

Advanced Practice Registered Nurses Jacqueline Toia and Kathleen Murtagh underpin the critical role of Advanced Practice Providers as frontline care in multi-disciplinary teams, and share the importance of the Advanced Practice Providers voice at large meetings such as IDWeek 2024.

Citation:





Jacqueline Toia¹ and Kathleen Murtagh²

- Pediatric Nurse Practitioner, Infectious Diseases Ann & Robert H. Lurie Children's Hospital of Chicago, Illinois, USA
- 2. Family Nurse Practitioner, Infectious Diseases Ann & Robert H. Lurie Children's Hospital of Chicago, Illinois, USA

What does a typical day as an Advanced Practice Registered Nurse (APRN) look like?

Typical? Every day is different, that is part of the Infectious Diseases (ID) magic. We tend to start each day by individually completing a thorough review of each patient's chart. We then come together to discuss each patient as a team. This is followed by service rounds; we have two separate ID services at Ann & Robert H. Lurie Children's Hospital (LCH) in Chicago, Illinois. Our service teams consist of the General ID team and the Transplant ID team. There are slight nuances for each team. Ultimately, the teams round on the wards, examining our patients and engaging with the families and the primary team for updated and ongoing communication. Often, we will participate in multi-disciplinary rounds, this is especially valuable for the most critically ill patients, ensuring all stakeholders are

informed and engaged in a planned approach to care provisions. Of course, the documentation of our work takes priority, usually in the afternoon. There is additional coordination of care (labs, discussion about antimicrobial changes, follow up appointments, coordinating clinic visits with other sub-specialities) for many of our patients that is accomplished as needs arise throughout the day. We manage new consults as they are requested and prioritize education, formally and informally, for ID team members and our partners on collaborating teams. The Advanced Practice Providers (APP) provide continuity for the ID services. We are the frontline for all of our partners on the collaborating teams Monday-Friday. We cover assigned inpatient and outpatient responsibilities, some of us have assigned outpatient clinics; but, most importantly, we are prepared to pivot, on any typical day, as we are needed.

Q2 What is the most rewarding and most challenging part of your work?

At the risk of sounding trite, it's all rewarding! ID is a unique subspeciality that has a wide breadth of knowledge, experience, and encounters. Not one day resembles another, which can be challenging, but it is also rewarding. Couple that with the privilege of working with children and their families and you have the perfect recipe for a beautifully fulfilling career. That is not to say there are not difficult times, there are. The best and worst of times are experienced. There are cases that will stay with you forever, some outcomes will make you rejoice, other outcomes will darken your soul. Working hard to make a difference is the best part, a bad outcome for a child and their family can be devastating. Learning to navigate the differences is crucial.

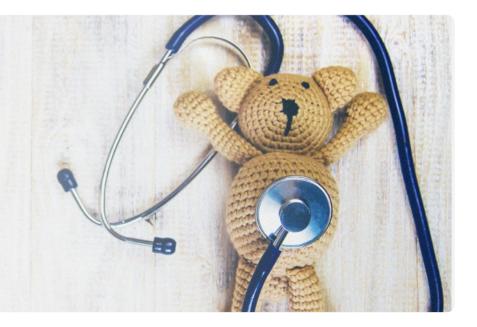
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Q3 How do you cross-collaborate with other healthcare professionals to deliver patient care?

Collaboration is the key to every medical success. Be it among our own team members or between the multi-disciplinary services. As a consultation service, our success depends on collaboration. We work hard every day to foster the relationships we have in place with our partnering teams. Our aim is to be available for coordination of clinical care, we focus on efficiency, and improved outcomes. When we formulate a plan of care we close the loop by directly communicating our recommendations with the main stakeholders. This is often accomplished during multidisciplinary rounds, or via direct contact after completion of our consultation. We make every effort to discuss our thoughts face-to-face as soon as our determinations have been made: if that is not an available option, we call and speak directly with one of the partnering team members.

What is the importance of large meetings, such as IDWeek 2024, to provide a platform for APPs to discuss their issues related to practice?

Meetings are paramount to the future success of APPs within the speciality of ID. Professional meetings are designed to be devoted to the professional development of its members, promoting, and improving the profession with which they are associated. This is a bit of a fragile question because, after many years, APPs are just now gaining a little traction into having a voice within Infectious Diseases Society of America (IDSA), which is our professional society. Continuing to grow our involvement is critical. APPs are a growing part of the ID workforce. As the landscape of ID continues to change, preparedness is essential to the future. APPs can be especially useful in many areas of ID including clinical care, clinical research, antimicrobial stewardship, and infection control. IDSA can provide unique opportunities for APP learning,



career advancement, networking, and enhanced outcomes within ID. That said, leadership needs to continue to recognize our presence and provide directed opportunities and resources aimed at APP job responsibilities and practice.

Q5 What were your most surprising or valuable takeaways from IDWeek 2024?

Knowledge, it is all about the knowledge. During IDWeek we are given the opportunity to attend sessions presented by national and international leaders. We are exposed to experts within the field. It is a time to listen and consider new trends or learn how to adapt them to your clinical practice. It is a place and time to develop problem solving and decision-making skills. IDWeek is also a venue to present some of your own work, be it a poster presentation or an oral presentation. Meeting colleagues and building relationships that can be enduring throughout one's career is invaluable. We always make it a point to spend time with other APPs at IDWeek, which has led to a working group of APPs that meet regularly throughout the year.

Q6 What is the most recent activity of your IDSA Working Group, and what are your hopes for the future?

We started as an informal "working group" for many years. With our commitment to caring for children within the subspeciality of Infectious Diseases, and to each other, we never wavered on the importance of becoming recognized within the IDSA/ Pediatric Infectious Disease Society (PIDS) society. Hence our persistence on moving forward with a dedicated place on the organizational chart, knowing there is much work ahead of us to define this place and the commitment to our work.

For many years now (since 2019), pediatric ID APPs have been working with one another and supporting one another parallel to the organization. In 2022 we were

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recognized as a "Working Group" by the PIDS, and since, we have continued to try to gain support and buy-in to become an APP committee. In May, we submitted a proposal to the PIDS Board of Directors and in August we were granted status as a sub-committee. It is our strong belief that there will be direct and significant benefits from having an APP presence in place within PIDS. It will enhance our professional engagement and allow us to contribute in meaningful ways, including professional development, advocacy, research and quality improvement, and patient and family education. We further emphasized the need for embracing APPs as critical members of the pediatric ID workforce in a paper we published earlier this year, entitled 'Advanced Practice Providers in Pediatric Infectious Diseases¹ We are excited to have a place at the table and work to grow our involvement and contributions as APPs within our professional society.

References

 Toia J et al. Advanced practice providers in pediatric infectious diseases. JPIDS. 2024;13(3):228-31.