

**UNIVERSITY OF MASSACHUSETTS AMHERST SCHOOL OF NURSING
ABSTRACT**

Professional Doctorate in Nursing (DNP)

I. Proposal Development

The UMass Amherst School of Nursing (SON) requests permission to offer a Doctorate of Nursing Practice (DNP), a clinical doctoral degree in nursing. The American Association of Colleges of Nursing (AACN), the professional organization for higher education in nursing has mandated a transition from the current Master of Science (MS) degree for advanced practice nurses to the Doctorate of Nursing Practice (DNP) degree by the year 2015. This professional nursing preparation will include advanced coursework in leadership, research translation, clinical knowledge and skills. This proposed change was driven by evolving nursing roles in an increasingly complex health care system, the flood of new scientific knowledge, and ongoing concerns about the quality and outcomes of patient care. The faculty of the SON have developed the DNP proposal as part of the school's strategic plan and have made use of consultants and national conference materials to create this new educational model. Approval for developing and implementing the DNP degree will maintain the UMass Amherst's position as an educational leader in nursing in the Commonwealth, regionally and nationally.

II. Purpose and Goals

The proposed DNP will be a four year post-baccalaureate program to provide an exemplary accredited academic and clinical education for nurses who will practice at the highest level. Specific goals of the program are to graduate nurses who will: 1) engage in nursing practice using the advanced knowledge from nursing and related disciplines to improve health outcomes, 2) provide leadership and collaborate with leaders in other professions for change in systems of care, 3) synthesize and translate evidence from nursing and other disciplines to manage complex health problems, and 4) provide culturally proficient care to respond to health disparities and societal needs. Core competencies essential for those preparing for direct care roles and for population based roles build on eight essential content areas: 1) scientific underpinnings for practice, 2) organizational and systems leadership for quality improvement, and systems thinking, 3) clinical scholarship and analytic methods for evidence-based practice, 4) technology and information for the improvement and transformation of healthcare, 5) health care policy for advocacy in health care, 6) interprofessional collaboration for improving patient and population healthcare outcomes, 7) clinical prevention and population health for improving the nation's health, and 8) advanced nursing practice for improving the delivery of patient care. These competencies were developed by a collaborative group of nursing organizations involved in setting standards across specialties. Once approved, the DNP would replace the MS degree for advanced practice specialties. Collaborative programs in midwifery and the women's health nurse practitioner concentration (under development) will transition into the DNP at a later date. The school will continue to offer the MS clinical nurse leader concentration, and the PhD for individuals who wish to pursue research careers in nursing. Outcomes of the program will be measured through the SON's comprehensive systematic evaluation plan. Formative and summative data will be gathered and reviewed to determine success and areas for improvement and will be used to guide curricular and program decisions. Specific outcome measures for the DNP program include: 1) graduates' employment in clinical positions that take full advantage of their high level of preparation, 2) reports from alumni and employers regarding the influence of graduates' doctoral education on their efforts to change practice and improve patient outcomes, and 3) graduates' success on national certification examinations. Once approval to offer the DNP degree has been received, a marketing campaign will be instituted to inform alumni, colleagues and potential students about the program, its goals and the

curriculum. The program will be advertised in professional associations' publications and websites as well as at regional, national, and international conferences. Faculty will identify high achieving students from our own undergraduate program and begin early recruitment of these students into graduate study.

III. Mission Context

Research By providing a high quality educational and clinical research program, faculty will prepare students through classroom and clinical learning experiences and clinical residencies to carry out capstone clinical research translation projects, including program development and evaluation projects. Excellence. The faculty has every reason to believe the SON's outstanding academic reputation will be further enhanced through development of the DNP and that its graduates will make significant contributions to improving health care outcomes. Innovation. The DNP program, whose purpose is to improve patient care and systems' outcomes by increasing students' knowledge, research translation and leadership skills for clinical practice, is itself an innovation. Associated with this project will be the generation of scholarly products of sufficient quality to be presented at regional/national conferences and/or publishable in peer-reviewed journals. A third important innovation is related to the requirement that students take a minimum of 15 credits outside of the SON, which increases interdisciplinary education and emphasizes the interprofessional aspect of this degree program consistent with the IOM Health Professions report. Public Service: Students in the program will be placed in regional clinical agencies under the supervision and guidance of clinical experts with whom faculty have long-standing relationships. As students, they will contribute to improving nursing care and outcomes in these clinical sites and, as graduates, they will continue to contribute to the improvement of health care delivery and patient safety outcomes in the Commonwealth and the New England region.

IV. Need

The growing complexity of health care and increasing sophistication in technology necessitated that masters degree programs in nursing expand the number of required credits beyond those required in virtually any other field. For example, the current masters family nurse practitioner program includes 53 credits. The demand for additional breadth of content in nurse practitioner programs required comparison with doctoral programs in related disciplines for parity in degree requirements. The National Academy of Sciences (2005) recommended that the nursing profession should be encouraged to develop a professional doctorate like the Medical Doctorate (MD). It is expected that future clinical faculty will be required to have this DNP credential. Although we currently offer a Doctor of Philosophy (PhD) degree, many graduate nursing students interested in continuing their professional career in clinical practice rather than in pursuing a full-time research career, the PhD has not been the graduate degree of choice. The Deans of the UMass Schools of Nursing have met and support each others' efforts in planning DNP programs which build on each school's unique clinical strengths.

V. Students

We estimate 6 students per track in the program for 18 in the first cohort. Hence we would expect to enroll a total of 72 students over the 4 year period when the program is fully implemented. We expect that our first graduating class will consist of at least 12 students. Very much like our current master's degree program, the proposed DNP will serve minority, traditional, and non-traditional students. We intend to fully utilize minority outreach programs available on campus (e.g. the McNair Fellowship program) to increase our minority enrollment. We hope to build on our SON grant "Embracing the Challenge" (\$954,135) which targets nursing workforce diversity by developing the pipeline to university education and supporting undergraduate minority students. The post-masters entry into the DNP program by portfolio review and doctoral coursework will also attract nurses wanting to build

on their previous graduate nursing education to achieve a doctoral degree in nursing practice. The SON has enjoyed a high retention rate in its graduate programs, which we expect to maintain. The faculty is committed to continue its efforts to support students via research and training grants and other funding opportunities.

VI. Administration and Operation

The proposed DNP degree program will replace the existing master's degree advanced practice programs preparing nurse practitioners and clinical specialists. The School of Nursing currently has twenty faculty members with graduate status to teach in the DNP program. Due to creative scheduling and the strength of the existing nursing faculty, both in terms of numbers and qualifications, there is no anticipated need for additional faculty or staff at this time. The SON is able to meet the expanded curricular requirements of the new degree by offering some courses on an alternating year basis. Governance of the new program will be provided by the faculty within the School of Nursing. We are now admitting highly qualified students directly into the undergraduate program. Therefore we are eliminating a large cohort of pre-nursing students who were time intensive for faculty which enables the school to shift more faculty resources to graduate education. Further we are developing new partnerships with clinical agencies to provide additional clinical faculty resources which will facilitate DNP students' clinical placements.

VII. Curriculum and Faculty

The curriculum of the proposed program is consistent with the national recommendations for the terminal clinical degree within the profession of nursing. The faculty's areas of expertise in clinical practice and research support three specialties: A) family nurse practitioner B) psychiatric mental health nurse practitioner and C) public health nursing leadership specialist. Program Outcomes: Upon completion of this program, the graduate will: 1) engage in nursing practice using the advanced knowledge from nursing and related disciplines to improve health outcomes; 2) provide leadership and collaborate with leaders in other professions for change in systems of care; 3) synthesize and translate into practice evidence from nursing and other disciplines to manage complex health problems; 4) provide culturally proficient care to respond to health disparities and societal needs. Students will be educated through course work, seminars, practica, and residency experiences. The curriculum consists of 79-81 credit hours; the total number of credit hours varies with specialty concentration. All students will take core courses in healthcare quality, leadership, nursing theory, research, organizational theory, biostatistics, epidemiology, health policy and informatics. In addition, they will take specialty nursing courses necessary to achieve competencies determined by national nursing organizations which set educational and clinical standards. Students will also complete a clinical residency and capstone research project. The residency is constructed so that students have the opportunity to immerse themselves in the clinical specialty experience. Appendix A provides a sample plan of study. The program prepares students to conduct projects that translate research into practice, to evaluate use of evidence to improve practice, to conduct and evaluate program development projects, and to participate in collaborative research.

VIII. Admission and Graduation

Applicants to the proposed program must meet the entrance requirements of the University of Massachusetts Graduate School and the School of Nursing. Each applicant must be a graduate of a nationally accredited school of nursing and hold a professional license. They must hold a baccalaureate or master's degree in nursing, or an associate's degree in nursing and a non-nursing baccalaureate degree. Also required are: GPA of 3.0 or higher; 2 letters of recommendation, a scholarly writing sample, statement of professional goals, resume and evidence of completion of undergraduate statistics and health assessment course or equivalent if required by specialty. Applicants

may choose to submit GRE scores as additional data if they believe their application does not adequately reflect their potential to succeed in the program. Post-Baccalaureate students will complete 79-81 credit hours in the DNP program. Post-master's degree students will complete a minimum of 36 credit hours at UMass SON according to individualized portfolio review. Students take a minimum of 15 credits outside of the SON. Written and oral comprehensive examinations will also be required prior to beginning the residency portion of the curriculum. All students will complete the capstone residency and research translation project. Associated with this project will be the generation of scholarly products of sufficient quality to be presented at regional/national conferences and/or publishable in peer-reviewed journals. Student progress through the program will be monitored using multiple methods.

IX. Resources

Faculty, facilities and library resources are in place for the SON to begin to offer the proposed program in the Fall of 2006. The SON has 20 full-time graduate faculty with the necessary expertise and active research programs, as well as the necessary support staff to begin this program. Currently, all salaries and general operating expenses are supported by the SON through a variety of mechanisms, such as state allocations, continuing education funds, research grant funding, and trust funds. Since all of the faculty and staff who will be active in the proposed program have comparable responsibilities in the existing masters programs, there will be no need to reallocate funds given the projected enrollments. The Nursing base salary budget for FY2006 is approximately \$2,345,110 which supports 6 tenured , 10 tenure track faculty, 14.25 FTE Clinical faculty, and 10.25 FTE in administrative staff to assist in the programs administration. Additionally, the School of Nursing has external funding to support 7 full time clinical assistant professors and 1.5 FTE in administrative staff positions through partnerships with clinical agencies and federally funded projects. It is anticipated that the Nursing base budget will remain steady with incremental increases as negotiated in collective bargaining agreements for faculty and staff, and that the existing faculty outlined above will assume the teaching and administrative responsibilities to implement the DNP program with no additional campus resources being requested. See Appendix B attached.

APPENDIX A. Sample Plan of Study Doctorate of Nursing Practice

Family specialty: 81 credits

Semester 1 (9 credits) BIO&EP 640 Intermediate Biostatistics (3) N690M Informatics (3) ComHlth524 Health Politics & Policy (3)	Semester 2 (9 credits) BIO&EP 630 Principles of Epidemiology (3) N690L Leadership (3) N630 Research Methodology in Nursing (3)
Summer (3 credits) N603 Theoretical Components of Nursing Science (3)	
Semester 3 (10 credits) N690H Healthcare Quality (2)	Semester 4 (10 credits) N690C Advanced Health Assessment (3)

N690F Care Environment Management (2) N615 Advanced Pathophysiology (3) SCH-MGMT 833 Organizational & Administrative Theory (3)	N698 Practicum (1) N690D Advanced Pharmacology (3) N670 Family Systems & Intervention (3)
Semester 5 (10 credits) N610 Primary Health Care of Infants, Children, & Adolescents. (3) N698 Practicum (4) N790D Pharmacotherapeutics (3)	Semester 6 (10 credits) N620 Primary Care of Middle-Aged and Older Adults (3) N698 Practicum & Role Seminar (4) N790G Research Translation in Nursing (3)
Semester 7 (11 credits) N798 Practicum & Role Seminar (6) N698 Practicum & Role Seminar (2) Cognate (3)	Semester 8 (9 credits) Nxxx Residency (6) Nxxx Capstone Research Project (3)

APPENDIX B. Expenses for Proposed Program as Reallocated Existing Resources

	FY07	FY08	FY09
Personnel			
Full Time State Funded Faculty	\$252,591	\$260,169	\$267,974
Other Expenses			
Publications & Materials	\$ 2,000	\$ 1,000	\$ 1,000
Faculty Conference Travel	\$ 5,000	\$ 5,000	\$ 5,000
Total Other Expenses	\$ 7,000	\$ 6,000	\$ 6,000
Total Proposed DNP Program Expenses as Reallocated Existing Resources	\$259,591	\$266,169	\$273,974

FORM RP
UNIVERSITY OF MASSACHUSETTS AMHERST
OFFICE OF THE SECRETARY
THE FACULTY SENATE

NEW PROGRAM APPROVAL FORM- FINAL APPLICATION

50 copies required

Program Title: Professional Doctorate in Nursing

Check as appropriate: Graduate x Undergraduate

College/School: School of Nursing **Dean:** Eileen Breslin

Department: **Head/Chair:**

Submission Date: 12/05/05 **Proposed Starting Date:** 9/01/06

Degree to be awarded: Doctorate of Nursing Practice (DNP)

Approximate time required for completion: 4 years

I. PROPOSAL DEVELOPMENT

Provide a brief overview of the process for development of the proposed program, including any use of outside consultants or assistance provided by prospective professional accreditation groups.

The University of Massachusetts Amherst School of Nursing (SON) requests permission to offer a Doctorate of Nursing Practice (DNP), a clinical doctoral degree in nursing. The DNP degree provides an exciting new alternative to research focused doctoral programs [i.e. Doctor of Philosophy (PhD) programs] for those nurses seeking a terminal degree in clinical nursing practice.

The Doctorate of Nursing Practice is supported nationally. The American Association of Colleges of Nursing (AACN), the professional organization for higher education in nursing, represents more than 575 member schools of nursing at public and private institutions nationwide and articulates standards that provide direction for baccalaureate, masters and doctoral nursing education programs. In October 2004, the members of AACN endorsed the DNP proposal calling for transformational change in the educational preparation of professional nurses, including nurse practitioners, and systems level nursing leaders, toward a program of study that will provide scientific knowledge and related skills essential for the highest level of nursing practice (Essentials, August, 2005). This proposal for change was driven by the acknowledged need to provide quality healthcare while reducing costs, improve healthcare for all Americans, and eliminate disparities across cultures and socioeconomic groups. It became apparent that we simply do not have enough well-qualified, highly educated healthcare providers, particularly nurses, to meet these needs. Other factors playing a role in this recommendation include: evolving nursing roles in an increasingly complex health care system, the flood of new scientific knowledge, and ongoing concerns about the quality and outcomes of patient care. In addition, masters prepared advanced practice nurses have recognized the need and repeatedly verbalized the desire for added knowledge and skills. Responding to this call, many master's programs preparing specialty level advanced practice nurses, including those

offered at UMass School of Nursing, have added increasingly more hours to current burgeoning curricula, but without “leveling-up” the degree earned. As a consequence, the programs require a curriculum more similar to the expectations for other professional doctoral programs than to traditional master’s level study. Therefore, the AACN membership voted to “raise-the-bar” by mandating a transition from the current Master of Science (MS) degree to the Doctorate of Nursing Practice (DNP) degree by the year 2015. In summary, this decision by the AACN is a result of extensive investigation, review, and consultation/collaboration with specialty advanced practice nursing organizations, and multiple stakeholders and is in direct response to national surveys and reports indicating need for additional professional nursing preparation in the areas of leadership, research translation, and advanced clinical knowledge.

For the last two years, the faculty of the SON has closely followed the development of the DNP initiative. Dean Eileen Breslin served as a member of the AACN’s Board of Directors during the Board’s development and approval of this new education model and was able to provide additional insight and information for faculty review and decision-making. Consequently, in the Fall of 2004, SON faculty voted to accept the AACN’s recommendation and to develop the DNP as part of the school’s strategic plan. To facilitate development of the DNP degree, SON faculty have held a series of meetings, as well as workshops, with consultants that include Dr. Elizabeth Lenz, Chair, AACN Practice Doctorate in Nursing Task Force and Dr. Marcia Stanhope, Associate Dean of the College of Nursing, University of Kentucky, and co-director of their DNP program. The faculty has also reviewed extant documents on this national initiative and several faculty attended conferences and national meetings in which this new educational model was presented and discussed. Members of the SON’s Task Force to develop the DNP have been invited speakers at AACN conferences held across the nation this year. AACN has developed a draft of essential competencies and curricular expectations for the DNP which are currently being reviewed by nurses and other stakeholders across the country.

The majority of advanced practice nursing programs currently at the master’s level will be transitioning to the new DNP degree. Nationally, 10 universities in the United States, including Columbia University, have established the DNP and over 60 programs are in various stages of development. Approval for developing and implementing the DNP degree will maintain the University of Massachusetts Amherst’s position as an educational leader in nursing in the Commonwealth, regionally and nationally.

Our preliminary proposal to plan for the development of the degree was submitted in to University administration in September 2005 and received final approval from the University of Massachusetts system in November 2005.

II. PURPOSE AND GOALS

. Describe the program’s purpose and particular knowledge and skills to be acquired by the program’s graduates.

The DNP is the professional clinical nursing doctoral degree. It is intended to replace the master’s degree as the credential for advanced clinical practice in nursing. The proposed DNP will be a four year post-baccalaureate program. Clinical specialization is the hallmark of the DNP which is considered to be the terminal clinical practice degree in nursing. This

transformational change in the educational preparation of professional nurses, including nurse practitioners and systems level nursing leaders, will provide scientific knowledge and related skills essential for the highest level of nursing practice and accountability. Advanced clinical practice nursing is broadly defined in the DNP position statement within the AACN document *Essentials of Professional Nursing Doctorate Education* (August, 2005):

Any form of nursing intervention that influences healthcare outcomes for individuals or populations, including the direct care of individual patients, management of care for individuals and populations, administration of nursing, and health care organizations, and the development and implementation of health policy... (p. 2).

The major purpose of the proposed DNP program is to provide an exemplary accredited academic and clinical professional program for nurses who will practice nursing at the highest level. Specific goals of the program are to graduate nurses who will: 1) engage in nursing practice using the advanced knowledge from nursing and related disciplines to improve health outcomes, 2) provide leadership and collaborate with leaders in other professions for change in systems of care, 3) synthesize and translate evidence from nursing and other disciplines to manage complex health problems, and 4) provide culturally proficient care to respond to health disparities and societal needs.

The SON currently offers a BS in nursing; MS advanced practice specialty nursing concentrations in family practice, psychiatric mental health, community school health, and gerontological nursing; MS clinical nurse leader concentration; dual MS/MPH degree in nursing and public health; MS for midwifery students in a collaborative arrangement with the Baystate Medical Center Midwifery Program; another related program in development with Baystate is a women's health nurse practitioner concentration. The School also offers a PhD in nursing. Once approved, the DNP would replace the MS degree for all advanced practice specialty nursing concentrations. The collaborative programs, the master's midwifery students and the women's health nurse practitioner concentration, will transition into the DNP at a later date. The school will continue to offer the MS clinical nurse leader concentration and the PhD for individuals who wish to pursue research careers in nursing.

The AACN document, "Essentials of Professional Nursing Doctorate Education" (August, 2005) addresses core competencies to be achieved by all DNP graduates as well as core competencies essential for those preparing for direct care roles and for population based roles. The competencies build on eight essential content areas: 1) scientific underpinnings for practice, 2) organizational and systems leadership for quality improvement, and systems thinking, 3) clinical scholarship and analytic methods for evidence-based practice, 4) technology and information for the improvement and transformation of healthcare, 5) health care policy for advocacy in health care, 6) interprofessional collaboration for improving patient and population healthcare outcomes, 7) clinical prevention and population health for improving the nation's health, and 8) advanced nursing practice for improving the delivery of patient care.

To reflect the changes in education of nurses prepared for the highest level of clinical practice and to ensure congruence with AACN recommendations and the essential core competencies,

other national organizations are currently revising their advanced practice clinical competencies. One example is the National Organization of Nurse Practitioner Faculties (NONPF) which is the professional organization that defines educational standards for programs preparing specialty advanced nurse practitioners. NONPF collaborated with the AACN in its report and is reviewing the new draft standards for specialty nurse practitioner education which will be incorporated into certification examinations necessary for practice in the future. The newly published *Scope and Standards of Public Health Nursing*, sponsored by the QUAD Council for Public Health Nursing (PHN) organizations, is guiding the development of the DNP Specialty in PHN. In addition to AACN, the QUAD council has issued the *Competencies for Public Health Nursing Specialty* which delineates the proficiency level required for mastery by those holding the highest clinical degree. Also, the AACN is working closely with the Commission on Collegiate Nursing Education (CCNE) to formulate the “Essentials Document” that will guide accreditation of these programs. In order to maintain national accreditation by 2015, all educational programs preparing students for advanced specialty nursing practice will need to offer programs that ensure students meet the standards outlined above, either through their own offerings or, in the case of schools which do not grant doctoral degrees, in collaboration with a university offering the DNP.

Professional nurse educators and clinicians, including SON faculty, have given much thought to how to best educate the next generation of advanced practice nurses. The SON faculty believe that knowledge and skills needed to improve patient outcomes require both a strong foundation in the sciences and a strong clinical base, especially in research translation, policy, and program development. They also believe interprofessional collaboration and leadership are key curricular components based on the recommendations of the National Institute of Medicine’s (IOM) reports *To Err Is Human* (1999), *Health Professions Education in America* (2003), and *Who Will Keep the Public Healthy* (2003).

To this end, the proposed DNP program includes a completely revised and redesigned set of core and specialty advanced nursing practice courses as well as a cadre of exciting new courses necessary to prepare graduates for leadership roles in providing care and population-focused leadership in a variety of settings. Graduates will be prepared as clinicians and as leaders capable of evaluating and translating research into practice to improve outcomes of care. Details of the new curriculum are in Section VII.

B. Describe the goals you hope to achieve within five years and specify the measures which would be used to determine the successful achievement of those goals.

The SON’s primary goals for the next five years include: 1) secure national ranking in the top 30 schools of nursing, 2) enroll a full complement of diverse students, 3) graduate the first DNP class, and 4) provide high quality education that prepares students to enter the complex and rapidly changing field of healthcare.

One index for measuring the first goal, to secure national ranking among the top 30 schools of nursing, will be SON's rank in the National Institute of Nursing Research (NINR) and the National Institutes of Health (NIH) combined annual ranking of nursing schools. A school's ranking within this system is directly related to the research productivity of its nursing faculty. To facilitate increased research productivity, the SON has revised its recruitment strategy for new faculty hiring. Recently hired faculty members have had post doctoral experiences and are poised for seeking federal funding. In addition, collaborative research groups have been set up, a designated person has been appointed to mentor faculty in their research efforts, and procedures for the review and refinement of research proposals by both internal and external reviewers prior to submission have been established. Currently, three faculty members are funded through the NIH, one from the National Science Foundation and three more are seeking funding through the Agency for Health Care Quality (AHCQ) and the Robert Wood Johnson Foundation. For 2004, the most recent year for which data is available, UMass SON ranked 66th out of all schools of nursing that received NIH funding.

Our second goal, to have a full complement (20%) of diverse students, directly follows from the first. Increased faculty research productivity, excellent research programs and higher national rankings will attract students from both within and outside of the Commonwealth of Massachusetts and the New England region. We will track the number of students applying to the DNP program by region as well as by the yield rate by region to determine the degree to which this goal is met. Based on the IOM report (2004), *In the Nation's Compelling Interest: Ensuring Diversity in Health Professions*, the SON identifies diversity to include but not be limited to the applicant's race or ethnicity, cross cultural experience, and multilingual ability.

Our third goal, to graduate the first DNP class, will be measured by the number of individuals matriculating into the program, the number of students graduating, and the time to graduation (See Section V. A. for estimate of full and part-time student enrollment). We will target full time students to graduate in four years. We also anticipate accepting a cohort of part-time post-masters students, since many potential applicants are at a point in their professional careers where they continue to maintain their professional positions while in graduate programs.

Our fourth and most important goal, to provide high-quality education for our students to enter the complex and rapidly changing field of healthcare, will be measured by the SON's comprehensive systematic evaluation plan. The plan has specific outcome measures and expected results. For instance, alumni and their employers are surveyed at one and three years after graduation to determine aspects of the curriculum and program that are working well and those that need improvement. The actual results are systematically reviewed by the administrative committee, discussed and analyzed with the faculty, and are used to guide specific committee agendas and make curricular and program decisions. Specific outcome measures for the DNP program include: 1) graduates' employment in clinical positions that take full advantage of their high level of preparation, 2) reports from alumni and employers regarding the influence of graduates' doctoral education on their efforts to change practice and improve patient outcomes, and 3) graduates' success on national certification examinations.

C. Identify in general, strategies for achieving these goals and ensuring the continuing quality of the program.

1. Once the DNP degree has been approved, a marketing campaign will be instituted to inform alumni, colleagues and potential students about the program, its goals and the curriculum. The program will be advertised in professional associations' publications and websites as well as at regional, national, and international conferences. Information sessions will be held for potential applicants at various geographical and clinical locations and information packets will be developed and distributed to all colleges and universities in New England who offer undergraduate nursing education. Faculty will identify high achieving students from our own undergraduate program and begin early recruitment of these students into graduate study. Following program approval, the SON will notify the Commission on Collegiate Nursing Education (CCNE), the national accreditation agency, and will submit DNP program materials as part of the ongoing accreditation process.
2. Recruitment and retention of nationally recognized scholars and clinicians in the field will continue with special emphasis on recruiting faculty whose research, teaching, and clinical areas align and support research foci of the SON and who have potential to advance collaborative interdisciplinary research initiatives across academic disciplines and with clinical agencies. Procedures will be developed to encourage partnering of faculty with teams of students in both the DNP and PhD programs to examine key clinical issues in terms of knowledge discovery and the translation and application of knowledge and research findings into practice.
3. Formative and summative assessment data will be gathered and analyzed at specific points during the program to identify areas of strength and areas for improvement. Assessment data will include but not be limited to course evaluations, employer and alumni surveys, input from and consultation with stakeholders, meetings with student groups, national certification results, and ongoing curriculum monitoring and review.
4. As students matriculate into the DNP program, they will be assigned an advisor who will guide them through the program and assist them in establishing a network of colleagues who will work with them as preceptors and mentors. Through this careful guidance and assistance with course work and clinical site placement, students are more likely to remain in the program and progress smoothly toward graduation.

III. MISSION CONTEXT

. Describe in detail how the proposed program supports the mission and current priorities of the campus. Also comment on whether and how the proposed program supports the mission and priorities of the University and the system of public higher education in Massachusetts.

The mission of the University is to provide an affordable education of high quality and conduct programs of research and public service that advance our knowledge and improves the lives of the people of the Commonwealth.

Research

By providing a high quality educational and clinical research program, faculty will prepare students through classroom and clinical learning experiences and clinical residencies to carry out capstone clinical research translation projects, including program development and evaluation projects. The patient care and population-focused health care outcomes of these clinical research

experiences have potential to improve the lives and health of the people of the Commonwealth. Students will serve the people of the Commonwealth in their clinical placements and residencies throughout the state both as students and as graduates, since most of our alumni reside in Massachusetts.

Excellence

Changes in health care and clinical practice have driven the need to increase the knowledge level for advanced practice nurses in order to improve patient outcomes. UMass Amherst SON graduates have consistently been highly recruited by prospective employers in diverse clinical settings. Based on survey data provided through AACN, faculty believe the added value of knowledge and skills gained in the DNP curriculum will be highly rated and sought after by prospective employers. The faculty has every reason to believe the SON's reputation will be enhanced through development of the DNP and that its graduates will make significant contributions to improving health care outcomes.

Innovation

The DNP program, whose purpose is to improve patient care and systems outcomes by increasing students' knowledge, research translation and leadership skills for clinical practice, is itself an innovation. The proposed DNP curriculum includes an additional 9 credits in capstone and clinical residency courses as well as additional coursework than is now required of master's advanced practice specialty nursing concentrations. For example, the DNP residency will include additional concentrated practice time in a specialty and a research translation 'capstone' project intended to improve outcomes of care in a selected area within the specialty. Associated with this project will be the generation of scholarly products of sufficient quality to be presented at regional/national conferences and/or publishable in peer-reviewed journals. The final result will be the dissemination of findings. A third important innovation is related to the requirement that students take a minimum of 15 credits outside of the SON, which increases interdisciplinary education and emphasizes the interprofessional aspect of this degree program consistent with the IOM Health Professions report. A final innovation is the mentored clinical, research, and leadership experience students will have as part of an interprofessional leadership team during their capstone experience. This experience can build on the highly successful model of the SON in its National Leadership Mentorship Program currently in place for the MS/MPH program.

Public Service

Students in the program will be placed in regional clinical agencies under the supervision and guidance of clinical experts with whom faculty have long-standing relationships. See Appendix D for a listing of clinical facilities who have agreed to consider hosting residency students. Currently, the school is in the process of establishing a faculty practice clinic to serve health promotion needs of students and community residents. The DNP students would have the opportunity to be mentored by faculty in this practice site as well. We believe the graduates will be prepared to provide leadership in health care delivery and outcomes in the Commonwealth and beyond. Students have an opportunity for clinical experiences in Ghana, Jamaica and Ireland through our winter session international program. We believe these international experiences provide an opportunity to foster an enhanced global perspective for their professional practice. Public service opportunities provide a rich educational laboratory to create, test, and evaluate the evidence necessary for predictable health care outcomes among diverse communities.

B. Explain the general impact of expanding campus' academic offerings through the addition of the proposed program as well as the likely effect of the new program on the quality of the campus' existing offerings.

No other school within the UMass system currently offers the DNP, but it is anticipated that all Schools of Nursing will move their advanced practice nursing education to this level before 2015. The Deans of the nursing programs in the university system have met to discuss this effort. The SON faculty believes strongly that UMass Amherst should lead in the inception of this effort and be in the vanguard group of universities nationwide to institute the clinical practice doctorate. The effect of this new professional clinical doctoral program on the quality and diversity of existing campus offerings can only be enhanced as new students are recruited from across the region for the program. These students will be a motivated group of decidedly intelligent adult learners who will engage in quality discourse with other students in courses across the campus.

Although faculty anticipates the majority of students enrolled in courses will be DNP students, selected courses will be available to PhD students in nursing as well as students from other disciplines. For example, an elective on chronic illness across the lifespan and a course in leadership will be open to graduate students in other departments. In addition, enrollment of DNP students in a minimum of 15 credits outside the SON will increase student diversity in other courses/schools and facilitate a high level of interprofessional collaboration among students and faculty.

C. Describe whether students will be drawn from enrollments in existing program offerings, or whether new students will be attracted to the campus by the program.

A student may enter this program as a post-baccalaureate student or as a post-masters student. Faculty anticipates several candidates each year will be drawn from the current top SON undergraduates on completion of their baccalaureate degrees. This expectation is congruent with a national initiative to encourage early enrollment in graduate nursing education for those students wishing to practice at the advanced level. Since we will be the first school in the region to offer this degree as a post-baccalaureate entry, we anticipate a substantial applicant pool of students from across the region with baccalaureate degrees wishing to prepare for advanced practice nursing roles at the doctoral level. Also, since there are so few DNP programs currently in operation, and as we will be one of the first to offer the DNP with post-baccalaureate entry, we should receive an ample number of national applicants as well.

We anticipate a pool of post-masters students, wishing to complete the additional coursework to achieve the DNP. These candidates will be drawn from graduates of our own current masters programs and graduates of programs at other universities. The SON will follow national recommendations to have a post-masters point of entry for students into the DNP program as a transitional strategy until the DNP becomes the national standard for advanced practice education in 2015. Post-masters applicants will have a portfolio review which will include examination of all prior coursework to ensure all DNP course requirements are met. It is anticipated that these post-masters students will need a minimum of 36 credits to complete the

DNP degree requirements, which conforms to the minimum credit requirement of the University for doctoral education (see Section VII. A. for details related to post-masters entry course requirements).

Following a recent letter to alumni explaining the suspension of admissions to the masters programs as we prepared this proposal and its curriculum, the school received 50 calls from graduates asking to be notified of approval of the DNP program. This response does not come as a surprise, as the national movement to create the DNP was based in part on input from advanced practice nurses and their employers. To facilitate student access to the DNP program, the SON will create selected hybrid courses (offered both in person and on-line), which will decrease the number of on campus course meetings and allow students from a broader geographic region to participate.

IV. NEED

A. Provide evidence of student demand and current career opportunities for graduates of the program.

Over the past three decades tremendous advances have been made in the development of nursing science as well as science from other disciplines supporting nursing practice. Combined with the growing complexity of health care and increasing sophistication in technology, these factors necessitated that masters degree programs in nursing expand the number of required credits beyond those required in virtually any other field. For example, the current family nurse practitioner program requires 40 didactic, laboratory, and seminar class credits and 13 practicum credit hours that translate into 728 clinical clock hours for a total of 53 credits. Moreover, national nursing specialty organizations as well as SON faculty have identified additional content areas in need of expansion. These areas include but are not limited to risk management, practice management, advanced diagnosis and treatment strategies for complex health problems, leadership content for improving systems of practice, and enhanced knowledge in research translation. The demand for doctoral preparation for clinical nursing practice at the highest level was overwhelming in light of the number of required credit hours, depth and breadth of content, need for translation of research findings into practice, and parity with doctoral programs in related disciplines.

This clinical doctoral program makes a contribution to improving the healthcare system by preparing highly qualified leaders for advanced nursing practice and for clinical teaching. By preparing clinicians who will also be educated to translate research in systems of practice for quality care, graduates will be prepared to make significant contributions to improving patient safety and the health of the public. In addition to the AACN, the IOM also has recognized the need to better educate health professionals and has recommended emphasizing evidence-based practice models, quality improvement strategies, the use of informatics, and quality opportunities for interdisciplinary collaboration. Most recently the National Academy of Sciences (2005) recommended that the nursing profession should be encouraged to develop a professional doctorate like the Medical Doctorate (MD). This fall the Federal Government issued a call for proposals through the Health Resources and Services Administration (HRSA) for program grants to support initiatives such as this SON proposal. It is expected that future clinical faculty will be

required to have this DNP credential. We believe this innovative clinical doctoral program will achieve these goals and meet the demand and need for changes that improve health care outcomes.

The Pew Health Professions Commission has also called for a more concentrated production of nurses in graduate-degree programs as career opportunities in advanced nursing practice continue to be in demand. Increasing job opportunities for master's graduates illustrates the demand for nurses with advanced clinical skills. Nursing schools estimate that an average of 93 percent of all master's degree nursing graduates have accepted positions upon graduation. The growing demand for increased knowledge and expanded skills for advanced practice nurses would indicate that the graduates of the DNP program would be in as much or more demand as their master's prepared counterparts. The health system's increasing demand for front-line primary care and the accelerating drive toward managed care of individuals and populations in a cost-efficient and safe manner is driving the nation's call for more nurse practitioners, clinical nurse specialists, certified nurse-midwives, and nurse leaders with advanced practice knowledge and skills. Finally the Association of State and Territorial Health Officers (ASTHO) (2005) documented that a well educated nursing leadership workforce remains critical for the health and wellbeing of communities globally. The combination of a rapidly aging public health workforce, retirement rates as high as 45%, vacancy rates as high as 20% in some states and turnover reaching 14% in some parts of the country add to the public health and population-focused leadership shortage crisis.

B. If the proposed program is similar to a program in existence at the University, or at another public or private institution in Massachusetts, describe how the program differs from, and how it complements those programs. If there are similar programs within the university, explain why the purposes of the proposed program cannot be achieved through these related, existing programs or through modifications to those programs.

As previously described, we currently offer a Doctor of Philosophy (PhD) degree. However, for most graduate nursing students who are interested in continuing their professional career in clinical practice rather than in pursuing a full-time research career, the PhD has not been the graduate degree of choice. Experience has shown that when the DNP and PhD programs are available, student enrollments grow in both programs as does faculty productivity. Leading professional organizations in nursing such as the American Association of Colleges of Nursing (AACN) and the National Organization of Nurse Practitioner Faculties (NONPF) have endorsed the move from master's preparation to doctoral preparation for advanced practice nurses. UMass Amherst SON will be the first school to offer this degree in Massachusetts and in the New England region. We believe this clinical doctoral program will appeal to a potentially large applicant pool within the Commonwealth, the region, and the nation.

A series of AACN conferences related to the DNP have been held in Fall 2005 around the country. SON DNP task force members have been invited to speak about our program development as an exemplar at all of these conferences. As a result of the opportunities for discussion of the DNP at these regional conferences, it is anticipated that increasing numbers of schools of nursing will adopt this educational model, either by program development or through institutional partnerships. As the DNP is a national initiative, most schools of nursing in

Massachusetts are considering this educational model; however, UMass Amherst SON hopes to be the leader in innovation by being the first in Massachusetts and in New England to receive program approval.

Our PhD students and the new DNP students will have a chance to interact within and between similar core and cognate courses throughout our curriculum and across the campus. This planned interaction and integration, including collaborative student assignments, will complement each individual program and add richness to student learning.

C. Are other campuses planning such programs?

Other campuses statewide, regionally and nationally are currently in the discussion phase of planning as the DNP will be the standard degree for advance practice nurses by 2015. The Amherst SON faculty hosted the nursing faculty from all UMass nursing programs in October 2004 for a meeting with consultant Elizabeth Lenz to discuss the DNP initiative. In a subsequent meeting, the Deans of each school agreed to support each other's development of their individual DNP programs. Each campus will focus on their unique strengths in DNP development. Our unique specialty skill set includes family nurse practitioner, psychiatric mental health nurse practitioner and public health nursing leadership. Other campuses within the system will build upon their core strengths.

V. STUDENTS

A. Provide an estimate of full and part-time student enrollment by year, for the first year and for the year in which it is expected that the program will be fully implemented.

Since this innovative practice offering is at the doctoral level and open to post baccalaureate entry, we may experience a larger first and second year quota than is typical. However we will list our best conservative estimates based on historical data. To begin, we estimate that 6 students will be admitted into each track for a total of 18 students in the first year. This estimate is based on previous UMass SON application statistics and the typical enrollment in other doctoral programs across the country. Hence we would expect to enroll a total of about 70 students over the 4 year period when the program is fully implemented, taking into consideration a slight attrition rate due to unforeseen circumstances. We expect that our first graduating class will consist of at least 12 students. These estimates are similar to the actual student numbers reported by Dr. Stanhope for the DNP program at the University of Kentucky, College of Nursing.

B. Describe the kinds of students to be served (e.g. traditional/non-traditional, minority and non-minority, members of a particular profession) and any special recruitment efforts.

Very much like our current master's degree program, the proposed DNP will serve minority, traditional, and non-traditional students. We intend to fully actualize minority outreach programs on campus (e.g. the McNair Fellowship program) to increase our minority enrollment. We hope to build on our SON grant "Embracing the Challenge" (\$954,135) which targets nursing workforce diversity by developing the pipeline to university education and supporting undergraduate minority students. The HRSA supported, "Expanding the Boundaries of Women's

Health" grant (\$756,291) will expand the availability of certified, culturally competent, and diverse advanced education nurses in order to meet and respond to a wide range of women's health care needs in women's health nursing and nurse midwifery particularly among disadvantaged women and women of color in the western Massachusetts region. Additionally the grant supports a series of outreach and educational presentations to middle and high school students, with a special emphasis on outreach to ethnic minority and disadvantaged students, regarding work and career options in women's health. We plan to incorporate this program, which is in the planning process, into the DNP in the near future.

The post-masters entry into the DNP program by portfolio review and doctoral coursework will also attract nurses wanting to augment their previous graduate learning to achieve a doctoral degree in nursing practice.

C. Discuss the types of student retention strategies that will be utilized, and the support services that will be offered which are different from institutional practices and procedures.

A variety of retention strategies will be used to retain DNP students. All students are assigned a major advisor who will guide and monitor their progress during the program. Ongoing, systematic, formative and summative evaluations of students will be conducted throughout the program to assess student progress and determine need for additional support services. Strategies for identifying and supporting students who need assistance have been established. The SON has enjoyed a high retention rate in its graduate programs, which we expect to maintain. The faculty is committed to continue its efforts to support students via research and training grants and other opportunities. The School has been awarded funding from the Federal Nurse Traineeships Program and the Federal Faculty Student Loan Program, both of which can be made available to students in this program and should minimize the number of students who might leave the program for financial reasons. We will also explore the possibility of a paid residency for students, a model which is being developed by selected DNP programs nationwide.

VI. ADMINISTRATION AND OPERATION

A. Describe the organizational structure for the administration and operation of the proposed program and strategies designed to ensure its continued quality.

The proposed DNP degree program that will be offered through the School of Nursing will replace the existing master's degree advanced practice programs preparing nurse practitioners and clinical specialists. If approved, it will be one of four degrees offered by the SON. The three degrees offered at this time are: BS degree, MS degree with a major in nursing, and the PhD in nursing degree.

The School of Nursing currently has twenty faculty members with graduate status to teach in this program. Due to creative scheduling and the strength of the existing nursing faculty, both in terms of numbers and qualifications, there is no anticipated need for additional faculty or staff at this time. The SON is able to meet the expanded curricular requirements of the new degree by offering some courses on an alternating year basis. Also, students will take selected courses in

other departments/schools which will distribute course and credit hours across disciplines. Governance of the new program will be provided by the faculty within the School of Nursing.

We are now directly admitting highly qualified students into the undergraduate program. Therefore we are eliminating a large cohort of pre-nursing students who were time intensive for faculty and so are able to shift more faculty resources for graduate education. We are also developing new partnerships with clinical agencies to provide additional clinical faculty resources.

VII. CURRICULUM AND FACULTY

A. Include a complete description of the curriculum and plans for delivering the proposed program, including a semester-by-semester sequence of courses and other requirements.

The purpose of the proposed UMass Amherst School of Nursing DNP program is to prepare doctorally educated graduates who practice nursing at the highest level. The curriculum of the proposed program is consistent with the national recommendations for the terminal clinical degree within the profession of nursing. The faculty's areas of expertise in clinical practice and research support three specialties: A) **family nurse practitioner** B) **psychiatric mental health nurse practitioner** and C) **public health nursing leadership specialist**.

Program Outcomes

Upon completion of this program, the graduate will:

- 1) engage in nursing practice using the advanced knowledge from nursing and related disciplines to improve health outcomes.
- 2) provide leadership and collaborate with leaders in other professions for change in systems of care.
- 3) synthesize and translate into practice evidence from nursing and other disciplines to manage complex health problems.
- 4) provide culturally proficient care to respond to health disparities and societal needs.

In summary, students will be educated through course work, seminars, practica, and residency experiences. The curriculum consists of 79-81 credit hours; the total number of credit hours varies with specialty concentration.

CORE COURSES: *All* students will take 40 credits of core courses which include the following

N603 Theoretical Components of Nursing Science (3)

N690L Leadership (3)

N690H Healthcare Quality (2)

N690F Care Environment Management (2)

N630 Research Methodology for Nursing (3)

N790G Research Translation in Nursing (3)

BIOST&EP640 Intermediate Biostatistics (3)

BIOST&EP 630 Principles of Epidemiology (3)
SCH-MGMT 855 Organizational and Administrative Theory (3)
ComHlth524 Health Politics and Policy (3)
N690M Informatics (3)
Capstone Experience:
 NXX Residency (6)
 NXX Capstone research project (3)

SPECIALTY COURSES

Family Nurse Practitioner

N690C Advanced Health Assessment (3)
N615 Advanced Pathophysiology (3)
N690D Advanced Pharmacology (3)
N790D Pharmacotherapeutics (3)
N610 Primary Health Care of Children, Adolescents & Young Adults (3)
N620 Primary Health Care of Middle Aged and Older Adults (3),
N670 Family Systems and Intervention (3)
N698 Practica and Role Seminar (11)
N798 Practicum and Role Seminar (6)
Cognate (3)

Psychiatric Mental Health Nurse Practitioner

N690C Advanced Health Assessment (3)
N615 Advanced Pathophysiology (3)
N690D Advanced Pharmacology (3)
N790D Pharmacotherapeutics (3)
N660 Psychiatric Mental Health Nursing with Individuals (3)
N790I Psychiatric Mental Health Nursing with Individuals II (3)
N670 Family Systems and Intervention (3)
N665 Psychiatric Mental Health Nursing with Groups (3)
N698 Practica & Role Seminar (7)
N798 Practicum & Role Seminar (6)
Cognate (3)

Public Health Nurse Leadership Specialist

Nxx Health Disparities (in development) (3)
N640 Advanced Public Health Nursing I (3)
Nxx Advanced Public Health Nursing II (in development) (3)
N798 Practica (6)
N690N Current Topics (3)
ComHlth 620 Principles of Public Health Practice (3)

Env-Hlth 565 Environmental Health (3)
ComHlth 601 Application of Social & Behavioral Theories in Public Health Education and Intervention (3)
ComHlth 525 Ethical Issues in Public Health (3)
ComHlth 628 Financial Management of Health Institutions (3)
ComHlth 780 Public Health Law (3)
ComHlth 704 Health Program Planning and Evaluation (3)

TOTAL CREDITS: 79-81 depending on specialty

See Appendix A for examples of study plans for each of the specialties. Course descriptions are listed in Appendix B. Specialty nursing courses have been revised to reflect a stronger emphasis on evidence-based practice for populations as well as for individual patients. All specialty courses have been reviewed within the past 9 months for congruence with clinical competencies established by the National Organization of Nurse Practitioner Faculties (NONPF) and within the last two months for congruence with the AACN draft *Essentials* competencies. A table linking these competencies with coursework may be found in Appendix C. Specialty requirements are determined by recommendations from the National Organization of Nurse Practitioner Faculties (NONPF) guidelines for programs preparing nurse practitioners. The new NONPF guidelines for graduates of DNP programs are currently in the validation phase and will be published within the next few months. Dr. Jean DeMartinis, SON faculty member, has been nominated by the CCNE and has been selected by NONPF as an external reviewer for the validation panel. Public health nursing competencies are determined by a composite of national standards from the QUAD Council on Public Health Nursing referenced earlier in this document. These include the *Scope and Standards of Public Health Nursing*, the Council on Linkages, and Association of State and Territorial Directors of Nursing *Core Competencies for Public Health Nurses*(2003) and the Institute of Medicine competency recommendations contained in *Who Will Keep the Public Healthy* (2003). A comparison of the masters course requirements and DNP requirements may be found in Appendix D.

Capstone Experience: Residency and Capstone Project

Residency

Upon completion of all required general course work, practica and field experiences, the student will enter the 6 credit residency component of the curriculum which entails completion of an intensive supervised immersion experience within a chosen specialty in which designated DNP competencies can be mastered. The student, with assigned faculty advisor assistance, will select a mentor/preceptor with whom to work. This mentor/preceptor will be an acknowledged expert in the field of interest. The student may prefer or need more than one mentor and/or preceptor to fulfill identified teaching/learning goals. The residency must provide access to and authority for expanded scope of practice which will allow students to practice at the highest level. Students will be encouraged to think “outside the box” as they participate in designing their experience.

Although, the residency must take place in an approved setting, this setting may or may not be located within the New England area. However, attendance at scheduled seminars at UMass Amherst SON is required during the residency period. During the residency, the capstone project

is refined and actualized and the academic portfolio is completed and submitted as a required criterion for degree completion.

As discussed, the residency is constructed so that students have the opportunity to immerse themselves in the clinical specialty experience as they complete 6 credit hours of practicum (336 contact hours or three 8 hour clinic days per week) in one semester. However, students who are unable to complete the residency in one semester due to unforeseen circumstances may take the residency over two semesters.

Capstone Research Project

The program prepares students to conduct projects that translate research into practice, to evaluate use of evidence to improve practice, to conduct and evaluate program development projects, and to participate in collaborative research. This focus is different from that of PhD researchers who discover new knowledge. Instead of a traditional dissertation, a 3 credit clinical research translation project is required for the DNP capstone experience. In collaboration with their advisor, students will identify a clinical site and a problem within that site that is amenable to evaluation research. They will seek further guidance from a mutually agreed upon committee consisting of three faculty members (two School of Nursing faculty and one outside member). With this assistance, students will develop, implement, and evaluate a theoretically- and research-based program to address the problem at the clinical site. Each student will be responsible for completing the project and presenting it in writing and defending it in an oral examination to his/her committee. The project will be filed with the School of Nursing, and it will be expected to result in at least one scholarly publication or presentation as well as in a written report submitted to the clinical site. To summarize, the proposed DNP curriculum in relation to the capstone experience will expand from the current master's capstone research requirement of a 3-credit experience based on 3 credits of classroom research focused coursework, to a 3-credit experience based on 9 credits of research focused classroom coursework.

Post-Masters Curriculum Requirements

For all post-master's entry students, a portfolio review will determine DNP degree requirements. It is anticipated that students will require a minimum of 36 credits to complete degree requirements. An example of post-master's plan of study can be found in Appendix A.

B. Explain how the program makes sense academically, and how the proposed curriculum adequately covers the subject areas. Provide evidence that the program is considered a legitimate academic discipline. If the program is interdisciplinary, provide a rationale for inclusion of the relevant disciplines and faculty.

The academic and clinical components of the proposed program were devised to meet the new standards for preparation of advanced practice nurses that were developed and adopted by the American Association of Colleges of Nursing. These standards contain specific content areas in which individuals seeking national certification must be able to demonstrate they have the

requisite knowledge and skills. As the faculty designed the new degree program, special attention was paid to assure that each content area was covered within the proposed course work and/or clinical experience. Appendix C lists the AACN *Essentials* competencies and where content related material is included in the curriculum.

C. Show course numbers, titles and a brief description of each with an indication of which courses already exist (either on that campus or another campus) and which are to be newly developed. Include a summary of course category (major, cognate areas, general education, electives). If applicable, describe the procedures for any required independent exercise and for any required internship or clinical experience. In the latter case, describe the proposed arrangements for placement of students.

Sample plans of study for the proposed program can be found in Appendix A. Appendix B contains a description of each of the courses to be included in the new program and indicates which are existing courses and which courses will be developed upon approval of the program. A comparison of current master's requirements and DNP requirements for the family specialty is found in Appendix D.

D. Submit current curriculum vitae for all participating faculty.

Curriculum vitae for each of the graduate nursing faculty members can be found in Appendix F. The faculty have active research programs and contribute to the advancement of the knowledge base of the discipline. Among the faculty members are individuals with diverse clinical and research interests and expertise.

E. If applicable, provide information concerning certification, licensure, and specialized accreditation.

Graduates from the DNP program will be eligible to sit for national certification examinations in their specialties offered through national accrediting bodies such as the American Nurses Credentialing Center (ANCC) and the American Academy of Nurse Practitioners (AANP). All Nurse Practitioners (NPs) who graduate from the program who were not already licensed as NPs will apply for advanced practice licensure through their states. The DNP Task force in the SON will review any new curriculum recommendations as they are publicized and as they relate to the knowledge areas included in certification examinations. Upon approval of this degree offering, the SON will notify its accrediting body, the Commission on Collegiate Nursing Education, and the AACN of the new program and present them with the information provided herein.

VIII. ADMISSION AND GRADUATION

A. Describe standards for admission to the program and degree requirements in detail, such as general education requirements, major requirements, required academic work in related fields, electives, practical experience, internships, clinical practices and the like. Include admission requirements for transfer students, if applicable.

Standards for admission

Applicants to the proposed program must meet the entrance requirements of the University of Massachusetts Graduate School and the School of Nursing. Each applicant will:

1. Be a graduate of a nationally accredited school of nursing.
2. Have a.) baccalaureate or master's degree in nursing, or
b.) associate's degree in nursing and a non-nursing baccalaureate degree
3. GPA of 3.0 or higher
4. Submit the following documentation:
 - official transcripts for all undergraduate and graduate programs
 - 2 letters of recommendation
 - sample of scholarly writing
 - statement of professional goals
 - resume
 - documentation of professional licensure
 - TOEFL scores if needed
 - undergraduate statistics course
 - undergraduate health assessment course or equivalent if required by the specialty
5. Applicants may choose to submit GRE scores as additional data if they believe their application does not adequately reflect their potential to succeed in the program.

Degree requirements

Post-Baccalaureate students will complete 79-81 credit hours in the DNP program (see plans of study for each track in Appendix A.). Post-master's degree students will complete a minimum of 36 credit hours at UMass SON according to individualized portfolio review (see sample possible plan for post-master's student in Appendix A.). Students take a minimum of 15 credits outside of the SON. A written and oral comprehensive examination will also be required prior to beginning the residency portion of the curriculum. All students will complete the capstone residency and research translation project. Associated with this project will be the generation of scholarly products of sufficient quality to be presented at regional/national conferences and/or publishable in peer-reviewed journals. The final result will be the dissemination of findings.

B. Explain how the proposed matriculation requirements provide assurance of the likelihood of student success in pursuing the programs to completion, and project percentages of such degree completion rates and expected times from admission to graduation for successful full-time students.

Student progress through the program will be monitored using multiple methods (see Section II. C. for more details). The DNP faculty will meet at the end of each semester to discuss each student's progress through the academic program and review each student's academic portfolio.

Students are required to meet with their academic advisors to discuss any concerns raised at these end of semester progress assessment meetings.

The current masters program has an excellent graduation rate of greater than 85% over the past 10 years. We have every reason to believe that the support mechanisms leading to this high retention rate will be effective for DNP students. We anticipate that the DNP program will take 4 years of full-time matriculation. A part time student would take an additional year to complete the degree.

C. Describe any aspects of the program that are intended to attract students from underrepresented groups into the field, or to prepare graduates for service to diverse populations. Also address the program’s potential to increase the diversity of the faculty.

The School of Nursing provides an excellent environment for attracting students from underrepresented groups. As previously stated (see Section V. B.) we currently have two federal grants to encourage and mentor minority students. We will also accept a percentage of part-time students, which opens access to those who must maintain outside employment while enrolled in the program.

The DNP will be have added costs for the student, since there will be additional coursework and residency requirements. An advantage of our program is its affordability to Massachusetts residents. Also, we anticipate continued success in receiving Federal Nurse Traineeship Funds and Nursing Faculty Loan Funds to help support students. Other funding sources for minority students are being sought; e.g., the Hearst Foundation.

D. Detail any collaborations with other campuses (or with other colleges and universities) and explain what opportunities or benefits the program offers for University students and faculty at other campuses.

The faculty are exploring ways to expand the scholar in residence program, which attracts researchers from other areas, and to invite doctoral students and faculty from other DNP programs to a yearly colloquium as they develop across New England. Most recently, we have also been invited to belong to the newly formed Land Grant Consortium sponsored by the University of Kansas and we will explore possible collaborations with this group for access to additional opportunities for mentoring and courses.

The new DNP program builds on the National Leadership Mentorship Project collaborative with the Association of State and Territorial Directors of Nursing and UMass Amherst School of Nursing. Specifically, students in the public health leadership master’s program are matched with a national public health leader who serves as coach, national expert, and career mentor for the student during the academic program. Both students and mentors are engaged in projects each semester to build the exchange of expertise and role delineation in population leadership. This program is expected to continue for the public health specialist DNP students.

IX. RESOURCES

A. Describe the amount and kind of faculty and staff, facilities, equipment, and library resources (and field and clinical resources, if applicable) necessary to offer the proposed program for the first year and for the year (which should be specified) in which it is expected that the program will have arrived at a steady state.

The faculty, facilities, equipment and library resources are in place for the SON to begin to offer the proposed program in the Fall of 2006. The SON has adequate resources to support this program. This month we are submitting a program grant to the Department of Health and Human Services to support the program launch. We are also awaiting a decision on a small grant from the Massachusetts Board of Higher Education's nursing initiative to support consultation and further curriculum development. Planned additional resources are targeted with the renovation of Skinner Hall.

The School of Nursing currently has 20 full-time graduate faculty with the necessary expertise as well as the necessary support staff to begin this program. The hiring for the full time faculty within the past seven years has targeted the recruitment of new faculty with PhDs in nursing, who have a specific research program and clinical specialty which fits within the identified focus for this School. We have increased the number of tenure track faculty from 9 in 1998 to the current number of 16. We also have three doctorally prepared faculty members who have graduate appointments as clinical faculty who are valuable resources, with research agendas and national specialty certification. Faculty biosketches may be found in Appendix F.

The Nursing Scholarship Office, funded through RTF funds, provides support in the form of external reviewers for grant submissions, visiting scholar forums, a writing coach, mentoring, and travel dollars for research presentations. In the academic year 2004-5, an internal grant funding opportunity was initiated to encourage faculty collaboration on a research project. This year the scholarship agenda has emphasized collaboration within the UMass Amherst community, such as in the Center for Family Research, School of Public Health and Health Sciences, and the College of Engineering, to advance common research interests in the area of health.

The SON will be relocated to Skinner Hall in a \$16.2 million dollar renovation project as part of the capitol campaign priority. The approximately 55,000 square foot renovation will provide state of the art space for the teaching and research mission of the School. Library resources were examined in 2004-2005 and additional resources were added to enhance student access to journals identified as important to this program.

Several agencies have expressed interest in placing DNP students for both their practica and residencies. An agency list is provided in Appendix E.

B. Describe funding sources by source, such as external or internal university budget. If external funding sources are not committed, identify the sources of the reallocated internal funding and describe the impact of such reallocation on the programs which will lose funding and on the mission and priorities of the campus.

Currently, all of the salaries and general operating expenses are supported by the SON through a variety of mechanisms, such as state allocations, continuing education funds, research grant funding, and trust funds. Since all of the faculty and staff who will be active in the proposed program have comparable responsibilities in the existing masters programs, there will be no need to reallocate funds given the projected enrollments. Also, because of the proposed closure of two specialty tracks (gerontological and community school health due to declining enrollments), faculty resources will be reallocated to the new DNP program.

C. Include detailed program delivery information to show the anticipated date of implementation, location of program facilities, and equipment utilized. In the event that additional space or specialized facilities would be needed for the program, indicate clearly what these are and what binding agreements have been obtained to provide and fund them in the event that the new program is approved.

Our goal is to implement the new program in the Fall of 2006. As students are enrolled each year (see Section V. A. for details regarding student numbers) the program is expected to be at full capacity by the 2010-2011 school year. By this time, the program will be situated in the new Skinner Hall with ample state-of-the-art equipment and technology and with increased space for research and graduate students. The facilities and services will be fully able to handle the extra student load. No additional space will be necessary.

D. Include detailed budgets to show the first year implementation costs and, for the year (which should be specified) in which it is expected that the program will have arrived at a steady state, the budget at that time. The term “budget” includes that for any and all resources, including personnel, facilities, equipment, library, and other resources. Include budget projection of the campus’ internal contributions through reallocations, expected external support and sources, and if any, new internal funding to be requested through University budget process.

Since the proposed program is replacing an existing program, there will be minimal costs associated with its implementation. Faculty workload for the proposed program are listed in Appendix G. There will be some additional costs associated with printing new recruitment materials, etc. (estimated cost \$2000). These costs are relatively minor and will be assumed by the program. The program does not anticipate needing to request additional funds in the future through the University’s budget process to support the replacement of the program. The Nursing base salary budget for FY2006 is approximately \$2,345,110 which supports 6 tenured , 10 tenure-track faculty, 14.25 FTE Clinical faculty, and 10.25 FTE in administrative staff to assist in the programs administration. Additionally, the School of Nursing has external funding to support 7 Full time clinical assistant professors and 1.5 FTE in administrative staff positions through partnerships with clinical agencies and federally funded projects. It is anticipated that the Nursing base budget will remain steady with incremental increases as negotiated in collective bargaining agreements for faculty and staff and that the existing faculty outlined above will assume the teaching and administrative responsibilities to implement the DNP program with no additional campus resources being requested.

	FY07	FY08	FY09
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Personnel			
Full Time State Funded Faculty	\$252,591	\$260,169	\$267,974

Other Expenses			
Publications & Materials	\$ 2,000	\$ 1,000	\$ 1,000
Faculty Conference Travel	\$ 5,000	\$ 5,000	\$ 5,000
Total Other Expenses	\$ 7,000	\$ 6,000	\$ 6,000

Total Proposed DNP Program Expenses as Reallocated Existing Resources	\$259,591	\$266,169	\$273,974
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REFERENCES

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Institute of Medicine, Committee of Health Professions Education. (2003). *Health Profession Education in America: A bridge to quality*. Washington, DC: National Academy Press.

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APPENDIX A. Sample Plans of Study Doctorate of Nursing Practice

Family specialty: 81 credits

Semester 1 (9 credits) BIO&EP 640 Intermediate Biostatistics (3) N690M Informatics (3) ComHlth524 Health Politics & Policy (3)	Semester 2 (9 credits) BIO&EP 630 Principles of Epidemiology (3) N690L Leadership (3) N630 Research Methodology in Nursing (3)
Summer (3 credits) N603 Theoretical Components of Nursing Science (3)	

Semester 3 (10 credits) N690H Healthcare Quality (2) N690F Care Environment Management (2) N615 Advanced Pathophysiology (3) SCH-MGMT 833 Organizational & Administrative Theory (3)	Semester 4 (10 credits) N690C Advanced Health Assessment (3) N698 Practicum (1) N690D Advanced Pharmacology (3) N670 Family Systems & Intervention (3)
Semester 5 (10 credits) N610 Primary Health Care of Infants, Children, & Adolescents. (3) N698 Practicum (4) N790D Pharmacotherapeutics (3)	Semester 6 (10 credits) N620 Primary Care of Middle-Aged and Older Adults (3) N698 Practicum & Role Seminar (4) N790G Research Translation in Nursing (3)
Semester 7 (11 credits) N798 Practicum & Role Seminar (6) N698 Practicum & Role Seminar (2) Cognate (3)	Semester 8 (9 credits) Nxxx Residency (6) Nxxx Capstone Research Project (3)

Psychiatric Mental Health Specialty: 80 credits

Semester 1 (9 credits) BIO&EP 640 Intermediate Biostatistics (3) N690-M Informatics (3) ComHlth 524 Health Politics & Policy (3)	Semester 2 (9credits) BIO&EP 630 Principles of Epidemiology (3) N690L Leadership (3) N630 Research Methodology in Nursing (3)
Summer (3) N603 Theoretical Components of Nursing Science (3)	
Semester 3 (10 credits) N690H Healthcare Quality (2) N690F Care Environment Management (2) N615 Advanced Pathophysiology (3) SCH-MGMT 833 Organizational and Administrative Theory (3)	Semester 4 (10 credits) N690C Advanced Health Assessment (3) N698 Practicum (1) N690D Advanced Pharmacology (3) N670 Family Systems and Intervention (3)
Semester 5 (9 credits) N660 Psychiatric Mental Health Nursing with MH with Individuals (3) N790D Pharmacotherapeutics (3) N698 Practicum (3)	Semester 6 (12 credits) N790I Psychiatric Mental Health Nursing with Individuals II (3) N698 Practicum (3) N790G Research Translation in Nursing (3) Cognate (3)
Semester 7 (9 credits) N798 Practicum & Role Seminar (6) N665 Psychiatric Mental Health Nursing with Groups (3)	Semester 8 (9 credits) Nxxx Residency (6) Nxxx Capstone research project (3)

Public Health Nursing Leadership Specialty: 79 credits

Semester 1 (9 credits) ComHlth 601 Social and Behavioral Theories in Public Health Education & Intervention (3) BIO&EP 640 Intermediate Biostatistics (3) N690M Informatics (3)	Semester 2 (9credits) BIO&EP 630 Principles of Epidemiology (3) N630 Research Methodology in Nursing (3) N690L Leadership (3)
Summer (3 credits) N603 Theoretical Components of Nursing Science	

(3)	
Semester 3 (10 credits) N690H Health Care Quality (2) N690F Care Environment Management (2) N640 Advanced Public Health Nursing I (3) ComHlth 704 Program Planning & Evaluation (3)	Semester 4 (9 credits) N xxx Health Disparities (3) Nxxx Advanced Public Health Nursing II (3) ComHlth 620 Principles of Public Health Practice (3)
Semester 5 (9 credits) ComHlth 628 Financial Management of Health Institutions (3) EnvHlth 565 Environmental Health Practices (3) SCH-MGMT 833 Organizational and Administrative Theory (3)	Semester 6 (12 credits) ComHlth780 Public Health Law (3) N798 Practicum (6) N790G Research Translation in Nursing (3)
Semester 7 (6 credits) N690N Current Topics (3) ComHlth 524 Health Politics and Policy (3) ComHlth 525 Population-based Ethics (3)	Semester 8 (9 credits) Nxxx Residency (6) Nxxx Capstone research project (3)

Post-Master's Plan of Study (after portfolio review): 37 Credits

Semester 1 (9 credits) BIO-EP 640 Intermediate Biostatistics (3) N690M Informatics (3) (3) SCH-MGMT 833 Organizational and Administrative Theory (3)	Semester 2 (9credits) BIO&EP 630 Principles of Epidemiology (3) N690L Leadership (3) Cognate (3)
Semester 3 (10 credits) N690H Health Care Quality (2) N690F Care Environment Management (2) N790G Research Translation in Nursing (3) ComHlth 524 Health Politics and Policy (3)	Semester 4 (9 credits) NXX Residency (6) NXX Capstone research project (3)

APPENDIX B.

Course descriptions for the proposed DNP Program. Courses marked with asterisks (***) are new courses that have not yet been approved by Faculty Senate.

CORE COURSES:

N603 Theoretical Components of Nursing Science

Nursing is a science; that is, it is concerned with the observation of facts about nursing, their classification and their drawing together into verifiable general principles. In a graduate program in nursing the student is now ready to examine critically the functions of theory, the components of theory, and the current theories in nursing, and related disciplines, with a view to examining the relationship of theory to a practice discipline.

N630 Research Methodology in Nursing

Examines the relationship among research, theories, and advanced nursing practice. Emphasizes research participation and advanced research utilization, including research evaluation, practice outcomes, clinical application of research, and problem identification.

N690F Care Environment Management ***

This course focuses on strategies for impacting the care environment to improve client/family outcomes.

N690H Healthcare Quality ***

This course will provide an overview of the history quality of care, with particular attention to the evolution of quality assessment, assurance, improvement, measurement, management, and research

N690L Leadership in Public Health Systems ***

The course and field work focuses on leadership theory, development and competencies of contemporary public health leaders. Integral to the leadership role is the application of health policy leadership.

N690M Informatics ***

Informatics is the rapidly developing scientific field that integrates information technology with the practice of public health (*Public Health Informatics*) and/or medicine (*Clinical Informatics*). Public health informatics deals with optimizing the collection, verification and utilization of data that relate to a population for the purposes of generating knowledge to support public health practices, policy decision, research and public communication.

N790G Research Translation in Nursing ***

Models and methods of research translation in nursing, including research dissemination and implementation, program planning and evaluation, cost-effectiveness and analysis, and preparation of a research translation grant proposal.

BIOST&EP630 Principles of Epidemiology

An epidemiological perspective on health. General approaches for describing patterns of disease in groups of people, and elucidating various processes involved in creating differing levels of health in human groups. Lecture and lab examples of a wide range of contemporary health problems.

BIOST&EP640 Intermediate Biostatistics

Principles of statistics applied to analysis of biological and health data. Continuation of Bioepi 540 including analysis of variance, regression, nonparametric statistics, sampling, and

categorical data analysis.

COMHLTH 524 Health Politics and Policy

Examines the determinants of health politics and policy in the U.S., including decision and non-decisions made by institutional and political actors at all levels of government and by private sector actors.

SCH-MGMT 833 Organizational and Administrative Theory

Examines research and scholarly approaches to organization theory by investigating both the concept 'organization' and the concept 'theory'. Presents such perspectives as decision theory, structural contingency theory, institutional theory, transaction cost economics, and network theory.

Nxxx Residency

Nxxx Capstone Research Project

APPENDIX B. (CONT'D)

SPECIALTY COURSES

Family Nurse Practitioner

Psych Mental Health

Public Health Nursing Leadership

N610 Primary Health Care of Children, Adolescents & Young Adults

Evaluation of theory and research in the practice of primary care nursing with culturally diverse populations of children, adolescents, and young adults. Common health problems affecting this population presented with a focus on the health promotion and management of health disruptions. Social problems, health care policies, and practices which affect the delivery of primary health care emphasized.

N615 Advanced Pathophysiology

This course examines conceptual and specific knowledge of pathophysiology and disease recognition for children and adults as observed in the primary care setting.

Nursing 620 Primary Health Care of Middle Aged and Older Adults

Evaluation of theory and research in the practice of primary care nursing with culturally diverse populations of middle aged and older adults. Common health problems affecting this population presented with a focus on the health promotion and management of health disruptions. Social problems, health care policies, and practices which affect the delivery of primary health care emphasized.

Nursing 640 Advanced Community Health Nursing

Using community assessment techniques, environmental and population characteristics are systematically examined from geographical, sociocultural, political, and economic perspectives to increase the effectiveness of the delivery of health services.

Nursing 660 Psychiatric Mental Health Nursing with Individuals

Evaluation of theory and research as it applies to the practice of psychiatric-mental health nursing. This includes theories and research in diagnostic assessment, the psychotherapeutic process and primary, secondary and tertiary prevention of mental illness.

Nursing 665 Psychiatric Mental Health Nursing with Groups

Selected concepts, theories, and research related to group dynamics and advanced practice nursing with groups with mental health care needs.

N670 Family Systems and Interventions in Nursing

Selected concepts, theories and research related to family dynamics and family coping. Strategies for advanced practice nurses to support family well being and mental health will be addressed.

N690C Advanced Health Assessment for Primary Care

Classroom and laboratory practice and case-based approaches to health assessment and differential diagnosis of common health problems for diverse groups provide the context for advanced health assessment and clinical reasoning.

N690D Advanced Pharmacology ***

This course emphasizes the advanced principles of pharmacology for classes of drugs commonly used in various health care practices.

N 690N Current Topics ***

Current topics include: health disparity, cultural competence, genomics, workforce planning, credentialing, media communication.

N698 Practica and Role Seminar (11 credits)

Supervised practica provide clinical experience in the student's area of specialization, including: adult/gerontological advanced practice nursing; psychiatric-mental health advanced practice nursing; primary care advanced practice nursing; clinical teaching.

N798 Practicum and Role Seminar

Supervised practicum at one or more of the affiliating clinical agencies with a certified nurse practitioner and other appropriate health care providers. Opportunity for intensive clinical experience in the student's specialty practice setting.

N790I Psychiatric Mental Health Nursing with Individuals II ***

Evaluation of theory and research as it applies to the practice of psychiatric-mental health nursing with individuals with selected serious and persistent psychiatric disorders. Includes preventive strategies, diagnosis assessment, therapeutic interventions and evaluation of outcomes.

N790A Pharmacotherapy Management ***

This case-based course integrates principles of pharmacology to construct, implement and evaluate optimal pharmacotherapeutic regimens commonly observed in various healthcare settings to prepare the practitioner for prescriptive authority.

NXXX Health Disparities

This course is being developed by Jean Swinney through the Teachnology program.

NXXX Advanced Public Health Nursing II

(In development) Course focuses on evidence-based interventions and evaluation strategies applied to the tripartite roles of assessment, policy development and assurance in population-based practice by nurses using the ecological model.

COMHLTH 525 Ethical Issues in Public Health

Theoretical framework of ethics as applied to the health field with a special emphasis on biomedical areas. Seminar format with active participation of students.

COMHLTH 601 Application of Social and Behavioral Theories in Public Health Interventions

This course will provide students with a graduate level introduction to the field of public/community health education. It will cover a broad range of theoretical and practical considerations that now inform the work of community health education. These issues will be placed in the context of public health care system in general. Current health care challenges, controversies and ethical debates about the future direction of the field will also be introduced.

COMHLTH 620 Principles of Public Health Practice

Introduction to the philosophy, nature, and scope of modern health and medical care organizations; administration and organization of governmental health programs, economic and political forces and their effects on health services and programs.

COMHLTH 628 Financial Management of Health institutions

The fundamental tools for management control and decision making in health care organizations. The budgeting and financial management process. Emphasis on reimbursement for services and reporting requirements to government and third-party payor, and how managers establish budgets and financial controls to cope with them.

COMHLTH 704 Health Program Planning

Foundation for program planning in community health education and other public health areas. Provides basic planning principles, processes, and methods. A multi-disciplinary approach integrating the use of theory and practice.

COMHLTH 780 Public Health Law

Constitutional and social bases for public health law. Development of statutes and regulations and their effects on social problems, including review of court decisions and preparation of administrative regulations.

ENV-HLTH 565 Environmental Health Practices

Concepts of control methods used by environmental health and engineering practitioners. Topics include water, wastewater, solid wastes, food sanitation, vector control, housing, and accident control measures.

APPENDIX C LINKS FROM ESSENTIALS & COMPETENCIES TO COURSES COURSEWORK

AACN Essential	Graduate Coursework
AACN Essential 1 1. Scientific Underpinnings for Practice	
1. 1 Integrate nursing science with knowledge from biophysical, psychosocial, analytical, and organizational sciences as the basis for the highest level of nursing practice.	N603,640,670, 690-L Nxx Adv. PHN
1. 2 Use science-based theories and concepts to: <ul style="list-style-type: none"> • determine the nature and significance of health and health care delivery phenomena, • describe the actions and advance strategies to alleviate and ameliorate the phenomena • evaluate outcomes 	N603,615,670,690F,690H,790A,790G,NxxAdv PHN,Com-Hlth 524,601,620,BIOST-EP 630,640,SCHMGMT833+B15
AACN Essential 2 2. Organizational and systems leadership for quality improvement	
2.1. Maintain accountability for quality of health care and patient safety.	N690F, 690H
2.2 Develop care delivery models that meet current and future needs based on cutting edge scientific findings in nursing and other clinical sciences, organizational, political, and economic science.	N690F,690H,690-L, SCH-MGMT833
2.3 Exert consultative and leadership skills with interprofessional teams to create change in health care and complex health care delivery systems.	N690F,690L, SCH-MGMT 833
2.4 Develop effective strategies for managing the ethical dilemmas inherent in organizing health care delivery, whether at the individual, organizational, or system level.	N690F,COM-HLTH 525, all clinical theory courses
2.5 Facilitate and foster professional development in others.	N690F, 690L, SCH-MGMT833

AACN Essential 3 3. Clinical scholarship and analytic methods for evidence based practice	
3.1 Use analytical methods to critically appraise existing literature and other evidence relevant to practice.	N630, 790G, BIOST-EP630, also specialty clinical courses
3.2 Use an evidence-based process to determine the best evidence for practice.	N630
3.3 Identify desired outcomes of practice.	N690H
3.4 Design and implement processes to evaluate outcomes and systems of care.	N690H, 790G, BIOST-EP640, SCH-MGMT 833
3.5 Perform practice-based quality enhancement using a systemic methodology.	N690H
3.6 Compare data with relevant benchmarks.	N690H
3.7 Apply relevant findings to develop practice guidelines and improve practice and the practice environment (see also Essential 8).	Capstone project
3.8 Use information technology and research methods appropriately to: <ul style="list-style-type: none"> • Collect appropriate and accurate data • Analyze data from clinical practice • Design evidence-based interventions • Predict and analyze outcomes • Examine patterns of behavior and outcomes • Identify gaps in evidence for practice. 	N690H, N790G, BIOST&EP640, N690-M
Function as a clinical expert/consultant in collaborative knowledge generating research.	N690F, 690L
3.9 Disseminate findings from research to improve practice of other providers.	Capstone project

<p>AACN Essential 4 4. Information technology for improvement and improvement and transformation of patient-centered healthcare</p>	
<p>4.1 Use information technology in the development and implementation of programs to evaluate outcomes of care, care systems and quality improvement.</p>	<p>N690F,690H, 690M</p>
<p>4.2 Use strategies to analyze and communicate critical elements necessary to the selection and evaluation of health care information systems.</p>	<p>N690F,690H, 690M</p>
<p>4.3 Demonstrate the conceptual ability and technical skills to develop and execute an evaluation plan involving data extraction from clinical information systems and databases.</p>	<p>N690F,690H, 690M</p>
<p>4.4 Evaluate and address ethical and legal issues relating to the use of information, information technology, and communication networks.</p>	<p>N690F,690H, 690M</p>
<p>AACN Essential 5 5. Health care policy for advocacy in health care</p>	
<p>5.1 Demonstrate leadership in the development of institutional, local, state, federal, and/or international health policy.</p>	<p>N690L, COM-HLTH524</p>
<p>5.2 Influence policy makers through active participation on committees, boards or task forces at the institutional, local, state, regional, national and/or international levels to improve health care delivery and outcomes.</p>	<p>N690L, COM-HLTH524</p>
<p>5.3 Articulate health policies and related issues from the perspective of consumers, nursing, other health professions and other stakeholders in policy and public forums.</p>	<p>N690L, COM-HLTH524, Nxx health disparities</p>

<p>AACN Essential 6 6. Interprofessional collaboration for improving patient and population health outcomes</p>	
<p>6.1 Collaborate with other health professionals in the analysis of complex clinical situations and practice systems to ensure safe, timely, effective, efficient, equitable, and patient-centered care that meets current standards of practice.</p>	<p>N690F, 690L</p>
<p>6.2 Assume leadership roles in interprofessional teams involved in the development of clinical practice models, practice guidelines, health policy, and standards of care.</p>	<p>N690F, 690L</p>
<p>6.3 Demonstrate advanced levels of clinical judgment and scholarship during interprofessional collaboration.</p>	<p>N690F, 690L</p>
<p>6.4 Conceptualize and champion interprofessional approaches to improve health care.</p>	<p>N690F N690L</p>
<p>6.5 Demonstrate scholarship through intraprofessional and interprofessional collaboration</p>	<p>N690F+B47, N690-L</p>
<p>AACN Essential 7 7. Clinical prevention and population health for improving the nation's health</p>	
<p>7.1 Use epidemiological, biostatistical, environmental, geographic, genetic, behavioral and socioeconomic data to develop and evaluate interventions to improve health status/access patterns and/or address gaps in care of populations within a community of focus.</p>	<p>N640, 790G, BIOST-EP 640, 630</p>
<p>7.2 Apply concepts related to clinical prevention in developing and evaluating interventions to address health promotion/disease prevention efforts.</p>	<p>N640, 790G, BIOST-EP 640, 630,</p>
<p>7.3 Develop and evaluate care delivery models and/or strategies using concepts related to community, environmental and occupational health,</p>	<p>N640, N790G, BIOST-EP 640, 630,</p>

and cultural and socioeconomic dimensions of health	
AACN Essential 8 8. Advanced nursing practice for improving the delivery of patient care	
8.1.1. Identify emerging clinical patterns and problems within a practice setting, health care organization or community.	N640, 690, 610,620,660, 665, 670, Nxx disparities, Adv. PHN,BIOST-EP 630,640
8.1.2. Analyze data, information, and knowledge for developing evidence-based practice care regimens for individuals, families, clinical populations and/or communities.	BIOST-EP630, all clinical theory courses
8.1.3. Use an ethical framework to identify, analyze, and resolve dilemmas arising in patient care, research, and/or practice management.	N690F Ethics thread in all family/psych mental health courses, COMHLTH525
8.1.4. Collaborate across health professions and with consumers and/or policy makers to design, implement, and evaluate evidence-based clinical guidelines, clinical support systems, and/or clinical models using current scientific findings.	N690F, N690L,COMHLTH524
8.1.5. Demonstrate advanced levels of clinical judgment, cultural sensitivity, and systems thinking in designing and delivering care to improve the health outcomes of individuals and aggregates.	N670, 690F,690H,690L, Nx health disparities
8.1. 6. Negotiate one's role within the health care system	N690L, 690N
8.2 Nurse Practitioner Specialties	
8.2.1. Use a holistic perspective to assess risk and health status and provide comprehensive care for individuals with acute, chronic, co-morbid and/or complex conditions.	N610, 615, 610,620,660,790I,665,670,690C,790A , residency
8.2.2. Recognize subtle cues in identifying patients' needs and target assessment as necessary to form diagnostic judgments about problems and strengths.	N610, 615, 610,620,660,790I,665,670,690C,790A, residency

8.2.3. Form therapeutic partnerships with patients and families to facilitate informed decision-making, positive lifestyle change, and appropriate self-care.	N610, 615, 610,620,660,790I,665,670,690C, 790A, residency
8.2.4. Apply expert clinical decision-making, clinical judgment, and skillful performance to differentiate complex clinical problems and design individualized interventions for patients.	N610, 615, 610,620,660,790I,665,670,690C,790A, capstone project, residency
8.2.5. Implement diverse, evidence-based interventions using pharmacotherapeutic, non-pharmacotherapeutic, procedural, and alternative modalities as appropriate in providing care for patients in the specialty area of practice.	N610, 615, 610,620,660,790I,665,670,690C,690D, 790A, capstone project, residency
8.2.6. Use diverse approaches/interventions/modalities to health and illness management.	N610, 615, 610,620,660,790I,665,670,690C,690D,790A, residency
8.2.7. Coach, guide and counsel patients and families effectively through developmental, health-illness, and situational transitions.	N610, 615, 610,620,660,790I,665,670,690C,690D,790A, residency
8.2.8. Provide advocacy for patients and families. Guide, mentor, and support other nurses to achieve excellence in clinical nursing practice.	N610, 615, 610,620,660,790I,665,670,690C,690D,790A, residency
8.3 Public Health Nursing Leadership	
8.3.1 Use sophisticated, conceptual, and analytical skills in evaluating the links between clinical, organizational, population-level, fiscal, and policy issues.	N640,690F,690L, 790G, Nxx Adv PHN, ENV -HLTH 565 COM-HLTH601, 620 capstone project , resid
8.3.1A Conduct advanced cost-effectiveness and analysis of clinical initiatives incorporating risk adjustment, quality-adjusted life years, client preferences and willingness to pay, full costs and return on investment.	COM-HLTH 628, 704
8.3.1B Evaluate practice patterns, variances in clinical outcomes and population trends, and present data summaries using balanced scorecards, visual dashboards, benchmarking or similar tools.	N640,690F,690H,690L,790G,Nxx Adv PH Nsg, Nxx disparities,ENV -HLTH 565 COM-HLTH 601, 620

8.3.2 Establish processes for interorganizational collaboration for achievement of health-related organizational and public policy goals.	N690-L, COM-HLTH 601, NxxAdv. PHN II, residency
8.3.3 Design patient-centered care delivery systems or policy level delivery models.	N690F, COM-HLTH 704+B73, capstone project, residency
8.3.3A Seek input from diverse groups about health needs and strategies for meeting needs.	N640, 690L, NXX health disparities, NXX Adv. PH Nsg
8.3.3B Extract and analyze relevant data for decision making and information systems	N630, 690M, COMHLTH704, capstone project , residency
8.3.3C Develop and monitor budgets for clinical initiatives at the organizational and systems levels.	COM-HLTH 628 capstone project, residency+B37
8.3.4 Correct organizational and health care errors and patient safety issues using ethical principles as the basis for action.	N690F,690H COM-HLTH 525, ENV-HLTH 565, residency & capstone project
8.3.5. Collaborate effective with legal counsel and financial officers around issues related to legal and regulatory guidelines for clinical care delivery.	COM-HLTH 628,780, residency & capstone project

APPENDIX D.

COMPARISON OF REQUIRED COURSES FOR EXISTING MS IN NURSING (FAMILY SPECIALTY) WITH REQUIRED COURSES FOR THE DNP PROGRAM

Major – Area coursework	MS Program	DNP program
	N603 Theoretical Components of Nursing Science N630 Research Methodology in Nursing N690C Advanced Health Assessment N660 Primary Health Care Children, Adolescents, Young Adults N615 Advanced Pathophysiology N620 Primary Health Care of Middle-Aged and Older Adults N670 Family Systems and Intervention N690 Research Seminar	N603 Theoretical Components of Nursing Science N630 research Methodology in Nursing N690C Advanced Health Assessment N610 Primary Health Care Children, Adolescents Young Adults N615 Advanced Pathophysiology N620 Primary Health Care of Middle-Aged and Older Adults N670 Family Systems and Intervention Nxxx Research Translation in Nursing Nxx Health Care Quality Nxxx Care Environment Management N690-L Leadership N690 Informatics
Non-Departmental courses	Com-Hlth 621 Health Care Organization & Administration	BIOST&EPI 630 Principles of Epidemiology BIO&EPI 640 Intermediate Biostatistics ComHlth 524 Health Politics & Policy SCHMGT 833 Organizational & Administrative Theory
Research Experience	Research Seminar	Capstone project 3 credits
Practica	Off campus practica: 13 credits	13 credits Residency (6 credits)

APPENDIX E.

AGENCIES INTERESTED IN PARTICIPATING IN DNP PRACTICA AND RESIDENCY

Association of State and Territorial Directors of Nursing
Baystate Medical Center and affiliated neighborhood clinics
Berkshire Medical Center and affiliated neighborhood clinics
Berkshire Medical Group
Blue Cross Blue Shield
Holyoke Health Center
Huntington Health Center
Local health departments in Massachusetts
Mass Public Health Association
Mass Mutual
North Quabbin Family Practice, Athol
Riverbend Health Centers, Springfield, Chicopee, Agawam and Westfield
University Health Services, Amherst
VA Medical Centers Leeds, Springfield
VNA of Western Mass
Wing Health Centers, Palmer, Wilbraham
Worthington Health Center

APPENDIX F
FACULTY BIOSKETCHES

Principal Investigator/Program Director (Last, first, middle): Barnard, Amy G.

BIOGRAPHICAL SKETCH

Provide the following information for the key personnel in the order listed for Form Page 2.
Follow this format for each person. **DO NOT EXCEED FOUR PAGES.**

NAME		POSITION TITLE		
Amy Grace Barnard		Assistant Professor, School of Nursing University of Massachusetts Amherst		
EDUCATION/TRAINING (Begin with baccalaureate or other initial professional education, such as nursing, and include postdoctoral training.)				
INSTITUTION AND LOCATION		DEGREE (if applicable)	YEAR(s)	FIELD OF STUDY
University of Massachusetts at Amherst			1970-1973	Women's Studies and Feminist Literature
Somerville Hospital School of Nursing		R.N.	1978	Nursing
University of New Mexico		B.S.N.	1997	Nursing
University of Arizona		M.S.	1999	Nursing/ Specialty as Psychiatric Mental Health Nurse Practitioner
University of Arizona		Ph.D	2004	Nursing Research, minor in Women's Studies

NOTE: The Biographical Sketch may not exceed four pages. Items A and B may not exceed two of the four-page limit.

- **Positions and Honors.** List in chronological order previous positions, concluding with your present position. List any honors. Include present membership on any Federal Government public advisory committee.

POSITIONS

7/90 – 6/94 New Mexico Dept. of Health, District 4, Taos and Santa Fe, NM
Public Health Nurse
Director, HIV and STD testing and prevention
Director, Teen services, provider school-based clinics.

6/94 - 7/95 Embudo Treatment Center, Embudo NM

9/96 - 5/98 Kino Community Hospital, Tucson, AZ.
Psychiatric Nurse

2/00- 8/05 COPE Behavioral Services, Inc., Tucson, AZ
Psychiatric Nurse Practitioner

7/04- 8/05 Centered Spirit Program, Pascua Yaqui Reservation, Tucson, AZ
Psychiatric Nurse Practitioner

9/1/05-Present University of Massachusetts, School of Nursing, Amherst, MA
Assistant professor, Psych-mental health

HONORS AND AWARDS:

2004 Outstanding Dissertation Award
1999 Mary Opal Wolanin Award: Outstanding Thesis on Vulnerable Populations
1997- Present Sigma Theta Tau, International Honor Society of Nursing,
Beta Zeta Chapter, University of Massachusetts

Scholarships:

2003 Beverly McCord Doctoral Fellowship
2001 Arthur J. Zuber Scholarship
1998 J. Levi Geriatric Scholarship
1997 Professional Nurse Traineeship Award

- . **Selected peer-reviewed publications (in chronological order).** Do not include publications submitted or in preparation.

C. Research Support. List selected ongoing or completed (during the last three years) research projects (federal and non-federal support). Begin with the projects that are most relevant to the research proposed in this application. Briefly indicate the overall goals of the projects and responsibilities of principal investigator identified above.

GRANTS AND CONTRACTS

9/01 – 5/04 Individual National Research Service Award (FRS 318660)
National Institute of Nursing Research
“Experiences of Depression in Adult Lesbians”

05/00-09/01 Institutional National Research Service Award (T32 NR07092)
Training for Community-Based Nursing Interventions
National Institute of Nursing Research
“Experiences of Depression in Adult Lesbians”

BIOGRAPHICAL SKETCH

Provide the following information for the key personnel in the order listed on Form Page 2.
Follow this format for each person. **DO NOT EXCEED FOUR PAGES.**

NAME Margaret Barton-Burke		POSITION TITLE Assistant Professor, University of Massachusetts School of Nursing, Amherst, MA	
EDUCATION/TRAINING <i>(Begin with baccalaureate or other initial professional education, such as nursing, and</i>			
INSTITUTION AND LOCATION	DEGREE <i>(if applicable)</i>	YEAR(s)	FIELD OF STUDY
William Paterson College, Wayne, New Jersey	BSN	1972	Nursing
Boston University, Boston, Massachusetts	MS	1980	Oncology Nursing/Teacher
University of Rhode Island	PhD	2002	Psychosocial Nursing

A. Positions and Honors. List in chronological order previous positions, concluding with your present position. List any honors. Include present membership on any Federal Government Public Advisory Committee.

PROFESSIONAL EXPERIENCE (selected):

1987-1990	Instructor of Nursing, Regis College, Weston, MA
1990-1991	Massachusetts Cancer Pain Initiative, Staff, MA General Hospital, Boston, MA
1992-1997	Mass Nurses Association, Project Director, Breast and Cervical Cancer Grant, Canton, MA
2002-2005	UMass Memorial Medical Center, Oncology Clinical Specialist, Worcester, MA
2002-2005	Assistant Professor, University of Massachusetts, Graduate School of Nursing, Worcester, MA
2003-2005	Assistant Professor, University of Massachusetts, Medical School, Worcester, MA
1987-present	Principal, Oncology Consulting Services, Boston, MA
2004-present	Adjunct Associate Professor, University of Rhode Island, College of Nursing, Kingston, RI
2005-present	UMass Memorial Medical Center, Oncology Program, Clinical Consultant, Worcester, MA
2005-present	University of Massachusetts, School of Nursing, Amherst, MA

MILITARY EXPERIENCE

1981-2002 COL (Retired), Detachment 6(Medical) HQ STARC, MAARNG

HONORS and Relevant Experience :

1994	Office of the Surgeon General's Award of the "A" Proficiency Designator. Highest award that can be made in recognition of professional accomplishments within the AMEDD, 1 August 1994
1998	Oncology Nursing Drug Handbook. Sudbury, MA: Jones & Bartlett Publishers American Journal of Nursing Book of the Year – Wilkes, G.M., Ingwersen, K., & Barton-Burke, M. (1999) 1999
2001	Oncology Nursing Drug Handbook. Sudbury, MA: Jones & Bartlett Publisher Sigma Theta Tau, Delta Upsilon Chapter-At-Large Research Award for Breast Cancer Experiences: An Inquiry into Women's Lives Years after Diagnosis
2001	National Grant Review Panels Government Liaison/Peer Review Support for the United States Army Medical Research and Material Command Congressionally Directed Medical Research Program (CDMRP). Cancer Research Programs, 22-24 August 2001, Vienna, Virginia.
2004-present	Oncology Nursing Society, Small Grant Abstract Review Committee

Funded Fellowships

"Promoting Palliative Care in Advanced Practice Nursing." Accepted for fellowship to attend Graduate Education Training Program & End-of-Life Nursing Education Consortium. 24-26 June 2004, a City of Hope National Medical Center & American Association of College of Nursing Project. **Funded** by National Cancer Institute.

"NIH Grantsmanship: Keys to a Meritorious Score." Accepted for fellowship to attend NIH course, 3 February 2005, Fort Lauderdale, Florida. **Funded** by the NIH, NINR, and NCI. Abstract title: Breast Cancer Experiences: Black Women's Reflections Years After Diagnosis.

"Oncology Nursing Society/National Cancer Institute Genetics Course." Accepted for fellowship to attend ONS/NCI course, 3 – 6 March 2005, Pittsburgh, Pennsylvania. **Funded** by the National Cancer Institute.

SCHOLARLY PRESENTATIONS (selected)

Barton-Burke, M. (2003). Breast Cancer Experiences: An Inquiry into Women's Lives Years After Diagnosis. *4th Annual Excellence in Nursing Conference*, University of Massachusetts Graduate School of Nursing, Worcester, MA.

Barton-Burke, M. (2004). Modified Focus Groups: A Methodology for Scientific Inquiry and Knowledge Development. *5th Advances in Qualitative Methods Conference*, International Institute for Qualitative Methodology.

Barton-Burke, M. (2005). The Use of the Hybrid Model of Concept Development to Study the Concept of Loss. *6th Annual Advances in Qualitative Methods Conference*, International Institute for Qualitative Methodology.

Barton-Burke, M. (2005). Breast Cancer Experiences: Black Women's Reflections Years after Diagnosis. Accepted for participation and critique at the *Eighth Annual Cancer Nursing Research Conference*. Ft Lauderdale, FL.

Barton-Burke, M. (2005). Black Women's Breast Cancer Experiences: A Review of the Literature. *Breaking New Ground – Reframing the Chronic Illness Experience*, University of Massachusetts, Dartmouth, 1 April 2005.

Tatian, C., Lyons, H. & **Barton-Burke, M.**, A Retrospective Study of Pegfilgrastim and Bone Pain. *Annual Excellence in Nursing Conference*, University of Massachusetts, Graduate School of Nursing, Worcester, MA.

Barton-Burke, M. (2005). Breast Cancer Experiences: Black Women's Reflections Years after Diagnosis. The University of Witwatersrand, Department of Nursing Education *Clinical Practice on the Edge* August 2005.

Barton-Burke, M. (2005). End of Life Nursing Care. The University of Witwatersrand, Department of Nursing Education *Clinical Practice on the Edge* to be held in August 2005.

B. PUBLICATIONS : Selected publications (in chronological order).

BOOKS:

2005 Wilkes, G.M. & **Barton-Burke, M.** 2005 Oncology Nursing Drug Handbook. Sudbury, MA: Jones & Bartlett Publishers.

01/
2006 Wilkes, G.M. & **Barton-Burke, M.** 2006 Oncology Nursing Drug Handbook. Sudbury, MA: Jones & Bartlett Publishers.

03/
2006 **Barton-Burke, M.** & Wilkes, G. Cancer Therapies. Sudbury, MA: Jones & Bartlett Publishers.

in
devlm/
nt King, C. Editor, & **Barton-Burke, M.** Oncology Nursing Society Core Curriculum Instructor's Manual & Slide Kit. Pittsburgh, PA: Oncology Nursing Society & Elsevier Publishing Co.

CHAPTERS:

2004 **Barton-Burke, M.** Sexuality in The American Cancer Society's Source Book for Nurses. 8th Ed. Sudbury, MA: Jones & Bartlett Publishers.

2005 Anders, V. & **Barton-Burke, M.** Graft versus host disease. In *Blood & Marrow Transplantation: Nursing Insights and Principles*. S. Ezzone (Ed.). Sudbury, MA: Jones & Bartlett Publishers.

in
devlm/
nt Wilkes, G.M. & Barton-Burke, M. Cancer therapies. In *Cancer Nursing Secrets*. R. Gates (Ed.). Pittsburgh, PA: Oncology Nursing Society Press.

Peer-Reviewed Articles:

1998 **Barton-Burke, M.** Cancer-related fatigue: A holistic view. Progress in Palliative Care, An International Journal, 6(5), 153-159.

1999 **Barton-Burke, M.** Gemcitabine: A pharmacological and clinical overview. Cancer Nursing, 22(2), 176-183.

C. Research Support. List selected ongoing or completed (during the last three years) research projects (federal and non-federal support). Begin with the projects that are most relevant to the research proposed in this application. Briefly indicate

the overall goals of the projects and your role (e.g. PI, Co-Investigator, Consultant) in the research project. Do not list award amounts or percent effort in projects.

Barton-Burke, M., Consultant to Tatian, C. (ongoing) A Retrospective Study of Pegfilgrastim and Bone Pain. Vanguard Metro-West Medical Center, Framingham, Massachusetts. **Funded** Amgen Corporation.

Principal Investigator/Program Director (Last, first, middle): Breslin, Eileen T.

BIOGRAPHICAL SKETCH

Provide the following information for the key personnel in the order listed for Form Page 2.
Follow this format for each person. **DO NOT EXCEED FOUR PAGES.**

NAME Eileen T. Breslin		POSITION TITLE Dean and Professor	
EDUCATION/TRAINING (Begin with baccalaureate or other initial professional education, such as nursing, and include postdoctoral training.)			
INSTITUTION AND LOCATION	DEGREE (if applicable)	YEAR(s)	FIELD OF STUDY
Hartford Hospital, Hartford, CT School of Nursing	Diploma	1975	Nursing
Northern Arizona University, Flagstaff, AZ	B.S.	1977	Nursing
University of New Mexico, Albuquerque, NM	Certificate	1978	Women's Health Care Practitioner Program
University of Arizona, Tucson, AZ	M.S.	1983	Maternal-Newborn Nursing
University of Colorado, Denver, CO Health Sciences Center	Ph.D.	1992	Nursing

NOTE: The Biographical Sketch may not exceed four pages. Items A and B may not exceed two of the four-page limit.

- Positions and Honors.** List in chronological order previous positions, concluding with your present position. List any honors. Include present membership on any Federal Government public advisory committee.
 - 9/03 – present **Interim Dean, School of Public Health & Health Sciences**
University of Massachusetts, Amherst, MA
 - 8/98 - present **Dean and Professor, (tenured) School of Nursing**
University of Massachusetts, Amherst, MA
 - 7/97 - 7/98 **Professor (tenured) and Chair, Department of Nursing**
Northern Arizona University, Flagstaff, AZ
 - 1/94 - 7/97 **Associate Professor (tenured) and Chair, Department of Nursing**
Northern Arizona University, Flagstaff, AZ
 - 7/93 - 1/94 **Associate Professor (tenured) Interim Chair, Department of Nursing**
Northern Arizona University, Flagstaff, AZ
 - 8/89 - 7/93 **Associate Professor (tenured), Department of Nursing**
Northern Arizona University, Flagstaff, AZ
 - 8/83 - 7/89 **Associate Professor, Department of Nursing**
Northern Arizona University, Flagstaff, AZ
 - 8/82 - 5/83 **Teaching Assistant, College of Nursing**
University of Arizona, Tucson, AZ
 - 6/82 - 8/83 **Ob-Gyn Nurse Practitioner, Planned Parenthood of Southern Arizona**
Tucson, AZ
 - 3/81 - 1/82 **Director of Client Services, Planned Parenthood of Central and Northern Arizona**
Phoenix, AZ
 - 1/79 - 3/81 **Director of Client Operations, Planned Parenthood of Central and Northern Arizona**
Phoenix, AZ
 - 4/78 - 12/78 **Flagstaff Clinic Director, Planned Parenthood of Central and Northern Arizona**
Flagstaff, AZ
 - 1/76 - 10/77 **Registered Nurse Ob-Gyn Unit, Flagstaff Community Hospital**
Flagstaff, AZ

- Selected peer-reviewed publications (in chronological order).** Do not include publications submitted or in preparation.

Moore, P., Breslin, E., & Burns, M. (2002). Structure and process of outcomes research for Nurse Practitioners. American Academy of Nurse Practitioners. 14 (10): 471-4.

Breslin, E., Burns, M., & Moore, P. (2002). Challenges of outcomes research for Nurse Practitioners. American Academy of Nurse Practitioners. 14 (3), 136-141.

Woodtli, A., & Breslin, E. (2002). Violence Related Content in the Nursing Curriculum: A Follow-up National Survey. Journal of Nursing Education. 41 (8): 340-8.

Woodtli, A., & Breslin, E. (1997). Violence and nursing curriculum: Nurse educators speak out. N&HC: Perspectives on Community. 18(2), 252-259.

Breslin, E. (1997). Women's substance abuse and public policy. Journal of Addictions Nursing. 9(2), 42-49.

Woodtli, A., & Breslin, E. (1996). Violence related content in the nursing curriculum: A national study. Journal of Nursing Education. 35 (8), 367-374.

Breslin, E. (1996). The fine art of nursing: Aesthetic methods as a means of knowing for nursing. Journal of Mental Health Nursing. 17(6), 503-505.

Breslin, E. (1996), Metaphorical communication as aesthetic method for nursing practice. Journal of Mental Health Nursing. 17(6), 507-516.

Burns, M., Moore, P., & Breslin, E. (1996). Outcomes research: Contemporary issues and historical significance for nurse practitioners. American Academy of Nurse Practitioners. 8(3), 107-112.

Breslin, E. (1996). Nursing care of clients with breast disorders. In LeMone, P., Burke, K. M. (Eds.), Medical surgical nursing: Critical thinking in client care (pp. 2038-2063). Redwood City, CA: Addison Wesley.

Breslin, E. (1995). Integrating women's health concepts in a nursing course. The Nurse Educator. 20(1), 30-32.

Breslin, E. (1993). Substance abuse among women and its implications for health policy. Perspectives on Addictions Nursing. 4(3), 3-6.

Breslin, E. (1988). "Genital herpes." Nursing Clinics of North America, Philadelphia, PA: W. B. Saunders Co.

Breslin, E. (1983). Health of female artists concerning reproductive health hazards. Unpublished master's thesis, University of Arizona, Tucson, AZ.

Breslin, E., & Feldt, B. "Giving Birth to a Health Clinic." National Executive Directors Council, Planned Parenthood Federation of America, Inc., 1979.

- **Research Support.** List selected ongoing or completed (during the last three years) research projects (federal and non-federal support). Begin with the projects that are most relevant to the research proposed in this application. Briefly indicate the overall goals of the projects and responsibilities of principal investigator identified above.

2000	Principal Investigator , Creating Diverse Public Health Nursing Leadership Grant funded through Department of Health & Human Services, Health Resources and Services Administration Bureau of Health Professions, \$200,000 per year for five years.
2001	Principal Investigator , Professional Nurse Traineeship Grant, funded through Department of Health & Human Services, Health Resources and Services Administration, \$54,268.
1997	Principal Investigator , Professional Nurse Traineeship Grant, Funded through Department of Health and Human Services, Public Health Service, \$25,861.
1996	Principal Investigator , Professional Nurse Traineeship Grant, Funded through Department of Health and Human Services, Public Health Service, \$29,570.
1995	Principal Investigator , Professional Nurse Traineeship Grant, Funded through Department of Health and Human Services, Public Health Service, \$17,600.
1994	Principal Investigator , Upgrading student computer assisted learning opportunities, E. Breslin, Academic Computer Service, Awarded \$15,000 through Academic Vice President's Office, Northern Arizona University
October 1994	Co-Investigator , Helene Fuld Grant, M. Upvall, E. Breslin, R. Nicolls, Submitted, Helene Fuld Foundation, Washington, D.C., \$50,536; Funded (\$10,000)
October 1994	Contributor , Patricia Roberts Harris, M.S.N., in Rural Health Nursing, H. Hooper, E. Breslin, Submitted, Northern Arizona University to U.S. Department of Education, Washington, D.C., \$283,716.
1994	Co-Investigator , Academic Assessment Grant, Outcome Assessment in a Baccalaureate Nursing Program, E. Breslin, Mr. Conger, Funded \$2,000 (through Northern Arizona University, Office of the Vice President of Undergraduate Studies.

BIOGRAPHICAL SKETCH

Provide the following information for the key personnel and other significant contributors in the order listed on Form Page 2. Follow this format for each person. **DO NOT EXCEED FOUR PAGES.**

NAME Ann H. Cary		POSITION TITLE Graduate Program Director – MPH in Public Health	
eRA COMMONS USER NAME		Practice Project Director – MS/MPH Program	
EDUCATION/TRAINING <i>(Begin with baccalaureate or other initial professional education, such as nursing, and</i>			
INSTITUTION AND LOCATION	DEGREE <i>(if applicable)</i>	YEAR(s)	FIELD OF STUDY
Louisiana State University Medical Center School of Nursing	BS	1972	Nursing
Tulane University School of Public Health & Tropical Medicine	MPH	1974	Community Health Nursing
The Catholic University of America	PH.D.	1983	Education, Organization, Counseling

- . **Positions and Honors.** List in chronological order previous positions, concluding with your present position. List any honors. Include present membership on any Federal Government public advisory committee.

Positions and Employment

The Catholic University of America Washington, DC	Project Director, Home Health Care Administration - MSN Program (Grant Program \$610,250)	July 1984-May 1989
The Catholic University of America Washington, DC	Projector Director, Continuity of Care, Nurse Specialist Advance Nurse Training Grant (\$570,000 awarded)	May 1989-Aug. 1990
Louisiana State University Medical Center School of Nursing New Orleans, Louisiana	Professor and Associate Dean; Health Policy Doctoral Course	Sept 1990-Aug 1995
American Nurses Credentialing Center	Scholar in Residence	June 1998-2002
George Mason University Fairfax, VA 22030-4444	Coordinator, Ph.D in Nursing Program; Professor – National Leadership Institute, Center for Health Policy	August 1995-1998 June 1999-2000
American Nurses Credentialing Center, Washington, DC	Director, Institute for Research, Education & Consultation	June 2000-July 2003

University of Massachusetts Director of Distance Learning, October 2003-present
Amherst, School of Public MS/MPH & MPH
Health and School of Nursing HRSA, DON funded. Graduate
Program Director.

Other Experience and Professional Memberships

Association Community Health Nursing Educators: President 1991-1993; President-elect 1989-1991; Committee member - Essentials of Education for Entry-Level (BSN) CHN Practice Task Force, 1988-1990; Membership Chair, 1987-1989; Program Co-chair, 1987 Current Member.
Chair, (1999-2000) Congress on Nursing Practice and Economics, American Nurses Association.
American Public Health Association: Current Member. Program Committee (1997-2000).
U.S. Public Health Service, Primary Care Fellowship Society, President (1998-1999).
Vice-Chair (1999-2003) National Fund for Medical Education, San Francisco, CA.
Incentives Workgroup for Credentialing. CDCP/HRSA Public Health Workforce project(2001-2005).
International program planning committee, International Society of Quality Assurance.(2002-03) .
Public Health Training Centers, Health Resources & Services Administration, US PHS, Cochair of National Public Health Nursing Committee.
Association of Schools of Public Health, MPH Core Competency Project committee member.(2004-2006).

Honors and Awards

Recognition Leadership Award, US Public Health Service, 2000
National Academy of Practitioners, Distinguished Practitioner 2002
Fairfax County Volunteer Recognition by the Fairfax County Juvenile and Domestic Relations District Court, January 2004, January 2005

B. Selected peer-reviewed publications (in chronological order). Do not include publications submitted or in preparation.

1. Cary, A.H. (2001) The international study of certified nurses: Implications for the ICN's international classification of nursing practice(ICNP)in Oud, N(ed) Acendio: Proceedings of the third European conference. Bern, Switzerland: Verlag Hans Huber. 264-5.
2. Cary, A.H. authored the(2002)International Council of Nurses Registry for Credentialing Research(ICNRCR) HTML site-[http:// www.icn.gq.nu](http://www.icn.gq.nu)
3. Cary, A.H.(2003)Public Health Nursing Credentialing and the "Pseudo-Shortage" Public Health Nursing 20(2),83-84.
4. Cary, A.H., Goldberg, B & McDaniel, S (2003) Consumer Views of Primary Care: An Action Agenda. The American Journal for Nurse Practitioners 7(10),9-12,15-18,21-23.
5. Cary, A.H.(2004) Professional Credentialing for Home Care/ Hospice Personnel in M Harris(ed) Handbook of home health care administration 4th edition St. Louis: Jones-Bartlett.
6. Cary, A.H. & Smolenski, M(2004) Credentialing and Clinical Privileges and the Advanced Practice Nurse in Lucille A. Joel(ed) Advanced practice nursing essentials for role development. Philadelphia, Pa: FA Davis Co.
7. Cary, A.H. & Smolenski, M (2005) An Overview of Competency Measures In Rita Munsen (ed) Portfolio-based assessment of nursing competencies Washington, DC: American Nurses Books.
8. Cary A.H. (2005) Case Management in M. Stanhope and J. Lancaster (eds) Foundations of Community health nursing: Community oriented practice 7th edition. Elkridge, MD: Elsevier.

C. Research Support

Completed Research Support

1990-1992 - Model Building for Continuity of Care: Patterns of Access. Dr. Pamela Kulbok (Co-Investigator). Secondary Analysis: Data from the 1985 National Health Interview Survey. Health Promotion/Disease Prevention Supplement. (Part of \$570,000 award; PHS).
1998-2001- Principal Investigator: International Program for Credentialing Research, American Nurses Credentialing Center, Washington, DC.(\$358,000).
1999-2001 Co-Principal Investigator. Primary Care Fellowship Evaluation. Agency for Healthcare Research and Quality. D.H.H.S. (\$58,000).
2002-2003 Co-Creator of the International Council of Nurses(ICN) Registry for Credentialing Research (ICN-RCR)administered in Geneva, Switzerland.
2003 Principle Investigator, Robert Wood Johnson Foundation- Data Infrastructure Capacity-Building Project (\$138,000).

BIOGRAPHICAL SKETCH

Provide the following information for the key personnel in the order listed on Form Page 2.
Follow this format for each person. **DO NOT EXCEED FOUR PAGES.**

NAME Genevieve E. Chandler, RN, PhD		POSITION TITLE Associate Professor	
EDUCATION/TRAINING <i>(Begin with baccalaureate or other initial professional education, such as nursing, and</i>			
INSTITUTION AND LOCATION	DEGREE <i>(if applicable)</i>	YEAR(s)	FIELD OF STUDY
D'Youville College Buffalo, NY	B.S.	1971	Nursing
Boston University, Boston, MA	M.S.	1975	Nursing
University of Utah, Salt lake City, Utah	Ph.D.	1986	Nursing

Positions and Honors.**Positions and Employment**

2005 Coordinator
Junior Year Writing Program, UMASS

2005 Director
Second Bachelor's Program

1996 Consultant
Nurse Practice Model Grant, Case Western Reserve University, Robert Wood Johnson and Pew Charitable Trusts

1994-1998 Director of Center for Nursing Advancement
School of Nursing, University of Massachusetts

1993-Present Associate Professor
School of Nursing, University of Massachusetts, Amherst, MA

Honors and Awards

1999 Distinguished College Teaching Award, UMASS

1999-2000 UPENN Summer Institute Research Fellow

1999 Distinguished Outreach Award, UMASS

B. Selected peer-reviewed publications

DeMarco, R., Roberts, S.J., & Chandler, G. (2005) The use of a writing group to enhance voice and connection among staff nurses, *Journal for Nurses in Staff Development*, 21(3), 85-90.

Chandler, G., Roberts, S. J. & DeMarco, R (2004) The development of nursing voice: writing as an empowerment strategy. In M. Oermann & K. Heinrich (Eds.) *Annual Review for Nursing Education* (pp.359-374). N.Y.: Springer Publishing.

Chandler, G. (2004). Writing from the shelter of the storm, chapter in *How Writing Groups Can Heal*, Amherst Writers and Artists Press. In press

Chandler, G (2002) College and low income youth writing together: self discovery and connection. *Comprehensive Issues in Pediatric Nursing*. 25, 255-269.

Baldwin, C., & Chandler, C. (2002) Coaching faculty to write for publication. *Journal of Professional Nursing* 18(1), p.8-15.

B. Research Support

- Chandler, G. (2004) The web of collaborative mentoring, UMASS Graduate School grant (\$9,939.91).
- Chandler, G, (2001) Evaluation of voices from the 'Hood leadership and arts experience, Community Foundation of Western Mass (\$2000) Amherst, MA
- Chandler, G. (1995) Planning and implementing leadership course for telecommunications Professional Development grant from the Office of the President (\$3,465.00) UMASS, Boston.
- Dreher, M Chandler, G. & Unger, E. (1989). "Strengthening Hospital Nursing" Robert Wood Johnson (\$50,000

BIOGRAPHICAL SKETCH

Provide the following information for the key personnel in the order listed for Form Page 2.
Follow this format for each person. **DO NOT EXCEED FOUR PAGES.**

NAME Jean E. DeMartinis	POSITION TITLE Associate Professor
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EDUCATION/TRAINING <i>(Begin with baccalaureate or other initial professional education, such as nursing, and include postdoctoral training.)</i>			
INSTITUTION AND LOCATION	DEGREE <i>(if applicable)</i>	YEAR(s)	FIELD OF STUDY
Ball State University School of Nursing Muncie, Indiana 47305	BS	2/1977	Nursing- major Biology - minor
Ball State University School of Nursing	MA	2/1979	Adult Health Nursing and Education-- a double major
The University of Texas at Austin School of Nursing Austin, Texas 78701	Ph.D.	5/1991	Nursing: Adult Health with a clinical concentration in Gerontology
Creighton University School of Nursing Omaha, NE 68178	Certificate	8/1996	Family Nurse Practitioner Certificate
Alegent Health Omaha, NE	Fellowship	1999- 2000	Fellowship in Preventive Cardiology with Dr. Richard Collins, MD
Methodist Health Systems Omaha, NE	Fellowship	2001	Fellowship in Invasive Cardiology with Dr. Paul Nager, DO

NOTE: The Biographical Sketch may not exceed four pages. Items A and B (together) may not exceed two of the four-page limit. Follow the formats and instructions on the attached sample.

- Positions and Honors.** List in chronological order previous positions, concluding with your present position. List any honors. Include present membership on any Federal Government public advisory committee.

Positions: Most recent: 5 years:

Creighton Univ Medical Center (CUMC) School of Nursing Omaha, Nebraska	Assistant Professor, Tenured MS in Nursing Program Director: Cardiac Health & Rehab Graduate Curriculum	1990- 5/2001
Physician's Clinic Methodist Health Systems Omaha, Nebraska	Nurse Practitioner/Cardiology and Prevention	7/01-12/2002
Creighton University School of Pharmacy & Health Professions Omaha, NE	Associate Clinical Professor Doctorate in Physical Therapy Program; Contributed Services	9/2002-present
Consultants in Cardiology (CIC) Omaha, NE	Nurse Practitioner/Cardiology And Prevention	1/2003-5/2003
MidAmerica Cardiovascular Institute and Prevention Omaha, NE	Nurse Practitioner/Cardiology	6/2003-present
The University of Massachusetts, Amherst Campus	Associate Professor, Nurse Practitioner/Cardiology	2004-present

HONORS & AWARDS:

Appointed to “Honors Edition” of the United Who’s Who Registry Empowering Executives & Professionals	July , 2005
Outstanding Graduate Faculty Award	May, 1999
Outstanding Graduate Faculty Award (first time award given)	May, 1998
Excellence in Nursing Practice; Celebrate Nursing Award; Positive Image of Nursing; NNA, District II	1993
Phi Kappa Phi National Honor Society, UT Austin Campus	1988-Present
Sigma Theta Tau International Nursing Honor Society, Iota Tau Chapter	1991-Present
American Nurses Credentialing Center (ANCC) Certification as Family Nurse Practitioner (FNP)	1997-Present

- . **Selected peer-reviewed publications (in chronological order).** Do not include publications submitted or in preparation.

Most recent (5 years)

DeMartinis, J. (2005). Clients with hypertensive disorders: Promoting positive outcomes. In J. Black & J. Hawks (Eds.), *Medical-surgical nursing* (7th ed., Chapter 54). Philadelphia: W.B. Saunders.

DeMartinis, J. (2003). Cardiovascular problems (Chapter author). In C. Uphold & M. Graham (Eds.), *Clinical guidelines in family practice* (4th ed.). Gainesville, FL: Barmarrae Books, Inc.

DeMartinis, J. (2003). Cardiovascular problems (Chapter author). In C. Uphold & M. Graham (Eds.), *Clinical guidelines in adult practice* (4th ed.). Gainesville, FL: Barmarrae Books, Inc.

DeMartinis, J. (2003). Cardiovascular problems (Chapter author). In C. Uphold & M. Graham (Eds.), *Clinical guidelines in pediatric practice* (4th ed.). Gainesville, FL: Barmarrae Books, Inc.

DeMartinis, J. (2003). Principles and methods of the basic physical examination. In R. Jones & R. Rospond (Eds.), *Patient assessment in pharmacy practice* (Chapter 4). Baltimore, MD: Lippincott/Williams & Wilkins.

DeMartinis, J. (2001). Clients with hypertensive disorders: Promoting positive outcomes. In J. Black & E. Matassarini-Jacobs (Eds.), *Medical-surgical nursing: Clinical Management for positive outcomes* (6th ed., Chapter 52). Philadelphia: W.B. Saunders.

DeMartinis, J. (2001). Relaxation and stress management. In Denise Robinson, & C.P. Kish (Eds.), *Core concepts in advanced practice nursing* (Chapter 44). St. Louis, MS: Mosby.

DeMartinis, J. (2000). Case study: Community acquired pneumonia (CAP). In Denise Robinson, et al, (Eds.), *Case studies for nurse practitioner clinical practice*. Mosby

- . **Research Support.** List selected ongoing or completed (during the last three years) research projects (federal and non-federal support). Begin with the projects that are most relevant to the research proposed in this application. Briefly indicate the overall goals of the projects and your role (e.g. PI, Co-Investigator, Consultant) in the research project. Do not list award amounts or percent effort in projects.

DeMartinis, J. (1997-2000). Research Supplements for Underrepresented Minorities P.T. 34, FF. **(Supplement to NINR--AREA Grant R15 # 1R15 NRO4230-01 for the final 2 years of parent grant. (Principle Investigator.)**

DeMartinis, J.E. (1996-1999). *Exploring Women's Recovery Experience After MI. National Institutes of Health, Academic Research Enhancement Award (AREA) Grant (R15).*

Principle Investigator for both studies above. Blended research strategies –(interviews and Health and Quality of Life inventories) used to explore women’s recovery after a cardiac event over time, their attitudes, beliefs and biopsychosocial progression during a 3-4 year time frame. A supplement was awarded to explore a sub set of African-American women.

BIOGRAPHICAL SKETCH

Provide the following information for the key personnel and other significant contributors in the order listed on Form Page 2. Follow this format for each person. **DO NOT EXCEED FOUR PAGES.**

NAME JENNIFER WHITMAN FOSTER		POSITION TITLE ASSISTANT PROFESSOR OF NURSING	
eRA COMMONS USER NAME			
EDUCATION/TRAINING <i>(Begin with baccalaureate or other initial professional education, such as nursing, and include postdoctoral training.)</i>			
INSTITUTION AND LOCATION	DEGREE <i>(if applicable)</i>	YEAR(s)	FIELD OF STUDY
THE UNIVERSITY OF ROCHESTER, NEW YORK	BSN	1976	NURSING
THE JOHNS HOPKINS UNIVERSITY, MARYLAND	MPH	1981	PUBLIC HEALTH (MCH)
THE UNIVERSITY OF MISSISSIPPI MEDICAL CTR.	CERT.	1982	NURSE-MIDWIFERY
THE UNIVERSITY OF MASS. AMHERST	PHD	2003	ANTHROPOLOGY

A. Positions and Honors

2003-present	The University of Massachusetts Amherst	Assistant Professor of Nursing
1990-1992	The University of Hartford, CT	Assistant Professor of Nursing
1983-1984	Salisbury State College, Salisbury, MD	Adjunct Clinical Instructor

CLINICAL EMPLOYMENT:

Nurse-midwife:

- Mercy Medical Center January-August 2003
- Baystate Medical Center, Springfield, Massachusetts 1996-2001 (part-time and per diem)
- Providence Hospital, Holyoke, Massachusetts 1992-1996
- Molokai General Hospital, Kanakakai, Hawaii, 1985-1988
- Peninsula General Hospital, Salisbury, Maryland, 1982-1984
- Tapestry Health (formerly the Family Planning Council of Western Massachusetts), 1989-1994 and 2000- present, substitute clinician.
- Kaiser Permanente, Amherst and Northampton, Massachusetts, 1989-1990

Public Health Nurse:

- Centro de Salud, San Jose Poaquil, Chimaltenango, Guatemala, 1978-1980
- The Visiting Nurse Association of Baltimore, 1980-1981
- Perinatal Home Visit Nurse, Kaiser Permanente, Amherst and Northampton, Massachusetts, 1998-1999

Staff Nurse: Oncology/Ophthalmology unit, Mt. Zion Hospital, San Francisco, 1976-1977

CERTIFICATION AND LICENSURE

ACNM #40811982; MASSACHUSETTS RNMW #188636 1976

GRANTS AND AWARDS:

“Expanding the boundaries of women’s health: A collaborative advanced practice nursing program serving western Massachusetts.” Award D09HP05314-01-00 for Advanced Education Nursing Grant from The Health Resources and Services Administration (HRSA). Funded 7/05-7/08.

“Protecting the next generation: A community partnered nursing intervention to promote sexual health among latinos- A pilot study.” Funded March 2005-March 2006 by the University of Massachusetts School of Nursing.

"The role of culture in the implementation of recommended practices of skilled birth attendants in the Dominican Republic." June 2004-June 2005. Funded by the Healey endowment, the University of Massachusetts Amherst.

Journal of Midwifery and Women's Health Mary Ann Shah New Author Award 2005. Awarded to CNM for highest ranking manuscript published in the JMWH for author's first publication in the journal. Manuscript: Fatherhood and the meaning of children: Results of an ethnographic study among Puerto Rican partners of adolescent mothers. J Midwifery Women's Health, 2004; 49 (2): 118-125.

B. PUBLICATIONS

Foster, J, Regueira, Y, Burgos, RI, Sanchez, AH. Midwifery curriculum for auxiliary maternity nurses: A case study in the Dominican Republic. J Midwifery Women's Health, 2005; 50 (4): e 45-9.

Foster, J, Anderson A, Houston, J, Doe-Simkins, M. A report of a midwifery model for training traditional midwives in Guatemala. Midwifery, 2004; 20 (3): 217-225.

Foster, J. Fatherhood and the meaning of children: Results of an ethnographic study among Puerto Rican partners of adolescent mothers. J Midwifery Women's Health, 2004; 49 (2): 118-125.

Leidy Sievert, L, Freedman, R, Zarain Garcia, J, Foster, J, Romano Soriano, M, Longcope, C, Franz, C. Measurement of hot flashes by sternal skin conductance and subjective hot flash report in Puebla, Mexico. Menopause, 2002; 9(5): 367-376.

Leidy, LE, Freedman R., Zarain Garcia, J, Foster, J. Measurement of perimenopausal hot flashes in Puebla, Mexico.[abstract]. Am J Human Biology, 2000, 12(2).

Leidy LE, Freedman RR, Zarain Garcia J, Foster JL. Perimenopausal hot flashes in Puebla, Mexico [abstract]. Menopause, 2000, 7(6):439.

Krutsky, C., Foster, J., Kleinberg, N., Morris, A., & Singleton, K. HIV infection in women. In Varney, H. Varney's midwifery, 3rd ed. Boston: Jones and Bartlett, 1997:181-200.

BIOGRAPHICAL SKETCH

Provide the following information for the key personnel in the order listed for Form Page 2.
Follow the sample format for each person. **DO NOT EXCEED FOUR PAGES.**

NAME		POSITION TITLE	
Dorothy A. Gilbert		Professor	
EDUCATION/TRAINING (<i>Begin with baccalaureate or other initial professional education, such as nursing, and include postdoctoral training.</i>)			
INSTITUTION AND LOCATION	DEGREE (if applicable)	YEAR(s)	FIELD OF STUDY
Cornell University, School of Nursing, NY	BSN	1967	Nursing
Columbia University, NY	PhD	1977	Anthropology
University of Wisconsin-Madison, WI	MS	1988	Nursing

. Positions and Honors.**Positions and Employment**

1975-1983 School of Nursing, University of Wisconsin-Madison, Assistant Professor
 1985- School of Nursing, University of Massachusetts, Amherst, MA, Assistant, Associate, and Professor
 1995- Research in Nursing, Regents College, Albany, NY, Adjunct Professor
 1999- 2003 School of Nursing, University of Massachusetts, Amherst, MA, Director, Office for Nursing Scholarship

Honors

Sigma Theta Tau, Charter Member, Alpha Upsilon Chapter
 University of Wisconsin-Madison, Distinguished Teaching Award
 Sigma Xi

Federal Government Committees

1993 & 1994 Nursing Research Study Sections (AREA grants), National Institutes of Health
 1997 Special Nursing Research Study Sections (R01 grants), National Institutes of Health

. Peer-reviewed publications (in chronological order).

Gilbert, D.A. (1986). The ethics of mandatory elder abuse reporting statutes. *Advances in Nursing Science*, 8(2), 51-62; also in *JONA's Nursing Scan in Administration*, 1(1), 27.
 Gilbert, D.A. (1989). *Recent Portuguese immigrants to Fall River, Massachusetts: An analysis of relative economic success*. New York: AMS Press.
 Gilbert, D.A. & Kolacz, N.G. (1993). Effectiveness of computer assisted instruction versus small-group review in teaching clinical calculation. *Computers in Nursing*, 11, 72-77.
 Gilbert, D.A. (1993). Reciprocity of involvement activities in client-nurse interactions. *Western Journal of Nursing Research*, 15, 673-686. Commentary by S. Weiss, 686-687. Response 687-688.
 Gilbert, D.A. (1994). Messages communicated nonverbally may affect patients' outcomes. *Dermatology Patient Counseling for Nurses*, 2(4), 3 & 15.
 Moore, J.R. & Gilbert, D.A. (1995). Elderly nursing home residents' perceptions of nurses' comforting touch. *Journal of Gerontological Nursing*, 21, 6-13.
 Gilbert, D.A. (1998). Relational message themes in nurses' listening behavior during brief patient-nurse interactions. *Scholarly Inquiry for Nursing Practice*, 12, 5-21.

Gilbert, D.A., Sutherland, M. & Kronenberg, P.M. (2000). Exploring subject-related interactions in repeated measures data using three-mode principal components analysis. *Nursing Research*, 49, 57-61.

Gilbert, D.A. (2002). Culture and holistic nursing. In M.A. Bright (Ed.), *Holistic health and healing* (pp. 71-80). Philadelphia: F.A. Davis.

Gilbert, D.A. (2004). Coordination in Nurses' Listening Activities and Communication about Patient Nurse Relationships. *Research in Nursing & Health*, 27, 447-457

Gilbert, D.A., & Kearney, S.L. (Under review). Active listening in older patients: Characteristics and outcomes in nursing practice. *American Journal of Nursing*, 19 pages.

Dreher, M. C., & Gilbert, D. A. (under review) Conjugal Behavior and Child Development in Rural Jamaica. *Social Science & Medicine*, 20 pages.

. Research Support

Gilbert, D. A., Principal Investigator. "Relational Messages in Nurses' Listening Behavior", an Academic Research Enhancement Award (AREA) from the National Center for Nursing Research of the National Institute of Health. 1991-1993, PI.

Gilbert, D. A., Principal Investigator. "Communication of Relationships Between Chinese Patients and Nurses", a Faculty Research Grant funded by the University of Massachusetts, Amherst. 1995-1996, PI.

Young-Mason, J., Gilbert, D. A., & Breslin, E. "Preparing Future Faculty" a grant funded by the University of Massachusetts at Amherst, \$30,000, 2000-2003.

Gilbert, D.A., Principal Investigator. "Communicating Relationships: Older Patients and NPs' an R01 funded by the National Institute of Nursing Research at NIH, \$752, 000, April 2003-December 2006.

BIOGRAPHICAL SKETCH

Provide the following information for the key personnel in the order listed for Form Page 2.
Follow the sample format for each person. **DO NOT EXCEED FOUR PAGES.**

NAME		POSITION TITLE	
Eileen Hayes		Assistant Professor	
EDUCATION/TRAINING (<i>Begin with baccalaureate or other initial professional education, such as nursing, and include postdoctoral training.</i>)			
INSTITUTION AND LOCATION	DEGREE (if applicable)	YEAR(s)	FIELD OF STUDY
Melrose-Wakefield Hospital, Melrose, MA	Diploma	1966	Nursing
Worcester State College, Worcester, MA	B.S.N.	1980	Nursing
University of Massachusetts Amherst	M.S.	1988	Nursing
University of Massachusetts at Amherst	Ph.D.	1997	Nursing

A. Positions and Honors

1965-1967 Melrose-Wakefield Hospital, Melrose, MA - Staff Nurse Operating Room
 1968-Present University Health Services, University of Massachusetts, Amherst, MA - Staff Nurse and Family Nurse Practitioner
 1989-Present Western Massachusetts Family Planning Council, Northampton, MA - Family Nurse Practitioner
 1988-1991 Vermont College, Nursing, Montpelier, VT - Instructor
 1987-1990 Greenfield Community College, Nursing, Greenfield, MA - Assistant Professor
 1990-1995 University of Massachusetts, School of Nursing, Amherst, MA - Instructor to Clinical Assistant Professor
 1995-1999 University of Massachusetts, School of Nursing, Amherst, MA - Clinical Associate Professor
 2000-Present University of Massachusetts, School of Nursing, Amherst, MA - Assistant Professor

HONORS AND AWARDS

Distinguished Nurse Practitioner of the Year, 2002, Massachusetts Coalition of Nurse Practitioners.

B. Selected Peer Reviewed Publications

Hayes, E., & Plaut, T. (2003). Asthma training and NP students: A strategy for improving pediatric asthma outcomes. *Advance for Nurse Practitioners*, August, 42-49.
 Hardin, S., Hayes, E., Addy, C. (2003). Adolescents and war. *Journal of Adolescent and Mental Health*, 16 (2),81-87.
 Hayes, E., Djaferis, M., Gattasso, S., Hosmer, T., Williamson, K. (2004). Documenting to Improve Pediatric Asthma Outcomes. *Advance for Nurse Practitioners*, 12 (9), 51-58.
Hayes, E. (2005). Athena's work: The Tao of mentoring in the NP preceptor/student relationship. *National Organization of NP Faculties monograph* (In Press, Fall, 2005).
Hayes, E. (2005) Mentoring Research in the NP preceptor/student relationship. *National Organization of NP Faculties monograph* (In Press, Fall, 2005).
Hayes, E. (2005) Approaches to mentoring: How to mentor and how to be mentored. *Journal of the American Academy of Nurse Practitioners* (In Press, November, 2005).
Hayes, E. (2006). Promoting NP practice through research: Opportunities, challenges and lessons. *Journal of the American Academy of Nurse Practitioners* (In press, April 2006).
Hayes, E., Tropp, J., & Kinnell-Rust, H. (2005) Strategies for Improving Outcomes in Adults with Type 2 Diabetes. *Advance for Nurse Practitioners* (In Press, Spring 06).

C. Research Support

Phoenix Home Life Mutual Insurance Company, Greenfield, MA, Corporate Gift to continue nurse practitioner services for the "Hilltowns" at Mohawk Regional High School, Buckland, MA, September 1997. Funded: \$7,000.

Bank Boston, Springfield, MA, Corporate Gift to continue nurse practitioner services for the "Hilltowns" at Mohawk Regional High School, Buckland, MA, September 1997. Funded: \$500.

International Programs, University of Massachusetts Amherst, Grant to explore research interests with colleagues in Northern Ireland with goal of collaboration around issues related to nurse practitioner practice, role development and education, notably mentoring for advanced practice, November 1998. Funded: \$4,000.

Mentoring for managed care: A partnership for quality outcomes, School of Nursing, University of Massachusetts Amherst and Health New England Health Plan, October 1999. Funded: \$30,000.

Nurse Practitioner Perceived Self-confidence in Performing Managed Care Tasks, Attitudes towards Managed Care and Relationship to Patient Care Outcomes, Faculty Research Grant, University of Massachusetts, Amherst, MA, December 2000. Funded: \$5,428.

BIOGRAPHICAL SKETCH

Provide the following information for the key personnel in the order listed on Form Page 2.
Follow this format for each person. **DO NOT EXCEED FOUR PAGES.**

NAME Elizabeth A. Henneman		POSITION TITLE Assistant Professor of Nursing	
EDUCATION/TRAINING <i>(Begin with baccalaureate or other initial professional education, such</i>			
INSTITUTION AND LOCATION	DEGREE <i>(if applicable)</i>	YEAR(s)	FIELD OF STUDY
Boston College School of Nursing, Chestnut	BS	1979	Nursing
University of Colorado, Denver, CO	MS	1985	Nursing
University of California, Los Angeles, CA	PhD	1998	Nursing

A. Positions and Honors

1982-1979 Staff/ Charge Nurse, Mount Auburn Hospital, Cambridge, Massachusetts
1980-1982 Staff/Charge Nurse, ICU, Massachusetts General Hospital, Boston, Massachusetts
1981-1984 Critical Care Clinical Nurse, St. Anthony's Hospital, Denver, Colorado
1984- 1985 Clinical Instructor, University of Colorado Health Sciences Center, Denver, CO
1986- 1999 Clinical Nurse Specialist Medical ICU, UCLA Medical Center, Los Angeles, CA
1990- 1999 Adjunct Faculty, California State University, Long Beach, CA
1990- 1999 Assistant Clinical Professor, UCLA School of Nursing, Los Angeles, CA
1998- 1999 Adjunct Prof Acute Care Masters Program, UCLA School of Nursing, Los Angeles, CA
1998- 1999 Project Coordinator.-Concept Unit Research Study, University of California, Los Angeles, CA
Clinical Nurse Specialist ICU/CCU/IMC, Mercy Medical Center, Springfield, MA
2001- 2002 Clinical Assistant Professor, University of Massachusetts, School of Nursing, Amherst, MA
June 2002-Present Staff Nurse/ICU, Baystate Medical Center, Springfield, MA
September 2002-Present Assistant Professor, University of Massachusetts, School of Nursing, Amherst, MA.
Program Director Clinical Nurse Leader Program.

B. Publications

Henneman EA and Gawlinski A. A "near-miss" model for describing the nurse's role in the recovery of medical errors. Journal of Professional Nursing:20:196-201, 2004.
Jacelon CS, Zucker DM, Staccarini JM and Henneman EA. Peer mentoring for tenure track faculty. Journal of Professional Nursing ;19:335-338, 2003.
Jacelon CS and Henneman EA. Profiles in Dignity: Perspectives on nursing and critically ill older adults. Critical Care Nurse: 24:30-35, 2004.
Henneman EA and Karras G. Determining brain death in adults: A guideline for use in the critical care setting. Critical Care Nurse :24; 50-56, 2004.

Henneman EA and Cunningham H. Using clinical simulation to teach patient safety in an acute/critical care nursing course. *Nurse Educator* 30: 172-177, 2005.

C. Research Support

Ongoing Research

Improving the safety and efficiency of medical processes (#0427071). National Science Foundation. Project period 10/04-09/07. L. Clarke PI, E. Henneman Co-PI.

Critical care nurses role in the recovery of medical errors. Sigma Theta Tau/Beta Zeta Chapter Research Grant. Project period 5/04-5/05. E. Henneman and Gawlinski A. Co-PIs.

Medication reconciliation to improve safety for patients undergoing joint replacement. BHS Insurance Company. Project period 10/04-09/05. G. Ritter PI., E. Henneman Co-investigator.

Completed Research

Effect of a collaborative weaning plan on patient outcome. Stein-Opppenheimer Grant, UCLA School of Medicine, Project period 12/95-12/96. E. Henneman PI.

Testing a medical error classification system in an emergency department setting. Faculty Research Grant, University of Massachusetts. Project period 3/ 2002-3/2003. E. Henneman PI.

BIOGRAPHICAL SKETCH

Provide the following information for the key personnel in the order listed for Form Page 2.
Follow this format for each person. **DO NOT EXCEED FOUR PAGES.**

NAME Cynthia S. Jacelon		POSITION TITLE Assistant Professor	
EDUCATION/TRAINING <i>(Begin with baccalaureate or other initial professional education, such as nursing, and include postdoc training.)</i>			
INSTITUTION AND LOCATION	DEGREE <i>(if applicable)</i>	YEAR(s)	FIELD OF STUDY
Brookdale Community College, Lincroft, NJ	AAS	1975-1977	Nursing
Trenton State College, Ewing, NJ	BS	1977-1979	Nursing
Boston University, Boston, MA	MS	1984-1986	Rehabilitation Nursing
New York University, New York, NY	PhD	1993-2001	Nursing Research & Theory Development
U. Pennsylvania Summer Nursing Research Institute, Philadelphia, PA		2001-2002	Nursing Research
Yale University, School of Nursing, New Haven, CT		2004-2006	Post doctoral Fellow, Center for Self and Family Man. for Vul. Pop. T32NR008346

NOTE: The Biographical Sketch may not exceed four pages. Items A and B (together) may not exceed two of the four page limit. Follow the formats and instructions on the attached sample.

A. Positions and Honors. List in chronological order previous positions, concluding with your present position. List any honors. Include present membership on any Federal Government public advisory committee.

Positions

- 1987-1991 Mount Ascutney Hospital and Health Center, Windsor, VT. Director of Rehabilitation Services and Head Nurse of Rehabilitation Unit.
- 1991-1994 The Weldon Center for Rehabilitation at Mercy Hospital, Springfield, MA. Rehabilitation Clinical Nurse Specialist.
- 1994-2001 U. of Massachusetts School of Nursing, Amherst, MA., Clinical Assist. Prof.
- 2001- U. of Massachusetts School of Nursing, Amherst, MA., Assistant Professor.

Honors

- 1997 Nominated for 1998 campus-wide Distinguished Teaching Award, U. of Mass Amherst
- 1986 Sigma Theta Tau, National Honor Society for Nurses, Beta Zeta Chapter, member
- 2003 Nominated for 2004 campus-wide Distinguished Teaching Award, U. of Mass Amherst

Professional Association Memberships

- 1986- Association of Rehabilitation Nurses (ARN)
- 1994- Massachusetts Association Registered Nurses, American Nurses Association
- 1998- Eastern Nursing Research Society
- 2000- Gerontological Society of America

Selected Professional Activities

- 1999-2000 President, ARN National organization with 7500 members.
- 2001- Chairperson, Research Committee, Beta Zeta Chapter, Sigma Theta Tau Int.
- 2003- 2006 Chair, Rehabilitation Nursing Foundation

B. Selected peer-reviewed publications (in chronological order). Do not include publications submitted or in preparation.

Jacelon, C. S. (1986). The Barthel index: A review of the literature. Rehabilitation Nursing, 11, 9-11.

Jacelon, C. S. (1995). The effect of living in a nursing home on socialization in the elderly. Journal of Advanced Nursing, 22: 539-546.

Jacelon, C. S. (1997). The trait and process of resilience. Journal of Advanced Nursing, 25: 123-129.

Jacelon, C. S. (1999). Preventing cascade iatrogenesis in hospitalized elders: An important role for nurses. The Journal of Gerontological Nursing, 25(1)27-33

Jacelon, C. S. (2001). Rehabilitation and iatrogenic complications of critical care. Critical Care Nursing Clinics of North America

Jacelon, C. S. (2002). Attitudes and behaviors of hospital staff toward elders in an acute care setting. Applied Nursing Research 15(4) 227-234.

Jacelon, C. S. (2003). The Dignity of Elders in an Acute Care Hospital. Qual. Health Research: 13(3).

Proulx, K, & Jacelon, C. S. (2004). Dying with Dignity: The Good Patient Versus The Good Death. American Journal of Hospice and Palliative Care: 22(2).

Jacelon, C. S., Connelly, T. W., Brown, R., Proulx, K., & Vo, T. (2004) A concept analysis of dignity for older adults. Journal of Advanced Nursing: 48(1): 76-83

Jacelon, C. S. & Henneman, E. A. (2004). Profiles in dignity: Perspectives on nursing and critically ill older adults. Critical Care Nursing:24(5).

Jacelon, C. S. (2004). Managing personal integrity: The process of hospitalization for elders. Journal of Advanced Nursing, 46(5): 549-557.

Jacelon, C.S. (2004). Elders and autonomy in acute care. J. of Gerontological Nursing, 30(11): 29-36.

O'Dell, K.K., & Jacelon, C.S., (2005) "Not the surgery for a young person: Women's experience with vaginal closure surgery." Journal of Urologic Nursing, 25(5):345-351

Jacelon, C.S. & Imperio, K. (2005) Participant diaries as a source of data in research with older adults. Qualitative Health Research.15(7): 991-997

C. Research Support. List selected ongoing or completed (during the last three years) research projects (federal and non federal support). Begin with the projects that are most relevant to the research proposed in this application. Briefly indicate the overall goals of the projects and your role (e.g. PI, Co-Investigator, Consultant) in the research project. Do not list award amounts or percent effort in projects.

"Managing Personal Integrity: A Grounded Theory of Elderly People Surviving Hospitalization." Doctoral Dissertation. 1998-2000.

Research grant awarded by Beta Zeta Chapter, Sigma Theta Tau. Role: Principal Investigator,

"Dignity: A concept analysis using a hybrid model." 2001- 2002,

Research grant awarded by University of Pennsylvania, School of Nursing, International Center of Research for Women, Children and Families, (Funded under PRIME Grant No 3-P30- NR05043-02S1). Role: Principal Investigator

"Strategies used by community-dwelling elders with chronic health problems to manage personal integrity." 2001- 2004

Research grant awarded by Sigma Theta Tau International/ Rehabilitation Nurses Foundation Research Grant Role: Principal Investigator

Research Training: Self and Family Management. Principal Investigator: Margaret Grey 5T32NR008346-02 NIH/NINR Role: Post Doctoral Fellow

"Pelvic Floor Care Needs and Preferences in Older Women." Qualitative study of older women's needs for urogynecology services in assisted facilities. K K. O'Dell MSN CNM (principal investigator) Research grant awarded by the Rehabilitation Nursing Foundation.

Role: Co-investigator "Assessing Dignity in Older Adults. R-15 AREA Grant submitted May 2005.

Role: Primary-Investigator

Principal Investigator/Program Director (Last, First, Middle): King, Christine M.

BIOGRAPHICAL SKETCH

Provide the following information for the key personnel in the order listed on Form Page 2.
Photocopy this page or follow this format for each person.

NAME	POSITION TITLE		
M. CHRISTINE KING	Associate Professor		
EDUCATION/TRAINING (Begin with baccalaureate or other initial professional education, such as nursing, and include postdoctoral training.)			
INSTITUTION AND LOCATION	DEGREE (if applicable)	YEAR(s)	FIELD OF STUDY
University of Maryland, Baltimore, MD	BSN	1974	Nursing
Boston University, Boston, MA	MS	1976	Parent/Child Nursing
University of Massachusetts, Amherst, MA	EdD	1988	Counseling/Consulting Psychology

RESEARCH AND PROFESSIONAL EXPERIENCE: Concluding with present position, list, in chronological order, previous employment, experience, and honors. Include present membership on any Federal Government public advisory committee. List, in chronological order, the titles, all authors, and complete references to all publications during the past three years and to representative earlier publications pertinent to this application. If the list of publications in the last three years exceeds two pages, select the most pertinent publications. **DO NOT EXCEED TWO PAGES.**

Professional Experience

1974-1974 University of Maryland Hospital, Baltimore, MD, Clinical Nurse-Pediatrics
1976-1976 Fitchburg State College, Department of Nursing, Fitchburg, MA, Instructor
1981-1985 Franklin Medical Center, Greenfield, MA, Clinical Nurse-Mental Health
1978-1993 University of Massachusetts, School of Nursing, Amherst, MA, Assistant Professor
1994-Present University of Massachusetts, School of Nursing, Amherst, MA, Associate Professor

Honors

1991-1994 University of Colorado, School of Nursing, Project SHARE Fellow. Federal Department of education fellowship in School Health Nursing
1997 University of Massachusetts Amherst, Chancellor's Award for Distinguished Academic Outreach
2000 University of Massachusetts, President's Award for Outstanding Public Service
1998-1999 TEACHnology Fellowship, University of Massachusetts Amherst

Publications: (Partial Listing)

Torres, S., Campbell, J., Campbell, D., King, M.C., & Ryan, J. (2000). "Abuse during and before pregnancy: Prevalence and cultural correlates". Violence and Victims, 15(3), 303-321.
Campbell, J.C., Torres, S., Ryan, J., King, M.C., Campbell, D., Stallings, R. & Fuchs, V. (1999). "Physical and non-physical abuse and other risk factor for low birthweight among full term and preterm babies: A multiethnic case control study". American Journal of Epidemiology, 150, (7), 1-13.
King, M.C. (1998). "Changing women's lives: The primary prevention of violence against women. In Empowering survivors of abuse: Health care for battered women and their children. (pp. 177-189). Thousands Oaks, CA: Sage Publications.
Ryan, J. & King, M.C. (1998). "Woman abuse: Educational strategies to change nursing practice. In Empowering survivors of abuse: Health care for battered women and their children. (pp. 45-57). Thousands Oaks, CA: Sage Publications.
Ryan, J. & King, M.C. (1997) Child Witnesses of Domestic Violence: Principles of Advocacy. Clinical Excellence for Nurse Practitioners. 1 (1),47-57.
King, M.C. & Ryan, J. (1996) Woman Abuse: The Role of Nurse-Midwives in Assessment. Journal of Nurse-Midwifery. 41(6), 436-441.

Research

1991 "Women and AIDS: Abuse, stress and social support." (with J. Ryan). University of Massachusetts Biomedical Research Support Grant (\$2,400).

- 1990 "Birthweight and abuse during pregnancy." (with J. Campbell [PI], D. Campbell, J. Ryan & S. Torres). NIH: National Center for Nursing Research (\$551,688) [UMass \$204,669].
- 1987 "A study of the health care needs of battered women." (with J. Ryan). University of Massachusetts Healey Research Endowment (\$4,946).

Grants: (Partial Listing)

- "Professional Development for School Nurses"; King, M.C. & Ryan, J.; Massachusetts Department of Public Health: 4/1/00-6/30/00; Total Costs: \$10,000. 2000
- "UMass - Simmons School Health Institute"; King, M.C. & Ryan, J.; Massachusetts Department of Public Health: 7/1/99-6/30/04; Total Costs \$805,000.
- "School Based Mental Health Strategies for At-Risk Adolescents"; King, M.C. & Ryan, J.; Helene Fuld Foundation: 9/1/99-8/31/01; Total Costs \$87,000.
- "Developing Competency in Integrating the Massachusetts Health Frameworks into Vocational High School Education"; King, M.C. & Ryan, J.; Massachusetts Teachers Association: 9/1/99-8/31/01; Total Costs \$5000.
- "Professional Nurse Traineeship", King, M.C.; DHHS: HRSA, Division of Nursing, Bureau of Health Professions: 9/1/99-8/31/00; Total Costs \$85,906.
- "UMass - Simmons School Health Institute"; King, M.C., Ryan, J., Millette, B., Piessens, P., Rissmiller, P., Douglas, J.; Massachusetts Department of Public Health: 7/1/98-6/30/99; Total Direct Costs \$170,000; UMass Amherst Portion: Direct Costs \$52,000, Indirect Costs: \$5512.
- "UMass - Simmons School Health Institute"; King, M.C., Ryan, J., Millette, B., Piessens, P., Rissmiller, P., Douglas, J.; Massachusetts Department of Public Health: 7/1/97-6/30/98; Total Direct Costs \$170,000; UMass Amherst Portion: Direct Costs \$53,030, Indirect Costs: \$5300.
- "UMass - Simmons School Health Institute"; King, M.C., Ryan, J., Millette, B., Piessens, P., Rissmiller, P., Douglas, J.; Massachusetts Department of Public Health: 7/1/96-6/30/97; Total Direct Costs \$170,000; UMass Amherst Portion: Direct Costs \$49,500, Indirect Costs: \$4950.
- "Promoting the Health of Springfield Youth in the School Setting"; King, M.C. & Ryan, J.; Springfield Department of Public Health; 4/1/96-6/30/96; Direct Costs: \$8900; Indirect Costs: \$890.
- "Primary Health Care for Adolescents in the School Setting"; King, M.C., Millette, B., & Ryan, J.; DHHS US Public Health Service; 8/1/95-7/31/00; Direct Costs: \$1,107,193. Indirect Costs: \$88,575.
- "UMass - Simmons School Health Institute"; King, M.C., Ryan, J., Millette, B., Piessens, P., Rissmiller, P., Douglas, J.; Massachusetts Department of Public Health; 7/1/95-6/30/96; Total Direct Costs \$170,000; UMass Amherst Portion: Direct Costs: \$50,115; Indirect Costs: \$5512.
- "Expanding School Health Staff Development in Massachusetts". (with P. Piessens, P. Rissmiller, J. Douglass, J. Ryan & B. Millette). DHHS, Maternal Child Health Bureau, \$150,000, UMass portion, \$43,285.

BIOGRAPHICAL SKETCH

Provide the following information for the key personnel in the order listed for Form Page 2.
Follow this format for each person. **DO NOT EXCEED FOUR PAGES.**

NAME	POSITION TITLE
Carol Picard PhD RN	Professor Graduate Program Director University of Massachusetts Amherst

EDUCATION/TRAINING (Begin with baccalaureate or other initial professional education, such as nursing, and include postdoctoral training)			
INSTITUTION AND LOCATION	DEGREE (if applicable)	YEAR(s)	FIELD OF STUDY
Fitchburg State College	BSN	1972	Nursing
Boston College	MSN	1976	Nursing
Boston College	PhD	1998	Nursing

NOTE: The Biographical Sketch may not exceed four pages. Items A and B may not exceed two of the four-page limit.

- A. Positions and Honors.** List in chronological order previous positions, concluding with your present position. List any honors. Include present membership on any Federal Government public advisory committee.

Associate Professor, Fitchburg State College, Fitchburg, MA 1981-1999

Professor and Associate Director, Graduate Nursing Program, MGH Institute of Health Professions, Boston, MA 1999-2003

Professor, University of Massachusetts Lowell 2003-2004

Professor and Graduate Program Director, University of Massachusetts Amherst 2004-present

President, Sigma Theta Tau International, Honor Society of Nursing 2005-2007

Past President, International Association for Human Caring, 2002-2004

- B. Selected peer-reviewed publications (in chronological order).** Do not include publications submitted or in preparation.

Picard, C., Agretelis, J. & DeMarco, R. (2004) Nurse experiences of cancer survivorship Part II- Professional *Oncology Nursing Forum*, 31(3), 537-542..

DeMarco, R., Picard, C. and Agretelis, J. (2004) Nurse experiences of cancer survivorship: Part I-Personal. *Oncology Nursing Forum*, 31 (3), 523-530.

Picard, C. & Cowling, R. (Guest Editors) (2002). Special summer issue: Research based on Rogerian and Newman theory. *International Journal for Human Caring*.

Picard, C. (2002). Family reflections on living through sudden death of a child: cooperative inquiry grounded in Newman's health as expanding consciousness. *Nursing Science Quarterly* 15 (3) 242-250.

Penson, R.T., Dignan, F.L., Canellos, G.P., Picard, C., Chabner, B., & Lynch, T.J. (2000) Burnout: Caring for the carers. *The Oncologist*.

Picard, C. (2000) Uncovering pattern of expanding consciousness in mid-life women: creative Movement and the narrative as modes of expression. Nursing Science Quarterly 13 (2), 150-158.

C. Research Support. List selected ongoing or completed (during the last three years) research projects (federal and non-federal support). Begin with the projects that are most relevant to the research proposed in this application. Briefly indicate the overall goals of the projects and responsibilities of principal investigator identified above.

NAME OF INDIVIDUAL COMPLETED		
2002. Freshwater, D. Picard, C., & Tait, T. Mapping mental health user involvement across pre and post registration curricula. Source: National Health Service, UK	Dates: 2003-2004 \$30,000	Percent 10%
Project Number 2001P000039 Carol Picard PI Source Kenneth Schwartz Foundation Title of Project A Foot in Two Worlds: Nurses' Personal and Professional Experiences of Cancer Survivorship The major goal of this project is to study the lived experience of nurses who are cancer survivors	Dates of Project Feb. 2001-December 2001 Annual Direct Costs \$17, 413	20%
Project Number 2001-P-001113-1 Carol Picard PI Source MGH-IHP The Process of Achieving Competence: New Graduates in Critical Care Settings	Dates of Project September 2001-June 2003 \$2070.	15%

Books

Picard, C. & Jones, D. (Eds.)(2005). *Giving voice to what we know: Margaret Newman's theory of health as expanding consciousness in nursing practice, research and education*. Sudbury, MA: Jones & Bartlett.

Book Chapters (data based)

Picard, C. (2005). Creative movement and reflective art: Modes of expression for participant and researcher. In Picard, C. & Jones, D. *Giving voice to what we know: Margaret Newman's theory of health as expanding consciousness in nursing practice, research and education*. Pp.119-132. Sudbury, MA: Jones & Bartlett.

Picard, C. (2005). Parents of persons with bipolar disorder and pattern recognition. In Picard, C. & Jones, D. *Giving voice to what we know: Margaret Newman's theory of health as expanding consciousness in nursing practice, education and research*. Pp.133-142. Sudbury, MA: Jones & Bartlett.

Paper/Podium Presentations (Peer Reviewed)

Finke, L. & Picard, C. (2005). Resources for evidence-based nursing. International Council of Nurses Congress. Taipei, Taiwan, May.

Picard, C., Agretelis, J. & DeMarco, R. Nurses' professional experiences of cancer survivorship. (April 2004) Eastern Nursing Research Society, Boston, MA

Picard, C., Agretelis, J. & DeMarco, R. Nurses' experiences of cancer survivorship.

(June, 2003) International Association for Human Caring Annual Research Conference, Boulder, CO
Picard, C. (June, 2003). The need for caring partnerships for healthcare

professionals: Parents of children with bi-polar disorder. International Association for Human Caring Annual Research Conference Boulder, CO.

Principal Investigator/Program Director (Last, First, Middle): Roche, Joan P.

BIOGRAPHICAL SKETCH

Provide the following information for the key personnel and other significant contributors in the order listed on Form Page 2. Follow this format for each person. **DO NOT EXCEED FOUR PAGES.**

NAME Joan Roche	POSITION TITLE Coordinator, Second Degree Track University of Massachusetts, Amherst School of Nursing
eRA COMMONS USER NAME	

EDUCATION/TRAINING (*Begin with baccalaureate or other initial professional education, such as nursing, and include*)

INSTITUTION AND LOCATION	DEGREE (if applicable)	YEAR(s)	FIELD OF STUDY
University of Massachusetts, Amherst. MA	PhD	2004	Nursing
University of Massachusetts, Amherst, MA	MS	1993	Nursing
Springfield Technical Community College MA	AD	1980	Nursing
University of Dayton, Dayton, Ohio	BA	1968	Psychology

NOTE: The Biographical Sketch may not exceed four pages. Items A and B (together) may not exceed two of the four-page limit. Follow the formats and instructions on the attached sample.

- Positions and Honors.** List in chronological order previous positions, concluding with your present position. List any honors. Include present membership on any Federal Government public advisory committee.

Senior Partner, Clinical Partnership, Baystate Medical Center / University of Massachusetts, Amherst, 2001—2004.

Assistant Clinical Professor, University of Massachusetts, School of Nursing Amherst, MA, 1994 – present.

Director of Research, Roche Associates, Inc., Wilbraham, MA, 2000 – 2002.

Certification, Honors & professional positions

2002 Pinnacle Award, Sigma Theta Tau International Honor Society of Nursing Computer Based Professional Education Technology Award for WebCT Education and Testing Program for Medication Dosage Calculation.

Distinguished Outreach Award, University of Massachusetts, Amherst, 2001.

Board Certified Advanced Practice RN, Clinical Specialist in Gerontological Nursing, A.N.C.C., June, 2000 to present.

College Outstanding Teacher Award, University of Massachusetts School of Nursing, 1998-1999, Faculty Service Learning Fellowship, University of Massachusetts Provost's Special Committee on Service Learning 1999.

Member, National Council of State Boards of Nursing Panel of Judges, (2003).

Nominating Committee, Sigma Theta Tau, Beta Zeta Chapter, (2002-present).

Member, Curriculum Committee, University of Massachusetts, Amherst, School of Nursing, (2003-present).

Facilitator, Special Interest Group on Learning and Mentoring, Baystate Medical Center, (2002-present).

Faculty Practice Committee, University of Massachusetts, Amherst, School of Nursing (2001-present).

Chair, By-Laws Committee, University of Massachusetts, Amherst, School of Nursing, (2002-2003).

Chair, Nominating Committee, University of Massachusetts, Amherst, School of Nursing, (2001-2002).

By-laws Committee, University of Massachusetts, Amherst, School of Nursing (2001-2003).

Chair, Committee on Undergraduate Academic Matters, University of Massachusetts, Amherst, School of Nursing, (2000-2001).

Diversity Committee, University of Massachusetts, Amherst, School of Nursing, (1998 - 1999).

Nominating Committee, University of Massachusetts, Amherst, School of Nursing, (1999 - 2001).

Administrative Committee, University of Massachusetts, Amherst, School of Nursing, (1998-1999).

Western Massachusetts Task Force of Nurse Educators and Executives, 1998-1999.

Faculty and Staff Campaign Advisory Committee, University of Massachusetts, Amherst, (1998-1999).

Technology Assessment Committee, University of Massachusetts, Amherst School of Nursing, (1998).

Co-facilitator, Development of Community-Based Undergraduate Curriculum, University of Massachusetts, Amherst, School of Nursing, (1996-1997).

Eastern Nursing Research Society (1996 - 2004).

- . **Selected peer-reviewed publications (in chronological order).** Do not include publications submitted or in preparation.

Roche, J. P., Lamoureux E., Teehan, T. (2003). A partnership between nursing education and practice: Using an empowerment model to retain new nurses. Journal of Nursing Administration34(1).26-32.

Roche, J. P., & Lamoureux E (2003). Making the Most of Your First Year as a Nurse? Focus on Success. Nursing Spectrum, 7 (18NE), 16.

Roche, J. R. & Roche, J. P. (2003). Recovery trail: Experts offer advice on keeping communities in the black. Assisted Living Today 10(5), 27-28.

Roche, J. (2002). Teaching clinical decision making with the Clinical Educator Model. Journal of Nursing Education, 41(6), 365-367.

Henneman, E. A. & Roche, J. (2002). Eight ways to nurture a new nurse. Nursing Spectrum, 6(3NE), 16.

Cunningham, H. & Roche, J. (2001). A program using WebCT to determine competency in medication dosage calculation for nursing students. Nurse Educator26(4), 164-166.

Plotkin, K. & Roche, J. (2000). Ensuring the future of home care: Linking nursing interventions to patient outcomes, Home Health Care Nurse18(7), 442-449.

Books & Book Chapters

Roche, J., Lamoureux, E. & Sherlin, M. (2003). Learning to Light the Way: A guide for Preceptors. Baystate Medical Center.

Roche, J. (2003). Cardiovascular disorders. In M.A. Hogan, (Ed.) Prentice Hall Review Series: Medical-Surgical Nursing

C. Research Support.

Dissertation: "Work empowerment, work relationships and expertise in experienced acute care nurses" May, 2004
 This project identified the relationship between structural empowerment in the work setting, work relationships and expertise in acute care nurses.
 Role: Primary investigator .

Principal Investigator/Program Director (*Last, first, middle*): Plotkin, Karen M.

BIOGRAPHICAL SKETCH

Provide the following information for the key personnel in the order listed for Form Page 2.
Follow this format for each person. **DO NOT EXCEED FOUR PAGES.**

NAME		POSITION TITLE		
Karen M. Plotkin		Clinical Assistant Professor		
EDUCATION/TRAINING (<i>Begin with baccalaureate or other initial professional education, such as nursing, and include postdoctoral training</i>)				
INSTITUTION AND LOCATION		DEGREE (<i>if applicable</i>)	YEAR(s)	FIELD OF STUDY
Leominster Hospital School of Nursing Leominster, MA		Diploma	1978	Nursing
Fitchburg State College		B.S	1980	Nursing
University of Massachusetts Amherst School of Nursing Amherst, MA		M.S	1994	Nursing Administration
University of Massachusetts Collaborative PhD Program Amherst/Worcester, MA		PhD	2004	Nursing

NOTE: The Biographical Sketch may not exceed four pages. Items A and B may not exceed two of the four-page limit.

A. Positions and Honors. List in chronological order previous positions, concluding with your present position. List any honors. Include present membership on any Federal Government public advisory committee.

Summer 1994	University of Massachusetts School of Nursing Amherst, MA	Clinical Instructor
1995 - Present	University of Massachusetts School of Nursing Amherst, MA	Clinical Assistant Professor

Honors, Awards and Fellowships

Faculty Service Learning Fellowship Grant, University of Massachusetts, Provost's Special Committee on Service Learning, May 1999.
1999 Sigma Theta Tau Research Grant

1999-2000 Service Learning Award
2000-2001 College Outstanding Teacher Award

B. Selected peer-reviewed publications (in chronological order). Do not include publications submitted or in preparation.

"Ensuring the Future of Home Care: Linking Nursing Interventions to Patient Outcomes," Home Healthcare Nurse, accepted for publication, March, 2000.

"Using the Internet in a Nursing Clinical Practicum Course: Benefits and Challenges," Australian Electronic Journal of Nursing Education, accepted for publication, December 1999.

C. Research Support. List selected ongoing or completed (during the last three years) research projects (federal and non-federal support). Begin with the projects that are most relevant to the research proposed in this application. Briefly indicate the overall goals of the projects and responsibilities of principal investigator identified above.

Principal Investigator/Program Director
(Last, First, Middle):

Stacciarini, Jeanne-Marie R.

BIOGRAPHICAL SKETCH

Provide the following information for the key personnel in the order listed for Form Page 2.
Follow this format for each person. **DO NOT EXCEED FOUR PAGES.**

NAME	POSITION TITLE
Jeanne-Marie R. Stacciarini	Assistant Professor

EDUCATION/TRAINING (Begin with baccalaureate or other initial professional education, such as nursing, include postdoctoral training.)

INSTITUTION AND LOCATION	DEGREE (if applicable)	YEAR(s)	FIELD OF STUDY
Catholic University of Goiás-Goiânia/Brazil	Nursing	1981-1985	Nursing and Other Health Professions
School of Nursing Ribeirão Preto/University of São Paulo-Brazil	Master	1988-1991	Psychiatric Nursing and Mental Health
Institute of Psychology/University of Brasília-Brazil	Ph.D.	1995-1999	Psychology

NOTE: The Biographical Sketch may not exceed four pages. Items A and B (together) may not exceed two of the four-page limit. Follow the formats and instructions on the attached sample.

A. Positions and Honors. List in chronological order previous positions, concluding with your present position. List any honors. Include present membership on any Federal Government public advisory committee.

- 1985-1989 Psychiatric Nurse, Psychiatric Hospital of Fundação Hospitalar do Distrito Federal – Brasília- DF Brazil.**
- 1989-1990 Clinical Faculty, Municipal Foundation of Marília – São Paulo, Brazil. Teaching Psychiatric Nursing and Mental Health
- 1991-1994 Clinical Faculty, Nursing Department – Catholic University of Goiás, Brazil. Teaching Psychiatric Nursing and Mental Health
- 1994-2000 Clinical Faculty/ Assistant Professor, School of Nursing – Federal University of Goiás, Brazil. Teaching Psychiatric and Mental Health for nursing students and Introduction to Hospitals' Practice at the School of Medicine.
- 1998 Visitor Professor, Psychology Department – University of Massachusetts, Amherst, Ma
- 2001-present Assistant Professor, School of Nursing – University of Massachusetts, Amherst, MA

AWARDS:

1988 - 1991 CNPQ – National Council for the Scientific and Technological Development – Scholarship for the Master Studies

Feb.1998 – Dec. 1998 Fulbright Commission – Scholarship during Ph.D. Program to do research under Dr. Seymour Epstein in the Psychology Department at UMass/Amherst

2002/03 NIMH/NINR Mentorship Program: building the capacity of Psychiatric and Mental Health Nurse researchers

B. Selected peer-reviewed publications (in chronological order). Do not include publications submitted or in preparation.

Stacciarini, J. M. R. & Tróccoli, B. T. (2002). Estresse Ocupacional [Occupational Stress]. In: Borges, L., Mendes, A. M. B. & Ferreira, M. C. (Eds.). Trabalho em Transição e Saúde em Risco: Múltiplas Abordagens e Indicadores. [Work in Transition and Health in Risk: Multiples Approaches and Indications]. Brasília: UnB.

Journal Articles:

Stacciarini, J. M. R., O'Keeffe, M. & Mathews, M. (submitted). Group Therapy as Treatment for Depressed Latino Women: A Review of the Literature. *Hispanic Journal of Behavioral Science*.

Stacciarini, Jeanne-Marie R. & Troccoli, B. (2004). Occupational stress and constructive thinking: health and job satisfaction. *Journal of Advanced Nursing* 46(5), 480-487.

Cunningham, H. **Stacciarini, J. M. R. & Towle, S. (2004).** Strategies to Promote Success on the NCLEX-RN for Students with English as a Second Language. *Nurse Educator*. V19, N1, pp15-19.

Jacelon, C., Zucker, D. **Stacciarini, J.M. R. & Henneman, E. (2003).** Peer Mentoring for Tenure-Track Faculty. *Journal of Professional Nursing*. V19, N6 (November-December), pp335-338.

Stacciarini, J. M. R. (2002). Experiencing Cultural Differences: Reflections on Cultural Diversity. *Journal of Professional Nursing*, 18 (6) 346-349.

Esperidião, E., Munari, D. & **Stacciarini, J.M. (2002).** Desenvolvendo pessoas: estratégias didáticas facilitadoras para o auto conhecimento na formação do enfermeiro. [Developing People: didactic strategies to promote self-knowledge in the nursing education] *Revista Latino-Americana de Enfermagem*, 10(4): 516-22.

Stacciarini, J. M. R. & Tróccoli, B. T. (2001). O estresse na atividade ocupacional do enfermeiro [Stress in the occupational activity of Nurses]. *Revista latino-americana de Enfermagem*, 9 (2), 17-25.

Aguiar, K. N.; Silva, A. L. A. C.; Faria, C. R.; Lima, F. V.; Souza, P. R. & **Stacciarini, J. M. R. (2000).** O estresse em uma equipe military de resgate pré-hospitalar [Stress in a military rescue team]. *Revista Eletrônica de Enfermagem (online)*, 2 (2). Goiânia.

Research Support. List selected ongoing or completed (during the last three years) research projects (federal and non-federal support). Begin with the projects that are most relevant to the research proposed in this application. Briefly indicate the overall goals of the projects and your role (e.g. PI, Co-Investigator, Consultant) in the research project. Do not list award amounts or percent effort in projects.

Ongoing

Stacciarini, Jeanne-Marie R. (2003-2005). Coping Patterns: Puerto Rican versus North American White Women. *Faculty Research Grant - University of Massachusetts/ Amherst.* (PI)

Submitted for Research Support

Stacciarini, Jeanne-Marie R. (funding pending). Improving Constructive Thinking in Depressed Puerto Rican Women: Protocol Refinement. Submitted to the *National Alliance for Research on Schizophrenia and Depression (NARSAD) Young Investigator*.

Stacciarini, Jeanne-Marie R. (funding pending). Constructive Thinking in Depressed Puerto Rican Women: Protocol Improvement. Submitted to the Freedom From Fear Foundation

BIOGRAPHICAL SKETCH

Provide the following information for the key personnel in the order listed for Form Page 2.
Follow this format for each person. **DO NOT EXCEED FOUR PAGES.**

NAME	POSITION TITLE
Jean Elizabeth Swinney	Associate Professor

EDUCATION/TRAINING (Begin with baccalaureate or other initial professional education, such as nursing, and include postdoctoral training)

INSTITUTION AND LOCATION	DEGREE (if applicable)	YEAR(s)	FIELD OF STUDY
New York University, New York, New York	B.S	1964	Nursing
New York University, New York, New York	M.A.	1980	Nursing
University of Texas at Austin, Austin, Texas	PhD	1992	Nursing

NOTE: The Biographical Sketch may not exceed four pages. Items A and B may not exceed two of the four-page limit.

A. Positions and Honors. List in chronological order previous positions, concluding with your present position. List any honors. Include present membership on any Federal Government public advisory committee.

Positions and Honors

1964-1965 Medical Center	Instructor	Kings County Hospital School of Nursing Brooklyn, N.Y.
1967	Instructor	Worcester City Hospital School of Nursing Worcester, MA
1967-1969 University	Tutor	Ahmadu Bello School of Nursing Zaria, Nigeria
1969-1971 Health Center	Public Health Nurse	L.B.J. Neighborhood Brooklyn, N.Y.
1971-1973 Medical Center	Instructor	Kings County Hospital School of Nursing Brooklyn, N.Y.
1973-1979 College/	Senior PHN	Meharry Medical Ministry of Health Gaborone, Botswana
1980-1981	Instructor	Southern Africa University of Alabama School of Nursing Birmingham, AL
1981-1986 University	Assistant Professor	Louisiana State Medical Center School of Nursing 1900 Gravier Street

1986-1990	Research Assistant	New Orleans, LA 70112 University of Texas Center for Health
CareResearch		and Evaluation 1700 Red River Street Louisiana State
1990-1991	Assistant Professor	Medical Center School of Nursing 1900 Gravier Street New Orleans, LA 70112
1992-1993	Assistant Professor	Kingsborough Community School of Nursing 2001 Oriental Blvd. Brooklyn, N.Y. 11235
1993-1996	Associate Professor	McNeese State College of Nursing P.O. Box 90415 Lake Charles, LA 70609
1996-present	Adjunct Associate Professor	University of Massachusetts Center, Graduate School of Nursing
0115		55 Lake Avenue North Worcester, MA 01655-
1996 - Present	Associate Professor	University of School of Nursing Arnold House Box 30420 Amherst, MA 01003-
Massachusetts		

0420

GRANTS/HONORS/AWARDS:

1981-present	Sigma Theta Tau International Honor Society
1983-1987	ANA Certified - Community Health Nursing
1987-1989	Louisiana Board of Regents, Graduate Fellowship
1989	Teresa de Villier Brown Memorial Scholarship (\$300)
1989	Sigma Theta Tau Research Award (\$300)
1989-1990	Texas Nurse Oncology Education Program, Nursing Research Award (\$3,000)
1997-1999 (\$4,967)	University of Massachusetts, Amherst – Faculty Research Grant
2001-2004 (P.I.),	Robert Wood Johnson, African American Faith in Action Grant
	Ref.043348 (\$35,000)
2004-2005	National Institute of Aging, Breast Cancer and African American Women 65 and older (P.I.), Ref. RO3 AG0232286-01 (\$69,750)
2004-2007	U. S. Department of Health and Human Services - HRSA, Embracing the Challenge: Increasing Workforce Diversity in Nursing (P.I.) Ref. 1D19HP02624 -01` (\$957,739).
2002	University of Massachusetts, Tenure Awarded

B. Selected peer-reviewed publications (in chronological order). Do not include publications submitted or in preparation.

Swinney, J. (2002). African Americans with Cancer: The Relationships among Self-Esteem, Locus of Control and Health Perceptions. *Research in Nursing and Health*, 25, (5), 371-382.

Swinney, J., Anson-Wonkka, C., Maki, E., & Corneau, J. (2001). Community Assessment: A church community and the parish nurse. *Public Health Nursing*, 18, (1), 40-44.

Swinney, J. E. (1992). Self-esteem, locus-of-control, and perceived health status in African-Americans with cancer. Dissertation Abstracts, University Microfilms, Inc. No. PUZ9309296

Swinney, J. E. (1991). Is health care racist? *Advances in Nursing Science*, 13, (3), vi-viii.

BIOGRAPHICAL SKETCH

Provide the following information for the key personnel in the order listed for Form Page 2.
Follow this format for each person. **DO NOT EXCEED FOUR PAGES.**

NAME		POSITION TITLE		
Ed Tessier, Pharm.D., M.P.H., B.C.P.S.		Lecturer, School of Nursing		
EDUCATION/TRAINING (Begin with baccalaureate or other initial professional education, such as nursing, and include postdoctoral training.)				
INSTITUTION AND LOCATION	DEGREE (if applicable)	YEAR(s)	FIELD OF STUDY	
University of Rhode Island College of Pharmacy, Kingston RI	BS	1975-1980	Pharmacology	
Rhode Island Board of Pharmacy, Providence RI	Registered Pharmacist	1980	#2707	
Massachusetts Board of Pharmacy, Boston MA	Registered Pharmacist	1980	#18493	
St.Marys Hospital/Mayo Clinic, Rochester MN	Certificate of Residency	1980-1981	ASHP Pharmacy Residency	
University of Massachusetts Amherst School of Public Health, Amherst MA	M.P.H.	1985-1988	Public Health, Administration	
Idaho State University College of Pharmacy, Pocatello Idaho	Pharm.D.	1991-1995	Doctorate in Pharmacy	
Board of Pharmaceutical Specialties, Washington DC	BCPS	1999	Pharmacotherapy	

NOTE: The Biographical Sketch may not exceed four pages. Items A and B may not exceed two of the four-page limit.

A. Positions and Honors. List in chronological order previous positions, concluding with your present position. List any honors. Include present membership on any Federal Government public advisory committee.

Lecturer, University of Massachusetts, Amherst, MA 9/03 – present.

Clinical Pharmacist, Franklin Medical Center, Greenfield MA 5/05 – present.

Founder, ARxGOS CONSULTING, Keene, NH; 12/02 – present. (Formerly, ARxGOS ASSOCIATES, Inc., Northampton, MA, 4/00 – 12/02.)

Other Faculty Appointments:

Clinical Associate Professor of Medicine, Physicians Assistant Program, Springfield College, Springfield, MA, 8/95 - present.

Clinical Associate Professor, Emergency Medical Technician Program, Springfield College, Springfield, MA, 4/00 - present.

Clinical Associate Professor, Physical Therapy Program, Springfield College, Springfield, MA 9/02 – present.

Adjunct Assistant Professor of Pharmacy, Massachusetts College of Pharmacy and Allied Health Sciences, Boston, MA 6/90-present: clinical preceptor for clinical pharmacy clerkship students, NTPharmD Program.

Clinical Assistant Professor, School of Nursing, University of Massachusetts, Amherst, MA 1/01 – 09/03.

Faculty, Pharmacy Technology Program, Holyoke Community College, Holyoke, MA 1/01 – 06/01

Senior Instructor, Cambridge College, Springfield, MA 10/01 – 12/01

Manager, Clinical Pharmacy Services, Baystate Health Systems, Springfield, MA, 5/95 - 4/00.
Clinical Pharmacist, Baystate Medical Center, Springfield, MA, 4/90-5/95.
Clinical Pharmacist, Belchertown State School, Belchertown, MA 8/81-4/90.
Relief Clinical/Staff Pharmacist, Ludlow Hospital, Ludlow, MA, 1/89-6/90.
Relief Pharmacist, Serio's Pharmacy, Northampton, MA, 6/84-10/85.
Pharmacy Resident, St. Mary's Hospital Pharmacy, Rochester, MN, 7/80-7/81.
Pharmacy Intern, Roger Williams General Hospital, Providence RI, 4/77-6/80.

Awards:

SKF Clinical Pharmacy Award, 1980;
McKesson Administrative Pharmacy Award, 1980,
Collaborative Relationships with Nursing Award, Baystate Health Systems, June 1998.
Outstanding Teacher of the Year, Springfield College, May 2004.
College Outstanding Teacher Award, School of Nursing, University of Massachusetts Amherst, May 2005

B. Selected peer-reviewed publications (in chronological order). Do not include publications submitted or in preparation.

McKerry L, Tessier E, Hogan MA. Mosby's Pharmacology in Nursing, 22nd Edition. St.Louis: Elsevier Science. December 2005.

Ulbricht C, Basch E, Basch S, Crichlow R, Ernst E, Kroll D, McGarry M, Smith M, Tannous N, Tessier E, Tsourounis C, Vora M. An Evidence-Bases Systematic Review of Glucosamine Conducted by the Natural Standard Research Collaboration. Journal of Complementary and Integrative Medicine 2 (1): 2005.

Cohen L, Levy N, Tessier E. (2005) Renal Disease. In: Levenson JL (Ed). Textbook of Psychosomatic Medicine. Washington DC: American Psychiatric Publishing, Inc.

Cohen L, Tessier, E, Germain M. (2004) Update on psychotropic medication use in renal disease. Psychosomatics. 45(1): 34-48, January 2004.

Cohen L, Tessier, E, Germain M. (2003) Neuropsychiatric Complications. In Brady HR, Wilcox CS (Ed.), Therapy in Nephrology and Hypertension, 2nd Edition. Saint Louis, MO: Elsevier Science.

Tessier, EG. Glucosamine: an evidence based review of safety and efficacy. Natural Standard Research Database, Volume 1. Boston, MA: Natural Standard, 2002 (www.naturalstandard.com).

Tessier, E. Pharmacotherapy Analysis of Individuals with Intellectual Disability Residing in Community Settings. Presented at the American Society of Healthsystem Pharmacists Midyear Clinical Meeting, New Orleans, December 2001.

Tessier, E, Zhuzhuni A, Goerd P. A Financial Impact Model for Pharmacy Productivity and Pharmacy Interventions. Presented at the American College of Clinical Pharmacy Annual Meeting, November 1998, Platform Presentation #113.

Tessier E, Donelan E, Andrzejewski C. Evaluation of Aprotinin Administration on Blood Product Use in Cardiac Surgery Patients at High Risk for Bleeding. Presented at American Society of Hospital Pharmacists Midyear Clinical Meeting, New Orleans, December 1996, P-279R.

Steinberg RB, Tessier EG. Gastrointestinal bleeding after administration of ketorolac. Anesthesiology 79:1146, 1993.

McCue J, Tessier E. "Cephalosporins" in: Yoshikawa TT, Norman D. Antimicrobial Therapy in the Elderly. New York: Marcel Dekker, Inc. Publishers. 1994.

McCue J, Tessier E, Gaziano P. Handbook of Geriatric Drug Use in Long Term Care. Baltimore: Williams and Wilkins Press, 1993.

McCue JD, Tessier E. Cost Containment and Oral Antimicrobials: Issues for P&T Committees. P&T, 1991;16(4):334-348.

Tessier E. Outcome Oriented Drug Use Evaluation: Integrating Tardive Dyskinesia Screening with Drug Regimen Review and Drug Use Evaluation in a Long Term Care Setting. Presented at American Society of Hospital Pharmacists Midyear Clinical Meeting, New Orleans, December 1991, P-458(D).

Principal Investigator/Program Director
(Last, First, Middle):

Zucker, Donna M.

BIOGRAPHICAL SKETCH

Provide the following information for the key personnel in the order listed for Form Page 2.
Follow the sample format for each person. **DO NOT EXCEED FOUR PAGES.**

NAME Zucker, Donna M.		Assistant Professor of Nursing	
EDUCATION/TRAINING <i>(Begin with baccalaureate or other initial professional education, such as nursing, and include postdoctoral training.)</i>			
INSTITUTION AND LOCATION	DEGREE <i>(if applicable)</i>	YEAR(s)	FIELD OF STUDY
Loyola/Mundelein College, Chicago, IL	BS	1980	Biology
University of Massachusetts, Amherst	MS	1990	Nursing
University of Rhode Island, Kingston, RI	PhD	1999	Nursing

NOTE: The Biographical Sketch may not exceed four pages. Items A and B (together) may not exceed two of the four-page limit. Follow the formats and instructions on the attached sample.

A. Positions and Honors. List in chronological order previous positions, concluding with your present position. List any honors. Include present membership on any Federal Government public advisory committee.

RESEARCH AND PROFESSIONAL EXPERIENCE

1990- 2001 - Clinical Assistant Professor, School of Nursing, University of Massachusetts, Amherst, MA

1992-1993 - Research Assistant, Graduate College of Nursing, University of Rhode Island, Principal Investigator, H. Suzie Kim, Ph.D.

1993-1994 - Research Assistant, Graduate College of Nursing, University of Rhode Island, Principal Investigator, Marlene DuFault, Ph.D.

1994-1996 Instructor in Nursing, Cardiac Subspecialty, Graduate School of Nursing, University of Massachusetts Medical Center, Worcester, MA. (Grant Funded)

1997 - 1999 Research Coordinator: Protocol R96-419: Intron A + Ribavirin for Treatment of patients with Interferon-Refractory or Interferon Relapsed Chronic Hepatitis C. UMASS Medical Center and Schering -Plough - Co-Principal Investigators. (Grant Funded)

1997-2001 Program Coordinator, RN/BS and Second Bachelor Pathways, School of Nursing, University of Massachusetts, Amherst, MA

2001 to present Assistant Professor, School of Nursing, University of Massachusetts, Amherst, MA.

2001-2002 University of Pennsylvania School of Nursing Center for Professional

2005-Present Development/LifeLong Learning. Completion of the Summer Nursing Research Institute.
 Director, RN/BS Track, School of Nursing, University of Massachusetts, Amherst. MA

HONORS

2002 Sigma Theta Tau International Information Technology for Knowledge Advancement Award, Chapter Leader Academy, Indianapolis, IN.
 2002

B. Selected peer-reviewed publications (in chronological order). Do not include publications submitted or in preparation.

1. Simms, K. & Zucker, D. (1999). Smoking Cessation. In, N. Jairath, (Ed), *Coronary heart disease and risk factor management. A nursing perspective*. Philadelphia: W.B. Saunders.
2. Zucker, D.(2000). Depicting death: Lessons on writing and professional development in nursing. *Journal of Nursing Education*, 39(3), 142-144.
3. Zucker, D. (2001). Using case study methodology in nursing research. *The Qualitative Report*, 6(2), (<http://www.nova.edu/ssss/QR/QR6-2/zucker.html>)
4. Zucker, D. & Miller, B. (2001). Assessment of side effects in patients with chronic hepatitis C receiving combination therapy. *Gastroenterology Nursing*, 24(4), 1-5.
5. Zucker, D. (2002). Chronic heart disease: An approach for intervention. *Rehabilitation Nursing*, 27 (5), 187-191.
6. Hunter, A., Lusardi, P., **Zucker, D.**, Jacelon, C., & Chandler, G. (2002). Making meaning: The creative component in qualitative research. *Qualitative Health Research*, 12(3), 388-398
7. Zucker, D. & Asselin, M. (2003). Migrating to the web: The transformation if a traduitional RN to BS program. *The Journal of Continuing Education in Nursing*, 34(2), 86-89.
8. Zucker, D. (2003). Relapse in Hepatitis C: A Case Study. *Clinical Excellence for Nurse Practitioners*, 7(3).

Ongoing Research

2000 Joseph P. Healey Endowment Grant, University of Massachusetts, Amherst, "An Exercise Intervention to Prevent Hepatitis -Related Fatigue." Donna Zucker, Principal Investigator. Funded \$8098.
 2000 Roche Laboratories, Inc. Unrestricted Educational Grant for Hepatitis C Support Groups of the Pioneer Valley. \$1500.

Completed Research

1999 School of Nursing, Isenberg School of Management, and School of Public Health Sciences, "A Three-School Proposal for Offering Multiple Professional Degrees with Online Access", eCollege.com, Kevin Aiken/Craig Dreeszen, Principal Investigators, Division of Continuing Education (CE); Additional investigators, Gary Moore/Kathryn Tracy, School of Public Health Sciences, M. Christine King, Josephine Ryan and **Donna Zucker**, School of Nursing; Eric Berkowitz, School of Management, University of Massachusetts, Amherst. Funded: \$207,000 .

2001 Professional Development Grant, University of Massachusetts. "Online Instruction Fellows Program." Principal Investigators: Mei-Yau Shih, Center for teaching; Martha Stassan, Office for Academic Planning and Assessment; David Hart, Center for Computer - Based Instructional technology; Kevin Aiken, Director of Continuing Education. Senior Fellows and Co-Chairs: **Donna M. Zucker**; Nursing and Robert Feldman, Psychology. Funded: \$18,000.

2001 University of Pennsylvania Summer Nursing Research Institute, "Adherence to Treatment in Women with Hepatitis C." **Donna Zucker**, Principal Investigator. Prime Grant No.3 - P30-NR05042-02S1- \$4,551.95.

APPENDIX G. FACULTY WORKLOAD AND COVERAGE OF DNP COURSEWORK

	Existing Faculty	% Effort
CORE COURSES :		
N603 Theoretical Components of Nursing Science (3)	Stacciarini, Jeanne	25%
N690L Leadership (3)	Breslin, Cary	12.5%
	Cary, Ann	12.5%
NXX Healthcare Quality (2)	Reilly, Cheryl	25%
NXX Care Environment Management (2)	Henneman, Elizabeth	25%
N630 Research Methodology for Nursing (3)	Stacciarini, Jeanne	25%
NXXX Research Translation in Nursing (3)	Gilbert, Dorothy	25%
BIOST&EP640 Intermediate Biostatistics (3)	Letter of Agreement with Department of Public Health	
BIOST&EP 630 Principles of Epidemiology (3)	Letter of Agreement with Department of Public Health	
SCH-MGMT 855 Organizational and Administrative Theory (3)	Letter of Agreement with School of Management	
ComHlth524 Health Politics and Policy (3)	Letter of Agreement with Department of Public Health	
N690-M Informatics (3)	Reilly, Cheryl	25%
Capstone Experience:		
Residency (6)		
Capstone research project (3)		

SPECIALTY COURSES

<u>Family Nurse Practitioner</u>		
N690C Advanced Health Assessment (3)	DeMartinis, Jean	12.5%
	Humphreys, Joyce	12.5%
N615 Advanced Pathophysiology (3)	Chipkin, Stuart	25%
N690D Advanced Pharmacology (3)	Tessier, Edward	25%
N790D Pharmacotherapeutics (3)	Tessier, Edward	25%
N610 Primary Health Care of Children, Adolescents & Young Adults (3)	DeMartinis, Jean	25%
N620 Primary Health Care of Middle Aged and Older Adults (3)	Hayes, Eileen	25%
N670 Family Systems and Intervention (3)	Picard, Carol	25%
N698 Practica and Role Seminar (11)	DeMartinis, Jean	25%

N798 Practicum and Role Seminar (6) Cognate (3)	Hayes, Eileen	25%
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<u>Psychiatric Mental Health Nurse Practitioner</u>		
N690C Advanced Health Assessment (3)	DeMartinis, Jean Humphreys, Joyce	See above See above
N615 Advanced Pathophysiology (3)	Chipkin, Stuart	See above
N690D Advanced Pharmacology (3)	Tessier, Edward	See above
N790D Pharmacotherapeutics (3)	Tessier, Edward	See above
N660 Psychiatric Mental Health Nursing with Individuals (3)	Barnard, Amy	25%
NXXX Psychiatric Mental Health Nursing with Individuals II (3)	Stacciarini, Jeanne	25%
N670 Family Systems and Intervention (3)	Picard, Carol	See above
N665 Psychiatric Mental Health Nursing with Groups (3)	Stacciarini, Jeanne	25%
N698 Practica & Role Seminar (7)	Barnard, Amy	25%
N798 Practicum & Role Seminar (6) Cognate (3)	Stacciarini, Jeanne	25%

<u>Public Health Nurse Leadership Specialist</u>		
Nxx Health Disparities (in development) (3)	Swinney, Jean	25%
N640 Advanced Public Health Nursing I (3)	Swinney, Jean	25%
Nxx Advanced Public Health Nursing II (in development) (3)	Cary, Ann	25%
N798 Practica (6)	Stanley, Barbara	25%
N690N Current Topics (3)	Cary, Ann	25%
ComHlth 620 Principles of Public Health Practice (3)	Letter of Agreement with Department of Public Health	
PH565 Environmental Health (3)	Letter of Agreement with Department of Public Health	
PH601 Application of Social & Behavioral Theories in Public Health Education and Intervention (3)	Letter of Agreement with Department of Public Health	
PH525 Ethical Issues in Public Health (3)	Letter of Agreement with Department of Public Health	
ComHlth 628 Financial Management of Health Institutions (3)	Letter of Agreement with Department of Public Health	
ComHlth 780 Public Health Law (3)	Letter of Agreement with Department of Public Health	
ComHlth 704 Program Planning and Evaluation (3)	Letter of Agreement with Department of Public Health	

DNP Program Costs to be internally reallocated within Nursing Budget	\$252,591
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