Utilization of Nurse Practitioners in Long-Term Care: Findings and Implications of a National Survey

Peri Rosenfeld, PhD, Mia Kobayashi, MS, RN, PHN, Patricia Barber, RN, MPA, Mathy Mezey, EdD, RN, FAAN

Objectives

The objective of this study was to determine the national practice patterns of nurse practitioners (NPs) providing care in long-term care (LTC) facilities, including the number and characteristics of LTC facilities that use NPs for any portion of care to residents, NP activities, and employment arrangements between NPs, physicians, and facilities.

Design

Mailed survey.

Participants
Participants included all physicians who are members of the American Medical Directors Association (AMDA).

Measurement

The survey instrument was constructed to obtain information in the following six domains: (1) the number of LTC facilities that have NPs involved in providing care; (2) the number of NPs engaged in care at these facilities; (3) the types of employment/financial arrangements between NPs and LTC facilities; (4) the types of services provided by the NPs; (5) the effectiveness of the NPs as perceived by the medical directors; and (6) the perceived future demand for NPs in LTC.

Results

Of a total of 870 respondents (response rate 19%), 546 respondents (63%) reported the involvement of NPs in the care of residents in their facilities. In total, respondents identified 1160 NPs involved in care, with a median of two NPs per responding facility (range, 1–10). Respondents reported that NPs make sick/urgent resident visits (96%), provide preventive care to long-stay residents (96%), provide preventive care to long-stay residents (96%), provide preventive care to long-stay residents (96%), perform alternating required regulatory 30/60 (88%), hospice care (80%), and wound care (78%). Significant variations in practice patterns were found between NPs employed by a LTC facility (19% of respondents) as compared with those NPs employed in other arrangements. Large majorities of medical directors stated that NPs are particularly effective in maintaining physician satisfaction (90%), resident satisfaction (87%), and family satisfaction (85%). An additional 34% of the respondents projected an increased need for NPs in nursing homes in the future.

Conclusion

NPs involved in LTC are more likely to be involved in the care of residents in the nation’s larger (>100-bed) LTC facilities. The substantial number and types of services provided by these NPs, coupled with the high resident, family, and physician satisfaction with their services, suggests the need for educational, policy, and reimbursement strategies to encourage the further involvement of NPs in the care of residents in nursing homes.

Keywords: Nurse practitioner, long-term care facilities, medical director

a John A. Hartford Foundation Institute for Geriatric Nursing, New York University, Steinhardt School of Education, West Bath, ME

b Division of Nursing, New York University, Steinhardt School of Education, West Bath, ME
c Occupational Health Associates, West Bath, ME

Address correspondence to Mathy Mezey, EdD, RN, FAAN, Independence Foundation Professor of Nursing Education, Director, The John A. Hartford Foundation Institute for Geriatric Nursing, New York University, Steinhardt School of Education, Division of Nursing, 246 Greene Street, New York, NY 10003–6877.

PII: S1525-8610(04)70038-9

© 2004 American Medical Directors Association. Published by Elsevier Inc. All rights reserved.