

Nurse practitioners play special role

In acute care they're the daily eyes and ears on patients, so surgeons can focus on what they do best

Nurse practitioners have been regulated for primary health care in B.C. since 2005.

But until Jocelyn Reimer-Kent came along, they weren't allowed to practice acute care for cardiac surgery patients at Royal Columbian Hospital.

A graduate of the Bachelors and Masters nursing program at the University of Manitoba, and a long-time clinical nurse specialist in the cardiac program at the Health Sciences Centre in Winnipeg, when Reimer-Kent headed west she knew nurse practitioners in her new province could offer more than had originally been envisioned.

Working in consultation with Dr. Derek Gunning, a cardiac surgeon at RCH and colleague Carol Galte, a seasoned cardiac nurse practitioner, Reimer-Kent developed an intensive six-month post-graduate fellowship program to educate nurse practitioners to expand on their initial nurse practitioner training and complement care provided by nurses and surgeons to patients in the hospital's cardiac surgery unit.

"Coming into acute care, it's a specialty," says Reimer-Kent of the increased demands put upon nurse practitioners in acute care.

"It's a much deeper breadth of knowledge. If there's a problem, you've got to be able to respond to it right away."

Nicky Aaronson is the program's first fellowship graduate and she's now one of two nurse practitioners working in the cardiac surgery unit at RCH.

Stepping into the high-stakes environment of acute care for very sick people from her background as a patient care coordinator at Vancouver General Hospital and teaching clinical nursing in the classroom wasn't easy, but "it was like a golden opportunity," she says.

"It was a new role so we got to carve it out and champion the role."

One of her biggest challenges when she entered the program in 2011 was educating her colleagues about her role in the unit and the care of her patients.



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Acute care nurse practitioner Nicky Aaronson is one of two nurse practitioners working in the cardiac care unit at Royal Columbian Hospital.

"People didn't understand what we were doing," she says. "It did take a bit of time, but I knew that was part of the deal."

Reimer-Kent says the intent of the acute care nurse practitioners program is to take some of the load off surgeons, to be their daily eyes and ears on the patients so surgeons can do what they do best—correcting the problems that brought the patients into the cardiac unit in the first place. By leading daily rounds, as well as diagnosing and planning treatments for problems or complications, the nurse practitioners provide a continuity of care that's more responsive to patients, says Reimer-Kent.

And that makes for a more efficient service.

"If a patient is in a bed here, it's because they need to be," says Reimer-Kent. "They're not waiting for a test or procedure."

That extra set of highly trained eyes can also be a life saver, as was the case for Donald Soutar, a Burnaby senior who was recovering from a double bypass at RCH when Aaronson suspected something wasn't going well

a few days after surgery. She discovered a bleeding ulcer.

"It's been good having Nicky there," says Soutar, 77.

"She has a well-rounded view of me as a patient that goes beyond my surgery."

It's endorsements like that that tell Reimer-Kent she's on the right track with her acute care nurse practitioners program.

"As nurses we're not trained to be doctors," she says.

"We bring something to health care that's unique and different."

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REIMER-KENT



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