

Practice scholarship satisfaction and impact as perceived by DNP-prepared nurses

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ABSTRACT

Background: Today's health systems are complex and are challenged to strive for high-quality care that leads to optimal health outcomes. Doctor of Nursing Practice (DNP)-prepared nurses have the necessary competencies to influence health systems and delivery, that lead to safe and effective practice, by implementing practice scholarship, the translation of science to transform health care delivery, and clinical inquiry to improve practice.

Purpose: The purpose of this study was to determine DNP-prepared nurses' satisfaction with their frequency of engagement in practice scholarship, and the relationship between the satisfaction and perceived impact of practice scholarship.

Methods: In this cross-sectional study, DNP-prepared nurses ($n = 309$) were recruited from a U.S. national membership organization and were asked to complete an online survey.

Results: Usable data findings ($n = 269$) revealed that 81% of participants reported feeling very, or moderately, satisfied with time spent engaging in practice scholarship or clinical inquiry in the areas of quality improvement, translation of research, and evidence-based practice; however, 19% expressed minimal satisfaction or dissatisfaction. There was a significant, moderate positive correlation between impact and satisfaction with time spent engaging in practice scholarship.

Conclusions: Unclear roles and the lack of objective data measurement of practice scholarship are hindering the ability of DNP-prepared nurses to work to the full extent of their education and scope of practice.

Implications: Further studies to develop processes and tools to measure the value and impact of DNP-prepared nurses on quality and safety, health care policies, systems, and population health are recommended.

Keywords: Advanced practice nurses; Doctor of Nursing Practice; impact; practice scholarship; satisfaction.

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The recent disruption of the coronavirus pandemic has driven the implementation and evaluation of health care practice innovations at an unprecedented rapid pace. New knowledge is being generated through

scholarship that is derived from practice to meet the current challenges facing health care. Before the pandemic, health care providers (HCP) were already faced with complicated health systems, complex payment structures, urgent calls for innovation, and responsibility for quality clinical outcomes (Berkowitz, 2015). The Doctor of Nursing Practice (DNP)-prepared nurse is well equipped to apply current best evidence to practice, engage in clinical innovation to pursue practice scholarship, and to enhance quality outcomes in health care (Berkowitz, 2015). Doctor of Nursing Practice-prepared nurses are poised to use their acquired competencies in transformational leadership and scholarship of application to transform health care.

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The purpose of this study was to identify and examine: (1) the perceived satisfaction with the frequency of engagement in practice scholarship and (2) the relationship between the satisfaction and perceived impact of practice scholarship, as reported by DNP-prepared practicing nurses. There is a paucity of research to date regarding satisfaction with engagement in scholarship in practice and perception of impact by the DNP-prepared nurse. This topic is important to understand to optimize the contribution of individual and collective practice scholars, thereby meeting organization and strategic goals to achieve greater value and optimal health care outcomes for patients and populations. Obtaining practice scholarship satisfaction and impact data from DNP-prepared nurses is critical to advance the profession of nursing. These data will provide insight about how these nurses are using their education to realize the goal of providing high-quality health care services to those with complex health and social needs, as well as improving both access to care and health equity (National Academies of Sciences, Engineering, and Medicine [NAM], 2021).

Background and significance

Practice scholarship

Practice scholarship is described by the American Association of Colleges of Nursing (AACN, 2018) as the application of evidence to practice, incorporating implementation and translation science, innovative methods of inquiry that are informed by clinical practice, with the goal of improving and transforming health care delivery and patient outcomes. Boyer (1990) described the scholarship of application as applying knowledge in community and service activities with the outcomes of benefit to the larger community. Austin and McDaniel (2016) suggested that Boyer's work "and other powerful trends affecting doctoral and professional education have led to explicit recognition that students in advanced degree programs will face diverse responsibilities and thus need to develop an array of abilities and competencies" (p. 39).

The scholarship of application for DNP-prepared nurses is demonstrated by competence in developing, implementing, and evaluating clinical practice delivery models to improve the safety, effectiveness, and quality of patient care (Tharp-Barrie et al., 2020). Thus, "practice scholars apply and integrate evidence to and from clinical practice and conduct quality improvement using methodologies to improve care processes" (AACN, 2018, p. 3). Moreover, by meeting the criteria of the scholarship of application established by Boyer (1990), nurses can document, disseminate, sustain, and demonstrate their value, impact, and significant contribution to health care through presentations, webinars, public-access digital repositories, peer-reviewed publications, and other forms of professional dissemination.

Doctor of Nursing Practice scholarship knowledge and competencies

Doctor of Nursing Practice programs have produced practice scholars for 15 years and have defined advanced nursing practice more broadly than the 4 Advanced Practice Registered Nurse (APRN) roles of Clinical Nurse Specialist, Nurse Practitioner, Nurse Anaesthetist, and Nurse Midwife, to include executive nurse leaders, informaticists, and policy analysts. Primary reasons for seeking a DNP degree are seeking knowledge, skills, competencies, confidence, and job opportunities (Kesten, et al., 2021a). This study found most respondents pursued a DNP degree to gain additional knowledge (97.4%), for better job opportunities (78.8%), and to gain additional competencies or clinical skills (72.6%) (Kesten, et al., 2021a).

Doctor of Nursing Practice graduates complete their education with acquired competencies in transformational systems leadership, interprofessional collaboration, health care policy, population health, informatics, the translation of evidence-based practice (EBP), and quality management within practice settings (AACN, 2006). The emergence of the DNP degree as the terminal degree for advanced nursing practice roles has positively altered the landscape of advanced nursing practice and nursing education.

Health care and society need nurses who can manage complexity, lead change, and create innovation (NAM, 2021). Nurses who have completed the DNP degree are making a significant impact on the quality, efficiency, and effectiveness of health care through their contributions in clinical practice, advocacy in health policy, implementation and evaluation of EBP, and contribution to nursing education (Edwards et al., 2018). The DNP graduate influences clinical practice, health systems, health policy, academia, as well as health economics, and information technology (Edwards et al., 2018; Papham & Austin-Ketch, 2015; Terhaar et al., 2016). Educators are confident that DNP graduates are competent at combining knowledge of clinical innovation with practice expertise to improve population and patient health outcomes (Berkowitz, 2015). Doctoral-prepared nurses are in a unique position to serve as leaders in EBP implementation due to the breadth and depth of academic preparation and their pivotal roles across practice settings (McNett et al., 2021).

Meigan and Hunker (2020) surveyed 42 DNP students and found that the APRN group identified the most valuable skill as the ability to recommend an evidence-based change in professional practice based on the findings of published research and professional practice experience. A recent study of 306 DNP-prepared nurses found that the majority of respondents agreed, or strongly agreed, they gained knowledge and competencies in translating research evidence into practice;

synthesizing the literature to identify a solution for a practice issue; identifying, measuring, and/or evaluating outcomes; and designing and implementing quality improvement (QI), EBP, and research (Kesten et al., 2021a). These findings are important because practice scholarship knowledge and competencies are needed for nurses to serve as full partners in health care redesign and improvement efforts, as indicated in the NAM's (2021) *Future of Nursing 2020–2030* report. Recommendations from this report are to eliminate restrictions on the scope of practice of APRNs to practice to the full extent of their education and training, to provide high-quality health care services to those with complex health and social needs, and improve both access to care and health equity (NAM, 2021).

Frequency of engagement in practice scholarship

How frequently are DNP-prepared nurses engaged in practice scholarship? Minimal research has been done on this topic. Kesten et al. (2021b) surveyed DNP-prepared nurses in practice to rate their level of engagement in practice scholarship activities in the workplace since receiving their DNP degree. Survey respondents indicated the highest frequency of engagement in practice scholarship for *evaluating current clinical knowledge, translating current best evidence in practice, and evaluating new care delivery strategies*. Overall, only a weak relationship was identified between knowledge and competencies gained in their DNP program and frequency of engagement in practice scholarship. Recognizing the discrepancy between knowledge gained and engagement in practice scholarship for the DNP-prepared nurse, the authors further explored the relationship of satisfaction with level of engagement.

Satisfaction with engagement in practice scholarship

Satisfaction with engagement affects work–life satisfaction overall and aligns with the proposed Quadruple Aim. The Quadruple Aim adds an additional component to the Triple Aim (improving the patient care experience, the health of populations, and the cost of care) of improving the work–life of HCP, including clinicians and care staff (Bodenheimer & Sinsky, 2014). Eventually, work–life balance that supports the health and well-being of nurses influences the quality, safety, and cost of the care they provide, as well as influencing organizations and systems of care. Over the next decade, nurses will assume greater responsibility to meet the goal of accessible, equitable, high-quality health care for everyone. For this reason, it is imperative that academia and practice organizations work together as partners in health care to ensure that all members of the health care team have an opportunity to work to the highest level of their education and training. The recommendations of the *Future of Nursing 2020–2030* report are designed to ensure that nurses are inspired, supported, valued, and empowered to pursue the goal of

all individuals and communities having an opportunity to lead healthy lives, by 2030 (NAM, 2021).

Impact of Doctor of Nursing Practice scholarship

Impact aligns directly with Boyer's scholarship of application, in that a vital outcome of the DNP-prepared nurses' practice scholarship is the application of the principles of translation of EBP to deliver expert care to patients and populations that lead to desired outcomes. Impact is defined as "a powerful effect that something, especially something new, has on a situation or person," for example, change in practice and/or sustained change in practice (Cambridge Business English Dictionary, 2011, p.421). Impact is aligned closely to overall goals and demonstrates components of DNP-prepared role implementation through sustained application of EBP and related patient-level outcomes, such as improved nurse sensitive indicators and linking nursing input to patient outcomes (Afaneh et al., 2021).

Research indicates that DNP graduates improve health care outcomes by QI initiatives, EBP changes, and exploration of the impact of system and practice changes (Minnick et al., 2019; Murphy et al., 2017). Beeber et al. (2019) examined the role and value of 155 DNP graduates across 23 employers who articulated that DNP-prepared nurses do impact outcomes, but organizations do not have measurable data to articulate the overall impact. Kesten et al. (2022) examined the perception of impact by DNP-prepared nurses, using a 4-point Likert scale of *not at all impactful, somewhat impactful, very impactful, or profoundly impactful*. The study found that the majority of respondents reported their practice scholarship was somewhat impactful, very impactful, or profoundly impactful on individual patients or populations, quality of care, and on the profession of nursing. The perception of impact was reported by the vast majority of respondents at the patient care level, on patient families, the system, the interprofessional team, and the community. The lowest level of perceived impact from practice scholarship was noted within the regional, national, and international arenas (Kesten et al., 2022).

Although outcomes reflect measurable, time-specific, individual/population/system or policy data, significant and sustained impact requires dedicated time and resources to engage in practice scholarship and QI led by transformational leadership. The long-term impact of practice scholarship can be enhanced by academic–practice partnerships that provide a mechanism for DNP-prepared nurses to demonstrate and disseminate sustained impact within systems, local, regional, national, and international platforms in practice and policy that result in a positive impact on the nursing profession itself. These partnerships present an opportunity to not only enhance the application of scholarship in practice but also to sustain impact by improving the health of the public (AACN, 2018).



Burson, R., Moran, K., & Conrad, D. (2016). Why hire a DNP? The value-added impact of the practice doctorate. *Journal of Doctoral Nursing Practice*, 9(1):152-157. <https://doi.org/10.1891/2380-9418.9.1.152>. Reprinted with permission.

Figure 1. The actualized DNP model.

Model

The study framework was based on the Actualized DNP Model (Burson et al., 2016) (Figure 1). The model emphasizes the unique elements of doctoral education, which in turn affect the ability to develop and successfully engage in new practice roles consistent with the developed DNP competencies. It is this role evolution that paves the way to achievement of demonstrated outcomes in the patient, organization, health system, and policy spheres.

Previous publications have demonstrated application of component elements of the model. In Kesten et al. (2021a), practicing DNPs identified the competencies that were achieved through education, aligning with the first component of the model, *Advanced Nursing Knowledge*. In the second publication by Kesten et al. (2021b), the study focused on the DNP-prepared nurses' ability to use acquired competencies to contribute to practice scholarship, including knowledge generation and dissemination. This focus aligned with the second component of the model, *Innovative Advanced Nursing Practice Roles*. Satisfaction with engagement in practice scholarship is also related to the second component of the model because the ability to engage in practice scholarship is heavily influenced by the DNP-prepared nurse's role and job description.

Innovative roles are needed to maximize the potential contribution of DNP-prepared nurses to impact health outcomes. This illuminates the significance of academic-practice partnerships that not only understand the needs

of the communities they serve, but also work together to educate advanced nurses with specific skills and competencies needed to make a difference in health care delivery outcomes. Impact aligns with the third component of the model, *Patient, Population, Policy and Systems Outcomes*, as the resultant outcomes for individuals, populations, systems, and policy reflect the powerful, sustained impact on practice and the profession (Burson et al., 2016; Kesten et al., 2022).

Methods

Design

Using a cross-sectional design, the researchers developed an online survey to collect data from DNP-prepared nurses currently in practice. Specific information was gathered to determine:

- the satisfaction with the frequency of engagement in practice scholarship, and
- the relationship between the satisfaction and the perceived impact of practice scholarship, as reported by practicing nurses holding a DNP degree.

Setting/sample

A convenience sample of 306 DNP-prepared nurses in practice was recruited from a national membership organization for nurses holding a DNP degree. After data

cleaning, 269 completed surveys were used in the analysis.

Procedures

Data were collected using a researcher-designed tool that was distributed by Research Electronic Data Capture (REDCap) (n.d.). The electronic survey tool was developed using constructs from the literature, national nursing organization position statements, and standards of doctoral nursing education (Kesten et al., 2021a). It contained participant demographics, including work role, years since graduation with a DNP degree, questions assessing perception of practice scholarship impact, knowledge gained in DNP programs, and satisfaction with the frequency of engagement in practice scholarship activities.

Five content experts reviewed the survey tool, which was piloted by 10 DNP graduates before it was distributed through a DNP membership organization's website, social media sites, and follow-up announcements. A university Institutional Review Board issued an exempt ethics status.

Data analysis

Survey data were analyzed using SPSS 26 software in consultation with a statistician (IBM Corp., 2019). The principal investigator verified data to ensure accuracy. Descriptive and inferential statistics were generated for each variable. A one-way analysis of variance (ANOVA) was calculated for specific demographics and satisfaction of participants. Correlational data were obtained on impact and satisfaction of participants.

Results

Demographics

The sample ($n = 269$) was primarily female (92%), White (77.7%), and represented all regions of the United States with an additional five international participants. Most worked full time (74%), in community settings (35%), acute care settings (31.2%), or academic settings (32.7%). Participants held direct care APRN roles (47%), academic faculty (25.9%), and indirect roles such as leadership and professional development (17.8%), with a mean 4.6 years of experience since their DNP graduation (Kesten et al., 2021a).

Satisfaction with frequency of engagement in practice scholarship

Respondents were asked how satisfied they were with the amount of time spent engaging in practice scholarship or clinical inquiry. In the survey instructions, practice scholarship was defined as clinical inquiry in the form of QI, research, and EBP. *Clinical inquiry* was defined as the practice of asking questions about clinical practice. Eighty-one percent reported feeling very satisfied or moderately satisfied, and 19% minimally or not satisfied,

with the amount of time spent on practice scholarship or clinical inquiry as defined in the survey. A one-way ANOVA was completed to explore the differences between how satisfied the respondents were with the amount of time spent in practice scholarship by their primary work role, $F(2,265) = 1.255$, $p = .287$, and years since DNP graduation, $F(3,263) = 1.278$, $p = .282$, without significant findings.

Relationship between impact and satisfaction

There was a significant, moderate positive correlation between impact and satisfaction with time spent engaging in practice scholarship, $r(268) = 0.455$, $p < .001$.

Discussion

Satisfaction with frequency of engagement in practice scholarship

For the DNP-prepared nurse scholar

The vast majority of respondents reported feeling satisfied in three key areas: QI, translation of research, and EBP. Nearly one fifth of participants expressed minimal satisfaction or dissatisfaction with the time spent engaging in practice scholarship. These data align with the frequency of engagement in practice scholarship, where there was wide variability (9.4–85.9%) in the reported frequency of engagement (Kesten et al., 2021b). The study results ($n = 269$) indicated that DNP-prepared nurses who responded to the survey had an average of 4.6 years since graduating with their degree. Nurses at this stage of their career may be approaching proficiency in their current role but may not have had enough time to successfully engage in scholarly activity as part of their role. A rhetorical question to ponder is whether satisfaction grows with maturity in the role.

These findings of satisfaction with time spent engaging in practice scholarship raise questions about whether practice scholarship opportunities are prioritized, recognized, valued, and integrated into policies by organizations and employers of DNP-prepared nurses in practice. DNP graduates may be prepared academically to engage in practice scholarship, but these competencies may not align with organization vision, job descriptions, or practice expectations in the workplace. This finding supports Beeber et al. (2019) who examined the role and value of DNP graduates across more than 20 employers who indicated that DNP-prepared nurses do affect outcomes, yet no objective data measurement was in place to support that impact.

For the organization

Organizations have yet to differentiate DNP roles in a meaningful way from Master's-prepared nurses. This practice obscures the impact of DNP-prepared nurses, making it difficult to articulate and measure the outcomes these nurses provide. This is especially true for practice scholarship outcomes. These study results align

with the Nichols et al. (2014) study involving Chief Nursing Officers in Michigan who indicated that access to care and patient care delivery improved under the direction of DNP-prepared nurses. Beeber et al. (2019) further reports that employers of DNP-prepared nurses recognize their unique competencies in the areas of population health, health care policy, and translating evidence into practice. However, unclear role definitions hinder the ability of DNP-prepared nurses to use what they have learned to quantify impact (Beeber et al., 2019; Nichols et al., 2014). It is imperative to integrate practice scholarship activities into innovative roles and responsibilities (Tussing et al., 2018).

For the profession

It is worthy to question whether DNP-prepared nurses are working at the top of their scope of practice, and whether this affects satisfaction and/or overall retention. As previously noted, DNP-prepared nurses are educated across eight distinct Essentials (AACN, 2006). However, DNP graduates may or may not be in a position to apply each of the essential competencies within their role and scope of practice related to the reality that advanced practice nurse roles differ across the United States depending on state legislation. To move the profession forward and to recruit more qualified individuals to the profession of nursing, engagement in practice scholarship could be enhanced by allowing APRNs to practice to the full extent of their education and training, to provide high-quality health care services to those with complex health and social needs, and improve both access to care and health equity (NAM, 2021).

A critical examination of the connection between provider satisfaction with engagement in practice scholarship and the quality of the work–life environment and expectations is needed. Quality of work–life environment and expectations is referred to by the Quadruple Aim (Bodenheimer & Sinsky, 2014) and could shed light on explaining responses to this question of satisfaction with practice scholarship engagement.

Relationship between impact and satisfaction

For the Doctor of Nursing Practice–prepared nurse scholar

This study revealed a moderate positive correlation between impact and satisfaction with time spent in engagement in practice scholarship of participants. Expressing satisfaction with the degree of impact as it relates to QI, research, and EBP may be dependent on a multitude of factors, including:

- type of work role and depth of responsibility reflected in these areas,
- ability to dedicate time toward this area of practice scholarship, and

- whether this impact is valued across organizations, recipients of care, and colleagues.

Perhaps impact and satisfaction are based on time allotment, access to data, opportunity, and resources to devote toward scholarship activities. Kesten et al. (2021b) explored how frequently DNP-prepared nurses engaged in scholarly activity, which provided a valuable analysis of the level of engagement by DNP-prepared nurses in scholarship activities. It is important to acknowledge that although not all nurses pursue a DNP degree to engage in practice scholarship, previous research indicates 72.6% of DNP-prepared nurses indicated that a major driver for seeking a DNP degree was to gain additional competencies or clinical skills (Kesten, et al., 2021a).

Although this study found that 81% of participants reported feeling very satisfied or moderately satisfied, this may indicate that DNP-prepared nurses may not perceive their influence on a practice change or a sustained change in practice, which may occur over time. Further, these findings may be dependent on work role, setting, support, and the ability to meaningfully contribute across these areas. This information suggests the need to continue research in the area of impact and satisfaction across all DNP-prepared nurses regardless of role. Further exploration and research to provide insight to this moderate correlation may entail comparisons across scholarship activity, perceived and actualized impact, and satisfaction with the impact and value generated by the scholarship activity.

For the organization

Organizations are keenly aware of the need to recruit and retain qualified and productive advanced nurses who can contribute to organizational and systems' impact. Satisfaction in the role and work environment are key to successful retention of these proficient providers. The moderate relationship between satisfaction and impact affirm the findings of previous studies and encourage future studies to explore the relationship between satisfaction with practice scholarship and perceived impact.

Beeber et al. (2019) state that employers perceived that DNP-prepared nurses who were practicing in advanced practice clinical roles had less flexibility than other leaders in their organization because their direct patient care responsibilities made it difficult to assume other tasks. Employers acknowledged that DNP-prepared APRNs often assumed activities that were not included in their job descriptions, such as leading QI programs. This is indicative of the need to evolve the innovative roles of DNP-prepared nurses to incorporate leadership in quality initiatives. When asked about DNP-prepared nurses practicing as APRNs, employers stated they function as advanced practice nurses and may not be used to the full

extent of their education, supporting a moderate correlation of impact and satisfaction in areas of QI, research, and EBP.

This study reinforces the findings of Beeber et al. (2019) who described DNP-prepared nurses as employed in formal leadership roles in the health care system that included management and administration. Health systems/administrative-focused and clinical focused roles for DNP-prepared nurses typically included data analysis, translation of data into practice, and leadership. Employers identified that DNP-prepared nurses implemented their roles by leading initiatives that included QI and workforce development efforts, using and analyzing data for QI, project management, and problem solving (Beeber et al., 2019).

For the profession

The strength of correlation between impact and satisfaction suggests there is an opportunity for improvement, and poses the question: Are DNP-prepared nurses being used to the fullest extent of their education and capabilities? If the nursing profession is to achieve the goals of the *Future of Nursing 2020–2030* (NAM Report, 2021), and the Institute for Health care Improvement's Triple Aim to optimize health care performance (Berwick et al., 2008), DNP-prepared nurses must be allowed to work to the highest level of their education and training. To meet the Quadruple Aim, DNP-prepared nurses might find more joy in their work if they felt satisfied with the ability to work at the top of their scope of practice and use their competencies (Bodenheimer & Sinsky, 2014).

The new AACN Essentials and competencies (AACN, 2021) for advanced level nursing education do not specifically differentiate doctoral-level competencies. The implication is that all advanced level nursing education encompasses competencies at the doctoral level. Advanced level nurses are expected to provide further impact beyond the local level. The work of DNP-prepared nurses in practice, health policy analysis and advocacy, evaluating and translating evidence into practice, and the education of nurses significantly contribute to positively affecting the quality, efficiency, and effectiveness of health care (Edwards et al., 2018).

Limitations

Study limitations included recruitment, sample size, survey length, and self-reporting. The authors used a national organization membership to capture a representative sample; however, the professional homogeneity of the sample (advanced practice nurses, academic faculty, and nurses in formal leadership positions) limited the generalizability of the study findings. The sample consisted mainly of nurse practitioners, and as a result, other advanced practice nurses were underrepresented, including nurse anesthetists, clinical nurse specialists,

and nurse midwives. The sample was homogeneous and mainly based within the United States. The survey did not distinguish between post-baccalaureate and post-master's DNP preparation. The length of the survey could also have been a limitation, making completion of the survey a barrier, although options to complete at a later time were offered. As with all self-reporting studies, recall error or bias may have contributed to the answers provided.

Recommendations

The authors recommend future studies that recruit from diverse cultural groups, various DNP work roles, expanding venues, and differentiating between post-baccalaureate and post-master's DNP graduates. Additional studies with larger and more diverse sampling to better understand the implications of satisfaction and impact of practice scholarship in nursing, with stronger international representation, are needed. Future studies are recommended to seek employer's perceptions of practice scholarship and standardizing metrics of value and impact of DNP-prepared nurses' initiatives. Research is needed to evaluate and measure the impact of nursing practice scholarship on quality and safety, health care policies, systems, and population health over time. There is a need for additional studies with a broader reach to better understand the implications and impact of practice scholarship in nursing to support the nursing profession's achievement of the NAM's goals of addressing health disparities and improvements in population health (NAM, 2021).

Implications

This study provides the foundation for further research aimed to create processes and tools for DNP-prepared nurses, employers and organizations, as well as the profession of nursing to identify, quantify, and measure the impact and value of practice scholarship because there are few ways to measure impact at this time (Beeber et al., 2019; Minnick et al., 2019; Murphy et al., 2017). New nursing knowledge is being generated through practice-informed scholarship to meet the current challenges facing health care. DNP-prepared nurses are ideally suited to pursue the scholarship of application by:

- translating evidence to the practice setting,
- engaging in clinical innovation to enhance quality outcomes within practice settings,
- examining variations in effectiveness across approaches to care, and
- by recommending approaches that achieve greater value and optimal health care outcomes for patients and populations (Berkowitz, 2015).

The ability to work at the optimal level to align with scope of practice may lead to greater satisfaction of

nurses and to meeting the Quadruple Aim as proposed by Bodenheimer and Sinsky (2014). This point will be of interest to health care systems who seek to improve health outcomes by retaining DNP-prepared nurses with the knowledge and competencies to assist the organization in realizing these goals. Opportunities to drive the nursing profession forward can be exemplified by disseminating knowledge of DNP-prepared, nurse-led initiatives to improve the patient care experience, improve population health, and reduce the per capita cost of health care delivery per the Institute for Health care Improvement's Triple Aim: care, health, and cost (Berwick et al., 2008).

The long-term impact and satisfaction with practice scholarship can be enhanced by academic–practice partnerships that provide a mechanism for DNP-prepared nurses to demonstrate long range outcomes that will positively affect health systems at the local, regional, national, and international levels. Academic–practice partnerships that advance scholarship across the institutional missions will require strategic thinking regarding the nature of the relationships and the structures needed to facilitate partnerships (AACN, 2018). Studies stress the need to evaluate outcomes that result from academic–practice partnerships, increased nursing engagement in scholarship, and the establishment of EBP in nursing care (Dols et al., 2019; Peterson & Morris, 2019). There is also a significant opportunity to promote dissemination of DNP project findings and practice scholarship outcomes through joint publications between academic–practice partnerships.

Conclusions

As illustrated in the Actualized DNP Model, DNP-prepared nurses are prepared with the knowledge and competencies to engage in practice scholarship and affect the greatest degree of impact on patients, populations, quality of care, and the profession. DNP-prepared nurses in practice report low levels of engagement in these activities demonstrating underutilization of acquired practice scholarship competencies (Kesten et al., 2021b). The authors posit that time constraints, state scope of practice restrictions, lack of dissemination of measurable outcomes, employer expectations, and lack of knowledge by employers of the practice scholarship competencies of DNP-prepared nurses as reasons for this underutilization.

However, DNP-prepared nurses report being satisfied with their low level of engagement in scholarship activities, perhaps due to their lack of experience in the role and competing direct care responsibilities. A call to action to leverage the practice scholarship competencies of the DNP-prepared nurse was addressed for the individual nurse, the organization, and the profession. The impact that DNP-prepared nurses have on patients, populations, systems, the community, policy, and the profession could be enhanced by academic–practice partnerships to

evaluate and disseminate outcomes of practice. These efforts are needed to realize the value-added potential of the DNP-prepared nurse to be a full partner in redesigning health care.

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