Benefits of Competency-Based Clinical Onboarding for PAs and NPs

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Background

Clinical onboarding programs have been shown to be effective for PAs and APPRNs in both inpatient and outpatient settings to assess and strengthen professional competencies, serve as a source of professional development, and improve employee retention.1,2 After the completion of professional training, many PAs elect to work for non-academic healthcare settings. According to the American Academy of PAs (AAPA) 2021 Salary Survey only 39.6% of respondents worked for an academic medical center.4 For PAs that work for healthcare organizations outside of academia or without access to ongoing training and professional development programs, there exists barriers to developing resources for clinical onboarding. The AAPA Center for Healthcare Leadership and Management National Summary Report on PA and NP Workplace Experiences found that 56% of respondents chose a job based on being able to work at the top of their license but 65% did not receive any formal orientation.5

Competency is the ability to display the knowledge, skills, and behavior necessary to be successful and efficient in a job role. When a new PA/APRN starts clinical practice there is a level of expertise that is expected, given their professional training. However, reaching and maintaining competency as a PA or APRN is not a singular event such as graduation or passing a certification examination. Competency changes based on clinical setting, specialty, and time removed from training.6 When developing an impactful clinical onboarding program, a focus on clinical competency is beneficial and can contribute to identification and subsequent improvement of a PA’s or APRN’s skills. Further, identifying knowledge gaps and maximizing competency can lead to top skill set utilization of a PA or APRN on their clinical teams. Therefore, our healthcare institution set out to examine if a clinical onboarding program measured on a competency-based scale could improve the utilization of our PA's and NPs' skill sets on their clinical teams.

Methods

Specifically specialty-specific competency-based onboarding assessment tools (CBOAATs) and a competency-based rating scale were developed for newly hired PAs and NPs and then provided to their onboarding team.

Surveys were conducted to compare pre- and post-onboarding program data on the how PA’s and APPRNs’ skills sets were being utilized on their healthcare teams. A control group of clinics that had no exposure to the program was also surveyed. Additionally, quality improvement program data was collected to assess the value-add of the program to the newly hired apps and the onboarding team.

At the start of the PA/APRN employment they were sent a prior knowledge inventory (PKI) to gauge their incoming competency level. The results of the PKI will be shared with the practice administrators, collaborating physicians, and other PAs and APPRNs on the healthcare team. A total of two progress evaluations were completed by the PA/APRN and the collaborating physician to assess for growth. The PKI and progress evaluations were scored on a 4-point Likert scale with number scoring corresponding to entrustable professional activity (EPA) progression. An EPA scale was chosen for the onboarding program to assess the level of autonomy associated with each competency for newly hired PAs/APPRNs.

Following completion of the onboarding program, a second PA/APRN utilization survey was sent to the practice administrators and physicians to determine if those who underwent the onboarding program had different utilization of PA/APRN skill sets as compared to clinics that did not.

Results

In one year, 63 PAs/APRNs, of a different variety of incoming experience levels, participated in the program across 50 different clinical sites in 16 different specialties.

Post-program survey and quality improvement data demonstrated that CBOAATs can help identify gaps, train to these gaps and increase utilization of a PA’s/NP’s skills on the health care team. See Figure 1 for pre-and post-program survey data and Table 1 for program feedback from the participants. Regardless of incoming experience level all PA/APRN’s rated at least one area at a level 3 or lower on their PKI. Identifying specific areas for the onboarding team to focus on during training. Additionally, specialty-specific CBOAATs and a competency-based rating scale were developed and refined through quality improvement feedback. 89% of new hire and 100% of the onboarding team feedback survey found this rating scale appropriate to capture the knowledge and skill level of an onboarding PA/APRN. See Table 2 for the refined assessment scale.

References


Toolbox for Creating CBOAATs

- Research existing core competencies examples (NCCPA/AANC)
- Compile list of needed competencies and have PAs/APRNs in the specialty review
- Use a standardized competency-based scale that promotes top of scope practice
- Create electronic form to simplify process for providers and receive quicker feedback
- Provide results to the entire onboarding team
- Gather feedback, revise, and refine