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Advanced Practice

The Role of the Nurse Practitioner in Radiology



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The role of nurse practitioners in diagnostic imaging can be multifaceted in providing care to meet the increased demand for health needs and to enhance the efficiency of the radiologists. The role can include preprocedural workup, coordination of care for the interventional radiology patient, maintenance of open lines of communication with health care providers/referring services, follow-up for inpatients after procedure, monitoring the quality of care provided, and performing vascular/nonvascular minimally invasive procedures. Common barriers to the implementation of the nurse practitioner role are lack of clarity of the role, emphasis on physician replacement or support versus patient health needs and needs for health care services, under use of nurse practitioner's expertise and scope of practice, failure to address barriers with role implementation, and lack of evidence-based strategies to guide role development. The nurse practitioner role in a radiology department can be successfully implemented with the utilization of the correct tool in the development of the role.

The PEPPA framework is a nine-step model that has shown to be effective in implementation and optimal utilization of the nurse practitioner role (Bryant-Lukosius & DiCenso, 2004; Cancer Care Ontario). The (PEPPA) framework is a Participatory, Evidenced-based, Patient-focused Process for guiding nurse practitioner development, implementation, and evaluation in a new environment. The first step of the process is to define the population of patients to be cared for, outline how they enter the health care environment, and describe the interaction with health care providers during the continuum of care. This step is followed by the identification and recruitment of the stakeholders to be involved in the development of the role. The stakeholders should have varied backgrounds and provide a balance between nursing and medical models. In addition, it is

imperative to have a nonbiased facilitator to enhance the process. Step three is the gathering of the stakeholders for an interactive discussion to determine a need for the new model of care. During this initial meeting, the agenda is the analysis of the strengths and weaknesses of the current model of care. This encompasses the needs of the patients, the needs of the families in the environment, the organizational needs, and the stakeholder needs. Step four includes tasking the stakeholders to develop priorities and set goals for the role based on the evaluation of the strengths and weakness of the present model and the needs of the patient population. Step four encompasses the determination of the required changes to the current workflow model to decrease the weaknesses defined by the stakeholders. During this process, there must be consideration of what is the most appropriate care and who are the most appropriate care givers to provide this care in this environment. When Advanced Practice Nursing roles are designed to complement rather than replace the role of other health providers, opportunities for innovation and improved patient and health system outcomes are more likely to occur. Interdisciplinary collaboration and communication are imperative to the success of the new model. The plan for implementation, step five, must ensure that the system is ready for the nurse practitioner role, as well as the strategies outlined. Step six is the plan for implementation and step seven is the implementation of the role. It is important that during role implementation, all affected staff are educated on the role before role execution. Continual evaluation over time is imperative to success of this role, included in steps eight and nine. After the enactment of the strategies developed, there needs to be continual evaluation of needs to update strategies as necessary. Long-term monitoring allows appropriate changes to be made for the success of this role.

Elements found to be influential for success of the role include the nurse practitioner's confidence in the developed role, the monitoring of managerial and organizational issues, and maintenance of a positive relationship with other health care professionals. We must be cognizant that the health care environment is constantly changing and evolving as well as the patient population. Many of the barriers to the successful implementation of the nurse practitioner role can be avoided by using the PEPPA framework which allows better understanding by the stakeholders of the role (see Figure 1).

Some information previously presented at the ARIN Annual meeting March 25–March 29, 2019, Austin, Texas, and 4th Nursing World Conference August 19–21, 2019, London, England.

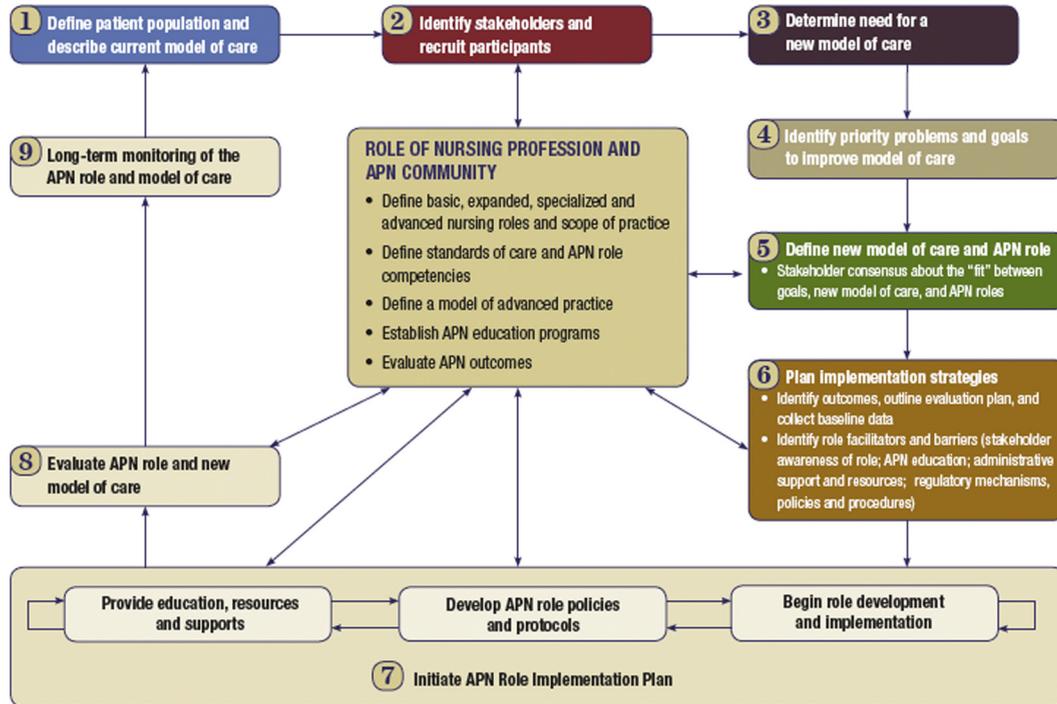
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The PEPPA Framework



From: Bryant-Lukosius, D., & DiCenso, A. (2004). A framework for the introduction and evaluation of advanced practice nursing roles. *Journal of Advanced Nursing*, 48(5), 530-540.

Figure 1. PEPPA Framework: A Participatory, Evidence-Based, Patient-Focused Process for Advanced Practice Nursing (APN) role development, implementation, and evaluation. Reprinted with permission. Available at <http://ocp.cancercare.on.ca/cms/One.aspx?portalId=77515&pageId=9394>.

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