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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 were receiving care in the pediatric clinic could also see a familiar face in their adult clinic, further strengthening relationships. Transferring hospital cases allowed for the appointment in the adult clinic with the RN present, easing the stress of navigating the adult medical system and ensuring smooth transfer of medical information to their new adult provider.

Case Scenarios

McDowell Clinic:

- Newly diagnosed from birth or continuing pregnancy and unclear prenatal education and support throughout pregnancy.
- Most of PCH by state delivery PCH not contacted RN - 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 need of hospital to provide education, ensure APT compliance, to breastfeeding, and follow up with pediatric clinic.

Adolescents:

- Transferred to Adult Care
- Most were required 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 hospital, see shared care with adult clinic, followed at adult clinic to ensure comfort and compliance with new medical care.

Phoenix Children's:

- Practice known to Bill from McDowell Clinic, met at PCH to meet delivery, support and meet established prior to the adult nursing for RN cases by state.
- 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 prior to hospital education and provide follow-up appointment education.

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, easing 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 larger 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.