

Improving the Role and Skills of the Nurse Practitioner in the Emergency Department

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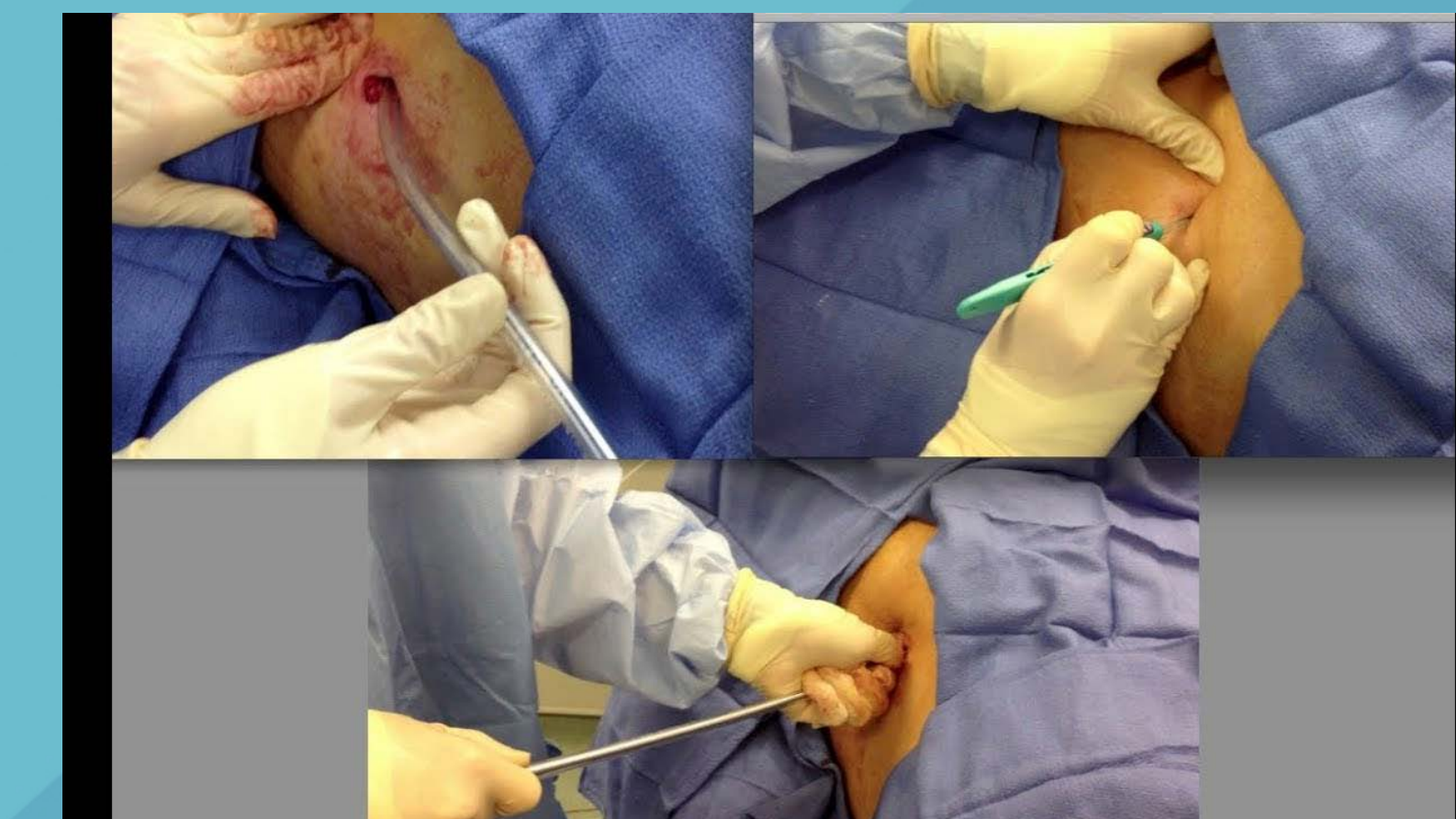


Purpose

The purpose of this project is to develop a program during onboarding/orientation for new NPs working in the ED. This program would provide education on a variety of procedures that the NP is qualified to do within their scope of practice. The focus of this project will be on central line placement, intubation, and chest tube placement. The goal is that this program will help the NP with self-confidence and competence of each procedure, as well as utilization of the NP to the full extent of their license and scope of practice.

Background/Literature Review

- Academic programs that help train NPs in the specialty area of the ED did not exist until 1990, therefore the knowledge and skills needed to be ready for practicing in the ED may vary based on prior experiences (American Academy of Emergency Nurse Practitioners, 2018).
- With the gap in education specific to the ED, organizations need to provide competencies that are specific to the type of care provided in the ED to help the NP practice safely (American Academy of Emergency Nurse Practitioners, 2018).
- NPs in the ED are trained to care for the acutely ill and those with life-threatening conditions (Woo et al., 2017). Improving the skill set of the NP in the ED allows for physicians to utilize APRNs to the full extent of their license and provides some autonomy (Woo et al., 2017).
- Many physicians believe that if the role of NP were clearly defined there would be a decrease in wait times, improvement of patient experiences and care (Ruiz, 2020).
- Invasive procedures are a large part of the care provided in the ED. Until the NP is competent in completing such procedures, they are not able to practice autonomously (Avadhani, 2017).



Nursing Theory

- Patricia Benner's Novice to Expert Model was first developed in 1982 and was used to show how individuals improve their skills and knowledge as they continue to grow from novice (new) to expert (experienced) (Ozdemir, 2019).
- Benner used this model to show how nurses develop their knowledge, skill, clinical competence, and comprehension of care provided to the patient through training and experiential learning (Ozdemir, 2019).
- To move from novice to expert, one must move through phases and this is based on clinical experience and length of time working in the profession. The phases include novice, advanced beginner, competent, proficient, and expert (Ozdemir, 2019).

Methods

- As nurse practitioners continue to be on the forefront of patient care in the emergency department, research continues to help identify their role as providers and support the efforts of working to the full extent of their licensure. To ensure the NP is competent in providing well rounded care to all patients, the student developed an on-boarding education program for invasive procedure for new hire NPs working in the ED.
- Three procedures were selected to be the focus of this project and include intubation, chest tube insertion and central venous catheter placement.
- During onboarding, the NPs will be expected to attend a skills day to learn how to complete these procedures that is hosted by a physician the currently works in the ED.
- After learning the procedures and being checked off by the physician for adequate knowledge of each procedure, they will then be expected to complete a computer module that redemonstrates the procedures.
- The NP will be expected to observe each procedure, complete each procedure with observation of the attending physician and then do each procedure independently.
- Each year following, the NP will be expected to revisit the computer modules and be revalidated by a physician observing completion of each procedure. This module can be used as reference for the NP at anytime to aide in their confidence of being a provider in the ED.

Outcomes

- Physicians in the ED are not always accepting of an NP completing invasive procedures. For the role and skills of the NP in the ED to improve, physicians, patients and staff must have confidence in them. They need to be able to do procedures that are within their scope of practice as often as an opportunity arises.
- Good outcomes and bad outcomes will be recorded, and the NP will be able to reflect on each procedure recognizing their strengths and weaknesses. Seeing the areas of improvement will allow them to continue to grow as an ED provider.
- Physicians are now allowing the NP to work more independently by allowing them to complete invasive procedures. Building trust and rapport with the physician has helped make transitioning into this project easy.

Implications

- Providing new practitioners working in the ED education on how to complete invasive procedures adds to their value as a provider.
- Utilizing an on-boarding program and a skills day to ensure competence of each is needed to help build rapport and trust with attending physicians.
- Allowing the NP to complete invasive procedures improves their role and skills when providing emergency care to patients.

Conclusion

The purpose of this project was to improve the role and skills of the NP in ED. After completing the research, it was evident that education needed to be provided for NPs to be utilized to the full extent of their licensure. Providing extra education during orientation will allow for the NP to be prepared to complete the most common procedures independently and maintain their learned skills.