Routes to Rural Readiness: Enhancing Clinical Experiences for Nurse Practitioner Practice in Rural Primary Care

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Presentation Objectives

• Examine characteristics of rural-oriented NP education programs
• Identify factors which promote student participation in rural clinical experiences
• Describe successful strategies to recruit for and retain NPs in rural practice
Project Objectives

• Identify approaches of rural-oriented NP education and training programs found to be successful in facilitating NPs’ transition from education to rural employment and effective practice

• Identify and describe rural training sites and NP residencies/fellowships across the U.S. designed to recruit and retain NPs in rural practice
Background

• Estimates suggest up to 75% of rural primary care services could be provided by NPs and physician assistants

• 2012 National Sample Survey of NPs data indicated rural compared with urban NPs more often used their NP skills to the full extent of their legal scope, were more satisfied with their work, and planned to stay in their jobs
Background

• Factors encouraging NP practice in primary care include having NP program faculty mentors, preceptors, and primary care clinical experiences for students

• Little is known about the aspects of rural clinical training that best prepare and encourage NPs to choose and succeed in rural practice
Project Approach

• Survey of directors of rural-oriented NP education programs to identify characteristics of programs most involved in rural areas

• Interviews with select rural-oriented NP education program directors

• Interviews with directors, preceptors, NPs, and NP residents/fellows and graduates from rural clinical training sites
  ➢ Topics include motivations for and benefits of participation in rural clinical training, factors that strengthen students’ and clinical sites’ training experiences, and recommendations for support of future training
Preliminary
SURVEY
RESULTS
# Survey Response Rates*

<table>
<thead>
<tr>
<th></th>
<th>Family</th>
<th>Adult-Gero</th>
<th>Pediatrics</th>
<th>Women’s Health</th>
<th>Overall</th>
</tr>
</thead>
<tbody>
<tr>
<td># Responses</td>
<td>93</td>
<td>29</td>
<td>19</td>
<td>13</td>
<td>154</td>
</tr>
<tr>
<td>Total # in Sample</td>
<td>165</td>
<td>62</td>
<td>43</td>
<td>21</td>
<td>291</td>
</tr>
<tr>
<td>Response Rate</td>
<td>56.4%</td>
<td>46.8%</td>
<td>44.2%</td>
<td>61.9%</td>
<td>52.9%</td>
</tr>
</tbody>
</table>

*Preliminary results as of 4/30/19
Survey Results* by US Census Region

**Midwest:** 58.5%  
(48/82 programs)

**Northeast:** 43.9%  
(18/41 programs)

**South:** 48.2%  
(55/114 programs)

**West:** 62.3%  
(33/53 programs)

*Preliminary results as of 4/30
Rating of Importance of Preparing NPs for Rural Practice to Program’s Mission/Goals*

*Preliminary results as of 4/30

**NP Program Type**
- Family (n=93)
- Adult-Gerontology (n=29)
- Pediatrics (n=19)
- Women’s Health (n=13)
- Total Respondents (n=154)
Primary Care NP Programs’ Active Recruitment of Rural and Rural-Serving Students*

*Preliminary results as of 4/30
# Receipt of Dedicated Funding For Rural-Oriented Clinical Education in the Past 3 Years*

<table>
<thead>
<tr>
<th>Received Dedicated Funding</th>
<th>n=86</th>
<th>n=63</th>
</tr>
</thead>
<tbody>
<tr>
<td>No</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

## Importance of Rural Practice to Program Mission/Goals

<table>
<thead>
<tr>
<th>Importance</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Somewhat Important</td>
<td>15.9%</td>
<td>23.3%</td>
</tr>
<tr>
<td>Very Important</td>
<td>84.1%</td>
<td>76.7%</td>
</tr>
</tbody>
</table>

## Program Actively Recruits from Rural Areas

<table>
<thead>
<tr>
<th>Actively Recruiting Rural Areas</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>No</td>
<td>27.0%</td>
<td>27.9%</td>
</tr>
<tr>
<td>Yes</td>
<td>73.0%</td>
<td>72.1%</td>
</tr>
</tbody>
</table>

## Program Actively Recruits Students Intending to Practice In/ Serve Rural

<table>
<thead>
<tr>
<th>Actively Recruiting Rural Students</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>No</td>
<td>20.6%</td>
<td>22.1%</td>
</tr>
<tr>
<td>Yes</td>
<td>79.4%</td>
<td>77.9%</td>
</tr>
</tbody>
</table>

*Preliminary results as of 4/30
## NP Programs Currently Offering Rural or Rural-serving Primary Care Clinical Sites*

<table>
<thead>
<tr>
<th>NP Program</th>
<th>Family</th>
<th>Adult-Gerontology</th>
<th>Pediatrics</th>
<th>Women’s Health</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td># respondents</td>
<td>n=91</td>
<td>n=28</td>
<td>n=18</td>
<td>n=13</td>
<td>n=150</td>
</tr>
<tr>
<td>No</td>
<td>9.9%</td>
<td>7.1%</td>
<td>5.6%</td>
<td>23.1%</td>
<td>10.0%</td>
</tr>
<tr>
<td>Yes</td>
<td>90.1%</td>
<td>92.9%</td>
<td>94.4%</td>
<td>76.9%</td>
<td>90.0%</td>
</tr>
</tbody>
</table>

*Preliminary results as of 4/30
# NP Program Ability to Offer Rural/Rural-Serving Primary Care Clinical Sites*

<table>
<thead>
<tr>
<th>NP Program</th>
<th>Family</th>
<th>Adult-Gerontology</th>
<th>Pediatrics</th>
<th>Women’s Health</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td># respondents</td>
<td>n=89</td>
<td>n=28</td>
<td>n=18</td>
<td>n=11</td>
<td>n=146</td>
</tr>
<tr>
<td>Consistently Able to Offer Rural Clinical Sites to Students</td>
<td>65.2%</td>
<td>53.6%</td>
<td>44.4%</td>
<td>18.2%</td>
<td>56.8%</td>
</tr>
<tr>
<td>Only Offer Rural Clinical Sites When Able</td>
<td>29.2%</td>
<td>39.3%</td>
<td>55.6%</td>
<td>72.7%</td>
<td>37.7%</td>
</tr>
<tr>
<td>N/A-Not Currently Offering Rural NP Training</td>
<td>5.6%</td>
<td>7.1%</td>
<td>0.0%</td>
<td>9.1%</td>
<td>5.5%</td>
</tr>
</tbody>
</table>

*Preliminary results as of 4/30
# NP Program Barriers to Rural Clinical Training*

<table>
<thead>
<tr>
<th>Barrier</th>
<th>Major Barrier</th>
<th>Minor Barrier</th>
<th>Not a Barrier</th>
<th>Don't Know</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Competition with other NP education programs for rural clinical training site</td>
<td>45.5%</td>
<td>32.0%</td>
<td>14.3%</td>
<td>4.3%</td>
<td>3.9%</td>
</tr>
<tr>
<td>Competition with other (non-NP) health occupations education programs for rural clinical training sites</td>
<td>42.0%</td>
<td>30.4%</td>
<td>17.4%</td>
<td>5.9%</td>
<td>4.3%</td>
</tr>
<tr>
<td>Student difficulty paying travel and living expenses for rural clinical rotations</td>
<td>32.7%</td>
<td>33.5%</td>
<td>24.4%</td>
<td>4.4%</td>
<td>5.1%</td>
</tr>
<tr>
<td>Few students willing to travel to rural sites</td>
<td>28.6%</td>
<td>44.2%</td>
<td>25.2%</td>
<td>1.6%</td>
<td>2.0%</td>
</tr>
<tr>
<td>Program does not have sufficient staff to identify/coordinate rural clinical sites</td>
<td>25.6%</td>
<td>29.2%</td>
<td>40.8%</td>
<td>6.7%</td>
<td>2.8%</td>
</tr>
<tr>
<td>Few rural providers willing to precept students</td>
<td>20.2%</td>
<td>41.1%</td>
<td>32.0%</td>
<td>1.2%</td>
<td>6.7%</td>
</tr>
<tr>
<td>Faculty not able to make site visits to rural areas</td>
<td>10.2%</td>
<td>25.4%</td>
<td>58.1%</td>
<td>1.2%</td>
<td>5.1%</td>
</tr>
</tbody>
</table>

*Preliminary results as of 4/30
PRELIMINARY
PROGRAM DIRECTOR
INTERVIEW
RESULTS
Characteristics of the Programs

- Most offer all distance or hybrid learning
- Range from 12 students per year to 200 per year
- Locations vary from full practice authority state to restricted practice state
- No specific rural course with rural content integrated throughout the curriculum
- Many have HRSA Advanced Nursing Education Workforce grants
Characteristics of Students

- Typically in-state students unless program is on a state border.
- Some states are mostly rural such as WY and NC so students are mostly from rural areas.
- Many students seek underserved urban practice rather than rural.
- Students who seek rural practice are usually from rural areas.
Characteristics of Successful Rural Sites

- Committed preceptor both to the practice and to teaching/education
- Student is from the rural area and is known to the community
- Patients are willing to see the students
Factors that Facilitate Rural Placements

- Having alumni in the clinical sites
- HRSA funding for students
- Students want to work in the area where the rural clinic is located
- Personal connections of the faculty
Barriers to Placing Students in Rural Sites

- Competition with other NP programs and other health professions programs
- Student resistance
- Cost of travel
- Shortage of primary care providers
- Clinic policies particularly about productivity
- Health systems limiting NP students
Next Steps

• Interviews with rural clinical sites
• Complete analysis of data
• Develop a set of lessons learned and best practices
• Disseminate findings to NP education programs, residencies/fellowships, rural practices, rural health organizations and policymakers
References


3 Sullivan-Marx EM. Lessons learned from advanced practice nursing payment. *Policy, Politics and Nursing Practice*, 2008; 9, 121-126.


7 Martsolf GR, PhuongGiang N, Freund D, Poghosyan L. What we know about postgraduate nurse practitioner residency and fellowship programs. *J Nurse Practitioners* 2017;13(7):482-487.


9 [https://www.va.gov/oaa/coepce(np residency.asp](https://www.va.gov/oaa/coepce(np residency.asp)
Questions?

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