

**BOARD OF GOVERNORS
STATE UNIVERSITY SYSTEM OF FLORIDA
NEW DOCTORAL DEGREE PROPOSAL STAFF ANALYSIS**

Program: Doctor of Nursing Practice (DNP) **CIP Code:** 51.3818
Institution: Florida Gulf Coast University **Proposed Implementation Date:** Fall 2015
Staffed By: A. Beaven **Initial Review Date:** 9/15/14 **Last Update:** 2/24/15

Projected program costs:

	Total	% & \$ Current Reallocated	% & \$ New Recurring	% & \$ New Non- Recurring	% & \$ C&G	Auxiliary Funds	Cost per FTE	SUS Average Cost per FTE
Year 1	\$326,643	100% \$326,643	0% \$0	0% \$0	0% \$0	\$0	\$37,288	\$10,816 51 CIP
Year 5	\$1,002,414	33% \$329,664	67% \$672,750	0% \$0	0% \$0	\$0	\$23,345	

Projected FTE and Headcount are:

	Student Headcount	Student FTE
First Year	16	8.76
Second Year	32	20.39
Third Year	50	29.24
Fourth Year	64	35.83
Fifth Year	78	42.94

On March 29, 2007, the Florida Board of Governors approved Board Regulation 8.011, which sets forth criteria for implementation and authorization of new doctorates by the Board of Governors, as well as criteria for implementation and authorization of Bachelor's, Master's and Specialist degrees by Boards of Trustees. The following staff analysis is an assessment of how well the university meets Board Accountability and Readiness criteria for implementation of this degree program.

Proposal Page Numbers:

INTRODUCTION		ACCOUNTABILITY		READINESS				
Program Description	BOG Goals	Overall	Budget	Mission and Strength	Program Quality	Curriculum	Faculty	Resources
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A. Program Description:

According to the proposal, the Doctor of Nursing Practice (DNP) program will prepare graduates with the advanced nursing knowledge and leadership skills to improve health care outcomes and to provide expert evidence-based nursing care across diverse health care settings and systems. The proposal also notes that this program will increase the pool of potential nursing faculty members, nursing executives, and provide graduates with multiple employment options as advanced nurse practitioners.

The FGCU DNP program will have two entry points: post-master's and post-baccalaureate, and will include both full-time and part-time plans of study to meet the needs of working nurses. In preparation for the transition to the DNP, FGCU has suspended its Primary Health Care Nurse Practitioner major within the Master's of Science in Nursing (MSN) program effective fall 2014.

The proposal notes that the MSN to DNP is designed for students who already hold a master's degree in an advanced practice specialty from a program accredited by the Commission on Collegiate Nursing Education (CCNE) or Accreditation Commission for Education in Nursing (ACEN) – the two nationally recognized accrediting bodies for nursing education. The MSN to DNP curriculum requires 39 hours of coursework, inclusive of practice hours and a capstone project. The course content will focus on utilization of research in the practice setting, quality of care delivery, examination of health care outcomes, leadership in practice, and fundamentals of nurse education.

The proposal also notes that the Bachelor's of Science in Nursing (BSN) to DNP is for students who have a bachelor's degree in nursing from a program accredited by the CCNE or ACEN. The BSN to DNP curriculum requires 84 hours of coursework, including 72 hours of coursework that aligns with the coursework noted in the paragraph above as well as 12 hours of additional coursework in the Family-Nurse Practitioner Concentration or the Adult-Gerontology Primary Care Nurse Practitioner Concentration. The BSN to DNP graduates will be newly qualified to become licensed as nurse practitioners. The MSN to DNP pathway is a post-licensure program where students enter the program as licensed nurse practitioners and gain additional competencies in the areas described above.

B. System-Level Analysis and Evaluation in accordance with BOG Regulation 8.011:

Summary of observations:

- This will be a fairly expensive program for the university to implement with a fifth year cost of approximately \$1 million, most of which is expected to be funded by enrollment growth.
- There is some indication that FGCU will face challenges meeting its projected

- enrollments in the DNP based on the experience of other SUS DNP programs.
- FGCU is restructuring its graduate nursing programs in preparation to offer the DNP.
 - The number of DNP offerings and graduates has grown rapidly since the American Association of Colleges of Nursing (AACN) released its position paper in 2004, but the master's degree remains an attractive choice to advanced practice registered nursing (APRN) students in the absence of a mandated change.
 - The need for nurse practitioners at the national, state, and regional levels is strong; however the projected long-term, statewide demand can currently be met with the supply of nurse practitioners holding master's degrees and post-master's certificates.
 - A workforce demand estimate for nurse practitioners holding a doctorate is currently not available.
 - Although FGCU is proposing the move to the Doctor of Nursing Practice to keep pace with anticipated credentialing changes for advanced practice nurses, further discussion of the enrollment trends in DNP programs are needed to better determine when and where transitions to the DNP are warranted.

National Transition to the DNP

The American Association of Colleges of Nursing (AACN), which is an association of member schools and not an accrediting body, has recommended that advanced practice nursing move from the MSN to the DNP as the minimum credential for practice by 2015. It should be noted that the accrediting body CCNE is closely affiliated with the AACN, which lists CCNE staff as a "division" of AACN staff on its website. FGCU cites this transition as a key factor to justify the implementation of the proposed program. However, in late 2014, the AACN acknowledged that implementation by universities across the nation has been slower than expected and released a report along with the RAND Corporation exploring the magnitude and reasons.

Two findings from the RAND/AACN report relate well to the primary concerns with the FGCU proposal. The authors note:

From the point of view of the nursing school leaders we spoke to, **demand for DNP educated APRNs on the part of employers is generally non-differentiated between the MSN and the DNP, albeit with a few exceptions.** Student demand for the DNP on the part of currently practicing APRNs appears robust, given the proliferation of MSN-to-DNP programs. **Student demand for the BSN-to-DNP is more variable – with some seeking the BSN-to-DNP and others seeking the MSN.** (RAND/AACN, 2014, p. x)

The position by the AACN has been presented in the FGCU proposal as a mandate to transition by 2015, but in reality, the field is still in flux. A truly mandated shift would likely come in one of three ways, none of which have been proposed for the 2015 time

frame. However, a future tipping point for the profession could come from:

1. a change in state licensing from the current master's requirement to a doctoral requirement;
2. an accreditation mandate from CCNE or ACEN requiring a doctoral level program for advanced practice nursing;
3. or a change in the education requirements from a master's to a doctorate for the credentialing of nurse practitioners in their specialty areas.

While the number of DNP offerings and graduates has grown rapidly since the AACN released its position paper in 2004, the master's degree remains an attractive choice to advanced practice registered nursing (APRN) students in the absence of a mandated change. Data from the RAND/ AACN report shows that the BSN to DNP pathway is currently offered in less than half of nursing programs nationally, and seventy percent of schools that educate APRNs currently offer only the MSN. The report also notes that for programs that have retained the MSN option even after implementing a BSN to DNP program, "the MSN programs currently enroll roughly three times as many students, on average."

Considering the on-going transition of the field, the State University System still has time to fully evaluate the market and student demand when determining whether every program that currently offers a master's program in advanced practice nursing can support a DNP program, and whether every university offering the MSN needs to also offer a DNP.

The proposed program was reviewed during the Health Initiatives Committee Workshop on January 21, 2015, as part of a discussion on the emerging demand for clinical doctorates. The Committee and its industry advisory group discussed workforce demand for nurse practitioners trained at the doctoral level and the following questions were used to guide the discussion.

- For the professional practice doctorates, is there evidence that graduates of these programs will benefit from a hiring preference, promotion potential or higher earnings?
- Are changes in the practice environment driving the transition to a higher credential? What are other drivers of credential change?
- Are the proposed programs likely to enroll students and be sustainable? If the market demand remains small, will the market become quickly saturated even in the presence of high student demand?

When considering these questions the Committee and advisory group members readily acknowledged that the nurse practitioner (also referred to as advanced practice nursing) field is transitioning to the higher degree level. However, the DNP transition was compared with the transition to the Doctorate in Physical Therapy to forewarn of

the possibility of choking supply when the occupation shifts to a higher degree level. One member observed that if there is currently not a shortage of nurse practitioners, a move to requiring the Doctorate may create one.

Arising from a similar concern for nursing instructors, the Board of Governors passed a resolution in 2006 that requires universities implementing the DNP to maintain the nurse educator concentration at the master's level. One rationale for preserving this MSN option is to continue the SUS supply of nursing graduates qualified to teach in associate degree registered nursing (RN) programs around the state. According to follow-up correspondence with FGCU, the nursing program's MSN Nurse Educator major was suspended effective fall 2014 to provide faculty with the opportunity to further develop the curriculum to meet revised standards for nurse educator programs. FGCU plans to reactivate the major effective fall 2015.

Based on analysis in the next two sections:

- The projected long-term, statewide demand can currently be met with the supply of nurse practitioners holding master's degrees and post-master's certificates. A separate demand estimate for nurse practitioners holding a doctorate is currently not available.
- There is some indication that FGCU will face challenges meeting its projected enrollments in the DNP based on the experience of other SUS DNP programs.

Analysis of Workforce Need

Occupational need for nurse practitioners is expected to be strong at the national, state, and regional levels. The minimum education requirement for licensing and practicing as a nurse practitioner is currently a master's degree. Nationally, the U.S. Bureau of Labor Statistics projects an employment growth of 37,100 new jobs (in addition to 110,200 current jobs) for nurse practitioners from 2012 to 2022, representing much higher growth (34%) compared to the national average employment growth of 10.8 percent during that time period across all occupations.

Projected growth in employment for nurse practitioners in Florida is similar to the expected national growth at 30%. At the state level, the Florida Department of Economic Opportunity (DEO) projects 2,856 total job openings due to growth and replacement for nurse practitioners between 2014 and 2022. The average number of annual openings is 357. Based on data provided by the Florida Research and Economic Information Database Application (2014), the three largest employers for occupations in this industry are (1) General Medical and Surgical Hospitals (22.8% total employment); Offices of Other Health Practitioners (10% of total employment); and Psychiatric and Substance Abuse Hospitals (1.6% of total employment).

Regionally, the demand for nurse practitioners in Lee, Charlotte, Collier, Glades, and

Hendry Counties (Florida Workforce Region 24) is expected to grow by 31.5 percent (from 410 to 539 total jobs, or a growth of 129 positions) from 2013 to 2021 – or roughly 16 positions per year. This is nearly double the average expected growth (17.5%) for all occupations in this region.

The proposal notes that a high percentage of FGCU's MSN Nurse Practitioner graduates have remained in the area to meet the local workforce need, receive multiple employment offers, and that all have gained employment once certified. Five years of aggregated data from the Florida Education and Training Placement Information Program shows that roughly 85% of the SUS DNP graduates are found working full-time in Florida within a year of graduation and have an average annual salary of about \$97,000. By comparison, the average annual salary for SUS MSN graduates is about \$84,000 per year (includes graduates of APRN and non-APRN MSN tracks). For the FCGU MSN program, roughly 75% of graduates are found working full-time in Florida within a year of graduation and have an average annual salary of about \$99,000. The proposal also identifies the surrounding counties as underserved areas with unmet health needs, noting that graduates of the DNP program could fill this need. However, the proposal does not suggest specific strategies for matching or incentivizing graduates to work in these underserved areas.

Currently, the supply of newly licensed nurse practitioners comes from MSN programs with advanced practice tracks, post-master's certificate programs, and DNP programs. Florida's graduates are supplied from SUS, ICUF and CIE institutions in a range of face-to-face and on-line programs. Supply estimates for nurse practitioners are confounded by the reporting of graduates under multiple CIP codes, the grouping of generic and advance practice tracks together for reporting, and the grouping of pre-licensed and post-licensed individuals together.

The Florida Center for Nursing (FCN) conducts an annual survey of nursing programs to provide greater detail on the supply of advanced practice nurses. However, the FCN AY 2012-2013 survey had a 61% response rate for schools offering a bachelor's degree or higher in nursing (23 respondents out of 38 total schools). For the responding schools in AY 2012-2013, the FCN reports that 580 students graduated from MS nurse practitioner tracks and 758 were newly enrolled; 129 students graduated from DNP programs and 262 were newly enrolled.

These numbers come from only responding schools (16 master's programs and 8 doctoral programs) and therefore may under-represent the actual supply of nurse practitioners. On the other hand, the number of graduates from the DNP programs likely includes post-professionals who do not contribute as new supply for the occupation, and therefore over-estimate supply from this group. Additionally, certificate programs that train previous MSN graduates in the specialty nurse practitioners tracks are not captured in the FCN supply counts but could satisfy

demand for nurse practitioners. In total, it is likely the FCN survey under-estimates the potential supply and more than 600 new nurse practitioners entered the workforce in 2012-2013.

All of the SUS nursing programs responded to the FCN survey and had 8 nursing programs graduating 477 students from master's nurse practitioner tracks and 67 students from DNP programs in 2013. Even with strong occupational growth and demand, the supply of 477 advanced practice graduates from the SUS master's programs exceeds the 357 statewide average annual openings included in DEO's long-term projections. However, employer surveys from the Florida Center for Nursing and the Florida Hospital Association both note that advanced practice positions have higher vacancy rates than RN positions and take the longest time to fill. There is some indication that long-term projections at the state level and short-term need for advanced practice nurses are not aligned.

Analysis of Student Demand

Florida Gulf Coast University surveyed 33 Master's-level graduate nursing students and found that 20 out of 33 (61%) indicated they were thinking about entering a DNP and most commonly cited reasons 'to gain additional expertise in assessing the evidence for implementing current guidelines in an ever changing health care environment' and 'to be a part of my own professional development plan' as reasons for interest in the DNP.

Evidence suggests that the DNP is rapidly becoming an established degree program to train advanced practice nurses across the United States. Expansion of DNP program offerings has grown from 20 program offerings nationwide in 2006 to 241 program offerings across the United States in 2013. Consonant to this rapid expansion of DNP program offerings has been growth in the number of DNP degree awards across the country. Between 2010 and 2012 there was an 80% increase (from 466 to 838) in annual DNP degree production across the US.

However, it is important to note that the State University System already offers the DNP at seven different institutions across the state. Based on data available through the State University System of Florida's Interactive University Database, evidence suggests that student demand has not performed according to universities' expectations.

The State University System standard new academic program proposal template requires that projected enrollments be provided through year five of program implementation. Table 1 below shows the projected enrollments as noted within the approved individual DNP proposals compared to actual enrollments for the corresponding year of implementation. The last column in the table also includes the most current enrollment for each approved program. FGCU expects a Year 5 headcount

of 78 for the proposed DNP program. This table demonstrates that actual student enrollment in new DNP programs does not always meet expected demand.

Univ./Year	Program Year Projected / Actual Headcount					Current
	1	2	3	4	5	2013
FAU/2008	12/26	27/24	35/39	40/40	40/52	63
FIU/2011	20/11	40/29	40/na	60/na	80/na	29
FSU/2009	16/20	32/53	48/69	59/67	70/64	64
UCF/2007	20/19	45/27	65/24	60/64	60/99	125
UF/2006	80/57	170/86	240/138	290/173	337/174	203
UNF/2007	20/14	40/27	67/25	66/20	76/23	26
USF/2006	30/23	53/33	70/35	72/38	75/32	43
FGCU/2015	16/na	32/na	50/na	64/na	78/na	0

Source: State University System of Florida. (2014). Staff compilation of projected headcount enrollment as provided in DNP program proposals. State University Data System, Headcount Enrollment. Academic Program Inventory, Historical Program Information.

Headcount enrollment has tended to range between 55-65 students for the MSN at FGCU. If this held constant through the transition, this range would present a shortfall of approximately 25 students per year relative to the Year 5 enrollment projection of 78. Based on analysis of projected versus actual enrollment in current DNP programs as well as the current trend at the Master’s level at FGCU, evidence suggests that the proposed DNP at FGCU may face challenges meeting enrollment expectations. In response, the university cites strong MSN enrollment from 2001 to 2005 and fluctuating enrollment from 2005 to 2013 due to a shift in focus to the baccalaureate program, faculty vacancies, and the delayed application of prospective graduate students who are anticipating the new DNP program. They note that these issues have been addressed, and the university is prepared to accommodate the anticipated enrollments.

It is important to also note that each currently approved DNP program in the State University System offers flexible delivery methods (online, weekend face-to-face, interactive video) to accommodate working professionals. As such, the FGCU program cannot necessarily expect flexible delivery methods to attract additional enrollments from working professionals.

In summary, the need for nurse practitioners at the national, state, and regional levels is strong and training requirements for advanced practice nurses has continued to move toward the doctoral level. As such, FGCU proposes to offer BSN-DNP and MSN-DNP pathways to train advanced practice nurses. However, a comparison of actual to projected demand appears to indicate that student enrollment trends may not be

keeping pace with enrollment expectations. Although FGCU is proposing the move to the Doctor of Nursing Practice to keep pace with anticipated credentialing changes for advanced practice nurses, further discussion of the enrollments trends in DNP programs are needed to better determine when and where transitions to the DNP are warranted.

C. Assessment of the University Review Process in accordance with BOG Regulation 8.011:

Due to the system of stair step accountability set in place by the Board of Governors in Regulation 8.011, it is now incumbent upon University Board of Trustees to verify that all doctoral programs coming before the Board of Governors have met the requirements of the regulation. The following is an assessment of the university review process to ensure that all criteria set forth have been considered by the university prior to submission to the Board of Governors office.

ACCOUNTABILITY

Check 'yes' or 'no' box, and make comments beneath criterion as appropriate.

1. Overall – *The proposal is in the correct format, includes all necessary signatures, and contains complete and accurate tables for enrollment projections, faculty effort, and the proposed budget.*

YES NO

 The proposal has been approved by the university board of trustees and includes all required signatures.

The Florida Gulf Coast University Board of Trustees approved this proposal on April 15, 2014.

 The university has provided a proposal written in the standard SUS format which addresses new academic program approval criteria outlined in BOG Regulation 8.011.

The new academic program proposal was written in the standard SUS format and in accordance with the criteria set forth in Board Regulation 8.011.

 The university has provided data that supports the need for an additional program in the State University System as well as letters of support or concern from the provosts of other state universities with substantially similar programs.

The Doctor of Nursing Practice was considered by the SUS Council of Academic Vice Presidents' Academic Coordination Project Workgroup on December 6, 2012, and no concerns were expressed at that time. In support

of the full proposal, Florida Gulf Coast University obtained a letter of support from FIU's provost on September 30, 2014, to indicate that FIU does not anticipate that the DNP will create unwarranted duplication.

- The university has provided complete and accurate projected enrollment, faculty effort, and budget tables that are in alignment with each other.**

From Years 1 to 5, FGCU anticipates to increase headcount enrollment from 16 to 78 students. During that time, the program expects to accommodate this increase in enrollment by expanding from three faculty contributing 2.50 person years in Year 1 to eight faculty contributing 7 person years by Year 5. The budget for this program indicates a reliance of new tuition revenue to accommodate its expected growth. Enrollment, faculty effort, and budget tables for Years 1 and 5 are accurate and in alignment with one another.

- The university has included a statement in the proposal signed by the equity officer as to how this proposal will meet the goals of the university's equity accountability plan.**

Florida Gulf Coast University's Equal Opportunity Office signed the proposal on March 25, 2014.

- The program does not substantially duplicate programs at FAMU or FIU or, if it does, evidence was provided that consultations have occurred with the affected university on the impact of the new program on existing programs.**

FIU's provost submitted a letter of support dated September 30, 2014, as evidence that this program will not create unwarranted duplication or overlap of program offerings. No letters of concern were provided with the proposal.

2. Budget – *The proposal presents a complete and realistic budget for the program consistent with university and BOG policy, and shows that any redirection of funding will not have an unjustified negative impact on other needed programs.*

YES NO

- The University Board of Trustees has approved the most recent budget for this proposal.**

The Florida Gulf Coast University Board of Trustees approved the budget for this proposal on April 15, 2014.

- The university has reviewed the budget for the program to ensure that it is complete and reasonable, and the budget appears in alignment with expenditures by similar programs at other SUS institutions.**

FGCU notes on page 21 that the DNP program budget relies heavily on tuition revenue. Based on enrollment data noted in the Demand Section above, FGCU's projected enrollment figures for Year 5 may be overestimated. In this case, the program may encounter financial difficulty in the near term as well as the liability of draining financial resources elsewhere at the institution. This concern is supported by comparisons of projected versus actual enrollment in existing DNP programs presented in Tables 1 and 2 in the Demand Section of this analysis. The solution to cut anticipated faculty hires may be infeasible because of the need for specialized faculty to teach in the program areas of focus and to maintain sufficient student/faculty ratios for accreditation. In addition, financial resources are a criterion by which programs are evaluated for accreditation as well.

- In the event that resources within the institution are redirected to support the new program, the university has identified this redirection and determined that it will not have a negative impact on undergraduate education, or the university has provided a reasonable explanation for any impact of this redirection.**

Although the university noted in its proposal that funds will not be directed to support the new program, it is unclear whether a negative impact will result from the implementation of this program. The enrollment projections appear to be overestimated, and this may negatively impact the program's revenue stream since the proposal notes that the DNP will rely heavily on new tuition revenue moving forward. If enrollment projections are not met, it is likely that the program will require support to be redirected from elsewhere in the university budget.

READINESS

Check 'yes' or 'no' box, and make comments beneath criterion as appropriate.

3. Program Quality – *The proposal provides evidence that the university planning activities have been sufficient and responses to any recommendations to program reviews or accreditation activities in the discipline pertinent to the proposed program have been addressed.*

YES NO

- The university has followed a collaborative planning process for the proposed program in accordance with policies and procedures adopted by**

the University Board of Trustees.

A chronological table outlining the collaborative planning process is outlined and described in the proposal, and the internal and external individuals involved in the process have been identified in the table.

- An external consultant has reviewed the proposal and supports the department's capability of successfully implementing this new program.**

The proposed program's external consultant, Dr. Patricia Howard, Ph.D., RN, NEA-BC, FAAN serves as professor of Master's (MSN) and Doctor of Nursing Practice (DNP) Studies and Executive Associate Dean of the University of Kentucky's College of Nursing. Dr. Howard provided a comprehensive consultant report of the proposed DNP at Florida Gulf Coast University.

Dr. Howard acknowledged that the proposed DNP at Florida Gulf Coast University is based on national standards for doctoral education for advanced nursing practice. Dr. Howard further noted that student learning outcomes and course content are in alignment and associated with national standards for the DNP established by the American Association of Colleges of Nursing (AACN).

- The university has found the level of progress that the department has made in implementing the recommendations from program reviews or accreditation activities in the discipline pertinent to the proposed program to be satisfactory.**

Recommendations from program reviews or accreditation activities are not provided in the proposal.

- The university has analyzed the feasibility of providing all or a portion of the proposed program through distance learning.**

Florida Gulf Coast University proposes to offer a portion of this program through distance learning.

- If necessary, the university has made allowances for licensure and legislative approval to be obtained in a timely manner.**

Not applicable

4. Curriculum - The proposal provides evidence that the university has evaluated the proposed curriculum and found that it describes an appropriate and sequenced course of study, and that the university has evaluated the appropriateness of specialized accreditation for the program.

YES NO

- The university has reviewed the curriculum and found that the course of study presented is appropriate to meet specific learning outcomes and industry driven competencies discussed in the proposal.**

As presented in the proposal, the Doctor of Nursing Practice is designed to prepare practitioners with the advanced nursing knowledge and leadership skills to improve health care outcomes and to provide expert evidence-based nursing care across diverse health care settings and systems. The external consultant, Dr. Howard, has reviewed the curriculum and affirmed that the content and associated practical experiences align with industry standards outlined by the American Association of Colleges of Nursing, the governing body of the Commission on Collegiate Nursing Education (CCNE) that acts as the discipline-specific accrediting body under which the FGCU DNP program will seek accreditation.

- The university anticipates seeking accreditation for the proposed doctoral program, or provides a reasonable explanation as to why accreditation is not being sought.**

As noted in the proposal, the university will seek accreditation from the Commission on Collegiate Nursing Education (CCNE), which will enable graduates to sit for licensure as an advanced practice nurse in the State should the DNP become the minimum credential for new candidates for licensure.

5. Faculty – The proposal provides evidence that the university is prepared to ensure a critical mass of faculty will be available to initiate the program based on estimated enrollments, and that faculty in the aggregate have the necessary experience and research activity to sustain a doctoral program.

YES NO

- The university has reviewed the evidence provided and found that there is a critical mass of faculty available to initiate the program based on estimated enrollments.**

As noted in the proposal, two full-time, doctoral-level, tenure-track faculty at the rank of Assistant Professor, and one half-time, master's-level instructor will contribute to the program's teaching, mentoring, and research load. By year 5, the university proposes to retain the aforementioned faculty and, to accommodate increased enrollment, hire five new full-time, tenure track,

DNP-level faculty to contribute to the program. Because a suitable student-to-faculty ratio is required to coordinate supervised clinical practices for accreditation, the program will require a sufficient number of faculty to ensure each faculty member is appropriately credentialed and maintains a teaching/supervision load that complies with CCNE accreditation guidelines.

- The university has reviewed the evidence provided and found that the faculty in aggregate has the necessary experience and research activity to sustain the program.**

Table 4 of the proposal notes that the five anticipated new hires by Year 5 will hold DNP degrees, which is an appropriate credential to teach and supervise graduate students within the proposed program. It is also noted in Table 4 that two existing faculty who will contribute to the program from Years 1 through 5 hold Ph.D. degrees and one holds a Master of Science in Nursing. Faculty CVs demonstrate that the faculty who will contribute to the program in Year 1 have been active in teaching, research, and service to the profession and institution.

- The university has reviewed the evidence provided and found the academic unit(s) associated with this new degree to be productive in teaching, research, and service.**

In the proposal, FGCU provided a chronological table of course teaching load for each faculty member associated with the Master of Science in Nursing program to demonstrate that faculty have been active in teaching.

Staff analysis of headcount enrollment data indicate that FGCU's Master of Science in Nursing (CIP 51.3801) program has maintained an enrollment of approximately 55 students since 2010, also graduating 25-29 students per year during that time frame.

- If appropriate, the university has committed to hiring additional faculty in later years, based on estimated enrollments.**

Based on Table 4 of the proposal, the university anticipates hiring five additional full-time, tenure-track, doctoral-level faculty to contribute to the program and accommodate an expected increase enrollment headcount.

6. Resources – The proposal provides evidence that the university has ensured the available library volumes and serials; classroom, teaching laboratory, research laboratory, office space, equipment, clinical and internship sites, fellowships, scholarships, and graduate assistantships

will be sufficient to initiate the program, and that if applicable, funding has been secured to make more resources available as students proceed through the program..

YES NO

- The university has provided a signed statement from the Library Director verifying that the library volumes and serials available are sufficient to initiate the program.**

The library director signed the proposal on March 31, 2014, and noted that although the current MSN program at FGCU receives adequate library support, the DNP program would require an additional \$11,143 for Year 1 and \$14,164 for year 5, reflecting an annual inflation increase of 10 percent, for critical library resources to support the program. As noted in Table 2 of the proposal, these additional funds have been incorporated into the budget for Years 1 and 5 of the program.

- The university has ensured that the physical space necessary for the proposed program, including classrooms, laboratories and office space, is sufficient to initiate the program.**

According to the proposal, the physical space necessary for the proposal program is sufficient.

- The university has ensured that necessary equipment is available to initiate the program.**

According to the proposal, all the necessary equipment is available.

- The university has ensured that fellowships, scholarships, and graduate assistantships are sufficient to initiate the program.**

As noted in the proposal, the School of Nursing currently receives revenue each fiscal year for graduate student tuition waivers as well as funds for one graduate teaching assistantship (\$3,000/year). These assistantships and waivers are competitive.

- If applicable, the university has ensured that the department has arranged a suitable number of clinical and internship sites.**

Currently, the College of Health Professions and Social Work has Clinical Affiliation Agreements with over 250 agencies, which are anticipated to be sufficient to operate the program.