Fairfield University’s School of Nursing Problem Solving For Better Health for Older Adults

I. Executive Summary
The Problem Solving for Better Health (PSBH) model of the Dreyfus Health Foundation has proven to be highly successful in the international arena. During Fairfield University’s meetings with representatives of the Foundation and the visit to the Houston project site by nursing faculty, some challenges were identified for implementing the international model at the national level. A significant opportunity exists with the emerging partnership between Fairfield and the Dreyfus Health Foundation to create a model format for implementing the PSBH model in schools of nursing in the United States. This proposal presents a plan that links the PSBH model to the community using the resources of the academic setting within Fairfield University School of Nursing, over a two-year time frame. The proposed model complements the staffing structure and expertise provided by the Foundation, creating a seamless link with the academic resources of a fully accredited school of nursing. Through the Foundation’s initial investment in Fairfield University, a tested model for the implementation of the PSBH model at the national level will be created, which can be replicated in schools of nursing throughout the United States. As part of the work of this proposal, the developed model program will be presented to the other eighteen nursing schools in the Association of Jesuit Colleges and Universities for replication of this model in partnership with the Dreyfus Health Foundation. See Attachment I for a complete list of these schools.

The PSBH project at Fairfield University will build on the experiences that the Foundation has had implementing the program in the United States over the past two years. The specific outcomes of this two-year initiative include the following:

• Develop a model format for implementing the PSBH model within a major city, building on the resources of a school of nursing working in partnership with the Dreyfus Health Foundation.
• Build an on-going connection among the students, faculty, and representatives of the local city designed to encourage community empowerment, community development, and local involvement in issues related to better health.
• Create an evaluation template, including demographic, quantitative, and qualitative data, as well as project tracking data, for use by local coordination teams and Foundation staff.
• Create a model for including students and faculty in the PSBH process that can be replicated in other school of nursing-based sites.
• Disseminate this model format for school of nursing-based implementation of the PSBH model to the eighteen nursing schools in the Jesuit network.
• Publish and present the results of this two-year project through publications in major journals and presentations at conferences at the national and international level.

Fairfield University has a successful track record of obtaining funding from various agencies, including private foundations, corporations, and federal agencies to conduct research, design, test, and develop curriculum, and partner with the local and national community. The University’s mission focuses on academic excellence and service to the community, which resonates with the objectives of the Dreyfus Health Foundation. Fairfield’s School of Nursing will provide the platform from which this proposal will be launched. Faculty expertise in leadership and community building, as well as a commitment to incorporating the PSBH model into nursing education, positions the School of Nursing to work with the Foundation to build an exemplar approach that can be easily replicated in other schools of nursing within the Jesuit network, and eventually across the United States.

Initial funding requirements will be $130,862 of which $33,328 will be supported by Fairfield University. A total of $97,534 is requested from the Dreyfus Health Foundation.
II. Statement of Need

At the international level the Dreyfus Health Foundation’s PSBH model, founded in 1989, has served nearly 25 countries -- some of which include Poland, Lithuania, Kenya, Mexico, and the United States. Community developed and implemented projects have included such topics as "Coping with Stress in the Family: Treatment of Reactive Mood Disorders" in Poland and “Breast Cancer Awareness” in Ghana. In Lithuania one main category of projects was aimed at providing psychological support services due to the high rate of suicide in that country. The benefits of the current Dreyfus Health Foundation approach at the international level includes the oversight of each project, with both the close working knowledge and the personalized attention given by the PSBH staff to each project. Multiple success stories provide support for the use of the PSBH model to motivate and support individual and group participation in making community level changes. While the accomplishments at the international level have been substantial, the documentation and measurement of project outcomes could be strengthened. The implication for this dimension of the work will enhance the Foundation's ability to implement the PSBH model and effectively impact the health of communities both nationally and internationally.

At the national level the success of the PSBH model has been dependent on the volunteer coordination at the local level. In addition to the projects that the Foundation has launched nationally, there are numerous examples of effective community level change. Some of these documented projects are described below:

- Individual stress management interventions with the family caregivers of recently discharged elderly patients. (1)
- Community clinic based parent education classes with individuals who were at risk for experiencing difficulties with healthy parenting due to serious life stressors. (2)
- Use of the “Personal Effectiveness for Successful Living” model that teaches persons with severe mental abilities to be their own case managers and therefore feel a sense of empowerment. (3)
- Implementation of a community lead intervention project in Philadelphia reduced lead poisoning in a targeted neighborhood by creating summer camps, rap lyrics, t-shirts, and other child developed materials that directly increased awareness of lead poisoning as an issue. (4)

These are just a few examples of projects that have shown that it is possible to create substantial change at the community level. The combined resources of a school of nursing and the Dreyfus Health Foundation can maximize the effectiveness of community level projects of this kind.

There is ample evidence that university linkages to communities can facilitate student learning and faculty growth while creating community level change. The literature currently refers to this as the engaged university. (5) The first level of an engaged university is through service-learning opportunities. Fairfield University has excelled in this area, particularly with the Health Promotion Center. But numerous national meetings on the engaged university focus more on working in the community for community empowerment and growth, which also encourage student and faculty growth through mutual learning. The proposed partnership will provide a mechanism for this type of engagement to occur at Fairfield University School of Nursing, as well as the other Jesuit schools that choose to adopt this model approach.

III. Project Description
A. Project Goal and Projected Outcomes

Fairfield University’s proposed project will address the current health care crisis facing the older adult population in the United States through the implementation of the PSBH model. This will be accomplished through a partnership among Fairfield University’s School of Nursing, the Dreyfus Health Foundation, and the Bridgeport community. As a result of the proposed project, which will include a tested template, support materials, and a database for use by other schools of nursing, the dissemination, effectiveness and impact of the PSBH model will be enhanced at the national level.

The specific outcomes of this project are as follows:

• Develop a model format for implementing the PSBH model within a major city, building on the resources of a school of nursing working in partnership with the Dreyfus Health Foundation.
• Build an on-going connection among the students, faculty, and representatives of the local city designed to encourage community empowerment, community development, and local involvement in issues related to better health.
• Create an evaluation template, including demographic, quantitative, and qualitative data, as well as project tracking data, for use by local coordination teams and Foundation staff.
• Create a model for including students and faculty in the PSBH process that can be replicated in other school of nursing-based sites.
• Disseminate this model format for school of nursing-based implementation of the PSBH model to the eighteen nursing schools in the Jesuit network.
• Publish and present the results of this two-year project through publications in major journals and presentations at conferences at the national and international level.

B. Project Timeline

This project will be conducted over a two-year period with a projected launch date of January 2003. The PSBH workshop will be held in March 2003. A complete project timeline is provided on the following page.
**B. Project Timeline**

|-------------|---------------|---------------|

- Work with Assessment Consultant.  
  - X X X X X X X X X  

- Work with second degree students within their coursework, introducing them to the PSBH model.  
  - X X  

- Identify community members and begin conversation with them about the PSBH model.  
  - X X  

- Project data entry.  
  - X X X X X X X X X X X X X X X  

- PSBH workshop program conducted.  
  - X  

- PSBH funding meeting with community members and School of Nursing.  
  - X  

- PSBH three month follow-up visit.  
  - X  

- First group of second degree students pass projects along to the next class of second degree students.  
  - X  

- PSBH six month follow-up visit.  
  - X  

- Student and community PSBH final project presentations.  
  - X  

- Identification of calls for abstracts for national and international presentations.  
  - X X X X X X X X X X X X X X X  

- Publication submissions.  
  - X X X X X  

- Project data analysis.  
  - X X X  

- Evaluation consultant report and full day presentation.  
  - X  

- Dissemination to 18 Jesuit nursing schools in partnership with the Office of Social and International Ministries of the Jesuit Conference.  
  - X X  

- Two year project final report submitted.  
  - X
C. Project Staffing

The PSBH project at Fairfield University will be directed by Dr. Doris Troth Lippman, working in collaboration with Dr. Philip A. Greiner (project advisor), Dr. Jean Lange, Dr. Meredith Wallace, and Dr. Jeanne M. Novotny, Dean. Dr. Lippman's primary responsibility will be the coordination of the project activities. In this role, she will work with representatives of the community, School of Nursing faculty and students, database support staff, and a professional assessment consultant. Additional information on each of the participants involved in this project is provided below.

- **Bridgeport Community Members** - Representatives from the Bridgeport community who have been identified by faculty and staff currently working in the Bridgeport area will be part of the implementation team.
- **School of Nursing Faculty** - Dr. Philip A. Greiner (project advisor), Dr. Jean Lange, Dr. Jeanne Novotny, and Dr. Meredith Wallace, who have expertise both in community health and gerontology, will work closely with Dr. Lippman on this project. See Attachment II for the brief biographical summaries on each of these faculty members.
- **Second Degree Nursing Students** - Nursing students from the current Fairfield University School of Nursing second degree program class ('03) and the incoming class ('04) of second degree nursing students will also be a part of the PSBH project team. Approximately 20 students will be a part of the PSBH process during this project period.
- **Database Support** – The Manager of Community Services and a database developer will serve as support personnel to the project for the development and implementation of the database.
- **Assessment Consultant** - An internationally known assessment consultant, Dr. Gail Ingersoll, will design and implement an evaluation model for this project. See Attachment III for Dr. Ingersoll’s curriculum vita.

**Project Director**

As director of the PSBH project, Dr. Doris Troth Lippman will oversee the planning, implementation, evaluation, and dissemination of this two-year project. Dr. Lippman will work in close partnership with representatives of the Dreyfus Health Foundation, the faculty team, students, community members, database staff and the assessment consultant, and will have direct responsibility for the following:

- Serve as the primary liaison between the School of Nursing and the Dreyfus Health Foundation.
- Oversee the evaluation component of this project, working in close partnership with Dr. Gail Ingersoll and the database personnel.
- Develop relationships with and provide on-going contact to the Bridgeport community members who will be involved in the PSBH project.
- Oversee the details associated with the PSBH workshop in March 2003, as well as the one-month, three-month and six month follow-up meetings.
- Serve as the principal author/presenter at major national meetings to describe the implementation of this initiative.
- Work in partnership with other School of Nursing faculty and students to publish papers in national and international journals describing the achievements of this initiative.
- Organize and conduct a presentation to representatives of the eighteen Jesuit nursing schools highlighting the PSBH model tested and evaluated by Fairfield University.
Faculty Team
Dr. Lippman will lead a faculty team with expertise in community development, program delivery, and older adult issues. This team will include Philip A. Greiner, DNSc, RN, Jean Lange, PhD, RN, Meredith Wallace, PhD, RN, GNP, and Jeanne M. Novotny, PhD, RN, FAAN. The faculty team will be responsible for:

- Assisting in the development and maintenance of community relationships.
- Serving as facilitators in the group sessions in the Bridgeport community.
- Supervising student involvement in the PSBH process and incorporating this process into course content.
- Serving as co-authors/presenters for the dissemination of the model and findings at national meetings and in publications as determined by the project director.

Evaluation Consultant
Dr Gail Ingersoll, Director of Clinical Research at the University of Rochester, will be involved with the PSBH Project beginning in January of 2003. She will design the evaluation plan from the inception of the project providing guidance to all of the participants relative to outcome measurements. She will prepare a final report on the project’s evaluation in December 2004 which will be presented to all of the project participants during a half-day program. Dr. Ingersoll’s work on this project will build on her current work at Fairfield in support of the Geriatric Nursing Education Project: Enhancing Gerontology/Geriatric Nursing for Undergraduate Baccalaureate and Advanced Practice Nursing Programs. This project was funded by the John A. Hartford Foundation with a grant of $90,000 in 2001.

Data Base Developer and Data Base Management Staff Person
A data base developer with previous experience working with the School of Nursing’s Mental Health Services Program and the Health Promotion Center will develop the database for this project. A database staff person will have responsibility for serving as a direct liaison between Dr. Ingersoll and the data base developer. This individual will also be responsible for providing quality control on all of the data coming in as well as inputting the necessary information at appropriate intervals throughout the life of the project.

D. Project Assessment
Dr. Gail Ingersoll will consult with faculty concerning evaluation design, data collection methods and strategies for dissemination of findings. She will meet with project faculty early in the first year and will be available by phone, fax and e-mail for assistance between on-site visits. Dr. Ingersoll has considerable experience conducting comprehensive program evaluation and has published and presented internationally on the topic. Currently, she is serving as the evaluator of a Department of Health and Human Services funded program designed to prepare clinical researchers through an accelerated masters to doctoral program in nursing. She also is an evaluation consultant to an inner city health promotion program funded by the Robert Wood Johnson Foundation. Recent relevant publications include chapters pertaining to measuring performance and outcomes of advanced practice, measuring and managing care delivery outcomes, evaluating websites for clinical and research usefulness, and an article on developing theory-derived evaluation plans to achieve program accreditation.
Fairfield University’s School of Nursing has a strong record of success in the assessment and evaluation of a wide variety of projects. The work that Dr. Ingersoll will do for this project will build on the current accomplishments that are described below:

- The University is one of five sites participating in the development and implementation of a web-based data collection tool specifically designed to meet the needs of nursing centers devoted to health promotion. The primary purpose of this web-based tool is to document the numbers of clients served and their demographic characteristics, track the services provided, tabulate the numbers and types of referrals made. This database does not identify client information nor does it track individual clients. Its benefit is that it documents the significant impact health promotion activities have in terms of identification and referral of clients.

- The School of Nursing has developed over the past year a client-tracking database to meet the needs of its Health Promotion Center. This database was designed to allow for repeated data collection points on each client, and is flexible enough to allow for the addition of new outcome variables as they are developed. The testing of this database is nearing completion and data entry has begun. With slight modification, the original database has been adapted for use in various research projects being conducted by the faculty in the School of Nursing.

IV. Project Budget

The total cost to implement this two-year project is $130,862, of which $97,534 is requested from the Dreyfus Health Foundation. See Attachment IV for the full project budget. The costs outlined in the budget include project leadership, assessment and data base development, travel, community project grants, and expenses related to the PSBH event and follow-up visits. This grant represents a one-time investment for the Dreyfus Health Foundation with various components that can easily be replicated in other cities across the United States as the PSBH model is implemented in partnership with schools of nursing. A total of $33,328 will be contributed by Fairfield University to support this two-year project.

V. Conclusion

The Dreyfus Health Foundation with its PSBH model is a leader in the field of community level intervention, assisting countries and communities as they establish partnerships that are sensitive to the health care challenges and needs of each distinctive place. The model has proven to be highly successful in the international arena and has a great deal of potential for success in the United States. Through this proposed partnership with Fairfield University, to include a tested template within a school of nursing and an implementation structure that can be used by other schools of nursing to integrate the PSBH model into community outreach and nursing education, the effectiveness and impact of the current PSBH model at a national level will be enhanced.
Bibliography


