

Advanced Practice Nurses' Perceived Barriers and Benefits to Electronic Consults

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BACKGROUND

- Patients having timely access to care has been a shared problem among primary care providers.
- Historically, consultations with a specialist have required a face-to-face appointment.
- The Affordable Care Act resulted in large numbers of individuals becoming healthcare consumers (Rhodes, et al., 2014).
- With an increase in the numbers of patients who need care, there is an increase in the amount of time it requires for a patient to have access to a specialist appointment.
- Electronic consults (eConsults) have the potential to benefit the referral process and increase the access of care for patients by reducing the average wait time patients encounter waiting for an appointment.
- In some cases, the information gained during the eConsult eliminates the need for an appointment.

PURPOSE

To examine Virginia based nurse practitioner, nurse midwife, nurse anesthetist, nurse executive, and clinical nurse specialist's knowledge, use and perceptions of eConsults regarding potential benefit and barriers.

METHODS

Design

A non-experimental descriptive design examining correlations

Study site

Virginia Council of Nurse Practitioners, and Virginia Doctor of Nursing Practice

Sample

147 Advanced practice nurses and nurse executives in Virginia

PROCEDURE

A one-time electronic survey was administered to members of the:

- Virginia Council of Nurse Practitioners
- Virginia Doctor of Nursing Practice

Recruitment of subjects was initiated through an email link sent by the professional organizations.

The 24-item researcher questionnaire researcher was developed that examined:

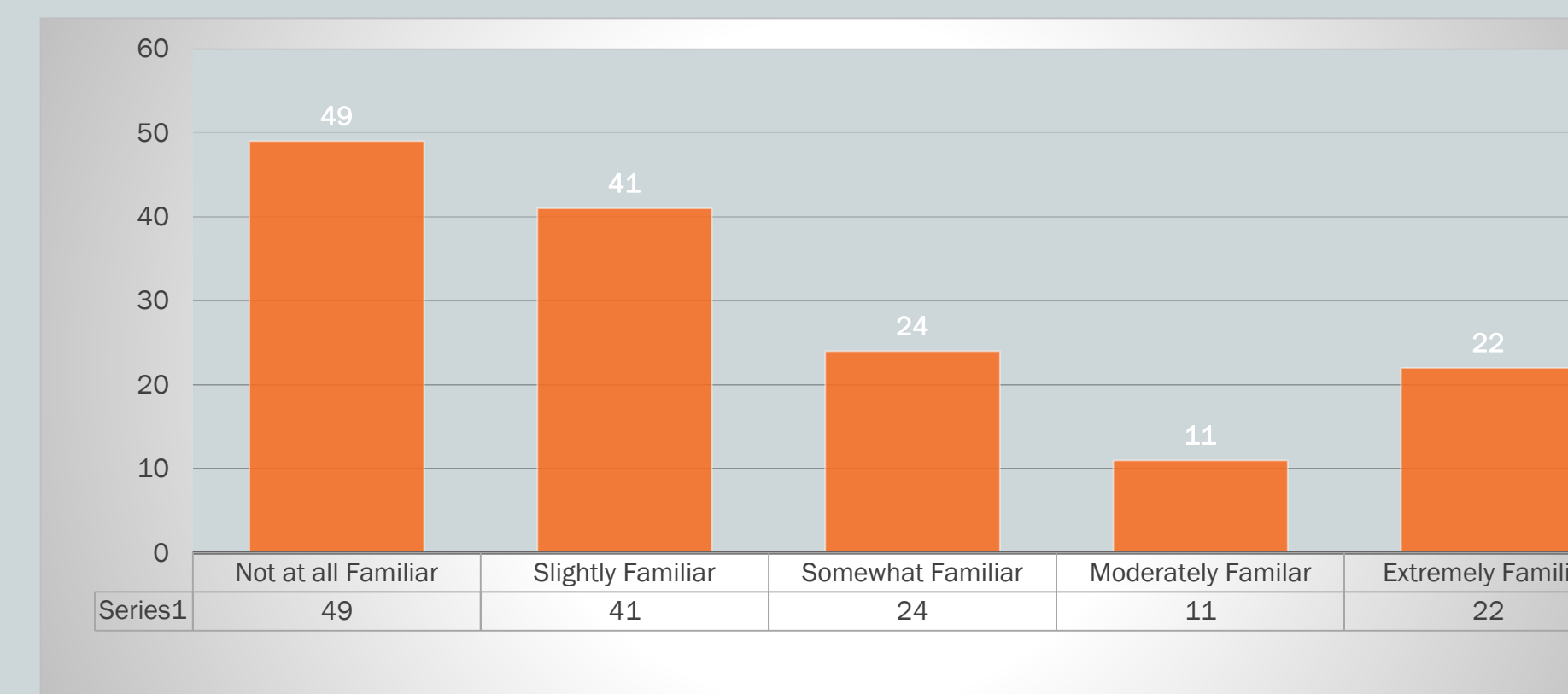
- Participant Demographics
- Knowledge of eConsults
- Use of eConsults
- Perceptions regarding eConsult benefits
- Perceptions regarding eConsult barriers

RESULTS

- The majority of advanced practice nurses and nurse executives had either no or only slight familiarity with eConsults (N=90).
- Only twenty-two (22.2%) of participants were extremely or moderately familiar with eConsults.
- Specific roles was not significant when determining if an APN or NE was likely to use eConsult at $p = .05$.



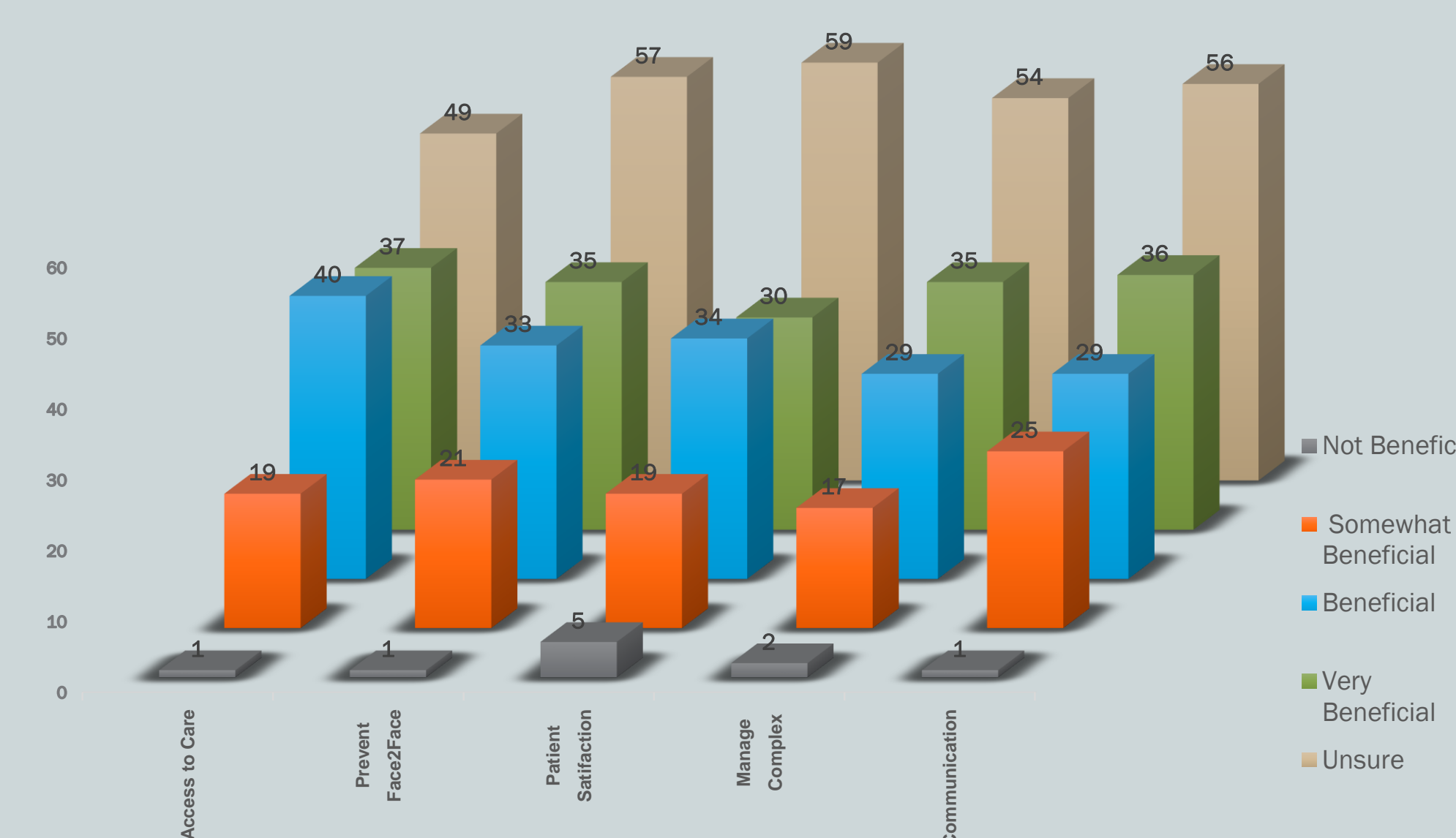
Familiarity with eConsults



Perceptions

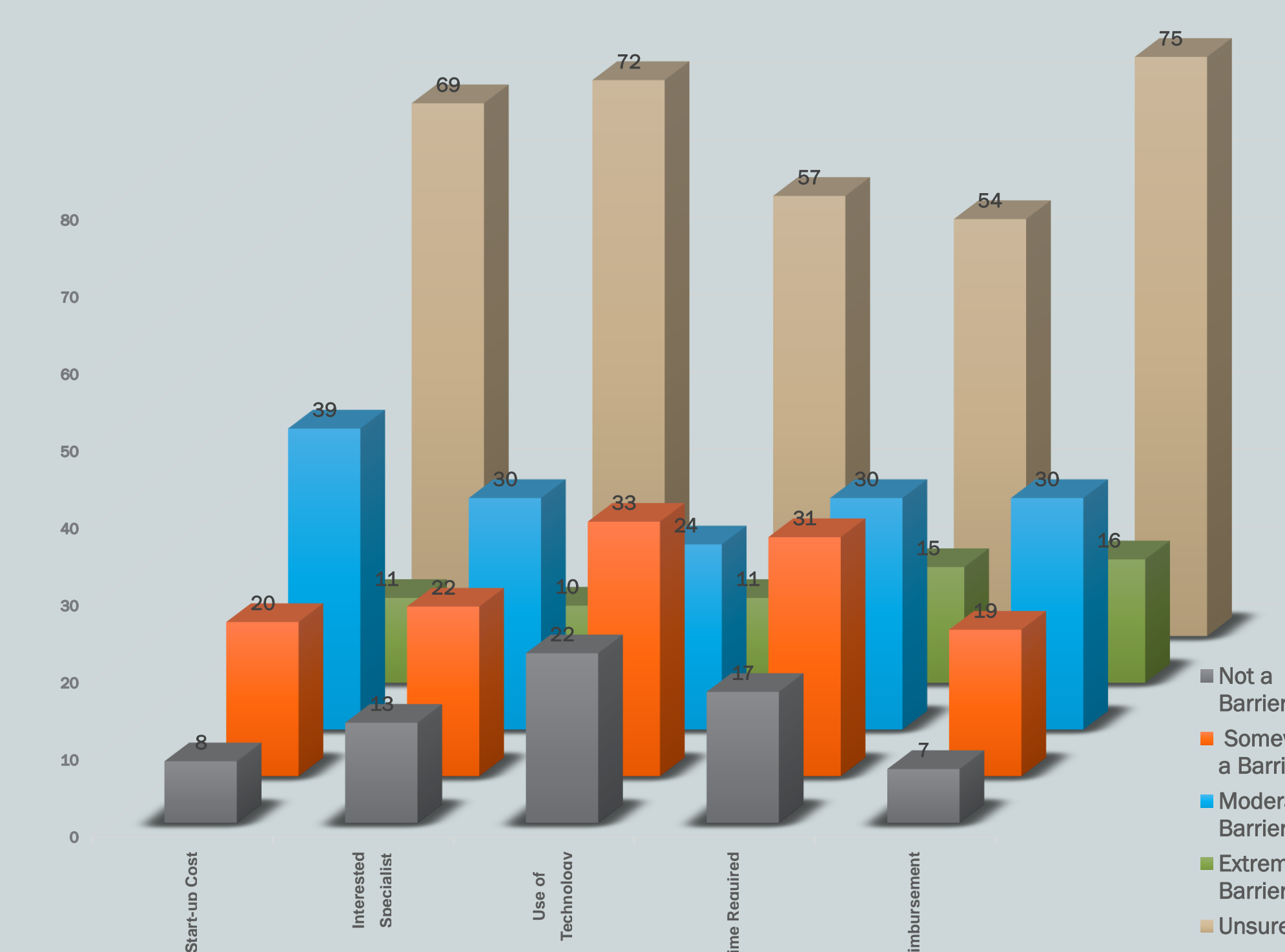
Commonly Identified Benefits

- Access to Care
- Prevent Unnecessary Face 2 Face
- Patient Satisfaction
- Manage Complex Medical Issues
- Provider to Provider Communication



Commonly Identified Barriers

- Start up Cost
- Identification of Interested Specialist
- Use of Technology
- Provider Time Requirement
- Reimbursement Issue



Demographics	Study Groups (n=147)	
	N	%
Role		
Nurse Practitioner	120	80.5
Clinical Nurse Specialist	13	8.7
Nurse Executive	11	7.4
Nurse Midwife	3	2.0
Age		
20-30	4	2.6
31-40	26	18.1
41-50	46	34.4
51-60	47	29.5
61-81	23	15.4
Years in Practice		
Less than 5	27	18.1
5-10	35	23.6
11-20	42	28.2
21-30	26	17.4
31-40	15	10.1
More than 41	2	1.4
Gender		
Male	10	6.7
Female	136	91.3
Prefer Not to Answer	1	0.7
Race/Ethnicity		
White	121	81.2
Black/African American	14	9.4
Hispanic or Latino	6	4.0
Amer.Indian/AlaNative	1	.7
Asian	4	2.7
Other	1	.7
Employment Status		
Full-time	121	81.2
Part-time	19	12.8
Not currently employed	5	3.4
Retired	2	1.3
Employment Location		
Rural	20	13.4
Suburban	53	35.6
Urban	74	49.7
Employment Setting		
Family Practice	60	40.3
Pediatrics	7	4.7
Cardiology	8	5.4
Endocrinology	1	.7
Dermatology	1	.7
Gynecology	3	2.0
Orthopedics	2	1.3
Other	64	43.0
Practice Setting		
Independent clinic	30	20.1
Free clinic	7	4.7
Specialty clinic	15	10.1
Clinic in large hospital	27	18.1
Hospital setting	44	29.5
Long-term care setting	1	.7
Rehabilitation setting	1	.7
Other	22	14.8

CONCLUSIONS

- Most APNs and executives are not familiar with eConsults
- Few have had experience with eConsults.
- APNs and NEs do believe that there is potential benefit to the patient if eConsults are utilized.
- The benefit that was identified most was access to care by the patient and help in managing medically complex patients.
- The APNs acknowledged reimbursement for eConsult services as the largest barrier.

IMPLICATIONS

- Research is needed. There are significant gaps in the literature.
- APN programs should consider including eConsult content into the curriculum
- Implications for policy development include policy to ensure that providers are reimbursed for their time and services when participating with eConsults.
- Gleason et al. (2017) report that fee-services organizations have not been quick to adopt the eConsult model.
- Ability of the PCP to maintain continuity of care when managing patient's medical problems.