

Development and Implementation of a Collaborative Nurse Practitioner Clinical Training Program



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Objectives

- 1) Describe the major obstacles to increasing the number of well-prepared APRNs in the state of Maryland.
- 2) Identify key strategies for establishing a collaborative academic-clinical partnership to increase the readiness of APRN students to provide care across the continuum in the state of Maryland.
- 3) Describe the successes and challenges in facilitating innovations that advance the culture of health in clinical settings for APRNs.

Background

- The national need for APRNs is expected to increase by more than 25% over the next 10 years; only 1 in 4 NPs elect to base their practices in non-urban areas.
- NP programs must increase both the number and quality of available preceptors and sites to match this need.
- However, a requirement of DNP nurse practitioner programs includes completing at least 1,000 clinical practice hours.
- Compounded with the lack of preceptors and clinical sites, this issue impacts the quality of health care providers and their care of patients in the state, especially in rural areas.
- While there is a great need for APRN graduates, there are even fewer clinicians available to precept and mentor them.

Project Goal

Develop a collaborative academic-practice partnership to increase clinical practice sites and readiness of nurse practitioner students to provide care across the continuum.

Implementation

Developed a collaborative academic-practice partnership

- Established an Advisory Board
- Attended integral hospital meetings
- Held monthly team meetings at UMSON
- Embedded behavioral health faculty

Increased clinical practice opportunities for nurse practitioner students

- Clinical training rotations
- Relationship-building
- Participation in NSP II-16-119 grant
- Integration of faculty

Established CATAPULT, a new advanced practice provider professional development and mentorship program

Developed faculty practice sites to translate collaboration between the hospital and UMSON

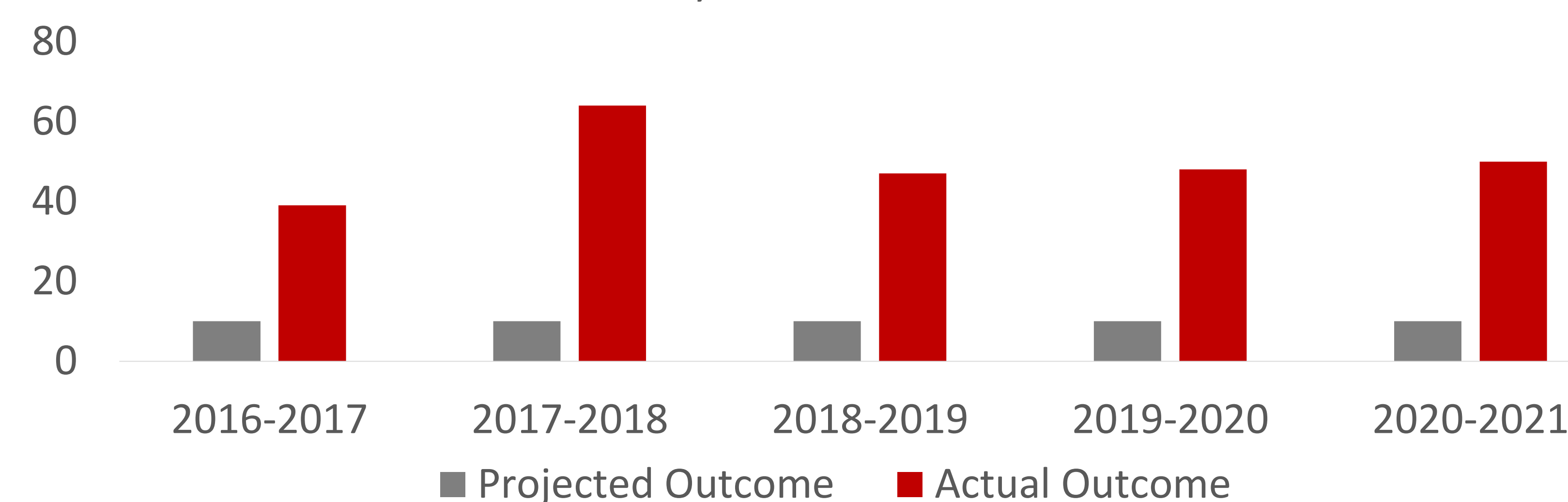
- Faculty practice position at the Comprehensive Care Center
- Funded through progressive transition of grant-funded vs. provider-billed services

Results

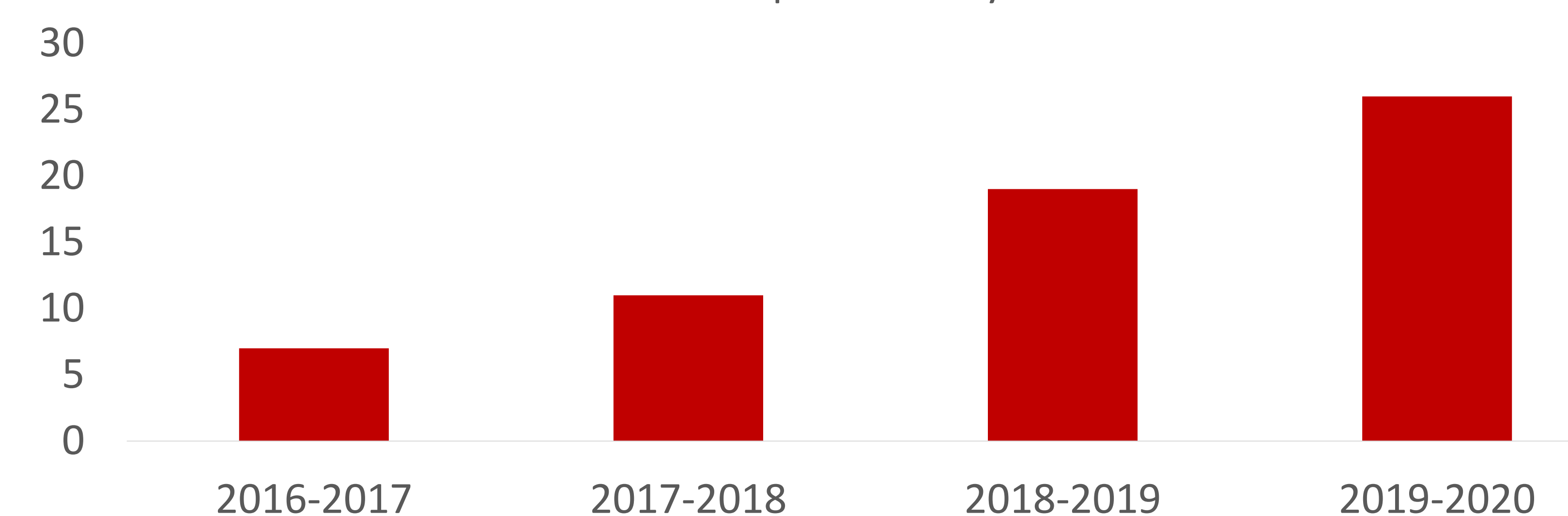
There were 329 total clinical & non-clinical experiences at UM UCH

- 203 clinical NP rotations
- 54 CRNA rotations
- 37 practicum experiences
- 35 DNP projects

Number of APRN Clinical Rotations by Academic Year



APRN Non-Clinical Experiences by Academic Year



Discussion

- Successful partnerships require face-to-face interactions, imbedding faculty in the clinical environment, and building strategic relationships.
- Expanding clinical opportunities outside of the hospital and into the community can improve clinician recruitment/retention and increase clinical experiences.
- Obtaining buy-in and support from advanced practice leaders is essential in recruiting and supporting competent preceptors.
- Nursing schools and health care institutions must collaborate to improve the academic and clinical preparation of APRNs.

Implications for Practice

- This model provides opportunities for APRN faculty to monitor and evaluate APRN students while the preceptor is concentrated on providing vital clinical education.
- The success of implementing this program in a rural, underserved region sets an example for other projects to increase access to healthcare in other parts of Maryland and across the nation.

References

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Notes

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