

Moving From Patient Care to Population Health: *A New Competency for the Executive Nurse Leader*

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There are many social, political, and economic influences shaping healthcare delivery today that are expanding the scope of responsibility for the executive nurse leader. The focal point of change is the passing of the Patient Protection and Affordability Care Act (ACA), where there is a clear strategic shift to provide patient care in the right setting with the formation of Accountable Care Organizations (ACOs). Financial reimbursement strategies are being aligned to

facilitate these changes. Executive nurse leaders are trying to navigate through these healthcare changes by developing cost-effective care delivery models, supporting the role of the professional and advanced practice nurse, and advocating for the patient. In healthcare reform, this translates to healthcare being delivered in community venues and the executive nurse leader being the advocate for the healthcare needs of the population in the community.

ASSESSING GAPS IN COMMUNITY HEALTH NEEDS

As part of the doctor of nursing practice program, while spending time in Boston neighborhoods working with Boston Alliance for Community Health, there seemed to be a great disconnect between the health needs of the Boston neighborhoods and health resources available that could impact the health of the community, all of this within the close proximity to several academic tertiary institutions. Being hospital centric the majority of my work life, these observations facilitated a capstone project that was designed to assess and identify gaps in the executive nurse leader's understanding of community health needs to plan and lead change across the continuum of care. An online survey was distributed to executive nurse leadership in all the hospitals (acute, rehab, and behavioral health) in Massachusetts and Rhode Island. The response rate was 55.7%. The results of the survey indicated that participation in community health initiatives and educational preparation each had a contribution to executive nurse knowledge of community health needs. This research also revealed that most executive nurse leaders are still hospital centric in their vision and operational focus. They have addressed the challenges to provide quality patient care at a reasonable cost with good outcomes in the hospital setting. This focus continues to be embraced with the introduction of value based performance and dependence on the Hospital Consumer Assessment of HealthCare Providers and Systems (HCAHPS) scores for optimal federal reimbursement for their institution. But to achieve the goals of the ACA, a broader vision is needed that incorporates healthcare planning for the community into the role of the executive nurse leader. So comes the transformation.

POPULATION HEALTH

There is a paradigm shift from a medical care model of symptom management, diagnosis, and treatment of individuals to one of population health management of improving the health for groups of patients with similar needs. The goal of population health management (PHM) is to keep a patient population as healthy as possible, minimizing the need for expensive interventions such as emergency department visits, hospitalizations, imaging tests, and procedures.¹ This not only lowers costs, but also redefines healthcare as an activity that encompasses more than sick care, and encompasses the continuum of care. Although PHM focuses partly on the high-risk patients who generate the majority of health costs, it systematically addresses the preventive and chronic care needs of the community that is served by the hospital. In primary care, this is currently being implemented in the patient panels of the medical provider or the formation of medical homes.

ROLE OF THE EXECUTIVE NURSE LEADER

To make an impact on health and not just provide care, the executive nurse leader needs to be the champion advocate for their specific community health needs utilizing the networking of internal and external resources in the health system and formation of ACOs. The executive nurse leader is in the best position to advocate for the community health needs

and be an agent of change. As a leader, one can advocate in obtaining resources, promote improvement of health agendas, identify champions in the health system and community, and partner with the local board of health and other community-based organizations.

To lead the journey on the improvement of population health, the executive nurse leader must understand the specific community health needs of the community. Provisions of the ACA require each nonprofit hospital facility to regularly conduct a community health needs assessment and adopt an implementation strategy to meet identified community health needs. In conducting the assessment, nonprofit hospitals are required to take into account input from persons who represent the broad interests of the community served, including those with special knowledge of or expertise in public health.²

Prior to the passing of the ACA, 12 states, including Massachusetts and Rhode Island, already had regulations or laws requiring community assessments. In my research survey, there were 45 nurse leaders who replied that their hospital conducted a community health needs assessment. Fifty-three percent ($n = 24$) of executive nurse leaders had input into the community needs assessment. The nurse leaders most involved with the community health needs assessment were the executive nurse leaders from community hospitals. They were also most familiar with the results of the assessment and the generated report.

These plans are public, with some hospitals utilizing their Web site to delineate their community plan. The objective of the community assessment and health planning document is to start to address the community and population needs. It is not meant to be a marketing plan. Unfortunately, programs are sometimes developed and driven by reimbursement incentives instead of the community need to improve health. The lack of behavioral health community resources is a good example. Partnership models should be developed that include the community leaders who can contribute to defining the needs, and healthcare leadership incorporating this information into shared goals and allocating resources and staff to manage the specific health programs that address community needs.

EXECUTIVE NURSE LEADER SKILL DEVELOPMENT

So, what are the skill sets and experiences necessary for the executive nurse leader to understand community health needs and be an effective community health advocate? The executive nurse leader must be involved in the hospital's community health assessment process, and the development of the community health needs strategic plan to address the issues. Strategic initiatives should also be integrated into goals of the inpatient and outpatient settings of nursing. One would expect the mission and vision of the hospital would include the community health commitment of improvement in population health.

The executive nurse leader needs to know what public, community, federal health, and social determinant data are available regarding the health of their community and how to

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