



The growth and development of gerontological nurse leaders in policy

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ABSTRACT

Background: The National Hartford Center of Gerontological Nursing Excellence (NHCGNE) Scholars/Fellows Award Program was designed to promote the growth and development of nurse scientists, educators, and leaders in aging.

Purpose: McBride's conceptual framework of the growth and development of nurse leaders was used to examine the NHCGNE impact on health and aging policy work among scholars/fellows, including barriers, facilitators, and resources.

Methods: A multimethod two-phased approach included an online survey (phase I) focused on research and policy impact at local, state, or national level. Telephone interviews (phase II) were conducted to further understand the nature, depth, and focus of respondents' policy work.

Discussion: Based on our findings, we propose multilevel recommendations for advancing nurse scientists' capacity to be leaders in shaping policy.

Conclusion: Keen research skills are influential in policy advancement but not sufficient to advance policy. Preparing nurse scientists with competencies in translating research into policy can ultimately transform health and health care for older adults.

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Introduction

The report by the [Institute of Medicine \(2011\)](#), *The Future of Nursing: Leading Change, Advancing Health*, calls for nurses to be leaders and partners in redesigning health care and shaping health policy:

To be effective in reconceptualized roles, nurses must see policy as something they can shape rather than

something that happens to them. Nurses should have a voice in health policy decision making and be engaged in implementation efforts related to health care reform (p. 8).

In addition, *Nursing's Social Policy Statement (American Nurses Association, 2010)* posits that nurses have an essential role in advancing the public's health through health policy. But is that something that nurses are prepared to do and are doing, particularly those who are leaders and experts in their fields?

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In 2000, the American Academy of Nursing (academy) received a grant from the John A. Hartford Foundation to strengthen the capacity of schools of nursing to build experts in care of older adults as researchers, educators, and leaders (Franklin et al., 2011). The initiative was known as BAGNC, or Building Academic Geriatric Nursing Capacity, and it funded predoctoral scholars and postdoctoral fellows to develop their leadership and research knowledge and skills. In 2011, the program moved to the Gerontological Society of America (GSA) as the National Hartford Center of Gerontological Nursing Excellence (NHCGNE) and was housed at New York University Rory Meyers College of Nursing for 1 year while becoming a freestanding nonprofit organization now incorporated in Washington, DC, 2017.

The academy and NHCGNE partnered to examine whether and how these leaders in gerontological nursing were influencing health policy, although policy had not been an explicit part of the initial program. This article reports on the findings of our multimethod study and makes recommendations for future directions to develop nurses as leaders in health policy.

Background

The current mission of the NHCGNE is to enhance and sustain the capacity and competence of all nurses to provide quality care to older adults by supporting faculty development, advancing gerontological nursing science, facilitating adoption of best practices, fostering leadership, and designing and shaping policy. The history of the NHCGNE spans nearly two decades and is closely aligned with the mission of the John A. Hartford Foundation to improve the health of older Americans. The NHCGNE, an international association of schools of nursing and like-minded organizations, is an example of the foundation's substantive investment in health and its transformative grant making to prepare the nursing workforce to be competent to care for our aging society and world (Harden & Watman, 2015).

The critical objectives of the NHCGNE are to:

- a. Prepare new faculty to provide academic leadership in gerontological nursing for associate and higher degree nursing programs nationally to address the dynamic and changing needs of the older adults of the future;
- b. Enhance the gerontological nursing expertise of current faculty at associate and higher degree nursing programs nationally; and
- c. Leverage funding to support activities of the NHCGNE and promote long-term sustainability.

The NHCGNE Scholars/Fellows Training Award Program (Harden & Watman, 2015) officially concluded in December 2016 and the collective 15 cohorts spanning 2001 to 2015 and across 50 well-established

research-aligned schools of nursing are now known as NHCGNE Legacy Affiliates (<http://www.nhcgne.org/development>). To date, there are 249 Legacy Affiliates that have received more than 280 predoctoral/postdoctoral training awards for specialization in gerontology. Some of the predoctoral NHCGNE scholars went on to become postdoctoral NHCGNE fellows. In 2016, 87% of scholars and fellows who completed an annual NHCGNE evaluation survey are now working in academic appointments, with 24% in non-tenure-track positions, 33% in tenure-track positions, and 30% already with tenure. Collectively, during and after their NHCGNE award programs, the Legacy Affiliates obtained \$281,794,133 in funding from a total of 955 research grants for studies with specific relevance to the care of older adults. Methodological approaches represented among the studies included quantitative, qualitative, and mixed methods as well as pilot testing of clinical interventions. Most of the studies arose from the researchers' interests in changing practice or policy.

Conceptual Framework

For this study, we used the conceptual framework of The Growth and Development of Nurse Leaders by McBride (2011) (Figure 1). This framework is driven by the tenets of developmental psychology (Dalton, Thompson, & Price, 1977) and addresses three major views: leadership as personal, leadership as achieving organizational goals, and leadership as transformational. The framework focuses on career stage and mentoring needs as well as developmental tasks by career trajectory. The framework is inclusive of personal qualities of leaders, including strengths, limitations, and stages of a career. Building on the foundation of formal education, socialization, and the assimilation of values, beliefs, and knowledge, the second major view focuses on essential skill sets in achieving organizational effectiveness, including expectations, processes, and directions, which takes into account communication effectiveness and development of people, programs, and resources. The framework comes to completion with an emphasis on strategic vision and excellence as a change strategy. For the purpose of this article, the authors focus on leadership as personal inclusive of preparation and independent contributions.

Purpose and Aims

The purpose of this research is to explore the impact of the NHCGNE scholarship program on the experiences of funded scholars and fellows in health and aging policy. Our goals were to determine the impact of the program on the scholarship and policy outcomes of the NHCGNE scholars and fellows in gerontological nursing and to examine the barriers, facilitators, and resources for engaging in policy work that impacts the health of older adults.

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