

Caring for Older Americans

Recommendations for Building a
National Program for
Graduate Nursing Education in Gerontology

Based on the Proceedings from the Expert Panel
on Graduate Geriatric Nursing Education and Practice
March 2001

Sponsoring Partners

*The John A. Hartford Foundation's
Building Academic Geriatric Nursing Capacity Program
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Executive Summary

The nursing shortage in the United States is well documented. There is a crisis atmosphere when discussing this problem in health care forums. Beyond the critical issue of the nursing shortage, however, lies a much greater problem bearing down on our older Americans, a segment of the population that grows day by day and has unique health problems needing specialized care.

As Americans age, their healthcare needs change dramatically. For example, in addition to changing nutritional needs, personal habits and physical activity levels, older adults' responses to certain medications and pharmaceutical drugs may also change. Meanwhile, the nursing profession that has the knowledge and training to appropriately address and respond to these changes does not have the personnel to keep pace with these growing needs.

The shortage of nurses to care for older Americans is felt acutely in hospitals, long-term care facilities and home care service agencies. Despite the increased aging of the population and the associated need for nursing services in long-term care facilities, the number of nurses working in these facilities has decreased by more than 10 percent since 1996. Furthermore, there is currently no nationally-accepted geriatric specialty curriculum in the United States to prepare those individuals interested in pursuing geriatric nursing.

According to a study presented at the **Expert Panel on Graduate Geriatric Nursing Education and Practice**, only 4,200 nurses (out of an estimated 70,000-80,000 advanced practice nurses) have been certified by the ANCC as advanced practice gerontological nurses since 1991. When broken down, those numbers show that only 3,400 geriatric nurse practitioners and 800 gerontological clinical nursing specialists have been certified in the last 10 years. Because the current advanced practice gerontological nurse workforce is so small and practices predominantly in institutional long-term care and urban settings, it is growing more difficult to answer the increasing demand for quality geriatric health care. Further, payment and licensing issues present significant barriers to advanced practice nurses who choose geriatrics as a specialty field.

And so, we have the typical good news/bad news scenario: Americans are living longer, more productive and fulfilling lives, but the nursing profession—an integral part of an effective health care system—is not keeping pace, either in education or numbers, with this growing segment of the population.

To confront the issues facing graduate geriatric nursing education in the United States today, an expert panel was convened in March 2001 in Washington, D.C. The papers presented by panel members focused primarily on the need for more advanced practice gerontological nurses and the gaps that exist in advanced practice geriatric nursing education. Specific topics addressed how to integrate geriatric content into master's-level coursework, the role of "telehealth" in the future of graduate geriatric nursing education, and insuring cultural competence in nursing care of older adults.

The **Expert Panel on Graduate Geriatric Nursing Education and Practice** was charged with two goals:

1. To develop strategies to strengthen the education of master's-level nurses for geriatric practice
2. Provide the foundation for a national effort for advanced graduate nursing education in gerontology

The following recommendations are based on the proceedings of the panel's two-day conference. Within the six recommendations lies the cornerstone of the group's work: The need to produce more advanced practice gerontological nurses. Associated with this need was a call for the creation of a nationally-standardized geriatric nursing curriculum for all master's-level nursing, a curriculum which will prepare sufficient numbers of gerontological nurse practitioners who will provide the expert care for the nation's growing number of older Americans.

These recommendations provide an outline for further discussion of building a national program for graduate nursing education in gerontology. Specifically, the recommendations call for a new, national curriculum to be created after the current status of geriatric nursing has been studied and a consensus has been reached on the needs for the future.

Further, it is recommended that faculty members teaching geriatric nursing must themselves receive advanced geriatric education. In order to build the pool of faculty for this field, it is recommended that innovative funding mechanisms be created. And finally, a national tracking system must be created so that educators and practitioners can regularly evaluate the profession, and that all pertinent information gained from these efforts be made available in a repository of geriatric nursing knowledge.

NOTE: Some of the issues discussed in the meetings were not directly applicable to these six recommendations, but will be useful in the ongoing discussions of a new, national geriatric nursing curriculum. These ideas are included in an appendix.

Recommendation One

Increase the numbers of gerontological nurse practitioners and other advanced practice gerontological nurses

The current number of gerontological nurse practitioner programs cannot meet the need for quality geriatric health care services. Strengthening existing masters-level programs and developing new, innovative and flexible graduate programs must begin now in order to attract nurses who will serve as clinical leaders in geriatric nursing within the future health care system.

Actions

- Blend programs and specialty areas such as clinical nurse specialists/nurse practitioner roles
- Develop post-master's-level programs in gerontology
- Develop fast-track (BS-MSN) curricula to prepare Gerontological Nurse Practitioners (GNPs)
- Offer major and minor concentrations in graduate geriatric nursing education programs
- Develop programs that encourage adult, family, oncology, and women's health master's-level programs to prepare graduates dually eligible for certification in a specialty and in geriatrics

Develop incentives for practicing nurses to pursue a new career focus in geriatric nursing

Recommendation Two

Obtain innovative funding for graduate study in geriatric nursing

Building a national geriatric nursing curriculum will require a targeted effort to identify public and private sources of funds to support projects with a geriatric focus. This requires building public/private partnerships and partnerships within the private sector to provide funding to strengthen the role of geriatric nursing.

Actions

- Establish funding mechanisms to support innovative clinical experiences and preceptorships
- Develop new categories of publicly- and privately-supported grants focused on geriatric education and practice (e.g. grants to support oncology nurses who wish to study geriatric components)
- Require a commitment of students who receive financial aid from a participating institution to work in geriatric care settings after graduation
- Work with employers to provide incentives for nurses to obtain geriatric specialty training
- Link with state-level work force development efforts to encourage the growth of geriatric nursing
- Establish criteria for loan forgiveness programs

Recommendation Three

Prepare faculty that will prepare master's-level gerontological nurses

There is a shortage of nursing faculty on the master's level. The panel recommends immediately increasing faculty development in advanced practice geriatric nursing to create a teaching force that will be ready and able to put the new curriculum to use. Work must begin now to provide all nursing faculty members with core knowledge of standardized geriatric content and practice.

Actions

- Develop a mentoring program in which experienced geriatric faculty encourage and support the interests of other nursing faculty
- Build a consultation network of geriatric nursing experts to assist educational institutions in improving their geriatric content
- Build an awareness among existing nursing faculty about geriatrics and the need for geriatric content to be included in all nursing education courses
- Host workshops for non-geriatric faculty to expose them to practical experiences in geriatrics
- Offer faculty stipends/tuition for summer internships in geriatrics

Recommendation Four

Develop a new, national master's-level geriatric nursing curriculum

The demographics of the American population mandate that all levels of nursing education prepare graduates to provide competent, quality health care to older adults. Therefore a new national master's-level geriatric nursing curriculum must be developed to prepare a workforce that is ready to respond to the demands of this growing segment of the population. These advanced practice gerontological nurses must also have an understanding of and competence in health care systems, reimbursement sources and interdisciplinary practice.

Actions

- Create a geriatric nursing “education pipeline” that will encourage nurses at the undergraduate level to consider and plan for careers as master's-level gerontological practitioners and/or faculty
- Develop new geriatric core competencies and credentialing requirements, using evidence from collective research and data (see Recommendation Five)
- Establish a team of national geriatric nursing experts to develop the curriculum and call upon national nursing organizations for support
- Develop joint ventures with Geriatric Education Centers
- Enhance existing Centers of Geriatric Nursing Excellence and add more centers that may also be designated as regional centers
- Develop core geriatric curriculum components and apply them to all other advanced practice nursing programs

Recommendation Five

Create national standards, methodologies and a tracking system for evaluating the status of graduate-level geriatric nursing

At present, there is no standard mechanism by which to measure, coordinate or track data on the impact geriatric nursing has on the patient population or on the practice of nursing. Evaluating progress within the profession is made more difficult given that no standard indicators exist. Only with more research and data can evidence-based curricula, consistent with nationally standardized competencies and identified needs, be developed.

Actions

- Form a task force to determine the methodologies needed to track data on:
 - the supply of advanced practice gerontological nurses
 - the programs preparing advanced practice nurses
 - the articulated need for these graduates
- Create geographic clusters of agencies and academic centers to profile the aging population by service area to find strengths and weaknesses in levels of care (i.e. tracking the number of geriatric nurses in long-term care and resident care facilities)
- Launch a targeted effort to identify public and private sources of funds to support research projects with a geriatric nursing focus
- Establish standard indicators by which geriatric nursing can evaluate its progress

Recommendation Six

Create a repository of geriatric nursing knowledge

Information on the supply and demand of advanced practice nurses, programs and current state of knowledge in geriatric nursing will be accumulated, stored and shared through a dynamic center that promotes access to geriatric resources and enhances scholarly dialogue among nurses, providers and consumers.

Actions

- Develop a plan for evaluating and approving materials for the repository
- Determine gaps in existing geriatric materials and make appropriate recommendations
- Collaborate with key partners, such as the National Library of Medicine, to expand resources and establish public awareness
- Develop effective electronic communication pathways

Appendix

Below is a compilation of the panel's suggestions that are relevant to the overall recommendations and worth further consideration when building a national program for graduate nursing education in gerontology.

- Consider the community that comprises all of the organizations, agencies, patients and other individuals involved in geriatric care when developing educational content
- Include an identified level of geriatric competencies as a program outcome of all nursing education
- Evaluate programs and develop evidence-based research techniques when developing geriatric nursing education
- Host a national summit on geriatrics to address the need to improve recruitment and retention of nurses in geriatric settings
- Integrate geriatric nursing and practice into broader public relations activities in the nursing community, such as the nursing PR campaign “Nurses for Healthier Americans”
- Hold sessions and panel discussions about geriatric nursing at broader nursing meetings and conferences
- Establish a “Speakers Bureau” of geriatric nursing experts who inspire interest in geriatric nursing
- Establish preceptor arrangements between advanced practice students and geriatric nursing leaders
- Require a commitment of students who receive financial support from a participating institution to work in geriatric care settings after graduation
- Establish criteria for follow-up after graduation to determine if students who were supported continue to use their geriatric knowledge and skills
- Evaluate outcomes of nursing assistant-to-registered nurse student projects supported by Division of Nursing grant funds
- Integrate core geriatric content, including mental health, family theory, and the consultative role of the advanced practice nurse, into other specialty areas (i.e. adult and oncology nursing)
- Develop practice-oriented, interdisciplinary educational programs that link clinicians, educators and students

- Include geriatric education in paraprofessional, associate, baccalaureate, graduate, and post-graduate programs for nurses
- Include in the nursing knowledge repository: practice models; best practices; consultative roles; evaluated models of practice; continuing care communities; education models; learning activities and exercises; paraprofessional training; innovative curriculum designs; innovative uses of technology; success stories and cautionary tales; Web-based resources; workforce issues; consumer issues; case studies; national research papers
- Encourage paraprofessionals to pursue geriatric nursing degrees and encourage all interested and competent nursing students to seek leadership training
- Promote and provide professional development opportunities to practicing nurses so they will be able to provide competent, quality care for older adults
- Develop administration programs for certified geriatric nurses
- Broaden the focus of geriatric nursing through continuing education programs in such areas as reimbursement systems, care management, collaborative practice supervision, and delegation
- Convene accrediting bodies to consider new models of certification that eliminate onerous requirements of dual certification and promote reasonable certification requirements
- Review competency process being conducted by AACN to ensure compatibility
- Identify and evaluate barriers to certification

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