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Federal Ministry of Education and Research
FKZ 13FH558KA0

RESEARCH AT UAS

Patience

Participatory development and implementation of an Advanced Practice Nurse for patients in (geriatric) traumatology

Insights into the Patience project

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BACKGROUND

As a result of demographic change, it can be assumed that the proportion and therefore also the risk of accidental injuries to older people in our society will continue to increase in the coming years [1], as shown by the doubling of accidental injuries to people over the age of 70 in the last 20 years [2]. The structures and highly standardised processes within hospitals are particularly unsuitable for older people, who are more likely to suffer from cognitive impairment or have already been diagnosed with dementia [3]. Challenging behaviours, such as agitation, not only have a significant impact on the complexity of the nursing care situation, but may also have an influence on ward procedures [4], and the resulting requirements are met with the deployment of advanced practice nurses (APN) [5].

This is where their expertise comes in. APNs are nurses with a Master's degree who specialise in nursing phenomena or target groups [6]. The first concepts for integrating APNs are also being successfully implemented in Germany. This is not yet the case in geriatric traumatology, which is a starting point for the PATIENCE project.

AIM

Aim is the participatory development and implementation of an APN for the care of geriatric traumatology patients in a model care unit at the Bergmannsheil-Bochum University Hospital.

QUESTIONS

- What requirements exist in relation to the care of (geriatric) traumatological patients that should be fulfilled by an APN?
- What specific competences, skills and qualifications does the APN need to take on the tasks associated with these requirements?
- How can the role of the APN be successfully integrated into the multi-professional team?
- How is the APN perceived, evaluated and reflected upon by the stakeholders (patients, relatives, professional groups)?
- How can the APN for (geriatric) traumatology patients in BG clinics and trauma centres be made permanent and what conditions are necessary for this?

DESIGN & METHODS

The project is designed as participatory evaluation research [7]. The aim is to work in partnership with the stakeholders, in particular with the professional groups involved in the model care unit, to research, understand and also change their social working and living realities in relation to the challenges of caring for (geriatric) traumatological patients [8 | 9].

The following steps are carried out here:

ANALSIS
- Identifying special nursing and care problems of (elderly) traumatological patients
- Identify existing care offers
- Derive the competences and skills of an APN to meet these requirements

THROUGH:
Literature studies, individual interviews, think tanks, evaluation of structural and process data

CONCEPTION:
- Development of a role and task profile for an APN
- Development of a strategy to integrate the activities of an APN into the nursing and multi-professional team in the best possible way
- Model use of two APNs in (geriatric) traumatology

THROUGH:
Think tanks

EVALUATION:
- Evaluation of the intervention from the perspectives of all stakeholders involved (including the multi-professional team, the patients and their relatives)
- Derivation of (transferable) recommenddations for the use of APNs in (geriatric) traumatology

THROUGH:
Think tanks, Participant bservations

PROJEKTABLAUF

4th Quartal 2022 – 2nd Quartal 2023
ANALYSIS
- Ethics application
- Literature study
- Kick-off event

3rd Quartal 2023 – 2nd Quartal 2024
ANALYSIS
- Analysis of care needs and offers

2nd Quartal 2024 – 4th Quartal 2024
CONCEPTION
- Development of task/role profiles
- Recruitment of the APN

4th Quartal 2024 – 1st Quartal 2026
APPLICATION & EVALUATION
- Application of the APN on the ward
- Evaluation

2nd Quartal 2026 – 3rd Quartal 2026
FINAL REPORT

OUTLOOK

As part of the participatory approach, the focus is placed on people who view the problems and challenges 'from the inside' and know them best due to their experience as affected persons or stakeholders. This enables a precise fit of care needs, services and models as well as the development of a target group and setting-specific profile of requirements, tasks, competences, qualifications and roles of APNs for (geriatric) traumatology.

A common orientation framework can also be established for the harmonisation of perspectives and a direct approach to the institutional, structural, social and personal framework conditions.
This can lead to a sustainable implementation and stabilisation of the results achieved and increase understanding in science and practice.

CONTACT

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LITERATURE

The entire bibliography can be viewed by scanning the QR code

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