RETAIN NURSES AND ADVANCE THE ROLE OF THE PRIMARY CARE RN IN CANADA

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EXECUTIVE SUMMARY

- Early career, mid-career and late career RNs in Canada are considering leaving the profession
- Given this significant number, there is an opportunity to transition nurses from acute care to primary care settings
- The role of the primary care RN requires advancement, primary care nursing education and clinical opportunities are not consistently provided at the undergraduate level
- RNs in primary care have an essential role in providing comprehensive care and chronic disease management
- There are inconsistencies across Canada in the role definition of the primary care RN; integrating competencies for RNs in primary care will improve role definition and scope of practice

BACKGROUND

According to a recent survey of Canadian nurses conducted by the Canadian Federation of Nurses Unions (CFNU), 59% of early career nurses, 56% of mid-career nurses, and 20% of late career nurses are considering leaving their current job within the next year (CFNU, 2022). Given the precarious state of nursing in Canada, this policy brief recommends supporting registered nurses (RNs) considering leaving the profession to shift career paths and transition to work in primary care. In addition, it recommends advancing the role of RNs in primary care in Canada. These recommendations align with one of the strategic priority actions in the report 'Sustaining Nursing in Canada', to address the immediate challenges in nurse retention (Ben Ahmed & Bourgeault, 2022).

Primary health care (PHC) focuses on health promotion, illness and injury prevention, and the diagnosis and treatment of illness or injury (Registered Nurses Association of Ontario [RNAO], 2013). Primary care providers are the first point of contact for patients in the health care system, and they coordinate care and deliver a wide range of health care services. (Lukewich et al., 2022). In Canada, RNs in primary care often work as members of interdisciplinary healthcare teams (Al Sayah et al., 2014). They perform a range of routine services for patients of all ages, including "preventative screening, health education and promotion, chronic disease prevention and management, and acute episodic care" (Lukewich et al., 2022, p. 2). Primary care services that are provided by interdisciplinary teams have shown to have positive benefits for patients and staff, as well as improved clinical outcomes for patients with chronic diseases (Al Sayah et al., 2014).

Research supports that interventions provided by RNs in primary care can improve patient health outcomes. In a United Kingdom study of seniors aged 60-74, those that received the intervention of four physical activity consultations from a nurse over three months showed a significantly higher increase in daily step counts and moderate to vigorous physical activity

(Harris et al., 2015). Increasing physical activity in seniors can have health benefits such as improving physical fitness, mobility, bone health, and reducing the risk of chronic disease and premature death (Tremblay et al., 2011).

LIMITATIONS IN CURRENT APPROACH

While primary care RNs have an important role in providing health care in Canada, there are several limitations to the current approach. Primary care nursing theory, education, and clinical opportunities are not consistently provided and delivered at an undergraduate level. Universities in Canada are autonomous, though nursing curriculum is guided by the accreditation standards set by the Canadian Association of Schools of Nursing (CASN) (Baumann et al., 2009). A 2007 study of Canadian nursing programs found that most undergraduate programs cover PHC in their programs, though the method and extent to which it is delivered in terms of content, process, and outcomes isn't consistent (Canadian Association of Schools of Nursing [CASN], 2007). A 2008 scan of Canadian university nursing programs found that a reduced availability of clinical placements and preceptors limited opportunities for exposure to primary care nursing in undergraduate programs (Valaitis et al., 2008).

A 2014 report by the Canadian Nurses Association (CNA) examined primary care delivery models and frameworks as well as the practice patterns and characteristics of nursing roles in primary care (Canadian Nurses Association [CNA], 2014). This report found significant role diversity for nurses depending on the practice setting, and the need to "clearly define and articulate the role of the RN in primary care," (CNA, 2014). This report identified the need for competencies for primary care RNs in order to clarify and validate the role (CNA, 2014).

Chronic diseases have significant impacts on Canadians, including reduced quality of life, increased hospitalization and health care costs, loss of productivity, and premature death (Betancourt et al., 2014). Nurses in Canada have an essential role in chronic disease management and nurses working in primary care are well positioned to improve the planning and delivery of healthcare for those with chronic diseases (Lukewich et al., 2014). A study of Canadian nurses (RNs, Registered practical nurses [RPNs] also known as licensed practical nurses [LPNs] in other Canadian provinces , and Nurse practitioners [NPs]) in Ontario working in primary care identified the need for improvements in how RNs are managing chronic conditions in the primary care setting (Lukewich et al., 2014). This study also identified the need for clear RN role definition and optimization as 40% of the nurses reported lack of clear role definition, 24% reported not practicing to their full scope of practice, and 20% reported uncertainty about their future role in primary care (Lukewich et al., 2014).

There is an evidence gap on the role of the RN for chronic disease management as most of the research on this subject has focused on the role of the NP (Lukewich et al., 2022). To date, the majority of research specific to RNs in primary care has focused on the roles and activities

of the nurse (Lukewich et al., 2022). Most of the research on the effectiveness of RNs has focused on nurses in the acute or long-term care settings (Lukewich et al., 2022).

POLICY RECOMMENDATIONS

In order to advance the role of the RN in primary care in Canada, this policy brief recommends addressing existing policy gaps. To begin with, there is very little attention directed towards primary care nursing in undergraduate nursing curricula (Bell et al., 2022). Ensuring primary care nursing education is included at the undergraduate level will prepare nurses for entering this field (Lukewich et al., 2020). Creating strong academic partnerships between universities and community primary care settings will also improve opportunities for clinical preceptorships and mentoring in primary care nursing (Vailaitis et al., 2008). In addition, creating programs for experienced RNs to access continuing education and professional development can support nurses to transition to primary care and remain in the workforce (Ben Ahmed & Bourgeault,2022).

Secondly, there is a lack of role definition for RNs within the primary care setting, as well inconsistencies in role standards and expectations (Lukewich et al., 2020). In 2019, National Compentecies for RNs in primary care were developed to support nurses working to their full scope of practice and "provide a framework to evaluate the effectiveness of this unique and vital role" (Lukewich et al., 2020, p. 42). The National Competencies for RNs in Primary Care support the optimization and integration of the role of RNs in primary care (Canadian Family Practice Nurses Association [CFPNA], 2019).

Lastly, this policy brief recommends funding for researchers to further study the impact of the RN in primary care. Researching the effectiveness of primary care RNs will build a strong foundation of evidence for the importance of this role within healthcare teams (Lukewich et al., 2022). The effectiveness of the primary care NP has already been well established in the literature, with numerous studies to support their positive impact on patient outcomes (Lukewich et al., 2014). The time has come to shift the research focus to the primary care RN to inform the future of this role in Canada.

AGENTS OF CHANGE

To address the issue of advancing the role of the primary care RN, this policy brief recommends addressing nursing education. The CASN, responsible for guiding nursing curriculum, must review the current curriculum and ensure that primary care is consistently taught at an undergraduate level. To develop nursing leadership in primary care, universities must have faculty with primary care experience teaching in the nursing programs. In addition, universities should develop strong academic partnerships with community based primary care providers to offer clinical placement opportunities for nursing students (Valaitis et. al., 2008).

Similar to courses offered for nurses at post-secondary institutions in critical care, courses that specialize in primary care can be created for experienced nurses to obtain the skills needed for primary care prior to transitioning to their new role. Specialized courses can also help primary care RNs further develop their knowledge and skills.

University faculty and researchers can also play a vital role by continuing to study the impact of the primary care RN on health outcomes. Dedicated funding from the Canadian Institute of Health Research (CIHR) for primary care researchers can help to achieve this goal. Public advocacy is necessary to increase role visibility of the primary care RN. The CNA and the Registered Nurses Association of Ontario (RNAO) can advocate publicly for increased funding, as well as highlight the importance of the primary care RN in improving the health of Canadians. The RNAO and the CNA can also play a role in advocating for furthering the advancement of the National Competencies for RNs in Primary care.

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