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Strategic Planning and Doctor Of Nursing Practice Education: Developing Today's and Tomorrow's Leaders

EXECUTIVE SUMMARY

- ▶ Strategic planning and thinking skills are essential for today's nurse leaders.
- ▶ Doctor of nursing practice (DNP) programs provide an opportunity for developing effective nurse strategists.
- ▶ A well-designed strategy course can stimulate intellectual growth at all levels of Bloom's Taxonomy.
- ▶ Discussion forums in online education provide new opportunities for rich interaction among peers en route to development of well-informed strategic plans.
- ▶ An interprofessional perspective adds a rich and vital aspect to doctoral nursing education and it serves to inform strategic plan development.
- ▶ A roadmap for teaching strategic planning to current and future nursing leaders will guide the integration of essential content into DNP programs.

WITH OVER 3 MILLION nurses nationwide (Health Resources and Services Administration, 2008), the potential of nurses to influence and shape health care is unparalleled. Yet, a 2010 survey of 1,504 opinion leaders from government, health services, industry, and education reminds us that, though highly trusted, nurses are not viewed as important decision makers or revenue generators, particularly in comparison to physicians (Robert Wood Johnson Foundation [RWJF], 2010). Anecdotally, one of the most common concerns voiced by nurses is the feeling of being left out of the decision-making process – particularly during planning. In the words of one noteworthy physician, "...it is essential that we do more to support nurses taking on leadership positions and ensure that they have a place and a voice at decision-making tables" (RWJF, 2010, p. 1).

During the last decade, doctor of nursing practice (DNP) programs have emerged to fill a vital role – developing leaders in health care. The terminal DNP degree, a nonresearch clinical doctorate, is focused on developing experts in

nursing "practice" (American Association of Colleges of Nursing [AACN], 2006). Today, over 217 DNP programs are enrolling students. Trends show continued program growth with 97 programs in development (AACN, 2013).

Health care has become increasingly complex and turbulent. Faculty teaching in DNP programs face the challenges and opportunities of developing nurse leaders who are clinical experts with the knowledge, skills, and abilities needed to tackle complex issues related to health systems management, knowledge and data management, technology, clinical research, quality improvement, and public policy.

The George Washington University (GW) School of Nursing Doctor of Nursing Program, a leader in distance education, affords students the opportunity to earn a general degree or one focused on education, executive leadership, health care quality, palliative care or the family specialty for nurse practitioners. All GW DNP students are required to take the "Health Enterprise" course to acquire the strategic planning skills vital in an ever-changing, complex health environment. Executive

NOTE: Authors' biographical statements and acknowledgments can be found on the following page.

track students take a required financial management course; others may take the course as an elective. A highly successful approach to developing doctorally prepared nurse leaders with strategic thinking capacity and the knowledge, skills, abilities, and confidence to be effective strategists will be described.

Literature Review

Review of the literature on strategy and strategic planning using CINAHL, Business Source Complete, ERIC, MEDLINE, and Scopus revealed few peer-reviewed publications focused on strategic planning by nurses despite the realization strategic skills are essential to health care management (Carney, 2009; Drenkard, 2012; Jasper & Crossan, 2012). Additionally, no peer-reviewed articles were found describing how to approach strategic planning education within DNP and other graduate programs. Major nursing textbooks make minimal mention of strategic planning (Marquis & Huston, 2012; Porter-O'Grady, & Malloch, 2013). Sare and Ogilvie (2010) provide a more detailed approach than most authors.

Strategic management, a critical element for organizational success, has many definitions. According to Ginter, Swayne, and Duncan (2013), strategic planning

incorporates principles of strategic management and is viewed as a "periodic process of developing a set of steps for an organization to accomplish its mission and vision using strategic thinking" (p. 14). A strategic plan generally covers a range of 3-5 years, takes a broad perspective, and sets the future vision of the enterprise (University of Leicester, n.d.). The plan takes into account organizational strengths, weaknesses, opportunities, and threats (SWOT analysis) internal and external to the organization (Swysen, Lousbergh, Deneckere, & Vanhaecht, 2012). Drucker (1973) notes:

Strategic planning is the continuous process of making present entrepreneurial (risk-taking) decisions systematically and with the greatest knowledge of their futurity; organizing systematically the efforts needed to carry out these decisions; and measuring the results of these decisions against the expectations through organized systematic feedback. (p. 125)

Drenkard (2012) views a strategic plan as a road map and "a logical place for our focus to generate new knowledge" (p. 242). Carney (2009) reminds us it is important for nurses to take a stra-

tegic approach, given the expanded roles filled by nurses and the crucial nature of strategic knowledge, skills, management values, beliefs, attitudes, and organizational commitment.

Effective advocacy and engagement in policy require strategic thinking and planning. Jasper and Crossan (2012) highlight the importance of acquiring the hard elements of strategic management, such as organizational configuration, environment, and business context along with the soft elements of organizational development including staff expertise, culture, and interpersonal relationships. Drenkard (2012) notes, an understanding of strategy and strategic management will push nurses to "dream bigger and reach higher as a profession (p. 243)," moving nurses from "reactive response to proactive high performance as nurses..." (p. 243). Early engagement in the planning process helps to ensure nurses are part of crucial strategic decision making; taking the lead instead of having to live with strategy and an agenda developed by others.

Carney (2009) suggests "if nurses are given more organizational support and provided with enhanced education in the areas of strategy development and strategic management, nurse managers could play a much greater role in enhancing, healthcare delivery" (p. 716). Mintzberg (1990), a business thought leader, sheds light on how to approach strategic planning by differentiating between the operational approach to developing a strategic plan and one that affords a more creative, integrated perspective of the enterprise. General business and operational planning, when done effectively, dovetails to the overall vision of the strategic plan.

An interprofessional viewpoint adds a powerful perspective to strategic planning. According to the World Health Organization (2010), "Interprofessional education occurs when two or more pro-

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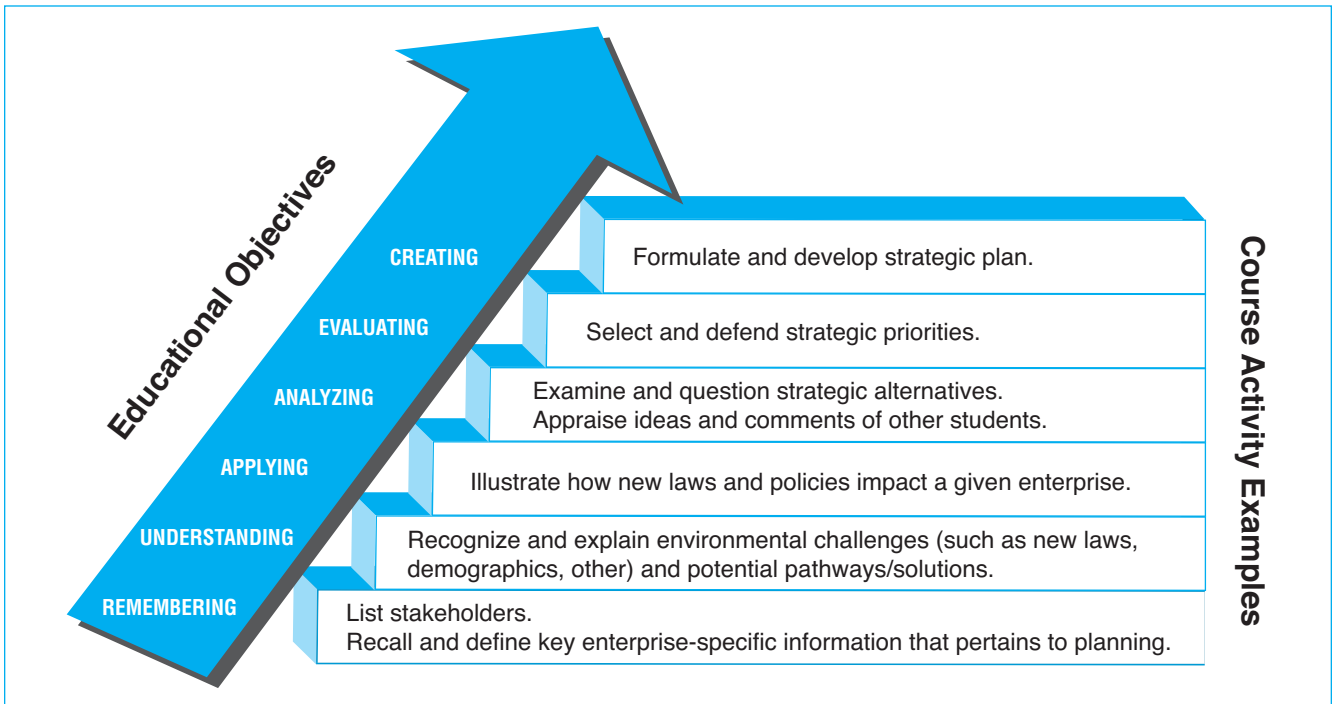
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Figure 1.
Applying Bloom's Taxonomy



fessions learn about, from and with each other to enable effective collaboration and improve health outcomes” (p. 13). Goldman (2007) explicated that strategic thinking may be enhanced through a regularly scheduled series of focused strategic activities with a clear purpose for each, reinforced through colleague and peer challenges to thinking and refinement. Inclusion of an interprofessional perspective means strategic thinking and strategic planning are informed by a multitude of diverse perspectives which adds richness and the potential for better outcomes.

Strategic Management and the Doctor of Nursing Practice

The emergence of the DNP degree has been driven by a number of factors, chief among these is the need to develop clinical nurse leaders who can effectively participate in shaping the health care system (AONE, 2011). DNP education seeks to develop leaders, edu-

cated so they are prepared to use knowledge to make decisions, implement research-based practice, facilitate change within organizations, and influence health policy.

The Essentials of Doctoral Education for Advanced Nursing Practice (AACN, 2006), which provide the framework for the development of DNP curriculum, place a strong emphasis on organizational and systems thinking in order to balance productivity with quality of care. They advocate for developing political, business, and financial acumen, skills required to analyze the practice, quality, and cost aspects of operating an organization, including those related to patient care delivery. An applied understanding of systems thinking demonstrates insights on organizational structure, culture, conflict resolution, change management, and other skills related to organizational behavior (Porter-O’Grady, & Malloch, 2011). Acquisition of the aforementioned knowledge,

understanding, and skills aggregate to inform strategic thinking. Nursing leaders, including DNP students and graduates, must be prepared to think strategically and develop strategic plans to practice strategic management effectively. Acquisition of such skills is needed to ensure patient-centered care, informed by a nursing perspective.

Applying Bloom's Taxonomy: Six Levels of Intellectual Behavior in Strategic Planning Education

Bloom’s Taxonomy, a classification system designed to categorize skills and behaviors essential to learning (Krathwohl, 2002), can be used as a framework for examining and understanding the value of course activities and how they stimulate intellectual growth. The six cognitive levels of the taxonomy – creating (highest), evaluating, analyzing, applying, understanding, and remembering (lowest) – are listed in Figure 1. The image displays the levels of the

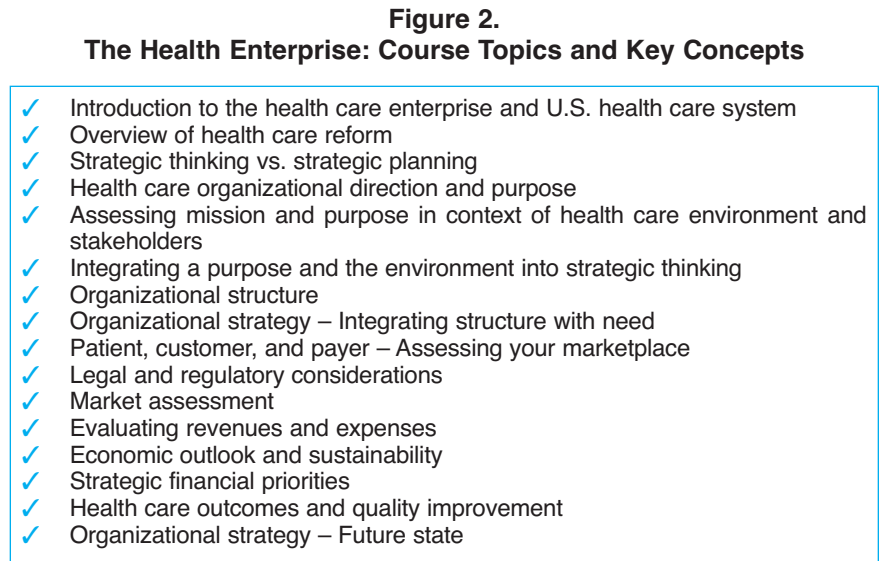
taxonomy and examples of course activities on each step that correspond to each level.

To write a strategic plan successfully, higher-level learning objectives are utilized to promote higher-level learning outcomes. Students enter the course with different levels of experience with and knowledge of the strategic planning process. Hence, the course is a stretch for each student in different ways based on his or her previous work experiences. As an example, in strategic planning, it is important to engage stakeholders in the process. Yet, not all students have a full appreciation of the array of stakeholders. Thus, they must first remember and list the stakeholders (level 1) and then articulate the interrelationships, demonstrating comprehension (level 2). Another assignment asks students to gain understanding of new laws and policies (level 2) and then apply the laws and policies to their enterprise (level 3). Overall, to successfully create a strategic plan, students must continually experience intellectual growth so that by the end of the course they are functioning at the highest level and, as a result, can formulate and develop the strategic plan (level 6).

The Health Enterprise Course

Within the GW Doctor of Nursing Practice Program, all students are required to complete "The Health Care Enterprise" three-credit course taught online, generally in the first semester of the DNP program. A purposeful decision was made to offer the course in the first semester as it immediately prepares students for strategic thinking in the program and in accompanying professional responsibilities.

Course description and outcomes. "The course provides an overview of general management business principles related to healthcare systems with a focus on strategic management and strategic healthcare leadership..."



(George Washington University, 2013, p. 1).

The primary course goal/outcome is to help each student develop critical thinking, analytical capabilities, and creative insights that support leadership development in the context of environmental changes affecting the health care enterprise. A key objective is for each student to develop a strategic plan for an enterprise of their choosing over the course of the 14-week semester. The course is highly applied. Students perform strategic plan development based on theoretical principles.

Historically, students have written plans focused on a variety of enterprises and different levels within enterprises. For instance, when focusing on health systems, a student might write a plan focused at the institution level (nursing department), unit level (geriatric, emergency, palliative care), or program level (in-service education). In academia, strategic plans have been written for schools or departments of nursing, units such as skills and simulation labs, and programs such as student nursing organizations. The range of opportunities is extensive, including the development of plans focused on clinics, corpo-

rate units, consulting practices, entrepreneurial start-ups, associations, government units/programs, and health care products/services.

Course design. The course is designed to incorporate learning and teaching strategies that support the cultivation of strategic thinking. While students focus heavily on the development of individual strategic plans for identified health care enterprises, the process through which those plans are developed employ ideas set forth by Goldman (2007), Mintzberg (1990), and Zuckerman (2012).

Course content. Students learn the constructs of strategic planning including topical areas such as organizational structure, legal and regulatory, market assessment, financial and economic, and the current and future state of the enterprise related to both the internal and external environments. The topical areas and key concepts covered in the course are included in Figure 2. One or two topics are covered each week. In each weekly session, all students research, develop, and draft a section of the plan, corresponding to the topical areas noted. Integrating new content and stitching together the various sections takes place throughout development of the

**Strategic Planning and Leadership Development:
A First-Person Account**

Dr. Mary-Michael Brown, Vice President, Nursing Practice Innovation, Medstar Health Columbia, MD, completed the Health Enterprise course during her doctor of nursing practice studies at the George Washington University. She offers her perspective as a professional who practices strategic thinking, decision making, and planning daily.

As a student in the Health Enterprise course, I determined quickly that my learning accelerated when I applied my work experience to course content. I also learned the converse was true. As a director of a newly established department, I realized creating a strategic plan for this new department would clarify its direction, establish its place in the organization's strategic plan, and serve as a unique team-building opportunity with my associates.

In weekly staff meetings, my departmental team incrementally built our strategic plan by using course content, leveraging the expert counsel of school faculty, and considering the practical and insightful feedback from classmates. This exercise had immediate benefits. First, it helped my team appreciate the importance and significance of their work to the organization's goals as well as clarified who constituted our internal and external customers. Second, in order to build our plan, I needed to discover internal resources, introduce myself to these leaders, and ask for their guidance in developing our departmental strategic plan.

This last benefit was unexpectedly far-reaching as it increased my visibility within my organization and offered my supervisor evidence that I could efficiently find and use available resources and deliver a strategic plan. I was subsequently invited to serve as a member or co-chair of organizational-wide committees, which I believe contributed to my subsequent promotions, in relatively rapid succession, within my organization.

strategic plan. The financial course content includes an examination of the major sources of revenue and expenses, developing a statement of operations in the form of an income statement. Students examine environmental impacts or disruptions that may impact financial sustainability of the enterprise. Students by no means become financial experts. They do, however, learn to consider financial implications in the context of strategic management.

Course participants. Students arrive at the DNP program through varied pathways (government, private practice, academia, for-profit enterprises) and with different educational foundations (e.g., MSN, MBA). Some students come to the classroom with the limited perspective of a clinician, and others view the material through the lenses of first-line supervisors, department heads, and chief executive officers.

Co-instructors serve as course facilitators and collaborators who

guide students in the development of a strategic plan. Historically, the course has been taught with an interprofessional perspective; one instructor is an RN (MBA, PhD) and the other a non-nurse with strategic management expertise and a master's or doctoral degree.

Students reach out to organizational executives in their place of employment to gain an interprofessional perspective and better inform strategic plan development. Professionals providing input might include the chief executive (CEO), financial (CFO), operating (COO), and information (CIO) officers. Additionally, marketing, human resource, and legal/regulatory experts are approached for input and guidance. Though the plan is written by the student, involvement of others ensures the plan is developed with input, feedback, and an interprofessional perspective. Students are encouraged to share their written work products with those who have provided

input and guidance during and at the conclusion of the course, ensuring interprofessional learning takes place and that the final product is utilized within real enterprises to the extent possible.

Student guidance. Feedback to students comes in various forms; some is general and for all students, while other guidance is more specific to a given student's knowledge base, learning needs, and choice of enterprise. Due to differences in prior exposure to strategic planning elements and principles, as well as business terminology, personalized student-centered feedback is essential. Given that each student is working on an individual strategic plan, the class, at large, is exposed to about 15 health-related enterprises. The format of the course includes both a structured framework and an ad hoc mechanism for continuous feedback and input from both faculty and student colleagues, reinforcing an interprofessional approach to strategic thinking.

Course dynamics. Drafts are presented in electronic format through an online classroom, where all faculty and classmates are able to review, question, and critique individual drafts, approaches, and thinking. Such a format gives students a focused topic area for the week and yet much latitude in which to develop their thinking. Through the iterative process of strategic planning in the educational environment described, students learn from their own experiences, faculty feedback, and, importantly, from the work, ideas, thinking, and writing of other course participants.

During the semester, as students develop each plan component, their research and work surfaces new information that requires them to regularly update previously drafted sections. This process of refinement cultivates a practice of continuous improvement and analysis of whether the current state has changed; this is a

core tenet of strategic thinking and health care quality improvement. It may seem, to some, like the feedback process may be the most critical in the learning and development of nurse leaders. Yet, it appears most of the creativity expressed by students occurs during the refinement episodes of previously drafted sections, as students are learning to be more effective strategic thinkers. Mintzberg (1990) and Zuckerman (2012) remind us that a core differentiator between strategic planning and strategic thinking is the element of creativity – only found in strategic thinking.

The fact students review and critique a wide array of plans publicly during the same period they are developing their own is a strategic design element of the course. Creativity occurs when a student's thinking is sparked by a cue and new ideas emerge and are synthesized by connecting previously considered disparate notions. The course design affords many cues to each student. Some of these cues are directed at the student's own plan. Most cues come through reviewing and listening to feedback given to other colleagues. The propensity for learning and developing strategic thinking capacity within the classroom becomes exponential.

Plan development. In developing the final plan, students envision the future and develop a plan that projects a conceptual structure of the enterprise as the health care environment continues its rapid evolution. They are required to consider nursing principles, guidelines, and standards, including those developed and disseminated by AONE, American Nurses Association, and other special interest groups. They are required to map their work to the national health care agenda. For instance, the quality chapter is written using the National Quality Strategy Priorities (Agency for Healthcare Research and Quality, 2013).

The culminating exercise in the course is for students to take all feedback and drafts generated over a 14-week period and integrate them into their final plan for submission. The plans are typically 30-60 pages and supported with elaborate financial and quality metrics, and organizational diagrams and data. A key focus in recent years has been a push for students to demonstrate the ability to integrate the various components of the document effectively. Such a focus on integration challenges students' strategic thinking capacity and has yielded, over time, an increasingly higher caliber of plan, reflecting higher levels of strategic thinking.

Student performance. The final course grade consists of three components: preliminary submission of early chapters (15%), discussion forum participation (30%), and final plan submission (55%). The students are evaluated on their discussion participation based on a rubric with five criteria: substance/content of scholarly writing, applicability; clear connections to real life situations; uniqueness (new ideas and connections); timeliness and frequency; and inclusion of evidence in the form of scholarly citations. For the final plan grade, students earn points for each of the eight required chapters. Effectiveness in exchanging ideas with and assisting peers is factored into discussion forum grading.

The plans and the students' overall performances are evaluated from multiple perspectives. Participation measured by timely drafting of key components is a baseline measure of performance. Such participation is weighted heavily toward student review and feedback of other plans, and clear demonstration of strategic thinking skills in the feedback process. The quality of a student's initial draft is considered equally important as the quality of feedback offered to colleagues through critique and advice. Follow-through

and incorporation of such feedback is expected and evaluated.

Each student arrives in the classroom with a different level of baseline knowledge; this is taken into account in the assessment process. In general, we find the students with the least amount of skill show the most progress. The students with the most skill at the beginning often assist in course facilitation and advance their leadership skills while employing their strategic thinking skills. We believe this phenomenon in the first semester of any student's DNP program sets the pattern for continuous growth and development that may last well beyond the completion of the academic program.

Evaluation

Ongoing assessment of course effectiveness is measured. Assessment of learning takes place by way of formative evaluation during the course. Instructors gauge student progress and make modifications to teaching to help each student develop the desired skills. As an example, the preliminary submission of early chapters is used as an opportunity to examine a student's forward progress and to provide feedback that indicates potential changes that will support the most effective forward progress. At the end of the course, each plan is graded and marked with instructor comments and a point total based on the quality of work, inclusion of all the required sections, and a cohesive, integrated final plan that could be used within the student's enterprise.

Students are asked to share the lessons learned in narrative form through the discussion forum. Feedback is utilized to make future course modifications. Throughout the course and long after, students provide feedback to instructors and fellow students as they share excitement of strategic planning successes, including being assigned to strategic planning teams or volunteering to participate, driven

by increased knowledge and confidence.

Utilization of Discussion Forums in Strategic Planning Education

Teaching nurses strategic planning is all-important, whether in a traditional classroom environment or via distance education. Various methods offer different benefits. One of the most significant benefits of teaching strategic planning online is the availability of a 24-hour per day, 7-day per week discussion forum. Busy nurses with challenging schedules can sign on, day or night, to participate asynchronously. The use of the discussion forum as a platform to dialogue among peers affords experiences similar to those described by Goldman (2007). Most notable, all students in the classroom are exposed to the general work experiences of other diverse students. As such, students not only develop their thinking about their own strategic enterprise, they also co-learn as they gain understanding about the enterprises of their colleagues. The discussion forum provides the students with four levels of interaction that Goldman (2007) describes as essential for developing strategic thinking. Students are most comfortable operating at a *personal* level of interaction, discussing their own experiences and situating most learning within a context that is familiar to them. The "rules" of the classroom require students to weigh-in, contribute, and challenge the thinking and planning of their colleagues. Most students participate freely, allowing strategic thinking to emerge from the focused, yet unstructured discussions, per the classic work of (Mintzberg, Raisinghani, & Thoret, 1976). This process integrates the *interpersonal* and *organizational* levels of interaction (Goldman, 2007). As students incorporate experiences of their colleagues into the dialogue about their own enterprises, and address the real threats of health care

reform, the final level of interaction referred to by Goldman as *external* is realized in the classroom.

The different experiences and perspectives of others, varied levels of interaction, and variety of strategic enterprises together amplify the potential impact on each student's development. Key outcomes from over 5 years of teaching this course include: (a) transformed students' thinking and confidence about whether or not they have the capacity to think strategically; (b) real-time and documented evidence of student progress on critical and integrative thinking skills; (c) enhanced student appreciation for other professions and practices that may be different from what they have known; (d) patterned strategic thinking (Mintzberg, 1990) that develops from weekly participation and articulation of strategic ideas through cycling the material in an organized way.

Through the Eyes of Instructors

One of the most rewarding aspects of teaching this course is the qualitative experience of reading a discussion thread that progresses over a series of days, advancing to higher levels of critical thinking and synthesis. The documented evidence not only highlights the individual's progression, the discussion thread illuminates the learning across the classroom.

Facilitation of the discussion is critical to bridging differences and fostering growth opportunities among the students. A committed effort from the instructor to work with each student is vital, though labor intensive. The strategic planning process requires iterative cycling and reworking of assumptions, ideas, and incorporation of new information. Astute engaged instructors help the students to develop. The approach taken in this course's virtual classroom provides ample time for each student to develop comfort-

ableness and to engage. Participation in the process is paramount to thinking strategically. The inter-professional nature of the course is instrumental in gaining strategic thinking skills as students transfer strategic thought from one context to another, modifying and synthesizing new ways of looking at a familiar world.

Drafting, critiquing, and ultimately integrating a series of strategic plans through collective review and feedback, between the plan developer, fellow students, and faculty facilitators, clearly benefits each student. Perhaps the strongest evidence to our claim is in the quality of plans and the demonstrated potential that the course yields desired outcomes. In recent years, students have turned their plans into real enterprises after course completion.

Implications

Often, formal strategic planning education is offered only within nursing leadership and administration programs. Yet, strategic thinking, management, and planning and the requisite understanding, skills, and savvy are imperative if all nurses are to engage in decision making with other health and non-health care professionals, practicing to the full extent of their education and training (Institute of Medicine, 2011). With content expertise, strategy skills, and confidence, nurses are better situated and have the potential to be more influential and impactful in using their verbal and written skills to be effective in decision making and planning for the provision and delivery of accessible, affordable, and high-quality patient care.

Nursing leaders from all aspects of health care benefit from learning to think and manage strategically. For instance, when nurse educators gain strategy skills, they are better prepared to apply what they learn to planning efforts within their school or program, or in external service roles.

When advanced practice nurses engaged in direct patient care understand strategic management, they are poised to influence and direct strategic efforts where they practice. Alternatively, they may use what they learn to develop a strategic plan en route to setting up a private practice or health-related business. Equal arguments can be made about strategic management and planning on behalf of nurses working in for-profit enterprises such as corporations and nonprofit enterprises such as government, think tanks, research organizations, and many others. In all cases, nurses with strategic savvy are valuable and poised to be effective contributors on strategic planning teams and task forces. Our experience is that those who complete the Health Enterprise course stand out positively in their work environment and become a resource for others engaged in strategic planning efforts.

Viewed in an economic prism, the Health Enterprise course requires DNP program graduates to not only understand the changing fiscal environment, but formulate strategies to provide services in a world that is constantly seeking means to "bend the cost curve" in a downward arc. The graduates of the course leave with a comprehension of how environmental challenges, often in the form of new rules and regulations, might impact their individual practice areas and thus require continuous adjustments to remain within the required fiscal constraints of the new environment.

Summary

The integration of a significant strategic planning exercise within DNP education can be powerful in the development of confident, knowledgeable nurse leaders to help ensure a healthy future for patients, families, and society. This article provides a roadmap to assist others in integrating essen-

tial content into DNP programs. Imagine what 3 million nurses with knowledge, skills and abilities, earned trust, and full engagement and participation in decision making, from planning through implementation and evaluation, could do to influence and shape the future of health care. With strategic planning expertise, the possibilities for impacting the future of nursing and health care are limitless. \$

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ADDITIONAL READING

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Evaluation Form

(All questions must be answered to complete the learning activity. Type answers to all open-ended questions on a separate page.)

1. I verify I have completed this activity. Yes No _____ *SIGNATURE*
2. What do you plan to change in your practice as a result of completing this educational activity?
3. What information, from this activity, do you plan to share with a professional colleague?
4. What did you value most about this educational activity?
- | | Strongly Disagree | | | Strongly Agree |
|--|-------------------|---|--------------|----------------|
| 5. I was able to meet the objectives of this educational activity: | | | (Circle one) | |
| a. Describe six levels of intellectual behavior in strategic planning education. | 1 | 2 | 3 | 4 5 |
| b. Define the Health Enterprise course offered in one DNP program. | 1 | 2 | 3 | 4 5 |
| c. Discuss the implications of strategic planning education in nursing leadership and administration programs. | 1 | 2 | 3 | 4 5 |
| 6. The content was current and relevant. | 1 | 2 | 3 | 4 5 |
| 7. The objectives could be achieved using the content provided. | 1 | 2 | 3 | 4 5 |
| 8. This was an effective method to learn this content. | 1 | 2 | 3 | 4 5 |
| 9. I am more confident in my abilities since completing this material. | 1 | 2 | 3 | 4 5 |
| 10. The material was (check one): <input type="checkbox"/> New <input type="checkbox"/> Review | | | | |
| 11. This activity was free of commercial bias. (check one – if no please comment) <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | |

This independent study activity is provided by **Anthony J. Jannetti, Inc.** (AJJ).

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This article was reviewed and formatted for contact hour credit by Donna M. Nickitas, PhD, RN, NEA-BC, CNE, FAAN, *Nursing Economic\$* Editor; and Rosemarie Marmion, MSN, RN-BC, NE-BC, Anthony J. Jannetti, Inc., Education Director.

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