Faculty Qualifications, Faculty Development, and Student Admissions Criteria Relative to Practice Doctorate Programs: Recommendations

Prepared by a NONPF Subcommittee¹ of the NONPF Practice Doctorate Task Force

The subcommittee acknowledges that all of the recommendations regarding faculty and students need to be considered along with the specific policies of the school and college or university in which the practice doctorate program resides.

Faculty Qualifications, Faculty Development

Transition to Practice Doctorate Programs Taught by Faculty who are all Doctorally-prepared

The quality of a practice doctorate program (e.g., DNP program) will depend on the qualifications of the faculty teaching the didactic courses and supervising the clinical experiences. At a yet to be determined date in the future, all faculty teaching in practice doctorate programs should be doctorally-prepared. However, during the period of transition from master’s level programs to doctoral level programs, master’s prepared faculty who have been teaching graduate level NP and APN courses will likely be needed to teach the same or similar courses in the first two years of practice doctorate programs. However, even during the transition period, doctorally-prepared faculty should be responsible for all courses that are beyond the master's specialty level.

Specific qualifications for faculty in practice doctorate programs need to reflect the course responsibility.

Clinical Courses and Clinical Practica

Faculty who teach in clinical courses need to have current certification in the related area of clinical practice and relevant clinical experience. If the course is beyond the master's level, the faculty member also needs to have a doctorate in addition to the criteria for clinical competence.

Inquiry Courses and Inquiry projects

All faculty who teach inquiry, research methods, and advise or chair the practice doctorate students’ inquiry or scholarly projects should have doctoral degrees. These faculty should be actively engaged in their own scholarly projects.

Faculty Development

The quality practice doctorate programs will be greatly enhanced by schools that cultivate a culture of doctorally-prepared clinicians among the faculty who teach practice doctorate courses. Schools of Nursing will benefit by making a commitment to support faculty development for the existing masters prepared faculty teaching advanced practice nurses who wish to teach in

¹ NONPF Subcommittee Members: Marva M. Price, DrPH, RN, APRN-BC, FAAN, Subcommittee Chair, Duke University; Susan Flagler, DNSc, RNC, University of Washington; Judy Honig, EdD, DrNP, CPNP, Columbia University; Shelley Huffstutler, DSN, APRN-BC, FNP, GNP University of Alabama; Sharon Lock, PhD, RN, ARNP, University of Kentucky; and Cheryl Stegbauer, PhD, FNP, APRN, BC, University of Tennessee
practice doctorate programs. University policies and personal choice will likely influence whether
current masters prepared faculty seek doctoral level preparation at the same or different
institution where they are employed as faculty.

**Faculty Mix will Reflect Requirements Within the Program**
The array of courses that will make up the requirements for each practice doctorate program will
require a mix of faculty skills and expertise. Thus, these programs will be taught by a mix of
clinicians, nursing faculty, and faculty prepared outside of nursing for non nursing courses, i.e.,
statistics, epidemiology, etc.

**Employment and Promotion Criteria**
Faculty hired to teach courses in the practice doctorate program should be subjected to the same
hiring standards as all faculty as related to the interview, portfolio, and the hiring process.
Likewise, promotion criteria are determined by each institution’s promotion and tenure policies.

Qualities viewed as important are listed below. The characteristics are not listed in order of
importance. The salience of given characteristics will depend on the nature of the courses
(clinical specialty, inquiry methods) in the projected teaching assignment.

- Passion for practice related teaching.
- Articulate and able to speak authoritatively about the profession and it’s future direction.
- Demonstrated evidence of critical thinking including critique, analysis, evaluation,
synthesis and integration in professional domains.
- Demonstrated currency in nursing knowledge; and use of technology to support teaching
and patient care. It is essential for faculty to be current in their area of teaching and
practice specialty if teaching clinical courses.
- Demonstrated evidence of publications and scholarly presentations related to advanced
practice.
- Vision, creativity, and innovation about the possibilities for nursing's leadership in
creating, shaping a health care system.
- Commitment to ethnic diversity.
- Compassion for improving care of vulnerable groups.
- Content expert and one who strives to improve teaching on an on-going basis.
- Demonstrated evidence of interpersonal skills, networking abilities, and intraprofessional
and interprofessional collaboration. These are highly desirable for faculty assisting
students to do leadership activities and research projects.

**Scholarly Project Mentorship**
Each clinical project should be mentored by a faculty member with doctoral preparation who
possesses the knowledge relevant to the area and/or methods of the student’s project. This
faculty member may or may not be a match regarding specialty preparation. When the student’s
main project advisor is not a match for the student’s specialty, it is anticipated that in the vast
majority of cases, at least one member of the committee have the same specialty. The
composition of the committee supervising the student’s clinical project needs to reflect the
guidelines of the institution. More latitude in committee membership may be possible when the
doctoral degree (e.g., DNP) is being awarded by the School of Nursing rather than by the
university’s Graduate School.

**Mentorship Priorities**
When a faculty member has not been involved with teaching advanced practice coursework and
especially advanced clinical coursework, the faculty member new to teaching practice doctorate-
level course work should have a formally appointed faculty mentor or co-teacher who is
experienced with teaching practice doctorate students. With a mentor or co-teacher, the faculty
new to practice doctorate teaching can learn the appropriate expectations for this level of
student. Being a successful practice doctorate student and then graduate is not sufficient
preparation for an individual to be a successful faculty member for practice doctorate
coursework. The length of this mentorship will depend on the new faculty member’s background
and experience as well as aptitude for learning new roles. The Criteria for Evaluation of Nurse
Practitioner Programs discuss that all faculty involved in NP education who have less than 1 year
of experience will have an experienced faculty member as a mentor in both clinical and teaching

Student Admissions Criteria

Applicants to practice doctorate programs should be evaluated on a variety of characteristics that
includes evidence of scholarly ability (such as GPA and formal paper), professional goals
consistent with an advanced practice role, written essays in response to specific questions (such
as describe how you assumed a leadership role in your role as a nurse), past nursing and
leadership experiences, as well as other characteristics that will assist schools in selecting
individuals with the potential to excel in clinical practice, leadership, and practice inquiry. Of
paramount importance is the fit between the applicant’s professional goals and the school’s
practice doctorate program objectives and available specialty options.

Pre-requisite:
• Board certification in an advance practice specialty.
  We acknowledge that programs may admit applicants who receive advance practice
  preparation while in the program.
• Unencumbered Registered Nursing licensure.
• Graduate Record Examination (GRE) and grade point average (GPA) requirements differ
  among graduate programs across the United States. When required, the GRE and GPA
  scores are at a level commensurate with the admissions policies and rigor for the
  particular graduate school. Applicants should be given an opportunity to explain areas
  that do not fall within the desired DNP program entry level.
• For example, a GPA that is lower than 3.0 may reflect a competent and scholarly nurse
  whose family and work responsibilities resulted in achieving lower grades than would be
  the case without such responsibilities.
• While assessment of an applicant’s ability to interact with peers, the healthcare team,
  and patients is important, personality trait tests such as Myers Briggs are not the
  recommended mode to judge the applicants fit for a DNP program, nor ability to work
  well with a team.
• Three strong professional references based upon the standard criteria for each particular
  graduate program. References must address academic skills including oral and written
  communication as well as clinical competence.

Written and oral application process that includes:
• Resume or CV if progression of leadership in advance practice positions cannot be fully
  obtained from the written application.
• Description of advance practice experiences and settings
• Scholarly evidence-based case study that best exemplifies their level and depth of
  advance practice.
• Articulation as to “why now” for the practice doctorate
• Face-to-face interview

2 National Task Force on Quality Nurse Practitioner Education. (2002). Criteria for evaluation of
nurse practitioner programs. Washington, DC: National Organization of Nurse Practitioner
Faculties.
Team approach with at least four faculty members of varying specialties. The goal is to determine that the applicant's goals and interests are a good fit for a particular practice doctorate program. The interview team members' specialties may vary depending on the topic interest of the applicant.

- Ideally, four members are a good number in case one member cannot be there, such that there are always at least three present on the interview team. However, the number and composition of the interview team will depend upon the school's faculty resources.

- The face-to-face interview will better facilitate discussion of goals and potential for advanced practice strengths.

- The interview can determine which type of doctoral studies (Practice Doctorate versus PhD) the applicant's educational profile and goals match as well as assist in identifying the most desirable applicants.

  - An example of the written or orally administered questions includes:\n
    1. Please describe your future professional goals, including your plans for future scholarship, leadership and practice. Include your reasons for selecting the program. Why did you choose your identified area of emphasis or clinical focal area?

    2. Please describe your professional experiences working in underserved areas or with people who experience social disparities in health. Discuss how you envision your future role as a doctorally prepared practitioner working to reducing disparities in health.

    3. Please tell us about aspects of your life that are not apparent from your transcript, choosing from such aspects as: a character defining moment; the cultural awareness you have developed; how your family or cultural history has enriched you or presented you with challenges in pursuing your educational goals; a personal hardship or barrier overcome.

    4. Please describe your past leadership experiences.

    5. Additional comments: Is there anything else you would like us to know about you?

Attributes that may be helpful in evaluating the best applicants and their potential for program and professional success are included below.

- Clarity career of goals in 5, 10 years.
- A “yearning for learning”; curiosity, creativity; and high potential for innovativeness.
- Passion for advance practice nursing and a beginning vision for making contributions to their specialty area and applicability of the practice doctorate degree.
- Ability to adequately communicate clearly and articulately, both orally and in writing is expected. If English and language skills are not at a level considered proficient, the candidate may have other characteristics that can be evaluated with potential for improvement and mastery that compensate for minimally acceptable level of communication skills at program entry.
- Interpersonal skills are essential, and evidence of collaboration is an asset.

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3 University of Washington School of Nursing Spring 2006 Draft of DNP Application Materials by DNPCC Admissions and Recruitment work group, Work group led by Carole Schroeder, PhD, Seattle.
• Intellectual skills; critical thinking including critique, analysis, evaluation, synthesis and integration.
• Notable success in previous academic and practice settings.
• Leadership and change agent ability or potential as demonstrated by participation in health care committees, professional or service organizations, or community involvement.
• Leadership and positive change abilities, and if none – potential for contribution to a professional organization; and quality and safety of care.
• Practice inquiry or research ability consistent with practice doctorate. At a minimum, applicants should be clear about their clinical inquiry focus, or the provision of expert, evidence-based, ethical, comprehensive care to a population of individuals and families.
• Availability of a faculty mentor for scholarly project.
• Networking skills, these can be taught, practiced, and acquired.
• Persistence despite barriers to achieving goal.
• Cultural sensitivity and ability to articulate one's philosophy in provision of care to individuals and families who are different from themselves.
• Depth and breadth in current nursing knowledge and skills, along with at least an average skill level in the use of technology to support knowledge and practice.
• At least a minimal level of scholarship and professional productivity in some of these areas: Publications, presentations, involvement in research, evaluation, outcomes, or quality improvement projects. These may be presented in a portfolio as a part of the admissions criteria.
• Beginning knowledge of evidence based practice.

Other recommendations include personal and professional characteristics that gained consensus for advance practice nursing student preadmission criteria among advance practice faculty across the United States: 4

• Ethical, trustworthy
• Responsible
• Accountable judgment
• Emotional stability
• A finisher
• Knows own limits
• Conscientious
• Compassionate
• Capable of managing stress
• Flexible
• Collaborative
• Self-confident
• Engages in continued learning
• Strong nursing identity
• Aware of healthcare issues
• Respected by peers
• Translates theory into practice
• Self-reflective and accurate in self-critique
• Ability to receive and use constructive feedback
• Respectful of individual differences
• Creative or innovative
• Has potential for making a contribution to nursing and health care