Perceptions and Expectations of Advanced Geriatric Nursing Role

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Introduction

For the advanced geriatric nursing positions to flourish sustainably there is a need for proper educational programmes, defined legislation, and regulations. Future nursing education programmes should incorporate erotological nursing, public health nursing, and nursing management to optimise the contribution of deontological nurse practitioners to primary healthcare and provide the role models that society expects. Geriatric nurses receive specialised training to comprehend and manage the very complex physical and mental health requirements of the elderly. In order for older people to remain independent and active for as long as feasible, they work to assist their patients in maintaining their health and adjusting to changes in their mental and physical capabilities. Geriatric nurses must relish caring for the elderly. They must combine the demands of family members with the requirements of their patients while exercising extraordinary patience and attentive listening [1].

Description

Primary healthcare (PHC) services are frequently used by older individuals. PHC services have come under fire, mostly for their poor accessibility and lack of care continuity. One tactic to enhance PHC services has been to invest in nurse practitioners (NPs) in several nations. The NP role is still in its infancy in Northern Europe. In order to address workforce shortages, lower healthcare costs, and address the growing ageing population in primary health care; many nations have adopted plans to introduce Advanced Practice Nurses (APN). The job of the deontological nurse practitioner (GNP), which has lately been adopted by Australia, Israel, Norway, and other nations, was created in the United States in 1975 to address the demands of the health systems in delivering general care to elderly people and their families. Due to this growth, ther are now significant regional differences in the level of education and nature of employment required by GNPs. However, APNs who focus on the care of senior citizens have been implemented in the majority of countries. It took until the beginning of the 2000s for advanced nursing practise to take off in China. In example, China just adopted the gerontological nursing specialist (GNS) in 2005. 27 For the purpose of guiding geriatric practises, the roles of the GNS are typically divided into various groups based on chronic disease. However, primary healthcare settings like community or long-term care facilities are not included in the GNS's purview. However, RNs are frequently identified by low levels of education, poor professional quality, and high turnover rates. Despite this, RNs are crucial players in the care of older persons in a variety of primary healthcare settings. 28 According to several researches, the nursing staff caring for senior citizens had a low social position and didn't need to have any professional training [2].

Despite the initial development of the Three-tier Aged Care Model, there is currently no established structure to direct RNs' work in primary healthcare. The findings from research into the current responsibilities of RNs in the care of the elderly are all connected to providing the Basic Public Health Services (BPHS). As the primary implementers of BPHS, nurses primarily take part in health examinations, the management of chronic illnesses, and health education for senior citizens. The examples given by the participants highlight the role of registered nurses (RNs) in providing care for the elderly within the primary healthcare system, with a particular emphasis on the public health nursing tasks that the organisation expects of them. Despite the initial development of the Three-tier Aged Care Model, there is currently no established structure to direct RNs' work in primary healthcare. The findings from research into the current responsibilities of RNs in the care of the elderly are all connected to providing the Basic Public Health Services (BPHS). As the primary implementers of BPHS, RNs largely take part in health examinations, chronic illness management, and health education for older individuals. The examples given by the participants highlight the role of registered nurses (RNs) in the primary healthcare system when it comes to providing care for the elderly, with a particular emphasis on the public health nursing tasks that the organisation expects of them [3-5].

Conclusion

The literature, however, lacks modern professional providers' opinions on the growth of GNP function in the setting of China, and it is unclear how RNs and other staff interpret their work with older people. Their opinions of the nursing role and the nursing practise environment in the treatment of older patients within primary health care can offer insights into the areas of deficit in a way that nursing educators and policy makers cannot. In order to fill a gap in the literature and provide information about

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providers' perceptions of what is required to improve RNs' roles in the care of the elderly, this study was created. It also served as a roadmap for the development of advanced geriatric nursing roles and deontological nursing education. The data was coded and organised using Navigo. The initial data analysis used verbatim transcriptions of all audiotaped interviews. In order to get a feel of the entire data, the research team then read through all the transcripts numerous times. Open coding was done initially, and several categories were later formed from it. To create the codes and subthemes, significant words and phrases from the transcripts were manually underlined, extracted, and compiled. Labels for the codes started to appear when they were put together into final category themes as the process went on. Data gathering and analysis took place simultaneously up until a point where there were conflicting interpretations and no new themes were developing, at which time it was assumed that data saturation had been reached.

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Conflict of Interest

None.

References

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