

on fast track for older

John A. Hartford Foundation Center of Geriatric Nursing Excellence joins with community partners to improve care for older adults

With support from the John A. Hartford Foundation, Inc., the School of Nursing is leveraging its considerable gerontological expertise by joining with community partners to provide improved care for older adults. Created a year and a half ago, the John A. Hartford Center of Geriatric Nursing Excellence, one of five such centers nationally, is “doing even better than hoped for,” says its director, Patricia Archbold, RN, DNSc, FAAN, Elnora Thomson Distinguished Professor.

Its current research goal is to collaborate with major health care organizations to integrate research with practice. With its four community partners, the School is working on “best practices” — research findings that clinical care providers can embrace and adapt to everyday practice. Its clinical partners include Holgate Center, Kaiser Permanente Northwest Region, State of Oregon Seniors & People with Disabilities, and the Portland Veterans Affairs Medical Center. “These are wonderful agencies to work with,” Archbold says. “They’ve been willing to invest time, energy and creativity in the process.”

Each partner is focusing on at least one best practice initiative. The Holgate Center is looking at how to invigorate and stabilize its staff, and create a model working climate. Kaiser, the VAMC and Holgate have projects related to skin and wound care. The State of Oregon project will examine ways

to respond to elder’s behavioral symptoms in long-term care facilities. “Due to the collaboration among the partners, each project is bigger and more successful than imagined,” says Archbold. “We’re hoping the resources we’ve invested in the pilot projects will lead to proposals for more extensive work.”

The second part of the Center is focused on educational goals — including two main initiatives. The first is rapidly increasing the pool of nurses capable of scholarship in education, research and practice in geriatric nursing. “We have an acute shortage of nurses, and the situation is even more serious among nursing school faculty prepared to teach students how to care for elders,” says Archbold. The grant enabled the School of Nursing to create a fast-track program to help students get through the education pipeline and into scholarly pursuits earlier in their careers. The second initiative is a summer postdoctoral fellowship program for current nursing school faculty nationwide who seek advanced training in geriatric nursing research.

The first group of students on the fast track has earned bachelor’s degrees and is now working on more advanced degrees. The summer program, says Archbold, is a “great success,” with three faculty from schools of nursing around the country augmenting their existing expertise with advanced training in geriatric nursing research.

“One of the most rewarding parts of working on the best practices initiative is bringing community partners, students and academics together to improve the care of older Oregonians.”

— Karen Amann Talerico, PhD, RN, CS

adults



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Community collaboration spawns projects on staff retention, wound care and responsiveness to behavior

Recruiting and retaining staff in long-term care facilities guides Holgate Center pilot

Nursing homes and other long-term care facilities are facing an acute shortage of licensed and unlicensed personnel. The Holgate Center, a Portland retirement community with a 100-bed skilled- and intermediate-care center on site, is working with the School of Nursing to enhance recruitment and retention of personnel. “There’s a growing body of evidence that suggests that the work environment in long-term care settings can be enhanced to minimize staff turnover,” says Diana

White, PhD, assistant professor and project director of the OHSU John A. Hartford Center of Geriatric Nursing Excellence. She says that because the Holgate Center serves as a training site for several high schools, community colleges and universities, its recruitment problems are not as severe as others in the same industry. Therefore, the School of Nursing’s focus with Holgate is to improve staff retention.

The notion of going directly to the source if you want to know something is guiding the School’s effort with the Holgate Center. The project coordinators have developed a questionnaire that asks staff members about how they feel about their job, work/family conflicts, their intention to stay or

quit, and the things that would improve the work environment. The researchers will follow up with small focus groups, including nurses, certified nursing assistants and other direct care provider staff. The goal is to identify strengths and concerns specific to Holgate. The OHSU researchers will also examine the literature and talk with workplace experts so they can share ideas and suggestions in the focus groups. “We’ll say things like, ‘Here’s something another group of employees tried. How does it sound to you?’” says White. The next step will be to present comments and feedback to the Holgate groups, work with Holgate staff to select interventions, and then implement the ideas. “The project will be complete when we have evaluated whether the intervention made a difference in staff retention,” says White.

“Looking at retention and then carrying that forward to new recruitment efforts with area high schools, community colleges and OHSU is very important to our participation in this project and our overall organizational mission,” reports John Hogan, executive director, Holgate Center.

White concludes that, “By using evidence-based best practices, we hope to be able to share our findings with others and show the process that any facility can go through to make changes.”

Creating new ways to respond to behavior in long-term care settings

Changing the way state-licensed care facilities respond to behavior in older patients, particularly those with dementia and communication disorders,

is the aim of a new statewide initiative. “We hope to understand and assess behavior that is meaningful in patients with dementia who become agitated during routine care,” says Karen Amann Talerico, PhD, RN, CS, assistant professor of nursing and scientist. “Until now, confused and agitated behavior has been viewed as a burden.” She says that many care providers, including family members, aren’t able to assess and interpret behavior, such as when a patient resists bath time by shoving or cursing.

Patterned after a successful collaboration between State of Oregon Seniors & People with Disabilities and the School of Nursing on reducing the use of restraints in nursing facilities, the new initiative takes the perspective that all behavior is meaningful.

The new initiative is designed to help providers in long-term care facilities incorporate best practices in responding to behavior. Specifically, the team hopes to teach caregivers ways to interpret behavior and develop skills in improving the care of older adults with dementia. Previous research highlights ways to help patients relax and enjoy routine activities, such as bathing. “If we can teach caregivers techniques that calm frightened and agitated patients, we can make a huge difference for a lot of people all over the state who live in nursing homes or institutional settings,” says Talerico.

Kicking off the new initiative is a fall 2002 educational summit, “Joyful Compassionate Care: Becoming Best Practice Champions.” Sponsored jointly by the OHSU School of Nursing, the State of Oregon SPD, and OHSU’s Center for Ethics in Health Care, the forum will introduce long-term

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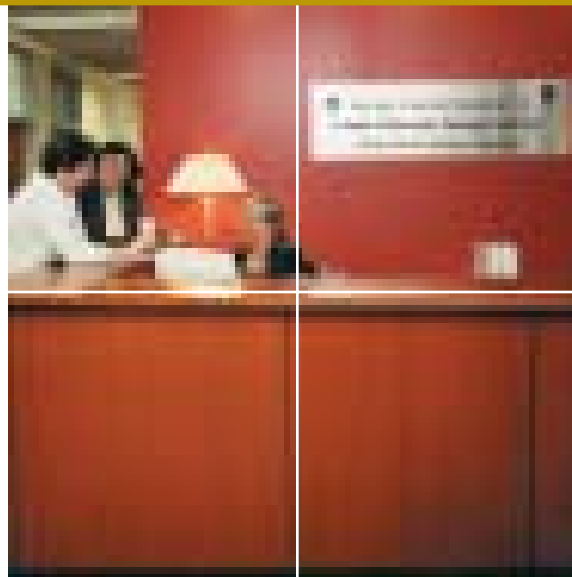
— Megan Hornby, RN, MSN,
Oregon Seniors & People with Disabilities

care providers to a model of care that focuses more on accommodating personal needs than on organizational efficiency. “This is a huge transformation for many centers,” says Theresa Harvath, RN, PhD, CNS, associate professor of nursing.

“Our agency is a partner in this effort because behavior and care planning issues are some of the most troublesome for our providers,” says Megan Hornby, RN, MSN, manager of community-based care nursing and health support for State of Oregon SPD. “We cannot handle the problem using just a regulatory approach. This initiative gives us the opportunity to explore improved practices and identify what are the real barriers to delivering individualized care.”

The conference sponsors hope to attract nurse leaders, front-line staff, such as certified nurse assistants and registered nurses, researchers and administrators. “We’re hoping to identify facilities interested in implementing new practices that address behavioral symptoms,” says Talerico. “In addition, we’re exploring development of a consultation service to help these facilities make sustained cultural and systems changes.”

Hornby emphasizes that there’s been tremendous interest and support from the long-term care industry. “We have partners involved in day-to-day care who are stepping up to help us. Everyone seems ready for change.”



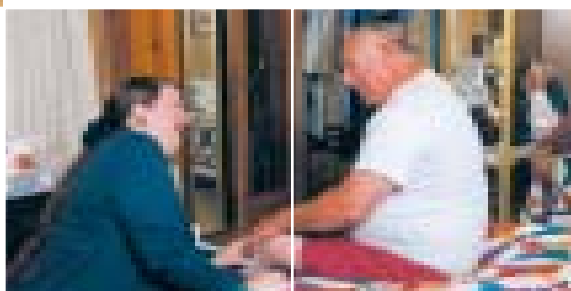
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Based on information generated at the summit and by consulting with select nursing facilities, the group will identify barriers to and concerns about this new way of providing care.

Telemedicine technology provides remote expert wound consultation in long-term care

OHSU researchers are turning to today’s technologies to address a persistent problem among older and frail persons: skin care and wound healing. In the best of settings, wound healing can be a vexing problem; in remote and underserved communities and in many long-term care facilities without highly skilled staff on site, it can be time-intensive and expensive for all parties, as well as disabling for the patient.



The current VAMC project involves having a certified wound care specialist evaluate the wounds of veterans receiving care in the home and recommend treatment options based on the latest wound-healing studies.

According to Lanny Hammett, RN, MSN, a certified wound care nurse and nurse practitioner at Kaiser Permanente Northwest Division, the long-term goal of a new pilot study is to create a system that relies on technology to extend wound care expertise to sites in need.

The first phase of the pilot project, according to Marna Flaherty-Robb, RN, MS, associate dean for practice development at the School, is to design a secure place for collaborating groups to send photos and patient information. Although telemedicine in skin care is not unique, participants in the study agree that designing a Web-based system that allows several health systems to access the patient's medical record without violating patient confidentiality is a major challenge. OHSU and Kaiser Permanente are working together to define what information can be shared, what

boundaries and protections need to be built into individual health information, and how lessons in best practices can be learned and shared easily.

The next phase will involve Kaiser Permanente patients who receive care at the Holgate Center. The researchers will compare direct visualization of the patient's wound with transmitted photos of a patient's skin problem to determine whether the skin expert would reach the same diagnosis and treatment decisions in both situations. "The technology of photography is so refined that we believe the photos are extremely close to being there in front of the patient," says Flaherty-Robb.

An offshoot of the project will involve giving nurses advanced training in the ongoing care of wounds. "Wounds need different treatments through different stages of healing," says Harvath. "Somebody who understands that and can prescribe

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the right skin care treatment at the right time is using best practices.”

“All of the partners are interested in sharing their best standards of care in skin management and wound prevention,” says Flaherty-Robb.

Hammett agrees. “The best chance for this project’s success is through collaboration. Each of us wants to look outside ourselves to create something bigger. OHSU’s Hartford Center has given us that chance.”

VAMC project designed to improve wound care at home and save money

The School of Nursing has teamed up with the Portland Veterans Affairs Medical Center to improve the quality of wound care that veterans receive at home and also reduce costs by applying

best practices to skin care. Last year the VAMC spent half its home health care budget on wound care, according to Harvath. “Each home care visit costs the VAMC about \$100. Our project relies on research-based practice to achieve better wound outcomes for veterans and to decrease costs of care. When a hospital, clinic or nursing home refers a patient to receive wound care at home, we hope that in the future the referral will automatically include a care plan from a wound-care specialist.”

The current project involves having a certified wound care specialist evaluate the wounds of veterans receiving care in the home and recommend treatment options based on the latest wound-healing studies. Non-healing wounds include pressure ulcers in patients unable to move well and those that result from poor circulation and chronic conditions, such as diabetes and heart disease.

“It benefits the VA to have better coordination of wound care and for wounds treated in the home to be reviewed by a specialist in wound care,” says Nancy Benton, RN, MN, clinical nurse specialist and director of home and community-based services for the Portland VAMC. “Ideally, that specialist will prescribe a treatment for the wound, such as the best type of dressing and frequency of changes.”

Benton adds, “The advantage of working with the School is that it can coordinate the unique perspective and knowledge base that each community group brings. We can share our processes with them, and they in turn can share this with others at Kaiser Permanente and Holgate. This way, we’re not reinventing the wheel or duplicating efforts.”