



Nurse Resident's Evidence Based Practice Projects to Improve Veteran Health

Disclosure Statement

- Neither the planner(s) or presenter(s) indicated that they have any real or perceived vested interest that relate to this presentation.

Symposium

- ❖ Academic Practice Partnerships and Nurse Residency Programs
- ❖ Evidence Based Practice Curriculum for Residency Programs
- ❖ Assessing Barriers to End of Life Discussions: EBP Project
- ❖ Implementing Team Huddles on an Acute Psychiatric Unit: EBP Project
- ❖ Let's Get Moving: EBP Project

Academic Practice Partnerships and Nurse Residency Program

Objectives

1. Identify the challenges facing novice Nurses related to transition to practice
2. Define the characteristics of a successful Academic Practice Partnership
3. Determine the mission/goals of Academic Practice Partnerships
4. Identify the necessary organizational structure to maintain a successful academic practice partnership

Nursing in the 1970s

- Nurses lived and died by the Kardex
- Universal precautions did not exist
- Nurses used the second hand of a wristwatch to calculate IV drip rates
- White oxford lace up shoes were the norm
- Nurses mixed antibiotics
- Nursing caps were still popular
- Nurses carried trays with cups of pills and med cards
- Staff and patients smoked in the hospital
- Length of stay was 11.4 days
- The *Physician's Desk Reference* was chained to the nursing station

Nursing Today

- Nursing care is highly specialized and hospitalized patients are grouped in units by disease or body system
- Heart revascularization procedures are done on an outpatient basis
- IV infusions are regulated by pumps
- Plastic shoes, clogs and sneakers are the norm
- Nursing caps are in museums
- Online references for pharmaceuticals, nursing procedures and evidence based practice
- Length of stay is 4 days
- Multidrug resistant organisms create daily challenges
- Nurses are leaders in every aspect of healthcare delivery

Nursing



Transition into practice

- Caring for acutely ill patients
- Complex diagnostic and treatment regimes
- Interdisciplinary coordination of care
- Chaotic work environments
- Advanced technology
- Unending documentation
- **REALITY SHOCK**
- Kramer, M., Brewer, B. B., Halfer, D., Maguire, P., Beausoleil, S., Claman, K., & Duchscher, J. B. (2013).

Seven Management Skills

- Newly Licensed Registered Nurses identified 7 management skills as areas of high concern during transition and integration into professional practice
 - Delegation
 - Collaborative nurse physician relationships
 - Feedback to promote self confidence
 - Autonomous decision making
 - Prioritization
 - Constructive conflict resolution
 - Getting the work done
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- Kramer, Brewer & Maguire (2011)

Nurse Residency Programs

- 2002: Joint Commission recommended Nurse Residency Programs
- 2009: Carnegie Study endorsed Residency Programs
- 2011: Institute of Medicine. The Future of Nursing: Leading Change, Advancing Health

Evidence in Support of Residency Programs

- Saving for participating organizations based on decreased turnover
- Increased retention rates
- Increased stability in staffing levels
 - Reduced stress
 - Improved morale
 - Increased efficiency
 - Increased patient safety
- Helped first year nurses in the program
 - Develop clinical decision making
 - Develop clinical autonomy
 - Incorporate research based evidence into practice
 - Increased commitment to nursing as a career

Residency Program ≠ Orientation Program

- Orientation programs
 - Focused on physical environment
 - Hospital organizational policies and procedures
 - Human Resources information
 - Safety information
- Residency Programs
 - Skills acquisition
 - Professional judgment
 - Effective performance
 - Conflict management
 - Interdisciplinary

Transition from Academia to Practice



Academic Practice Partnerships

Development of Collaborative Relationships

Formal Relationships are established

Shared vision and expectations

Mutual goals

Established evaluations of outcomes

- AACN-AONE Task Force on Academic-Practice Partnerships 2012

Academic Practice Partnerships

- Mutual Respect and Trust
 - Shared conflict engagement protocols
 - Joint accountability and recognition
 - Frequent and meaningful engagement
 - Mutual investment
 - Mutual commitment
 - Transparency

Academic Practice Partnerships

- Shared Knowledge
 - Commitment to lifelong learning
 - Shared knowledge of best practices
 - Shared knowledge of management/leadership
 - Joint preparation for accreditations and reviews
 - Interprofessional education
 - Joint research
 - Joint committee appointment
 - Joint development of competencies

- AACN-AONE Task Force on Academic-Practice Partnerships 2012

Academic Practice Partnerships

- Shared Commitment to maximize potential of RNs
 - Seamless transition from classroom to bedside
 - Culture of trust and respect
 - Shared responsibility to prepare RNs to lead change and advance health
 - Joint mentoring programs and opportunities
 - Leadership
 - Research
 - Professional
 - Participation on regional and national committees to develop policy and strategies for implementation
 - Seamless academic progression
 - Joint faculty appointments
 - Increasing diversity in the workforce

Beal, J. A., Alt-White, A., Erickson, J., Everett, L. Q., Fleshner, I., Karshmer, J., & ... Gale, S. (2012). Original Article: Academic Practice Partnerships: A National Dialogue. *Journal Of Professional Nursing*, 28327-332.

Academic Practice Partnerships

- Development of Infrastructures to collect and analyze data
 - Identification of Useful workforce data
 - Joint analysis of data
 - Transparency of data

NERVANA

Northeast Region VA Nursing Alliance

Developed in 2007

Academic Partnership between the VA Boston Healthcare System and 6 schools of nursing

Mission Statement

NERVANA employs an innovative educational model to expand and enrich nursing students and faculty, to educate nursing students in the care of veterans, and to expose nursing students to advanced model of medical informatics, patient safety, quality improvement, and integrated systems of care employed by the VAs national healthcare system.

VA Boston Healthcare System

- VA Boston 3 campuses and 5 Community Based Out Patient Clinics
 - Jamaica Plain Campus
 - Brockton Campus
 - West Roxbury Campus
- Number of Veterans Cared For in 2012
 - 67,275 (3203 were women); 9941 acute inpatient; 718,239 outpatient; 393 domicile inpatient; 651 Nursing Home Admissions
 - 32% were over the age of 65
 - 12% were under the age of 44
 - 4% were women

VA Boston Nursing Workforce

- Total Number 1373 individuals
- 819 RNS (529 FTEs)
 - 7 Doctorates
 - 150 MSN

- Associate Chief of Nursing and Patient Care Services
 - Cecelia McVey

VA Boston Clinical Rotations (2014-15)

Specialty	Total
• Medical Students	• 350
• Medical Residents	• 1261
• Nursing Students	• 932
• Nursing APRN	• 78
• Pharmacy	• 160
• Physician Assistant	• 102
• Other	• 204

NERVANA Partners



VA Boston
Healthcare
System



NERVANA Goals

Maintain and refine the infrastructure to sustain the mission

Increase the number of faculty to teach in nursing programs

Create and expand clinical rotations

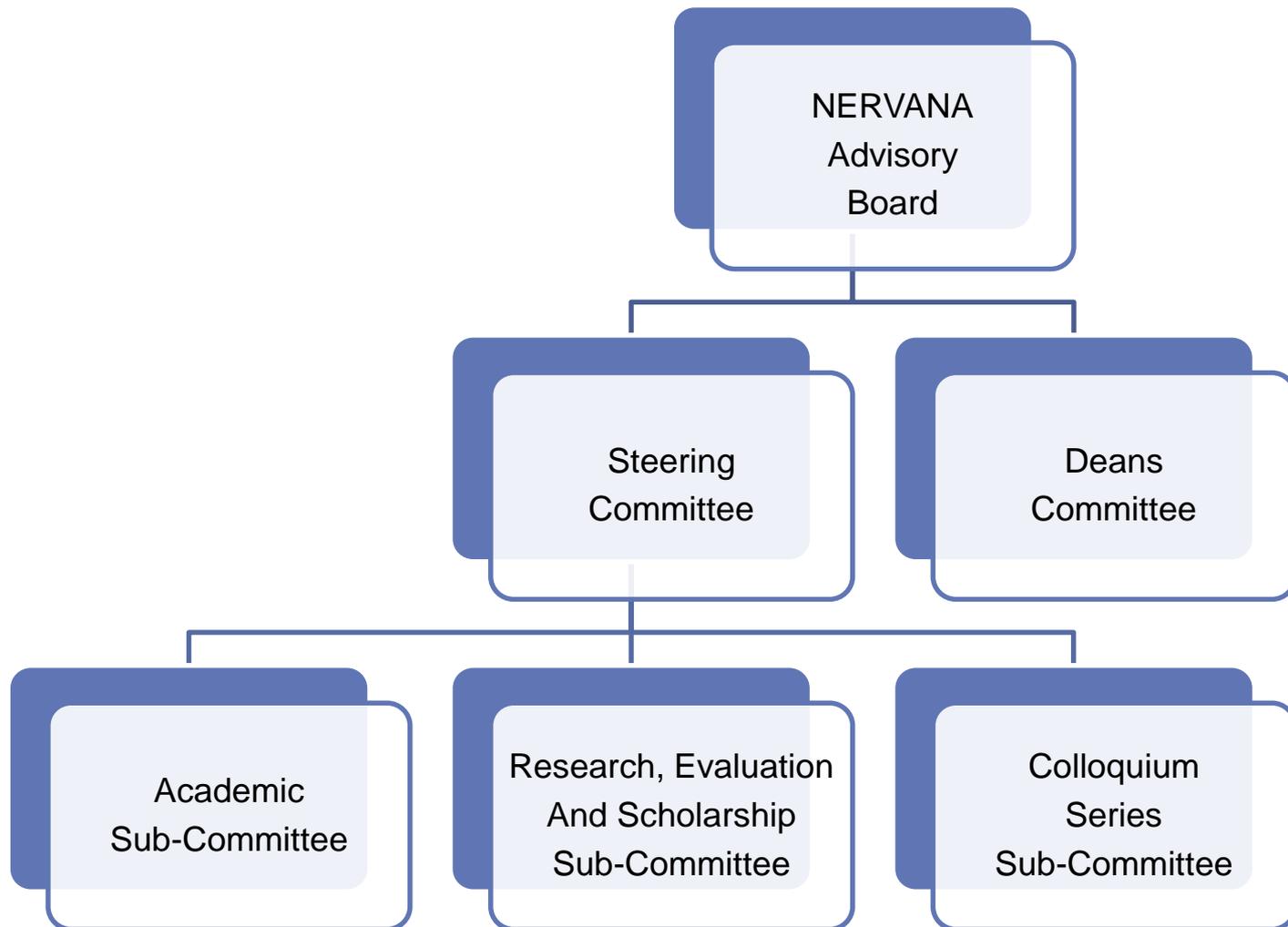
Dedicated Education Units, APN rotations

Educate students, faculty and the community regarding the unique needs of the veteran population

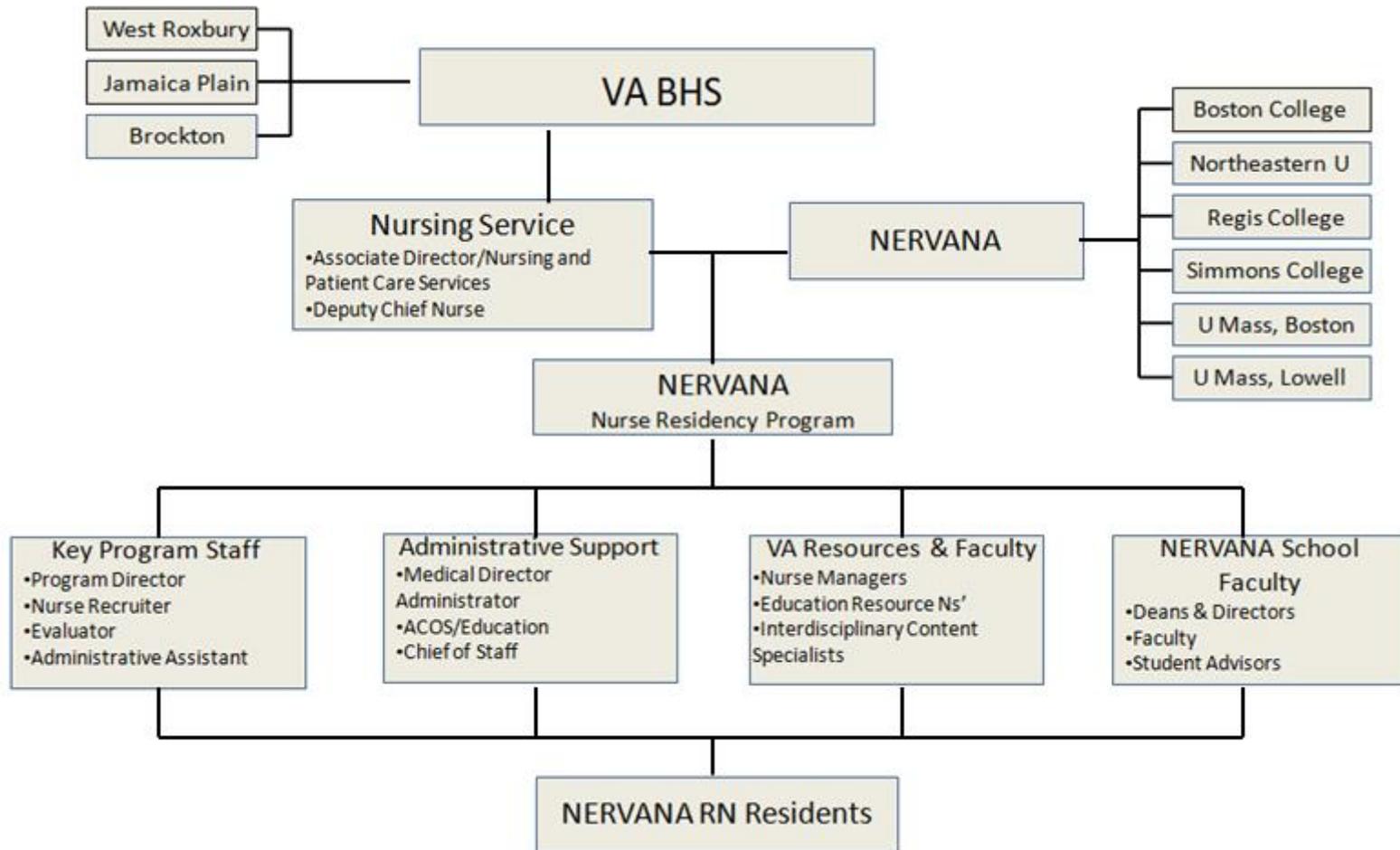
Develop programs at partnering schools to address Veteran Health issues

Create Multi-school research within the partners

NERVANA ORGANIZATIONAL CHART



Academic Practice Partnership Nurse Residency Organizational Chart



Program Quality: Academic Practice Partnership Commitment

- The program faculty have the appropriate education and experience
- Institutional Commitment and Resources
 - Academic Partners Commitment
 - Residency Coordinator
 - Teaching Learning Space
 - Chief Nursing Officer Commitment
 - Unit Leadership

CURRICULUM

References

- AACN-AONE Task Force 2012: Academic Practice Partnerships
- Beal, J. A., Alt-White, A., Erickson, J., Everett, L. Q., Fleshner, I., Karshmer, J., & ... Gale, S. (2012). Original Article: Academic Practice Partnerships: A National Dialogue. *Journal Of Professional Nursing*, 28327-332.
- KRAMER, M., MAGUIRE, P., & BREWER, B. B. (2011). Clinical nurses in Magnet hospitals confirm productive, healthy unit work environments. *Journal Of Nursing Management*, 19(1), 5-17.
- Kramer, M., Brewer, B. B., Halfer, D., Maguire, P., Beausoleil, S., Claman, K., & ... Duchscher, J. B. (2013). Changing our lens: seeing the chaos of professional practice as complexity. *Journal Of Nursing Management*, 21(4).