

The Lifecycle of the Advanced Clinical Practitioner

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Carolinas HealthCare System (CHS) recognizes the pivotal role that physician assistants and advanced practice registered nurses fulfill, not only in the clinical setting, but also in academic, research, and administrative settings as well. Never has there been a time when these pivotal roles have become more crucial in healthcare settings across the nation. With the landscape of healthcare evolving at such a rapid pace, healthcare systems are pressed to evaluate the need for change. As one of the leading healthcare organizations in the Southeastern United States and one of the largest public, not-for-profit systems in the nation, CHS is committed to a core value of, “Patient First, Always.” In maintaining a patient-centered approach, we look to transform and innovate the way our services are delivered across our system through optimizing the skill sets of our more than 1500 advanced clinical practitioners (ACPs)—nurse practitioners, physician assistants, certified registered nurse anesthetists, certified nurse midwives, and clinical nurse specialists. Along with this transformative process, CHS is dedicated to supporting the lifecycle of our ACPs through education and transition to practice, as well as the maturation of professional development.



One of CHS’s strategic priorities is to provide a clinically integrated environment of coordinated care that creates value for the patients it serves. As part of this ongoing priority, an advanced clinical practitioner (ACP) strategy was developed to address the education, recruitment, retention, and utilization of ACPs, supporting the System’s mission and aligning with its vision and strategy. This ACP strategy, which is referred to as “the lifecycle of the ACP,” is a collaborative effort that addresses proficiency, enhanced perform-

ance, and best practice through innovative clinical efforts and skill optimization.

An imminent shortage of healthcare providers and increasing demand for services coupled with concerns related to the safety, quality, and efficiency of the current healthcare paradigm has created an imperative for CHS. We responded with a robust, System-wide approach that transforms and unifies the care delivery model and ensures it is applying its resources efficiently to provide healthcare

Table 1. Fellowship Recruitment Growth

Cohort	Applicants	Offers	Schools	States
Fall 2013	26	13	7	5
Spring 2014	55	23	28	16
Fall 2014	104	26	50	26

services. The improved care delivery model is patient driven and primarily focuses on the overall quality of the patient experience as it addresses increased access to healthcare services and decreased wait times.

The challenges of progressing from a volume-based service to a value-driven system coupled with the limitations of the current trajectory to meet future service demands have made it essential for CHS to acknowledge the necessity for a healthcare transformation. CHS is determined to be an advocate of this evolution by optimizing the role of ACPs and redefining the care delivery model through enriched education, constructive collaboration, and ongoing professional support.

Through the development of the CHS Center for Advanced Practice (CAP), CHS is able to utilize ACPs as a focal point for driving system-wide change and improvement, cultivating clinical talent, and resourcefully meeting the goals of increasing service demands. The CAP initiative creates a highly engaged community of physician assistants and advanced practice nurses who are utilized to their full scope of practice and education, which in turn creates an exceptionally skilled, lower-cost workforce. As a result, CHS is strongly positioned to provide high-quality affordable care, reduce cost trends, and improve the overall patient experience and population health.

With the guidance of System chief nurse executive and feedback from monthly “town hall” meetings, CHS was able to identify self-imposed barriers to practice and respond by promoting an innovative approach to integrate ACPs into enhanced utilization models focused on quality patient-centered care. A steering committee was established to formulate a management action plan. This fundamental group of key stakeholder physicians, ACPs, executives, and academic officers prioritized three key areas of operation:

- **A center to define and optimize advanced clinical practice at CHS.** This center acts as a unified coordinating resource to optimize services related to education, mentoring, recruitment, satisfaction/retention, professional development, communication, clinical competency, regulatory requirements, and credentialing, as well as a resource for evidence-based practice and practice model innovation.
 - Provide education, marketing and recruitment information on CAP programs/opportunities at regional, state, and national levels
 - Provide specialty-specific education, mentoring, and training for ACP fellows and students

- Provide a mechanism to guide and support professional development
 - Support team-based care
 - Create a collaborative structure with medical staff and physician leadership, including the CHS Medical Group
 - Provide a clear conduit of communication among ACPs, physician medical staff, and system leadership
 - **An advanced clinical practitioner fellowship program.** This is a one-year post-graduate ACP fellowship program is designed to develop foundational specialty-specific skills and knowledge. Applicants choose one of the areas listed below:
 - Acute care division
 - Surgical critical care/trauma/general surgery
 - Pulmonary critical care
 - Cardiology
 - Hospitalists—internal medicine
 - Urology/urologic surgery
 - Palliative care
 - Primary care division
 - Family medicine
 - Internal medicine—outpatient-focused
 - Pediatrics
 - Behavioral health
 - Urgent care division
 - Adult urgent care
 - Pediatric urgent care
 - **An acute care nurse practitioner program with the University of North Carolina at Charlotte.** We developed an educational, graduate-level program in partnership with University of North Carolina—Charlotte that provides curriculum, clinical practice, and mentorship designed to educate and graduate adult—gerontology nurse practitioners with an acute care focus.
- With an overall goal focused on the recruitment, retention, and maintenance of a skilled workforce, CAP adopted specific improvement strategies to insure goal and mission alignment associated with provider satisfaction and clinical outcomes.

THE NEED AND IMPACT OF AN ACP FELLOWSHIP

Those who employ ACPs need a mechanism to provide training above and beyond the master’s level to allow for a smooth transition into independent practice. This program needs to be designed so that it is cost effective and allows for an increase in practical knowledge that the ACP can apply to their day-to-day practice. It has also been well documented for new registered nurse graduates that effective transition to practice programs increase employee retention rates.

CHS created 12 different specialty tracks to help transition new ACPs into practice in acute care, primary care, urgent care, and behavioral health areas. The first graduating class of advanced clinical practitioners entered their permanent positions in October 2014 with all ACP fellows receiving job offers.

Additionally the preliminary data collected show a significant impact on both the clinical knowledge of the ACPs

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