

Leadership & Professional Development

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This column's authors have addressed ideas and strategies that were suggested in the January 2014 column—The Future of Oncology Nursing Research: Research Priorities and Professional Development. The following article presents two educational approaches for developing and supporting doctorally prepared oncology nurses to bridge the gap between knowledge development and its translation into practice.

Two Approaches to Bridging the Knowledge-Practice Gap in Oncology Nursing

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The field of oncology nursing is continually changing. New drugs to aid in the fight against cancer are being developed, complementary therapies to ease symptoms are gaining prominence, and survivorship care is becoming a welcome yet challenging area of subspecialty. For oncology nurses to provide quality care and to develop improved care delivery systems, they must not only have access to the most current knowledge in the field, but also be equipped with the skills necessary to integrate that knowledge into practice for the benefit of patients and families (LoBiondo-Wood et al., 2014). The importance of nursing research and its relationship to the practice of oncology nursing cannot be minimized (Moore & Badger, 2014). Oncology nurse researchers advance knowledge and, consequently, improve the quality of care for patients with cancer and their families. For example, the Oncology Nursing Society (ONS) regularly surveys its membership to identify key areas of research focus that then guide the work of nurse investigators (LoBiondo-Wood et al., 2014; ONS Research Agenda Team, 2009). Unfortunately, the shortage of nurse scientists, particularly in oncology nursing, continues to increase as senior doctoral faculty reach retirement age and doctoral education program development remains stagnant (Glasgow & Dreher, 2010; LoBiondo-Wood et al., 2014). This shortage has and will continue to lead to gaps in the generation and implementation of new knowledge, negatively affecting the quality of patient care. As a result, an urgent need exists for innovative and quality doctoral educational programs to develop nurse scientists (Moore & Badger, 2014).

The growing need for oncology nurse scientists is well documented, but de-

bate persists about how to best address this need (Moore & Badger, 2014; ONS Research Agenda Team, 2009). Two available options for earning a doctoral degree in nursing are the Doctor of Nursing Practice (DNP) and the Doctor of Philosophy in Nursing (PhD) programs. From 2006–2011, the number of DNP programs offered at U.S. colleges and universities has increased from 20 to 184, with an additional 101 programs in the planning stages (American Association of Colleges of Nursing, 2014). In 2012 and 2013, the number of students enrolled in DNP programs increased by 29%, whereas the number of students in PhD programs increased by 7.5% (American Association of Colleges of Nursing, 2014).

Although DNP programs are growing rapidly in number and in enrollment, the educational preparation for the DNP degree has typically not readied students to conduct the empirical research that is so vital to meeting the needs of the oncology population (Glasgow & Dreher, 2010). The traditional PhD program prepares nurse scientists to conduct empirical research but falls short in helping them to translate research findings into actual practice (Edwardson, 2010). Despite the growing numbers of doctorally prepared nurses, the gap from research to the bedside can be as much as 17 years (Edwardson, 2010), which is far too long a period of time for new knowledge to reach the people who will benefit most: patients and their families.

However, options do exist to meet the ever-growing need for nurse scientists and the demand for translation of new findings into practice. One option is to develop complementary DNP and PhD programs, and another is to combine the two programs into a dual degree. The purpose of this article is to discuss the

relative benefits and potential challenges of each option that may help to close the knowledge-practice gap and make available the highest quality cancer care.

Complementary Program

Historically, DNP programs have prepared advanced practice nurses to be providers of care at a beginning level within their specialty. In addition, DNP students are prepared as scholarly clinicians who use research and research methods to improve healthcare quality and patient safety for their selected specialty population (American Association of Colleges of Nursing, 2006; Apold, 2008). However, the PhD program has prepared nurse scientists to generate and disseminate knowledge to advance nursing science and facilitate the translation of knowledge into practice (Edwardson, 2010). Moore and Badger (2014) suggested that developing a complementary DNP and PhD program can bridge the gap that exists for research scientists in oncology nursing. This complementary model would foster professional collaboration, and it would help to satisfy the need for future nurse scientists by enrolling DNP and PhD students in core research courses, such as translational research, research and theory, clinical phenomena, and evaluating and building evidence for practice. In particular, translational research requires collaboration between nurse experts in research methods and nurse experts in clinical practice; it is a vital component of the development of a complementary DNP and PhD program (Edwardson, 2010).

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