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Curricular Report No. 2017-18-3 from the Graduate Council to the Faculty Senate: New Specialization in Psychiatric Mental Health Nurse Practitioner (PMHNP)

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Serial Number #17-18-8

TO: President David Dooley
FROM: Mark Conley, Chairperson of the Faculty Senate

1. The attached BILL titled, Curricular Report No. 2017-18-3 from the Graduate Council to the Faculty Senate: New Specialization in Psychiatric Mental Health Nurse Practitioner (PMHNP), is forwarded for your consideration.
2. This BILL was adopted by vote of the Faculty Senate on November 16, 2017.
3. After considering this bill, will you please indicate your approval or disapproval. Return the original, completing the appropriate endorsement below.
4. In accordance with Section 10, paragraph 4 of the Senate's By-Laws, this bill will become effective December 7, 2017 three weeks after Senate approval, unless: (1) specific dates for implementation are written into the bill; (2) you return it disapproved; or (3) the University Faculty petitions for a referendum.



Mark Conley
Chairperson of the Faculty Senate

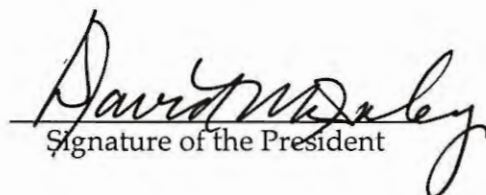
November 16, 2017

ENDORSEMENT

TO: Chairperson of the Faculty Senate

FROM: President of the University

- a. Approved ____.
- b. **Approved subject to Notice of the Council on Postsecondary Education** .
- c. Disapproved ____.



Signature of the President

11.28.17

(date)

**THE GRADUATE SCHOOL - UNIVERSITY OF RHODE ISLAND
NEW PROGRAM REPORT FROM THE GRADUATE COUNCIL TO THE
FACULTY SENATE
CURRICULAR REPORT 2017-18-3; 16 October 2017**

At Meeting No. 510 held on 16 October 2017, the Graduate Council approved the attached proposal that is now submitted to the Faculty Senate.

**SECTION I
ABSTRACT AND BACKGROUND INFORMATION**

ABSTRACT (modified from proposal)

The Graduate Council approved a proposal from the College of Nursing to create a *new Specialization in Psychiatric Mental Health Nurse Practitioner (PMHNP), within their well-established graduate program*. The PMHNP is a new credit bearing program whose primary goal is to educate nurses with a minimum of a BS degree in nursing and one year experience as registered nurses (RNs), prior to taking their first clinical course in psychiatric nursing, to become Psychiatric Mental Health Nurse Practitioners. There is an urgent need to prepare PMHNPs in RI who will provide psychiatric/behavioral mental health care to children, adolescents, adults and older adults in inpatient and outpatient settings, community mental health settings, community health settings and in primary care. The strength of the PMHNPs is based on the impact these highly qualified nurses can make on the care of patients with a psychiatric disorder across the life span, regardless of their health insurance or economic status.

BACKGROUND (modified from proposal)

In 2008, the American Association of Colleges of Nursing (ANCC) endorsed the Consensus Model for Advanced Practice Registered Nurse (APRN) Regulation. Based on a national survey of psychiatric clinical nurse specialists (PMHCNS) and psychiatric mental health nurse practitioners (PMHNP), a significant overlap of roles and educational preparation was identified. The need for advanced practice psychiatric mental health nurses for primary care and behavioral health was also identified as a national priority. Considering national changes in health care it was determined the best future preparation for advanced psychiatric practice registered nurses in the psychiatric mental health area of specialization would be the PMHNP.

**SECTION II
RECOMMENDATION**

The Graduate Council approved the proposal to create a *new Specialization in PMHNP, within their graduate program* at its Meeting No. 510 held on 16 October 2017, and forwards it to the Faculty Senate with a recommendation for approval.

OF RHODE ISLAND

**MODIFIED FORM
FOR NEW INTERDISCIPLINARY MINORS, AND NEW
TRACKS/OPTIONS/SUB-PLANS/CONCENTRATIONS**

**A Proposal for: A Proposal for a Psychiatric Mental Health Nurse Practitioner
Area of Concentration
Within the Graduate Program**

Date: Fall, 2017

A. PROGRAM INFORMATION

A1. Name of institution

University of Rhode Island

A2. Name of department, division, school or college

College of Nursing

**A3. Title of proposed program and Classification of Instructional Programs
(CIP) code 51.3810 (PMHN)**

Psychiatric Mental Health Nurse Practitioner

**A4. Intended initiation date of program change. Include anticipated date for
granting first degrees or certificates, if appropriate.**

Initiation date: Fall 2018
First degree date: Fall 2020

A5. Intended location of the program

Providence, Nursing Education Center

A6. Description of institutional review and approval process

The proposal was reviewed under the process established by the Faculty Senate in which the Graduate Council serves as the Coordinating and Review Committee. Announcements of the receipt of the proposal were sent to the President of the University of Rhode Island and Joint Educational Policy Committee, the Provost and the Council of Deans, the Budget Office and Department Chairs and Directors.

Department
College

Approval Date
NA
January 29, 2017

CAC/Graduate Council
Faculty Senate
President of the University

A7. Summary description of proposed program (not to exceed 2 pages)

The Psychiatric Mental Health Nurse Practitioner (PMHNP) is a new concentration within the well-established and fully accredited Graduate Program in the College of Nursing (CON) at the University of Rhode Island (URI). The primary goal for this program is to educate nurses with a minimum of a BS degree in nursing and one year experience as registered nurses (RNs), prior to taking their first clinical course in psychiatric nursing, to become Psychiatric Mental Health Nurse Practitioners. In the future a post-masters certificate may be considered to prepare graduate degree nurse practitioners in other specialties and psychiatric clinical nurse specialists (PMHCNS) to become certified as PMHNPs .

In 2008, the Consensus Model for Advanced Practice Registered Nurse (APRN) Regulation was endorsed by the American Association of Colleges of Nursing (ANCC). Based on a national survey of psychiatric clinical nurse specialists (PMHCNS) and psychiatric mental health nurse practitioners (PMHNP) a significant overlap of roles and educational preparation was identified. The need for advanced practice psychiatric mental health nurses for primary care and behavioral health was also identified as a national priority. Considering national changes in health care it was determined the best future preparation for advanced psychiatric practice registered nurses in the psychiatric mental health area of specialization, would be the PMHNP. This new role will be able to serve a larger population with a life span perspective. Given these changes, the national certification examination for the PMHCNS was retired in December, 2016 by the American Nurses Credentialing Center (ANCC). Although PMHCNSs will be grandfathered in the state of Rhode Island and will be able to continue practicing in the state and recertify, many graduates from the Psychiatric Mental Health Clinical Nurse Specialist program at URI, and other programs, wish to pursue further graduate education to be able to sit for the ANCC PMHNP certification examination. This certification will provide our graduates with greater flexibility and enhanced career opportunities.

A8. Signature of the President

David M. Dooley

A9. Person to contact during the proposal review

Name: Patricia Burbank, DNSc, RN, FAAN
Title: Associate Dean

Phone: 874-5314
 Email: pburbank@uri.edu

A10. List and attach any signed agreements for any cooperative arrangements made with other institutions/agencies or private companies in support of the program.

Mr. Charles T. Jones	CEO/President Thundermist Health Center
Mary Leveillee, PhD, RN	Butler Hospital
Debra Hurwitz, MBA, RN	CTC-RI Co-Director
Mary Dwyer MS, M.Ed, PMHCNS-BC	Senior VP, Community Care Alliance
Christine Gadbois DNP, APHN-BC,RN	Director of Population Health and Nursing
Mary J. Edens MSN, RN, NE-BC	Administrative Director, Hasbro Children's
Mary Leveillee PhD, RN, PMHCNS-BC	SVP, Patient Care Services CNO, Butler Hospital
Mr. Louis R. Giancola	President and CEO, South County Hospital

B. RATIONALE: There should be a demonstrable need for the program.

B1. Why is the new program being developed?

There is an urgent need to prepare PMHNPs in RI who will provide psychiatric/behavioral mental health care to children, adolescents, adults and older adults in inpatient and outpatient settings, community mental health settings, community health settings and in primary care. The high unemployment rate in RI has forced more people from the private to the public health care system with inadequate health care insurance. The strength of the PMHNPs is based on the impact these highly qualified nurses can make on the care of patients with a psychiatric disorder across the life span, regardless of their health insurance or economic status. In 2015, great strides were made in integrating primary care and psychiatric care. The passage of both the Mental Health Parity and Addiction Equity Act and the Affordable Care Act created the "perfect storm" facilitated integration of these two areas. These new payment models reward healthcare providers for improving patient outcomes while reducing overall costs and research demonstrates that integrating care can do just this. In fact, a 2012 Cochrane Systematic Review found better outcomes and reduced costs in the integrated treatment of both anxiety and depression.

B2. What is the economic need and workforce data related to the program?

- a. Provide information on jobs available as a result of successfully completing the certificate or degree: job titles, job outlook/growth, and salaries.**

In fall 2016, Dr. Ginette Ferszt, was invited to attend a meeting with the Integrated Behavioral Health (IBH) Sub-committee of the Care Transformative Collaborative (CTC) in Rhode Island. The CTC-RI was launched in 2008 by the Office of the Health Insurance Commissioner. The Integrated Behavioral Health Sub-Committee is charged with supporting the

development of, and ongoing learning, around sustainable approaches to integrated behavioral health into a wide variety of primary care practices. The IBH committee acted as content experts informing the implementation of the CTC IBH pilot project and work in partnership with the health plans in program oversight and evaluation and in reporting to the CTC Board of Directors. The need for PMHNPs was emphasized. Dr. Ferszt requested that a needs assessment be conducted in order to determine future needs of PMHNPs in Rhode Island.

In 2016, with consultation from Dr. Ferszt a survey was developed, sent and completed by 40 agencies/providers in the State of RI. Thirteen agencies were currently searching for a PMHNP. Fourteen agencies reported that in the next five years they would need at least three more PMHNPs; seven reported that they would need at least two more PMHNPs. Thirty agencies reported that the primary role for these providers would be for psychiatric assessment, diagnosis and prescribing. Twenty-seven providers stated that the role would also include consultation with other health providers and 12 also expected the PMHNP to provide psychotherapy. **Thirty-two stated they believe a PMPNP is extremely important in behavioral health integration. Thirty-three noted they would be willing to provide a letter of support to URI CON** for this program recognizing the critical need in the state for nurse practitioners prepared in this specialty.

Nationally, there are approximately 222,000 practicing nurse practitioners. Of that number, approximately 3.4% are certified as PMHNPs. There is an urgent need for PMHNPs across the country to meet this growing demand. The salary for beginning certified PMHNPs in RI ranges from \$96,000 to \$150,000.

B3. What entities are advocating for this program? Was an advisory board used to develop the curriculum?

See above and attached letters. The curriculum was developed in consultation with practitioners, educators and national leaders in the field.

C. INSTITUTIONAL ROLE: The program should be clearly related to the published role, scope, and mission of the institution and be compatible with other programs and activities of the institution.

C1. Explain how the program is consistent with the published role, scope, and mission of the institution and how it is related to the institution's Academic Plan.

The University of Rhode Island is the State's public learner-centered research university. URI is the only public institution in Rhode Island offering undergraduate, graduate, and professional students the distinctive educational opportunities of a major research university. Our undergraduate, graduate, and professional education, research, and outreach serve Rhode Island and beyond.

Students, faculty, staff, and alumni are united in one common purpose: to learn and lead together (URI, 2006).

The College of Nursing (CON) mission statement is consistent with the university mission, particularly in terms of experiential learning. Nursing “practice” is an integral component of the CON mission. This proposal has received the support of Barbara Wolfe, Dean of the College of Nursing, advanced practice faculty colleagues, the graduate council from the College of Nursing, and the faculty in the College of Nursing.

The Psychiatric Mental Health Nurse Practitioner concentration prepares advanced practice nurses to deliver direct, autonomous care in collaboration with psychiatrists, physicians and other members of interdisciplinary teams. It fits well with the role and mission of the University and the current Graduate Program. Advanced practice registered nurses integrate theory and research into evidence based practice in a variety of settings including hospitals, private practices, schools, home care, community health clinics, community mental health centers, long term care facilities and geriatric care centers. The College of Nursing faculty members in the existing nurse practitioner concentration share interests and regularly interact with faculty across the University in the areas of thanatology, human development, gerontology, psychology, physical therapy, and pharmacy. The existing graduate program will prepare newly educated PMHNPs as autonomous health care providers, to the state, region, and nation; and provide clinical educators for psychiatric mental health nurse practitioner students. The new area of emphasis will provide a greater depth of knowledge. Given that the graduate program at URI has been graduating nurse practitioner students since 1976, there are a large number of Master’s, post graduate certified, DNP and PhD alumni in Rhode Island and adjoining states who are potential candidates for a second specialty. The University of Rhode Island, College of Nursing will offer PMHNP students the opportunity to obtain a Graduate, Doctorate or post-graduate certificate.

D. INTER-INSTITUTIONAL CONSIDERATIONS:

D1. What are the similar programs in the state and region?

a. If similar programs exist, how is this program different or why is duplication necessary?

There are no other PMHNP programs in the state of Rhode Island. Residents of RI who wish to become PMHNPs have had to seek programs outside of our state. There are three PMHNP programs in Massachusetts: Northeastern University; Massachusetts Institute of Health Professions; and Boston College; in Connecticut, Yale University and Fairfield University. There are no programs for PMHNPs in Vermont; there is one program in New Hampshire, Riviere University; there is one PMHNP program in Maine, University of Southern Maine.

- b. Have you communicated with other institutions about the development of this program and have any concerns been raised related to role, scope, and mission or duplication?**

Discussions with Dr. Jane Williams, Dean of the Rhode Island College School of Nursing, have occurred. She expressed no concerns about this program.

D2. How do courses in this program transfer to other schools?

The procedure for strengthening the articulation/ transfer component as required by the BOGHE does not apply to this application, because it is a graduate program. The procedure document clearly states the requirements apply to undergraduate programs only.

D3. How does this program align to academic programs at other institutions?

This program aligns with other regional and national programs at other institutions in terms of content and credits. Programs range from 45-55 credits and must meet the American Association of Colleges of Nursing (AACN) guidelines in order to be eligible to take the certification examination. (Appendix A)

D4. Are recipients of this credential accepted into programs at the next degree level without issue?

Graduates of the PMHNP area of emphasis are granted a Master's degree and therefore eligible to pursue a DNP or PhD.

D5. How does this program of study interface with degree programs at the level below them?

Similar to the other Nurse Practitioner programs at URI, BS students with an undergraduate degree in nursing will be able to apply to this program.

D6. Are cooperative agreements or affiliations established? If so, what?

Currently the College of Nursing at the University of Rhode Island has affiliation agreements with Lifespan-the Hasbro Children's Hospital, Newport Hospital, Miriam Hospital and Bradley Hospital; Care New England- Butler Hospital, and Kent Hospital, as well as agreements with South County Hospitals, Roger Williams Hospital and federally funded qualified health clinics. These agreements have been long standing with each of these institutions and we have affirmed many of them as adequate sites for PMHNP students. In addition, agencies that have had URI CON students in the psychiatric mental health clinical nurse specialist program in the past, have also affirmed that they are interested in having PMHNP students in the future.

The following agencies/hospitals have agreed to provide clinical placements for PMHNP students: Letters of support are attached.

Providence Center
Thundermist
Quality Behavioral Health
South County Hospital
Butler Hospital
Hasbro Children's Hospital
Rhode Island Hospital
Community Care Alliance

E. PROGRAM:

E1. Are there pre-requisite courses? If so, please explain/list?

Undergraduate statistics

E2. Curriculum

- a. How many credit hours are required to graduate (include all general education and pre-requisites)?** 49 cr (Appendix B for Course Flow)
- c. What courses are required for the program?**

The PMHNP students will take the same core courses that all graduate students take at the College of Nursing:

- NUR 660 – Philosophical & Theoretical Foundations of Health Research (4 credits)
- NUR 651 – Advanced Methods in Nursing Research I (Qualitative Methods)
- NUR 652 – Advanced Methods in Nursing Research II (Quantitative Methods)
- HDF 527 – Health Care Policy
- NUR 520 – Graduate Study Seminar

The PMHNP courses build on advanced practice nursing courses already taken in the graduate program:

- NUR 535 – Pathophysiology for Advanced Practice Nurses – Clinical decision making based on synthesis of in-depth study of pathophysiological phenomena across the life span.
- NUR 582 – Pharmacotherapeutics in Advanced Practice Nursing – Integration of pharmacotherapeutic and decision-making theories with human pathophysiology.

The PMHNP courses are specialty level courses that have been developed by PMHCNS and NP faculty in consultation with practicing PMHNPs based upon national PMHNP competencies. NUR 501, NUR 502, NUR 518, NUR 513 and NUR 545, are the PMHNP didactic courses that will be taught by URI College of Nursing Faculty, and psychiatric mental health experts from the community as guest lecturers.

Clinical practice (NUR 514, 546, 547) courses will also be coordinated by URI college of Nursing Faculty and precepted by certified PMHCNS, certified PMHNPs, and psychiatrists. Placements take place across a variety of health care systems including psychiatric hospitals, acute emergency psychiatric services, community mental health centers, community health centers, office-based and private practices, integrated psychiatric and primary care, and substance abuse facilities.

Clinical experiences and required courses provide opportunities to meet all psychiatric-mental health population competencies required by the National Organization of Nurse Practitioner Faculties.

c. What are the new courses and descriptions that will go into the course catalog?

**NUR 501 PMHNP Physical Assessment and Diagnostic Reasoning
Course Description:**

Development of physical assessment and diagnostic reasoning across the Lifespan specifically designed for psychiatric mental health advanced practice nurses (Lec2, Lab:1).

**NUR 502 PMHNP Psych Assess and Differential Diagnosis
Course Description:**

Obtain Knowledge to accurately conduct comprehensive psychiatric mental health assessments and determine differential diagnosis across the lifespan (Lec: 3 credits).

**NUR 518 PMHNP Neuro-psychopharmacology
Course Description:**

Integrates principles of neurobiology and psychopharmacology for effective psychotherapeutic management of individuals with psychiatric mental health problems across the lifespan. (Lec: 3 credits).

**NUR 513 PMPHNP Integrated Treatment for Adults/Older Adults
Course description:**

Explores major psychotherapeutic modalities using an integrated evidence-based approach to psychotherapy for adults and older adults (Lec: 3 credits)

**NUR 514 PMHNP Practicum I
Course Description:**

Application of knowledge and skills to assess, diagnose and treat adult and older adult clients with common psychiatric disorders (Lab : 3 credits).

NUR 545 Integrated Treatment for Child/Adoles/ Families
Course Description:

Explores major psychotherapeutic modalities using an integrated evidence based approach to psychotherapy of children, adolescents and their families. (Lec: 2 credits).

NUR 546 PMHNP Practicum II
Course Description:

Application of psychotherapeutic strategies to provide comprehensive care to children and adolescents with common psychiatric disorders and their families. (Lab : 6 credits).

NUR 547 PMHNP Practicum III
Course Description:

Application of knowledge and skills to assess, diagnose and treat clients across the lifespan with complex psychiatric disorders. (Lab : 6 Credits).

d. Are there specializations and options? If so, please describe.

A post Master's certificate option may be available for master's prepared certified psychiatric mental health clinical nurse specialists and master's prepared certified nurse practitioners who wish to pursue the PMHNP. A gap analysis of these applicants will be done to determine which courses they need to complete the PHPNP concentration.

e. Is the program content guided by program-specific accreditation standards or other outside guidance?

The overall curriculum plan is derived from the "Essentials of Masters Education for Advanced Practice Nurses" from the American Association of Colleges of Nursing (AACN) and the (National Panel of ACNP Competencies, 2004). Essentials of Graduate Education and the Competencies for PMH

f. What are the learning goals (what students are expected to gain, achieve, know, or demonstrate by completion of the program)?

There are seven program goal areas in the Graduate Program in the College of Nursing:

Role and Leadership: Assume a functional role in advanced practice nursing, nursing administration or nursing education and contribute to the health care of the client by assuming leadership in those roles.

Theoretical Knowledge: Articulate, synthesize, evaluate, and refine concepts, theories, and knowledge base relevant to the understanding of health, health care delivery, the practice of nursing, and to the improvement of client care.

Nursing Practice: Engage in advanced practice roles integrating advanced and new information from a broad spectrum of knowledge, and develop innovative practice approaches to increase the effectiveness of client care.

Intra and Interpersonal Relationships: Communicate effectively and establish collaborative relationships for identifying, investigating and resolving problems that impact on direct care and other health systems.

Professional Responsibilities: Engage in the identification and resolution of professional nursing issues and assume responsibility for identifying, analyzing and incorporating into practice new developments, and knowledge relevant to advanced practice roles.

Societal Responsibilities: Engage in the identification and resolution of significant health issues at local, regional, national, and global levels incorporating the knowledge of societal, legal, cultural, political, economic, and ethical forces.

Research: Participate in the research process to address clinically relevant questions, promote research translation to practice, and foster a climate that supports critical inquiry in clinical practice.

F. FACULTY AND STAFF: The faculty and support staff for the program should be sufficient in number and demonstrate the knowledge, skills, and other attributes necessary to the success of the program.

F1. What are the number of each needed?

Two certified advanced practice psychiatric mental health nurses (psychiatric mental health clinical nurse specialist/ psychiatric mental health nurse practitioner) with experience teaching graduate students in this concentration will be needed for this program. Current support staff are adequate in meeting the needs of this new area of emphasis.

F2. Are these new positions or reassignments?

One new tenure line faculty member, is a PhD prepared certified psychiatric mental health practitioner is currently allocated from a search that is now completed. The second position will be a reassignment of responsibilities.

F3. What are the minimal degree level and academic/technical field requirements and certifications required for teaching in this program?

Requirements for teaching in this program are certified psychiatric mental health nurse practitioners and/or psychiatric mental health clinical nurse specialists.

Personnel expenses were calculated using the salary associated with the number of classes associated with the Psych NP curriculum. This starts off lower, and as the program grows, increases to accommodate the full program running each semester. Since this program will require administrative support, the salary associated with adding another program has been included. Fringe benefits were also included at a rate of fifty percent.

G. STUDENTS:

G1. How are students selected for the program?

Applicants who apply to the graduate school identifying the PMHNP area of emphasis as there intended program of study and meet the requirements of the graduate school.

G2. Are there admission requirements?

Admission decisions will be based on a comprehensive review of applicant qualifications presented as a total package. The following criteria will be used as the guidelines for admission decisions:

Completed application with all materials.

- Minimum GPA of 3.0
- Baccalaureate degree in nursing accredited by the American Association of College of Nursing or the National League for Nursing with an upper-division major in nursing.
- Eligibility for RN licensure in Rhode Island
- Positive recommendations
- Statement of purpose which reflects writing ability and goals for pursuing advanced study in nursing
- One year of clinical nursing experience in psychiatric mental health nursing, prior to enrollment in the advanced practice clinical courses.
- A basic statistics course is a prerequisite for NUR 652.
- Candidates with non-nursing degrees will be evaluated on an individual basis. Completion of challenge of upper-division nursing courses is required prior to acceptance into the master's program.

The number of new students was determined using a spreadsheet of inquiries from prospective applications. Ginette Ferszt has collected names from both individuals and health centers who are interested in the program over the past few years. We do not expect any students to transfer in from the institutions existing programs.

G3.-G6 What is the primary source of students? New students or drawn from other programs?

Industry sponsored students/ employees? Describe.

Potential Pool of Students:

- (1) Nurses with a baccalaureate degree in nursing. This pool will include all nurses working in psychiatric mental health facilities, health care facilities with psychiatric inpatient units and other nurses with an interest in psychiatric nursing. All students will need one year of work experience in psychiatric nursing prior to taking their first clinical course.
- (2) A gap analysis of applicants who are Master's Prepared Certified Psychiatric Clinical Nurse Specialists will be done to determine which courses they need to complete the PHPNP concentration.
- (3) Students who are in undergraduate nursing programs throughout the state and region are also potential students.
- (4) Master's prepared Certified Nurse Practitioners who wish to become certified as PMHNPs.

G4. What is the estimated number of students in the program? 8-12

The number of new students was determined using a spreadsheet of inquiries from prospective applicants. Ginette Ferszt has collected names from both individuals and health centers who are interested in the program over the past few years. We do not expect students to transfer in from the institutions' existing programs.

No student assistance is anticipated.

G5. What is the estimated number of annual graduates? 8-12

H. EVALUATION:

H1. How will the program be evaluated?

a. Performance measures to evaluate the program.

Courses will be evaluated using standard course evaluation forms for each didactic and clinical course and consistent with the College of Nursing Program Evaluation Committee plan. Courses will be evaluated every semester they are offered for the first two years and thereafter every three years. The overall area of emphasis will be evaluated by students and their employers at one and five years post-graduation.

b. Will the program be accredited? If so, when? How?

The College of Nursing received its 10-year accreditation in October, 2016. This program will be submitted for accreditation

I. WHAT SPECIAL EQUIPMENT OR RESOURCES ARE NEEDED?

I1. Special instructional resources and services needed? (Clinical space, internships, proctors)

Operating instructions in the form on instructional resources were included in the proposal request. These items include honorariums for guest speakers, books for instructors to update the curriculum and evaluation materials.

I2. Facilities and capital equipment?

J. IS THE PROGRAM FINANCIALLY VIABLE?

J1. ALL PROPOSALS: Complete the Rhode Island Office of Postsecondary Commissioner [Budget Form](#) demonstrating either

We will request an additional \$1,500 per year of additional resources to run the psych mental health specific courses. This additional cost is associated with guest lectures, evaluation materials, and books for faculty to keep up to date with current trends in behavioral health.

Faculty teaching in this program are already either teaching in the current curriculum or are budgeted for and in the process of being hired. The support staff are also pre-existing and will not need additional funding. Approximately \$1,500 of current resources will be used to support the addition of new students in entering into the current curriculum. This cost is associated with guest lectures, evaluation materials, and any summer monies distributed for curriculum updating to accommodate the increase of students.

Appendix A

Colleges/Schools of Nursing with Graduate Programs in Psychiatric Mental Health Nurse Practitioner

Boston College	43 cr
Binghamton University	49 cr
Drexel University (PHIL)	52 cr
Duke University	49 cr
Georgia State University	48 cr
Hunter-Bellevue School of Nursing(NY)	48 cr
Kent State University	49 cr
MGH (Boston)	48 cr
Northeastern University	43 cr
Regis College (MASS)	49 cr
University of Colorado	50 cr
University of Nebraska	45 cr
University of North Carolina	50 cr
University of Pennsylvania	50 cr
University of Rochester	54 cr
University of South Carolina	48 cr
University of Southern Maine	53 cr
University of Tennessee	52 cr
University of Texas (Austin)	48 cr
Virginia Commonwealth University	47 cr
20 colleges/schools	Average 48.75 cr

Appendix B

PMHNP Full time

Bold Courses are Taken by all Students in Nurse Practitioner Concentrations

Fall 2018	Spring 2019
NUR 660 Philosophical 4 cr NUR 535 Pathophysiology 3 cr NUR 501 Physical Assessment 3 cr	NUR 651 Qual Research 3 cr NUR 582 Pharmacology 3 cr NUR 502 Assess & Diff Dx 3 cr
Fall 2019	Spring 2020
NUR 518 Neuropsychopharm 3 cr NUR 513 PMHNP Adults 3 cr NUR 514 PMHNP Pract I 3 cr	HDF 527 Policy 3 cr NUR 545 PMHNP Childr 2 cr NUR 546 Pract II 6 cr
Fall 2020	
NUR 547 Practicum III 6 cr Nur 520 Grad Seminar 1 cr Nur 652 Quant Res 3 cr	Total 49 cr

PMHNP Part Time

Fall 2018	Spring 2019
NUR 660 4 cr NUR 535 3 cr	NUR 651 3 cr NUR 582 3 cr
Fall 2019	Spring 2020
NUR 501 3 cr NUR 518 3 cr	NUR 652 3 cr NUR 502 3 cr
Fall 2020	Spring 2021
NUR 513 3 cr NUR 514 3 cr	NUR 545 2 cr NUR 546 6 cr
Fall 2021	Spring 2022
NUR 547 6 cr	HDF 527 3 cr NUR 520 1 cr

Post Graduate Certificate

GAP Analysis to determine coursework

Ex. PMHCNS

Pre-requisites: NUR 535 and NUR 582

Fall 2019		Spring 2020	
NUR 501	3 cr	NUR 502	3 cr
NUR 518	3 cr		
NUR 513	3 cr	TOTAL	15 cr
NUR 514	3 cr		

NEW PROGRAM ASSESSMENT PLAN REVIEW

DATE of SLOAA Review:
01/06/17
DATE of LOOC Review:
01/07/17
LOOC Chair

Academic Program/Degree: Psychiatric Mental Health Nurse Practitioner (area of emphasis, abbreviated form)

College: College of Nursing

Date New Program Assessment Plan Submitted: January 6, 2017 (prior submission and discussion 12/5; draft full plan resubmitted 1/5)

Faculty Member(s) Submitting Plan Proposal: Ginette Ferszt (Program Director), Pat Burbank (Department Chair)

F E E D B A C K	Strengths:		
	SLOAA:		
	<ul style="list-style-type: none"> The Assessment Plan within the proposal details the specific skills, knowledge and competencies students will acquire and be able to demonstrate within this specialized Nurse Practitioner practice area. The large number of program goals reflect national standards and are clearly defined by the learning outcome statements which link to the curriculum The curriculum map presents substantial requirements and details where students will practice and reinforce their learning, ensuring students have repeated opportunity for building on their coursework. The timeline presents assessment for all goals during the next 3 rounds through at least on outcome, sometimes using the same student evidence to assess multiple outcomes. 		
	LOOC: Agree with the SLOAA recommendations. Plan is sound.		
	Suggestions for improvement:		
	SLOAA: Suggestions were responded to by the program during preliminary planning and discussions.		
	LOOC: Any consideration given to taking pertinent courses in other colleges/departments such as Pharmacy and Psych?		
	Issue(s) of note:		
	SLOAA: N/A		
	LOOC: N/A		
Assessment Plan Designation:			
1 <input checked="" type="checkbox"/>	2	3	
The Assessment Plan is ready for implementation	The Assessment Plan can be implemented after minor revisions, as indicated, and does not require further review	The Assessment Plan requires revisions, and should be submitted for further review after revisions, by date: _____	

Program Information		Reviewer Ratings & Comments			
Information box complete		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> Incomplete		<i>Suggestions:</i>	
Criteria	<i>Efficacy of Plan Description & Content</i>				<i>Suggestions for improvement</i>
	Less Developed	Developing	Well Developed	Not addressed	
PART I	1. Program goals				
	a. Broad statements of program learning goals	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	b. Limited in number (ideally 2-5)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/> (Appropriate for this program)
PART II	2. Learning outcomes/competencies				
	a. Linked to goals (numbered 1.1 etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	b. Each goal is represented by at least one outcome	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	c. Statements are observable/measurable	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	d. Directed at what students will know or be able to do	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	e. Reasonable number (ideally 1-3 per goal)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	3. Curriculum Map				
	a. Program requirements are listed, developmentally when possible	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	b. Outcomes are linked to appropriate requirements	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

		Reviewer Ratings & Comments				
Criteria		<i>Efficacy of Plan Description & Content</i>			<i>Suggestions for improvement</i>	
		Less Developed	Developing	Well Developed	Not addressed	
P A R T III	4. Assessment Timeline (3-year plan)					
	a. Assessment Reporting Period 1 is thoroughly presented	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
	b. Assessment Reporting Periods 2 and 3 are presented	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
	c. All goals are represented by at least one outcome somewhere in the 3 reporting periods	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
	d. Requirements are clearly stated and connected to outcomes (from Curriculum Map)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
	e. Evidence is stated for each designated outcome	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
	f. Selection of evidence takes advantage of existing indicators	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
	g. Evidence is stated in enough detail to guide assessment activities	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
	h. Evidence is feasible for collection within the timeline	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
	i. Methods for quantifying evidence are stated for each designated outcome	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Outstanding: rubrics need to be developed to include performance criteria
	j. Methods are appropriate for evidence	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

New Program Proposal
Student Learning Outcomes Assessment Plan
(Accredited, Non-Accredited and Certificate Programs)

DATE of SLOAA Review:
01/06/17
DATE of LOOC Review:
01/06/17
LOOC Chair

Each new program that is being proposed must have clearly articulated program learning goals (Section E3 of the new program proposal) and student learning outcome statements linked to curriculum and course experiences/ requirements (Section E4 of the new program proposal). The Plan also requires each program to create an assessment timeline as part of the Assessment Plan (Section E5 of the new program proposal) indicating a commitment to assess outcomes during the two-year assessment cycle, noting when and how learning outcomes assessment is planned).

Program Information:

Program:	Psychiatric Mental Health Nurse Practitioner area of emphasis
Academic year proposal submitted:	2017
Degree(s):	MS
Department Chair:	Patricia Burbank
Program Director:	Ginette G. Ferszt
Accredited Program:	<input type="checkbox"/> No <input type="checkbox"/> Yes, accreditation report due: Accreditation for all other programs in the College of Nursing was granted Oct. 2016; accreditation for this area of emphasis will be sought.

Program Goals:

(E3 of the proposal)

Goals should relate to the mission of the department, college, and university in which the program resides. These broad, general statements encompass what it means to be an effective program. Goals are evaluated by measuring specific student learning outcome statements related to the individual goal: what the program expects students to know and be able to do upon completion of the program.

#1	Role and Leadership: Assume a functional role in advanced practice nursing, nursing administration or nursing education and contribute to the health care of the client by assuming leadership in those roles.
#2	Theoretical Knowledge: Articulate, synthesize, evaluate, and refine concepts, theories, and knowledge base relevant to the understanding of health, health care delivery, the practice of nursing, and to the improvement of client care.
#3	Nursing Practice: Engage in advanced practice roles integrating advanced and new information from a broad spectrum of knowledge, and develop innovative practice approaches to increase the effectiveness of client care.
#4	Intra and Interpersonal Relationships: Communicate effectively and establish collaborative relationships for identifying, investigating and resolving problems that impact on direct care and other health systems.
#5	Professional Responsibilities: Engage in the identification and resolution of professional nursing issues and assume responsibility for identifying, analyzing and incorporating into practice new developments, and knowledge relevant to advanced practice roles.
#6	Societal Responsibilities: Engage in the identification and resolution of significant health issues at local, regional, national, and global levels incorporating the knowledge of societal, legal, cultural, political, economic, and ethical forces.
#7	Research: Participate in the research process to address clinically relevant questions, promote research translation to practice, and foster a climate that supports critical inquiry in clinical practice.

New Program Proposal

Student Learning Outcomes Assessment Plan (Accredited, Non-Accredited and Certificate Programs)

Curriculum Mapping:

(E4/E5 of the proposal)

Success in achieving goals is evaluated directly or indirectly by measuring specific learning outcomes related to the goal. Across the top of the matrix, list courses and other requirements for the program, ordered from left to right in the usual chronological sequence. Down the side of the matrix, list programmatic student learning outcomes associated with goals. Using the **Map Key** below, indicate the degree to which an outcome will be taught and/or assessed in relevant courses.

Program:		Course Numbers/Program Requirements:														
MAP KEY I = Outcome Introduced R = Outcome Reinforced E = Outcome Emphasized Student Learning Outcomes (Competencies) by Goal: Statements of observable, measurable results of the educational experience that specify what a student is expected to know or be able to do throughout a program. Outcomes are linked to overarching broader program goals and must be detailed and meaningful enough to guide decisions in program planning, improvement, pedagogy, and practice.		In addition to specific course requirements, please include other requirements that may not be associated with a course number such as internships, service learning, portfolios, and thesis/dissertation proposals or defenses, and/or comprehensive exams for graduate programs.														
		MASTERS CORE					APRN CORE			CONCENTRATION COURSES THEORY		PRAC				
		Nur 660	Nur 651	Nur 652	HDF 527/ Nur 527	Nur 520	Nur 501	Nur 535	Nur 582	Nur 502	Nur 513	Nur 518	Nur 545	Nur 514	Nur 546	Nur 547
Goal #1 (goals defined above)	SLO 1.1 Provide psychiatric consultation to other members of the health care team.					E		I		I		R	R		E	E
Goal #2	SLO 2.1 Evaluate theories and knowledge relevant to the understanding of health, health care delivery, nursing practice, and practice	I	I	I	R	E		I	I	R		R	E		E	E
	SLO 2.2 Apply knowledge of neuro-psychopharmacology to specific patient situations.							I	I	R		R	E		E	E
Goal #3	SLO 3.1 Assess, diagnose, provide mental health care, and evaluate patient outcomes with					E		I				R	E		E	E

¹ Goals were defined in Section B1 of the proposal, and can be referenced by number on pg. 2

New Program Proposal
Student Learning Outcomes Assessment Plan
(Accredited, Non-Accredited and Certificate Programs)

	individuals, across the lifespan. SLO 3.2 Incorporate knowledge of the clients' ethnic, cultural, religious, lifestyle and socio-economic status in the plan of care. SLO 3.3 Provide individual short term psychotherapy, crisis intervention, and group therapy in diverse settings.	I						I			R	R	E	E
Goal #4	SLO 4.1 Collaborate with other members of the health care team to provide comprehensive psychiatric mental health care to individuals across the lifespan.	I			I	E			I			R	E	E
Goal #5	SLO 5.1 Identify and resolve professional nursing issues related to advanced psychiatric mental health nursing practice in collaboration with other nursing colleagues.	I			R	E					E	E	E	E
Goal #6	SLO 6.1 Engage in the identification of and resolution of health issues related to psychiatric mental health care in society.	I	I		R	E					R	R	E	E
Goal #7	SLO 7.1 Incorporate current research findings in the treatment plan of clients with a psychiatric mental health disorder to patient health outcomes	I	I	I	R	E		I	I	I	R	R	E	E

Assessment Timeline:

(E5 of the proposal)

Indicates when and how student learning will be assessed based on learning outcome statements and expectations. Refer to the curriculum map to propose an assessment timeline in which you will plan to assess the program-level student learning outcomes. Note: Specify a 6-year plan for assessment to represent **3 two-year reporting periods:**

Assessment Reporting Period 1: the first academic year in which the program would plan to assess at least one outcome.

New Program Proposal Student Learning Outcomes Assessment Plan (Accredited, Non-Accredited and Certificate Programs)

Assessment Reporting Period 2: follows two years later, with plans defined for assessing another outcome(s).
Assessment Reporting Period 3: follows two years later, with plans defined for assessing additional outcome(s).
All goal areas should be assessed by at least one outcome during the 6-year plan.

Academic Reporting Year(s)	Outcome(s)	Course(s) and Other Program Requirements	Assessment Evidence (direct/indirect)	Assessment Method
	<p><u>WHICH</u> outcome(s) will you examine in each period?</p> <p>(Use number(s) from curriculum map, e.g. 1.1)</p>	<p><u>WHERE</u> will you look for evidence of student learning (i.e., what course(s)/program requirements)?</p> <p>(Designate for each outcome noted.)</p>	<p><u>WHAT</u> student work or other evidence will you examine in order to generate conclusions and recommendations?</p> <p>(Designate for each requirement noted.)</p>	<p><u>HOW</u> will you look at the evidence; what means will you use to quantify the evidence?</p> <p>(Designate for each source of evidence noted.)</p>
<p>Assessment Reporting Period 1¹: Report due Dec 2019 May 2020</p>	<p>GOAL 2 2.1 Evaluate theories and knowledge relevant to the understanding of health, health care delivery, nursing practice, and practice</p> <p>GOAL 3 3.1 Assess, diagnose, provide mental health care, and evaluate patient outcomes with</p>	<p>2.1NUR 520, comprehensive examinations.</p> <p>Nur 501, Nur 502 Nur 514/546/547</p>	<p>Direct Evidence: Written masters comprehensive examination.</p> <p>Nur 501 Physical exams demonstrate integration of theoretical concepts with psychomotor skills, through supervised</p>	<p>Create a rubric using evaluation criteria on a 3 point Likert scale to evaluate students' abilities to articulate, evaluate and apply theoretical concepts learned throughout the master programs to aspects related to health, health care delivery, nursing practice and practice improvement.</p> <p>Nur 501 Evaluation grids to evaluate each session on 6 performance indicators. These produce numerical</p>

New Program Proposal
Student Learning Outcomes Assessment Plan
(Accredited, Non-Accredited and Certificate Programs)

	individuals, across the lifespan.		physical examination of fellow students. Nur 502 Case Studies Nur 514/546 /546 Students complete competency based clinical evaluation tool, administered 2 times during semester in conjunction with clinical preceptors.	scores and numerical total for each session. Results in total clinical practice score at conclusion of semester. NUR 502 Create a rubric using evaluation criteria on a 3 point Likert scale National standardized clinical evaluation tool (scored for appropriate categories)
Assessment Reporting Period 2: Report due May 2022	GOAL 1 1.1 Provide psychiatric consultation to other members of the health care team. GOAL 4 4.1 Collaborate with other members of the health care team to provide comprehensive psychiatric mental	Nur 513, Nur 545 Nur 514/546/547	Case studies presented and discussed through seminars Students complete competency based clinical evaluation tool, administered 2 times during semester in conjunction with clinical preceptors.	Rubric National standardized clinical evaluation tool. (scored for appropriate categories)

New Program Proposal
Student Learning Outcomes Assessment Plan
(Accredited, Non-Accredited and Certificate Programs)

	<p>health care to individuals across the lifespan.</p> <p>GOAL 5 5.1 Identify and resolve professional nursing issues related to advanced psychiatric mental health nursing practice in collaboration with other nursing colleagues.</p>	Nur 513, Nur 545	Case studies presented and discussed through seminars	Rubric
<p>Assessment Reporting Period 3: Report due May 2024</p>	<p>GOAL 6 6.1 Engage in the identification of and resolution of health issues related to psychiatric mental health care in society.</p>	HDF 527/Nur	Final Course Paper	Rubric created in conjunction with HDF faculty
	<p>GOAL 7 7.1 Incorporate current research findings in the treatment plan of clients with a psychiatric mental health disorder to patient health outcomes</p>	Nur 513, Nur 545	Final Course Paper	Rubric

¹ Initial reporting year will depend on timeframe for program implementation and student cohort size

BUDGET AND FINANCIAL PLANNING

Adams House, 85 Upper College Road, Kingston, RI 02881 USA p: 401.874.2509 f: 401.874.5824 uri.edu/budget



DATE: September 11, 2017

TO: Nancy F. Neff
Coordinator, Faculty Senate

FROM: Linda Barrett
Director, Budget and Financial Planning

SUBJECT: Proposal for a new Psychiatric Mental Health Nurse Practitioner (PMHNP) Program

As requested in an email from Ginette Ferszt, Professor of the College of Nursing, dated May 8, 2017, the Budget and Financial Planning Office has reviewed the submitted documents related to the Proposal for a Psychiatric Mental Health Nurse Practitioner Program.

According to the request, the Proposal for a new Psychiatric Mental Health Nurse Practitioner Program will be offered through the College of Nursing and will provide URI Nursing students with the skills and knowledge of educating nurses with a minimum of a BS degree in Nursing and one year experience as registered nurses (RNs), prior to taking their first year clinical course in Psychiatric Nursing to become PMHNP certified. Ms. Ferszt referenced in the submission that a postmaster certificate may be considered to prepare graduate degree nurse practitioners in other specialties and Psychiatric Mental Health Clinical Nurse Specialists (PMHCNS) to become certified as PMHNP's.

The Budget and Financial Planning Office review of the Proposal indicates that the request for two (2) certified advanced Psychiatric Mental Health Nurses experienced in teaching graduate students will be needed for the program. These two (2) positions will be filled by a completed search and from a reassigned position with a change in responsibilities. In addition, we have determined that the projected revenue estimate for the first year will be \$128,000 and the projected expense estimate for the first year will be \$1,500 for the new Psychiatric Mental Health Nurse Practitioner Program.

Please let us know if you require any further information.

cc: Donald DeHayes Laura Beauvais
Dean Libutti Matt Bodah
Barbara Wolfe Catherine Curtain Miller
Anna Villa Ginette Ferszt
Cheryl Hinkson Colleen Robillard

Office/BudgetImpactStatements/psychiatricmental healthnursepractitioner/BudgetImpactStatementLetter.

Use this form for programs that can be pursued on a full-time basis, part-time basis, or through a combination of full-time and part-time attendance. Page 1 of 3

Choose one: Full-time Part-time Combination of full- and part-time

REVENUE ESTIMATES

	Year 1 ¹ 2018-2019		Year 2 2019-2020		Year 3 2020-2021		Year 4 2021-2022	
Tuition: In-State	\$12,706		\$12,706		\$12,706		\$12,706	
Tuition: Out-State	\$25,216		\$25,216		\$25,216		\$25,216	
Tuition: Regional	\$19,060		\$19,060		\$19,060		\$19,060	
Mandatory fees per student	\$1,598		\$1,598		\$1,598		\$1,598	
FTE # of New Students: In-State	6		7		8		9	
FTE # of New Students: Out-State	2		2		3		3	
# of In-State FTE students transferring in from the institution's existing programs	0		0		0		0	
# of Out-State FTE students transferring in from the institution's existing programs	0		0		0		0	
TUITION AND FEES	Newly Generated Revenue	Revenue from existing programs	Newly Generated Revenue	Revenue from existing programs	Newly Generated Revenue	Revenue from existing programs	Newly Generated Revenue	Revenue from existing programs
First Year Students								
In-State tuition	\$76,236.00	\$0.00	\$88,942.00	\$0.00	\$101,648.00	\$0.00	\$114,354.00	\$0.00
Out-of-State tuition	\$50,432.00	\$0.00	\$50,432.00	\$0.00	\$75,648.00	\$0.00	\$75,648.00	\$0.00
Regional tuition								
Mandatory fees	\$12,784.00	\$0.00	\$14,382.00	\$0.00	\$17,578.00	\$0.00	\$19,176.00	\$0.00
Second Year Students								
In-State tuition			\$76,236.00	\$0.00	\$88,942.00	\$0.00	\$101,648.00	\$0.00
Out-of-State tuition			\$50,432.00	\$0.00	\$50,432.00	\$0.00	\$75,648.00	\$0.00
Regional tuition								
Mandatory fees			\$12,784.00	\$0.00	\$14,382.00	\$0.00	\$17,578.00	\$0.00
Third Year Students								
In-State tuition					\$38,118.00	\$0.00	\$38,118.00	\$0.00
Out-of-State tuition					\$25,216.00	\$0.00	\$25,216.00	\$0.00
Regional tuition								
Mandatory fees					\$6,392.00	\$0.00	\$6,392.00	\$0.00
Fourth Year Students								
In-State tuition								
Out-of-State tuition								
Regional tuition								
Mandatory fees								
Total Tuition and Fees	\$139,452.00	\$0.00	\$293,208.00	\$0.00	\$418,356.00	\$0.00	\$473,778.00	\$0.00
GRANTS	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
CONTRACTS	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
OTHER (Specify)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Total Grants, Contracts, Other	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
TOTAL	\$139,452.00	\$0.00	\$293,208.00	\$0.00	\$418,356.00	\$0.00	\$473,778.00	\$0.00

² Attrition => one drop-out a year

³ Reflects December graduation

NOTE: All of the above figures are estimates based on projections made by the institution submitting the proposal.

Financial Footnotes

¹ FY18 Tuition and Fees Request per BOE 11.16.16

² Attrition rate = 1/year

³ 2 1/2 year program - December graduation

ACADEMIC PROGRAM BUDGET FORM

Use this form for programs that can be pursued on a full-time basis, part-time basis, or through a combination of full-time and part-time attendance. **Page 2 of 3**

EXPENDITURE ESTIMATES

	Year 1 2017-2018		Year 2 2018-2019		Year 3 2019-2020		Year 4 2020-2021	
	Additional resources required for program	Expenditures from current resources	Additional resources required for program	Expenditures from current resources	Additional resources required for program	Expenditures from current resources	Additional resources required for program	Expenditures from current resources
PERSONNEL SERVICES								
Administrators ¹								
Faculty ²		\$71,348.96		\$150,718.75		\$194,723.96		\$200,083.33
Support Staff ³		\$3,617.00		\$3,725.51		\$3,837.28		\$3,952.39
Others								
Fringe Benefits % ⁴		\$37,482.98	\$0.00	\$77,222.13	\$0.00	\$99,280.62	\$0.00	\$102,017.86
Total Personnel	\$0.00	\$74,965.96	\$0.00	\$154,444.26	\$0.00	\$198,561.23	\$0.00	\$204,035.73
OPERATING EXPENSES								
Instructional Resources	\$1,500.00	\$1,500.00	\$1,500.00	\$1,500.00	\$1,545.00	\$1,545.00	\$1,545.00	\$1,545.00
Other (specify)								
Total Operating Expenses	\$1,500.00	\$1,500.00	\$1,500.00	\$1,500.00	\$1,545.00	\$1,545.00	\$1,545.00	\$1,545.00
CAPITAL								
Facilities								
Equipment								
Other								
Total Capital	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
NET STUDENT ASSISTANCE								
Assistantships								
Fellowships								
Stipends/Scholarships								
Total Student Assistance	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
TOTAL EXPENDITURES	\$1,500.00	\$76,465.96	\$1,500.00	\$155,944.26	\$1,545.00	\$200,106.23	\$1,545.00	\$205,580.73

NOTE: All of the above figures are estimates based on projections made by the institution submitting the proposal.

Financial Footnotes

¹ 25% release for program administration

² % effort taught for academic year based on beginning annual salary of \$87,500 (AACN -NP/Pgm Coordination); 3% COL increases annually; 12 credit system;

³ 7.14% effort program support

⁴ 50% Fringe Benefit Rate

ACADEMIC PROGRAM BUDGET FORM

Use this form for programs that can be pursued on a full-time basis, part-time basis, or through a combination of full-time and part-time attendance. **Page 3 of 3**

	Year 1 2017-2018	Year 2 2018-2019	Year 3 2019-2020	Year 4 2020-2021
BUDGET SUMMARY OF COMBINED EXISTING AND NEW PROGRAM				
Total Revenue	\$139,452.00	\$293,208.00	\$418,356.00	\$473,778.00
Total Expenses	\$77,965.96	\$157,444.26	\$201,651.23	\$207,125.73
Excess/Deficiency	\$61,486.04	\$135,763.74	\$216,704.77	\$266,652.27
BUDGET SUMMARY OF EXISTING PROGRAM ONLY				
Total Revenue	\$0.00	\$0.00	\$0.00	\$0.00
Total Expenses	\$76,465.96	\$155,944.26	\$200,106.23	\$205,580.73
Excess/Deficiency	-\$76,465.96	-\$155,944.26	-\$200,106.23	-\$205,580.73
BUDGET SUMMARY OF NEW PROGRAM ONLY				
Total of Newly Generated Revenue	\$139,452.00	\$293,208.00	\$418,356.00	\$473,778.00
Total of Additional Resources Required for	\$1,500.00	\$1,500.00	\$1,545.00	\$1,545.00
Excess/Deficiency	\$137,952.00	\$291,708.00	\$416,811.00	\$472,233.00

NOTE: All of the above figures are estimates based on projections made by the institution submitting the proposal.

LIBRARY IMPACT STATEMENT (New Program Proposal)
LIBRARIAN'S ASSESSMENT

Subject selectors will complete this form as requested, assessing library materials and collections as detailed below. Send one copy of the assessment to the faculty member who requested it. Send one copy of the assessment to the Collection Management Officer.

Program: Psychiatric Mental Health Nurse Practitioner _____

Department, College: College of Nursing _____

Faculty Member: Ginette Ferszt _____

Date returned to Faculty: 1/4/17 _____

Librarian Completing Assessment: Joanna M. Burkhardt _____

Collection Management Officer: Joanna M. Burkhardt _____

Assessment of:

- Suitability of existing library resources;
- New library resources required to support the program;
- Information skills education required by the students; and
- Funds needed for library materials and services.

Please include:

1. What library holdings already exist in relevant subject categories? How much money is now allocated in the program subject area?

The University Libraries have substantial holdings in relevant subject categories, including both monographs and journals. The allocation for monographs in Nursing for 2016-17 is \$9,000. The cost for journals is not broken out by department. However, our journal holdings in relevant areas are substantial.

2. Does URI have the essential journals as noted in the Faculty Questionnaire?

URI subscribes to the essential journals noted in the Faculty Questionnaire.

3. What new resources are required to support the program (including media, electronic, or other non-print materials)?

No new library resources are required to support this program.

4. What information mastery sessions will be required for the students?

No information mastery sessions are required for the students.

5. What is the approximate cost to acquire the materials necessary? Which of these will be continuing costs?

There are no new library costs associated with this program.

Rev 6/16/15 jmb



Hasbro Children's Hospital

The Pediatric Division of Rhode Island Hospital

A Lifespan Partner

593 Eddy Street
Providence, RI 02903

Tel 401 444-4000

November 21, 2016

Dean Barbara Wolfe PhD, RN, FAAN
University of Rhode Island School of Nursing
39 Butterfield Road
Kingston RI 02881

Dear Dean Wolfe

The Nursing Department at Rhode Island Hospital/Hasbro Children's Hospital (RIH/HCH) enthusiastically supports the University of Rhode Island's efforts to offer the Psychiatric Mental Health Nurse Practitioner program (PMHNP). There is a shortage of mental health providers in Rhode Island, with a particular need for clinicians that can meet the assessment and treatment need of patients with behavioral health conditions. Your nurse practitioner program will have the added benefit of expanding our workforce, including clinicians who will be able to prescribe medications and offer therapies.

The 2014 RI Special Joint Commission Report on the Integration of Primary Care and Behavioral Health further supports the need for your program as RI ranks in the top 5 of states in terms of severity of all 13 mental illness indicators used in the National Survey on Drug Use and Health Behavioral health diagnoses. Two thirds of RI's mental health clients have at least 1 of a list of serious medical conditions. Report recommendations include a "call to action" for training and embedding opportunities for collaboration, communication and providing technical assistance.

Please know that RIH/HCH stands ready to support the PMHNP if clinicians are in need of training sites within the hospital setting. We have several psychiatric mental health nurse practitioners working in our consult liaison services, medicine/psychiatric unit and pediatric nursing. Depending on your supervision requirements, these practitioners would be able to provide preceptor opportunities for your PMHNP students.

We acknowledge URI in your efforts to improve population health through this work force development effort and thank you for providing us with an essential and much needed mental health resource.

Sincerely,

Myra J. Edens, MSN, RN, NE-BC, FACHE
Administrative Director, Hasbro Children's Hospital
Administrative Director, Nursing Professional Practice & Research, RIH/HCH



BUTLER HOSPITAL
a Care New England Hospital

345 Blackstone Blvd.
Providence, RI 02906

November 30, 2016

Dean Barbara Wolfe PhD, RN, FAAN
University of Rhode Island School of Nursing
39 Butterfield Road
Kingston RI 02881

Dear Dean Wolfe,

Butler Hospital enthusiastically supports the University of Rhode Island's efforts to offer the Psychiatric Mental Health Nurse Practitioner program (PMHNP). The current need for psychiatric and substance abuse services in the State of Rhode Island are higher than the national average and sustaining a workforce to meet the demand has been a challenge. (SAMSHA, 2015) Butler Hospital has been actively seeking PMHNPs or Psychiatric Clinical Nurse Specialist and despite working with a search firm has been unable to recruit qualified applicants. This is impacting our ability to provide services to all the patients currently asking for care.

Butler Hospital has historically benefited from advanced practice psychiatric nurses and nurse practitioners who complement our care delivery team. Since the discontinuation of the Psychiatric Mental Health Clinical Nurse Specialist certification and the associated loss of the educational program at URI there has been a void in preparing a workforce to care for this population of need. Nurses within my hospital express interest in pursuing education as PMHNPs and some have chosen online options or travel to neighboring states to obtain this education.

Butler Hospital is prepared support the College's efforts in educating PMHNP clinicians. We have varied levels of care that would be a rich clinical resource for education. Our Patient Assessment Services, which is a centralized assessment area for urgent or ambulatory evaluation, is one of the best places to learn assessment and diagnoses. We also have Partial Hospital Programs and of course inpatient care so students could learn care delivery from the acute phase of illness to transition and maintenance.

Butler Hospital commends the College of Nursing for its efforts in developing a workforce to meet the needs of the State of Rhode Island. We also look forward to supporting the program and developing leaders in psychiatric-mental health care.

Respectfully,

Mary Leveillee PhD, RN, PMHCNS-BC
SVP, Patient Care Services & CNO

Community Care Alliance

Formerly NRI Community Services / Family Resources Community Action

PO Box 1700
Woonsocket, RI 02895-0856

Main Number
401.235.7000

Family Support Center
401.766.0900

CommunityCareRI.org

November 16, 2016

Dean Barbara Wolfe PhD, RN, FAAN
University of Rhode Island School of Nursing
39 Butterfield Road
Kingston RI 02881

Dear Dean Wolfe:

Community Care Alliance (CCA) fully supports the University of Rhode Island's efforts to offer the Psychiatric Mental Health Nurse Practitioner program (PMHNP). Community Care Alliance is a merged organization of a community mental health center (NRI Community Services) and a community action program (Family Resources Community Action).

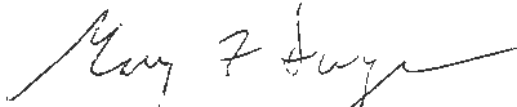
We have employed APRNs for many years. Most are Psychiatric Clinical Nurse Specialists who graduated from the URI program. Since the discontinuation of the specialized psychiatric mental health program at URI, recruitment efforts for APRNs with this expertise has been adversely affected. CCA supported preceptorships for graduate nursing students, many of whom then sought employment with CCA. We would be receptive to becoming a preceptor site for this new program if it is offered.

APRNs specializing in psychiatric mental health nursing (APRN-PMH) are well suited for roles in Community Mental Health Centers (CMHCs). There has been recognition at the state level that individuals with serious mental illness are best served in Health Homes at the CMHC. Each health home team has been required by the Department of Behavioral Healthcare, Developmental Disabilities and Hospitals to have a psychiatrist or an APRN-PMH as a member of the multidisciplinary team. The experience of CCA is that the APRN-PMH is able to provide holistic care integrating physical and behavioral health, incorporating interventions based on social determinants of care, and developing therapeutic relationships with this difficult to treat population. In addition, General Outpatient Services and Child and Family Services have been well served by APRNs-PMH.

CCA applauds URI for addressing this workforce development issue. There is a shortage of psychiatrists willing to work in CMHCs. In addition, as a whole, psychiatrists are aging out of their positions. A recent survey by the Association of American Medical Colleges found that 59 percent of psychiatrists are 55 or older. According to the American Medical Association, the total number of physicians in the U.S. increased by 45 percent from 1995 to 2013, while the number of adult and child psychiatrists rose by only 12 percent. During that span, the U.S. population increased by about 37 percent. The number of psychiatrists is shrinking nationally. (Presented by Dr. Michael Silver, RI Psychiatric Society on 9/29/16, (Senate Hearing of Health and Human Services Committee.) The need for APRNs-PMH is increasing.

CCA continues to actively recruit for APRNs-PMH to serve the expanding need for behavioral health services in the community. We look forward to once again becoming a preceptor site if indeed the PMHNP Program is offered by URI.

Thank you,



Mary F. Dwyer, MS, M.Ed., APRN-PMHCNS
Senior Vice President
Community Support and Recovery Services
Community Care Alliance
55 John Cummings Way
PO Box 1700
Woonsocket, RI 02895
401-235-7060
Fax: 401-235-7104
email: mdwyer@CommunityCareRI.org
website: <http://www.communitycareri.org>



November 9, 2016

Dean Barbara Wolfe PhD, RN, FAAN
University of Rhode Island School of Nursing
39 Butterfield Road
Kingston RI 02881

Dear Dean Wolfe

The Care Transformation Collaborative of Rhode Island (CTC-RI) enthusiastically supports the University of Rhode Island's efforts to offer the Psychiatric Mental Health Nurse Practitioner program (PMHNP). There is a shortage of mental health providers in Rhode Island, with a particular need for clinicians that can meet the assessment and treatment need of patients with behavioral health conditions. Your nurse practitioner program will have the added benefit of expanding our workforce, including clinicians who will be able to prescribe medications.

The 2014 RI Special Joint Commission Report on the Integration of Primary Care and Behavioral Health further supports the need for your program as RI ranks in the top 5 of states in terms of severity of all 13 mental illness indicators used in the National Survey on Drug Use and Health Behavioral health diagnoses. Two thirds of RI's mental health clients have at least 1 of a list of serious medical conditions. Report recommendations include a "call to action" for training and embedding opportunities for collaboration, communication and providing technical assistance.

Please know that CTC-RI stands ready to support the PMHNP if clinicians are in need of training sites within the primary care setting. Presently, CTC-RI has implemented an Integrated Behavioral Health Pilot program with twelve of our primary care practice sites embedding behavioral health clinicians within the practice team. Depending on your supervision requirements, these primary care sites would be able to provide preceptor opportunities for your PMHNP students.

We salute URI in your efforts to improve population health through this work force development effort and thank you for providing us with an essential and much needed mental health resource.

Sincerely,

Debra Hurwitz MBA, RN
CTC-RI Co-Director



The Providence CENTER

Healthy minds for healthy lives

528 North Main Street
Providence, Rhode Island 02904
phone: (401) 528-0123 • (800) 456-0300
fax: (401) 528-0124
email: info@provctr.org

November 23, 2016

Ginette Ferszt, Ph.D., R.N., PMHCNS-BC
Coordinator Graduate Psychiatric Mental Health Clinical Nurse Specialist Program
University of Rhode Island College of Nursing
39 Butterfield Road
Kingston, RI 02881

www.providencecenter.org

Dear Dr. Ferszt,

The Providence Center fully supports the University of Rhode Island's efforts to offer the Psychiatric Mental Health Nurse Practitioner program (PMHNP). The Providence Center is a large community behavioral health organization providing a full array of services to over 12,000 individuals annually.

We have employed APRNs for many years. Many are psychiatric clinical nurse specialists who graduated from the URI program. Since the discontinuation of the specialized psychiatric mental health program at URI, recruitment efforts for APRNs with this expertise has been adversely affected.

APRNs specializing in psychiatric mental health nursing are well suited for roles in community mental health centers (CMHCs). There has been recognition at the state level that individuals with serious mental illness are best served in health homes at the CMHC. Each health home team has been required by the Department of Behavioral Healthcare, Developmental Disabilities and Hospitals to have a psychiatrist or an APRN-PMH as a member of the multidisciplinary team. The experience of The Providence Center is that the APRN-PMH is able to provide holistic care integrating physical and behavioral health, incorporating interventions based on social determinants of care, and developing therapeutic relationships with this difficult to treat population. In addition, General Outpatient Services and Child and Family Services have been well served by APRNs-PMH.

The Providence Center applauds URI for addressing this workforce development issue. There is a shortage of psychiatrists willing to work in CMHCs. In addition, as a whole, psychiatrists are aging out of their positions. A recent survey by the Association of American Medical Colleges found that 59 percent of psychiatrists are 55 or older. According to the American Medical Association, the total number of physicians in the United States increased by 45 percent from 1995 to 2013, while the number of adult and child psychiatrists rose by only 12 percent. During that span, the U.S. population increased by about 37 percent. The number of psychiatrists is

Genette Ferszt
November 23, 2016
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shrinking nationally. (Presented by Dr. Michael Silver, RI Psychiatric Society on 9/29/16, Senate Hearing of Health and Human Services Committee.) The need for APRNs-PMH is increasing.

The Providence Center continues to actively recruit for APRNs-PMH to serve the expanding need for behavioral health services in the community.

We look forward to becoming a preceptor site if indeed the PMHNP Program is offered by URI. TPC values our role as an academic practice partner with the University's College of Nursing.

Yours truly,



Christine Gadbois, DNP, RN-BC, APHN-BC
Director of Population Health & Nursing Services
The Providence Center
528 North Main Street
Providence, RI 02904



November 22, 2016

Dean Barbara Wolfe PhD, RN, FAAN
University of Rhode Island School of Nursing
39 Butterfield Road
Kingston, RI 02881

Dear Dean Wolfe:

Thundermist Health Center wholeheartedly supports the University of Rhode Island's efforts to offer the Psychiatric Mental Health Nurse Practitioner program (PMHNP). As I am sure you know, there is a shortage of mental health providers in Rhode Island, with a particular shortage of those who have prescription privileges. The 2014 RI Special Joint Commission Report on the Integration of Primary Care and Behavioral Health further supports the need for a PMHNP program as RI ranks in the top 5 of states in terms of severity of all 13 mental illness indicators used in the National Survey on Drug Use and Health Behavioral health diagnoses. Two thirds of RI's mental health clients have at least 1 of a list of serious medical conditions. A PMHNP program will go a long way in helping to alleviate this critical issue.

Thundermist currently employs seven Master's prepared psychiatric nurses (five psychiatric nurse practitioners and two clinical nurse specialists). We are ready to support the PMHNP through offering preceptors and clinical rotation opportunities within our three health center locations. Because there is a dearth of PMHNPs in Rhode Island often need to turn to profession recruiters to identify qualified candidates; these recruiters can charge fees of upwards of \$25,000 to identify qualified candidates. An expanded pool of practitioners in Rhode Island would allow these resources to be reallocated to hiring much needed additional PMHNPs.

Our newly hired Chief Nursing officer Mary Rose is an experienced psychiatric nurse practitioner and would spearhead our partnership with the PMHNP. Additionally, Thundermist senior leadership led the efforts within the Integrated Behavioral Health Subcommittee of the Care Transformation Collaborative Rhode Island (CTC-RI) to do a needs assessment which outlines the workforce needs related to psychiatric nurse practitioners. As you know we have successfully partnered with URI on a number of projects, most recently the HRSA funded nurse practitioner residency program.

We salute URI in your efforts to improve population health through this work force development effort and thank you for providing us with an essential and much needed mental health resource.

Sincerely,

A handwritten signature in black ink that reads "Charles T. Jones". The signature is fluid and cursive, with a large initial "C" and "J".

Charles T. Jones
CEO/President



SOUTH COUNTY HEALTH

South County Hospital ~ South County Home Health
South County Medical Group ~ South County Surgical Supply

December 07, 2016

Dean Barbara Wolfe PhD, RN, FAAN
University of Rhode Island School of Nursing
39 Butterfield Road
Kingston, RI 02881

Dear Dean Wolfe,


I am writing to you to express my full support for the University of Rhode Island (URI) efforts to offer a Psychiatric Mental Health Nurse Practitioner (PMHNP) program.

In 2013, the Washington County Rhode Island, Community Health Needs Assessment indicated that 23.5% of adults had been diagnosed with a depressive disorder, compared to 22% across the state and 16.8% across the nation. Additionally, Washington County has the highest suicide rate in Rhode Island at 13.9 per 100,000 people. Substance abuse, which includes alcohol and drug abuse, is reported by 18.4% of adults in Washington County. The overlap of mental health disorders and substance abuse further contributes to the complexity of treatment. Moreover, Rhode Island is ranked in the top 5 states for severity of all 13 mental health indicators used on the National Survey on Drug Use and Behavioral Health diagnoses. According to the American Psychological Association, mental illness is strongly correlated to chronic medical conditions and the Center for Disease Control reports that patients with a mental illness are less likely to seek medical care, have reduced adherence to treatment therapies for chronic diseases and higher risks of adverse health outcomes. Our Emergency Department at South County Hospital is a microcosm of the intersection of mental health and complex medical disease processes, and our ability to provide the care that each community member deserves, due to the limited Psychiatric Mental Health providers in Rhode Island, limits our access and timely initiation of some treatments.

South County Health strongly endorses the development and implementation of a Psychiatric Mental Health Nurse Practitioner Program (PMHNP) at the University of Rhode Island. Please know that we stand ready and willing to support training opportunities for PMHNP clinicians within our Behavioral Health Department or could offer our Oncology Office and Primary Care locations as training sites, based on the integrated models that are evolving within the outpatient practice arena.

I applaud your efforts and URI for considering the addition of this important degree program. By augmenting our state workforce with the needed resource(s) to support population health and the holistic care for patients, your objectives will also benefit healthcare organizations by helping us to achieve the Institute of Medicine Six Aims for Healthcare Quality: safe, timely, effective, efficient, equitable, and patient-centered.

Sincerely,



Anne Schmidt, MSN, RN, APRN-BC, CENP
Vice President for Patient Care Services
Chief Nursing Officer

100 Kenyon Avenue, Wakefield, Rhode Island 02879-4299

(401) 782-8000 ~ TTD (401) 789-1410 ~ fax (401) 783-6330 ~ info@southcountyhealth.org ~ www.southcountyhealth.org



South County Hospital ~ South County Home Health
South County Medical Group ~ South County Surgical Supply

November 18, 2016

Dean Barbara Wolfe PhD, RN, FAAN
University of Rhode Island School of Nursing
39 Butterfield Road
Kingston RI 02881

Dear Dean Wolfe

South County Health, an independent community health system serving Washington County enthusiastically supports the University of Rhode Island's efforts to offer the Psychiatric Mental Health Nurse Practitioner program (PMHNP). There is a shortage of mental health providers in Rhode Island, with a particular need for clinicians that can meet the assessment and treatment need of patients with behavioral health conditions. Your nurse practitioner program will have the added benefit of expanding our workforce, including clinicians who will be able to prescribe medications.

Please know that South County Health stands ready to support the PMHNP if clinicians are in need of training sites within the primary care setting. South County Health currently employs three PMHNP's and a full-time psychiatrist. Depending on your supervision requirements, these primary care sites would be able to provide preceptor opportunities for your PMHNP students.

We believe that establishing this new educational program could greatly contribute to the enhancement of the care of behavioral health patients and to the overall healthcare system in RI..

Please do not hesitate to call on me if I can assist you in any way.

Sincerely,

A handwritten signature in blue ink that reads "Louis R. Giancola".

Louis R. Giancola
President and CEO