





LOUISIANA STATE UNIVERSITY HEALTH NEW ORLEANS SCHOOL OF NURSING YEAR OF THE NURSE AND MIDWIFE

LSU Health New Orleans School of Nursing celebrates the Year of the Nurse and
Midwife with this position statement series to provide the public with information
on the nurse's role within the health care environment, create public awareness regarding nursing's contribution and impact in health care, and disseminate our
nursing school's contribution to workforce development and health care.



Louisiana State University Health New Orleans School of Nursing Year of the Nurse White Paper Series:

Nurse Practitioners Meeting Healthcare Needs for all Populations

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Nurse Practitioners Meeting Healthcare Needs for all Populations

Nurse Practitioners (NPs) have been meeting the needs of patients with inadequate access to healthcare for over 50 years (American Association of Nurse Practitioners [AANP], 2020a). As the physician workforce is strained by the volume of patient needs, burnout, and a lower output of physician graduates in primary care and specialty medical roles, NPs have served as primary care and acute care medical providers in some of the low-income areas in the U.S. and internationally (Frogner et al. 2020; Pohl et al. 2018). As the World Health Organization's (WHO) proclaimed 2020 as the International Year of the Nurse and Midwife, NP practice is directly aligned with WHO's initiatives to "play a vital role in providing health services" to communities worldwide (WHO, 2020). The scope of this article will focus on NPs within the United States.

History

During the late 1950s and early 1960s, specialization in medicine began its expansion creating a shortage of primary care physicians. Rural areas were impacted the most by the expansion of medical education. Primary care physicians affected by the shortage decided to recruit registered nurses with clinical experience to collaborate with them in an effort to meet the primary care needs of families. In 1965 Loretta Ford, PhD, RN partnered with a physician, Henry Silver, MD, to create the first educational program for NPs at the University of Colorado focusing on family health, disease prevention, and the promotion of health (American Association of Nurse Practitioners [AANP], 2020a; Simmons University, 2020). In 1967, Boston College initiated one of the first master's program for NP education and by 1989 99% of all NP education programs were either master's or post-master's degree programs (American Association of Nurse Practitioners [AANP], 2020a). By 2004, the American Association of Colleges of Nursing (AACN) recommended, and was co-sponsored by the National Organization of NP Faculty (NONPF), to transition NP education and (all advanced practice nurses) to a professional clinical

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doctorate or practice doctorate – the Doctor of Nursing Practice (DNP) (American Association of Colleges of Nursing, 2004). As of April 20, 2018, the NONPF commits supporting all entry-level NP education programs' transition to a DNP degree by the year 2025 (National Organization of Nurse Practitioner Faculty, 2018). The evolution of NP education was inspired by the need to position and enable NPs to meet the growing demands of complex health systems and populations.

Qualifications

Since inception of a NP certificate program, NP education has evolved to doctoral level education with population-focused training in the areas of family practice (FNP), internal medicine (adult-gerontology), pediatric, and women's health (National Council of State Boards of Nursing [NCSBN], 2010). The advanced education qualifies NPs to diagnosis and treat patients in the promotion of health and management of acute and chronic diseases across multiple settings. National board certification is required for licensure in the U.S. and validates the graduate's knowledge in population-focused competency domains in primary care or acute care scopes of practice (Blackwell & Neff, 2015; Kleinpell et al. 2012). The certified NP role is defined as a graduate prepared and state licensed advanced practice registered nurse (APRN) who is enabled to practice as a primary care and/or an acute care medical provider (NCSBN, 2010). Nurse practitioners today practice autonomously or as a part of a healthcare team (AANP, 2019b; Health Resources and Services Administration [HRSA], 2016).

Filling the Gap

Workforce Data

The demand for improved access to care across the nation continues to rise. Primary care providers are particularly needed to meet this demand, especially in rural and other underserved areas. The number of NP graduates has continued to rise over the last 10 years, while the number of physician graduates has not (HRSA, 2016; Pohl et al. 2018). Furthermore, the number of physician graduates into primary care residencies is less than 10% (National Residency Matching Program [NRMP], 2018).

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Fortunately, the NP workforce is qualified and being enabled across the nation to meet the diverse needs of American populations.

As of December 2019, there are more than 290,000 licensed NPs in the United States (AANP, 2020b). Approximately 46% of NPs are between the ages of 30 to 49 years old and approximately 46% are between the ages of 50 to 64 years old. More than 87% of NPs self-reported as White , 4.5% as Black, 3.1% as Hispanic, 3.2% as Asian, 1.7% as multiracial, and < 0.5% as Pacific Islander or Native American. The vast majority of NPs self-identified with the female gender. More than 87% of all NPs practice in primary care settings and approximately 70% of all NPs accept patients covered by Medicaid or Medicare health insurances. Across all setting types, NPs care for an average of three patients per hour and/or 17 patients per eight-hour day often equivalent to or more than non-NP peers. Nurse practitioners diagnose, prescribe, interpret diagnostic tests, perform invasive procedures, consult with and refer to all healthcare professionals, perform mental health assessments, perform sports physicals, and perform occupational evaluations all in an effort to meet the needs of their patients – whatever the needs are (AANP, 2019).

Practice Outcomes

Multiple studies reported the benefits and high quality outcomes yielded by NP care. Kirkpatrick et. al. (2020) reported the reduction in falls, use of restraints, transfers to an acute facility, and incidence of polypharmacy was the result of the care provided by NPs in long term care facilities. D'Afflitti et al. (2018) found that NP-physician care teams in primary care improved provider satisfaction and increased patient access. Norton et al. (2016) found a reduced length of stay following direct current cardioversion in an outpatient NP-managed program. Woo et al. (2017) reported NPs in the emergency department and critical care settings were effective in reducing length of stay, cost, time to consult and treatment, and improvement in patient satisfaction. Williams (2019) described how pediatric NPs improved the education to parents about the safety and efficacy of vaccinations for children of all ages through one-on-

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one patient advocacy, thereby increasing vaccination rates. Finally, there are more than 30 years of positive patient outcomes equivalent to or above those of physicians that has gained the support of multiple national healthcare organizations, including the Institute of Medicine and Robert Wood Johnson Foundation, who advocate for the NP's role in meeting unmet healthcare needs across the nation.

Impact

Nurse practitioners are often considered the "health care provider of choice" for many Americans due to higher rates of patient satisfaction, more health counseling, and the added focus on prevention, communication, and follow-up (AANP, 2019). Roche et al. (2017) reported how NPs are able to provide effective, quality healthcare with better patient satisfaction and lower health care costs due to lower utilization of unnecessary tests and hospital visits, and improved management of chronic disease with better adherence to recommended guidelines. The NP workforce positively impacts access to healthcare for America's most underserved populations with 15 % working in rural settings and 90% of patients seen being below the poverty level (AANP, 2019).

2020 is the Year of the Nurse: NPs Meeting the Charge

The World Health Organization (WHO) declared 2020 as the "Year of the Nurse and Midwife" in celebration of the 200th anniversary of Florence Nightingale, the founder of modern nursing. The WHO celebrates the devotion nurses have for communities in need worldwide. While nurses are committed to meeting patients' needs, millions of nurses (including NPs) are still needed in the workforce worldwide (WHO, 2020).

Increasing access to care for all populations and reducing the burden on the healthcare system by NPs originated in the United States, however more and more countries are beginning to adopt the role for the same reasons the American workforce did – increase access to timely, effective, and high quality care. The International Council of Nursing (ICN) reports NP practice is now recognized in Cambodia, Canada, Czech, Finland, Hungary, India, Ireland, Israel, Jamaica, New Zealand, Nigeria, Norway, and South

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Africa (International Council of Nursing [ICN], 2020). The NP role is the most common advanced

practice nursing role outside of the United States (WHO, 2020).

Louisiana State University School of Nursing

The Louisiana State University School of Nursing (LSUHNO SON) offers seven population-

focused NP concentrations and four dual concentrations within a Doctor of Nursing Practice (DNP)

program aimed to meeting the diverse healthcare needs of Louisiana communities (See

https://nursing.lsuhsc.edu/np/ for more information). In collaboration with academic-practice partners

locally, and community-based private and federally-qualified clinical agency affiliates across the

Southern regions of Louisiana, NP students learn to meet the complex needs of medically underserved

populations for hundreds of practicum hours in primary care, specialty, and hospital settings.

Systems-level leadership, nursing informatics, health policy, and the translation of the best

evidence into practice are integrated in the formation of the DNP-prepared NP graduate ready to practice

at the national scope of practice. Quality improvement, knowledge-to-action, and policy analysis projects

are implemented within community-based clinics, rural clinics, mental health clinics, and community and

academic hospitals.

As the only NP program within an academic health science center in LA, students are privileged

to learn among interprofessional teams including medical, public health, and allied health students.

Interprofessional clinical learning experiences contribute to team-based patient care and the development

of practitioners able to function within and/or lead teams for improved patient outcomes.

Global Health Focus

The LSUHNO SON aims to "improve nursing, population and global health outcomes in dynamic

health care environments" (LSUHSC SON, 2020). The NP curriculum is enhanced with a 10-day global

health learning experience to Peru affording NP students the opportunity to learn epidemiological factors

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of disease burden of a lower-middle income country. Overcoming language barriers, foreign terrain, climate changes, make-shift clinic spaces, and limited supplies provides the students with opportunities to exercise the resourcefulness required to meet patient needs.

Conclusion

As 2020 is the International Year of the Nurse and Midwife is being celebrated, the NP's role in meeting the needs of patient populations and reducing healthcare burdens across the nation must not be forgotten. As the NP role and practice continues to expand worldwide, NP educational programs will need to include global healthcare models, systems, and practice in the curriculum. The LSUHNO SON prepares professional NP leaders that function as advanced practice nurse clinicians and scholars aiming to transform nursing practice and health outcomes for U.S. populations and abroad.



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