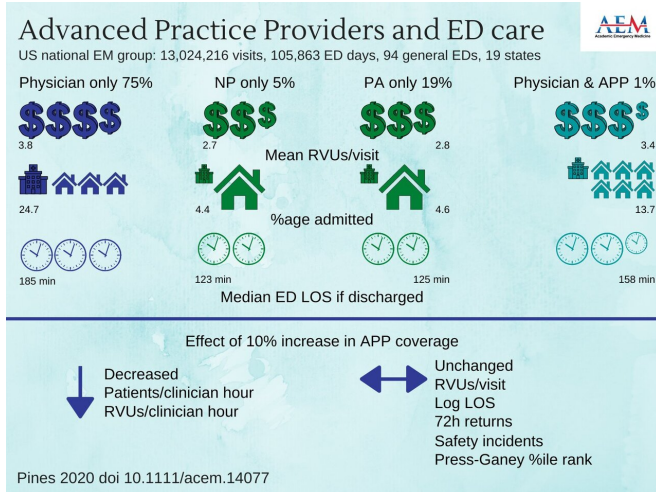


Study shows minimal impact of advanced practice providers on ED productivity, flow, safety, patient experience

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Philadelphia. In this role, he focuses on developing and implementing new care models including telemedicine, alternative payment models, and also leads the USACS opioid programs.

The study suggests that advanced practice providers can be effectively integrated into EDs with staffing models accounting for the lower productivity of advanced practice providers compared to physicians with no apparent negative impact on ED flow, clinical quality, or patient experience. Greater levels of advanced practice provider coverage appear to allow physicians to care for higher-acuity cases while also allowing advanced practice providers to care for a lower, but significant number of patients requiring hospital admission and other critical care services.

US national emergency medicine group: 13,024,216 visits, 105,863 emergency department days, 94 general emergency departments, and 19 states. Credit: Kirsty Challen, Lancashire Teaching Hospitals

Advanced practice providers (APPs) have lower productivity compared with emergency department physicians, seeing fewer and less complex patients and generating less relative value units per hour, and having no apparent impact on patient satisfaction and safety metrics. That is the conclusion of a study to be published in the November 2020 issue of *Academic Emergency Medicine* (AEM), a journal of the Society for Academic Emergency Medicine (SAEM). This is the first known study to examine the impact of ED APP staffing on productivity, flow, safety, and experience

The lead author of the study is Dr. Jesse Pines, the national director for clinical innovation at US Acute Care Solutions (USACS) and a professor of emergency medicine at Drexel University,

While advanced practice providers are currently utilized primarily for low-acuity cases, the finding of advanced practice providers independently evaluating critically ill ED patients suggests the potential for enhanced use of advanced practice providers in EDs. However, advanced practice provider use did not result in economies of scale given the higher productivity of physicians even when accounting for their similarly [higher salary](#).

The findings are discussed with the author in a recent AEM podcast, "Taking Care of Patients Everyday With Physician Assistants and Nurse Practitioners." An accompanying invited commentary by Zane and Michael, "The Economics and Effectiveness of Advanced Practice Providers Are Decidedly Local Phenomena," provides expert perspective of APPs in contemporaneous emergency care.

More information: Jesse M. Pines et al, The Impact of Advanced Practice Provider Staffing on Emergency Department Care: Productivity, Flow,

Safety, and Experience, *Academic Emergency Medicine* (2020). DOI: [10.1111/acem.14077](https://doi.org/10.1111/acem.14077)

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