Health care reform: engaging stakeholders and creating continuity of care in a multimorbidity nurse-led service

Kate Davis1, Professor Marion Eckert1, Professor Sepehr Shakib1, Dr Gillian Caughey1, Dr Amanda Hutchinson1, Dr Joanne Harmon1, Greg Sharpin1

1 Department of Clinical Pharmacology, Royal Adelaide Hospital
2 School of Pharmacy and Medical Sciences, University of South Australia
3 School of Psychology, Social Work and Social Policy
4 School of Nursing and Midwifery, University of South Australia

Context: health care reform research

To promote continuity of care for people living with multimorbidity and consider efficiencies in health care budgets, more coordinated models of health care delivery are needed. Nurse-led services (NLSs) have emerged as evidence-based structured models of health care delivery. However, research highlights a paucity of evidence regarding the feasibility of NLSs to provide effective continuity of care across the acute and primary health care sectors for people living with multi-morbidity. This NLS will be trialled at the outpatient ambulatory clinics of the Royal Adelaide Hospital.

Research aim

To determine the feasibility of implementing a nurse-led service within a multidisciplinary ambulatory consulting service for people living with multimorbidity and provide continuity of care across the acute and primary health care settings.

Research objectives

The objectives of the proposed research are to identify:

➢ best practices associated with implementation of a NLS model of care (MoC)
➢ barriers and enablers to implementing a NLS
➢ nursing interventions that are effective for people living with multimorbidity
➢ structures, processes and roles required to implement a NLS and achieve continuity of care

Research design

In line with pragmatism, an action research approach, with a mixed methods concurrent strategy will be used. Kemmis and McGarrell’s (2014) action research spiral will inform the action research cycle(s).

Initial action research cycle

The planning phase of the initial action research cycle will be informed by a 2 part data collection process. Methods for data collection include:

1. A systematic review
2. A stakeholder Forum

The diagram (left) depicts the process of action research, with the systematic review and stakeholder forum informing development and planning of the nurse-led care coordination service.

Systematic review

Objectives

This review will address the question:

‘How effective are nurse-led clinics in providing continuity of care for adults with chronic disease?’ The objectives are to identify, critically appraise and synthesise the best available evidence on the specific issues related to nurse-led clinics listed below:

➢ Management, information and relational continuity of care
➢ Stable or improved clinical outcomes
➢ Patient centred care
➢ Cost effective model(s) of care
➢ Healthy workplace or organisational cultures

“Good communication between acute and primary care that includes patient in the Communication” (Forum stakeholder)

Systematic review (cont.)

A three-step search strategy was utilized in this review. Data bases searched included MEDIUM, Embase, Ecare, Scopus, IJ7 and Cochrane.

Figure 1 below: PRISMA flow diagram for retrieved studies, excluded and included studies.

Results

Factors associated with effective nurse-led services included:

Effective transitions

➢ Case management
➢ Care coordination and navigation
➢ Communication
➢ Multi-disciplinary team work
➢ System touch points.


Effective nursing interventions

➢ educating and coaching patients about self-management skills
➢ ensuring understanding of future appointments and post-discharge plan
➢ using standardised documentation tools and comprehensive communication strategies during care transitions
➢ optimizing nurse roles and scopes of practice across the care transitions spectrum
➢ strong leadership, strategic alignment and accountability structures in organizations to enable quality care transitions for the complex older person population.

(Jeffs 2017)

Consistency of experience

Patient satisfaction with nurse-led clinics was consistent over time, with generally high figures, with the exception of continuity of care and information, areas in which improvements are needed.

(Sharpin, et al 2015)

Stakeholder Forum

Planning

Planning of the stakeholder forums was both detailed and strategic. We wanted to recruit a range of stakeholders including health practitioners from the primary and acute care sectors as well as consumer representatives, therefore, the timing was significant. Two week nights, each from 6:00-9:00PM, inclusive of a meal, drinks and networking opportunities was decided on. Planning included preparation of the following:

➢ Stakeholder forum aims - aligned with overall research aims
➢ Stakeholder identification
➢ Forum program development
➢ Facilitator identification
➢ Save the date - advanced notice flyer
➢ Final invitation with briefing paper to set the scene for the evening forums.

“Empowering the patient to have a decision-making pathway for their care”

(Forum stakeholder)

Conclusion

The forum successfully engaged relevant stakeholders involved in the management and care of people living with multimorbidity. The stakeholders worked through facilitated activities providing appropriate information, resulting in significant data that was categorised and synthesised into a framework for the development and implementation of nurse-led services, across the acute and primary health care sectors. The NLS to be trialled from the outpatient ambulatory clinics of the Royal Adelaide Hospital, in August 2018, is now positioned to provide services grounded in an evidence based and informed framework.