



Q and A with RCC's newest Doctor...of Nursing
Susan Roche, DNP, CRNP, AOCNP, APRN-BC

Congratulations on a significant accomplishment! Please tell us about it and how it benefits patients at RCC.

Q: *What specifically is your new degree?*

A: I received my DNP, Doctor of Nursing Practice, from Robert Morris University located in Pittsburgh.

Q: *What does this training involve?*

A: The DNP is a practice doctorate, as opposed to a theoretical doctorate, PhD. It is comparable to an MD vs PhD in Medicine only in Nursing. The MD is a practicing doctor while a PhD is theory building doctorate. With healthcare reform, nurse practitioners will serve in a more advanced role requiring the doctorate in nursing practice. The requirements of the DNP program included years of experience as a nurse practitioner which has traditionally only required a Master's degree. By 2015, all nurse practitioners will be required to obtain a DNP in order to begin practice. Those without DNP's will probably be grandfathered, but I didn't want to be behind in the future requirements of the profession

Q: *What are some highlights of this training?*

A: The doctoral program prepared us to research evidence based practice. As healthcare costs continue to soar, we must look to therapies which have research proven success in order to justify the cost. The additional research approach to care has taken nursing practice to the next level.

Q: *How does it benefit patients at RCC?*

A: Symptom management and holistic care has always been the focus of nursing practice. The DNP allows nurses to apply research theories to practice to improve patient outcomes. Nurses are the only professional to care for the physical concerns of the patient as well as the psychosocial impact of health and illness. Nurses individualize care based upon the patient as a unique person dealing with disease and illness. We take all the objective research findings and create a unique approach to each individual patient optimizing their treatment outcomes, both physically and psychologically.

Q: *How has it changed what you do?*

A: I look at interventions with a more critical eye. “Show me the data” has become a more common saying of mine. Sometimes medical intervention has been done because, “we have always done it that way”, or “that was the way I was taught.” Now I do the homework more often looking for good quality research studies which document treatment effectiveness. More recently I joined the UPMC treatment pathway committee to review the most recent research that determines our most effective treatment approaches. I’m looking forward with working with the professionals dedicated to excellence in patient care, and feel on par with my research colleagues.

Q: *Is there a certification related to it – some sort of licensure and/or final exam that’s notable?*

A: I have already achieved certifications in advanced nursing practice in oncology and adult health. The DNP requirement includes completing a capstone research project that must be defended with the doctoral nursing faculty and be written in a publish-ready format. I completed my project by developing a simulation based educational program for oncology nurses on the structural oncologic emergencies. I developed the simulation modules and sent them out to national nursing oncology experts which validated the program content. Once the program was validated I piloted the educational program with oncology nurses locally who are members of the Northwestern Pennsylvania Chapter of the Oncology Nursing Society. I measured the nurses’ perceptions of educational effectiveness after they participated in the educational program. The program was well received and my research project was a huge success. I plan to submit the study for publication in the near future.