

Bringing Nursing Back into the Community

Primary care nurse Michelle Allard has nine years of experience delivering care as part of a collaborative primary health-care team at the Family Medical Centre in Winnipeg – and she can't imagine caring for patients any other way. Whenever she can, Allard advocates for this model, which puts patients first, improves access to care and supports nurses working to the full scope of their practice.

When the Winnipeg Regional Health Authority (WRHA) decided to test the concept of interdisciplinary care, in partnership with the Faculty of Medicine at the University of Manitoba, there were plenty of skeptics. But today, several successful WRHA urban clinics offer comprehensive and seamless care that ensures access to the expertise of a variety of health-care professionals, along with an abundance of health promotion and wellness advice. The clinics have proven their capacity to manage cases throughout the continuum of care, match patients quickly with specialist care, and balance the use of nursing and physician resources. The clinics also function as residency training units for physicians interested in family practice.

"The best part is we are bringing nursing back into the community, where we can handle everything from chronic disease management and diabetes to prenatal care and well-baby clinics," says Allard, who brings experience in acute care and public health to her pivotal role at the clinic. "This is what it looks like when nurses are working to full scope and building their clinical nursing skills."

Allard's work at the Tache Avenue clinic includes a wide range of health services, including immunizations, pelvic exams, ear lavages, Pap smears and sexually transmitted infection (STI) tests that complement, rather than replace, physician expertise. The clinic operates five days a week and employs two primary care nurses, a nurse practitioner, a half-time social worker, a full-time dietician, a part-time pharmacist, a librarian and an ethicist. Family medicine residents rotate through the clinic during the week, and referrals among team members are handled smoothly in-house.

Clinic director Dr. Gerald Konrad concurs with Allard's assessment that nurses are the backbone of a model that is vastly improving health outcomes. Learning about the capacity and expertise of the various professions benefits all team members and their clients and patients, says Konrad. "Working out roles and responsibilities takes a little time, but is worth the effort."



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Michelle Allard

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Nurse-led Innovations

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Allard points to a study she co-authored in 2010 that took a close look at how registered nurses, nurse practitioners and licensed practical nurses were being utilized in family practice residency programs and primary care settings. The study – *Exploring Nursing Roles in Canadian Family Practice Residency Training Programs* – highlighted the valued role of nurses in collaborative teams and identified the need to optimize nursing expertise so that nurses are effectively deployed within a collaborative team and not under-utilized through non-nursing activities, such as booking appointments and restocking supplies. The study reports that their job satisfaction depends on the degree to which nurses get to develop their clinical skills and work to their full scope of practice. Allard continues to work with organizations like the Canadian Family Practice Nurses Association to ensure that message does not get lost.

Konrad notes that current system measures are too focused on the number of patients seen and should instead pay attention to the actual outcomes of the care provided by these integrated community-based clinics. He adds that Manitoba has definitely embraced the notion of collaborative care and expects the model will continue to be replicated across the province, especially as the demands of an aging population increase.

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Dr. Gerald Konrad

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Reference:

Allard, M., Frego, A., Katz, A., & Halas, G. (2010). Exploring the role of RNs in family practice residency training programs. *Canadian Nurse* 106(3), 20-24.

Web links:

<http://www.wrha.mb.ca/community/primarycare/files/PCOrientationManual2011.pdf>

<http://www.cfpna.ca>

<http://www.albertahealthservices.ca/hp/if-hp-fact-sheet.pdf>

<http://rناو.ca/fr/connect/interest-groups/ofpn>

<http://www.fpnans.ca/>

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