

Kleinpell, Ruth



Dr. Ruth Kleinpell was educated as an Adult Gerontological Nurse Practitioner. She began her career as an RN, following graduation from a diploma school of nursing as a critical care nurse in the Surgical ICU where she worked for 15 years. After completing her masters and doctorate she worked as a research associate and then assistant professor. During this time Dr. Kleinpell continued to work in the surgical ICU. An acute care nurse practitioner track was developed following completion of her doctorate, and she had the opportunity to go through the pilot program and was part of the first cohort that took and passed the initial ANCC acute care nurse practitioner exam. Dr. Kleinpell has held the roles of nurse scientist, educator, and clinician.

Interview Abstract

During the interview Dr. Kleinpell recalled role of the acute care practitioner has certainly expanded over the years and is no longer bound by hospital walls. Her research is very clinically based and focuses on the challenges that both critical care patients, families, and nurses face. She notes that as the role and scope of practice for ACNPs as well as for all nurse practitioners develops and expands, there are still barriers to practice. Dr. Kleinpell believes part of her ability to make inroads into critical care medicine is through her involvement in American Association of Critical Care Nurses (AACN) and the Society for Critical Care Medicine (SCCM). She became a fellow of the SCCM and was a member of several national committees before being elected to the board of directors. She became the third nurse elected as president of SCCM in the 46-year history of the organization. Through SCCM she was able to network with affiliated groups, such as AACN, American Thoracic Society (ATS), and Chest (C) in a collaborative effort to focus on building resilience for ICU providers. Dr. Kleinpell discusses her work with the American Nurses Association Credentialing Center (ANCC) where she developed and sent a survey to over 900 acute care nurse practitioners taking the first national certification exam to determine where they were working, barriers to practice and facilitators of practice which continued for five years with over 400 respondents participating every year. Dr. Kleinpell's work on that study and other national and international studies over the years, raised the profile of acute care nurse practitioners who then became a component of other organizations such as ICN, AANP and NONPF. As president of the World Federation of Critical Care Nurses she found an avenue for networking, research, and manuscript development to promote critical care nursing worldwide.

The interview concludes with her assessment that there will be roles for NPs that don't even exist in today's world. There may be more telehealth and space health among others. Additionally, she replied that all advanced practice educational programs must meet appropriate accreditation and certification exams need to be rigorous.

Biographical Sketch

Ruth Kleinpell, PhD, RN, FAAN, FAANP, FCCM, has conducted research related to patient outcomes in hospitalized older adults and post discharge follow-up interventions using telehealth for vulnerable populations including elderly patients at high risk for hospital readmission. She has also conducted research focusing on outcomes after ICU treatment and role development of acute care nurse

practitioners, among other funded studies. She served as principal investigator on an AHRQ-funded dissemination and research implementation grant aimed at disseminating patient-centered outcomes research to members of a health professional association. She is PI on a PCORI funded 2-year initiative to promote patient-centered outcomes research in ICU settings, using a national collaborative with 63 hospital ICU teams to implement patient and family centered initiatives. As the Assistant Dean for Clinical Scholarship, she serves as a mentor to junior faculty for clinical scholarship and research initiatives, collaborates on Vanderbilt University Medical Center (VUMC) clinical projects, and provide consultation to the VUMC advanced practice registered nurses (APRNs) for various scholarship initiatives. She also serves as PI for a national collaborative through the Vanderbilt University Medical Center Office of Advanced Practice for a national Choosing Wisely- APRN initiative. In addition to being inducted as a Fellow for AAN, AANP, SCCM, honors include National Organization of Nurse Practitioner Faculties Lifetime Achievement Award, 2017, Sigma Theta Tau International Nurse Researcher Hall of Fame Award, 2012, Sigma Theta Tau International Practice Academe Innovation Award, 2011, American Association of Critical Care Nurses Flame of Excellence Award, 2010, National Organization of Nurse Practitioner Faculties Research Award, 2010, Sigma Theta Tau International Clinical Research Award, 2007, Society of Critical Care Medicine Norma Shoemaker Award for Critical Care Nursing Excellence, 2007, American Association of Critical Care Nurses, Excellence in Education Award, 2005, American Association of Colleges of Nursing, Leadership for Academic Nursing Program, 2005. She has maintained active clinical practice throughout her career.

Key Words

Nurse Practitioner, Acute Care Nurse Practitioner, Nurse Practitioner Education, Nurse Scientist, networking

Interview Transcript

Ruth Kleinpell

AANP Oral History Project

Interview: Dr. Ruth Kleinpell PhD, RN, FAAN, FAANP, FCCM

Independence Foundation Professor of Nursing Education and Assistant Dean for Clinical Scholarship, Professor of Nursing – Vanderbilt University

Professor, Department of Adult Health and Gerontological Nursing, College of Nursing – Rush University

Date:11/15/19

Interviewers Name: Michaelene Jansen

Place for Interview: Phone interview

Education: Diploma Lutheran Medical Center, BSN – University of Illinois at Chicago, NP – Rush University; MS – University of Illinois at Chicago, PhD- University of Illinois at Chicago

Certifications:

- Adult-Gerontology Acute Care Nurse Practitioner Certification, American Nurses Credentialing Center
- CCRN Certification, American Association of Critical Care Nurses
- ACLS, American Heart Association



Short Bio:

Ruth Kleinpell, PhD, RN, FAAN, FAANP, FCCM, has conducted research related to patient outcomes in hospitalized older adults and post discharge follow-up interventions using telehealth for vulnerable populations including elderly patients at high risk for hospital readmission. She has also conducted research focusing on outcomes after ICU treatment and role development of acute care nurse practitioners, among other funded studies. She served as principal investigator on an AHRQ-funded dissemination and research implementation grant aimed at disseminating patient-centered outcomes research to members of a health professional association. She is PI on a PCORI funded 2-year initiative to promote patient-centered outcomes research in ICU settings, using a national collaborative with 63 hospital ICU teams to implement patient and family centered initiatives. As the Assistant Dean for Clinical Scholarship, she serves as a mentor to junior faculty for clinical scholarship and research initiatives, collaborates on Vanderbilt University Medical Center (VUMC) clinical projects, and provide consultation to the VUMC advanced practice registered nurses (APRNs) for various scholarship initiatives. She also serves as PI for a national collaborative through the Vanderbilt University Medical Center Office of Advanced Practice for a national Choosing Wisely- APRN initiative. In addition to being inducted as a Fellow for AAN, AANP, SCCM, honors include National Organization of Nurse Practitioner Faculties Lifetime Achievement Award, 2017, Sigma Theta Tau

International Nurse Researcher Hall of Fame Award, 2012, Sigma Theta Tau International Practice Academe Innovation Award, 2011, American Association of Critical Care Nurses Flame of Excellence Award, 2010, National Organization of Nurse Practitioner Faculties Research Award, 2010, Sigma Theta Tau International Clinical Research Award, 2007, Society of Critical Care Medicine Norma Shoemaker Award for Critical Care Nursing Excellence, 2007, American Association of Critical Care Nurses, Excellence in Education Award, 2005, American Association of Colleges of Nursing, Leadership for Academic Nursing Program, 2005. She has maintained active clinical practice throughout her career.

When you did become an NP? What was the motivation?

I worked for 15 years as a critical care nurse in the Surgical ICU at the University of Illinois at Chicago. After completing my masters and doctoral work and working as a research associate and then assistant professor at Rush University, I continued to work in the surgical ICU. In 1994, Rush University decided to develop an acute care nurse practitioner track. I had the opportunity to go through the pilot program at Rush and was part of the first cohort that took and passed the initial ANCC acute care nurse practitioner exam. The role of the acute care practitioner has certainly expanded over the years and is not bound by hospital walls. ACNPs can be found working as hospitalists, in critical care units, ED, subacute care, transitional care, home care, etc. I guess I was motivated by opportunity that the role provides.

What experiences did you bring into the role?

My role as an ACNP and as an educator has opened both clinical and research opportunities for me. My experiences are an outgrowth of my critical care nursing experiences. My research is very clinically based and focuses on the challenges that both critical care patients, families and nurses face.

Did you experience any challenges? How were they resolved?

I feel that as the role and scope of practice for ACNPs as well as for all nurse practitioners develops and expands, there are still barriers to practice. Physician colleagues and other healthcare professionals do not always acknowledge the extent of our practice. It is very important for all nurses to know their scope of practice and extent of their licensure.

Part of my ability to make inroads into critical care medicine is through my involvement in American Association of Critical Care Nurses and the Society for Critical Care Medicine (SCCM). I took a review course through the Society of Critical Care Medicine and liked the multidisciplinary aspect of the organization. I became a fellow within the organization and was a member of several national committees including the membership, research, and program committees. After that I was elected to the the board of directors, then served as President in 2017. I was the third nurse elected as president of SCCM in the 46-year history of the organization. Through that organization, I could network with affiliated groups, such as AACN, American Thoracic Society (ATS), and Chest (C) in a collaborative effort to focus on building

resilience for ICU providers. My role as president of the World Federation of Critical Care Nurses also provided an avenue for networking, research and manuscript development to promote critical care nursing worldwide.

Are there any experiences that you would like to talk about?

One of the most rewarding experience and for me a game changer, occurred in 1995 through the American Nurses Credentialing Center (ANCC). With their support, I developed and sent a survey to over 900 acute care nurse practitioners taking the first national certification exam to determine where they were working, barriers to practice and facilitators of practice. Through various funding sources, including the American Association of Critical Care Nurses, and the American Nurses Foundation, the survey continued for five years with over 400 respondents participating every year. As a result of that work and other national and international studies over the years, acute care nurse practitioners became well known and a component of other organizations such as ICN, AANP and NONPF.

What was most challenging in your career/ most important ?

Clinical practice has been and will always be most important. It is very challenging to juggle family, academia and other aspects of life with clinical practice. I always felt that it was important to maintain a clinical practice while teaching or conducting research.

Is there anything you would want to change?

Consistency of nurse practitioner practice across all fifty states would be ideal. There have been small gains in advanced practice state by state, but no consistency across state lines. I'm not sure what the best avenue would be to promote nurse practitioners to work to their full scope of practice and licensure in all states. Perhaps the National Council of State Boards of Nursing along with nurse practitioner groups could help develop and promote national policy and turn all states "green." The VA is a good model where all advanced practice nurses work to their full scope of practice and licensure. We should be more consistent in using terminology such as scope of practice and licensure and avoid terms such as independent practice, that often evokes confusion about the true meaning of NP practice.

For me personally, I have been very thankful for all the great opportunities that I have been offered. Recently, I have been elected to the board of ANCC and will learn more about the ANA enterprise (ANA, ANCC, ANA Foundation). I feel that it is important for NPs to serve on national boards so that we can learn from others as well as the organizations learning more about NP practice.

What do you see as pivotal moments in the past years?

Seeing advances such as the APRN Consensus Model has definitely been pivotal in advancing APRN practice. It is important to bring clarity to scope of practice. The growth of advanced practice national organizations has also been pivotal. They have been key to influencing APRN

policy. There are many opportunities for APRNs at the state, national and international level. All APRNs need to be aware of state policies, practice acts and take appropriate action. We cannot rely only on organizations. This must be an individual as well as collaborative effort.

We also need to monitor the quality of NP education and graduates of these programs. The educational programs need to ensure quality and meet entry level competencies. For profit schools need evaluate models and educational preparation and competencies of graduates. All advanced practice educational programs must meet appropriate accreditation and certification exams need to be rigorous.

There are many ways in which we can help novice NPs. It is important to have service mentors or even volunteer retirees to help the novice practitioner develop and refine skills. Retired NPs could work short shifts to help mentor new NPs socially as well as professionally. They have a wealth of knowledge to share.

What advice would you give to new nurse practitioners?

Take advantage of all learning opportunities. Accept and promote professional responsibility for state and national policies.

What do you see as the role of Nurse Practitioners in the next 25 years?

There will be roles that don't even exist in today's world. There may be more telehealth, space health etc. Nurse practitioners need to be proactive. Don't be afraid to google health advances and see what is out there. With new technology, there are always new opportunities. NPs need to pay attention and stay aware of updates in health care, the political area, and national health policy. We also need to be open to new avenues of care, be active on social media, and engaged at the state and national level, to ensure that NP education, practice and research advances are disseminated and applied.