

SPOTLIGHT ON NURSING

Meeting Hawai'i's Mental Health Needs: The Psychiatric Mental Health Nurse Practitioner Program

Courtnee Nunokawa DNP, APRN, AGPCNP-BC, BCN; Christine Loui MSN, APRN, ACNS-BC, PMHNP-BC; Lorrie Wong PhD, RN, CHSE-A, FAAN; Joanne R. Loos PhD

<https://doi.org/10.62547/HYAL5204>

The Spotlight on Nursing is a recurring column from the University of Hawai'i at Mānoa School of Nursing and Dental Hygiene (SONDH). It is edited by Holly B. Fontenot PhD, APRN, WHNP-BC, FAAN, FNAP; Associate Dean for Research, Professor, and Frances A. Matsuda Chair in Women's Health for SONDH, and HJH&SW Contributing Editor; and Joanne R. Loos PhD, Science Writer for SONDH.

Abbreviations

DNP = Doctor of Nursing Practice

PMHNP = Psychiatric Mental Health Nurse Practitioner

UH = University of Hawai'i

Nearly 50 million people in the United States (US) (19.9% of adults) report having a mental illness.¹ In Hawai'i, 17.5% of adults have a diagnosed mental illness, which ranks as the fourth lowest in the US.¹ Although the state ranks among the lowest, it has the highest prevalence of adults who have received treatment for their disorder (67.1%).¹ Among children in Hawai'i, 14.2% reported suffering from at least 1 major depressive episode in the past year, compared to 15.1% nation-ally.¹ Nationally, 59.8% of youth with major depression do not receive any mental health treatment, and 14% of adults report unmet needs for acute mental illness, citing: (1) no or lack of insurance, (2) lack of mental health workforce, (3) lack of treatment types, (4) fragmented health care systems between mental health and primary care, and (5) lack of means to cover costs of services.¹ The problem is exacerbated as Hawai'i and the nation are experiencing a shortage of mental health providers at a time when the need for mental health services is more severe than ever.

The US Health Resources and Services Administration projected a shortage of at least 250 000 mental health providers nationally by 2025.² Two-thirds of primary care physicians report that they could not get outpatient mental health services for their patients—a rate that was at least twice as high as that for other services.³ The Hawai'i Physician Workforce Report 2023 has identified shortages for adult and child psychiatry services, 42% and 45% respectively.⁴ Rural Hawaiian islands are more severely impacted with the islands of Hawai'i, Kaua'i, and

Maui experiencing shortages of greater than 70% for some mental health services.⁴

The Psychiatric Mental Health Nurse Practitioner, an Option to Enhance Services

In August 2022, the University of Hawai'i (UH) at Mānoa School of Nursing and Dental Hygiene conducted a needs assessment related to starting a Psychiatric Mental Health Nurse Practitioner (PMHNP) program as a new nurse practitioner specialty option for the Doctor in Nursing Practice (DNP) degree program. The needs assessment included student and labor market demand and an analysis of potential competitor programs. Findings indicated that there was a strong labor market for PMHNPs, attributed in part to a shortage of physicians who specialize as psychiatrists. Further noted was the confirmed shortage of mental health providers in rural areas. There is a growing number of PMHNP programs across the US, yet the far western regions of the US continue to lack robust programing. This suggested that there would be student demand and community need for this type of program. Finally, the majority (70%) of benchmarked competitors use hybrid modalities to deliver their programs, with none offering 100% in-person formats, which may strengthen culturally informed curriculum and clinical experiences.

Advance practice nurses who specialized in mental health were some of the earliest to work in advanced practice roles in the US, and programs have existed since the 1950s.⁵ In the beginning, the first advanced practice nurses were certified as psychiatric clinical nurse specialists at Rutgers University with support from a grant from the National Institute of Mental Health.⁶ Over time, the role of the psychiatric clinical nurse specialist diversified, specialized, and expanded in competencies and scope. Then in 2000, the American Nurses Credentialing Center developed the first PMHNP board certification to meet the public health needs,

while standardizing certification based upon the Consensus Model for Advanced Practice Nurse Regulation: Licensure, Accreditation, Certification & Education.⁷ Nationally, in 2011 the Institute of Medicine recommended and highlighted the importance of training highly competent nurses to meet the current health care demands, including mental health care demands.⁸ Advanced practice nurses/nurse practitioners practice nursing at the full scope of their education to meet the needs of the communities for which they serve, much of which is in rural settings. They are an asset to the inter professional health care infrastructure. Empowered nurses lead change and advance health for the well-being of our society.⁸

The New Psychiatric Mental Health Nurse Practitioner Program at UH Mānoa

The new PMHNP specialty program's goals, aligned with national standards, are to develop highly competent nurse practitioners prepared to meet the needs of Hawai'i's growing mental health crisis, who understand the unique needs and cultures of Hawai'i. At program completion, students are eligible to sit for national certification as PMHNPs. They will possess a diverse skill set, with competencies to improve outcomes by providing individual and group-based therapy, diagnosis, and treatment for those with mental illness and disease, including prescribing and managing medications used for mental health disorders. They also have the expertise to meet the constantly evolving and complex demands of the health care environment, utilizing evidence-based approaches and frameworks to enhance the quality of care and patient safety at both individual and organizational levels.⁹

Meeting Hawai'i's Mental Health Needs

Expanding Hawai'i's mental health provider network presents several challenges, including navigating the state's high cost of living, diverse patient population, difficulty with re-location from out of state, and lack of accessible resources. To address this, the school of nursing emphasizes education of local nurses to become advanced practice providers, and the program provides culturally tailored education and community-driven approaches throughout the curriculum, simulation learning experiences, clinical learning sites, interprofessional experiences, and telehealth.

Simulation learning experiences, developed by subject matter experts, include topics such as homelessness,¹⁰ disaster after-math training,¹¹ management of depression, and end-of-life discussions,¹² preparing students to manage care within diverse complex situations. The clinical learning sites across the state, including those in rural areas, allow the students to develop skills, competencies, and confidence within their local communities. As comorbidity and clinical complexity increases,

interprofessional care is essential for positive clinical outcomes. Interprofessional education provides all health care students with the opportunities to collaborate with various professions to provide high-quality, team-based care. The School of Nursing and Dental Hygiene is an active participant in the Hawai'i Interprofessional Education Committee, ensuring students have opportunities in simulation and/or clinical to practice interprofessional skills, which is rooted in the TeamSTEPPS (Team Strategies and Tools to Enhance Performance and Patient Safety) evidence-based model for teamwork.¹³

With provider shortages up to 70% in rural areas, access to care via telehealth is an essential skill set for improving access to mental health care across Hawai'i. Telehealth is a valuable tool. However, it adds layers of complexity to clinical practice. For instance, in order to offer telehealth, providers must be competent in safety, communication, data collection, technology, and ethics. To address this need, integrated telehealth into simulation and clinical education is included in the curriculum,¹⁴⁻¹⁶ ensuring that graduates are well-equipped to meet the needs of our community.

Program Highlights for Prospective Students

Designed for working students: A hybrid program with course offerings aimed to limit campus days to once a week, in blocks and evenings to support work-school-life balance.
Career satisfaction: Preparation at the highest clinical doctoral level of nursing practice to improve patient outcomes with greater autonomy and leadership potential in a variety of settings to meet professional goals.
Commitment to student success: Ongoing guidance and resources to support success, including 1:1 advising, clinical placement coordination, mentorship and guidance towards entry into practice.
Improve mental health and make a difference: An innovative curriculum designed and delivered by distinguished faculty with clinical practice expertise to improve access and quality of mental health care to diverse populations.

Next Steps and Conclusion

The School of Nursing and Dental Hygiene launched the first cohort of the PMHNP program in Fall Semester 2024, with expected graduation with a DNP in May 2027. The program is designed to build the next generation of nurse practitioners skilled in provision of mental health care in a collaborative environment alongside other DNP students who are studying to become Family Nurse Practitioners and Adult Geriatric Nurse Practitioners. As the program advances, students will engage with professionals from other disciplines at various practice sites, expanding their competencies to provide mental health care across the lifespan and health care settings.

The School of Nursing and Dental Hygiene is committed to continuously improving its innovative, culturally informed, and evidence-based curriculum and practices. Students and stakeholders participate in ongoing program evaluation and

reflection to ensure continuous quality improvement and the development of new pedagogy and programing. Upon program completion, students can apply for PMHNP board certification through the American Academy of Nurse Practitioners or the American Nurses Credentialing Center. After earning board certification, graduates apply for state licensure to practice as an advanced practice nurse with prescriptive authority. In Hawai‘i, nurse practitioners have full practice authority, allowing them to transition into the workforce and immediately help address the shortage of mental health providers. PMHNPs are well-positioned to help address the workforce shortage and drive crucial changes needed in Hawai‘i, addressing mental health inequities.

Authors' Affiliations:
School of Nursing and Dental Hygiene, University of Hawai‘i at Mānoa, Honolulu HI

References

1. Reinert M, Fritze D, Nguyen T. The state of mental health in America 2022. Published online 2021.
2. Health Resources and Services Administration/National Center for Health Workforce Analysis; Substance Abuse and Mental Health Services Administration/Office of Policy, Planning, and Innovation. *National Projections of Supply and Demand for Behavioral Health Practitioners: 2013-2025*.; 2015. Accessed June 17, 2024. <https://bhwh.hrsa.gov/sites/default/files/bureau-health-workforce/data-research/behavioral-health-2013-2025.pdf>
3. Cunningham PJ. Beyond Parity: Primary Care Physicians' Perspectives On Access To Mental Health Care: More PCPs have trouble obtaining mental health services for their patients than have problems getting other specialty services. *Health Aff (Millwood)*. 2009;28(Suppl1):w490-w501.
4. Hawaii/Pacific Basin Area Health Education Center (AHEC). *Hawai'i Physician Workforce Report 2023*. AHEC; 2024. Accessed June 17, 2024. https://www.ahec.hawaii.edu/wp-content/uploads/sites/16/2021/12/act18-sslh2009_2024_physician-workforce_annual-report-2.pdf
5. Ohio Association of Advanced Practice Nurses (OAAPN). History of Nurse Practitioners in the United States. <https://oaapn.org/2023/06/history-of-nurse-practitioners-in-the-united-states/>. 2023. Accessed February 7, 2025..
6. American Psychiatric Nurses Association. How did the Advanced Practice Psychiatric Nurse role begin? *Common Questions about Advanced Practice Psychiatric Nurses*. [https://www.apna.org/about-psychiatric-nursing/faqs/#:~:text=In%201955%20at%20Rutgers%20University,30%20programs%20prepared%20PMH%20APRNs](https://www.apna.org/about-psychiatric-nursing/faqs/#:~:text=In%201955%20at%20Rutgers%20University,30%20programs%20prepared%20PMH%20APRNs.). 2017. Accessed November 25, 2024.
7. National Council of State Boards of Nursing. *APRN Consensus Work Group & the National Council of State Boards of Nursing APRN Advisory Committee Consensus Model for APRN Regulation: Licensure, Accreditation, Certification & Education*.; 2008. Accessed August 20, 2024. https://www.ncsbn.org/public-files/Consensus_Model_for_APRN_Regulation_July_2008.pdf
8. Committee on the Robert Wood Johnson Foundation Initiative on the Future of Nursing at the I of M. *The Future of Nursing: Leading Change, Advancing Health*. National Academies Press; 2011.
9. American Association of Colleges of Nursing (AACN). *The Essentials: Core Competencies for Professional Nursing Education*.; 2021. Accessed November 26, 2024. <https://www.aacnnursing.org/Portals/0/PDFs/Publications/Essentials-2021.pdf>
10. Teruya K, Wong L, Tokumaru S, et al. The Houseless Simulation Exercise: An innovative educational approach to addressing houselessness interprofessionally using a virtual platform. *Clin Simul Nurs*. 2024;95:101600.
11. Glauberman GH, Wong LC, Bray ML, Katz AR. Disaster aftermath interprofessional simulation: promoting nursing students' preparedness for interprofessional teamwork. *J Nurs Educ*. 2020;59(6):353-356.
12. Wada RK, Wong L, Flohr A, et al. Simulation-Based Pediatric Interprofessional Team Training to Facilitate End-of-Life Discussions. *Clin Simul Nurs*. 2023;78:27-33.
13. Agency for Healthcare Research and Quality (AHRQ). *TeamSTEPPS 2.0 Pocket Guide: Team Strategies & Tools to Enhance Performance and Patient Safety*.; 2013. Accessed July 12, 2023. <https://www.ahrq.gov/sites/default/files/wysiwyg/professionals/education/curriculum-tools/teamstepps/instructor/essentials/pocketguide.pdf>
14. Tokumaru S, Wong L, Young N, et al. Interprofessional telehealth simulations for pharmacy and nursing students: Development and evaluation of an online experience. *Curr Pharm Teach Learn*. Published online 2023.
15. Wong L, Tokumaru S, Boehm L, et al. From a distance: Nursing and pharmacy students use teamwork and telehealth technology to provide interprofessional care in a simulation with telepresence robots. *J Interprofessional Educ Pract*. 2021;22:100407. <https://doi.org/10.1016/j.xjep.2020.100407>
16. Ma C, Wong L, Wen A, et al. Evaluation of distance facilitation and technology in an interprofessional simulation exercise. *Curr Pharm Teach Learn*. 2020;12(7):776-785.