



National Association of
Pediatric Nurse PractitionersSM



PULSE OF THE PROFESSION 2022

Experts in pediatrics, advocates for children

About the National Association of Pediatric Nurse Practitioners

The National Association of Pediatric Nurse Practitioners (NAPNAP) is the nation's only professional association for pediatric nurse practitioners (PNPs) and their fellow pediatric-focused advanced practice registered nurses (APRNs) dedicated to improving the quality of health care for infants, children, adolescents and young adults.

Representing more than 8,000 health care practitioners nationwide with 18 special interest groups and 53 chapters, NAPNAP has been advocating for children's health since 1973. NAPNAP was the first nurse practitioner professional society in the world. The nurse practitioner movement started in 1965.

Our Vision and Mission

NAPNAP is recognized as the global leader, trusted authority and indispensable resource on comprehensive pediatric advanced practice nursing. As experts in pediatrics and advocates for children, our mission is to empower pediatric-focused APRNs and key partners to optimize child and family health.

Introduction

Across America, more than 20,000 PNPs are working to improve health outcomes for young patients during their most critical years of development.

With specialized expertise and extraordinary compassion, PNPs contribute undeniable value to our nation's health care system. So why do we as a country still struggle to maximize their capabilities? What are the obstacles hampering their potential? How can we help them perform at the top of their educational training for the greatest impact?

These are some of the important questions NAPNAP set out to answer in our first Pulse of the Profession survey and report.

To all the practitioners, researchers and educators—current and retired—who participated in the survey, we thank you. Thank you for taking time, especially amid the strain of the pandemic, to share your candid opinions and constructive suggestions. Your feedback is essential for shaping policies and strategies that produce real change.

Looking Outward and Inward

Our mission with this project was twofold. First, we wanted an accurate assessment of the profession to better understand current realities for PNPs and their fellow pediatric-focused APRNs and to discover issues requiring corrective action. We asked about their motivations, aspirations and challenges across different care and educational settings.

Second, we wanted to learn how NAPNAP can better support pediatric-focused APRNs as their professional home, particularly around education and advocacy.

The timing could not be more critical. Many U.S. counties—especially those in underserved and rural areas—face a pediatric clinician shortage. Not only is the pediatrician pipeline shrinking, but PNPs are retiring in large numbers with fewer entering the workforce to take their place. PNPs lag far behind the growth rate of other NP subspecialties.

What we do not lack is children in need of high-quality, affordable, accessible and equitable care.

Today, 38.3 million children are covered by Medicaid and the Children's Health Insurance Program (CHIP).¹ That's more than half of all children in the U.S. For them and so many others, fully empowered PNPs are essential to making a difference.

Confirmations and Contradictions

You'll see responses on the following pages that run the gamut of emotions and perspectives, from enthusiasm to exasperation and back again. For example, the vast majority of respondents agreed or strongly agreed that they feel optimistic about the future of their profession. They love working with children and the holistic care approach that considers the broader context behind a diagnosis.

On the other hand, a troubling theme emerged: PNPs feel their work is “under threat” due to a combination of factors, from job availability and reimbursement issues to practice limitations and misperceptions about their abilities.

A Catalyst for Change

Clearly, much work lies before us to ensure PNPs receive recognition and compensation aligned with their actual value and have opportunities to apply their specialized skillset. We offer this report as a necessary first step on the path to progress.

In each section, we've included next steps, actions and additional questions for health care leaders, partners, educators and policymakers. By working together, we can create a better present and future for PNPs and their fellow pediatric-focused APRNs and the children and families who need them most.

Sincerely,



Andrea Kline-Tilford, PhD, CPNP-AC/PC, FAAN
NAPNAP President



James H. Wendorf
NAPNAP Executive Director

About the Survey and Respondents

Between Oct. 25 and Nov. 8, 2021, consulting firm Mighty Citizen conducted three distinct surveys for NAPNAP:

- One for current members (795 responses)
- One for former members (125 responses)
- One for people in the NAPNAP database who have never been members (60 responses)

Of those responses, the roles included:

ROLE*	CURRENT MEMBER %	FORMER MEMBER %	NEVER MEMBER %
Acute Care PNP (PNP-AC)	14.72	15.08	22.22
Clinical Nurse Specialist (CNS)	1.13	0.00	6.35
Family NP (FNP)	5.79	4.76	19.05
Neonatal NP (NNP)	0.63	1.59	4.76
Pediatric Mental Health Specialist (PMHS)	5.79	2.38	7.94
Psychiatric Mental Health NP (PMHNP)	1.26	0.79	4.76
Primary Care PNP (PNP-PC or PPCNP-BC)	70.94	57.94	42.86
Student	5.16	1.59	3.17
Other	14.34	28.57	17.46

**Percentages do not add up to 100% due to some respondents having multiple certifications.*

What career stage are you in?

	CURRENT %	FORMER %	NEVER %
Student (not yet an NP)	4.15	1.59	4.76
Early career (1-5 years)	16.60	14.29	22.22
Mid-career (6-15 years)	22.26	25.40	22.22
Advanced career (over 15 years)	45.41	24.60	46.03
Retiree	9.56	29.37	0.00
Not currently working as an NP	2.01	4.76	4.76

PNPs Defined: Fulfilling a Crucial Role

A parent brings a young child to the community clinic with an injured arm. The PNP looks not only at the “what” of the injury, but also the “why” and “how.” Are there avoidable risks? Is proper supervision available? They take time to ask and answer questions, establish trust with the parent and determine the best course of treatment while educating about prevention.

At the nearby hospital, a teenager with a chronic illness receives high-quality care and compassion from the PNPs on their team who have helped to diagnose, treat and manage their condition for years. One of the PNPs is using the interaction as an opportunity to teach two nurse practitioner students joining patient rounds.

These are just a few examples of what pediatric-focused APRNs bring to the health system on a daily basis. As experts in pediatrics and committed advocates for children, PNPs play a significant and unique role in health care, one with increasing significance in the wake of more children losing affordable health coverage. In addition to clinical practice, PNPs make substantial contributions to advanced practice nursing education and research.

Focus and Qualifications

Many PNPs care for children across a wide range of ages, from birth through the transition to adult care, while others may specialize in adolescents or newborns. In every case, PNPs are highly qualified and multiskilled professionals—advanced practice nurses with a master’s degree, post-graduate certificate or clinical practice doctorate from an accredited program, plus national board certification and state licensure.

Among many competencies, PNPs promote health and wellness, evaluate and diagnose patients, order and interpret diagnostic tests, and initiate and manage treatments, including

prescribing medications. Their proficiency is evident, as research has shown² that primary care provided by NPs results in health outcomes comparable to those linked to physicians. NPs also outperformed physicians for consultation time, patient follow-up and patient satisfaction.³

“The presence of PNPs increases patient access to care, contributes to quality care and provides patients with provider continuity.”

White Paper: Critical Shortage of Pediatric Nurse Practitioners Predicted⁴





WHERE PNPs WORK



Primary Care Settings

- Primary care pediatric or family practices
- Public health clinics and federally qualified health centers
- School-based health centers
- Convenient care clinics
- Subspecialty practices
- U.S. Armed Forces and international health locations



Acute Care Settings

- Inpatient pediatric subspecialty teams
- Hospital-based ambulatory or subspecialty care settings
- Pediatric intensive or critical care units
- Emergency departments and urgent care facilities



Educational Settings

PNP and family nurse practitioner academic programs where they educate and train acute and primary care pediatric nurse practitioner and/or family nurse practitioner students



Research Settings

PNPs participate in research designed to advance understanding and improve performance in areas such as:

- Clinical care
- Health behaviors
- Physical environment, including epidemics and pandemics
- Mental health
- Social and economic factors affecting pediatric health
- Pediatric workforce and health policy
- Genes and biology

How PNPs View Their Profession

To better understand the mindset and motivations of today's PNPs, NAPNAP's survey asked practitioners what initially drew them to the pediatric specialty and what they enjoy most about their work.

Overwhelmingly, respondents attributed their career choice to a combined interest in health care and a passion for helping children. They were also attracted to the holistic care approach of NPs, which allows for more quality one-on-one time with patients and families across the care continuum.

"I wanted to interact more with people and see the end results of things. I really liked health promotion and education, which is a huge part of being a pediatric nurse practitioner," said one respondent.

"I really found a love of caring for kids, especially those with complex needs or in a vulnerable population," said another. "I wanted to be a helper to them in some way during their growth and healing."

Rewarding Relationships

When asked to name the favorite part of their job today, many respondents spoke of the bonds they develop with their patients and families. That's made possible by the amount of time they spend together and the holistic philosophy of considering health impacts beyond a diagnosis or health complaint.

"For me, the best part of being a PNP is the relationships that you build with the children and their families," said one respondent. "The kids that stick around, the ones you spend more time with day-to-day, you're helping them talk about their trajectory, setting expectations and mentioning things they should start thinking about. Those are the pieces where you think, 'I have the expertise to really help them no matter where they are.'"



VIEWS FROM NAPNAP LEADERSHIP

"With the nurse's lens, we approach things differently. We see the individual and the family. We are really treating that person and whatever health conditions they are managing, and we do that by understanding their circumstances, their family circumstances, and really tailoring the way we care for them based on the needs of those patients and those families."

Dr. Jennifer Sonney

An Optimistic Outlook

Overall, optimism abounds among pediatric-focused APRNs about their work and the future of their profession. Respondents cited the brilliance of their colleagues as well as the high caliber of students poised to join their ranks as key reasons.

"We are strong, innovative people," said one respondent. "There are enough people realizing we do more than we get credit for. I see that sentiment changing. I see it changing with the quality of students we have and the interest in even our undergraduate students who already know they want to go into a PNP program."

"I feel like we've come a long way as far as seeing more APRNs, specifically pediatrics, being asked to be at the table for events," said another respondent.



VOICES FROM THE FIELD

"People ask me why I'm an NP versus a PA. I feel like the model of the nurse practitioner is person-centered and caring-centered. We get to know the patient instead of just getting the diagnosis."

Kelsey, FNP

Top Challenges and Trends

In stark contrast to the shared optimism, many PNPs said they feel their job is “under threat” by the myriad challenges they routinely encounter and overall trends they see in the field.



Addressing the threats, featured in this section, is key to enabling PNPs to fully apply their specialized expertise and training.

Finding the Right Job Fit

All respondents ranked difficulties in finding suitable work as a major challenge. They pointed to a variety of factors, from pandemic-related hiring freezes to state laws preventing NPs from practicing to the full extent of their education and training.

PNPs also mentioned competing for jobs with other subspecialties. Specifically, respondents feel FNP employment opportunities outnumber those for PNPs because, as one respondent stated, “employers consider FNPs more versatile and do not fully appreciate the specialized pediatric knowledge of PNPs.”



NEXT STEPS

- Continue to work with NAPNAP’s online Career Connection partner to enhance job postings and site functionality
- Recruit more employers to exhibit at NAPNAP’s in-person and virtual events
- Advocate for APRN full practice authority in the pursuit of ensuring child health care access
- Promote the contributions of PNPs in achieving high-quality child health outcomes
- Advocate for dedicated funding to support pediatric nursing education
- Develop and disseminate PNP precepting training and resources building on NAPNAP’s Position Statement on “Promoting the Pediatric Nurse Practitioner Workforce Pipeline.”⁵

COVID-related Burnout

*"As the face of health to the American public, perhaps no other health discipline has been more widely impacted by COVID-19 than nursing."*⁶

Without question, the COVID-19 pandemic has exacerbated stressors on all health care practitioners since reaching the U.S. in early 2020. It remains a central part of each working day for PNP's and has left many feeling stretched to their limits. "COVID comes up in conversation with almost every patient I see," said one respondent.

Even without a pandemic to contend with, nurses in the U.S. face estimated burnout rates ranging between 35% and 45%. Some believe the numbers could be higher, because many studies focus only on the emotional exhaustion part of burnout.⁷

Factors contributing to burnout include:⁸

- High workloads
- Staff shortages
- Extended shifts
- The burden of documentation
- Misaligned job skills and expectations

Respondents pointed to resources NAPNAP could offer that may help with the burnout issue. Suggestions ranged from webinars and email campaigns focusing on wellness to a community board on the member network encouraging sharing and support among peers.

As for COVID-19 specifically, PNP's would also benefit from having a "one-stop shop" where they could access up-to-date resources and accurate information regarding vaccines and other matters to share with patients.



VOICES FROM THE FIELD

"COVID has had a huge impact on the field. Depending on where you are, the NP role has gotten more stretched and people are re-evaluating what it looks like and what roles they want to play."

Amy, Advanced Practice Provider Manager



NEXT STEPS

- Advocate for policies that enable work-based employee support, including early referral programs for crisis management, mentoring and coaching and voluntary employee assistance support
- Support measures that address the risks and effects of burnout on those working in pediatrics
- Develop additional resources and programs for PNP mental health and well-being, including those focused on stress reduction, coping mechanisms and recognizing warning signs
- Provide virtual and in-person venues for PNP's to connect and share lived experiences in a safe environment⁹



A Lack of Respect, Understanding and Collaboration

In 2010, the National Academy of Medicine established a national mandate to promote interprofessional team-based care. The Affordable Care Act included incentives to leverage teamwork. The goal: improving quality of care, enhancing access and eliminating redundancies.

Incorporating PNPs into the pediatric care team is increasingly essential. Pediatric health care is seeing more complex and chronic illnesses, which creates a need to coordinate treatment across health care, home, school and childcare settings.

Along with their nursing skills and competencies, PNPs have advanced expertise in pediatric growth and development, wellness and illness delivered with a holistic approach. They understand community, state and national resources, issues and policies. Moreover, PNPs can effectively communicate with other service providers and caregivers.

Despite their undeniable value, a significant number of PNPs struggle to thrive in a team setting. Primary issues include a lack of respect for their contributions and little understanding among colleagues for their role within the team.



VIEWS FROM NAPNAP LEADERSHIP

“What makes this revelation more unfortunate is the fact that it’s not new. We need to do a better job of ensuring that everyone—from individual clinicians to entire health systems—understands the incredible value and unique skills PNPs bring to a patient, a family, a team. We have the evidence. We need to get it out there.”

Dr. Jessica Peck



NEXT STEPS

- Increase stakeholder and public awareness about PNPs’ expertise and value
- Support and empower PNPs to be effective advocates for their profession
- Collaborate with leaders at AAP and other medical societies to educate physician colleagues about PNP value
- Acknowledge pediatric-focused APRNs as full partners and leaders in innovative models of care such as accountable care organizations (ACOs) and health care homes

Transactional vs. Holistic Care

As discussed earlier in this report, many pediatric-focused APRNs chose their careers because they are passionate about the one-on-one time and relationships afforded by the holistic approach to care. Yet many respondents also said their work environment today more closely reflects a transactional physician model of care—one that's more focused on the immediate disease or ailment and that prioritizes seeing as many patients as possible.

According to one respondent: "There's a constant battle between seeing enough patients in a day and providing each patient and family with the time they need."

Time was a central theme in many responses:

- "There's a growing complexity around the care provided in a decreasing amount of time."
- "I don't have enough time to do all the creative things I would like to do as a primary care PNP."
- "There's not enough time for visits to properly cover all the issues. Some offices have the luxury of mental health providers or social workers to help."

There are real concerns that spending less time with patients and families could lead PNPs to feel like they are underperforming or even letting down their profession.



NEXT STEPS

- Include pediatric-focused APRNs as eligible participants and essential partners in any federal grant programs piloting innovative models of care, including health information technology initiatives
- Design and implement alternative payment models focused on the value of the services provided to patients rather than on the clinician who provides them and increase PNPs' understanding about such models



Needs and Wants to Accelerate Progress

To gain more insight about their challenges, we asked PNPs to identify changes—whether required or desired—that would improve their job satisfaction and empower them to make the greatest impact for their patients.

More Training Around Patient Mental and Behavioral Health

Respondents in all categories sounded a clarion call for specific training involving pediatric and family mental health. Feedback from current NAPNAP members included 90 mentions of the need for increased mental health education.

In some cases, either within or beyond the broader heading of mental health, PNPs expressed needs for training in related areas affecting children and adolescents today. These included:

- Anxiety
- ADHD
- Depression
- Bullying
- Obesity
- LGBTQIA+ health challenges
- Sleep disruption
- Substance misuse and abuse

“The number of patients at younger and younger ages seeking diagnosis and treatment for mental and behavioral health issues has escalated,” said one respondent. “There are not enough pediatric mental health providers.”

“Especially because of [the] pandemic, we’re seeing many kids struggling mentally, socially and with school,” said another respondent. “In order to take care of the whole child, we must be able to care for all their needs and be able to provide resources.”

Other respondents echoed similar sentiments:

- “We need better mental and behavioral health guides and resources. Many children are

suffering from depression and anxiety and unable to get the care they need.”

- “Adolescent behavioral and mental health is a crisis that isn’t going to end anytime soon.”
- “We need dedicated mental health training—it can’t just be a module.”



VIEWS FROM NAPNAP LEADERSHIP

“The holistic approach to care that PNPs practice is perfectly suited to addressing mental health care needs among children and adolescents. They can explore root causes and review issues in the context of the community and family environment. It is essential that we protect clinician time and be deliberate with training. The potential to make a difference is simply too great to ignore.”

Dr. Andrea Kline-Tilford



NEXT STEPS

- Develop more pediatric mental health-related continuing education opportunities, downloadable resources and other supports
- Collaborate with faculty/institutions to incorporate more mental health education and training in PNP programs
- Encourage members to seek the Pediatric Primary Care Mental Health Specialist certification
- Consult with the Pediatric Nursing Certification Board about the expansion of the PMHS certification to include acute care PNPs

Full Practice Authority in More States

PNPs flagged full practice authority (FPA) expansion as an urgent need.

FPA empowers PNPs to apply the full extent of their education and training—without physician supervision. FPA has been recommended in the National Academy of Medicine's Future of Nursing Report 2030¹⁰ and supported by stakeholders such as the Federal Trade Commission¹¹ and AARP.¹²

Currently, only 26 states plus the District of Columbia have passed FPA legislation. Authorization is codified in state statutes and granted under the licensure authority of individual state boards of nursing. The remaining states are designated as either reduced or restricted practice. They limit the ability of PNPs in at least one area of practice and require collaboration with or supervision from another health care provider. In addition, lack of FPA increases the cost of care for children and their families and impedes direct access to critical health services.

With FPA, PNPs can do more to address America's growing need for health care access, especially for children and families in traditionally underserved communities.

"There's more research coming out showing the benefits of nurse practitioners, especially in rural areas, and I think that's where they're going to be needed," said one respondent. "I think we'll also grow in urban areas, too."

"There is a growing consensus that FPA is a viable pathway to provide patients quality, accessible, affordable health care amid the growing complexities of the U.S. health care system."

White Paper: Critical Shortage of Pediatric Nurse Practitioners Predicted¹³

"NPs are more likely than their physician counterparts to serve minority, disadvantaged and vulnerable populations; thus, FPA can maximize the capacity of the NP workforce in underserved areas with the most health disparities and urgent need for care."

White Paper: Critical Shortage of Pediatric Nurse Practitioners Predicted¹⁴



NEXT STEPS

- Advocate for national standardization of pediatric-focused APRN practice across states in alignment with the APRN Consensus Model to eliminate arbitrary, costly, unsupported and time-limited barriers preventing children from full and direct access to high-quality, affordable care provided by pediatric APRNs
- Highlight the impact of FPA at institutional, state and national levels
- Provide more advocacy-related training opportunities for chapter leaders to increase their impact on FPA legislation/regulation



VOICES FROM THE FIELD

“Nurses in general are helpers, not self-promoters, but that holds us back, because people don’t realize how powerful and useful we are. We’d benefit from a public relations interface so we get more stories about what good nurse practitioners do in their communities. Then the public and political leaders understand the benefits from our role in health care.”

Cynthia, PNP and Professor



NEXT STEPS

- Implement multi-channel public awareness campaigns for diverse audiences
- Develop targeted education/outreach for underserved communities
- Raise awareness of PNP role and value by partnering with other associations of interprofessional team members
- Amplify the voice of PNPs by providing media training to represent the profession

More Public Awareness

Statistically speaking, most respondents across all categories felt the public’s understanding of the PNP role keeps growing stronger over time (see chart in this section). But the open responses made it clear that more work remains.

Patchwork regulations, like FPA, complicate the PNP story. As a result, PNPs often struggle to define their role in ways the public understands and to gain their trust. Some PNPs even feel they are viewed as “second-rate health care providers.”

Many survey respondents reported fatigue from constantly explaining to the public—and sometimes their own colleagues—what they do and why they are valuable. They were unified in expressing the need for:

- “Continued consumer education about our role and support from physician colleagues rather than competition.”
- “Trust from the public and policies that support us in providing optimal care.”
- “More involvement in important pediatric health issues so the public and the families we serve see our role and understand it.”
- “Public awareness of our abilities to provide similar care as pediatricians.”

The public’s understanding of the role of a pediatric nurse practitioner is:			
	CURRENT MEMBER %	FORMER MEMBER %	NEVER MEMBER %
Growing stronger over time	61.64	60.32	69.84
About the same	34.84	34.13	25.40
Growing weaker	3.52	5.56	4.76

Improved Conditions and Reimbursement

In an ideal world, pediatric-focused APRNs would have the time to apply their advanced pediatric health expertise to help patients and, in return, receive compensation equal to the value of their services. Current conditions fall short of this ideal, however.

Some PNPs identified competing interests as a prime contributor to subpar working conditions. “We need greater understanding that PNPs cannot be expected to provide quality care in a system that is overly focused on volume,” said one respondent.

A PUSH FOR PAYING PRECEPTORS

A key piece of every PNP’s training is the hands-on education they receive from preceptors while working with real patients in clinical settings. Currently, most NP preceptors provide their incredibly valuable services on a volunteer basis.

Many respondents raised concerns about the volunteer system, noting it’s time to compensate preceptors and their associated facilities to recognize their work, increase their satisfaction and prevent a shortage.

“There are lots of government training programs and grants that give money to institutions to train medical residents clinically to do their job, but NPs don’t get the same support,” said one respondent. “Most of the people who take NP students into their clinic or hospital do so out of the goodness of their heart.”

“As someone who teaches, I feel like the biggest challenge we have right now is finding preceptors,” said another respondent. “There are lots of government policies that support the education of physicians and even physician assistants, but there’s not a lot for nurses or NPs. Doctors are reimbursed to train medical students and residents, but nurse practitioners are not given anything.”

Another suggested that PNPs need “less hindrances and obstacles from insurance companies. They are cutting reimbursement to NPs, demanding more documentation and requiring more preauthorization on medications due to formulary changes—all of which contribute to burnout.”

Currently, the Medicare reimbursement rate for NPs equals just 85% of a physician’s pay rate, despite evidence of parity in care quality.

“PNPs need and deserve direct, equitable reimbursement by all third-party payers for the quality of care they provide,” said Dr. Andrea Kline-Tilford, NAPNAP president. “Too often, their contributions go unseen because they’re forced to bill their services under a physician’s name and provider number. We need to eliminate these practices.”



NEXT STEPS

- Conduct research and publish about “invisible” contributions of PNPs
- Promote comprehensive, transparent reimbursement and appropriate attribution for care by government and commercial payors through the elimination of “incident-to” billing
- Advocate for increased funding for nursing workforce development programs with a particular focus on ensuring funding for development of the pediatric nursing workforce
- Encourage strategies to retain pediatric-focused NP workforce members through professional advancement and recognition
- Explore opportunities to work with nursing champions in Congress and the administration to develop an improved, sustainable graduate nursing education project

Assessing the NAPNAP Experience

NAPNAP is the premier professional association for PNP's and all pediatric-focused APRNs. To best serve our 8,000+ members and the profession as a whole, we must routinely examine our practices and performance through an objective lens.

With this survey, we reached out to current NAPNAP members, former members and those who have never been members. We asked them for feedback around four main topics:

- Membership value
- Continuing education and events
- Resources and tools
- Advocacy efforts

Responses shed light on areas of strength as well as opportunities for improvement that require investing more targeted attention and resources.

Most respondents agree or strongly agree that NAPNAP:

- Is moving in the right direction
- Has a good understanding of the issues most important to pediatric-focused APRNs
- Offers continuing education relevant to their practice
- Provides opportunities to network with other NPs
- Provides opportunities for members to develop leadership experience/skills



Membership Value

Most current members (54%) feel NAPNAP provides value they cannot get anywhere else.

When asked to identify the most valuable benefits of NAPNAP membership, survey respondents frequently pointed to the community of practitioners NAPNAP has created. These connections bring members back.

The stresses brought on by the pandemic only reinforced that key value for some. “Having this network of peers who understand the frustrations you have, it’s really helpful,” said one respondent.

Other members valued sharing practical information across the NAPNAP community, with one respondent describing it as “all the people I could go to if I had a question, whether it’s clinical or about finding a job.”

Having an active local chapter played a large role in providing value, motivating members to renew and remain part of the NAPNAP community. The value and accessibility of national-level programs remained elusive to some, however. “I don’t think they do a good job of promoting how you can be involved on the national level,” said one respondent. “If I wanted to join a committee to help something, I wouldn’t know where to go.”

INCREASING THE FOCUS ON STUDENTS

Members we spoke with believe there are many opportunities for NAPNAP to grow its membership by focusing on students through offering resources, benefits and presentation opportunities for these potential future members. Interviewees also believed if students understand the value of organizational membership, they are more likely to be lifelong members.

NAPNAP staff have expanded the student-focused content and outreach to students and faculty leaders with additional resources planned. Additionally, NAPNAP hosted a workshop geared toward the difficult transition early-career NPs experience in the first year, which focused on resources for students looking for their first job while also building a cohort, or community, of colleagues who can network and support each other. Some of these resources include how to negotiate contracts, how to obtain credentialing and resumes.



NEXT STEPS

- Offer resources/benefits that align to students’ needs and provide value to student members
- Extend access to NAPNAP’s Transitioning to Your New APRN Role workshop for early-career NPs
- Increase awareness of the full breadth of member resources
- Delineate resources by career stage
- Assist chapters with resources and outreach to connect with potential members
- Strengthen NAPNAP’s outreach to faculty and students

Continuing Education (CE) and Events

Most current (77%) and former (68%) members rate the National Conference on Pediatric Health Care as somewhat or very valuable.

PNPs are lifelong learners driven to stay proficient in their work. In our survey, respondents consistently called out a desire for more education and training around pediatric care and current issues in the field.

As The Leader in Pediatric Education for Nurse Practitioners®, NAPNAP produces and disseminates high-quality, evidence-based CE for primary, acute and specialty care clinicians.

Many members take advantage of NAPNAP CE programs by attending conferences, taking online courses and attending local chapter dinners. Most current members (58%) described the PedsCESM online learning system as very valuable. “Probably 75% of my CE comes from NAPNAP,” said one respondent.

Members clearly appreciate the opportunity to earn CE credits at NAPNAP conferences while connecting with their peers. “I try to go to NAPNAP’s national conference every year for CE, because it’s really invigorating,” said one respondent, pointing to the “new things I can learn and bring back and share with other people.”

At the same time, other members revealed an opportunity for NAPNAP to enhance CE offerings. They pointed to a lack of advanced topics and leadership training.

“I’m a seasoned NP now. What I look for is something to push the envelope for me professionally,” said one respondent. “Maybe we need master classes, maybe we need to talk about what it means to lead a non-profit, how to do fundraising, how to leverage these other skills you don’t often attribute to a nurse practitioner, so that NAPNAP is there for them throughout their career trajectory.”

INSPIRED TO LEAD



More than 71% of current members feel NAPNAP provides opportunities for them to develop leadership experience and skills. Many of the NAPNAP leaders interviewed as part of the survey said they were encouraged by fellow members to step into leadership positions, both locally and nationally. They credited experienced practitioners for seeing their potential and helping them believe in themselves.

“At NAPNAP’s national conference, I made connections with some other people in my state, which further propelled me to get involved with the board,” said one respondent. Another talked about her rapid rise to the top of her chapter and a turning point in her career: “I was precepting with a member and was impressed by her professionalism. She said I should get involved in NAPNAP. She saw potential in me that I didn’t see in myself. She later encouraged me to run for chapter president and then eventually to pursue a faculty position. I wasn’t sure I was ready, but she gave me confidence and reassured me that I wouldn’t be alone, I had my chapter behind me.”



HYBRID CONFERENCE APPROACH

In 2020, as pandemic restrictions prohibited in-person gatherings, NAPNAP moved its national conference and symposium online. The online format repeated in 2021, with the addition of one in-person event. In 2022, NAPNAP offered both in-person and virtual conferences.

Members appreciated the ability to receive content at their convenience and with no travel costs. “Money and time are the most challenging parts of getting my CE,” said one respondent. “The virtual environment has made this a little bit easier.”



NEXT STEPS

- Expand CE offerings to include more advanced topics/courses and organize by career stage
- Focus on leadership development
- Continue providing in-person and virtual format options to meet the CE needs of PNPs—anywhere, anytime

Resources and Tools

Most current members rate NAPNAP's Journal of Pediatric Health Care as very valuable.

Most current, former and never members had not used or were not familiar with NAPNAP's Career Connection job board or TeamPeds Member Network e-communities.

When asked which NAPNAP resources they use most often, members pointed to the NAPNAP Daily News e-briefings, along with the CE programs covered in the previous section. The *Journal of Pediatric Health Care* and advocacy resources came next. Many members relied heavily on Daily News for staying up to date, especially for COVID-19 information. "It helps me a lot in my practice, especially as they've had a lot of content about COVID," said one respondent. "That's how I found out when the FDA and CDC were meeting and where we were with vaccines and approvals."



As for other resources, many respondents reported little familiarity with NAPNAP's job board, the TeamPeds Member Network, the TeamPeds Talks podcasts or the special interest groups. Getting the word out about these resources offers a clear opportunity for improvement.

Regarding NAPNAP content, many members felt that NAPNAP provides "quality," "reliable" and "evidence-based" information, and all members appreciated that the material is written by NPs.



VOICES FROM THE FIELD

"NAPNAP's resources are excellent in that they provide the latest and the greatest of what is considered evidence-based, safe practice. It's very guideline-driven, and as NPs that's what we want, because it protects us and protects our patients."

Joanne, PNP



NEXT STEPS

- Increase awareness around the full spectrum of resources/tools including TeamPeds Talks and TeamPeds Experts Live
- Promote NAPNAP Career Connection resources
- Drive member engagement via NAPNAP's Member Network e-communities
- Highlight the work of NAPNAP's special interest groups in supporting clinicians and their patient families



Advocacy Efforts

Most current members (64%) described NAPNAP's federal advocacy efforts as either somewhat or very effective.

The pediatric-focused APRN community expects NAPNAP to pursue major advocacy efforts on their behalf. The survey notes that such efforts are an “engine for the movement,” with more visible advocacy providing members “hope in hard times.”

Respondents appreciated NAPNAP's federal advocacy efforts, but many would like to see NAPNAP develop the capacity to support state-based advocacy. One of the reasons members go to the NAPNAP website is to track progress on advocacy.

As discussed in previous sections, respondents also want to see NAPNAP take the lead in promoting the value of pediatric-focused APRNs. “Some people don't understand what NPs are or what we do. When we are seen as providers, then we can get the help that we need,” said one respondent.

Some respondents expressed a desire for NAPNAP to advocate more about the value of its members on Capitol Hill. “To continue to have more of that, to have PNPs present in politics, would show that we are a group of people who are making a difference and should be heard,” said one respondent.



VIEWS FROM NAPNAP LEADERSHIP

“Whether it's full practice authority for PNPs or critical health equity issues affecting children, NAPNAP is well-positioned to address pressing challenges. We are a nimble, innovative organization, and we use this advantage to be the driving force for change. That's what our members expect and our profession deserves.”

James H. Wendorf



NEXT STEPS

- Share more updates on advocacy efforts through a multi-channel approach
- Encourage members to engage with elected leaders to elevate their constituent voice
- Provide more advocacy-related training opportunities for chapter leaders to increase their understanding and impact on state-level issues
- Host more high-visibility events such as Capitol Hill Day
- Highlight advocacy wins for FPA and other areas
- Promote NAPNAP's advocacy agenda

Your Voice Matters

NAPNAP's Pulse of the Profession report reflects many voices and perspectives from the PNP community. But making the future brighter for pediatric-focused APRNs and the children they serve takes a full team effort.

We want to hear from you.

- What are the challenges and trends you face in your work?
- What could help you do your job more effectively?
- What changes would you like to see?
- How can NAPNAP better support you and your colleagues?

Members can share recommendations and questions in NAPNAP's Member Network e-community. Other stakeholders can send thoughts to our leadership team at info@napnap.org.

To learn more about NAPNAP, including continuing education, events and advocacy, visit napnap.org.

Experts in pediatrics, advocates for children



References

- 1 Press Release: New Medicaid and CHIP Enrollment Snapshot Shows Almost 10 million Americans Enrolled in Coverage During the COVID-19 Public Health Emergency (June 2021). www.cms.gov
- 2 Gigli, K. H., Beauchesne, M. A., Dirks, M. S., & Peck, J. L. (2019). White Paper: Critical Shortage of Pediatric Nurse Practitioners Predicted. *Journal of Pediatric Health Care: official publication of National Association of Pediatric Nurse Practitioners*, 33(3), 347-355. <https://doi.org/10.1016/j.pedhc.2019.02.008>
- 3 Kurtzman, E., & Naylor, M., (2010). The Role Of Nurse Practitioners In Reinventing Primary Care. *Health Affairs*, 29, no. 5: 893-899.
- 4 Gigli, K. H., Beauchesne, M. A., Dirks, M. S., & Peck, J. L. (2019). White Paper: Critical Shortage of Pediatric Nurse Practitioners Predicted. *Journal of Pediatric Health Care: official publication of National Association of Pediatric Nurse Practitioners*, 33(3), 347-355. <https://doi.org/10.1016/j.pedhc.2019.02.008>
- 5 Gigli, K. H., McRae, E.M., Peck, J.L., Reyes, I., Sonney, J. (2021). NAPNAP Position Statement on Promoting the Pediatric Nurse Practitioner Workforce Pipeline. [https://www.jpmedhc.org/article/S0891-5245\(22\)00001-3/pdf](https://www.jpmedhc.org/article/S0891-5245(22)00001-3/pdf)
- 6 Peck, J. L., & Sonney, J. (2021). Exhausted and Burned Out: COVID-19 Emerging Impacts Threaten the Health of the Pediatric Advanced Practice Registered Nursing Workforce. *Journal of Pediatric Health Care: official publication of National Association of Pediatric Nurse Practitioners*, 35(4), 414-424. <https://doi.org/10.1016/j.pedhc.2021.04.012>
- 7 National Academies of Sciences, Engineering, and Medicine 2021. *The Future of Nursing 2020-2030: Charting a Path to Achieve Health Equity*. Washington, DC: The National Academies Press. <https://doi.org/10.17226/25982>
- 8 National Academies of Sciences, Engineering, and Medicine 2021. *The Future of Nursing 2020-2030: Charting a Path to Achieve Health Equity*. Washington, DC: The National Academies Press. <https://doi.org/10.17226/25982>
- 9 Gigli, K. H., Hunter, J., Lee, A.M., McNamara, M., E.M., Peck, Sonney, J. (2021). NAPNAP Position Statement on Resilience and the Postpandemic Pediatric Nurse Practitioner Workforce. [https://www.jpmedhc.org/article/S0891-5245\(21\)00273-X/pdf](https://www.jpmedhc.org/article/S0891-5245(21)00273-X/pdf)
- 10 National Academies of Sciences, Engineering, and Medicine 2021. *The Future of Nursing 2020-2030: Charting a Path to Achieve Health Equity*. Washington, DC: The National Academies Press. <https://doi.org/10.17226/25982>
- 11 <https://www.ftc.gov/reports/policy-perspectives-competition-regulation-advanced-practice-nurses>
- 12 https://storage.aanp.org/www/documents/advocacy/AARPPolicyBook2011_12HlthChpt.pdf
- 13 Gigli, K. H., Beauchesne, M. A., Dirks, M. S., & Peck, J. L. (2019). White Paper: Critical Shortage of Pediatric Nurse Practitioners Predicted. *Journal of Pediatric Health Care: official publication of National Association of Pediatric Nurse Practitioners*, 33(3), 347-355. <https://doi.org/10.1016/j.pedhc.2019.02.008>
- 14 Gigli, K. H., Beauchesne, M. A., Dirks, M. S., & Peck, J. L. (2019). White Paper: Critical Shortage of Pediatric Nurse Practitioners Predicted. *Journal of Pediatric Health Care: official publication of National Association of Pediatric Nurse Practitioners*, 33(3), 347-355. <https://doi.org/10.1016/j.pedhc.2019.02.008>



National Association of Pediatric Nurse PractitionersSM

5 HANOVER SQUARE
SUITE 1401
NEW YORK, NY 10004

WWW.NAPNAP.ORG

917.746.8300