Objectives:
1. Relate the AAACN standards regarding professional development and research to the role of the ambulatory nurse
2. Describe the role of the nurse in personal and staff development
3. Identify opportunities to utilize research and evidence based results in enhancing nursing practice
4. Discuss the relationship between education, research and performance improvement in the ambulatory environment

AAACN Standard VIII
Nursing Knowledge Development
Professional ambulatory care nurses value inquiry and actively expand their nursing knowledge by:
- Participating in educational activities
- Incorporating evidence-based practices
- Promoting quality of care and performance improvement activities
- Evaluating, utilizing, and disseminating research findings
Roles of the Ambulatory Care Nurse

3 Major Roles of the Ambulatory Care Nurse

According to the Ambulatory Care Nursing Conceptual Framework:
- Clinical Nursing Role
- Organizational/Systems Nursing Role
- Professional Nursing Role

includes:
- personal professional development
- staff development
- quality improvement
- evidence-based practice
Professional Development

Participation in educational activities is a professional responsibility according to:
- American Academy of Ambulatory Care Nursing (AAACN) standards
- American Nurses Association (ANA) standards
- California State Nurse Practice Act
- Kaiser Permanente RN job description

American Academy of Ambulatory Care Nursing Standards

Identifies 5 aspects of nursing knowledge development for ambulatory care nurses

Professional ambulatory care nurses:

1. Participate in continuous, diverse educational activities to expand nursing knowledge
2. Implement valid, cost-effective evidence for clinical practice & organizational decision making
3. Integrate the findings of quality of care & performance improvement initiatives into practice
4. Support and/or participate in pertinent research studies
5. Evaluate and share research findings in appropriate forums

AAACN, 2007
American Nurses Association

Nursing professional development is the lifelong process of active participation by nurses in learning activities that assist in developing and maintaining their continuing competence.

California Nurse Practice Act

“Each person renewing a license...shall submit proof satisfactory...that he/she has been informed of the developments in the registered nurse field or in any special area of practice occurring since the last renewal.....”

Kaiser-Permanente RN Job Description

Clinical Outcomes

“Demonstrates competencies during the probationary period and ongoing completion by departmental competency validation”

Team Commitment

“...actively participates in departmental professional development.” 2/6/07
Professional ambulatory care nurses:

1. Participate in continuous, diverse educational activities to expand nursing knowledge

Components of Professional Development

- Staff Education
  - Orientation/Onboarding
  - Competency Evaluation
  - Inservice Education
  - Continuing Education
- Mentoring and Precepting
- Certification
- Further Formal Education
  - BSN
  - MSN or other Master’s degree
  - PhD, DNP, DNSc

Orientation/Onboarding

- Structured plan or program to enhance assimilation into a new position
- Organizational culture
- Job duties/responsibilities
  - department and position specific competencies and new skills
- Regulatory requirements
- Feedback/evaluation
Competence

The ability to demonstrate the technical, clinical and interpersonal skills necessary to perform one’s job requirements
- can be assessed in variety of ways
- provides focus for performance improvement related to skills required
- can be used to validate evidence-based practice changes

Inservice Education

Education or information based upon a change in practice
Examples:
- Demonstration of new equipment
- Changes in documentation system
- Department or clinic specific guideline changes – wound care, etc.
- Disease updates

Continuing Education

Used to maintain competence, update knowledge, skills
Required for license renewal
Based on regulatory, facility or personal objectives
Ambulatory care examples:
- Patient education updates
- Trends in disease management, care, therapeutic regimens
- Pharmacology updates
- New technology
- Clinical practice guidelines
Mentoring/Precepting

Are they the same?

Preceptor vs. Mentor

- Orients new nurses
- Usually assigned
- Strong clinical skills
- Short term relationship
- Focus is learning new skills/setting
- Occurs throughout career
- Freely chosen
- Coaching, confidence
- Long term relationship
- Focus is career development

Certification

Mechanism to validate and recognize knowledge, skills & abilities in an area of specialty practice

Benefits:
- Professional & personal recognition
- Career progression & opportunities
- Increased quality of care
- Less patient care errors
Professional Memberships
Connect with others in similar practice areas
Education
Networking
Advocate for change
Identify and develop standards of practice
Increased professionalism

Further Formal Education
College level courses for specialty training
B.S.N.
M.S.N.
Postgraduate studies
PhD, DNP, DNSc

AAACN Role of the Ambulatory Care Nurse in Knowledge Development
Professional ambulatory care nurses:
2. Implement valid, cost-effective evidence for clinical practice and organizational decision making
Evidence-based Practice

**Defined:**
Conscientious and judicious use of current best evidence to guide health care decisions

Goals of Evidence-based Practice

1. Enhance best practices
2. Reduce variations in practice
3. Integrate clinical expertise with best available evidence from research
4. Improve quality
5. Reduce cost
6. Demonstrate the value of nursing

Strategies to Facilitate Evidence-based Practice

Create environment which encourages questions re: current practice and new solutions
Support research activities through journal clubs, research committees, presentations
Develop research skills of nurses
Encourage utilization of research findings in practice
Steps of Evidence-Based Nursing Practice
1. Formulate the clinical question
2. Collect the most relevant & best evidence – search the literature
3. Appraise the evidence
4. Integrate the evidence with one’s clinical expertise, patient preferences & values – implement appropriate best practices
5. Evaluate the practice decision or change

Sources of Evidence
Written sources
Web-based sources
Literature reviews
Research findings
Practice guidelines
Professional standards
Performance improvement studies/outcomes
Professional organizations

Evidence Based Practice in Action
Integrative review of literature undertaken at Kaiser Permanente
- purpose is to assemble knowledge and provide background information on a topic of interest
- helps to determine gaps or inconsistencies in body of research
- helps to lay the foundation for a research study
Aspiration Technique for SC/IM Injections – An Integrative Review

Aspiration prior to injection is a tradition – 40 year history in nursing
- added or eliminated based on anecdote, assumption, arbitrary choice
Previous integrative reviews indicate no scientific evidence for the practice
Literature reviewed 2000-2008 – focus on vaccines and immunizations in ambulatory care settings
Used clinical expertise of immunization nurse specialist

Injection practices vary across organizations and settings
Currently no studies exist to confirm or reject aspiration techniques
No data documenting need for aspiration; lack of data may be evidence of its effectiveness
Eliminating aspiration may reduce duration of injection time and decrease injection pain of immunizations

Information shared with Practice Leaders but not yet implemented in practice
Standards being created based on findings
To be presented at Sigma Theta Tau International conference later this year

Cecelia L. Crawford
September, 2008
Controversy regarding VS is long standing
- includes frequency, methods, technique, technology, personnel
Literature review revealed 2 systematic reviews that explored this topic
- included 453 articles over 23 years of research

Summary of Findings:
1. VS as foundation of pt assessment & treatment
2. VS as dynamic indicators of pt status
3. Accuracy of measurements dependent upon equipment, protocols, technique, technology, and HCW training

Next steps:
Continuing search of databases for evidence to validate these findings
Final Summary to be forthcoming
3. Integrate the findings of quality of care and performance improvement initiatives into practice

Performance Improvement

The systematic analysis of the structure, processes and outcomes within systems for the purpose of improving the delivery of care

The Joint Commission (2008)

History of Performance Improvement

- problem-focused - inspection & audit
- focus on individuals
- reactive process
- driven by external regulatory requirements
- delegated to a few
History of Performance Improvement

Continuous Quality Improvement (late 1980s)
- use data not anecdotal evidence
- tracking, trending, statistical analysis
- focus on processes and outcomes
- driven by internal values
- embraced by all

Total Quality Management (early 1990s)
- reduce variation
- zero defects
- adapted from industry

Performance Improvement (mid 1990s-present)
Look at:
structure (rules, governance)
- examples: mission, policies, guidelines
process (patient care, nursing care)
- examples: procedures, pt education, competency
outcome (goals, results, objectives)
- examples: pt satisfaction, access, operational efficiency
by measuring performance indicators

Performance Indicators in Ambulatory Care

Clinical Indicators:
- immunization rates, mammography, PAP tests, sedation outcomes

Administrative Indicators:
- revenue, expenses, cost analyses, access, productivity

Operational Indicators:
- visit volumes, wait times, no-shows, pt satisfaction, staff satisfaction
Performance Improvement Process

- Identify Problem or Issue
- Define Current Process
- Select Measurable Indicators
- Evaluate and Reevaluate

Performance Improvement Cycle

Plan → Do → Act → Study

... a process of continuous assessment, evaluation and action
Performance Improvement Tools

Mechanisms to Improve Quality
- Benchmarking
- Flowcharts
- Root Cause Analysis
- Evidence-based Practice

Benchmarking
Definition:
- A continuous and collaborative discipline that involves measuring and comparing the results of key processes with the best performers
- Benchmark information is used to improve practice
- Benchmarking allows the consumer to make informed choices

Flowcharts
Definition:
- A diagram to depict the process (actual or ideal) from start to finish.
Purpose:
- Provide specific steps to identify opportunities for improvement and develop solutions to improve the process
Root Cause Analysis

**Definition:** A method to determine the fundamental reason that causes variation in performance.

**Types:**
- Reactive - analyzing the reason for problems that have occurred
- Proactive - analyzing opportunities for improvement before problems occur

**Key Characteristics:**
- Focus on systems rather than individuals
- Continue to question how or why something occurred until no further answers are possible – identifies the “root cause”

Evidence-based Practice

- Increased availability and accessibility of research reports
- Refined criteria for appraising research findings
- Increased potential for better outcomes
- Decreased risk when use approach with research support

What is Quality?

Depends on who responds to the question
Based upon individual values, beliefs, expectations
Can vary over time
A degree or grade of excellence or worth
Quality Initiatives

Inquiries which use data collection and evaluation similar to research but without scientific rigor
Required by law to follow ethical practices, confidentiality as with research
Findings impact patient care, outcomes, staff actions, organizational systems and practices

Quality Reports

Report Cards
- publicly reported information to help consumers make choices about health care providers
e.g.: Joint Commission Quality Check, HealthGrades, CMS Hospital Compare, HEDIS®

Scorecards/Dashboards
- Organization specific
- Reflect key performance measures of interest
- Demonstrate relationship among performance measures
- Indicates relationship between organizational goals, employee values, and patient values

Quality Initiatives at KP

Examples:
Quality Initiatives

Handwashing

Hand Hygiene and Performance Improvement

GOAL: improve compliance with hand hygiene
Plan - determine current state of hand hygiene compliance
Do - educate/remind staff re: hand hygiene principles/practices
Study - create/implement use of observation tool
Act - assess compliance and determine further action required (if any)

Hand Hygiene Observations

Tool created to capture compliance
Looks at all levels of staff
Assesses opportunities before and after patient contact
Attempts to identify adequacy of hand hygiene
- did it occur?
- >15 seconds with soap & water?
- hand gel rubbed until dry?
Why do we care about hand hygiene?

- Infection control issue
  - many more resistant organisms exist
- Patient and employee safety
  - protection of pts, employees, all contacts
- Standard of practice
  - initially addressed by Florence Nightingale
- Regulatory requirements
  - TJC, CMS survey these practices
  - NOT the primary reason!!

Role of the Ambulatory Care Nurse in Performance Improvement

- Ask questions from issues identified in daily practice
- Initiate/participate in inquiry and investigation
- Champion/promote changes
- Share the information – locally, regionally, nationally, globally
- Continue to ask questions…………..

AAACN Role of the Ambulatory Care Nurse in Knowledge Development

4. Support and/or participate in pertinent research studies
Nursing Research

Definition:
Systematic inquiry designed to develop knowledge about issues of importance to nurses including nursing practice, education and administration to expand the body of knowledge for continued improvement of patient care.

Research at KP – Southern CA

Examples of Previous Research Projects
15 listed on website
2004
Nurse Unit Characteristics and Quality of Care
Predictors of Outcomes of Nursing Advice in Centralized and Decentralized Call Centers
CalNOC Nurse Staffing Study
2000
Use of Complementary and Alternative Medicines by Surgical Patients
1999
Quality of Life in HIV Patients

Current Research in Ambulatory Care at KP

Completed Project:
Readiness to Change HgbA1c
Rosette Martinez, Baldwin Park

Systematic & Integrative Review in progress
Evidence on Improved Access and Nurse Clinics
Validity & predictability of pre-hire medication testing for licensed staff
Pressure ulcer prevention in the emergency room
Current Research in Ambulatory Care at KP

Research in Progress:
- Substance Abuse Treatment Process & Outcomes in Day/Outpatient Setting (Bellflower)
- The Need and Use of a Perinatal Bereavement Program (Baldwin Park)
- Nurse Physician Teamwork in the Emergency Department (Fontana)
- Outpatient CHF Education (Panorama City)

Goals of the KP Research Program

Enhances quality by fostering research and evidence-based nursing practice
1. Provide systematic study and evaluation of nsg practice and pt care
2. Develop evidence-based practice
3. Implement nursing research projects and disseminate findings back into practice
4. Support nursing research partnerships with academic, public & industrial partners for the benefit of the health care community

Nursing Pathways Website

Links to:
- Message from VP, Pt Care Services
  encourages best practices and quality improvement initiatives
- Nursing Research/EB Practice
  describes program, focus, funding, studies, presentations, annual EB conference
- Quality, Safety, Service
- Learning & Development
ambulatorypractice.org Web Site

Links to:
• Ambulatory research initiatives
• Research Resource Warehouse
• Quality, Safety and Service
• Clinical practice
• Education
• Tools and Resources

Research Resources

Nursing Research Regional Program - Ambulatory
Joyce Johnson, PhD, RN-BC
Regional Director, Education & Research
June Rondinelli, MSN, CNS
Project Manager III, Regional Nursing Research Program

Regional Nursing Research Committee
Local Facility Research Committee

AAACN
Role of the Ambulatory Care Nurse in Knowledge Development

5. Evaluate and share research findings in appropriate forums
Information Sharing

National Conferences
  AAACN
  Sigma Theta Tau
  Magnet Conference
Regional Conferences
Local Conferences
Nursing Staff Conferences
Publications

Magnet® Designation

Nursing research as key component of Magnet standards
Demonstration of excellence in nursing practice
Focus on evidence-based practice and the role of staff nurses in driving clinical practice and decision-making

Nursing Leadership and Knowledge Development

Role of nursing leaders includes:
- creation of learning environment
- setting expectations for advancement of nursing knowledge and practice
- fostering culture of inquiry
- promoting performance improvement
- requiring evidence-base for nursing practice to enhance care delivery and patient outcomes
Putting it all together……..

Nursing knowledge development is an expectation of ALL nurses
Multiple opportunities and avenues exist to accomplish this
* education
* quality improvement
* research and evidence based practice
Most importantly………………
   It starts with

You

and

Me

Nursing Knowledge Development

Success is a journey not a Destination…..

And the journey of a thousand miles starts with a single step!
Best Wishes on your journey……..

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