

# Pioneering the Future in Pediatric APRN Clinical Education: Development of a pediatric surgical fellowship for APRNs

Heather Decker, DNP, ARNP, PPCNP-BC

## Purpose

- Develop the first pediatric surgical advanced practice registered nurse fellowship in alignment with the American Nurses Credentialing Center's Practice to Transition Accreditation Program (PTAP) guidelines.
- The long-term goal is to achieve PTAP accreditation.

## Background

- The initial NP role was developed in 1965 to improve access to primary care providers in rural areas.
- There are over 248,000 licensed nurse practitioners in the U.S., more than half are FNPs, whom a third have reported working outside of primary care.
- APRNs now have a presence in all specialties including inpatient and outpatient settings. Education for NPs has expanded to include acute and primary care however specialty care is learned on the job.
- The term *residency* and *fellowship* have been used interchangeably in the literature. The ANCC recognizes an APRN fellow as a licensed individual that has graduated from an accredited program and is new to the specialty or profession.
- Although work experience is invaluable, it does not replace formal didactic education coupled with clinical training which a structured fellowship provides.
- There are currently 102 fellowships in the U.S. in various specialties. Four APRN adult surgical fellowships, none solely focusing on pediatric surgical services.
- Medical residency training programs began in the 1890s and are now the gold standard means of training. Physicians that would like to subspecialize further enter into fellowships.
- Participants that complete an APRN fellowship have demonstrated increased knowledge, self-confidence, and improved critical thinking skills. Institutions benefit secondary to APRN staff retention and decreased recruitment rates.

## Framework

- JHACH has implemented their Nursing Professional Practice Model



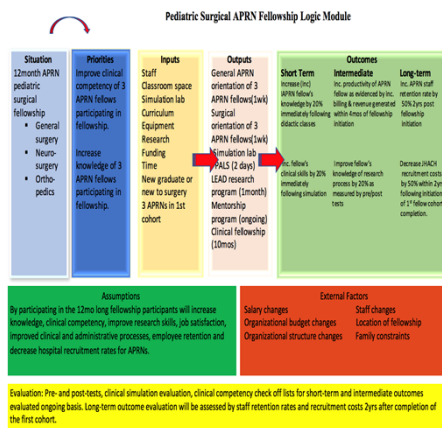
- The conceptual model for the program development is based on Brenner's Novice to Expert theory.



- During phase II, implementation, the Kirkpatrick model will be utilized for evaluation.

## Setting

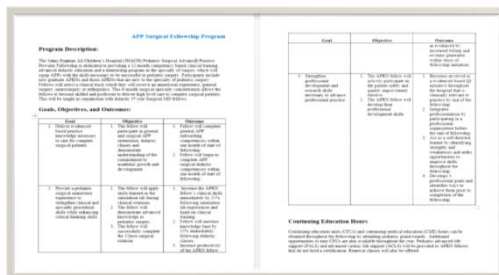
- Johns Hopkins All Children's Hospital (JHACH) in St. Petersburg, FL which is a 259-bed hospital with 43 pediatric medical and surgical subspecialties.
- 9187 surgeries are performed at JHACH annually.
- The surgical department employs 4 APRNs and 4 physician assistants (PAs).



## Method

Competency-based education modeled in conjunction with:

- National Organization of Nurse Practitioner Faculties (NONPF) Nurse Practitioner Core Competences
- Quality and Safety Education for Nurses (QSEN) project for Core Competencies
- Interprofessional Education Collaborative Expert Panel Core Competencies for Interprofessional Collaborative Practice



## Results

- A 12-month post-graduate competency based advanced clinical training fellowship for pediatric APRNs.
- The program comprises advanced didactic education, a mentorship program, simulation experiences, hands on clinical training and a research rotation.
- Three tracks have been identified where each fellow will select to focus 6-months of their clinical surgical immersion:
  - General Surgery
  - Neurosurgery
  - Orthopedics.
- Fellows will provide care for patients across the continuum; pre-operative, intraoperative and post-operative. Rotations will include inpatient and outpatient experiences.

JHACH Advanced Practice Provider Fellowship Rotation

Month	Activity	FALES ACLS Child Life Wound/ostomy team IV team 2 day PFC class RNFA program interweaved throughout program with self-study time
July	Hospital orientation New fellow orientation Surgical fellow orientation	
August	Anesthesia	
September	Radiology	
October	Patient Safety & QI, LEAD	
November	6mos specialty track	General surgery Neurosurgery Orthopedics
December	6mos specialty track	
January	6mos specialty track	
February	6mos specialty track	
March	6mos specialty track	
April	6mos specialty track	
May	NICU/PICU/ER	Urology, ENT, trauma, wound/ostomy, plastics
June	Elective	

**APRN Fellowship Program**  
APRN Fellowship Curriculum  
Class Schedule

Week	Topic	Topic
Week 1	Orientation, Core Competencies, Simulation Lab	Simulation Lab
Week 2	Simulation Lab	Simulation Lab
Week 3	Simulation Lab	Simulation Lab
Week 4	Simulation Lab	Simulation Lab
Week 5	Simulation Lab	Simulation Lab
Week 6	Simulation Lab	Simulation Lab
Week 7	Simulation Lab	Simulation Lab
Week 8	Simulation Lab	Simulation Lab
Week 9	Simulation Lab	Simulation Lab
Week 10	Simulation Lab	Simulation Lab
Week 11	Simulation Lab	Simulation Lab
Week 12	Simulation Lab	Simulation Lab

**APRN Surgical Fellowship Program**  
APRN Surgical Fellowship Curriculum

Week	Topic	Topic
Week 1	Orientation, Core Competencies, Simulation Lab	Simulation Lab
Week 2	Simulation Lab	Simulation Lab
Week 3	Simulation Lab	Simulation Lab
Week 4	Simulation Lab	Simulation Lab
Week 5	Simulation Lab	Simulation Lab
Week 6	Simulation Lab	Simulation Lab
Week 7	Simulation Lab	Simulation Lab
Week 8	Simulation Lab	Simulation Lab
Week 9	Simulation Lab	Simulation Lab
Week 10	Simulation Lab	Simulation Lab
Week 11	Simulation Lab	Simulation Lab
Week 12	Simulation Lab	Simulation Lab

## Inclusion Criteria

- New graduate pediatric acute care certified APRNs
- New to the specialty of surgery.
- Licensed in the state of Florida



## Discussions

The role of the APRN has expanded beyond its initial scope since its conception. Graduate training provides an excellent foundation for APRNs however, it is not meeting all the educational demands the role that today's APRNs are functioning. Fellowships for APRNs are designed to expand the knowledge and clinical skillset necessary for a provider to succeed with confidence in acute, chronic and specialty based clinical settings.

## Limitations

APRN fellowships were developed in 2007, therefore are in the infantile stages of development. There are no pediatric surgical APRN fellowships at this time. The literature is limited on the longitudinal evaluations of current programs. Results demonstrate that due to the small number of accredited ARNP fellowships, a significant growth potential is present to improve post master's clinical education. Results conclude the need for the development of pediatric surgical APRN fellowships.

## Acknowledgements

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