

“You can count on APCs” How Advanced Practice Clinicians Are Helping SNFs

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In an industry of acronyms, “APC” might get lost in the shuffle.

But talk to the patients to whom they deliver life-changing care and APCs will never be overlooked.

An Advanced Practice Clinician, or APC, is a nurse practitioner or physician assistant, and for quite some time they have been delivering quality care in the post-acute setting through collaborative practice models with physicians. Their impact in post-acute settings — on clinical quality, patient outcomes, patient satisfaction and cost — is profound.

The dual increase of chronic illness and multi-morbidity enhances the acuity of care and often outpaces the patient load requirements for physicians. To strengthen the workforce, TeamHealth, the nation’s leading integrated physician practice and provider of post-acute services, is advancing the impact of APCs as critical members of patient care teams to an even greater extent, improving patient outcomes and patient satisfaction while relieving the burden on physicians.

This transformation of health care delivery through more effective utilization of the APC workforce alleviates the impending rise in demand for post-acute services and enables providers to deliver the right care to the right patient at the right time with the right clinician.

This is a look at how they are doing it.

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Here are four areas where APCs help SNFs:

- **Clinical quality**
 - **Patient satisfaction**
 - **Patient outcomes**
 - **Cost**
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The changing role of APCs in post-acute settings

APCs in post-acute care are not new. Clarence Smith, Executive Vice President of Post-Acute Care at TeamHealth, notes two key studies that are now two decades old.

The first was 2003, when the Journal of American Geriatrics Society demonstrated the positive impact of nurse practitioners providing primary care in the nursing home setting as evidenced by a reduction in hospitalization and improvements in managing the cost of care.

The second noteworthy study came from the U.S. Department of Health and Human Services in a 2006 report on physician practices and nursing homes. This study spotlighted the positive merits of APCs in the post-acute setting and pointed to the potential to increase the quality of care provided to nursing home residents through an expanded role for the APC as part of the treatment team.

“They have been in clinical practice in these settings for quite some time but today I think that you’re finding that these clinicians are playing a larger role,” Smith says.

“They’re not only providing primary care services, but they’re also playing a role in consultative services such as behavioral, cardiology, palliative and wound care.”

What is changing is the APC’s expanded presence in post-acute. Today, APCs are acting as subject-matter experts on everything from infection control to quality assurance, taking on a more visible and expanded leadership role in facilities across the country.

“We’re also seeing that APCs are playing a larger role in the assisted living space as this setting has migrated from a social model of care to a wellness model of care to a medical model of care,” he says.

Top outcomes from APCs with SNFs

SNF operators across the country are learning just how much APCs can contribute to the overall wellbeing of patients and residents as well as to the facility’s operational efficiency. And that work starts with a concept as true as it is old:

Many hands make light work.

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EVP OF POST-ACUTE CARE, TEAMHEALTH

“There is a workforce shortage of physicians, a shortfall that is, depending on what you read, anywhere from 30,000 to 124,000 physicians over the next 10 years,” Smith says. “At the same time the APC workforce is actually growing, with upwards of 30,000 or 35,000 new clinicians entering the workforce.”

As such, SNFs are inviting APCs to increase their role within the on-site care teams.

“They’re becoming the leaders of interdisciplinary teams,” he says. “They’re managing care transitions. They’re collaborating with nursing, therapy, dietary. They’re initiating care modalities with proven outcomes such as annual wellness visits, advanced care planning, and chronic care management. In general, you’re seeing them become more and more involved in the post-acute care setting.”

Because most APCs have a nursing background, they have good connectivity to the staff at the SNF, Smith says — a shared experience with the LPNs and RNs in those clinical settings. Typically speaking, their bedside manner relates well with patients and family members.

The result: better care outcomes for patients and an improved work-life balance for the full-time staff.

“Practicing within the scope of collaboration and/or supervision, APCs provide high-quality service that complements the care from their physician colleagues,” Smith says. “There’s no drop off in clinical care when you utilize APCs.”

How TeamHealth tailors APCs to each facility

Who is coming into your building?

From staff to patients to family to vendors, there is perhaps no more important variable for an operator. At TeamHealth, the strengths of the APCs entering a post-acute care facility are specific to the needs of the facility.

“There are going to be some facilities that have characteristics that deem a heavy physician centric model of care, while some facilities, their demographics and wants and needs allow for a greater utilization of an APC model,” Smith says. “The model we deploy depends on several variables including the acuity and census.”

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TeamHealth tailors its APCs not just to the needs of the patients but to the expectations of the physicians. The APC becomes the primary driver of care delivery, the clinicians interfacing the most with the patients, the families and the interdisciplinary team. This allows physicians to perform at the top of their licenses, performing high acuity visits, federally mandated visits and medical directorship responsibilities.

APCs across TeamHealth contribute to primary care subspecialty programs as well as after-hour call service. They've helped facilities improve their CMS star ratings and several other process and outcome measures related to readmissions, utilization of antipsychotic medications and fall prevention.

“APCs are filling a void. They have an important presence,” he says. “The health care industry has a national clinical workforce shortage in physicians, with patients who require a higher presence model of care. When you have limited physician capacity, you can count on APCs significantly contributing to care delivery.”

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