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Current care for older people; The need for and development of “super” nurses

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Worldwide we are facing an increase of older people in need of care. For nurses working in nursing homes, the increase of residents with heavy care demands means that their work becomes more complex and that they must have a great deal of knowledge and skills in the area of geriatric disease and how to deal with it. The challenge is to help the nursing home residents in fulfilling their individual needs. Today a nurse is expected to work from craftsmanship and to be both a specialist and generalist, to opt for humanity and common sense above protocols, to have an overview of complex problems, to be able to look beyond their own profession, to be able to formulate goals in conjunction with their clients and their client's families and social networks and with communities and to discuss how all involved can work to achieve these goals, to take responsibility and be answerable, to be professional and enterprising, to show leadership, to be skilled in technology, to be a reflective practitioner who examines their own actions critically, to be able to assess professional literature, to contribute to practical research, to organize support based on needs, to be focused on improving services, to engage in ongoing professional development and to arrange training and further development themselves, to be able to collaborate and connect ('T-shaped professional'), to make use of their competences and life and work experience and last but not least to treat older impaired adults and their families with dignity and respect. To meet all these requirements and enhance the quality of care for older people, health care organisations in the Netherlands start working with registered nurses having a specialisation on gerontology and geriatrics (RN-GG) based on the CanMEDS: nurse expert, communicator, reflective professional/scholar, health advocate, and organization, professional. These nurses work in a new function and have to deal with the consequences of it, such as feeling a lone wolf, setting boundaries, having to defend the new position and needing support from management. Much has been written about 'the new care professional'. However, to date little theory has been developed and research has been done regarding to the way in which the many nurses involved, deal with the changes in their working environment and the different duties, knowledge and skills involved. Are care professionals able to implement the desired changes and to move forward in order to give the best possible care to our most frail population, nursing home residents?

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