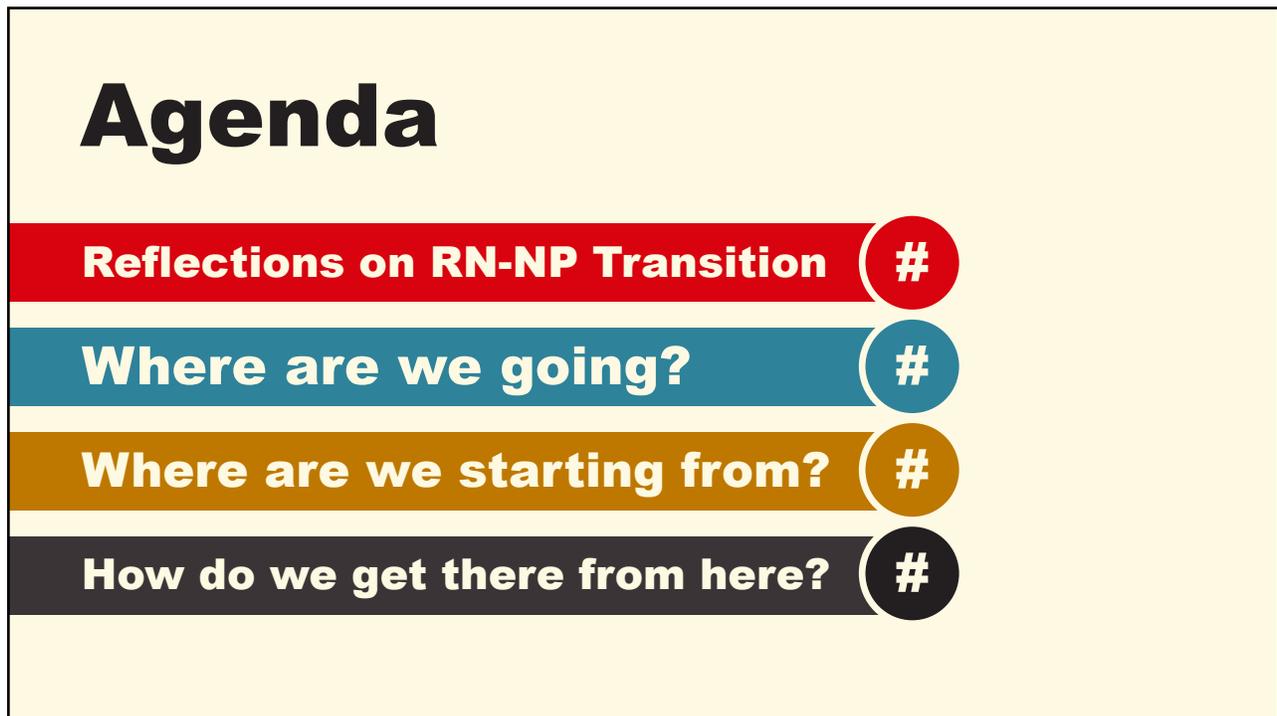


APRN Transition to Practice:
A New Frontier
Unique Precepting Challenges for the Novice APRN

Christopher Reeves, MSN, AGACNP-BC, NPD-BC

The slide features a light yellow background with abstract graphic elements: a green curved line with a black dot in the top left, a large orange circle in the top right, and two blue curved lines below it. Two horizontal red bars with black dots are positioned in the lower half of the slide.

1



Agenda

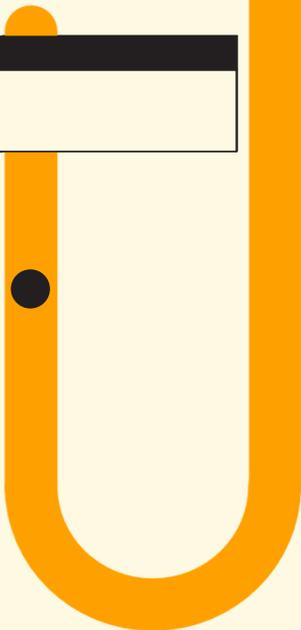
- Reflections on RN-NP Transition #**
- Where are we going? #**
- Where are we starting from? #**
- How do we get there from here? #**

The agenda items are each contained within a colored horizontal bar (red, blue, gold, and dark grey respectively) with a white hash symbol (#) in a circular icon to the right.

2

↖ 3 Scope of the Talk

- **NPs are a subset of APRNs**
- **Novice Advanced Practitioners are a significant fraction and the focus of this talk**
- **NPs face similar issues as RNs with respect to precepting**
 - **Numbers**
 - **Preparedness**
 - **Burnout**



3

↖ 4 Meet Our New Hires - Luis



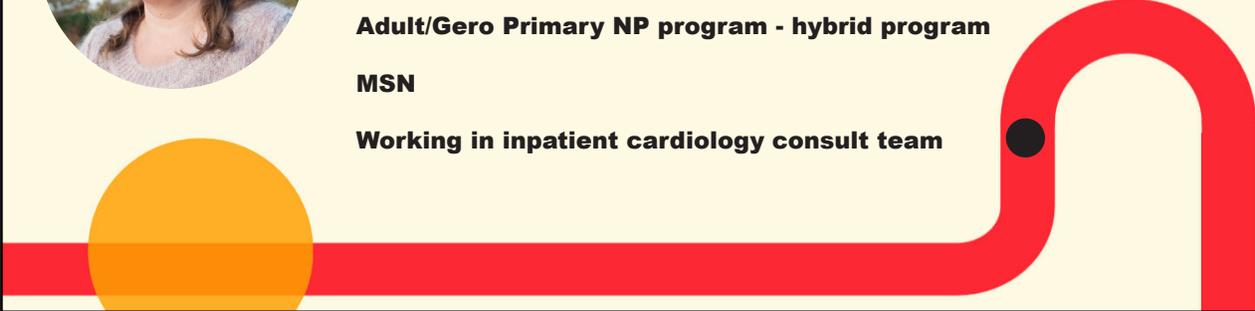
- 29 years old**
- Single, no children**
- 6 years nursing on adult intensive care unit**
- FNP program online – tuition offset by employer**
- DNP**
- Working in primary care clinic**



4

	5	Meet Our New Hires - Joy
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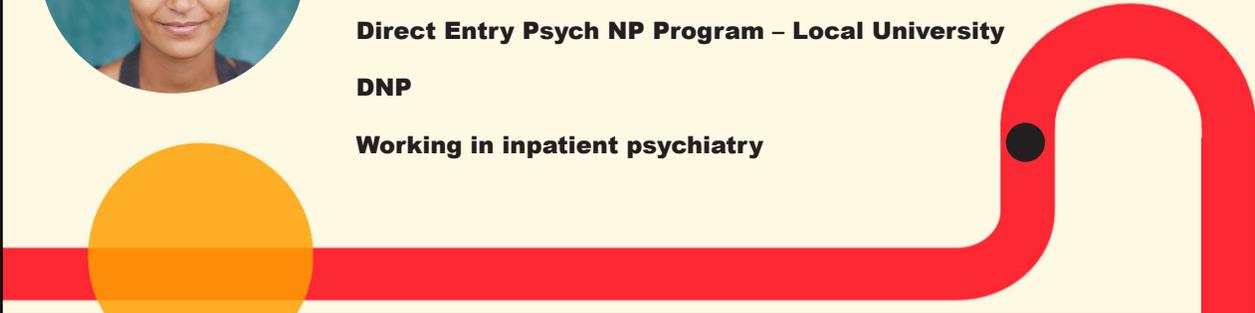
	<p>43 years old</p> <p>Divorced, one daughter who is 16 and looking at colleges</p> <p>20 years nursing in rehabs and adult inpatient medicine</p> <p>Adult/Gero Primary NP program - hybrid program</p> <p>MSN</p> <p>Working in inpatient cardiology consult team</p>
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5

	6	Meet Our New Hires - Mariam
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	<p>35 years old</p> <p>Married, 3 children</p> <p>No nursing experience; Marketing background</p> <p>Direct Entry Psych NP Program – Local University</p> <p>DNP</p> <p>Working in inpatient psychiatry</p>
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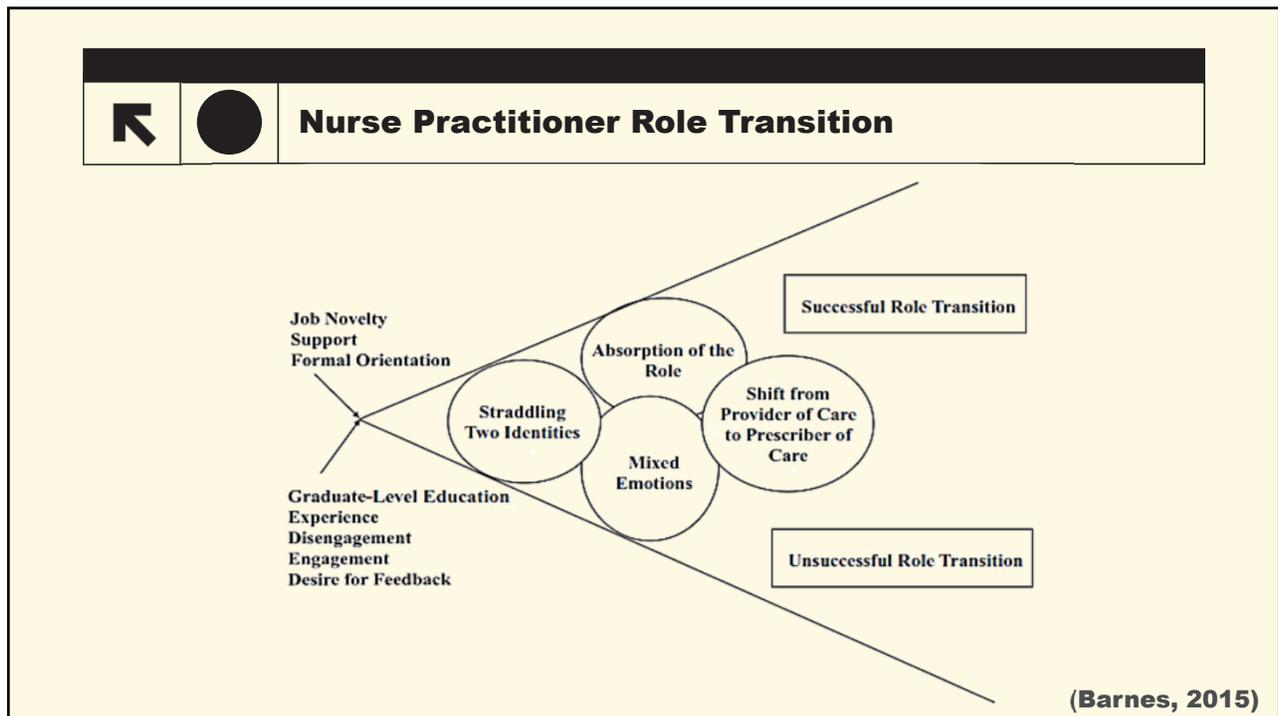
6

Precepting & Transition

“...an individual with demonstrated competence in a specific area who guides, assess, and validates the knowledge skills, and attitudes needed to transition to a new role, specialty, or environment in the healthcare setting.”

(Harper, 2023, p.339)

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What happens if we do it right?

Develop a workforce of NPs who:

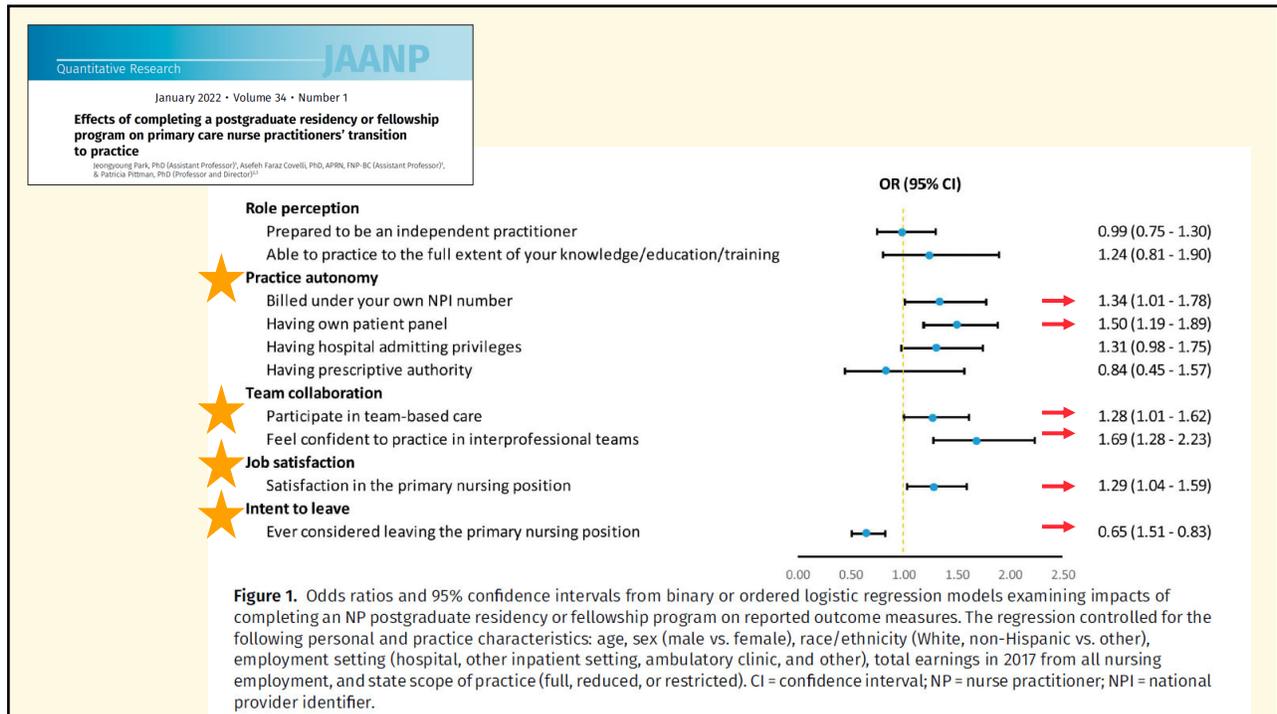
- Are clinically competent
- Are highly effective in their roles
- Have a clear professional identity

★ **Are equipped with the attitudes and skills to transmit these traits onto other new practitioners**





9



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●

What are the consequences if we don't?

- **Job dissatisfaction**
- **Increased turnover rates**
- **Decreased access of patients to quality care**
- **Dilution of professional identity**
- **Challenges justifying the role to key stakeholders**



11

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12

Precepting the New Grad NP



Graduate School

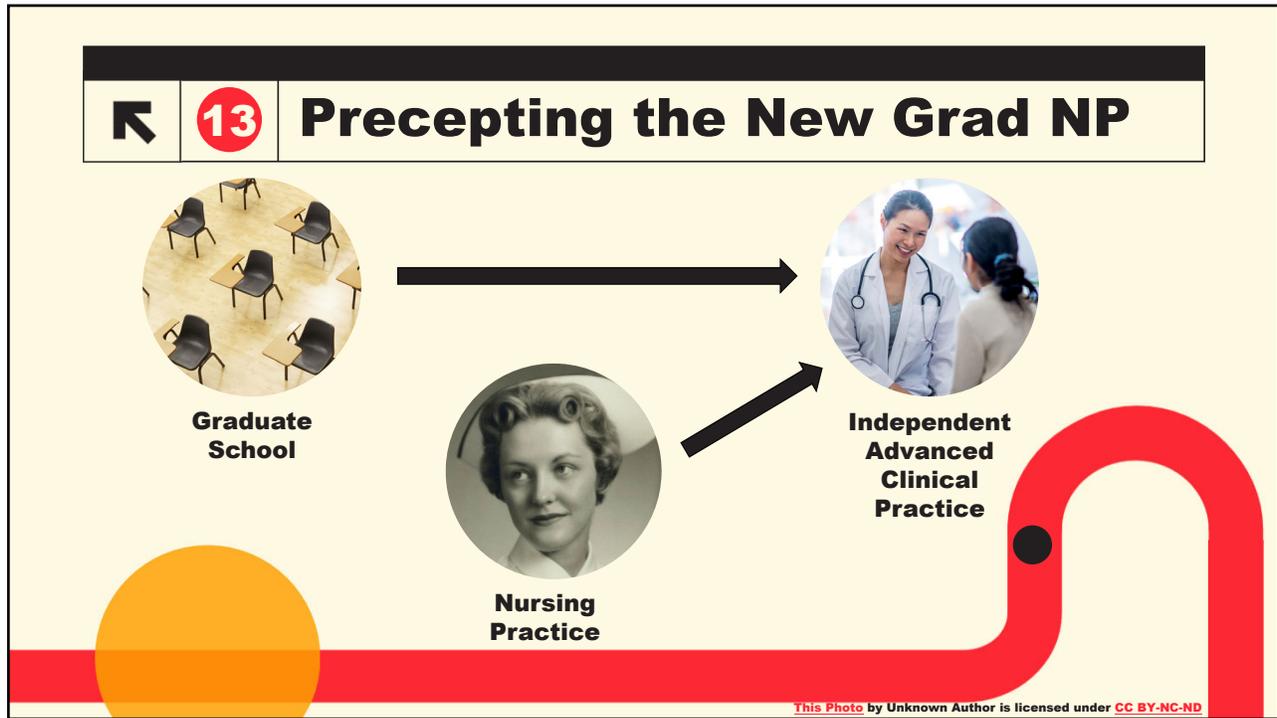
→
Precepting



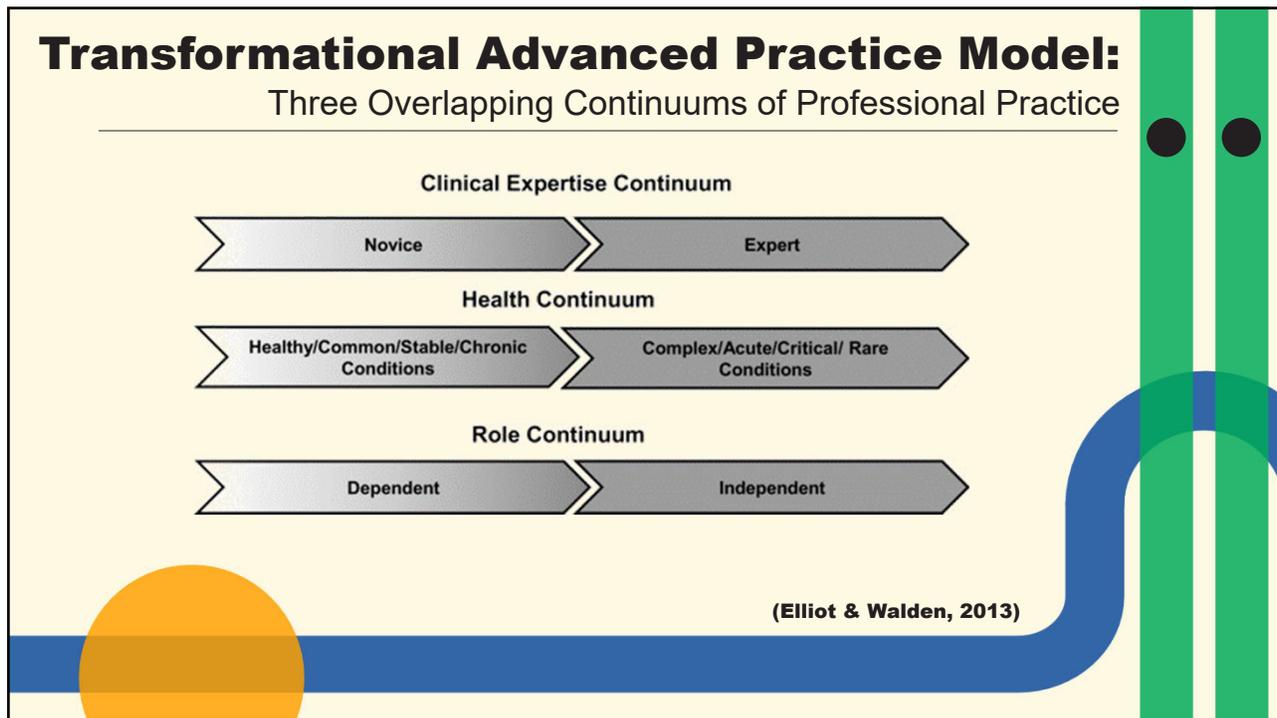
Independent Advanced Clinical Practice

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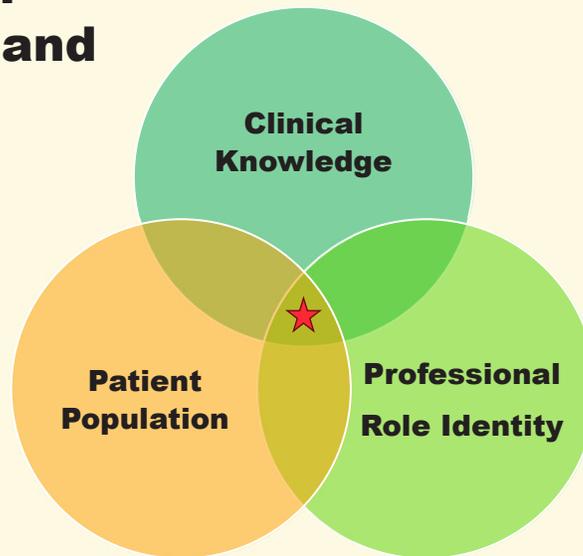


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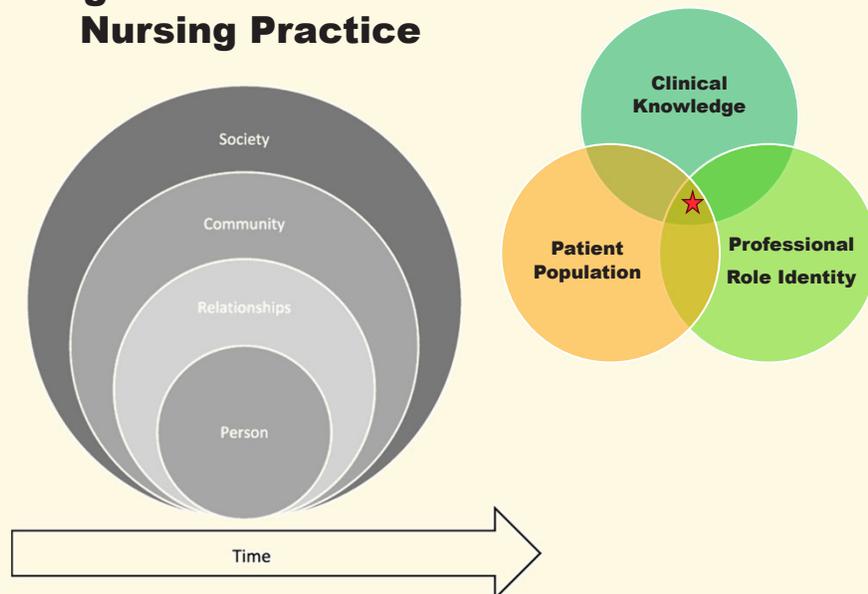
14

The Sweet Spot of APRN Precepting and Transition of the Novice NP



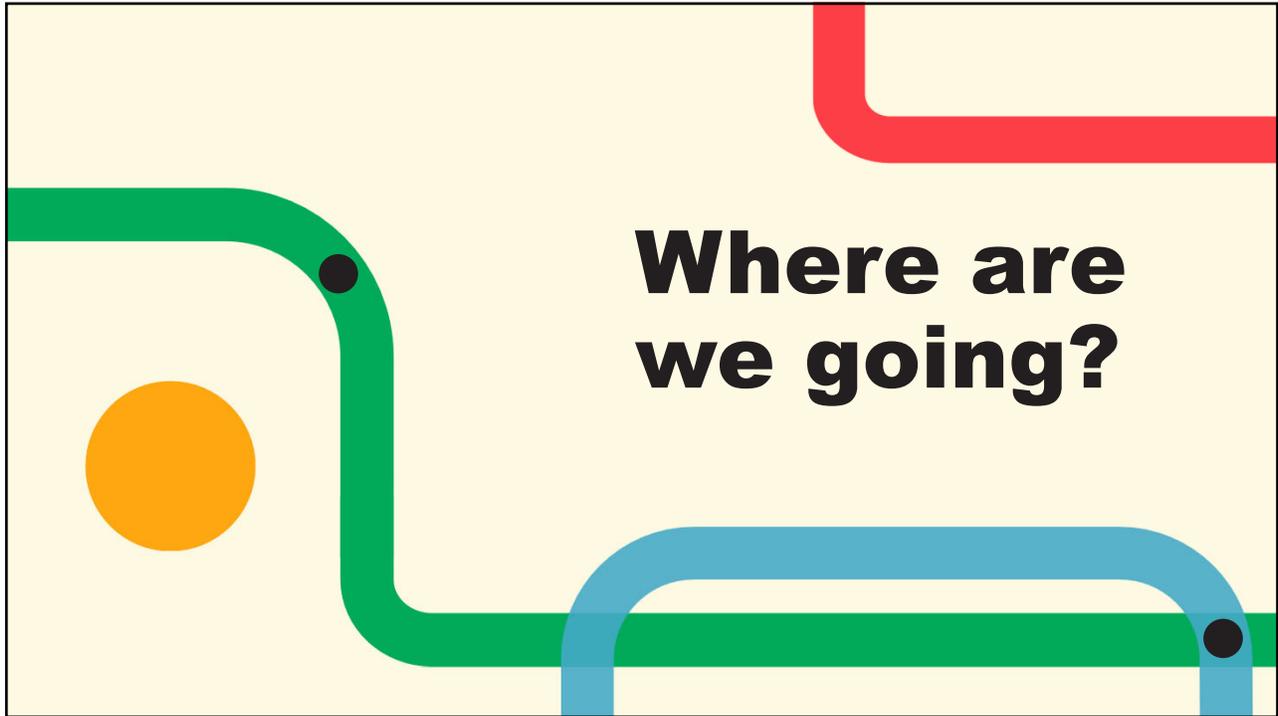
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Socioecological Model of Transition to Nursing Practice



(Gilroy et al., 2023)

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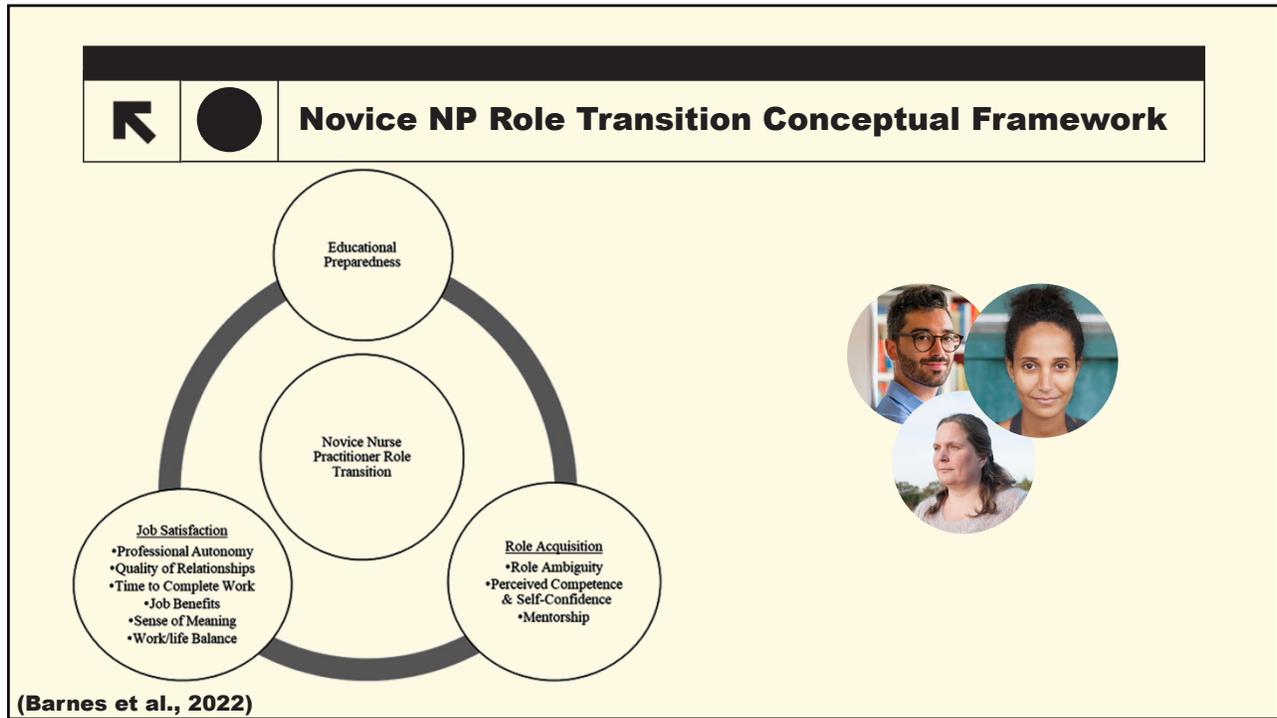
AANP | American Association of
NURSE PRACTITIONERS™

NP education must prepare clinicians for licensure and practice to the full extent of education, clinical training and board certification.

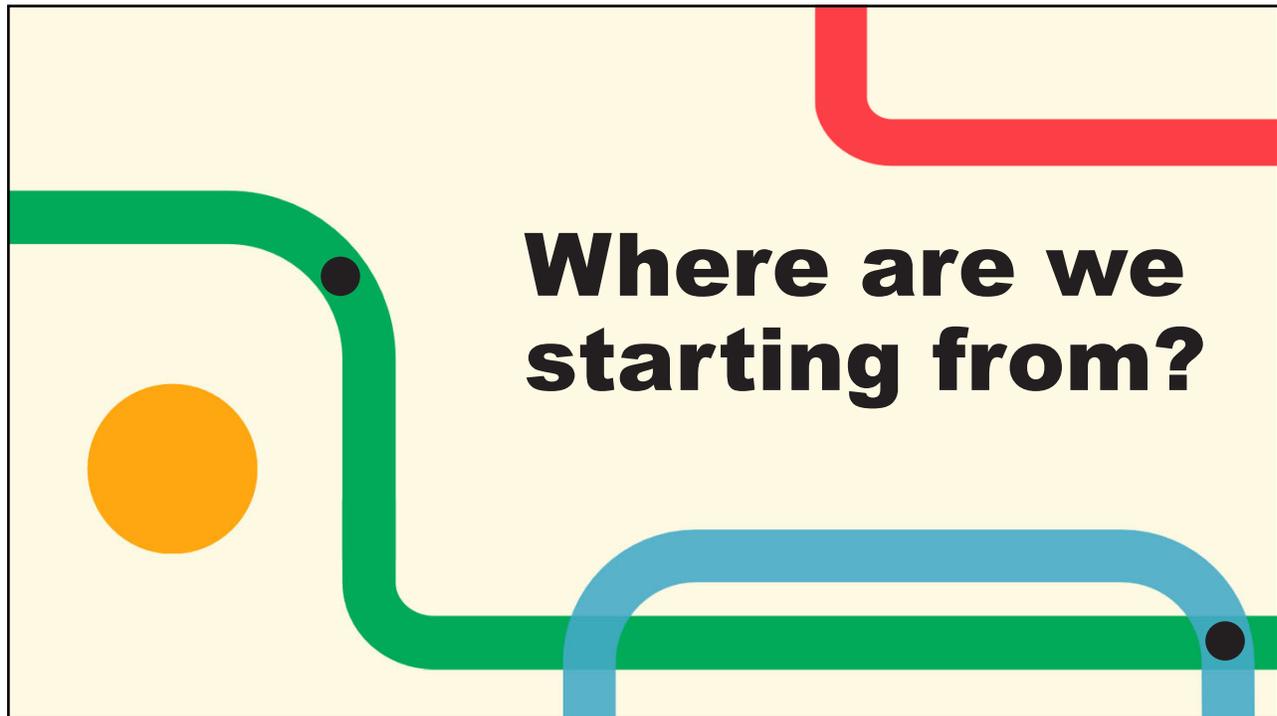
NP scope is not dependent on, or an extension of, the care rendered by a physician or other health care provider.

The authorization of NPs to prescribe legend and controlled medications, devices, health care services, durable medical equipment and other equipment and supplies is essential to providing timely, cost-effective, quality health care.

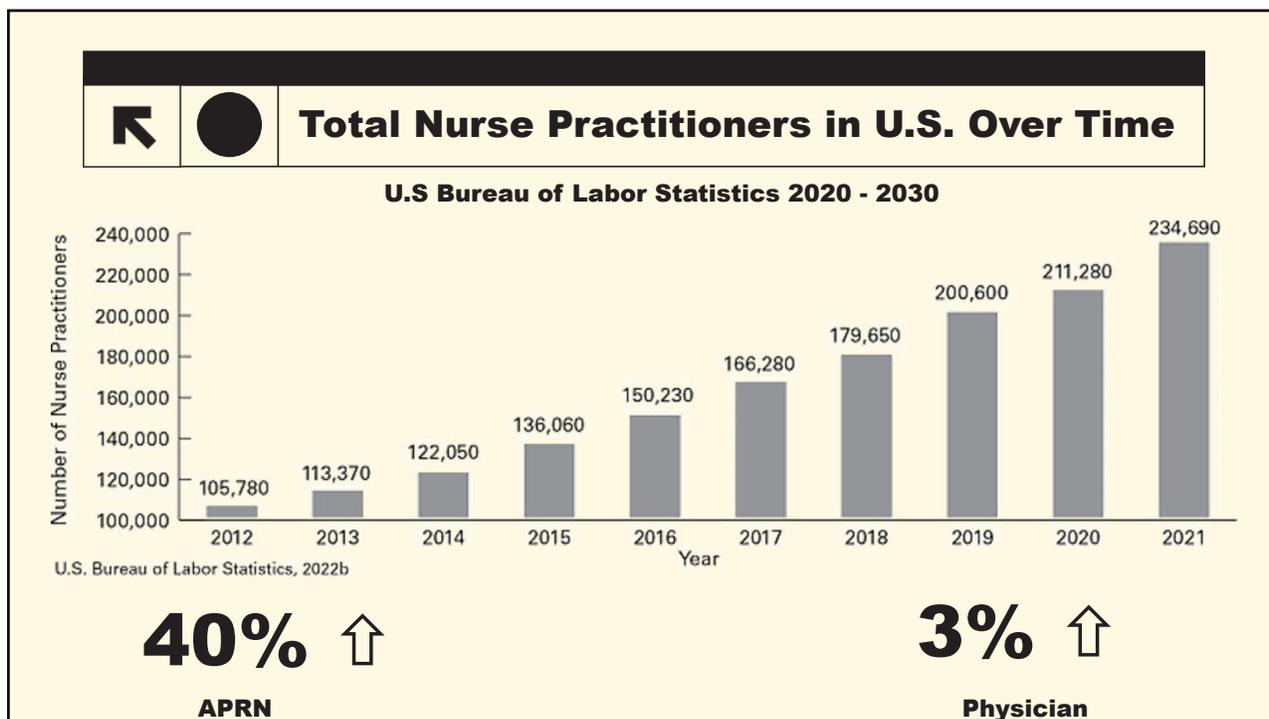
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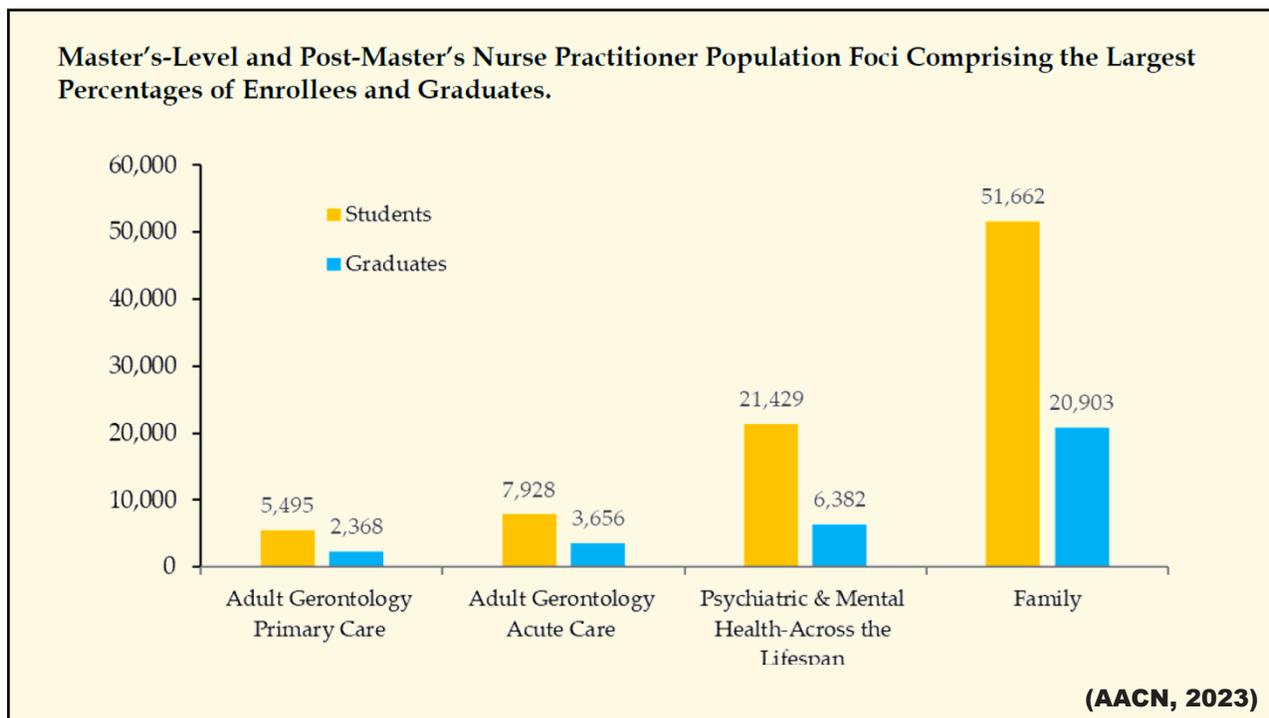
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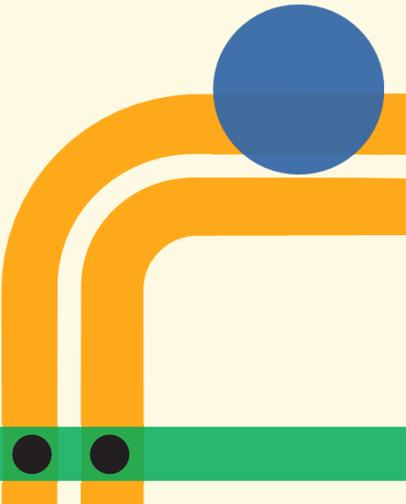


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FPA and Practice Bylaws

- **Full Practice Authority (FPA) is the collective professional goal**
- **Even when NPs have the capacity to work independently, many are restricted by institutional bylaws.**
- **Hospital privileging is not associated with state scope of practice (Pittman et al., 2018).**

25

↶ 26

Formats of NP Education

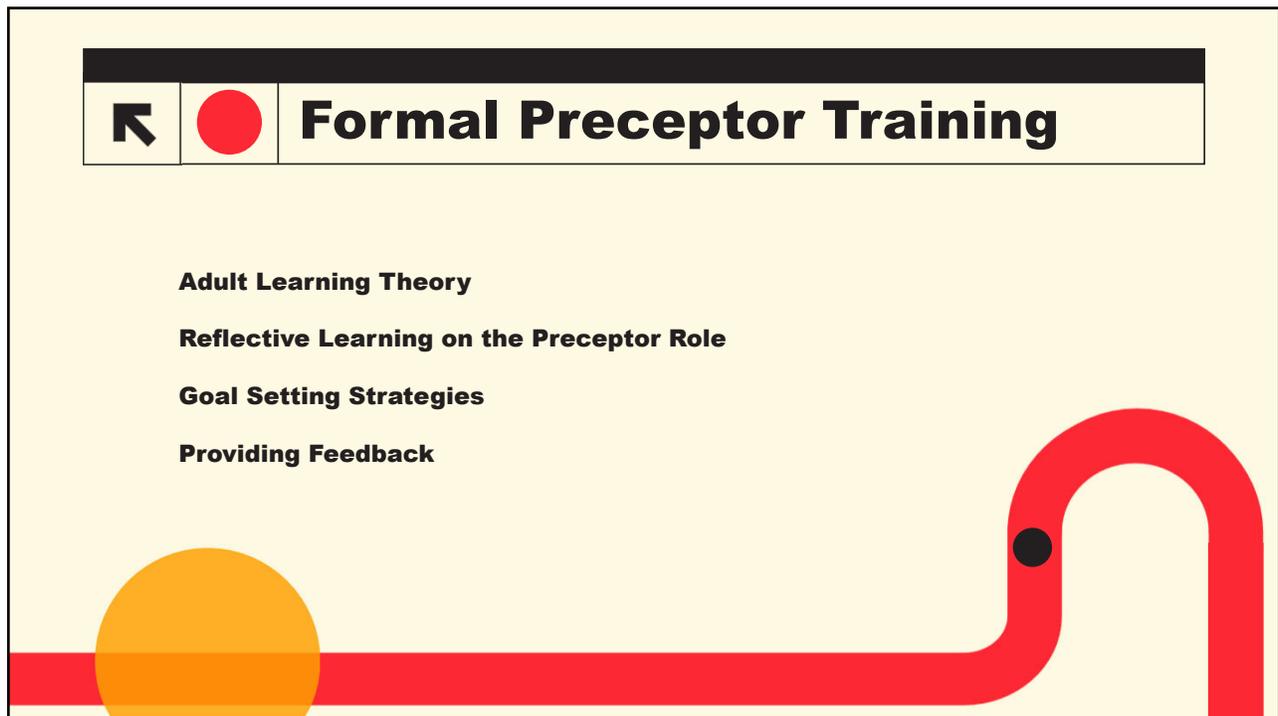
- **Full-time / part-time**
- **Traditional Classroom**
- **Hybrid Learning**
- **Distance Learning**
- **RN to NP program**
- **Direct-entry program**




26

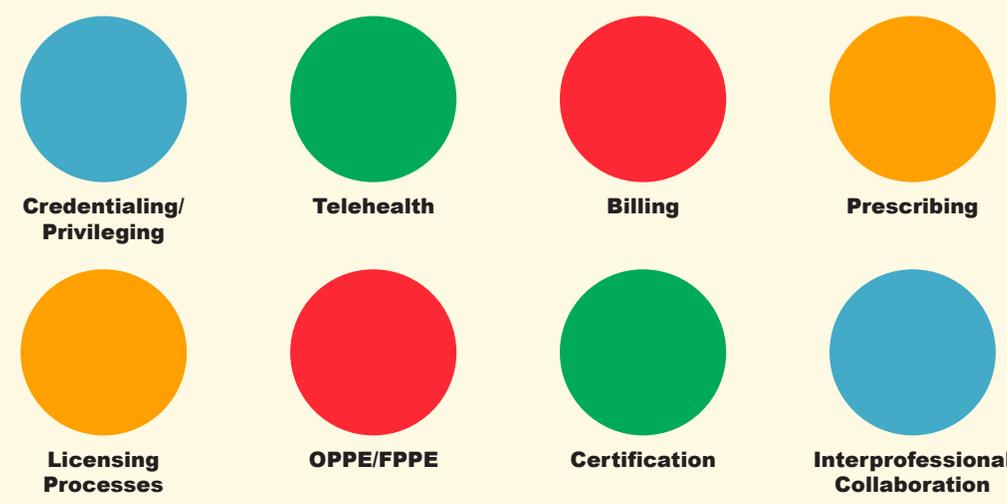


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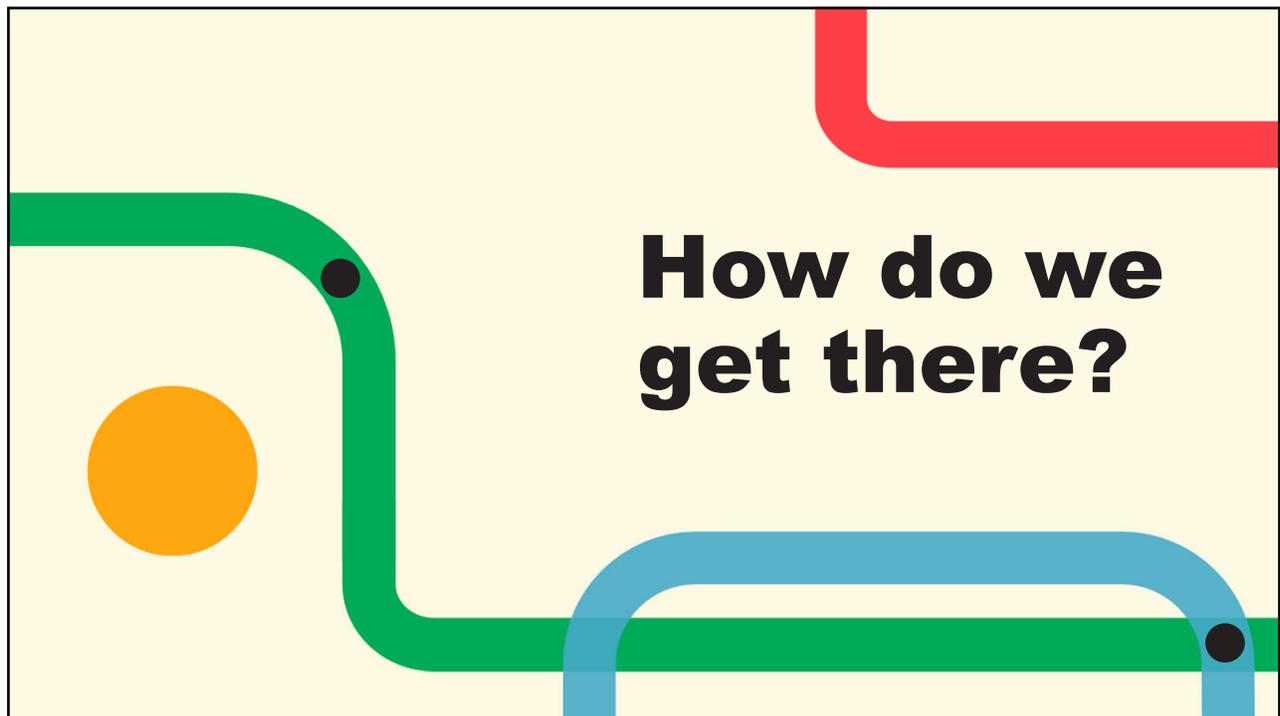
28

29 **APRN-Specific Topics**



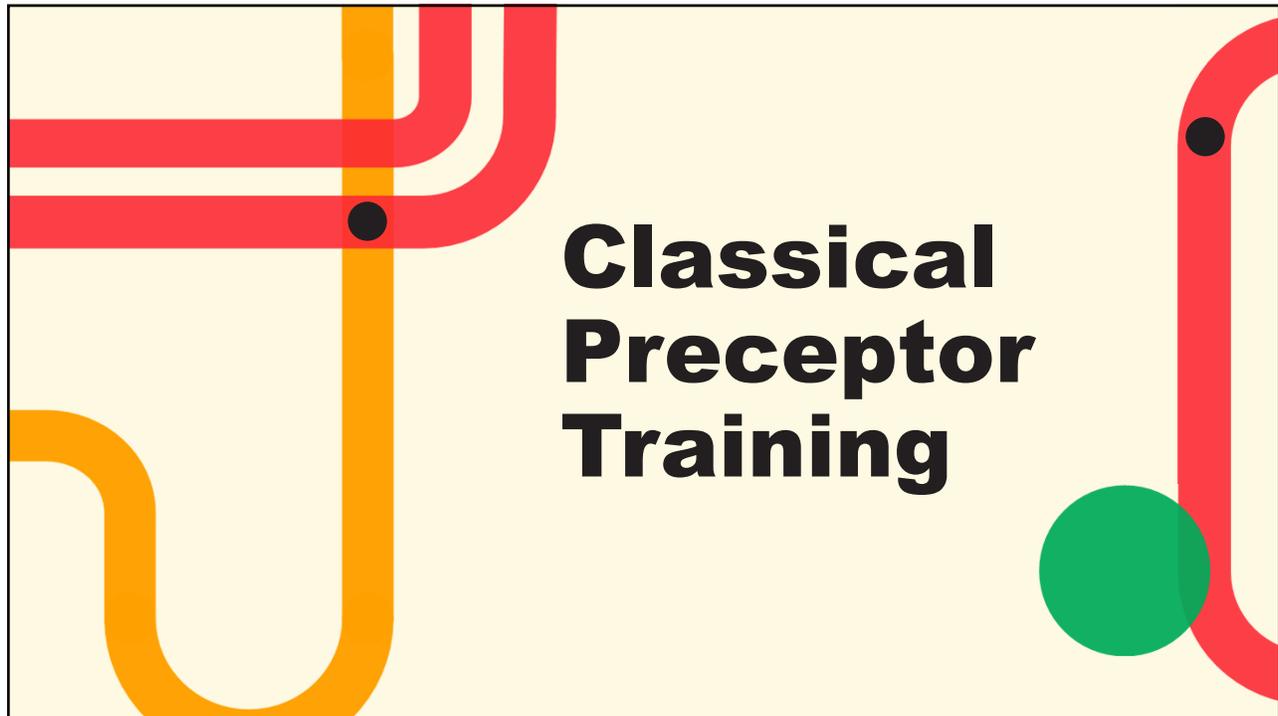
- Credentialing/Privileging
- Telehealth
- Billing
- Prescribing
- Licensing Processes
- OPPE/FPPE
- Certification
- Interprofessional Collaboration

29



How do we get there?

30



31

Classical Precepting Model

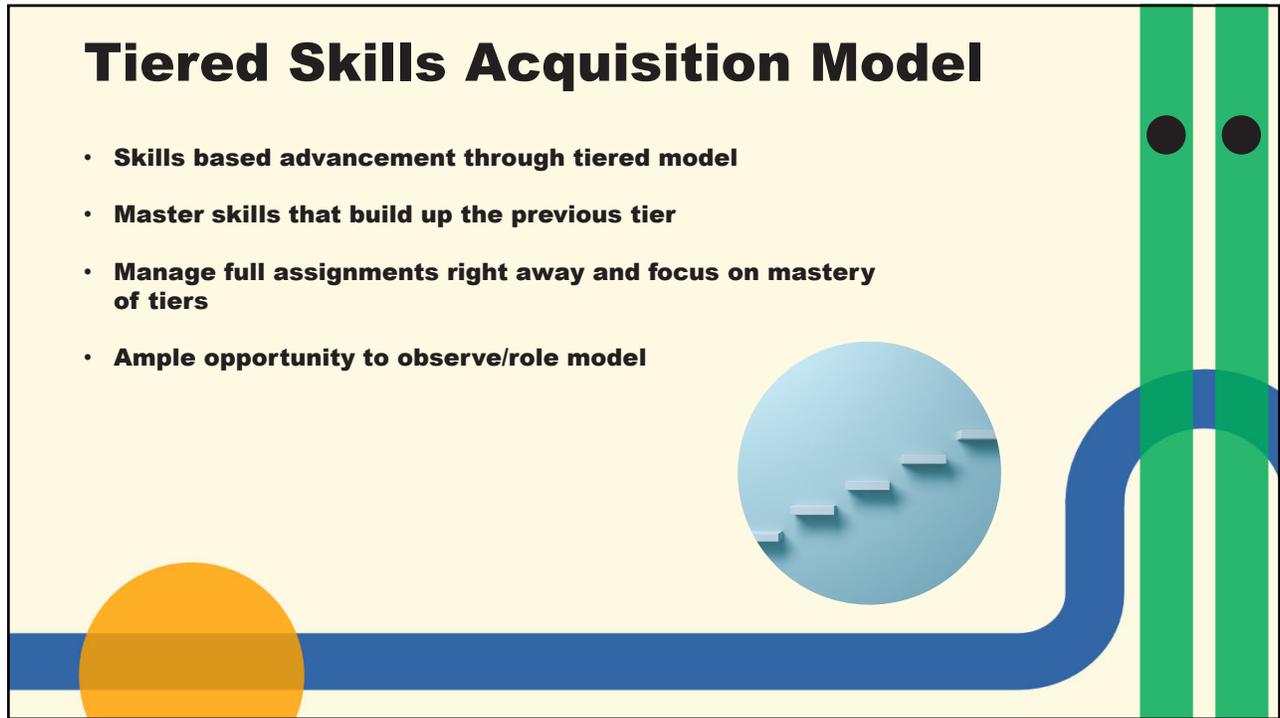
- **Primary preceptor paired with new NP**
 - +/- secondary preceptors
- **Incremental Orientation Model**
 - Shadow → 1 patient → 2 patient → full assignment
- **Formative and Summative Feedback**
 - Check lists
- **Self-directed, supportive content**

A slide with a light yellow background. On the right, there are two vertical green lines with black dots. At the bottom, there is a thick blue line that curves upwards and then back down. A large orange circle is partially visible at the bottom left. In the center-right, there is a circular image of a young owl with large yellow eyes. The title "Classical Precepting Model" is written in large, bold, black font at the top left.

32

Tiered Skills Acquisition Model

- Skills based advancement through tiered model
- Master skills that build up the previous tier
- Manage full assignments right away and focus on mastery of tiers
- Ample opportunity to observe/role model



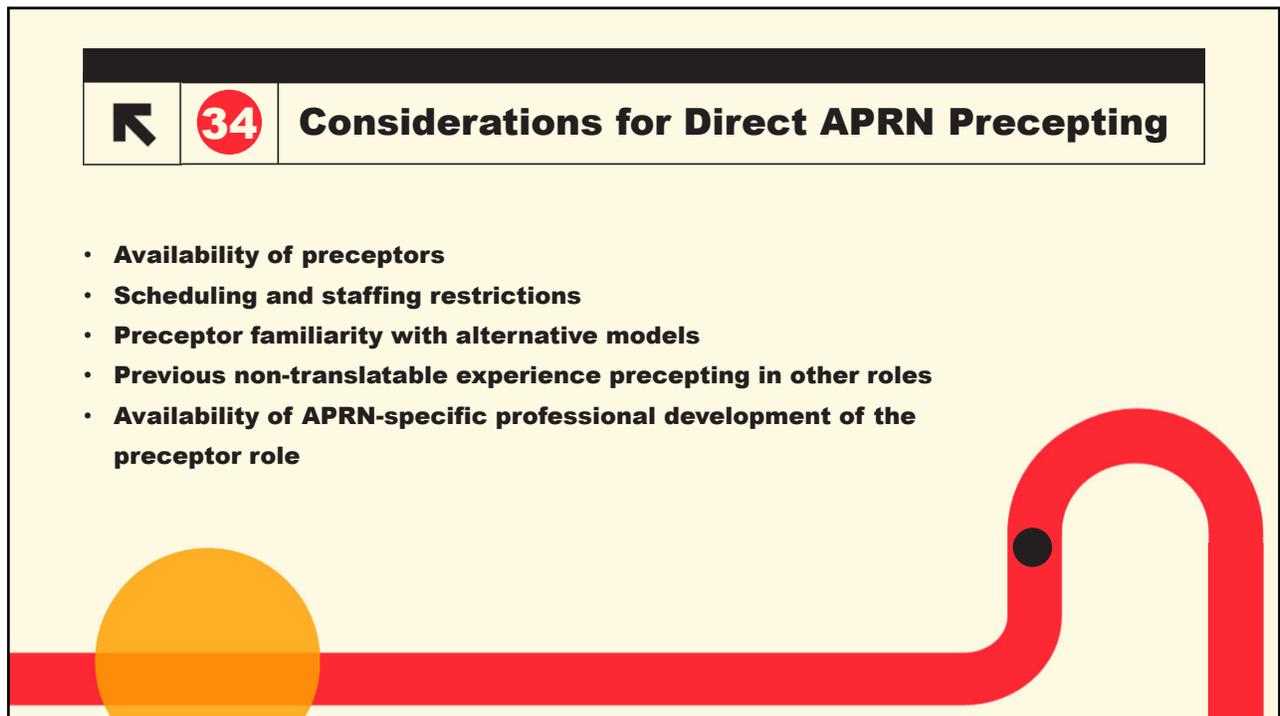
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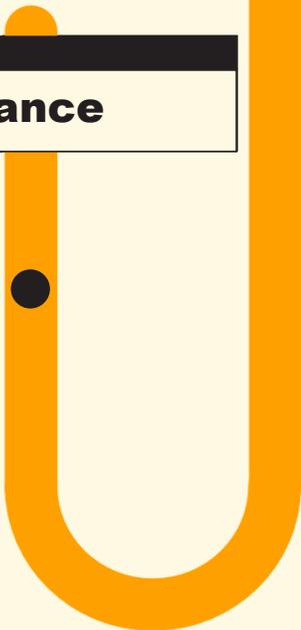
34

Considerations for Direct APRN Precepting

- Availability of preceptors
- Scheduling and staffing restrictions
- Preceptor familiarity with alternative models
- Previous non-translatable experience precepting in other roles
- Availability of APRN-specific professional development of the preceptor role



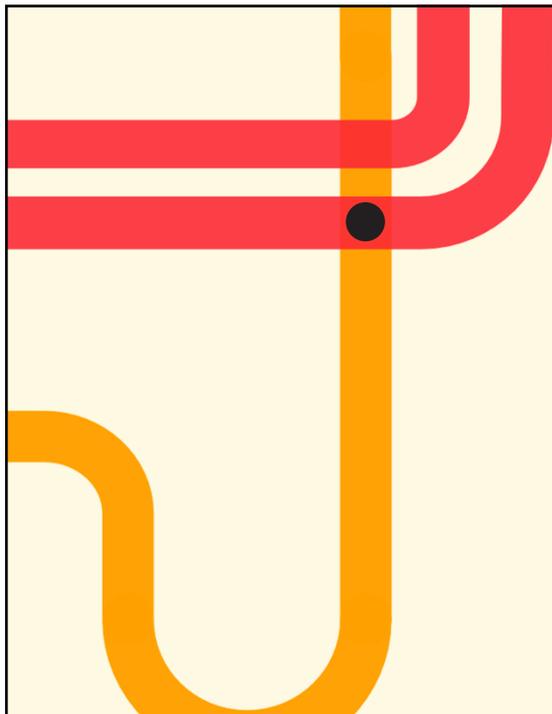
34



↖	35	NP & Preceptor Role Discordance
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- **Physicians are fantastic clinical resources**
- **Physicians are often looking to help support professional development of NPs**
- **Physicians have distinct educational models**
- **Physicians have distinct philosophical orientations**
- **Physicians and nurses exist within a visible and invisible power structures**

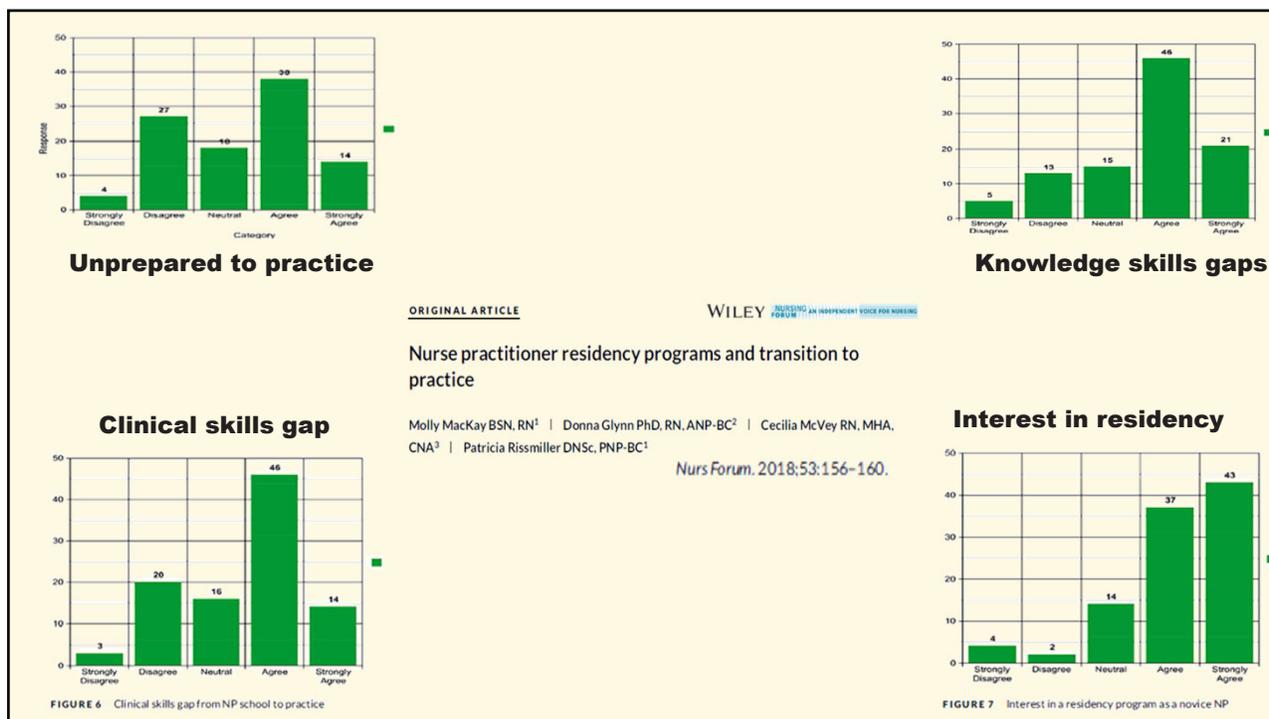
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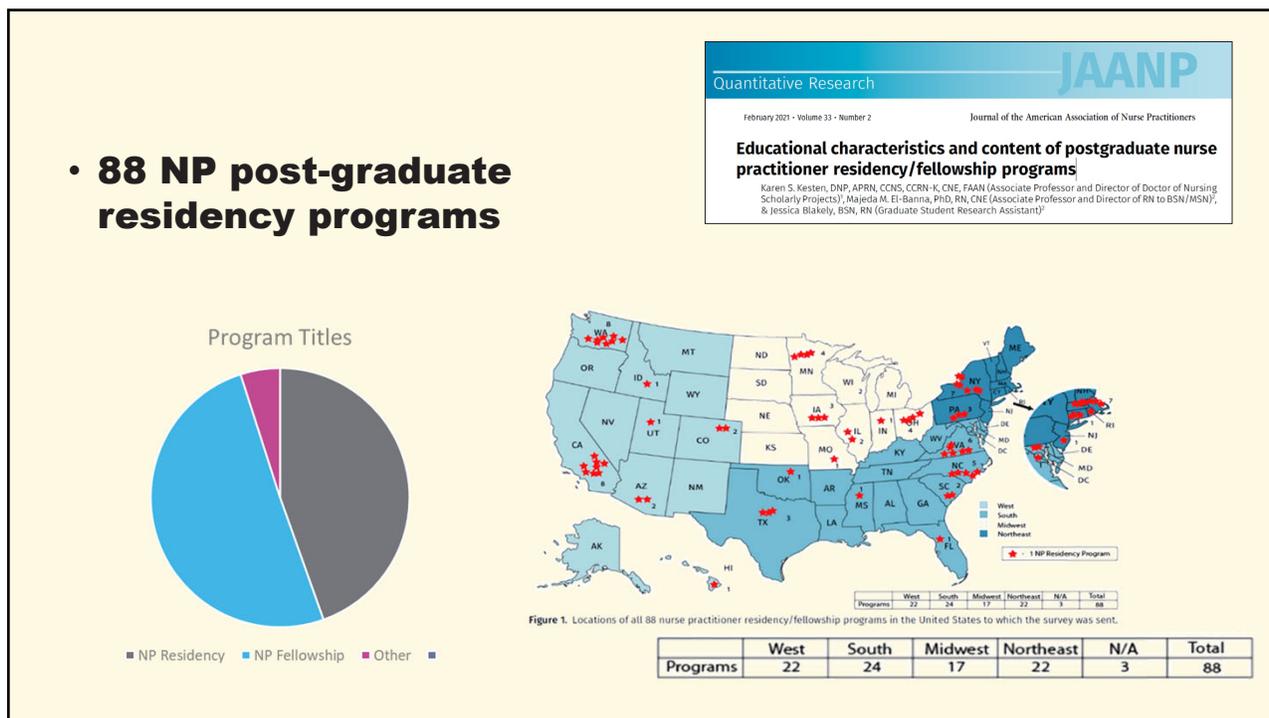
Transition to Practice Programs



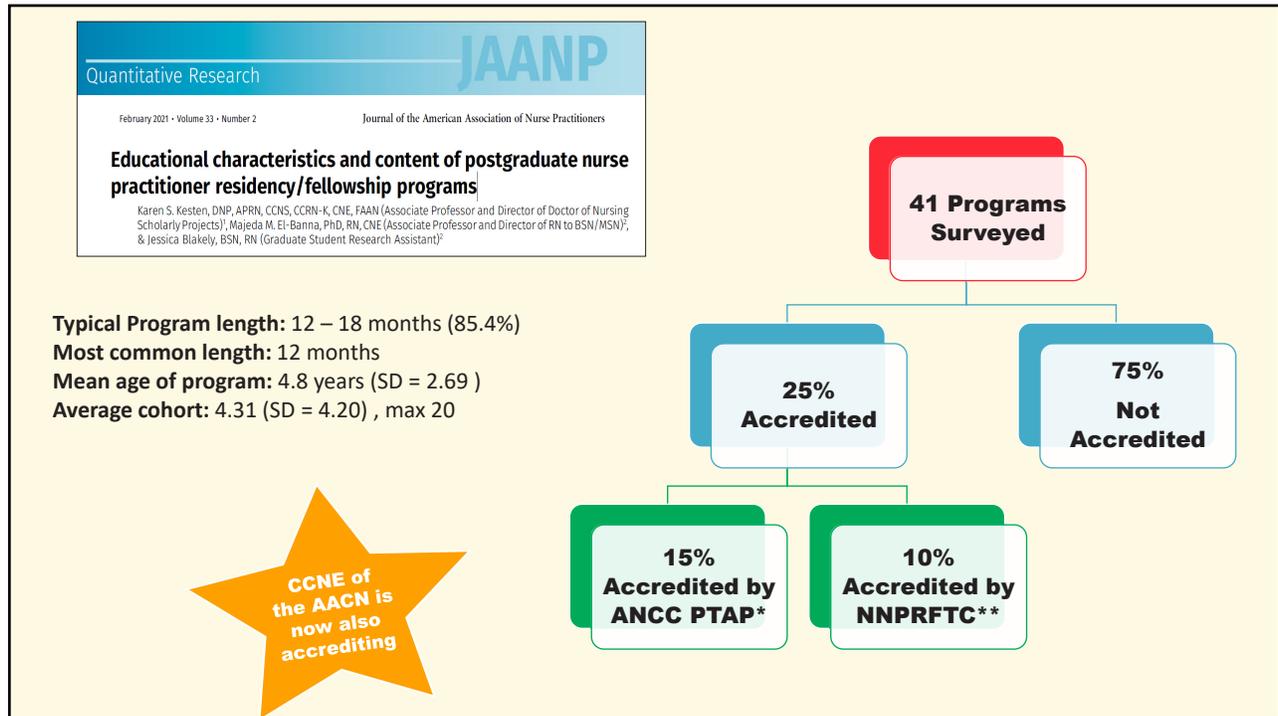
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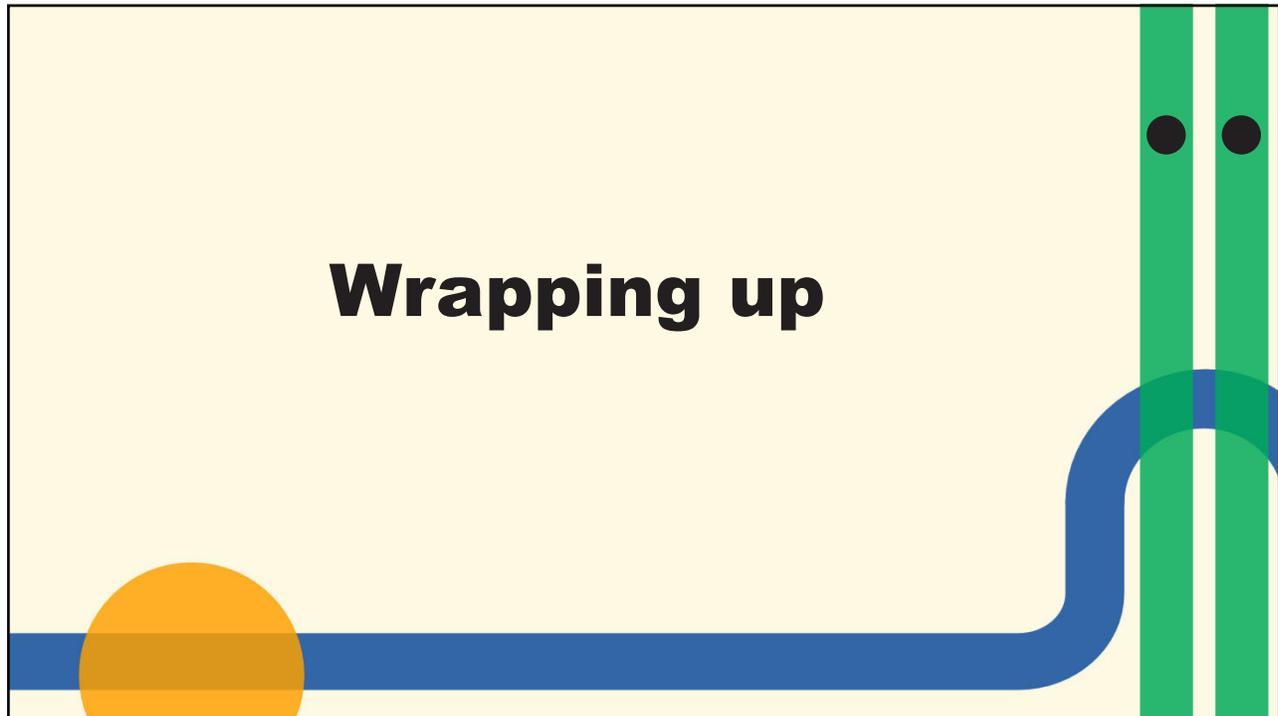


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Challenges with Fellowships

- **Funding Sources**
- **Geographic Access**
- **Accreditation/Standardization**
- **Limited Outcome Data**

40



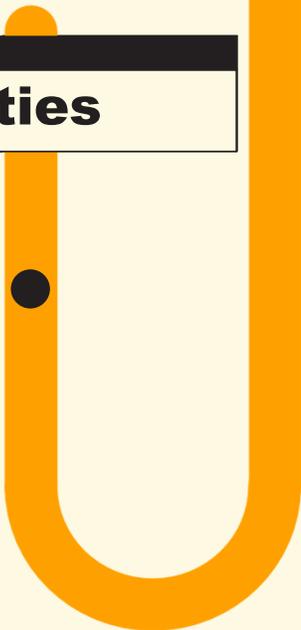
41

Reflections on Transition

- **Transition to practice begins in graduate school**
- **Preceptors should equitably focus on role identify development and APRN-related systems**
- **Novice NP precepting must consider the process of role transition in the context of the individual**

A slide with a light yellow background. At the top, there is a black horizontal bar containing a white left-pointing arrow and a green circle. Below this bar, the title "Reflections on Transition" is centered in a bold, black font. To the right of the title, there is a blue circle. Below the title, there are three bullet points, each starting with a black dot and followed by bold text. On the right side, there are two vertical orange stripes with two black dots each. The bottom of the slide features a green horizontal bar.

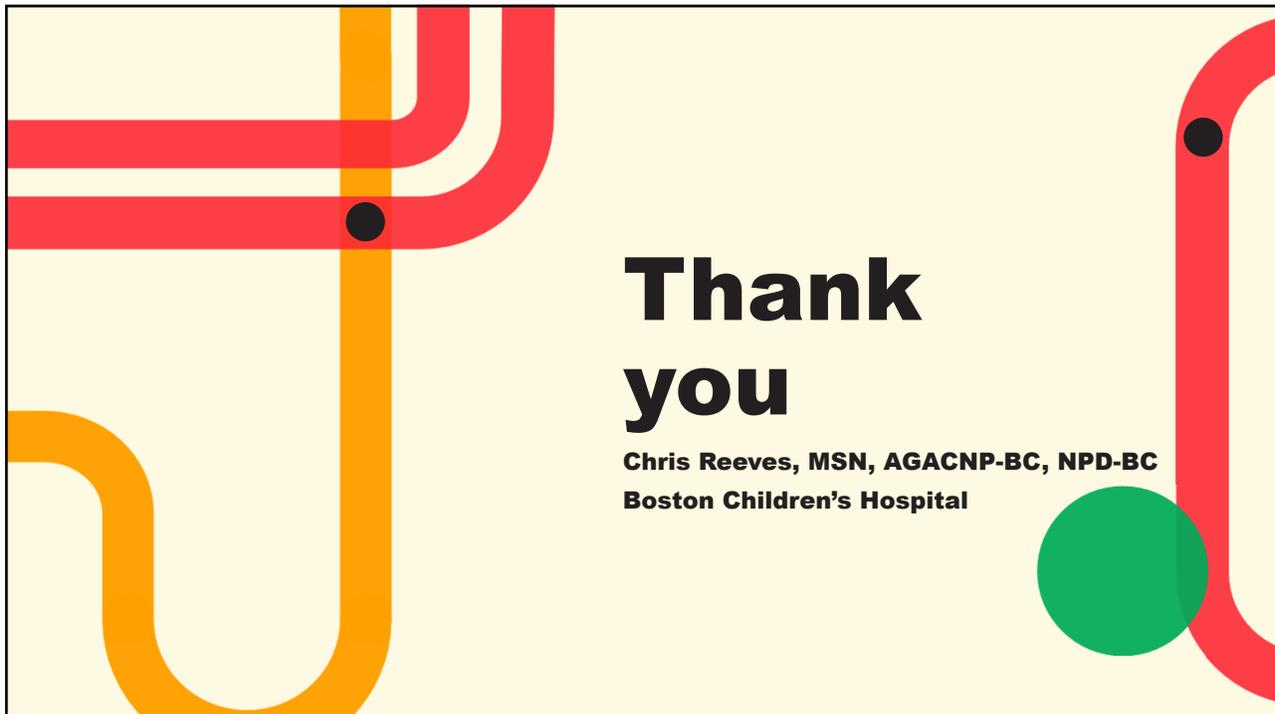
42



43 **APRN Precepting Priorities**

- **Develop preceptor training for APRNs**
 - **Case studies developing**
 - **Clinical knowledge**
 - **Role clarity**
- **Mindfully expand and study formal transition to practice programs**
- **Influence policy decisions to prioritize equitable access**
- **Invest in enriching NPD practitioner knowledge and context to support APRNs**
- **Identify, collect, and refine meaningful outcomes**

43



**Thank
you**

Chris Reeves, MSN, AGACNP-BC, NPD-BC
Boston Children's Hospital

44



45

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