THE EXPANDED ROLE OF THE NURSE: A POSITION PAPER

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This position paper on the expanded role of the nurse reflects the opinions of the director of the University of Alberta School of Nursing and the program co-ordinators.

For many years nurses in the rural areas of Western Canada and in the isolated area of the Canadian North have functioned in expanded roles, without these being designated as such. However, emerging societal and governmental pressures related to reducing health care costs, better utilization of health care workers and the need for selected types of physician substitutes to provide medical care in remote areas, have together created a trend toward greater formalization of “expanded” roles for nurses.

At the University of Alberta, we have tended to identify the expanded role of the nurse in terms of developing “independent” aspects of nursing in the care domain. Our focus is on developing greater depth of knowledge and skill for assessment, teaching, counseling and using judgement concerning nursing competency limitations. In effect, this approach prepares the nurse to function as a nurse practitioner in the realm of primary care. However, we are also cognizant of the additional need to prepare some nurses to fill an extended role, where they are capable of performing tasks which are “normally” considered to be the purview of the physician.

In conjunction with these differential roles we are also aware that the type of education needs to be relevant to the degree of responsibility demanded of the nurse. Ideally preparation should be at the baccalaureate level. The solid foundation of basic and social sciences acquired in the baccalaureate program enables the nurse to function independently and use high levels of decision making. Nevertheless if expertise is required for highly specialized areas specific additional courses may need to be taken.

Preparation for specific routine tasks, however specialized, can be carried out in short-term educational programs. Consequently clinical courses with an emphasis on skills could and should be taught in the college system. However, the critical question of location of such courses rests upon the resources available both selected clinical facili-
ties and skilled teaching personnel. In light of these factors we take a somewhat pragmatic view of the question of location.

There is increasing emphasis in the curriculum of the University of Alberta's baccalaureate program, on the process of nursing assessment together with the integration of critical thinking, skills basic to the nurse's being able to function independently. Provided with these basic foundations we are encouraging our graduates to work in positions which allow them to function in an expanded role. Faculty are also accepting the responsibility for self-development in assessment skills by working in local family practice units.

We have three on-going programs, and one proposed program in the School which illustrate our basic concern for and commitment to the need for well-prepared clinical nurses. The nurse-midwifery program (Advanced Practical Obstetrics) has been in existence since 1943 and is accepted as an elective for one course credit in the post-basic baccalaureate program. Secondly, the Northern Nurse program is part of a nation-wide demonstration initiated by Medical Services which commenced three years ago; this program is aimed at developing nurses' "independent" nursing skills as well as providing selected learning experiences in the "physician substitute" role. The graduating practitioners from this program are being extensively evaluated with respect to their competency and proficiency. Thirdly, the continuing education program is also helping nurses expand their roles, particularly in the areas of history-taking and physical examination.

In addition to the above, the School is actively participating in two extra-school areas. Firstly, we have, over the past five years, participated in the development of an interdisciplinary graduate program for health service administrators. The assumption is that improved utilization of all health workers is considerably dependent upon there being health care administrators who understand both the wide range of health care needs of the public (including identifying needs which are substantially unmet), and the complex dynamics of expanding professional roles which include those of nurses. Secondly, we have actively participated in the work of an Allied Health Professionals' Group which is systematically evolving expanded roles for nurses. Among the proposed roles is that of a Nephrology Nurse Clinician, currently in the research proposal (demonstration project) phase.

Finally the proposed (1974-75) M.N. in Nursing in Acute Illness program is specifically aimed at expanding the independent clinical functioning of nurses. Thus while we have not developed a comprehensive School position on expanded roles we are at present offering and are associated with courses and programs which constitute tangible, direct responses to changing community needs. These efforts
reflect our philosophy that the effective expansion of nursing roles goes far beyond merely making internal adjustments in education and practice in the nursing profession. A multiplicity of interrelationships with other professionals and agencies are involved in stretching beyond the educational walls per se.

The university schools have a decided advantage for interprofessional teaching and learning both at the undergraduate and graduate level. It is hoped that our proposed graduate program will be able to fully utilize our University's wide resources as it builds on the foundation of the baccalaureate program. If we can make the fences presently erected around specific professional groups increasingly permeable, the opportunity for greater flexibility of roles becomes both more apparent and more feasible.

The process of role change is being examined in a demonstration project presently underway in a satellite community. The purpose is to look at the processes occurring during the introduction and integration of "allied health workers" into a medical clinic: namely, nurses functioning in a so-called expanded role.

Opportunities for practice in an extended role may well be enhanced by the trend towards the development of community health centres in Alberta. Nevertheless we must still be aware of the need for highly qualified nurses functioning in an expanded role to care for the acutely ill. Emphasis should not be placed on one facet of the expanded role to the detriment of the other.

The trend at this University is to be responsive to the needs of the community and develop innovative methods for the preparation of nurses to function in expanded roles. We are of the opinion that a "final" position about the expanded role would be premature (i.e., given that the needs picture is only beginning to unfold), consequently we are maintaining a very flexible interpretation of what the "extended role" can and should involve.