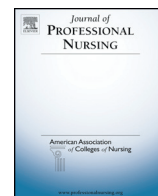




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Embracing the challenges in graduate geropsychiatric nursing education: Findings from a national survey

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Introduction

Advanced practice nurses are relied upon to build a culture of health (Robert Wood Johnson Foundation, 2017) for the 7.5 million older persons with mental illness (Evans, Buckwalter, & Beck, 2015; John A. Hartford Foundation, 2011). In 2030, the population of older persons is expected to nearly double (Ortman, Velkoff, & Hogan, 2014) and result in a simultaneous 80% increase in the number of older persons with mental health and substance use disorders (Institute of Medicine, 2012). Filling the gaps in geriatric mental health with education and collaborative practice opportunities are among the looming challenges that currently face colleges of nursing (Stephens, Harris, & Buron, 2015).

Over the past ten years, there have been significant demographic, academic, and practice changes. These changes warranted a national survey that was conducted in 2014 on graduate nursing programs (Stephens et al., 2015) to evaluate the state of geropsychiatric nursing (GPN). The purpose of this paper is to investigate and report additional findings and perspectives from these survey results to answer three research questions. What are the 1) barriers, 2) institutional desires, and 3) awareness of resources that can be used to propose solutions for advancing graduate nursing education and collaborative practice in GPN?

Background

Graduate geropsychiatric nursing

From a nursing perspective, graduate nursing education is founded on a competency-based approach within the framework of the APRN Consensus Model (APRN Joint Dialogue Group, 2008). Graduate GPN is aligned with nursing and interprofessional competencies in education and collaborative practice (Association for Prevention Teaching and Research, 2009; Harris, Mayo, Balas, Aaron, & Buron, 2013). Although there is no certification in geropsychiatric nursing, nurse practitioners and clinical nurse specialists can specialize in psychiatric mental health, adult-gerontology primary care or acute care nursing and further sub-specialize in geropsychiatric nursing.

Nurse educators have been tracking the progress of GPN since 1985. Thirty years ago, higher education was more focused on gerontology rather than geropsychiatry.

The first national survey (Murphy & Hoeffler, 1987) showed that half of psychiatric mental health nursing programs provided a subspecialty and the remaining programs allowed students to choose a specific population for their clinical experiences. The survey results indicated that GPN had a high potential for program growth as a subspecialty. In 1993, a questionnaire (Hoeffler, 1994) evaluated essential graduate level gerontological nursing knowledge, competencies and GPN.

In 2004, researchers from the University of Pennsylvania conducted a survey on graduate geropsychiatric nursing education (Kurlowicz, Puentes, Evans, Spool, & Ratcliff, 2007). Results showed that one third

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Table 1
Selected geropsychiatric graduate nursing education survey questions.

Geropsychiatric nursing educational resources	Responses
Does your institution use the Geropsychiatric Nursing Competency Enhancements? http://www.pogoe.org/productid/20660	Yes No Unsure I didn't know the resource existed
How often does your faculty utilize the geropsychiatric nursing content on POGOe? http://www.pogoe.org/	Not at all Somewhat Quite a bit All the time Unsure I didn't know the resources existed
How often does your faculty utilize the geropsychiatric nursing content on consultgerirn? http://consultgerirn.org/	Not at all Somewhat Quite a bit All the time Unsure I didn't know the resources existed
How often does your faculty utilize the geropsychiatric nursing content on Geriatrics at Your Fingertips? http://geriatricscareonline.org/ProductAbstract/geriatrics-at-your-fingertips/B005/	Not at all Somewhat Quite a bit All the time Unsure I didn't know the resources existed
What other geropsychiatric nursing web-based resources does your program use?	Please specify Responses
What funding support (federal, foundation, etc.) has your program received for geropsychiatric graduate nursing education?	None Current Previous Don't know
Please indicate ALL types of funding sources you have received for GPN graduate education	HRSA Foundation State Funding Other I don't know If you marked other, please specify Responses
Geropsychiatric graduate nursing education: desires and barriers Does your school DESIRE to have a subspecialty clinical track or minor in geropsychiatric nursing?	Yes-we are actively working on it Yes-we have considered it Unsure No-it is not a priority at this time Don't know
What is the primary barrier to implementing a subspecialty clinical track or minor in geropsychiatric nursing at your institution?	Lack of student interest Not enough time in the program Not very important content relative to the other topics we need to cover Lack of faculty expertise No funding to support the program Unsure Responses
Interprofessional education Is there an interprofessional education component or focus in your graduate nursing education programs?	Yes No
If yes, describe the nature of your interprofessional education as it relates to the care of the older adult with psychiatric mental health issues	
What disciplines are involved in your IPE as it relates to the care of the older adult with psychiatric mental health issues? Please select all that apply	Nursing Medicine/Psychiatry Pharmacy Physical Therapy Dentistry Social Work Other Don't know

of psychiatric mental health nursing graduate programs ($n = 60$) reported some GPN content. Over half ($n = 116$) of all the schools responding to the survey ($n = 206$) reported integration of GPN content. Most GPN content was found in graduate nonpsychiatric programs rather than psychiatric mental health programs.

A survey in 2014 (Stephens et al., 2015) compared with the similar survey 10 years earlier (Kurlowicz et al., 2007) found that despite substantial efforts to improve GPN education, fewer than 70% of nursing schools offer GPN content. Moreover, only 40% of APRN primary care programs include GPN content in their curricula, and fewer than 9% of

nursing schools provide specific GPN programs, tracks or minors (Stephens et al., 2015). The 2014 survey, and results from the two previous national surveys have captured 28 years of trends in GPN (Hoeffler, 1994; Kurlowicz et al., 2007; Stephens et al., 2015).

All data in this study are from the 2014 national survey with additional information to improve geriatric mental healthcare (Stephens et al., 2015). The analysis in this study is a response to the survey questions in Table 1. The results inform: 1) Educators with further information to include in graduate nursing programs and 2) Policy makers with recommendations for bolstering the geropsychiatric workforce.

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