Role of the RN in Primary Health Care  
Written by Pippa Sloan May 2009

The role of Primary Health Care in British Columbia is starting to expand and change. Our focus is shifting and I believe this is a shift that is not only beneficial but is absolutely necessary for successful health care not only in this province but also in this country. It is imperative that Prevention becomes the key to ensuring better outcomes. Better outcomes include: a decrease in the number of patients hospitalized for Chronic Diseases, an increase in accessibility to health care in general; and less ‘Orphan’ patients that do not have a family physician. Having a Registered Nurse working with physicians in family practice is a practical way to meet these outcomes.

I have been working as an RN in British Columbia since 2001. I, as most RN’s started my career in a medical unit and honestly left most days in tears. These tears were an outward expression of many internal struggles. I had given my life to serve. As a little girl and now as a woman wanted to make people “feel better”. As a new grad at the time I felt I was doing little to help people heal. I did not feel confident in the care I was providing and had little or no time to spend on Prevention therefore, I frequently saw the same patients back on the Medical Unit, treating the same diseases. The nurses that work in these areas are dedicated individuals and probably have the same goals that I have for their patients. However, due to nursing shortages and the burden of disease make little progress in the area of Preventative Education. I therefore very quickly decided this was not the area of nursing for me. I decided that I wanted more time to focus on my passion preventing illness and educating people to take control of their own health. At that time I switched to public health and rather enjoyed my years working with that population.

In the last year a new door has opened up for me and in my opinion has the potential to change the face of healthcare. The role of a Registered Nurse working in a physician’s office is not new to many people but the role that the RN can play is vast. I have been hired to work along side four incredible family physicians. My role includes simple nursing tasks such as suture removal, dressing changes, immunizations and other general tasks. I also have the wonderful experience of having the lead role in prenatal care and well baby care along with some cognitive assessment and travel advice. My background in public health has given me the knowledge and experience to be an effective leader in some of these areas.

The new and exciting area is the role an RN can play in Chronic Disease Management. Patients with Chronic Diseases consume a substantial portion of our health care resources. The Ministry of Health states “Cardiovascular Disease, Cancer and Diabetes consume $1.28 billion dollars a year or 10.3% of the health care budget” (Ministry of Health 2007 1). A vast majority of this money I have been told is being spent treating these patients in crisis while in the hospital. As an RN now working in Chronic Disease Management I am able to spend up to 30 minutes every three months with patients that are willing to be a part of the process. I help them have a better understanding of their disease and the progressive nature that most of these diseases take. When an individual is

feeling well the burden of their chronic disease on their body is minimal. However, this is the time to take action! This is the time to set goals with the patient around nutrition and physical activity. The need for regular visits is imperative for both the patient and the health care provider. It allows us as their health care providers to identify trends in the health of our patients. We utilize tools such as blood work or blood pressure assessments to analyze the path of the disease. These procedures enable us to treat these changes and often prevent unnecessary trips to the Emergency Department, inevitably decreasing the number of patients hospitalized for treatment of Chronic Disease.

Not only do I believe an RN in this role enhances the care a patient can receive, I also believe the presence of an RN decreases physician time spent on unnecessary duties. This will allow the physician to increase his or her patient roster. Orphan patients or patients that float around the system without a regular physician can go years with a Chronic Disease or a severe illness that is not recognized. Care that is provided by an individual physician has an increased rate of successful outcomes.

Unfortunately the RN role in Primary Health Care in British Columbia is not a permanent position. Many nurses working in these areas are currently being funded by a short term pilot project. The impact of prevention on the health care system is difficult to quantify, especially when short-term parameters are placed on these positions. I am hoping my quest to teach others to take charge of their own health does not get cut short. It is time as a Country and a Province, as communities and individuals to take responsibility for our health and I believe that begins with the teaching of prevention by highly qualified, experienced Registered Nurses under the guidance of a Family Physician.