Welcome to the Augusta University College of Nursing

- University System of Georgia flagship College of Nursing
- Campuses in Augusta and Athens; Columbus State U campus
- Four degree-granting and 4 advanced-practice certificate programs
- 863 students: 497 graduate and 367 undergraduate





College of Nursing Signature Projects



East Central Regional Hospital



Greater Augusta Healthcare Network



Healthy Grandparents Program



Cervi Cusco, Peru Study Abroad



Costa Layman Health Fair



Healthy Start Initiative

Rural and Underserved Outreach

AGENDA

- 1. Community Healthy Start, HRSA-funded service: Dr. Sandra Inglett
- 2. ImPPAACT, HRSA-funded training: Dr. Darrell Thompson
- 3. BHWET, HRSA-funded training: Dr. Darrell Thompson
- 4. Rural Access to Care, PCORI-funded research: Dr. Julie Zadinsky
- 5. N-PEP, proposed training: Dr. Beth Nesmith



- HRSA grant funded for \$750,000/year for 5 years (2014-2019).
- Reduce infant mortality & LBW infants
 - Improve women's health before, during, and after pregnancy
 - Promote quality services,
 - Strengthen family resilience,
 - Achieve collective impact, and
 - Increase accountability through quality improvement, performance monitoring, and evaluation.
- Catchment area of Burke & McDuffie County, Georgia
- Case-manage approximately 450 high risk women & children via home-visits
- Stable program continuously funded since 1999

Challenges

- Lack of accessible, acceptable, affordable
 - OB services in area rural hospitals
 - Specialty expertise and related services
 - Federally Qualified Health Center
 - Dental services
- Risk factors for prenatal patients
 - Later entry into OB care
 - Increased number of risk factors, including depression, obesity, asthma, chronic BP
 - Increased number of STDs
- Social Determinants of Health
 - Lack of income, transportation
 - Inadequate education, low health literacy
 - Difficulty navigating access to insurance/Medicaid

Future Opportunities

Improve Low Health Outcome Rankings (Burke 141/159; McDuffie112/159)

- Increase and focus on preventive care
- Ensure that all professionals practice at top of license
- Implement APRN strategies to improve health care by
 - Expanding & increasing APRN practices within the local health departments
 - Preparing APRNs for tele-methods of delivery, including mental health & OB services
 - Designing and providing innovative pregnancy programs such as centering



Rural Health Immersion within Primary Care Partnerships for APRN Academic and Clinical Training (ImPPAACT)

Funded By: Health Resources and Services Administration's Advanced Nursing

Education and Workforce Program

Funding Period: July 1, 2017 until June 30, 2019

Total Funding Amount: \$1,230,887

\$550,624 for Year 1

\$680,263 for Year 2

Project Director: Dr. Jean Pawl

Trainee Academic Disciplines: Doctoral Level Family Nurse Practitioner Students

Formalized Partner Organizations: MedLink Georgia, Inc., Community Health

Care Systems, Inc., Medical Associates Plus





ImPPAACT

Mission:

Expand access to high-quality primary care services in rural and underserved Georgia health settings through formal academic-practice partnerships that educate doctorally-prepared Family Nurse Practitioners with the knowledge, skills, and commitment to provide comprehensive primary care to vulnerable populations.

Vision:

Produce premier DNP-FNP graduates with the knowledge, skills, and commitment to provide quality primary care to rural and medically underserved populations.

Structure:

Led by Project Advisory Board, expanded to include students and practicing APRNs, to select and support 30 students over time.



ImPPAACT Project Goals

GOALS

- Create formalized Academic-Practice Partnerships
- Advance the DNP/FNP curriculum, teaching and learning
 - Develop academic faculty, clinic personnel, and preceptors to use and assist students with a wide range of telehealth methods
 - Prepare students for primary care delivery to rural and medically underserved populations, including telehealth methods
 - Foster learning environments that create and sustain a pipeline for meeting the workforce demand in rural and underserved settings
- Enhance the preceptor pool through recruitment, training, and evaluation

OVERALL OUTCOME: the education of FNPs who are prepared to work at full scope of practice and to provide quality and cost-effective care in rural and underserved settings upon graduation.



Behavioral Health Workforce Education and Training Program (BHWET)

Funded By: Health Resources and Services Administration

Funding Period: September 30, 2017 until August 31, 2021

Total Funding Amount: \$1,638,328

\$327,728 for Year 1

\$372,724 for Year 2

\$459,575 for Year 3

\$478,291 for Year 4

Project Director: Dr. Darrell Thompson

Interdisciplinary Faculty: Dr. Peter Rosenquist and Dr. Sabina Widner

Trainee Academic Disciplines: Doctoral Level Psychiatric Mental Health Nurse Practitioner Students, Psychiatric Residents, Master's level counseling psychology students, Post-Graduate Psychiatric Mental Health Nurse Practitioner Certificate

Students



BHWET

Mission of Program:

Provide mental health care to rural, underserved and vulnerable populations within Georgia by easing access to them by offering these services in primary care settings, while educating an interdisciplinary group of trainees in how to better serve these populations, as well as work collaboratively

Vision of Program:

Produce Psychiatrists, Psychiatric Mental Health Nurse Practitioners and licensed counselors who are flexible to work in primary or secondary care settings who have the knowledge and experience to work collaboratively to serve rural, medically underserved, and vulnerable populations

Partners

Medical Associates Plus MedLink Georgia, Inc

BHWET



Use of Collaborative Care Model

Interdisciplinary in conjunction with Primary Care Practice

Use of Telemed/Telepsychiatry

Improved Curriculum

Behavioral Health in Primary Care

Interprofessional Education

Rural/Underserved Care

Improved Access to Care

Increased Number of Professionals to Provide Care in Rural/Underserved Areas



PCORI Rural Access to CareProject



- 2015-2017: Georgia Watch received PCORI Tier I-III awards with AU as Academic Research Partner.
- Tiers I & II: Collaborative group of patients and stakeholders generated 11 access to care research questions.
- Tier III: Georgia Watch & AU working with collaborative group to develop Rural Access to Care Research Proposal.



Research Questions of Most Interest in Rural Communities

- In school-age children with behavioral health needs, comparing ...
 - School Based Health Center (SBHC) model of APRN healthcare using telehealth services, with
 - Primary care physician practice model.
- 2. In adults with type 2 diabetes mellitus, comparing ...
 - APRN-provided chronic healthcare model using specialty telehealth services, with
 - Traditional physician healthcare model

Future Opportunities

- Non-Profit Organization & Academic Institution Partnership is ideal for engaging patients and stakeholders in meaningful research in rural communities.
- Early and continued involvement of rural patients and stakeholders is essential to developing and implementing our patient-centered research.
- Research involving rural healthcare is a valuable learning experience for doctoral students.





Proposed: Nurse Practitioners as Emergency Providers (N-PEP)for Rural Hospitals in Georgia

RATIONALE:

- Rural hospitals in Georgia struggle to provide urgent and emergent care to the citizens they serve;
- Many providers lack training in urgent/emergent care and access to effective consultation with those who do is inadequate; and
- Few providers who are trained in emergency care choose to stay in rural settings.

N-PEP Collaborative Training Program

 Inter-professional partnership between AU College of Nursing, Medical College of Georgia, and the Office of Rural Health

 Post-graduate, doctorally-prepared nurse practitioners in training together with emergency medicine residents

 Additional specialty training in use and application of telehealth/telemed technology as consultative tool in rural setting.

N-PEP Benefits and Costs

- N-PEP-trained nurse practitioners contract to stay in rural emergency care settings for 2 years
- Estimated start-up funding for one pilot site =
 - ~\$260,000
 - Faculty
 - Equipment
 - Training tuition
- Estimated cost savings = ~\$500,000 annually based on N-PEP salary vs MD salary
- Self-sustaining program beginning at Year 3



Summary

Augusta University College of Nursing is

- Committed to APRN education, research and service to deliver healthcare for underserved populations;
- Leading numerous initiatives that include interprofessional and community partnerships;
- Focused on telehealth as Georgia's new healthcare frontier; and
- Educating legislators and other policy makers about ways to overcome barriers to APRN practice in Georgia.

Thank you!

Questions?

