

# **Transforming RN Role in Community-Based Integrated Primary Care through Academic Practice Partnership (TRIP): From Data to Action**

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This project is supported by Grant Number UK1HP31710 from the Health Resources and Services Administration (HRSA), of the U.S. Department of Health and Human Services as part of an award totaling \$2,659,027. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of, nor an endorsement by HRSA, HHS, or the U.S. Government.

## **Disclosure**



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## **Objectives**

1. Describe an integrated academic-community-health practice partnership addressing holistic health care provision with diverse populations in rural/underserved areas
2. Apply a specific strategy for BSN student nurse preparation and RN workforce leadership development in primary care to meet public health needs of populations

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## **Objectives (cont.)**

3. Design a program integrating core primary care concepts through nursing curricula for primary care practice preparation while accommodating for a pandemic.
4. Evaluate widespread use of TRIP model in primary care partnership system for early integration of primary care prepared BSN graduates in organization clinics.

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## Historical Background












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## Literature Review




- 2010 Call for Nursing education/practice change to address changing population health care needs




- Call for preparing RNs for enhanced roles in primary care




AMERICAN ACADEMY OF NURSING



- Focus on public population health, health equity, improved access to comprehensive health care





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# The TRIP Program Purpose

Prepare BSN students to practice at the full scope of their license in community-based integrated primary care settings upon graduation



(References 1, 4, 27-31)



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# Goal 1: Enhance Academic-Practice Partnership



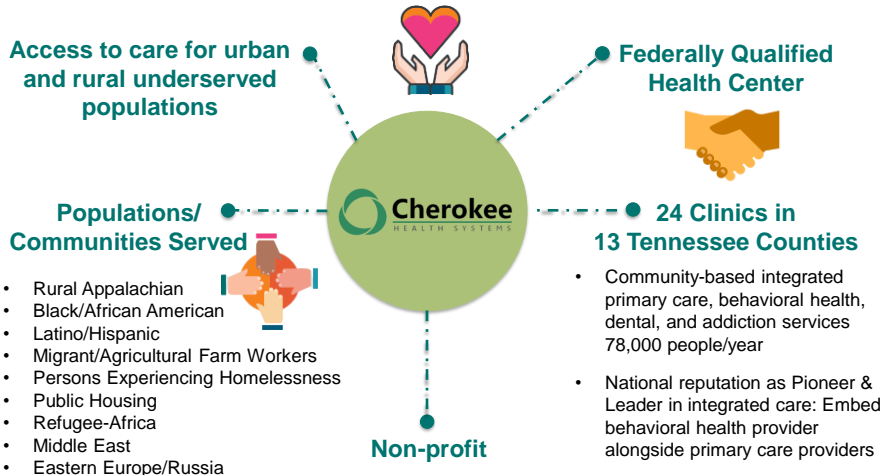
- Visionary leadership
- Win-Win approach
- Mutual respect & Shared values
- Communication & Flexibility

(References 27-31)



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# Partner: Cherokee Health Systems – Integrated Care

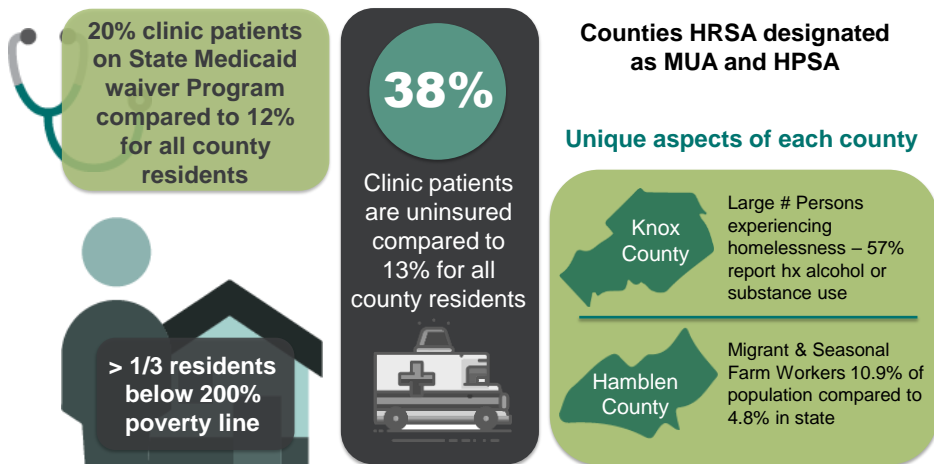


(References 7-11)



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# Population Served



(References 7-11)



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## Goal 2: Curriculum Revision

# 2

TBSN curriculum revision intersected with grant goals:

- **Chronic disease prevention & control**
  - Recovery-based mental health and substance use and pediatric obesity
- **Care coordination**
- **Care for culturally diverse urban/rural underserved populations in East Tennessee**

(References 12-20)



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## Goal 2: Clinical Immersion

# 2



Students work directly, one-on-one, with practicing RNs at Cherokee Health Systems – Our Community Partner



Cherokee Health Systems is a leading national provider of integrated primary care for culturally diverse, rural and underserved populations.



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# Interprofessional Education at Clinic Sites



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# Interprofessional Education



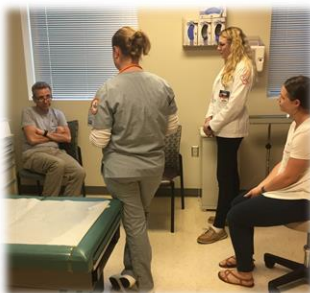
Nursing Students



Nutrition Students



Pharmacy Students



Simulation

Mental Health & Obesity

Pediatric Obesity & Asthma

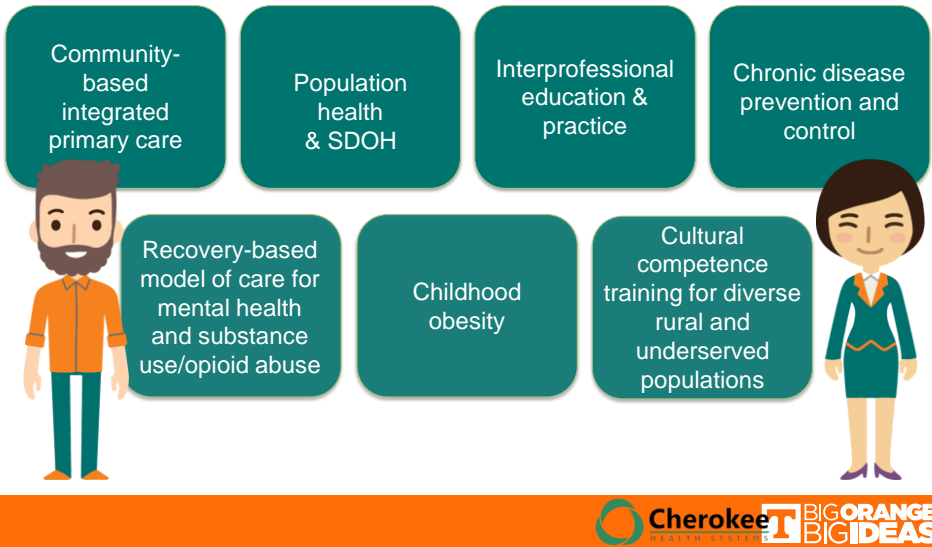
Poverty

Post Conferences



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# Overall BSN Curricular Changes




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# Goal 3: Develop the RN Workforce

# 3



## Professional Development in Primary Care & Leadership Outcomes

- Academic-Practice Collaborative Relationships Integrated Primary Care
-  Knowledge about Primary Care
- Co-Ownership to transform nursing education and healthcare in our community

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## Community Practice Partner (CHS) on Student Integration into Clinical Area



Introduction of the TRIP students to the Clinical Team



Patient Care/Educational Development at the Clinic Level



Full Circle Experience



Cherokee  
HEALTH SYSTEM



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## Community Practice Partner (CHS) TRIP Cohort 1 Graduate

### Student Role in TRIP grant

- Experiences Guiding Path to Primary Care
- Learned Value of RN Role in Primary Care



### Primary Care Practitioner

- Patient Advocate and Care Coordinator
- Educator



### Preceptor Experiences

- Full Circle
- Passing Value of RN in Primary Care
- "Think like a nurse"



Cherokee  
HEALTH SYSTEM



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## Grant Project Management: Implementation, Coordination, and Reporting

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### Grant Implementation

- Year 1, July 2018 – June 2019: Design and implementation
- Year 2, July 2019 – June 2020: Expansion
- Year 3, July 2020 – June 2021: Re-design and re-implementation

2

### Coordination and Communication with 85 active stakeholders

- College of Nursing, Pharmacy, Business, Dept of Nutrition faculty/staff/students
- Cherokee Health Systems partners
- National Nurse Leaders

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### Reporting

- Rapid Cycle Evaluation data from all stakeholders
- Student quarterly/yearly evaluations & TRIP\_L participant surveys
- HRSA yearly reports (NCC Progress and Annual)



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## Grant Project Management: Year 3 Changes Due to COVID-19 Pandemic

Communication greatly intensified during shift from in-person to virtual formats

### Challenges

- Organizational policies
- COVID-19 related change demands

### Successes

- Change from face-to-face to virtual formats
- COVID changes within student role (virtual format, computer usage, clinic demands)



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## Lesson Learned – Students’ Voices



“The power of developing relationships with patients through time and attention in order to best serve their needs.”



“Development of therapeutic communication skills over the course of 2 years through relationships and interactions with participants in psychosocial rehabilitation.”



“Cultural differences amongst various patient populations is always something to be aware of as a nurse in order to best educate and support patients.”



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## Conclusion and Next Steps

### TRIP Academic- Practice Partnership for Nursing Education Change

- Community Practice Partnership presenter outlined benefits to primary care clinics of primary care educated BSN workforce
- Our TRIP BSN, RN grant graduate spoke of preparation for her professional career in primary care
- Succession/sustainability planning

**TRIP’s Next Step:** Online follow-up 9 months post-graduation, to examine whether Primary Care knowledge and skills are maintained



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