



# FNP Residency At the Institute for Family Health Five Years Later; Lessons Learned

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## Model: An Interdisciplinary Post Graduate FNP Training Program in collaboration with a Family Medicine Residency

### Goals:

- Provide Comprehensive, practical post-graduate training to new Nurse Practitioners with a commitment to serving the underserved.
- Increase access to compassionate primary care in the Bronx by about 1400 visits annually per NP Resident
- Advance Community Health Center Based professional Training Programs to Promote Interdisciplinary Relationships

### Program Components:

#### Continuity Clinic:

Precepted (3 sessions/ week)

Resident Develop continuity patient panel while having a provider (NP or MD/ PA) exclusively assigned to precept them on every case.

Independent (3 sessions/ week)

Experienced providers and preceptors are available for consultations on individual patients.

Residents continue to precept Prenatal patients and patients under six months of age during mentored sessions.

#### Specialty Rotations (1-2 sessions/ week)

Rotations are provided by Institute Specialty clinics and by our partner hospital, Mount Sinai Health System.

#### Didactics (1 session/week)

Didactics sessions in conjunction with our Family Medicine Residency

Include an interdisciplinary curriculum taught by MDs and Psychosocial staff

#### Community Based Organization (CBO) (40 hours)

Residents are placed within a partner CBO  
Residents provide health education based on Community Identified topics

Placements focus on Food Insecurity, Homelessness, LGBTQ+ Wellness and Community Health.

#### Primary Care Panel

Residents have Continuity Clinic session

Ability to incorporate procedures into practice with an on site preceptor

Prenatal Care

### Effects of the COVID19 Pandemic

- No longer able to offer group visits such as Centering Pregnancy
- Reduction in off-site specialty visits
- Reduction in behavior health rotations due to mental health becoming an offsite practice
- in-coming residents requiring extra supervision due to decreased clinical experiences in Np programs
- Increased onsite specialty rotations such as Telehealth

### Setting:

Continuity clinic at the Walton Family Health Center and Stevenson Family Health Center in the Bronx

Specialty Rotations:

- Addiction Medicine
- Care for the Unhoused
- Dermatology
- Diabetes Management with a CDE and Health Coach
- HIV and Hepatitis Care
- Pediatrics (School Based Health Care)
- Practice Management and Leadership
- Procedure Clinic (LARC, Biopsy, Joint Injections)
- Telehealth
- Prenatal/perinatal care

### Curriculum:

Guided readings during Case Conference and Specialty Rotations, which take into consideration the needs of learner and preceptor.



Program Director Margaret Walsh, FNP



Associate Program Director Kat Tanner, FNP

### Faculty:

Margaret Walsh FNP (Program Director) and Kathryn Tanner, FNP (Associate Program Director) are seasoned providers

Incorporate graduate residents into Faculty after 1 year of Independent Practice post Fellowship

Interdisciplinary Preceptors (FNP, PNP, MD,PA)

WEEK ONE					
	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
AM	Mentored	Specialty	Precepted	Mentored	
PM	Precepted	Specialty	Didactics	Admin/ Group	Mentored
EVEN				Precepted	

A typical Weekly Schedule

### Business Plan

#### Budget

- "Break Even"
- Income based on 6 billable sessions per Resident per week
- Graduated Entry to practice increasing patient numbers quarterly (3-6-8-9 per session)
- Costs included Salary, Benefit Package, and Preceptor time

#### Operational Considerations

- Capacity (Space, Tech, Time)
- Scheduling (number of learners vs number of attendings)
- Development of Specialty Rotation Network (including credentialing and Affiliation Agreements)

#### Recruitment:

- Emphasis on local graduates, targets recruitment to local NP schools
- NP Students in Clinical Rotation at the Institute/ current institute employees
- Prioritize applicants that are committed to the mission of our organization
- Open to NPs from throughout the United States

### Lessons Learned/ Moving Forward

#### Budget

- Our program depends on HRSA grant funding
- Loss of experienced Nurse Practitioner preceptors due to increased salary competition
- Increased COVID related contract work available in NYC to advance practice providers
- Increased compensation for RN vs NP salary vs NP resident salary

#### Precepting:

- Staggered precepting ratios  
*More precepting in Q1-Q2, More Independent in Q3-Q4*

#### Challenges:

- Limitations of current DNP students as participants in residency due to eligibility under HRSA grant funding
- Funding (application for HRSA grant pending)
- Faculty Development funding/time allocation
- Increased supervision need of residents due to lack of comprehensive clinical training in Nurse Practitioner programs
- Administration challenges within clinical practices in respect to staff ratios, training of staff, resident schedules, as HRSA funding does not cover these items

Period	# pt encounters	# of pts	Average # of pt per session	# of repeat pts	# of assigned PCP	# of pt <18	# of pt age 18-60	# of pt age >60	# pt w Diabetes DX	# pt w hypertension DX	# visits Preventative (Well Child, General Physical)	# pt w Pregnancy DX
Q1	206	180	3.2	31	57	5	34	135	6	13	24	7
Q2	329	256	4.6	52	133	13	47	187	9	17	44	15

Example of evaluation data collected from EHR

### Relationship with Family Medicine Residency

- Interdisciplinary training
- Network of specialty sites/ residency established rotations
- Didactic Sessions and Grand Rounds
- Graduates of Residency program become NP Resident preceptors



Sashena Green, FNP Class of 2023



Christopher Vargas, FNP Class of 2023

### Benefits

#### For Program:

- Access to talented, dedicated providers
- Additional providers to cover weekend and evening sessions
- Aligns with our mission of promoting access to Family Medicine in underserved communities
- Interdisciplinary training to encourage growth of NPs in Primary Care Practice and follows Patient Centered Medical Home Model (PCMH)

#### For Residents:

- Safe Entry into practice
- Builds confidence under the guidance of experienced providers
- Interdisciplinary (Precepted by NPs, MDs, and PAs throughout the Residency)
- Multiple specialty exposures to help inspire areas of future practice
- Exposure to different roles NPs can take on (Program and Medical Director, Preceptor)

#### For Discipline of Family Practice:

- Increase in competent, well rounded family medicine providers in resource poor/ Provider shortage areas
- Increase collaboration/partnership between NPs and MDs
- Increase awareness of the NP role in Healthcare to other disciplines