Academic-Practice Partnerships
If not now….When?

Judy A. Beal, DNSc, RN
Dean, School of Nursing and Health Sciences
Simmons College, Boston, MA
Co-Chair AACN-AONE Academic Practice Partnership Task Force

AND

Anna C. Alt-White, PhD, RN
Director of Research and Academic Programs
Office of Nursing Services Veteran’s Health Administration
Member AACN-AONE Academic Practice Partnership Task Force

AACN 2011 Baccalaureate Education Conference
St. Louis, MO -- November 17, 2011
The task force is charged with

- initiating a national dialogue on current and future best practices in academic-practice partnerships
- developing a road map for nursing leaders to develop and sustain effective academic-practice partnerships

The task force is composed of 4 leaders from academia and 4 from practice
Document the historical perspective on academic-practice partnerships in the profession of nursing

Synthesize the current evidence based literature on academic-practice partnerships

Identify and categorize current academic-practice initiatives and innovations across the country

Define the characteristics of effective academic practice partnerships
AACN-AONE Task Force Charge

- Identify the impact of such practices on academic and practice institutions and their constituencies
- Identify facilitators and barriers to the establishment and continuity of effective academic practice partnerships
- Identify strategies for nursing leaders to assist them in the development of effective partnerships
Academic practice partnerships are a mechanism for advancing nursing practice to improve the health of the public. Such intentional and formalized relationships are based on mutual goals, mutual respect, and shared knowledge. An academic practice partnership is developed between an academic nursing program and a care setting and is defined broadly to include relationships within nursing and other professionals, corporations, government entities, and foundations.

AACN-AONE Task Force, 2011
The 2010 IOM Report on the Future of Nursing

The Faculty Shortage

The Nursing Shortage
Qualified BSN Entry Applications Turned Away (AACN 2011)
A call for partnerships between educational and practice leaders and faculty and practitioners that lead to broad based support of clinical education has been given (Ridenour, 2009).

Broome (2009) broadens the message with first a call for “disciplinary will” aimed at consensus building with stakeholders addressing steps to develop cost effective and high quality education initiatives.
AACN-AONE Task Force
The Historical Perspective

- 1600’s Nurses partner with religious communities
- 1800’s Nurses partner with physicians
- 1800’s Nurses partner with the Government
- 1800’s Nurses partner with hospitals
- 1900’s Nurses partner with universities
- 1900’s Nurses partner with professional organizations
- 2000….The sky is the limit and needs to be!
Extensive review of the literature

Majority of articles reviewed were anecdotal

Four major clusters: Principles, types, benefits, and barriers

Nursing leaders have a long tradition of partnering with very little evidence to support the efforts
From the literature
Principles of Partnerships
Types of Partnerships
Benefits to Partnerships
Barriers to Partnerships
AACN-AONE Task Force
Current Research Evidence

- AACN-AONE Task Force Survey
- AACN-AONE Task Force Focus Groups
Dedicated Education Units
Clinical Nurse Leader Programs
Consortium of clinicians and educators
Clinical Faculty /Preceptor Academy
State wide coalitions
Staff nurse buddies
Accelerated BSN-PhD and post doc programs
Endowed professorship for research at hospital
Partnerships with free clinics
Research Institute chaired by dean and CNO
School based health center partnership with nutrition
Inter-school collaborations and exchange of faculty
A mutual commitment to

- Establishing formal relationships at the level of the chief academic nursing officer and nurse executive and practiced at multiple levels
- Clearly articulating a mutual vision and expectations
- Mutually developing goals with set evaluation periods
- Mutual respect and trust
- Sharing knowledge among partners
- Maximizing the potential of every nurse to the highest level of scope of practice

AACN-AONE Task Force Guiding Principles to Effective Academic-Practice Partnerships, 2011
Working together to determine an evidence based transition for students and new graduates that is both sustainable and cost effective

Ensuring that nurses achieve life long learning

Supporting opportunities for nurses to lead and develop collaborative models that re-design practice environments to improve health outcomes

Establishing infrastructure to collect and analyze data on the current and future needs of the RN workforce

AACN-AONE Task Force Guiding Principles to Effective Academic-Practice Partnerships, 2011
AACN-AONE Task Force
Barriers and Facilitators

- **BARRIERS:**
  - Lack of Time
  - Lack of resources
  - Lack of communication

- **FACILITATORS:**
  - Shared vision with mutual goals and objectives
  - Clear communication
  - Regular contact and engagement
While the literature is replete with descriptions of many different types of academic-practice partnerships that have existed during the past twenty years, the evidence for the success of these relationships is lacking.

While informal evaluation has occurred, very few of the innovations described have been formally studied.

The studies published to date are seriously limited in their generalizability by small non-representative samples in single locations.
Anecdotally we know that effective academic-practice partnerships

- Increase recruitment and retention of staff nurses
- Can decrease orientation time and costs in terms of turnover
- Decreased turnover decreases recruitment and orientation costs
- Decreased turnover provides a more stable workforce
- A more stable workforce improves quality and patient safety
- Increase recruitment of faculty and preceptors
- Increase the educational level of nurses
- Increase research and dissemination of science
- Increase satisfaction of students and staff
I dream of a partnership that ….

- Is structured for sustainability and success
- Has mutually beneficial outcomes
- Improves patient care and outcomes
- Stimulates innovation
- Generates excitement!!!
To develop these dream partnerships our participants told us that it requires

- Administrators who are willing to take a risk and assume responsibility
- Faculty connections
- Philanthropy
- College mission that supports and values faculty practice
- Mission, vision, values aligned
- Synergy…The right people at the right time in the right places!
AACN-AONE Task Force
Strategies to get there...

- The AACN-AONE Task Force Guiding Principles and Tool Kit
- The AACN Collaboration Community
  - [http://community.aacn.nche.edu](http://community.aacn.nche.edu)
- Future Work of the Task Force…Stay tuned
- It’s all about the partnership….