

Role of the RN in Primary Care: Implications for Academia and Practice

The Frances Payne Bolton School of Nursing

HRSA Experience




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Disclosures
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Polling Question

- How familiar are you with the RN roll in primary care?

- Not at all familiar
- Somewhat familiar
- I work as an RN in primary care



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Overview

-  RNs in Primary Care
-  Integration: Curriculum & Practice
-  Continuing Education Lessons Learned

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Nurses Make the Difference

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Why Primary Care?

The Commonwealth Fund

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What would the U.S. have experienced if the COVID-19 pandemic began in a different country? You can use our tool to learn more and explore the data.

Improving Health Care Quality

Health Policy Report # 2020

**Mirror, Mirror 2021:
Reflecting Poorly**
Health Care in the U.S. Compared to Other High-Income Countries

Health Care System Performance Rankings

	AUS	CAN	FRA	GER	NETH	NZ	NOR	SWE	SWZ	UK	US
OVERALL RANKING	3	10	8	5	2	6	1	7	9	4	11
Access to Care	8	9	7	3	1	5	2	6	10	4	11
Care Process	6	4	10	9	3	1	8	11	7	5	2
Administrative Efficiency	2	7	6	9	8	3	1	5	10	4	11
Equity	1	10	7	2	5	9	8	6	3	4	11
Health Care Outcomes	1	10	6	7	4	8	2	5	3	9	11

Source: Eric C. Schneider et al., *Mirror, Mirror 2021—Reflecting Poorly: Health Care in the U.S. Compared to Other High-Income Countries* Commonwealth Fund, Aug. 2020. <https://www.commonwealthfund.org/publications/2020/08/mirror-mirror-2021>

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How can RNs help improve primary care?

The nation's 3.7 million registered nurses (RNs) are the ideal team members to help expand primary care capacity, but a number of barriers must be overcome.

TODAY	TOMORROW
Focused on patient triage	Responsibilities include chronic care management, care coordination, and preventive care
Practice restricted by state laws and healthcare organizations	Practicing to the full extent of licensure
Education centered on inpatient and acute care	Curricula balanced between acute and primary care instruction

Download recommendations on preparing Registered Nurses for Enhanced Roles in Primary Care at www.commonwealthfund.org

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Rethinking the Primary Care Workforce — An Expanded Role for Nurses

OPEN ACCESS

Registered Nurses in Primary Care: Emerging New Roles and Contributions to Team-Based Care in High-Performing Practices

Margaret Flintner, PhD, APRN; Clarissa Hsu, PhD; DeAnn Crompt, MPH; MaryJoan D. Ludden, PhD, APRN; Edward H. Wagner, MD, MPH

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pcc primary care collaborative

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PCC September webinar: Primary Care: A Team Sport?

Primary Care Collaborative

Register here

Thursday Sep 30, 2021
02:00 pm to 03:00 pm EDT

Add to Calendar

Primary Care A TEAM SPORT?

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Overview

- RNs in Primary Care
- Integration: Curriculum & Practice
- Continuing Education Lessons Learned

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State of RN Practice in Primary Care

- Very few nurses are entering primary care practice before the age of 40.
- There is an urgent need to replace the retiring nurses and fill the increasing number of PCC positions.
- Need Primary care prepared graduate nurses.

Atton J. (2018). The future of nursing in primary care. *The British journal of general practice: the journal of the Royal College of General Practitioners*, 68(673), 312-313. <https://doi.org/10.3399/bjgp18.69737>

Bauer, I. & Bodenheimer, T. (2017). Expanded roles of registered nurses in primary care delivery of the future. *Nursing Outlook*, 65(5), 424-432. <https://doi.org/10.1016/j.outlook.2017.03.011>

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Current State of Academia

- Ambulatory care nursing curriculum is often limited in the pre-licensure nursing programs.
- The issue poses a serious potential shortfall of BSN-prepared RNs equipped to work in primary care settings.

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HRSA Grant:

Enhancing Nurse Roles in Community Health (ENRICH): Undergraduate and Workforce Training and Education in Primary Care

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HRSA Grant Team Members		
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David Foley, PhD, MSN, RN-BC, MPA Consultant		

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Grant Objectives

- Goal 1:** Recruit and integrate the BSN students into community-based clinics to enhance RN primary care competency.
- Goal 2:** Enhance staff RN competence in the expanded role of the RN in primary care to prepare RN preceptors to teach and role model working at the top of the RN license.
- Goal 3:** Improve and expand the teamwork and collaboration to include all learners.
- Goal 4:** Enhance the existing BSN curriculum, student competence and faculty competence on the expanded role of the RN in primary care at the Frances Payne Bolton School of Nursing.

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RN's Role in Primary Care

Work at the "top of the license"

- Holistic, integrated, accessible and equitable care
- Management through the transition of care
- Chronic disease management
- Health promotion
- Patient education
- Medication/immunization administration
- Medication reconciliation
- Telehealth
- Triage
- Supervision of unlicensed personnel

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Competencies

Not "working at top of license"

- "Non-value-added" care
- Literature review (no publications)
 - American Association of Ambulatory Care Nurses (AAACN) ambulatory care coordination and transition competencies
 - Scope and Standards of Practice for Professional Ambulatory Care Nursing
 - Framework of the VA Centers of Excellence in Primary Care Education - NP residency competencies.

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Competency Development

Reviewed (PCC leaders, staff & students)

- Care coordination and transition management competencies - 9 dimensions
- Scope and Standard of Practice for Professional Ambulatory care nursing - 6 dimensions
- VA CoEPCE competencies - 7 dimensions

Clustered
6 revisions
100% agreement



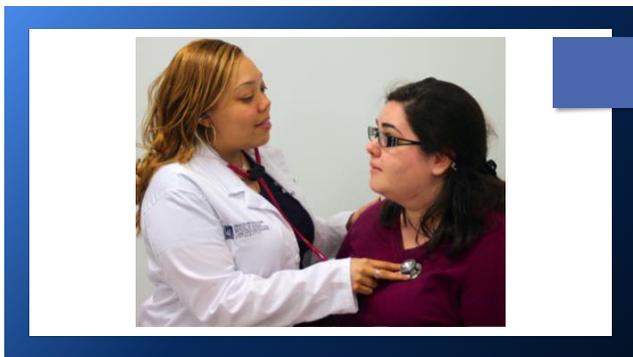
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Competencies



1. Clinical Competency in Planning and Managing Care
2. Able to provide self-management/health promotion and chronic care strategies for chronic diseases.
3. Leadership
4. Inter-professional Collaboration and Communication
5. Patient Centered Care
6. Shared Decision Making
7. Sustained Relationships
8. Quality Improvement and Population Management

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Overview

-  RNs in Primary Care
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FPB Community Health Courses

Prior to HRSA Grant, FPB current curriculum included:

- 5 semesters of community health + senior semester in Capstone focusing on population/community health
- These courses introduce concepts of health care needs in the community while integrating concepts of primary care and public health.
- Students learn concepts in the classroom and practice concepts via experiential learning in a community and/or outpatient setting

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Curricular Enhancements to Community Courses

Using the current curricular template and fueled by HRSA grant, our team evaluated ways to enhance primary care concepts and experiences within these courses.

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FPB Community Health Courses

First Year: Healthcare in the Community

Second Year: Teaching/Learning in the Community; Evidence Based Policy in the Community



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FPB Community Health Courses

Third Year: Leadership in the Community; Process Change in the Community

Fourth Year: Health in the Global Community; Population Health Practicum



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Curricular Changes in other Courses

Freshman: Nurs 115 and 122

Behavioral health integration	Shadow Health simulations: Anxiety module
Introduction to interviewing patients	Telehealth introduction this year to all levels



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Curricular Changes in other Courses

Sophomore Nurs 230/240: Nursing care of the Adult

Discussions in postconferences about role of nurse in primary care in first semester	Primary care experiences piloted and continued in second semester
Reflection of experiences, education of patients, and collaboration with team care	



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Curricular Changes in other Courses

- **Sophomores 317:** Shadow Health Behavioral Health simulations for inpatient, outpatient, and community care
- PTSD, Veteran care
- Therapeutic communication practice with simulation increases confidence



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Curricular Changes in other Courses

- **Juniors 316:** Pediatrics have spent time at primary care clinics during low census
- Head Start and CMSD not available during pandemic
- Simulations of lead screenings
- **Seniors 373:** Primary care clinic placements
- Telehealth modules
- Some expected competencies: leadership, collaboration, team building, trust, and patient relationships



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Curricular Changes in other Courses

- Telehealth throughout
- QI throughout
- Transition of care emphasized along with medication reconciliations throughout

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Enhancing Nursing Roles in Community Health (ENRICH)

- Primary Care Integration into the Curriculum
 - Faculty → All BSN Students
- Preceptors
- Nursing staff at Primary Care clinical sites
 - VA (WPPC, Women's Health)
 - NFP
- RN students, ENRICH Fellowship

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Practice Integration: Preceptors

- Supporting Clinical Instructors
 - Orientation with Preceptors
 - Preceptor Handbook
- Providing of Resources and Guidance
 - Telehealth reference
 - Tip sheets
 - Coaching
 - Learning opportunities
 - Telehealth
 - Role of the RN in Primary Care



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Practice Integration: Preceptors

- Preceptor Series
 - 118 to 196 views each
 - Cleveland VA & MetroHealth to Abu Dhabi CC
 - 9 Modules including
 - Adult Learning Principles
 - Appreciating Diversity
 - Formative Feedback: Assessment for Learning
 - Managing Inappropriate & Unsafe Behavior
 - Temperament and Conflict



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Practice Integration: Fellowship

- 150 clinical hours in Primary Care
 - NURS373 Population Health Practicum
- ENRICH Fellowship Opportunities
 - Inter-professional Learning at VA COE
 - Community Resources interactive experience
 - Food banks and hot meal sites
 - Support group meetings (virtual and in-person)
 - QSEN Conference Participation
 - Poster Presentation
 - Learning modules



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Top of License Practice: VA

- Hypertension Panel Management
 - HTN Handbook
 - RN posters at QSEN and AACN conferences
- Telehealth (VVC) training
 - with students each semester
 - invited RN and LPN staff for review
- Team Building
 - All staff Implicit Bias
 - Quality Improvement: PCAS, LPN, and RN



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Top of License Practice: VA

- Avengers' Lead Team
 - Frontline involvement in QI
 - Facilitates inter-professional discussion
 - FACT role clarity and standardization
- Empowering
 - Collaboration across staff silos
 - Problem identification and problem solving
 - Team leadership



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Top of License Practice: NFP

- New academic-clinical partnership
- 7 NFP locations
- Preceptor Series
 - No formal Preceptor preparation program
 - Initially synchronous, virtual at NFP
 - Continue to be available
- RNs manage individual clinics
 - Location
 - Program (Wellness, Outreach)



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Top of License Practice: NFP

- Sp '21 - Telehealth outreach to screen for HTN and Diabetes risk (Sr. RN student project)
- Continues this semester with Diabetes only
 - Text message in patient's native language
 - Survey completed and sent via secure message to RN student team
 - Information entered into EHR
 - Outreach phone call made to patient
 - Answer Questions
 - Enroll in Free Diabetes Prevention Program
 - HgbA1C at NFP with appointment



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Thoughts from ENRICH Fellows

Prior to my fellowship, I never considered primary care as a career choice. . . . I really like how nurses can work to the top of their license in the community. They are leaders and advocates for their patients. . . . I feel like in community nursing you get to know your patients better than in the hospital. . . . You focus on aspects of the patient's life that may interfere with care. In the hospital, you may not have the time to consider social determinants of health. . . . In primary care you are focused on long-term care, which I really enjoy thinking about.

. . . Through this fellowship and my capstone of the VA, I am very excited to learn more about primary care. . . . In the future, I plan to go to nurse practitioner school, where I can see myself becoming a primary care nurse practitioner.

. . . I see the nurse's role being focused on helping the patient live healthy in a sustainable manner, and making sure that the patient has the resources to make this happen, long-term. I definitely see community nursing as a career goal for myself. I really want to be able to help people long-term. . . . I really enjoy teaching, education, and making sure that people have the resources that they need in order to thrive on their own. I hope that I am able to find a nursing job like this in which I can be in the community setting and enable people to live their healthiest lives, in a holistic manner.

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Overview

-  RNs in Primary Care
-  Integration:
Curriculum & Practice
-  Continuing Education
Lessons Learned

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Professional Development Needs

- Who?
 - Faculty
 - Students
 - Practicing Nurses
- Determined How?
 - Needs Assessment Surveys
 - Anecdotal Reports
 - Developmental Gap based on Emerging Role

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Professional Development Needs

- Topics
 - The "Emerging" Role of the RN in Primary Care
 - Legal Considerations for RNs in Primary Care
 - Telehealth (including COVID)
 - Preceptor Development (9 Part Series)
 - Panel Management
 - Motivational Interviewing
 - Ambulatory Nursing Review Course
 - Virtual Care Fair



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Professional Development Needs

Deployment-based on audience access...

- Multiple Canvas Sites
 - Faculty Development
 - Student Courses
 - Public facing
- QSEN Web Page
 - Content being used in other countries
- Separate LMS for Review Course

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Professional Development Needs

- Varied Learning Needs
 - Awarded Continuing Education Credits
 - 18 CE activities with over 1,000 completions
- Variety of modalities
 - Articles
 - Learning modules
 - Videos
 - Webinars
 - Lunch and Learn



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Professional Development Needs

- Ambulatory Nursing Certification Review Course
 - Top of License
 - Asynchronous guided learning (Oct-Jan)
 - Over 40 topics
 - Experts (recorded)
 - Resources
 - Live Q&A panel sessions
 - Practice question review sessions
 - Target- community partners, smaller clinics, and schools of nursing

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Professional Development Needs

Links for your own access:

Telehealth (2.1 CH)

<https://canvascatalog.case.edu/>

Free code: BDOHOB

Legal Considerations (1.0 CH, Category A)

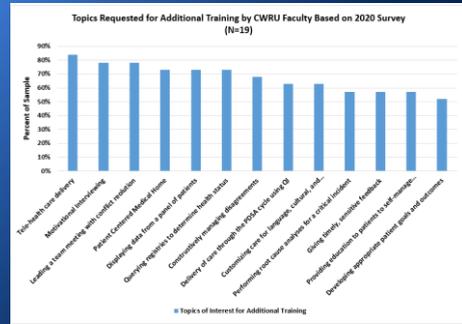
<https://canvascatalog.case.edu/courses/legal-considerations-for-rns-working-in-primary-care>

Preceptor Modules and RN Role (over 5 CH total)

<https://asen.org/hrsa-grant-modules/>

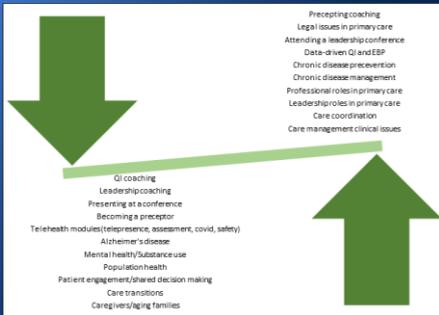
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Lessons Learned - CWRU Faculty



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Lessons Learned - RN's in Practice



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Lessons Learned - ENRICH Fellows

- Data collected at baseline, 4 month, 8 month, and 12 month across the 1 year fellowship period.

- Responses to topics in primary care as determined by the SEPSS Tool, related to the Fellow's use of the skill in practice.

(*The following responses (M<3.5) indicate skill is being practiced "never/rarely" by the Fellow*)

3b: Asking the patient about how he can share his emotions about the (chronic) condition with important others

19b: Discussing with the patient who he will inform about his chronic condition

28b: Facilitating the patient to easily stay in contact between appointments

29b: Initiating contact between appointments with the patient, to discuss his health and to solve difficulties

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Overview



RNs in Primary Care



Integration:
Curriculum & Practice



Continuing Education
Lessons Learned

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THANK YOU!



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