JOHNS HOPKINS
SCHOOL of NURSING

DNP Scholarly Project Plan

Please provide complete information for each item below. If an item is inapplicable, explain why or insert N/A.

Date: _____

Faculty Advisor: _____/Student: _____

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1. **Abstract**

   One page abstract briefly stating the problem, purpose, aims, and significance of the scholarly project.

2. **Purpose**

3. **Aims**

4. **Background** (briefly define the clinical practice problem, summarize literature including current practice or educational guidelines, current institutional practice or standard of care, and any other relevant information to justify the scholarly project.

5. **Methods**

   a. Study design (e.g., pre-post test design; descriptive)

   b. Sample (i.e., target population, age range, study site(s)). Does the study include vulnerable populations (i.e., prisoners**,** adults lacking capacity to consent, pregnant women, Non-viable neonates/neonates of uncertain viability**,** Non-English speakers, children who are in foster care or wards of the state). If a single institutional project, please specify one unit or multiple units as study sites.

      a. Inclusion criteria
      b. Exclusion criteria

   c. Setting

   d. Measures

   e. Timeline (from implementation to completion of project)

f. Analyses (organize in accord with each aim)

6. Procedures

a. Describe sequence and timing of all project activities. Be sure to distinguish scholarly project procedures from those that are part of routine care)

b. Include how participants are recruited.

c. Discuss data collection procedures

7. Data Management

a. Discuss how participant data will be identified.

b. Address how data will be secured.

c. Address procedures for keeping participant ID list separate from the data (i.e., assuring that the data cannot be associated with a participant)

d. Identify who has access to the data.

8. Risks and Potential Benefits

a. Address the risk of loss of confidentiality and/or any other risks.

b. Discuss the steps you are taking to minimize this risk.

c. Discuss your plan for reporting unanticipated problems or study deviations

d. Description of the probable benefits for the participant, for the institution and/or society.

9. Payment and Remuneration

a. Detail compensation for participants.

10. Type of review requested. Please refer to the attached Decision Worksheet or the eIRB Wizard**:**

a. Quality Improvement QI

b. Exempt

c. Expedited

d. Convened (Full IRB review)