Role of the Emergency Nurse with Task Shifting/Sharing in Mind



Kaho Suda (Yamaguchi University Graduate School of Medicine Faculty)

Backgrounds

- Japan's emergency medical services are facing a variety of challenges, including an increased burden on medical professionals.
- The Ministry of Health, Labour and Welfare is promoting task shifting/sharing so that each profession can maximize its capabilities.

Methods

- I conducted a cross-sectional online, anonymous survey among doctors, nurses, and paramedics who were working in emergency medicine over three years with a self-administered questionnaire.
- Surveyed from December 2021 to January 2022
 regarding the extent to which doctors, nurses, and
 hospital paramedics should each play 25 necessary roles
 in emergency medicine. I used 4-point Likert scale.

Objective

 The purpose of this study is to clarify the role that emergency nurses should play in order to achieve a higher level of expertise in cooperation and collaboration with multiple professions, with a view to task shifting/sharing among healthcare professionals engaged in emergency care.

What is task shifting/sharing?

• Shift or share of tasks under the consensus of medical professionals.





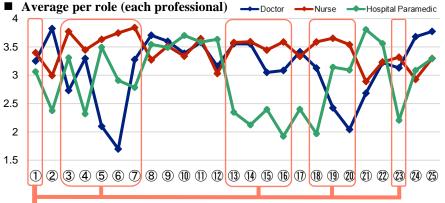
Nurses perform tracheal intubation, which used to be performed by doctor, thereby reducing the burden on them.

Results

■ Respondent (the number of people and years of clinical experience)

1,905 → 1,888 (Excluded 17 cases that did not match participation criteria)

• Doctor 119 (17.76 ± 9.66) • Nurse 354 (16.67 ± 7.79) • Paramedic 1,415 (11.15 ± 5.33)

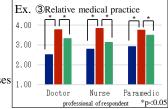


■ Two-way analysis of variance

 $\label{eq:professionals} \ \ \text{Professionals that play the role and professionals of respondent had the interaction effects.}$

- 3 Relative medical practice
- **6** Daily life support
- Tesychological care of patients and families
- (16) Inter-departmental collaboration
- ®Support for life after discharge

These five roles had significantly higher scores for nurses among three professions of respondent (p<0.05).



[25 necessary roles in emergency medicine]

- ① Judgment of urgency
- 2 Judgment of severity
- 3 Relative medical practice
- (4) Absolute medical assistance
- (5) Relative medical assistance
- 6 Daily life support
- 7 Psychological care of patients and families
- (8) Initial response (pre-hospital care)
- (9) In-transit care (pre-hospital care)
- 10 Disaster triage
- 11) Lifesaving treatment during disaster
- (12) Wide-area medical transport during disaster
- (13) Coordination for resolving ethical issues
- 14 Decision-making support
- (15) Inter-professional collaboration
- (16) Inter-departmental collaboration
- ① Cooperation with social welfare organizations
- (18) Support for life after discharge
- (19) Environmental coordination
- Maintenance and preparation of emergency medical supplies
- (21) Instruction of first aid to the general citizen
- (22) Instruction of first aid to medical staff
- ② Coordination of work environment
- Research related to emergency medical care
- 25 Activities in academic organizations

Discussion/Conclusion

- With task shifting/sharing in mind, Five roles, [Relative medical practice], [Daily life support], [Psychological care of patients and families], [Inter-departmental collaboration], and [Support for life after discharge] were significantly expected to be played by nurses compared to doctors and hospital paramedics.
- Emergency nurses were expected to provide multifaceted care that included not only physical aspects, but also mental and social aspects, as well as family members.