State Executive Health Care Leaders on the VALUE OF NURSES

Cheri Rinehart and John McDonald both credit their early nurse training for helping to shape their perspectives and approaches to their leadership roles today.

“Having been a registered ICU nurse providing direct patient care for approximately 10 years has certainly had a positive impact on my career as a health care executive,” says John C. McDonald, CEO of the Arizona Alliance for Community Health Centers (AACHC). He says the position gave him firsthand insight around patient care delivery through which he gained a better understanding of how to promote patient centered care as an administrator.

The experience, he says, allowed him to understand the needs of patients along with the desire of clinicians to give effective, quality care that is seen as a value to patients and the team that supports the health care delivery process.

Cheri L. Rinehart, President and CEO of the Pennsylvania Association of Community Health Center (PACHC), who started her health care professional journey as an oncology nurse, says the experience has helped throughout her career to keep patients as her “north star.” Early on she learned quickly that she needed to build on the solid foundation of knowledge gained in college by being committed to lifelong learning.

“If a patient had a surgery, medication or condition I was unfamiliar with,” she says, “my commitment to serve them to the best of my ability translated into a strong drive to learn what I didn’t know and be willing to share that knowledge.” Rinehart says she carries that same commitment in her current position as head of PACHC.
The Changing Role of the Nurse in Community Health Care

Rinehart and McDonald agree on the important role nurses play today in community health. McDonald believes today’s focus on primary and preventive health care is moving more nurses to practice in community health settings. “Nurses,” he says, “understand the importance of preventive care and managing potential complications from chronic diseases such as those with diabetes.”

In addition, he says nurses see that community-based care helps to address special populations and high prevalence health care concerns within certain communities. “Nurses often take a lead role in community-based outpatient care,” McDonald says, “and help assure the health care team is focused on each patient. Physicians and nurses have long been teammates in providing patient care and, thankfully, that team approach has expanded to all that touch the patient.”

Rinehart says that nurses in community health, like those in other practice venues, are increasingly valued as professionals and have new opportunities to serve in leadership roles. “Advance practice nurses,” she says, “are increasingly being counted on to serve as primary care providers in community health — perhaps initially driven by physician shortages but now by recognition of the competency they bring.” She points to the fact that five of her state’s health center CEOs are nurses and they all run high quality, thriving health care facilities that are meeting the needs of the communities and people who count on them.

Nurses and Value-Based Transformation in Health Centers

Rinehart considers nurses to be the “glue of an effective interdisciplinary health care team,” which is critical to increasing care quality, lowering costs and improving patient health. In pointing out that nurses are patient focused, she says they have been providing case management (even before it was called that), are highly trusted and are accustomed to exploring the social determinants of health (SDOH) that might affect patients’ health outcomes — again, even before these factors were formally labeled SDOH.

McDonald adds that “nurses can recognize when care is efficient and effective, and when it is not” because of their expertise and ability to identify value in the care delivery process. He says, “expanding this concept to the general national care delivery process is a short leap for nurses and they can play an active role in decreasing the cost while improving patient-centered care.”

Recruitment and Retention of Nurses for the Health Center Movement

McDonald points out that the majority of nurse training is in the hospital setting, which is why state/regional primary care associations and NACHC should support nurses in their training experiences. He feels this is especially true in working
As CEO, I keep my license active and am thankful that I am known in the community as a registered nurse.”

— JOHN C. MCDONALD

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with community health centers, to give nurses better insight as to what health centers do. Greater exposure to nursing outpatient care is needed so that nurses will become more aware of career paths in an ambulatory setting.

AACHC manages the Arizona Area Health Education Center (AHEC) program for central Arizona, which focuses on developing integrated, sustainable statewide health professions workforce education programs with emphasis on primary care and increasing access in the state’s rural and underserved communities. McDonald says this provides a unique opportunity for all levels of health care professional and support staff. In addition, AACHC works with state and national nurse associations and often partners with them on legislative proposals.

Rinehart believes that “giving nurses the ability to work to the top of their licenses is important and brings with it much job satisfaction.” She says it’s also important to recognize nurses who are making an exceptional difference. Her association recognizes nurses and other outstanding individuals through its APEX Awards (Awards for Primary Care Excellence), which are presented each year.

PACHC also creates opportunities for peer networking to provide mentorship, share challenges and successes, and support retention. The association’s Pennsylvania Primary Care Career Center has been successful in helping many of the state’s health centers recruit outstanding nurses and nurse leaders. It also supports health centers in retention strategies.

Advice for the ‘Newly Minted’ Nurse

McDonald advises new nurses to “practice patient care first” in a health center so they are immersed in the process they want to improve. Then, if desired, he says they should move toward more management/administrative career roles where they can impact more lives than they do as a nurse giving one-on-one direct patient care. Helping a primary care association and NACHC on issues of health care policy and value-based care can impact a broad range of health center patients and expand a nurse’s ability to improve care in the United States as a whole.

Rinehart says she would tell a nurse who is just beginning her career that “there is nothing more rewarding than making a positive difference in someone’s life, and there is so much opportunity to do so, whether through direct patient care at a health center or through training, education and policy advocacy at a primary care association at the state level or at the national level at NACHC.”