



**White Paper:**  
**The Doctor of Nursing Practice Nurse Practitioner Clinical Scholar**  
**2016**

**Executive Summary**

Nurse practitioners (NP) who earn the Doctor of Nursing Practice (DNP) degree are grounded in evidence-based practice, population health and exemplify leadership and are prepared to influence the areas of practice and policy. Increasing the number of doctorally-prepared NPs who are clinical scholars is essential in an ever transforming health care system (American Association of Colleges of Nursing [AACN], 2004; Melynyk, 2013; NONPF, 2015). This white paper posits that developing NP students to become clinical scholars is central to DNP education. The purpose of this white paper is to describe the DNP prepared NP clinical scholar and provide recommendations for nurse educators about strategies to promote the development of the DNP prepared NP.

The National Organization of Nurse Practitioner Faculties (NONPF), through its membership, supports changes to NP education, which are designed to meet societal obligations addressing health care transformation. NONPF feels that it is imperative that all DNP programs for NPs

- function in an academic culture and organizational structure that supports clinical scholarship;
- have progressive evidence of the introduction, reinforcement, and mastery of clinical scholarship across the curriculum; and
- have criteria to effectively measure the quality of clinical scholarship being produced.

**Introduction**

The DNP is recognized as one of three terminal degrees within the nursing discipline. The DNP degree is designated for individuals seeking preparation at the highest level of nursing practice and is the recommended entry level for NP practice (AACN, 2015; NONPF, 2008a and 2015). Critical to the DNP degree is the development of the doctorally-prepared clinical scholar.

Being a clinical scholar requires intellectual curiosity, involvement in clinical practice, engagement in inductive reasoning, collaboration with other inter-professional scholars, and a commitment to life-long learning. The clinical scholar uses evidence-based practice skills to translate current best evidence to improve healthcare and healthcare outcomes, thereby transforming systems of care.

Healthcare in America must transition from episodic, complex, fragmented care to coordinated, comprehensive population-focused health care. Increasing the number of DNP prepared NP scholars who have the ability to translate evidence-based practice knowledge and apply skills to enhance population health is essential in such a transformation (AACN, 2004; Melynyk, 2013;

NONPF, 2015). This white paper posits that developing NP students as clinical scholars is central to the DNP education of NPs. The purpose of this white paper is to describe the DNP prepared NP clinical scholar and provide recommendations for nurse educators about strategies to promote the development of the DNP prepared NP.

### **Problem**

NP education has traditionally been clinician centric. With transition to doctoral preparation, it is imperative that NP educators recognize the context of required changes needed in transforming the healthcare system. This must be accompanied by a deliberate focus on the development and evolution of the clinical scholar within program curricula. The goal of DNP programs for NPs is to prepare competent NP clinical scholars and leaders (AACN, 2006). However, this goal cannot be met until the DNP prepared NP clinical scholar is clearly described.

Central to the ideology of developing DNP prepared NP clinical scholars is the required commonality across DNP programs to include requisite knowledge and skills required of DNP prepared NP clinical scholars while maintaining the rigor of clinical scholarship in program curricula. Such a unified focus among DNP programs for NPs has the potential to positively alter the ever-evolving curricular blueprint of DNP education for NPs.

### **Background**

Scholarship is the process of knowledge development and application within a discipline (AACN, 2015). The 2015 report *The Doctor of Nursing Practice: Current Issues and Clarifying Recommendations* affirmed, “graduates of both research and practice-focused doctoral programs are prepared to generate new disciplinary knowledge” (AACN, p.2). With fewer than 1% of nurses currently doctorally-prepared, the increase in DNP-prepared practitioners presents a powerful opportunity to cultivate a new cohorts of practitioners to contribute to the disciplinary knowledge (Reed, 2008).

#### **Nature of nursing knowledge**

Leading scholars have described the pluralistic nature of nursing knowledge (Benner, 1982; Carper 1978; Chinn & Kramer, 2008). A convergence of these bodies of work firmly established the importance of empirical and experiential knowledge in professional nursing practice. In addition, several scholars have identified practice-based evidence that was developed in contextually relevant settings as rich sources of practice knowledge (Chinn & Kramer, 2008; Reed & Lawrence, 2008; Velasquez, McArthur, & Johnson, 2011).

Rolfe and Davies (2009), drawing on the previous work of Gibbons et al. (1994) identified key characteristics of practice-doctorate knowledge production that emphasized context, proximity of production and application, inclusion of all stakeholders, and achievement of practical aims. Most recently, AACN (2015) described knowledge contribution by the DNP-prepared practitioner in terms of practice innovation and improved health outcomes. As evidence-based practice has emerged as a cornerstone of clinical scholarship in recent decades, several scholars have raised potential concern over an exclusive reliance on empirical knowledge that fails to consider other patterns of knowing, alternate forms of evidence, and the context of care delivery - important elements of nursing knowledge (Fawcett, Watson, Neuman, Hinton Walker, & Fitzpatrick, 2001; Jutel, 2008; Morse, 2002; Nolan & Bradley, 2008; Rolfe, 2011; Rycroft-Malone, 2008). Moreover, in an environment of sweeping healthcare change, some nurse scholars have pressed for a more explicit articulation of what nurses know and how nursing

knowledge directly benefits individuals and populations as well as how new knowledge shapes healthcare reform (Litchfield & Jonsdottir, 2013).

### **Centrality of theory in clinical scholarship**

The centrality of theory to nursing practice and clinical scholarship has been firmly established amidst a persistent and pernicious paradigm that has separated the generation and application of nursing knowledge (Reel, 2011; Rolfe & Davies, 2009). Reed (2006), recognizing the potential in developing the practice doctorate in nursing, urged a reinvigorated effort to accept practice-based knowledge, not as a competing paradigm but rather one with parity to research. Reed's practice-theorizing model of knowledge production incorporated the context of care as well as multiple sources of nursing knowledge in order to enhance patient care. Similarly, Rolfe (2006) called for a narrowing of the theory-practice gap through the integration of research within practice and the development of inquiry methodologies that reflect the unique interactions between practitioners and individuals.

### **Centrality of practice and professional formation in clinical scholarship**

Early work on the concept of clinical scholarship emphasized that the study of inquiry methods alone did not create the clinical scholar (Diers, 1995; Dreher, 1999; Palmer, 1986; Schlotfeldt, 1992). According to Palmer (1986), the key attributes of clinical scholarship is rooted in extensive experiences in clinical practice: skilled observation, extensive knowledge, critical thinking, thoughtful analysis, creative synthesis, and written communication. For Palmer (1986), clinical scholarship was defined as the "knowledge derived from the analysis and synthesis of observations of clients and patients" (p. 318). Nearly 90 years ago, Grey (1927) argued that practice scholarship required the development of latent capacities and powers, including the power of self-direction, leading others, and the ability to assume positions of responsibility.

To develop clinical scholarship, Dreher (1999) recognized the need for nurses to defy longstanding pedagogies through risk-taking, audacity, irreverence, revolt, and humor. Importantly, this practice knowledge must always function on behalf of society's needs (Riley, Beal, Levi, & McCausland, 2002). Clinical scholarship, as summarized by Bell (2003), is valuable, complex intellectual work that requires a better understanding and deserves a greater value within nursing. The development of the clinical scholar requires high-level professional formation that includes more than intellectual expertise but also the development of habits of the heart and mind that enable nursing to best serve society (Walker, Golde, Jones, Bueschel, & Hutchings, 2009).

## **The DNP Prepared NP Clinical Scholar**

As practice leaders, the DNP prepared NP clinical scholar generates evidence through practice to guide improvements in the quality of health care, health outcomes, and health care systems (AACN, 2006; AACN, 2015). Foundational to the role of the DNP prepared NP clinical scholar is an approach to clinical practice that integrates intellectual curiosity and scholarly inquiry. DNP prepared NP clinical scholars are well equipped to effectively and efficiently use multiple sources of nursing knowledge to develop a scholarly inquiry to improve health outcomes within a clinical setting and/or population. Additionally, the DNP prepared NP clinical scholar has the skill to disseminate new findings related to clinical care that stress the impact of quality improvement efforts on health systems. DNP preparation positions the DNP prepared NP clinical scholar to translate research into practice and conduct evaluation processes to determine if significant impact occurred after the development, implementation, and evaluation of new models of care. Furthermore, the educational process equips the scholar with business

acumen and leadership skills necessary to successfully sustain newly implemented models of health care delivery within a practice setting or organizational structure.

The DNP prepared NP scholar should exhibit a culmination of skills acquired while meeting the AACN DNP Essentials (2006) during matriculation through a DNP program designed for NPs. It should be evident that the processes of development, implementation, and evaluation have been mastered so that the work of the scholar is a reflection of the respective program's ability to foster clinical scholarship through the introduction and reinforcement of concepts and skills addressed throughout curriculum. The expectation of the practice doctorate is not isolated to simply translate academic research findings and evidence into practice, but to essentially be leaders and contributors in the field of advanced nursing practice and policy.

### **Summary**

Clinical scholarship falls under the overall rubric of nursing scholarship and includes all of the principles of scholarship despite its unique characteristics derived from clinical practice. Clinical scholarship is not limited to scholarship of "application" but rather embodies a dynamic synergy among discovery, application, and integration (Boyer, 1990). An underlying assumption is that, as the terminal degree for NPs, the primary goal of DNP education is preparation as an independent clinician who provides care within a population focus. The DNP adds the dimension of scholarship that can take on many forms, consistent with the description and definitions of clinical scholarship that are presented in this paper.

Through a variety of innovations and recognizing new forms of scholarship, the novice clinical scholar will be positioned as a life-long learner with the potential to transform practice as the healthcare landscape continues to evolve.

### **Recommendations**

Clinical scholarship must be a central element in the DNP preparation of NPs. It is imperative that all DNP programs for NPs thread the concepts of clinical scholarship throughout the entire curriculum. Graduates who earn the DNP degree must be able to articulate and demonstrate the various attributes of being a clinical scholar.

The development of the DNP prepared NP clinical scholar will be determined by several influential factors: academic culture and organizational structure; nature of scholarly community; expert faculty who serve as mentors; and curricula that support clinical scholarship development. NONPF proposes the following as imperative of all DNP programs for NPs:

#### **1. Function in an academic culture and organizational structure that supports clinical scholarship.**

The academic culture and organizational structure, by way of its mission and values, must embrace and support the value of clinical practice and scholarship. The academic culture and organizational structure should support and/or facilitate faculty members' maintenance of an active faculty practice, consistent with their clinical background which in turn, serves as role modeling opportunities for DNP NP students. The organization should promote faculty members as exemplars of clinical scholarship. Additionally, the organizational structure should maintain strong affiliations with clinical agencies and partners in order to have robust experiential learning opportunities for DNP NP students.

**2. Have progressive evidence of the introduction, reinforcement, and mastery of clinical scholarship across the curriculum.**

The NONPF Nurse Practitioner Core Competencies Content and the AACN DNP Essentials documents inform curriculum development and implementation (AACN, 2006; NONPF, 2014). The direct alignment between nationally recognized guidelines and the curriculum reinforces the synergistic relationship between didactic learning and experiential learning. Such alignment contributes to and promotes iterative growth in students' scholarship. DNP programs for NPs containing evaluative processes at each stage of the clinical scholar development process can yield data regarding the progress of the DNP prepared NP clinical scholar in solving practice problems and/or informing practice through the direct care of individuals and/or populations. Clinical scholarship is derived from practice, has the potential to advance practice, is the result of a thoughtful and systematic approach to the problem, and includes a mechanism to share the process with peers.

**3. Have criteria to effectively measure the quality of clinical scholarship being produced.**

The academic culture and organizational structure must identify indicators or criteria to measure the quality of clinical scholarship in DNP programs for NPs. Outcome indicators, in alignment with standards set forth by AACN and professional nursing accreditation agencies, should broadly measure student development as a clinical scholar. Indicators should also measure and/or account for faculty mentoring/advisement, program resources, and the overall effectiveness of the DNP program for NPs to produce clinical scholars. Outcome indicators of clinical scholarship can take on many forms, dependent upon the strengths of the school, its faculty and resources. Though there are no prescriptive methods for an evaluation process in which outcome indicators would be used, it is necessary that such indicators effectively, efficiently, and objectively measure areas such as data analysis and interpretation; practice innovation; knowledge translation and dissemination; and integration of knowledge. Information and measurements should be collected and analyzed at a determined frequency to provide information to nursing leadership regarding trends of clinical scholarship among and between cohorts. The use of indicators or criteria within could also provide useful information about the strengths, weaknesses, opportunities, and threats within a program. Such measurements would prove beneficial to faculty and nurse leadership as programs continue to adjust curricula to develop clinical scholars who can successfully and effectively meet the needs of a dynamic health care system.

**Contributors:**

*\*indicates paper lead*

**\*Courtney Young-Pitts**, DNP, MPH, FNP-BC, Vanderbilt University  
**Rod Hicks**, PhD, RN, FNP-BC FAANP, FAAN, Western University  
**Rene Love**, PhD, DNP, PMHNP-BC, FNAP, FAANP, University of Arizona  
**Gene Harkless**, DNSc, APRN, FAANP, CNL, University of New Hampshire  
**Judy Honig**, EdD, DNP, CPNP, PMHS, Columbia University  
**Karen Desjardins**, DNP, MPH, ANP, GNP, DCC, Columbia University  
**Melanie Hardin-Pierce**, DNP, RN, APRN, ACNP-BC, University of Kentucky  
**Denise Linton**, DNS, FNP-BC, University of Louisiana at Lafayette  
**Monica Jones**, DNP, FNP-BC, Delta State University  
**Marcia Murphy**, DNP, ANP, FAHA, FPCNA, Rush University  
**Lydia Rotondo**, DNP, RN, CNS, University of Rochester  
**Tracy Robertson-Bell**, DNP, NNP-BC, East Carolina State University  
**Lisa Bursch**, DNP, APRN, CPNP; California Baptist University  
**Stephanie Nikbakht**, DNP, PPCNP-BC, The University of Tennessee Health Science  
**Carolyn Sutter**, DNP, RN, CNP, University of Akron  
**Joyce Knestrick**, PhD, CFNP, FAANP; Georgetown University School of Nursing and Health Science  
**Mary Ellen Roberts**, DNP, RN, APN, C FNAP, FAANP, FAAN, Seton Hall University  
**Johnnie Wijewardane**, PhD, APRN, FNP-BC, FAANP, Mississippi University for Women  
**Sue Anderson**, PhD, RN, FNP-BC, Vera Z. Dwyer College of Health Sciences  
**Kris Scordo**, PhD RN, ACNP-BC, FAANP, Wright State University  
**Louise Fura**, DNP, RN, CRNP, Alvernia University  
**Diane Witt**, PhD, APRN, CNP, Minnesota State University  
**Tracie Kirkland**, DNP, RN, ANP-BC, CPNP, Texas Woman's University  
**Michelle Zappas**, DNP, FNP-BC, University of Southern California  
**Daisy Sherry**, PhD, CNP, Lewis University  
**Mary Johnson**, PhD, RN, PMHCNS-BC, FAAN, Rush University  
**Julee Waldrop**, DNP, PNP, FAANP, The University of North Carolina at Chapel Hill  
**Geraldine Budd**, PhD, CRNP, FNP-BC, FAANP, Widener University  
**Gail Lis**, DNP, ACNP-BC, Madonna University  
**Andrea Wolf**, DNP, FNP-BC, ANP-BC, PMHCNS-BC, University of Delaware  
**Susan Chase**, EdD, RN, FNP-BC, University of Central Florida  
**Joan King**, PhD, ACNP-BC, ANP-BC, FAANP, Vanderbilt University  
**Darylann Ficken**, DNP-DCC, ACNP-BC, ANP-BC, Columbia University  
**Jamesetta Newland**, PhD, FNP-BC, FAANP, DPNAP, NYU Rory Meyers College of Nursing

## References

- American Association of Colleges of Nursing (AACN). (2006). eRetrieved from <http://www.aacn.nche.edu/publications/position/DNPEssentials.pdf>
- American Association of Colleges of Nursing (AACN). (2004). *AACN position statement on the practice doctorate in nursing*. Retrieved from <http://www.aacn.nche.edu/dnp/dnp-position-statement>.
- American Association of Colleges of Nursing (AACN). (2015). *The Doctor of Nursing Practice: Current issues and clarifying recommendations*. Report from the Task Force on the Implementation of the DNP, Washington, DC. Retrieved from <http://www.aacn.nche.edu/aacn-publications/white-papers/DNP-Implementation-TF-Report-8-15.pdf>
- Bell, J. M. (2003). Clinical scholarship in family nursing. *Journal of Family Nursing*, 9(2), 127-129.
- Benner (1982). From novice to expert. *American Journal of Nursing*, 82(3), 402-407.
- Boyer, E.L. (1990). Scholarship reconsidered. Priorities of the professoriate. A Special Report. The Carnegie Foundation for the Advancement of Teaching. Retrieved from <http://www.umces.edu/sites/default/files/al/pdfs/BoyerScholarshipReconsidered.pdf>.
- Carper, B. (1978). Fundamental patterns of knowing in nursing. *Advances in Nursing Science*, 1(1), 13-23.
- Chinn P.L. & Kramer, M.K. (2008). *Integrated theory and knowledge development in nursing* (7th ed.). St. Louis, MO: Mosby.
- Diers, D. (1995). Clinical scholarship. *Journal of Professional Nursing*, 11(1), 24-30.
- Dreher, M. (1999). *Clinical scholarship: Nursing practice as an intellectual endeavor*. Clinical scholarship white paper, Indianapolis: Sigma Theta Tau International, 29.
- Fawcett, J., Watson, J., Neuman, B., Hinton Walker, & Fitzpatrick, J.J. (2001). On nursing theories and evidence. *Journal of Nursing Scholarship*, 33(2), 115-119.
- Gibbons, M., Limoges, C., Nowotny, H., Schwartzman, S., Scott, P., & Trow, M. (1994) *The new production of knowledge: The dynamics of science and research in contemporary societies*. London, England: Sage Publishers.
- Grey, G.G. (1927). Stimulating scholarship. *American Journal of Nursing*, 27, 1051–1056.
- Jutel, A. (2008). Beyond evidence-based nursing: Tools for practice. *Journal of Nursing Management*, 16, 417-421.
- Litchfield, M.C., & Jonsdottir, H. (2013). A practice discipline that's here and now. In W.K. Cody (Ed.), *Philosophical and theoretical perspectives for advanced nursing practice* (pp. 51-71). Burlington, MA: Jones & Bartlett Learning.

- Melnyk, B.M. (2013). Distinguishing the preparation and roles of Doctor of Philosophy and Doctor of Nursing Practice graduates: national implications for academic curricula and health care systems. *The Journal of Nursing Education*, 52(8), 442-448.
- Morse, J.M. (2002). The politics of evidence. *Qualitative Health Research*, 16(3), 395-404.
- Nolan, P. & Bradley, E. (2008). Evidence-based practice: Implications and concerns. *Journal of Nursing Management*, 16, 388-393.
- National Organization of Nurse Practitioner Faculties. (August 2008a). Position on clinical hours for nurse practitioner preparation in doctor of nursing practice programs. In: National Organization of Nurse Practitioner Faculties. (2010). *Clinical education issues in preparing nurse practitioner students for independent practice: An ongoing series of papers*. Retrieved from: <http://c.ymcdn.com/sites/www.nonpf.org/resource/resmgr/imported/clinicaleducationissuessppfinalapril2010.pdf>
- National Organization of Nurse Practitioner Faculties. (2014). *Nurse Practitioner Core Competencies Content*. Retrieved from: <http://c.ymcdn.com/sites/nonpf.site-ym.com/resource/resmgr/Competencies/NPCoreCompsContentFinalNov20.pdf>
- National Organization of Nurse Practitioner Faculties. (2015). *The Doctorate of Nursing Practice NP preparation: NONPF perspective*. Retrieved from: <http://c.ymcdn.com/sites/www.nonpf.org/resource/resmgr/DNP/NONPFDNPStatementSept2015.pdf>
- Palmer, I. S. (1986). The emergence of clinical scholarship as a professional imperative. *Journal of Professional Nursing*, 2(5), 318-325.
- Reed, P.G. (2006). The practice turn in nursing epistemology. *Nursing Science Quarterly*, 19(1), 1-3.
- Reed, P.G. (2008). Practitioner as theorist. *Nursing Science Quarterly*, 21(4), 315-321.
- Reed, P.G. & Lawrence, L.A. (2008). A paradigm for the production of practice-based knowledge. *Journal of Nursing Management*, 16, 422-432.
- Reel, S.J. (2011). Foreword. In M.D. Dahnke & H.M. Dreher (Eds.). *Philosophy of science for nursing practice: Concepts and application* (pp. xi-xv). New York, NY: Springer Publishing Company.
- Riley, J. M., Beal, J., Levi, P., & McCausland, M. P. (2002). Revisioning nursing scholarship. *Journal of Nursing Scholarship*, 34(4), 383-389.
- Rolfe, G. (2006). Nursing praxis and the science of the unique. *Nursing Science Quarterly*, 19(1), 4-8.
- Rolfe, G. (2011). Practitioner-centered research: Nursing praxis and the science of the unique. In P.G. Reed & N.B. Crawford Shearer (Eds.), *Nursing knowledge and theory Innovation: Advancing the science of practice* (pp. 59-74). New York, NY: Springer Publishing Company.

- Rolfe, G., & Davies, R. (2009). Second generation professional doctorates in nursing. *International Journal of Nursing Studies*, 46, 1265-1273.
- Rycroft-Malone, J. (2008). Evidence-informed practice: From individual to context. *Journal of Nursing Management*, 16, 404-408.
- Schlotfeldt, R. M. (1992). Why promote clinical nursing scholarship? *Clinical Nursing Research*, 1(1), 5-8.
- Velasquez, D.M., McArthur, D.B., & Johnson, C. (2011). Doctoral nursing roles in knowledge generation. In P.G. Reed & N.B. Crawford Shearer (Eds.), *Nursing knowledge and theory innovation: Advancing the science of practice* (pp. 37-50). New York, NY: Springer Publishing Company.
- Walker, G. E., Golde, C. M., Jones, L., Bueschel, A. C., & Hutchings, P. (2009). *The formation of scholars: Rethinking doctoral education for the twenty-first century* (Vol. 11). San Francisco, CA: John Wiley & Sons.