



APP FELLOWSHIP TO DEVELOP SKILLS

UC Health Advanced Practice News

August/September
2018

IN THIS ISSUE

University of California, Davis Medical Center in Sacramento, CA. CME and lunch provided!

**Advanced Practice Symposium
scheduled Sept 5th sells out!**

Nationally recognized speaker Kathleen Flarity will speak at UCD for our annual Advanced Practice Symposium. Her lecture title



“Passion for Practice” will review compassion fatigue, burn out and self care for the advanced practice provider. Kathleen Flarity DNP, PhD, CEN, CFRN, FAEN is a Research Nurse Scientist for UC Health, Colorado. Additionally, Colonel Kathleen Flarity is the Mobilization Assistant to Command Surgeon, Air Mobility Command, Scott AFB, IL. She is an experienced nurse practitioner, emergency and critical care flight nurse with over 37 years of military service. She has spent decades inspiring and empowering leaders; building trust, earning respect, and motivating others to foster success. She is a renowned clinical expert and has published 13 book chapters and 26 articles governing emergency/advanced practice and flight nursing including 8 research articles. Dinner Provided, 2 CME credits for attendance. Contact Christi DeLemos to be added to the wait list.

Advanced Practice Fellowship launched at UCD

Transition to advanced practice is often a challenge for providers that choose a specialty practice. Bedside nurses are not only challenged with learning new content, but also a new way of thinking. At UCD, we will be launching three fellowship programs aimed at creating a practice based learning environment for new graduates pursuing a career in trauma surgery, neurological surgery and interventional radiology. The new program is open to new graduate NP and PA advanced practice providers across the country. The fellowship program development effort is being led by an advisory board with representation from advanced practice providers in all three areas, supervising physicians, the center for nursing research and the Betty Irene Moore school of nursing,

The one-year program will focus on building on existing skills with structured learning. Key learning strategies:

- Direct patient care in a supervised structured environment
- An understanding of the mission, vision and advanced practice quality metrics at UC Davis

- Simulation training at our state of the art center for virtual care
- Didactic courses in topics related to your specialty.
- Online-learning modules,
- Quality improvement conferences, grand rounds, journal clubs and complete other appropriate clinical rotations to assure comprehensive exposure to procedures and multidisciplinary collaboration along the entire care continuum.

The program will conclude with a fellow graduation program in December of 2019.

Advanced Practice Grand Rounds Register today!

<https://www.eventbrite.com/e/advanced-practice-grand-rounds-tickets-48883769671>
Please join us for the September Advanced Practice Grand Rounds. The topic is "Surgical Innovations for Parkinson's Disease."

Our speaker is Laura Sperry is a board certified Adult Nurse Practitioner and the Clinical Coordinator for the Deep Brain Stimulation (DBS) Program at the

BILLING TIP OF THE MONTH



Student documentation

If you are working with an advanced practice student, you **cannot** use linking language or point the billing department to their documentation. Students are not credentialed health care providers in our system and their documentation is not eligible for billing. You must create your own note for any patient seen with a student.



COSTS study underway

Across the country, healthcare organizations are reshaping their teams to ensure that advanced practice providers are being used to the top of their license. As the labor market budget grows tighter, the COSTS study aims to demonstrate the substantial value that APP's bring to their teams. Advanced practice providers in multiple surgical specialties are participating in the study to better understand the value of indirect care in the inpatient setting.

FAST FACTS

96%

Of all advanced practice providers prescribe medications. All 50 states have prescribing privileges for advanced practice. On average nationally, APP's write 23 prescriptions per day.

33%

of the healthcare providers joining the US workforce by 2030 will be nurse practitioners (NPs) or physician assistants (PAs), researchers project.

FOR MORE INFORMATION

N Engl J Med. 2018;378:2358-2363. Published online June 20, 2018.



Remote video monitoring system that allows for monitoring of multiple at risk patients from a single location

Coming to a floor near you...
telesitter

By Elizabeth Maese

What is a Telesitter?

Telesitter is a video monitoring system. The purpose of the video monitoring is to provide continuous visual monitoring of inpatients by trained monitor staff (located on south 4). The hope is that this will allow for the hospital to provide observation to more patients, improving the safety of our patients.

The monitor consists of a 360 degree camera, low light sensitivity so that it can be used at night, 2-way speaker allowing the trained personnel to communicate with the patient and the patient to respond back, alarm that can be activated by monitor personnel for emergencies, and a privacy indicator light. These functions are all controlled from the control center only. In order to contact the personnel you have two options, you may call the number that is on the actual monitor, or you may vocera "Telesitter". It is also important to know that it does not record any audio or visual.

Where will the monitors be used?

The pilot floors for this system will be on Davis 14, Davis 11, and Tower 4 prior to rolling out to all inpatient units.

When will this start?

You will start seeing monitors on August 2. The way you can tell if a room has the monitor is by the AvaSys flag on the doorway.

Who will utilize this system?

Patient selection will be determined by the nursing staff and Nursing Supervisor based

on protocol (Patient Care Standard IV-72). There should be no need for the provider to order anything in EMR. Patients that are classified as High Suicide Risk will not be eligible and will still require a 1:1 Special Duty Caregiver.

How does this impact the provider?

There should be very little impact on you as the provider. If you need to do an exam that would require privacy, you may notify the monitor personnel by Vocera or phone that you need "privacy mode" and for how long. You will be able to tell that the camera is in privacy mode by the light on the monitor turning off.

As always, our role is to monitor our patients and ensure we are providing the best possible care. If you see an adverse effect that the patient has related to the Telesitter, it is our responsibility to notify the nursing staff, the on-call Nursing supervisor, and/or file an IR if indicated. It is also our responsibility to share the positive outcomes that may come from this system.



For more information on the system you may go to UC Learning and review the online introductory course.