

Outcomes Impacting Care of Older Adults: Geriatric Nursing Leadership Academy Fellowships



Presenters

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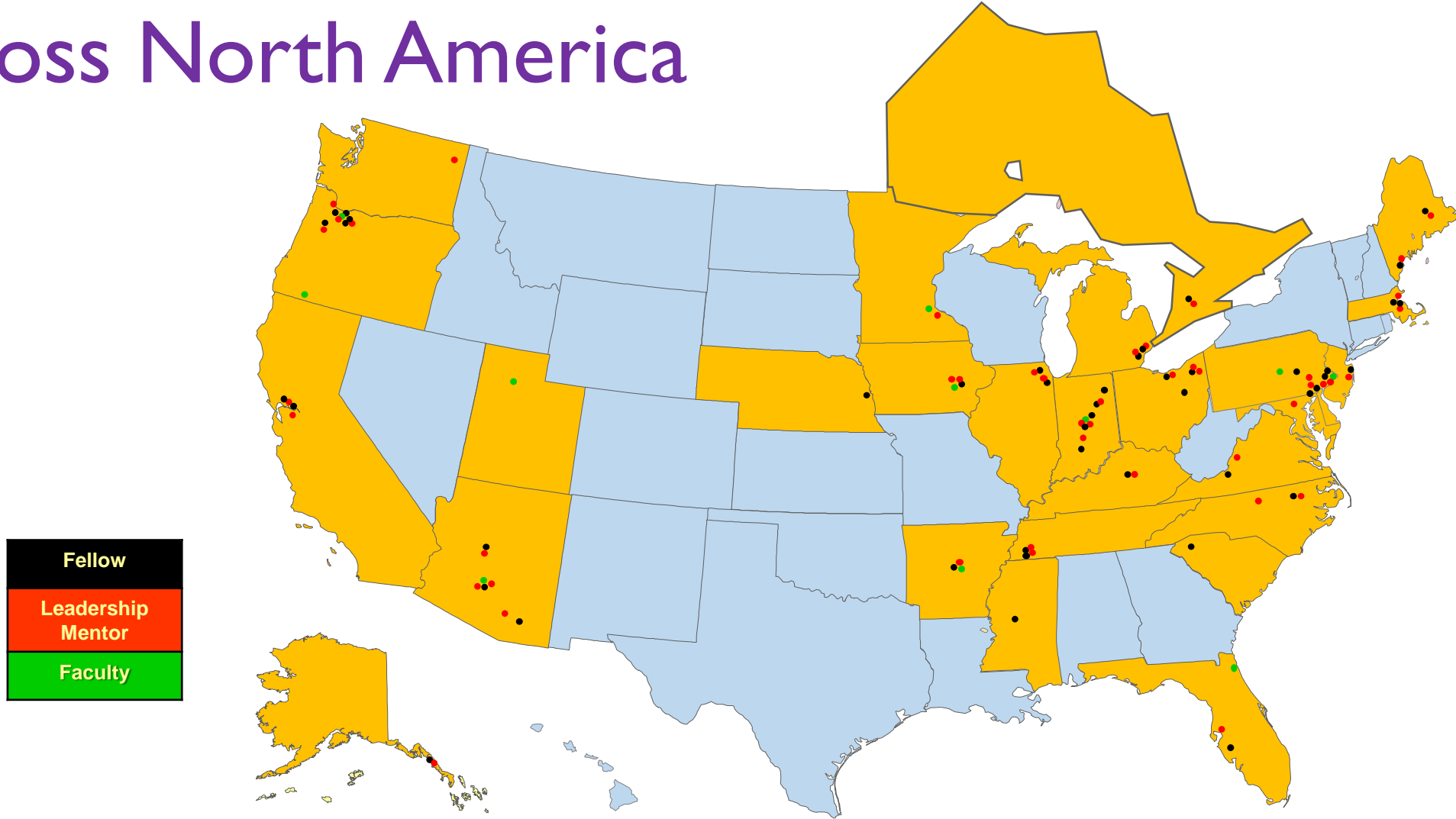


Purpose

- To prepare and position nurses in leadership roles in various health care settings to lead interprofessional teams in the improvement of health care quality for older adults and their families
- To develop skills that lead to the promotion of health policies for the geriatric population in diverse and global health care settings



GNLA Academy Participant Impact Across North America



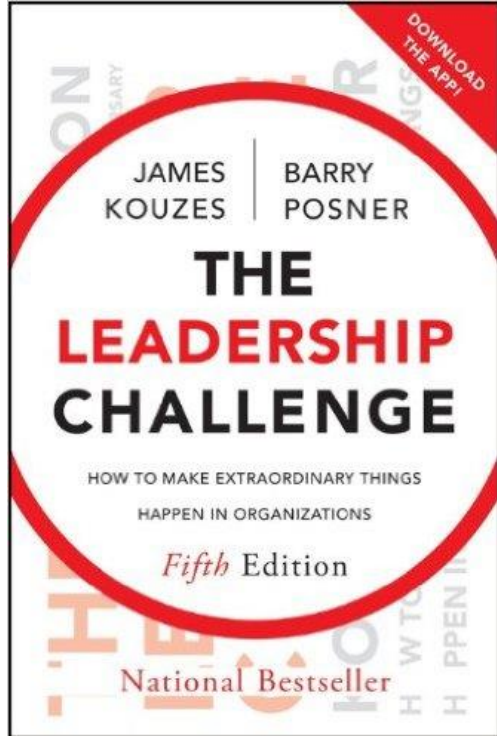
GNLA History

Four cohorts:

- 2008-2009 US
- 2010-2011 US
- 2012-2013 US
- 2014-2015 US & Canada



Leadership Development Model



- Self-awareness and Self-assessment
- Behavioral focus
- Reflective analysis
- Relationship foundation – triads
- Kouzes-Posner “Leadership Challenge”

GNLA Structure Overview

- Competitive selection
- 18 month guided leadership journey
- Two three-day workshops
- Fellow & Leadership Mentor relationships
- Individual leadership development plan
- Self development



GNLA Structure Overview

- Faculty consultation
- Facilitated site visits by the academy faculty
- Monthly faculty led learning activities & discussion groups
- Design & implementation of interprofessional team leadership project



GNLA Structure Overview

- Journaling
- Evaluation of experience and project
- Dissemination of results
- Professional presentations of project outcomes and experience



Three Learning Domains

- Individual leadership development
- Advancing nursing practice through leadership of an interprofessional team project
- Expanding scope of influence:
organization, community, profession

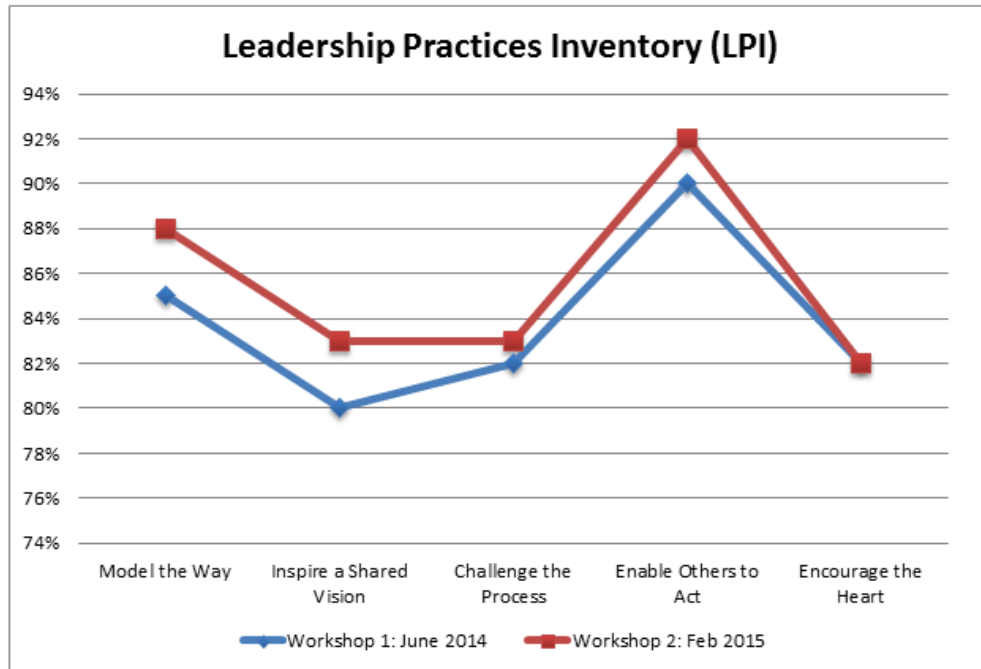


Individual Leadership Development



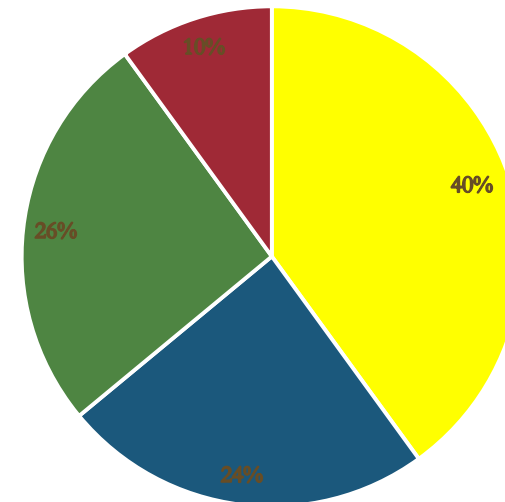
Self-Assessment

Review of past performance evaluations



Colleague Feedback

PACE Color Pallete Scores




Yellow Blue Green Red



Individual Leadership Development Plan

Individual Leadership Development

- Improve public speaking and self confidence
- Participate in the opportunity to be interim Medical/Surgical Unit Director
- Demonstrate understanding of surgical unit operations and build relationships with surgical unit staff
- Participate on the Baldrige team within my organization

 Individual Leadership Development Plan (ILDP)					
Fellow Name:					
Leadership Mentor Name:					
Faculty Advisor Name:					
Goal 1:					
Objectives	Action Strategies	Time Frame	Resources	Desired Outcomes	Measure of Results
Goal 2:					
Objectives	Action Strategies	Time Frame	Resources	Desired Outcomes	Measure of Results
Goal 3:					
Objectives	Action Strategies	Time Frame	Resources	Desired Outcomes	Measure of Results
Goal 4:					
Objectives	Action Strategies	Time Frame	Resources	Desired Outcomes	Measure of Results

The Journey

Our Triad



SPEAK

SITE VISITS

COMMUNITY PARTNERS

FACILITATE

HRH aims to improve elder care in the county

As the population ages, more and more hospital patients are needing specialized geriatric care and nurses often bear the brunt of the workload in caring for the needs of older patients.

In order to help improve elder care, Hendricks Regional Health medical unit director, Jennifer DeClercq, M.S.N., R.N., BC-Gerontology, GNLA-Fellow, is participating in an esteemed Geriatric Nursing Leadership Academy (GNLA) through the Honor Society of Nursing, Sigma Theta Tau International.

Founded in 1922, and funded by Hill-Rom and Hearst Foundations, the



DeClercq

GNLA is an 18-month program with the mission of advancing world health and celebrating nursing excellence in scholarship, leadership and service. There are currently 135,000 active members in the academy, in more than 85 countries.

After a rigorous application process, DeClercq was selected to the leadership academy and is currently the only nurse chosen from the state of Indiana and one of only five members from the United States.

DeClercq sought the opportunity to enter the GNLA program while working on her master's degree. Her hope is to make a positive impact on elder care at HRH, as well as throughout Hendricks County. Part of the academy curriculum requires an organizational project and DeClercq is currently involved with Hendricks County's Prime Time

Expo to explore ways to get more patients, and other senior citizens in the community, to utilize the services of the Hendricks County Senior Center. She will also be working to increase education about elder care among her co-workers.

DeClercq is developing her leadership skills and her program mentor, Lisa Imlay, M.S.N., R.N., has seen a blossoming of those talents. Imlay's advisory role is to provide feedback and resources on key aspects of DeClercq's leadership plan, as well as helping her expand her professional development and leadership. The two work under the tutelage of Nelma Shearer, Ph.D., R.N., FAAN, faculty advisor at Arizona State University College of Nursing and Health Innovation to facilitate the processes of the GNLA program.

Press Release



Outcomes

- Improvement in 4 out of 5 exemplary practices
- Director of Medical/Surgical Units
- Meeting facilitator for long term care partner
- Becoming Baldrige examiner
- Gained confidence in public speaking



Advancing Nursing Practice through Leadership of an Interprofessional Team Project



The Impact of Changed Approach to the Use of Narcotics in the Treatment of Chronic Non-Cancer Pain Management in Older Adults

- Purpose: Determine opiate utilization within the Rosa Parks Geriatric Clinic before and after the implementation of the hydrocodone-combination rescheduling to the C-II classification as the RPGC applies a standardized approach to treating chronic pain in older adults offering alternatives to opiate medications as well as an opiate de-escalation process. Additionally, this study will measure the opinions of patients and providers related to the implementation of this new standardized approach to chronic non-cancer pain management.
- Team Membership: Joel Steinberg, MD, Mohammed Kang, MD, Candice Garwood, PharmD, Brenda Thiel, PharmD Fellow, Rita Colbert, RN, Ashley Thomas, SW and Barbara Holyfield, RN (observer)



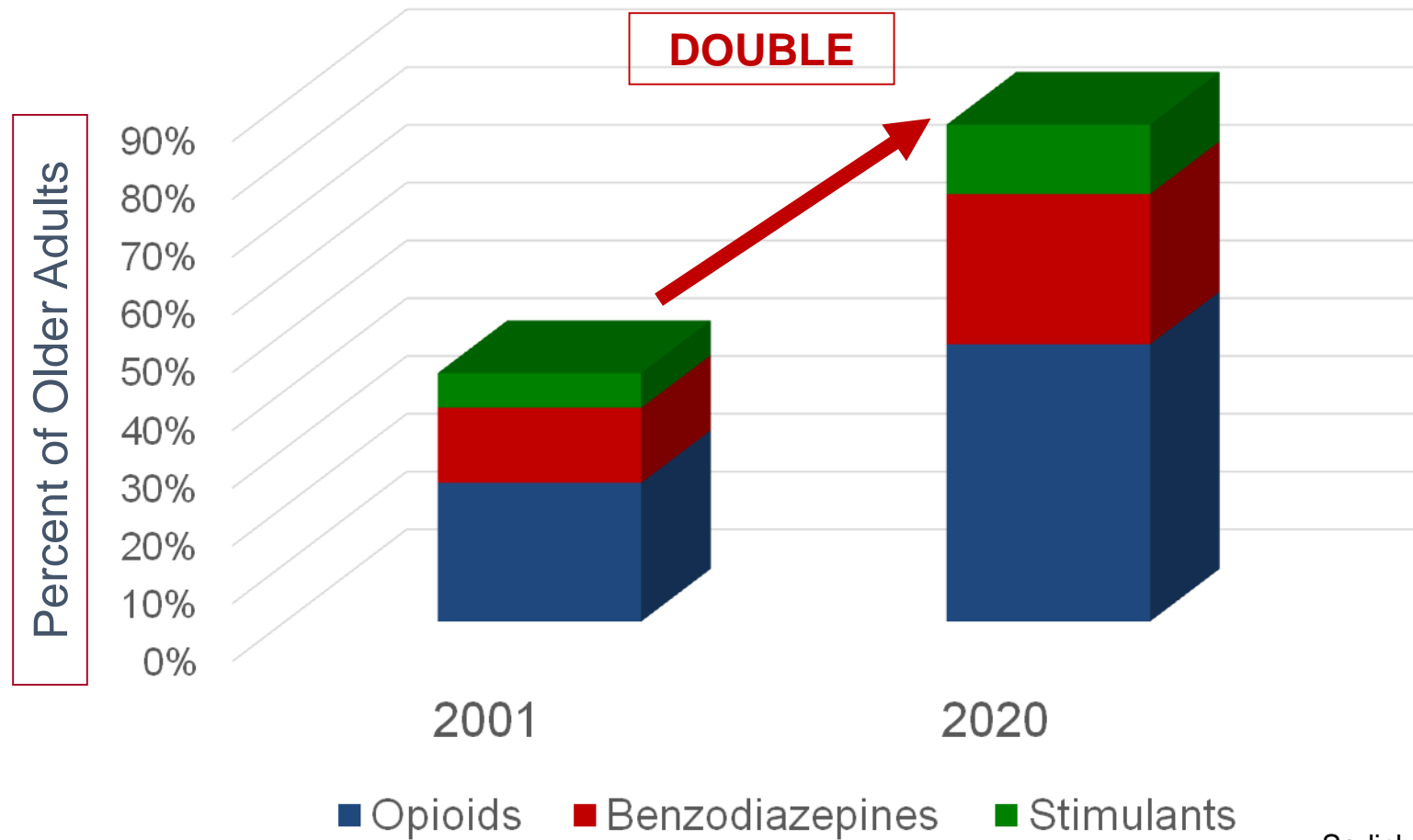
Opioid Epidemic

- 99% of hydrocodone products used by the United States
- More than 20,000 Americans die each year due to prescription drug abuse
- In 2012, U.S. doctors wrote more than 125 million prescriptions for hydrocodone-containing drugs



Gaskin et al. *The Journal of Pain*. 2012; 13(8):715-724.
IMS Health

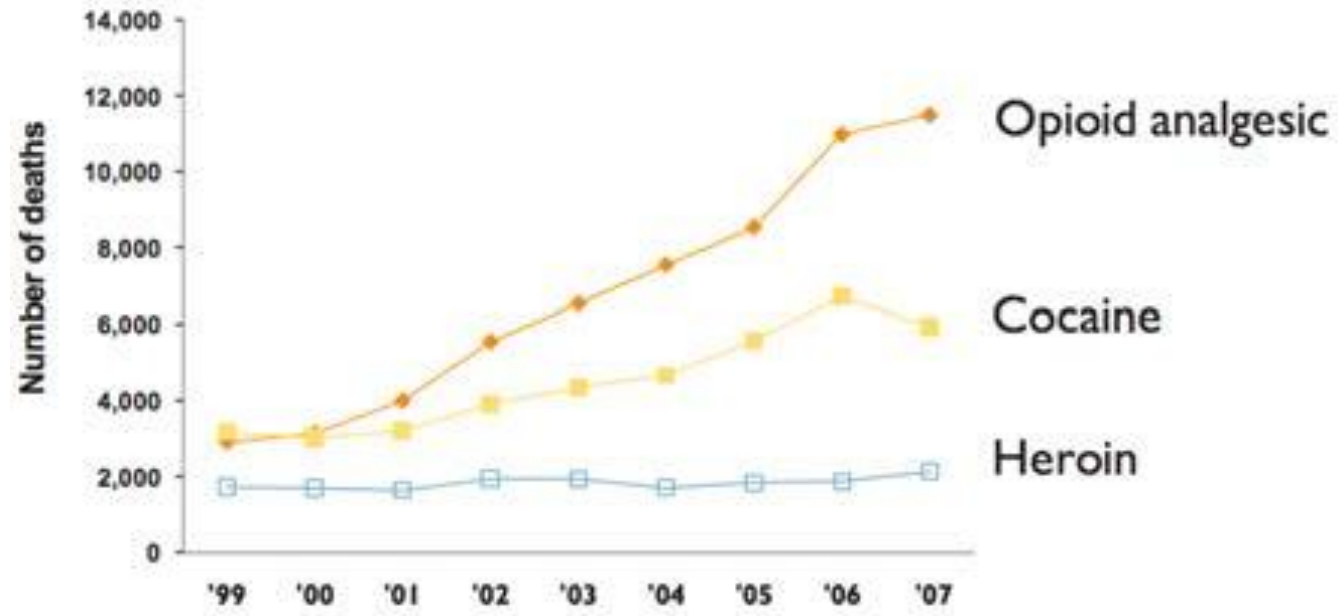
Misuse of Prescription Medication in Older Adults



Sadick B. Wall Street Journal. Sept 14, 2014.



CDC: Poisoning Deaths Involving Unintentional Opioids in US 1999-2007



So why are we here today discussing this?

- Inappropriate use of opiate medication for management of chronic pain by older adults is fraught with challenges for the patient and healthcare provider
- Nursing leaders need to assure care to the older adult that is:
 - Safe
 - Effective
 - Appropriate



Treatment of Pain in Older Adult: The Best Approach?

- Current evidence-based literature does not serve as an adequate guide
- Target disease-specific conditions or younger populations
- Number of controlled studies with patients >75 years old remain low
- High quality studies involving older adults from different ethnic groups rare



Journal of American Geriatrics Society. 2009;57:1331-1346.

Study Aims: Practice Change in Treating Pain in Older Adults

Aim 1

- Compare opioid utilization before and after the practice change

Aim 2

- Evaluate provider opinions and knowledge of a new systematic approach

Aim 3

- Educate patients about alternative therapy options and evaluate opinions

Hypotheses: Implementation of the Practice Change

Aim 1

- Utilization of opioids will decrease

Aim 2

- Providers will understand the practice change protocol

Aim 3

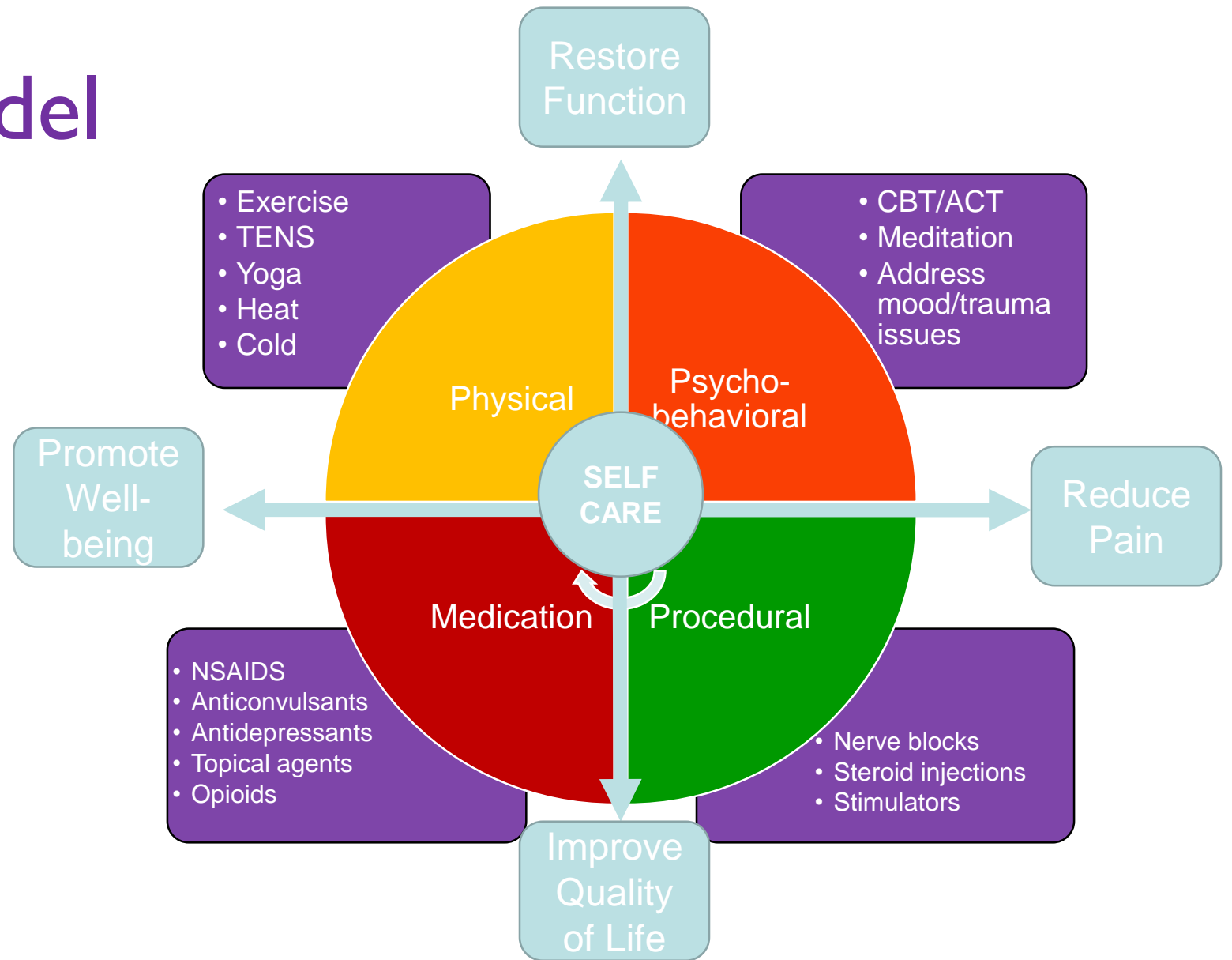
- Patients will have a better understanding of their pain and identify alternative therapies

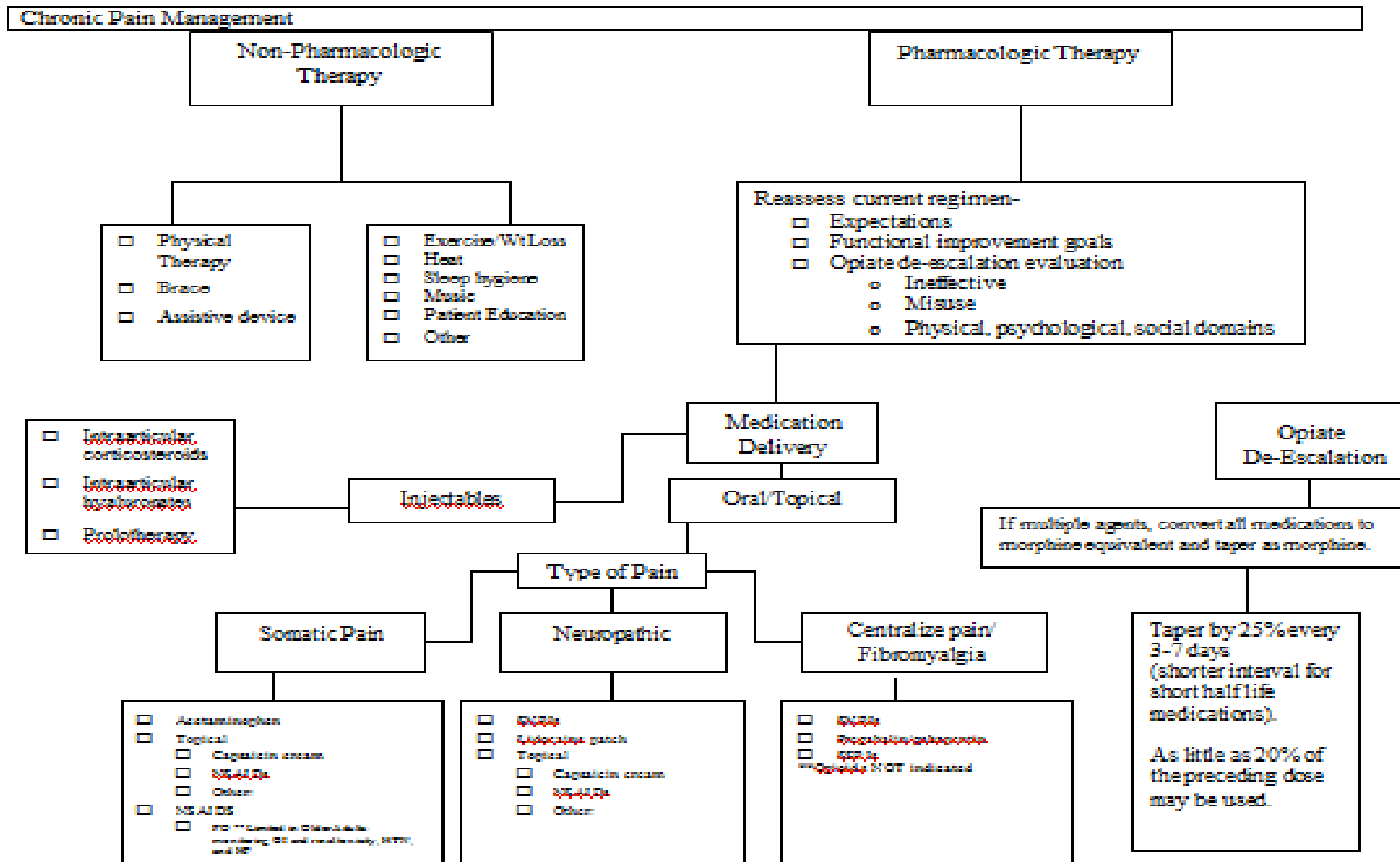
Methods

- Retrospective, single center study
- IRB approved, Quality Improvement
- Rosa Parks Geriatric Center
 - Over 3300 patients
 - 68% female
 - Average age 78 years old



Practice Model





Practice Change

Clinic Policy and Procedure:

- Pain contract agreement
- Drug Screen
- Patient Assessment
- STOP BANG/PHQ2
- Automated Prescription System
- No paper prescriptions
- Refer as appropriate (pain, sleep, PT, etc)



Practice Change

Provider Education:

- Opioid Addiction Lecture
- Chronic Pain in Older Adults Lecture

Patient Education:

- Self Management of Pain Class
- Follow up classes offered

Evaluation:

- Retrospective patient chart review
- Provider questionnaire
- Patient survey

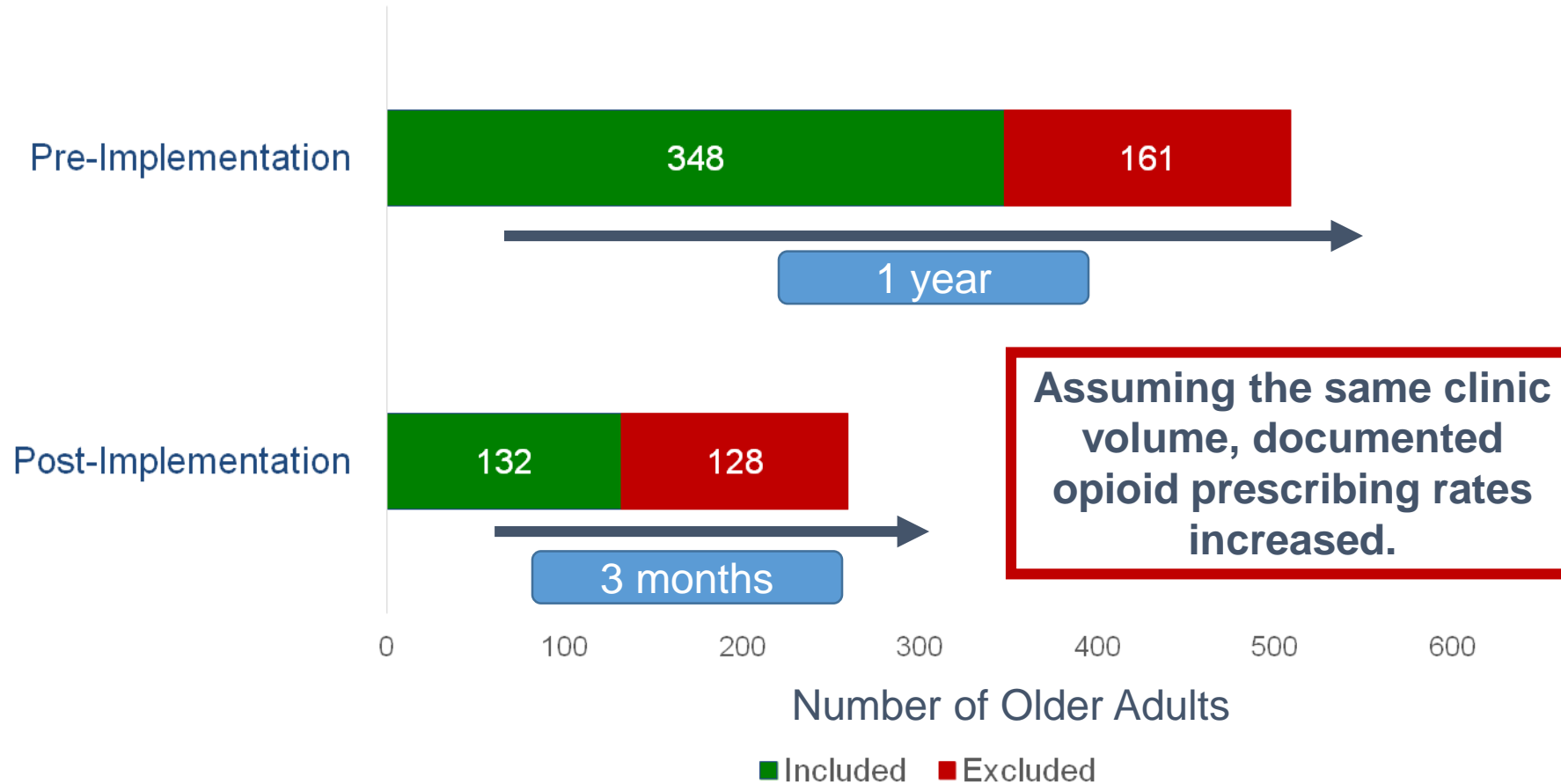
Baseline Characteristics

	Pre-Implementation (n=348)
Age	75 ± 9
African American	290 (83%)
Female	261 (75%)
Pain Indication: Osteoarthritis Back Pain Other	 191 (55%) 72 (21%) 79 (23%)
Basic Activities of Daily Living: Independent Limited Not available	 223 (64%) 49 (14%) 76 (22%)
Antidepressant Use	87 (25%)



Primary Outcome

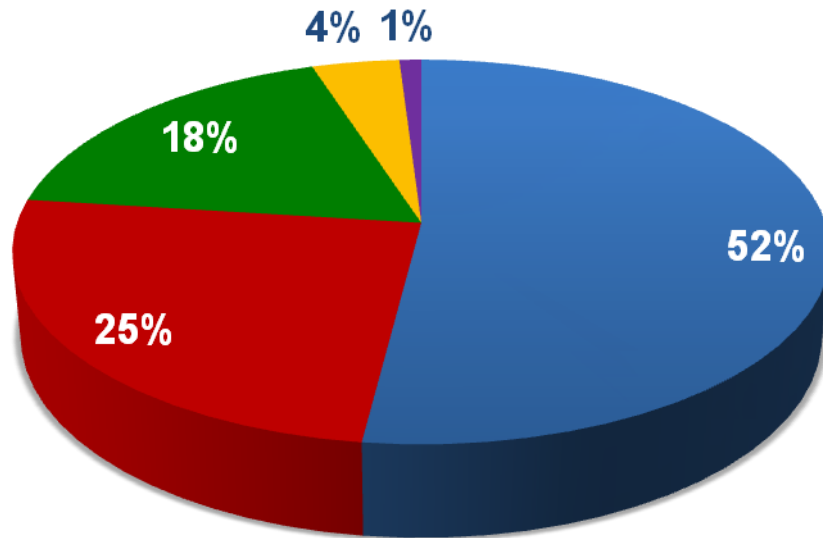
Opioid Utilization in Older Adults



Opioid Selection

Pre-Implementation

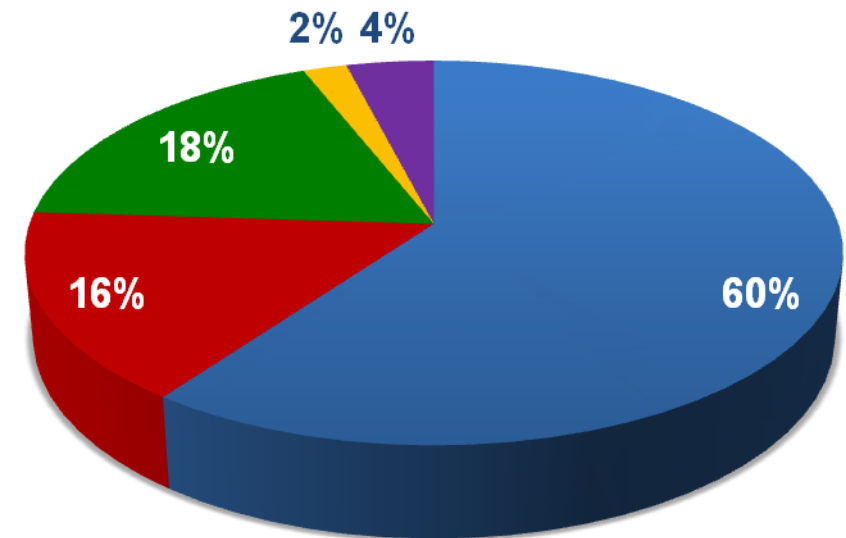
(n=348)



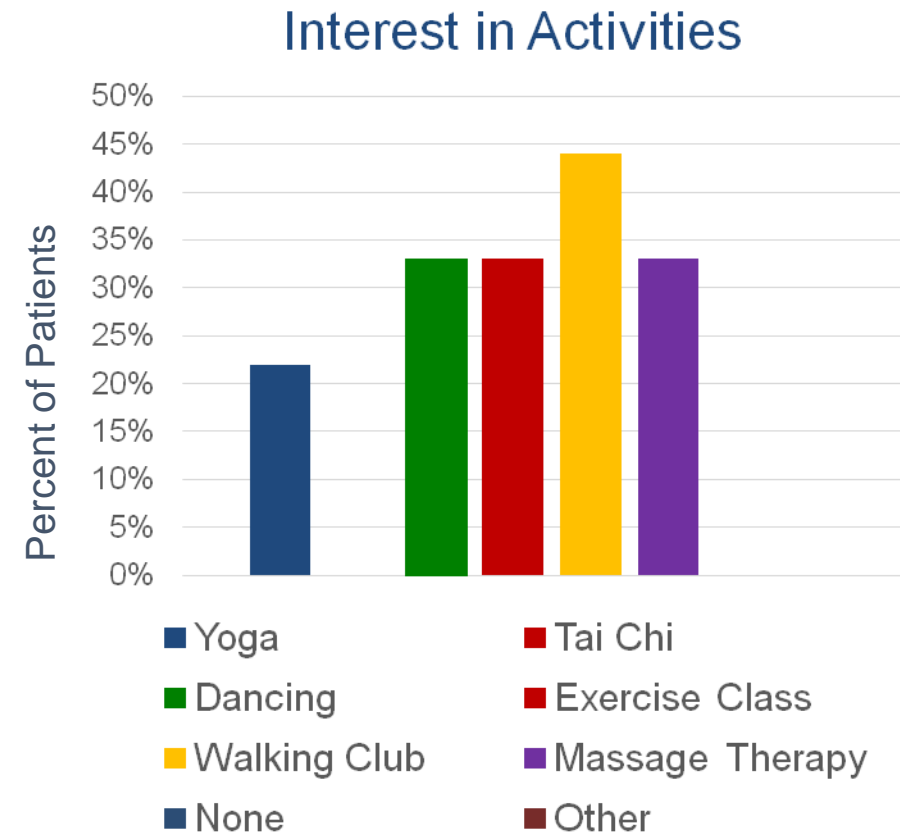
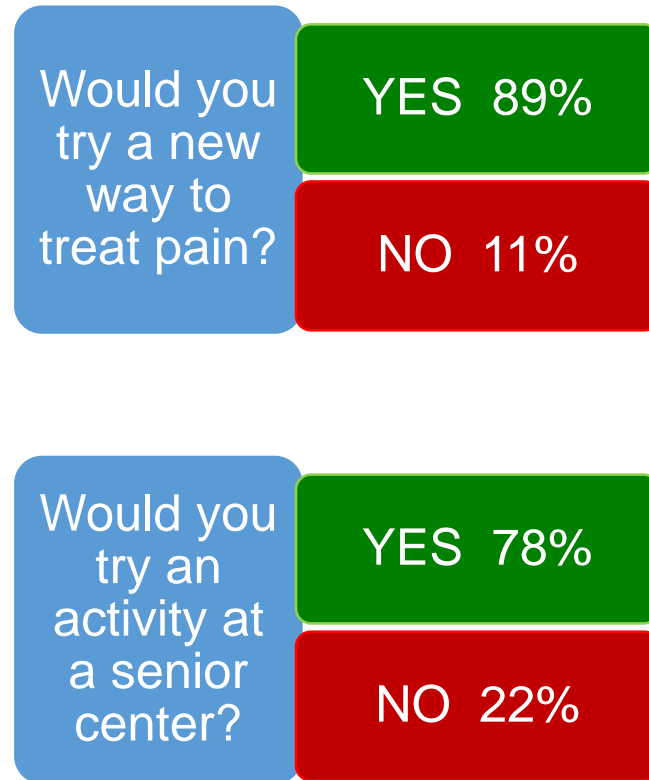
- Hydrocodone-acetaminophen
- Tramadol
- Codeine-acetaminophen
- Oxycodone products
- Other

Post-Implementation

(n=132)

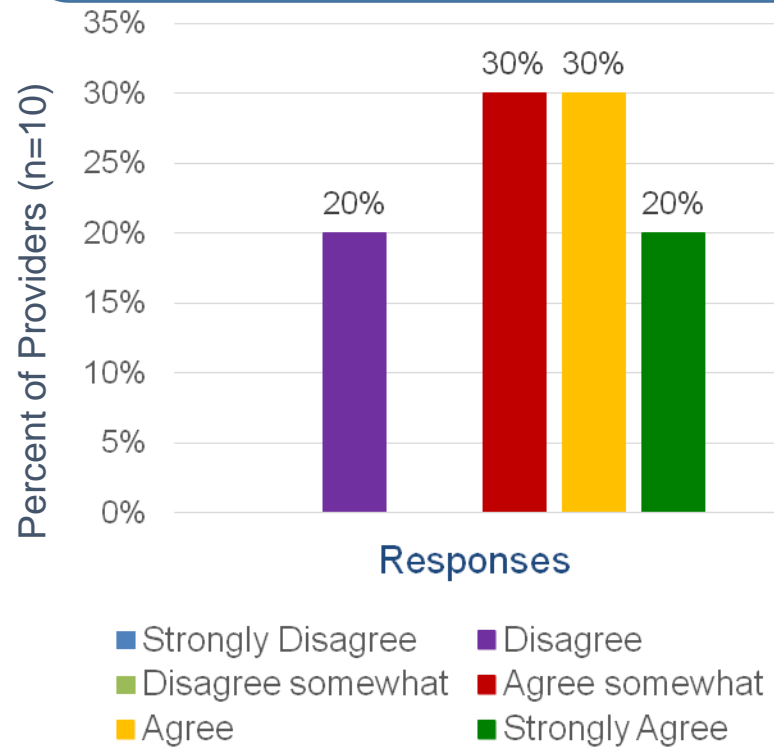


Results- Patient Education Survey (n=9)

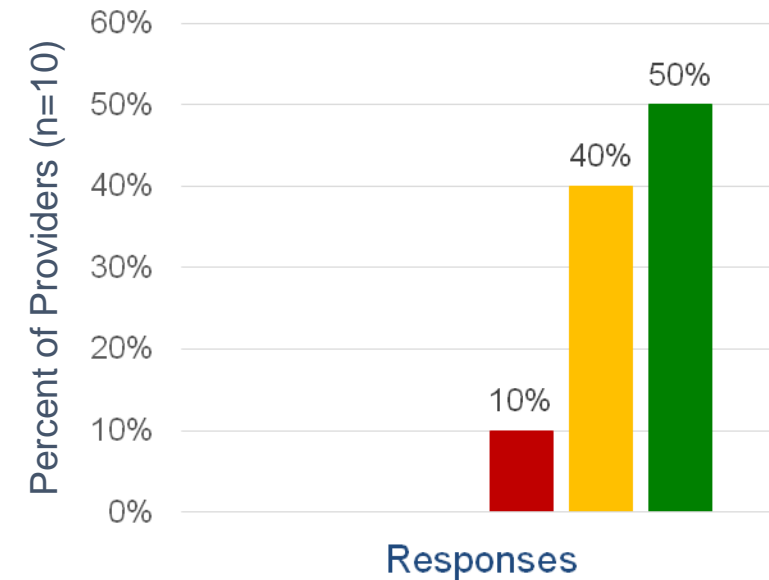


Results- Alternatives to Pain Medication

Antidepressants usually improve symptoms and function in patients with chronic pain.

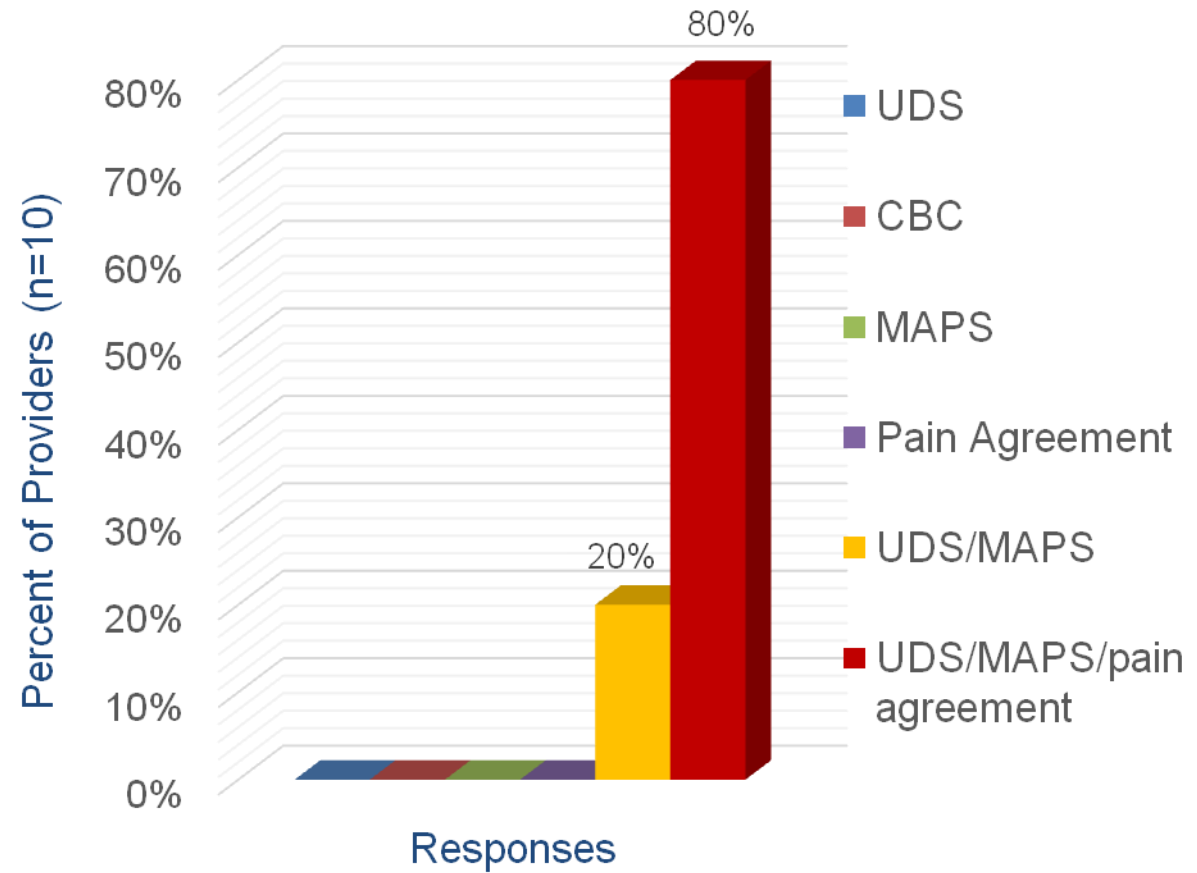


Exercise can improve symptoms and function in patients with chronic pain.



Results- Process Assessment

If you have a new patient to the clinic who inquires about opioid medication for their osteoarthritis, which procedures should be included



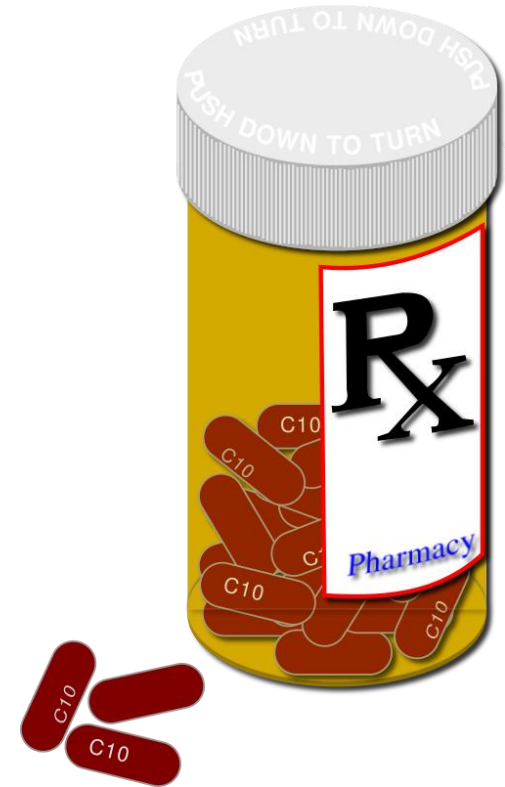
Conclusions

- Measurable change in opioid utilization will require additional time
- Similar opioid selection trends before and after practice change
- Improved understanding of clinic protocol implementation by providers
- Increase in patient awareness of pain management alternatives
- Overall increase in quality as well as safety of the care provided to the opioid using patient



Return on Investment

- Increased safety and quality of care to the patient using opioids for pain management
- Working with MPRO in order to determine if the opioid using patient is more at risk for recurrent hospitalizations as well as if our intervention through our interprofessional team effort had any effect on the prescribing practices



Sustainability

- Clinic procedures regarding pain management updated/retooled including policy/procedural change, education of staff/providers, etc.
- Chronic Pain Management Expert
- Keynote speaker for Nurses Week on Chronic Pain Management
- Nursing Grand Rounds in November, 2015



Sustainability (cont.)



Dissemination of findings and knowledge learned:

- Presentation of poster at Conference on Pain: Beyond Boundaries (MI)
- Poster Presentation at annual NICHE Conference (FL)
- NICHE Webinar





Expansion of Interprofessional Team Work



- Speaker of Geriatric Pharmacology to EMT Conference
- Coordinator for SCOP program (WSU SOM)
- BSN students experience (in process)
- Key Leader on Key Leaders Roundtable: Systems change to impact diversion and addiction



Expansion of Interprofessional Team Work (cont.)

- Physicians Institute for Excellence in Medicine grant to provide education to internal med residents: ER/LA Opioid REMS: Achieving safe use while improving patient care. (grant funded)
- Article submitted for publication on interprofessional teamwork
- Offered faculty position in SOM



Expanding Scope of Influence Organization, Community, Profession



Where I began...

Organization	Community	Profession
<ul style="list-style-type: none">• Faculty member in BScN program for 12 years• Coordinator of Level 1 of program for 4 years• Highly Qualified Professional (HQP) working with CIHR Chair for 1 year• Comfortable within my program and circles	Served on various Boards of Directors and community organizations	Member of a few professional organizations in name only (paid fees and read newsletters)



Gap Analysis

Using GNLA provided documents and tools, I better understood SOI and where I needed to go/what I needed to do.

1. SOI Portfolio:

- Recognized areas of strength (community involvement, academics) and areas needing to have more influence (Leadership positions, policy/procedure, consulting, networks)
- Also learned more about the power of social media and branding in GNLA Workshop II and began a Twitter account. I now have a following! **@BScNLIConestoga**

2. PACE Personality Test:

- Determined I was a red personality meaning I was extraverted, optimistic, courageous and confident. I decided to use these qualities to expand my SOI in all areas versus having them as barriers.

3. LPI Data:

- Showed need to improve scope of influence using K&P Practices of: *Enabling Others to Act and Inspiring a Shared Vision*



Scope of Influence Goal

Engage and influence those within my organization, community, and profession.

Organization: leader and expert in geriatric care and education

Community: influence various organizations to provide best care and practices for older adults

Profession: use power of nursing to influence public policy and practices



Organizational Outcomes

- Increased network at Conestoga College using Media Dept., Lunch with Leaders, and PD opportunities
- Asked to present x 3 to faculty and staff on Geriatric related topics
- Selected to represent Faculty for on site video about nursing
- Continue in expanded HQP role



Community Outcomes

- Consultant with the Waterloo Region Elder Abuse Response Team
- Board Member of the Sexual Assault Support Centre (SASC) of Waterloo Region
- Received annual \$50,000 in funding for community organization following presentation to Regional Council
- Featured guest on podcast featuring people who are leaders and follow their passion
- Monthly “consulting” with community group made of female older adults



Professional Outcomes

- Executive member on both the Geriatric Nursing Association of Ontario (GNAO) and the Canadian Geriatric Nursing Association (CGNA)
- Discussed needs of older adult population with Member of Parliament (MP)
- Attended the AGM of the Registered Nurses Association of Ontario (RNAO)
- Selected as representative for special delegation of GNLA Fellows to present at the STTI biennial convention in 2015
- Attended 8 geriatric nursing conferences and webinars throughout 2014



Sustainability of Scope of Influence

- Maintain Fellowship relationships
- Continue to expand networks in all 3 areas
- Use brand to achieve SOI goals
- Active involvement with RNAO and other politically motivated associations
- Pursue PhD studies to gain credibility and experience to further influence students/faculty and research



2015 AMY J. BERMAN GERIATRIC NURSING LEADERSHIP AWARD

Nancy Edwards PhD, MSN, ANP-BC
Purdue University



Personal Journey

- Interest in Geriatrics started in childhood
- Geriatric employment



Interprofessional Team Work

- The IPE journey
- Challenges
- Rewards

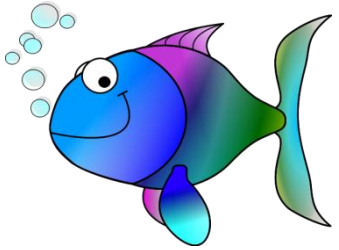


Current Scope of Influence

- Care of client
 - Provision of care
 - Community involvement
- Students
 - Stimulating interest
 - Increasing geriatric knowledge
- Other professionals
 - Health professional education



Research



- Dementia/animal assisted therapy
 - Nutrition
 - Affect
 - Exercise
 - Behavior
- Robotic dog and older adults



Impact of Leadership Development on Policy Advancement and Caring for Older Adults



Interprofessional Health Care Leadership

Drivers of Change:

- Demographics
- Economics
- Governments
- Delivery Systems
- Human Capital
- Innovation



Leadership Development Impact

Model the Way

Inspire a Shared Vision

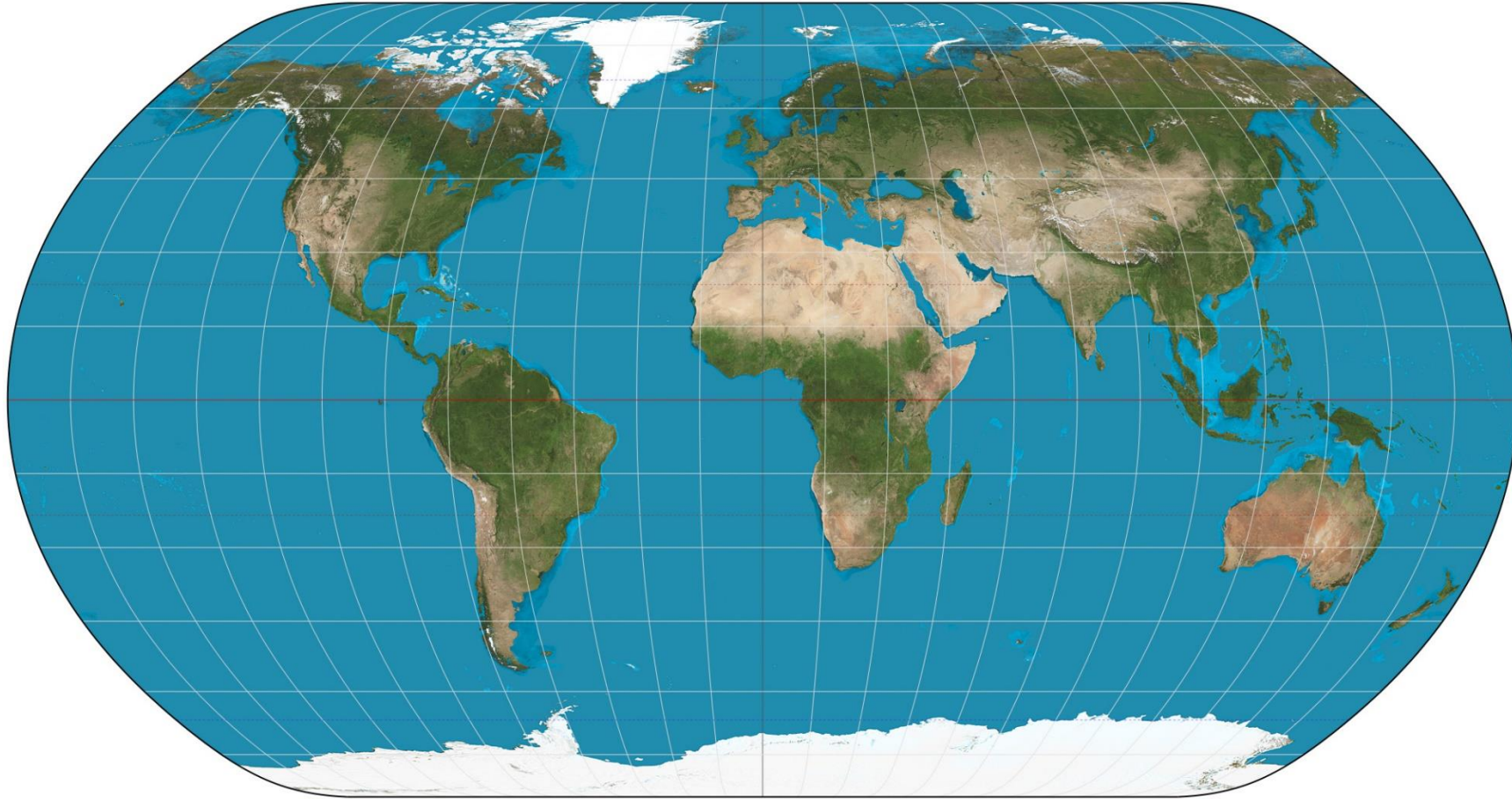
Challenge the Process

Enable Others to Act

Encourage the Heart



GNLA Fellows Influence



Nurses Leading Systems Change

- Assessment
- Design
- Implementation
- Research
- Analysis
- Dissemination



Nurses Leading Systems Change

Implications for:

- Healthcare Delivery
- Policy Advancement
- Workforce
- Prevention
- Wellness



Preparation and Positioning for the Future



Q & A





For more information or questions contact: leadership@stti.org

