Taakherschikking tussen verpleegkundigen en artsen

Navigeren door het bos van nieuwe professionals

Philip Moons, PhD, RN
Function differentiation – Task shifting

Physicians

Nurses

Health care assistants

Function differentiation

Task shifting
RCT: Secondary prevention of coronary heart disease: mortality

Follow-up by GP + nurse specialist

Follow-up by GP

5%

Time (months) from start of intervention

Percentage surviving

Nos at risk:

<table>
<thead>
<tr>
<th>Intervention group</th>
<th>670</th>
<th>649</th>
<th>628</th>
<th>602</th>
<th>577</th>
<th>377</th>
</tr>
</thead>
<tbody>
<tr>
<td>Control group</td>
<td>667</td>
<td>643</td>
<td>617</td>
<td>587</td>
<td>559</td>
<td>382</td>
</tr>
</tbody>
</table>

Murchie et al., BMJ 2003
RCT: follow-up of women with high-risk pregnancies

Relative risk: 4.3 (95%CI: 1.1-17.6)
RCT: management of urinary incontinence

Follow-up and treatment by GP

Follow-up and advice by nurse specialist

Borrie et al., CAMJ 2002
Nurses do make a difference!!
What kind of nurse do we need?

A nurse ≠ A nurse ≠ A nurse
What kind of nurse do we need?

By courtesy of G. Peeters
Level 1: Associate nurse

- Entry level of most nurses
- Merely at executive level
- He/she can take up the care for a limited number of patients (± 3 pat.), but needs supervision of primary nurse
- Normally, an associate nurse evolves towards a primary nurse
Level 2: Primary nurse

• The primary nurse is a role model in nursing practice
• He/she focuses on the executive level, as well as coordination of care
• Can take up care independently for several patients ($\pm 10$ pat.)
Level 3: Specialized nurse

- A nurse who has developed a ‘unit-overarching’ expertise with respect to one or more patient populations
- He/she has a consultant and educational role towards patients, nurses en physicians of the entire hospital, and sometimes for professionals from other organisations
- Will contribute to the management of care at the unit, but also in the hospital at large
Level 4: Advanced Practice Nurse

- Nurse with Masters or PhD
- Nurse who, through profound clinical and scientific education, developed towards an Advanced Practice Nurse (APN)
Difference Specialized nurse - APN

- Specialized nurse
  - Specialisation

- Advanced Practice Nurse
  - Specialisation
  - Expansion
  - Advancement
What kind of nurse do we need?

- APN
- Specialized nurse
- Primary nurse
- Associate nurse

By courtesy of G. Peeters
Patient outcomes of Advanced Practice Nurses

APN to complement physicians

Outcomes

- Death
- Disease

Epidemiological paradigm

- Disability
- Discomfort

Quality of life

- Dissatisfaction

Consumer perspective

- Dollars

Costs

Clinical outcomes

Patient-oriented outcomes

Consumer-related outcomes

Economical outcomes

Positive effects
Negative effects
No difference

Health Outcomes Institute, 1996
Patient outcomes of Advanced Practice Nurses

APN to substitute physicians

Outcomes

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Economical outcomes

Positive effects

Negative effects

No difference
Outcome: Nurses

• Traditional career of nurses:
  .... *in order to move up the career ladder, nurses need to move away from the bedside* …

• Interesting clinical career opportunities for nurses
Outcome: Organisation

Characteristics of a Magnet Hospital

- Working with clinically competent nurses
- Good nurse-physician relationships and communication
- Nurse autonomy and accountability
- Supportive nurse manager/supervisor
- Control over nurse practice environment
- Support of education
- Adequate nurse staffing
- Concern for patient is paramount
Outcome: Organisation

Characteristics of a Magnet Hospital

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- Adequate nurse staffing
- Concern for patient is paramount
And who will pay for this ???
RCT: follow-up of women with high-risk pregnancies

**Graph:**

- **Title:** Loses in hospitalization
  - **Legend:**
    - Control group
    - ANP group
  - **Axes:**
    - Y-axis: Number of days
  - **Data points:**
    - LOS prenatal hosp.: Control group 6, ANP group 6 (NS)
    - LOS delivery hosp.: Control group 3, ANP group 3 (NS)
    - LOS postpartum hosp.: Control group 5, ANP group 2

*Brooten et al., Am J Manag Care 2001*
RCT: follow-up of women with high-risk pregnancies

<table>
<thead>
<tr>
<th></th>
<th>Control group (n=88)</th>
<th>APN group (n=85)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total costs</td>
<td>4181968 US$</td>
<td>1685823 US$</td>
</tr>
</tbody>
</table>

Cost reduction of 2.5 million US$ in 85 patients

Brooten et al., Am J Manag Care 2001
RCT: Cost effectiveness of a Clinical Nurse Specialist in rheumatoid arthritis

Cost reduction of 324764 euro in 61 patients

<table>
<thead>
<tr>
<th>Costs per patient over 2 years</th>
<th>Clinical Nurse Specialist (n=61)</th>
<th>Inpatient group (n=62)</th>
<th>Day care group (n=61)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Average total healthcare costs</td>
<td>8092€</td>
<td>16581€</td>
<td>13252€</td>
</tr>
<tr>
<td>Average total societal costs</td>
<td><strong>11572€</strong></td>
<td>22448€</td>
<td>16896€</td>
</tr>
</tbody>
</table>
Study: Economic evaluation of health failure nurse management

- Sensitivity analysis
  - Reduction of hospital days with 10% = cost reduction of £18 million

- Reduction in length of stay of readmissions:
  - 50% reduction in hospital days results in a net benefit of £20 million/year.

An economic analysis of specialist heart failure nurse management in the U.K.

Can we afford not to implement it?

S. Stewart¹,², L. Blue³, A. Walker³, C. Morrison² and J. J. V. McMurray²

(Stewart et al, Eur Heart J 2002)
Will they take over my job ????
Should KB78 include 2 distinct professions? Nurse and Advanced Practice Nurses?
Conclusion

• A clear distinction between specialized nurses and Advanced Practice Nurses

• Advanced Practice Nurses provide a better quality of care, in a cost-effective way ....... if the APN is complementary to physicians

• Advanced Practice Nurses are important for patients, nurses and the organisation, and the health care budget
“We fund pills that make a difference. Why don’t we fund human services that make a greater difference?”

(Dr. Simon Stewart)