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Dual Nursing Role: Effectiveness in Adolescent Transition and Perinatal Outreach.

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Introduction

The dual clinic nursing role was developed to provide an RN specialty nurse two days a week and two days per week at the pediatric and youth clinic at McDowell Healthcare Center. This position was developed to provide adherence and provide comprehensive medical care for multiple populations: pregnant women, newborn infants, and adolescents. This nursing role is supported by Ryan White Part D funding.



Description

Program aimed at the pediatric clinic, develops comfortable relationship with shared nurse who also cares for them and their babies at the pediatric clinic. RN provided education and patient information, coordinated prenatal visit with the PA, and discussed follow up information prior to delivery. Outreach education given to following hospital. Mothers whose children's children were receiving care in the pediatric clinic could also use a similar role in their adult role, further strengthening relationships. Transitioning from clinic setting to meeting with an adult clinic with the RN present, using the stress of managing the adult medical system and ensuring smooth transfer of medical information to their one adult provider.

Case Scenarios

McDowell Clinic:

- Newly diagnosed from birth or continuing pregnancy and advised prenatal education and support throughout pregnancy.
- Most of PCH by state delivery PCH not contacted for - most out of more shared care from McDowell provider, and coordinated delivery with case manager.
- Patient received newborn care and reduced crying on hospital, one with some of hospital care, education, insurance, transportation, and follow-up with pediatric clinic.

Adolescents:

- Transitioning to Adult Care
- Many not insured due to out of state, aged out of Children's Hospital, worked with establishing adult care.
- Year transition process for birth to adult care, coordinate care with McDowell Clinic.
- Family seen with adolescent status, visited prior to transition, see shared care with adult clinic, followed at adult clinic to ensure comfort and compliance with new medical care.

Phoenix Children's:

- Pediatric known to Bill from McDowell Clinic, met at PCH to meet delivery, support and meet established prior to the adult nursing for the plan for infant.
- Following delivery, hospital case manager notify RN of delivery, review medical record to determine appropriate medication option and schedule 2 week follow up visit.
- RN visited, and pickup medication for discharge home or provide education, provide patient education and provide follow-up appointment education.

Mothers' Group:

- Created by RN after observing three women sitting in waiting area at McDowell providing support for one another and pregnant one who was 16 months old.
- Meet the 1st Thursday of every month.
- Breakfast and education regarding diet, pregnancy, and parenting provided.
- Time allowed for open discussion between families to provide each other with support and answer questions regarding their experiences.



Lessons Learned

The positioning of this RN in both clinics has provided many developmental benefits for providers, families, women and youth.

- Education of pregnant women has improved their understanding of prenatal information and had to vary through effective care and follow-up for their infants. Transition with this been excellent.
- Although released at the pediatric clinic transition to adult care with a familiar caregiver, saving the stress and ensuring the smooth transfer of medical information. Adult care needs could be planned and described in advance, and the care assisted by someone familiar with them. Shared care were more easily directed and coordinated. Management of a large medical system is assisted.

Recommendations

It is beneficial for continuity of care to have one designated staff member who is able to bridge between clinic, for pregnant women, newborn infants and transitioning youth, particularly when these clinics are located at separate physical sites. This role strengthens family/provider relationships, as well as assists in effective communication between providers, allowing for complete, comprehensive coordination of care.