

Nurse Practitioner Productivity and National Comparison of Nurse Practitioner Salaries in Primary Health Care

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Canada

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Background

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- Nurse practitioners (NPs) implemented in primary healthcare (PHC) in all Canadian jurisdictions
- Important to consider relationship between health outcomes achieved & health human resources inputs such as time, efforts, skills & knowledge required (Evans, Schnieder, & Barer, 2010)
- Information needed to inform what is an appropriate NP patient panel size & productivity

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Study Purpose

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- To identify timely evidence regarding workload/caseload, patient panel size, and pay scales for NPs in community-based primary healthcare settings.



Productivity

- refers to measure of work completed in specific time period (Rhoads et al., 2006)
- depends on many factors including how work is organized, who provides or shares work, & availability of technical resources (Birch et al., 2009)

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Panel size

- refers to the number of patients under the care of a full-time equivalent (FTE) provider (Murray et al., 2007)

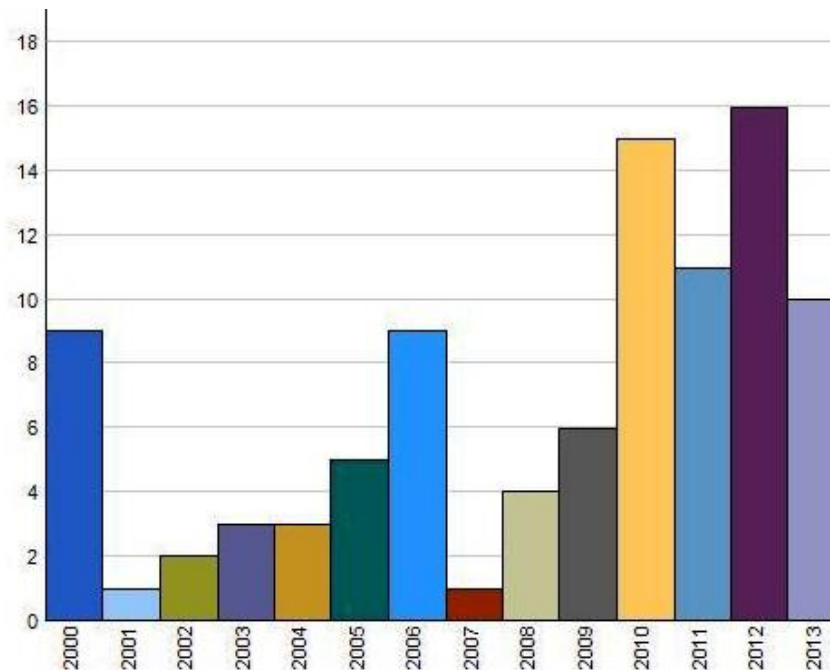
Methods

- A scoping literature review was conducted between March and May 2013.
- Published and Grey Literature
 - English or French
 - Between January 2000 and February 2013
- Descriptive statistics; content analysis
- 97 Articles/Reports included



Annual Publications

Publications on workload/caseload, patient panel & productivity have peaked in the last 3 years.



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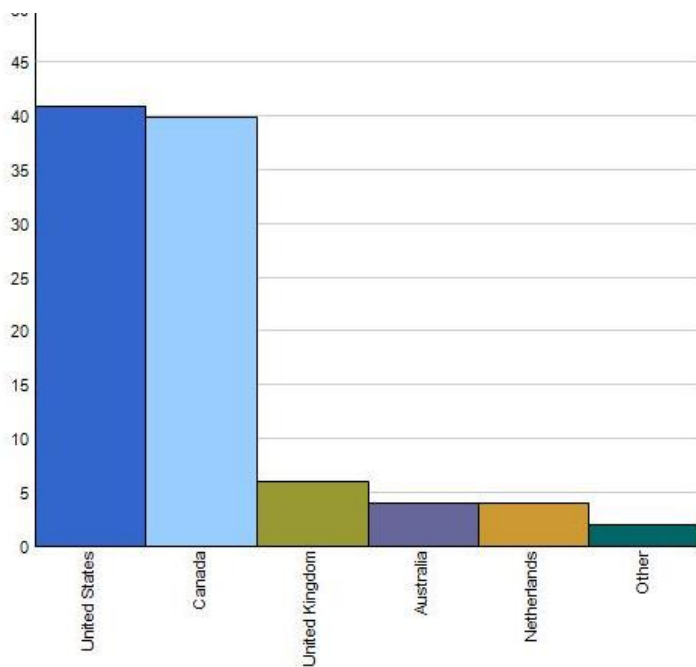
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Country of Publication

Majority of articles were from Canada & the United States.





Average # of Patients/Day

UK & Netherlands

12.75 (Wijers et al., 2012)

United States

14-28 (Am. Assoc. NPs, 2011)

British Columbia

14 (Sangster-Gormley et al., 2012)

Ontario

13 & 5 phone (Mian et al., 2012)

New Brunswick

15-18 (Horizon Health , 2012)

Nova Scotia

14 (Martin-Misener et al., 2010)



Productivity: Factors to Consider

- Patient visits
- Number of new patients
- Total number of referrals from medical doctors
- Average visits per diagnoses
- Numbers of cancellations or no-shows
- Average wait time per patient

(Rhoads et al., 2006, p. 37)

Canadian Panel Sizes

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Province	Number of Patients	Reference
British Columbia	334 patients rostered to a FTE NP	Sangster-Gormley et al., (2012)
Saskatchewan	NP in Spiritwood has 1,000 patients	Prince Albert Parkland Regional Health Authority (2008)
Ontario	Each FTE NP in an NP-led clinic is expected to roster 800 patients.	DiCenso et al. (2010); Thibeault (2011); Rosser et al., (2010)
Quebec	500-1000 patients	Charland (2013)
New Brunswick	minimum of 800 patients depending on setting & their experience.	Horizon Health Network (2012)
Nova Scotia	Proposed in physician resource plan 626-800 patients	Social Sector Metrics Inc. et al., (2011)

Patient Factors that Influence NP Panel Size

- Age
- Sex
- Socio-economic status
- Health status

Provider Factors that Influence NP Panel Size

- Experience
- Employment status (e.g., fulltime)
- Role clarity



Organizational Factors

- Time spent in NP role components
- Practice setting/model (e.g. FHT, NP-led)
- Location & size of practice
- Support personnel (e.g. clerical)
- # and type of other team members
- Focus & expectations of the NP role
- Level of NP autonomy



System Factors

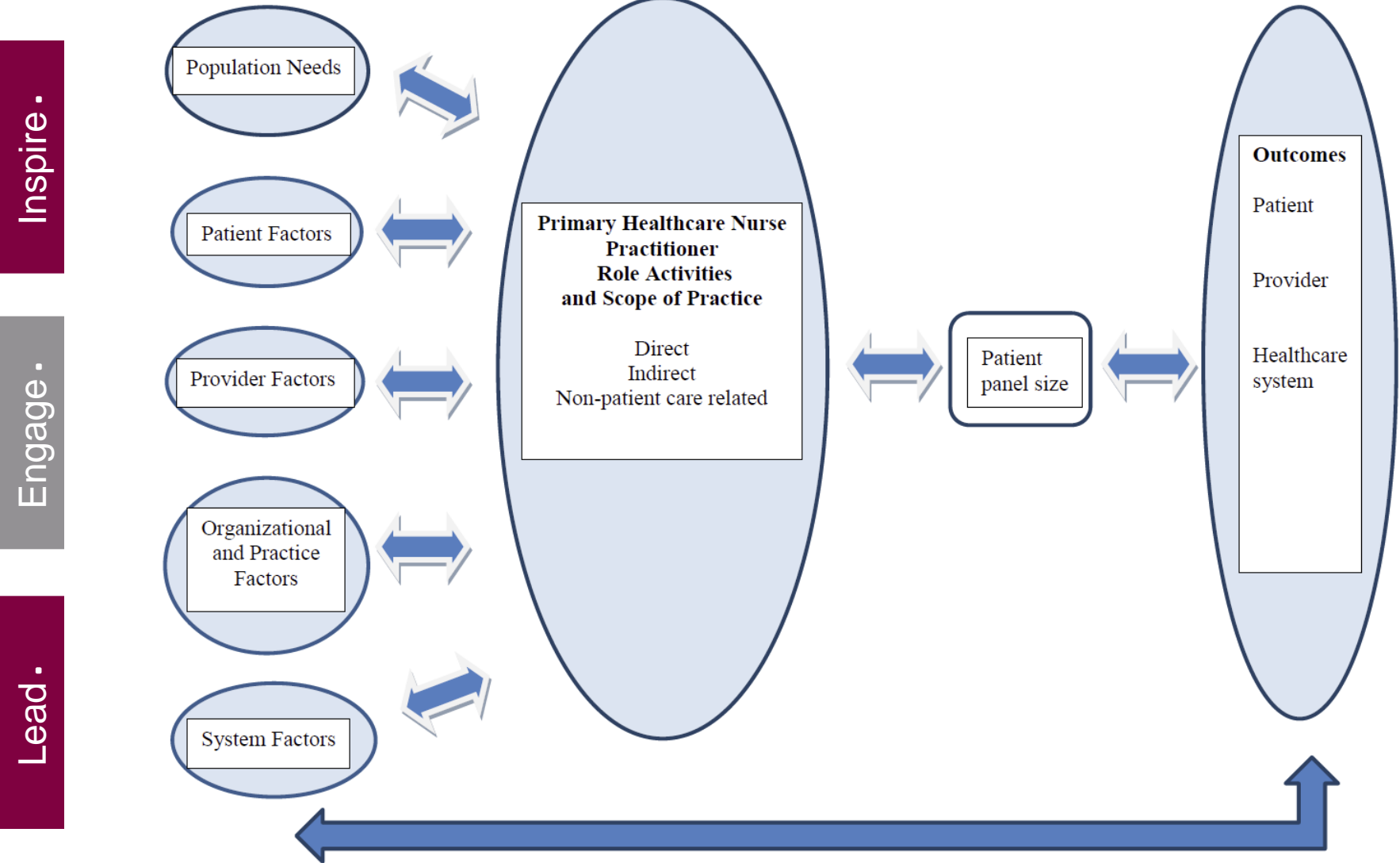
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- Scope of practice
- Source of funding
- Case mix – health/illness conditions
- Multimorbidity

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Factors to Consider When Determining Patient Panel Size



Sample of Annual Salaries

British Columbia	\$ 74,665 - \$107, 328
Alberta	\$ 80,975 - \$124,247
Ontario (ONA)	\$101,185 - \$115, 108
Ontario (FHT)	\$ 78,054- \$ 89,203
Quebec	\$ 48,029 - \$ 85,635
Prince Edward Island	\$ 86,919 - \$101,337
Northwest Territories / Nunavut	\$ 99,806 - \$117,955

Discussion

- Number of patients seen per day varies across and within countries but averages 9-15 patients per day.
- Limited information about NP patient panel size
- Variation across contexts making it difficult to estimate panel size
- Can only identify factors affecting NP panel size at present time

Conclusion

- Methods to identify appropriate patient panel sizes for NPs and other healthcare providers are required
- Systems to track and measure their activities and workload are needed

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