

# Academic Rank Barriers for Physician Assistants and Nurse Practitioners

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## ABSTRACT

The aim of this study was to assess physician assistant (PA) and nurse practitioner (NP) perceived barriers to obtaining academic rank. A questionnaire was administered to PAs and NPs at the 3 main campuses of an academic medical enterprise. Of the 800 surveys sent out, 403 (50%) were returned. Overall, 70% of respondents indicated that they did not have academic rank. Most (74%) felt that achieving rank was important. The most common barrier to achieving rank was “lack of time”; 64% indicated 2 or more barriers. Strategies to improve recognition through academic advancement need to be developed and tested for their effect on PA and NP careers.

**Keywords:** academic rank, attitudes, barriers, nurse practitioner, physician assistant

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## INTRODUCTION

Physician assistants (PAs) and nurse practitioners (NPs) are vital members of the modern health care workforce. Both PAs and NPs work in diverse clinical settings across many specialties.<sup>1-4</sup> The American Association of Nurse Practitioners estimated that the United States would have > 171,000 NPs by 2013, as compared with 97,000 in 2003.<sup>4</sup> By late 2013, the National Commission on Certification of Physician Assistants reported that there were nearly 96,000 certified PAs in the US, a number that has more than doubled since 2003.<sup>2</sup> Recent health care reform and an expected future decrease in physician manpower will likely lead to an increased reliance on PAs and NPs to deliver medical services.<sup>5</sup> PAs and NPs are postulated to be part of the solution to meet these growing demands for health care services.<sup>1,5</sup> Numerous studies have determined that the care model of using PAs and NPs in physician practices is a successful, cost-effective means of increasing productivity while maintaining patient and provider satisfaction.<sup>6-8</sup>

Periodic surveys have been undertaken to determine the demographics and work settings in which

PAs and NPs are employed.<sup>1-4,6</sup> Not specifically addressed in these workforce surveys is the question of academic pursuits and academic rank for those who may be employed at teaching institutions. Although their contribution to the clinical mission is undisputed, many PAs and NPs may be engaged in education and research, and also, in many cases, become linchpins for the success of these mission-essential academic tasks. In traditional academic environments, similar scholarly activities would be expected to lead to academic appointments and a progression through the academic ranks among faculty members who are not PAs or NPs. Possession of recognition (and the presumed underlying expertise and experience underpinning those credentials) inherent in academic credentials facilitates the preparation of the next generation of PAs and NPs. However, studies on academic promotion have focused mostly on barriers to advancement among medical or doctoral level faculty, with particular emphasis on gender and minority disparities.<sup>9-13</sup>

As a first step toward understanding the current state of affairs for NP and PA academic rank, we used institutional databases to assess current NP and PA

academic rank at 3 of our institution's sites. The data showed that only 21% had an academic rank (ie, 79% had no rank); 79% of them were instructors, with few having advanced beyond that rank. A literature review also showed that studies on academic appointment and promotion of PAs and NPs are lacking. The institutional academic rank and promotion process was also reviewed and found to be a multistep process involving first the endorsement of the department chair, followed by review of the academic advancement and promotion's committee, which is then followed (if approved) by 2 additional committee approvals. Advancement to the next higher rank (eg, assistant to associate professor) requires a greater cumulative body of work, such as a minimum number of publications and the need for external letters of endorsement.

These observations led us to wonder about the perception of the institutional employees in the PA and NP workforce toward academic rank and what barriers they face to attaining academic rank or advancing through the ranks. Achieving rank is a means of recognition and an acknowledgment from peers of one's contribution to teaching, research, and clinical care. Strengthening processes to assist with the academic standing of PAs and NPs is one way to recognize PAs and NPs for their contributions to the academic mission. Before interventions can be developed to assist PAs and NPs who are interested in achieving academic rank, a better understanding of their perceptions and barriers is required. To address these issues, we developed a survey and administered it to PAs and NPs at 3 of our institution's sites.

## METHODS

### Description of the Medical Enterprise and the Current Process

The medical enterprise has 3 academic campuses (in the Midwest, Southwest, and Southeast) with separately accredited academic programs. PAs and NPs are employed at all 3 sites. The academic appointment and promotion process is overseen by a centralized committee with representatives from all 3 sites. An academic appointment is required of all basic science and clinical faculty, but it is optional for allied health employees. Criteria for academic rank and promotion are identical for faculty members and

allied health employees and are viewable on the committee website. For purposes of this study, *academic rank* is defined as the rank of instructor, assistant professor, associate professor, or professor. PAs and NPs who receive an academic rank are also given a faculty appointment in the institution's College of Medicine.

### Description of Survey

We developed a cross-sectional anonymous survey to assess current PA and NP perceptions of academic rank and barriers to academic promotion (Figure 1). The institutional review board designated the project as a quality improvement initiative that did not require formal review. The survey was developed by a team of PAs and NPs and a clinical faculty member in the College of Medicine. After repeated cycles of review and revision, the survey was distributed electronically to all employed PAs and NPs at the 3 sites (designated sites 1, 2, and 3). The survey included demographic questions such as position (PA or NP), gender, age group, year of graduation from their respective formal education programs, duration of employment at the organization, site of employment, employment status (full- or part-time), and current academic rank.

Two questions were included to gauge whether the PAs and NPs perceived academic rank as important and desirable: (1) "How important is it for you to hold academic rank?" Possible responses were "extremely important," "somewhat important," and "not a personal career goal." (2) "If you knew that you could advance your academic rank, would you try?" Possible answers were "yes" and "no."

The final question on the survey related to specific barriers: "What do you feel are the barriers to achieving academic rank?" Possible responses included "lack of mentorship," "I don't understand the process," "not emphasized by department/division leadership," "lack of time," "it's too difficult," and "other," with a free text comment section following each choice.

### Data Analysis

We analyzed participant responses with SurveyTracker version 4.0 (Training Technologies, Inc.). We examined the demographic data and distribution

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