

## **Report from Like Schools 2015 Spring Annual Meeting**

Group: <u>Academic Health Centers (AHC)</u>

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## Agenda:

- 1. Progress on the Fall 2014 A Call to Action: Redefining the Role of Schools of Nursing within Academic Health Centers in the Era of Health Reform.
- 2. Report of the GNE pilots and a discussion of their approach to evaluation.
- 3. Vulnerability of AHCs in the current cost-conscious environment.
- 4. Trend toward reimbursement of clinical sites/preceptors for working with students.
- 5. Suggestions for Program Committee.

## Notes:

1. Progress on the Fall 2014 A Call to Action: Redefining the Role of Schools of Nursing within Academic Health Centers in the Era of Health Reform.

During the last 18 months, AHC deans developed a call to action; the AACN board responded with an RFP that was issued on February  $9^{\text{th}}$ . The proposals were due back on March  $2^{\text{nd}}$ . The AHC group was thankful to the AACN Board for its fast movement and responsiveness.

- Four excellent and high-level proposals were submitted in response to the RFP and the selection process was quite competitive.
- The goal for the project is to produce a major publication that can be used as a guide by all AHC schools with applicability and generalizability to all member schools
- Deliverables for the project are:
  - Exemplars and strategies regarding nursing sitting at the highest levels of governance for decision making, key operations and key initiatives.
  - Options related to financing; successful models for revenue generation (e.g., faculty and clinical practice, global initiatives consulting, case management with BSN/SW care transition models).
  - Challenges and opportunities for full engagement of executive leadership teams in nursing and across disciplines.

- Selection of the vendor was in process during the meeting; the selection of the vendor, Manatt Health Solution, has since been finalized.
- 2. Report of the GNE pilots and a discussion of their approach to evaluation.

Five pilots with demonstration project over 5 years:

- Discussion of issues related to funding: payments were initially delayed so unexpended funds extend to 5th year.
- Funding was used for payment of preceptors. There are consequences for infusing money for payment of preceptors; a potential problem post grant award is the loss of preceptors and sites.
- GNE participants at the AHC meeting: Gulf Coast consortium, Duke, Penn, and Arizona.
- 3. Vulnerability of AHCs in the current cost-conscious environment.
  - Revenue to AHCs is declining, so shoring up community/rural hospital versus the AHC is important (e.g., University of Pittsburgh area: need fewer nurses in AHCs).
  - Thus, there are implications (some yet to be determined) for distribution of nursing positions. Members anticipate that the publication (resulting from the AHC RFP) will address solutions and exemplars to help solve the problems experienced by schools of nursing and AHCs in the rapidly changing fiscal and healthcare environment.
  - Schools of nursing related vulnerabilities (e.g., clinical placements: as inpatient beds go down, increased utilization of "community" hospitals and other services, and any supplemental resources, etc.)
- 4. Trend toward reimbursement of clinical sites/preceptors for working with students.
  - Preceptors are paid for the # of clients whom they see; therefore, no one wants to take on the preceptor role because precepting can decrease the number of clients seen; some schools are providing "replacement payment" for lost revenue due to reduced number of clients seen.
- 5. Suggestions for Program Committee:
  - Use of metrics and algorithms to set up clinical placements in large healthcare systems (Roy Anderson from Cleveland Clinic was recommended).
  - VA to discuss their advocacy for full scope of practice; there is a new RFP for graduate clinical education that includes academic faculty practicing within the VA with the expectation of student preceptorship.
  - "Day of Dialogue" with AONE.
  - "Clinical environment and academia are out of sync; not on same page..." How do schools adapt and stay nimble when they do not have a long planning timeline?