

Doctorate of Nursing Practice (DNP)

AWHONN supports the concept of the establishment of educational programs for a practice doctorate in nursing for those that wish to obtain this degree. It is recognized that many of the master's level nursing programs have expanded their curricula beyond that typically seen in traditional master's programs. In addition, this degree would allow an opportunity for nurses in clinical practice to select an additional degree option that has philosophical and scientific content that will enrich their clinical practice.

While AWHONN supports the establishment of this education opportunity, we do not support the mandate for adoption of the DNP for "entry-into-practice" in 2015 for advanced practice registered nurses (APRNs) and nurse administrators. Many APRNs, nurse practitioners, certified nurse-midwives, certified registered nurse anesthetists and clinical nurse specialists are currently functioning in advanced nursing clinical roles, and provide safe, cost-effective care. In addition, numerous nurse administrators are expertly managing significant service lines of large hospital systems. A change of this magnitude must be based on substantial empirical evidence demonstrating the benefits to society of the exclusive use of this degree for nursing practice at the advanced level.

Before we would consider endorsing the universal adoption of the doctorate of nursing practice as an "entry-into-practice" degree for advanced practice nurses, a number of concerns must be addressed. Some of these concerns arise from the potential adverse effects the universal implementation of this entry-into-practice degree could have on the provision of health care services to the nation.

- Substantial evidence demonstrating that the clinical practice of a DNP prepared APRN is superior to that of a Master's prepared APRN in all practice settings.
- Evidence that there is or will be a reasonable market demand for this provider.
- Evidence that the costs to society to implement this degree will not detract from the initiatives needed to ensure an adequate nursing supply in light of the current nursing shortage.
- A real forecast of the public and private costs to the health care system for the migration of all APRNs to DNP level practitioners.
- The possibility that limited federal funds currently allotted for basic nursing education would be re-directed to the support of the DNP and the affect that would have on availability of programs for entry level nursing preparation.
- In an existing faculty shortage, the procurement of sufficient faculty to educate the increased number of doctoral and basic students given the proposed DNP.

Approved by the AWHONN Board of Directors, 2006.