

THE ROLE OF A DNP PREPARED NURSE PRACTITIONER IN MANAGEMENT OF PATIENTS IN THE CLINICAL OBSERVATION UNIT

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INTRODUCTION/BACKGROUND

The clinical observation unit or transitional unit has been functioning within the hospitals across the United States for over a decade. These units are designed for patients that are not too sick to be admitted nor they can be discharged; they need short term treatments and reassessments due to their current diagnosis. The care modality of the observation unit is to provide a fast, safe and effective delivery of care to patients. The observation stay can range from 4 to 23 hours.

The clinical observation serves to decrease medical dollars, alleviate unnecessary admissions and decrease hospital acquired infections. Several observation units function within the emergency departments which are run by the emergency department team, some units are independent and is overseen by the hospitalist team. The project took place in an inner city Adult Emergency department-observation unit in New Jersey. In order for the observation unit to function to its highest levels it was of great importance to implement a collaborative approach with using the physicians and nurse practitioners (NP) to promote effective management of care to patients.

PURPOSE

The purpose of the project was to explore the effectiveness and patient care outcome in utilizing doctor of nursing practice (DNP) prepared advanced practice nurse (APN) as a provider within the clinical observation unit setting.

MATERIALS AND METHODS

Design

A descriptive analysis design was utilized on the change process of implementation of the clinical observation unit and the role of DNP.

Method

A doctoral prepared nurse practitioner multidisciplinary team system change process was utilized in implementation of a Clinical Observation Unit (COU). COU is a closed unit within the Emergency department, utilizing evidence based practice guidelines in patient care protocols.

The practice and change process and implementation of the COU as exemplar model from the literature review and understanding the role of a DNP guidelines and practice through American Association of Colleges of Nursing (AACN), indicating that one of the essentials of a doctorate of nursing practice is a competent leader. and implementing scientific underpinning.

Setting

This project was conducted at a busy level 1 Trauma Center in New Jersey, Clinical Observation Unit based within the Emergency department.

Procedure of change process and role of DNP

- Phase 1: Initial phase was implemented with the medical doctors managing the patients independently on a 5 bed unit with a registered nurse and ancillary staff members.
- Phase 2: second phase was implemented due to the increased patient acuity; with a medical doctor and nurse practitioner with a doctoral degree in a 10 bed unit and after 1 year additional 2 nurse practitioners were added to have broader coverage due to increased acuity.

Function of the clinical observation unit:

- Clinical observation unit within the emergency department is facilitated by the emergency department team- which is the emergency doctors, NPs, nurses, and techs. The unit is mainly within the emergency department or near the emergency department.
- Closed units allows the patients be evaluated by the emergency department provider and work the patient for whatever the presenting problem or diagnosis.
- Once the patient fits the criteria for observation unit then patient is safely transferred to the observation department and there after the observation team takes full care of the patient until discharge or admission to the hospital.

Acceptable diagnosis of the clinical observation unit:

Chest pain
Transient ischemic attack
Dehydration
Vertigo
Syncope
Non complex Cellulitis
Fall
Asthma
Abdominal pain
Gastroenteritis
Non-complex fractures
Back pain
Urinary Tract Infections

Recommended diagnostic tests in the clinical observation unit:

CT Scan
MRI
Stress test
Echocardiogram
ERCP
HIDA Scan
EEG

Role of a DNP nurse practitioner in the clinical observation unit:

- Implementing clinical pathways or protocols with current evidence based practice guidelines in collaboration with the subspecialist.
- Collaborating with ED physicians, case managers, nurses, other nurse practitioners, cardiologist, neurologist, urologist, neurosurgeon to improve patient outcomes and management of care.
- Implementing the core measures in relation to the clinical diagnosis.
- Teaching and training the new nurse practitioners in the observation unit.

CONCLUSIONS/IMPLICATIONS TO PRACTICE

- There are limited studies on the the role of a DNP prepared nurse practitioner in the clinical observation unit.
- The system change project supports Trzeciak & Rivers (2003) who also presented the use of the clinical observation unit helps with decrease in hospital cost by avoiding unnecessary hospitalization, decreases overcrowding the emergency departments and promoting better care by having expedite care and streamlining the management patients care with the use of evidence based practices.
- The system change project yielded a large number of patient satisfaction due to expedite diagnostic testing and expedite plan of care.

REFERENCES

- American Association of Colleges of Nursing. Essentials of Doctorate Education for Advanced Nursing Practice. <http://www.aacn.nche.edu/publications/position/DNPEssentials.pdf>
- Asudani, D & Tolia, V. (2013). Pros and Cons of Clinical Observation Units. *The Hospitalist*. 2013 (11).
- Nichols, C., O'Connor, N., Dunn, D. (2014). Exploring early and future use of DNP prepared nurse within healthcare organizations.
- Trzeciak, S & Rivers, E. (2003). Emergency department overcrowding in the United States: an emerging threat to patient safety and public health. *Emergency Medicine Journal* 2003; (20), 402-405.