CU College of Nursing **Proposal Justification**
Proposal for DNP (Doctor of Nursing Practice) Scholarly
Project: **Program Evaluation**

Project Title:

Project Site/Unit:

Student Name:

Student Specialty:

Faculty Advisor Name:

I.   Evaluation Question Program Evaluation
(Like an abstract, limit to 50 words here)
The organization initiating this project is …
The organization's goals are … and this project will help them to …

The Evaluation Question for this project is:
To determine whether _____ (program) achieves _____ (key outcome) [*this should be an outcome that reflects better health for individual patients, better clinical outcomes achieved by providers, better functioning by a system of care, etc. – the outcomes that are most important to the organization, and that the program is intended to affect*]

>   Additional evaluation questions include:
>   To determine whether/how much the program accomplishes _____ [*additional questions may include patient or provider satisfaction, cost-effectiveness, feasibility and acceptability of the intervention, etc.*].

II.   Background and Significance
Research shows that program development and evaluation to address this problem will lead to better outcomes for patients by…; national practice guidelines recommend … . Meta-analytic reviews show … . Studies have found … .
 Based on this literature, this program was designed to …
[Focus your background section on methods for achieving the quintuple aim (better care for individuals, better health for populations, lower cost, care team well-being and health equity). . The main outcome should be focused on how the program evaluation you are planning will improve the quality of care or health for individuals or populations; organizational efficiency for lower costs or other outcomes.   The other two components of the quintuple aim, care team well-being, and health equity, may be secondary outcomes.]

III.   Needs Assessment and Program Design

____ was identified as a problem by ____, based on ____.

Interprofessional team members collaborating on this project include: …
Note: consider all who this program and evaluation project will impact; for
example, if your project involves medication management, invite a pharmacist, a
clinical application analyst, data scientist or informaticist for EHR-based QI, a unit
QI lead or representative, scheduling and office staff may also be appropriate).
Project advisors and clinical site mentors can help you identify team members.

List name and role in this order:
>   Your name (DNP Student Project Lead)
>   Clinical Site Mentor Name and role in organization
>   Other organization leaders name(s) and role(s) as applicable
>   Other project team member name(s) and role(s)

An analysis of the various reasons that this problem exists or issues that prompted the creation
of the program being developed and/or evaluated for this population of patients or system
process within my organization revealed…
>   ***A Logic model is required to show the link between program goals, activities, and***
>   ***short-, medium- and long-term outcome measures.*** *You may also include a root cause*
>   *analysis or other needs assessment.*

Other locally collected data or literature showing that this issue is a problem are …

Describe all key components of the program in enough detail that someone else could structure a
similar program. You should say who does what, at what points in time, how information flows
between various program components, when evaluations are conducted, etc. It may be helpful to
include a flowchart or timeline here.

IV.   Methodology

A. *Description of the Population to be Studied*
All eligible participants (may be patients, healthcare team members) seen by the organization
will be included in this study. Eligibility will be determined based on … . The organization sees
a total of ____ eligible patients per year.

*[If sampling will be used: "*A ___% sample of eligible records was reviewed by ___. Records
were selected by the following process … Steps taken to ensure reliability of the ratings: (list)]

B. *Measures and Data Collection Procedure*
[generally, DNP projects have 1-2 outcome measures, 2-3 process measures and 1-2 balancing measures]

Outcome Measures: [*these describe what happens because of the interventions that you are*
studying. This should match your Program Evaluation Question
>   Measure: What you are measuring? NOT your goal /intent

Goal: [*for categorical measures, state the goal as "improvement to xx%" (an exact number), not only "improvement by xx%" (a percentage of the starting point)*]

Definitions: *[optional, can aid understanding of the goal you are trying to achieve]*

Baseline Data: [***If baseline data are not available you should plan to collect them.]***
  [If your measure is starting from 0%, discuss with your advisor to determine whether this is appropriate. Even if the program you are evaluating is newer, there is likely to be baseline data to reflect why this program approach is necessary. Changes starting from a level less than 5% tend to be statistically un-testable; on the other hand, very large, proposed changes might be unrealistic. If you do start from 0, provide justification for your proposed improvement (research, etc.)].

Process Measures: [*these describe what you do, how you monitor your intervention.]*
  Measure: What you are measuring – NOT your goal /intent

Goal: [*for categorical measures, state the goal as "improvement to xx%" (an exact number), not only "improvement by xx%" (a percentage of the starting point)*]

Definitions: *[optional, can aid understanding of the goal you are trying to achieve]*

Baseline Data: *[see notes above, however, since many processes may be new as a result of your program, some baselines for process measures will be 0.]*

Balancing Measures: [*these describe any potential adverse effects or unintended consequences of the program/project, such as an increase in re-hospitalizations after a program to create a more efficient discharge procedure, or if the program is focused on a new strategy to increase access to care, perhaps other unintended consequences are occurring related to fewer slots being available for emergencies. Not every project requires balancing measures, but for most you can think of potential unintended consequences that you want to measure to show you're your program design recognized and avoided them*]

Measure: What you are measuring – NOT your goal /intent

Goal: [*for balancing measures, the goal is no change from baseline – e.g., "maintain at xx%" -- indicating that the outcome didn't get <u>worse</u>*]

Baseline Data: *[see notes above]*

C. <u>Data Collection Process and Data Security Plan:</u> [*e.g., an existing report in an EMR, a newly created report in an EMR, manual chart abstraction (by whom, how long does it take), questionnaires, etc.; please be as specific as possible*] Data will be stored in … [*e.g., Microsoft Excel, SPSS*]

D. Plan for PDSA cycles and potential EBP Interventions
The following aspects of this Program Evaluation project will be the focus of PDSA cycles and potential interventions, based on the literature, to achieve the goals of this project …
*[By definition, a PDSA cycle is iterative and uses what you've learned in one cycle to inform the next cycle. List a few **possible** interventions here that may be part of your PE. These might be designed to address different barriers identified in your needs assessment for the program. **This is not the final list of all possible interventions, just a starting point for subsequent PDSA cycles**. [when you have developed and/or are evaluating a program, there are steps along the way where elements of the program may be recognized as not going as expected, requiring a revised approach to achieve the stated outcomes. It is expected that if an initial intervention does not succeed, you will return to the interprofessional team, consider the data you have collected thus far, and design new or implement evidence-based interventions that either make the first intervention more effective or replace it with another one.]*

D. Potential Scientific Problems
[*Describe potential problems specific to your project and possible solutions to overcome the barriers (e.g. barriers in collecting data, implementing changes, obtaining cooperation, coping with shifts in organizational priorities and personnel, financial limitations, etc., and how to potentially overcome them). The goal of this section is to help the DNP Project Approval Board determine whether the project is likely to succeed in reaching its goals, given the time and the resources available, or whether modifications are recommended to increase the chances that you will have a successful project outcome*].

E. Data Analysis Plan
Outcome and process measures will be tracked with … [*e.g., a table, a run or control chart*].
Data points will be added to these charts … [*with what frequency? Monthly? Bi-weekly?*].
Pre-post intervention data will be analyzed using … [*e.g., Fisher's exact test, chi-square or McNemar test, an independent or dependent t-test*].
Descriptive statistics will be reported including … [*e.g., frequencies, means, odds ratio effect size measures. If you are using changes in proportions, Chi Square or Mcnemar test will be normally used; if you are using data on a scale rather than percentages, report changes as mean and standard deviation (t-tests), not as percentages, and use the appropriate power calculator for t-tests*].

Please schedule a consultation with the Statistical Support team at CU Nursing in the Center for Nursing Inquiry about what type of analysis to use for various types of data before submitting your proposal. Information as to scheduling this is provided in DNP coursework in Canvas.

V.   Summarize Knowledge to be Gained
[*sample language for PE*]: This Program Evaluation project was designed to address a gap in care…(care delivery, lack of access to care, need for education to improve health outcomes, etc…) to evaluate implementation of a change in local practices as a result of this program and compare to regional or national standards. Knowledge to be gained involves the implementation

of existing evidence-based practice. As such the project outcomes are not generalizable; however, they may be disseminated to other care settings that face similar problems so they can consider strategies used in this project that might apply to their setting.

VI.   References (citations: Follow APA (American Psychological Association) guidelines and formatting)

VII. Appendices

A Logic Model is required for Program Evaluation projects. It can be integrated directly in the proposal or as an appendix. Additional appendices may include:
- Other needs assessment tool (fishbone, SWOT)
- Baseline data documentation
- Other visual depictions or documents specific to project justification