

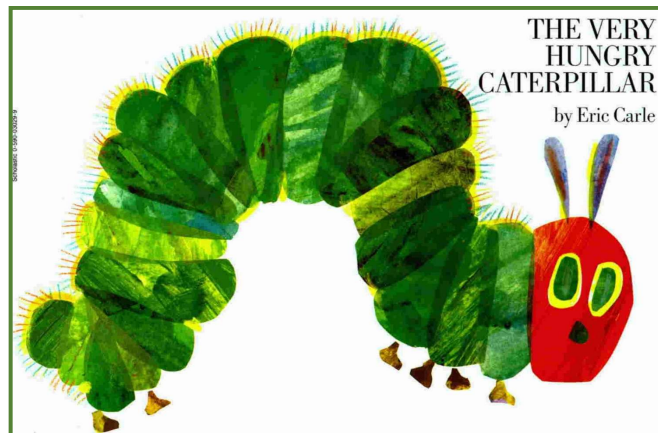
# Sustainable Funding in Leadership Science

Connie White-Williams, PhD, RN, NE-BC, FAHA, FNAP, FAAN  
Maria Shirey, PhD, MBA, RN, NEA-BC, ANEF, FACHE, FNAP, FAAN

Association for Leadership Science in Nursing  
October 29, 2023  
Birmingham, Alabama

We have no disclosures.

## Introduction



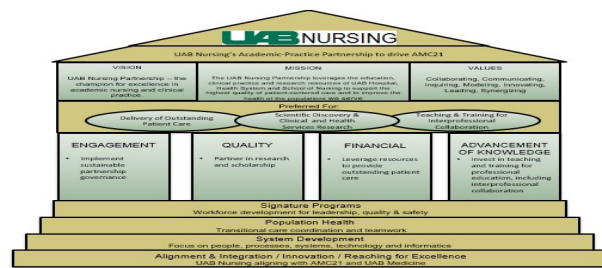
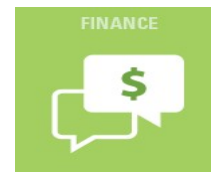
# Objectives

1. Discuss how an academic-practice partnership can build a sustainable care delivery model.
2. Describe the structure, process, and outcomes of a successful academic-practice partnership.
3. Discuss how to leverage grant funding resources to address research questions in leadership science.



## The UAB Nursing Partnership

*Nurse Managed Clinic Context*



Urban, Rural, and Under-Served Vulnerable Populations Across Alabama

**Heart Failure Transitional Care Services for Adults (HRTSA) Clinic**

# The UAB Nursing Partnership

as Innovation Hub for Sustainable Tri-Partite Mission Integration

Maria Shirey, PhD, MBA, RN, NEA-BC,  
ANEF, FACHE, FANP, FAAN  
Dean & Professor  
UAB School of Nursing



Connie White-Williams, PhD, RN, NE-BC,  
FAHA, FANP, FAAN  
Associate Professor  
UAB School of Nursing  
Senior Director  
UAB Hospital



## Heart Failure Transitional Care Services for Adults (HRTSA) Clinic\*

### Smooth Care Transitions for Diverse and Under-Resourced Populations (STAND-UP) Model

\* Funded initially by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services through a Nurse, Education, Practice, Quality and Retention (NEPQR) Grant # UD7HP26908 (*Interprofessional Collaborative Practice Enhancing Transitional Care Coordination in Heart Failure Patients*), July 2014 to June 2017 (Maria Shirey PI)

\* Supplemented through funding from various additional philanthropic, intramural, and community grants for academic development, interprofessional education and clinical practice integration, along with health services outcomes and D&I research

\* Now sustained and fully funded by UAB Hospital and Health System as part of the UAB Nursing Partnership



## Background

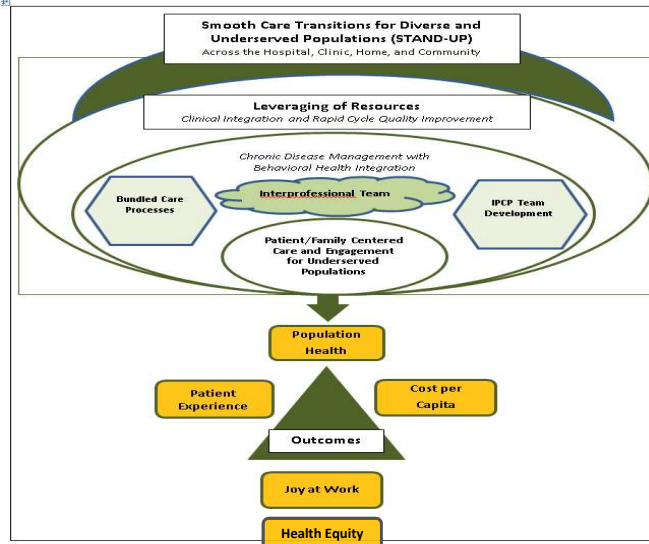


Problem

Need

Expertise

Figure 1. Elements of the IPCP Team-Based Model at UAB: STAND-UP ©



Source: Shrey, M.R., Selleck, C.S., White-Williams, C., Talley, M. & Harper, D. (2020). Sustainability of an interprofessional collaborative practice model for population health. *Nursing Administration Quarterly*, 44(2), 221-234. DOI: 10.1097/NAQ.0000000000000429



# UAB HRTSA Clinic Outcomes



**Engagement of a FT well-organized IPCP team across 7 disciplines working under one roof in a Medical Home clinic setting**

Students from across 7 disciplines and all levels of programs from BSN to MSN to DNP to PhD to Post Docs engaged in IPCP care delivery model and completing research and practice focused projects in the clinic

Current engagement of panel of 1,500 patients receiving care at clinic

Active assessment of SDOH and initiation of needed interventions with every clinic visit

Deliberate program for ongoing team member engagement



**Creation of one-of-a kind structured, nurse-led IPCP clinic offering primary, specialty, and transitional care to HF patients and families across disease journey**

Primary African-American and rural population of newly diagnosed and uninsured HF patients

**Documented improvements:**

- \* Sustained superior patient experience ratings in both engagement and satisfaction
- \* Sustained increases in physical and mental health outcomes
- \* Sustained reduction in hospital re-admissions and cost of care
- \* Sustained high levels of IPCP team performance and clinician well-being in their roles
- \* Sustained improvements in heart function



**Documented improvement in financial outcomes with complex and engaged patients through decreased:**

- Emergency department visits
- Hospital re-admissions
- \* Hospital days
- \* Cost of care

Documented cost avoidance to health system for HRTSA Clinic patients of \$1 to 2 million yearly since 2017

Ongoing sustainable funding of clinic through UABHHS

Creation of a Dispensary of Hope Pharmacy where patients get their medications for free



**Advancement of heart failure caregiving science:**

- \* Testing the efficacy and cost effectiveness of an IPCP bundled care delivery model to improve Quintuple Aim outcomes in HF
- \* Demonstrated the sustainability and scalability of STAND-UP model of IPCP care beyond original context
- \* Disseminated literature to teach other institutions how to deliver IPCP bundled interventions
- \* Established as leaders in the creation of multiple AHA Scientific Statements to address care transitions and social determinants of health in HF
- \* Documented the impact of leadership science to enhance the performance of teams within an interprofessional collaborative practice care delivery model



### Interprofessional Collaborative Practice Improves Access to Care and Healthcare Quality to Advance Health Equity

Connie White-Williams • Vera Bittner • Reid Eagleson • Morgan Feltman • Maria Shirey

**ABSTRACT**  
Healthcare disparities exist in cardiovascular care, including heart failure. Care that is not equitable can lead to higher incident...

Consent form available at [Sciencedirect](#)

**Circulation**

**AHA SCIENTIFIC STATEMENT**

### Addressing Social Determinants of Health in the Care of Patients With Heart Failure

A Scientific Statement From the American Heart Association

**ABSTRACT** Heart failure is a clinical syndrome that affects >6.5 million Americans, with an estimated 550,000 new cases diagnosed each year. The complexity of heart failure management is compounded by the number of patients who experience adverse downstream effects of the social determinants of health (SDOH). These patients are less able to access care and more likely to experience poor heart failure outcomes over time. Many patients face additional challenges associated with the cost of complex chronic illness management and must make...

**POPULATION HEALTH MANAGEMENT**  
Volume 16, Number 05, 2023  
© Mary Ann Liebert, Inc.  
DOI: 10.1177/2150131923119104

Connie White-Williams, PhD, RN, FAHA, Chair  
Laura R. Ross, PhD, RN, Vice Chair  
Vera A. Bittner, MD, MSPH  
Andrea Onofrei, PhD, MS, FAHA  
Raymond W. Durant, MD

**Journal of Interprofessional Education & Practice**

Journal homepage: [www.elsevier.com/locate/jiep](http://www.elsevier.com/locate/jiep)

### Taking an interprofessional collaborative practice to the next level: Strategies to promote high performing teams

Connie White-Williams<sup>a,b,c</sup>, Maria R. Shirey<sup>d,e</sup>

**ABSTRACT**  
Center for Nursing Excellence and CARE Hospital Heart Failure Transitional Care Services (HRTSA) Clinic, UAB University Hospital, USA  
University of Alabama at Birmingham Medical Center Tower 1000, 615 19th ST, Birmingham, AL, 35294, USA  
Original and Clinical Research, June 14, 2023 - Received September 1, 2023 - Accepted November 15, 2023

**An Interprofessional Collaborative Practice Can Reduce Heart Failure Hospital Readmissions and Costs in an Underserved Population**

MARIA SHIREY, PH.D, MBA, RN, NEA-BC, FAAN,<sup>1,2</sup>  
K. CLARKSON, MD,<sup>3</sup> AND VERA BITTNER, MD, MSPH<sup>1</sup>  
Birmingham, Alabama

**ABSTRACT**  
Hospitalization among adults in the United States. Nurse-practitioner heart failure outcomes in patients with heart failure. There is little information on the impact of nurse-led underserved populations with heart failure. Thus, the purpose of this study was to evaluate the impact of nurse-led underserved populations on heart failure. The study included...

Maria R. Shirey, PhD, MBA, RN, NEA-BC, FAAN, FACHE, FAAN,<sup>1,2</sup>  
Cynthia S. Sells, PhD, RN, FNP, FAAN,<sup>1,2</sup> Connie White-Williams, PhD, RN, NE-BC, FAAN,<sup>1,3</sup>  
Michelle Talley, PhD, CRNP, ACNP-BC, FAAN,<sup>1,4</sup> and Doreen C. Harper, PhD, RN, FAAN,<sup>1,5</sup>

**Interprofessional Collaborative Practice Model to Advance Population Health**

Maria R. Shirey, PhD, MBA, RN, NEA-BC, ANEP, FNP, FACHE, FAAN,<sup>1,2</sup>  
Cynthia S. Sells, PhD, RN, FNP, FAAN,<sup>1,2</sup> Connie White-Williams, PhD, RN, NE-BC, FAAN,<sup>1,3</sup>  
Michelle Talley, PhD, CRNP, ACNP-BC, FAAN,<sup>1,4</sup> and Doreen C. Harper, PhD, RN, FAAN,<sup>1,5</sup>

**Sustainability of an Interprofessional Collaborative Practice Model for Population Health**

Maria R. Shirey, PhD, MBA, RN, NEA-BC, FACHE, FAAN, Cynthia S. Sells, PhD, RN, FNP, FAAN, Michelle Talley, PhD, CRNP, ACNP-BC, FAAN, Doreen C. Harper, PhD, RN, FAAN

**Caring for Underserved Patients with Heart Failure during the COVID-19 Pandemic**

Connie White-Williams, PhD, RN, NE-BC, DADA, FNP, FAAN  
Anna C. Clifton, DNP, APRN  
Marie Ware, PhD, MBA, RN, NEA-BC, ANEP, FACHE, FNP, FAAN  
Vera Bittner, MD, MSPH, FACHE, FAHA

Submitted associated with priority of Alabama at UAB management for use with care providers


**Patient Experience Journal**  
Volume 10, Issue 1—2023, pp. 83-92

**Research**

### Patient experience in an interprofessional collaborative practice for underserved patients with heart failure

Connie White-Williams, University of Alabama at Birmingham (U-AB) Hospital, [cw111@uabmc.edu](mailto:cw111@uabmc.edu)  
Maria R. Shirey, University of Alabama at Birmingham (U-AB) School of Nursing, [mshirey@uab.edu](mailto:mshirey@uab.edu)  
Reid Eagleson, University of Alabama at Birmingham (U-AB) Hospital, [reideagleson@uabmc.edu](mailto:reideagleson@uabmc.edu)  
Wei Su, University of Alabama at Birmingham (U-AB) School of Public Health, [wes1@uab.edu](mailto:wes1@uab.edu)  
Terri Poe, University of Alabama at Birmingham (U-AB) Hospital, [terripoe@uabmc.edu](mailto:terripoe@uabmc.edu)  
Brittany Fitts, University of Alabama at Birmingham (U-AB) Hospital, [brittanyfitts@uabmc.edu](mailto:brittanyfitts@uabmc.edu)  
Vera Bittner, University of Alabama at Birmingham (U-AB) Division of Cardiovascular Disease, [vbittner@uabmc.edu](mailto:vbittner@uabmc.edu)





UAB SCHOOL OF NURSING  
The University of Alabama at Birmingham

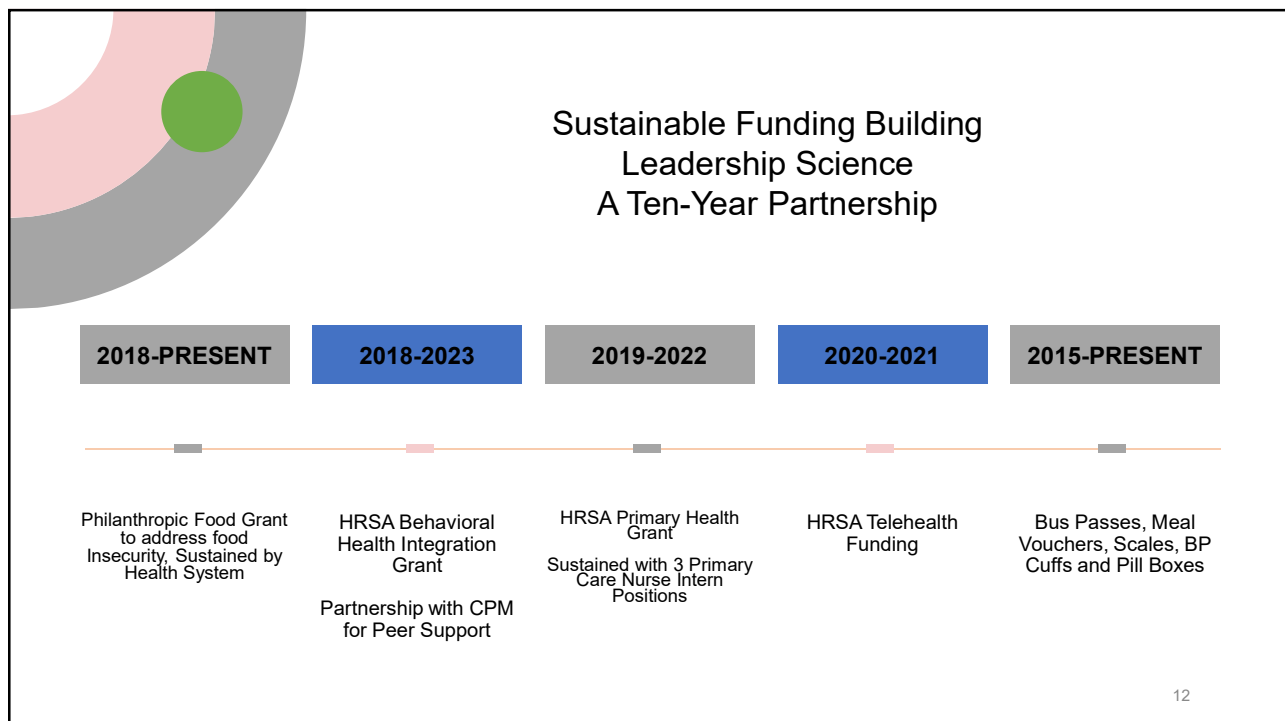
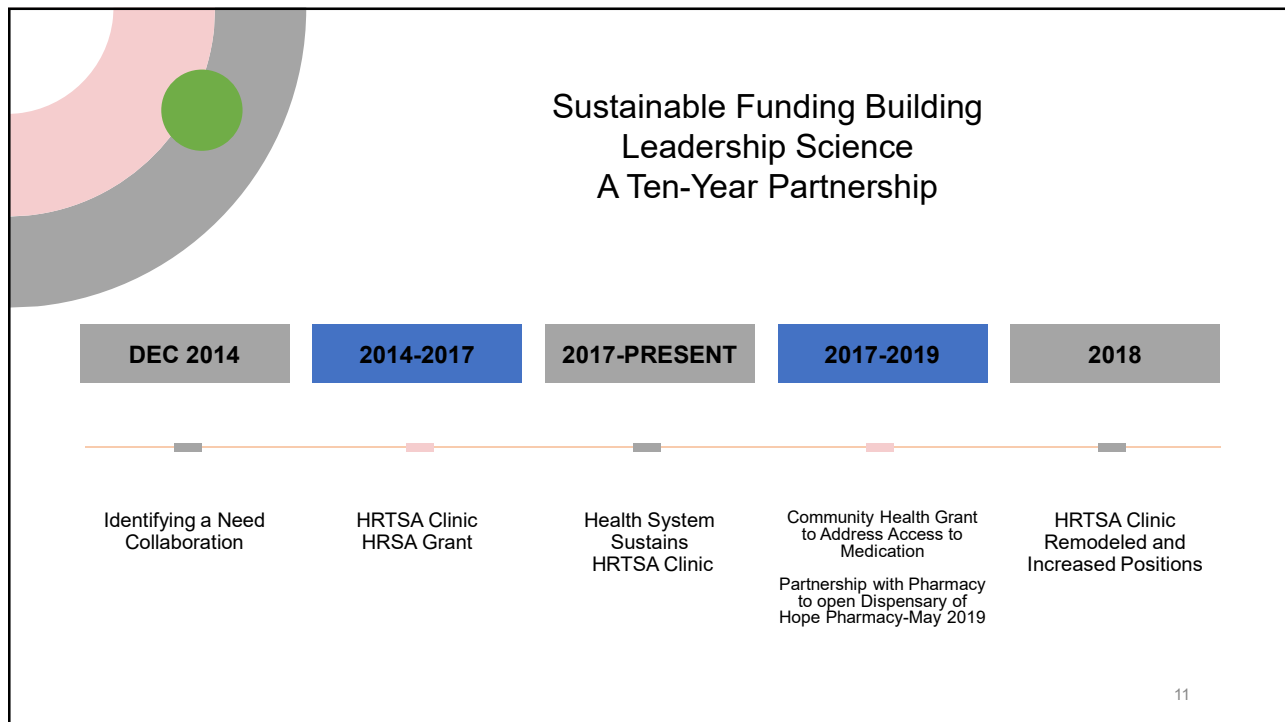


UAB MEDICINE  
The University of Alabama at Birmingham

## Testimonials

- “The HRTSA Heart Clinic is one of the best facilities that I attend at UAB Hospital. They always make me feel welcome and appreciated.”
- “I owe my life to the work done in this clinic. I wouldn't be alive today without it.”
- “Most positive experience with medical issues in my life.”
- “That's the best team that I've ever had the pleasure of letting take part in my health care.”
- “We were amazed at the quality of care we received, the Nurse Practitioner was amazing and she took time to explain everything and answered our questions in detail.... The Social Workers were very helpful and helped get the ball rolling for the services we need and the two nurses helped to calm and soothe an otherwise difficult experience...even the lady at the front desk was very helpful....so we would recommend HRTSA Heart Failure Clinic to everyone.”
- “I am consistently treated with respect and I truly believe the people here care for my well-being and are dedicated to their mission. Thank you.”

Source: White-Williams C, Shirey MR, Eagleson R, Su W, Poe T, Fitts B, Bittner V. Patient experience in an interprofessional collaborative practice for underserved patients with heart failure. Patient Experience Journal. 2023; 10(1):83-92. doi: 10.35680/2372-0247.1752



## Sampling of Leadership Science Research Questions Answered

- Does an IPCP care delivery model affect outcomes of access to care, patient experience, cost of care, quality of care, and health equity?
- Does an IPCP care delivery model enhance team performance?
- Can leadership practices impact the development and sustainability of high performing teams?

## Lessons Learned – Funding Specific

- Identify funding opportunities with intersections for partnership
- Consider all possible funding sources
  - \* *Big, small, intramural, extramural, philanthropic*
  - \* *Small funding supports larger funding*
  - \* *All money is green*
- Everyone on your grant key personnel team needs to have ability to write grants and get funded
- Always have a specific aims page ready to shape and pivot as funder calls for proposals are issued
  - \* *Plan for “what’s next” and stay ahead of the grant funding*
- Include strong sustainability plan in your funding proposals



## Lessons Learned – In General

- Build publication track record from all grant work
  - \* *Dissemination is key for future funding*
  - \* *Everyone needs to be contributing*
- Maintain rich databases that abound with data for analysis
- Build relationships across all stakeholders
- Align grant submissions with funders and key partner requirements
  - \* *Understanding funding priorities allows for shaping of ideas*
  - \* *Entails need to pivot and get out of your lane at times*
- Stay strong, be resilient, and learn to get back up when knocked down

*We can do this attitude  
Forge the way to sustain leadership science*

## Sustainability Conceptual Framework

**Table 2.** Sustainability Conceptual Framework and Integrating the PSAT

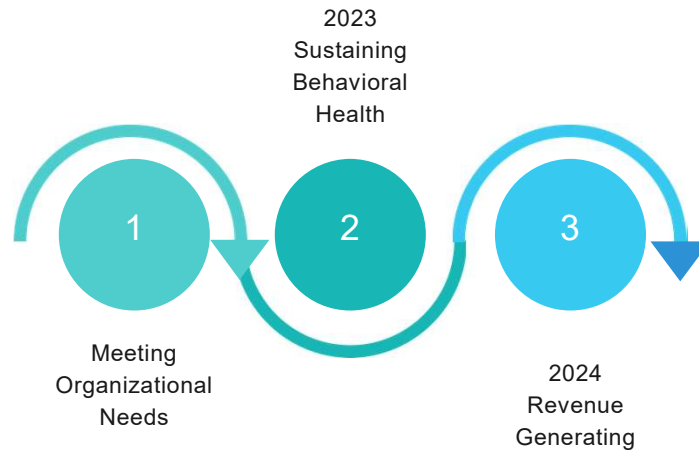
Domain <sup>a</sup>	Locus of Control	Definition <sup>a</sup>	Key Questions Integrating the PSAT <sup>b</sup>
Political support	External	Political environment or context within which the population health program exists, which influences program funding, initiatives, and ongoing acceptance	Does the program have strong champions with political connections to garner resources within and outside the organization?
Funding stability	External	Ability to make long-term plans based on stable funding environment and likelihood of ongoing funding sources for the population health program	Has the program implemented policies to help ensure sustained funding beyond the grant funded period?
Partnerships	External	The connection between the population health program and its community of interest	Are community stakeholders engaged and involved in program goals and priorities?
Public health impacts	External	The population health program's quantifiable effect on Quadruple Aim outcomes	Are the key public health outcomes evident? Are they communicated such that decision-makers understand their impact?
Organizational capacity	Internal	The resources needed to effectively manage the population health program and its related activities	Is the program well integrated into the operations of the organization? Are organizational systems in place to support the various program needs?
Program evaluation	Internal	Mechanisms to monitor and evaluate process and outcome data associated with the population health program activities	Does the program have in place an evaluation plan that provides strong evidence that the program works?
Program adaptation	Internal	The ability to adapt and improve to ensure effectiveness of the population health program	Does the program periodically review its outcomes to adapt strategies based on changes in science or the environmental context?
Communications	Internal	The strategic dissemination of population health program outcomes and activities with stakeholders, decision-makers, and the public	Does the program use communication strategies to convey its value and thus secure and maintain broader support?
Strategic planning	Internal	The process that defines program direction, goals, and strategies to leverage all domains for sustainability of the population health program	Does the program have a sustainability plan?

Source: Shirey, M.R., Selleck, C.S., White-Williams, C., Talley, M. & Harper, D. (2020). Sustainability of an interprofessional collaborative practice model for population health. *Nursing Administration Quarterly*, 44(3), 221–234. DOI: 10.1097/NAQ.0000000000000429



# Sustainability Funding Timeline

The Next 10 Years



## Next Steps

### Leveraging Grant Funding Resources

- Seek Additional Funding Opportunities
- Partner with Individuals to increase grant funding
- Always have research questions ready
- Adapt specific aims for grant calls

## Conclusions

- Sustainability is achievable with and without grant funding.
- Developing a well aligned academic-practice partnership is key to boosting sustainability.
- Creating a stream of overlapping funding opportunities is conducive to sustainability.
- Being savvy in leveraging diverse grant funding resources can allow us to address important research questions in leadership science.

~~No funding to do leadership science~~

# Closure



# Q&A



Maria Shirey, PhD, MBA, RN, NEA-BC, ANEF, FACHE, FANP, FAAN  
Dean & Professor, UAB School of Nursing  
[mrshirey@uab.edu](mailto:mrshirey@uab.edu)



Connie White-Williams, PhD, RN, NE-BC, FAHA, FANP, FAAN  
Associate Professor, UAB School of Nursing  
Senior Director, UAB Hospital  
[cwilli@uabmc.edu](mailto:cwilli@uabmc.edu)

## References

- Shirey, MR., White-Williams, C., and Hites, L. Integration of Authentic Leadership Lens for Building High Performing Interprofessional Collaborative Practice Teams. *Nursing Administration Quarterly*. 2019; 43.(2), 101-112.
- Shirey, M.R., Selleck, C.S., White-Williams, C., Talley, M., & Harper, D.C. (2020). Sustainability of an interprofessional collaborative practice model for population health. *Nursing Administration Quarterly*, 44(3), 221-234.
- Shirey, M.R., Selleck, C.S., White-Williams, C., Talley, M., & Harper, D.C. (2020, February 19). Interprofessional collaborative practice model to advance population health. *Population Health Management*, doi: 10.1089/pop.2019.0194. Online ahead of print.
- White Williams, C., Rossi, L.P., Bittner, V.A., Driscoll, A., Durant, R.W., Granger, B.B.... Shirey, M.R. (2020). Addressing social determinants of health in the care of patients with heart failure. *Circulation*, 141(22), e841-863. <https://doi.org/10.1161/CIR.0000000000000767>

## References

- White Williams, C., Clarkson, E.B., Shirey, M.R. & Bittner, V.A. (2020). Caring for underserved patients with heart failure during the COVID-19 pandemic. *Journal of Health Care for the Poor and Underserved*, 31(3), 1061-1066.
- White-Williams, C., Shirey, M., Eagleson, R., Clarkson, S., & Bittner, V. (2021). An Interprofessional Collaborative Practice Can Reduce Heart Failure Hospital Readmissions and Costs in an Underserved Population. *Journal of Cardiac Failure*. <https://doi.org/10.1016/j.cardfail.2021.04.011>
- White-Williams C, Shirey MR, Eagleson R, Su W, Poe T, Fitts B, Bittner V. Patient experience in an interprofessional collaborative practice for underserved patients with heart failure. *Patient Experience Journal*. 2023; 10(1):83-92. doi: 10.35680/2372-0247.1752