Developing a Nurse Practitioner Role

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The Role

- Comprehensive biopsychosocial assessments
- Develop management plans for nurses
- Assist medical staff formulate accurate diagnosis
- Link into community services
Scope of Practice

- Provide mental health treatment and management within a general hospital setting

- Includes:
  - prescribing medication specific to the specialty from a specific formulary
  - ordering pathology tests and radiological investigations specific to the area
  - Referring to psychiatrist for 2nd opinion or guidance
  - Collaborating with GP in preparation of discharge
Clinical Skills

- Understanding of:
  - risk assessment
  - abnormal illness behaviour
  - mind/body interaction
  - patient needs, nurses’ needs, doctor’s needs, and allied health workers needs
  - ability to conceptualise problems
  - management of patient
  - communication skills
Knowledge

- Understanding of:
  - Medical conditions
  - Pharmacy
  - Pathology
  - Radiology
  - Behavioural and emotional and cognitive responses to illness
  - Interpersonal dynamics
  - Personality and coping styles
Are NP’s substitute doctors?

- Significant differences in the role.
  - NP’s work in one area of expertise only
  - NP’s work within strict clinical guidelines within their area of expertise
  - NP’s work independently, but in collaboration with medical officers
  - NP’s can help medical officers provide a service to a greater population by undertaking the often time consuming process of assessment and preliminary investigations
Setting up the role

- Identify an area of need
- Put forward a proposal to area directors
- Form a working party of key stakeholders
  - Nursing, medical, pathology, radiology, pharmacy, consumers
- NP to proceed through a rigorous credentialling/authorisation process through NMB
- Develop clinical guidelines with specific thought into which section the NP will work. Will need particular emphasis on which medications the NP will prescribe
So what does it feel like to be a NP?
Adjusting to new roles of nurses

- The Minister for Health recommended the implementation of NP roles across the state.
- NP Mental health role began in May 2002 through initiative of Sydney West Area health service to enhance service provision to patients presenting with Mental Health Problems to the emergency dept of Westmead Hospital and to patients at auburn hospital.
Initial reaction of the medical council

- Information-seeking
- Concern, interest
- Scepticism
- Resistance, caution
Response

- Concerns about the NP role
- Realisation that NP roles were being implemented anyway due to the instructions given by the Minister for Health
- Acknowledgement of the role but a reluctance to employ unknowns
Response to NP role in mental health

- Clarification of the restrictions in practice
- Acknowledgement of the rigorous process NPs go through
- Acceptance that NPs work with clear and ethical guidelines
- Wanting to employ more
NPs Working independently?

- Collaborative role
- Supervised
NP Roles

- NP interventions vary based upon the NP’s individual credentials, training, competence, and scope, rather than using the proxy of supervision as the primary eligibility requirement.
Collaborative Role

- Collaboration involves physicians and nurses working together as colleagues, working independently within the boundaries of their scope of practice.
- This approach is the most common model of regulatory requirement for NPs practicing in the USA, and the one that fits our practice at Sydney West AHS.
Team work
Questions and Discussion