

The background of the slide features a large, faint watermark of the Rutgers University seal. The seal is circular and contains the text "RUTGERS UNIVERSITY" around the perimeter and "1823" at the bottom. The seal is centered behind the text.

RUTGERS

School of Nursing

Building a Resilient Team in a Nurse Led Health Center

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Speaker introduction

Speakers have nothing to disclose

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Objectives

- At the end of this presentation:
- Participants will be able to identify 2 team building exercises used in this urban community health center
- Participants will be able to describe the impact of the organizational culture on the ability to achieve team based care
- Participants will be able to translate at least one example to their own workplace

Nurse-led academic clinical practice setting

- Both the SON at the University of Medicine and Dentistry of New Jersey & the College of Nursing at Rutgers, The State University of New Jersey had grant funded, nurse led clinical practices
- The schools merged and there was a need to streamline and standardize patient care
- The new entity became Rutgers Community Health Center (RCHC), the ONLY nurse-led academic clinical practice in New Jersey

FOCUS Wellness Center (Rutgers)

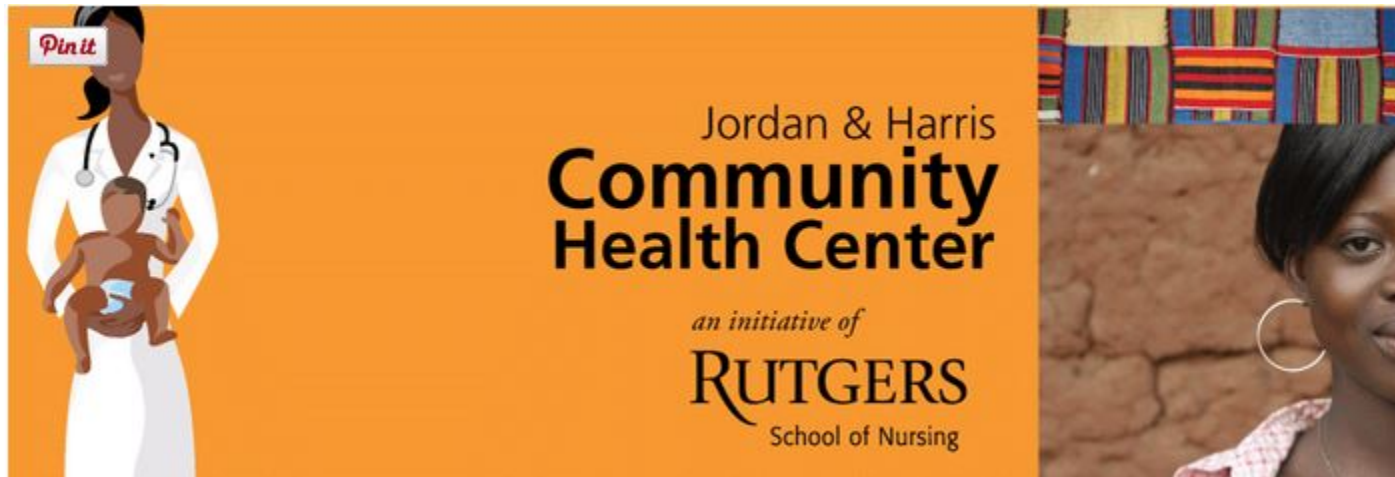
- A nurse managed interprofessional primary care clinical site where students from multiple health professions work together to provide case managed, primary care
 - Nursing
 - Physician's Assistants
 - Pharmacy
 - Social Work
 - Dental
 - Respiratory Therapy



The New Jersey Children's Health Project (UMDNJ)

- Mobile Medical Unit
- Offers primary care services
- Multiple sites in the city of Newark, NJ
- Nurse Practitioners and interprofessional teams of students and faculty





- Originally created as the “Community Center for Health Empowerment and Care”
- J&HCHC started in three Newark Public Housing Developments
- Model is one of community empowerment where a community advisory board directs and approves all health center activity

Rutgers Community Health Center

- 2015 New Access Point
- Designated a Public Housing 330 recipient
- Culmination of three very distinct, Health Resources Services Administration (HRSA) funded projects
 - The New Jersey Children's Health Project
 - The FOCUS Wellness Center
 - The Jordan and Harris Community Health Center



Nursing Leadership

- Development of key leadership team
 - DNP and PhD prepared nurses from both schools
 - Focus on vision and team-building rather than task orientation
- Matching skillset to create a cohesive team
 - Skilled communication
 - True collaboration
 - Effective decision making
- Leadership style
 - Empower staff members
 - Relationship based
 - Visionary

Practice redesign toolbox

- American Association of Critical-Care Nurses Standards for Establishing and Sustaining Healthy Work Environments:
 - 1.Skilled Communication
 - As proficient in communication skills as they are in clinical skills
 - 2.True Collaboration
 - Relentless pursuit and fostering of true collaboration
 - 3.Effective Decision Making
 - Partners in making policy, directing, and evaluating clinical care, and leading organizational operations
 - 4.Appropriate Staffing
 - Match patient needs and nurse competencies
 - 5.Meaningful Recognition
 - Recognize the value each brings to the work of the organization
 - 6.Authentic Leadership
 - Authentically live it and engage others in its achievement

Using the AACCN Standards to create the mission, vision and core values

- Merging clinical operations meant merging cultures that were in conflict
- Needed to develop a Mission, Vision, and Values that were acceptable to all (standards 1, 2, 3)
- Clinical, administrative, support staff, and advisory board members (patients and community stakeholders) collaborated with the leadership team to create:
 - a mission statement that reflected our goals and actions leading to a..
 - vision of a successful nurse-led health center based on...
 - foundational core values

MISSION

Rutgers Community Health Center mission is to promote health and well-being, and provide patients family-centered, high quality, comprehensive, inter-professional primary healthcare in the community

VISION

Rutgers Community Health Center community members are fully engaged in their care and education, improving their health and creating a healthy lifestyle for themselves, their families, and their community.

CORE VALUES

Respect

Demonstrating with actions and words that each individual is valuable

Community

Building a community through shared interests and goals

Equity

Everyone has the same access to care

Engagement

Actively involving the community in all we do

Passion

Zeal and devotion to inspiring the community on their journey to better health

Scholarship

Sharing information to build a support mechanism to positively impact well-being

Stewardship

Being responsible with all resources

Camaraderie

Creating a safe and supportive environment in all we do and say

Skilled Communication, True Collaboration & Meaningful Recognition: Integrating the Mission, Vision, & Values

- Staff meetings included discussion of how to integrate mission, vision, and core values into the work day
- Emphasis on core values of respect (demonstrating that everyone is valuable) and camaraderie (creating a supportive and environment)
 - Leaders role modeled behavior
 - Acted as “buffers”
 - “Pitched in” wherever, whenever needed
- Behaviors that reflected values were recognized
 - Shout outs and applause
- Prevention rather than correction
 - Identified that behavior was not reflective of core values
 - Incivility, bullying, and aggression was not tolerated
 - Appealed to professionalism, leadership potential, mentoring capacity

Strategic Plan: Collaboration, Communication, Decision-making

- SWOT Analysis required input from staff at all levels
- Critique by staff at all levels was required
- Invested staff in working towards successful implementation of strategic plan
- An opportunity for team building:
 - Staff was assigned to teams to complete the tasks needed for transformation
 - Teams included students (nursing, pharmacy, medical, community members)
- Accomplishments were celebrated— no matter how small

Identification of Appropriate Staff Mix

- Former model:
 - NPs and RNs were responsible for all tasks associated with the patient visit except clerical.
 - Community Health Workers (CHW) and Medical Assistants (MA) did clerical tasks
- New staff member—Front Desk Receptionist/Office manager assumed clerical/administrative tasks
- All tasks were reassigned:
 - NPs focused clinical management
 - RNs focused on medical care coordination
 - CHWs focused on assisting patients with community related issues
 - MAs –rooming patients, VS, history

Task Shifting and Daily Organization:

- Pre-visit planning: anticipated patient needs and resulted in decreased staff stress, smoother day, and better patient care
- Task shifting increased job satisfaction, promoted teamwork, and staff worked at the top of their license



Authentic Leadership & Meaningful Recognition

Quality Improvement Committee was the platform for identification of future leaders

- Nurses self-selected (Nurse Champions-NC) to lead QI initiative teams that included physicians, MAs, CHWs, SWs, pharmacists, community leaders, and researchers
- Faculty from the SON mentored NCs
- NCs in turn mentored DNP students and students from other health professions
- NCs led meetings that included case presentations, discussions of clinical guidelines, and in-services of new protocols,
- The nurse leaders were resources for NPs and teams

Outcomes (successes):

QI initiatives enhanced community involvement

- Nurse Champions, other staff members, and students from various disciplines assumed leadership of initiatives that improved patient care
- Clinical plans to address community and individual patient obesity, diabetes, and hypertension
 - Chronic disease self-management programs led by the nurse and CHWs
 - Health literacy program
 - Asthma treatment program that include home assessment
 - Walking and Tai Chi for older adults
 - Team visits to homebound patients
 - Relationships with school based health programs, service organizations for undocumented citizens, Latinx community, Veterans Organizations, LGBTQ community, and homeless programs

Outcomes (preventing a negative result): Transformation is stressful

- Stress can endanger staff morale, leading to cynicism, diminished productivity, burnout and less than optimal patient outcomes
- Voluntary self-care sessions were incorporated into staff meetings:
 - Yoga
 - Meditation
 - aromatherapy
- Staff was monitored for increased stress
 - Stop
 - Breathe
 - Go to your “happy place.”
- 90% participated

Lessons learned

- Nursing leadership is a crucial component of a healthy and happy workplace
- Committed nursing leadership results in effective transformation, job satisfaction, and staff engagement
- A successful team transformation process requires involvement of the entire workforce, mentoring of future leaders, and inclusion of key community stakeholders
- Transformation requires a toolbox that helps leaders use mundane but necessary tasks as opportunities for team development
- The AACCN Standards can be applied to primary care and are a foundation for visionary leadership

Questions?



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