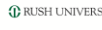**RUSH UNIVERSITY**
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Preparing Nurse Leaders to Promote Quality Outcomes in the Older Adult Population

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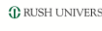

Disclaimer

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Objective

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Evaluate one strategy to prepare Adult-Gerontology nurse practitioner/DNP students as leaders in promoting quality outcomes in aging adults.

Changing Healthcare Landscape

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- Growing older adult population
  - ✓ in 2030 roughly 20% of population (CDC, 2013)
- Emphasis on Triple Aim (Berwick, Nolan, & Whittington, 2008)
  - ✓ Improve experience of care, population health and decrease costs
- Shift from volume driven health care to value driven health care
- Affordable Care Act
  - ✓ NP role in improving access to care

Changing Healthcare Landscape

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➢ IOM - Landmark Reports

- Crossing the Quality Chasm (2001)

- Health Professionals Education: A Bridge to Quality (2003)

- Retooling for an Aging America (2008)

- Future of Nursing (2010)

Professional Trends & National Mandates

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➢ Graduate Level Quality and Safety Education for Nurses Competencies (QSEN, 2012)

➢ Interprofessional Collaborative Practice – core competencies

➢ Institute for Healthcare Improvement (IHI)

➢ National Quality Forum

➢ Agency for Healthcare Research and Quality

➢ National Patient Safety Goals

3/20/2015

Course Development

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PROCESS:

➢ Integration of gerontology with quality and safety
➢ Analytical review of the literature
➢ Review of key competencies and standards
➢ National market analysis of factors driving the quality and safety agenda
➢ RUSH College of Nursing gap analysis

Innovative Course: Purpose

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➢ To prepare nurse leaders ready to create a culture of quality improvement and patient safety for the aging adult.

➢ To prepare nurse leaders to function as effective partners in inter-professional teams.

Course Modules

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1. National trends and factors in the aging adult
2. Quality and patient safety priorities for the aging adult across the continuum of care
3. Quality improvement models, processes and tools
4. Patient safety models, processes, and tools
5. Inter-professional Collaborative Practice

Quality and Safety

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Varied Instructional Strategies

✓ Case study

✓ Small group work to promote collaborative learning

✓ Discussion board

✓ GeriaSims (Iowa Geriatric Education Center) - interactive simulation

✓ Scholarly writing activities

Evaluation Method

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- Knowledge and attitudes related to older adults
- Readiness to lead quality and safety initiatives
- Change in students' perception of their quality and safety knowledge and skills
  ✓ Specifically preparedness and confidence

Evaluation Method

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Evaluate the two major threads from the course

     1. Aging

     2. Quality and Safety

Data collected on blackboard pre (week 1) and post (week 14)

Evaluation Method

	AGING	Quality & Safety
PRE	What's Your Aging IQ? (NIA, 2010)	Quality & Safety Survey (Miller, Zonsius, Inventor, 2014)
POST	Qualitative Assessment	Quality & Safety Survey (Miller, Zonsius, Inventor, 2014) Qualitative Assessment

Evaluation Method - Aging

Pretest:

Aging Quiz- "What's your aging IQ?"
(National Institute on Aging, 2010)

Posttest:

Self-Assessment of Multidisciplinary
Competencies in the Care of Older Adults
(American Geriatrics Society, 2010)

Evaluation Method — Quality & Safety

Quality & Safety Survey (Miller, Zonsius, & Inventor, 2014)

Content Validity
✓based on graduate QSEN Competencies (2012)
✓course objectives

Internal consistency/reliability
✓Cronbach's alpha (.89)

Quality & Safety Survey

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Two part survey

How confident in 8 skills

✓4 point scale (not confident, somewhat confident, confident, very confident)

How prepared to perform 12 specific actions

✓4 point scale (very unprepared, somewhat unprepared, somewhat prepared, very prepared)

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Evaluation Method – Quality & Safety

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Qualitative Assessment:

➢Students were asked to review *QSEN for Advanced Nursing Practice* (2012)

➢Discuss the one most significant knowledge, skill or attitude they had learned.

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Results-Aging

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Aging Quiz – "What's Your Aging IQ" (NIA, 2010)

✓ Average Score 26 out of 28 (range 20-28)

Most frequently missed questions were:

1. "Most older adults live alone." (False)

2. "Americans are living longer. But are older Americans also healthier or sicker and disabled?" (Healthier)

3. "The estimated number of centenarians in the U.S. in the year 2050 could be: 111,000, 238,000 or 600,000?" (600,000) (NIA, 2010, p. 5-8)

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Results-Aging

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Self-assessment of Multidisciplinary Competencies in the Care of Older Adults
(American Geriatrics Society, 2010)

"More sensitive to the needs of the aging population and do not assume conditions are a "normal" part of aging, instead we look for the root cause."

"We used to understand dementia and delirium as interchangeable, now recognize the differences based on signs and symptoms....place older adults at risk."

Results-Quality and Safety Survey

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Table 1-Improvement over time						
	Pre-test	Post-test	Difference	t-statistic	df	P value
Prepared	33.15 (5.59)	44.46 (3.64)	+11.32 (5.31)	11.07	26.00	<.001
Confident	21.53 (3.75)	28.08 (4.30)	+6.54 (5.16)	6.47	25.00	<.001
Total	54.80 (8.60)	72.83 (7.24)	+18.03 (9.44)	9.74	25.00	<.001

Results- Quality and Safety Survey

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Comparison of pretest and posttest scores revealed significant improvements:

✓ in the sense of feeling prepared,

✓ the sense of confidence and

✓ in total score.

All measures improved significantly and effect sizes (Cohen's 'd') associated with the improvements were above 1.00 Cohen (1988) characterizes effect sizes of this magnitude as 'large' effects.

Quality & Safety Survey

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• Top 3 items with greatest improvement

Rate how <u>confident</u> you are in your ability to do the following skills:

1. Select and use quality improvement tools to achieve best possible outcomes.
2. Use quality indicators and benchmarks for improving system processes and outcomes.
3. Use quality improvement methods to address gaps in evidence based guidelines.

Quality & Safety Survey

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• Top 3 items with greatest improvement

Rate how <u>prepared</u> you feel to perform the following actions:

1. Analyze factors that create a culture of safety and a "just culture".
2. Examine strategies for improving systems to support team functioning.
3. Describe nationally accepted quality measures and benchmarks in the practice setting.

Results- Qualitative Assessment

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Self-assessment of *QSEN for Advanced Nursing Practice* (2012)

"...prior to this class...no experience with QI/QA methodologies. We now feel confident applying these methods to our practice in order to identify if strategies are effective or need to be adjusted."

"the work surrounding QI methods/tools was useful...models like PDCA, root cause analysis...will be central components to our future careers as we are charged with improving healthcare and providing the best evidence-based care."

"learned to always remember....as part of interdisciplinary team...to include the patient and caregivers in decision making."

NP as Quality Leader

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Adult Gerontology DNP Proposals

✓Primary Care Nurse Practitioner (6/9)

"Improving Glycemic Control in an Older Adult Population"

✓Acute Care Nurse Practitioner (9/16)

"Creation of a Geriatric Emergency Department: Recommendations for a Community Hospital"

Lessons Learned

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- Modes of learning

- Placement of course in program of study

- Scholarly writing skills

- Prioritize content and activities

Growing Scholars/Graduating Leaders

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- Building a community of nursing scholars

- Cultivating a spirit of intellectual curiosity and inquiry
  (Von Stumm, Hell, & Chamorro-Premuzic, 2011)

- Graduating nurse leaders who will address identified gaps between quality and practice

Growing Scholars/Graduating Leaders

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- Preparing CNSs and NPs for roles as members/leaders of inter-professional teams

- Focus on improving outcomes/quality of care, learning to identify and track impact of APN in clinical practice (Kleinpell, 2013)

- Importance of life long learning

Future Trends and Challenges

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"Highly reliable health care organizations demonstrate a culture of safety, a preoccupation with process improvement, and a sustained leadership commitment to the ultimate goal of zero patient harm. Nurses are critical in all these areas and vital to achieving exemplary levels of quality and safety."

Mark R. Chassin, MD, FACP President and Chief Executive Officer, The Joint Commission

http://www.rwjf.org/content/dam/farm/reports/issue_briefs/2014/rwjf411417

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"I think one's feelings waste themselves in words, they ought all to be distilled into actions and into actions which bring results." Florence Nightingale (1820-1920)

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