2025 DNP PROJECT
& RESIDENCY HANDBOOK

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The hallmark of the practice doctorate is a commitment to advancing nursing practice and evidence-based care in complex healthcare systems at the highest level of specialized expertise. The DNP Project demonstrates the student's ability to identify and resolve a practice problem through change and the scholarship of application or integration, rather than the scholarship of discovery associated with research doctorates (PhD). The DNP Project incorporates skills attained in the DNP program of study to examine and improve health systems, implement advanced nursing practice, and evaluate health care outcomes. The guiding principle in selecting a project is that the final change will benefit groups, populations, or communities through advanced nursing practice.

DNP students are assigned a Millikin University DNP faculty advisor. DNP-NAP students may be assigned a Millikin University DNP faculty advisor and a full affiliate faculty advisor. The faculty advisors are qualified to assist the student with project questions or concerns and may serve as the chair or practice mentor on the DNP Project Team. Students are encouraged to begin discussing their projects with the advisors during the first semester of study. This allows the student time to consider project topics with faculty guidance and to integrate coursework throughout the program with project development.

DNP students plan, implement, and evaluate a practice change in a project related to their specialty practice during three Project courses (NU 796, NU 797, and NU 798). The DNP Project courses provide structure for progressive action toward project development and implementation and the partial fulfillment of graduation requirements. Consistent with the *American Association of Colleges of Nursing Essentials of Doctoral Education for Advanced Practice Nurses (*AACN, 2006) and the *Council on Accreditation of Nurse Anesthesia Standards for Accreditation of Nurse Anesthesia Programs: Practice Doctorate* (COA 2014), this series of courses guide students through the process of successful project completion and reflection on the DNP degree requirements. The culmination of these courses is a completed DNP Project, finalized as an electronic manuscript suitable for dissemination and a project presentation (podium or poster).

The Student's Reflective Analysis of the achievement of program outcomes demonstrates that all DNP competencies were completed at the end of the program.

Types of DNP Projects
Evidence-based nursing projects design and implement change to improve healthcare outcomes either through direct or indirect care in specific practice settings, systems, or with specific populations. The DNP Project is not intended to test new models, develop new theories, test

hypotheses, or produce generalizable knowledge. The DNP Project must include purpose, planning, implementation, and evaluation (formative or summative) components and must include a practical plan for sustainability (e.g. to address financial, systems, or political realities). The project must be clinically significant and provide a foundation for future practice scholarship. Examples of DNP practice-focused implementation projects include:

- Quality Improvement Projects
- Translation of Evidence
- Innovation of Practice Change Projects

DNP Project examples from the AACN (2022) can be found in Appendix E. Key elements that should be considered as the student progresses in the program include:

- DNP Projects are designed to be completed by the end of NU798 DNP Project III.
- DNP Projects are evidence-based and generally have a complex systems analytical element, which may include the economic factors affecting change.
- DNP Projects require synthesis of current evidence and the application of key leadership strategies to build collaboration and buy-in to improve patient-centered outcomes.
- DNP Projects demonstrate theory integration based on organizational change models.
- DNP graduates use science-based theories and concepts to analyze new practice approaches that advance leadership for advanced practice initiatives that facilitate intra-professional and inter-professional collaboration, apply information systems/technology to support and improve patient care and healthcare systems, and disseminate research findings (COA, 2015).
- DNP Projects are practice-based, and "rather than a knowledge-generating research effort, the student in a practice-focused program generally carries out a practice application-oriented 'final DNP Project,' which is an integral part of the integrative practice experience" (AACN, 2006, p.3).

The DNP Project Team

A project team chair, who is generally the academic advisor, is assigned to DNP students during the first semester. Coursework during the first year of the DNP program provides opportunities to explore and focus on ideas and develop skills that will assist the student with the DNP Project. If full-time, students will refine an area of interest and determine the project's focus no later than the end of year one.

A DNP Project Team Practice Mentor (the 2nd team member) is assigned or selected by the student in collaboration with the DNP Project Chair. Additional Team members or consultants may also be helpful for some projects. The students are responsible for ensuring clear, ongoing communication regarding the project with the DNP Project Chair, the Team member(s), and any consultant as appropriate.

Composition of the DNP Project Team

The DNP Project Team consists of:
1. The DNP Student
2. The DNP Project Chair is doctoral-prepared, holds a faculty appointment in the School of Nursing as faculty or full affiliate faculty, or holds the rank of faculty emeritus with five years of recent graduate school teaching.
3. A DNP Project Team Practice Mentor can be from the full-time School of Nursing faculty, affiliate faculty, or an advanced practice provider (e.g. CRNA, FNP) with a minimum of a master's degree in nursing, holding a current advanced practice nursing license, and appropriate specialty certification.
4. An optional third Team member/consultant, who may be from outside the School of Nursing but must hold a minimum of a nursing master's degree, for example, a clinical expert in the field of the student's interest.
5. DNP NAP students must have an anesthesia provider as a member of the Team.

Project Chair Responsibilities

The chair leads the DNP Project team, coordinates the team's activities, and evaluates student outcomes. The chair provides oversight and approval of the project, including topic selection, proposal approval from the DNP Project Oversight Committee, ongoing review and refinement, assistance to identify faculty to serve on the Team or as consultants, development of a project timeline (Appendix B) with the student, and final project completion approval (Appendix C). Once the project is completed, the DNP Project Chair will submit a final DNP Project grade in consultation with the Team member(s) and assist the student with project presentation and/or other dissemination arrangements. DNP Project Chairs are responsible for ongoing communication with the DNP student and other Team member(s), and will meet with students

(onsite or virtually) at least 2-3 times per semester as part of course requirements for DNP Project courses I-III.

The DNP Project Chair will:
- Assist the DNP student in preparation of the project proposal submission for the DNP Project Oversight Committee during the fall of the first year (Appendix A)
- Assist the DNP student in defining realistic and specific goals and a timeline (Appendix B) that support the DNP Project guidelines and provide oversight to project work completed in DNP Project courses I, II, and III
- Guide the DNP student in the development and growth of key leadership and scholarly skills necessary to result in a strong DNP project
- Meet with the student and Team members regularly for project progress
- Assist the student in developing a plan for project-relevant practice hours prior to implementation and review the student's log of hours, activities, and evidence of accomplishment of the DNP Essentials during DNP Project courses I, II, and III.
- Maintain credentials related to ethically conducted research from CITI or another provider
- Serve as the IRB Faculty Advisor and co-investigator in projects requiring IRB approval.
- Assign grades for the DNP Project courses (NU 796, 797, 798)
- Document completion of DNP project Completion Approval (Appendix C)

DNP Project Team Member/Practice Mentor Responsibilities
DNP Project Team Member/Practice Mentors serve to facilitate student access to resources, assist the student to fulfill the DNP Project requirements, and provide input to ensure rigor, applicability, and meaningful impact of the work in the practice environment. The practice mentor will review and provide comments during the development and implementation of the project, as well as provide final project and presentation review and signature approval of the final DNP Project Completion Approval (Appendix C).

The DNP Project Team Practice Member/Mentor will:
- Assist the DNP student in selecting realistic and specific goals that support the DNP Project guidelines.
- Guide the DNP student in the development and growth of key leadership and scholarly skills in collaboration with the DNP Project Chairs
- Meet with the DNP Project Chair and student on a regular basis and provide feedback when requested
- Review the final DNP Project to ensure rigor, applicability, and impact of the work to the practice setting

- Facilitate dissemination of DNP Project outcomes in practice settings
- Provide Millikin University School of Nursing with a current curriculum vitae and assist with the facilitation of required clinical agency contracts (if applicable)

DNP Project Consultant Responsibilities

This optional role is not a required Team member. The consultant provides an expert opinion to the student, faculty, and Practice Mentors regarding some aspect of the project (e.g., statistical analysis). The consultant has no role in the final grading of the project.

DNP Student Responsibilities

The student is responsible for the project's progression, from selection of the project topic to completion of the final project and presentation. It is up to the student to meet with the Project DNP Project Chair and determine progression expectations, scheduled meetings, and the project completion timeline. The student must keep the Project DNP Project Chair apprised of progress and remain on task to complete the project within the expected timeframe. Failure to complete the project as agreed upon or within the project timeline may result in a revision of the timeline, a change in the Project DNP Project Chair and/or Practice Mentor, and the inability to graduate on time. ***Students must initiate contact with the faculty member assigned as DNP Project Chair and obtain agreement and signatures according to the guidelines.*** Once an agreement has been reached, the student is responsible for scholarly work and meeting the deadlines outlined above.

The DNP student will:
- Ensure that all written work adheres to the most current *Publication Manual of the American Psychological Association* (APA) standards
- Initiate contact with the faculty member assigned as DNP Project Chair
- Work with the DNP Project Chairs to initiate contact with additional faculty, affiliate faculty, or appropriate experts who will serve as Practice Mentors or consultants on the Team.
- Maintain and submit to the Project Chair a log of practice hours (as applicable), activities, and evidence of accomplishment of the DNP Essentials
- Complete and submit all required forms to the DNP Project Chair via the Administrative Assistant, including Curriculum Vitae for project Team members who are from outside the School of Nursing faculty
- Establish regular meetings with the DNP Project DNP Project Chair to set goals, ensure progress, and complete required documentation to move the project forward according to the established timelines
- Schedule all meetings or electronic communication with the DNP Project Team Faculty and Practice Mentors

- Read and comply with all relevant policies and procedures established by the School of Nursing & IRB's
- Maintain credentials related to ethically conducted research from CITI or another provider
- Meet deadlines to ensure the final project is approved in time for graduation
- Maintain continuous enrollment in Project III until the completed project is approved.
- Work with the DNP Project Chair and appropriate Administrative Assistant to schedule the final public presentation of the completed project
- Submit the DNP Project Completion Approval form (Appendix C) to the Graduate Chair after obtaining the appropriate signatures.
- Meet all MU Registrar deadlines to comply with graduation requirements

Project Team Meetings
Meetings between the student and the DNP Project Chair or the full DNP Project Team may be requested by any team member to discuss the project. Students are encouraged to begin the process early and adhere to the timeline once it is established. Students should verify with the Project Chair the expected turnaround time for project review comments to be returned to the student.

Once the DNP Project Chair and Practice Mentors agree with the student on the proposed project topic, the student and DNP Project Chair will collaborate to complete a detailed DNP Project Timeline (Appendix B), a copy of which will be provided to the student and advisor.

Changes to the DNP Project Team
In rare circumstances, changes to the membership of the DNP Project Team may be required prior to the completion of the project. To request a change in team membership, the DNP student will work with the assigned advisor (s) to contact the School of Nursing DNP Project Chair and the Graduate Program Chair to request the change and explain the rationale for the request. The DNP Project Chair and the Associate Director for Graduate Programs will review the request and make a decision regarding the request.

DNP Project Timeline
The suggested DNP Project Timeline (Appendix B) provides a general template for DNP students and DNP Project Chairs to use to plan for timely project completion and dissemination. The DNP Project Chair and the student mutually agree upon the timeline. Revisions to the projected timeline may occur for a variety of reasons. Any deviation from the established project timeline that results in an extension may potentially delay graduation.

Project Oversight Committee

During the first year of the DNP program, students will develop a preliminary project focus area in conjunction with the Project Team Chair. This project area idea will be developed during the first-year core DNP courses. In October of the first year, the Project Oversight Committee will solicit project proposals for initial review and approval. An email will notify students regarding the date, format, and process for the proposal review. The DNP Candidate Project Proposal (Appendix B) will be developed with the Team Chair, who will submit the proposal to the committee. Students will be notified within 2-3 weeks of either proposal approval or request for further information.

If a student project topic or approach is changed substantively after initial committee approval, the student must resubmit the second project proposal and obtain committee approval.

Institutional Review Board (IRB) Approval

The need for IRB approval is determined in conjunction with the student's project chair and the IRB liaison. Based on the nature of the project, the timeline should be adjusted to include this process when necessary.

The student **MAY NOT** collect any data or perform any study-related activities without formal permission granted by Millikin's IRB and also any other organizational IRBs involved in the project. To obtain formal permission, a Millikin IRB Exempt Application (or in rare instances, an IRB Review Request form) must be completed. Refer to Millikin's IRB Website at https://www.millikin.edu/IRB. When a project involves outside organizations, the student must contact the respective institution to identify their IRB application process. When more than one organization is involved, first submit to the outside organization, and when approval is granted, apply to Millikin's IRB and attach the approval letter with the application.

Only after receiving formal IRB approval from all involved organizations, Millikin's IRB, any required institutional committees, and the Project Chair may the student proceed with the project. The IRB approval letter(s) will be listed as an Appendix in the final project paper.

Responsibilities of Principle Investigators and Research Staff in Projects Involving Human Subjects or Human-Related Data

Principle Investigators and research staff have specific responsibilities as governed by federal regulation. They are required to:

- Protect the rights and welfare of human research subjects.
- Maintain credentials related to ethically conducted research from CITI or another provider
- Understand the ethical standards and regulatory requirements governing research.
- Ensure all research activities have IRB approval and other approvals required by the institution.
- Implement the research activity as approved by the IRB.
- Obtain informed consent of subjects before enrolling in the study.
- Maintain written records of IRB reviews and decisions.
- Obtain IRB approval for any proposed change to the research protocol prior to implementation.
- Comply with the IRB requirements for timely reporting of adverse events or unanticipated problems.
- Obtain continuation approval from the IRB for any study extending beyond 1 year.

- Make provisions to secure and retain completed research records for a minimum of 3 years.
- Ensure the confidentiality if all research information.
- Obtain IRB approval from all participating organizations.
- Report project close-out to the IRB.

Completing an Institutional Review Board Application

1. Complete all items of the project that are necessary for Institutional Review Board (IRB) approval (educational materials or extensive teaching plan for subjects, surveys, videos, etc.). The completion of the methodology section of the DNP Project manuscript will describe these items.
2. Visit Millikin's IRB site. Become familiar with the documents available to students and Project Chairs.
3. Determine the appropriate IRB application to complete. If a project involves an outside organization, the student is responsible for getting information on their approval process.
   a. The Millikin IRB Application is located on Millikin's IRB Website at www.millikin.edu/IRB.
      i. Millikin Exempt Form (most commonly used for our projects).
      ii. Review Request for Research Involving Human Participants Form.
4. If the project is to take place at any of the Memorial Health Affiliates (Decatur Memorial Hospital, Springfield Memorial Hospital, Taylorville Memorial Hospital, Lincoln Memorial Hospital or Jacksonville Memorial Hospital) IRB Approval must be obtained from Decatur Memorial Hospital's IRB.
   a. Process: The student will use the Millikin IRB form and submit it to the DMH IRB first. After the DMH IRB approves the student, the student will submit it to Millikin's IRB for approval.
      i. All items described in the methodology should be submitted with the IRB application.
      ii. CITI Certifications for student(s) and supervising faculty will be submitted with the IRB application.
5. For projects to take place at a site other than a Memorial Health Affiliate, please discuss with the chair the steps to comply with the site(s) plan for IRB approval and oversight.
   a. For projects at SIU Healthcare
      i. IRB must be obtained through SIU. The SIU IRB form must be completed via their website, siumed.edu/scrihs.
      ii. All items described in the methodology should be submitted with the IRB application.
      iii. CITI Certifications for student(s) and supervising faculty will be submitted with the IRB application.

6. The project is ready for implementation.
    a. Any changes in methodology must be communicated, and a change request form must be submitted to the IRB.
        i. Millikin has a Research Amendment Form available on the IRB website.
7. Once the project is complete, submit a Research Closure Form to the appropriate IRB. A research closure form is available on Millikin's IRB website.

DNP Project Course Sequence

The Project Chair will coordinate the DNP Project courses. While the responsibility for the project culmination and final completion of the residency resides with the student, faculty guidance is essential to success. Students should plan to meet in person or virtually with DNP Project Chairs at least 2-3 times during each semester of enrollment in the project and residency courses. Electronic drafts of project work are expected regularly during each semester.

NU 796: DNP Project I
In the first of three DNP Project courses, students will develop the initial planning phases of the project, including forming an evidence-based problem statement or project objectives and selecting a model or framework to guide the project. The student will work with an assigned DNP Project Chair to confirm a Practice Mentor and complete an initial draft of the review of literature/evidence supporting the project objectives. Practice hours (100) associated with the project will include clinical exploration of healthcare systems and interdisciplinary work to identify practice issues and data sources for the project.

NU 797: DNP Project II
In DNP Project II, students will work with their project Team to complete the literature/evidence review, including the incorporation of practice guidelines or policy, change, or systems analyses, depending on the selected type of project. In this semester, the student will finalize the planning elements of the project, establish timelines, and secure external collaborative agreements and IRB approval for the project, as necessary. Practice hours (100) will be designed by the student and project advisors in collaboration with clinical practice settings, including developing planned access to systems needed to launch the project.

NU798: DNP Project III
In DNP Project III, students will implement and evaluate the project in collaboration with their project Team. Students will disseminate the findings to an audience of faculty and peers and may submit a manuscript to a professional journal or a summary of project findings to stakeholders impacted by the change project or impact project. The clinical practice hours associated with the final DNP Project course may include data collection, analysis, and collaborative work in the clinical setting. The student's DNP Project Chair, in consultation with the other members of the Team, will assign a grade to the final DNP Project III course. Planned practice hours (100) are applied to the final project implementation and dissemination/feedback to the practice setting.

Guidelines for DNP Project Practice Hours

All DNP students will complete 300 clinical practice hours associated with DNP Project Courses I, II, and III. The purpose of the practice hours is for students to develop, implement, and evaluate the DNP Project and participate in activities designed to facilitate the accomplishment of the *DNP Essentials*.

Students will work collaboratively with the DNP Project Chair to design practice experiences in each DNP Project course. At the beginning of each semester of practice hours, the student will propose specific learning objectives and activities related to the DNP Project and achievement of the *DNP Essentials*. All practice hours must be approved by the DNP Project Chair prior to implementation of the activities. Faculty will provide orientation to practice mentor/preceptors to facilitate the accomplishment of the learning objectives. Each project course semester, the student will maintain a log of activities and practice hours with an analysis of how the experience related to individual accomplishment of competencies in the *DNP Essentials*. The log will be submitted to and reviewed with the DNP Project Chair at the end of each project course. Successful progression to further practice hours is based on satisfactory completion of prior semester goals/activities. Additional hours may be required on an individual basis to accomplish completion of the project and achievement of all *DNP Essentials*. A record of all Practice/Residency hours will be maintained in the student's academic file.

The following is a list of the types of activities and experiences that can be proposed by the student for DNP Project Practice Hours. This list is not intended to be exhaustive.

- Meetings with agency/organizational/community leaders to identify potential DNP Project focus
- Meeting with agency/organizational/community leaders to plan and implement the DNP Project
- Attendance at agency/organizational/community Team meetings related to the DNP Project
- Site visits to solicit background or deeper understanding of the project topic
- Meeting with consultants or content experts related to the project
- Presentations to groups related to the project
- Hours conducting the project and analyzing results
- Professional presentations of project at local, regional, or national conferences
- Attendance at conferences directly related to the project
- Grant preparation related to funding for the project
- Manuscript preparation and submission

- Policy development or involvement
- Tool development related to the project
- Other activities that are directly related to development, implementation, and evaluation of the project as negotiated and approved by the Project DNP Project Chairs and Practice/Residency faculty

To ensure that progress is being made on the final project, practice hours will be focused in part on the final stages of the project dissemination and will also facilitate mastery and reflection of the DNP competencies advanced by the *American Association of Colleges of Nursing Essentials of Doctoral Education for Advanced Nursing Practice* (2006).

<div align="center">**DNP Project Completion**</div>

Final DNP Project Review
The student is responsible for coordinating and scheduling a final DNP Project review in consultation with all DNP Project Team members. All members of the DNP Team must participate in the final review (in person or by phone).

Project Manuscript Review
The student is required to schedule and pay for the professional review/editing of the manuscript by an editor approved by the School of Nursing. The edited manuscript should be returned to the Team Chair for final review and approval. Manuscripts must be submitted to the editor prior to the completion of Project III.

Public Presentation of the DNP Project
In collaboration with the DNP Project Team, the student will arrange for a public presentation of the completed DNP Project at Millikin University. The date and time for the public presentation will follow the final DNP Project review with the Team. The student will develop a professional presentation with the approval of the DNP Project Chair. DNP students are expected to participate in Millikin's Celebration of Scholarship, which occurs annually each spring. Presentations at the Celebration of Scholarship may be in either a podium or poster format. The student will prepare an announcement of the public presentation and collaborate with the School of Nursing Administrative Assistant to arrange a room and send out the announcement. Additional presentations may be scheduled in consultation with the Team members or affiliate agencies.

DNP Project Steps
The following steps are outlined to serve as a general guide for developing the student's DNP Project and are not intended to be prescriptive. The student will work with the DNP Project DNP Project Chair and Team to:

- Establish why the project topic is relevant, important, and within the scope of advanced practice nursing role for which the student is being prepared.
- Form an appropriate project Team
- Revise and refine the purpose of the proposed project.
- Submit the project proposal to the DNP Project Oversight Committee for approval (Appendix A).
- Complete a proposed DNP Project Timeline (Appendix B).
- Establish the frequency and content of DNP Project review with the DNP Project Team. Both the DNP Project Chairs and Team will review and critique the project.

- Continue with critical review and appraisal of the literature and best evidence supporting the project (this may require working closely with library support staff).
- Identify the optimal approach (type of project/methodology) to address the project purpose.
- Establish relationships with key representatives from potential facilities that may provide a data source to further examine the project question.
- Recognize and engage key representatives who may shed new insight on the subject matter and offer new information or facilitate the project implementation.
- Provide evidence of stakeholder support for the project (if applicable)
- Establish a budget for the project and identify funding support (if applicable).
- Work with Project Chair to determine if the project involves research with human subjects intended to produce generalizable knowledge, which will require IRB review.
- Submit the finalized project proposal to the facility IRB, if appropriate, and when approved, submit the proposal to the Millikin IRB. See the IRB website for process and forms. (Note some organizations require special institution/Team review following IRB approval before a project can proceed.)
- After approval is documented by the appropriate IRBs, the student may proceed with implementation and evaluation in consultation with the project Team.
- Once final revisions are made to the project manuscript, the DNP Project Team will meet with the student to discuss the project and implications for nursing. At this meeting the public presentation will be planned along with other forms of dissemination. The DNP Project Chairs will review the presentation details with the student prior to presentation. At the completion of the public presentation, the student will complete the DNP Project Completion Approval form (Appendix C) and submit it to the Graduate Chair.
- Once the project paper is approved by the DNP Project Team, the student will contact a qualified consultant for professional manuscript review. The DNP Project Chairs and Administrative Assistant will be able to help the student locate a qualified consultant. Fees for manuscript review are the responsibility of the student.
- The student will make revisions as recommended by the consultant and provide the Project DNP Project Chairs with a copy of the recommended changes.
- Starting in 2019, SON Graduate Projects will be maintained in a digital collection set up through CARLI at http://collections.carli.illinois.edu/cdm/landingpage/collection/mil_nursing . Students will need to sign for permission to include their project by completing the Permission to Digitize Graduate Scholarly Project form (Appendix D). This is at no cost to the student. If a student refuses to sign permission for digitizing, they will be required to pay for one bound copy for Staley Library. All students may have personal copies duplicated for

themselves, Team members, DMH and/or the sponsoring organization. The student is also required to send an electronic copy of the final manuscript to the DNP Project Chair and the Administrative Assistant in the School of Nursing.

<p style="text-align:center">DNP Project Manuscript Guidelines</p>

APA Style
The DNP Project manuscript style and format adheres to the most current version of the *Publication Manual of the American Psychological Association* (APA) with variation as indicated in italics.

Typeface
Times New Roman, 12-point font, this should be consistent throughout the paper.

Line Spacing
Double space throughout the entire paper including headings and references.

Line Length
All lines in the paper are to be flush-left style. This style leaves the right edge of the paper uneven. Do not hyphenate words at the end of a line.

Paragraphs and indentions
Paragraphs should be started with an indent of five to seven spaces, or approximately ½ inch.

Section Titles
APA provides for five potential levels of headings for the sections of the paper. Please see the most current APA manual for formatting rules. All line spacing stays at double space.

Margins
Margins will be set differently for papers that are submitted for the digital repository compared to those who want to do a bound copy instead or in addition to the digital repository.
1) For digital repository - paper margins should be 1 inch on all sides.
2) For bound copies - paper margins should be 1 ½ inches on the left side, and 1 inch for the top, bottom, and right side.

Pagination
Pages should be numbered consecutively using Arabic numerals starting with the Title page which is page 1. Page numbers should be in the page header, flush right.

Running Head
This is an abbreviated title that will be at the top of each page in the header section formatted to the left margin. Headers should be no more than 50 characters total. Headers should be all capital letters.

Sections for Body of the Paper

The sections used to organize the paper will be individualized based on the organizational change framework or model guiding the system change. For example, a project based on the IOWA model would have different sections than one using Kotter. As a generalization, the body of the paper should address the project purpose, evidence, organizational change framework, planning, implementation, sustainability, project outcomes, conclusion & recommendations.

Section	Examples of topics to be included
Introductory Material	Acknowledgements, Table of Contents, List of Tables, List of Figures, List of Abbreviations
Abstract or Executive Summary	A succinct summary of the project including problem statement, purpose, key elements of project and key findings. Usually 150 to 250 words. On separate page.
Purpose	Introduction including brief discussion of background, problem statement, and purpose of proposed organizational change
Evidence	Background and review of the evidence (this is the literature review): substantiate the problem, relationship to advanced practice specialty role, sphere of nursing practice, patient/system outcomes
Nursing Theoretical Framework/Conceptual Model	Identify and describe the nursing theory used to substantiate the project or intervention.
Organizational Change Framework	Identify and describe the conceptual and/or theoretical change framework selected to guide the change process.
Planning and Methodology	System to be changed, financial & resource needs, policy implications, project timeline, identification of outcomes, key stakeholders in the project, project team development, and as appropriate – SWOT or workflow analysis, IRB processes, agency contracts…
Implementation	Engagement of stakeholders, securing resources, description of actual implementation of project
Sustainability	Plans for project monitoring and sustainability, embedding the change into the system, resource implications, political realities
Project Outcome Analysis	Analysis & discussion of processes and outcomes, formative and/or summative, significance of outcomes
Conclusion, Recommendations	Importance and limitations of project
References	Start on new page. Include all references cited in paper. See APA guide for formatting.
Appendices	Include any supplemental material for the paper. Note: tables and figures may either be place in the appendices or embedded within the text.

The following must each begin on a new page:

>Title page
>Acknowledgements
>List of Tables
>List of Figures
>List of Abbreviations
>Abstract (see APA 2.9)
>Body of paper
>References

The body of the paper/text begins with the full title and flows as one continuous, unbroken document. APA 2.11 "Format" states: "Do not start a new page or add extra line breaks when a new heading occurs; each section of the text should follow the next without a break."

The Title Page

The title page includes six elements: title, running head, page number, author byline, institutional affiliation, and author note – a statement regarding partial fulfillment of degree requirements and year

- Project Title should be in Title Case, bold, centered and positioned in the upper half of the title page.
    - Capitalize the following words in the title:
        - First word
        - First word in subtitle
        - First word after a colon, em dash, or end punctuation
        - All Major words
        - Words with four letters or more
- Student's Name and Program Information
    - Student's name should be first name, middle initials(s), and last name
    - Student's name should be below the title with one extra double blank space
    - Student's name should include no professional or academic degrees or licenses
    - The institution name "Millikin University" should appear below the student's name.
- At the bottom of the title page include the following:
    "In Partial Fulfillment of Degree Requirements for Doctor of Nursing Practice"

20XX [appropriate year]

Table of Contents

Each section of the manuscript should each begin on a new page.

The Table of Contents should be laid out according to the following criteria. The words "Table of Contents" are centered at the top of the page. No ellipse needed between section and page number.

Sample format for sequence and pagination on table of contents following Title Page:

Nursing Graduate Student Scholarly Project Checklist

Please review prior to submission for final publication.

Formatting:
☐ All pages and images readable?
☐ APA style (general formatting, in text citations, references list) used?

Privacy:
☐ Personal contact information (addresses, phone, email, etc.) removed or redacted?
☐ HIPAA violations removed? (especially look at any reported data, for screenshots of patient portals, charts, etc.)

Copyright:
☐ Permission obtained from any copyright holders (usually authors/creators, but sometimes publishers) to reproduce and make freely accessible online figures, images, survey instruments, etc. in the project?

> If you need help determining whether something is copyrighted, ask a librarian.
>
> Ask yourself whether you really need to reproduce the copyrighted item in your project. Could you discuss what you need to and cite the original source (for example, the "Iowa Model Revised") without reproducing it, thus bypassing the need for a permission?
>
> If you do determine that you need to reproduce the copyrighted item in your project, contact the copyright holder (ask a librarian for help if you need assistance determining who that is) and ask for permission:
> - Tell them who you are, the institution and program you are affiliated with, and the project you are working on.
> - Ask them for permission to reproduce the copyrighted item (for example, the Lean Six Sigma diagram used found on the following website…, or the Iowa Model Revised as found in the following article…) in your project, which will published online in the following digital collection: http://collections.carli.illinois.edu/cdm/search/collection/mil_nursing

☐ Copy included of a) your request(s) for permission to reproduce copyrighted item(s) and b) the copyright holder's affirmative response(s) to those request(s) in your appendices?
☐ Copyrighted item(s) properly cited and permission to reproduce them indicated in the text of your project? (For example: "permission to reprint granted, see Appendix B" plus the proper APA-style citation.)

DNP APRN RESIDENCY REQUIREMENTS

In addition to practice hours associated with the DNP Project courses, APRN students will complete a focused practice residency in NU 799: DNP Residency. The DNP Program prepares students for the highest level of nursing practice and the practice residency provides the individual DNP student with an opportunity to apply, integrate, and synthesize all of the *DNP Essentials* to demonstrate achievement of desired outcomes in an expanded area of advanced practice nursing. Practice experiences should include indirect care practices in healthcare settings or related environments as well as direct care experiences that broaden and expand the experience of the student.

Required residency hours for DNP APRN students are determined upon admission review of verified practice hours in the student's master's program. Up to 500 of the required 1000 practice hours may be validated from the student's MSN curriculum. Depending on the type of APN preparation, DNP APRN students will generally need to complete additional practice hours which can be accomplished by a combination of the DNP Project hours (300) and the DNP Residency.

DNP program practice experiences are designed to provide (AACN White Paper, 2015):
- Systematic opportunities for feedback and reflection.
- In-depth work/mentorship with experts in nursing, as well as other disciplines.
- Opportunities for meaningful student engagement within practice environments.
- Opportunities for building and assimilating knowledge for advanced nursing practice at a high level of complexity.
- Opportunities for further application, synthesis, and expansion of learning.
- Experience in the context of advanced nursing practice within which the final DNP Project is completed.
- Opportunities for integrating and synthesizing all of the *DNP Essentials* and role requirements necessary to demonstrate achievement of defined outcomes in an area of advanced nursing practice.

NU 799: Post-Masters Residency

Post-master's DNP APRN students will complete a clinical residency designed to provide for practice experiences (direct or indirect) to achieve learning goals related to the DNP Essentials within the framework of their specialty area. This is an opportunity to work with experts from nursing and other disciplines. Under the guidance of the student's faculty advisor an individualized residency plan will be developed that will promote the synthesis, integration and translation of knowledge gained in the DNP program into the student's professional practice.

Individual Residency Plan

APRN students will collaborate with their DNP Faculty Advisor to develop an individualized practice residency plan with specific learning objectives related to the *DNP Essentials*. The purpose of the plan is to promote synthesis, integration, and translation of knowledge to advanced practice through planning and execution of specific activities based on principles/outcomes for graduate competencies found in both the *DNP Essentials* and APN specialty expectations including: system opportunities with feedback and reflection, in-depth engagement and work with practice experts, and a chance to build and assimilate additional complex knowledge related to the APN specialty. Non-traditional settings should be considered to help the students acquire expanded skill sets.

Residency experiences that involve provision of direct care require a formal contract with the affiliating agency and Millikin University, as well as a preceptor agreement. The student is responsible to initiate obtaining these documents prior to the beginning of the residency experience.

The DNP student will propose an individual residency plan with specific learning objectives and activities that relate to achievement of the *DNP Essentials* and specialty criteria. The plan and final document should incorporate:

- A statement of proposed individual hours and credits
- An individualized plan with earning outcomes for the hours and activities
- Connection of the learning outcomes to the *DNP Essentials* and identified APN specialty criteria
- A detailed Residency Log that tracks residency activities
- Upon completion, a reflection of the learning outcomes related to the DNP Essentials and identified APN specialty criteria

The completed document will be submitted to the Faculty Advisor at the conclusion of the residency. The student is responsible for up-loading a final copy of the residency plan to their e-Portfolio.

All residency hours must be approved by the Faculty Advisor prior to completion of the activities. Each semester the student will maintain a log of residency hours and activities completed and an analysis of the accomplishment of competencies in the *DNP Essentials*. The log will be submitted to and reviewed by the Faculty Advisor at the end of each semester. Successful progression to further residency hours is based on satisfactory completion of prior semester goals/activities. Additional hours may be required on an individual basis to accomplish achievement of all *DNP Essentials*. A record of all Residency hours will be maintained in the student's academic file.

Residency Hours in Employment Settings

While some DNP students may have the opportunity to engage in learning activities in a setting where they are employed, practice residency experiences should have well-defined learning objectives that must consist of activities extraneous to the employee's job responsibilities and activities. The DNP student must be able to gain knowledge and skills beyond employment expectations to apply to his or her nursing practice.

References

AACN (2006). American Association of Colleges of Nursing, *The essentials of doctoral education for advanced nursing practice*. Washington, DC: Author.

AACN (2015) White paper: American Association of Colleges of Nursing, Task force on the implementation of the DNP, *The doctor of nursing practice: Current issues and clarifying recommendations.* Retrieved from:
http://www.aacn.nche.edu/news/articles/2015/dnp-white-paper

American Psychological Association (2010). *Publication manual of the American Psychological Association.* Washington, DC: A.P.A.

COA (2015) The Council on Accreditation of Nurse Anesthesia Education Programs, *Standards for accreditation of nurse anesthesia programs practice doctorate.*

Appendices and DNP Project Forms

All DNP Project forms will be retained in the student's academic file in the School of Nursing. They consist of:

- DNP Candidate Project Proposal (Appendix A)
- DNP Project Timeline (Appendix B)
- DNP Project Completion Approval (Appendix C)
- Permission to Digitize Graduate Scholarly Project (Appendix D)
- Selected Examples of DNP Projects, AACN (Appendix E)
- Guidance for DNP Project Development (Appendix F)

DNP Candidate Project Proposal

Student Name _____   Date Submitted _____

Team Chair _____   Practice Team Member _____

1.   **Title**:

2.   **Aims/Purposes**: What does this project hope to accomplish?

3.   **Focused Background Description and Rationale**: Provide a brief and focused rationale for the project. Cite focused reports and literature.

4.   **Significance**: How will the processes of this project improve practice? Does this project involve a standard of care?

5.   **Methods**: Evidence Review? Who are the subjects (if any)? How will they be obtained and grouped? Will any interventions be employed and what are they? What data will be used/collected? How?

6.   **Proposed Timetable (**attach *Scholarly Project Timeline***)**:

7.   **Role/Activities of the Student**: Describe and elaborate the role of the student

8.   **Use of Human Subjects**: Will this project require IRB approval? What settings?

9.   **Evidence Cited**: Focused reference list for items 3 and 4 above.

Project Oversight Committee Representative Signature of Approval:

_____   Date _____

CC: Team Chair
           Student
           Student file

DNP Project Timeline

Student (Name): _____ Expected Graduation Date:_____

Project	Due Date	Required Submission	Submit to	Projected Date	Completed Date
Proposal Submit	Fall 1st Year	**DNP Candidate Project Proposal Form**	Chair/DNP Project Sub-committee		
Confirmation of DNP Project Team members	DNP Project I	**Project Team Approval Form**	Administrative Assistant		
DNP Project Timeline	DNP Project I	**DNP Project Timeline Form**	Chair/Administrative Assistant		
Initial Project Planning and Writing Activities	DNP Project I	Identification of Problem and Purpose- end of week 3	Project Team		
		Theoretical Model and Framework – end of week 8	Project Team		
		Review of Literature – end of week 12	Project Team		
		Methodology Plan – end of week 15	Project Team		
Project Plan Approval. Begin implementation	DNP Project II	**DNP Project Plan Approval Form** *prior to IRB & Implementation*	Chair Administrative Assistant		
Planning of Methodology, Tool Development, Team Activities, Human Subject Considerations, and Writing Activities	DNP Project II	Implement into written paper any suggestions from DNP I – end of week 2	Project Team		
		Complete methodology section (including any needed tools, questionnaires, etc.) – end of week 5	Project Team		

		IRB Approval if required from project site(s) and Millikin University – end of week 8	IRB		
		Initiate project implementation – end of week 15	Project Team		
Implementation and Evaluation	DNP Project III	Implement into written paper any suggestions from DNP II – end of week 2	Project Team		
		Complete project implementation – end of week 8	Project Team		
		Submit draft of final paper including analysis, evaluation, and discussion – end of week 10	Project Team		
		Submit final paper with all edits including professional editing recommendations – end of week 15	Project Team		
Project Approval for Presentation	DNP III	**DNP Project Approval for Scholarly Presentation –** *must be obtained before presenting*	Chair Administrative Assistant		
Scheduled public project presentation	DNP III	Submit draft of podium presentation or poster to chair for approval – end of week 11	Chair		
		Presentation at Celebration of Scholarship	University Audience		
DNP Project Completion	DNP III	**DNP Project Completion Approval Form**	Project Team		

DNP Project Chair: _____ Date: _____

Student: _____ Date: _____

Appendix C

DNP Project Completion Approval

Student Name:

Title of Project

Date of Presentation

DNP Project Chair (Name and Credentials)

Signature   **Date**

DNP Project Practice Mentor (Name and Credentials)

Signature   **Date**

DNP Project Team Consultant (Name and Credentials)

Signature   **Date**

Appendix D

Permission to Digitize Graduate Scholarly Project

(please print)
Student Author Name: _____

Title of Project: _____

Date of Project: _____

I grant Millikin University the nonexclusive right to create a digital version of my scholarly project ("manuscript"), listed above, and to make it available online. I understand that the full text of my manuscript will be available to the public in digital form without restriction, and I give permission for the University to reproduce, distribute, display, and transmit my manuscript (including metadata and abstract) in order to make it available online. In addition, I waive any privacy rights granted by the Family Educational Rights and Privacy Act (FERPA) or any other law, policy, or regulation, with respect to my manuscript.

I understand that this permission constitutes a non-exclusive, perpetual, royalty-free license to archive, digitize, and make my manuscript accessible, and that I retain all other ownership rights to my manuscript's copyright, including the right to use all or part of it in other works and publications, and to submit it to other repositories. Millikin University will clearly identify the author of the manuscript, including a statement of author copyright.

I am the sole author and owner of the copyright to my manuscript and I have full and sole authority to grant this permission. This manuscript does not, to the best of my knowledge, infringe upon the rights of others. If appropriate, I have obtained written permission from the owner(s) of third party copyrighted material used in my manuscript and have complied with the University's Institutional Review Board and other applicable laws.

The version of my manuscript that I submitted for digitization is the same as that approved by my scholarly project advisory committee and I understand that once it has been submitted, I will not have access to it for corrections.

This policy meets the Millikin University Intellectual Property Policy (specifically in reference to section VII, subsection H).

Signature of student author: _____

Date: _____

Appendix E

Selected Examples of DNP Projects from the AACN (2022)

Organizational Systems Leadership: Work with the Director of the Red Cross exploring ways to improve disaster preparedness; Work with a director of system IT exploring the preparedness strategies to prevent an IT shutdown and strategies for communication and charting to continue during a shutdown, or focus on the nursing leadership role in leading IT design and implementation issues; Work with the System Safety Office evaluating the disaster plan incorporating national best practices and making recommendations for quality improvement of the system plan.

Population Health: Partner with community organizations that affect the health of high-risk populations to address screening or health education processes, financial challenges (including how to raise money and manage money), volunteerism, and interactions/ collaborative opportunities with the healthcare system. Examples of community agencies include: Habitat for Humanity, food pantries, Catholic Charities, homeless shelters, Salvation Army, and Hope Center. Other opportunities might include collaboration with private sector companies to design healthcare facilities, or design and implement wellness/health programs in conjunction with business such as the airline or auto industry

Policy Projects: Evaluate evidence to develop a policy to reduce major events that trigger an ED visit, e.g. by notifying a provider that a fall has occurred, document evidence of need for the policy change; Evaluate geriatric trauma screening for triage; make a recommendation for policy change to revise criteria.

Long-Term Care Facilities: Evaluate and implement a quality improvement program within a long-term care facility, e.g. Evercare or a Medicare Advantage plan, to improve antibiotic selection for symptomatic UTIs in older adults without indwelling catheters and to decrease the inappropriate use of nitrofurantoin. Implement a policy and care practice for antibiotic selection guided by the Infections Disease Society of America guidelines for treatment of UTIs.

Urgent Care: Focus on achieving the national benchmark of urgent care visit times lasting less than 60 minutes, identifying and mitigating impediments to efficient patient flow at a Family Medicine Center Walk-in Clinic. Implement a quality improvement project to identify measure and rectify bottlenecks impacting patient flow through the clinic while tracking total visit times.

School Systems: Evaluate *Tobacco Free Teens* program as a mobile device application, introduce the mobile application in a middle school classroom and evaluate the adolescents' satisfaction with the tool; other areas of focus may include evaluating immunizations, weight loss, and healthy eating.

Community-based Care Network: Implement a quality improvement project developed to address the gaps in APRN practice and evaluate the impact of a competency-based training program on the translation of evidence in the APRNs' practice.

Public Health Department: Collaborate with state government units to improve access to health care, negotiating tribal governance, gender issues, language, and culture in a population by training lay health promoters e.g. to improve the diet and access to fresh foods or providing zinc supplementation to the under age 5 population in Guatemala.

Non-governmental Organizations and Community Health Organizations: Collaborate with in country NGOs to decrease stigmatization and increase screening for breast cancer in Zambia; or collaborate with the American Heart Association or other organization to improve outcomes in the community.

Corporations: Focus on decreasing the percentage of employees in a manufacturing plant with a BMI in the obese or overweight category by changing cafeteria food options, educational initiatives and a voluntary employer-based 16-week wellness program.

Retrieved from https://www.aacnnursing.org/DNP/Tool-Kit

Appendix F
Guidance for DNP Project Development: Practice/Process Improvement is Desired, Avoid Research

COMPARING CHARACTERISTICS OF PRACTICE/PROCESS IMPROVEMENT & RESEARCH

	Practice/Process Improvement	Research
Intent/Purpose	Designed to implement already available knowledge/evidence to assess a practice or program within a particular institution	Designed to develop or contribute to generalizable knowledge (e.g., discover new information by answering a question or testing a hypothesis)
Deviation from Standard of Care	May be unlikely to involve significant deviation from standard of care; patient consent beyond what is already obtained in clinical practice is usually not necessary	May involve significant deviation from standard of care; informed consent is typically required unless waived by an IRB
Design	Adaptive, flexible design that generally does not involve randomization to different treatments or practices	Follows a rigid protocol that remains unchanged throughout the research; may involve randomization of individuals to different treatments, regimens, or processes
Effect on Program/Practice Evaluated	Findings of the project ARE expected to directly affect institutions' or individuals' practice	Findings of the study are NOT expected to directly affect institutional or programmatic practice
Population	Considered more of a responsibility to participate; information is collected on all or most of the target population to compare a practice or program to standards supported by current/new evidence	Usually involves a sample of the target population; universal participation is not an expectation; may involve statistical justification of sample size to achieve endpoints
Benefits	Directly benefits a process, program, or system; participants may or may not benefit	Participants may or may not benefit directly; intended to benefit future individuals
Risks	Does not increase risk to patients unless possible data privacy or confidentiality is a concern	May expose participants to risks greater than ordinarily encountered in daily life or during the performance of routine physical or psychological exams or tests
Dissemination of Results	Dissemination often does not occur beyond the institution evaluated; when published or presented to wider audience the intent is to suggest potentially effective models, strategies, assessment tools or provide benchmarks rather than to develop or contribute to generalizable knowledge; if published- must be referred to as a practice/process improvement project and not research	Intent to publish or present generally presumed at outset of project as part of professional expectations/obligations; Usually occurs in research/scientific publications; results are expected to develop or contribute to generalizable knowledge by filling a gap in scientific knowledge of supporting, refining, or refuting results from previous research