

Advancing the Practice of Nursing through Specialty Fellowship Development

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Learning Objectives

- Describe drivers for development of Advanced Practice Nurse (APN) fellowship training in specialty/subspecialty areas.
- Identify key considerations in the implementation of an APN Fellowship program and relate to other specialty practice areas.
- Identify outcomes of the first year of an APN Fellowship program in Developmental-Behavioral Pediatrics (DBP).



Children's Specialized Hospital

- All pediatric facilities
- Inpatient acute rehab hospital
- Outpatient subspecialty services
 - 13 sites
 - Patients served > 31K/yr
- 2 long term care hospitals



Impetus for this fellowship

- IOM report
- Increased demand
 - Barriers to access
 - Decreased physician subspecialists
- Nurse practitioner educational preparation
- Few Pediatric fellowships – none in DBP in US
- Ease transition to subspecialty practice



IOM report

- 2010 – Institute of Medicine
- *The Future of Nursing:
Leading Change, Advancing Health*
- APRNs should function to full extent of education and training
- Recommended residency programs for nurses including after the completion of an advanced practice degree



Barriers to Access

**28K
docs**

**Shortage of
pediatric
subspecialists**

**80M
children**

**Average wait
time for care**

**3
months**

**Decreasing
workforce**

**Increasing
complications**

Autism
ADHD
Asthma
Depression
Diabetes
Obesity

**Travel distance
to receive care**

**40+
miles**



Adapted from "America's Children Need Access to Subspecialists", AAP

Nurse Practitioner Preparation in US

- Master's / Doctoral education in specific patient population
 - Nationally validated competencies
- National Certification
- State licensure/certification
- Population focused:
 - Family
 - Pediatric [acute or primary care]
 - Women's health
 - Adult-gerontology [acute or primary care]
 - Neonatal
 - Psychiatric-mental health



APRN Competencies

COMPETENCIES

MEASURES OF COMPETENCIES

Identified by Professional Organizations (e.g. oncology)

Specialty Certification*

APN Fellowship



Specialty

CNP, CRNA, CNM, CNS in the population context

Population Foci

Licensure based on education and certification**

Role

APRN

APRN Core Courses: Patho/physiology, Pharmacology, Health/Physical Assessment

*Certification for specialty may include exam, portfolio, peer review, etc

**Certification for licensure will be by psychometrically sound and legally defensible examination by an accredited certifying program

APN Fellowship Research

- **Original Research**

- Hart & Macnee (2005) & Hart & Bowen (2016)

- Survey methodology to assess perceptions of preparedness for NP practice
- Findings consistent in both surveys
- > 50% NPs felt “somewhat prepared”, or “very unprepared for practice”
- >86% NPs would be interested in postgraduate residency preparation



APN Fellowship Research

- **Transition to Practice: from RN to APN**
 - Concept Analysis: Role Transition (MacLellan, 2015)
 - Mentorship may improve transition
 - Exploring factors that influence transition (Barnes, 2015)
 - Found only formal orientation contributed to successful NP role transition ($\beta = 6.24, p < .001$); prior RN experience not significant
 - Grounded Theory: Expert RN to APN (Fleming, 2011)
 - Developed conceptual model related to transition into role for ICU APN



Fellowship Models

- **Physician Fellowships / medical model**
 - Focus on subspecialty after residency
 - Develop clinical acumen and skills & promote research
- **Acute care APN Fellowships**
 - Initially developed by hospitals to fill the gap caused by reduced resident work hours
- **Specialty APN Fellowships**
 - Carolina HealthCare System – APN & PA, several tracks, 158 fellows over 3 years (Taylor, 2017)
 - Other programs in US: Urology, Oncology, Hepatology, Neurology, Palliative care



APN Fellowships

- Mentoring by APNs & physicians increases confidence and development of clinical skills (Zapatka et al., 2014)
- Provide structure, depth of knowledge, breadth of experience (Kells, et al 2015)
- Offset feelings of “disequilibrium...anxiety, insecurity, inadequacy, and uncertainty” due to transition with the 1st year being most difficult (Kelly & Mathews, 2001, p. 161)



Fellowship Development

Concept development

Literature review
Residency vs Fellowship
Environmental scan
Define purpose

Meeting with key stakeholders

Develop and present
business proposal/ ROI/
new FTE request
Secure funding
Review ACGME medical
fellowship

Develop curriculum

Develop fellowship
education plan
Physician preceptor and
APN mentor selection
process
Coordination with KYSS
and LEND Fellowships



Curriculum

CSH APN Fellowship

Focused clinical experience

Advanced didactic education (ACGME)

Professional mentoring

Research involvement

LEND Fellowship

Didactic education

Interdisciplinary collaboration

Leadership project

KYSS Fellowship

Self-paced online modules

Capstone project



Fellowship content

Didactic

- CSH lectures
- ACGME required content
- Grand rounds
- LEND
- KYSS
- DBP Review

Clinical

- Direct patient care
- Formal training on DBP screening and diagnostic tools
- Transdisciplinary observational experiences

Professional development

- APN mentor
- Collaboration
- Research
- Advocacy



Overview of fellowship

- 12 months, full time, 40 hours/week
 - 4-8 hours didactic/week
 - 32 hours/ week clinical orientation
 - 8 hours/week with APN mentor
- Rotations
 - Foster interdisciplinary collaboration
 - ST/PT/OT/ABA; psychology; SW
 - Other subspecialties: Psychiatry, Physiatry, Special Needs Primary Care, LTC
 - CSH “teams”: Autism Team, Feeding Team



APN Fellow Outcomes



Benefits of CSH Fellowship



Increased
patient
access

- Specialty trained APN
- Decreased turnover
- Strong collaboration
- Increased revenue /productivity
- Research



Next Steps

- Research on fellowship outcomes
 - Clinical outcomes, provider expertise, patient satisfaction, APN satisfaction, productivity
- Expand to pediatric special needs
 - Peds Physical Medicine and Rehab started 2017
- Consider national accreditation
- External funding for fellowships in subspecialty areas with provider shortages



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THANK YOU!

