Becoming the Future We Envision

May we look upon this time with new eyes;
With hindsight for what was;
Insight for what is;
Foresight for what can be.

Schopenhauer

A Call for Reforming Practice

Transforming HIV Nursing in an Age of Reform

Tim Porter-O’Grady, DM, BSc, MSc, APIN, FAAN, FACCWS

“Nursing is unique in that it makes no judgments, is receptive to all, and works tirelessly to create synergy between those in need and the best response to that need……

Rheba DeTornyay

The Core of 21st Century Nursing

Advocacy
Access
Accountability

Honor the shoulders we stand on…
“We can’t solve a problem with the same kind of thinking we used to create it.”

Albert Einstein, 1921
You Have To Be Willing To Learn New Things

Living in the Digital Age

Strategies for Social Change

OK, let’s “drill down” into the new context for healthcare reform...
The 4 “Rivers” (Drivers) of Health Transformation

- Moving from volume to value economics
- Building sustainable accountable care
- Transdisciplinary clinical service models
- User-Driven (patient, family, community)

The PPACA and the Changing Landscape of American Healthcare

- Paid for value, not volume
- From Hospital to continuum
- Primary care, not tertiary care driven
- Creating healthy communities, not just treating illness
- Everyone has access (exchange / marketplace)
- Compete for price, quality, and service (Triple Aim)
- “Bundle” payment reflecting team-gained health outcomes

How Must Healthcare Be Different

**Today**
- Hospital-centric
- Doctor driven
- Provider-controlled
- Vertical decisions
- Compartmentalized
- Illness (tertiary)-based
- Wide variation
- Expensive

**Tomorrow**
- Population-centric
- Member-centered
- Community-driven
- Collateral decisions
- Trans-disciplinary
- Health (primary)-based
- Comparable care
- Value-driven
How Must Nurses Be Different

**Today**
- Procedural
- Positional
- Subordinated
- Task/routine/routine
- Volume of work
- Hospital-based
- Treatment/intervention

**Tomorrow**
- Evidence
- Mobile
- Partnered
- Impact/making a difference
- Value of practice
- Continuum-focused
- Health, patient-centered

HIV Realities/Challenges

- Still increasing rates of infection
- Aging of HIV positive men
- Cultural and social dynamics under-addressed
- Religious and political issues
- Relevance with models of care and service customization
- Evidence-based approaches to prevention
- Making space for nursing as a driver...

What is the Key to Practice Now

- Evidence of efficacy & impact
- Value-based practices/models in HIV service
- Understand treatment as prevention
- Validating what we know / contribute
- Demonstrate how we are relevant/valuable
- Aggregate data from where we find the pt.
- Address “user” expectation/supports
- Skill-set transfer to user community
- Effective HIV care continuum

What Must I Do Now Where I Am Planted (What Does This Mean To Me)

- Ask what phase you are in (PPACA)
- Unit meeting about where you are in this change
- What do we embrace giving up doing differently
- Talking with your Docs. about their changes/roles
- Examining and challenging “work-abouts”
- Address “user” expectation/supports/hand-offs
- Dialoguing role, process, care that is patient-centered
- Raising the “bar” and reducing service variance

Effective Care Continuum

Constructing Accountable Care (PPACA)
“Never doubt that a small group of thoughtful, committed citizens can change the world. Indeed it is the only thing that ever has.”

-- Margaret Mead