

OUTCOMES

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



- [Organizational Update](#)
- [Advertise, Sponsor, and Endorse](#)
- [5 Question Survey: Quick and Easy](#)
- [Articles and Links of Interest](#)
- [Share YOUR Expertise](#)
- [Repository Examples](#)
- [Conference Archives](#)
- [PICOTalks: For a great cause](#)
- [Doctoral Nursing Foundation](#)
- [Dissemination Team](#)
- [Online Community](#)

- [Care Giver's Corner Monthly Article](#)
- [Doctoral Project Repository](#)
- [DNP-Led Journey to Quality Improvement](#)
- [Academy of Doctorally Prepared Nurses update](#)
- [Journal of the Academy of Doctorally Prepared Nurses](#)
- [Update](#)
- [Enduring Virtual Offerings](#)
- [Valuable Links for Professional Growth and Development](#)

DNP, Inc./ADPN Organizational Updates

As you have been following the information offered in this monthly newsletter, it's important to point out changes that are taking place in 2026. The top change announcement is that we are doing away with continuing education offerings. For more information about how and why we came to this decision and future opportunities to explore, [please see this page.](#)

In small yet deliberate steps, **Doctors of Nursing Practice, Inc.** and the **Academy of Doctorally Prepared Nurses** continue to grow and evolve. The start of this year brings about strategic activities that have been planned in the previous year. Through social media platforms we are broadcasting the follow:

- We are now posting information and invitations to explore [OUTCOMES](#), the monthly electronic newsletter for and about doctorally prepared practice.
- Another service is the posting of [scholarly project repository](#), a mechanism to share completed doctoral projects. This includes postings to multiple social media platforms over 2-3 years, and easy internet searchability.
- Of course we invite everyone to sign up for the [mailing list](#) to receive OUTCOMES and other communications pertinent to doctorally prepared nursing practice.
- [Advertising, sponsorship, and endorsement opportunities](#) have expanded to include multiple options for every individual and entity to share information about your services and show your support for the bigger picture of doctorally prepared nurses.
- Visit and sign up for the [online community](#) to view and participate in blogs, forums, groups, and events pertinent to our collective work as doctorally prepared nurses.
- [Scholarship opportunities](#) to share specific work including actions, publications, contributions to our discipline. This is the place to highlight your efforts and those of worthy colleagues.
- [PICOTalks](#) - housed on the Academy website, features colleagues sharing their insights in a 20-25 minute one-on-one discussion or presentation. Witness the depth and insights of revered nursing experts. In return we request donations to the foundation. It's a win-win for all involved.
- Speaking of the [foundation](#), this is the place to make a tax-deductible donation to support nursing and doctorally prepared nurses' contributions to others.
- Another invitation and information is the [Academy of Doctorally Prepared Nurses](#). This is the next step in doctoral expansion and efforts to solidify our contributions to the discipline.
- Another offering is the [dissemination team](#) - offering deans and directors the opportunity to support students and graduates to disseminate their expertise.
- Along with the dissemination team, a [listing of doctoral programs](#) is expanding to include all doctoral programs. As the Academy supports all doctorally prepared nurses, it's natural to expand this listing of programs beyond DNP programs alone.
- [Offering volunteer activities](#) is also an option for folks to support colleagues and the mission of this organization.
- Finally, providing a listing of [career opportunities](#) for doctorally prepared nursing colleagues is another service being developed

As you can see, we have been busy and are pleased to roll out these services.

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., ADPN**, and **JADPN**

Advertise, Sponsor, and Endorse

Demonstrate your support for nursing, and share information about yourself and your organization.

As Doctors of Nursing Practice, Inc. continues to expand, and the Academy of Doctorally Prepared Nurses and its associated Journal of the Academy of Doctorally Prepared Nurses grow to meet the need of improving healthcare outcomes, the opportunities to advertise your company or provide support also expand.

Multiple opportunities are available to advertise, sponsors and endorse. Check out the options listed below!

Website

OUTCOMES

Webinars

Offerings

PICOTalks

Career Listings

Foundation

Online Journal

These opportunities provide a venue to share information about your health care organization and/or academic center. Expose your service to a wide range of nurses including those interested in doctoral education and the outcomes produced by doctorally prepared nurses.

Doctors of Nursing Practice, Inc.
Academy of Doctorally Prepared Nurses
Journal of the Academy of Doctorally Prepared Nurses

Support these initiatives to support you.

DNP, Inc./ADPN Monthly Survey Results

Thank you to responded to the December 2025 survey explored perceptions after the decision by the Department of Education to take away the title of a profession from the discipline of nursing. A small number of respondents share their point of view. Do the responses below reflect your thoughts, experiences, and point of view?

Question 1: After the recent announcement that the Department of Education wants to remove nursing from a list of professions, please share your thoughts in this month's survey. I am concerned about current nursing practice if this decision goes through and removes nursing as a profession.

75% very much to absolutely, **25%** somewhat to not at all

Question 2: Nursing education will be impacted by the removal of nursing as a profession, but it is not likely to impact what our discipline is currently doing. It doesn't matter in the short term.

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

Question 3: Future nursing education will be stunted as a result of the DOE's decision to remove nursing from a list of professions.

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

Question 4: I anticipate that fewer students will enroll in nursing programs as a result of this DOE announcement.

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

Question 5: Our nursing discipline—and profession—will move forward and continue our collective effort regardless of a decision by the DOE.

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

**Click HERE to participate in
THIS month's survey.**

Important Articles and Links

We proudly list multiple articles written by both DNP, PhD, and EdD prepared colleagues. They are displayed on the Academy of Doctorally Prepared Nurses website.

Click into [THIS LINK](#) to see articles that enhance doctorally prepared nursing practice.

These articles were shared by the authors, or are public domain. If you have an article or see an opportunity to share a link of valuable information, please make it happen.

Share and enhance our professional growth and development.

Do you have articles of interest to share with your nursing and doctoral prepared colleagues? Submit them to: info@DNPInc.org

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.

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.

[**A Multidisciplinary Perspective On Educating Students And Entry-Level Staff In Clinical Settings**](#) by Tamara Ann Mette, DNP, MSN, RN from Touro University Nevada

[**Communication Of Critical Patient Data In A Rural Primary Care Setting**](#) by Whitney C. Mick, DNP, FNP, RN from Colorado Mesa University

- Are you ready to have your work displayed?
- All posted projects are included in FaceBook, LinkedIn, X, and Instagram posts at least three times over three years. That's great exposure for free!
- Isn't 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.

Conference Archives

[**The First National DNP Conference took place in 2008 in Memphis**](#)

[**2009 Conference was in Miami**](#)

[**San Diego hosted the 2010 Conference**](#)

[**2011 Conference was celebrated in New Orleans**](#)

[**St. Louis hosted the 2012 Conference event**](#)

[**2013 Conference took place in Phoenix**](#)

[**Nashville was the gracious host for the 2014 Conference**](#)

[**2015 Conference took place in Seattle**](#)

[**Baltimore was the great location for the 2016 Conference**](#)

[**2017 Conference was again celebrated in New Orleans**](#)

[**Palm Springs provided a warm welcome for the 2018 Conference**](#)

[**2019 we jumped to Washington DC**](#)

2020 was the Covid Pandemic Shutdown - No Conference

[**Chicago hosted the 2021 Conference**](#)

[**2022 Conference was in Tampa**](#)

[**We had a virtual conference in 2023**](#)

[**2024 Conference and ADPN inaugural summit to place in Key West**](#)

[**Key West again hosted a conference in 2025**](#)

If interested in future face-face conferences, [CLICK HERE](#)

PICOTalks - something new to help us all

PICOTalks

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

***Three more presenters are scheduled to be recorded in October.
Are YOU interested in being a PICOTalk Presenter?***

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.

Our profession and your colleagues thank you!

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](#)

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](#)

Join the Dissemination Team Today!

Sign Up Today! [Click HERE to learn more!](#)

bingli

The **first** AI-powered digital patient **intake** solution integrated with **Schmitt-Thompson** protocols.

bingli ensures patients get the right care the first time.

30%
Faster triage

99%
Accuracy
in recommending
Schmitt-Thompson
Clinical Content
Protocols*

100%
AI-Generated
SOAP Notes



Learn More

bingli.us

DISCLAIMER: The Bingli nurse triage platform was developed and is marketed and intended for use exclusively within the United States of America. Claims made about this solution's performance, benefits, or intended use are not valid or applicable outside the United States and specifically do not imply compliance with EU MDR or any other international medical device regulations. *Based on automated internal testing.

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](#)

- [Is nursing a professional degree?](#)
- [Dual Certified DNPs](#)
- [DNPs of Color](#)
- [DNP/APRN Veterans Health Care](#)
- [DNPs Seeking Positions in Academia](#)
- [DNPs in Diversity, Equity, and Inclusion \(DEI\)](#)

BLOGS

- [Pick Two: The Challenge of Speed, Cost, or Quality](#)
- [60 nursing programs opening, expanding, ending in 2025](#)
- [Choosing a DNP Program: Ideas to Consider](#)
- [The Impact of Whiteness on the Education of Nurses](#)
- [A symptom of a deeper structural disease?](#)
- [Conference Decision Humor](#)

EVENTS

- [2026 Doctoral Education Conference: AACN, Bonita Springs, FL, January 14-16](#)
- [National Association of Clinical Nurse Specialists 2026 National Conference, San Diego, CA, March 9-12.](#)
- [Royal College of Nursing Educational Conference 2026, Exeter, UK, April 15-15](#)
- [Canadian Forensic Nursing Symposium 2026, Saskatoon, CA, May 27-28](#)

Is your organization planning an event? Know of a conference of interest to others? Please share!

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

In past articles for Caregiver Corner, I have discussed the incidence of dementia and the stress it places on Informal Caregivers. A recent book release reminded me of the importance of education related to the specific type of dementia each Informal Caregiver is challenged to address. One of the complaints of the new book's author was the failure of his providers to explain what was going on with her husband and what to expect.

It is difficult to explain a process when there is so much uncertainty regarding what is happening. The end results are similar, but the journey there is different for those with one of the five different types of dementia.

Alzheimer's Disease (AD) is the most common form of dementia. There are 7.2million Americans afflicted with this disease. It typically begins when an individual is in their mid-60's and presents with memory loss. Scanning of the brain yields evidence of abnormal plaque build-up. It is a long process where eventually the individual forgets how to do the most basic things, like feeding themselves. **The average life expectancy after diagnosis of Alzheimer's Dementia is eight to ten years.**



Lewy Bodies Dementia (DLB) includes Parkinson's Disease Dementia (PDD). Both are characterized by a build-up of Lewy Bodies in the brain. DLB and PDD generally start with movement difficulties. This is eventually followed by interruptions in the thinking process. Mood swings and behavioral changes are common in this type of dementia. **The average life expectancy after diagnosis of Lewy Bodies Dementia is six years.**

Vascular Dementia accounts for 10% of all dementias. It is currently the only form of dementia that can be prevented. Vascular Dementia results from frequent strokes, due to cardiovascular disease, high cholesterol, diabetes and high blood pressure. Symptoms vary, depending on which portion of the brain is affected.

Frontotemporal Dementia (FTD) presents differently, depending on which portion of the frontotemporal lobe is affected. Signs of this type of dementia usually present when an individual is between 45 and 64 years old. If the frontal lobe is impacted, there are major changes in the individual's social conduct. Those affected behave in ways that violate common social norms. Their behaviors frequently cause shock and embarrassment for family and friends. A person with this type of dementia needs to be closely observed to protect themselves and others. If the temporal lobe is affected, the main impact is on speech. The person slowly loses their ability to understand and speak the language they have known all their lives. **The average life expectancy after diagnosis of FTD is six to eight years.**

Mixed Dementia is diagnosed when the individual exhibits behavior that crosses over any of the above categories. It is unclear how many dementia cases are from varied causes. This type of dementia may be more common in older adults than is currently recognized.

Informal Caregivers respond differently to the challenges associated with any type of dementia. For most, these challenges occur daily over many years.

Stibich, M. (Oct. 8, 2025). Dementia Life Expectancy for Older Adults. <https://verywellhealthdementiaguide.com>.



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

Handling Patient Violence and Staff Shortages

DNP Nurse Leadership in Handling Patient Violence and Staff Shortages in Inpatient Psychiatric Care

Susannamma Lijan, MSN, PMHNP-BC, DNP Student Eastern Kentucky University

In health care settings, workplace violence has become an important concern that cannot be left unforeseen, especially within inpatient psychiatric units. Patient aggression towards staff and staffing shortages are some of the issues in these units (Doucette, 2022). Patient violence towards staff can lead to burnout, decreased job satisfaction, and high staff turnover. Insufficient staffing makes it harder to prevent or respond effectively to these incidents (Staggs & Brown, 2022). According to Press Ganey's National Database of Nursing Quality Indicators (NDNQI), a prominent leader in patient, member, employee, and consumer experience across the healthcare system, more than two nursing staff members were assaulted every hour in Q2 2022 (Doucette, 2022). NDNQI survey also indicated that the highest number of assaults occurred in psychiatric units and emergency departments, with the largest percentage of moderate to severe injuries resulting from assaults in psychiatric units and rehabilitation centers (Doucette, 2022). Patient violence in psychiatric settings is a well-recognized concern among nursing professionals, with estimates suggesting that 50–70% of psychiatric nurses face workplace violence each year (Staggs & Brown, 2022). Exposure to aggression increases stress, reduces job satisfaction, and leads to workforce attrition. Understaffed units increase workload stress, delay interventions, and heighten the risk of violent incidents (Kelly et al., 2021).

Evidence-Based Strategies for Patient Violence and Staff Shortages

Evidence-based policies to mitigate violence include standardized risk assessment tools such as the Dynamic Appraisal of Situational Aggression (DASA) and the Broset Violence Checklist (BVC). These tools can be used to evaluate patients who may be violent within units over a 24-hour period. DASA is a 7-item instrument that was studied in a 25-bed inpatient psychiatric unit, and it showed reduced violence with increased utilization of the violence assessment scale (Amunrud & Bjorklund, 2022). Likewise, BVC is a 6-item tool that was studied in psychiatric hospitals across 23 countries. Evidence indicates that the routine use of assessment tools can help reduce incidents of aggression and demonstrate high validity across settings and cultures (Hvidhjelm et al., 2023). Additional strategies that can be combined with these tools include trauma-informed care and staff de-escalation training. Staff shortages in psychiatric settings substantially affect both safety and care quality. Being short-staffed in units increases workloads, stress, and burnout, which in turn increases the risk of workplace violence and reduces staff satisfaction. When units are short-staffed, it becomes more challenging to prevent or respond effectively to violent behavior, leading to higher rates of staff injuries, absenteeism, and turnover (Edward et al., 2019).

DNP Nurse Leader Impact

DNP-prepared nurse leaders are trained to address these challenges, and they can work to enhance patient and staff outcomes by implementing systematic and supportive strategies. This issue closely aligns with the American Association of Colleges of Nursing (AACN, 2021) *The Essentials: Core Competencies for Professional Nursing Education* (Domain 2: Person-Centered Care and Domain 8: Advanced Nursing Practice), which focus on creating safe, equitable environments and strengthening the nursing workforce via evidence-based leadership. DNP nurses can develop supportive environments by valuing and hearing staff, which is associated with reduced staff turnover and increased job satisfaction (Zhang et al., 2021). A DNP-led initiative at an acute psychiatric hospital introduced the BVC scale and trained staff to use it. The study showed progress in identifying patient aggression and staff using their skills to de-escalate patients, hence reducing staff injuries and patient violence. (Dickson, 2021). Additional initiatives such as wellness programs, peer support, staff education, and post-incident debriefings can further promote team safety and resilience (Edward et al., 2019).

Conclusion

Workplace violence and staff shortages in inpatient psychiatric care are interconnected issues that show risks to patient safety and staff stability. Using structured violence risk assessment tools like DASA and BVC, combined with trauma-informed care and de-escalation training, provides a solid base for decreasing aggressive incidents. DNP-prepared nurse leaders are particularly well-equipped to drive these system-level changes through data-driven analysis, evidence-based policy creation, and team collaboration. Using data and evidence, DNP leaders help establish care environments that are safe, therapeutic, and sustainable. Their leadership ensures that both patients and staff benefit from a supportive and effective care setting.

Handling Patient Violence and Staff Shortages (continued)

References

American Association of Colleges of Nursing. (2021). *The essentials: Core competencies for professional nursing education*. AACN.

Amunrud, A., & Bjorklund, P. (2022). Implementation of the dynamic appraisal of situational aggression in inpatient mental health. *Perspectives in psychiatric care*, 53(3), 1153–1159. <https://doi.org/10.1111/ppc.12915>

Dickson, S. (2021). *Staff education program assessment of violence in an acute psychiatric hospital*. Scholar Works. Retrieved from <https://scholarworks.waldenu.edu/dissertations/10114/>

Doucette, J. (2022). *On Average, two nurses are assaulted every hour, a new Press Ganey analysis finds*. Retrieved from <https://www.pressganey.com/news/on-average-two-nurses-are-assaulted-every-hour-new-press-ganey-analysis-finds/>

Edward, K. L., Hercelinskyj, G., Warelow, P., & Munro, I. (2019). Resilience in mental health nurses and its relationship with workplace stressors: A literature review. *International Journal of Mental Health Nursing*, 28(1), 26–36. <https://doi.org/10.1111/inm.12536>

Hvidhjelm, J., Berring, L. L., Whittington, R., Woods, P., Bak, J., & Almvik, R. (2023). Short-term risk assessment in the long term: A scoping review and meta-analysis of the Brøset Violence Checklist. *Journal of psychiatric and mental health nursing*, 30(4), 637–648. <https://doi.org/10.1111/jpm.12905>

Kelly, E. L., Subica, A. M., Fulginiti, A., Brekke, J. S., & Novaco, R. W. (2021). A cross-sectional survey of factors related to inpatient assault of staff in a forensic psychiatric hospital. *Journal of Advanced Nursing*, 77(4), 1879–1889. <https://doi.org/10.1111/jan.14759>

Staggs, V. S., & Brown, K. C. (2022). Psychiatric nurse exposure to workplace violence and its effects: A systematic review. *Journal of Psychiatric and Mental Health Nursing*, 29(1), 27–38. <https://doi.org/10.1111/jpm.12755>

Zhang, Y., Wu, J., Fang, Z., Zhang, Y., & Wong, F. K. Y. (2021). Newly graduated nurses' intention to leave in their first year of practice in China: A structural equation model. *Journal of Nursing Management*, 29(5), 1212–1224. <https://doi.org/10.1111/jonm.13256>

Doctorally Prepared Nursing Humor

- I have a Doctorate of Nursing Practice degree, so yes, I can tell you exactly why your blood pressure is high, but also, I can find a better vein than most physicians.
- Being a DNP prepared nurse is great. It means I can make evidence-based decision, but also, I'm the first one to grab a new pair of gloves when things get messy.
- My doctorate degree taught me systematic approaches. My nursing experience taught me that sometimes you just need chocolate and a good laugh.
- I'm a doctorally prepared nurse. My superpower? Making sense of chaos with a smile and well-cited article.
- My doctorate degree means I can analyze complex data, but don't worry, I still remember how to insert a foley catheter.

Posting Your Doctoral Project in a Repository

This year make a commitment to post your scholarly project, regardless of how long ago you completed it. Also make a promise to yourself to ask colleagues, faculty, and graduates to post their completed scholarly practice work. Which type of repository is right for you? Are you interested in publishing your work, or have you already submitted a manuscript based on your final doctoral project ?

Consider these peculiarities of repositories:

1. If you publish in your school's repository, only you, faculty, and possibly future students will see it. Does it contribute to the science of nursing and influence sustainable healthcare outcomes? Probably not. So go ahead and place your work in your school's archives, but your efforts should not stop there.
2. Let's say you post your work in a professional organization like Sigma Theta Tau International. Is this valuable? Absolutely it is, but it is not accessible by those that do not know how to maneuver that system. STTI is a great organization, but does your work collect the attention and potential to mold the future of healthcare by this repository alone? Again, probably not, but it is worth uploading to store your work in a worthwhile organization.
3. Should you place your work in a scholarly search engine such as Ovid? Again, it's a good idea, but who will see it other than those that have access to an academic library's search engine to see the databases of work such as what is provided by this database? Will the end consumer see this posting? I believe you can see where we are going with this. It's a good option but does not meet the expectation of dissemination and influencing healthcare outcomes which is the foundation of a doctoral study.
4. Here's another option: [**The Doctoral Project Repository**](#) will make your work available for colleagues, faculty, students that follow you, scholars, and those that can make the most of your expertise and wisdom to improve healthcare outcomes and make a difference in someone's life. This repository is a curated collection of documents that can be found by anyone with an internet connection. The holding has a unique URL that you can share with colleagues, organization, and interested groups that would benefit from your efforts.

With these options, which one is best for you?

A repository that few will find.....

or one that is easily accessible by everyone, colleagues and consumers alike.

Each listing helps to educate patients, employers, organizations, and other stakeholders about the capabilities and competencies of doctorally prepared nursing colleagues.

Consider posting your scholarly project, encourage colleagues, and alert faculty that this is a straight-forward way to assure that your work and your college are recognized for this great collaboration.

Click HERE to begin your scholarly project submission

Click HERE to View Available Repository Projects



Welcome to this edition of OUTCOMES as we include an update about the [**Academy of Doctorally Prepared Nurses**](#). Efforts regarding this entities' development have evolved from an idea that began to materialize in 2024 to a platform that can accommodate growth and development of collaborating nursing colleagues.

The website is now in place including foundational information about processes and aspirations for this group. It has now been developed to accommodate multiple interactions specific to articulated goals and aspirations from doctorally prepared colleagues.

The purpose of this organization is to provide a venue and vehicle for doctorally prepared nurses to collaborate and demonstrate joint efforts to improve healthcare outcomes. All professionals are prone to working in isolation (researchers with researchers, practice doctorates with others in practice, educators with educators, and nursing scientists with other nursing scientists).

Collaboration is somewhat sterile and driven by what is published to determine needs, scope of problems, and best practices. What if nursing scientists worked directly with nurse educators, or nursing researchers work directly with practice-doctorate colleagues?

Imagine a listing of problems that could be addressed collectively and collaboratively.

See the [**Academy Initiatives**](#) from the recent past to provide a springboard for future efforts. Consider these next steps: Interested members meet (synchronously or asynchronously) to explore, prioritize, and identify issues of concerns regarding healthcare outcomes and the actions of nursing colleagues.

For example, what statement and guidance do we recommend regarding the Department of Education stating that Nursing is not a profession - particularly when we have been labeled a profession since 1898. What steps can we take to shore-up our efforts to continue to grow as a profession?

In essence, we have our work cut out for us, don't you think?

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 development of an online journal from scratch (so to speak) is a daunting task. Many wise and learned colleagues have offered sage advice and publishing companies have shared their goals and aspirations regarding a journal startup. After many months of exploration, we are still committed to the development of the **Journal of the Academy of Doctorally Prepared Nurses** as a vehicle to disseminate the findings of the **Academy of Doctorally Prepared Nurses**.

The journal will publish findings and proceedings of the work of the Academy along with its collaborative efforts both within and outside of the parameters of that organization.

This same journal will include articles and columns reflecting the successes and challenges of working collaboratively to make a favorable change in the healthcare delivery system to improve outcomes.

Are you appreciating the theme of the Academy and the Journal? Improving healthcare outcomes is the foundational expectation of these efforts. Other journals and organization have a similar goal, yet the efforts of the initiatives is specific to these types of outcomes.

Healthcare delivery is changing daily. Political, social, and financial influences are altering how we devise plans and implement initiatives. When there is a successful outcomes in one corner of the world, it should be disseminated and appreciated by all that have an interest. One of the goals of the **Journal of the Academy of Doctorally Prepared Nurses** is to aggregate findings, and publish a state-of-the-nursing science manuscript to provide a definitive manuscript on best practices. For those in academia, how many times have you reviewed the work of graduate nursing students regarding hospital acquired infections? We have the potential to share a summary of these efforts to help future nurses build and grow systems that are build on experience along with the available evidence.

On the **Journal of the Academy of Doctorally Prepared Nurses** website there are several items of interest. 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.

Enduring Virtual Professional Opportunities

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. **Offerings** highlights the talents and knowledge of doctorally prepared colleagues. Future plans outside of CE include options that may be ideal for you, an ardent site visitor. These options include written material that benefits potential DNP students, current students, graduates, and veteran doctorally prepared colleagues. We invite you to share your thoughts on developing these options. [SEE MORE](#).
2. **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!](#)
3. **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.
4. **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.
5. **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?
6. **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).
7. **Volunteering** is an effort to solicit and secure dedicated volunteers for any and all aspects of the processes in place to enhance and support doctorally prepared nurses. Your help is needed and your expertise can be put to good use. [Check it out HERE](#).

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 Community	DNP Online Community: Blogs
DNP Online Community: Forums	DNP Online Community: Groups	Join the Mailing List
OUTCOMES Newsletter Archives	OUTCOMES Article Submission	Advertising Opportunities
Career Opportunity Advertising	The Academy of Doctorally Prepared Nurses	The Journal of the Academy of Doctorally Prepared