Supplemental Digital Content 2

Round 2 Results

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Competency | Clear | | Measurable | | Critical | | |
|  | Yes | No | Yes | No | Median | Interquartile Range | N |
| 1.Assumes leadership roles to initiate and guide change. | 85% | 15% | 95% | 5% | 4 | 1 | 21 |
| 2. Collaborates with multiple stakeholders (e.g. patients, community, integrated health care teams, and policy makers) to improve health care. | 95% | 5% | 95% | 5% | 4 | 1 | 21 |
| **3.Demonstrates leadership that uses critical and reflective thinking.** | **70%** | **30%** | **60%** | **40%** | **4** | **1** | **21** |
| **4.Leads practice inquiry, individually or in partnership with others.** | **75%** | **25%** | **75%** | **25%** | **3** | **1** | **21** |

Note. Bolded items consensus was not reached

Is there redundancy in the above competencies?

Yes 43%

No 57%

If redundancy, which competencies are redundant?

1 & 4; some in 1 & 3; 1 & 4; 1 & 4; 1 & 4 maybe developed stronger to be inclusive; 1, 3, 4- 3 & 4 are components of 1 remove 1 as assuming a leadership role is not really the point it is they can demonstrate leadership which is what 3 & 4 are addressing; leadership should be combined; 2 & 4; 1 & 4; 1 & 4;

For any competencies in the above group that you believe are not clear or measurable please provide suggested changes; please include the number for the competency being referred to:

How do measure Collaborates and reflective thinking; critical thinking and reflective thinking is hard to measure Engages in evidence based practice to develop critical thinking allows the measurable of using EBP guidelines; beyond those familiar with NONPF I don't think practice inquiry competencies is widely understood would describe the meaning for practice inquiry competence rather than expect the term to be understood; 3 & 4 how do measure someone’s critical thinking skills and reflection once they have graduated or are you asking about BSN-DNP students prior to graduation; 1 may need to define leadership roles; need better language to evaluate the use of critical thinking- reflective part is ok; 3 not sure how you’d measure critical thinking skills used as an NP in leadership; 3 be more clear about ways that leadership can demonstrate critical and reflective thinking; 4. What exactly is practice inquiry- define more clearly task; 1 what do you do to assume leadership

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| Competency | Clear | | Measurable | | Critical | | |
|  | Yes | No | Yes | No | Median | Interquartile Range | N |
| **5. Analyzes ethical, legal, and social factors influencing health policy development from the perspective of consumer and nursing.** | **90%** | **10%** | **90%** | **10%** | **4** | **2** | **20** |
| **6. Use expertise to influence local, state, federal or international health policy to improve health care delivery and outcomes.** | **80%** | **20%** | **85%** | **15%** | **4** | **2** | **20** |
| **7. Evaluate health care policy that shapes health care financing, regulation, and delivery.** | **90%** | **10%** | **100%** |  | **4** | **2** | **20** |
| **8. Contributes in the development of health policy.** | **78.9%** | **21.1%** | **80%** | **20%** | **3** | **2** | **19** |
| 9. Educate others, including policy makers at all levels, regarding nursing, health policy, and patient care outcomes. | 94.7% | 5.3% | 94.4% | 5.6% | 4 | 1 | 19 |
| 10. Advocate for the nursing profession within the policy and healthcare communities. | 95% | 5% | 90% | 10% | 4 | 1 | 20 |
| 11. Advocate for social justice, equity, and ethical policies within all healthcare arenas. | 90% | 10% | 80% | 20% | 4 | 1 | 20 |
| 12. Advocates for policies for safe and healthy practice environments. | 100% |  | 90% | 10% | 4 | 1 | 20 |
| **13. Demonstrates an understanding of the interdependence of policy and practice.** | **70%** | **30%** | **60%** | **40%** | **4** | **2** | **20** |
| **14. Analyzes the implications of health policy across disciplines.** | **80%** | **20%** | **80%** | **20%** | **4** | **2** | **20** |

Note. Bolded items did not reach consensus

Is there redundancy in the above competencies?

Yes 50%

No 50%

If redundancy, which competencies are redundant?

5, 7, 14 are similar; 6, 10, 11, 12 are similar; 6 & 12 should be combined; 5 & 7; 6, 8 & 10; 11 & 12; 13 & 14; 11, 12 & 14 are very redundant; 13 & 5 are redundant; 10 & 12 seem to be getting at the same thing- might combine Advocates for the nursing profession within policy and health care communities for safe and healthy practice environments; 6, 9, 10 have similar intent and overlap; also the statements that begin analyze would be measurable in the academic environment but challenging to measure for graduates in practice; 5 & 7; 6 & 9; 6, 7, & 8; 7 &14; 11 & 6

For any competencies in the above group that you believe are not clear or measurable please provide suggested changes; please include the number for the competency being referred to:

Many of these competencies can be combined as one and be measurable with evaluation of policies and integrating ethics in a holistic manner; 8 not sure the actual contribution is needed so much as an understanding of how to contribute; 9 who are the others and educating them to what end, how is this different from what is expressed in 6; 13. Interdependence of policy and practice is unclear; 13. Delete-in order to meet other competencies it would be necessary to have an understanding of the relationship of policy and practice; 8 13 & 14 do not provide additional clarity in policy competency; many which would require discussion about expectations and deliverables not all students have equal opportunity unless these are core assignments in course or projects to effect and be involved in policy plus we need clarification on the desired outcomes for shaping policy perhaps require membership in local state or national NP level with attendance at least one event surrounding health policy so as to get involved maybe a start; eliminate 6; 13. What must one do to demonstrate understanding, change verb to describes interrelationship many important but difficult to objectively measure as a student;

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Competency | Clear | | Measurable | |  | | Critical |  | |
|  | Yes | No | Yes | No | Median | Interquartile Range | | | N |
| **15. Uses technology systems that capture data on variables for the evaluation and improvement of nursing care.** | **100%** |  | **100%** |  | **4** | **2** | | | **19** |
| 16. Critically analyzes data and evidence for improving advanced nursing practice. | 100% |  | 100% |  | 4 | 1 | | | 19 |
| **17. Use information technology to optimize one’s own learning.** | **89.5%** | **10.5%** | **84.2%** | **15.8%** | **4** | **2** | | | **19** |
| 18. Participate in the evaluation and selection of health care information systems and patient care technologies that promote safe, quality and cost effective care. | 89.5% | 10.5% | 89.5% | 10.5% | 3 | 1 | | | 19 |
| 19. Extract data from practice information systems and databases to evaluate care processes | 100% |  | 100% |  | 4 | 1 | | | 19 |
| **20. Engage with a multidisciplinary team in the evaluation and resolution of ethical issues within healthcare systems relating to the use of information, information technology, communication networks, and patient care technology.** | **84.2%** | **15.8%** | **83.3%** | **16.7%** | **4** | **2** | | | **19** |
| 21.Evaluate consumer health information sources for accuracy, timeliness, and appropriateness. | 100% |  | 94.7% | 5.3% | 4 | 1 | | | 19 |
| **22. Demonstrates information literacy skills in complex decision making.** | **73.7%** | **26.3%** | **68.4%** | **31.6%** | **4** | **2** | | | **19** |
| 23. Translates technical and scientific health information appropriate for various users’ needs. | 89.5% | 10.5% | 84.2% | 15.8% | 4 | 1 | | | 19 |

Note. Bolded items did not reach consensus.

Is there redundancy in the above competencies?

Yes 33.3%

No 66.7%

If redundancy, which competencies are redundant?

16 & 19 similar; 15 & 19 could be combined; 15 & 17; 16 & 22; 17 would just delete can’t measure one’s own learning and if about using IT to optimize health outcomes others get to that point; 15 & 19; 16 & 19; 15 & 19; 18 & 20

For any competencies in the above group that you believe are not clear or measurable please provide suggested changes; please include the number for the competency being referred to:

Not every DNP needs to analyze info literacy in complex decision making but every DNP should understand and be able to apply to concept; not sure how information literacy skills impact complex decision making and how to rework; 17. Unclear what one’s own learning means; 22. Complex decision making is relative to the provider and patient; 19. Change the word extract to analyze it is the use that is important more so than just getting the information; 20. Engagement is hard to measure and not clear what the purpose is; change to evaluate ethical issues within the health care system relating to the use of information, information technology….as part of a multidisciplinary team; some competencies can be measured while students are in program but challenging to measure for graduates; some of competencies such as 18 depends on opportunity to be engaged in process; 18 not clear as may not have opportunity to participate in selection; 20 is wordy which makes it unclear; 22 what does one do to demonstrate info literacy do we want health info lit, use health info literacy to support complex decision making; 23 what does one do to translate tech and scientific info, maybe explains

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| --- | --- | --- | --- | --- | --- | --- | --- |
| Competency | Clear | | Measurable | | Critical | | |
|  | Yes | No | Yes | No | Median | Interquartile Range | N |
| **24. Evaluates the ethical consequences of decisions.** | **84.2%** | **15.8%** | **78.9%** | **21.1%** | **4** | **1** | **19** |
| 25.Applies ethical principles to complex issues related to individuals, populations and systems of care. | 89.5% | 10.5% | 89.5% | 10.5% | 4 | 1 | 19 |
| **26. Demonstrate a commitment to ethical principles pertaining to the provision or withholding of care in compliance with relevant laws, policies and regulations.** | **89.5%** | **10.5%** | **84.2%** | **15.8%** | **4** | **2** | **19** |
| 27. Evaluate effective strategies for managing the ethical dilemmas inherent in patient care or the health care organization | 94.7% | 5.3% | 100% |  | 4 | 1 | 19 |

Note. Bolded items did not reach consensus.

Is there redundancy in the above competencies?

Yes 31.6%

No 68.4%

If redundancy, which competencies are redundant?

24 & 27 similar; 25 & 26 similar; 24 & 27; 24 & 25; 24 is a general statement that includes the remainder of the competencies so would delete it; 24 & 27 very similar; 24 & 27;

For any competencies in the above group that you believe are not clear or measurable please provide suggested changes; please include the number for the competency being referred to:

25 complex is relative and may be difficulty to measure; 24 too broad and redundant with 27; \_25 complex needs to be defined then would be measurable; 26 is unclear; 24 evaluates whose decisions and decisions about what too vague; 26. Why apply only to provision or withholding care, shouldn’t it apply to all aspects of nurse’s professional practice or activities, ethical decisions re use of equipment and supplies, related to peer reviews, scholarly activities, advocacy efforts, relationship with other professionals and all patients, not sure what one is doing to demonstrate commitment; 27 want them to use effective strategies 26 how do you ensure clinical exposure

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| --- | --- | --- | --- | --- | --- | --- | --- |
| Competency | Clear | | Measurable | | Critical | | |
|  | Yes | No | Yes | No | Median | Interquartile Range | N |
| 28. Use effective communication tools and techniques that include a nonjudgmental attitude, respect, and compassion when addressing sensitive issues to promote therapeutic relationships. | 94.4% | 5.6% | 94.4% | 5.6% | 4 | 1 | 18 |
| 29. Coaches the patient and caregiver for positive behavioral change. | 100% |  | 100% |  | 4 | 1 | 18 |
| 30. Communicates practice knowledge effectively both orally and in writing. | 100% |  | 100% |  | 4 | 0 | 18 |

Is there redundancy in the above competencies?

Yes

No 100%

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| --- | --- | --- | --- | --- | --- | --- | --- |
| Competency | Clear | | Measurable | | Critical | | |
|  | Yes | No | Yes | No | Median | Interquartile Range | N |
| **31. Conduct a comprehensive and systematic assessment of health and illness parameters in complex situations.** | **78.9%** | **21.1%** | **89.5%** | **10.5%** | **4** | **2** | **19** |
| 32. Uses advanced health assessment skills to differentiate between normal, variations of normal and abnormal findings. | 100% |  | 100% |  | 4 | 1 | 19 |
| **33. Functions as a certified autonomous practitioner.** | **78.9%** | **21.1%** | **68.4%** | **31.6%** | **4** | **3** | **19** |
| 34. Employs screening and diagnostic strategies in the development of diagnoses. | 100% |  | 100% |  | 4 | 1 | 19 |
| 35. Provides the full spectrum of health care services to include health promotion, disease prevention, health protection, anticipatory guidance, counseling, disease management, palliative, and end of life care. | 100% |  | 94.7% | 5.3% | 4 | 1 | 19 |
| 36. Prescribes medications within scope of practice. | 100% |  | 100% |  | 4 | 1 | 19 |
| 37. Manage care across the health continuum including prescribing, ordering, and evaluating therapeutic interventions utilizing evidence-based guidelines within their population based scope of practice. | 100% |  | 100% |  | 4 | 0 | 18 |
| 38. Provides patient-centered care recognizing cultural diversity and the patient or designee as a full partner in decision-making by negotiating a mutually acceptable evidence based plan of care. | 94.7% | 5.3% | 94.7% | 5.3% | 4 | 1 | 19 |
| 39. Advocate for the role of the patient as a member of the healthcare team. | 94.7% | 5.3% | 84.2% | 15.8% | 4 | 1 | 19 |
| 40. Creates a climate of patient-centered care to include confidentiality, privacy, comfort, emotional support, mutual trust, and respect. | 94.7% | 5.3% | 89.5% | 10.5% | 4 | 1 | 19 |
| 41. Promote a climate of respect, dignity, inclusion, integrity, civility and trust to foster collaboration within the healthcare team. | 94.7% | 5.3% | 84.2% | 15.8% | 4 | 1 | 19 |
| **42. Addresses cultural, spiritual, and ethnic influences that potentially create conflict among individuals, families, staff, and caregivers.** | **94.7%** | **5.3** | **94.7%** | **5.3%** | **4** | **3** | **19** |
| **43. Assume different roles (e.g. member, leader) as needed, within the interprofessional, healthcare team to improve the provision of patient-centered care.** | **89.5%** | **10.5%** | **89.5%** | **10.5%** | **4** | **2** | **19** |
| **44. Empower patients, families and communities to share in healthcare decision making.** | **84.2%** | **15.8%** | **78.9%** | **21.1%** | **4** | **2** | **19** |
| **45. Educate and guide individuals and groups through complex health and situational transitions.** | **89.5%** | **10.5%** | **94.7%** | **5.3%** | **4** | **2** | **19** |
| 46. Assesses the patient’s and caregiver’s educational needs to provide effective, personalized health care. | 100% |  | 100% |  | 4 | 1 | 19 |
| 47. Collaborates in planning for patient transitions across the continuum of care. | 100% |  | 94.7% | 5.3% | 4 | 1 | 19 |
| **48. Implement an investigatory, analytic approach to clinical situations.** | **61.1%** | **38.9%** | **72.2%** | **27.8%** | **4** | **2** | **19** |

Note. Bolded items did not reach consensus.

Is there redundancy in the above competencies?

Yes 61.1%

No 38.9%

If redundancy, which competencies are redundant?

33 is similar to 28 & 29; 45 & 47 similar; 45 & 46; 36 & 37; LOT of competencies around diversity, inclusion, respect, etc.- is there a way to condense or eliminate some that are basically addressing the same thing; long list and by end felt like I was reading different versions of the same thing; 35 & 37 are very similar; 33 is a summation of everything in this section and given the generalness will be hard to measure; 36 & 37; 38 & 40; 38 & 40; challenging to measure creating a climate; 36 & 37; 38, 39 & 40 combined; 38 & 42; 38 & 44; 38 & 46; 31 & 32 overlap; 48 is redundant; 33 & 31, 32, 34, 35, 36, 37, 38, 39 are all part of 33; 45 & 47 are essentially the same; 40 & 41; 38 & 41, 42; 45 & 46; 45 & 47; 48 & 4

For any competencies in the above group that you believe are not clear or measurable please provide suggested changes; please include the number for the competency being referred to: 31. & 45. complex is relative/subjective so maybe difficult to measure; 33. Autonomous I like but question if competency; 43. Seems to belong with the leadership competencies instead of here-this is a long section so pulling this out and putting it in a section that makes more sense would help clarify; 31 the term parameters is unclear; 33 change to independent instead of autonomous since more commonly used; 35 is challenging to measure because several concepts in one statement; 39 what does advocating for the role of the patient mean; 40 & 41 refer to creating or promoting a climate intent is important but difficult to measure; 33 no practitioner is autonomous; 42 is ambiguous and difficult to measure; 48 is ambiguous; \_44 empower needs clarification; 48 is not clear what is meant by clinical situations- typical clinical health problems or more like adverse events; 48 does not fit here; 35. How is health protection different from health promotion and disease prevention, delete health protection; 36 if prescribing needs to be within scope of practice boundaries; 37 managing is within scope of practice boundaries then why isn’t 35 within scope of practice boundaries; 47 collaborates only for care transitions aren’t there other places to collaborate in care

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| Competency | Clear | | Measurable | | Critical | | |
|  | Yes | No | Yes | No | Median | Interquartile Range | N |
| **49. Develop and/or monitor budgets for practice initiatives.** | **89.5%** | **10.5%** | **100%** |  | **3** | **2** | **19** |
| **50. Employ principles of business, finance, economics, and health policy to develop and implement effective plans for practice-level and/or system-wide practice initiatives that will improve the quality of care delivery.** | **89.5%** | **12.5%** | **100%** |  | **3** | **2** | **19** |
| **51. Analyze the cost-effectiveness of practice initiatives accounting for risk and improvement of health care outcomes.** | **89.5%** | **10.5%** | **100%** |  | **4** | **2** | **19** |
| **52. Demonstrate stewardship of financial and other resources for the delivery of quality care that is effective and affordable within the health care and patient centered team.** | **84.2%** | **15.8%** | **89.5%** | **10.5%** | **4** | **2** | **19** |
| **53. Effects health care change using broad based skills including negotiating, consensus- building, and partnering.** | **89.5%** | **10.5%** | **94.7%** | **5.3%** | **3** | **2** | **19** |
| 54. Collaborate to develop, implement, and evaluate healthcare strategies which reduce errors and optimize safe, effective systems of healthcare delivery. | 94.7% | 5.3% | 100% |  | 4 | 1 | 19 |
| **55. Advances practice through the development and implementation of innovations incorporating principles of change.** | **89.5%** | **10.5%** | **89.5%** | **10.5%** | **4** | **2** | **19** |
| **56. Facilitates the development of health care systems that address the needs of culturally diverse populations, providers, and other stakeholders.** | **84.2%** | **15.8%** | **78.9%** | **21.1%** | **4** | **2** | **19** |
| **57. Analyzes organizational structure, functions and resources to improve the delivery of care.** | **94.7%** | **5.3%** | **94.7%** | **5.3%** | **4** | **2** | **19** |
| 58. Evaluate care delivery approaches that meet current and future needs of patient populations based on scientific findings in nursing and other clinical sciences | 94.4% | 5.6% | 94.7% | 5.3% | 4 | 1 | 19 |
| 59. Evaluates the impact of health care delivery on patients, providers, other stakeholders, and the environment. | 94.4% | 5.6% | 94.7% | 5.3% | 4 | 1 | 19 |
| 60. Minimizes risk to patients and providers at the individual and systems level. | 94.7% | 5.3% | 84.2% | 15.8% | 4 | 1 | 19 |

Note. Bolded items did not reach consensus.

Is there redundancy in the above competencies?

Yes 38.9%

No 61.1%

If redundancy, which competencies are redundant?

49-52 quite similar; 54-59 seem like they could be combined; 58, 59 and 60; not clear what is meant by 53 or how it adds to this area; many of these are getting at the same principles- feels like some are reworded with hot button verbiage but do not really add detail; 57, 58 ,59 have similar intent; 50 & 51; 51 & 52; 54 & 58; 49 & 50; 57 & 58; 49 & 50; 51 & 58; 53 ,54 ,55

For any competencies in the above group that you believe are not clear or measurable please provide suggested changes; please include the number for the competency being referred to:

49. Take out or they should be able to do both; 60 minimizing risk is important but how would you measure; 50 too much to measure; 55 ambiguous; 56 ambiguous

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| Competency | Clear | | Measurable | | Critical | | |
|  | Yes | No | Yes | No | Median | Interquartile Range | N |
| **61. Ongoing assessment of one’s own knowledge and skills so can actively seek best available opportunities for continuous improvement of one’s evidence based practice.** | **52.6%** | **47.4%** | **73.7%** | **26.3%** | **4** | **2** | **19** |
| 62. Analyzes clinical guidelines for individualized application into practice. | 100% |  | 100% |  | 4 | 1 | 18 |
| **63.Utilizes peer review to promote a culture of excellence.** | **94.4%** | **5.6%** | **94.1%** | **5.9%** | **4** | **2** | **18** |
| **64. Practice flexibility in adjusting to rapidly changing professional environments** | **77.8%** | **22.2%** | **72.2%** | **27.8%** | **4** | **2** | **18** |
| 65. Guide, mentor, and support other nurses to achieve excellence in nursing practice. | 100% |  | 100% |  | 4 | 1 | 18 |
| **66. Participates in professional organizations and activities that influence advanced practice nursing and/or health outcomes.** | **100%** |  | **100%** |  | **4** | **2** | **18** |
| 67. Demonstrate consistency, trustworthiness, integrity and respect to inspire the confidence of patients and colleagues. | 94.4% | 5.6% | 88.9% | 11.1% | 4 | 1 | 18 |
| **68. Function as a practice specialist/consultant in collaborative knowledge- generating research.** | **88.9%** | **11.1%** | **88.2%** | **11.8%** | **3** | **2** | **18** |
| 69. Disseminate findings from evidence-based practice and research to improve healthcare outcomes. | 100% |  | 100% |  | 4 | 1 | 18 |
| 70. Leads scholarship activities which focus on the translation and dissemination of contemporary evidence into practice. | 94.4% | 5.6% | 100% |  | 4 | 1 | 18 |
| 71. Demonstrate sensitivity to diverse organizational cultures and populations, including patients and providers. | 100% |  | 94.1% | 5.9% | 4 | 1 | 17 |
| **72. Develops strategies to prevent one’s own personal biases from interfering with delivery of quality care.** | **94.4%** | **5.6%** | **76.5%** | **23.5%** | **4** | **2** | **18** |
| **73. Demonstrate compassion and accountability to patients, society, and the profession.** | **94.4%** | **5.6%** | **76.5%** | **23.5%** | **4** | **1** | **18** |
| **74. Utilizes and evaluates professional standards and evidence-based care.** | **88.2%** | **11.8%** | **88.9%** | **11.1%** | **4** | **2** | **18** |

Note. Bolded items did not reach consensus.

Is there redundancy in the above competencies?

Yes 18.8%

No 81.3%

If redundancy, which competencies are redundant?

69 & 70 similar; 71, 72 similar; 71 is more of the cultural sensitivity that was mentioned previously in other section; 62 may overlap with a previous one regarding use of evidence based guidelines; 42 & 71; 62 & 74; 61 & 72;

For any competencies in the above group that you believe are not clear or measurable please provide suggested changes; please include the number for the competency being referred to:

64. How can practice flexibility be measured?; 73. How can demonstrate compassion be measured; 70 is contemporary evidence referring to current evidence; 73 how would you evaluate compassion toward society or profession; 61 is difficult to read; 72 & 73 difficult to assess; 61 is missing the word one’s; 67 how does one demonstrate consistency delete from competency; 68 not sure a brand new grad is going to be a specialist or consultant in advanced practice, they barely know how to be a generalist NP delete competency; 72 have them use strategies rather than develop strategies; 74 two verbs choose one

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| --- | --- | --- | --- | --- | --- | --- | --- |
| Competency | Clear | | Measurable | | Critical | | |
|  | Yes | No | Yes | No | Median | Interquartile Range | N |
| **75. Demonstrate advanced levels of clinical judgment, systems thinking, and accountability in designing, delivering, and evaluating evidence-based care to improve patient outcomes.** | **78.9%** | **21.1%** | **89.5%** | **10.5%** | **4** | **1** | **19** |
| **76. Ensure accountability for quality of health care and patient safety for populations with whom they work.** | **78.9%** | **21.1%** | **73.7%** | **26.3%** | **4** | **2** | **19** |
| **77. Utilize a system to monitor individual or group’s practice quality of care against national benchmarks to determine variances in practice outcomes and population trends.** | **89.5%** | **10.5%** | **100%** |  | **4** | **2** | **19** |
| 78. Apply relevant findings to develop internal protocols and improve practice and the practice environment. | 94.4% | 5.6% | 88.9% | 11.1% | 4 | 1 | 18 |
| 79.Collaborates with both professional and other caregivers to achieve optimal care outcomes. | 100% |  | 94.7% | 5.3% | 4 | 1 | 19 |
| **80.Generates practice-based knowledge to improve practice and patient outcomes.** | **83.3%** | **16.7%** | **88.9%** | **11.1%** | **4** | **2** | **18** |
| **81. Applies clinical investigative skills to improve health outcomes.** | **100%** |  | **100%** |  | **4** | **2** | **18** |
| **82. Anticipates variations in practice and is proactive in implementing interventions to ensure quality.** | **88.9%** | **11.1%** | **77.8%** | **22.2%** | **4** | **2** | **18** |

Note. Bolded items did not reach consensus.

Is there redundancy in the above competencies?

Yes 33.3%

No 66.7%

If redundancy, which competencies are redundant?

77 is similar to 61 & 63; 77, 78, 82 similar; 75 &77; 75 & 78; 75 & 80; 81 is redundant to 4 and another can’t find; 79 is similar to previous statement; 78 overlaps with previous statement on leading change to improve care; 75 & 78; 79 & 80; 80 & 77; 81, 4, 17, 22, 44; 79, 2, 54

For any competencies in the above group that you believe are not clear or measurable please provide suggested changes; please include the number for the competency being referred to:

How can demonstrate advanced levels be measured; 80. Not sure what it means to generate practice based knowledge to improve practice and outcomes; 75 too much in one competency statement; 76 not sure how to measure accountability; 77 delete utilize a system; 75 how do you demonstrate advanced levels of; 76 does ensure mean that you make sure someone is accountable assume accountability;

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Competency | Clear | | Measurable | | Critical | | |
|  | Yes | No | Yes | No | Median | Interquartile Range | N |
| **83. Integrate nursing science with knowledge from ethics, the biophysical, psychosocial, analytical, and implementation sciences as the basis for the highest level of nursing practice.** | **84.2%** | **15.8%** | **84.2%** | **15.8%** | **4** | **2** | **19** |
| **84. Use conceptual and analytical skills in evaluating the links among practice, organizational, population, fiscal, and policy issues.** | **84.2%** | **15.8%** | **84.2%** | **15.8%** | **3** | **2** | **19** |
| **85. Integrates knowledge from the humanities and sciences within the context of nursing science.** | **89.5%** | **10.5%** | **89.5%** | **10.5%** | **4** | **2** | **19** |
| **86. Evaluate new clinical practice approaches based on the integration of research, theory, and practice knowledge** | **100%** |  | **100%** |  | **4** | **2** | **18** |
| 87. Use analytic methods to critically appraise existing literature and other evidence to determine and implement the best evidence for practice. | 100% |  | 100% |  | 4 | 1 | 18 |
| 88. Analyze epidemiological, biostatistical, environmental, and other appropriate scientific data related to individual, aggregate, and population health. | 94.4% | 5.6% | 100% |  | 4 | 1 | 18 |

Note. Bolded items did not reach consensus.

Is there redundancy in the above competencies?

Yes 22.2%

No 77.8%

If redundancy, which competencies are redundant?

83, 85, 86 similar; 86 & 87; 83 & 85 overlap; 83 overlaps with 88; 83 subsumed in 85; 81, 87, 86, 22, 16

For any competencies in the above group that you believe are not clear or measurable please provide suggested changes; please include the number for the competency being referred to:

83, 84 85 too ambiguous;

Please note if you feel any concepts are missing from the core competencies for NPs:

Been faced with cheating scandals in academic recently as well as similar behaviors in the practice world (taking money in exchange for signing off on clinical hours that weren’t complete, selling samples and prescriptions for narcotics etc.) I think there needs to be a competency about holding oneself to the highest of ethical standards; it would be helpful if the 3rd round is needed to name the sections to understand what concepts are being captured; must be some competency addressing social justice/social determinants of health that go beyond what is here the one here is limited to advocacy which is important but there must be a competency in identifying how social determinants of health affect outcomes and how the role of the DNP prepared nurse can be leveraged to create social change/improved social outcomes; describe how NP role differs from that of RN MD PA CRNA CNS CNM; in what ways are nursing foundations/characteristics incorporated into NP practice