Development of a Toolbox with Gerontological Advanced Nursing Practice Content: Improving Educational Resources for Nurse Practitioner Educators

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Abstract

The merger of adult and gerontology nurse practitioner (NP) certifications increases the demand for NP student gerontology clinical experiences. Nurse practitioner educators (NPE) struggle to identify clinical preceptors prepared in gerontology. This gap in gerontology prepared clinical preceptors was identified by a group from the Gerontological Advanced Practice Nurses Association (GAPNA). A small group from GAPNA's education committee developed a toolbox containing an array of gerontology resources. Following development, the toolbox was favorably rated during a pilot test. The purpose of this article is to describe a free, web based toolbox of gerontological content for clinical preceptors in NP programs.

Nurse practitioners (NP) are accepted as primary care providers and an option to physicians for delivery of primary health care (American Nurses Association, 2010; Institute of Medicine [IOM], 2011). The landmark IOM report The Future of Nursing: Leading Change, Advancing Health clearly delineated the need for increasing the pool of adequately trained advanced practice registered nurses (APRN) allowed to deliver health care within their scope of practice. Nurse practitioner educators (NPE) in family and adult/gerontological programs struggle to identify clinical preceptors prepared in gerontology for NP students. The purpose of this article is to describe a free, web based toolbox of gerontological content for clinical preceptors developed by the Gerontological Advanced Practice Nurses Association's (GAPNA) education committee.

While many clinical preceptors are prepared in family and adult populations, few are prepared in gerontology. This gap in gerontology prepared clinical preceptors was identified by GAPNA's education committee and their response was to develop a toolbox of gerontological

resources for clinical practice with older adults. The toolbox is intended for use by APRNs and other clinicians who precept NP students in clinical sites with older adult populations.

NPE are responsible for planning both didactic and clinical learning. As part of the faculty role, NPE collaborate with advanced practice registered nurses (APRN) serving as clinical preceptors. In 2008, the IOM released Retooling for an Aging America: Building the Health Care Workforce which highlighted the need for additional geriatric training of our health care personnel. In response to the Consensus Model for APRN Regulation: Licensure, Accreditation, Certification and Education, (American Association of Colleges of Nursing, 2008) which requires merger of adult and geriatric NP education and certification, GAPNA's education committee embraced the importance of providing APRN preceptors with the relevant resources necessary to enhance the delivery of primary care to older adults.

Demographic trends show that older adults will continue to be a growing population for decades to come. According to the 2010 census, 40 million older adults 65 years or older lived in the United States; this accounted for 13% of the American population. Graying of the baby boomer generation is projected to increase the older adult population to 72 million (20% of total population) by 2030. The U.S. Census Bureau predicts an increase of older adults age 85 and older to dramatically rise from 5.5 million in 2010 to 19 million in 2050 (Federal Interagency Forum on Aging-Related Statistics, 2012). As more of the population enters older adulthood, the demand for competent APRN providers will naturally follow the same course.

Methods

During the 2011 annual GAPNA meeting, members of the education committee identified concerns regarding limitations in clinical geriatric experiences for NP students. Three members from GAPNA's education committee volunteered to form a subcommittee that would develop an APRN preceptor toolbox containing preceptor and geriatric clinical resources. With input from GAPNA's education committee, the subcommittee members agreed that the toolbox would include preceptor tools for mentoring, as well as evidence based clinical guidelines.

The process began with a literature review of the Cumulative Index to Nursing and Allied Health Literature database spanning the past six years. The search yielded only two articles (Barker & Pittman, 2010; Brooks & Niederhauser, 2010), confirming the need for inclusion of preceptor-as-educator resources to the toolbox. The authors also gathered preceptor resources utilized at their respective universities. Each author generated written ideas for this project, discussed criteria with GAPNA's education committee and held telephone conferences for identification of important components necessary to empower the preceptors. The authors focused on providing preceptors with objective tools for assessing professional student behavior

and constructive steps in handling difficult student situations. It was decided that the toolbox would be divided into two categories: preceptor-as-educator guidelines and geriatric health care guidelines/resources.

Preceptor -as-educator guidelines list suggested questions that preceptors should address prior to making a commitment to students. These, include obtaining a copy of the course objectives and understanding student/faculty expectations. Potential preceptors should also consider the impact the student's presence will have at the clinical setting, such as productivity, contracts, etc. Once the APRN has agreed to precept the student, teaching tips are provided, including establishing student expectations, matching patient diagnoses with student needs, assigning outside reading, and the recognition that not all students progress at the same pace. Handling difficult student behaviors can be frustrating to the preceptor and disruptive to the clinical setting. This toolbox addresses such scenarios and includes an objective rubric for expected professional behaviors (Oakland University, MI). The preceptor-as-educator section concludes with examples of meaningful clinical sites for geriatric experiences and suggested readings.

The second section of the toolbox focuses on health care guidelines/resources. It contains robust links for many common geriatric health topics. Evidence based guidelines and peer reviewed materials are provided for such topics as geriatric assessment resources, gero-psychiatry/dementia, safe driving in the elderly population, recognition and treatment of substance abuse, legal issues regarding advanced directives and diminished capacity, end-of-life issues, and gero-pharmacology. Links for federal regulations governing nursing homes, minimum data set information, and The American Medical Directors Association are included so that NP students have access to long term care resources; a population setting specifically addressed in the recent IOM report (IOM, 2011).

After all toolbox resources were developed, it was disseminated to all members of GAPNA's education committee for comments and discussion. The authors received written comments and items were discussed during a regularly scheduled education telephone conference. Feedback was also received from GAPNA's board. Necessary revisions were made to improve the quality and usefulness of the toolbox.

Results

A cohort of GAPNA local chapters and university APRN preceptors were invited to review the toolbox and complete a brief evaluation via Survey Monkey. Twenty two preceptors agreed to review the toolbox content. Ninety percent (90%) of responders had greater than 5 years of experience providing primary care to older adults. (See Table 1). Most responders had more

than five years of experience as APRN preceptors. (See Table 2). A majority (86.4%) of APRNs indicated they were somewhat likely, likely, or very likely to use the toolbox when precepting APRN students. (See Table 3). Most responders (90.9%) stated they were somewhat likely, likely, or very likely to recommend the toolbox to other APRN preceptors. (See Table 4)

Table 1
Years Providing Primary Care to Older Adults

	Response %	Response #
<1 Year	5	1
1-3 Years	0	0
4-5 Years	5	1
6-10 Years	20	4
11-15 Years	20	4
>15 Years	50	10
Total		20

Table 2
Years of Precepting NP Students

	Response %	Response #
<1 Year	9.1	2
1-3 Years	9.1	2
4-5 Years	9.1	2
6-10 Years	27.3	6
11-15 Years	22.7	5
>15 Years	22.7	5
Total		22

Table 3
Likelihood of Using GAPNA Toolbox When Precepting NP Students

	Response %	Response #
Very Likely	45.5	10
Likely	9.1	2
Somewhat Likely	31.8	7
Not Likely	13.6	3
Total		22

Table 4
Likelihood of Recommending GAPNA Toolbox to Other NP Preceptors

	Response %	Response #
Very Likely	63.6	14
Likely	0	0
Somewhat Likely	27.3	6
Not Likely	9.1	2
Total		22

Conclusion

Given the broad range of clinical topics, the toolbox has utility in all primary care sites providing care to older adults. Treatment guidelines for minor illness to complex geriatric syndromes are easily accessible via the internet, thereby enhancing patient outcomes. Many of the websites, such as Portal of Geriatric Online Education, Hartford Institute for Geriatric Nursing, and American Medical Directors Association, are frequently updated. It is recommended that preceptors utilize the preceptor guidelines prior to committing to serve as APRN preceptors and frequently accessing the health care guidelines/resources during preceptorships. APRN students should also be familiar with the toolbox contents as they progress through their program of study.

Keywords: nurse practitioners, preceptors, gerontology, older adults, education

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