

■ CNE Article

# Perceptions of Roles, Practice Patterns, and Professional Growth Opportunities: Broadening the Scope of Advanced Practice in Oncology

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Broadening the scope of advanced practice providers (APPs) has been offered as a solution to increasing healthcare costs, workforce shortage, and increased demand. To understand present scope and barriers to broadening it, the authors describe the perceptions and practice patterns of APPs. This cross-sectional study used a computerized self-report survey of 32 targeted nurse practitioners and physician assistants employed in the cancer center of an urban teaching hospital; 31 were included in the quantitative analyses. Survey items covered education and training background, expertise, professional resources and support, duties, certification, and professional development. Respondents practiced in a variety of oncology specialty areas, but all had advanced degrees, most held specialty certifications, and 39% had attended a professional or educational meeting within the last year. They spent a majority of their time on essential patient-care activities, but clerical duties impeded these; however, 64% reported being satisfied with the time they spent with patients and communicating with collaborating physicians. A model of advanced oncology practice needs to be developed that will empower APPs to provide high-quality patient care at the fullest extent of their knowledge and competence.

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Several investigators have examined the roles and responsibilities, clinical practice patterns, and productivity of nurse practitioners (NPs) and physician assistants (PAs) in oncology (Britell, 2010; Friese et al., 2010; Hinkel et al., 2010; Nevidjon et al., 2010; Polansky, Ross, & Coniglio, 2010; Towle et al., 2011), also known as advanced practice providers (APPs). Those investigators were motivated by the potential of APPs to fill the workforce gap created by the retirement of seasoned oncologists, fewer young physicians choosing to specialize in oncology, an increase in the older adult population, and a rising number of cancer survivors. These studies suggest that APPs deliver high-quality cancer care and are part of the workforce shortage solution (Brown, 2011; Institute of Medicine [IOM], 2009, 2010; Laurant et al., 2005; Towle et al., 2011). For example, findings of a study

on the workforce commissioned by the American Society of Clinical Oncology (ASCO) suggested that oncologists using APPs in advanced roles (e.g., evaluating new patients, writing chemotherapy orders, carrying out invasive procedures) not only benefited oncologists' practices by increasing efficiency and productivity, but also improved overall patient care (Center for Workforce Studies, 2007). Other investigations have shown that NPs and PAs are as effective as physicians when measuring clinical outcomes and patient satisfaction among other quality indicators, including cost reduction and productivity (Bauer, 2010; Towle et al., 2011). In the current healthcare climate of explosive costs, projected physician shortage, and increased demand for cancer care, the authors seized a moment in the evolution of a new cancer hospital to understand the role of APPs in delivering cost-effective, high-quality cancer care.