

Leveraging An Academic Practice Collaboration to Enhance Outcomes of Older Adults in a Multi Hospital Health System

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Background

Nurses Improving Care for Healthsystem Elders' (NICHE's) model of care builds geriatric nursing workforce capacity. MedStar Health (MSH) initiated NICHE in 2010 and continued throughout the pandemic. MSH implemented NICHE because:

- 1) quality care for older adults is a strategic priority;
- 2) evidence-based clinical protocols and education are needed;
- 3) the Geriatric Resource Nurse (GRN) and Geriatric Patient Care Associate roles (GPCA) improve knowledge and the geriatric environment;
- 4) NICHE resources are cost effective.

NICHE recognition level is a structural measure of implementation. NICHE member recognition program evaluation has 49 attributes. Senior-Friendly recognition requires evidence of 36 attributes and Exemplar recognition requires all 49.

Three NICHE Knowledge Center (NKC) courses are key to its educational process: (1) 15-hour GRN course, (2) 11-hour GPCA course, and (3) 4.5-hour Introduction to Gerontology (ITG) course. In FY 2021, MSH began stratifying HAPI and falls data by age as a NICHE outcome measure.

Purpose

The purpose of this abstract is to evaluate the sustainment of the NICHE model of care for geriatric nursing workforce capacity during the COVID-19 pandemic as compared with pre-pandemic implementation.

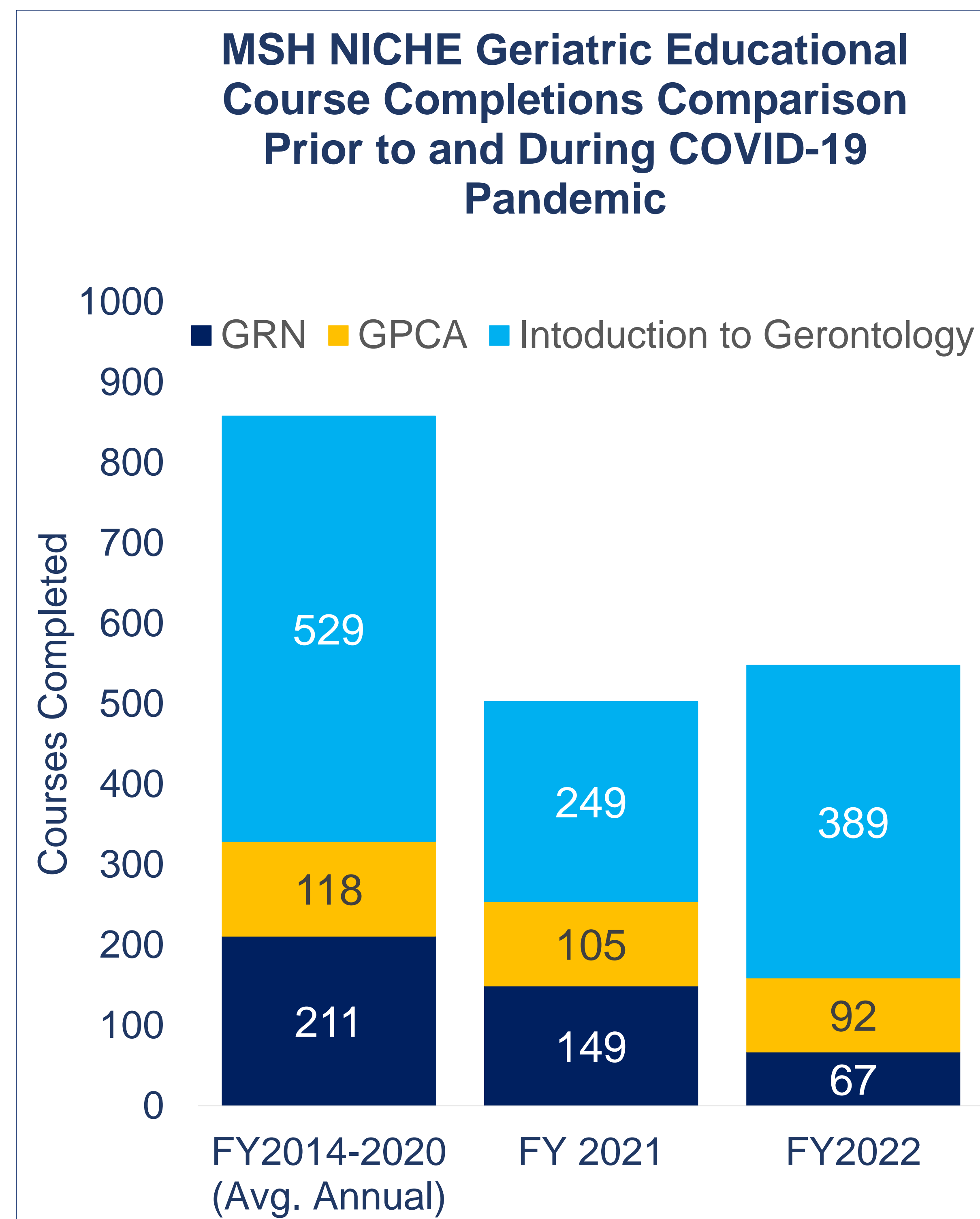
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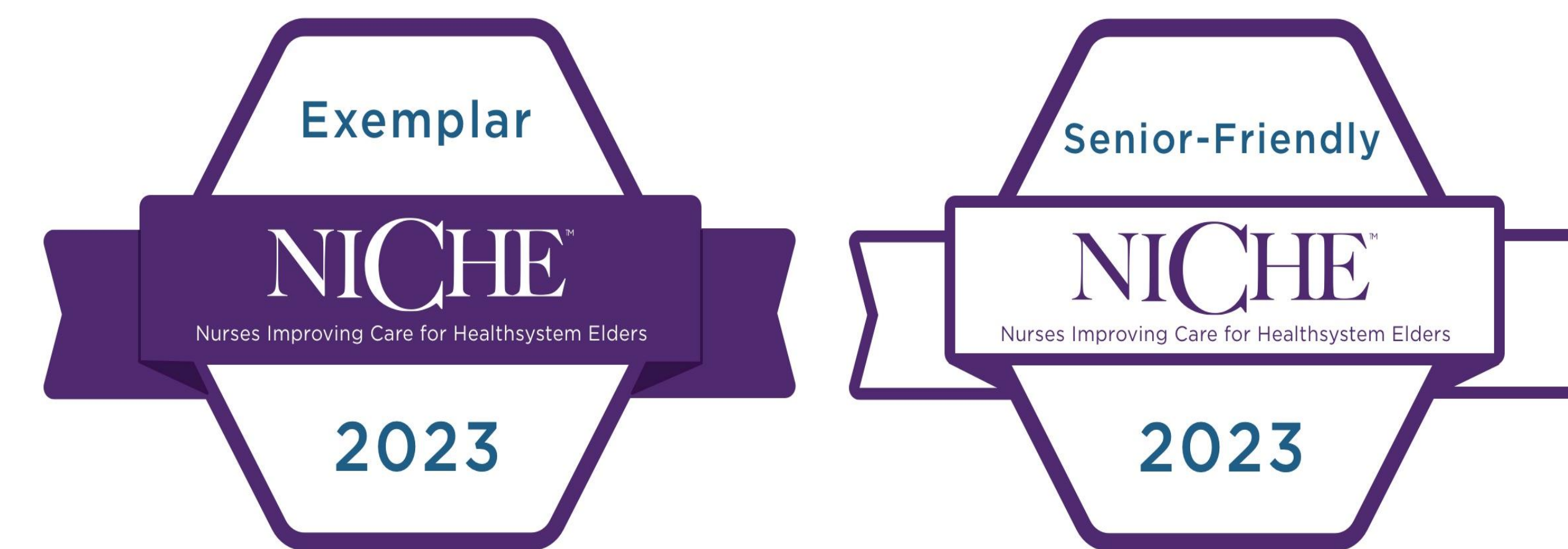
Methods

Program evaluation of pandemic impact using retrospective data. NICHE program recognition levels and annual course completions of pre-pandemic fiscal years (FYs) 2013-2020 were compared with FY 2021 and FY 2022. MSH hospital-acquired pressure injuries (HAPI) and falls in patients 65 and older for FY 2021 and FY 2022 were compared for directionality and magnitude of change.

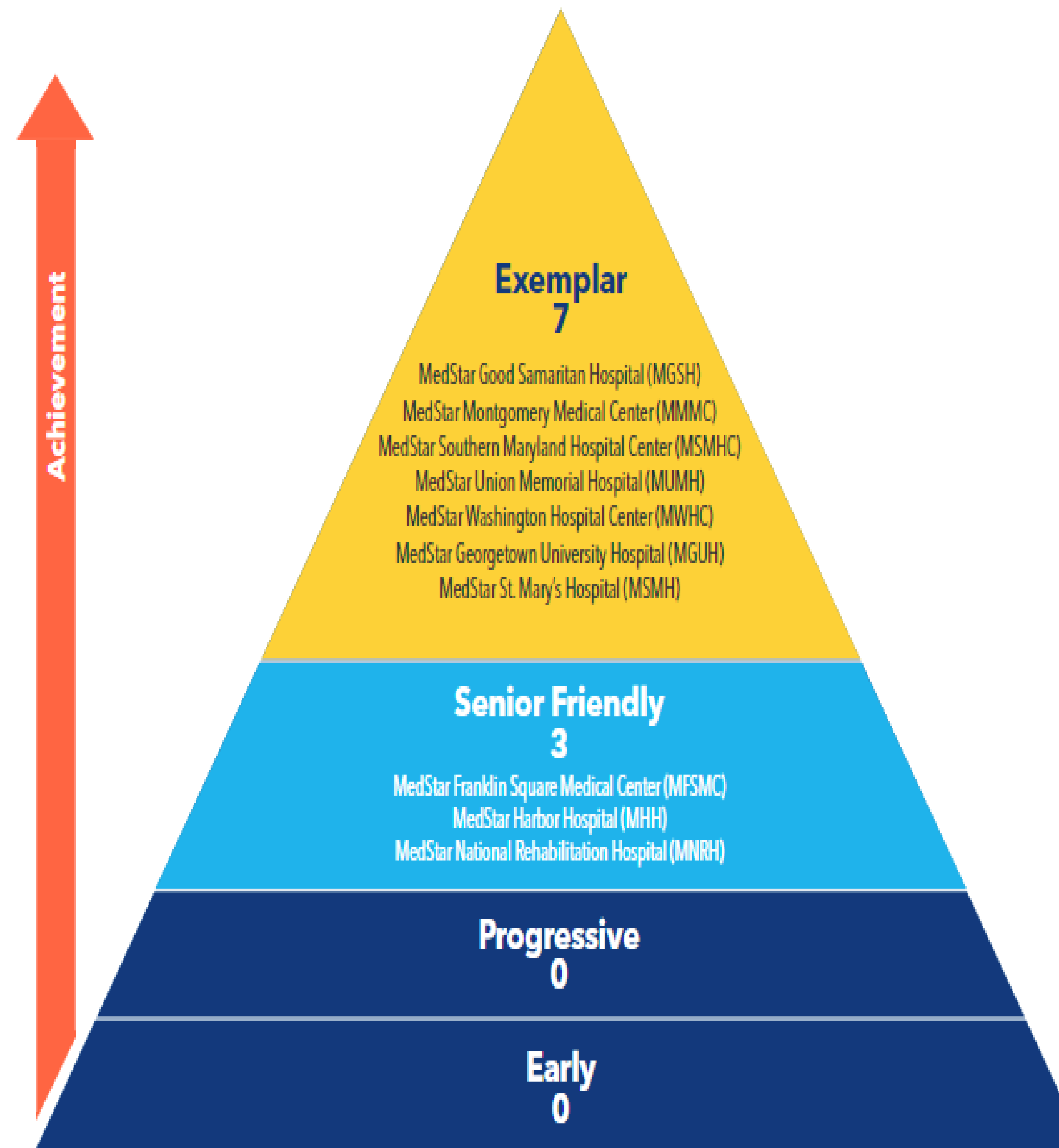
Educational Outcomes



Program Implementation Outcomes



MSH NICHE Recognition Levels as of 2021:
Two hospitals increased levels from Senior Friendly to Exemplar



Clinical Outcomes

Adults aged 65 and older FY 2022 as compared with FY 2021.

- A 36% reduction in Hospital-acquired Pressure Injury.
- 23% reduction in falls.

Conclusion

- 1) All ten MSH hospitals maintained or advanced in recognition levels.
- 2) MSH nursing workforce continued education, but it decreased as expected due to COVID impacts.
- 3) An improvement in HAPI and falls rates in older adults was observed.
- 4) NICHE provides a feasible care model that cultivates a resilient and skilled geriatric nursing workforce.

Limitation

This retrospective analysis to evaluate the impact of the pandemic was based on available data. Pre-pandemic age-specific data for falls and hospital-acquired pressure injury are not available.

Next Steps

- 1) Completion of a targeted gap analysis of NICHE champion roles and geriatric nursing protocols across the health system.
- 2) Utilizing data from the gap analysis will establish goals for annual strategic NICHE nursing plan.