

Health Care Redesign and Title VII D

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Advisory Committee on Interdisciplinary Community-Based Linkages
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Because what
you told me is

The problem

Why
how did
you
know?



Because you don't
know where you
are, you don't
know where
you're going, and
now you're
blaming me

pan



Health Care System Challenges



High costs



Primary care shortage

Fragmentation



Health care disparities



Aging and sicker population



“The Future Ain’t What it Used
to Be”
- Yogi Berra



The Future System:

- Quality care accessible to diverse populations
- Promotes wellness and disease prevention
- Reliably improves health outcomes
- Compassionate care across lifespan

How?

- Primary care and prevention
- Interprofessional collaboration and care coordination
- Payment system that rewards value
- All health professionals practice to the scope of their training/education

Affordable Care

50 Million Medicare beneficiaries -free access to preventive services

40 million people in 2011 - no copayment for recommended preventive screenings

50 million Medicare older adults - eligible for free annual wellness check ups



Source: Commonwealth Fund

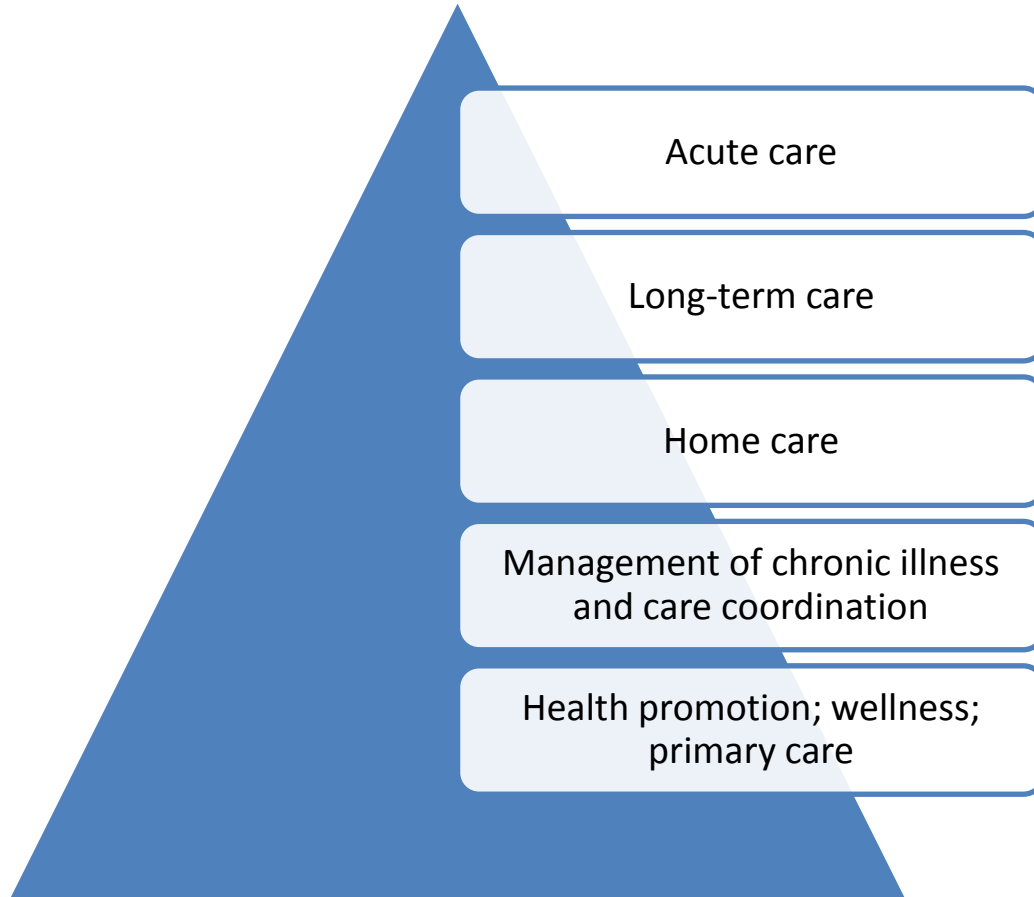
What does the ACA mean for Americans?

- Individual Mandate for Coverage
- Coordinated Care with Bundled Payment
- Innovative Models
- Patient Centered Care

What does the ACA mean for Americans?

- Single Plan of Care – Interdisciplinary
- Promotion of Wellness, Primary Care
- Community Health Centers
- Better Transitions between Home, Hospital, Nursing Home
- ??Population focused care

Flip Pyramid to Transform Health



Data

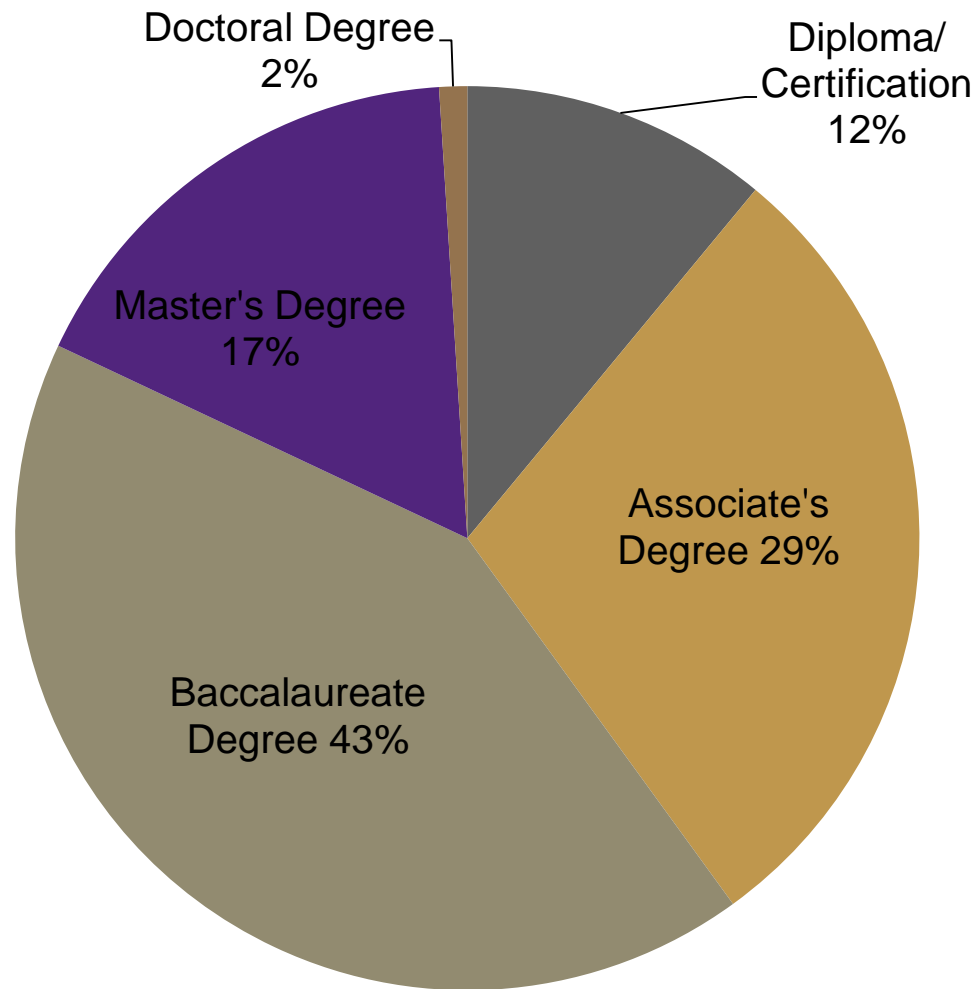
Research on health care workforce is fragmented

Improved health care workforce data collection to better assess and project workforce requirements

Need data on all health professions



NURSES' HIGHEST LEVEL OF EDUCATION

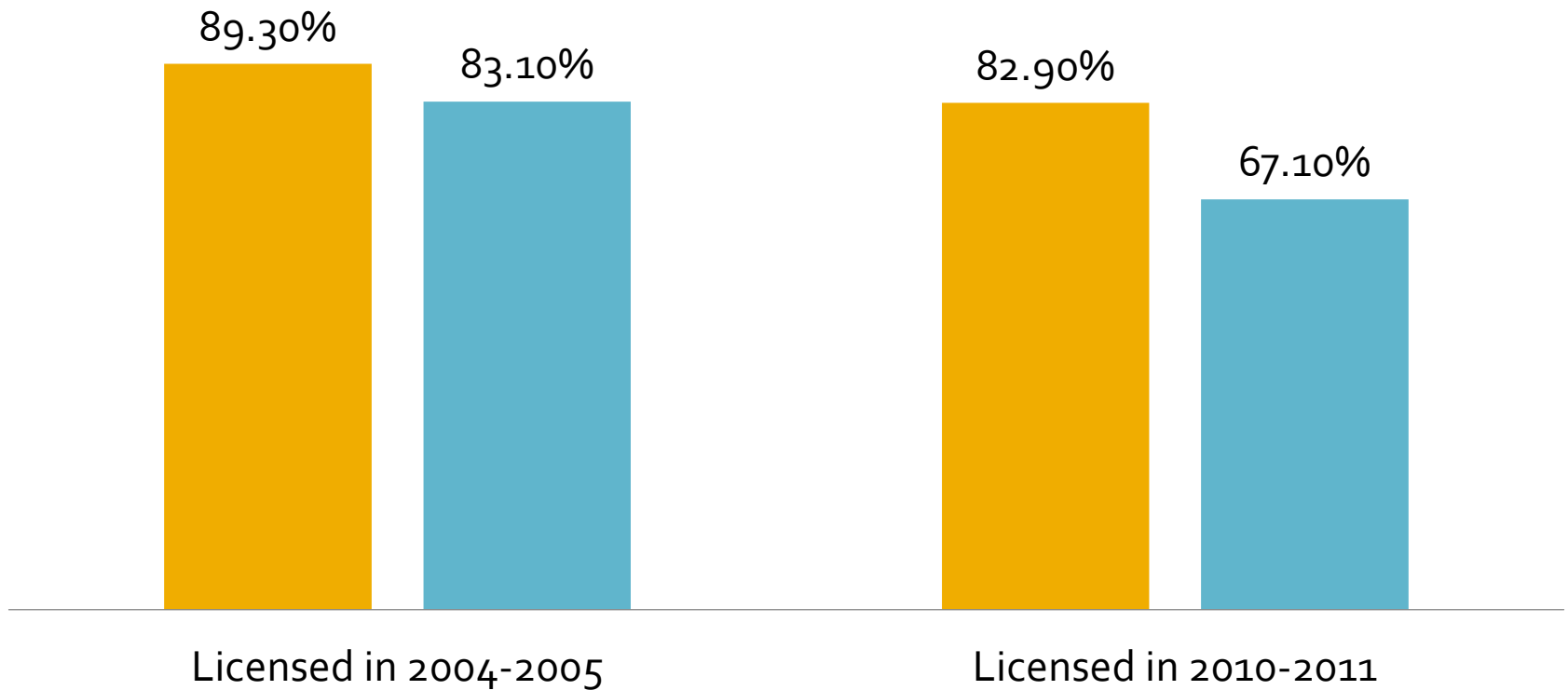


n=41,018

Hospital work by first professional degree

Working in hospital 6-18 months after graduating

■ baccalaureate graduates ■ associate degree graduates

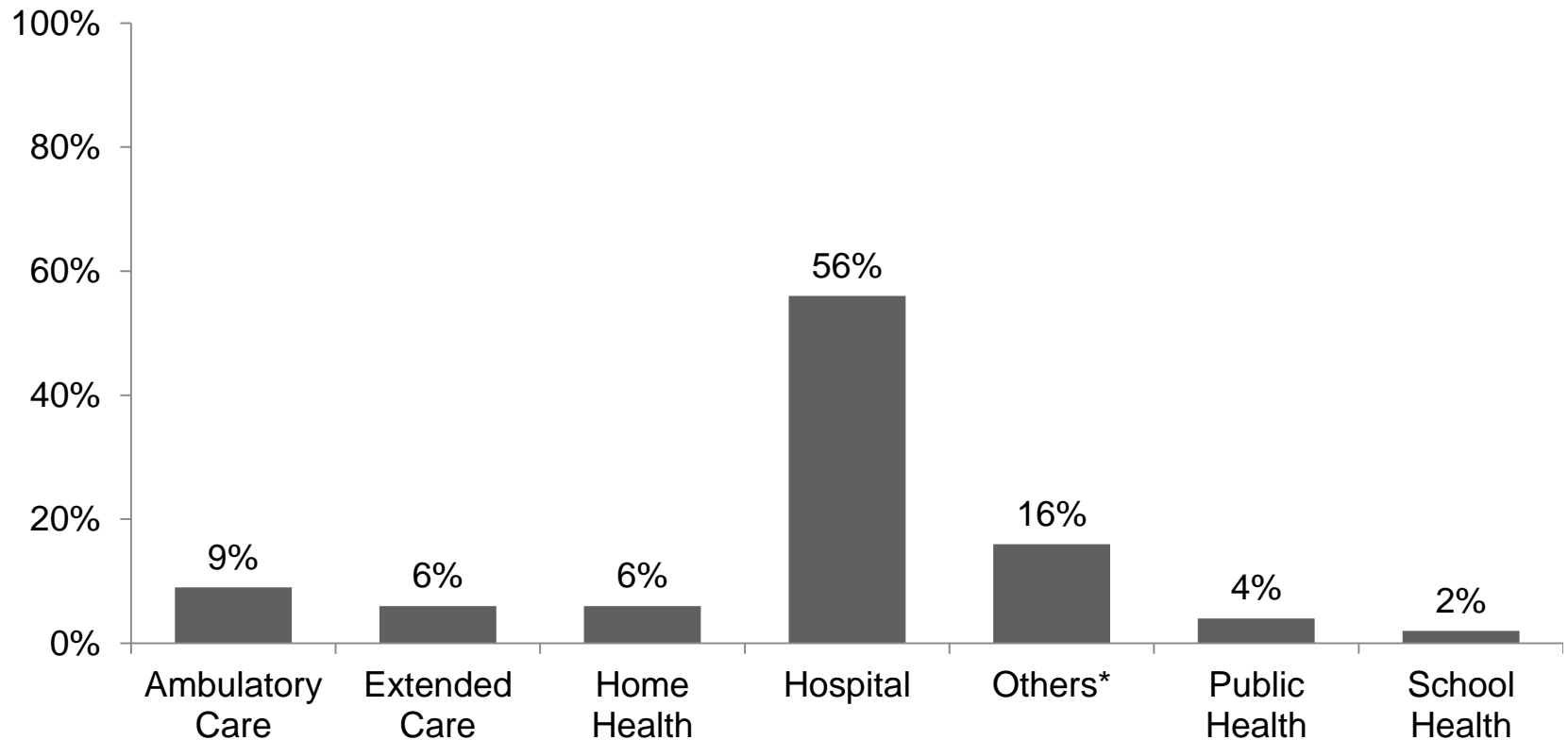


Early Career RNs Settings

- Hospitals -54%
- Ambulatory Care – 15.2%
- Nursing Homes 3.1%
- Public/Community health 2.3%
- Home Health 2.6%



PRIMARY NURSING PRACTICE SETTING



* Others includes working as a nurse in correctional facilities, academic setting, policy/planning/regulatory/licensing agency, occupational and ambulatory settings.

n=34,238



NYU | NURSING



University at Buffalo
The State University of New York

Work-Related Data

2004-2005
Licensees^{14,17}

- 87.2% worked in hospitals (at Wave 1)
- 65.8% worked 12-hour shifts

2007-2008
Licensees^{14,18}

- 84.8% worked in hospitals
- 75.3% worked 12-hour shifts

2010-2011
Licensees³¹

- 76.7% worked in hospitals
- 68.2% worked 12-hour shifts

Better Sources of Data about Health Workers

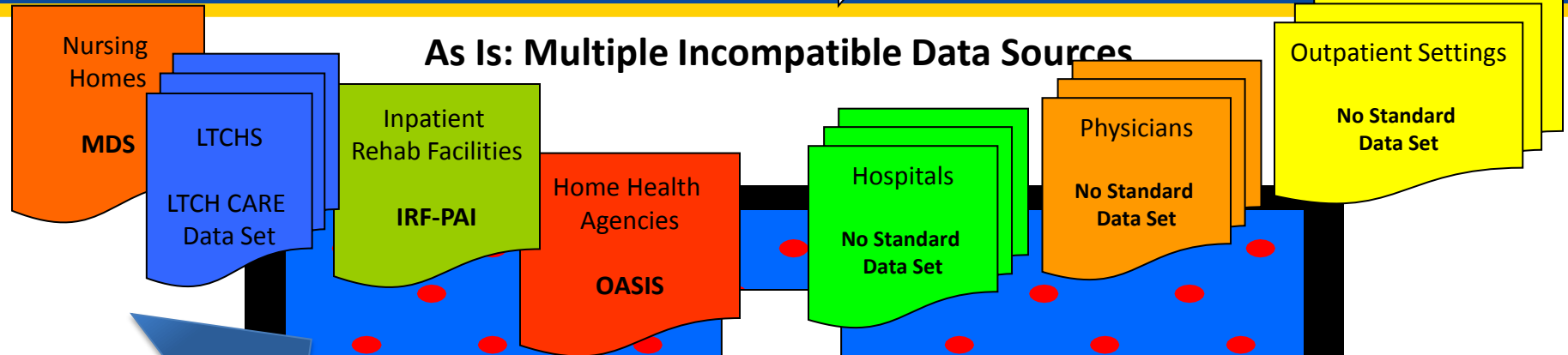
Data Uniformity and Re-use Capabilities

As Is

Transition

To Be

As Is: Multiple Incompatible Data Sources



GOAL:

Uniform Data Elements
Across Providers
Standardized
Nationally Vetted

To Be: Uniform Assessment Data Elements


✓ Enable Use/re-use of Data

- Exchange Patient-Centered Health Info
- Promote High Quality Care
- Support Care Transitions
- Reduce Burden
- Expand QM Automation
- Support Survey & Certification Process
- Generate CMS Payment

As is: some
Uniformity

To be: increased
uniformity:
Critical Outputs

INTEGRATE DATA NOW

The image features a dark blue background with the silhouettes of a woman and a man in a wheelchair. The woman is on the left, walking and touching the man's arm. The man is on the right, sitting in a wheelchair. A yellow-bordered box on the right contains white text.

Sometimes the
care that's
supposed to
help winds up
hurting instead.



Looking for Solutions



Health Professions Education: A Bridge to Quality

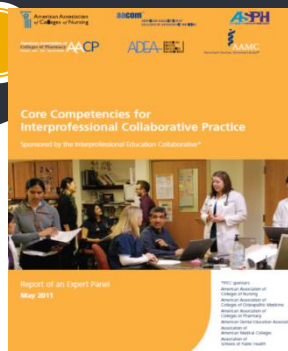
(IOM, 2003)

Educating the Healthcare Team

(IOM, 1972)

Connelly, JP.
(NEJM, 1970)

Bates, B.
(NEJM, 1966)



(IPEC, 2011)

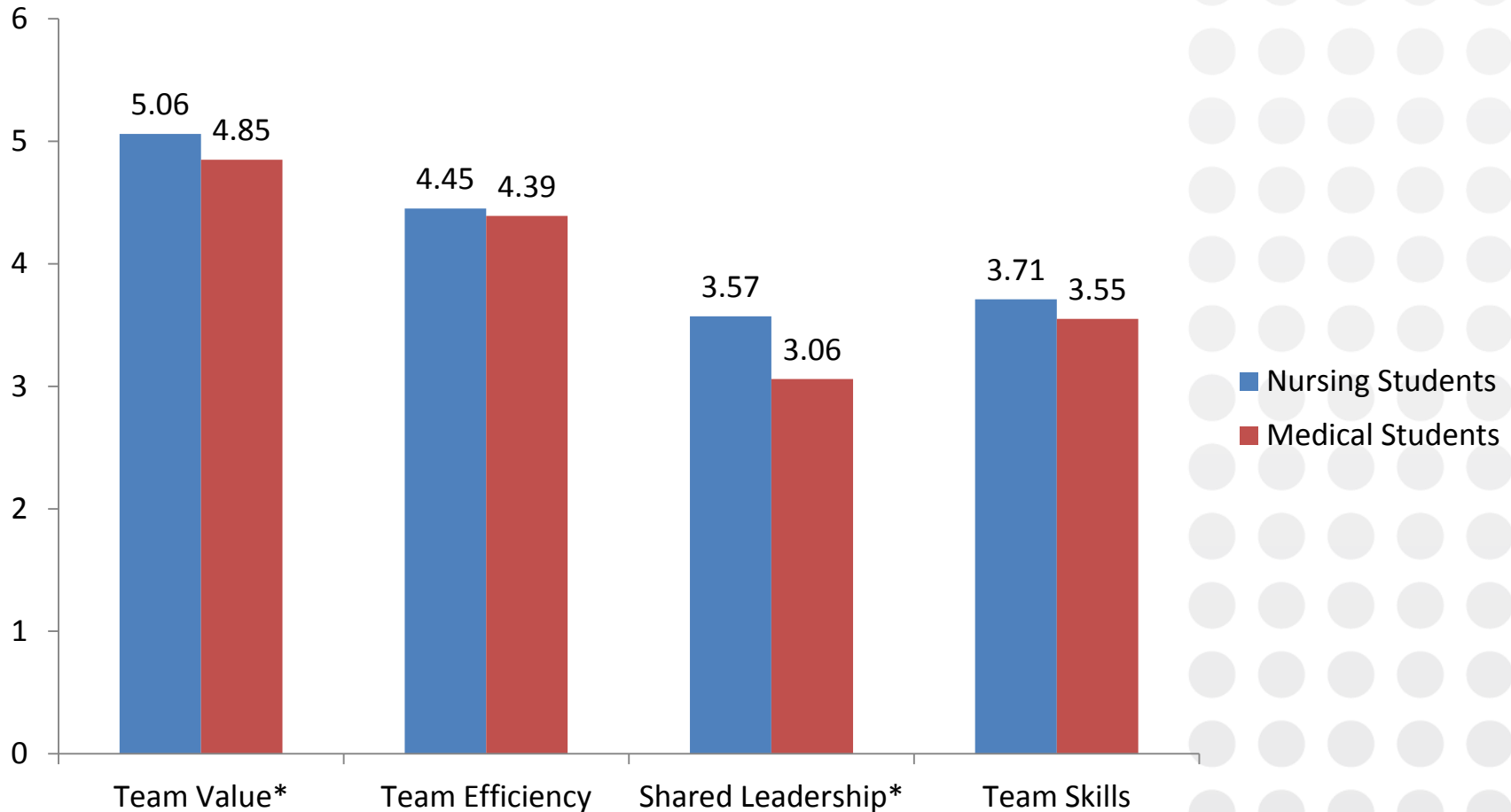


(IOM, 2013)



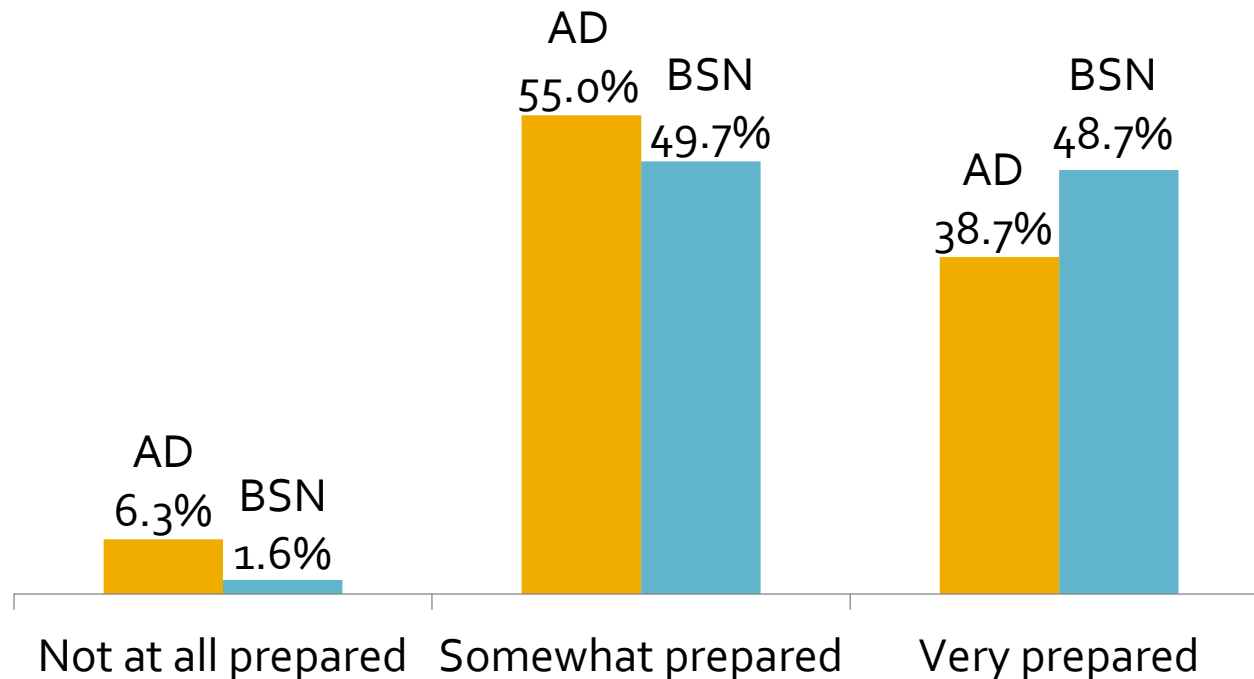
University of Minnesota
(2013)

Nursing (N=142) and Medical (N=140) Students Have Baseline Differences In IP Attitudes and Skills




QI: BS RNs Report Better Preparation for Teamwork

Teamwork and Collaboration²⁴



More baccalaureate prepared RNs than associate prepared RNs reported being "very prepared" compared to "not at all prepared."



What is
IPE at
NYU?

NYU 3T Aim



To provide NYU medical and nursing students with longitudinal exposure to a diverse patient population and inter-professional education in the competencies of team-based care.

NYU₃T Simulation



Roles



Teams



Communication

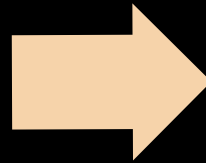


Informatics



Care Planning

Semester 1

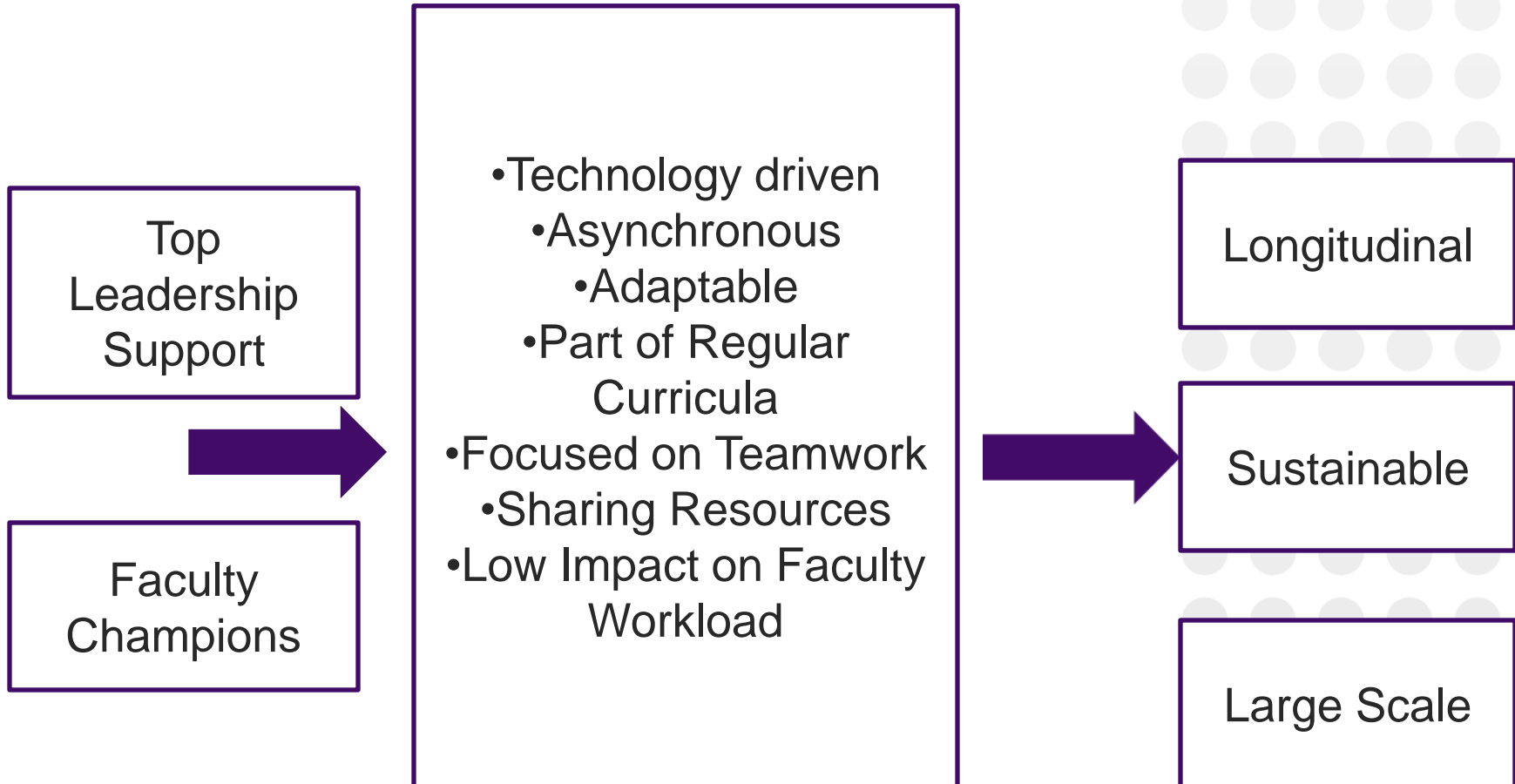


Semester 2

- **Knowledge Acquisition**
- In-person
- Clinical-cross over
- On-line

- **Knowledge Application**
- Virtual patients
- High-fidelity simulation

NYU3T: Our Approach



NYU3T Learning Outcomes

- **In –person seminar**
 - The importance of teamwork & IP collaboration
 - Meet the colleagues; ICE-breaker
- **Cross-over**
 - “Walk in the shoes of the other;” roles & responsibilities (R&R)
- **Web-based modules**
 - R&R, teamwork, communication knowledge acquisition
- **Virtual Patients**
 - R&R, teamwork, communication knowledge application
- **Simulation**
 - R&R, teamwork, communication, teamwork knowledge application

Change in
knowledge,
skills, &
attitudes

IPE: What We Know and Don't Know

- **Content is available**
 - Roles/responsibilities; Teams & teamwork; Effective communication & conflict resolution; IP care planning
- **Some IPE models**
 - Didactic
 - Service learning in community
 - Simulation
 - Blended
- The evidence on how, when, where, how often, for how long is in need of development

BUILD TEAMS



Comparison of Overlapping Activities between MD, RN, NP, PA, and LPN/LVNs

Category of Activities	Examples of Specific Activities That May Overlap	MD	RN	NP	PA	LPN/LVN
Physical exam	<p>Includes:</p> <ul style="list-style-type: none"> Assessing vital signs such as measuring pulse, blood pressure, respiratory rate, temperature, and oxygen saturation Auscultation of lung, heart, and abdominal sounds Assessing cranial nerves Assessing eyes and ears using ophthalmoscope and otoscope Testing vision and hearing Performing breast exam Testing range of motion and muscle strength of upper and lower extremities Assessing pain 	✓	✓	✓	✓	****✓
Health assessment	<p>Includes:</p> <ul style="list-style-type: none"> Obtaining health history Administering screening tests (e.g., domestic violence, depression) Performing in person or telephone triage to determine need for further care Identifying emergent complications, expected, or adverse response to medical treatment (e.g., a RN monitors blood pressure after administration of blood pressure lowering medication or monitors for bleeding after surgery) Identifying epidemiologic trends (e.g., a school RN notes sudden increase in flue cases and notifies health department of the changes in population health trend changes) 	✓	✓	✓	✓	X

X – can not do

✓ - can do in most or all states

Comparison of Overlapping Activities between MD, RN, NP, PA, and LPN/LVNs

Category of Activities	Examples of Specific Activities That May Overlap	MD	RN	NP	PA	LPN/LVN
Making medical diagnosis (identifying a disease from signs and symptoms). Usually involves identifying the cause.	Includes: Communicating what disease the patient has. For example, writing in a medical record that the patient has tuberculosis.	✓	X	✓	✓	X
Making nursing diagnosis (identifying signs and symptoms). Does not usually identify the cause.	Includes: These diagnoses are similar to symptoms (e.g. fatigue, bowel incontinence). The diagnoses often do not include why the patient has the symptom.	✓	✓	✓	✓	X
Prescribing diagnostic tests and pharmacological treatments	Includes: Telling someone to do a diagnostic test (e.g. ordering a chest x-ray) to or for a patient. (e.g. prescribing the drug Lasix (furosemide), or ordering physical therapy.	✓	X	✓	✓	X
Implementing treatments	Includes: Administering medications Collecting blood, urine, stool samples Obtaining sputum and wound cultures Providing mental health and addiction counseling Providing health counseling related to management of chronic diseases Coordinating care Providing wound care Inserting Foley catheter and nasogastric tube Inserting peripheral intravenous catheter Obtaining 12-lead electrocardiogram (ECG)	✓	✓	✓	✓	****✓

X – can not do

✓ - can do in most or all states

Comparison of Overlapping Activities between MD, RN, NP, PA, and LPN/LVNs

Category of Activities	Examples of Specific Activities That May Overlap	MD	RN	NP	PA	LPN/LVN
Perform Surgery**	<p>Includes:</p> <p>Physical intervention on tissues</p> <p>Cutting patient's tissues</p> <p>Closure of a wound</p> <p>Uses a sterile or antiseptic environment, often uses anesthesia, typical surgical instruments, and suturing or stapling.</p> <p>Noninvasive surgery usually refers to an excision that does not penetrate the structure being excised or to a radiosurgical procedure (e.g. cornea laser ablation)</p>	✓	X	X	✓	X
First Assist in Surgery ***	<p>Includes:</p> <p>Assisting a surgeon in conducting surgery including exposing tissue, using instruments, cutting tissue,</p>	✓	✓	✓	✓	X

X – can not do

✓ - can do in most or all states

Examples of Specific Activities that Overlap in RN and Physician Scope of Practice¹

Category of Activities	Specific Activities That Overlap
Physical exam	<ul style="list-style-type: none"> • Assessing vital signs such as measuring pulse, blood pressure, respiratory rate, temperature, and oxygen saturation • Auscultating lung, heart, and abdominal sounds • Assessing cranial nerves and eyes and ears using ophthalmoscope and otoscope • Testing vision and hearing • Performing breast exam • Testing range of motion and muscle strength of upper and lower extremities • Assessing pain
Health assessment	<ul style="list-style-type: none"> • Obtaining health history • Administering screening tests (e.g., domestic violence, depression) • Performing in person or telephone triage to determine need for further care • Identifying emergent complications, expected, or adverse response to medical treatment (e.g., an RN monitors blood pressure after administration of blood pressure lowering medication or monitors for bleeding after surgery) • Identifying epidemiologic trends (e.g., a school RN notes sudden increase in flu cases and notifies health department of the changes in population health trend changes)
Medical diagnosis	<ul style="list-style-type: none"> • No overlap
Prescribing diagnostic tests and pharmacological treatments	<ul style="list-style-type: none"> • No overlap
Implementing treatments	<ul style="list-style-type: none"> • Administering medications • Collecting blood, urine, stool samples and obtaining sputum and wound cultures • Providing mental health, addiction counseling, and counseling related to management of chronic diseases • Coordinating care • Inserting Foley catheter and nasogastric tube, peripheral intravenous catheter • Obtaining 12-lead electrocardiogram

1. Table 1: Djukic, M., Kovner C.T. (2010). Overlap of Registered Nurse and Physician Practice: Implications for U.S. Health Care Reform. *Policy, Politics, and Nursing Practice*, 11(1) 13-22

OVERLAPPING ROLES

ROLE OF RN IN AMBULATORY CARE