From the Starting Gate to the Flag: Lessons Learned on the DNP Journey to Practice

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The Health

Pediatric Nurse Practitioner Management of Child Anxiety in the Rural Primary Care Clinic with the Evidence – based COPE

- Based on the National Research Council and Institute of Medicine report (Preventing mental, emotional, and behavioral disorders among young people: progress and possibilities, 2009) it is estimated that 13 – 20 percent of children living in the United States (up to 1 out of 5 children) experience a mental disorder in a given year and an estimated $247 billion is spent each year on childhood mental disorders.
- Childhood anxiety is the most common mental health disorder, with only 20 percent of children actually receiving any type of treatment leading to a burdensome, expensive chronic condition (Connolly & Bernstein, 2007; James & Weatherall, 2005; Simon & Bögel, 2009).

COPE

Intervention by the Pediatric NP: Evidenced-based Cognitive behavioral skills building (Lusk & Melnyk, 2011, 2013)

Session	Session Content
1	Thinking, feeling, and behaving: What is the Connection?
2	Self – esteem and positive thinking/self-talk
3	Stress and coping
4	Problem solving & setting goals
5	Dealing with your feelings in healthy ways
6	Coping with stressful situations
7	Pulling it all together for a healthy you

The Triple Aim of Healthcare views successful interventions that are cost effective, patient centered, and improve patient outcomes (Berwick, Nolan, & Whittington, 2008).

- COPE visits fit into the fast - paced pediatric practice in 20 - 30 minute sessions and all 74 sessions were completely reimbursed at a higher code for time counseled (Meadows et al., 2010; Foy, 2010).
- Positive outcomes were noted by reduction in anxiety symptoms (SCARED-symptoms checklist) by 13.88 points (SD = 17.9, 95% CI -1.13, 28.89, p=0.07) and 100 percent of the children rating their level of function as very much improved to greatly improved (CGI-1).
- Positive behavioral and cognitive skills knowledge was gained post COPE program (5.99 questions pre - assessment to 8.26 on post evaluation (p = 0.00).
- The child and the parents viewed COPE as a positive experience where they received "help" with their child's worrisome symptoms, and they especially appreciated that the intervention was provided in the primary care location.

The Care

Improving the Patient Care Experience: Identifying Combat-Related Post-Traumatic Stress Disorder (PTSD) in Primary Care (PC)

- Gaps and inconsistency exist in quality care assessments for combat related PTSD in military PC (Katon & Unutzer, 2013)
- As of 2010, over 2 million troops have deployed to Iraq and/or Afghanistan (Steenkemp & Litz, 2013)
- PC in military medical facilities need consistent reliable evidence based practice (EBP) PTSD screenings. The PC-PTSD screening tool improves identification and the health care experience in those suffering from PTSD.

"The Care," Never Forgotten

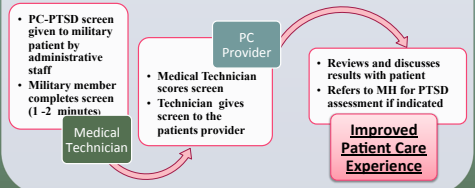
- The US conflict in Afghanistan surpassed Vietnam as the longest American war in history (Geiling, 2012)
- Combat PTSD, crisis among military (Wisco & Marx, 2012)
- Untreated PTSD leads to poor mental and physical health, suicide or death. Undiagnosed PTSD sufferers repeatedly present to PC with various physical symptoms (P.A. Patterson, personal communication, Sept 8, 2013)
- Consistently implementing EBP leads to high quality care and best patient outcomes (Melnyk & Fineout, 2011)
- A valid, reliable four-item PC-PTSD screen is simple, easy to use, and addresses all Diagnostic and Statistical Manual of Mental Disorders (Bliese et al, 2008)

Primary Care PTSD Screen (PC-PTSD)

Instructions: In your life, have you ever had any experience that was so frightening, horrible, or upsetting that, in the past month, you:

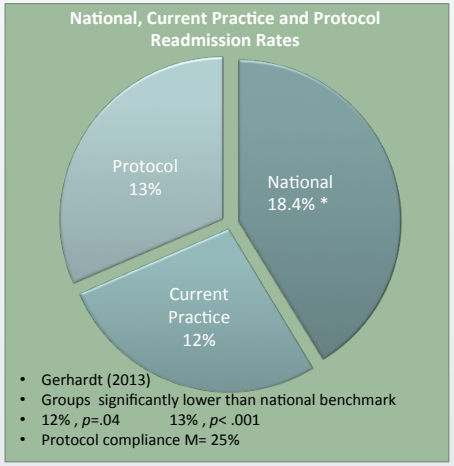
1. Have had nightmares about it or thought about it when you did not want to? YES / NO
2. Tried hard not to think about it or went out of your way to avoid situations that reminded you of it? YES / NO
3. Were constantly on guard, watchful, or easily startled? YES / NO
4. Felt numb or detached from others, activities, or your surroundings? Yes/ No

(Prins, Quinette, & Kimberling, 2013)



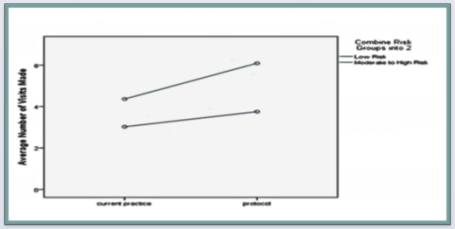
The Cost

The Impact of NP visits on Readmission Rates in Skilled Nursing Homes



- Gerhardt (2013)
- Groups significantly lower than national benchmark
- 12% , p=.04 13% , p< .001
- Protocol compliance M= 25%

Risk levels were developed based on current evidence. Number of visits was significantly higher in the moderate to high risk group with lower readmission rates (7%) than the low risk patients (14%).



Cost of NP care (CMS reimbursements):

- Current Practice : $246.16
- Protocol: $281.34
- Cost of one rehospitalization episode: $10,352.00 (Mor, 2010)

- **NPs provide cost efficient care to residents with multiple chronic conditions through decreased hospitalizations**
- **Dissemination of the role of the NP in skilled care must include the impact on health care reform and cost containment**

The Educational Experience

Doctorate of Nursing Practice

Lessons and Sustainability

- The AACN supports the DNP as the terminal degree for APNPs in 2020 (Feeg & Nickitas, 2011).
- Increasing enrollment in DNP programs
- Innovative online, on campus, blended programs
- Eclectic group of DNPs improving population health, the service of health care, and cost efficiency in health care delivery

- Innovative instructors foster leadership, socialization and collegial relationships in DNP programs.
- Collegial relationships affect the development of evidence based projects through idea-generation, support, critiques, and guidance.
- This poster has demonstrated the fusing of three individual project foci into the Triple Aim framework by a diverse group of DNP students using socialization and collegial relationships honed in a DNP program.

Sustainability to the DNP Community

- The Affordable Care Act has changed the face of healthcare with an overburdened health care system, especially in the primary care setting with nursing filling this void (Institute of Medicine, 2011).
- DNPs improve the **HEALTH** of individuals, groups, and communities across the lifespan.
- DNPs provide health **CARE** to populations nationally and globally
- DNPs provide **COST** efficient care in EBP
- DNPs realize sustainability of educational achievement, development of lasting professional relationships and innovative evidence based DNP practices in a collegial **EDUCATIONAL EXPERIENCE** .

References

Health References:
https://www.dropbox.com/s/wfdfqkttd9pwst8/References%20for%20The%20Health%20DNP%20Conference%20Poster.docx
Care References:
https://www.dropbox.com/s/74kcfm3yxfxad7b/Health%20Care%20References_DNP%20conference%202014.docx
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