

Master of Clinical Science

A systematic review of the effectiveness of nurse-led clinics on service delivery and clinical outcomes in adults with chronic ear, nose and throat complaints.

Caroline Whiteford RN, BN, JBI-CF

Student number a1642102

School of Translational Health Science

Faculty of Health Sciences

The University of Adelaide

Caroline.whiteford@health.sa.gov.au

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Caroline Whiteford, RGN, BN (FUSA), JBI CF

Clinical Service Coordinator, Royal Adelaide Hospital and Masters of Clinical Sciences Candidate,
School of Translational Health Science, Faculty of Health Sciences, The University of Adelaide.

caroline.whiteford@health.sa.gov.au

Supervisors:

Sarahlouise White BSc (Hons) MSClinSci, PhD.

School of Translational Health Science & Joanna Briggs Institute, Faculty of Health Sciences,
The University of Adelaide, South Australia 5005

Sarahlouise.white@adelaide.edu.au

Matthew Stephenson, BBiotech (Hons), PhD.

School of Translational Health Science & Joanna Briggs Institute, Faculty of Health Sciences,
The University of Adelaide, South Australia 5005

Matthew.stephenson@adelaide.edu.au

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Abstract

Background Ear, nose and throat complaints are very common and can cause disruption to patients' lives. Many conditions are of a chronic nature and are not currently managed in a timely manner by general practitioners in the community. This may be due to a lack of specialised knowledge, necessary diagnostic equipment, or a lack of time for lengthy patient education about management of their condition. A nurse-led model of care may be an effective alternative.

Objectives To examine the effectiveness of nurse-led clinics on adults with chronic ear, nose and throat complaints.

Inclusion Criteria

Participants Adult patients, aged 18 and older, attending ear, nose and throat clinics, regardless of complaint.

Interventions Nurse-led care in general practice and acute care in which the nurse was identified as taking a lead role in the care of the patients with chronic ear, nose and throat complaints.

Comparator General practitioner-led care, or ear, nose and throat consultant-led care, sometimes described as "standard care".

Outcomes Service delivery outcomes- specifically patient satisfaction, waiting times, patient education booking queues, clinical and health outcomes, specifically, treatment times, treatment duration, course of treatment, self-treatment rates, change in presentation to clinic episodes, re-infection rates, prevention and cure, representation of patients to clinic for same complaint, levels of pain and

discomfort and financial outcomes, specifically differences in costing, nurse-led clinic versus medical-led clinic.

Studies Any relevant quantitative studies published in English between 1980-2013 were considered.

Search Strategy A standardised three-step search strategy aimed to find both published and unpublished studies. Databases searched included PubMed, CINAHL, Cochrane Library (CENTRAL), Scopus, Embase, MedNar and ProQuest Theses and Dissertations.

Methodological quality Assessed by two reviewers prior to inclusion in the review using standardised critical appraisal instruments from the Joanna Briggs Institute.

Data Synthesis Due to the methodological heterogeneity of the included studies, no statistical pooling was possible and all results are presented narratively.

Results The search identified 13,536 titles, of which 20 potentially relevant articles were retrieved. Of these 20, 17 were excluded following full-text review leaving three studies that were assessed for methodological quality and included in the review. Service delivery outcomes: Patient satisfaction was equal or higher and waiting times were shorter in nurse led clinics. Clinical and health outcomes: Lower pain/discomfort levels were demonstrated in nurse led clinics but other clinical/health outcomes were not addressed. Financial outcomes: Nurse-led clinics were cost effective when compared with medical-led clinics.

Conclusions While all studies reported evidence of effectiveness of nurse-led clinics on service delivery and clinical outcomes in adults with chronic ear, nose and throat complaints, most of the data was self-reported and many of the outcomes of interest were not considered. The lack of experimental trials means that the level of evidence is low and further research is needed.

Implications for Practice Nurse-led ear, nose and throat clinics should be considered in the

management of adult patients with ear, nose and throat complaints, particularly those of a chronic nature which could be effectively managed by specialist nurses.

Implications for research Currently the overall level of evidence discovered regarding nurse-led ear, nose and throat clinics is low and further more thorough comprehensive studies are required to address all of the proposed outcomes. There is little to no evidence on a number of key outcomes and therefore more research is needed on the effect of nurse-led clinics to address these outcomes.

Keywords Nurse, nursing, nurse specialist, nurse practitioner, advanced nursing, ear, nose, throat, patient, satisfaction, cost, effectiveness, service, adult, chronic, acute

Student declaration

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Signed:

Caroline Whiteford

Dated: / /2015

List of Abbreviations

ACTUARI	Analysis of Cost, Technology and Utilization Assessment and Review Instrument
APRN.....	Advance Practice Registered Nurse
CI	Confidence interval
CReMS.....	Comprehensive Review Management System
CNM.....	Certified Nurse Midwife
CNP.....	Certified Nurse Practitioner
CNS.....	Clinical Nurse Specialist
CRNA.....	Certified Registered Nurse Anaesthetist
ECN.....	Ear care Nurses
ENT.....	Ear, Nose and Throat
GP.....	General Practitioner
HSQ-12.....	Health Related Quality Of Life Score
MAStARI.....	Meta Analysis of Statistics Assessment and Review Instrument
MeSH.....	Medical subject headings
NLDC.....	Nurse Led Dizziness Clinic
NOTARI.....	JBI Narrative, Opinion and Text Assessment and Review Instrument
QARI.....	JBI Qualitative Assessment and Review Instrument
SUMARI.....	System for the Unified Management, Assessment and Review of information