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FUTURE OF NURSING™ CAMPAIGN FOR ACTION

Development and Implementation of a Collaborative Nurse Practitioner Clinical Training Program

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Abstract

The national need for Advanced Practice Registered Nurses (APRNs) is expected to increase by more than 25% over the next 10 years, and only one in four APRNs elect to base their practices in non-urban areas. Rural areas in Maryland are particularly affected by the current APRN shortage. Furthermore, requirements of completing a Doctor of Nursing Practice (DNP) APRN program include the completion of a minimum of 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 available clinical sites and clinicians to precept and mentor them. To address this issue, nursing education programs must increase both the number and quality of available preceptors and sites.

The University of Maryland School of Nursing proposed the establishment of an academic-clinical partnership that created preferred clinical training sites for APRNs in the state of Maryland to meet the university's need for high quality clinical experiences and the hospital's desire for a pipeline of well-prepared APRN staff. This training program, partnered with the University of Maryland Upper Chesapeake Health System (UM UCH), is dedicated to training APRNs in a variety of specialty practice settings within the hospital system and the community.

The proposed training program provides an infrastructure and capacity to clinically train APRN students at the university health system. The partnership embeds faculty in the clinical environment and develops and implements clinical training rotations for APRN students built upon their combined expertise. The rotations provide clinical practice sites for at least 10 APRN students annually, creates a pipeline of APRNs, and creates opportunities for relevant clinical practice for faculty.

Faculty additionally collaborated with university health system educators to create a model to transition from APRN student to full practice in the system by bridging their proposed fellowship

program for APRNs. These efforts evolved throughout the lifetime of the partnership into the creation of an advanced practice provider mentorship program. This partnership could serve as a model for future academic-clinical partnerships.

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