

Effects of Completing a Postgraduate Residency or Fellowship Program on Primary Care Nurse Practitioners' Transition to Practice

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OBJECTIVE

This study sought to examine the effect of completing a postgraduate residency or fellowship program on role perception, practice autonomy, team collaboration, job satisfaction, and intent to leave among primary care nurse practitioners (PCNPs).

DATA

This study analyzed the U.S. Health Resources and Services Administration's 2018 National Sample Survey of Registered Nurses (NSSRN). This study identified 8,400 PCNPs (39% of 21,784 NPs) for this study. To better represent the workforce at the national level, this study adjusted the data with sampling weights provided by the 2018 NSSRN. The sample represented 75,963 PCNPs nationwide.

METHODS

This study examined bivariate relationships using t-tests for continuous variables and chi-square tests for categorical variables. We conducted multivariate logistic regression analyses to determine whether completing a postgraduate training program was associated with increased role perception, greater practice autonomy, improved team collaboration, increased job satisfaction, or decreased intent to leave in their work, controlling for NP personal and practice characteristics. We also examined differences in practice and patient panel characteristics.

RESULTS

About 10% of PCNPs completed some form of postgraduate training beyond initial education. PCNPs that completed a residency or fellowship program were more likely to have a minority background (e.g., non-White and male) and also see more underserved populations (e.g., minority background, with limited English proficiency) than those without residency training. We found that PCNPs with residency training were more likely to report enhanced confidence in independent roles, greater practice autonomy, improved team collaboration, increased job satisfaction, and decreased intent to leave than those without residency training.

CONCLUSIONS

The findings suggest that completing residency training was associated with important health equity factors, including increased diversity in the NP workforce itself, and service to minority and underserved communities. Findings also reinforce prior research on enhanced confidence in independent roles, greater practice autonomy, improved team collaboration, increased job satisfaction, and decreased intent to leave in their work. This supports further expansion of such programs, which would have positive effects for NPs, health care organizations, and patients, necessitating a long-overdue conversation about real public funding for primary care graduate nursing education.

Key Words: primary care nurse practitioners, postgraduate residency or fellowship program, workforce diversity, health equity