



Difference in Perceived Scope of Practice for Advanced Practice Providers

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Background

- In 2003, the Accreditation Council for Graduate Medical Education (ACGME) significantly restricted resident work hours and subsequently increased the use of APPs in the acute care setting.
- In 2010 the Institute of Medicine Future of Nursing Report called for nurses, including advance practice nurses, to practice to the full extent of their education and training.
- Even with increased numbers of advanced practice providers (APPs) working within intensive care units, there is still a lack of generalized understanding between APPs/MDs regarding scope of practice for these healthcare practitioners.

Purpose

- The purpose of this study was to understand the difference in perception of Advanced Practice from APPs versus physicians.

Methods

- A descriptive, cross-sectional study design utilizing anonymous Survey Monkey tool was sent to all APPs and Physicians employed within the organization.
- Data was analyzed using a Mann-Whitney U Test with a statistically significant *p*-value less than 0.05.

Results

Statistically Significant Difference in Perceived Level of Supervision

Conducting patient/family care meetings
Perform/document physical exam
Formulate active diagnosis
Place orders
Formulate overall plan of care
Discuss plan of care with discharge planner/allied health

- There were a total of 115 respondents, 79% were APPs and 21% were Physicians.
- The only survey question that did not achieve significant statistically difference in perceived level of supervision was the ability to collaborate with other specialties in coordinating patient care.
- Respondents agreed:
 - they would recommend an APP to care for themselves or a family member
 - organization allows APPs to practice to the fullest extent of their license as allowed by state and federal statutes.

Discussion

The culture at the organization supports components of quality care from APPs. However, APPs feel like they could provide better care if practice limitations were lifted, allowing independent practice. Limitations of this study include limited response to survey from physicians within the organization.

Emerging themes included: independent practice, team communication, lack of knowledge regarding scope of practice and compensation.



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