



CHSRF/CIHR Chair Program in
Advanced Practice Nursing

Clinical Nurse Specialists and Nurse Practitioners in Canada

Findings from a Scoping Review

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Specific Objectives

To conduct a scoping review of the literature and stakeholder interviews to:

- Identify and describe distinguishing characteristics of CNS and NP role definitions & competencies
- Identify key barriers and facilitators for effective development & utilization of CNS & NP roles



Overall Objective

To develop evidence-informed recommendations for the individual, organizational and system supports required to better integrate CNS and NP roles into the Canadian healthcare system and advance the delivery of nursing and patient care services in Canada



Sidebar: Effectiveness of APNs

Numerous randomized controlled trials (RCTs) and systematic reviews have shown that APNs are effective, safe practitioners who can positively influence patient, provider and health system outcomes

- Appendix C



Methodological Approach

- **Advisory Board**
 - 23 members – broad range of perspectives
- **Scoping Review of the Literature**
 - Exhaustive search strategies yielded total of 2397 papers
 - Title & abstract review of English papers by 3 teams of 2; French by 1
 - 963 after title abstract review
 - Full-text review by one researcher → 573
 - Data extraction form developed & piloted
 - Team divided into triads assigned literature specific to APN role(s)
 - Each paper extracted by 1 researcher
 - Additional 105 papers excluded → 468
- **Stakeholder Interviews**



Review: Inclusion Criteria

- All Canadian papers of any type or date
- International review papers 2003-2008
- International non-review papers if uniquely relevant or little Canadian literature on topic
- French or English language of publication
- Structure, process and/or outcome dimensions of at least one APN role addressed



Stakeholder Interviews (n = 62)

- Purposive selection of pan-Canadian, international, multi-disciplinary, multi-sectoral sample
- Semi-structured interview guide developed, pilot tested & translated
- Data collection Aug 2008 - Feb 2009
- Four interviews conducted in French
- Extended beyond saturation



Integration of Scoping Review and Interview Results

- Analyzed for themes that were similar, complementary, contradictory
- **Concentrated on barriers & facilitators from 1990 forward**
- Implications identified by research team and Advisory Board members



CHARACTERISTICS OF APN ROLES

BARRIERS & FACILITATORS



Characteristics of APN Roles

- **International consensus with countries at different stages of development:**
 - Registered nurse
 - Completed a graduate nursing degree
 - Expert clinician with advanced clinical decision-making skills and a high level of autonomy
 - Expanded scope of practice
 - Formal credentialing process



Canadian APN Roles

- **Clinical Nurse Specialist**

- Introduced in the 1960's in response to increasing patient acuity, specialization, complexity of care to support nursing practice at the point of care

- **Primary Health Care Nurse Practitioner**

- Introduced in the 1960's to provide access to health care in rural, remote areas with expansion to primary care in the community in the 1970's



Canadian APN Roles

■ **Specialty or Acute Care Nurse Practitioner**

- Introduced in the early 1990's to address shortages of MDs & residents in specialty areas of acute care
- Emerging Roles: NP Anesthesia

■ **CNS/NP role**

- Introduced in early 1990's to address resident shortage, especially in neonatology
- “CNS” added to NP title to legitimize & provide protected time for non-clinical activities
- Similar in function to ACNP role
- Separate role titling no longer required



APN Competencies

- **Clinical** - Direct care, consultation and support
- **Education** – Coaching & mentorship
 - Patients/public, students, providers
- **Research & evidence-based practice**
- **Organizational leadership & change management**
- **Professional development & scholarly work**

Continuum of APN Roles



Bryant-Lukosius, D. (2004 & 2008). *The continuum of advanced practice nursing roles*. Unpublished document.



Deployment

- Fluctuations in the supply/demand of APN roles with changes in health policies, MD supply & economy
- Better understanding/awareness of NP roles among key informants



Barriers & Facilitators

1. Role Clarity and Awareness
2. Role Development and Introduction
3. Educational Preparation
4. Legislation & Regulation
5. Role Implementation
6. Intra-Professional and Inter-Professional Relationships
7. Funding
8. Evidence



Role Clarity & Awareness

Role Clarity

- Role ambiguity occurs when APN roles not linked to clearly defined patient and healthcare system goals
- Results in underutilization or inappropriate use of roles & competing expectations, vulnerability
- Attributed to poor planning for role introduction
- A bigger issue for CNSs because role has many dimensions & changes based on patient needs
- Need clear description of roles, scope of practice, APN involvement in role definition, organizational support



Role Clarity & Awareness

Healthcare Team Awareness of APN Role

- Other professionals (including nurses) not aware of scope of APN practice
- Leads to ambiguous role expectations, concerns about scope of practice, lack of clarity about what APN can and can't do and extent of role overlap with team members
- Strategic communication plan essential to achieve broad awareness and understanding of role
- Nurse leader and physician champions recommended



Role Development & Introduction

Ad Hoc Role Development and Implementation

- ***Planning***
 - Poor planning vs systematic needs-based planning can lead to failure to meet priority patient needs, role confusion & inconsistent expectations

- ***Stakeholder Involvement***
 - Failure to involve stakeholders early can lead to problems related to role clarity, boundaries, and acceptance



Role Development & Introduction

Utilization of the APN Role

- Balance between clinical and non-clinical activities difficult with insufficient administrative support and competing time demands
- Without support, protected time, resources to participate in education, research, leadership activities, lose the opportunity to advance the profession



Role Development & Introduction

Recruitment and Retention

- Difficulties recruiting & retaining APNs due to unhealthy work environments, uncompetitive salary levels or nursing shortages result in a gap in meeting the needs of patients and/or communities



Role Development & Introduction

Fragmented Approach to APN Role Integration

- Lack of co-ordination across Canada
- Pan-Canadian approach may promote role clarity, ensure consistent and high standards, facilitate labour mobility



Recommendations & Report

- Multi-stakeholder/decision-maker Roundtable held April 16, 2009 hosted by CHSRF
 - Recommendations developed
- Watch CHSRF website for details and release of our final report
 - Fall 2009