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Providing care for aging, chronically-ill, and underserved populations are challenging existing healthcare provider shortages. The use of nurse practitioners (NPs) and physician assistants (PAs) is an established means to help address provider shortages (Ewing & Hinkley, 2013; Harrington, 2011; Hooker & Everett, 2012; Swan, Ferguson, Change, Larson, & Smaldone, 2015). Advanced practice provider (APP) is an inclusive term to describe both NPs and PAs whom are increasingly employed by healthcare organizations, yet do not receive adequate professional on-boarding support. Healthcare organizations have established orientation programs for recently hired registered nurses, including time-period adaptations for newly graduated nurses. Being relatively recent solutions to the provider gaps in the healthcare industry, APPs experience role ambiguity and are often without support from colleagues or organizations during times of transition (Harrington, 2011; Hooker & Everett, 2012; Hill & Sawatzky, 2011). This lack of support can lead to job dissatisfaction, high organizational turn-over rates, professional attrition, and gaps in patient care, either due to unfilled APP positions or poorly integrated providers; creating additional cost burdens for the nation’s already financially strained healthcare system (DeMilt, Fitzpatrick, & McNulty, 2010; Faraz, 2017; Harrington, 2011; Hill & Sawatzky, 2011; MacLellan, Levett-Jones, & Higgins, 2017).

The APP workforce is projected to increase by 30% for PAs and 130% for NPs by 2025 (Hoff, Carabetta, & Collinson, 2017; National Commission on Certification of Physician Assistants (NCCPA), 2017; Poghosyan, Liu, Shang, & D’Aunno, 2017). With approximately 30,000 APP graduates entering the workforce annually it is imperative that these providers receive robust on-boarding and support if they are to meet expectations of providing high-quality care to patients with chronic and complex health care problems and remain in their professional role (American Association of Nurse Practitioners, 2017; NCCPA, 2017; MacLellan et al., 2013). The Institute for Healthcare Improvement’s (IHI) Triple Aim initiative is a global framework to help organizations decrease cost, improve quality, and increase access of healthcare services for all populations (IHI, 2018). Expanding the Triple Aim by including clinician satisfaction acknowledges the impact that provider needs have on overall patient outcomes (Bodenheimer & Sinsky, 2014). To be on target with the Quadruple Aim organizations must minimize the unnecessary costs associated with low retention rates, inadequate system integration, provider and patient dissatisfaction, and failure to meet quality outcome standards.

A time-honored, integral means of support and quality onboarding in many industries is mentorship. This is a dynamic, evolving relationship between an experienced professional and a novice professional that promotes knowledge application, systems navigation, organizational socialization and personal role integration. A Japanese proverb states “better than a thousand days of diligent study is one day with a great mentor” (Pillemer & Rheume, 2013). While one day is certainly not equivalent to years of study, the value of a great mentor in the application of didactic knowledge is under-recognized in healthcare. Moving from the expert registered nurse to novice NP or entering into healthcare for the first time as a PA, while navigating the nuances of independent advanced practice in a healthcare system based on the medical-model is challenging; requiring strong professional self-identity, social skills, and organizational support. These are facets that cannot be taught in a didactic fashion but must be learned and practiced under the guidance of a more experienced peer, known as a mentor (Hill & Sawatzky, 2011; Hooker et al., 2015; Horner, 2017; Manzi et al., 2017). Providers who have a strong professional self-identity and feel supported by an organization are much less likely to leave (Faraz, 2016; Gerhart, 2012; Hooker et al., 2015). While mentorship alone does not solve other factors of job satisfaction, such as autonomy, workloads, benefits, and work environment, mentors can help novice APPs gain the self-confidence
needed for autonomy, provide practical advice on managing workloads, and provide an avenue to the socialization needed in the work environment (Faraz, 2016; Race & Skees, 2010).

Healthcare, particularly nursing, lags behind other industries such as teaching and business management when it comes to supporting and growing the next generation; as evidenced by the paucity of literature addressing mentorship in healthcare professions. A preliminary search of PubMed, Cochrane, and CINHAL databases revealed a limited number of articles (approx. 40), few of which were primary research, on NP mentoring. Expanding the search parameters to include nurses and PAs revealed a few more results (approx. 80). However, in comparison to the amount of results returned when searching mentorship in the fields of education, engineering, and management (over 1,600; greater than 56,000 if thesis and dissertations are included) it is apparent there is a research gap in APP mentorship. This project will expand on the limited existing studies regarding the associations between mentorship, turnover rates, and job satisfaction, as well as explore the desired and beneficial characteristics of quality mentors. Information obtained during the project will be used to propose methods to increase the quality and quantity of experienced APPs serving as mentors. If APP mentorship mirrors the effects of mentorship in other industries, job satisfaction and retention will increase, as will the quality of care provided by APPs. Strengthening these professional foundations will likely allow for improved patient outcomes and reduced healthcare spending; as APPs will be better equipped to achieve the Quadruple Aim, experience improved transition to practice, and be more likely to remain in their professional roles over time.

Title:
Mentorship Matters: Understanding the Impact of Mentorship for Advanced Practice Providers

Keywords:
Advanced Practice Providers, Mentorship and Onboarding

References:


Institute for Healthcare Improvement. (2018). *Triple aim for populations*. Retrieved from http://www.ihi.org/Topics/TripleAim/Pages/default.aspx?gclid=CjwKCAiA9rTBRBNEiwAt0Zhw3Id_Dig6PPie3q9Uhl9Ay0m_pRRr-K1C6tUD_i2nsyhJHK55qboBoCbXQQAvD_BwE


**Abstract Summary:**
Advanced practice providers report a lack of onboarding and professional support which leads to job dissatisfaction, high turnover rates, and gaps in patient care; wasting billions of healthcare dollars. This
A doctoral project is an examination of barriers to mentorship, characteristics of quality mentors, and proposals to increase APP mentorship.

Content Outline:

1. Nurse Practitioners and Physician Assistants, collectively termed Advanced Practice Providers (APP)
   1. Lack of onboarding/organizational support
   2. Turnover rates twice that of physicians
      1. Burnout
      2. Job dissatisfaction and job hopping
      3. Professional attrition
2. Poor onboarding and professional growth support
   1. wastes health care dollars
   2. negatively affects patient outcomes
   3. decreases patient satisfaction
3. Mentorship is a time-honored onboarding and professional growth method
   1. LACKING in healthcare, especially for APP
      1. Literature Review 40-60 vs 1,600 in engineering, education, business
      2. Other industries demonstrate the following improvements with mentorship
         1. Faster, more robust onboarding
         2. Job satisfaction
         3. Professional growth of mentee and mentor
         4. Organizational commitment
   2. If APP mentorship shows the same improvements could help meet
      1. Institute for Health Improvement’s Triple Aim
         1. Improve Patient Satisfaction – more confident providers, less turnover
         2. Lower Healthcare Costs – better communication, strong provider networks
         3. Improve Population Health – quality, efficient care improves outcomes
      2. Expanded to Quadruple Aim
         1. Incorporates Improved Clinician Satisfaction – reduced burnout, better professional support and growth
   3. Designing resources, toolkit or support for APPs first requires understanding of barriers to mentorship and characteristics of good mentors
      1. Gap analysis performed at a multispecialty oncology practice that is part of a larger, multi-state integrated healthcare delivery system (IDHS)
      2. IDHS recently implemented formal APP orientation/onboarding program but struggled to find staff wanting to mentor
4. Gap Analysis conducted via online survey open to all 54 APPs in the oncology practice
   1. What hinders mentorship for the APP
      1. Barriers to mentorship (Ragins & Cotton, 1991)
      2. Open-ended description of perceived barriers
   2. What are the qualities of a good APP mentor
      2. Ranking of 15 mentor qualities in 3 domains
   3. Does APP mentorship impact organizational commitment?
4. Gap Analysis Results
   1. Descriptive analysis of demographic data
      1. NP or PA
      2. Age
      3. Years RN experience
      4. Teaching experience
5. Years of APP practice
6. Number of APP employers
  2. Independent variable - Mentorship experiences
  3. Correlation and multiple regression to be calculated using IBMs SPSS software
  4. Qualitative themes analysis will be performed if adequate free comments received
  5. To be completed in Jan/Feb of 2019
5. Proposed solutions to increase APP mentorship
   1. Solution 1 to be determined
   2. Solution 2 to be determined
   3. Solution 3 to be determined
6. Summary of potential benefits of APP mentorship
   1. Faster onboarding
   2. Increased organizational commitment
   3. Reduced professional burn out/attrition
   4. Career growth of both mentor and mentee
   5. Improved patient satisfaction and outcomes

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