

The Value of Surgical Advanced Practice Providers in the Acute Care Setting: A Nursing Perspective

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Introduction/Problem

There is a lack of institutional data at Beth Israel Deaconess Medical Center (BIDMC) describing the impact and perspective of Advanced Practice Provider (APP) practice in acute care surgery. A literature search, including a BIDMC cardiology service, was performed and outlined several measures positively impacted by APP practice including a decreased length of stay, reduced readmission rate by 50 percent and consistent point of contact for patients and nurses (David, Britting & Dalton, 2015; Jarrett & Emmett, 2009), . We are unaware of any existing institutional qualitative or quantitative data for an inpatient surgical service with APPs to date.

Aim/Goal

The global aim of this project is to evaluate the value of APP practice and its ability to enhance overall patient care in the acute hospital setting by identifying and highlighting the positive attributes APPs contribute to healthcare. An additional intent of our project is to identify areas for practice improvement.

The specific aim of this project is to assess the perspective of surgical registered nurses who frequently collaborate with APPs regarding their ability to impact and enhance patient care while upholding the core values of BIDMC; these values include integrity, respect, caring with compassion, excellence, stewardship, and community.

Goal: The goal of this project is to demonstrate the current nursing perspective of APP value and their ability to uphold core BIDMC values.

David, D., Britting, L., & Dalton, J. (2015). Cardiac acute care nurse practitioner and 30-day readmission. *Journal of Cardiovascular Nursing*, 30(3), 248-255.

Jarrett, L. A., & Emmett, M. (2009). Utilizing trauma nurse practitioners to decrease length of stay. *Journal of Trauma Nursing*, 16(2), 68-72.

The Team

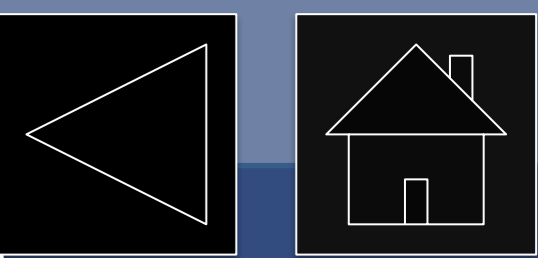
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The Interventions

- Conducted an extensive literature review regarding the impact of APPs on various aspects of care in the acute hospital setting.
- Designed and conducted an anonymous survey consisting of 15 questions using "Survey Monkey" services and distributed it to nurses on four surgical units via email.
- Communicated with nurse managers prior to distribution of survey to improve participation. Nurses were encouraged by APPs to participate in the study via email and during huddles.
- Collaborated with The Director of Quality Programs, John Tumulo, to review the study design, ensure the design targeted the intended purpose, and abstract the results.
- Abstracted and reviewed the results of the qualitative survey bar graphs.
- Extracted potential process improvement initiatives from nursing comments.
- Held interdisciplinary team meetings to discuss the results.
- Debriefed Nursing Directors of each unit surveyed with a summary of results.

For more information, contact:

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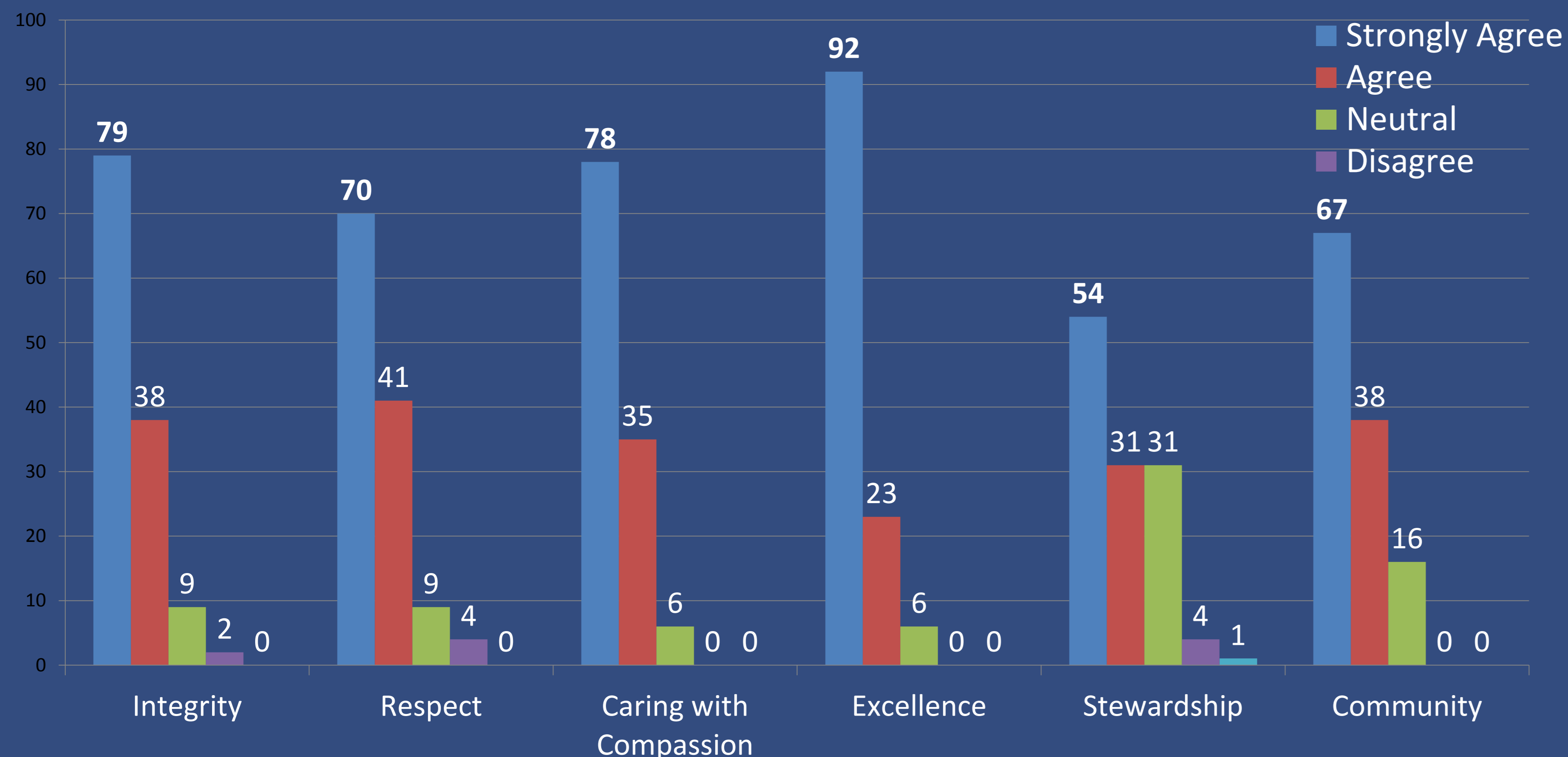
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Progress to Date

Response Data

Total # Survey Recipients	Overall Response Rate	Response Distribution by Floor
179	Strongly Agree to Agree: 89%	Total : 65 Rosenberg 7: 22 Rosenberg 6: 13 Stoneman 5: 15 Float Pool: 12 Other: 2

Data below reflects the sum response to each value. Two questions per value were included in each category.



Nursing Comments

'Very much agree with this, APPs always take nursing input seriously and always address any concerns whereas residents and interns don't always.' *Rosenberg 7*

'Patients seem to value their presence on the floor because they are able to spend more time at patients' bedside and make them feel more comfortable.' *Stoneman 5*

'There have been multiple times potentially dangerous situations have been avoided due to involvement of the NP as well as interventions early on to prevent delay of discharge. Overall, much smoother hospital course with the close follow up they provide.' *Float Pool*

'APPs take time to explain and educate pts, are very knowledgeable on subjects as they have a great deal of experience in their field.' *Rosenberg 7*

Lessons Learned

- In conclusion, collaboration between nurses and APPs on surgical units is an essential component of improved patient care, knowledge, dignity and satisfaction. Nurses felt that APPs valued their input and respected them as team members. Having an APP on the service was viewed as very beneficial due to their positive impact on the plan of care and patient outcomes. Overall, the communication between nurses and APPs was viewed as effective and efficient allowing nurses to address the needs of the patients in a timely manner. However, response to pages on one of the services was identified as an area for practice improvement. Finally, nurses agreed that having an APP on service resulted in reduced length of stay and facilitated the discharge process.

Next Steps

- Partner with the Department of Surgery APP Council to improve inter-divisional collaboration.
- Conduct a process improvement initiative to improve pager response time.
- Increase clinical education for nursing staff to improve patients outcome (e.g. in-services).
- Discuss the benefits of additional APPs on surgical services.
- Compare inter-hospital departmental data with APP and without APP for: length of stay, accidents, trigger activation, etc.
- Present survey results to the Advanced Provider Practice Council
- Resurvey nursing staff in six months to re-evaluate response time

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