

The Transformational Journey of Nurse Practitioners in Acute Care Settings

By: Judith Rashotte¹, RN, PhD, Louise Jensen², RN, PhD

Article can be found in: Canadian Journal of Nursing Research, 2010, Vol. 42(2): 70-91.

THE ISSUE

The role of the Nurse Practitioner (NP) has been well documented in primary healthcare, but less is known about the role and its integration into the acute care setting.

THE PURPOSE

To look at the experience of NPs working in acute care settings in teaching hospitals across Canada.

What did we do?

We interviewed 26 NPs from hospitals in Alberta, Ontario, and Quebec to gather information about their day to day experiences of role integration in the acute care setting. The NPs were English speaking, graduated from a university based nursing program, practiced as an NP in acute care for at least 2 years and worked a minimum of 20 hours per week in an NP role.

What did we find?

This study outlines the complex and largely invisible experience of NPs in acute care. NPs described their experiences in becoming an NP in acute care as a transformational journey and participants considered themselves pioneers of the NP role. Five themes emerged:

1) **Being called to be more.** means being more connected, in control, visible, and challenged, and able to make more of a difference not only in their patients and families lives, but in their work setting.

2) **Being adrift** means being disconnected, uncertain, lost, and staying afloat. This relates to the role integration phase where participants were required to let go of old ways of being and learn new ways of thinking, acting and relating to others.

3) **Being an acute care NP** means being competent, confident, comfortable, committed, connected, and content. This entails a complex process of doing, talking, thinking, feeling and belonging to a clinical practice team that recognized the value performed by the NP.

4) **Being pulled to be more.** means being a wearer of two hats, which is experienced as a struggle to fulfill all the advanced nursing practice competencies and the hands on work they love to do.

5) **Being more** means being an advanced practitioner, unifying the direct practice, consultation, education, research and leadership competencies.

How will this research help?

This study helps to illustrate the complexities and challenges NPs experience in trying to establish their place and role in the acute-care setting and how this often turbulent process impacts on NPs' role identity.

What's next?

Further research is needed to investigate strategies to address the challenges and complexities encountered by NPs working in acute care.

BOTTOM LINE?

NP role integration in the acute care setting is a challenging and complex transformative process that could benefit from ongoing support through educational programs and the development of Communities of Practice.

¹Childrens Hospital of Eastern Ontario ²University of Alberta

FOR MORE INFORMATION:

Renee Charbonneau-Smith, Knowledge Exchange Specialist, CHSRF/CIHR Chair Program in APN
McMaster University, 1200 Main St. W., HSC 3N25, Hamilton, Ontario L8N 3Z5
Phone: 905-525-9140, ext. 21286, Fax: 905-524-5199, email: charbon@mcmaster.ca