



## **DEVELOPMENT AND IMPLEMENTATION OF A COLLABORATIVE NURSE PRACTITIONER CLINICAL TRAINING PROGRAM**

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Doctor of Nursing Practice (DNP)-prepared Advanced Practice Registered Nurses (APRNs) are expected to practice within established standards. Nurse practitioners (NP) are educationally prepared to assume responsibility and accountability for health promotion and maintenance as well as the assessment, diagnosis, and management of patients across health care settings. A requirement of completing an APRN program includes the completion of over 500 one-on-one clinical precepted hours based on specialty.

The primary challenge facing NP education is the limited number of available clinical sites and competent preceptors to complete the clinical hours. To address this issue, nursing education programs must increase both the number and quality of available preceptors and sites. While there is a great need for APRN graduates, preceptors and role models to train and mentor these APRN graduates are in short supply. The goal of this project is to develop a collaborative education and practice partnership to increase clinical practice sites and readiness of NP students to provide care across the continuum in the state of Maryland.

The University of Maryland School of Nursing proposed the establishment of a preferred clinical training site for advanced practice registered nurses in Maryland to meet the University's need for high quality clinical experiences and the hospital's desire for a pipeline of well-prepared APRN staff. This training program, partnered with the of Maryland Upper Chesapeake Health System, is dedicated to training APRNs in a variety of specialty practice settings within the hospital system.

The proposed training program provides an infrastructure and capacity to clinically train APRN students at the university health system. The partnership imbeds faculty in the clinical environment and develops and implements clinical training rotations for APRN students built upon their combined expertise. The rotations provide clinical practice sites for at least 10 APRN students annually, creates a pipeline of APRNs, and creates opportunities for relevant clinical practice for faculty.

Faculty additionally collaborates with university health system educators to create a model to transition from APRN student to full practice in the system by bridging their proposed fellowship program for APRNs. This partnership could serve as a model for future education and practice partnerships.