PROPOSAL

GRADUATE CERTIFICATE

ADVANCED PRACTICE ONCOLOGY

SCHOOL OF NURSING

TO BE OFFERED AT
PURDUE UNIVERSITY
WEST LAFAYETTE CAMPUS

Submitted to the Graduate School
October 2008
Purdue University School of Nursing
West Lafayette Campus
Proposal for a Certificate Program

Title: Graduate Certificate in Advanced Practice Oncology

Level of Certificate: Post-Masters
Proposed date of initiation: Spring 2009

I. Overview

The School of Nursing proposes a post master’s graduate level, academic credit certificate entitled Graduate Certificate in Advanced Practice Oncology. The School of Nursing (SON) receives inquiries daily about its graduate programs. Many of these students already have one master’s degree, are advance practice nurses and wish to obtain another specialty such as oncology. The School of Nursing has had an Oncology Conference yearly for the past two years with attendance of over 100 participants at each conference and many of the participants have indicated an interest in this program. The purpose of the program is to provide a high quality educational experience for qualified advanced practice nurses to function as Oncology Advanced Practice Nurses. As defined by the Indiana State Board of Nursing an "Advanced practice nurse" means a registered nurse holding a current license in Indiana who:
(1) has obtained additional knowledge and skill through a formal, organized program of study and clinical experience, or its equivalent, as determined by the board;
(2) functions in an expanded role of nursing at a specialized level through the application of advanced knowledge and skills to provide healthcare to individuals, families, or groups in a variety of settings.
(3) makes independent decisions about the nursing needs of clients.
(b) The three (3) categories of advanced practice nurses as defined in IC 25-23-1-1 are as follows:
(1) Nurse practitioner as defined in section 4 of this rule.
(2) Certified nurse-midwife as defined in 848 IAC 3-1.
(3) Clinical nurse specialist as defined in section 5 of this rule.
(Indiana State Board of Nursing; 848 IAC 4-1-3; filed Jul 29, 1994, 5:00 p.m.: 17 IR 874; readopted filed Nov 21, 2001, 10:23 a.m.: 25 IR 1329; readopted filed Jul 19, 2007, 12:54 p.m.: 20070808-IR-848070058RFA)

Following completion of this program, graduates are eligible to sit for the national certification exam. The SON expects to admit 6 students to the certificate program every year, starting in the spring of 2009. This program is designed to meet the need for an increase in the number of advanced practice nurses in the oncology specialty practice arena. The SON has received a grant from the McConnaughay Trust in support of the development of the Oncology certificate program and to assist in the development of distance format for program delivery.
Cancer is a diverse group of diseases which share the common underlying problem of uncontrolled proliferation and spread of abnormal cells, which if not controlled, usually results in death (American Cancer Society, 2008).

Cancer is a leading cause of death worldwide. The disease accounted for 7.9 million deaths (or around 13% of all deaths worldwide) in 2007. (World Health Organization) The diagnosis of cancer is given to over 1.4 million people yearly in the United States (American Cancer Society [ACS] 2008). After being second for decades, cancer surpassed heart disease in 2005 and is now the leading cause of adult deaths in the United States (ACS). The American Cancer Society's 2005 statistical report documented, “for the first time, cancer kills more Americans under age 85 than does heart disease”. In 2002, the most recent year for which information is available, 476,009 people under age 85 died of cancer compared with 450,637 who died of heart disease. That same report went on to state, “the under-85 age group accounts for just over 98% of the US population, which means that, right now, only the very oldest Americans die more of heart disease rather than cancer. An estimated 1,372,910 new cancer cases and 570,260 cancer deaths are estimated for 2005”.

The National Institutes of Health estimate overall costs for cancer in 2007, the most recent year data available, at $219.2 billion: $89 billion for direct medical costs (total of all health expenditures); $18.2 billion for indirect morbidity costs (cost of lost productivity due to illness); and $112.0 billion for indirect mortality costs (cost of lost productivity due to premature death).

According to the American Cancer Society Indiana Cancer Statistics (2006) “About 2.5 million or 2 in 5 Hoosiers now living will eventually develop cancer. Nationally, men have slightly less than a 1 in 2 chance of developing cancer in their lifetime; women’s lifetime risk of developing cancer is slightly more than 1 in 3. The National Cancer Institute estimates that approximately 10.1 million Americans with a history of cancer were alive in January 2002. Some of these individuals were cancer-free, while others still had evidence of cancer and may have been undergoing treatment”

From that same document, the American Cancer Society reported estimates that approximately 32,710 Indiana residents will be diagnosed with cancer in 2006. This amounts to almost four new cases of cancer diagnosed every hour of every day. This estimate does not include non-melanoma skin cancer and carcinoma in situ (for sites other than urinary bladder) (American Cancer Society, Indiana Cancer Statistics 2006).

Indiana’s incidence rate for cancer in 2003 was 456.8 per 100,000, or roughly the same as the national rate of 459.6/100,000. However, the state’s mortality rate during the same year was about 11% higher than the national rate, or 205.7 vs. 184.6 per 100,000. It must be noted that there are exceptions when comparing rates for various cancers. Both state incidence and mortality rates for lung and bronchus cancer and kidney and renal pelvis cancer were notably higher than national rates in 2003, while the state incidence rates of prostate cancer and melanoma of the skin and the mortality rate from stomach cancer were lower than US rates during the same year. From 1996 to 2001, incidence rates in Indiana increased over 14% from 425.3 to 485.3 per 100,000. Incidence rates decreased to 481.3 in 2002 and 456.8 in 2003. Trends varied, however, for different cancer sites. Liver cancer incidence increased by over 90% from 1996 to 2003. Lung and bronchus
cancer increased by 10% over that same time period. Testicular, pancreatic, and kidney and renal pelvis cancers have continued to increase through 2003 by as much as 37%. The more common cancers of the breast, and colon remained relatively stable from 1996 to 2000 (American Cancer Society, Indiana Cancer Statistics 2006).

Nationally, the five-year survival rate for all cancers combined has increased to 65%. This means approximately 21,262 Hoosiers who get cancer in 2006 will survive five years after diagnosis. Factors such as early stage of disease at diagnosis can greatly improve the probability of survival after five years (American Cancer Society, Indiana Cancer Statistics 2006).

The American population is aging and, inherently, becoming more prone to develop cancers. In general, Americans are living longer because of reduction in mortalities related to infections and cardiovascular problems. Living longer means more people will reach the age where cancer is more common, causing an increase in age-adjusted incidence rates. The Health Resources and Services Administration (HRSA) reported that due to the aging of baby boomers in the next 15 years, the number of Medicare patients with cancer will double (HRSA, 2007). With numbers of new cases of cancer expected to increase concurrently with numbers of survivors, it is even more important for Advanced Practice Nurses to be able to provide appropriate care for this growing segment of our population.

According to the ONS position paper, “The impact of the national nursing shortage on quality cancer care” (2007), our aging population will create an increased need for nurses which, when combined with an aging nursing workforce, is expected to result in unprecedented RN vacancy rates, with rural, specialty practice, and long-term care settings suffering the shortfall the most (HRSA). The ever smaller workforce will result in fewer nurses choosing oncology as a specialty, with the quality of care for oncology patients negatively impacted as a result.

Advanced Practice Nurses have an opportunity to reduce cancer costs, both human and financial, if providing appropriate care to their patients. Health promotion, early detection and rapid intervention will all play into the decreased health care expenditure. The ONS position paper, “The role of the Advanced Practice Nurse in Oncology Care”, (2007) states positive outcomes have been demonstrated with increased access to care, patient education; patient satisfaction, patient adherence to therapy plans, fewer and shorter hospital stays, lower readmission rates and emergency care visits, reduced healthcare costs.

There is also an increasing demand for Advanced Practice Nurses in rural Indiana. The federal government has designated 42 of the 92 Indiana counties as medically underserved areas. Although about 25% of the national population lives in rural settings, fewer than 13% of physicians practice in these areas. This leaves a void in providing primary care in rural areas that could be filled by advance practice oncology nurses. The Pew Health Professions Commission (1998) has determined that the number of Advanced Practice Nurses should be doubled to meet the needs of underserved populations, particularly in rural areas. Furthermore, the HRSA Work Force Profile published in 2000 reported that in 1996, of the 56,420 licensed Registered Nurses in Indiana, 40% had an Associate Degree, 32% had a Baccalaureate degree, 22% had a
nursing diploma and only 6% had a Masters/Doctoral degree (Indiana Hospital Association, 2003). To meet the more complex demands of today's healthcare environment, the National Advisory Council on Nurse Education and Practice (NACNEP) has recommended that at least two-thirds of the basic nurse workforce hold baccalaureate or higher degrees in nursing by 2010 (NACNEP, 2001).

Advanced Practice Nurses in Indiana are also aging. Of the 638 advanced practice nurses (representing various clinical specialty areas), 273 (43%) were in the 45 - 65 age range. There is a need for new graduate nurses prepared at the master’s level to replace the retiring nurses and to maintain the supply of advanced practice nurses in Indiana. With other Indiana university graduate programs being located in urban areas, and 55 of the 92 counties designated as rural, the Purdue SON program’s emphasis on rural healthcare addresses the critical shortage of healthcare professionals in rural and vulnerable communities.

The above factors have led to expanded opportunities for Advanced Practice Oncology Nurses and have prompted nurses with master’s degrees to enter graduate programs that prepare nurses to meet the unique needs of an oncology population. To meet this need, this certificate program uses the unique resources of Purdue University to deliver cost-effective, culturally appropriate, quality care to an oncology population.

II. Admission Requirements:

The admission process for the Advanced Practice Oncology Certificate Program will parallel that for students seeking a Master’s Degree in Nursing. Specific requirements are:

1. Holds a master’s degree in nursing from an accredited institution or admission and enrollment in the Doctor of Nursing Practice program at Purdue University.
2. Must be certified as an Advanced Practice Nurse.
3. International students must graduate from a nursing program that has undergone comparable review and must score a minimum of 550 (paper) on the TOEFL or 213 on the computer-based exam, or 77 or higher on the internet-based test (iBT) for applicants whose native language is not English, with the possibility of allowing exceptions, including substitution of alternate criteria. Applicants who take the TOEFL iBT must achieve the following minimum test scores, in addition to the overall required score of at least 77: reading 19; listening, 14; speaking, 18, and writing 18. Applicants taking the IELTS must score at least 6.5 on the Academic Module.
4. Minimum graduate grade point average of 3.0 on a 4.0 scale.
5. Eligible for licensure as an Advanced Practice Nurse in the State of Indiana.
6. A minimum of one year or 1500 hours of experience as a registered nurse. Experience as an Advanced Practice Nurse is desired.
7. Curriculum vitae or résumé.
8. Three letters of recommendation, one from a clinical supervisor, one from an academic advisor or faculty member, and one from a nursing peer.
9. Personal interview with a graduate program faculty advisor.
10. A 300 – 350 word essay addressing the prospective student’s
a. reason for pursuing graduate study in oncology as a specialization  
b. career goals.

III. Completion Requirements

The total hours may vary depending on the student’s academic record, clinical experiences, and objectives. Students must complete a minimum of 17 credits. A minimum of eleven credit hours must be completed while enrolled in the Advanced Practice Oncology Certificate program.

*Credit Hour Requirements:*

The certificate requires students to complete 17 credit hours consisting of the following courses:

**Required Courses:**

<table>
<thead>
<tr>
<th>Course Code</th>
<th>Course Name</th>
<th>Credit Hours</th>
</tr>
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<tbody>
<tr>
<td>NUR 564</td>
<td>Pharmacology for Advanced Practice Oncology Certificate***</td>
<td>2</td>
</tr>
<tr>
<td>NUR 563</td>
<td>Oncology Screening and Health Promotion (80 hours)</td>
<td>3</td>
</tr>
<tr>
<td>NUR 572</td>
<td>Acute Oncology Illness</td>
<td>3</td>
</tr>
<tr>
<td>NUR 573</td>
<td>Acute Oncology Preceptorship (210 Hours)</td>
<td>3</td>
</tr>
<tr>
<td>NUR 582</td>
<td>Chronic Oncology Conditions and Palliative Care</td>
<td>3</td>
</tr>
<tr>
<td>NUR 583</td>
<td>Chronic Oncology/Palliative Care Preceptorship (210 Hours)</td>
<td>3</td>
</tr>
</tbody>
</table>

*** Individuals who are ONS certified in Pharmacology may have this course waived at the discretion of the director

Individuals who have completed their Advanced Practice Degree five (5) years or more prior to admission and who are not actively practicing as an Advanced Practice Nurse may be required to take additional core courses.

**GPA Requirements for Progression:**

Students must maintain a GPA of 3.0 and a B in all courses required for the certificate.

**Maximum time to complete certificate:**

Students must complete the required courses within 3 years of admission to the certificate program.
Number of credit hours taken prior to admission to the certificate program that may be applied toward certificate: Up to six credit hours of the required oncology course credits can be considered for transfer into the certificate program. Students must present a syllabus from the requested course. The student syllabus will be compared to the syllabus of the Purdue courses required for the oncology concentration to determine equivalency.

IV. Administration

To certify completion of the certificate program requirements, the Director of Graduate Studies in Nursing and the Coordinator of the Oncology Certificate Program will:

1). Evaluate progress of all students enrolled in the certificate program annually.
2). The Office of the Registrar will establish a special admittance status to facilitate tracking of students who are enrolled in the certificate program.
3). Forward the names of post-graduate students who have met the certification requirements to the Graduate School upon completion of the certification requirements. The Graduate School will notify the Office of the Registrar when the student completes the requirements for the certificate.
4). The School of Nursing will disseminate completion certificates received from the Registrar.
5). Students who have completed the requirements for the certificate will be awarded the certificate by the Purdue School of Nursing and will read as follows:
   Graduate Certificate
   Major:    Nursing
   Concentration:   Adv. Practice Oncology
   Each certificate will be posted separately upon completion of the requirements. Academic credits earned toward a certificate will be included in the computation of the overall GPA posted on the student’s academic transcript.
6). All certificates will be printed by the Office of the Registrar and will share a common format and style as approved by the Graduate School.
7). Certificates will be awarded jointly by the Head of the School of Nursing and the Graduate School. Certificates will bear the signatures of the Head of the School of Nursing and the Dean of the Graduate School and will be awarded upon completion of requirements at the end of each semester.
8). Purdue University School of Nursing will submit an annual report to the Graduate Council with the following information:
   a. Number of students currently admitted to the certificate program.
   b. The date each student was admitted, whether or not student is also currently admitted to a degree program at Purdue University School of Nursing and if so which degree program, and number of credits completed toward fulfillment of certificate requirements.
   c. Number of certificates awarded annually.

The Office of the Registrar will assist in the generation of this information.