

Test Bank for Ebersole and Hess' Toward Healthy Aging 9th Edition by Touhy

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Test Bank

Chapter 02: Gerontological Nursing: Past, Present, and Future

Touhy: Ebersole & Hess' Toward Healthy Aging, 10th Edition

MULTIPLE CHOICE

1. Serious and well-controlled research studies on aging have been available:
 - a. only in the past 60 years.
 - b. since the turn of the 20th century.
 - c. following the Great Depression.
 - d. since the year 2000.

ANS: A

Only in the past 60 years have serious and carefully controlled research studies flourished. Before that, anecdotal evidence was used to illustrate issues assumed to be universal, making all the remaining options incorrect.

DIF: Cognitive Level: Remembering TOP: Integrated Process: Teaching/Learning
MSC: Client Needs: Health Promotion and Maintenance

2. The son of a nursing home resident asks a nurse: "What is the significance of being certified in gerontology? I see that you are, but not all of the nurses are." The best response by the nurse is which of the following?
 - a. "National certification as a gerontological nurse is a way to demonstrate special knowledge in caring for older adults."
 - b. "National certification in gerontology is required for all nurses who have worked in this setting for 2 or more years."
 - c. "National certification is only available to nurses who have a Baccalaureate degree in nursing."
 - d. "Only advanced practice nurses, like nurse practitioners, are certified in gerontology."

ANS: A

National certification is a way to demonstrate special expertise in caring for older adults. It is not required for practice in any setting across the continuum of care, and it is not exclusive to nurses with Baccalaureate degrees. There is both a generalist and a specialist gerontological nursing certification. The generalist functions in a variety of settings providing care to older adults and their families. The specialist has advanced gerontological education at a Masters level.

DIF: Cognitive Level: Analyzing
TOP: Integrated Process: Communication and Documentation
MSC: Client Needs: Management of Care

3. The major goal of the NICHE (Nurses Improving Care for Health System Elders) program includes which of the following?
 - a. Improve outcomes for hospitalized older adults.
 - b. Increase the number of older adults cared for in hospitals.
 - c. Increase the number of iatrogenic complications that occur in hospitalized older adults.

d. Decrease 30-day readmission rates for hospitalized older adults.

ANS: A

The goal of NICHE is to improve outcomes for hospitalized older adults. Although option D is a good outcome for hospitalized older adults, it is not one of the major goals of NICHE, which are broader. Options B and C are not goals that would improve care for older adults, but would be negative outcomes themselves.

DIF: Cognitive Level: Remembering TOP: Integrated Process: Teaching/Learning
MSC: Client Needs: Health Promotion and Maintenance

MULTIPLE RESPONSE

1. The impact of the Hospital Readmission Reduction Program (HRRP) on avoidable readmissions includes which of the following? (*Select all that apply.*)
 - a. Readmission rates for the selected conditions have dropped nationwide.
 - b. Many hospitals have instituted system-wide interventions to prevent readmissions.
 - c. Hospitals are keeping patients longer to avoid readmissions.
 - d. Potentially avoidable hospitalizations among nursing home residents is increasing.
 - e. Hospitals have a financial incentive to develop programs to reduce readmissions.

ANS: A, B, E

The Hospital Readmission Reduction Program (HRRP) was established as a provision in the Affordable Care Act (ACA) requiring Medicare to reduce payments to hospitals with relatively high readmission rates for selected conditions for patients in traditional Medicare. Since the HRRP, readmission rates for the selected conditions have dropped nationwide but estimates are that in 2018, about 80% of hospitals evaluated by CMS will face penalties totaling \$564 million (Advisory Board, 2017). Additionally, the HRRP has been the impetus for many hospitals to institute system-wide interventions to prevent readmissions that have also contributed to the decline in readmission rates. The rate of potentially avoidable hospitalizations among SNF residents has fallen by nearly a third in recent years as a result of many quality improvement initiatives.

DIF: Cognitive Level: Understanding TOP: Integrated Process: Teaching/Learning
MSC: Client Needs: Health Promotion and Maintenance

2. Which of the following are true statements about the current health care workforce? (*Select all that apply.*)
 - a. Approximately 10% of registered nurses (RNs) are certified in gerontological nursing.
 - b. The number of geriatricians is expected to increase about 50% over the next 25 years.
 - c. The professions of social work, physical therapy, and psychiatry are demonstrating the same trends as nursing.
 - d. Europe and the developing countries are experiencing similar shortages in health care workers with geriatric expertise as in the United States.
 - e. It is anticipated that there will be a need for approximately 3.5 million additional direct care and professional health care workers by the year 2030.

ANS: C, D, E

Less than 1% of RNs are certified in gerontological nursing. The number of geriatricians is decreasing, not increasing. Responses C, D, and E are all true.

DIF: Cognitive Level: Understanding TOP: Integrated Process: Teaching/Learning
MSC: Client Needs: Health Promotion and Maintenance

3. Best practice recommendations for nursing education in relation to gerontology include which of the following? (*Select all that apply.*)
- a. Provision of a “stand-alone” course in gerontological nursing
 - b. Integration of gerontological content throughout the curriculum
 - c. Replacement of acute care pediatric clinical experiences with gerontological clinical experiences
 - d. Recruitment of nurses with Masters and Doctoral degrees and a specialty in gerontology to faculty roles
 - e. Requiring all undergraduate nursing students to obtain gerontological certification as a requirement for graduation

ANS: A, B, D

Best practices include providing a stand-alone gerontological nursing course as well as integrating gerontology throughout the curriculum. Recruitment of nurses with a specialty in gerontology and a Masters or Doctoral degree to faculty roles is a critical step in making sure that the next generation of nurses is prepared to care for older adults. Best practices do not recommend removing pediatric clinical experiences and replacing them with gerontological experiences. Nursing certification is only available to practicing nurses who meet specific education and practice requirements. It is not applicable to nursing students.

DIF: Cognitive Level: Understanding TOP: Integrated Process: Teaching/Learning
MSC: Client Needs: Health Promotion and Maintenance

4. Current initiatives to enhance the specialty of gerontological nursing include which of the following? (*Select all that apply.*)
- a. Mandation of a minimum of a Baccalaureate degree in nursing in order to care for older adults
 - b. Development of the Nurse Competence in Aging project
 - c. Promotion of geriatric nursing to excellence to the nursing community
 - d. Developing a nursing certification specific to long-term care
 - e. Offering scholarships for study and research in geriatric nursing

ANS: B, C, E

Initiatives in nursing education, nursing practice, nursing research, and nursing policy include enhancement of geriatrics in nursing education programs through curricular reform and faculty development and development of the National Hartford Centers of Gerontological Nursing Excellence, predoctoral and postdoctoral scholarships for study and research in geriatric nursing. Another significant influence on improving care for older adults was the Nurse Competence in Aging (NCA) project. This initiative addressed the need to ensure competence in geriatrics among nursing specialty organizations. Options A and D are not current initiatives.

DIF: Cognitive Level: Understanding TOP: Integrated Process: Teaching/Learning
MSC: Client Needs: Health Promotion and Maintenance

5. A nurse interviews for a job in a hospital that advertises that it is “elderly friendly.” The nurse would expect to see which of the following in place? (*Select all that apply.*)
- a. An elder-assistance program to help patients remember their appointments and navigate the hospital services.
 - b. A long-term care facility that is affiliated with the hospital.
 - c. Rooms furnished with foldout beds for family members/caregivers.
 - d. An initiative to provide gerontological education for all nurses.
 - e. An initiative to increase the number of patients referred to long-term care facilities upon discharge from the hospital.

ANS: A, C, D

The guiding principles of an elder friendly facility include treating each patient as a unique individual and accommodating the patient and family’s special needs. Other principles include ensuring that the nurses are clinically competent in gerontological nursing. Tailoring the environment to support the implementation of these principles is part of this initiative. Option B is not correct as it does not relate to the concept of an elder friendly hospital. Option E is not correct since this might not be a supportive intervention for all patients.

DIF: Cognitive Level: Analyzing TOP: Integrated Process: Caring
MSC: Client Needs: Psychosocial Integrity

6. Significant factors contributing to the growth of community-based care include: (*Select all that apply.*)
- a. a decrease in the number of available nursing home beds.
 - b. rapidly escalating health care costs.
 - c. older adults’ preferences to “age in place.”
 - d. inadequate numbers of nurses with gerontological specialty education.
 - e. decreasing numbers of family caregivers.

ANS: B, C

Care will continue to move out of hospitals and long-term care facilities because of rapidly escalating health care costs and individual preferences to “age in place.” There has not been a decrease in nursing home beds. Although there are inadequate numbers of nurses with gerontological specialty training, this is not a factor that has impacted the growth of community-based care. There is projected to be a decrease in the number of family caregivers as the caregivers themselves are aging; however, this does not contribute to the growth of community-based care.

DIF: Cognitive Level: Remembering TOP: Integrated Process: Teaching/Learning
MSC: Client Needs: Health Promotion and Maintenance

7. Changes in certified nursing facilities in recent years include which of the following? (*Select all that apply.*)
- a. Increase in the number of subacute beds
 - b. Decrease in nursing facility length of stay
 - c. Increase in level of acuity of the residents
 - d. Decrease in cost of care in the nursing facility
 - e. Decrease in the number of registered nurses employed in long-term care facilities

ANS: A, B, C

Certified nursing facilities have evolved over recent years. Most facilities have subacute care units that resemble hospital units caring for more patients with higher acuity than in the past. Therefore, the average length of stay in a facility has decreased. The cost of care in the facility has increased due to the increased complexity of illnesses treated, and the number of registered nurses has increased in order to care for these complex patients.

DIF: Cognitive Level: Analyzing TOP: Integrated Process: Teaching/Learning
MSC: Client Needs: Health Promotion and Maintenance

8. Which of the following factors contribute to poor outcomes for older adults during transitions of care? (*Select all that apply.*)
- a. Inability to read and understand discharge instructions
 - b. Inadequate financial resources to purchase medications
 - c. Lack of desire to comply with discharge instructions
 - d. Improved medication reconciliation during hospitalization
 - e. High levels of nurse-patient engagement

ANS: A, B

Language and literacy levels and socioeconomic factors are major contributors to poor transitions of care for older adults. A high level of nurse-patient engagement contributes to safe and effective transitions. Medication reconciliation during hospitalization, at discharge and after discharge, decreases medication discrepancies, which are the most prevalent adverse event following hospital discharge. There is no evidence that patients lack the desire to comply with discharge instructions.

DIF: Cognitive Level: Analyzing
TOP: Integrated Process: Communication and Documentation
MSC: Client Needs: Safety and Infection Control