

Exemplary Academic-Practice Partnership Award Nomination

University of Pennsylvania School of Nursing and Penn Medicine Health System

The University of Pennsylvania School of Nursing and Penn Medicine (the University of Pennsylvania Health System) have a well-established academic-practice partnership that promotes our shared missions to enhance nursing practice, education, and research. This partnership is rooted in synergistic relationships at the highest levels of leadership and branches to reach nurses at every level. Dr. Afaf Meleis, PhD, RN, FAAN, the Dean of the School of Nursing, and Dr. Victoria Rich, PhD, RN, FAAN, the Chief Nurse Executive of Penn Medicine, are visionary leaders who have worked collaboratively to cultivate structures that weave together practice, education, and research in order to advance nursing locally and globally.

At Penn, many mechanisms link practice, education, and research. The university supports a Clinician Educator (CE) standing faculty line with full faculty rights and responsibilities that mandates a clinical practice component. Dr. Rich holds a CE appointment as an Associate Professor and is a content expert who teaches in the Nursing Administration Masters program. Other CEs conduct nursing research, promote evidence-based practice within the health system, and teach at the school. Dr. Kathleen Burke, PhD, RN, CENP, Penn Medicine's Corporate Director of Nursing Professional Development and Innovation, holds a joint appointment as the Assistant Dean of Clinical Nurse Learning and Innovation within the school. Similarly, Dr. Kathleen McCauley, PhD, RN, FAAN, Associate Dean for Academic Programs at the school, serves on the Penn Medicine Chief Nurse Officer Council. Many Penn Medicine nurses teach students, both at the school and within the hospital, in their roles as adjunct faculty, lecturers, clinical instructors, or preceptors. In addition, the Hospital of the University of Pennsylvania (HUP) employs two full-time, doctorally-prepared nurse researchers, Drs. Rebecca Trotta, PhD, RN and Aditi Rao, PhD, RN. Both are school of nursing graduates currently receiving formal mentorship from Dr. Linda Aiken, PhD, RN, FAAN, the school's Director of the Center for Health Outcomes and Policy Research (CHOPR), to conduct research linking HUP and CHOPR data. Finally, the Botswana-UPenn partnership, formed in 2001, serves to build Botswana's healthcare capacity in response to the HIV/ AIDS epidemic. This program allows Penn Medicine clinicians and students from across the university to travel to Botswana to provide clinical care, engage in educational exchanges, and conduct research. Such cross-collaborative linkages contribute to students' education, nurses' professional development, and nursing research that informs, and is informed, by practice.

Several exemplars demonstrate the strength of Penn's academic-practice partnership. Penn Medicine facilities serve as clinical site placements for over 1,200 nursing students annually; and Penn Medicine's Nurse Residency Program transitions over 200 nurses into practice each year. This program recently celebrated its 10 year anniversary. It is among the largest in the country and is on the journey to receiving CCNE Accreditation for the Nurse Residency program as a joint system-wide effort. Further, Penn was recently chosen by CMS as one of the five sites for the Graduate Nurse Education Demonstration Project. This project, led by Dr. Aiken, is supported by Penn Medicine's administration of nearly \$40 million to expand preceptor availability and drastically increase advanced practice nurse (APRN) enrollment across nine schools of nursing and multiple hospital and community practices in the Philadelphia region. This project promises to transform APRN education and grow this vital group of care providers. Penn's academic-practice partnership, sustained over nearly 30 years, demonstrates the structures, processes, and determination of Penn nurses at every level to work collaboratively to benefit patients, students, and clinicians. As a result, this partnership produces leaders who, for years to come, will contribute to nursing practice, education, and research.

Academic-Practice Partnerships
Partnership Expectation and Outcome Metrics Worksheet
University of Pennsylvania School of Nursing and Penn Medicine Health System

Partnership Goals	Activities	Outcomes
Offer a rich educational experience that reflects real-world clinical practice issues for undergraduate and graduate nursing students.	1. The University of Pennsylvania School of Nursing (SoN) continues to utilize Penn Medicine (PM) facilities as preferred clinical placement sites for graduate and undergraduate nursing students, where they are precepted by PM nurses. Senior undergraduate students spend the entirety of their final semester on an inpatient unit precepted by clinical nursing staff members.	1. Over 1,200 nursing students receive clinical education at PM annually. The majority are students of the UPenn SoN.
	2. SoN and PM leaders and educators collaborate on curriculum development by jointly examining the new undergraduate curriculum.	2. A collaborative SoN and PM workgroup comprised of key stakeholders has been established to regularly assess the impact of curriculum changes and pose new opportunities for future curriculum improvements. A revised undergraduate curriculum has received approval and is currently being utilized with nursing students.
	3. PM nurses act as clinical instructors and preceptors in SoN courses that require clinical or practice oversight in the hospital setting.	3. PM nurses at every level—clinical nurses, nurse managers, educators, researchers, and CNOs—contribute at the SoN as guest lecturers, clinical instructors, and faculty members. Six senior level nurses hold joint appointments at the SoN and PM.

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<p>Ensure SoN new graduates experience a smooth transition into the clinical practice environment.</p>	<p>1. Maintain sustainability of the PM Nurse Residency Program.</p>	<p>1. The Hospital of the University of Pennsylvania's (HUP) Nurse Residency Program is the largest in the PM system and one of the largest programs in the country. At the inception of the National Nurse Residency Program, HUP served as one of the five alpha sites. The program is supported by the SoN and PM, under the leadership of Drs. Rich and Meleis, and recently celebrated its 10th anniversary. Since 2002, 1,850 nurse residents have graduated from this program.</p>
	<p>2. Strengthen Nurse Residency Program partnerships by applying for CCNE accreditation as a health system.</p>	<p>2. The PM Residency Program is on target to successfully achieve CCNE accreditation as a Health System in FY 2015.</p>
	<p>3. Maintain SoN faculty participation in the Nurse Residency Program as lecturers in various courses. For example, Dr. Kathleen McCauley, past president of the American Association of Critical Care Nurses and contributor to their Healthy Work Environment Initiative, delivers this content in the residency courses.</p>	<p>3. Residents receive training from expert faculty and program course evaluations consistently remain high.</p>
	<p>4. Actively recruit and retain well-qualified SoN BSN graduates for PM clinical nurse positions.</p>	<p>4. Over 200 new graduate nurses complete PM Nurse Residency Program annually; many are UPenn SoN graduates. Annualized turnover among RN staff remains low. The one-year retention rate of nurse residents is 96.2% and more than 58% of HUP nurse residency graduates remain employed at PM in various roles.</p>

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Offer ongoing professional development opportunities for nursing staff members to support their lifelong learning.	1. At PM, develop a revised nursing competency program based on current recommendations from published literature, leading professional organizations, and recommendations from academic leaders at the SoN.	1. A health system-wide task force and work groups have been convened including nurses at every level to develop the revised competency program. SoN and national leaders, Drs. Jane Barnsteiner, PhD, RN, FAAN and Patricia D’Antonio, PhD, RN, FAAN, consulted with the task force to ensure the new competency program is aligned with the SoN undergraduate curriculum and Quality and Safety Education for Nurses (QSEN) recommendations. A framework and structure to guide the new program is in development.
	2. Continue to provide generous tuition reimbursement benefits to PM employees, including nurses, to further their education. The SoN offers tuition discount incentives to PM nurses who complete their graduate studies at the SoN, which has contributed to the sustainability of this important program.	2. On average, more than 700 PM nurses take advantage of this program each year, at an annual cost of nearly \$4M. In 2010, PM spent \$3,927,606.57 on tuition for 684 nurses. In 2011, PM spent \$3,888,323.53 for 711 nurses. In 2012, PM spent \$4,612,696.89 for 765 nurses. Year to date in 2013, PM has spent \$3,191,077.20 for 656 nurses.
	3. PM leaders continue to receive support from SoN leaders to facilitate career advancement.	3. Drs. Kathleen Burke and Ann Marie Papa, DNP, RN, Clinical Director of Medical Nursing at HUP, will receive their designations as Fellows of the American Academy of Nursing in October 2013. Their applications were jointly sponsored by a PM leader, Dr. Victoria Rich, and SoN leaders, Drs. Neville Strumpf, PhD, RN, FAAN and Kathleen McCauley, respectively.

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<p>Increase interprofessional education opportunities.</p>	<p>1. The SoN, PM, and other organizations, including Thomas Jefferson University and the Children’s Hospital of Philadelphia, collaboratively developed and currently teach an interprofessional course titled <i>Teaching With Simulation</i> intended to build capacity for simulation education and share best practices between service and academia. Educators and clinicians are educated together in the course. As a true collaborative effort, the organizations involved share the costs equally.</p>	<p>1. A partnership to support this work has been established connecting PM, the SoN, the PM Clinical Simulation Center, the Children’s Hospital of Philadelphia, and the Thomas Jefferson University School of Nursing. The course has been offered twice and attendees have consistently rated the program at 5 out of 5 points on course evaluations. Work is underway to create a collaborative local simulation education consortium that shares resources, faculty partners, and staff.</p>
	<p>2. Jointly appointed nurse and physician leaders, Drs. Kathleen Burke (of the SoN and PM) and Jennifer Myers, MD, Associate Professor of Clinical Medicine and Assistant Program Director of the Internal Medicine Residency Program at the Perelman School of Medicine (UPenn SoM) and Patient Safety Officer and Director of Training Programs in the Center for Health Care Improvement and Patient Safety at HUP, co- teach a graduate interprofessional course offered in the SoN and SoM—<i>Quality Improvement and Patient Safety</i>.</p>	<p>2. Since the course began in 2009, 60 nurses and physicians, the majority of whom work at PM, have completed the course. Each student completed a quality improvement project within the health system.</p>
	<p>3. PM leaders (e.g., Victoria Rich, Judy Schueler—the Vice President of Organization Development and Human Resources—and the CNO Council) collaborate with the SoN and the Satell Center for Executive Training to offer a graduate-level course titled <i>Systems Thinking and Patient Safety</i>. PM clinicians are educated jointly alongside SoN graduate students in a blended in-person and virtual format.</p>	<p>3. Ten PM clinicians completed the course and implemented patient safety projects within the health system to improve clinical systems. Course evaluations were extremely positive with participants noting that the course gave them, “a new way to think about safety.”</p>

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<p>Promote the delivery of safe, high-quality patient-centered care through knowledge exchange regarding evidence-based best practices.</p>	<p>1. Continue to utilize a shared learning management system across PM and the SoN.</p>	<p>1. Knowledge Link, a shared learning management system in place at PM and the University for several years, was successfully upgraded in 2012 to better support the needs of both the SoN and PM.</p>
	<p>2. Continue to make shared educational resources available to SoN and PM staff and students.</p>	<p>2. Both SoN and PM staff have access to the University libraries and biomedical librarians to ensure access to evidence and expert consultation for conducting literature searches.</p>
	<p>3. Continue to support joint appointments that promote research utilization and evidence translation into clinical practice.</p>	<p>3. The SoN and PM jointly support Standing Faculty-Clinician Educator (CE) Track positions in the SoN. Two CE Track faculty assume positions in clinical practice with responsibilities to advance practice, research and teaching. For example, Dr. Rosemary Polomano, PhD, RN, FAAN, is a Professor of Pain Practice who both conducts research at PM and works with PM clinicians to improve clinical practices. Her research on the development and testing of the American Pain Society Patient Outcomes Questionnaire – Revised has translated into improved practices for assessing dimensions of the pain experience and guiding interventions to reduce analgesics gaps, improve patient participation in pain care, and increase the use of multimodal pain strategies.</p>
	<p>4. Continue to grow the NICHE (Nurses Improving Care of Health System Elders) program at HUP to promote high quality evidence-based care for elderly patients.</p>	<p>4. HUP’s NICHE program has established a steering committee that includes expert geriatric faculty from the SoN. HUP was recently awarded a \$1.5M HRSA grant to support the development of this program.</p>

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<p>Promote the delivery of safe, high-quality patient-centered care through knowledge exchange regarding evidence-based best practices.</p>	<p>5. SoN leaders continue to contribute to PM shared governance structures and application for Magnet® accreditation.</p>	<p>5. SoN leaders, Drs. Marilyn Stringer, PhD, CRNP, RDMS, FAAN, Sarah Kagan, PhD, RN, FAAN, Kathleen McCauley, and Rosemary Polomano helped to develop HUP’s Shared Governance by-laws; and SoN leaders Drs. Neville Strumpf and Ann Keane, PhD, RN, FAAN contributed to HUP’s Magnet® program application. Since implementing shared governance, clinical nurse satisfaction has improved as demonstrated by HUP’s NDNQI® survey (e.g., NDNQI participation rates consistently exceed 80%. Satisfaction with professional status consistently rated above 60% indicating high satisfaction).</p>
<p>Cultivate research collaborations between the SoN and PM.</p>	<p>1. Maintain collaborative partnerships between PM and SoN nurse researchers.</p>	<p>1. Linda Hatfield, PhD, NNP-BC, Pennsylvania Hospital’s (PAH) Director of Research and Evidence-Based Practice, holds a joint appointment within the SoN as an Associate Professor of Evidence-Based Practice. HUP employs two full-time nurse researchers, Rebecca Trotta, PhD, RN and Aditi Rao, PhD, RN who are members of SoN research centers and teach in SoN courses.</p>
	<p>2. SoN faculty mentor and collaboratively conduct research with PM nurse researchers.</p>	<p>2. HUP’s full-time nurse researchers, Drs. Rebecca Trotta and Aditi Rao, are engaged in a formal mentoring relationship with Drs. Linda Aiken and Matthew McHugh from the SoN’s Center for Health Outcomes and Policy Research (CHOPR). They are collaboratively conducting research combining data from HUP and CHOPR. Similarly, CHOPR junior faculty member Dr. Ann Kutney-Lee has worked with PAH researchers to conduct collaborative research using PAH and CHOPR data. Dissemination of this work is underway.</p>
	<p>3. SoN faculty members conduct nursing research at PM that directly contributes to practice.</p>	<p>3. Kathryn Bowles, PhD, RN, FAAN, used PM hospitals as part of her multi-site study testing decision support software. The software elements related to her work have been integrated into PM’s electronic health record to continue to collect data based on recommendations from this research.</p>

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<p>Improve the health of communities both locally and globally.</p>	<p>1. The SoN supports a clinical practice PACE program in West Philadelphia called Living Independently for Elders (LIFE). Dr. Rich serves on the LIFE board and acted as a consultant in their journey to obtain Pathways to Excellence.</p>	<p>1. LIFE was granted Pathways to Excellence designation from the American Nurses Credentialing Center in 2012.</p>
	<p>2. SoN health equity researcher, Dr. Loretta Sweet Jemott, PhD, RN, FAAN, maintains membership on the HUP Community Outreach Program Steering Committee. PM and SoN nurse leaders share resources and meet monthly to support the Healthy in Philadelphia initiative.</p>	<p>2. The HUP Community Outreach Program holds 3-4 health education events within the West Philadelphia community each year and has raised \$250,000 to support community-based health initiatives. Pamela Mack-Brooks, MSN, RN (PM) and Rebecca Phillips, MSN, RN (SoN) collaborate on bi-annual community outreach initiatives where they oversee PM clinical nurses and SoN nursing students in the delivery of health screening and educational activities.</p>
	<p>3. The SoN, SoM, and PM continue to support the Botswana-UPenn partnership that sends PM clinicians and University students to Botswana to provide clinical care and participate in educational and research exchanges with Botswana clinicians.</p>	<p>3. Since 2009, 45 SoN students, 233 PM residents and fellows, 253 SoM students, and 83 PM staff members, including many nurses, have travelled to Botswana. In 2012, the partnership's HIV Care and Support Program treated 575 HIV patients, trained 675 health care workers, completed one HIV guideline, and prepared an additional 6 guidelines currently under review. The Adult and Pediatric Tuberculosis (TB) Program provided TB therapy for 240 HIV-TB co-infected patients, provided antiretroviral therapy for 140 co-infected patients, screened 360 adult and 240 pediatric contacts, trained over 300 health care workers on aspirates nationally, initiated TB treatment in 20 HIV infected children, and initiated HIV treatment in 25 TB infected children. The Women's Health: Cervical Cancer Screening and Treatment Program screened 2,000 HIV infected women for cervical cancer, examined 1,100 women by colposcopy, treated 750 women with cryotherapy, cautery, or LEEP, screened 2,000 HIV infected women for TB symptoms, and referred 100 women for TB evaluation.</p>