Disclosures
- There is no conflict of interest or relevant financial interest by the faculty or planners of this activity.
- AACN does not endorse any commercial product related to this activity.
- The entire webinar and the program evaluation must be completed to earn contact hours.
- This webinar will be recorded and available until July 16, 2016.

Objectives
- Identify key aspects of the Michigan Model of Partnership.
- Discuss the methods used at UMHS-UMSN to support sustainability.

Building the Clinical Bridge for Practice, Education and Research

Margaret Calarco, PhD
Chief Nurse Executive

Kathleen Potempa, PhD
Dean & Professor

UMSN – UMHS Partnership
- Purpose: Advance and unite clinical education, practice, and research/scholarship
- Key components:
  - Integration of faculty/students/leadership/staff
  - Team development
  - Faculty driven clinical research/scholarship
  - Micro system development for better care outcomes—evidence based practice, quality improvement methods
UMSN – UMHS Partnership

Clusters: Student ‘Clinical Home’

- MedSurg
- Neonatal ICU
- PACU
- Outpatient
- 12 peds/adult
- 12 peds/adult acute, critical care, OB & psych
- Green Cluster
- Pediatrics
- Transitions Course
- Obstetrics Course
- School of Nursing

7/16/2013

UMSN – UMHS Partnership

Example: Clinical Education Team

- Clinical Faculty
- UMHS Leadership

CM = Clinical Mentor = Staff Nurse

UMSN – UMHS Partnership

- 100% UG students at UMHS — 640 [2012-2013]
- Mandatory model training for all clinical faculty and staff
- UMHS Advanced Practice Nurses and Masters prepared Nurse Managers are voluntary adjunct faculty [CAFN]
- Increased clinical training hours
- Clinical faculty aligned with clinical care, scholarship, as well as teaching

UG UMSN Freshman Profile - 2013

- 165 students
- Female/Male 93/7
- Minority 16%
- In-State 71%
- Out-of-State 29%
- Average GPA 3.8
- Average ACT 28
- Average ACT Science 28
Hillman Scholars

- $3M grant from Hillman Foundation [only 3 schools – PENN, UM, UNC – Chapel Hill]
- Student support for BS – PhD
- Students admitted in junior year or second career
- Matriculate to PhD at graduation
- Two cohorts currently in program

UMSN – UMHS Partnership

Quality and Process Improvement

- All senior students participate in MQS LEAN project of unit identified focus
- Began with 6 student teams in winter 2009
- Fall/Winter 2012 - 2013 have 15 teams/projects per term for a total of 108 teams/projects to date

Quality Improvement Projects

- Purpose: provide students with a hands-on quality improvement project experience that has direct impact on patient care outcomes.
- Partnership with UMHS aimed at improving processes and outcomes
- Process:
  (1) background overview to determine the problem and past strategies for improvement;
  (2) data collection and synthesis to determine current state;
  (3) development of recommendations and evaluation strategies for improved unit performance (based on evidence)
  (4) next step….implementation plan

Sample A3 Plan
Topics of QI Projects

RCA Topics

*Additional topics include such topics as patient education, mobility, vaccination protocol, patient education.

UMHS Implementation of QI Plans 2010

Unit Intention to Implement

Evaluation of Fall 2012 QI Projects

- Surveyed Unit Leads (n=13)
- 77% agreed or strongly agreed that the work was valuable to the unit.
- 69% have either already implemented the team recommendations or plan to in the near future
- 77% agreed to have another RCA team (with the remaining units stating maybe)

UMSN – UMHS Partnership

Faculty/Unit Collaboration

- 36 clinical track faculty (CTF) aligned with UMHS clinical units (in patient and out patient)
- All CTF responsible for developing research/application, clinical education, and practice development in their areas
- Several clinical projects with unit leadership, staff and students completed or underway
- Faculty/Leadership and staff publications increasing
- Faculty offer additional support for joint research which will support the Magnet designation process
Students:
- “Felt more welcome”
- Described more satisfying experiences
- Were able to work with consistent mentors
- More focused goals
- Functioned more independently
- Increased satisfaction
- Increased collaboration with other faculty and staff
- Increased scholarship

Clinical Mentors (n=103):
- 75% found it “rewarding”
- 83% stated it encouraged reflective practice and the desire to strive for improvement
- 70% stated it prompted thinking regarding the role as a professional nurse
- 81% stated they worked with students on improving the quality of care
- 55% stated they used evidence-based practice

Satisfaction Surveys
- Results of based practice

Clinical Exemplar Units
- Purpose: To fully actualize the CEI on 3 units through a microsystem level intervention, which will focus on deeply embedding clinical faculty on their respective unit.
  - Units: 5A (orthopaedic/trauma unit), 5B (general medicine unit), 4B (otolaryngology/trauma surgical unit)
- Goals:
  - Create an environment for a robust, mutually beneficial partnership aimed at improvement in patient care quality
  - Provide a structure for improved communication and integration of clinical teaching within the unit
  - Ensure alignment with unit-specific goals and effective use of resources to reach goals
  - Enhance student/staff development through robust processes for active learning.

Sustaining Relationships: Integrated Leadership Structures
- UMSN – Administrative Group
- UMSN – Clinical Adjunct Faculty Network (CAFN)
- UMHS Nursing Shared Governance
  - Nursing Practice Gateway
  - Research & Translation
  - Professional Development
  - Quality Excellence
  - Nursing Health & Safety
  - Nursing Leadership Forum
  - Unit-Based Committees

Sustaining Relationships: Work Teams and Major Activities
- Program Evaluation Group
  - Dean Potempa
  - Marge Cahorro
  - Bonnie Hagerty
  - Sharon Smith
  - Martha Tiber
  - Leah Shever
  - Esther Bay
  - Elizabeth Brough
  - Dana Tschannen
  - Mama Filaherty-Robb
- Leadership Implementation Team (LIT)
  - Sharon Smith
  - Bonnie Hagerty
  - Esther Bay
  - Elizabeth Brough
  - Dana Tschannen
  - UMHS and UMSN Clinical Placements
  - UMSN Office of Student, Academic, Multicultural Services (OSAMS)

Exemplar Unit Interventions
- Team for Implementation of Excellence (TIE)
  - Sharon Smith
  - Bonnie Hagerty
  - UHSHS and UMSN Clinical Placements
  - SN Specialty Leads
  - SN Information Technology
  - SN Office of Student, Academic, Multicultural Services (OSAMS)
- Faculty and UMHS Staff and Students
  - Projects
  - Papers and Presentations
  - Grants
Exemplar Unit Structure/Process Components
- Mutually identified goals with action plan for improvement:
  - (1) Quality of care (e.g. falls, pressure ulcers)
  - (2) Model of Care (e.g. huddles, bedside reporting, communication hand offs, patient daily goals)
- Bi-weekly rounds by CEI Leadership Team
  - To address opportunities for improving QI goal and actualizing Model of Care
  - To understanding the dynamics of the CEI
  - Progress toward student and mentor understanding of QI area
- Focused student learning based on unit/system priorities
- Accountability for each member of the team
- Additional process components will be identified, based on the unit needs and areas of focus.

Exemplar Unit Outcomes
- Unit identified goals (QI and Model of Care) will be determined by unit QI data and alignment with system priorities
- Process and outcome variables will be collected to determine effectiveness of exemplar initiative
- Specific measures will be determined by the quality and Model of Care goal chosen by each unit
- Roll out of structure/process components to occur during the 2013-2014 academic year

Clinical Partnerships to Advance Science and Practice
- Faculty, students and staff working together to understand pressing clinical issues and their solution
- Clinical data de-identified and coded for outcomes and effectiveness research
- Opportunity for large clinical data sets, rapid data acquisition and analysis
- Escalation of chronic illness, provider shortages, and cost containment mandates new ‘system solutions’ to care with higher quality and lower cost

Clinical Partnerships to Advance Science and Practice
- Development of strong ‘analytic core’ to support implementation and effectiveness science [in addition to traditional scientific methods]
- Unified research support function (GRO)
- Joint efforts for nursing informatics for clinical data and research
- Unified tracking of research productivity and advancements in science/evidence
- Students/staff learn from emerging science and clinical applications of science with less reliance on text books
Joint Publications/Presentations
[Examples]


What Are the Ingredients for Successful Partnership?

- Common vision
- Equality in the priorities
- Mutual financial and human resource investment
- Mutual trust and team behavior
- “Acting as One” regardless of governance structure

Joint Publications/Presentations
[Examples]

- Advances in Rehabilitation Nursing 2012 – “Use of Simulation in Stroke Unit Education” – Michelle Aebersold, MaryJo Kocan, Dana Tschannen


- Bruce, T. A., Shever, L. L., Tschannen, D. & Gombert, J. Reliability of pressure ulcer staging: a review of literature and 1 institution’s strategy.