

Preparing DNP Graduates to Be Leaders in Health Policy  
Development and Implementation:  
The Role of the Nurse Educator

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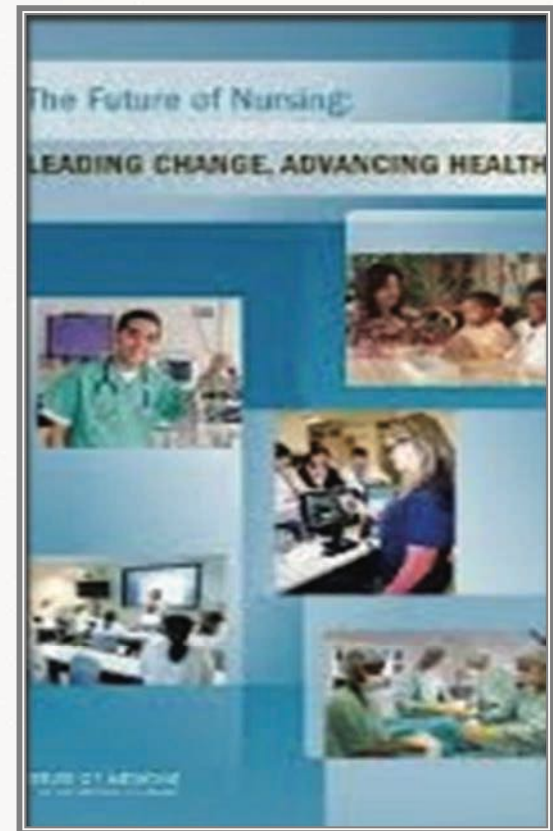


# IOM Report: The Future of Nursing

*The Future of Nursing: Leading Change Advancing Health* states:

- 1) Nurses should practice to the full extent of their education and training;
- 2) Nurses should achieve higher levels of education and training through an improved education system that promotes seamless academic progression;
- 3) Nurses should be full partners with physicians and other health professionals in redesigning health care in the United States;
- 4) Effective workforce planning and policy making require better data collection and an improved information infrastructure.

(Institute of Medicine, 2010)



## What Does the National Council of State Boards of Nursing Say?

“Because nursing care poses a risk of harm to the public if practiced by professionals who are unprepared or incompetent, the state, through its police powers, is required to protect its citizens from harm. That protection is in the form of reasonable laws to regulate nursing. State legislatures delegate many enforcement activities to state administrative agencies. In the case of the nursing profession that delegation is to boards of nursing. The charge from the state to the board of nursing is to protect the public.”

“The practice of nursing is a right granted by a state to protect those who need nursing care. The guidelines of the NPA [sic Nurse Practice Act] and its rules provide safe parameters within which to work, as well as protect patients from unprofessional and unsafe nursing practice. The act is a dynamic document that evolves and is updated or amended as changes in scope of practice occur.”

“The laws of the nursing profession can only function properly if nurses know the current laws governing practice in their state. Ignorance of the law is never an excuse!”

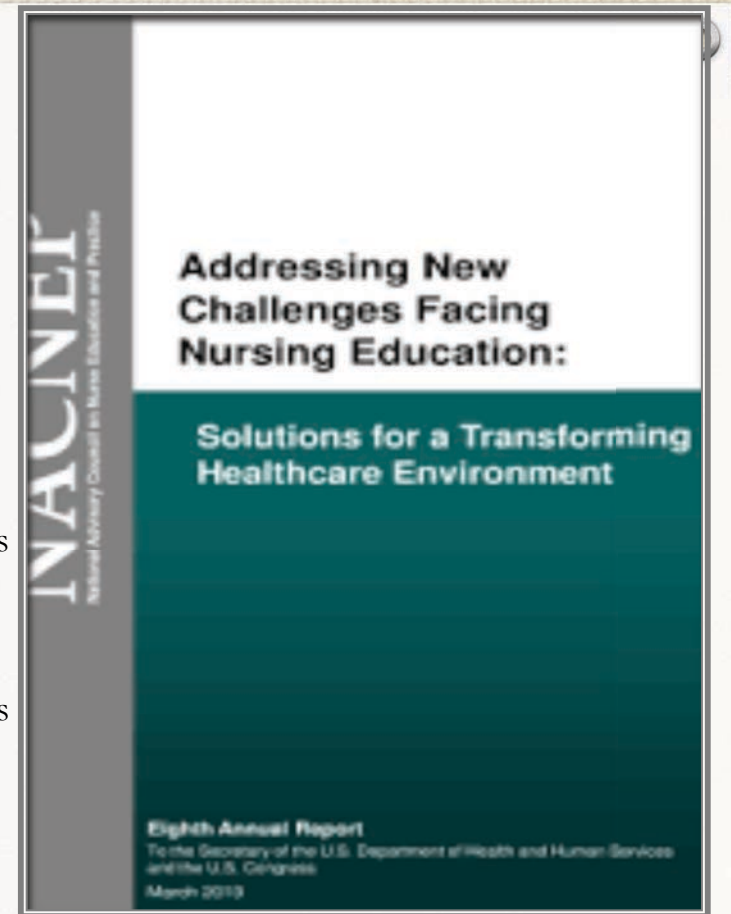
(National Council of State Boards of Nursing, n.d.)





## National Advisory Council on Nurse Education and Practice's ideas about the DNP degree include:

- The DNP provides for “advanced competencies for increasingly complex clinical and leadership roles.” The DNP “provides nurses with enhanced knowledge to improve practice, which leads to improved patient outcomes” and “provides additional leadership skills to strengthen practice and healthcare delivery” (NACNEP, 2010, p. 10).
- The DNP “emphasizes clinical practice leadership development in direct clinical care delivery, translational and comparative effectiveness patient outcomes research, and facilitation of health care systems change and innovation” (NACNEP, 2010, p. 10).
- Less than 1% of nurses in the United States have a doctoral degree (NACNEP, 2010).

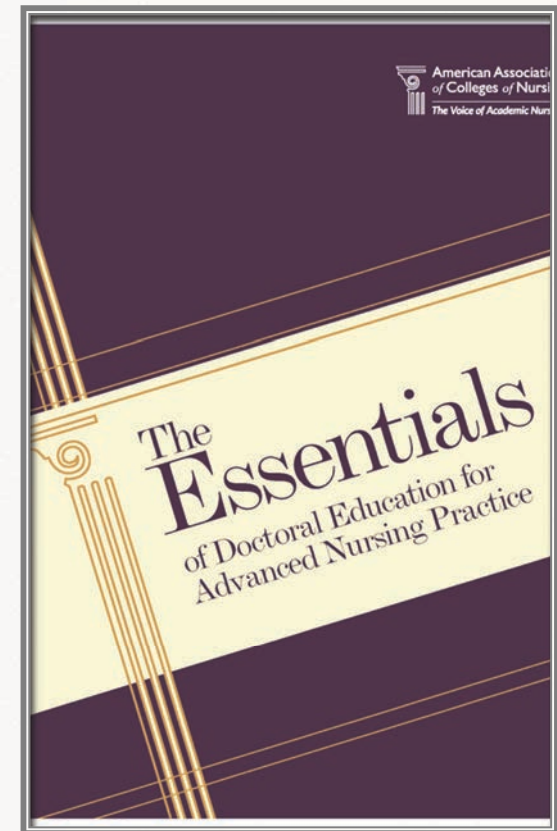


## AACN Essential V: Advocacy in Health

“The DNP program prepares the graduate to:

1. Critically analyze health policy proposals, health policies, and related issues from the perspective of consumers, nursing, other health professions, and other stakeholders in policy and public forums.
2. Demonstrate leadership in the development and implementation of institutional, local, state, federal, and/or international health policy.
3. Influence policy makers through active participation on committees, boards, or task forces at the institutional, local, state, regional, national, and/or international levels to improve health care delivery and outcomes.
4. Educate others, including policy makers at all levels, regarding nursing, health policy, and patient care outcomes.
5. Advocate for the nursing profession within the policy and healthcare communities.
6. Develop, evaluate, and provide leadership for health care policy that shapes health care financing, regulation, and delivery.
7. Advocate for social justice, equity, and ethical policies within all healthcare arenas.

(AACN, 2006, p. 14)





# Selected NONPF Statements Regarding the DNP Project

## •Quality Competencies

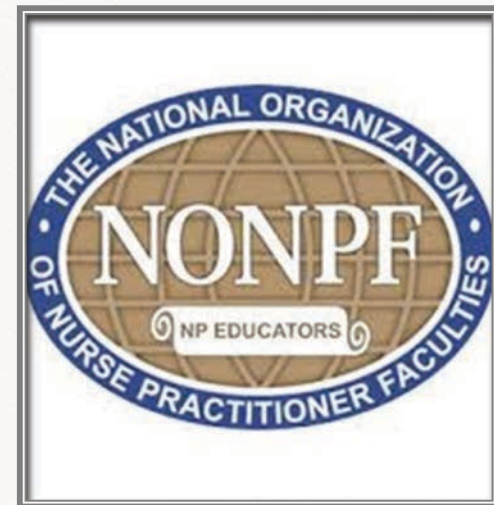
- Uses best available evidence to continuously improve quality of clinical practice.
- Evaluates the relationships among access, cost, quality, and safety and their influence on health care.
- Evaluates how organizational structure, care processes, financing, marketing and policy decisions impact the quality of health care.
- Anticipates variations in practice and is proactive in implementing interventions to ensure quality.

## •Practice Inquiry Competencies

- Provides leadership in the translation of new knowledge into practice.
- Generates knowledge from clinical practice to improve practice and patient outcomes.
- Applies clinical investigative skills to improve health outcomes.
- Leads practice inquiry, individually or in partnership with others.
- Disseminates evidence from inquiry to diverse audiences using multiple modalities.
- Analyzes clinical guidelines for individualized application into practice

## •Policy Competencies

- Demonstrates an understanding of the interdependence of policy and practice.
- (NONPF, 2013)



# DNP-prepared nurses are well-positioned to be thought leaders as well as implementors of health policy changes.

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- Nurses are qualified to speak on health policy issues, but many do not feel “called” to health policy.
- Nurses are experts at building relationships.
- Building relationships is the heart of health policy. The Nursing Process that nurses use every day can guide nurses in identifying health policy issues, gathering objective data, devising and implementing interventions to change policy, and evaluating the interventions.
- DNP-prepared nurses can help other nurses develop their policy voice.
- If DNP-prepared nurses do not engage in health policy, who will speak for nurses? PhD-prepared nurses? EdD-prepared nurses? Are these programs consistently training their graduates to engage in policy work?
- Others who are called to speak on health policy that are not qualified to speak for nurses will continue to speak for us if we do not educate nurses to do this work.