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**Background:**
Advanced Practice Nurses (APNs), following completion of a graduate program are eligible for national certification and state licensure in one of six population foci. While fellowship training has long been utilized by physicians to develop clinical acumen and research skills within a specialized population, for APNs who chose to specialize their practice post-graduate training options are limited. Interest in post-graduate training is high, with 90% of APNs surveyed indicating that they would be extremely interested or somewhat interested in an APN fellowship program (Hart & Bowen, 2016). Fellowship programs have been positively correlated with successful role transition (Barnes, 2015). Finally, many subspecialties are facing workforce shortages and specialty fellowship training for APNs could help to fill this gap.

**Details of Innovation:**
The APN fellowship in Developmental-Behavioral Pediatrics (DBP) was implemented as an intensive 12 month program. The first six months focused on knowledge & clinical skill building and the second six months focused on development of clinical competence. The fellowship was integrated with the Accreditation Council for Graduate Medical Education (ACGME) DBP fellowship for physicians. The fellowship included didactic and clinical training as well as professional development activities. Didactic education included lectures, self-paced study, participation in the Leadership Education Neurodevelopmental Disabilities (LEND) program, completion of the KySS (Keep yourself safe and secure) online mental health fellowships, and attendance at the DBP board review conference. The clinical component included formal training on screening & diagnostic tools, interdisciplinary observational experiences, and direct patient care with decreasing supervision as clinical competence decreased. Professional development was achieved by mentorship from an experienced APN and completion of a capstone project.

**Outcomes:**
Outcome measures of the APN fellowship program included clinical competence, provision of high quality care, productivity, completion of a capstone project, and transition to practice. The fellow was evaluated by clinical preceptors and the APN section chief three times throughout the year and also had the opportunity to self-assess. The fellow was deemed competent in National Organization of Nurse Practitioner Faculties (NONPF) competencies and DBP specific cognitive & clinical competencies. High quality care was assessed by chart audit and review of Press Ganey scores with the fellow achieving completed quality measures in greater than 95% of charts audited and greater than 90% of top scores on the Press Ganey measure. Productivity was calculated by Relative Value Units (RVUs) and the fellow surpassed expected productivity in the first year. The APN fellow transitioned to full practice within two months of completing the fellowship, a transition which typically takes six months for new staff.

**Implications:**
The APN fellowship in DBP was successfully implemented as a 12 month program. The program was financially feasible for the organization due to positive outcomes in productivity and decreased time to transition to practice. The success of this pilot year is evidenced by a second fellow completing the DBP fellowship and funding secured for a third year. Accreditation of fellowship programs and creation of certification examinations in specialty areas will help to standardize the quality of programs, validate the advanced training of fellowship prepared APNs, and establish funding sources.

**Open Ended Question:**
How can the expansion of specialty fellowships advance the role of the APN provider in our healthcare system?

**References**
**BACKGROUND**

Advanced Practice Nurses (APNs) who chose to specialize their practice have limited post-graduate training options. Interest in fellowship programs is high with greater than 90% of survey respondents identifying that they are extremely interested or somewhat interested in a fellowship program (Hart & Bowen, 2016). Fellowship programs have been previously correlated with successful role transition (Barnes, 2015). Developmental Behavioral Pediatrics (DBP) is facing a workforce shortage of physician providers (Bridgemohan et al., 2018).

**OBJECTIVE**

Design and implement a 12 month fellowship program that provides advanced didactic education, focused clinical experience, and professional mentoring to prepare the APN for specialized practice in Developmental Behavioral Pediatrics (DBP).

This poster describes the pilot year of the fellowship program.

**IMPLEMENTATION**

The APN fellowship was implemented as an intensive 12 month program integrated with the ACGME DBP fellowship at the host organization.

The first six months focused on knowledge & clinical skill building. The second six months focused on development of clinical competence.

The fellow was a full time employee eligible for full salary, benefits, and medical staff privileges.

The fellow was evaluated by clinical preceptors and the APN section chief three times throughout the year. Fellow also had opportunity to self-assess.

**RESULTS**

**Clinical Competence**

Fellow was deemed competent in National Organization of Nurse Practitioner Faculties (NONPF) competencies and DBP specific cognitive & clinical competencies. Comprehensive write-ups of the assessment & evidence-based management of a patient at the start and end of the fellowship showed significant growth in clinical decision making.

**Provision of High Quality Care**

Assessed by chart audit of specific quality measures and Press Ganey Scores. Fellow completed quality measures in greater than 95% of charts audited and achieved greater than 90% of top scores on Press Ganey Survey.

**Productivity**

Relative Value Unit (RVU), a benchmark of provider productivity were measured starting at six months. Fellow was expected to achieve 33% of the total annual expected RVU target for a full time non-fellow APN. Fellow surpassed this expectation which helped to offset costs of fellowship program.

**Completion of a Capstone Project**

Fellow completed a capstone project that contributed to organizational goal of providing high-quality family-centered care to children with developmental disabilities.

**Transition to Practice**

APN Fellow transitioned to a full patient schedule within two months, compared to new staff which typically takes six months.

**CONCLUSION**

The APN Fellowship in DBP was successfully implemented as a 12 month program. The APN Fellow in the pilot year was deemed clinically competent, had increased specialty knowledge, and easily transitioned to full time practice. Positive outcomes in the areas of high quality care and productivity made the program financially feasible for this organization. APN Fellow had improved confidence in practice and completion of capstone project enhanced professional development.

Since the completion of pilot year, a second fellow has completed the DBP fellowship and a second fellowship program in Physical Medicine & Rehabilitation was implemented.

Funding for fellowship programs is a barrier to implementation. Accreditation of fellowship programs and creation of certification exams in specialty areas will help to ensure quality standards across programs, validate APN practice in specialty areas, and establish funding sources.

**REFERENCES**

