Executive Summary

Nurse Practitioner Survey

The Affordable Care Act signed into effect in 2010 to implement affordable, quality health care for all Americans is recognized as the largest healthcare tax cut for middle class Americans in history (U.S. Department of Health & Human Services [USDHHS] 2013). The expansion of health care for uninsured and underinsured Americans is expected to include over 33 million lives (USDHHS, 2013). With the increased need for primary care to these newly insured Americans that includes the promotion of preventive services at no cost to the patient, a primary care provider shortage is anticipated (USDHHS, 2013).

Important in addressing the primary care shortage for the uninsured vulnerable population that will receive insurance is expanding the usage of Nurse Practitioners for primary care (The Physician Foundation, 2008). Nurse Practitioners historically have served as mentors, educators, researchers and administrators in addition to Primary Care Providers highlighting their adaptation to a changing health care environment (American Association of Nurse Practitioners [AANP], 2010). The ability to lower health care costs while delivering high quality comprehensive care has been well documented in patient satisfaction surveys (AANP, 2010). Nurse Practitioners are the largest group of advanced practice nurses providing coordinated primary care through comprehensive medical history and physical exams, diagnosing and treating acute and chronic illnesses, managing medications and therapies, ordering and interpreting tests results and initiating education and counseling for patients (The Kaiser Family Foundation, 2011). Unfortunately the ability for Nurse Practitioners varies widely by state causing inconsistencies in the public’s perception of the role of the advanced practice nurse.
With the looming increased demand for primary care services, it is logical to assume that schools of nursing would seek to fill this void by increasing the number of applicants they admit. While the annual number of graduates from U.S. nurse practitioner programs has increased substantially over the past decade, from approximately 6,400 per year in 2004 to 11,000 in 2011 (AANP 2012), many programs have reached their capacity for expansion. This is evidenced by the fact that over 13,000 qualified applications were turned away from graduate programs in 2011 (American Association of Colleges of Nursing, [AACN], 2012). In part, this limitation in capacity is a result of the well-documented nursing faculty shortage. However, a greater threat is another less frequently cited, but equally troubling, stricture in the APRN pipeline, namely, the current method of APRN clinical education (Clabo, Gidden, Jeffries, McQuade-Jones, Morton & Ryan, 2011).

In an effort to further identify the difficulties in Nurse Practitioner education focusing on clinical precepting sites the author devised a survey tool that was distributed to Advanced Practice Registered Nurses. Specific for the tool was the desire to understand the main barriers that individual practicing Nurse Practitioners experience when precepting nursing students. The tool was devised of ten simple questions to identify the respondents of the tool and their expertise, experience and practice location. Clinical expertise was predominantly Family Practice with an average of over five years in practice. Several areas of practice emerged including private practice, hospital based and community health centers with equal representation.

The survey tool was distributed through cooperation of the Coalition for Advanced Practice Nurses of Indiana and the Indiana State Nurse Association with 77 Nurse Practitioners responding. Following are the results concerning barriers to precepting Nurse Practitioner students and potential options to help increase the number of sites for clinical education:
What do you see as barriers?

- a) Cost-5.2%
- b) Time-58.4%
- c) Space-28.6%
- d) No benefit-9.1%
- e) Workflow disruption-33.8%
- f) No guideline-18.2%

What would increase your practice's capacity for accepting APN students?

- a) Grants/Monetary Incentives-49.4%
- b) Increased University Support-21%
- c) Provider/Staff Trainings-28.6%
- d) Increased Recognition-26%
- e) Other-6%

The results from this small yet significant survey reflect the difficulties with having sufficient time to adequately precept Nurse Practitioner students causing workflow disruptions. As Primary Care providers are currently in shortage and the need is increasing the anticipated demand for preceptors for Nurse Practitioners is concerning. Perhaps the current model of one to one precepting is at a critical juncture suggesting that this clinical model may not be the most efficient avenue for preparing the increasing number of Nurse Practitioner providers for the future. Additionally, the results may reflect a potential for monetary incentives to allow Nurse Practitioners more time for students by compensating for any loss of reimbursement on precepting days.


