

# Nurses as substitutes for doctors in primary care: **implementation considerations**



During pandemics, the need for healthcare workers increases as more people get sick and need care. At the same time, healthcare workers may fall ill themselves or be placed in quarantine. Governments across the world are trying different solutions to address this problem. One possible solution is to move the care of some patient groups from more specialised to less specialised health workers, for instance by moving certain tasks from doctors to nurses.

# Questions for implementers when implementing mHealth strategies

### Preparing nurses and doctors to implement doctor-nurse substitution

- Have efforts been made to increase doctors' trust in and acceptability of using nurses to substitute for doctors? For instance, have there been any attempts to reassure doctors that nurses have the necessary skills and training to take on the designated task/s?
- Are processes in place that allow doctors and nurses to communicate effectively and provide feedback to one another concerning specific task-shifting strategies?
- Are doctor/nurse role boundaries clearly defined for the specific substituted task/s?
- Have nurses received appropriate training and tailored feedback regarding the specific substituted task/s that they have been requested to deliver?

#### Who is this summary for?

Implementation agencies, ministries of health, programme managers, and other stakeholders who are planning, implementing, or managing strategies involving moving tasks from doctors to nurses.

#### About the review

A Cochrane Review of qualitative research explored how patients, nurses, doctors and others view and experience moving tasks from doctors to nurses in primary healthcare (Karimi-Shahanjarini 2019). The review analysed 66 qualitative studies from around the world, and shows that patients and health workers see a number of benefits but also challenges when tasks are moved.

## How up-to-date was this review?

The review authors searched for studies that had been published up to June 2018..

#### Implementing doctor-nurse substitution

- Have appropriate leadership and management been put in place to implement doctor-nurse substitution?
- Have nursing documentation and record keeping with regard to task shifting been optimised and also kept to a minimum?
- Have attempts been made to ensure that factors affecting nurses' internal motivation (such as job satisfaction and independent work) and external motivation (such as improved working conditions and financial issues) are addressed?
- Have appropriate supervisory and monitoring arrangements been put in place for the specific substituted task/s?
- Are the necessary resources (financial, infrastructural, facilities, and drugs and equipment) available to nurses taking on new task/s?
- Is an appropriate patient referral system in place in relation to the specific substituted task/s?
- Can service users easily access the nurses who have been designated to deliver the specific substituted task/s?

**Supporting patients** 

- Is information being communicated to service users on the task/s that will be delivered by nurses rather than doctors, and about the roles that nurses will play in their care?
- Evaluating the shifting of tasks from doctors to nurses
- Does the substituted task facilitate continuity of care for patients?
- Does implementation of doctor-nurse substitution for the specific tasks reduce doctors' workloads without leading to a reduction in their salary or other payments?

In a summary of another Cochrane review, we present the effectiveness of moving tasks from doctors to nurses in primary care. Review title: Nurses as substitutes for doctors in primary care. Find the summary and review here

Reference

This review is among a series of systematic reviews informing the WHO recommendations on:

Optimizing health worker roles for maternal and newborn health through task shifting (https://optimizemnh.org/)

The information for this summary is taken from the following Cochrane Review: Karimi-Shahanjarini A, Shakibazadeh E, Rashidian A, Hajimiri K, Glenton C, Noyes J, Lewin S, Laurant M, Colvin CJ. Barriers and facilitators to the implementation of doctor-nurse substitution strategies in primary care: a qualitative evidence synthesis. Cochrane Database of Systematic Reviews 2019, Issue 4. Art. No.: CD010412. DOI: 10.1002/14651858.CD010412.pub2.

Prepared by 'Briefly Summarised', Cochrane Norway/EPOC, April 2020. Contact: claire.glenton@fhi.no

The Norwegian Satellite of the Effective Practice and Organisation of Care (EPOC) Group receives funding from the Norwegian Agency for Development Cooperation (Norad), via the Norwegian Institute of Public Health to support review authors in the production of their reviews.







The questions presented in this summary are from a Cochrane Review. The review authors have searched for, assessed and summarised relevant qualitative studies using a systematic and predefined approach. They have then used the review findings to develop a set of questions for implementers.