Case 31

The Development of the Nurse Practitioner and Physician Assistant Professions

Scott Kohler

Background. In the years following World War II, the United States suffered from an acute shortage of doctors. As urban populations escalated and rural communities continued to rely on inadequate medical infrastructure, the demand for health care grew rapidly to outstrip supply. This, in turn, led to rising costs, which made health care inaccessible to many of the poorest Americans. Concentrated in inner cities and the rural countryside, these underserved populations were quite often those in the greatest need of medical attention. By the mid-1960s, however, there emerged two new classes of health care professionals: nurse practitioners and physician assistants.

Although their engagement did not reform entirely the inequities of American medicine, they did begin to play a significant and still-growing role in spreading access to health care services and holding down the costs of care. Enterprising health care professionals in academic medicine pioneered both professions. And starting with the Commonwealth Fund, but soon after to include other foundations, primarily the Robert Wood Johnson Foundation and the Carnegie Corporation of New York, private philanthropy also played a major role in helping the nurse practitioner and physician assistant professions get up and running, and then expand nationwide.

Strategy.

Nurse Practitioners:

The first nurse practitioner training program was conceived in 1965 at the University of Colorado by Loretta Ford, a nurse, and Henry Silver, a physician. Its goal was to increase the supply of primary care providers, especially in underserved urban and rural areas. The program would train registered nurses in clinical care so that they could—by performing such tasks as testing, routine examination, and immunizations—free up physicians for those patients who really needed their attention.

The training program commenced in 1966, and was “principally supported” by a three-year, $253,998 grant from the Commonwealth Fund. Although the traditional nursing establishment, led by nursing school deans, opposed the expansion of nurses’ responsibilities, the program was successful and soon replicated. It started in Colorado with a focus of pediatrics, but the profession soon grew to include a range of general and specialist nurse practitioners. In 1970, the Commonwealth Fund gave $84,540, again to the University of Colorado (and, this time, to the Denver school system), to train school nurse practitioners that would improve the quality of care available to thousands of children. In 1976, the Robert Wood Johnson Foundation funded an effort at the University of New Mexico to develop curriculum guidelines to improve and standardize the training of nurse practitioners. The product of this grant was the influential Guidelines for Family Nurse Practitioner Care. The following year, RWJF sought to create a corps of outstanding teachers to help grow the profession by funding Nurse Practitioner Faculty Fellowships in Primary Care.

Physician Assistants:

The physician assistant profession was born at Duke University. Faced in the 1950s with
heightened patient volume, “and a shortage of all types of nursing and allied health personnel,” the Duke Hospital sought a solution quite similar to that pursued in Colorado by Drs. Ford and Silver. Dr. Eugene Stead, chairman of Duke’s Department of Medicine, made three unsuccessful attempts in the late ’50s and early ’60s to get a clinical nursing program accredited. “Each time, the National League of Nursing, which, as we have already seen, feared any change in the traditional nurse’s role, blocked his efforts. Looking to the military medical corps as an example, Dr. Stead envisioned a mid-level class of health care providers who could play the part of nurse or physician, and would be trained in far less time than the latter.

Stead obtained initial funding from the National Heart Institute to begin training former military medical corps veterans in the sciences and clinical medicine.” In what amounted to an intense two-year abbreviated version of medical school, Stead’s new physician assistants (as they were called) learned to perform much the same role as a doctor, while working under a licensed physician’s direction. Soon after the NHI grant, Duke received a three-year grant from the Josiah Macy, Jr. Foundation. This, in turn, was soon followed by grants from the Carnegie Corporation, the Rockefeller Foundation, and the Commonwealth Fund. 

To support Stead’s promising innovation, the Commonwealth Fund in 1967 began to fund the undergraduate training of physician assistants at the Alderson-Broaddus Medical College. In the mid-1970s, RWJF joined the Commonwealth Fund in supporting the national model by funding Alderson-Broaddus.” Meanwhile, a number of academic health centers were requesting Dr. Stead’s help in setting up physician assistant programs, so when Duke followed Alderson-Broaddus’ lead, changing its post-graduate training to a baccalaureate program, the rest of the nation did as well.” The overwhelming majority of physician assistants were trained in this way until the mid-1980s, when a graduate degree, the Master of Health Science (MHS), was created for physician assistants.”

Outcomes.

Nurse Practitioners:

The Colorado program served as the model for the multitude of nurse practitioner training programs that quickly sprang up around the country.” Today there are over 200 such programs, and clinical training has become a valued asset within the nursing profession.” As of 2001, there were an estimated 78,000 nurse practitioners working, and the profession has received certification in all fifty states.”

The fears of nursing school deans have not come to pass. In fact, studies show that nurse practitioners can handle approximately 75 percent of the work that physicians handle, and provide care at a much lower cost to the consumer.” Nor has the rise of nurse practitioners exacerbated the shortage of registered nurses. On the contrary, it has eased it, as thousands of nurses, more satisfied in their professions, are staying in their jobs longer.”

The standards underwritten in the late ’70s by the Robert Wood Johnson Foundation led, in 1980, to the creation of the National Organization of Nurse Practitioner Faculties. Foundation support—by fostering the profession’s growth in the face of doubts that have since been disproved—opened the door to government support. To date, the federal government has spent over $100 million on the training and support of nurse practitioners.”

Physician Assistants:

The first class of physician assistants graduated from Duke on October 6, 1967. The Duke program relied on outside funds until 1982, when it became financially self-sustainable, something it remains to this day.” The profession’s first pioneer, Duke has graduated well over 1,200 physician assistants. The larger profession, too, has won wide acceptance. Physician assistants enable clients in low-income and community health centers access to advanced healthcare services. Though they work
under supervision, physician assistants extend the reach of modern medicine farther than M.D.s, still scarce in many areas, would alone be able to do. As of 2000, there were over 38,000 physician assistants working in the United States. Their accreditation is nationally standardized, and they are board certified in forty-nine states. In 1971, President Nixon called for $15 million to train mid-level health care professionals. Congress responded in 1972 with the Comprehensive Health Manpower Act, which allocates federal funds for the training of physician assistants and other health providers.

Impact. As McGehee Harvey and Susan Abrams write in “For the Welfare of Mankind: The Commonwealth Fund and American Medicine, the Fund’s early support of nurse practitioner training at the University of Colorado, “enabled Silver and his group to obtain grants ...from the Carnegie Corporation, the Robert Wood Johnson Foundation, and [most significantly,] federal agencies.” Before the Commonwealth stepped in, the Colorado team had failed several times to raise the needed funds.” Likewise in the creation of the physician assistant, private foundations provided the crucial early support that enabled the profession to get up and running, and to disprove the arguments of its critics. Discussing the Robert Wood Johnson Foundation’s later role in supporting these two innovations, former RWJF vice president Terrance Keenan credits the Commonwealth Fund and the Carnegie Corporation, “that had participated in the birth of the new professions, and in the face of considerable odds had nurtured them through their infancy.” Although it did not begin grant-making until 1972, the Robert Wood Johnson came also to play an important role in fostering both professions. According to McGehee and Abrams:

For the nation’s health-care system, the training of nurse practitioners has emerged as one of the most important developments of the past thirty years. The value of nurse practitioners is now widely recognized, and nurses are seen as a key group in meeting the need for well-trained professionals to provide primary care. By now, nurses have skills previously considered the exclusive province of physicians; accreditation of nurse practitioner programs and certification of qualified graduates have also contributed to an improved identity for nurses and acceptance of their expanded role by other health professionals and the public."

Much of the same can be said of physician assistants. Taken together, the two groups have improved the availability and quality of care for millions of patients. Private foundations, most notably the Commonwealth Fund, but also the Robert Wood Johnson Foundation, the Carnegie Corporation of New York, and others, have played a crucial role in providing startup capital, as well as helping the two professions evolve and gather additional funding to go to scale over the last forty years.

Notes

459. Ibid.
460. Pulcini, “Nurse Practitioner Education in the United States.”
461. Ibid.
463. Ibid.
464. Ibid.
465. Ibid.
468. Ibid.
470. Pulcini, “Nurse Practitioner Education in the United States.”
471. Ibid.
473. Ibid.
474. Pulcini, “Nurse Practitioner Education in the United States.”
476. Ibid.
478. Ibid.
479. Ibid.