

Clinical Practice Characteristics of Nurse Practitioners Managing the Care of Older Adults

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Background and Significance

Nurse practitioners have been managing the care of older adults since the late 1960's. The role of the GNP emerged in the 1970's

Few studies specifically address outcomes of nurse practitioners who manage the care of older adults.

The Consensus Model for APRN Regulation: Licensure, Accreditation, Certification & Education (2008) established population foci that removed the ability for nurse practitioners to specialize as a gerontological nurse practitioner and indicated that “the APRN specialty be developed, recognized and monitored by the profession.”



The Profession's Response

Given the charge to the profession, the Gerontological Nurse Practitioner Association (GAPNA) recognized the need for addressing the need to address the future of the specialization of advanced practice gerontological nursing.

“An important first step in the process was to conduct a practice analysis to define the knowledge necessary for the expert.” (Duffy, 2012; GAPNA, 2015)



Purpose of the Study

- A national survey was conducted of nurse practitioners who manage the care of older adults to determine the practice characteristics in terms of professional activities and clinical skills in relationship to:
 - Years of experience as a nurse practitioner
 - Practice Setting
 - Population Foci



Instrument

- The Advanced Practice Nurses Managing the Care of Older Adults Practice Profile (APNMCOA) is a 153 item survey
- APNMCOA is divided into 6 sections
 - Demographic data
 - National Certification, Educational Preparation, Prescribing Privileges
 - Professional Organization Membership
 - 61 Professional Activities
 - 41 Clinical Procedures
 - Prescribing patterns of specific classes of medications

Source: Kennedy-Malone, L., Penny, J., Fleming, M.E. (2008); Williams, B. C., Warshaw, G., Fabiny, A. R., Lundebjerg, MPA, N., Medina-Walpole, A., Sauvigne, K., ... & Leipzig, R. M. (2010); American Geriatrics Society (2013).



Methods

- Membership of GAPNA who were nurse practitioners
- American Nurses Credentialing Center nurse practitioners
- Developed in Survey Monkey, Electronically distributed to potential participants.
- The survey was open for 2 months; email reminders were sent out at 4 week intervals.
- Completion of the survey was deemed consent



Results

- 1281 Nurse Practitioners responded to the survey
- Average age was 51.1 years
- 91% Female
- Race/Ethnic Distribution
 - White, non Hispanic 85%
 - African American 5%
 - Hispanic 3%
 - Asian/Pacific Islander 3%
 - Other 3%



Practice Characteristics

- Respondents practiced in all state and Puerto Rico
- Prescribing privileges 82%
- DEA Number 64%
- NPI 82%
- “Incident to billing” 12%



National Certification

Type of Nurse Practitioner Certification	%	N
Gerontological Nurse Practitioners	34%	431
Adult Nurse Practitioners	33%	424
Adult-Gerontology Primary Care Nurse Practitioners	3%	36
Adult-Gerontology Acute Care Nurse Practitioners	1%	18
Family Nurse Practitioners	26%	338
Acute Care Nurse Practitioners	7%	90



Professional Activities

	Importance (N)	How often do you use (N)
Discriminate between normal aging and pathology	889	883
Avoid unnecessary screening	885	877
Knowledge of medications with age related changes	884	875
Recognize iatrogenic hazards	880	872
Treat in place	867	862



Clinical Skills

Performed	%	N	Ordered	%	N
Wound Packing	30%	377	Laboratory Studies	60%	764
Drawing Blood	27%	350	X-ray and imaging	59%	753
Point of care Fingertstick	24%	338	Ultrasound Doppler Studies	51%	718
Pelvic/Pap/Genital Cultures	25%	320	Doppler Studies	48%	613
Superficial abscess incision and drainage	25%	320	12-lead EKG interpretation	44%	564

N = 1279



Prescribing Practices

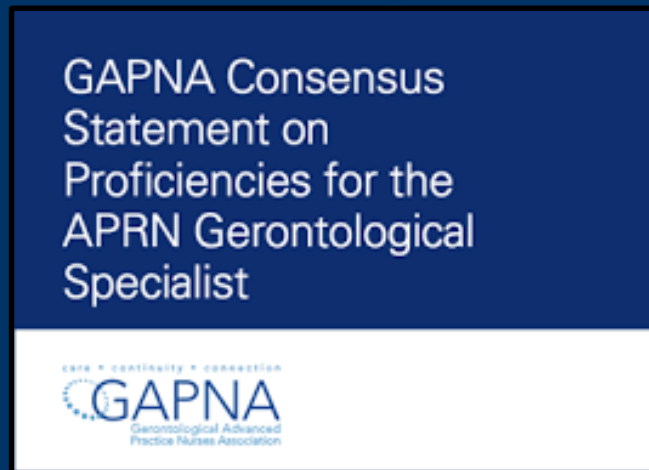
Class	Never	Rarely	Occasional ly 1-5x/wk	Frequently 6-15x/wk	Regularly >15x/wk	No response
Anti-hypertensives	75 (5.9%)	55 (4.3%)	141 (11%)	196 (15.3%)	323 (25.3%)	489 (38.2%)
Analgesics	47 (3.7%)	43 (3.4%)	162 (12.7%)	259 (20.3%)	293 (22.9%)	475 (37.1%)
Diabetic Agents	96 (7.5%)	76 (5.9%)	150 (11.7%)	191 (14.9%)	269 (21%)	497 (28.9%)
Cardiovascular Drugs	102 (8%)	75 (5.9%)	182 (14.2%)	184 (14.4%)	238 (18.6%)	498 (38.9%)
Diuretics	77 (6%)	66 (5.2%)	178 (13.9%)	214 (16.7%)	237 (18.5%)	507 (39.6%)

N =1279



Conclusion

- Given the changes to nurse practitioner education defined in the APRN consensus model (2008), nurse practitioners who manage the care of the frail, vulnerable older adults will need to have additional specialized knowledge and clinical skills.



https://www.gapna.org/sites/default/files/documents/GAPNA_Consensus_Statement_on_Proficiencies_for_the_APRN_Gerontological_Specialist.pdf



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Conclusion

This study needs to be replicated in other countries where nurse practitioners are practicing to recognize similar trends in advanced practice care of older adults.



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