

Integrating Primary Care in Baccalaureate Nursing Programs

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Background & Significance:

Registered Nurses (RNs) with expertise in primary care are essential to improve health outcomes and quality of care in areas such as chronic disease management, transitional care management, and preventive care. However, primary care didactic and experiential learning are lacking in many baccalaureate nursing programs.

Clinical Question:

What is the best way to integrate primary care into baccalaureate nursing programs?

Evidence:

CINAHL and Google Scholar were searched for nurse-led interventions in primary care, as well as evidence of such curriculum in baccalaureate nursing programs.

Intervention Implementation:

Primary care activities consisting of didactic and experiential learning were integrated into an adult health nursing course. Didactic integration consisted of active learning activities, lecture, and 2 group assessments focused on primary care competencies. A subset of students attended a clinical day in a primary care setting, either conducting triage or conducting Medicare Annual Wellness visits. The baccalaureate curriculum was evaluated by program faculty for comfort, feasibility, and presence of 32 primary care activities.

Evaluation:

Student self-efficacy with nine primary care activities was assessed pre- and post-intervention via survey. Students, faculty, and preceptors evaluated the intervention via survey, clinical faculty focus group, and co-faculty debriefing. The baccalaureate curriculum was evaluated by program faculty for comfort, feasibility, and presence of 32 primary care activities.

Results:

Student (n=102) self-efficacy increased in the following primary care domains: transitions of care management ($p=.023$), care coordination ($p=.002$), triage ($p <.001$), and telehealth ($p <.001$). Clinical students (n=12) and preceptors (n=5) reported overall positive experiences with support for ongoing primary care curriculum. Clinical faculty focus group (n=4) and co-faculty debriefing (n=2) revealed themes of strengths, concerns, and suggestions for improvement. Activities most lacking within the curriculum were those unique to primary care, and activities most prevalent bridged to other facets of the program.

Significance/Conclusion:

Primary care activities can be successfully integrated into existing courses and should include experiential learning. Implementation of the *The Essentials: Core Competencies for Professional Nursing Education* from the American Association of Colleges of Nursing provides an ideal time for further program integration of lacking primary care content.