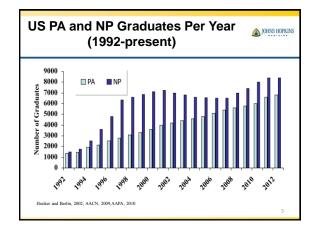
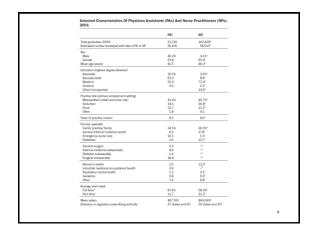


Objectives



- Explore training and development paths of PAs and NPs
- Understand the evolution and role of postgraduate PA and NP residency training programs
- Identify strategies for matching practitioners to specific positions
- Explore key content of orientation and mentoring plans to prepare the practitioner to function well in a new role





NP and PA training paths: Early days - PAs



- Experienced combat medics from Vietnam war
- Entered Duke University's PA program in 1965
- Trained utilizing medical model and received certificate of completion

NP and PA training paths: Early days - NPs

- A JOHNS HOPKINS
- · First NP program was developed in 1965 at University of
- · Experienced RNs were trained for new role of advanced pediatric nurse practitioners
- Certificate Program

NP and PA training paths: today - NPs



- Certifications available:
 - Acute Care
 - Adult
 - Psychiatric/Mental Health
 - Family
 - Pediatric
 - CNP, ANP, PMHNP, FNP, PMHNP, GNP, PNP
- AACN DNP should be the preferred entry degree by 2015

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Postgraduate Residency or Fellowship Training - Why?



- Increase knowledge in chosen specialty
- · Gain skills specific to chosen area of medicine or surgery
- · Improve critical thinking skills
- · Gain confidence
- · Continue a structured education program
- · Gain experience that normally takes years to obtain in one year
- · Expand employment opportunities

APPAP Member PA Residency ORNSHOPKINS **Programs**

- Acute care medicine (1)
- Anesthesiology (1)
- Cardiothoracic (1)
- Critical Care/Trauma (1)
- Dermatology (1)
- Emergency medicine (9)
- Hospitalist (1)
- Neonatology (1)
- Nephrology (1) - Neurosurgery (2)
- Ob/gyn (2)
- Oncology (1)
- Orthopedic Surgery (5)
- ENT (1) - Psychiatry (3)
- Surgery (9)
- Urology (3)

Postgraduate PA residencies Orns HOPKINS



- 53 member programs with approximately 70 available programs total
- · Roughly 150-200 graduates per year
- · At least 2 programs accept nurse practitioners
- · Generally are 12 months in length and follow ACGME rules for physician resident 80 hour work week
- · Accreditation for PA residency programs began in March 2008 by ARC-PA

Nurse Residency Programs



- March 2000: University Healthcare Consortium (UHC) and AACN worked to develop strategies to address nursing shortage, enhance the expertise of nurses, reduce practice errors, and minimize burnout
- · According to survey of UHC hospitals in 2000 85% had an extended program for new RN grads however there was lack of
- · UHC/AACN built a one year nurse residency curriculum

Nurse Residency Programs



- · UHC/AACN program objectives:
 - Transition from entry-level, advanced beginner nurse to competent professional nurse
 - Develop effective decision making skills related to clinical judgment and performance
 - Be able to provide clinical leadership at the point of patient care
 - Strengthen their commitment to nursing as a career choice
 - Incorporate research-based evidence into practice
 - Formulate individual career development plans
 - As of March 2010 UHC/AANC Nurse Residency Program participants: 57

Nurse Practitioner Residencies Ornshopkins



- IOM has recognized the need for innovative programs and has advised health care organizations to take actions to support nurses' completion of a transition to practice program after completing n advanced practice degree or when transitioning into new clinical practice areas.
- · First NP residency established 2007 at Community Health Center in Family Medicine in Connecticut, a FQHC.
 - Goal of this residency was to train nurse practitioners who were interested in primary care in an underserved area and provide additional support

Postgraduate NP Residencies Ones HOPKINS



- Other programs:
 - * Methodist Hospital Transplant NP Fellowship
 - * Lahey Clinic (Tufts) NP Dermatology Fellowship
 - Johns Hopkins Gastroenterology and Hepatology Fellowship
 - Penobscot Community Health Care Center in Bangor, ME received HRSA grant to develop (Accepting first 2 NPs September 2011)
 - University of Maryland NP Critical Care Fellowship (starting November 1, 2011)

Johns Hopkins PA residencies (A) DRINS HOPKINS



- · Surgical Residency 2004
 - First program accredited by ARC-PA in 2008
- 37 graduates, 13 retained (35%)
- Critical Care Residency 2008
 - 6 graduates, 2 retained (33%)
- · Residencies:
 - Provide structured education that extends beyond PA residents
 - Offer CME and CEU to department PA and NPs for selected lectures
 - Provide opportunity for multidisciplinary education
 - Support retention of graduates
- · PA residents have filled deficits in physician resident, NP, and PA staffing when needed

So, you're ready to hire...



....and you have an application in front of you. How do you know this is the right person?



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Key traits



- Experience tells us there are some key things we need to find out
 - Work and life experience
 - Clinical acumen
 - Critical thinking
 - Drive

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Key traits



- Ability to set specific, definable goals with assistance
- Self awareness and insight
- Receptiveness to input
- Willingness to think outside the box (and themselves)

Key Questions

Is there a match between your job and their desires?



- · Tell me about yourself and what you're looking for in a position?
- · What kind of practice are you looking for?
 - 1:1 with MD, team or independent;
 - inpatient, outpatient, mix of both;
 - critically ill, acutely ill, not ill?
- · What do you want your schedule to look like?
 - Work hours/days per week
 - Off shifts, weekend shifts

Key Questions

Do they have the skills that this position requires?



- Tell me about your prior work experience?
- Clinical and non-clinical
 - Management, reporting structure, independence, level of autonomy/decision making
- Tell me about your clinical rotations/training?
 - Surgical (PA, RNFA)
 - ICU (level of acuity, specialty or general)
 - Inpatient/outpatient
 - Internal medicine, specialty
 - Academic vs. non-academic settings

Key Questions

How much insight do they



- · How would you rate your clinical skills and abilities?
- · What kind of orientation and mentoring do you think you'll require?
- · What would you colleagues who like/don't like to work with you say about you?
- What kind of practice/where do you see yourself in 2, 5 years?
- · What will you need to do to achieve those goals?

How much drive do they have?

Key Questions

experience



- Tell me about a clinical decision you've made that you later regretted
- · Can you tell me about a difficult situation with a superior/colleague and how you dealt with
- You are called to see a patient with complaint of ____. Walk me through how you would handle that call.

Questions they should ask us



- What skills and abilities does this position require?
- · How will I work to gain those skills/refine my current skills?
- · To whom do I report? Who is measuring my success/concerns?
- · Who is my preceptor/mentor, and how often will I see them or work with them?
- How long is my orientation, who is in charge of it?
- How do I get/give feedback on how thing are going?

Right person, right job



- · Choosing the right person
 - Matching applicant to position
 - Matching applicant to preceptor/mentor



- · Choosing the right area
 - Level of care
 - Resource availability
- · Be clear about what is needed
 - Service based, unit based, provider based?
 - Inpatient, outpatient, OR, mixed?

