

Leveraging the Voice of the New APC: Influencing Stakeholder Awareness & Support for New Fellowship

Surani Hayre-Kwan, DNP, MBA, FNP-BC, FACHE, FAANP & Julie Snoke



West County Health Centers

Caring for our Communities

BACKGROUND

Western Sonoma County has a shortage of primary care providers, with 4,074 patients per provider. Serving this area, West County Health Centers, Inc. (WCHC) is a private, non-profit FQHC, offering full scope primary medical, and dental care and mental health services. Current and past Advanced Practice Clinicians (APCs) shared feedback that additional support is needed during initial integration to the WCHC care team.

PURPOSE

To encourage new APCs to choose primary care in an FQHC, support them during their first year of practice, and position them for long-term success, an interprofessional collaborative fellowship program is needed.

To understand the unique needs of the WCHC APCs, more information was needed to create the recommendation to establish a formal fellowship program that is both affordable and sustainable.

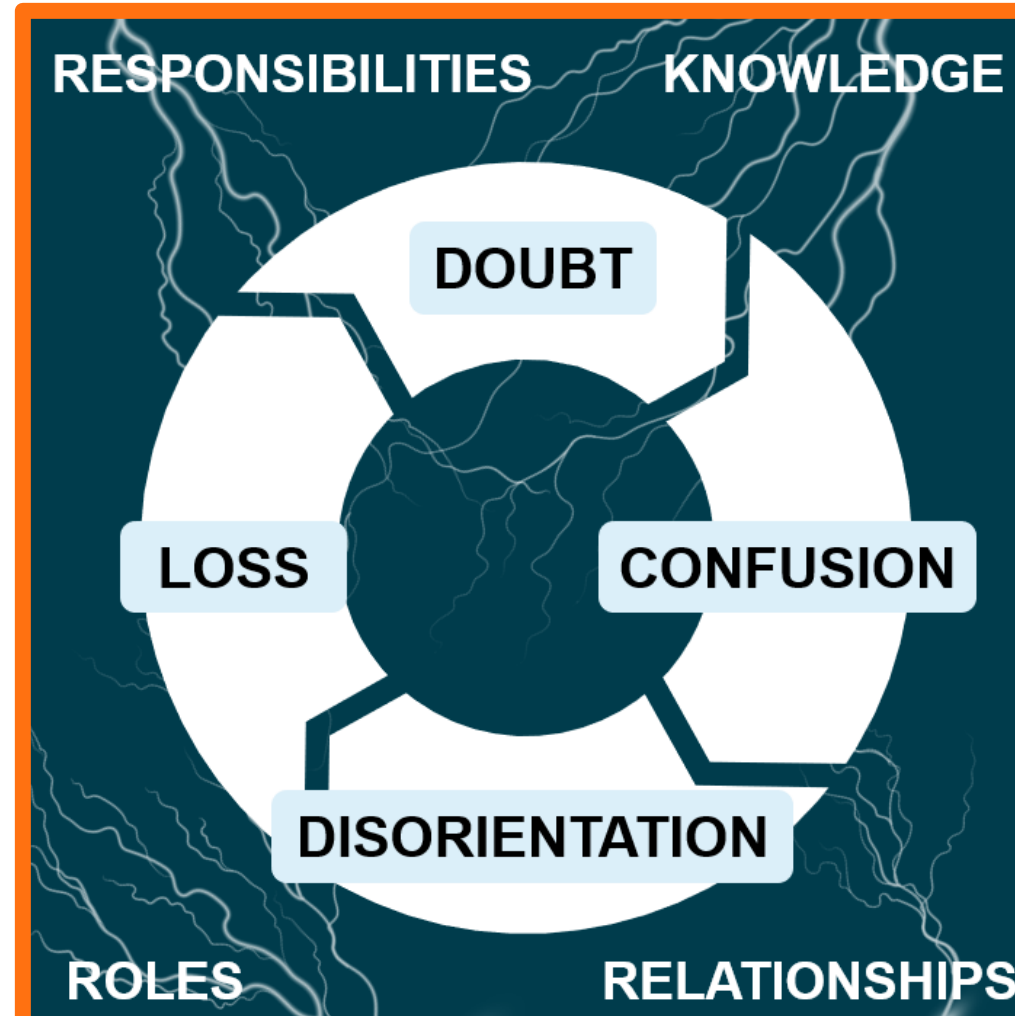
METHODS

A SWOT Analysis was conducted to identify strengths, opportunities, weaknesses, and threats by conducting stakeholder interviews and assessing the results. Interviewees included three Chief Medical Officers, Chief Human Resources Officer, Human Resources staff members, currently employed APCs and past-employed APCs. The findings were then utilized to create a presentation to the clinical leadership team.

PRINCIPAL OBSERVATIONS & FINDINGS

Existing processes are focused on non-clinical training and are effective for basic, logistical onboarding. Onboarding includes introductions to leadership and staff, training on the electronic health record, and 1–2-week shadowing of a physician or APC.

New hire APCs experienced transition shock in alignment with published research, and expressed feeling inadequate, confused, and overwhelmed during their first year of practice.



"I had a half hour at the end of each day to debrief with a doctor, but I was trying to make a plan in real time so asking at the end of the day wasn't helpful."

"I think we made it work, but I don't know that I got the support I needed as a new clinician."

"I started seeing patients after a week or two. I don't recall who I shadowed at first; I was on my own pretty fast."

"I felt really alone in my experience, and I didn't understand why I was having such a hard time."

"I had a lot of insecurities and thinking about myself as flawed because I was still learning. I had this huge imposter syndrome."

IMPACT

Based on this SWOT Analysis, recommendations were created to establish a new Fellowship Program. Key elements include:

- Didactic education
- Mentorship
- Precepted clinic time
- Skills training



Newly hired APCs expressed a desire for additional training and preparation for the local rural patient population. Requested topics include navigating resources for patients with chronic homelessness and addiction, opioid prescribing, addiction management, HIV and Hepatitis C, STI testing, gender-affirming care, and procedural training including dermatology, gynecology, and joint injections.

Analysis was presented to the clinical leadership team, who expressed concern for the APCs' emotional wellbeing and unanimously supported moving to next steps.

ADDITIONAL INFORMATION

Surani Hayre-Kwan,
DNP, MBA, FNP-BC, FACHE, FAANP
SKwan@WCHHealth.org



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