The purpose of this newsletter is to keep stakeholders updated on progress and accomplishments of the Advanced Nursing Education-Nurse Practitioner Residency (ANE-NPR) “Transforming the Workforce” grant.

The four-year, $1.57 million federal HRSA grant is an expansion of Essentia Health’s current Transition to Practice program and provides four new graduate nurse practitioner’s each year clinical and academic enhancement for a 12-month residency program in rural and/or underserved populations.

The collaboration between North Dakota State University (NDSU) School of Nursing and Essentia Health, a large regional health system covering most of eastern North Dakota, northern Minnesota, and northwestern Wisconsin is better preparing new NP graduates for rural care practice through enhanced didactic content, simulation, and immersive clinical experiences. The residency is in its third year and two cohorts of residents (8 total) have completed the program. The third group began in October and May (see page 2). This newsletter highlights the current projects underway and achievements thus far.

Mission Statement
To create a Nurse Practitioner Residency program that expands Essentia Health’s Transition to Practice program, further enhancing NP skills and competencies and improving the health of rural and underserved populations.
ANE-NPR Program Priorities:
1. Opioids and Mental Health Emergencies
2. Rural Clinical Readiness
3. Telehealth
4. Childhood Obesity

Opioids and mental health emergencies are a program priority. In February, North Dakota State University School of Nursing with support from Health Resources and Services Administration Advance Nursing Education Nurse Practitioner Residency grant hosted a one day virtual Mental Health Conference. The 287 registrants included advance practice providers and other mental health care workers from Essentia, Sanford, other healthcare facilities in the region, as well as NDSU DNP/FNP students. Topics included titration and tapering schedules; resiliency, mental illness, and SUD among providers; anxiety; unipolar and bipolar disorders; and depression and ADHD in adolescence. The conference was free to attend and approved for 7.5 contact hours of continuing education, which included 3.5 hours of pharmacology by the American Association of Nurse Practitioners.

“Really appreciated the talk on unipolar and bipolar depression and the simplification of FDA approved antipsychotics,” said one attendee.

Another noted, “Mental health topics are excellent for us in primary care, especially related to children.”

Susan Ross, APRN, CNP
Detroit Lakes, MN

Kelsey Stay, APRN, CNP
Park Rapids/Walker, MN

Erika Caslin
APRN, CNP
Gracieville, MN

Hillary Newborg
APRN, CNP
Lisbon, ND

Amanda Keough
APRN, CNP
Virginia, MN

Erika Caslin, Hillary Newborg, and Amanda Keough (pictures left) began the residency program in May.
Specialty Rotations
Residents must complete a minimum of six specialty rotations. They are chosen based upon self-identified learning gaps and special interest areas. Thus far residents have completed rotations in the following areas:

- Cardiology
- OB/GYN
- Ortho
- Radiology
- Pediatrics
- Weight Management
- Dermatology

“This was an excellent opportunity and I feel that it opened a line of communication that I will feel comfortable in reaching out again in the future for OB/GYN issues in my own practice setting,” said one resident about her specialty mentor after completing a rotation.

Journal Club
Monthly journal club is a cornerstone of the residency curriculum; it’s held the third Friday of every month over the noon hour. Residents are assigned research articles and participate in a discussion led by an NP grant team member. The purpose of journal club is to evaluate the components of scholarly work, develop a better understanding of new literature compared to current guidelines and practices, apply research into daily practice, and foster a collaborative, collegial conversation among peers. Topics thus far have included insomnia, weight management, diabetes management, men’s mental health, crucial conversations and adverse patient events.

“I recognize that men may show depression signs by other symptoms like anger and aggression” said one resident after journal club.

Acute Abdomen Pain and Chest Pain Workshop
In March, NDSU faculty member, Adam Hohman, DNP, APRN, FNP-BC, and the grant’s Health Education Coordinator, (pictured right) facilitated a clinical workshop focused on acute abdomen pain diagnosis and chest pain workup. Case studies were presented as part of the discussion.
In April, residents, along with three other newly graduated Essentia advance practice providers attended a 2-day skills and procedures training in Baxter, MN. The first day focused on ortho exams, joint injections, and splinting. Aaron Lindstrom, DNP/FNP-C (pictured right in the splint) led the first day of the training. Aaron is an orthopedic specialist at Lake Region HealthCare in Fergus Falls, MN.

The second day included fish hook removal and introduction to point of care ultrasound facilitated by Steve Palmer (pictured below), a PA at Essentia who practices emergency medicine in Ada, MN and urgent care in Baxter, MN. Adam Hohman, DNP, APRN, FNP-BC and the grant’s Health Education Coordinator facilitated training for suturing, incision & drainage, and toenail removal.

“I found the ultrasound portion of the training very interesting and hope to see medicine go towards that type of diagnostic study in the future,” said one participant.

“Fish hook removals made easy,” noted one participant after practicing a technique that Steve Palmer, PA-C demonstrated.
Splinting
Joint Injection
Point of Care Ultrasound
Point of Care Ultrasound
Incision and Drainage
Toenail Removal
Nail Trephination
Suturing
Qualifications

- **Candidates:** Graduates of ANY* Nurse Practitioner Program within the last 18 months with a commitment to practice in a rural area.
  *Graduates do not have to be NDSU graduates.

- Four newly graduated NPs hired by Essentia in rural, underserved areas will be eligible for the residency program each year.

- Unlike most residency programs that have an application process, residents are selected by primary care leaders and the Transition to Practice team to participate yearly based on clinic need.

Structure

- 12 months, full-time salaried position.

- Specialty clinical rotations based on resident needs and interests.

- In person and virtual educational opportunities related to focus areas and other complex clinical challenges for rural NPs.