Overcoming Advanced Practice Nursing Barriers to Care: A Statewide Practice Change Project

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This program has been developed solely for the purposes of describing the level of advanced practice nursing (APN) knowledge regarding barriers to care, before and after participation in an online educational intervention for members of a selected professional association. The program is posted as a part of this project’s educational intervention and is intended only for such use. The study has been approved for this purpose by the Chamberlain College of Nursing Institutional Review Board. Please find the link to return to the survey at the end of the slides.
Objectives

- Define barriers to advanced practice delivery of care for the citizens of Missouri.
- Differentiate potential lobby sources for state and federal legislative change.
- Articulate the ranking of Missouri with respect to nursing practice environment limitations.
- Describe potential barriers to quality healthcare arising from the current Missouri Nurse Practice Act.
Rationale

The need for overcoming advanced nursing practice barriers to delivery of care must not be understated (Heale, 2012). Since the landmark study of Lugo, O’Grady, Hodnicki, and Hanson (2007), in which states were ranked according to practice environment limitations, a number of institutional and statewide initiatives have been proposed to increase access to care and remove associated scope of practice limitations and achieve legislative change (Smolenski, 2011; Sullivan, Hegney, & Francis, 2012). Working with professional organizations and the public to influence legislative change is an important strategy for the advanced practice nurse (Abood, 2007; Hutchings et al., 2011; Nieminen, Mannevaara, & Fagerstrom, 2011).
APRNS and Nurses

- There are about 7,200 APRNs licensed in MO
- There are about 97,800 Registered Nurses (RNs) licensed in the state of MO
- There are about 25,700 Licensed Practical Nurses (LPNs) licensed in the state of MO
- This gives Missouri an overall representation of over 137,700 nurses in Missouri to work toward change to remove barriers to care and improve access to care

If APRNs are educated about the barriers to practice in Missouri they will be better able to work toward overcoming such barriers which could possibly allow APRNs in Missouri to practice at the level in which they have been educated.

APRNs that have a voice in governance in practice can have a positive impact to care and help reduce barriers (Heale, 2012).
APRNs and Barriers to Care

- The state of is one of the most regulated states when it comes to the practice of the APRN.
- Missouri is rated 50 out of 51, including District of Columbia as most regulated (Lugo, O’Grady, Hodnicki, and Hanson, 2007).
- Every APRN has to have a collaborative agreement with a physician in Missouri.
APRNs and Barriers to Care

- There are specific mileage barriers for practice of the APRN in Missouri specific to distance of collaborative physician and APRN this is 50 miles or 30 miles depending on location of clinic.
- If a new patient is seen in a given clinic the rules are written that the patient has to have a return to clinic appointment with the collaborative physician within two weeks of being seen by the APRN.
APRNs and Barriers to Care

- There is a requirement that an APRN must have collaborative physician sign 10% of the charts which goes to 20% if there are controlled substances prescribed.
- Charts must be reviewed every 14 days by collaborative physician.
- The collaborative physician cannot be in a collaborative agreement with more than three full-time APRNs.
APRNs and Barriers to Care

- As an APRN there is a barrier that a patient cannot be admitted to a hospital under the APRN alone.
- There is a barrier that when prescribing medication that the APRN and the collaborating physician’s name must be on the label.
- APRNs are not allowed to sign a death certificate.
APRNs and Barriers to Care

- Collaborative physician must oversee patients care in nursing homes.
- The collaborative physician may be randomly audited for having collaborative agreement with APRNs.
- There is a stipulation of working with the collaborative physician one month prior to practicing at separate location.
APRNs and Barriers to Care

- There is a limit of controlled substance prescriptions of 120 hours for scheduled 111 medications and no scheduled 11 medications can be prescribed by the APRN.
- The collaborative physician must be present on site of APRN practice every two weeks to review charts and see patients.
- The APRNs in Missouri need to be aware of rules that regulate their practice and work toward removing barriers.
APRNs and Barriers to Care

- Missouri is number 50 of 51 states, including District of Columbia with barriers to care.
- There is a need for all APRNs to come forward and assist in removing barriers to care for citizens of Missouri. This includes becoming more politically involved.
- With removal of barriers to care, this will help to reduce costs as there will be less redundant unnecessary care given.
APRNs and Barriers to Care

- It is important to be involved in the removal of barriers to care for citizens in Missouri.
- This can be accomplished by working with politically active groups in Missouri to remove barriers.
- Be aware of rules and regulations that guide the practice of APRNs in Missouri.
- APRNs have the potential to fill the void of need for primary care providers.
APRNs and Barriers to Care

- It is important to integrate evidence-based research into clinical practice and decision making.
- APRNs have the sound educational background to work independently and collaborate as needed.
- State regulations dictate the practice environment of the APRN as well as present barriers to care for the APRN in practice (Lugo, O’Grady, Hodnicki, and Hanson, 2007).
When rules, regulations, and laws are changed at the state or federal level there are many Nursing and Non-nursing associations or groups working together to improve access to care and remove barriers. The different professional organizations have specific guidelines they must follow to be in compliance with lobbying. American Nurses Association (ANA) your state nurses group (Missouri Nurses Association-MONA), and American Association of Nurse Practitioners (AANP) are very active in issues in nursing. Other Associations as listed in the survey lobby for nurses also.
APRN and Barriers to Care

Conclusion

- The intent of this educational offering was to get the APRN more acquainted with rules and regulations that drive the care provided by the APRN, which may be constrained by practice barriers to care for Missouri citizens.

- In several weeks, you will receive an invitation to participate in a short follow-up practice-change inquiry consisting of two to five questions.


Thank you for participating in this project! Please slowly drag your mouse over the live link below to activate and then click on the URL to return to the post-test (you may need to wait briefly for the link to connect):

https://www.surveymonkey.com/s/XYNDQFS