

Certified Registered Nurse Anesthetist: A Forgotten Partner in Delivering Anesthesia at the Veterans Affairs Health System

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INTRODUCTION

In 2016, a final rule was issued by the Veteran Affairs Health system granting full practice authority to 3 out of 4 APRNs. CRNAs were excluded.

This restriction has led to reduced access, increased costs, and less efficiency in anesthesia care for the nation's Veterans (AANA, 2020).

Cintina, et al., (2018) evaluated strategies that could lead to a reduction in costs of anesthesia service provisions. That report suggests that by applying a cost-effectiveness model of anesthesia delivery costs associated with anesthesia delivery can be reduced significantly by eliminating directional and supervisory models (e.g., MD supervisory role) of anesthesia delivery (Cintina et al. 2018).

OBJECTIVES

The goal of this project was to develop and implement an online awareness campaign program as a part of for a system change project (SCP) which to emphasize the value of changing current CRNA practice policies in the Veterans Health Administration (VHA)

Aims:

1. To develop an online awareness campaign program for physicians, CRNAs, and Veterans in the VA on the importance of the full practice authority of CRNAs.
2. To implement and evaluate the CRNA awareness campaign program.
3. To generate recommendations for the scaling and sustainability of the awareness program.

METHODS

Aim 1. Meeting with Leadership group scheduled. Developed online curriculum & multimedia platform to access curriculum.

Aim 2. Anesthesia providers were invited via VA email, facility newsletter, and daily unit meetings with the Chair of Anesthesia's sign-off. A follow-up email was sent to all invitees weekly until a minimum participation (n=10) was met. A separate sample of Veteran was approached at a VA hospital waiting rooms; participation was voluntary. The target size was a minimum participation of n=30. Participants completed both a pre-and post- questionnaire based on a 90 second video (CRNA, 2013) which included topics found in (Figure 1) Items framed for the pre-and post- questionnaire. Results from both measures were compared using Box Plots with 95% Confidence Intervals (Figure 2) and with the paired t-test.

FIGURE 1. Topics covered and framed into five questions used for the Pre- and Post-measurement of Awareness of CRNA role

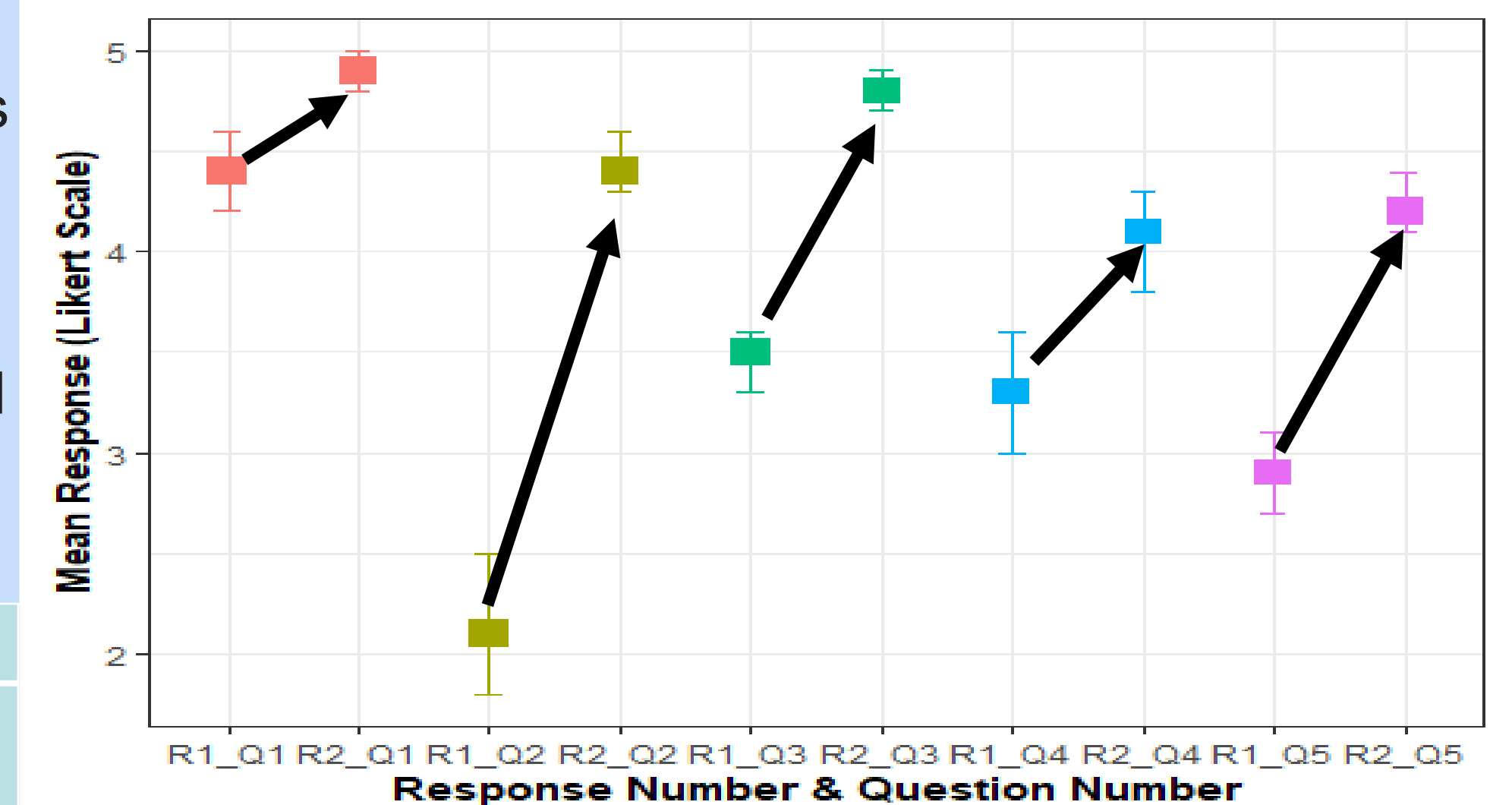
Questions
CRNAs are anesthesia providers
The full role and responsibilities of a CRNA are clear to me
CRNAs educated and nationally credentialed to provide anesthesia care
CRNAs employed by the VA are qualified to provide me anesthesia care
CRNAs increase access to care in and out of the VA

Aim 3. After successful implementation and completion at the VA hospital, permission was requested to scale up delivery of the online awareness campaign program & video throughout all state VHA facilities during CRNA week from (January 23rd- 2024, to January 29th, 2024).

RESULTS

The final veteran sample size was 57. **Figure 2** shows means with 95 Confidence Intervals (Cis) with the 5 questions (**Figure 1**) color coded and numbered (e.g., Q1); the R1 ("response") is the pre-test and R2 is the post test mean. All items show an increase in means with non-overlapping 95% confidence intervals. In parallel, paired t-tests were performed and all five items had statistically significant improved awareness ($p < .01$).

Figure 2. Mean and 95% CIs for the five pre- and post-test questionnaire items, n = 57 Veterans



The video produced higher awareness. Limitations are that the sample size was limited and the interval between the video and post-test was brief so that retention and intent are an open question for future work. Permission to disseminate this campaign throughout the state for 2024 CRNA week remains pending.

REFERENCES

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- CRNA video https://www.youtube.com/watch?v=CwEkGJ_DQDc, Created and sponsored by AANA,
- Michigan PAC & New York PAC