

NURSE PRACTITIONERS: A Provider Group That Matters

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By coming into an exam room as “Sue,” not “Dr. Sue,” NPs are able to connect with patients in ways that encourages a special relationship.

Nurse Practitioners have a unique role in healthcare.

NPs leverage their special relationship with patients to promote a holistic model of care: going beyond traditional assessment, diagnosis and treatment, to focus on prevention and wellness through education and counseling.

Preventative health and wellness is central to NP practice.

NPs see their role as an equal partner with patients and believe regular physical exams are one of the most important tools in improving health outcomes. The counseling NPs provide is often steered toward patient-driven lifestyle modifications, like smoking cessation or weight loss plans.

NPs operate optimistically, despite barriers.

High confidence propels NPs beyond barriers, which are mounting from budget strapped delivery systems. Their perservance keeps them at the patients side and deeply committed to the nursing process.

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Note about methodology:

The above results are based upon qualitative research conducted by APCO Insight among Nurse Practitioners on June 2016 at the AANP National Conference.

A PROVIDER GROUP THAT MATTERS

Main Story

In a changing health care system, Nurse Practitioner morale is high – an overwhelming majority of NPs (93%) say that they feel “positive” about professional morale and the current state of the medical profession. NPs see their role as unique, as they are expanding the nursing approach within the health care delivery system. This approach facilitates strong bonds with patients, not only in the realm of assessment, diagnosis and treatment, but also in education and intervention. As such, NPs are not just reactive providers of acute care, but partners in prevention and wellness – a critical role that helps shift our current “sick care” system to one more focused on “health.” NPs are able to use their unique skill set to work in chorus with patients and other HCPs to deliver positive health outcomes. As we consider the future of health care we should be sure to look to NPs as key partners in furthering health and wellness on the front lines of health care delivery.

Unique Role of Nurse Practitioners

Most NPs find that internet use is a signal of patients who really do want to change their habits – some even take that as a signal to be more aggressive with a patient’s treatment plan and give patients more robust information. The challenges with internet use come when NPs find the need to “course correct” misinformation that often distracts from enacting appropriate education and treatment plan:

“We connect better with our patients, we take the time to learn their name, touch their shoulder... doing those open ended questions, letting [the patient] talk to you, not you lecturing the patient.”
(Family Practice NP)

Another NP said:

“It’s about communication – a lot of medical schools are now getting the training that we have as nurses. They call it ‘doctoring’ and its therapeutic communication and they never had that before.” (Geriatric Care NP)

As a result of their special relationships with patients, NPs are able to not only assess, diagnose and treat patients, but also provide education and intervention services to connect patients to the preventative health and wellness services that patients need to make substantive changes. To this point, we found that NPs see lifestyle modification (93%), dietary modification (71%), and smoking cessation (65%) to be the top three most important preventative health services that they offer.

Barriers in the Industry

One of the biggest trends in the medical industry is the constraint on time that HCPs can spend with patients. Nurse Practitioners are no different – they find it hard to cover everything they would like to in what is often a 15 minute visit. The burden is then shifted to the patient, who must find time to come back for another appointment:

“It’s hard to allocate an hour of time when you have 80 patients.” (Emergency Room NP)

“We have a set amount of people that we have to see every day, so we have a 15 minutes visit and we have to keep the patient focused and then they have to come back.”
(Women’s Health NP)

“... There is always pressure about numbers, but still if the patient is sitting in front of you with issues, you just reschedule.” (Internal Medicine NP)

The burden can be even higher for NPs who work in for-profit clinic models. Not only do they combat the time constraints detailed above but they also cite difficulty in meeting goals set by their corporate entities, and completing other duties that are pushed onto medical staff:

“I work in a retail clinic that is focused on making money, and so it’s hard to cram everything into a 15 minute visit when they look at your numbers... It’s hard to do a whole visit or focus on everything you want when you have walk-ins... I push vaccines, but I don’t think you can sit and address every need because there is not enough time.” (Family Practice NP)

“We’re in a race to get to the wellness visits first. We’re scheduled 2 or 4 wellness visits a day to beat Humana, United so that we get that wellness money even though it’s prevention, it is profit driven.” (Family Practice NP)

“The retail model is tough, you are the front desk, the Medical Assistant, the NP, the janitor.” (Family Practice NP)

The Burden of Self-Care & OTC

Perhaps the biggest barriers that Nurse Practitioners face is being able to practice to the extent of their license. Due to limitations from insurers, NPs do not get payment for providing services “outside of their contract.” Healthcare systems not only jam NPs with busy schedules that limit their ability to treat and counsel patients, it also limits them for doing all they can, given their level of expertise. This commonly affects specialists and NPs who practice in the OBGYN or Women’s Health space. Many women consider their OBGYN NP to be their primary care provider, but issues arise when

insurance companies will not let them operate as such – limiting the healthcare services they can offer patients:

“... [Women’s healthcare providers] are now considered a specialty. If you are not pregnant you have to see a primary care provider. Insurance will not allow me to be a primary care provider, we can take care of boobs, ovaries, uterus, cervix and that’s all we can take care of unless you are pregnant.”
(Women’s Health NP).

“It is care with professional advice, you educate them on how to manage diabetes, weight control, exercise... but you are there to prescribe them things they need.”
(Family Practice NP)

Opportunities

In a time of challenges to our healthcare system, from availability of qualified providers to patient access care, it is important to remember the value that NPs can bring as front-line providers of primary care. Their nursing approach seamlessly interweaves both treatment and prevention, bringing benefit to individual patients and, in turn, to the way our society thinks about healthcare. NP’s natural approach to patient education empowers individuals to be equal partners in their health and wellness. NPs do not seek a claim beyond other HCPs, as one NP stated:

“We bring an aura, or a sense. Everyone says that NPs are better than a doctor, I say, no, we are not better – we just approach care differently.” (Family Practice NP)

But NPs do deserve public recognition and it is our shared opportunity to share their story.

NURSE PRACTITIONERS & PREVENTATIVE HEALTH

A Natural Ally

“
I'd rather prevent something than treat it.”

Patient education is at the center of prevention and wellness

NPs weave prevention and wellness into every exam they give, and they are careful to take their time and get a complete patient history. NPs are always look at the entire patient, not just what brought the patient in.

Prevention and wellness is at the core of what NPs do

How much of a role does preventative health and wellness play in your day-to-day practice?

60% Strong Role

Vaccinations are an essential component

How often do you make a strong recommendation for vaccinations?

93% Always

Prevention is equal parts screening, education and intervention



NPs & PREVENTATIVE HEALTH IS A NATURAL ALLY

Main Story

Nurse Practitioners are hardwired for prevention and wellness – in fact, 60% of NPs say that not only does it play a strong role in their day-to-day practice, but the same 60% say that in the past five years there has been an increase on the focus of preventative health and wellness. To achieve preventative health and wellness goals, NPs rely on their nursing training and are supported by resources provided by their practice to help guide patients in the right direction after they leave their offices. Though NPs are strong advocates of vaccines and feel confident making recommendations, a fractured system makes it hard to follow through.

Preventative Health

Nearly all Nurse Practitioners (93%), say that NPs play a greater role in providing preventative health and wellness services than other healthcare providers. Not only is there is wide agreement among NPs about the role they play, but also that the focus on preventative health and wellness has increased as seen below:

Most NPs feel as though prevention and wellness is at the core of what they do and many point to this distinction in their role to explain their value in the healthcare system— that NPs focus on wellness, whereas physicians focus on treating illness.

When asked about what preventative health and wellness services means to them, NPs talk about how preventative health and wellness is weaved into every visit:

“...taking the opportunity to introduce preventative when [a patient] comes in – even if they come in for something else...asking, ‘by the way when was the last time you had a pap?’” (Family Practice NP)

NPs also stress that prevention and wellness goes beyond screening and includes equal parts education and intervention, some go as far as to say it is the center of what they do:

“...we can get at [hypertension, heart disease, diabetes] from a prevention standpoint by teaching them how to eat health, how to engage in regular exercise, smoking cessation ...” (Family Practice NP)

NPs excel at creating connections with patients to solicit and share information to improve health and wellness. NPs do not actively seek out information, and instead rely on their professional training and passively receive and give information as it becomes relevant to a specific patient. NPs find that patients gravitate towards office created pamphlets, handwritten notes about treatments plans and OTC medication, and websites hosted by disease organizations, as preferred methods of educational resources

“Depending on if they have access to the internet I will hand them physical [paper] education information as well as speaking to them in their visit.” (Endocrinologist NP)

“With a lot of the chronic diseases, hypertension, diabetes, a lot of the guidelines developers have gotten very good at putting up patient information sections on their websites and I’ll tell patients, go and read more about this, these are the resources I like.” (Emergency Room NP)

But NPs also rely on their relationships with patients to inspire change – this relates back to how NPs are trained:

“...nurses are taught from a prospective of therapeutic presence and establishing a healing relationship and that means that we are equipped to actively listen hear where the

Often, the focus on prevention is thwarted by pressure to keep appointments short and treatment focused. NPs regularly have to ask patients to schedule additional appointments so that they can meet all of a patient’s need:

“...It’s hard to cram everything into a 15 minute visit when they look at your numbers... It’s hard to do a whole visit or focus on everything you want when you have walk-ins...I push vaccines, but I don’t think you can sit and address every need because there is not enough time.” (Family Practice NP)

Vaccines

Vaccines are an area where Nurse Practitioners walk the walk, not only do 64% of them rate vaccines as “important”, but 92% of NPs say they “always” or “nearly always” make a strong recommendation for vaccinations. Furthermore, all NPs in this study reported that they were annually vaccinated against the flu.

Despite Nurse Practitioner’s qualifications and confidence in making vaccine recommendations, the barriers are where the rubber meets the road. Vaccines are not always available in any one office, and patients often have to go elsewhere to get recommended vaccines. One NP notes that:

“I struggle with vaccines because we don’t have them at the clinic. Our patients have to go to the health department we have TDAP and flu when it comes out...I know what they need but they can’t get it at the clinic.” (Internal Medicine NP)

Given the cost of vaccines, NPs report having to make strategic choices about which vaccines to keep in stock.

Offices must have enough patients who receive a vaccine to keep them from throwing out unused vaccines. In short, NPs weigh financial risk against patient reward:

“We just threw away four boxes of fluvirin because we gave everyone we could the flu vaccine but we still had leftovers and they expired and we had to throw them away. That’s a lot of money that we just flushed. [And,] we just threw away four boxes of Gardasil. Those are the only ones we keep vaccination wise [because we think we will have enough turnover and there will be less waste].” (Women’s Health NP)

Additionally, systems are so fragmented that if patients are referred to another location for vaccinations, there is no way for NPs to know if patients actually received the recommended vaccine:

“The systems are not interconnected so I don’t know what treatment of vaccines people have gotten – there is so much paper work to get records when I am their primary care provider.” (Family Practice NP)

NPs are a strong, natural supporter of prevention and wellness strategies, and it positively differentiates NPs from other HCPs. Barriers in the current medical model present challenges that disrupt their effectiveness, but NPs persevere – instead focusing more on their patient relationships to inspire change. Advocates for prevention and wellness strategies, especially vaccines, will find willing partners with NPs. As a practice group that is on the front lines of primary care, we should think of them as a natural ally in preventative health and wellness delivery.

THERE'S NO "I" in Self Care

NPs want partnership, not independent self care

NPs are there to encourage patients as they embark on a path to wellness, but also to tweak treatment plans and offer sound advice. To create an analogy, patients are the drivers and HCPs are the navigators.

Self-care is signal of patient empowerment

NPs take self-care, whether bringing information to office visits or reporting self-care treatments, as markers for more engaged patient interactions. This often leads to more robust information sharing and collaboration in treatment plans.

NPs resoundingly believe in self-care has benefits

improves health outcomes
100%

Patients should be equal partners
with HCPs in making
healthcare decision

87%

NPs know that for changes to be made,
patients have to feel in control – of
themselves, their information and
their treatment options.

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Note about methodology:

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THERE'S NO "I" IN SELF CARE

Main Story

Nurse Practitioners (NPs) pride themselves on their unique connection with patients. They believe that the nursing process encourages a more holistic assessment of the patient, often based on a convivial process where patients are apt to share their experiences and seek the counsel of their health care provider. In this light, it is not surprising that every NP we spoke to said involving patients in treatment plans improves compliance and outcomes. What is surprising is that only 40% of NPs surveyed believe that patients should be encouraged to do research and gather their own information about their conditions and treatment options. In conversation, NPs report that self-care and OTC use and misuse is common among patients. This exposes a critical insight about the movement toward patient empowerment: Nurse Practitioners advocate for partnership with patients, not an unsupported self-care strategy.

Defining Self-Care

NPs see self-care as patient driven care under the advisement of an HCP – patients are the drivers and HCPs are the navigators. They see an empowered patient as a thoughtful one who considers a wide-range of HCP endorsed options and seek information. NPs and other HCPs point patients towards credible information like credentialled websites and office handouts, write notes about OTC medicines and treatment plans, provide information about self-help groups, and recommend alternative therapies, like seeing a chiropractor, to put patients on the right path to wellness. In the end, these HCP endorsed options still require action from the patient to complete their care regime.

To this point, we found that NPs see lifestyle modification (93%), dietary modification (71%), and smoking cessation (65%) to be the three most important preventative health services – all services that are enhanced with HCP oversight a direction, but still require patient action.

OTC Use and the Internet

Most NPs find that internet use is a signal of patients who really do want to change their habits – some even take that as a signal to be more aggressive with a patient's treatment plan and give patients more robust information. The challenges with internet use come when NPs find the need to "course correct" misinformation that often distracts from enacting appropriate education and treatment plan:

"Web MD can be tricky, I value that they are empowered but on the other hand they will come in with a preconceive diagnosis and that makes it a little bit harder because they might challenge what we have to say..."
(Family Practice NP)

"[Dr. Google] is a place to start, we've become skilled at screening for that, there was a bit of a learning curve, but I've got to hand it to the patient who is willing to do the work."
(Women's Health NP)

Of note, specialists are the most negative about self-care and "Dr. Google" is a top of mind complaint, they find that patient mistakes or impressions are hard to correct and that patients often over generalize internet content:

"...the internet and the availability of online resources which is a great thing in some respects... but then the downside is that you

get a lot of patients who read things, who go online and get on forums and sites that are not medically relevant...generalize one person's reaction to everybody..."
(Endocrinology NP)

The Burden of Self-Care & OTC

NPs resoundingly believe in patient empowerment and self-care. They see the value in OTC use and routinely screen for and encourage use of OTCs to engage patients in their own treatment. However, NPs advocate for continued oversight by trained HCPs of OTC use to encourage appropriate use, as well as reduce misuse:

"You want to empower people, but you need people to be aware on how they can harm themselves." (Acute Care NP)

"[Self-care] is care with professional advice... they don't do everything on their own. You educate them on how to manage diabetes, weight control, exercise, diet, but you're going to be there to prescribe metformin if they need that." (Family Practice NP)

Still, there are cases where self-care and OTC drugs add to the burden for Nurse Practitioners. NPs regularly screen for prescription medications and OTC medications, however, they have to be persistent in their screening efforts – many patients do not consider herbal remedies or over the counter medications as medications. This is problematic for NPs because these are still drugs that could interfere with prescribed medications or treatments.

"You would be surprised, people don't think they are taking medications, but then will talk about taking vitamins, Benadryl...It's scary because people think that they are doing well

for themselves and they are not. Like taking old anti-biotics."(Women's Health NP)

"I ask, 'Who else are you seeing for your health and wellness?' because you find out that they are seeing that natural path down the street who I'm sure is prescribing some weird voodoo cocktail. At least it makes me aware that I may have to consider herbal implications of medications I'm prescribing. Herbalist down the street."
(Emergency Room NP)

Even though OTCs increase availability and access to medication, patients still need advisement from NPs – just because it's OTC doesn't mean it is safe to take however the patients sees fit. Education for OTCs remains just as important as instructions for prescription medications.

"You still need to be educated on why you shouldn't take too much Tylenol – because it of your liver." (Family Practice NP)

"OTC isn't necessarily good – they grab that Flonase, and they might not need it but they've got it and they are going to use the fire out of it... If it's over the counter then it is safe, so if a little bit is good I'll take a whole lot of it. I've got people OD-ing on Benadryl."
(Hospital NP)

Our research shows that NPs are strong advocates for patient empowerment. Connecting with patients and offering education to promote health and wellness are at the core of NP's unique role in healthcare. However, they are wary of unsupported self-care, as it exposes potential risk, such as inappropriate and/or delayed assessment, diagnosis or treatment. According to NPs, self-care works best when patients are considered equal partners in their care – shifting the balance toward either side is a benefit to neither NPs nor patients.