2018 Eleventh National Doctors of Nursing Practice Conference



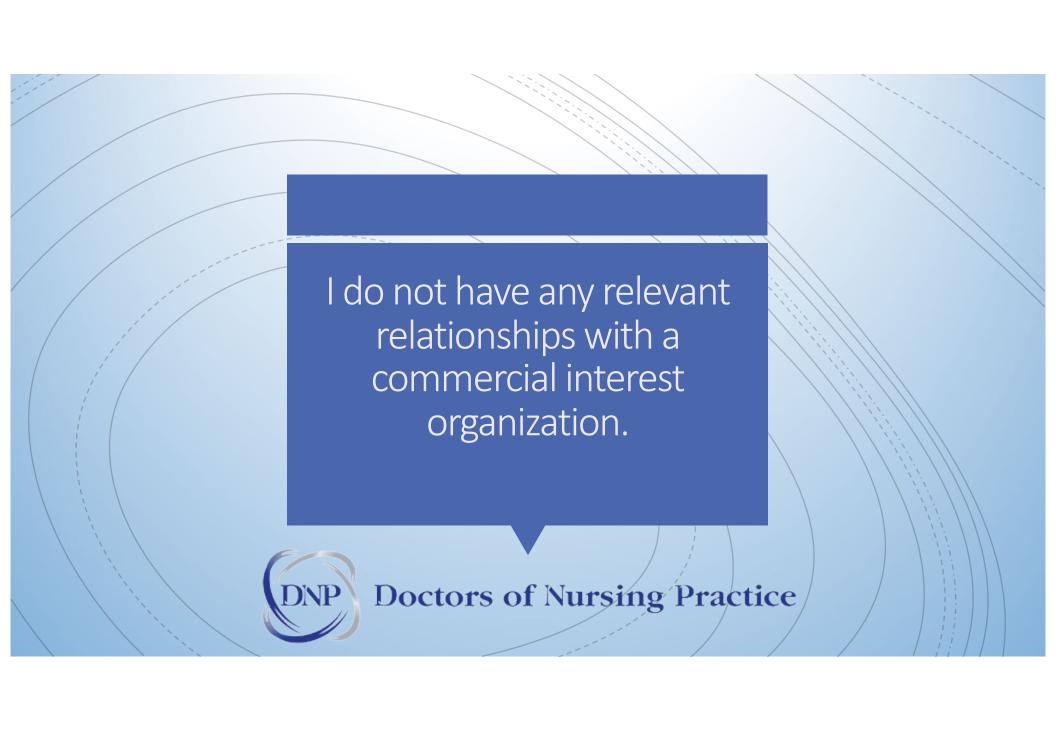
Doctors of Nursing Practice



Jody Miniard, DNP, ACNP-BC
Assistant Professor
University of Cincinnati



Doctors of Nursing Practice



"Change is the law of life. And those who look only to the past or present are certain to miss the future."

JFK



The Waiting Game



J=U 24

New patient physician appointment wait time is an average 24 days in 15 of the largest U.S. cities, up from 18.5 days in 2014.

sums. Morett Hawkins 2007 Survive of Physician Appelatowerk Walt Times and Windows and Modecald Acts

Neurosurgery has historically had long appointment wait times



Consequences

Long appointment Wait Times

= Poor Patient Satisfaction

<u>Poor Satisfaction</u> = **Lower Quality Outcomes**

(Prentice, Davies, & Pizer, 2013), (Sawatzky, Singal, & Singal, 2013), (Jakimowicz, Stirling, & Duddle, 2014), & (Murray, 2011).



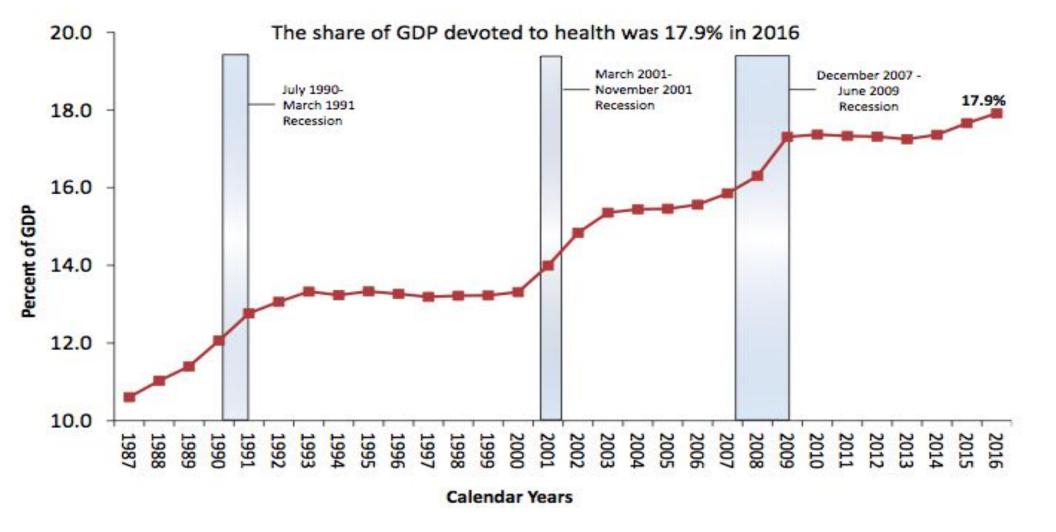
INSTITUTE OF MEDICINE

OF THE NATIONAL ACADEMIES

Advising the nation • Improving health

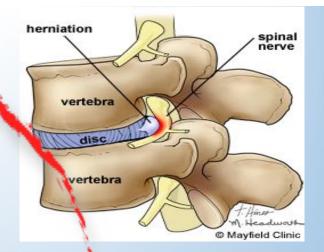
The Institute of Medicine (IOM) (2001) states that high quality care must be patient centered, timely, efficient, and equitable.

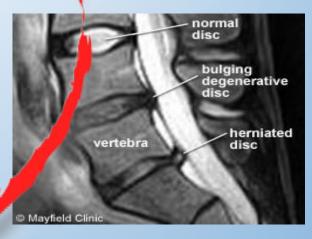
Nurses and physicians need to work together inter-professionally to devise innovate ways in which quality, effective, and efficient care is available to the surge of patients accessing healthcare as a result of the implementation of the Affordable Care Act (ACA).



Bak pain:

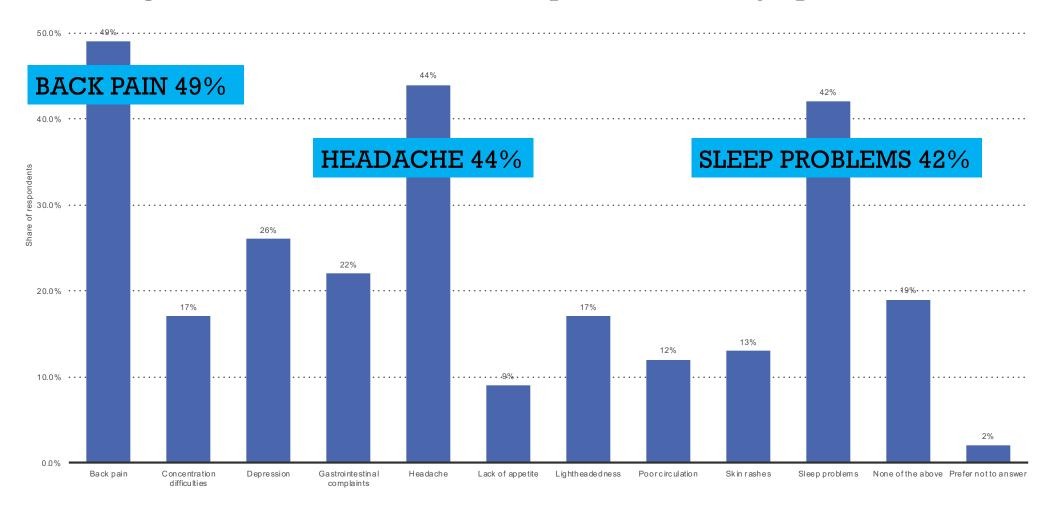
- 1.80% of adults will experience
- 2. One of the most common reason people visit their provider (52.3 million) 16% of the population
- 3. Leading cause of job disability and missed work days
- 4. Americans spend at least \$50 billion each year on back pain

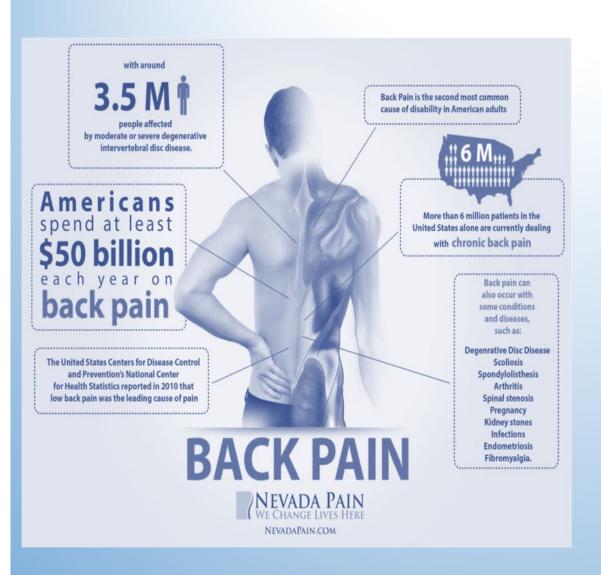




60.0%

Percentage of adults in the U.S. who were prone to select symptoms as of 2017



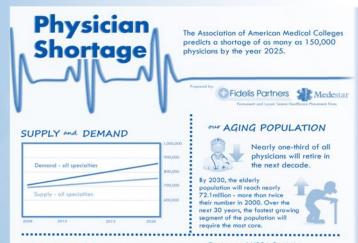


Healthy People 2020

Goal Reduce chronic back pain

How to accomplish:

See patients in the acute phase more quickly and facilitate treatment.



the HEALTH GAP

Experts estimate the impact of the shortage will more severely affect underserved populations, including the over 50 million Americans who already live in rural and poor neighborhoods where health care services are scarce.

Health Professional Shortage Areas (HPSAs) are designated as having a shortage of primary medical care, dental or mental health providers.



the TRAINING CRISIS

There were 37,556 registered applicants for the 2010 Residency Match, and 22,809 first year positions offered. In 2009, a 2% increase in the number of first year medical students was reported.



DEFICIT by REGION

According to the most recent data, 17,322 additional physicians are needed to meet the need for Primary Care practitioners in all designated Primary Care shortage areas. How many PCPs are needed in each region

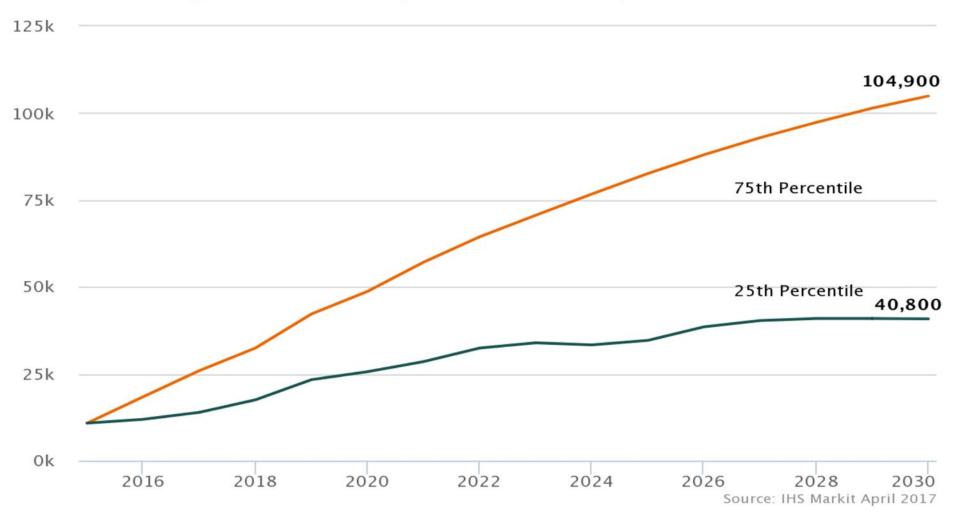


MARKET MARKET Program Fragment Program Fragment (Part Del Street Fragm

<u>Association of American Medical</u> <u>Colleges -AAMC</u> (2017)

- □ Project overall **physician shortage**between
 - **40**,800 104,900 by 2030
- ☐ Insufficient supply of specialty physicians by 2025
 - **Deficit 33,500 -61,800**
- ☐ Physicians vs. APRN and Physician Assistants (PAs)
 - Will fall as supply of APRN and PAs grows faster than physician supply

Projected Total Physician Shortfall, 2015-2030

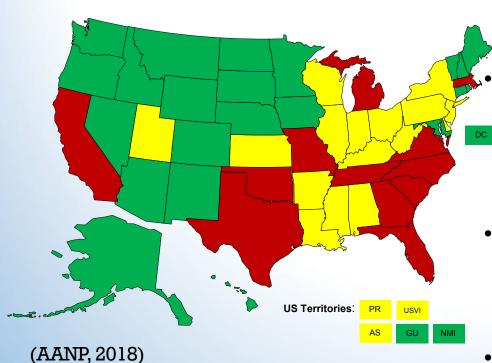


Surgeon Workforce

- ☐ Current ratio of surgeon to patient
 - **1:61,000**
 - 5,700 hospitals with less than 3,700 practicing neurosurgeons
- □ 102 accredited neurosurgical residency training programs in U.S.
 - Proposed Solutions
 - Shortening residency/training programs
 - Increase number of programs
 - Create "general" neurosurgeon
- AANS/CNS Position Statement
 - Team-based care
 - Use "mid-level providers"

American Association of Nurse Practitioners - AANP Fact Sheet (2017)

APRN Workforce



An estimated **23,000** new NPs completed their academic programs in 2015-2016

There are more than 234,000 nurse practitioners (NPs) licensed in the U.S. NPs hold prescriptive privileges, including controlled substances in all 50 states and D.C.

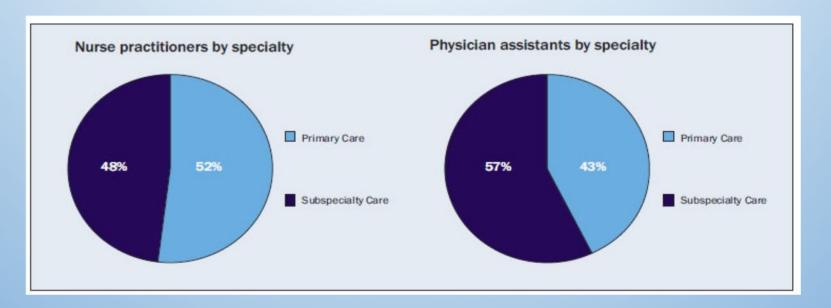
Nearly three in four NPs are accepting new Medicare patients and 77.9% are accepting new Medicaid patients

The majority (61.4%) of NPs see 3 or more patients per hour

ARPNs in Specialty Care

National Sample Survey of Nurse Practitioners - NSSNP (2012)

- 1/3 work in specialty practices (48,000 of 154,000 licensed NPs)
 - Today that is nearly 78,000 of all licensed APRNs



Expansion of APRN Workforce

The APRN workforce is growing at a fast rate.

• Graduation up 15.5% from the 2014 – 2015 academic year

By 2024, the Bureau of Labor Statistics projections

- NP profession will have grown by <u>35%</u>
- PA profession by 30%
- And only <u>13%</u> for physicians (excluding anesthesiologists and surgeons).

"Nurse practitioners continue to be one of the solutions to America's health care," said AANP CEO David Hebert. "As health care reform moves forward, nurse practitioners will be front and center. The increasing number of individuals choosing to be a nurse practitioner is an affirmation of this outstanding profession."

NP Clinics: Just to Name a Few

- Primary Care
- Multiple Specialties
 - Oncology/Hematolo gy
 - Rheumatology
 - Orthopedics
 - Neurology
 - Reproductive Health
 - STIs



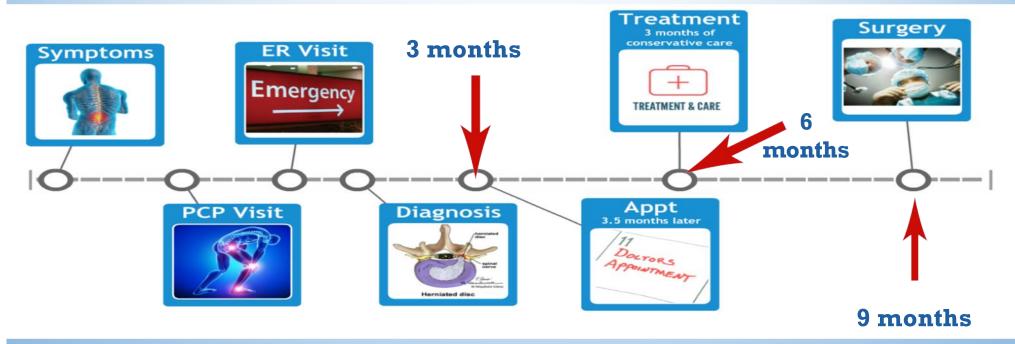
Ortho???

American Academy of Orthopaedic Surgeons (AAOS) 2011 report

"Must haves" for successful profitable practice:

Nurse Practitioners or Physician Assistants
Lead to improvements in physician productivity,
patient satisfaction, and quality of care

IMAGINE.... Excruciating pain, no answers, no treatment





Nearly 9 + months from onset of symptoms — surgery



Depends on who you ask!

An Evidence Based Solution

The aim of this project was to utilize nurse practitioners (NPs) to facilitate patient triage in an outpatient neurosurgical practice to expedite patient's right to access to care, and ultimately improve on patient satisfaction, outcomes, and healthcare expenditure.



NPs deliver high, quality, similar patient outcomes and patient satisfaction scores when NPs and MDs were compared.

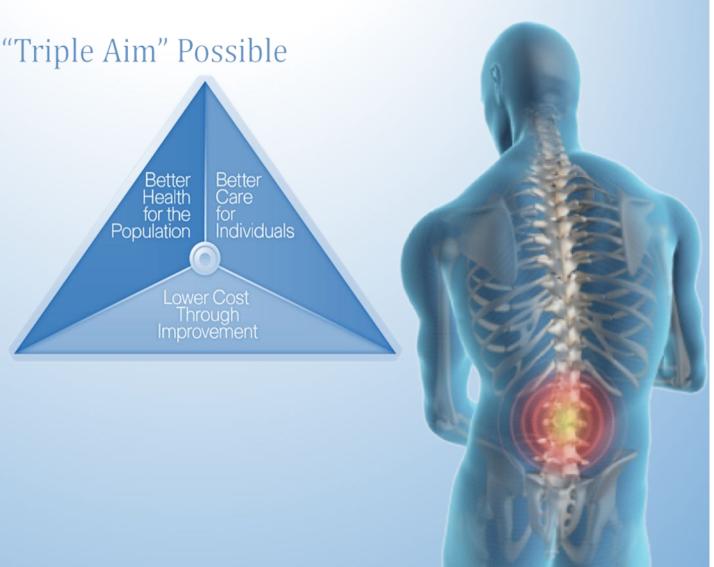
Stanik-Hutt et al. (2013)



Making the "Triple Aim" Possible

"NPs offer accurate and earlier assessment, thus facilitating a timelier diagnosis and management plan"

Sarro et al. (2010).



Large Midwest Neurosurgery Private Practice

- Current practice involves utilization of telehealth triage intake practice
- First available provider appointment times range from

5 -130 days

- Patients wait longer to see preferred provider
- Expedited appointment taking up to 40 days to schedule
- Only 22% sent for conservative management prior to appointment

First Available 2nd Available 3rd Available Physician Avail. 103 days 105 days 110 days 11/09/2015 11/11/2015 11/11/2015 5 11/08/2015 11/06/2015 11/08/2015 11/06/2015 11/06/2015 11/09/2015 11/12/2015 11 11/12/2015 11/12/2015 11 8 11/09/2015 8 11/09/2015 11/09/2015 8 11/05/2015 9 11/10/2015 3 32 11/10/2015 15 11/19/2015 32 12/03/2015 12/03/2015 78 01/18/2016 78 01/18/2016 78 01/18/2016 02/12/2016 103 106 02/15/2015 110 02/19/2016 33 2/04/2015 33 12/04/2015 53 12/04/2015 11/05/2015 10 11/11/2015 10 11/11/2015 37 12/08/2015 39 12/10/2015 39 12/10/2015 18 18 11/19/2015 16 11/17/2015 11/19/2015 19 11/20/2015 11/20/2015 19 11/20/2015 19 17 11/18/2015 17 11/16/2015 17 11/18/2015 8 11/09/2015 8 11/09/2015 10 11/11/2015 11/17/2016 16 16 11/17/2015 18 11/19/2015 11/12/2015 14 11/5/2015 4 11/5/2015 11 12/11/2015 40 12/11/2015 40 12/11/2015 40 38 38 12/09/2015 12/09/2015 38 12/07/2015 68 01/08/2016 75 01/15/2015 75 01/15/2016 12/22/2015 65 01/05/2016 85 01/05/2016 51 68 01/08/2016 68 01/08/2016 69 01/08/2016 01/07/2016 87 01/07/2016 67 01/07/2016 67 01/07/2016 67 01/07/2016 67 01/07/2016 67 59 12/30/2015 66 01/05/2016 66 01/06/2016 11 11/12/2015 11 11/12/2015 117 11/18/2015 37 12/08/2015 11 11/12/2015 37 12/08/2015 11/09/2015 9 11/10/2015 9 14/10/2015 a 47 12/18/2015 47 12/18/2015 47 12/18/2015 33 19 12/04/2015 47 12/18/2015 11/20/2015 11/13/2015 11/09/2015 12 11/13/2015 12 8 68 01/06/2016 66 01/08/2016 86 01/06/2016 01/11/2016 71 01/11/2016 71 01/11/2016 11/13/2015 11/19/2015 32 12/03/2015 12 18 11/19/2015 18 11/19/2015 18 11/19/2015 18 5 11/06/2015 5 11/06/2015 5 11/08/2015 39 12/10/2015 39 12/10/2015 39 12/10/2015 11/10/2015 5 11/06/2015 8 11/10/2015 9 3 11/04/2015 10 11/11/2015 10 11/11/2015 32 12/03/2015 12/03/2015 32 12/03/2015

	1st Reviews		2nd Reviews			
Surgeon					Percentage of Pts.	
			Surgeon			Receiving Surgeon Appts.
Reviews	Appts.	Appt. Pct.	Reviews	Appts.	Appt. Pct.	([C+F]/B)
274	195	71.2%	75	48	64.0%	88.7%
57	42	73.7%	9	7	77.8%	86.0%
289	168	58.1%	59	31	44.9%	68.9%
608	278	45.7%	171	94	55.0%	51.2%
833	324	38.9%	298	163	54.7%	58.5%
113	52	46.0%	31	14	45.2%	58.4%
272	97	35.7%	101	47	46.5%	52.9%
997	341	34.2%	407	182	44.7%	52.5%
440	118	26.8%	194	69	35.6%	42.5%
680	171	25.1%	297	109	36.7%	41.2%
276	70	25.4%	109	42	38.5%	40.6%
781	. 197	25.2%	228	61	26.8%	33.0%
		36.5%			43.6%	52.0%





Methods

2 APRNs review same 100 patient cases in "test" database; in 1 month timeframe, while surgeons simultaneously review the same cases in the "live" database.

Future Goals:

- 1. Review by APRNs with 24hr turnaround
- 2. NP-Led Spinal Clinic

Results

	Impression MATCH	Disposition MATCH	Diagnostic Testing MATCH	Treatment MATCH	Appt? MATCH	Appt Type MATCH	Appt When? MATCH	Overall Match per patient
Surgeon 1	100%	95%	83.0%	81.0%	91.0%	81.3%	84.0%	87.0%
Surgeon 2	100%	97%	82.6%	82.0%	94.0%	81.3%	78.0%	89.6%
TOTALS	100%	96%	82.8%	81.5%	92.5%	81.3%	81.0%	88.3%

Appointment and Surgical Referral

Sensitivity				
Surgeons / APRN 1	100%			
Surgeons / APRN 2	91.4%			

NP1 (95% CI 94.8% -100%) NP2 (95% CI 82.3% -96.8%)

Appointment and Surgical Referral

Specificity

Surgeons / APRN 1	61.3%
Surgeons / APRN 2	86.7%

NP1 (95% CI 42.2% -78.2%)

NP2 (95% CI 69.3% -96.2%)

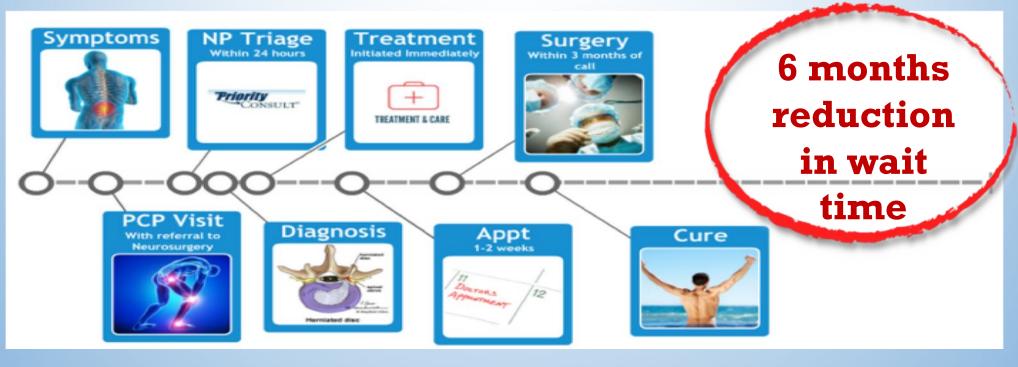
Diagnosis

Congruency Statistic

Surgeons	/	APRN1	100%	1 /0

Surgeons / APRN 2 100%

Facilitating Patient Diagnosis, Treatment, and Cure



Appointment within 2 weeks, diagnosis and treatment started within 24 hours; and surgery within 3 months

Next Steps

- NP-Led Outpatient Spinal Clinic
- 4-5 APRNs see patients in outpatient clinic, within 2 weeks of phone call for appointment
- Approved by Board of Directors and in the implementation process
 - Increase APRNs in practice by 2022 up to 20+.

Projections

- Start with 4-5 APRNs in clinic seeing 10-12 new patients a day
- Decrease wait time to under 2 weeks for all patients expand access
- See urgent patients faster
 - Make surgical referrals on a timelier basis
- Leverage surgeon time
- Improve patient satisfaction
- Improve outcomes
- Reduce healthcare cost



Going the Extra Mile...

- Didactic and practical learning experiences
- Interprofessional training
 - PT, Radiology, Physical Medicine and Rehabilitation
- APRN Mentors



Sustainability

- Scalable process that can be replicated globally in this healthcare specialty
- Less missed work days and disability
- Added cost of additional NPs will pay for themselves in billable visits with patients

The Bottom Line.....

- 10,012 New Patients in 2015
- 22,690 Total Patients seen in 2015
- Cost of New Pt. Visit \$225.00 on average
- 6,110 Surgeries in 2015

3 NPs can see 12 New patients a day

36 patients/day x 5 days/week = 180 patients 180 patients x 50 weeks = 9000 patients/year

Cost of visit $$225.00 \times 85\% = 191.25 $$191.25 \times 9000 = $1,721,250$



NP Salary = \$120,000

 $120,000 \times 3 \text{ NPs} = 360,000 \text{ total}$

Leaving **\$1,361,250** for revenue and expenses

Post Clinic Implementation

- Pre and post patient satisfaction survey
- Data collection at 3, 6, 12, and 24
 month periods on patient
 appointment wait times
- Assess wait time from signing consent to actual surgery
- Assess APRN satisfaction
- Review billable visits
- Revenue review

Win-Win

- APRNs are a valuable resource in making sure patients are seen efficiently
- APRNs have high quality outcomes
- Improve patient satisfaction and patient care
- •APRNs are a "must have" in a successful Neurosurgical practice!

Thankyou

References

Centers for Medicare & Medicaid Services. CMS.gov. *National health expenditure data*. Retrieved from https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/NationalHealthExpendData/NationalHealthAccountsHistorical.html

Coombs, L.A. (2015). The growing nurse practitioner workforce in specialty care. *The Journal of Nurse Practitioners*, 11(9), 907-909.

Iglehart, J.K. (2013). Expanding the role of advanced nurse practitioners risks and rewards. *The New England Journal of Medicine 368*(20), 1935-1941.

Institute of Medicine. (2001). Crossing the quality chasm: A new health system for the 21st century. Washington DC:

National Academies Press. Retrieved from: https://iom.nationalacademies.org/~/media/Files/Report Files/2001/Crossing-the-Quality-Chasm/Quality%20Chasm%202001%20%20report%20brief.pdf

Jakimowicz, S. Stirling, C. & Duddle, M. (2014). An investigation of factors that impact patients' subjective experience of nurse-led clinics: A qualitative systematic review. *Journal of Clinical Nursing*, 24, 19-33.

Mayfield Clinic. (2015). *The project.* [pdf document]. Retrieved from: Mayfield management task force and shareholders.

Murray, M.M. (2011). Reflections on the development of nurse-led back pain triage clinic in the UK. *International Journal of Orthopaedic and Trauma Nursing*, *15*, 113-120.

National Institutes of Health. National Institute of Neurological Disorders and Stroke. (2017, May 10). *Low back pain fact sheet*. Retrieved from https://www.ninds.nih.gov/Disorders/Patient-Caregiver-Education/Fact-Sheets/Low-Back-Pain-Fact-Sheet

Prentice, J.C., Davies, M.L., & Pizer, S.D. (2014). Which outpatient wait-time measures are related to patient satisfaction? American Journal of Medical Quality, 29(3), 227-235.

Sarro, A., Rampersaud, Y.R., & Lewis, S. (2010). Nurse practitioner-led surgical spine consultation clinic. Journal of Advanced Nursing, 66(12), 2671-2676.

Stanik-Hutt, J., Newhouse, R.P., White, K.M., Johantgen, M., Bass, E.B., Zangaro, G.,... Weiner,, J.P. (2013). The quality and effectiveness provided by nurse practitioners. *The Journal for Nurse Practitioners*, 9(8), 492-500e13.

Sawatzky, J.V., Singal, S. C., & Singal, R. K. (2013). Exploring outcomes of a nurse practitioner-managed cardiac surgery follow-up intervention: a randomized trial. *Journal* of Advanced Nursing, 69(9), 2076-2087.

Jody L. Miniard, DNP, ACNP-BC



College of Nursing
University of Cincinnati
3110 Vine Street
Cincinnati, OH 45221-0038
513-558-7056



Mayfield Brain and Spine 3825 Edwards Road, Suite 300 Cincinnati, Ohio 45209 513-221-1100