

Title:

Improving Care Coordination: Impact of a Doctorate of Nursing Practice Prepared Clinical Nurse Specialist

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Session Title:

The Doctor of Nursing Practice: Reflections on the Past and the Vision for the Future

Slot:

D 02: Friday, 28 July 2017: 10:45 AM-12:00 PM

Scheduled Time:

11:25 AM

Keywords:

Care Coordination, Doctorate of Nursing Practice and Organizational Change

References:

American Association of College of Nursing (2006). The essentials of doctoral education for the advanced practice nurse. Washington DC. Retrieved October 11 from <http://aacn.nche.edu/dnp/essentials.pdf>

Hajewski, C., & Shirey, M.R. (2014). Care coordination. a model for the acute care hospital setting. *Journal of Nursing Administration*, 44(1). 577-585.

Institute of Medicine (2010). The future of nursing: leading change, advancing health. Retrieved June 8, 2015 from <http://iom.edu/Reports/2010/The-Future-of-Nursing-Leading-Change-Advancing-Health.aspx>

Melnyk, B. (2013). Distinguishing the preparation and the roles of doctor of philosophy and doctor of nursing practice graduates: national implications for academic curricula and health care systems. *Journal of Nursing Education*, 52(8), 442-448.

Pruitt, Z., Sportsman, S. (2013). The presence and roles of nurse navigators in acute care hospitals. *The Journal of Nursing Administration*, 43, 592-596.

Abstract Summary:

Utilizing The Essentials of Doctoral Education for Advance Nursing Practice (AACN, 2006), as the guiding framework, a doctorate of nursing practice prepared clinical nurse specialist lead a organizational transform to develop a new practice role to improve clinical outcomes.

Learning Activity:

LEARNING OBJECTIVES	EXPANDED CONTENT OUTLINE
The learner will be able to describe a successful initiative led by a Doctorate of Nursing Practice prepared Clinical Nurse Specialist in the development, implementation and evaluation of a nursing role to improve care coordination.	1. An overview of the pre-transformation state of the organization will be reviewed. 2. The findings of the literature review on care coordination will be shared along with its' application to the organization.

<p>The learner will be able to Illustrate how the core competencies of the Doctorate of Nursing Practice were used to problem solve,create and sustain change in the complex medical-surgical acute care environment.</p>	<p>1. An brief overview of how the core competencies of the Essentials of DNP document were used as the guiding framework for this organizational transformation. 2. A description of the organizational change and outcomes of the new Clinical Coordinator role will be shared.</p>
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Abstract Text:

Transformations in healthcare have challenged organizations to control costs while continuing to provide high quality care. Simultaneously, patients continue to present with higher acuities and increased complexity of healthcare needs. These organizational challenges have provided an opportunity for the doctorate of nursing practice (DNP) prepared advance practice nurse to utilize the core competencies outlined by the American Association of Colleges of Nursing (AACN) to improve quality of patient care (AACN, 2006).

Consistent with the 2010 Institute of Medicine Report, *The Future of Nursing: Leading Change, Advancing Health*, we identified opportunities for improvements in the coordination of care (Institute of Medicine, 2010). Our organization concentrated its' efforts on re-examining our model for delivering patient care. After conducting an extensive literature review, the project goal was established: to create, implement and evaluate an innovative new nursing role, the Clinical Coordinator. This new role focused on patient-centered care and overall facilitation of care coordination. To initiate this major transformation in care delivery, our newly DNP prepared Clinical Nurse Specialist (CNS), was identified as the individual who possessed both the knowledge and skills to lead the interdisciplinary team in this major initiative.

Utilizing The Essentials of Doctoral Education for Advance Nursing Practice (AACN, 2006) as the guiding framework with a focus on organizational and systems leadership, inter-professional collaboration, and advanced nursing practice, the DNP prepared CNS began the project. The overarching project goals and outcomes were selected. A role description for the Clinical Coordinator was developed which included core competencies, ideal attributes, and key responsibilities. Three medical-surgical units were initially selected to pilot the transformation. Specific measurable project outcomes selected included length of stay, hospital readmissions, and select patient satisfaction scores. Staff RN's who were interested in the new role were interviewed and then selected. This was followed by targeted educational and on-boarding programs for the entire staff. The outcomes of the initial pilot were successful demonstrating improvement in patient satisfaction, and decrease in length of stay with adoption of the new role Clinical Coordinator role. Based on these outcomes, the program was extended to five other medical surgical units at our organization.

Our DNP prepared CNS continues to lead this initiative by expanding this program throughout our organization with a focus on refining and individualizing the Clinical Coordinator role based on specific unit needs and metrics. This effort provides an excellent exemplar of the added benefit of a DNP prepared CNS with respect to the management of quality initiatives and the ability to respond to health care policy challenges (Melynk, 2013).