Innovations in Academic Practice Partnerships

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Academic-Practice Partnerships

Working Definition:
Defined as strategic relationships between educational (academic) and clinical practice settings established to advance their mutual interests related to practice, education and research. (HRSA, 2014)
The Need for Strong Partnerships

- Shrinking supply of preceptors.
- Call for more PCPs (U.S. Department of Health and Human Services, 2016)
- Need for longitudinal immersive experiences for NPs (Collins, 2016).
- Rich sites for meaningful research.
- Lack of providers in rural/frontier environments
- Health challenges facing nation associated with
  - the rapidly aging population
  - increased demand from health care reform measures
  - concerns about access and barriers to care
- CMS goals to prevent readmission
- Health promotion needs
National Challenges (NONPF 2016)

<table>
<thead>
<tr>
<th>Lack of shared vision between partners</th>
<th>Legal issues</th>
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<tbody>
<tr>
<td>Lack of clear expectations</td>
<td>Resistance to change</td>
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<tr>
<td>Lack of a common language or taxonomy</td>
<td>Absence of competency based definitions of clinical expectations</td>
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<td>Timing of the partnership</td>
<td>Lack of standardized evaluation assessment tools</td>
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<td>Time required to assure success</td>
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## Evolution and Challenges:
### Procuring and Preserving APPs

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<tr>
<th>Florida Atlantic University</th>
<th>University of Northern Colorado</th>
<th>George Mason University</th>
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<tbody>
<tr>
<td>Competition with Medical Students and other Colleges</td>
<td>Preceptor recruitment</td>
<td>Bi-directional Communication</td>
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<td>Lack of reimbursement to preceptors (vs. med students and private CONs)</td>
<td>Matching students and sites</td>
<td>Prioritization of goals</td>
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<td>Large numbers of sites needed</td>
<td>Preceptor training</td>
<td>Understanding Interprofessional Practice</td>
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<tr>
<td>Lack of pediatric sites</td>
<td>Licensure of faculty in state of site</td>
<td>Resource allocation</td>
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<td>Organization leadership turnover</td>
<td>Licensure of NP student as RN in state of site</td>
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<td>Hospitals bought out by other companies</td>
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Challenges: Technology and On-line Learning

**Childhood Experience w/ Computers**
- **Digital Native** (n=17) 63%
- **Digital Immigrant** (n=10) 37%

**Experience in Online Learning**
- **Completed a program** (n=6)...
- **First online class** (n=9)...
- **3-6 previous** (n=7) 26%
- **1-3 previous** (n=5) 19%

Digital Native: Someone that has used computers and the internet since childhood.
Digital Immigrant: Someone that learned to use computers as an adult.
Our stories:
Florida Atlantic University

Need for more preceptors

Need for new process

HRSA funding opportunity

Academic Practice Partnership
Palm Beach County ACO (2015)

1. History
   • Submission for HRSA funding opportunity
   • ACO – targeted via adjunct faculty employed as a PCP in one of the practices

2. Set meeting with business manager

3. Presented slide show at providers’ monthly meeting

4. Highlighted benefits
Community Health Centers

HRSA 2016 ANE provided impetus
- Targeting education for rural/underserved
- Primary care NPs
- Preceptor preparedness
- Direct contact to offer APP ($$)
- Resulted in 4 partners
University of Northern Colorado Plan

• The Adult Gerontology Acute Care Nurse Practitioner Program:
  • will prepare graduates to work with clients from adolescents to frail elders
  • focuses on the rural/frontier environment and transitions of care with an understanding of aging in place whether this is home, a rehabilitation center, assisted living or nursing home.
  • offers an understanding of rural culture, resources in the rural environment and coordination/transition of care and collaboration
• Develop and implement an innovative academic-practice partnership
• Expand a community-based partnership to improve preceptor training and retention of preceptors in rural areas
• Initiate recruitment and training to increase minority or underserved preceptors
• Provide preceptors support via distance and simulation training
UNC AGACNP Program Details

- Predominantly on-line program
  - focus on recruiting BSN prepared nurses from rural areas or who work with patients from the rural area, (northern CO, WY & western NB)
  - students will continue to work in their current position while in graduate school
- Two required summer intensives at UNC
  - for health assessment check off
  - advanced practice skills, competencies, simulation
  - a community engagement project
- Offers additional clinical partnership options in rural regions
  - for a student to complete their practicums where they live
  - preceptors and contracts will be arranged
  - If not a possible, the student will complete their practicums in our region with Centennial AHEC (CAHEC) assistance
Figure 1: Logic Model for Rural Care Transitions: Creating an Interdisciplinary Adult-Gerontology Acute Care Nurse Practitioner Program

**Inputs**
- University of Northern Colorado (UNC) faculty and facilities in nursing, gerontology, and public health
- Innovative, interdisciplinary curriculum with nursing, gerontology, and public health
- Preceptors that are current practitioners working in Colorado, Western Nebraska, and Wyoming
- Partner Health Facilities
- AGACNP Students
- $1.8M UNC and HRSA funding
- Centennial Area Health Education Consortium (CAHEC)

**Activities**
- Implement a hybrid AGACNP program with a focus on rural healthcare needs
- Improve rural access to care for adults and elders across the transitions of care.
- Expand community-based partnerships to improve preceptor training and promote retention of practitioners in the rural environment.
- Develop and implement innovative academic-practice partnership that will support the program.

**Outputs**
- Expert Faculty
- Improved advanced practice nursing simulation
- Graduate rural health focused AGACNPs
- Practitioners in the rural setting
- New community partnerships

**Activities**
- Enroll qualified students in rural areas into UNC AGACNP program
- Establish clinical sites including hospitals, rehabilitation, palliative care, hospice, and long-term care facilities
- Provide preceptor training through new collaborations with practice and community partners
- Academic-Practice Partnership

**Participation**
- Rural adult and elderly patients
- Trained Preceptors

**Outcomes**
- Graduate Master’s and Doctorally Prepared AGACNPs ready to provide safe, quality care in the rural environment
- Expose students to the unique challenges of rural practice and care transitions in rural environments
- Provide preceptor training through new collaborations with practice and community partners

**Short**
- Sustainable hybrid AGACNP program at UNC with a focus on rural populations
- Expose students to the unique challenges of rural practice and care transitions in rural environments

**Medium**
- Improved acute adult and geriatric care for patients living in areas with low access and accessibility

**Long**
- Strengthen professional relationships between academia and clinical practice
- Enhance academic practice partnerships between UNC and health facilities caring for patients in the rural environment

**Assumptions**
- Full support of program by UNC, motivated and engaged students, preceptor cooperation from clinical sites, enriching clinical experiences at rural clinical sites; larger rural health provider work force will improve care in the rural environment

**External Factors**
- Student enrollment and financial support; policy changes; program offerings from other local universities; lack of control over what patients present for care
Collaborations with Community Partners

Centennial Area Health Education Center ((AHEC))
- Preceptor training CEs
- Student lodging

University of Colorado Health
Medical Center of the Rockies

Platte Valley Medical Center

Banner Health
Rural site placement
- Greeley, CO
- Brush, CO
- Sterling, CO
- Ogallala, NE
- Torrington, WY
- Wheatland, WY
- Worland, WY
- Fort Collins, CO
- Loveland, CO
- Telemedicine
Expanded Partnerships

Figure 1: Location of AGACNP Expanded Clinical Partnership Sites
Mason and Partners (MAP) Clinics

**Mission**: To improve the health status of underserved, uninsured vulnerable populations and to engage nursing, psychology, social work and other health and human service students in direct provision of healthcare services through interprofessional service learning.

**Vision**: The Mason and Partners (MAP) Clinics are a network of nurse managed health clinics (NMHC) affiliated with George Mason University College of Health and Human Services (CHHS) and managed by nursing faculty in collaboration with other CHHS faculty. The clinics follow a *Bridge Care* model which provides access to healthcare services for patients that lack health insurance. Through community partnerships the clinics focus on health education and preventative care to reduce risk and high-risk behaviors related to ongoing illnesses and chronic disease.
Mason and Partners (MAP) Clinics

Core Values

• Community Partnerships: We acknowledge our vital and dynamic role in our communities. We foster growth and development in a manner that understands and serves their needs.

• Compassion: We provide care with dignity, concern, kindness and a respect for the diversity of our community.

• Fiscal and Operational Sustainability: The financial plan for the Bridge Care clinics has three components: (1) sustained relationships with community partners to maximize use of clinic space and resources; (2) development of a formal plan for faculty to be in the clinic(s) as part of their teaching workload; and (3) fundraising activities with the academic organizations as well as continued efforts to secure external funding.

• Innovation: We are committed to a supportive environment that encourages new ideas and creativity.
Benefits of APPs to Practice Partners

- Strategic workforce development
- Helping hospitals, community clinics, and primary care providers to develop positions for APRNs
- Faculty participation on organization boards
- Faculty may practice at sites
- Bill – tax cuts for preceptors
- Preceptor benefits
  - Affiliate faculty appointments and use of college resources
  - “Sharpening the saw” Steven Covey (1990)
Best Practices in Academic Practice Partnerships (APP)

• Structured for sustainability and success
• Has mutually beneficial outcomes
• Improves patient care and outcomes
• Stimulates innovation
• Generates excitement
• Teaching workforce how to partner
• Success depends on commitment to the goals of the training, trust among all partners, an understanding of the time commitment, and ensuring that all partners are equal players in the process of implementation and participation in student evaluations (Snyder, A., Milbrath, G., Gardner, T., Meade, P. & McGarvey, E., 2015).
Examples from other APPs

• Please share your successes and challenges
Research Support

Research Support:

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U.S. Department of Health and Human Services, Health Resources and Services Administration, National Center for Health Workforce Analysis. (2016). *National and Regional Projections of Supply and Demand for Primary Care Practitioners: 2013-2025.* Rockville, Maryland