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# Geriatric Nursing

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**NICHE**  
Nurses Improving Care for Healthsystem Elders

NICHE Section

## Innovation for geriatric care with an academic-practice model

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The current U.S. health care system faces a crisis as the number of older adults with multiple chronic conditions begins to exceed the number of health care providers properly trained to provide quality geriatric care.<sup>4</sup> Academic-practice partnerships can mitigate this crisis by aiming to train the workforce under programs designed to deliver high quality care. Geriatric Outreach and Training with Care (GOT Care!) is an innovative academic-practice model designed to meet these aims. GOT Care! was developed through a Health Resources and Services Administration Nurse Education, Practice, Quality, and Retention-Interprofessional Collaborative Practice grant project to prepare the future healthcare workforce with knowledge and skill for best practice in interprofessional geriatric care, leading to improved outcomes for the growing population of older adults. The GOT! Care model embraces Interprofessional Collaborative Education and Practice (IPCP)<sup>1</sup> a method to improve health care outcomes. We involved students and geriatric expert faculty from Nursing, Medicine, Dental Medicine, Pharmacy, Physical Therapy, Public Health and Social Work from a public university, collaborating with a local health system. Health care team members were integrated together and coordinated as a ring of care surrounding the vulnerable older patient, the central element of the model. The team connected to the patient directly and through their primary care provider, family, caregiver, and community support systems to maximize patient outcomes.<sup>2</sup>

Key stakeholders in GOT Care!, patients, the partner health system, and students, were afforded the strengths and expertise of this academic-practice partnership. Patients and health system benefit from the participation of academic faculty teams, focusing on data from the community health needs assessments.<sup>5</sup> Geriatric Care was a priority identified in this project, due to high emergency department (ED) use for ambulatory sensitive conditions in the 65+ age group. Common and chronic medical conditions, considered ambulatory sensitive such as chronic obstructive pulmonary disease (COPD), bronchitis and asthma, hypertension, diabetes, and heart failure are unlikely to result in hospitalization when properly treated in an accessible and high quality primary care setting.<sup>5</sup> This

high ED use reflected an opportunity for improvement by the academic-practice partnership.

The process for GOT Care! began with two full days of training for students, then students and faculty teams participate in an outreach program to vulnerable older patients with high ED use and multiple chronic conditions. Teams performed an in-home comprehensive geriatric assessment to better understand factors related to ED use and to focus on methods to reduce this and overall risks for hospitalization and institutionalization. Students developed a better understanding of the assessment process, risk factors to mitigate, and complexities of care coordination and case management with the help of our Geriatric Nurse Navigators (GNNs). Ultimately, primary care providers received feedback from the team, with suggestions for reducing an individual older patient's risk for unnecessary ED use, hospitalization, and institutionalization.

Foundational to the work of the outreach program, was the role and efforts of our GNNs. The nurses selected for this role came well-prepared with their designation and training as Geriatric Resources Nurses (GRNs), obtained through preparation from the NICHE Program. These nurses were full members of our team and were critical to the success of the program. GNNs carried out many pivotal responsibilities including selecting patients with the highest need for the program, communicating with the patient's primary care providers throughout the program, and providing geriatric nursing expertise for case management and care coordination. GNNs interfaced with and make linkages for patients to many resources such as social service case management, mental health, geriatric care resources, consultants, families, and caregivers. These nurses added tremendous value for our patients by reducing risks and developing supports to lead to improved outcomes. Their abilities and execution toward improving geriatric care within GOT Care! is a testament to the preparation they received under the NICHE GRN program.

Overall outcomes of this academic-practice partnership are positive on many levels and are described elsewhere.<sup>3</sup> All stakeholders of this project benefited from their involvement, in GOT! Care. Our team of faculty and students were afforded an excellent experience in IPCP geriatric care, which will carry them

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into the future toward building a better prepared geriatric health care workforce. The health system benefited from the collaborative opportunity to improve care for its vulnerable older patients with the expanded resources of a university. Patients benefited from an in-home comprehensive geriatric assessment to assist in reducing their risks for emergency department use, hospitalization, and institutionalization. Outcomes and care coordination for our patients was enhanced with the skills and knowledge of our GNNs. GOT! Care provides an example of how NICHE resources can be utilized by an academic-practice partnership to improve the quality of care provided to older adults. The nurse's understanding of best practices to improve geriatric care as GRNs was of high value to our patients, students, faculty, and overall program. Academic-practice models such as this should continue to be developed and supported to bring the resources of a university together with a clinical practice site.

## References

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