

## Advanced practice registered nurses adapt to expanded telehealth use during and after pandemic

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During the COVID-19 pandemic, nursing staff leaders scrambled to find online platforms that would allow providers to treat patients via



telehealth.

A new paper published in <u>The Nurse Practitioner</u> looks at how 75 advanced practice registered nurses (APRNs) across Illinois not only adapted to <u>telehealth</u> but also found ways to expand its use in their nursing practices to this day.

The research was conducted by Deborah Adelman, a professor of graduate nursing at Purdue Global; Catherine Fant, an adjunct graduate nursing faculty member at Walden University; and Julia Koklys, an assistant professor in graduate nursing at Lewis University.

The group explored how APRNs responded to the need to abruptly switch from in-person to telehealth options because of the pandemic, especially as most other studies examined this phenomenon from the perspective of patients, physicians and physician assistants, Adelman said. The researchers found that while many APRNs recognized the benefits of telehealth visits, some concerns remain regarding the equity of internet access, patient computer and technology literacy, and quality of care.

For the study's purposes, APRNs included <u>nurse</u> practitioners, clinical nurse specialists, certified nurse midwives and certified registered nurse anesthetists.

According to Adelman, most of the APRNs were comfortable with the concept of using telehealth despite issues regarding technology and platform performance and were optimistic about its impact on <u>patient</u> <u>care</u>.

"We noticed those in the <u>rural areas</u> were more comfortable with it, and it was a patient satisfier," Adelman said. "APRNs were already comfortable in using technology to send tests to larger urban medical



centers for results. The pandemic made it more routine with time because they had to use it."

In addition to overcoming tech issues, nurse practitioners had to adjust to how care was delivered to patients online, as well as to new routines and the additional training needed to fully utilize the technology.

"They are now seeing patients who would have hesitated to come into a medical office," Adelman said. "There's an awakening to the fact there is an inequity to internet access, as well as what is happening off camera or behind the scenes and patient privacy issues."

Illinois, like many other states, is increasing broadband access, which could in turn increase residents' telehealth use.

The research showed that most participants were able to develop or maintain rapport with new or established patients using telehealth and felt that their patients were satisfied by these virtual visits. Adelman said that while some participants surveyed felt that patients received somewhat worse care than new or existing patients seen in person, she believes those issues could be caused by other patient factors such as poor vision or hearing, or technology issues for both patients and providers. Even if they felt their patients experienced these kinds of issues, APRNs overall wanted to continue using telehealth platforms in the future, and new federal legislation has allowed for that to happen post-pandemic.

Adelman said having APRNs excited to use and expand the use of telehealth is a good thing, especially as a way to reach more people and address health disparities. She is concerned how some hospitals and clinics are starting to charge additional fees for telehealth use and basic services that would be free or at a minimal cost to some patients in an office setting.



"This is a permanent part of the future of health care delivery, as it could help with the provider shortage," Adelman said. "However, I am concerned that we may be moving too fast, and we should move more deliberately with use and policies."

Adelman would like to replicate the study, particularly in another state with a more dispersed population, as she believes medical providers and populations in such areas are more comfortable using telehealth at a higher rate due to distance. She would also like to look at how nurse educators are using <u>online platforms</u> for activities like patient education and provider training. Another area needing more research is the length of a virtual appointment.

"This study gave a voice to <u>nurse practitioners</u>. There are all types of areas that we have to think about now, especially as we have so much data and comments to review," Adelman said.

**More information:** Deborah S. Adelman et al, APRNs' perception of telehealth use, *The Nurse Practitioner* (2023). DOI: 10.1097/01.NPR.0000000000000104

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