



# How and When to Enhance and Expand Your Program

2022 Annual National Nurse Practitioner Residency &  
Fellowship Training Consortium Conference

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# Learning Objectives

1. Participants will identify at least 1 idea to implement to help expand or enhance an established program.
2. Participants will identify at least 1 lesson learned when expanding an existing program.
3. Participants will be able to describe improved outcomes and benefits from expansion of an established program.



# Poll Everywhere

Please participate by:

- Logging onto [poll.ev.com/kathleencorwin115](https://poll.ev.com/kathleencorwin115)
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# APP Workforce at SCH

- 300 + NPs & PAs
  - All inpatient and ambulatory settings including all APP teams, ED, ICUs, clinics, urgent care, primary care
  - Regional neonatal program with 24/7 APP staffing
  - 3 distinct fellowships
- Full practice authority state for NPs
- Dependent PA licensing/full practice



# SCH APP Fellowship

**Three Cohorts per year:** January, May, and September. Approximately 6-8 fellows per cohort with 18-24 total

**Clinical Experience:** Around 1,500 hours of mentored clinical practice with feedback. Fellowship Faculty provide supervision, coaching and mentoring.

**Academics:** Strong didactic component to include lectures, simulations, skills bootcamps, and case-based learning.

# History of the APP Fellowship at SCH

- **APP Fellowship program was created to:**
  - Address long lead time from APP hiring to full productivity
    - Limited clinical hours in schools compared to MD/DOs
  - Address APP vacancies
  - Provide on-the-job training with the goal to hire into workforce at SCH

# Solution: Build a Fellowship Pipeline!

Specialty-based on the job training	Structured Fellowship Approach
<p>APP education is general, not specific or specialty based.</p> <p>On the job training results in gaps in knowledge and little flexibility across specialty areas.</p>	<p>APPs gain foundational learning and skills and are flexible, with the ability to step in and serve for surges, medical leaves, etc</p>
<p>Divisions are not equipped to train new APPs with consistent results.</p>	<p>Training is consistent, with robust feedback from multiple sources.</p>
<p>APP applicants have to choose the specialty without certainty it will be a good fit.</p>	<p>This is a year long job interview for the fellow and employer.</p>

# APP Fellowship Expansion and Transition

## 2017 - 2018

- 3 cohorts per year
- 4 fellows per cohort, quickly grew to 8-10
- 4-week bootcamp, procedures, shadowing, weekly didactics
- Specialty track focus
  - ED/Urgent Care track
  - Generalist Hospitalist track
  - Cancer Care Track

## 2018 – Present

- 3 cohorts per year
- 6-8 fellow per cohort
- 2-week intense bootcamp, biweekly didactics, procedure workshop, monthly sims, structured evaluations
- Transitioned to generalist program
  - ICU track options



# Generalist Approach

- **Inpatient Teams:**
  - The first 16-18 weeks of the fellowship is spent rotating on 2 of 3 inpatient teams
- **Elective Rotations:**
  - Remainder of fellowship spent on a variety of inpatient and ambulatory teams for 4-8 week-rotations
- **Transition:**
  - Begin to transition to and orient in permanent position



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# Program Enhancement & Transition



## Lessons learned:

- Specialist route was not as successful for the individuals or the hospital
- Cross coverage
  - Flexibility with little training
- Difficult to sustain specialty track program
- Training gaps with no consistency
- May be a poor fit for the individual and the team

# Benefits of a Generalist Approach

- Structured and consistent training foundation
- Robust feedback from multiple sources
- Improved flexibility and cross coverage
- Preceptors enjoy teaching specialty
- Year long interview
- Apply for jobs across specialties
- Begin training in job with often shortened orientation



# Recent Enhancements



- PICU/CICU Tracks
- ED/ICU skills bootcamps
  - Suturing, LPs, splinting, POCUS
- Community rotations



# What's Next?

- Constantly trying to enhance and expand our program
- Increase the number of APP Fellows per cohort
  - Permanent coverage of more teams
  - Expand more into ambulatory settings
- Restructuring program leadership
  - Increased mentorship
  - Improve visibility within the hospital and across all APP teams
- Hire those with specific interests in chronically hard to fill areas

# APP Fellows

