APPLICATION OF THE TELEPHONE NURSING PROCESS MODEL

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OBJECTIVES

• Describe the Telephone Nursing Process Model

• Discuss model application to practice
WHY DO WE NEED A MODEL OF THE TELEPHONE NURSING PROCESS?

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THE STUDY

- Method
  - Grounded Theory
- Sample
  - 10 RN’s
  - 4 TN programs
- Analysis
  - In-depth interviews
  - Data comparison
  - Validation by participants
ESSENTIAL COMPONENTS OF TELEPHONE NURSING

• Three phase model of care delivery

• One central unifying concept

• Factors influencing the call
### THE MODEL OF CARE DELIVERY IN TELEPHONE NURSING PRACTICE

**INTERPRETING:**
Translating data from the caller into healthcare information
Translating healthcare information into language the caller can understand

<table>
<thead>
<tr>
<th>PHASE 1</th>
<th>PHASE 2</th>
<th>PHASE 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gathering Information</td>
<td>Cognitive Processing</td>
<td>Output</td>
</tr>
<tr>
<td><strong>GETTING STARTED</strong></td>
<td><strong>DETERMINING</strong></td>
<td><strong>DISPOSITION</strong></td>
</tr>
<tr>
<td>• Connecting</td>
<td>• Relating</td>
<td>• 911</td>
</tr>
<tr>
<td>• Questioning</td>
<td>• Processing</td>
<td>• ER</td>
</tr>
<tr>
<td>• Redirecting</td>
<td>• Verifying</td>
<td>• UC</td>
</tr>
<tr>
<td>• Getting to know</td>
<td></td>
<td>• Appointment</td>
</tr>
<tr>
<td><strong>INFORMATION SEEKING</strong></td>
<td><strong>DECISION-MAKING</strong></td>
<td><strong>SUPPORTING</strong></td>
</tr>
<tr>
<td>• Investigating</td>
<td>• Signs &amp; symptoms</td>
<td>• Reassuring</td>
</tr>
<tr>
<td>• Focusing</td>
<td>• Other caller needs</td>
<td>• Encouraging</td>
</tr>
<tr>
<td>• Verifying</td>
<td></td>
<td>• Validating</td>
</tr>
<tr>
<td>• Clarifying</td>
<td></td>
<td>• Teaching</td>
</tr>
<tr>
<td>• Comparing</td>
<td>• Thinking ahead</td>
<td>• Aftercare</td>
</tr>
<tr>
<td>• Ruling out</td>
<td></td>
<td><strong>COLLABORATING</strong></td>
</tr>
<tr>
<td><strong>SECONDARY GATHERING</strong></td>
<td><strong>PLANNING</strong></td>
<td><strong>CLOSING THE CALL</strong></td>
</tr>
<tr>
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<td>• Thinking ahead</td>
<td></td>
</tr>
</tbody>
</table>
INTERPRETING

• One central unifying concept
  • Related to all other model concepts

• Two-way process

• Explicit and implicit data
THREE PHASE MODEL OF CARE DELIVERY

- Gathering Information
- Cognitive Processing
- Output

- Generally sequential but also simultaneous and recurring
- Goal oriented
THE MODEL OF CARE DELIVERY IN TELEPHONE NURSING PRACTICE

PHASE 1
Gathering Information

GETTING STARTED
• Connecting
• Questioning
• Redirecting
• Getting to know

INFORMATION SEEKING
• Investigating
• Focusing
• Verifying
• Clarifying
• Comparing
• Ruling out

SECONDARY GATHERING
• Information Seeking

PHASE 2
Cognitive Processing

DETERMINING
• Relating
• Processing
• Verifying

DECISION-MAKING
• Signs & symptoms
• Other caller needs

PLANNING
• Thinking ahead

PHASE 3
Output

DISPOSITION
• 911
• ER
• UC
• Appointment
• Advice
• Referral
• Other

SUPPORTING
• Reassuring
• Encouraging
• Validating
• Teaching
• Aftercare

COLLABORATING
• Giving options
• Problem solving
• Following-up

CLOSING THE CALL

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FACTORS INFLUENCING THE CALL

- **Internal**
  - Prioritization
  - Complexity

- **External**
  - Nurse Characteristics
  - Organizational resources
  - Process and Output Validation
MODEL VALIDATION

> 80 Participants, 16 groups of 5 or more

- Fit your TNP experience?
  Yes 14/16 groups

- Is anything missing?
  No 11/16 groups

- This model is useful for…
  Educating/orienting, developing competencies & benchmarks, adds consistency to practice, guiding research

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APPLICATION OF THE MODEL

• Practice

• Education

• System Support

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APPLICATION OF THE MODEL

• Practice
  • Develop benchmarks for evaluating practice outcomes
  • Improve consistency of TN care
  • Guide research to determine optimum execution of the phases of the TN process.

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APPLICATION OF THE MODEL

• Education
  • Educate & orient nurses in TN practice
APPLICATION OF THE MODEL

• System Support
  • Promote organization valuing of, and resources for, TN practice
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CLOSING THE CALL

THE MODEL OF CARE DELIVERY IN TELEPHONE NURSING PRACTICE
QUESTIONS/COMMENTS
REFERENCES


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