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Advanced Practice Integration: A Paradigm Shift for 21st Century Practice Improvement

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Background: Three decades after the entry of advanced practice nursing into the United States health care system we continue to struggle with the appropriate recognition, compensation and utilization of advance practice providers. The failure to identify and implement a clinically relevant and cost-effective model is preventing the potential increase in patient health, access to care and decrease in health care cost to populations at risk. The purpose of this presentation is to discuss the barriers to optimize access to care, financial solvency and improvements in patient and provider satisfaction in health care systems using Advanced Practice Providers and to present a new model designed to address these issues.

Methods: The methods used to identify these barriers included a systematic review of literature and the utilization of a qualitative interview approach using phenomenology to investigate the lived experience of clinic administrators, medical directors, physicians and advanced practice nurses in an urban health care delivery system at a major university. Four themes were identified: 1) Inequality in RVU generation/acknowledgment; 2) Professional respect; 3) Impaired patient access and 4) Lack of identity. Following the analysis and team of interprofessional leaders were organized to develop a new health-care delivery model to address the identified issues.

Results: The development of an innovative and effective health care delivery model that identifies at the time of appointment the type of care provider most appropriate for the patient to optimize care. In addition, there were educational and informational programs developed and delivered to inform the public and the providers of the education and training of advanced practice providers. Other initiatives include: the inclusion of advanced practice providers in credentialing and compensation committees; the development of an advanced practice advisory board and a new method for equitable compensation.