Published in final edited form as:

Nurse Educ. 2017 ; 42(6): E1–E3. doi:10.1097/NNE.0000000000000372.

Appreciative Advising: An Innovative Approach to Advising DNP students

Dr. Karen Hande, DNP, RN, ANP-BC, CNE [Assistant Professor], Dr. Tom Christenbery, PhD, RN, CNE [Assistant Professor], and Dr. Julia Phillippi, PhD, RN, CNM, FACNM [Assistant Professor]

Vanderbilt University School of Nursing, Nashville, Tennessee, USA

Academic advising is broadly defined as an interactive process in which an adviser assists a student in developing and achieving goals.(1) Historically the dominant academic advising model was prescriptive advising. Communication within prescriptive academic advising is linear, with directives flowing from the adviser to an individual advisee. Appreciative advising (AA) has emerged as an alternative to prescriptive advising(2) and allows faculty and students to develop shared goals. Appreciative advising includes both individual and group sessions to provide individual mentoring and a supportive community of peers. The AA model has been used successfully with undergraduate nursing students to improve student retention and performance.(2) Doctor of Nursing Practice (DNP) students have unique needs when compared with undergraduate students, but still require advice, scholarly support, and a peer community, congruent with the components of AA. In addition, group advising streamlines faculty effort while enhancing student engagement. The purpose of this article is to describe our adaption of the AA model for DNP students.

The Need for an Advising Model in DNP Education

Doctor of Nursing Practice educational programs assist graduates in meeting the DNP Essentials.(3) To meet these competencies, students require instruction and guidance, especially as they develop and implement the DNP Project.(4) This guidance can take many forms as the American Association of Colleges of Nursing (AACN) does not stipulate or recommend a single model of advising.(4) Doctoral students need advice to plan their curriculum, manage school-life-work balance, develop the DNP project, ensure completion of all Essentials, and transition into the role of a nurse-leader.(5)

In 2015, the AACN encouraged DNP programs to be attentive to efficiency, and advised the use of team learning and projects to streamline resource allocation while improving quality and equity.(4) Learning and working in teams provides students with opportunities to practice skills needed to meet Essential VI, which focuses on collaboration. As nurse-leaders in application of evidence to practice, students need opportunities to work in groups so they can observe and practice techniques for teamwork and leadership on a small scale prior to

Corresponding Author: Karen Hande, DNP, RN, ANP-BC, CNE, Vanderbilt School of Nursing, 603 Godchaux Hall, 461 21st Avenue South, Nashville, TN 37240, (karen.a.hande@vanderbilt.edu).

The authors declare no conflict of interest.

leading groups at an institutional level. While the primary goal of teamwork and AA is to prepare students to meet the Essentials, engagement in a supportive scholarly community can improve student learning and enhance formation of a long-term collegial network.(5)

Traditional, prescriptive models of academic advising may be poorly suited to meet DNP student needs.(6) In previous models of doctoral education, a student studies with a scholar, engaging in didactic study and hands-on apprenticeship, first performing the senior scholar's work and then completing their own projects. This model has been successful at producing strong researchers whose work focuses in one area of interest. However, the DNP degree is not designed to produce researchers, but instead, develop nurse-leaders who can assess clinical settings for the need for change, synthesize current literature, and implement evidence into practice.(4) There is a large demand for doctorally-prepared nurses(7,8), and the traditional senior-junior scholar mentorship system is inadequate for students in DNP programs.(6)

The disconnect between established advising and the needs of DNP students and programs has contributed to dissatisfaction among faculty and program directors. A recent national survey of DNP program directors found high rates of faculty dissatisfaction with the process related to the project and to student advising. Eighty-seven percent of faculty were dissatisfied or somewhat dissatisfied with the final project; only 2% were satisfied.(6) As part of our ongoing quality improvement efforts, we conducted an internal DNP faculty survey. The results of the study mirrored national trends and demonstrated a need for revision of our existing advising structure to improve efficiency and enhance student achievement. Common models of DNP advising are antiquated; new team-based models (2) may streamline doctoral education and boost preparation for the nurse-leader role.

A New Advising Model for DNP Education

The AA model(9) has been used to address the holistic needs of nursing students.(2) Founded on the principles of Appreciative Inquiry(10), AA emphasizes rapport building by empowering students' strengths. The AA model assumes each student has talents and skills and can achieve their goals. Following the 6 phases of AA (Disarm, Discover, Dream, Design, Deliver, and Don't Settle), the adviser asks open-ended questions to guide students through each phase according to their needs.(1)

Adaptation of the Appreciative Advising Model

We convened a DNP faculty taskforce to adapt the AA model to the DNP program. We wanted to: streamline the advising process, create supportive communities of scholars, and increase faculty consistency during the project process. The AA model formed the overarching structure of our new advising model. The 6 sequential stages of AA closely align with DNP student needs as they progress through the program. In addition, we wanted opportunities for the students to observe faculty and nurse-leaders modeling effective mentoring and advising to prepare students for leadership within health systems or academia. Our DNP-specific model contains 4 major components: advising process aligned with the 6 stages of AA; individual advising; group meetings; and faculty selection, preparation, and workload.

Advising Process Alignment with Stages of Appreciative Advising

Based on the 2015 AACN White Paper and the advice of Read and colleagues(2), we included both individual and group meetings to assist the DNP students in forming a strong, support community with other students in their same specialty or area of interest. While we retained individual meetings for personalized mentoring and counseling consistent with the Family Educational Rights and Privacy Act (FERPA), the group meetings provide needed content and mentoring while streamlining faculty time. We divided AA content between the 2 types of meetings as shown in Supplemental Digital Content 1.

The DNP adviser coordinated a minimum of 3 meetings per semester, at least 1 for group advising and 2 for individual advising. Session scheduling correlated with times of increased student inquiries and stress, allowing the adviser to intervene in a timely manner. Students were regularly prompted to assess their strengths and plan for anticipated struggles. During meetings, the adviser and student collaboratively designed a plan for the student to reach goals and manage possible challenges employing noted strengths. Scheduled face-to-face or streamed-video sessions facilitated early identification and referral for struggling students, thus improving students' ability to achieve academic requirements while maintaining health and wellness.

Students often experience isolation in graduate programs, which can be amplified by a distance program.(12) Similar to face-to-face meetings, e-mentoring has benefits for students and faculty in distance programs,(13) such as less time invested in communication and the ability interact with colleagues at convenient times consistent with work-life demands.(14) We used a variety of technology including course announcements using out learning platform, e-mail, and videoconferencing.(15)

Nursing students perceive personalization as an essential component of effective advising. (15,16) Our model includes individual meetings twice each semester and encourages more frequent meetings in time of student personal stress or during the project process. Prior to the individual meeting each semester, the student completes a reflective questionnaire with information specific to that stage of AA.

The individual sessions focus on getting to know the student as a person, demonstrating genuine interest in his/her growth and development, and providing targeted resources in response to identified needs. We developed DNP-specific advisement guides based on the components of the AA process. The guides are included as Supplemental Digital Content 2. Advisement guides encourage collaborative identification of student strengths and potential struggles. The faculty and student then develop and monitor an individualized plan for success. If additional resources are needed, faculty provided early identification, intervention, and relevant referrals to promote achievement of professional goals as well as life-work balance.

Group advising serves several purposes: communication, creation of a scholarly community, and an opportunity to observe group leadership. An early group discussion about expectations of members and the adviser set the tone for engagement. On-site meetings each

semester foster growth of this scholarly community.(5) The composition of the small group is maintained throughout the entire program to facilitate relationships and team-building.

To ensure program standardization, there is a guide for each group meeting. A portion of the meeting involves relevant program and curricular updates. The predominant function of the group meetings is to assist students in forming and maintaining a scholarly community and support network. These individuals work together throughout the program to provide friendly critique and suggestions on the scholarly projects. In addition to receiving feedback from their peers, students appreciate the opportunity to review each other's work and learn about colleagues' interests.(17) Group meetings also allow students to observe facilitation skills and practice these in a safe setting in preparation for later leadership. Consistent, supportive meetings set the tone for long-term, positive reciprocal relationships among group members.

Faculty Selection, Preparedness, and Workload

Faculty who consistently teach the sequential integrative application course series (the courses involved in project development and execution) were eligible to be advisers. These faculty members have a deep knowledge of the curriculum as well as a keen understanding of program's rigor. Additionally, they are familiar with common DNP student struggles. This knowledge and understanding situates them well to facilitate student success.

Adviser assignments are made at time of enrollment in the first semester. The DNP program director intentionally organizes students into groups of 4by specialty or project focus. An integrative course faculty member whose interests closely aligns with the group's specialty practice or project focus is selected as the group's adviser and receives appropriate workload.

Advising is not intuitive for most faculty.(15) Specific guidelines and resources support consistent implementation of DNP advisement for each student. Priorities change over the course of a program, and advisers must be aware of the necessary components of each semester to provide sound and accurate guidance. Using the AA model, we developed a series of advising guides for each semester. These guides served as a framework to conduct successful advising (Supplemental Digital Content 2). To assist faculty, these were combined into a guidebook along with an outline of the DNP curriculum, expected meeting times for group and individual advising, objectives for each advising session (eg, critique of the PICOT question, managing work/life balance), and reflective questions to ask advisees.

Congruence with DNP Student and Faculty Needs

DNP students' advising needs vary greatly throughout their programs, creating a need for an advising model that is versatile and adaptable to meet the students' requirements and expectations. Appreciative advising provides a student-sensitive framework that faculty and students can adapt to any student situation. Given the diversity and complexity of student needs, AA provides faculty a model to advise students through the rigors of doctoral education.

Appreciative advising is proving to be an effective and thoughtful form of advising. In addition to effectiveness, AA is also efficient. The time spent helping students develop goals and solutions often saves time by preventing problems. Appreciative advising allows students time to reflect and discuss areas of potential deficiency and brainstorm strategies to address deficits.

Conclusion

The needs of DNP students are unique compared with other levels of nursing education. Students need guidance with development as a nurse-leader, navigation through the DNP project, balance of life-school-work commitments, growth of scholarly skills, integration into a scholarly community, and attainment of DNP competencies. The AA model is an evidence-based, student-centered, approach to advise DNP students throughout their doctoral education. Further research is needed into the effects of this innovative model.

Supplementary Material

Refer to Web version on PubMed Central for supplementary material.

Acknowledgments

The authors thank Dr. Mary Ann Jessee for sharing her pre-specialty Appreciative Advising materials and Dr. Jennifer Bloom, for allowing the authors to use the Appreciative Advising Inventory.

Funding: Dr. Phillippi has a Vanderbilt University Medical Center Faculty Research Scholar's Award that supports a portion of her workload.

References

1. Bloom, JL., Hutson, BL., He, Y. The appreciative advising revolution. Champaign, IL: Stipes; 2008.
2. Read A, Hicks J, Christenbery T. Appreciative advising in nursing education. Nurse Educ. 2016 Epub ahead of print.
3. American Academy of Nurse Practitioners. AACN position statement on the practice doctorate in nursing. 2004. <http://www.aacn.nche.edu/publications/position/DNPpositionstatement.pdf>
4. American Association of Colleges of Nursing. The doctor of nursing practice: Current issues and clarifying recommendations. Report from the Task Force on the Implementation of the DNP. 2015
5. Hande K, Beuscher L, Allison T, Phillippi JC. Navigating DNP student needs: Faculty advising competencies and effective strategies for development and support. Nurse Educ. In Press.
6. Dols JD, Hernández C, Miles H. The DNP project: Quandaries for nursing scholars. Nurs Outlook. 2016
7. Auerbach DI, Staiger DO, Muench U, Buerhaus PI. The nursing workforce in an era of health care reform. N Eng J Med. 2013; 368(16):1470–1472.
8. Altman, SH., Butler, AS., Shern, L. Assessing progress on the Institute of Medicine report: The Future of Nursing. National Academies Press; 2016.
9. Bloom JL, Martin NA. Incorporating appreciative inquiry into academic advising. The Mentor: An Academic Advising Journal. 2002; 4(3)
10. Cooperrider, D., Whitney, DD. Appreciative inquiry: A positive revolution in change. Berrett-Koehler Publishers; 2005.
11. Echevarria IM, Walker S. To make your case, start with a PICOT question. Nursing 2015. 2014; 44(2):18–19.

12. Bolliger DU, Inan FA. Development and validation of the online student connectedness survey (OSCS). *The International Review of Research in Open and Distributed Learning*. 2012; 13(3):41–65.
13. de Janasz SC, Godshalk VM. The role of e-mentoring in protégés' learning and satisfaction. *Group & Organization Management*. 2013; 38(6):743–774.
14. Pietsch TM. A transition to e-mentoring: Factors that influence nurse engagement. *Comput Inform Nurs*. 2012; 30(12):632–639. [PubMed: 22918137]
15. Gasper ML. Building a community with your advisees. *Nurse Educ*. 2009; 34(2):88–94. [PubMed: 20339340]
16. Trent BA. Student perceptions of academic advising in an RN-to-BSN program. *J Cont Educ Nurs*. 1997; 28(6):276–283.
17. Fauchald SK, Bastian H. Utilizing an interdisciplinary approach to increase student writing abilities in Doctor of Nurse Practice Programs. *J Prof Nurs*. 2015; 31(1):64–70. [PubMed: 25601247]