

# Nurse Practitioners' Barriers in Practice

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## Purpose

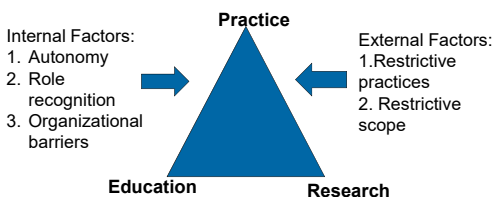
The purpose of this project was to explore the scope of practice of Nurse Practitioners (NPs) at a tertiary care institution and their perceptions of barriers in practice. The delineation of these barriers was of assistance to document limitations reported by Florida NPs in association with their scope of practice, what handicaps them within their role, and how consistent are the findings with barriers documented in the literature.

## Background

- NPs deliver high quality, cost effective services, and are licensed practitioners who can work in numerous settings.
- Scope of practice barriers faced by NPs include:
  - physicians, administration and ancillary staff lack of comprehension of NPs role,
  - lack of recognition as a provider by administration,
  - the inability to practice fully to their education and training.
- Barriers of NPs' practice have led to:
  - interference with quality care
  - low job satisfaction
  - inappropriate role incorporation
  - hindrance of community access to safe cost saving healthcare
  - a high job turn-over rate.
- National entities propose the elimination of scope of practice barriers experienced by NPs.

## Conceptual Framework

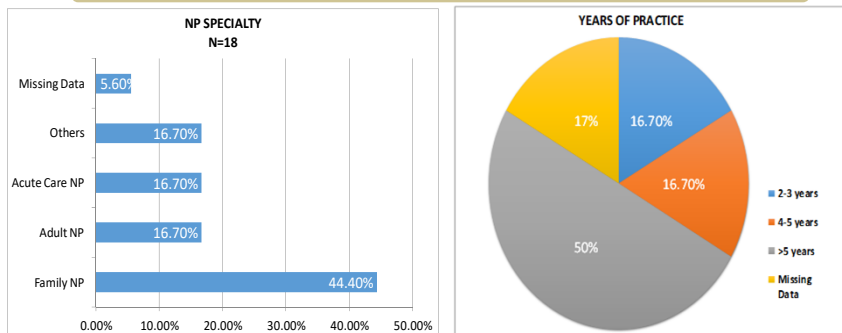
John Hopkins EBP Conceptual Framework



## Methods

| Methods           |   |
|-------------------|---|
| Feasibility Study | Descriptive-Survey <ul style="list-style-type: none"> <li>clinician developed survey instrument</li> <li>30 questions Likert scale</li> <li>administered once between January 2018 and February 28, 2018</li> </ul> |
| Sample            | N= 15 Nurse Practitioners   |
| Recruitment       | <ul style="list-style-type: none"> <li>NPs recruited via the organization's email system</li> <li>the organization's Advanced Practice Specialist Researcher facilitated the recruitment process</li> </ul>         |
| Data Collection   | Qualtrics Survey Software   |
| Data Analysis     | SPSS 24   |

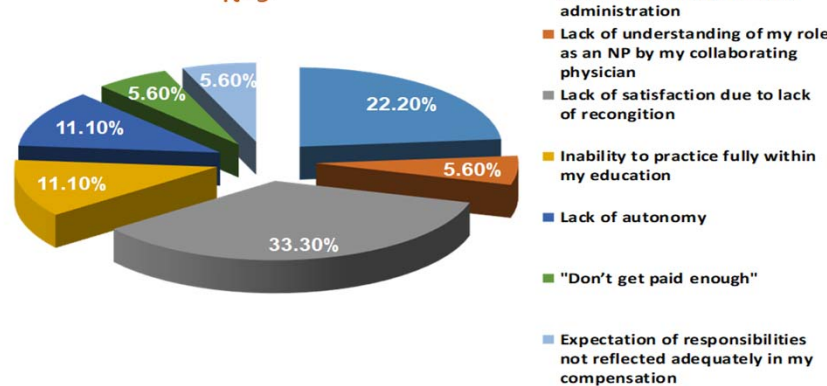
## Results



## Barriers in Practice (N=15)

| Barriers  | Agree Frequency (%) | Disagree Frequency (%) |
|---|---------------------|------------------------|
| <b>Role Recognition and Organizational Barriers</b>                     |                     |                        |
| Lack of understanding leads to unrecognized NP responsibilities         | 8 (53.3%)           | 7 (46.7%)              |
| NPs are offered leadership roles  | 7 (40%)             | 9 (60%)                |
| Administration treats Physicians and NPs are equally                    | 3 (20%)             | 10 (80%)               |
| NPs can not practice fully due to organization regulations and policies | 8 (53.3%)           | 7 (46.7%)              |
| <b>Restrictive Practice and Autonomy Barriers</b>                       |                     |                        |
| NPs have little control over current practice                           | 8 (53%)             | 7 (47%)                |
| NP have promotion, support & personal accomplishment                    | 7 (46.6%)           | 8 (53.3%)              |
| Physicians view NP as an autonomous HCP                                 | 7 (46.7%)           | 8 (53.3%)              |
| NPs can not practice fully due to state regulations                     | 10 (67%)            | 5 (33%)                |

## Rationale for Leaving Current Practice (N=9)



## Discussion

- The survey methodology was of assistance to delineate barriers experienced by NPs in association with their scope of practice, and what handicaps them within their role at their respective practice.
- Barriers identified by participants that are consistent with the literature include:**
  - A lack of understanding leads to unrecognized NP responsibilities
  - NPs are not offered leadership roles
  - Administration treats physician & NPs unequally
  - NPs can not practice fully due to organization regulations, policies, and state regulations
  - NPs have little control over current practice
  - NPs lack promotion, support, & personal accomplishment
  - Physicians do not view NPs as an autonomous HCP
- Nurse Practitioners' perceptions unique to their setting**
  - NPs role are defined and accepted
  - Staff members, intraprofessional team members, & administration have sufficient knowledge of NPs role & scope
  - Effective communication amongst NP and administration
  - NPs are viewed as healthcare providers
  - Collaborating physicians do not view NPs charts 100% of the time or require NPs to consult with them for every patient.
  - Physicians do not view NPs as a physician extender
  - NPs are allowed to order home health, PT/OT
- Limitations of the study include:** small sample size and short length of the study

## Implications for Practice

- The identification of barriers faced by NPs is critical to increase the understanding of challenges faced by NPs active in practice and to assist with documenting the prevalence of practice barriers.
- Extend the survey to continue exploring the salient findings with a larger sample size.
- Conduct educational meetings to share study findings with stakeholders and administration.

## Acknowledgements

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