DESCRIBING A RESIDENCY PROGRAM DEVELOPED FOR NEWLY GRADUATED NURSE PRACTITIONERS EMPLOYED IN RETAIL HEALTH SETTINGS



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Retail health clinics are an expanding health care delivery model and an emerging new practice site for nurse practitioners (NPs). Critical thinking skills, clinical competence, interprofessional collaboration, and business savvy are necessary for successful practice in this highly independent and autonomous setting. This article describes a pilot residency partnership program aimed at supporting new graduate NP transition to practice, reducing NP turnover, and promoting academic progression. Eight new graduate NPs were recruited to the pilot and paired with experienced clinical NP preceptors for a 12-month program that focused on increasing clinical and business competence in the retail health setting. The residency program utilized technology to facilitate case conferences and targeted Webinars to enhance learning and peer-to-peer sharing and support. An on-line doctoral-level academic course that focused on interprofessional collaboration in health care, population health, and business concepts was offered. Both NPs and preceptors were highly satisfied with the academicservice residency program between MinuteClinic and Northeastern University School of Nursing in Boston, MA. New NPs particularly valued the preceptor model, the clinical case conferences, and business Webinars. Because their priority was in gaining clinical experience and learning the business acumen relevant to managing the processes of care, they did not feel ready for the doctoral course and would have preferred to take later in their practice. The preceptors valued the academic course and felt that it enhanced their precepting and leadership skills. At the time of this article, 6 months post completion of the residency program, there has been no turnover. Our experience supports the benefits for residency programs for newly graduated NPs in retail settings. The model of partnering with academia by offering a course within a service organization's educational programs can enable academic progression. (Index words: Nurse practitioner; Retail clinics; Residency program; Preceptor; Academic partnership) | Prof Nurs 31:226-232, 2015. © 2015 Elsevier Inc. All rights reserved.

THE RETAIL HEALTHCARE model was created over a decade ago in response to consumer demand for high-quality, convenient, and affordable health care (Riff,

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Ryan, & Hansen-Turton, 2013). This model of health care delivery, primarily staffed by family nurse practitioners and, in some locations, physician assistants, has gained recognition as an important access point for care in the fragmented U.S. health care system. Retail clinics are an emerging industry and provide a new, convenient setting for Americans seeking health care services. Since the first clinic opened in 2000, the industry has steadily expanded and is now experiencing rapid growth with over 1,500 clinics operating in all but five states in the United States (Convenient Care Association (CCA), 2010; McKinlay & Marceau, 2012). MinuteClinic (MC), owned and operated by CVS Caremark (CVS), is the largest retail health provider in the United States and employs over 2,000 family nurse practitioners. Nurse

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practitioners (NPs) in retail health care setting care for a culturally and socioeconomically diverse ambulatory population of all ages. Examples of their practice include diagnosing and treating common acute disorders, screening for common health issues, immunizations, health promotion, and education. The shortage of experienced NPs combined with the rapid expansion of the retail health market has required the recruitment and employment of growing numbers of newly graduated NPs. Without sufficient transitional support and mentorship, new graduate NPs, who are often the sole practitioner in a clinic, may encounter clinical and administrative situations that require responses and interventions that might be unfamiliar for a new graduate. The purpose of this article is to describe a collaborative partnership between nursing leadership at the MC and nursing faculty at Northeastern University (NEU), Boston, MA to develop a residency program for recent NP graduates employed in MC retail health care settings.

Clinical Partner—MC

CVS operates over 700 MCs and plans to expand to over 1,500 by 2017. The MCs occupy a small, dedicated space within the larger CVS store and are modeled and equipped similarly to an outpatient health care clinic. The advantage of having the MCs located within the CVS store, which also includes a pharmacy and convenience retail goods, is accessible, low-barrier, walk-in access for consumers. NPs in the MC provide clinical evaluation and treatment for a range of common health care issues and pharmacists, and NPs provide health care counseling and education. Collaborating physicians are available during all practice hours for consultation with clinic providers. Formal partnerships with existing health systems are being strengthened to enhance care coordination, improve communication, and improve patient care across the continuum. Electronic health records and decision-making tools provide up-to-date clinical information that support clinicians and care delivery processes. Most of the major health insurance is accepted, and costs generally do not exceed \$79 for a visit, excluding laboratory and pharmaceutical charges. Retail clinics value transparency in pricing, and MC posts prices on their Web site and at the clinic locations. MC services are generally utilized by a younger demographic of individuals who often are without a primary care provider or regular source of health care (RAND).

NPs in MCs provide quality health care at lower costs. Mehrotra et al. (2009) evaluated cost and quality of care for three acute illnesses commonly seen in consumers using retail clinics, physician offices, urgent care centers, and emergency rooms. They found that the cost of care in the retail clinic was 40–80% lower than the other settings, whereas the quality of care in retail clinics was similar to physician offices and urgent care centers and slightly better than care provided in the emergency room. In addition, for patients seen at retail clinics, there was no impact on preventive care rates. These findings support the growing body of research that reports

excellent quality of routine primary care provided by NPs (Mehrotra et al., 2009).

Mentoring New NP Graduates: A Unique Challenge in the Retail Health Setting

Effective recruitment and retention strategies are of paramount importance to support the growth projections of new MC locations. Advanced practice nurse (APN) leaders at MC strategically developed partnerships with schools of nursing to support NP student clinical experiences and recruit new graduates. In addition, marketing campaigns focused on recruiting NPs of differing backgrounds, including newly graduated NPs. MC nurse leaders noted that the newly graduated NPs who had experience as students in the retail clinic had a smoother transition to practice. Retention data also showed a trend toward reduced turnover in this group. The existence of mentors and a familiarity with the MC clinical practice and nonclinical administrative processes were thought to be contributing factors to the reduced turnover in these new graduates.

The successful transition of new graduates is enhanced by clinical mentoring and professional development opportunities (Benner, Sutphen, Leonaed, & Day, 2010). The MC retail clinic health care delivery model presents unique challenges in providing a mentor who can work side-by-side with the new graduate NP. The clinics are typically staffed by one provider, which presents a challenge to facilitating socialization and relational supports. In addition, the retail clinician has unique nonclinical administrative responsibilities that include managing the patient experience throughout the entire process from patient registration through discharge, including billing and payment collection. The responsibilities of providing clinical care in an unfamiliar business environment require the new graduate to also learn these nonclinical, administrative processes. Moreover, the retail clinic health care provider is responsible for participating in the strategic development of community and consumer partnerships for health promotion and business growth. This requires an understanding of the community's health care needs and establishing interprofessional relationships with retail colleagues, store customers, and community leaders that may benefit from MC health care service.

The strategies for expanding health care services through MC practices are rooted in community outreach principles that the typical new NP graduate may not be prepared to implement. To address the clinical practice and unique business learning needs, MC nurse leaders decided to implement a residency program that offered peer mentorship, clinical knowledge, and skill development targeted toward the health care needs of the MC patient population, critical thinking, interprofessional collaboration, and business acumen.

Clinical Residency Program to Support Role Transition

Most of the clinical residency programs described in the literature are designed for the postbaccalaureate

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