



Challenges & Successes Establishing a DNP Program in Rural Hawai`i

Alice Davis, PhD, GNP-BC, ACNP-BC, FNP-BC

History: Advanced Practice Nursing in US

- 1965 Nurse Practitioner (NP) role created to relieve burden of care
- 1970's Post-graduate certificate to master's programs (Pediatrics, adult, family)
- 1974 American Nurses Association (ANA) legitimized NP role
- 1977 ANA developed a NP certification exam
- 1985 American Association of NPs convened (AANP)
- 1989 Omnibus Reconciliation Act allowed limited payment to NPs
- 1995 National Task Force on Quality of NP Education (standards developed)
- 1997 NPs received direct reimbursement
- 2000 NPs legal to practice in all 50 states
- 2004 Consensus Model implemented because specialty APRNs increased
- 2005 Accreditation Standards for all NP programs
- 2019 Independent Practice & Prescriptive under State authority

Advanced Practice in The United States

- Highly Regulated
 - Licensure-State Boards of Nursing
 - Accreditation-CCNE, ACEN
 - Certification-VariouS Agencies
 - Education-Standard Curriculums based on Specialty/consensus model

Advanced Practice Nursing Regulation

APRN Regulatory Model

APRN regulation includes:

- **L**icensure
 - The granting of authority to practice
- **A**ccreditation
 - Formal review and approval by a recognized agency of educational degree or certification programs in nursing or nursing related programs
- **C**ertification
 - The formal recognition of knowledge, skills and experience demonstrated by the achievement of standards identified by the profession
- **E**ducation
 - The formal preparation of APRNs in graduate or post-graduate programs



APRN Regulatory Model





- November 2019 report: Hawai`i Island (Big Island) is 230 doctors short (44%) of the 528 physicians needed based on Big Island's population
- Specialty referral base is poor (some specialties have 100% shortage-Neurosurgery, Infectious Disease, Neonatal)
- Health infrastructure is not up to date
- Difficulty recruiting and retaining qualified physicians due to rural area and lack of physician coverage
- Patient's are transport to Honolulu (Oahu) for specialty health care
- Lack of qualified nursing faculty

Rural Health Care in Hawai`i



Solution: Grow Your Own!!

- Provide a DNP Program with Rural Focus
 - BSN - DNP with Family Nurse Practitioner (FNP) Focus
 - MSN DNP Program Leadership Focus
- Improve Primary Health Care
 - Add to the Pool of Primary Health Care Providers
- Increase Faculty for Schools of Nursing

University of Hawai`i Hilo DNP Curriculum

CORE COURSES	SPECIALTY COURSES FOR FNP	CLINICAL PRACTICE COURSES
NURS 612 Evidence Based Practice (3)*	Advanced Pathophysiology (3)	
NURS 601 Social Determinants of Health (3)*	Advanced Pharmacology (3)	
NURS 602 Technology in Health Care (3)*	NURS 605 Advanced Health Assessment & Diagnostic Reasoning (4)(90 hours)	
NURS 603 Epi/Stats (3)*		
NURS 606 Rural Health (3)*		NURS 606L Rural Health Lab (135 hrs)
Leadership/Role (3)*	NURS 607 Primary Care of Adults (3)	NURS 607L Primary Care of Adults (135 hrs)
Health Economics (3)*	NURS 608 Primary Care of (3) Older Adults	NURS 608L Primary Care Older Adults (135 hrs)
Practice Inquiry Project (6)*	NURS 609 Primary Care of Women (2)	NURS 609L Primary Care of Women (2)(90 hrs)
	NURS 610 Primary Care of Children (2)	NURS 610L Primary Care of Children (2)(90 hrs)

***MSN-DNP Curriculum**

Mandatory Annual Institutes on Campus

Practice Inquiry Project (PIP)

Purpose

- Synthesis, critique and application of existing research to support or change practice

Requirements

- Implement an EB practice project or study on a topic requiring a practice change or improvement identified by student and faculty mentor
- Students conduct the project with committee assistance (2 faculty members)
- Project is presented and defended and open to all university faculty and community at large

Examples of Projects

- Autism Support in rural Hawai'i
- Diabetic Shoes for Micronesians
- Advanced Directors for non-English speaking immigrants

Start up Challenges



Design & Implementation of Curriculum



Recruiting Students from across the state



Lack of Community Buy-in (clinic administrators)



Accreditation not Certain



No physician support for preceptors



Continued Challenges



Preceptor Shortage & Preceptor Fees



Adequate Clinical Training in Specialty Areas (Ob, Peds, Mental Health)



Student Travel for annual Institutes



Qualified Faculty



Faculty Support from faculty not involved in the DNP program





Successes

- CCNE Accreditation 2014
- First Graduating Class 2015
- 5 Cohorts Graduated (2015-2019)
- 20 Practicing FNPs (3 established independent practices)
- 4 Graduates now Faculty at UHH
- Increased Community Respect
- Increased demand for FNPs to work in physician offices
- Competitive Admissions to DNP Program

Recommendations



