So You Want to Be a Nurse Practitioner? Choose the Right Program
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Finding a Nurse Practitioner Program

Nurse practitioner (NP) programs in the United States are increasing in number and in the quantity of students enrolled. With the demand for more primary care providers in the United States, recognition of the effectiveness of NPs as providers, and the appeal of the NP role as a career choice, there should be no shortage of applicants to NP programs. Registered nurses are the predominant applicants to NP programs; however, second-degree applicants are increasingly attracted to the NP role associated with either a master's or doctor of nursing practice (DNP) degree.

Choosing an NP program can be daunting. Program features, such as degrees offered, curricula, and preceptor requirements, can vary considerably by school. The applicant should take the time and ask the right questions of NP programs and state boards of nursing before selecting and applying to a program. This article will identify the essential NP program offerings that should be explored and evaluated before completing the application.

Degrees Offered for NPs

As of September 2012, the applicant to an NP program has a choice of a master's degree or the DNP degree. The American Association of Colleges of Nursing (AACN) provides a list of Commission on Collegiate Nursing Education (CCNE)-accredited graduate programs by location and degrees offered but not by clinical program. Using this list, the applicant can visit the school Web sites to find out what specific programs are offered.

The number of DNP programs is increasing exponentially. Although the AACN declared that all newly graduating NPs should have DNP degrees by 2015, enactment of this decree may be postponed for multiple reasons.[1] NPs who initially earn a master's degree can go on to earn the DNP later in a program that has a post-master's option. Some DNP programs also permit students to obtain a "master's in passing" on the way to the DNP degree.

During this transition, many states accept either a master's or doctoral degree for licensure as an NP, although some states have identified specific dates by which all students must have a DNP to be initially licensed as an NP. It is important for prospective students to consider both a program's characteristics and how well it matches requirements for licensure as an NP in the states where they want to practice.

Sources of NP Program Information

Program Web sites. Valuable information can be gleaned from a NP program's Web site. At a minimum, the Web site provides an overview of the NP program. The more information provided, the better the understanding of the program and the easier it is to compare different programs. Look for the school's mission statement, which signifies the values of the school, how long the program has existed, and whether it is a public, private, or faith-based institution. Information is typically provided about the faculty, such as whether the program has an NP director and the clinical and teaching background of the faculty.

The program of study and course descriptions, showing the layout of the curriculum over semesters or quarters, can be compared with national standards for NP education such as the AACN Essentials of Doctoral Education, or the
National Organization of Nurse Practitioner Faculties (NONPF) Core and Population Competencies for programs such as the adult-gerontologic acute care NP. Information about the requirements for a scholarly project, such as Capstone Projects, should be visible.

If the Web site does not provide sufficient information, the applicant should call and speak with the program director or a program faculty member in the applicant's area of interest. Other staff may be able to provide information on operational aspects, including clinical sites and preceptors. Impressions from conversions with faculty, including their accessibility to prospective students, may be useful in the decision to apply to that program.

**Program rankings.** Applicants seeking information beyond what is available in program brochures or Web sites often turn to online college rankings. Among other measures, such rankings consider faculty peer assessments and statistical evaluation of financial and faculty data. Student satisfaction is not typically included in the rankings for graduate nursing programs. This does not mean that the rankings do not identify quality programs, but considerably more information should be sought by potential applicants.

**Costs.** Tuition and fees are typically listed on a program's Web site. However, these published figures may not include costs such as equipment, books, lab fees, uniforms, and clinical fees. If the program is located at a distance from the student's home, additional costs for travel, lodging, and state license fees could be incurred. The Higher Education Opportunity Act of 2008 mandates that schools post net cost calculators on their Web sites based on students' individual circumstances to assist students in evaluating the total actual costs for a given educational program.\(^2\)

Financial aid sources include private, public, and institution-based funding. Private funding sources include scholarships from professional organizations such as Sigma Theta Tau, the American Association of Nurse Practitioners Foundation, state nurses' associations, or personal employers. Public sources for graduate nurse education funding include the federal Health Resources and Services Administration (HRSA), which provides funding for nurses seeking advanced education who plan to practice as faculty. Financial aid resources from the educational institution vary depending on your program of study, state of residence, and whether the program is public or private. Contact the school's financial aid office directly for more information and required forms as well as important deadlines for submission.

**Curriculum delivery.** An NP program's curriculum can be delivered in 3 ways: traditional classroom, online, or a blend (hybrid) of online and classroom learning. Online programs deliver courses and teacher-student communications using Web-based modalities. These programs may require short-term visits to campus, such as a week at the beginning of the program and a week at the end of the program.

Blended or hybrid programs require time on campus for courses and other activities. For example, a program may require the student to be present on campus for 1 intensive weekend per month, with the remainder of the coursework being completed online.

Traditional in-class programs still exist but are rapidly being converted to online and blended delivery modalities. The preapplicant should consider his or her preferred style of learning and ability to travel and complete in-person requirements, and also should inquire about availability of technological support for students.

Also important may be the length of the program and the number of credits required per semester or quarter. Some programs are shorter in length but require more credits (or courses) per semester or quarter, which may be difficult to complete if the student is also working and has other personal responsibilities. Some mandatory courses may only be offered once a year, and some programs do not offer core courses during the summer terms. This can extend the duration of the program beyond what was originally anticipated.

**Program Faculty, Students, Clinical Sites, and Preceptors**

**Faculty.** The accreditation process for schools of nursing includes a review of program faculty with respect to level of education and clinical preparation. NP faculty should be in clinical practice to maintain certification, licensure, and
current expertise.

**Students.** Student numbers are increasing overall, probably as a consequence of the shift to online programs. It is important to inquire about typical class size and consider how class size might affect the learning experience. It can also be helpful to determine the number of students in a specific cohort, which can speak to opportunities for faculty and peer interaction during the program.

**Clinical Site Placement**

Students are placed in clinical sites that match the population focus of their program. For example, at least 50% of sites for family nurse practitioner (FNP) students should be family practice/primary care sites. However, FNP students can be placed in internal medicine, pediatrics, urgent care, and prenatal and women's health sites because these sites serve populations that can also be seen by FNPs. Many state licensing boards will not recognize graduates of FNP programs that place students only in adult and pediatric settings but fail to integrate family practice knowledge.

Programs either arrange clinical placement sites and preceptors or require students to find their own clinical sites. Programs that place students should ascertain the preceptors’ state licensure and national certification, years of NP experience, education, and previous preceptor experience as well as the clinical placement setting’s receptivity to students and physical facilities for students (including patient exam rooms, desks, and computers). The applicant should inquire about the variety of clinical placements available, such as private offices owned by physicians or NPs, institutional primary care clinics, Native American and migrant clinics, rural practices, school-based clinics, and integrative health settings.

Contracts are required between clinical sites and universities for any student clinical experience and must be signed by both parties before a student can start the clinical experience. The applicant should inquire about timelines for contracts, person initiating the contract (student or NP program staff/faculty), and what happens if the contract is held up beyond the start date for the clinical experience.

When students are required to find their own preceptors, what role does the program play? Who vets the preceptor -- the student or the program? When NP students are required to find their own clinical placement sites, they may remain in those settings longer than 1 quarter or semester. There are pros and cons to long-term preceptor placements. The advantages include the ability of the student to get to know the staff and functioning of the clinical site in depth, follow patients for longer periods of time, and have a longer period of time to establish a relationship with the preceptor. On the other hand, changing clinical sites every quarter or semester offers the student more diversity in clinic settings and operations, patient populations, delivery of care methods, and preceptor styles and personalities.

Clinical evaluation by faculty is required by NONPF guidelines, which state that the program faculty is ultimately responsible for supervision and evaluation of the student's clinical performance. In some programs, the faculty member of the clinical course visits once or twice each quarter or semester. Some programs hire NPs as adjunct faculty to travel to distant sites to conduct clinical evaluations. Other programs use the preceptor as the sole source of clinical evaluation.

Evaluations and reviews of an NP program by current or past students can be helpful in deciding where to apply. If student opinions would be valuable to the applicant in making a decision, the applicant can ask if student evaluation data are available for review. If such data are not publicly available, or the program's administrators decline to supply this information, the applicant can ask whether it is possible to speak with current or past students.

**State Board Regulations for NP Education**

Program accreditation is a voluntary process for academic institutions. Programs in nursing may be accredited at the state, regional, or national level or all 3 levels. Each level of accreditation ensures that the NP program under consideration has met identified standards.
National accreditation. National accreditation in nursing is conducted by either the CCNE or The National League for Nursing Accreditation. National school accreditation is often required for the eventual licensure of graduates. Lack of national accreditation may also affect access to financial aid or the ability to use the degree title once it has been conferred. Accreditation can be used to evaluate whether programs meet nationally established standards of quality for a profession.\textsuperscript{[4]}

Regional accreditation. Regional accreditation is voluntary for schools of nursing. Regional accreditation does not evaluate the nursing program and its curriculum specifically but instead focuses on the university or college as an institution. State universities and colleges are all regionally accredited. If a program is not regionally accredited and a student transfers to a regionally accredited program, credits may not transfer. A 2005 Government Accountability Office study found that 14% of postsecondary institutions will not accept transfer credit from programs that are solely nationally accredited.\textsuperscript{[5]}

State accreditation. State accreditation (voluntary) or approval (often mandatory) of NP programs is generally conducted by the state Department of Education, Office of Degree Authorization, and/or Board of Nursing. Resources are provided at the end of this article to help prospective students check the status of an NP program's state accreditation. Not all Boards of Nursing review or evaluate NP programs, which means that complaints about a program must be directed to a regional, national, or school-based authority for resolution.

Licensure

Degree requirements for licensure. Although the Advanced Practice Registered Nurse (APRN) Consensus Model\textsuperscript{[5]} recommends completion of an accredited graduate-level APRN program, many states have specific degree requirements for licensure. For example, some states require a graduate degree in nursing, whereas others accept a graduate degree in other fields. Some states will not accept a post-master's NP certificate if the original degree was not in nursing. As of this writing, most states recognize either a master's degree or a doctorate as entry into practice for the APRN to practice as an NP.

Licensing issues for students and faculty. If clinical experience will occur in the student's home state, separate from the school, how will the school accommodate regulatory requirements for faculty and students? Most programs require that NP students hold an RN license that is not encumbered (eg, restricted by conditions such as probation). Encumbrances to the RN license before or during a student's clinical rotations as an NP may affect the student's ability to complete his or her clinical practicum and may also affect the graduate's ability to obtain NP licensure and prescriptive authority.

Students attending an online or hybrid program where faculty and clinical practice are located in another state need to identify the licensing requirements for both the student and faculty or preceptors in any state where clinical participation or teaching occurs. The first source for this information should be the program itself. Students who are responsible for providing their own preceptors and site visitors in their home state may find that the process of selection and licensing requirements are quite variable. It is important to contact the state Board of Nursing in both the state of licensure for the APRN student as well as the state where any clinical experiences and schooling will occur for further information.

The APRN Consensus Model

The APRN Consensus Model and its implementation by educating, licensing, accrediting, and certifying stakeholders will significantly change the scope and standards for NPs of the future.\textsuperscript{[6]} Prospective students considering an NP education will want to know that the degree, population focus, and role are congruent with this model to ensure future portability of licensing from state to state. See the links at the end of this article for further information about the model and its impact on the future NP role and population of practice.

A Good Fit

NP education is undergoing a great deal of change. For example, changes in program design and delivery make
programs more accessible but sometimes more difficult to evaluate as a prospective student. The informed applicant obtains information about various aspects of NP programs and state requirements for licensure before making a final determination that a program is a good fit.

Web Resources

- List of contacts for all state Boards of Nursing
- Links to all national, regional, and specialty accrediting bodies and information on accreditation generally
- APRN Consensus Model Toolkit
- State Authorized Degree Granting Institutions
- CCNE List of Accredited Graduate Programs
- AACN Essentials of Doctoral Education for Advanced Nursing Practice
- National League for Nursing Accreditation Commission List of Accredited Programs
- NONPF Core Competencies for Nurse Practitioners
- American Academy of Nurse Practitioners Student Resource Center
- HRSA Nursing Grant Programs
- Sigma Theta Tau International Honor Society of Nursing
- American Academy of Nurse Practitioners 2012 Scholarship and Grant Information

References


