

OUTCOMES

The monthly E-Newsletter from Doctors of Nursing Practice, Inc.
and the Academy of Doctorally Prepared Nurses

September 2025, Volume 11 Number 09



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DNP, Inc./ADPN Organizational Updates

The next number of phases of evolution of the **Academy of Doctorally Prepared Nurses, Doctors of Nursing Practice Inc.**, and the **Journal of the Academy of Doctorally Prepared Nurses** depends on funding and volunteers. Funding sources and line-items of revenue are constant yet lacking the punch needed to move our strategic plan forward at the rate desired. We are working with these revenue streams:

- Continuing Education offerings
- Repository posting fees
- Dissemination team annual fees
- Donations

The above help but are not enough to move the needle (so to speak) so the following plans are being set in motion:

- Membership dues (starting with the **Academy of Doctorally Prepared Nurses**)
- A renewed push for donations both individual and business/corporate donations
- An initiative to solicit donation from key stakeholders that impact healthcare services
- Solicitations from philanthropic organizations to help fund the Foundation and business operations.
- Building partnership agreements with key organizations (universities and healthcare systems)

These last 5 efforts have been in motion for a while, yet not enough effort has been invested to make this work as anticipated. We have templated processes in place to help connect with all involved (members, donors, sponsors, philanthropists, and partnerships) and hope you would be a part of these plans.

Please be a partner-development champion and join the team to contact and ensure organizational involvement.

Click [HERE](#) to volunteer your help in this venture.

Your skills, talents, and a group of dedicated colleagues will help move this effort forward. Many hands make light work. The potential is tremendous.

Ensuring operational support, and building the soliciting donations for the [Foundation](#) is foundational (no pun intended) to help build and demonstrate innovation and improved outcomes. As the **Academy** and **Journal** evolve, financial support of these processes will rely on the **Foundation** to support these activities.

DNP Inc. and its subsidiaries are 501(c)(3) nonprofit charitable organizations. [DNP Inc.](#) and the [ADPN](#), aim to improve healthcare outcomes by promoting and enhancing doctoral-prepared nursing professionals. This is the first and continues to be the only doctorally driven organization that welcomes all nurses regardless of professional role, areas of practice, ethnicity, race, or work environment.

[Join in and participate in this process!](#) Together, we are stronger and have the potential to impact systems and processes far beyond our individual scope.

David Campbell-O'Dell, DNP, APRN, FNP-BC, FAANP,
President/CEO **DNP Inc.** and **ADPN**

Continuing Education for Doctoral Prepared Nurses

Doctors of Nursing Practice, Inc. and the Academy of Doctorally Prepared Nurse offer multiple options for continuing education ranging from a few minutes to hour-long sessions.

Explore this list of offerings in several ways. You can find topics and CE of interest to YOU!

EXPLORE OFFERINGS

Enter a key word in the search bar

Select one of these categories:

Clinical / Administration / Academia / Diversity / Policy

or, choose a tag from a dropdown menu with multiple topic in alphabetical order

COURSE LENGTH OPTIONS

Courses vary from 10 minutes to 60 minutes in length (0.17 to 1.0 CEU)

COST?

CE offerings available from \$5 to \$30 per course

All completed Continuing Education Courses are stored on the website for easy access and storage. Your completed CE are archived for your access at any time.

CE certificates are provided at the completion of each course.

Continuing education offerings are easy to find, and some cost next to nothing. Ask yourself if that is what is needed for true professional growth, or do you want to lean into offerings that speak to the growth of your discipline and professional development?

The CE offerings through Doctors of Nursing Practice, Inc. and the Academy of Doctorally Prepared Nurses provide a higher level of Continuing Education.

[Learn more about Continuing Education Services](#)

[Explore a listing of available Continuing Education Courses](#)



DNP, Inc./ADPN Monthly Survey Results

Thank you to all that participated in the August 2025 survey approached concepts and actions of collaboration to reflect our roles and aspirations. The overwhelming response from participants points to a desire and passion to collaborate to improve healthcare outcomes. Do the responses below reflect your thoughts, experiences, and point of view?

Question 1: Surveys in the past point out a desire and willingness to collaborate with colleagues to improve healthcare outcomes. Please share your thoughts on these statements. On a regular basis in my work environment, I collaborate with nursing colleagues to improve outcomes.

93% very much to absolutely, 7% somewhat to not at all

Question 2: My collaborative efforts help to demonstrate quantifiable changes and improvements.

79% very much to absolutely, 21% somewhat to not at all

Question 3: I work with doctorally prepared nurses other than DNP-degreed colleagues.

50% very much to absolutely, 50% somewhat to not at all

Question 4: Collaborating with other doctorally-prepared colleagues helps to augment my thoughts and approach to generating a plan for improvement.

93% very much to absolutely, 7% somewhat to not at all

Question 5: Working with doctorally prepared nurse colleagues is a good idea and should be pursued.

100% very much to absolutely, 0% somewhat to not at all

[Click HERE to participate in](#)
[THIS month's survey.](#)

Important Articles and Links

- [Doctors of Nursing Practice Defend Truthful Titles, Free Speech, and Their Livelihoods in a new Lawsuit](#)
- [Leveraging Doctor of Nursing Practice Scholarship to Meet Organizational Leaders' Expectations](#)
- [Practice Scholarship Engagement as Reported by Nurses Holding a Doctor of Nursing Practice Degree](#)
- [Drivers for Seeking the Doctor of Nursing Practice Degree and Competencies Acquired as Reported by Nurses in Practice](#)
- [DNP Preparation of Primary Care Nurse Practitioners and Clinical Outcomes for Patients with Chronic Conditions](#)
- [Response to "DNP Preparation of Primary Care Nurse Practitioners and Clinical Outcomes of Patients with Chronic Conditions"](#)
- [The ANA Innovation Engine: Activating Innovation Through Education and Communities of Practice](#)
- [Exploring the Necessity of Establishing a Doctor of Nursing Practice Program from Expert' Views: A Qualitative Study](#)
- [Impact of Practice Scholarship as Perceived by Nurses Holding a DNP Degree](#)
- [Alignment of DNP Degree Competencies with Employer Perspectives: The Value of Academic Practice Partnerships](#)
- [Barriers, Facilitators, and Opportunities for Doctor of Nursing Practice Engagement in Translational Research](#)
- [Academy of Clinical Essentials: A Revolutionary Nurse Staffing and Education Model](#)
- [Practice Scholarship Satisfaction and Impact as Perceived by DNP-Prepared Nurses](#)
- [INANE Virtual Journal](#) Listing of journals
- [Doctor of Nursing Practice Project: Key Challenges and Possible Solutions](#)
- [Research Focused Doctoral Education in the 21st Century: Curriculum, Evaluation, and Postdoctoral Considerations](#)
- [Clinical Scholarship Competencies and Roles to Impact Population Health Outcomes](#)
- [Statistical, Practical and Clinical Significance and Doctor of Nursing Practice Projects](#)
- [The Value of the DNP Degree](#)
- [The Doctor of Nursing Practice Degree: Entry to Nurse Practitioner Practice by 2025](#)
- [DNP's Labor Participation, Activities, and Reports of Degree Contributions](#)
- [Doctor of Nursing Practice Degree in the United States: Reflecting, Readjusting, and Getting Back on Track](#)
- [Development of the Doctor of Nursing Practice Nurse Practitioner Minimum Data Set](#)

Do you have articles of interest to share with your nursing and doctoral prepared colleagues? Submit them to: info@DoctorsofNursingPractice.org for inclusion in OUTCOMES: the Monthly electronic newsletter for and about the doctorally prepared nurse.

Doctoral Nursing Foundation: From the Classroom to the Boardroom



The **Doctors of Nursing Practice Foundation** assists nursing colleagues in realizing plans to impact health care delivery and improve outcomes. Many doctoral projects are lacking the support needed to assure sustainability. The goal of this Foundation is to support innovation and sustainability of projects and collaborative initiatives, including other colleagues.

Doctors of Nursing Practice, Inc., is a non-profit charitable 501(c)(3) organization dedicated to improving outcomes by enhancing and improving the practice of the doctorally prepared nurse. All donations are 100% tax-deductible according to IRS Code section 170.

In collaboration with the **Academy of Doctorally Prepared Nurses** and the **Journal of the Academy of Doctorally Prepared Nurses**, the synergy of all nursing professionals is maximized to realize common goals and improve patient healthcare services.

Please be a part of this process by making a tax-deductible donation that will support the efforts of the doctorally prepared scholar. The intent is to impact health outcomes through projects and initiatives that reflect the education and expertise of the doctorally prepared professional nurse in all categories of practice, regardless of work environment, ethnicity, race, or geographic location.

Show your support by clicking the Donation tab below. There are many opportunities to donate at the individual and corporate levels. Your tax-deductible donations make a difference in supporting colleagues generate improved outcomes and generate innovation.

Be a part of something of value to us ALL!

[Donate Today!](#)

[View Donor List](#)

PICOTalks - something new to help us all

PICOTTalks

Professionalism, Innovation, Collaboration {or Creativity} and Outcomes

PICOTalks are similar to TED Talks (though we cannot use that name).

The benefit of PICOTalks is to help generate funds for the Foundation to successfully help colleagues.

The invited speaker offers their expertise without charge, and the viewer is asked to donate to the [Foundation](#) to support nursing excellence.

We are happy to post links in the biographical information included below your image. See the [View PICOTalks Here](#) page archived in the **Academy of Doctorally Prepared Nurses** web site. On that page, view the presentation



Lisa A. Campbell, DNP, RN, PHNA-BC, FAAN
Building Bridges, Not Walls: A Nurse's Guide to
Advancing Health Equity in Challenging Times

Daniel J. Pesut, PhD, RN, FAAN
Creativity and Innovation in Nursing:
Thoughts and Action



The DNP Foundation assists colleagues in realizing their plans to impact health care delivery. All donations are 100% tax-deductible.

Demonstrate your support by donating today.

There are many opportunities to donate at the individual and corporate levels.

More will follow. How about you? Contribute and share your expertise in a PICOTalk!

Online Community

One goal for the 4th quarter of 2025 is to bolster and grow the online communities. Please log in and share your thoughts and insights in the forums and blogs. Add your expertise and challenge us all to be better in our doctorally prepared work to improve outcomes. Start [HERE](#) to sign up and learn more.

GROUPS

Here's a question to all: Are groups as a part of the online community of value to you? Please let us know by sending an [email HERE](#)

- [DNPs of All Race, Creed, Ethnicity](#)
- [Dual Certified DNPs](#)
- [DNPs of Color](#)
- [DNP/APRN Veterans Health Care](#)
- [DNPs Seeking Positions in Academia](#)
- [DNPs in Diversity, Equity, and Inclusion \(DEI\)](#)

BLOGS

- [*The Impact of Whiteness on the Education of Nurses*](#)
- [*The Role of the Nurse Scientist and Nursing Research within a National Integrated Health Care System*](#)
- [*Conference Decision Humor*](#)
- [*The Academy of Doctorally Prepared Nurses Initiatives*](#)
- [*A Symptom of a Deeper Structural Disease?*](#)

EVENTS

- [*Advanced Practice Provider Leadership Conference, Philadelphia, PA, September 10-13.*](#)
- [*2025 Academy of Medical-Surgical Nurses Convention, Austin, TX, September 11-13.*](#)
- [*NLN Education Summit, Washington, DC, September 17-19, 2025*](#)
- [*Emergency Nursing 2025, New Orleans, September 17-20, 2025*](#)
- [*NPACE 2025 Phoenix, September 22-23, 2025*](#)
- [*2025 ANCC National Magnet Conference, Atlanta, GA October 8-10, 2025*](#)

FORUMS

- [*Academy of Doctorally Prepared Nurses Initiatives*](#)
- [*DNP Education – Preparing for Practice*](#)
- [*DNP Student Concerns*](#)
- [*The AACN Essentials Conversation Continues*](#)
- [*The Controversy of the DOCTOR Title*](#)
- [*DNP Professional Growth*](#)

The Caregivers' Corner

The long-awaited AARP/NAC five-year report on the status of Caregiving in our country was released in late July 2025. This is the first report since COVID-19 Pandemic. Some speculated there would be a drop in the overall number of Informal Caregivers, since the pandemic had been particularly disastrous for the chronically ill.

Over the past five years the number of Informal Caregivers increased by ten million. In 2020, this same report counted 53million Informal Caregivers. That number is now 63million. It seems our country has no shortage of chronically ill patients or people who agree to care for them.

The report was more detailed this year. For the first time, it utilized validated research tools to assess the status of Informal Caregivers in the USA. A quick look at the demographics indicate 59 million Informal Caregivers are caring for adults (age 18 and older), and 4 million are caring for children. Sixty-one percent of Informal Caregivers are women. The remaining 39 percent are men. This is a lower number than the study found in 2020. This reverses the trend over the past ten years that saw the number of male Informal Caregivers increasing. About a third, 29%, are the sandwich generation of Informal Caregivers, caring for two generations.



The average Informal Caregiver is 51 years old. Most Informal Caregivers (61 percent) identify as Non-Hispanic, White individuals. Latino/Hispanic Informal Caregivers represent 16 percent; African American/Black Informal Caregivers represent 13 percent, with AANHPI representing 6 percent of our country's Informal Caregivers.

The average Care Recipient is 69.8 years old. Over half of Adult Care Recipients are over 75. Most of these older adults have multiple chronic conditions. The most common conditions found were age-related decline, Alzheimer's or other dementias, mobility limitations, cancer, and post-surgical recovery. At least 27 percent of Informal Caregivers report their Care Recipient has a mental health issue. That adds up to 17,000,000 Care Recipients with mental health issues. There are approximately 6,000,000 Americans diagnosed with Alzheimer's Dementia, meaning our chronically ill Americans also have other mental health issues.

More than half, 55% of Informal Caregivers are providing complex nursing care tasks. They report they are managing catheters, changing dressings on wounds, giving injections, managing medications and monitoring vital signs. Only 22% report receiving any training on how to accomplish these tasks. When available, training is provided by physicians or nurses.

Another common task is coordinating care with the Care Recipient's provider. Most, 70%, report monitoring varied aspects of the Care Recipient's health, 64% regularly communicate with the Care Recipient's provider, and 58% advocate on behalf of their care Recipient.

These duties are over and above performing ADLs and IADLs for the recipients of their care. Another common issue is assisting with mobility, preventing falls. It's no wonder the costs of the care Informal Caregivers provide is in the 100's of billions of dollars each year.

AARP & National Alliance for Caregiving, (2025). *Caregiving in the U.S. 2025*. Retrieved from AARP website.

See more insights and reflections of wisdom from our colleague, Dr. Rosemary Henrich will continue in future issues of OUTCOMES. Her publications can be found on Amazon using [this link](#).

Put a Ring On It: Converting Travel RNs to Staff RNs

Christopher G. Wilson, MSN, RN, CNML, CENP, NEA-BC, FACHE
DNP Student, Eastern Kentucky University



The COVID-19 pandemic resulted in a dynamic shift in nursing staffing and salaries. An industry already facing a shortage suddenly saw a systemic shift in nursing thoughts related to staff positions vs. travel positions. This shift required healthcare organizations to pivot and increase their agency or temporary staffing significantly, some increasing their agency staffing to a high as 28% from a low of 1% (U.S. Government Accountability Office, 2024). This shift continued post-pandemic in several healthcare settings, with nurses remaining in temporary positions at the same hospital for multiple years. This article will explore a leadership campaign aptly named: “Put a ring on it” to convert travel RNs to staff RNs with a success rate of more than 60% and a retention rate over 90% (Wilson, C, 2023). In doing so this campaign has effectively demonstrated skills related to advanced-level nursing education and system-based practice, specifically the American Association of College of Nursing (AACN) Essential competency (2021).

Background

When joining this organization in 2022, the organization was slowly exiting the COVID-19 pandemic, that exit included intermittent episodes of COVID-19 surges amongst staff and patients. The organization continued to have staffing deficits despite having more than two hundred travel RNs across all service lines. Vacancies and a lack of success in recruitment efforts further impacted the organization’s ability to staff consistently to adequately care for patients resulting in increased workloads for staff. This required this leader to immediately address two key areas at once, conversion and elimination of travel nurses and recruitment of additional staff nurses. In reviewing the travel nurses currently at the hospital, an interesting trend was noted: more than 50% had been with the hospital for more than a year, and around 25% had been with the hospital for multiple years, many since the start of the pandemic. It was clear that these nurses enjoyed the environment, the culture and the patient population; it became clear that it was necessary to employ methods to convert them to staff.

Evidenced-Based Practices for Recruitment and Retention

Cultural fit, leadership support, and workload have a significant impact on staff recruitment and retention. These were key strengths identified by travelers at this hospital, making it essential to reinforce and build on the positives. This process started during listening sessions with travel RNs, asking them specifically why they have decided to renew their contract multiple times. From these conversations, this leader was able to glean insight into the positive view most had of the organization. They spoke positively on the organization’s mission to provide care to all regardless of immigration status, gender, nationality, etc. They also spoke positively on how they had been treated as travel nurses.

The literature shows that long term, travel nurses compared to staff nurses are more likely are more likely to report higher work stress (64% v 47%), report being emotionally drained (53% v 48%) and are more likely to leave the profession (33% v 17%) (Spetz, et al., 2020). This data along with our organizational plan to eliminate travel nurses, was shared by this leader directly to the travel nurses by the organization’s Chief Nursing Officer in a listening session. Leadership spoke at length about the positive impact the nurses had made but it was necessary for both sides to make a commitment to each other, and it was time **to put a ring on it**. This effort involved asking each travel nurse to pick a date within the next six months that they would convert to a staff RN at the FTE they preferred or as a per diem nurse. Those who failed to pick a date did not have their contracts renewed. By highlighting the organization's strengths and the positive experiences shared by travel nurses—while also emphasizing its commitment to them and the importance of transitioning away from agency staffing—over 60% of agency nurses converted to staff roles, resulting in zero agency nurses currently in place.

Put a Ring On It: Converting Travel RNs to Staff RNs (continued)

Conclusion

A DNP-prepared executive leader must be prepared to utilize their developed leadership skills to drive institutional change that aligns with the strategic plan of the organization. While sometimes a challenging and even daunting experience, DNP leaders must be prepared to analyze data, risks and potential rewards to make decisions. In this situation, staffing shortages, staff morale, and even patient outcomes may have been compromised had this leader not carefully balanced all factors to develop a solid plan for moving forward. In doing so, this leader effectively demonstrated several competencies for executive leaders as outlined by the American Organization of Nurse Leaders (2022), which resulted in positive outcomes for the organization with more than 60% of agency nurses converting to staff nurses and 90% of them remaining on staff.

References

American Organization for Nursing Leadership (2022). AONL nurse leader competencies. American Hospital Association. www.aonl.org/resources/nurse-leader-competencies

American Association of Colleges of Nursing. (2021). The essentials: Core competencies for professional nursing education. <https://www.aacnnursing.org/essentials>

Spetz, J., Chapman, S., Herrera, C., & Seago, J. A. (2020). When workers travel: Nursing supply during COVID-19 surges (NBER Working Paper No. 28240). National Bureau of Economic Research. <https://www.nber.org/papers/w28240>

U.S. Government Accountability Office. (2024). Hospitals: Expanded use of supplemental nurses during the COVID-19 pandemic (GAO-24-106447). <https://www.gao.gov/products/gao-24-106447>

Wilson, Christopher (2023). Chief Nursing Officer, Deputy Executive Director; Metropolitan Hospital. Cgwrnmsn@gmail.com.

Scholarly Project Repository Examples

If your scholarly project is displayed in the DNP Repository, it can be found by anyone with a browser. Though other repositories are valuable, only academics can view them. The DNP Scholarly Project Repository is a link that you control. You - the author of your work - can share this link with anyone or any organization you wish, and include it in your portfolio and curriculum vitae. Here are examples of Scholarly Projects currently in the Archives. Click the title to view the completed project.

[Analysis Of How Newly Hired Nurses Are Educated To Provide Customer Service](#) by Patricia Diane McAfee, DNP, MSN, RN from Walden University

[Implementation Of CRAFT Questionnaire For Adolescents In The Outpatient Psychiatric Setting To Improve Screening, Brief Intervention And Referral To Treatment](#) by Hermes Mendoza-Zavala, DNP, APRN, PMHNP-BC from Touro University Nevada

- Are you ready to have your work displayed?
- Is it time to show your work to a larger audience of professional consumers?

Click **[HERE](#)** to learn more about the benefits of listing your work in the DNP Scholarly Project Repository.

[THIS LINK](#) will take you to the data entry page.

Doctoral Project Dissemination Team

Now is the time to partner with **DNP Inc.** and **ADPN**. Show how your university supports innovation and dissemination of scholarly work. Help your students demonstrate skills and talents that impact outcomes!

Check out the Dissemination Team. Offer the extra nudge to publish and share successful projects for all to see. If your program is not listed below, join this team to enhance our profession and support colleagues. More information can be found [HERE](#).

[Chaminde University](#)

[Charles R. Drew University of Medicine and Science](#)

[Wilmington University](#)

[University of Maryland](#)

[Sacred Heart University](#)

[Lourdes University](#)

[Oak Point University](#)

[Post University/American Sentinel College of Nursing](#)

[Saint Louis University](#)

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Doctoral Project Repository

An Archive of Curated Documents

Share your talents and support to improve outcomes!

This archive does not replace or presume any publication effort. Each listing is owned by the individual that uploads the completed academic scholarly practice project. This service allows you to share your ideas and work product into the scholarly community and also the consumer community.

There is a one-time nominal \$30 charge to post your scholarly project to this archive of curated documents. Once posted, the owner may share the URL web page address with any individual or organization desired.

Each listing helps to educate patients, employers, organizations, and other stakeholders about DNP capabilities and competencies. Your posted scholarly practice doctoral project will:

- Support a collaborative engagement with practice partners and employers,
- Showcase DNP prepared professional's impact on improving outcomes,
- Disseminate DNP generated content for all interested in the theme, environment, and process of impacting the complex processes of health care delivery,
- Build a foundation for sustainable change, future practice, and the research of practice scholarship, and,
- Support the growth and development of DNP students in the process of developing their project.

If you are a student or graduate, consider this investment to help assure your work can be accessed by both colleague scholars and patients/consumers alike. Other repositories have great value, but are not accessible to those outside of academic circles.

Click [HERE](#) to begin your scholarly project submission

Click [HERE](#) to View Available Repository Projects

Conference Archives

The First National DNP Conference took place in 2008.

Session recordings and collections of presentations including PowerPoint and audio recordings are available.

This is a great resource for scholars, students, and anyone interested in the history and development of the DNP degree and how it has impacted our profession.

[View these archives](#)

Share Your Expertise! Support Innovation and Practice!

We are honored to receive and post articles from DNP colleagues - and DNP colleagues to be. Kindly share your thoughts, insights, curiosities, and challenges in a brief article to be posted in a future issue of OUTCOMES.

Graduates, faculty, and students are welcomed to contribute.

Challenge student to submit articles. The content is likely to be of interest to all readers/colleagues.

Topics may include:

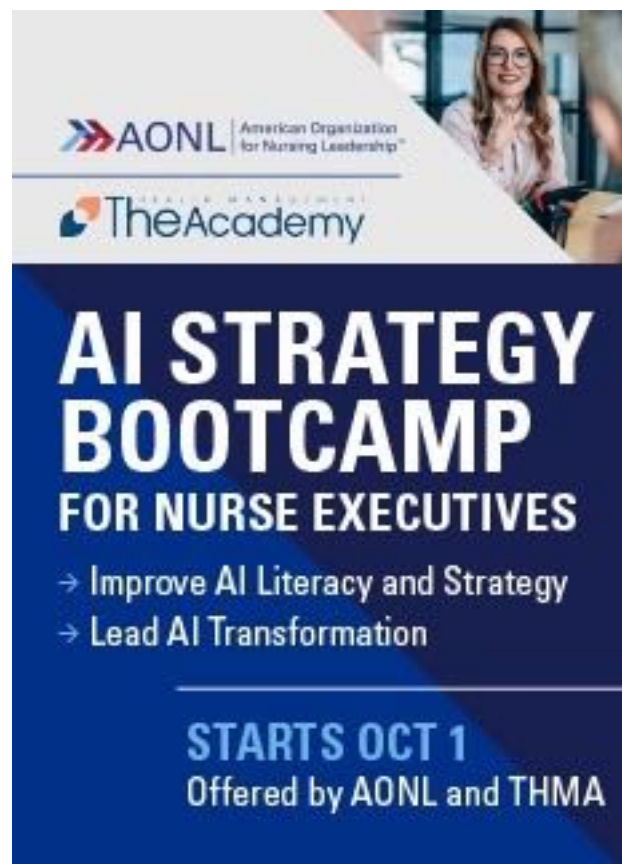
Informatics' Impact on Health Care Outcomes
DNP Prepared Nurses' Successes and Challenges in Policy Formation
Doctoral Prepared Nurses Demonstration of Collaborative Success
Expertise in aggregate/population health outcomes
Entrepreneurial expertise: How to start and maintain a practice
Collaboration to improve academic outcomes
Including all doctoral prepared nurses to enhance diversity

See [OUTCOMES](#) past issues. Click [HERE](#) to contribute!

Kindly share this invitation with colleagues!

Take advantage of this opportunity to reach more than 11,000 per monthly mailing and over 33,000 in the regular outreach to those that may have an interest in doctoral prepared nursing. Articles submitted can include practice information, opinions, editorials, and reflect work performed in your work environment (as a student, faculty, clinician, administrator, researcher, policy expert, and/or informatics specialist).

We look forward to hearing from you and publishing your work.



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— *previous attendee*



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Academy of Doctoral Prepared Nurses

The **Academy of Doctorally Prepared Nurses** is getting noticed. Individuals and organizations that address healthcare outcomes (universities and health care systems) are seeing the value of exploring and building a structure to collaborate to address key issues of concern regarding healthcare outcomes.

Efforts to date have been to build the technology infrastructure and launch information that is of value to those interested in this work. We are there. The website is in place and fully functional. It will be used to coordinate, communicate, and archive projects that are likely to be ongoing and rotating as they become formalized and initiated with key contributors.



The next step is ensuring that the initiatives are structured to make the most of doctorally prepared colleagues. Prioritizing these initiatives is another step. This can be done when folks have a vested interest in these processes. With that in mind, we will be rolling out the membership for the **Academy of Doctorally Prepared Nurses** with an inaugural annual rate of \$60 per year. This is only \$10 per month to have a say in the foundational structure of this initiative. Members will have a say in the planning and direction of these activities. Surveys open to members will be opened and we are strongly considering the development of these surveys by members that are both DNP and PhD prepared. More is moving forward in this regard and updates will be made available in future issues of **OUTCOMES**.

Ideas and a collection of thoughts from previous **Academy of Doctorally Prepared Nurses** summits are available on the website. These ideas provide a starting point for growth and development. Many opportunities exist and could flourish with the support, innovation, and imagination of colleagues vested in demonstrations of collaboration.

The purpose of this organization is to provide a venue and vehicle for doctorally prepared nurses to collaborate and demonstrate joint efforts to improve health care outcomes. Why is this needed? Doctorally prepared nurses in all venues are prone to working in isolation (researchers with researchers, practice doctorates only with other practice doctorates, educators with educators, and nursing scientists with nursing scientists). Collaboration is expected and anticipated, yet are we collectively doing our best to address pressing social and health issues? The creators of this organization believe we can do better.

Mission:

Improve healthcare outcomes and delivery systems through the collaboration of doctoral-prepared nurses.

Vision:

1. Advanced collaboration with colleagues, embracing all nurses with doctorate degrees,
2. Promote the dissemination of healthcare services techniques that demonstrate healthcare improvements,
3. Demonstrate intra- and interprofessional collaboration among all healthcare professional partners, and,
4. Integrate research-based evidence to impact healthcare services and policies nationally and internationally.
5. Share thoughts, ideas, and recommendations [HERE](#).

Dissemination will occur through the **Journal of the Academy of Doctorally Prepared Nurses** and **OUTCOMES**, the monthly e-newsletter for and about improving healthcare outcomes.

Please refer to the [Academy Initiatives](#) page for more information. Scroll to the bottom to click on the forum to share your thoughts, insights, and ideas.

The Journal of the Academy of Doctorally Prepared Nurses

When technology and technology support come together and make progress, it is a beautiful thing. We have enjoyed a couple of wins this past month and are striving for more throughout the rest of 2025. Results is dependent on the timing of technical support services. If you have an interest, we have

established an agreement with off-shore companies to help assure website development success at an affordable price. The software/application that will be used to build the **Journal of the Academy of Doctorally Prepared Nurses** will be Gravity Kit - a collection of applications that integrate into WordPress that allow the collection of information and display of findings. This is ideal for an online journal yet we are entering this venture with our eyes open as there are limitations to this type of application. The benefits outweigh the risks and shortfall of this plan so we are moving forward with this plan.



Many colleagues have connected voicing and interest in being a part of this journal venture. All names and contact information is in place and plans to build the editorial team and structures to help build the content of the journal will begin in the fourth quarter of 2025 with plans to launch a concerted effort in the first quarter of 2026. This time line is slower than what was originally planned, and to those that were ready to start this earlier please accept your apologies. No excuses other than the initial timeline was not realistic and we are now enjoying a cadence of work that is more likely to be successful.

On the **Journal of the Academy of Doctorally Prepared Nurses** website we have several items of interest yet it is still somewhat bare-boned. More content is entered when available. One of the menu items that described the goals and aspirations of this journal is the About tab. As you review the content on that page please connect with questions, comments, or ideas to expand and/or clarify at you believe best.

The other content page that has been developed and is available though the dropdown menu is the Job Descriptions. These have been developed with the help of other journal editors and a little help from AI also. If you have a keen interest in any of these jobs please respond so that we can continue to build our team in all categories.

Of course one concern for any venture is how to finance it. We are able to move our collective efforts up to a point, yet revenue from sales of Continuing Education, PICOTalk Donations, Donations, and grants from philanthropic groups are essential to gaining the traction desired to meet the goals and aspirations of these organizations.

The **Academy** and the **Journal** celebrate the diverse talents of doctorally prepared nurses who work in concert to improve healthcare delivery locally, nationally, and internationally.

Please email info@DoctorsOfNursingPractice.org to share your thoughts and curiosity.

David Campbell-O'Dell

Enduring Virtual Offerings

Doctors of Nursing Practice, Inc. and the **Academy of Doctorally Prepared Nurses** is growing.

This evolution include many elements. Some are easy, others are challenging to create and include participants. Please consider the following:

1. **Continuing Education** offerings. There are over 100 opportunities to learn and earn contact hours for your nursing license. More are being added. We are laying the groundwork to import this course from Learn Dash to Lifter LMS. The goal is to have this work completed by the end of the 4th quarter 2025. We anticipate that all continuing education will be ported to the Academy of Doctorally Prepared Nurses website.
2. **Webinars** to highlight the talents, knowledge, and educational opportunities of doctoral-prepared colleagues. Continuing education opportunities will align with these efforts. Live, synchronous webinars will be offered, and the recorded versions will be archived in the Continuing Education platform for later viewing and purchase.
3. **PICOTalks**: Professionalism, Innovation, Collaboration, and Outcomes presentations. We are undoubtedly familiar with TED Talks (Technology, Entertainment, Design). Now we have a mechanism to creatively address ideas specific to healthcare, nursing, and our efforts to improve outcomes. Two presenters are already scheduled. Donations to the Foundation will be requested. Are you interested? See the first PICOTalks now! [CLICK HERE!](#)
4. **Foundation and Donations**: We continue to request grants and donations from philanthropic groups, yet also request donations from individuals and corporations. Check out the opportunities to be a part of the growth of the [Foundation](#)! This is an ongoing effort. Your involvement is appreciated in ways we cannot even imagine today.
5. **Membership opportunities**: This strategy is nearing completion of the first draft to be implemented starting September 2025. The notion of membership is not popular, yet a membership, free access to continuing education, discounts for the Repository, and other services, including the **Academy** and the **Journal**, will hopefully elicit a favorable response. More will follow, yet please know the membership charges will be nominal.
6. **Repository of Scholarly Practice Project**: The number of talented DNP graduates sharing their work in the Repository is growing. We are slated to develop an updated and easy-to-use system. The nominal charge for posting these curated documents is valuable to colleagues and consumers. We are the only Repository that anyone with the internet can access. Ask yourself - Who can see your completed project? Is it limited to faculty or those in a membership driven organization? Who benefits from your project being hidden?
7. **Dissemination Team** efforts continue. We have over 480 DNP programs currently in place. If even 25% committed to supporting their students to disseminate their completed projects, the number of available projects would increase tremendously. Does your university belong to the dissemination team? [Learn more HERE](#). The directory of doctoral projects is also slated to grow and expand to include all doctoral project opportunities (PhD, EdD, DNS, DNP, and other programs for nursing doctorates).

These efforts will help **Doctors of Nursing Practice, Inc.** and the **Academy of Doctorally Prepared Nurses** grow and thrive. Be a part of this effort!

Links and Resources

The mission of *Doctors of Nursing Practice, Inc.* and the *Academy of Doctoral Prepared Nurses* is to improve healthcare outcomes by promoting and enhancing doctoral prepared nursing professionals. Services are available to support students, graduates, faculty, employers, and stakeholders with an interest in the doctoral degrees in nursing. Click the links below to explore options and opportunities.



Doctoral Project
Repository

University and College
DNP Program Database

Dissemination Team
Join Today!

PICOTalks
Check it out!

DNP Conference
Archives

DNP List of Sponsors
and Exhibitors

Events from
Collaborating
Organizations

DNP Foundation
Donor Options

DNP Foundation
Donor Listing

Scholarship and Grant
Opportunities

Sign Up for the Online
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