February 1, 2018

MICHAEL T. BROWN
PROVOST AND EXECUTIVE VICE PRESIDENT
UNIVERSITY OF CALIFORNIA

Re: Approval of Doctorate of Nursing Practice (DNP) degree at UC Los Angeles

Dear Michael:

In accordance with the Universitywide Review Processes for Academic Programs, Units, and Research Units (the “Compendium”), and on the recommendation of CCGA, the Academic Council has approved UC Los Angeles’ proposal to establish a self-supporting graduate program leading to a Doctorate of Nursing Practice (DNP) degree.

Because this is a new degree title, and the Assembly of the Academic Senate is not meeting within 30 days of CCGA’s approval, Council must approve the program per Senate Bylaw 125.B.7.

I am enclosing CCGA’s report on its review of the new program, and respectfully request that your office complete the process of obtaining the President’s approval.

Sincerely,

Shane N. White, Chair
Academic Council

Encl

Cc: Academic Council
    Senate Director Baxter
    Senate Executive Directors
January 18th, 2018

Dear Shane,

At its January 3rd, 2018 meeting, the Coordinating Committee on Graduate Affairs (CCGA) voted unanimously to approve UCLA’s proposal for a new self-supporting graduate professional degree program (SSGPDP) leading to a Doctorate of Nursing Practice (DNP). The program will be administered by the School of Nursing Associate Dean of Academic Affairs, a full professor, who will have oversight of the program along with a DNP Program Director. The proposed UCLA DNP degree program will build upon the current Master of Science in Nursing (MSN) advanced practice degree program.

The proposal establishes a SSGPDP with a hybrid on-line curriculum format. The DNP will be the first self-supporting degree program in the UCLA School of Nursing. The DNP program will require 61 quarter units and can be completed in 21 months. The program is designed for nurses with a Master’s degree from an accredited program of nursing in the U.S. and prepared to function at an advanced practice level (i.e. Nurse Practitioner, Nurse Administrator, or Clinical Nurse Specialist). The in class course work will be offered late Friday afternoons and on Saturdays since this degree program is designed for working professional nurses.

The doctoral-level coursework will focus on themes in leadership and professional collaboration, evidenced-based clinical practice, health economics, the science of change, quality improvement and program evaluation, and health care policy. The PhD program in nursing at UCLA was established as a research-intensive in 1986, whereas the practice doctorate focuses on the translation of research into advanced clinical practice to improve health outcomes.

In addition to the didactic content required for the degree, the American Academy of College of Nurses (AACN) requires a minimum of 1,000 post-Baccalaureate hours of mentored clinical and organizational leadership experience for the awarding of a DNP degree. 500 mentored clinical hours are the minimum requirement for the Master’s Program certification as a Nurse Practitioner. Students will complete an additional 540 hours as part of the 18 quarter units of clinical practicums including 90 hours of mentored teaching experience. Documentation of clinical practice hours during the program will be tracked by the DNP Program Director. The projected enrollment for the UCLA DNP Program is 15 students in Year 1, with enrollment increasing to 20 students in Year II. The program goal is enrollment of 50 first and second year students per academic year.

The proposal was reviewed by four qualified nursing faculty. The lead reviewer solicited three external reviewers—all who have experience administering DNP programs—two at large public universities and one at a private university, and one internal reviewer—nursing faculty administrator from UCSF. All the reviewers commented on the quality and academic rigor of the proposed program including the Educational curriculum requirement. In addition, UC Planning and Budget (UCPB) reviewed the proposal and reported the proposal was financially sound including the market analysis and plans for student
tuition and fees and return-to-aid. However, UCPB and the reviewers raised some concerns and suggestions, as well as providing some constructive comments which were communicated to the proposers.

The proposers provided a detailed response to all of the concerns raised by the reviewers. At the request of CCGA, the proposers submitted a revised proposal modifying three areas of the proposal - the administrative structure of the program to include a 100% FTE as DNP Program Director, the clarification of the “Scholarly Project” requirement and criteria throughout the proposal, and the potential conflict of interest regarding the clinical practicums. The proposer developed a contract to address conflict of interest for students who might have course-related experiences or activities in their worksite. CCGA believes the proposed UCLA DNP Program has been rendered stronger by the review process. I have included the lead reviewer’s final report as an enclosure for your review.

As you know, CCGA’s approval is usually the last stop of the Academic Senate side of the systemwide review and approval process except when the new degree title must be approved by the President, under delegated authority from the Board of Regents. Given its status as a new graduate program title on the UCLA campus, CCGA submits its approval of the UCLA Doctorate of Nursing Practice for formal approval by the Assembly of the Academic Senate.

Respectfully submitted,

Karen G. Duderstadt PhD, RN, CPNP, PCNS, FAAN
Chair CCGA 2017-2018

Enclosures (1)

cc: Shane White, Academic Council Chair
Robert May, Academic Council Vice Chair
Kimberly Peterson, Academic Planning Analysis Manager
Chris Procello, Academic Planning and Research Analyst
Scott Waugh, UCLA Executive Vice Chancellor and Provost
Linda Sarna, Dean, UCLA School of Nursing
Lynn Doering, Associate Dean of Academic & Student Affairs, UCLA School of Nursing
Report for the UC Los Angeles (UCLA) Proposal for a Self-Supporting Online Graduate Program leading to a Doctorate of Nursing Practice (DNP) degree

January 1st, 2018

Program Overview
This proposal is to establish a new, self-supporting professional graduate degree (SSPGD) program leading to a Doctorate of Nursing Practice (DNP) at University of California, Los Angeles (UCLA). The proposed UCLA DNP degree program will be built upon the current Master of Science in Nursing (MSN) advanced practice degree program. The DNP will be the second offering for a nursing doctorate at UCLA. The research-intensive PhD program in nursing at UCLA was established in 1986. The practice doctoral degree focuses on the translation of research into advanced clinical practice to improve health outcomes.

The DNP program will be administered by the School of Nursing Associate Dean of Academic Affairs, a full professor, who will have oversight of the program along with a DNP Program Director, who will be an Adjunct faculty appointment. The DNP Program Director will be responsible for implementation, governance and accreditation of the program, and day-to-day program operations including overseeing student performance, delegating teaching responsibilities, and will be the liaison to campus administration.

UCLA proposed the DNP degree program as a SSPGD rather than a Professional Degree Supplemental Tuition (PDST) program as the supplemental tuition for Nursing Science graduate programs is among the lowest of all health science programs in the UC system. There was concern by School of Nursing that it would be difficult to support the non-FTE-based clinical faculty, staff, and administrative salaries as a PDST program and maintain growth projections for the program while meeting the demands of the educational curriculum requirements.

In addition to the UCLA DNP program proposal, the UCLA proposers submitted detailed documentation of the proposal review process including the documents detailing questions raised by the UCLA GC review and the UCLA CPB review along with complete responses from the program proposers to each question. Following this vigorous review process, the proposal received campus approval.

The proposal submitted to CCGA has been reviewed by four qualified nursing faculty. All external reviewers have experience administering DNP programs. Four reviews of the proposal have been posted- one internal (UC) review, Dr. Jyu-Lin Chen from UCSF-Director of the DNP Program recently approved by CCGA (Reviewer #1)-and three external (non-UC) reviews-Dr. Dana Tschannen from University of Michigan (Reviewer #2), Susan Van Cleve, DNP from University of Iowa (Reviewer #3), and Dr. Julie Novak from SHARP Hospital San Diego (Reviewer #4). In addition, UC Planning and Budget (UCPB) reviewed the proposal and provided comments to CCGA.

Historical development of DNP degree
The need for a practice-focused doctoral program was highlighted in 2004 when the American Association of Colleges of Nursing (AACN) recommended the establishment of the DNP as the professional, practice-focused doctoral degree in nursing. The AACN recommended that the DNP be the required credential for nurses seeking Advanced Practice Registered Nursing (APRN) certification, including the roles of Clinical Nurse Specialist (CNS), Nurse Practitioner (NP), Certified Nurse Midwife and Certified Registered Nurse Anesthetist (CRNA). Nurses seeking a practice-focused doctoral degree in nursing, rather than a research-focused doctoral degree, are selecting the DNP degree as a terminal degree.
AACN determined that the DNP represented a necessary practice standard for preparation of advanced practice providers and leaders, and set 2015 as a target implementation date. Among those factors were increasing patient complexity and expectations for care delivery, national concerns about safety and quality, nursing provider shortages driving redesign of care delivery, and a nursing faculty shortage.

There are currently more than 290 DNP programs nationally enrolling students and reports of 120 additional programs that are in the planning stages. APRNs or NP providers who are currently MS prepared are not required to seek the degree.

I. Descriptions of the Program

Structure of the UCLA DNP program

The proposal establishes a SSPGDP with a hybrid on-line curriculum format. The DNP will be the first self-supporting degree program in the School of Nursing. The proposed coursework requires seven quarters for completion and can be completed within two calendar years. The program is designed for nurses with a master’s degree from an accredited program of nursing in the US and prepared to function at an advanced practice level (i.e. Nurse Practitioner, Nurse Administrator, or Clinical Nurse Specialist). The course work will be offered late Friday afternoons and on Saturdays since this degree program is designed for working professional nurses.

The proposed DNP at UCLA will require 61 quarter units and can be completed in 21 months. The curriculum overseen by the program faculty will include online and hybrid courses, live campus intensive courses, and off-campus DNP project experiences, and clinical practicum. The program design includes the intensive clinical experiences required by the nationally certified advanced practice graduate programs. The doctoral-level coursework will focus on themes in leadership and professional collaboration, evidenced-based clinical practice, health economics, the science of change, quality improvement and program evaluation, and health care policy. The faculty/student ratio will be approximately one faculty member per 12.5 students.

The UCLA DNP program will undergo an accreditation review by the national accrediting agency, the Commission for Collegiate Nursing Education (CCNE). The CCNE which reviews and accredits DNP programs after they have been in operation for one year. Since the DNP will not be a fully online program, approval from the Western Association of Colleges of Nursing (WASC) will not be required. Nursing programs in California also need to receive approval for the proposed curriculum from the California Board of Registered Nursing (BRN).

Evidence documenting completion of a minimum of 500 clinical hours during the applicant’s master’s program or previous post-master’s program are required for admission to the program. APRN national certification in one of the recognized specialty nursing roles will also satisfy documentation for this requirement. During the DNP program, students will complete 540 additional hours as part of the 18 quarter units required. Students will also be required to complete 90 hours of teaching practicum as part of their Educational Practicum in the program. 1,000 hours of mentored post-baccalaureate clinical and/or organizational leadership experiences are required for the DNP degree.

The proposed DNP program is a Post-Master’s program that builds on the Master’s degree requirements for the Advanced Practice Nursing program at the UCLA School of Nursing. The program design distinguishes the UCLA program from some other DNP programs nationally which admit nurses without a graduate degree and require a substantially higher number of units to meet the DNP competencies.

The UCLA DNP program similar to other practice doctorates will not require a dissertation, but a scholarly project focused on quality of care and patient safety issues in clinical practice. The DNP Scholarly Project will include completion of four courses (N470A-D) which will provide structured
didactic content and clinical application to guide the student’s DNP Scholarly Project. The Scholarly Project will be directly related to a practice issue in a clinical setting. A written qualifying examination will be required by each student in the DNP program in good academic standing during the fourth quarter of the program to advance. For completion of the scholarly project, students are required to present an oral defense presentation to the DNP doctoral committee, consisting of three DNP Faculty members, and submit a final written documentation of the DNP Scholarly Project for approval.

In California, opportunities for achieving the degree are currently limited to eight private universities. The UCSF DNP program will be enrolling the first cohort of students in 2018. The three approved consortiums of California State Universities offering the DNP degree will not be renewed in anticipation of the offerings through UC.

**Enrollment projections & fees**
The projected enrollment is 15 students for year 1 of the program, with enrollment increasing to 20 students in year 2 of the program, and in the third year five additional students would be admitted. The program goal is to have 25 students enrolled each year for a total of 50 DNP first and second year students per academic year.

Enrollment fee charges for the 21-month DNP program will be $60,004 per student plus other university miscellaneous fees. The DNP tuition will increase by 5.00% every year, starting in Year 2 of the program. The SSPGDP administration and finances will be separate from the state-supported School of Nursing programs.

**Return-to-Aid for Students**
The proposal addresses the return-to-aid issue and estimates that 10% of the gross revenue will be returned to the University. This figure represents an adjustment from the original proposal in response to the campus review and approval process.

**II. Strengths of the program highlighted by reviewers**
The reviewers were asked to comment on specific aspects of the proposal: (1) Quality and academic rigor of the program; (2) Adequacy of the size and expertise of faculty to administer the program; (3) Adequacy of the facilities and budgets; and (4) Applicant pool and placement prospects for the graduates.

The proposal reviewers and UCPB all noted significant strengths of the proposed program. UCPB reviewed the proposal and reported the proposal was financially sound including the market analysis and plans for student tuition and fees and return-to-aid. All the reviewers commented on the quality and academic rigor of the proposed program including the Educational curriculum requirement.

Reviewer #2 noted the strengths of the proposed program included its breadth of content within the curriculum, its focus on systems level leadership, and attempt at developing a program for working professionals.

Reviewer #3 noted the number of qualified faculty employed at the UCLA School of Nursing and that indicated a willingness to teach in the DNP Program as an ‘overload’ assignment. Also, the School of Nursing is part of a large academic partnership with a health system that offers many opportunities for interprofessional learning and collaboration for DNP Projects, and there is potential to draw applicants to the DNP Program from the existing MSN program at UCLA with specialties as nurse practitioners and clinical nurse specialists.
III. Challenges and weakness pointed out by the reviewers

However, the UCPB and the reviewers raised several concerns about the proposed program structure and governance and made recommendations for the proposers which are included in this review.

UCPB identified a few potential areas of concern to be monitored relating to:

a) the sustainability of UCLA’s five-year business plan, which projects a deficit in the first year followed by a surplus in year two and subsequent (but declining) surpluses in years three to five,

b) the sustainability of plans for UCLA School of Nursing faculty to teach DNP students on an overload basis, and
c) the proposal for the DNP Program Director as a 0.5FTE Adjunct Faculty to oversee the DNP program including student and faculty oversight and participate in teaching.

UCPB recommended CCGA monitor the financial status of the program and require a three-year follow-up program report.

Reviewer #1:
Reviewer #1 also commented on the proposed DNP Director as Adjunct Faculty and not as a faculty position in School of Nursing, and was concerned that tenure track faculty would be tapped as overload faculty in the program.

Reviewer #1 commented on the lack of current faculty with DNP degrees who can serve as a model for DNP students and understand the need of DNP training and role of DNP graduates.

She did pose a question regarding the curriculum and total clinical hours. The courses N470B, C and D include seminar time with practicum (2 hours seminar and 11 hour/week of practicum per quarter). For an 8-unit clinical course, the practicum hours should be 240 hrs. per quarter (8 units x 30 hrs.). When including teaching residency (90 hours in one quarter), the total clinical hours a student can receive during the program as presented is 420 hours. Therefore, the unit load for course N470B, C, and D need readjustment to reflect the actual practicum hours.

The faculty to student ratio is about 1:12.5. This seems to be a high for a doctoral degree and the time and oversight required to mentor six or seven DNP scholarly projects.

Reviewer #2:
Reviewer #2 also commented on the proposed size of the faculty and concern about sufficient resources to facilitate and mentor the students through the program. There was also a concern about the use of adjunct faculty teaching the courses as it relates to consistency, participation in governance activities and policy/procedure development within the program/school, and university.

In relation to the admission requirements, Reviewer #2 noted that several master’s programs focus on expertise in nursing leadership/systems, informatics, and education. These programs do not lead to nationally recognized certification. These applicants would not be eligible for admission in the current proposed program which may limit applicant pools. The reviewer recommended considering inclusion of master’s prepared nurses without national certification and from Clinical Nurse Leader programs that do not meet the requirement for 500 clinical hours prior to admission.

A description of the type and focus of clinical residency experiences is needed to clarify possible conflicts of interest with the students work hours and commitment to the employer. It will likely be difficult to complete all experiences ‘off scheduled work hours’, and experiences involve engagement in the residency at various times throughout the week (e.g. executive meetings or QI project management
meetings). A contract agreement may be required to clarify types of experiences that qualify as clinical practicum and to maintain boundaries between the students work responsibilities and program requirements.

Reviewer #2 noted an error in the proposal regarding the written examination. “Each member of the committee reports the examination as “passed” or “not passed”, a student may be advanced to candidacy if more than one member votes “not passed” regardless of the size of the committee…” Clarification from the proposer is requested.

There is inconsistency throughout the document in the terminology used to describe the DNP Project. It is referred to as a Scholarly Project, DNP Dissertation Project, and Practice Research Topic. Also, specific details of what is to be included in the DNP project (including consistent terminology) must be developed to distinguish it from a doctoral dissertation. There is also inconsistency in the description of the DNP project committee membership which needs clarifying.

Reviewer #3:
The role of the DNP Director involves coordination of the program, implementation and ongoing evaluation of the curriculum, working closely with recruiting, admitting and maintaining communication with students, responsibility for orienting and providing oversight of new adjunct faculty teaching DNP courses. The DNP Director will also be actively involved in obtaining CCNE accreditation. These responsibilities seem more than an Adjunct Faculty at 0.5FTE.

There is confusion in the proposal regarding the recruitment of Advanced Practice Registered Nurses with national certification. This includes APRNs with certification as a nurse practitioner, nurse midwife, and nurse anesthetist. Nurse administrators are not APRNs and although they may obtain Nurse Executive Certification through ANCC, a MSN is not required to obtain this certification, so this needs to be clarified or the term nurse administrator or nurse executive needs to be removed from the proposal admission requirements.

Although the proposal says that a scholarly project focused on quality of care and patient safety issues in clinical practice will be required for this professional degree, the use of the term dissertation is used throughout the proposal and in course descriptions and is confusing. The DNP Scholarly Project is not a research dissertation; therefore, this term should not be used and should be corrected throughout the proposal-particularly in Appendix B.

Reviewer #4:
Reviewer #4 also commented on the role of the DNP Program Director proposed as a part-time adjunct faculty member. It is important for the DNP program director to be at the table with nursing leadership when resource and curricular decisions are made and this would require a different leadership structure.

A potential weakness of the program is the plan to have the DNP faculty, consisting of both track faculty and adjunct faculty in the School of Nursing, teach in the program as “overload”.

IV. Conclusion
In summary, the CCGA DNP UCLA proposal review consisted of three external reviewers- nursing faculty who all have experience administering DNP programs-two at large public universities and one at a private university. In addition, one internal reviewer (UCD) submitted a review. The proposed program also received an overall favorable review from UCPB. The addition of the doctoral practice degree to the UC Schools of Nursing will ensure graduate nursing program offerings are consistent with national trends and important to the development of the profession nationally. The proposers adequately addressed the concerns of the four reviewers and UCPB in the enclosed letter. As lead reviewer for the proposal, I
recommend its approval to CCGA members.

Respectfully submitted,

Karen G. Duderstadt
Chair CCGA 2017-2018