# http://www.ric.edu/webcommunications/images/SealWithText_Small_Black.pnggraduate COMMITTEE curriculum PROPOSAL FORM

## Cover page Scroll over blue text to see further [instructions](#instructions)

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| --- | --- | --- |
| A.1. [Course or program](#Proposal) | **Doctor of nursing practice** |  |
| [Replacing](#Ifapplicable)  |  |  |
| A.2. [Proposal type](#type) | **.** **Program**.[**revision**](#revision) |  |
| A.3. [Originator](#Originator) | **Marie A. Wilks** | [Home department](#home_dept) Graduate Nursing |  |
| A.4. [Rationale](#Rationale)/Context | **The purpose of this proposal is to change the admission requirements for the Doctor of Nursing Practice Program.**The existing admission criteria restricts applicants from applying. The DNP Ad-hoc committee expands current admission procedure in consideration of CCNE and NEASC comments/recommendations for low enrollment. This motion aims to expand the admission guidelines to consider Masters-prepared RN's. Recommended Master’s minimum clinical/practicum of 300 hours. Additionally, the RI College DNP program is in Systems Management/Leadership and not an Advanced Practice/Leadership DNP.  |
| A.5. [Student impact](#student_impact) | **Would allow for more applicants** |
| A.6. Impact on other programs | **None** |
| A.7. [Resource impact](#Resource) | *[Faculty PT & FT](#faculty" \o "Need to hire new full-time or part-time faculty? This is where you indicate if this proposal will be affecting FLH in your department/program.)*:  | **No additional faculty** |
|  | [*Library*:](#library) | **No additional library services** |
|  | [*Technology*](#technology) | **No additional technology** |
|  | [*Facilities*](#facilities): | **No expansion/need for facilities** |
|  | Promotion/ Marketing needs  | **Changes to website****Additional considerations of the Interim Dean (Nursing)** |
| A.8. [Semester effective](#Semester_effective) |  | A.9. Rationale if sooner than next fall | **Update to website once approved** |

C. [Program Proposals](#program_proposals)

|  | [Old (for revisions only)](#old_program) | New/revised |
| --- | --- | --- |
| C.1. [Enrollments](#enrollments) |  |  |
| C.2. [Admission requirements](#admissions) | 1. **Master’s in Nursing in advanced practice specialty from a nationally accredited CCNE program;Certification as an advanced practice nurse (as applicable, based on role); OR Master’s in Nursing from a nationally accredited CCNE Program and submission of narrative to demonstrate advanced knowledge and clinical expertise in a defined area of practice. Applicants should summarize clinical experiences post-Master’s with an emphasis on demonstrated achievement of professional objectives in alignment with the Essentials of Master’s Education in Nursing (AACN, 2011). Using these components, identify areas in your clinical practice that exemplify these categories in narrative format:**
	* **Sciences and Humanities**
	* **Organizational and systems leadership**
	* **Quality Improvement and Safety**
	* **Translating and Integrating Scholarship in Practice**
	* **Informatics and Healthcare Technologies**
	* **Health Policy and Advocacy**
	* **Interprofessional Collaboration for Improving Patient and Population Health Outcomes**
	* **Clinical Prevention and Population Health for Improving Health -Master’s-level Nursing Practice**

**Master’s GPA of 3.0 or higher;****Current licensure as a Registered Nurse in the state of intended practice;****Letter of intent;****Statement of intended area of study for DNP project;****Current CV;****Transcripts from all post-secondary study;****Three letters of recommendation;****Verification of number of supervised clinical hours from prior advanced practice master’s program;****Completion of a graduate level inferential statistics course within the prior three years is required prior to matriculation.** | **Master’s GPA of 3.0 or higher;****1. Registered nurse with bachelor's or master's degree in nursing. Masters in Nursing or Master's in Science in a related field required from a nationally accredited program.** **2. Applicants should summarize clinical/practice experiences post-Master’s in letter of intent. Applicants may be asked to participate in an interview prior to admission. Recommended Master’s minimum clinical/practicum of 300 hours**1. **Current licensure as a Registered Nurse in the state of intended practice;**
2. **Letter of intent to include experience and statement of intended area of study for DNP project;**
3. **Current CV;**
4. **Transcripts from all post-secondary study;**
5. **Three letters of recommendation;**
6. **Verification of number of supervised clinical/experience hours from prior master’s program;**
7. **Completion of a graduate level inferential statistics course within the prior five years is required prior to matriculation.**
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| C.3. [Retention requirements](#retention) |  |  |
| C.4. [Course requirements](#course_reqs) for each program option |  |  |
| C.5. [Credit count](#credit_count) for each program option |  |  |
| C.6. Requirement for thesis, project, or comprehensive exam  |  |  |
| C.7. Other changes if any |  |  |

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| **INSTRUCTIONS FOR PREPARING THE CATALOG COPY**: The proposal must include all relevant pages from the college catalog, and must show how the catalog will be revised. (1) Go to the “Forms and Information” page on the Graduate Committee website. Scroll down until you see the Word files for the current catalog. (2) Download ALL catalog sections relevant for this proposal, including course descriptions and/or other affected programs. (3) Place ALL relevant catalog copy into a single file. Put page breaks between sections and delete any catalog pages not relevant for this proposal. (4) Using the track changes function, revise the catalog pages to demonstrate what the information should look like in next year’s catalog. (5) Check the revised catalog pages against the proposal form, especially making sure that program totals are correct if adding/deleting course credits.  |

## D. Signatures

* Changes that directly impact more than one department/program MUST have the signatures of all relevant department chairs, program directors, and relevant dean (e.g. when creating/revising a program using courses from other departments/programs).
* Proposals that do not have appropriate approval signatures will not be considered.
* Type in name of person signing and their position/affiliation.
* Send electronic files of this proposal and accompanying catalog copy to graduatecommittee@ric.edu and a printed or electronic signature copy of this form to the current Chair of Graduate Committee. Check Graduate Committee website for due dates.

##### D.1. Approvals: required from programs/departments/deans who originate the proposal. may include multiple departments, e.g., for joint/interdisciplinary prposals.

| Name | Position/affiliation | [Signature](#_Signature" \o "Insert electronic signature, if available, in this column) | Date |
| --- | --- | --- | --- |
| Marie A. Wilks | Program Director of DNP |  | 11/7/2018 |
| Joanne Costello | Chair of Graduate Nursing |  | 11/7/2018 |
| Debra Servello | Interim Dean of Nursing  |  | 11/7/2018 |

##### D.2. [Acknowledgements](#acknowledge): REQUIRED from OTHER PROGRAMS/DEPARTMENTS IMPACTED BY THE PROPOSAL. SIGNATURE DOES NOT INDICATE APPROVAL, ONLY AWARENESS THAT THE PROPOSAL IS BEING SUBMITTED. List all other programs and departments affected by this proposal. Signatures from these departments are required in the signature section. CONCERNS SHOULD BE BROUGHT TO THE GRADUATE COMMITTEE MEETING FOR DISCUSSION.

| Name | Position/affiliation | [Signature](#Signature_2) | Date |
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