cohort of post-master's students will begin in fall 2015 while the program transitions to a post-baccalaureate DNP. Courses will be delivered using a combination of facet-to-face and distance education strategies. The program will steady-state at ~38 students (13 post-Masters, 25 post-bachelors by FY19).

**Admission to the Post-Master's Program:** Admission to the Doctor of Nursing Practice program requires acceptance to the University for graduate study as well as acceptance into the DNP Program. Official transcripts from all colleges and universities attended, the Residency/Domicile Information form (for those students applying for in-state tuition), documents required of international students, and the following program-specific credentials are required:

- MS in Nursing from a nationally accredited program
- Current and active United States Advanced Practice Nursing (APN) license
- Eligibility for Maryland APN licensure
- Current U.S. Certification as Advanced Practice Nurse
- Current CPR Certification for healthcare providers
- Current resume or curriculum vitae
- Three Professional References / Letters of Recommendation
- GPA of 3.0 (on a 4.0 scale)
- Proficiency in spoken and written English with the following minimum TOEFL scores: 550 for the paper-based examination, 213 for the computer-based examination, and 80 for the Internet-based examination
- Masters level Statistics Course (within last 5 yrs)
- Interview with Graduate Program Director or Department Chair
- A 500 to 1,000-word essay outlining goals, objectives, and focused area of interest in pursuing the DNP

**Post-Master's Program Requirements:** The post-masters Doctor of Nursing Practice program consists of 38 credit hours of graduate work that may be completed over approximately three years. Clinical

and non-clinical options will be available for the specialty practice-hours component, as determined by the student and faculty advisor based on the career goals and capabilities of the student. Students interested in applying their practice hours to improving the care of individuals may complete clinical time at a primary care facility or a practice management site. Other students may wish to complete their specialty hours at a hospital or community health center, focusing on a broader application for improvement of patient healthcare outcomes. One thousand (1000) total clinical hours are required for all DNP students, which includes the clinical hours obtained during their Masters program. Graduate students must maintain at least a 3.0 GPA (4.0 scale) with a maximum of one C, and no grades lower than a C.

**Post-Master's DNP Curriculum:** The DNP curriculum is a blend of new and existing courses at Salisbury University, incorporating inter-departmental course work designed to address the varied educational needs of the DNP students, and to meet the DNP Essentials (AACN, 2006). Twenty-seven credit hours in Nursing, Finance and Political Science comprise the core of the curriculum, with another eight credit hours relating directly to the DNP Project and Practicum coursework taken toward the end of the program. Additionally, a three-credit graduate elective chosen by the student with the approval of their advisor is used to supplement the core of required courses and is tailored to student interests.

**Salisbury University's Proposed Post-Master's DNP Curriculum (Total credits = 38)**

Year One (12-15 credit hours)			
Fall 2012	Cr.	Spring 2013	Cr.
NURS XXX: Evidence Based Practice <i>Rita Nutt/Katherine Hinderer</i>	3	POSC 580: Leadership and Public Administration	3
NURS 526: Informatics <i>Dorothea McDowell</i>	3	NURS 525: Health Care Systems <i>MollyParsons / Jeffrey Willey</i>	3
Summer of Year 1, 2, or 3 Graduate Elective: 3 credits; advisor approval required			
Year Two (11-14 credit hours)			
Fall 2013	Cr.	Spring 2014	Cr.
NURS XXX: Quality Improvement <i>MollyParsons</i>	3	FINA 535: Health Care Finance <i>Perdue School of Business</i>	3
NURS 561: Health Care Management <i>Debra Webster/Jeffrey Willey</i>	3	NURS XXX: DNP Project	2
Summer of Year 1, 2, or 3 Graduate Elective: 3 credits; advisor approval required			
Year Three (9-15)			
Fall 2014	Cr.	Spring 2015	Cr.
NURS XXX: Emerging Science in Clinical Practice <i>Rita Nutt/Lisa Seldomridge</i>	3	NURS XXX: Clinical Prevention & Health Promotion <i>Molly Parsons/Voncelia Brown Laurie Rockelli/Tina Brown</i>	3
NURS XXX: Practicum (200 hours)	1-4	NURS XXX: Practicum (200 hours)	0-4
NURS XXX: DNP Project	1	NURS XXX: DNP Project	1

Note: A total of four credits of Practicum are required, with 400 hours. This course can be taken for variable 1-4 credits, (100-400 hours), *in at least 2 different areas of focus, and with advisor's approval*. These credits must be taken during year 2 or 3 of the DNP program. Possible areas of focus for the Practicum include:

- Leadership in Health Care
- Advanced Clinical Knowledge/Expertise
- Health promotion/disease prevention

- Technology in healthcare
- Genetics/Genomics in Health Care
- Policy Issues in Health Care
- Advocacy in Health Care
- Ethics Issues in Health Care
- Legal Issues in Health Care

**Graduate Electives:** Students, with the advisor’s approval, will select one three-credit graduate level elective. A list of possible elective courses available at SU and UMUC appears in Appendix 1.

**Admission to the Post-Bachelor’s Program:** Admission to the Doctor of Nursing Practice program requires acceptance to the University for graduate study as well as acceptance into the DNP Program. Official transcripts from all colleges and universities attended, the Residency/Domicile Information form (for those students applying for in-state tuition), documents required of international students, and the following program-specific credentials are required:

- BS in Nursing from a nationally accredited program
- Current and active United States Registered Nurse (RN) license
- Eligibility for Maryland RN licensure
- Current CPR Certification for healthcare providers
- Current resume or curriculum vitae
- Three Professional References / Letters of Recommendation
- GPA of 3.0 (on a 4.0 scale)
- Proficiency in spoken and written English with the following minimum TOEFL scores: 550 for the paper-based examination, 213 for the computer-based examination, and 80 for the Internet-based examination
- Interview with Graduate Program Director or Department Chair
- A 500 to 1,000-word essay outlining goals, objectives, and focused area of interest in pursuing the DNP

**Post-Bachelor’s Program Requirements:** The post-bachelor’s Doctor of Nursing Practice program consists of 80 credit hours of graduate work that may be completed over approximately five years. Like the post-Master’s program, clinical and non-clinical options will be available for the specialty practice-hours component. These options will be determined by the student and faculty advisor and will be based on the career goals and capabilities of the student. Students interested in applying their practice hours to improving the care of individuals may complete clinical time at a primary care facility or a practice management site. Other students may wish to complete their specialty hours at a hospital or community health center, focusing on a broader application for improvement of patient healthcare outcomes. One thousand (1000) total clinical hours are required for all DNP students, plus addition hours (see below) for post-Bachelor’s students. Graduate students must maintain at least a 3.0 GPA (4.0 scale) with a maximum of one C, and no grades lower than a C.

**Post-baccalaureate DNP Curriculum:** The post-baccalaureate curriculum is designed for students who wish to earn the terminal degree for advanced practice nurses while also preparing for certification as family nurse practitioners through the AANP (American Academy of Nurse Practitioners) or the ANCC (American Nurses Credentialing Center). An additional 200 practicum hours are required because students in this track are building skills as beginning nurse practitioners while completing the terminal degree (DNP) and do not have practice experience as nurse practitioners prior to entering the program. These 200 hours may be spent in focused care of individuals (adults or children) or in specialty practice (e.g. cardiology).

Students complete the following courses (see pp. 6-8 for descriptions) in the proposed sequence:

**Salisbury University’s Proposed Post-Baccalaureate DNP Curriculum (Total credits=80)**

Year One (21 credit hours)
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Fall 2015	Cr.	Spring 2016	Cr.
NURS 512 Advanced Health Assessment	4	MATH 502 Applied Statistics	3
NURS 522 Advanced Pharmacotherapeutics	3	NURS 544 Quantitative Research	3
NURS 515 Epidemiology	3	NURS 516 Family Nursing	5
Year Two (22 credit hours)			
Fall 2016	Cr.	Spring 2017	Cr.
BIOL 552 Advanced Pathophysiology	3	NURS 514 Issues in Advanced Practice	3
NURS 542 Qualitative Research	3	NURS 559 Women & Children's Health Care Management	5
NURS 558 Adult Health Care Management	5	Graduate Elective (advisor approval required)	3
Year Three (12 credit hours)			
Fall 2017	Cr.	Spring 2018	Cr.
NURS XXX: Evidence-Based Practice	3	POSC 580: Public Administration	3
NURS 526: Informatics	3	NURS 525: Health Care Systems	3
Year Four (13 credit hours)			
Fall 2018	Cr.	Spring 2019	Cr.
NURS XXX: Quality Improvement	3	FINA 535: Health Care Finance	3
NURS 561: Health Care Management	3	NURS XXX: DNP Project	2
Summer: NURS XXX DNP Practicum (200 hours=2 credits)			
Year Five (12 credit hours)			
Fall 2019	Cr.	Spring 2020	Cr.
NURS XXX: Emerging Science in Clinical Practice	3	NURS XXX: Health Promotion and Clinical Prevention Services	3
NURS XXX: Practicum (200 hours)	2	NURS XXX: Practicum (200 hours)	2
NURS XXX: DNP Project	1	NURS XXX: DNP Project	1

#### Clinical Hour Allocation for Post-Baccalaureate DNP Students

Course	Clinical Hours	Cumulative Total
NURS 512 Adv Health Assessment	150	150
NURS 516 Family	90	240
NURS 558 Adult Health Management	180	420
NURS 559 Women's/Children's Health Management	180	600
NURS XXX DNP Practicum-area 1	200	800
NURS XXX DNP Practicum-area 2	200	1000
NURS XXX DNP Practicum-area 3	200	1200

**4. Demonstrable quality of program faculty:** The Department of Nursing has 18 tenured or tenure-track faculty. Fifteen are doctorally prepared (PhD, EdD, or DNP) and are engaged in significant and ongoing scholarship. Two are nearing completion of a PhD in Nursing (one in 2010, one in 2012). Three hold family nurse practitioner certification. Several others are certified as clinical nurse specialists. The department as a whole has expertise in many areas of nursing, but has particular strengths in the areas of quantitative and qualitative research, organizational leadership/management, informatics and information technology, ethics, health care policy, epidemiology, and advanced healthcare management. Eleven faculty have completed an extensive workshop on creation of on-line and hybrid courses and bring experience in offering courses in



distance formats. At least two other faculty are scheduled to complete this workshop over Summer 2010.

A list of current full-time faculty with credentials and areas of expertise appears below. In addition, several new faculty will be hired in the coming years due to retirements, development of a Simulation Center, and the introduction of the DNP. Specific faculty who will develop and teach DNP courses are identified in the post-master's DNP curriculum plan.

**Salisbury University Nursing Faculty** († denotes faculty who have received formal training in the development and delivery of courses in a fully online or hybrid environment).

Karen K. Badros, EdD, CRNP	Quantitative research, advanced health care management,-women's health
Susan B. Battistoni, PhD, RN†	Clinical nurse specialist, organizational leadership and management
Michele L. Bracken, PhD, WHNP-BC†	Women's health nurse practitioner, qualitative research
Tina P. Brown, EdD, RN†	Advanced health care management-psych/mental health
Voncelia S. Brown, PhD, RN†	Family theory
William T. Campbell, EdD, RN†	Organizational leadership/management
Mary DiBartolo, PhD, RN, BC†	Organizational leadership/management
Katherine Hinderer, PhD,c, MS, RN, CCRN	Adult critical care nursing, adult health nursing
Karin E. Johnson, DrPh, RN†	Health policy, public health specialist
Mary K. Kane, MSN, CS-P, CRNP†	Advanced health care management-adult, ethics
Dorothea McDowell, PhD, RN†	Information technology/informatics
Rita J. Nutt, DNP, RN†	Evidence based practice, genetics, genomics
Molly T. Parsons, EdD, CRNP	Advanced health care management-adult and children's health; quality improvement
Laurie A. Rockelli, PhD, PMHCNS-BC	Advanced health care management-psych/mental health
Lisa Seldomridge, PhD, RN	Health care systems, quality improvement
Catherine M. Walsh, PhD, RN	Quantitative research, ethics
Debra A. Webster, EdD, RNBC, CNE†	Health care management, advanced health care management-psych/mental health
Jeffrey A. Willey, MSN, MEd, CNS, RN†	Legal nurse consultant, epidemiology, information technology/informatics
To be hired (tenure track)	Simulation center specialist, technology (position shared among DNP, bachelors, and Sim Center Programs)
To be hired (tenure track)	Nurse practitioner-women's and children's health
To be hired (tenure track)	Health policy, public health, epidemiology, ethics, global health
To be hired (tenure track)	Nurse practitioner-adult health, advanced physiology

The DNP program will be staffed through a combination of new and existing faculty including full-time and adjunct faculty. Adjunct faculty will be required to have a minimum of a Master's degree in their field of specialization. Additional administrative reassigned time to support distance education efforts will be secured through workload reallocation.

**5. Student audience to be served by program:** The audience for the proposed post-master's DNP program is expected to consist of three populations of students: a) Master's-prepared advanced practice nurses (nurse practitioners and clinical nurse specialists) who live and work on the Eastern Shore, including southern Delaware, who will be seeking the terminal degree without having to travel; b) Recent graduates of the SU family nurse practitioner program who wish to be optimally credentialed for their future advancement - the SU family nurse practitioner track is the largest among the Department's graduate tracks and considerable interest from these graduates is expected; and c) Master's-prepared advanced practice nurses who wish to be employed as clinical faculty.

The audience for the proposed post-baccalaureate DNP program is likely to be graduates of SU's baccalaureate nursing program, especially for students in SU's second-BS degree in Nursing. Some graduates from other BS programs in Nursing would be welcome. Recent expansion of SU's second-degree BS program may provide a substantial pool of highly able applicants as these students continue in graduate study at a higher rate than first degree BS students (Seldomridge and DiBartolo, 2005).

SU nursing alumni, current graduate nursing students, and local nurse practitioners were surveyed to determine the level of interest in a DNP program at SU. Thirty-nine percent (22/57) of the post-baccalaureate respondents indicated a strong desire to pursue a DNP with an additional 41% (24/57) indicating some interest in pursuing such a degree. Several commented that they were "eager to have the degree offered at SU because they would otherwise have to go to Baltimore to study." Forty percent of survey respondents indicated a preference for full-time study while 69% preferred to take 1-2 courses/semester and work part-time. Preferred course delivery methods were hybrid (72%), on-line (68%), or face-to-face (68%). For face-to-face classes, 81.4% preferred evening class meeting times or weekends (67%).

Current undergraduate students (1<sup>st</sup> and 2<sup>nd</sup> BS degree-seekers) were also surveyed. Responses mirrored the data above with 16/43 (37%) indicating a definite desire and 20/43 (46%) noting some desire to pursue a DNP at SU. This group also preferred taking 1-2 courses/semester via hybrid delivery, followed by online and face-to-face. Similarly, for face-to-face class meetings, a clear majority expressed a preference for evenings or weekends.

The DNP will be offered in Fall 2012 as a post-Master's option to students who already hold certification as nurse practitioners. Full-time enrollment for this cohort is projected at 10. Three to four additional students are expected to join the cohort that will offset any attrition. In Spring 2015, the first DNP graduates are expected. The family nurse practitioner track will continue to be offered at the master's level through 2015, creating a seamless transition into the post-master's DNP coursework. In fall 2015, the post-baccalaureate DNP curriculum will begin. All programs will be offered through a blend of face-to-face, hybrid, and online strategies. Courses already offered in a distance format are noted in the post-baccalaureate DNP curriculum plan.

**SU DNP Enrollment Projection (Includes Attrition)**

Academic Year	2012/2013	2013/2014	2014/2015	2015/2016	2016/2017
<b>Post-masters Full-time</b> (≥6 credits /semester)	10	9	8	10	9
<b>Post-masters Part-time</b>	3	4	4	4	4
<b>Post-baccalaureate Full-time</b>				6	8
<b>Post baccalaureate Part-time</b>				4	6
<b>Total DNP Students</b>	13	13	12	24	27

**Similar programs in the State**

Currently there are two post-master's DNP programs in Maryland both located in Baltimore (University of Maryland and Johns Hopkins University). Consistent with national trends, these programs are operating at full capacity and have turned away qualified applicants. A third DNP program offered by Coppin State University recently received approval by the USM. Each of these programs serves different student audiences, focuses on health care issues in an urban setting, and is located on the Western Shore. Because of the unique issues related to health care delivery in a rural setting and concerns about ease of access to advanced education, a DNP program specializing in rural health and located on the Eastern Shore is needed.

**6. Impact on student's technology fluency:** A core element of the DNP program (Essential #4) is the use of information technology and patient-care technology for the improvement and transformation of healthcare. To develop these skills, the program will emphasize access and use of scientific literature, advanced

patient-care equipment, electronic medical records, extraction of practice information from databases, consumer use of health care information systems, among others. A Simulation Center housing state-of-the-art high fidelity manikins and designed for use of standardized patients (actors who portray patients) will be available for DNP student use. Through use of the videocapture capabilities in the Sim Center, DNP students will refine their advanced practice skills after review of patient interactions with self, peer, and faculty critique. Opportunities for documentation of electronic medical records also will be developed as part of the Sim Center.

**7. Fordice Impact Analysis:** The University has examined the new proposal to assess whether or not it is traceable to racial segregation practices. It has been determined that the program is not based on the responses to the following criteria:

1. The new program is not in-and-of-itself traceable to prior segregation, nor would it produce or promote such policies and practices.
2. The new program will not produce any segregative effects. Diversity is important to the University and to the program offering. Course offerings do not exclude any racial/ethnic groups from equal access to instruction since courses will be offered in a hybrid format. Students will also have 24-hour access to most aspects of coursework via Blackboard (MyClasses) and Tegrity. Therefore, access is available to all who apply and are admitted to the program.
3. The new program is supported by sound educational purposes. The program proposal is being submitted in response to the following:
  - The American Association of Colleges of Nursing mandates that by 2015 all accredited Nursing programs must offer the DNP as basic preparation for advanced practice nurses or risk forfeiting their accreditation. Also accrediting bodies such as the Middle States Commission on Higher Education have established standards for the University as well as commended the goals set forth by the institution. As part of the review process, the University will have to report on progress related to goals such as maintaining quality and relevant academic programs and access to those programs by students.
  - Need for DNP as evidenced by labor market conditions, alignment with the 2009 State Plan for Higher Education, alignment with those areas defined by the State as having critical shortages.
  - The University's mission is advanced by the development of new and appropriate academic programs. Communities locally, regionally, and nationally will benefit from the services provided by the professionals who have completed degrees from this program.

**8. Library requirements:** To support Salisbury University's first doctoral level program, several additional library resources will be needed including web access to several databases not currently held by the Blackwell library, expansion of the core book collection, and subscriptions to specialty journals. See attached Analysis of Library Resources (Appendix 2).

**9. Facilities and equipment:** The program will be housed in Devilbiss Hall, an academic building containing smart classrooms, several of which are equipped for some distance education, and practice laboratory space. Specialized experiences will be scheduled at the new Simulation Center, a state-of-the-art facility housing high fidelity manikins and equipped for encounters with standardized patients. Initially, course delivery will be hybrid- a blend of face-to-face (late afternoons and evenings) and online using WebCT (MyClasses). Ongoing support for faculty development of on-line courses is available on the SU campus through the Instructional Design and Delivery Center. Courses may be video-streamed using specially designed classrooms in Devilbiss Hall (DH 217) or SU's Teacher Education and Technology Center (TETC). Additional faculty office space will be secured on the 3<sup>rd</sup> floor of Devilbiss Hall and in the Simulation Center. Eventually, the Simulation Center is expected to house a 25-seat smart classroom, a seminar room, and student lounge. Clinical preceptorships and practica will be provided through affiliation agreements with physicians, nurse practitioners, health departments, and local hospitals.

TABLE 1: RESOURCES					
Resources Categories	FY13	FY14	FY15	FY16	FY17
1. Reallocated Funds	\$125,000	\$125,000	\$125,000	\$125,000	\$125,000
2. Tuition/Fee Revenue (c+g below)	\$81,060	\$87,460	\$71,580	\$160,120	\$191,340
a. #F.T. Students	8 resident 2 non-res	8 resident 1 non-res	7 resident 1 non-res	12 resident 4 non-res	13 resident 4 non-res
b. Annual Tuition/Fee Rate	\$6,240 to \$8,320 <sup>1</sup>  \$7,920 to \$10,560 <sup>2</sup>	\$6,240 to \$8,320 <sup>1</sup>  \$7,920 to \$10,560 <sup>2</sup>	\$6,240 to \$8,320 <sup>1</sup>  \$7,920 to \$10,560 <sup>2</sup>	\$6,240 to \$8,320 <sup>1</sup>  \$7,920 to \$10,560 <sup>2</sup>	\$6,240 to \$8,320 <sup>1</sup>  \$7,920 to \$10,560 <sup>2</sup>
c. Annual Full Time Revenue (a x b)	\$65,760	\$67,480	\$51,600	\$120,160	\$140,760
d. # Part Time Students	2 resident 1 non-res	3 resident 1 non-res	3 resident 1 non-res	6 resident 2 non-res	7 resident 3 non-res
e. Credit Hour Rate	\$520 <sup>1</sup> \$660 <sup>2</sup>	\$520 <sup>1</sup> \$660 <sup>2</sup>	\$520 <sup>1</sup> \$660 <sup>2</sup>	\$520 <sup>1</sup> \$660 <sup>2</sup>	\$520 <sup>1</sup> \$660 <sup>2</sup>
f. Annual Credit Hours	9	9	9	9	9
g. Total Part Time Revenue (d x e x f)	\$15,300	\$19,980	\$19,980	\$39,960	\$50,580
3. Grants, Contracts, & Other External Sources <sup>3</sup>	\$0	\$5,000	\$10,000	\$10,000	\$15,000
4. Other Sources <sup>4</sup>	\$60,000	\$50,000	\$160,000	\$200,000	\$175,000
TOTAL (Add 1 - 4)	\$266,060	\$267,460	\$366,580	\$495,120	\$506,340

<sup>1</sup> Resident (\$520 per credit hour); 12 to 16 credit hours per year

<sup>2</sup> Non-Resident (\$660 per credit hour); 12 to 16 credit hours per year

<sup>3</sup> Potential funding sources will be the Health Resources and Services Administration, the Maryland Hospital Association and regional health care providers such as Peninsula Regional Medical Center and/or Atlantic General Hospital. In addition SU will have a Dean of Graduate Studies and Research beginning July 1, 2010 who has expertise in dealing with Federal and other agencies to help spearhead this effort. In the unlikely event grant funds are not forthcoming, SU will redirect additional funds from its expanded second bachelor's program in Nursing (see footnote 4). If more grant funds are acquired the amount in the Other category in the above table will be reduced.

<sup>4</sup> This is new money that SU will generate because of the expansion of an SU second Bachelor's program for Nurses. The cost of expansion is minimal due to support from two existing grant awards which are expected to become permanent sources of funding.

**TABLE 2: EXPENDITURES**

Expenditure Categories	FY13	FY14	FY15	FY16	FY17
1. Total Faculty Expenses (b + c below)	\$171,600	\$171,600	\$277,200	\$382,800	\$382,800
a. # FTE	1.625	1.625	2.625	3.625	3.625
b. Total Salary	\$130,000	\$130,000	\$210,000	\$290,000	\$290,000
c. Total Benefits (32%)	\$41,600	\$41,600	\$67,200	\$92,800	\$92,800
2. Total Administrative Staff Expenses (b + c below)	\$31,680	\$31,680	\$31,680	\$31,680	\$31,680
a. # FTE	1	1	1	1	1
b. Total Salary	\$24,000	\$24,000	\$24,000	\$24,000	\$24,000
c. Total Benefits	\$7,680	\$7,680	\$7,680	\$7,680	\$7,680
3. Total Support Staff Expenses (b + c below)	\$0	\$0	\$0	\$0	\$0
a. # FTE	0	0	0	0	0
b. Total Salary	\$0	\$0	\$0	\$0	\$0
c. Total Benefits	\$0	\$0	\$0	\$0	\$0
4. Equipment	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000
5. Library	\$37,538	\$35,038	\$35,038	\$35,038	\$35,038
6. New or Renovated Space	\$15,000	\$0	\$0	\$0	\$0
7. Other Expenses	\$18,220	\$25,870	\$17,720	\$29,480	\$32,840
<b>TOTAL (Add 1 - 7)</b>	<b>\$284,038</b>	<b>\$274,188</b>	<b>\$371,638</b>	<b>\$488,998</b>	<b>\$492,358</b>