

Jeff Susman, MD
Editor-in-Chief



It's time to collaborate— not compete—with NPs

It is time—time to abandon our damagingly divisive, politically Pyrrhic, and ultimately unsustainable struggle with advanced practice nurses (APNs). I urge my fellow family physicians to accept—actually, to *embrace*—a full partnership with APNs.

Why do I call for such a fundamental change in policy? First, because it's the reality.

In 16 states, nurse practitioners already practice independently. And in many more states, there is a clear indication that both the public and politicians favor further erosion of barriers to independent nursing practice. Indeed, such independence is outlined in "The Future of Nursing: Leading Change, Advancing Health," published by the Institute of Medicine (IOM) in October 2010. Among the IOM's conclusions:

- Nurses should practice to the full extent of their education and training.
- Nurses should achieve higher levels of education and training through an improved education system that promotes seamless academic progression.
- Nurses should be full partners, with physicians and other health care professionals, in redesigning health care in the United States.

Second, I believe our arguments against such a shift in policy don't hold up. Despite the endless arguments about outcomes, training, and patient preferences, I honestly believe that most nursing professionals—just like most physicians—practice within the bounds of their experience and training.

Arguments FPs make against APNs sound like specialists' arguments against us.

Indeed, the arguments family physicians make against APNs sound suspiciously like specialists' arguments against us. (Surely, the gastroenterologists assert, their greater experience and expertise should favor colonoscopy privileges only for physicians within their specialty, not for lowly primary care practitioners.) Rather than repeating the cycle of oppression that we in family medicine battle as the oppressed, let's celebrate differences in practice, explore opportunities for collaboration, and develop diverse models of care.

Third, I call for a fundamental shift in policy because I fear that, from a political perspective, we have much to lose by continuing to do battle on this front. Fighting fractures our support and reduces our effectiveness with our legislative, business, and consumer advocates.

Finally, I'm convinced that joining forces with APNs to develop innovative models of team care will lead to the best health outcomes. In a world of accountable health care organizations, health innovation zones, and medical "neighborhoods," we gain far more from collaboration than from competition.

As we ring in the new year, let's stop clinging to the past—and redirect our energies toward envisioning the future of health care.

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THE JOURNAL OF FAMILY PRACTICE

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