

Partners in Care: Nursing's Influence in an Emergency Medicine Residency Program



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Introduction

Emergency Medicine (EM), as a specialty, has embraced the model of interprofessional care teams in clinical settings. In addition to clinical training, EM program directors are required to ensure that resident physicians are integrated into quality improvement (QI) programs during their training, as well as to collect data for milestones regarding team management and collaborative care of the ED patient. The Accreditation Council for Graduate Medical Education's Clinical Learning Environment Review has emphasized institutional focus on interdisciplinary training and feedback. To achieve these aims, residency and nursing leadership partnered to develop an innovative, interprofessional approach to incorporating nursing presence into core areas of EM residency training.

Objectives

The learner will be able to:

- recognize innovative strategies for incorporating nursing presence into core areas within Emergency Medicine residency training.
- describe opportunities for nursing support of resident physician training and practice.

Materials and Methods

QI Program Educational Objectives

This innovative, interprofessional approach was intended to meet several objectives spanning multiple needs, including:

- early onboarding of importance of interprofessional teams,
- obtaining multisource feedback for resident development,
- expanding opportunities for clinical learning and interprofessional input.

Curricular Design

A member of the departmental Nursing leadership partnered with Residency leadership to develop a liaison role between the two teams. Opportunities for enhanced group collaboration were identified and interventions were introduced in a step-wise fashion over the next 2 years. Innovative methods (Table 1) were then employed to build a collaborative mindset that would support trainees into their future practice.

Results

Impact/Effectiveness

The innovative methods shown have met with wide spread acceptance and positive reviews.

Post interview surveys from applicants have frequently listed "nursing interviewers" as one of the things most liked about the day. Qualitative comments from nurse partner program surveys have been universally positive.

A total of 101 nursing staff generated 635 electronic evaluations over the 27 months the program has been active, many with detailed and constructive comments for the residents that have served as the impetus for remediation.

Nursing presence has been a constant at M&M since the development of a nursing champion, with active participation from both leadership and nursing staff involved in the case.

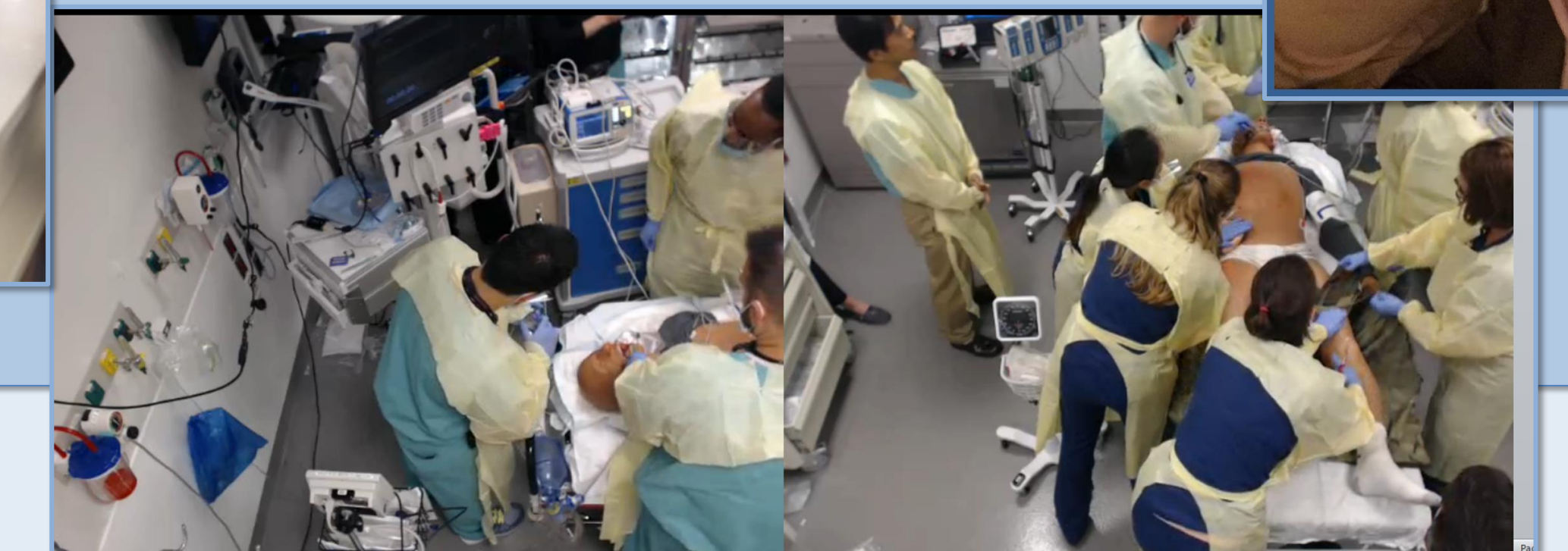
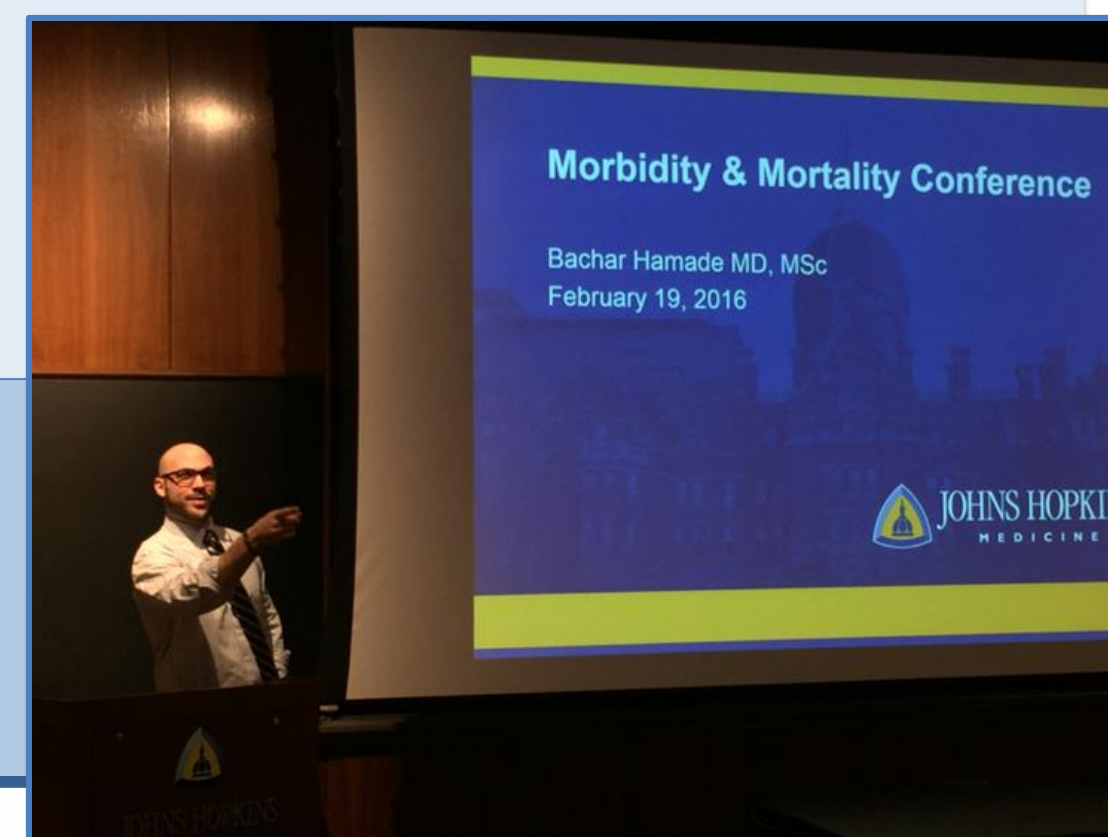
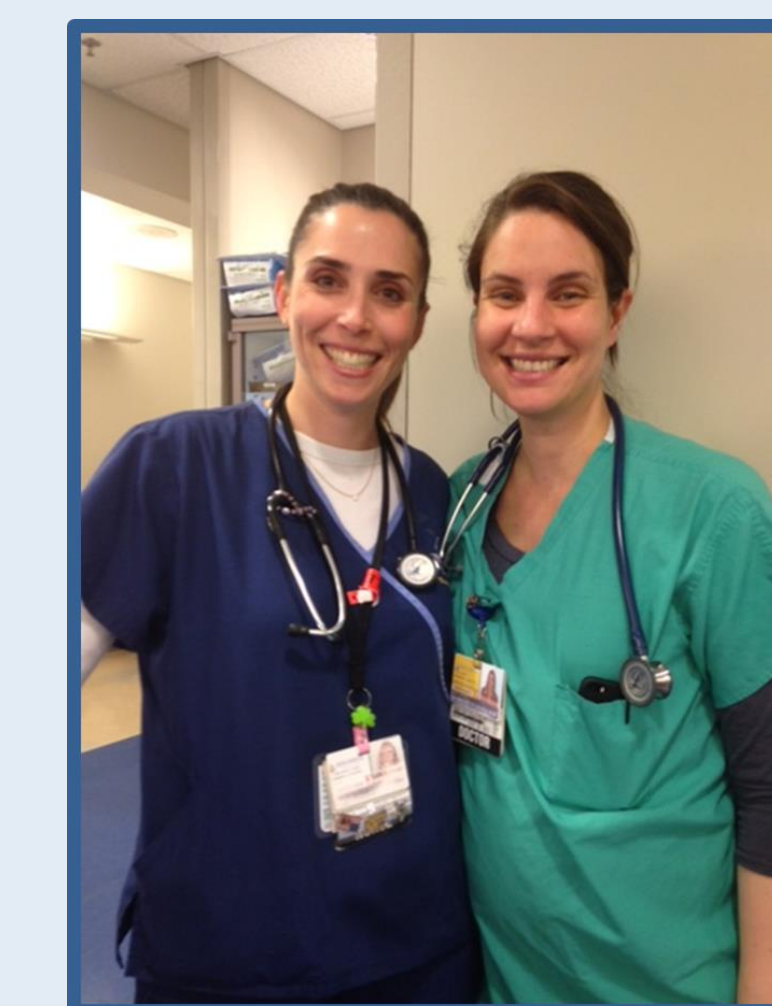
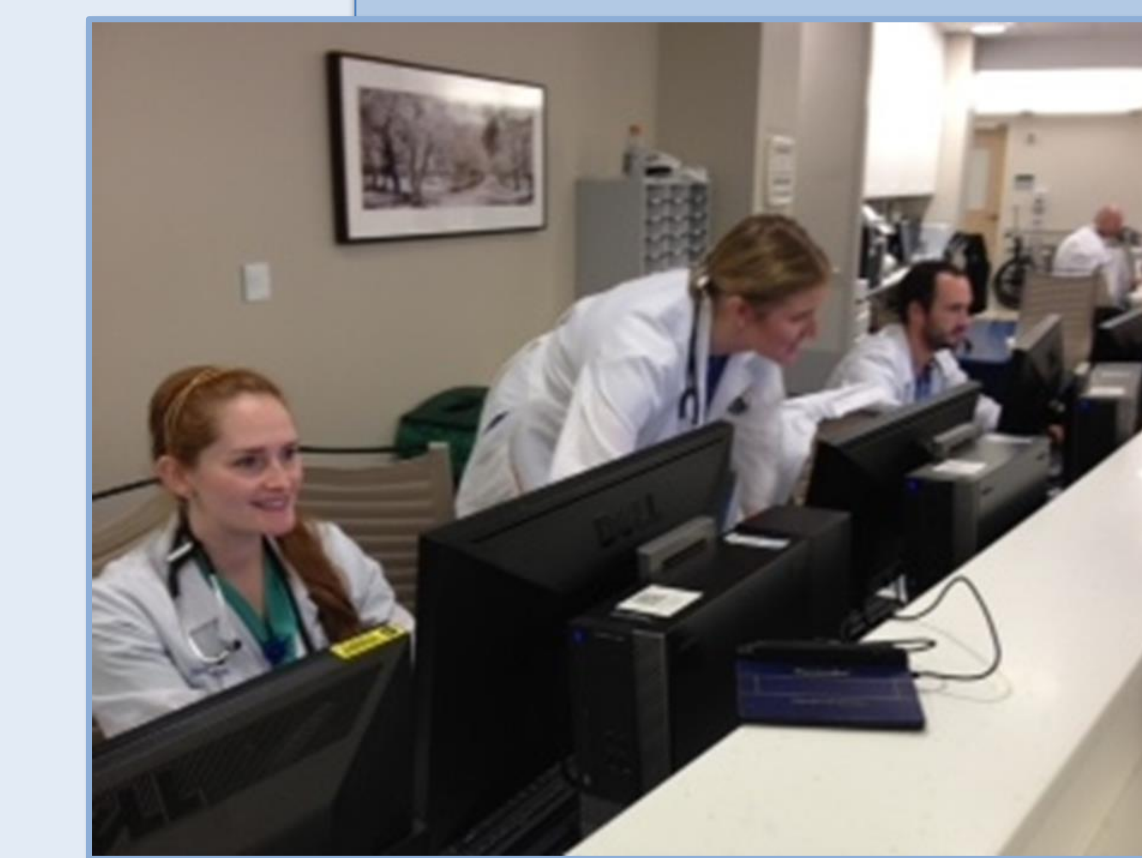
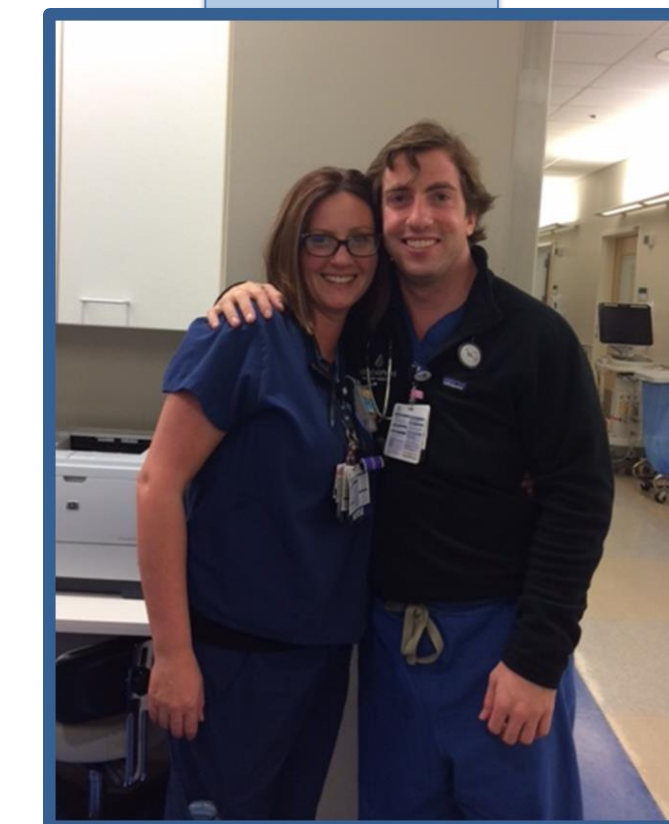
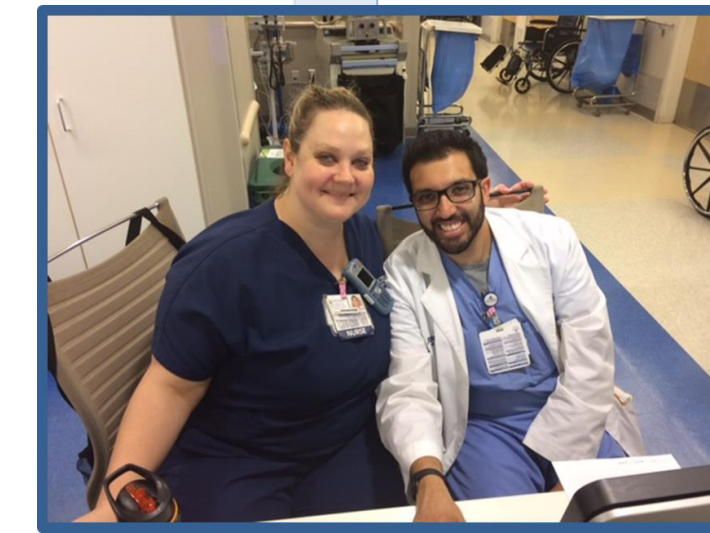
PURPOSE	EDUCATIONAL OBJECTIVES	INNOVATIVE APPROACH	SPECIFIC DETAILS
Fostering strong interdisciplinary relationships both within and outside the clinical arena	Early onboarding of importance of interprofessional teams, with a focus on nursing staff	Inclusion of nursing leadership as interviewers during residency recruitment	Minimum of one nurse present for all interview days with equal weight given to nurse and faculty scores
		Nurse-intern partner program initiated during orientation	Nurse volunteer paired with each individual intern to provide additional emotional support, serve as a logistical resource, and offer a way to develop interprofessional relationships
		Multidisciplinary QI program	QI teams developed to contain residents from each of the PGY levels, as well as dedicated physician and nurse champions
Obtain multisource feedback for trainee development		Implement electronic nursing evaluation	Nurses added to evaluation infrastructure with the requirement that residents would select one nurse per two-week ED block Nurses were educated regarding the importance of their input and the concept of milestones and proficiency levels and how to use the electronic system Specific subcompetencies chosen: multi-tasking, professional values, patient-centered communication, and team management
		Expand clinical learning opportunities with opportunities for interprofessional input	Include staff nursing and clinical technicians in simulation program Designate nursing champion within M&M program Protect nursing time to attend M&M and case conferences within weekly didactics

Table 1

Table 1 – Approaches to Achieve QI Education Objectives

Trainee Evaluation				
Evaluator:	Health Professional	Subject:	PGY3	
Activity:	JHED	Site:	Johns Hopkins Emergency Dept.	
Evaluation Type:	Nurse Evaluation of Resident	Completion Date:	07/02/2015	
Request Date:	06/16/2015			
Period:	06/02/2015 - 06/15/2015	Dates of Activity:	06/02/2015 To 06/15/2015	
Subject Participation Dates:	06/02/2015 To 06/15/2015			
Multi-Tasking (Task-switching) (PCB) (Question 1 of 5 - Mandatory)				
Employs task switching in an efficient and timely manner in order to manage the ED				
	Level 1	Level 2	Level 3	Level 4
N/A	Manages a single patient amidst distractions	Task switches between different patients	Employs task switching in an efficient and timely manner in order to manage multiple patients	Employs task switching in an efficient and timely manner in order to manage the ED
	0	1	1.5	2
				2.5
				3
				3.5
				4
				4.5
Professional values (PROF1) (Question 2 of 5 - Mandatory)				
Demonstrates compassion, integrity, and respect for others as well as adherence to the ethical principles relevant to the practice of medicine				
	Level 1	Level 2	Level 3	Level 4
N/A	Demonstrates behavior that conveys caring, honesty, genuine interest and tolerance when interacting with a diverse population of patients and families	Demonstrates an understanding of the importance of compassion, integrity, respect, sensitivity and responsiveness and exhibits these attitudes consistently in common/uncomplicated situations and with diverse populations	Recognizes how own personal beliefs and values impact medical care; consistently manages own values and beliefs to optimize relationships and medical care	Develops alternate care plans when patients' personal decisions/beliefs preclude the use of commonly accepted practices
				Develops and applies a consistent and appropriate approach to evaluating appropriate care, possible barriers and strategies to intervene that consistently prioritizes the patient's best interest in all relationships and situations
				Effectively analyzes and manages ethical issues in complicated and challenging clinical situations
	0	1	1.5	2
				2.5
				3
				3.5
				4
				4.5

Figure 1 – Example of electronic resident evaluations by nursing



Conclusion

Overall, our multifaceted approach has improved interprofessional relationships in all areas and bolstered the level of clinical care our teams provide. We believe that programs across Graduate Medical Education should find similar opportunities for inclusion of nursing staff to foster these outcomes.