

The Integration of Nurse Practitioners Into Canadian Emergency Departments



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THE ISSUE

Emergency department (ED) overcrowding is a complex issue that can affect wait times, care delivery and patient outcomes. Often patients visiting EDs in Canada and the United States (US) are presenting with non-urgent primary health care problems. In the US, United Kingdom, Australia and Canada Nurse Practitioners (NPs) have started to manage these non – urgent primary healthcare cases in the ED. This has implications for ED staff including NPs, physicians, nursing staff and other health care professionals.

THE PURPOSE

To identify the facilitators and barriers associated with integrating NPs into Canadian EDs from the perspectives of NPs and other ED staff.

What did we do?

We conducted a grounded theory study to look at issues identified by NPs and ED staff members that affect the role of the NP in the ED. Twenty-four semi-structured interviews with key stakeholders in 6 Ontario EDs were conducted to explore staff perspectives on the introduction of the NP role into the ED.

What did we find?

Facilitators for NP role implementation in the ED included:

- a collaborative department culture
- previous staff experience working with NPs
- separate funding for NP positions

Barriers to NP role implementation included:

- lack of funding
- competing fee for service payment system
- lack of understanding of the NP role
- unclear NP role expectations
- inability to recruit NPs who are trained in emergency medicine
- NP lack of interest in working in the ED

How will this research help?

NPs can manage patients who present to the ED with non-urgent primary care needs; however the cost to employ NPs in ED has not been assessed. Therefore, cost analysis is important prior to the introduction of NPs into EDs.

What's next?

Assessing the cost effectiveness of NP services and staffing implications in the ED is needed.

BOTTOM LINE?

The role of the NP can be utilized in the ED to help reduce overcrowding and wait times by serving patients with non urgent primary health care needs.

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