



Advanced Skills among Geriatric Practitioners

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Description

Advanced Nurse Practitioners (ANPs) are skilled nurses who take on tasks usually handled by medical personnel. Advanced clinical abilities, leadership/management, education, and service development/research are the four pillars of advanced practise. ANPs are beginning to specialise on caring for elderly patients who are frail. The effectiveness of this effort has largely depended on the ANPs' education in fundamental geriatric themes. ANPs and junior doctors can learn from and with one other through interprofessional learning opportunities, which enhances teamwork and care delivery. Senior people receive medical treatment from geriatric nurse practitioners, who offer services like diagnoses, exams, and prescriptions. The medical world also recognises the position as gerontological nurse practitioner or gerontological advanced practise nursing, depending on the situation. These individuals collaborate closely with geriatric doctors and provide primary healthcare services provide annual checks and screenings to find illnesses in conjunction with senior care, home health assistance, and hospice services [1].

The normal GNP workday is regimented and includes numerous duties. These nurse practitioners work autonomously and directly with patients for a large portion of the day. GNPs assist senior citizens in managing pain, determining whether certain symptoms call for additional investigation through testing, and managing conditions by giving medicine and therapy. An interdisciplinary team of healthcare professionals, including social workers, physicians, and geriatric nursing specialists, must work together to treat senior patients, especially those with serious health issues. Adult-gerontology nurse practitioners must be effective communicators who can express their thoughts and observations to their colleagues without overlooking crucial facts or misrepresenting patient data in order to provide the best possible healthcare for these patients. Adult-gerontology nurses must be proficient communicators not just with other healthcare professionals but also with patients and their families in order for their treatment plans to be conveyed and carried out without compromising the cultural or social norms that various patients value [2].

GNPs are advanced practise nurses, and they share a number of competencies. These competences are provided by the National

Organization of Nurse Practitioners Faculties (NONPF) for all advanced nursing specialties. The NONPF anticipates that nurses will demonstrate competence in managing and overseeing patient health. They also anticipate that nurse practitioners would be able to establish rapport with their patients and educate them about new medical developments as well as other stakeholders. The association also promotes cooperation between advanced practise nurses and organisations providing specialty-specific healthcare. The company anticipates that these experts will expertly oversee and bargain for the provision of services on behalf of their patients, as well as monitor and promote high-quality caregiving. Additionally, NONPF exhorts nurse practitioners to include cultural awareness in their work [3].

In order to become certified by the American Nurses Credentialing Center (ANCC) or the American Association of Nurse Practitioners, candidates for geriatric nursing must complete a Master of Science in Nursing (MSN) degree with a senior patient care emphasis (AANP). Before providing advanced service, entry-level GNPs typically work as RNs for around ten years. To manage senior well-being, healthcare practitioners use the most recent theoretical and scientific approaches. These discoveries enable GNPs to cure ailments that impact the ageing population as well as promote and safeguard senior health. Geriatric nurse practitioners are employed by caregiving facilities to assess the health of senior patients while identifying and meeting their healthcare needs. Geriatric individuals frequently struggle with long-term illnesses like diabetes, arthritis, or Alzheimer's, therefore it's highly possible that they visit medical institutions looking for some sort of quick respite. Unfortunately, before any effects may be noticed, treatment regimens for chronic diseases typically call for patient and steadfast commitment. Gerontology nurses can better their patients' ability to adhere to the recommended long-term treatment programmes by modelling patience through their own behaviour [4,5].

In order to uphold patients' dignity and deliver the best care possible, it is crucial to ensure their comfort throughout the course of treatment. While generally speaking it involves eliminating unnecessary suffering to the best of a care provider's ability, providing a patient with comfort might occasionally imply making sure that he is pain-free. This can be done through administering medications and receiving treatments, but it can also be done

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by establishing rapport with the patients and fostering a calm work environment. Although all patients deserve a good medical experience, even for brief hospital stays, comfort is particularly crucial when treating terminally sick patients.

Adult-gerontology nurse practitioners are always concerned about patient safety since elderly patients are generally more vulnerable to harm in care facilities due to their physical frailty and weakened immune systems. Adult-gerontology nurses will typically need to use evidence-based preventive techniques to stop diagnostic mistakes that could result from misunderstandings or equipment malfunctions, infections that happen during hospital stays as a result of poor hygiene, medication mistakes like incorrect dosing, prescribing the wrong medication, or administering medicine at the wrong time, and falls that could have serious medical repercussions for the elderly. Preventive measures can be done with trained attention to detail to reduce the impact of these safety problems, but this is only achievable if the on-call nurse knows what to look for.

Building solid relationships is essential to providing high-quality care, and this can only be done by having a thorough understanding of elderly patients' unique needs. Nurses with a bachelor's degree can acquire the aforementioned skills through a doctor of nursing practise programme, making them the best prospects for positions in adult-gerontology nursing.

Acknowledgement

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Conflict of Interest

None.

References

1. Doodhnath, Manesh M. "Experiences of advanced psychiatric nurses on their practice in an occupational specific dispensation hospital setting." (2013).
2. Khalil, D. "Advanced practice nurses in South Africa." In Program and abstracts of the 4th ICN International Nurse Practitioner Advanced Practice Nursing Network Conference. 28 (2006).
3. Li, Y. J., L. W. Cheung, K. Y. Pang and K. Y. Wong, et al. "The establishment of Guangdong province post-graduate level nursing education." *Nanfong Nursing Journal* 12 (2005): 67-69.
4. Kondro, Wayne. "United Kingdom updates ethics guidance." *Can Med Assoc J* 178 (2008): 1268.
5. Gao, Ling-Ling, Sally Wai-Chi Chan and Bing-Shu Cheng. "The past, present and future of nursing education in the People's Republic of China: a discussion paper." *J Adv Nurs* 68 (2012): 1429-1438.