Nurse Practitioner Fellowship

Developing a program to address gaps in practice

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The number of new cancer cases in the United States is expected to increase from 14 million in 2012 to 22 million in the next two decades (National Cancer Institute, 2017). However, shortages of healthcare professionals, numerical growth in the population of older adults, additional treatment options, increases in cancer survivorship, and expanded access to health care through the Patient Protection and Affordable Care Act have resulted in the proliferation of oncology nurse practitioner (NP) roles and responsibilities as oncologists struggle to handle the increasing demand for oncology services (Erickson, Salsberg, Forte, Bruinooge, & Goldstein, 2007). Oncology NPs are now commonly tasked with handling clinic visits, inpatient care (including admissions, discharges, and coordination of care), symptom management, chemotherapy and treatment orders, prescription refills, prior authorizations, new patient consultations, transition to hospice care, and miscellaneous paperwork, among other roles and responsibilities.

Many NPs enter oncology with limited training in this specialty. Results of a 2008 Oncology Nursing Certification Corporation survey suggest that the majority of oncology NPs complete a graduate program focused on primary care and feel prepared to treat patients with general medical conditions. However, in a 2009 Oncology Nursing Society survey, participants described oncology-specific procedures as areas they felt not at all prepared for (Nevidjon et al., 2010). These mounting challenges led to the development of an oncology NP fellowship program at Sylvester Comprehensive Cancer Center (SCCC) in 2016. This article reviews the program’s development within an academic medical center, along with barriers encountered and anticipated benefits.

The Value of Nurse Practitioner Fellowships

Advanced practice nurses deliver high-quality, cost-effective care while improving healthcare access (Elliott & Walden, 2015). The role has evolved since its development in the 1960s to meet the ongoing demands of the healthcare environment (American Academy of Nurse Practitioners, n.d.), resulting in an increased presence of NPs in specialty-based practices. However, graduate nursing education does not offer specialized training in any particular area (Harris, 2014). The lack of specialized training results in NPs learning via on-the-job training.

The advent of specialty-focused NPs has resulted in the development of formal fellowship programs aimed at bridging the gap between graduate education and specialized practice (Harris, 2014). The Institute of Medicine (2010) reported that the development of formal orientation or residency programs offers NPs the opportunity to transition successfully into new care settings.