

Quality and Safety Matters

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Intersectionality in Our Nursing Care

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Class of 2019

In an effort to be open-minded in this world of increasing complexity, it is helpful to integrate the concept of intersectionality into one's nursing practice. But, what is intersectionality? Intersectionality is an idea that acknowledges the fact that people will experience reality differently depending on who they are. For example, when in the same situation, a high-income, black female will have a perception different than that of a low-income white male. Say that these two people are experiencing the same symptoms and are concerned about their health. Because she is affluent, that black female will find and pay for the care she needs, while the white man may face obstacles that are nonexistent to her. At the same time, her experiences may lead her to value seeing a professional that shares a gender and race, while that may not be of importance to him.

For the black woman, she receives the sensitive treatment she needs and goes on with her life. But for the white man, it is not so simple. Perhaps he lives geographically close to a Magnet hospital, but cannot afford to seek care there. So, he delays his treatment and his symptoms worsen until he is unable to work. When he is finally able to receive treatment, perhaps his outcome is not as positive as it would have been if he had been treated in a timely manner. This isolated, hypothetical example highlights how the components of a person's identity affect the quality of their care and safety and in turn build upon preexisting health disparities.

Nationally, nurses represent the largest proportion of the health care professionals, so we must acknowledge that the quality of care and satisfaction of our patients can be compromised because of who our patient is. We are invited to ask ourselves: What can we do to make sure that our patients are satisfied and receiving the highest quality of care, regardless of who they are? The answer lies in recognizing and responding to intersectionality into our nursing practice.

I had the pleasure of interviewing two health care professionals on how they integrate intersectionality into their practice. Ann Farrow is a nurse practitioner working in community mental health at St. Peters and Suburban Mercy hospital, and while she has not seen anyone treated differently based on some facet of their personal identity, such as religion, she has noticed that those with less money have fewer choices in their care, as they may be limited to clinics and cannot afford to have annual physicals. She compensates for this by accepting a wide range of insurance and having a "sliding scale" adjustment for payment according to the patient's financial situation (Personal communication, Ann Farrow, October 2016).

Dr. Ati Olukoya of Capitol Health has had similar experiences in that she has not witnessed discrimination, but she has noted that a lack of awareness affects the care that people receive. She states that those unaware of self-care practices may have more health problems than those who are aware of self-care practices. At the same time, those unaware of affordable care, such as undocumented immigrants, may not seek care at all. But, as we know, late treatment affects outcome. To improve the quality of care and satisfaction of her patients, Dr. Olukoya connects people without insurance to government and charity organizations that can provide proper care at reduced or no cost. (Personal communication, Ati Olukoya, October, 2016)

On a micro scale, the experiences of these practitioners show us that people are working to treat patients with fairness and dignity. However, the macro trends clearly shows that those who are at greatest risk for receiving a lower quality of care are those marginalized by poor education or poverty. Intersectionality allows us to bridge some of these disparities. So where do we get started?

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IHI Modules at TCNJ

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As nursing students, we constantly work to stay current in healthcare advances and make ourselves better practitioners and more competitive candidates for jobs and externships. The Institute for Healthcare Improvement (IHI) has an array of modules that TCNJ has been utilizing since fall 2015 to aid in our growth as healthcare providers. IHI is a non-profit organization that has been working for 25 years to educate others to improve healthcare worldwide. Sophomores and freshmen now have 13 IHI modules officially as part of their curriculum in order to earn a Basic Certificate in Quality and Safety. While the juniors and seniors have some of those modules incorporated into their studies, they will need to do a few additional modules to complete the required 13 to earn the certificate. The IHI modules are resources that complement what TCNJ's students learn in class, clinical, and lab.

Completing these modules benefit students whether just starting nursing school or graduation is right around the corner. The courses are divided into 3 levels and 5 categories. Level 100 is introductory, level 200 is more specialized, and level 300 is project based. The 5 categories of courses include improvement capability, patient safety, triple aim for populations, person and family centered care, and leadership. Each individual module provides a learning experience through videos and written text. A post-course test must be successfully completed and a certificate can be printed as proof of completion. Even after graduation, students can complete additional IHI modules to learn more and to use as continuing education credits once they have become a nurse.

When IHI identified specific modules to be completed in order to obtain the Basic Quality and Safety Certificate, faculty from TCNJ's BSN program decided to incorporate them as part of the curriculum for our current sophomore and freshman students. In order to earn this certificate, students will complete all 13 modules during their 4 years at TCNJ. All 13 are level 100 courses that provide a solid instruction to teach the most basic principles of providing safe, high quality healthcare. Among the 13 courses, there is at least 1 module from each of the 5 main course categories. This ensures that the education that comes with this certificate is well rounded and addresses the key points that the IHI strives to teach.

Completing these modules sets us apart from other nursing programs. It demonstrates that we are able to pull from other sources and put in extra time outside of class to strengthen our knowledge. Speaking from personal experience, I believe these IHI modules have been a beneficial addition to our program. I printed out the certificates I earned through IHI and put them in a portfolio for when I interviewed for nurse externship programs. My nurse manager was impressed when I showed them to her and I was lucky enough to have been offered one of only 15 positions in University of Pennsylvania's nurse externship program. The IHI continues to be a valuable source that supplements our education at TCNJ by teaching the key components of quality and safety to healthcare professionals.

Students View Escape Fire

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With election day just around the corner, much focus in the news and presidential debates has been directed toward healthcare. Therefore, it is appropriate that the senior nursing students at TCNJ are learning about the state of the healthcare system. We will have a significant role in the healthcare system in a few months and through education, we empower ourselves to improve healthcare in the future as practicing clinicians.

Recently, we watched the documentary, *Escape Fire: The Fight to Rescue American Healthcare*, which outlines three main issues with our current system: over-medication, the desperate need to shift focus from symptom management to disease prevention, and reimbursing services rather than paying for quality of care or outcomes. The latter two issues have contributed to a failing system, in which morbidity and mortality rates are entirely too high for the trillions of dollars the U.S. spends on healthcare annually. The film urges for an 'escape fire' to save our healthcare system that is on the brink of combustion, citing that the answer is among us.

The film presents issues with over-medication, specifically focused on over-prescription of pain medications and narcotics to members of our armed forces, as a key problem in our healthcare system. Excessive medication can have serious consequences, one of which is respiratory depression, a potentially fatal complication. As future nurses, we have the responsibility to advocate for the safety of our patients and talk to prescribers in order to find the best answer to treat our patients' pain. Nurses can advocate for appropriate dosages of narcotics and the use of non-pharmacological pain relief interventions, such as acupuncture, as effective and safe alternatives. Moreover, nurses can complete medication reconciliations with their patients, in order to ensure that all medications are being prescribed safely. These are just a few examples of nursing actions that keep patients safe as possible.

The film also discusses the need to shift the focus of the American healthcare system from symptom management to disease prevention. Many healthcare experts agree that in America, we can treat patients' symptoms with world class skill, knowledge, technology, and medication. However, we do not focus on aspects that could prevent the necessity of these expensive treatments, some of which are invasive and most of which, do not improve mortality rates in the long run. If American healthcare as a whole transformed its understanding of providing healthcare from solely treating symptoms to preventing diseases, we would be a healthier nation with decreased healthcare expenses and morbidity rates. Many healthcare professionals do not spend the necessary time educating patients on disease prevention. Nurses can have a major impact in changing this norm. A huge aspect of a nurse's role is patient education; more specifically, nurses teaching patients how to manage their conditions, prevent diseases, and lead healthy lives.

In nursing school, a large emphasis is placed on developing teaching skills so we can effectively educate patients. By providing effective education, nurses can improve quality of care and consequently, patients' quality of life. As the American healthcare system works to shift its focus to disease prevention, the demand for nurses will rise and teaching skills will be highly valued.

Finally, the film argues that reimbursement of healthcare services in America must change. Currently, physicians and other specialists are paid based on the amount and type of treatment they provide, some of which is extremely expensive and not always the best option. Education on disease prevention is not currently reimbursed by insurance companies, likely because patient education is more subjective than the objective nature of medical treatments. As a result, there is no financial incentive for providers to educate their patients. As a step to saving our healthcare system, healthcare reimbursement in America needs to be changed. All healthcare professionals need to be compensated for the education provided to patients. By providing education on disease prevention, patients will be informed and empowered to manage and maintain optimal health, which would lead to decreased healthcare expenses, morbidity, and mortality rates nationwide. It is suggested that the reimbursement system should change from paying for services to paying healthcare professionals based on patient outcomes. This way, all healthcare professionals would be financially inclined to provide the highest quality care to patients. Nurses can also advocate for better quality and safer care for their patients by thinking upstream and getting involved with government policy. Nurses can lobby and make their voices heard through professional organizations that will help bring about pervasive improvements in our system.

In conclusion, any nursing student preparing to enter the healthcare system should watch this documentary, as it provides an invaluable perspective. Aside from being educated on the current state of healthcare in America, future nurses will make connections on the importance of their role within the system as well as the necessity for developing a skillset to improve our failing healthcare system. Anyone interested in viewing *Escape Fire: The Fight to Rescue American Healthcare* can obtain the film through the TCNJ library.

Intersectionality

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Living intersectionality means being financially flexible and seeking out and advocating for those in need. Although I am a sophomore and have not yet begun my clinical experiences, I have some of my own ideas about how to practice intersectionality in nursing; I believe it is almost synonymous with cultural competency, the idea of learning about the people you serve in order to provide the best care possible¹. You don't need to look and live like the people you serve to give them competent care.

Learn about the place in which you are working. This includes picking up on the common vernacular, religious practices, and the differences between community groups. Using speech that is more inclusive and being accepting of all fits in perfectly with intersectionality. Integrating these steps into practice, aligns with patient-centered care, improves patient satisfaction, and shows the patient that you are tailoring your care to them. This allows trust and communication to flourish. Lastly, intersectionality is about forgiving yourself when you slip up. Like in nursing, it is about learning from your mistakes and not making the same one twice.

1. Edelman, C. L., Kudzma, E. C., Mandle, C. L. (2014) *Health Promotion Throughout the Life Span*. St. Louis, Missouri: Elsevier.

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