

Nurse Becoming Ep. 077: My Thoughts on Direct Entry NP Progr...

Tue, Oct 26, 2021 11:05AM 19:02

SUMMARY KEYWORDS

np, programs, rn, path, program, entry, direct, education, experience, high quality, nps, physicians, bachelor, work, nurse practitioners, traditional, provider, nursing, clinical, bedside

SPEAKERS

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Hello, hello! Welcome back to the Nurse Becoming Podcast. It's your host, Amanda, so happy to have you with me today, as we are going to talk about Direct Entry Nurse Practitioner Programs! This may be something that you're considering. Or maybe not, maybe you're curious to hear what I have to say about these programs, I do get asked my opinion about direct entry programs fairly often. And I have some pretty strong opinions about them. And I don't know maybe my opinions may surprise you. It depends how much you know about my story. But I thought I have to tell you a funny story. So I was recently interviewed for someone else's podcast, which I do fairly often. It's always fun to chat about different nurse and NP related topics on other another platforms. And I got this question. I got this question from one of the interviewers who said, "Now Amanda, I've heard of these programs where people can go right into a combined nurse and NP program after having a bachelor's degree in another field and have have no medical experience at all. And they can go straight through and become an NP in three or four years time. What do you think about these things?" And I laughed to myself and also on the episode because I got the sense that the interviewer was hoping to hear that I wasn't a fan of these programs, but maybe didn't know that I am a product of one of these programs. Okay, so you may have heard my story before or maybe not. So I am going to recap it for you. I went to Yale University, I went to a direct entry program, it was a direct entry master's program designed for those who had a non nursing bachelor's degree. And the program itself was about 18 months of an intensive RN program, clinicals, didactics, et cetera. And it rolled right into a two year full time immersive in person, nurse practitioner program. And this was a very robust program with that really attracted I couldn't believe the caliber of students that I was in class with, like some of the folks relocated from the west coast to come to this program. Some of them had expansive previous careers as attorneys and global health specialists, and counselors, and just like any other career that you could think of, and they were just amazing people, right, this was a very competitive program. I was surprised that I got into this program. But this was not an easy program by any means. It had very high admission standards, very high graduation standards, and had a nearly 100% success rate of board examination and job finding for graduates. It continues to be a very highly respected program. And I tell you this, to start, because I think that there's this kind of assumption that anything

that's fast, or anything that is non traditional, is automatically of a different caliber, or automatically attracts people who are looking for an easy button. And I tell you this to start because that's actually not the case. So here's how the majority of people become nurse practitioners, that when I say a traditional path, I mean that someone has become an RN through an associate's or bachelor's degree program, eventually getting their bachelor's of nursing, working at the bedside for a certain number of years, and then deciding to go back to NP school, usually part time as they continue to work as a nurse. And and that's the traditional path. That's how most MPs do it. Whereas the non traditional path is getting a non nursing bachelor's degree, completing prereq prerequisites if necessary, and entering a direct entry masters or direct entry. doctoral nurse practitioner program the doctoral programs weren't around back when I started. But so a direct entry program meaning that you are admitted directly to this combined program that will not only provide your RN training and your your BSN or your nursing certificate, but we'll also have you continue into the NP, masters or doctoral program. And here are my observations about the direct entry programs. And basically, what I want you to do, or what I'm inviting you to do, is to have an open mind as I go through this, because I'm trying to challenge any preconceived notions that you may have about these programs. Now, if you are considering one of these programs, you likely already know that they are high quality programs and completely valid paths to becoming an NP. And if you're listening to this, and you're considering NP school, but you've gone a traditional path so far, you may have some preconceived notions, or if you work with nurse practitioners, and you're kind of curious, or you have some judgments of traditional path versus non traditional path. My goal here is to challenge your thinking and to provide a different perspective that maybe no one has talked about before. Because if you haven't noticed, I think that our our community of nurses, our professions, we tend to be a little bit more skeptical, we tend to I don't know, kind of assume that if something is done in a non traditional way that it's somehow less than, and that's not always the case. So that's why I'm here to challenge your thoughts on that. So here are my observations of the direct entry nurse practitioner programs. For the most part, these are mostly in person, full time immersive programs that are very high caliber, there are many, I'm pretty sure most of the Ivy League schools have one. Three of the programs that I applied to were were Ivy League programs. So they're either Ivy League or Ivy League caliber programs. And I and I don't want to sound elitist, because I'm certainly that was not a factor in my decision making. I wanted a high quality, immersive in person, direct entry and P program. And it just so happened that all the programs within a five hour radius of where I was living at the time, were all Ivy League or Ivy League caliber programs that were highly competitive. And I think that, that says a lot that's, that says good things about it about the quality of NP education for direct entry programs. The other thing too, is think about the timeline. of someone who's going through a program like this, I think that there is a level of maturity that comes with people who are deciding to go into a direct entry program, because for the most part, these are folks who at least have a bachelor's degree, so they're likely going to be at least 22 years old, or so when they start and, and there's a level of maturity there of of going through a bachelor's program, graduating and then deciding to change your path and, and go into something different, it's it's definitely not an easy choice. It's not a choice that is made of, you know, this is the next thing that I should do, because it's the next step up. Which which could be the deciding factor for some folks who have gone a more traditional path. So I think there's a level of maturity that comes with making this decision, you know, in your, at the earliest, your mid 20s. The other thing that I want to present is that PhDs are Physician Associate colleagues, they have a very similar path. And the majority of PhDs receive a bachelor's degree. Not necessarily in a medical field, but usually something medical adjacent, whether it's pre med or biology, but it's not, you know, not a nursing degree. It's not a clinical degree by any means. And then they enter a master's PA program, which is usually impressive in person, usually immersive, usually full time, and they usually graduate and become TAs in

their mid to late 20s. This is a very similar path compared to a direct entry NP program graduate and PDAs receive an incredibly high quality education. You could argue that the quality of PA education in many instances is better than what NP education is. Anecdotally, the PDAs that I've worked with have always been of tremendous high quality as providers, especially when they graduate, they are ready to hit the ground running. They've had extraordinary academic and clinical experiences before graduation, they've had a systematized and standardized rotation process. They they receive excellent education, and they are highly highly respected and high quality providers. And there doesn't seem to be the same stigma for them. Because that's actually the only way you can become a PA is through that, that process. So I wonder if I wonder why we have that stigma towards direct entry NPS as being lower quality or, or lower caliber compared to traditional path and PS. And, and I guess you could also argue that physicians do a similar thing to a pre med degree is not a clinical degree. You know, they get a bachelor's degree, and then they go on to medical school, and granted they medical school education and, and, and residency, etc, is worlds different from NP education. And that's not really the focus of this topic today. But what I want to point out is that physicians become physicians, you know, in their late 20s, mid to late 20s, as well and have gone through this path of sequential education that prepares them for their terminal licensure, right, there is no requirement that they have to work in a bedside capacity for several years before even returning to medical school. There's really no signs that that's a better way to become a physician. So, all this to say, you know, the, the path that a direct entry NP takes is not really that weird when you compare it to how some of our other health care providers are, are trained. You know, the other argument that I hear a lot is that nurses should have several years of experience before becoming nurse practitioners in order to be high quality and p. And while I think that our inexperience can absolutely make you a better NP, I don't think that it's required, I don't think that you have to have tons and tons of RN experience to become an NP for kind of the same reasons that I said before, you know, proof that you can be a high quality provider, without years and years of bedside role experience. I think physician associates in and physicians are great examples of that, as well as the many masters entry or direct entry program, NP graduates that are out there, doing high caliber, great work, just maybe being stigmatized. Now, I do want to kind of also present this anecdote that many years of RN experience could potentially hurt someone's transition from Rn to NP. Now, this is anecdotal. This is what I have observed. In my 10 years of practice. When I've seen NPS who have had more than 10 years of experience, before becoming NPS, they've actually had more of a struggle switching to the NP role than those who have had less than 10 years. And, you know, there could be different reasons for that it could be the transition from going from the order give the order taker to the order giver. But, you know, the nursing the NP process, the medical provider, diagnostic and plan process is different than the nursing process. And it's a different mindset. And it's a different set of priorities when you're in that provider role than when you are in a nursing role. And I think that the longer that you do something, and the longer that you kind of solidify that habit, it can be harder to break and change into a new habit and I'm talking about going from Rn NP. So I think that that's some sort of that's my argument against why there is not a linear correlation between your years of your years of Rn experience and your quality as an NP, I'm just not convinced that that can be directly correlated. Now, I do want to say NP education has a problem. Direct Entry programs are not typically the ones with issues. Okay. There are a lot of online NP programs that usually are for people who are already nurses. And those are where we as a profession are seeing issues with the quality of education. Now, I'm not saying all online programs are bad. Please don't miss hear me. There are some very high quality online programs. But there are some online programs that are for profit institutions that have a 100% acceptance rate that do not properly qualify people who are wanting to become NPS and that they also have not rigorous standards for their education program. And though that's those are the types of programs that I have a problem with, and that I see being

detrimental to our profession. So but that those programs are not accepting direct entry NPs. The majority, if not all of direct entry, NP programs are immersive and in person, or at least in a hybrid format, where you're having direct oversight of your clinical skills, and all the things that you really need to ensure that it's a high quality educational program. So I hope that this has given you some insight, maybe a different perspective. Certainly, you know, I'm not here to be starting any arguments, but rather to present some different opinions. You know, I've seen and heard enough times throughout my career, that direct entry NP programs, are you No terrible and trash? And how could someone possibly learn this so quickly. And you know, you need to have 510 15 years of RN experience first to be a high quality provider. And I just I just don't agree that those are fair blanket statements. So I wanted to present a bit of my experience, some anecdotal opinions that I've had throughout my career and throughout working with, you know, hundreds of nurse practitioners at this point to show you that, please have an open mind when it comes to your direct entry, NP, colleagues, if you're a traditional path NP, or if you're a bedside RN, working with NPS just have an open mind as to how that person was educated and whether or not it really matters, the path that they took, or whether it's more important, the quality of provider that they are in that moment, because ultimately, I think that that's really the most important thing, right? Can they take excellent care of their patients here and now? And it's not always related to the path that they took. So thank you for being here. Thank you for listening. If you want to jump in on this discussion, I welcome your thoughts. You can shout me out on Instagram @TheResumeRx or send me a direct message or however you'd like to connect with me. I would love to hear from you. So I'll catch you next week!