

## PURPOSE OF PROJECT

Little objective data exists regarding the efficiency and effectiveness of the **Registered Nurse First Assistant (RNFA)** role. In 2000, the cardiac program at Trillium Health Centre, Mississauga, Ontario, became the first Canadian hospital to hire **RNFAs**. Purpose of study was to document the contributions they make.

## METHODOLOGY

In February 2003, all members of the multi-disciplinary cardiac team were surveyed utilizing a 10-question tool to obtain objective data regarding the **RNFA** role.

## DOES HAVING A RNFA INFLUENCE HOW QUICKLY OR SMOOTHLY A CASE STARTS?

96% said YES, 4% said NO

### General Comments

- Attentive to the needs of all team members (RRT, RN)
- 'Eye balls' status of set up (RRT)
- Liaison (Anaesthesia)
- Improved efficiency
- Assures patient arrives promptly
- Consistent, excellent help leads to very efficient use of time (Anaesthesia)

### RN Comments

- Take special interest in the patient
- They are always there
- Truly function in a perioperative manner
- Facilitate in starting the cases
- Can do hands-on patient care

## WHAT CHANGES HAVE YOU EXPERIENCED WITH COMMUNICATION BETWEEN SURGEONS AND SCRUB / CIRCULATING NURSES WHEN A RNFA IS AVAILABLE ?

### PRE-OPERATIVELY:

54% said YES, 42% said NO, 4% did not answer

A breakdown of the responses indicated:

	RN	SURGEON	ANAESTHESIA
YES	6	2	4
NO CHANGE	0	1	4

- RNFA can focus entirely on the patient (RN)
- Actual case/operation plan is clarified on several levels (Surgeon, RRT, Perfusion)
- Facilitates easy, non-confrontational communication (Anaesthesia)

### INTRA-OPERATIVELY:

39% said YES, 42% said NO, 19% did not answer

	RN	RNFA	SURGEON	ANAESTHESIA
YES	5	2		3
NO CHANGE			3	5
NOT ANSWERED	1			

- Good support for scrub nurse (RN)
- Assist in 'translating' inaudible comments/requests (RN)
- Excellent at diffusing difficult situations (RN)

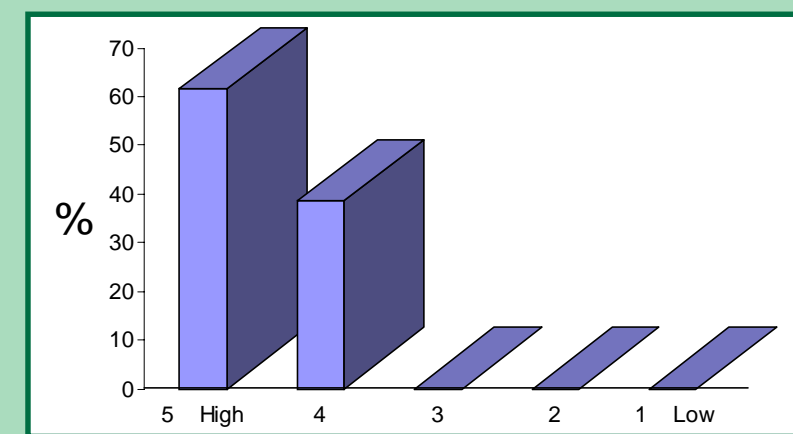
## WHICH REFLECTS YOUR FEELINGS ABOUT THE INTRA-OPERATIVE ASSISTANCE THE RNFA PROVIDES TO THE SURGEON ?

58% - EXCELLENT, 31% - GOOD

	RRT	PERFUSION	RNFA	RN	SURGEON	ANAESTHESIA
1						
2						
3		1				
4	1	1			2	4
5		2	2	6	1	4
NOT ANSWERED	2					

## HOW WELL DO YOU RATE THE ASSISTANCE THE RNFA PROVIDES TO THE OR TEAM ?

62% - EXCELLENT, 38% - GOOD



- They 'fill in the holes' to make things go smoother (RN)
- A valuable asset in the OR; tireless & dedicated (Anaesthesia)

## HAVE YOU IDENTIFIED ANY VARIATION IN THE LEVEL OF SERVICE YOU EXPERIENCE AMONGST THE RNFAs ?

58% said YES, 27% said NO, 15% not answered

- Differences in experience
- Personality differences (Anaesthesia, RN, RRT, Perfusion)
- Some are more team focused (RRT, Perfusion, RNFA, RN)

## HOW DO YOU FEEL THE RNFA AFFECTS THE PATIENT/FAMILY'S PERIOPERATIVE EXPERIENCE ?

89% said POSITIVE, 4% said OKAY, 7% not answered

- Provide a warmer, less 'medical' approach
- Patient well informed as to what to expect
- Reinforce operative plan & expected outcome (Surgeon)

## PLEASE LIST THE ADDED VALUE THE RNFA BRINGS TO THE OR TEAM AND PATIENTS?

- Consistency
- Efficiency
- Able to multi-task (RN)
- Caring
- Continuity of care for patient/family
- Attention to detail (Surgeon)
- Energy & enthusiasm (Anaesthesia)
- Faster harvesting of conduit (Anaesthesia)

## WHAT DRAWBACKS DO YOU SEE THAT A RNFA HAS?

- No on-call coverage
- At times they encroach by trying to guide and tell nurses things they should be able to do or figure out for themselves (RN)
- Can't bill OHIP yet do exactly the same job as the MD surgical assistant! (Anaesthesia, RN)
- Cost to the budget (Surgeon, RN)

## HOW MIGHT THE ROLE OF THE RNFA BE IMPROVED/ENHANCED?

- Given more responsibility outside of the OR
- Be on call for cases done on weekends
- Expand their operative role (Surgeon)
- Lead innovation in minimally invasive or other new strategies (Surgeon)

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