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Transcript

00:00:09 Gabby Bolanos

Welcome listeners to the NYU Langone Health, the Nursing Station podcast. This series highlights nurses coming together to share information about daily professional practice and initiatives to improve.

00:00:20 Gabby Bolanos

Patient outcome.

00:00:21 Gabby Bolanos

This session is eligible for contact hours and in disclosure in compliance with Amcc's Commission on accreditation. This educational activity does not include any content that relates to the products and or services of a commercial interest that will create a conflict of interest. My name is Gabby Bolanos. I am a nursing professional development.

00:00:41 Gabby Bolanos

Specialist from NYU Langone Orthopedic Hospital and in today's episode, we'll be discussing the topic of geriatrics.

00:00:48 Gabby Bolanos

As an age friendly health system and why you let go and health is committed to implementing care for every older adult guided by an essential set of evidence based practices known as the four M's, what matters to the patient's medications, mentation and mobility in every encounter across the continuum of care.

00:01:08 Gabby Bolanos

According to the National Council on Aging, nearly 58,000,000 Americans are 65 and older, with projections estimating that the population of older adults will grow to 88.8 million in 2060.

00:01:22 Gabby Bolanos

Additionally, older adults are disproportionately affected by chronic conditions such as diabetes, arthritis and heart disease, with nearly 95% having at least one chronic condition and 80% having.

00:01:33 Gabby Bolanos

Two or more?

00:01:35 Gabby Bolanos

These statistics highlight the importance of enhanced knowledge and charity technological nursing across all settings and service line.

00:01:43 Gabby Bolanos

Joining me today are some key players from across the system that continue to advocate and advance the care of health system elders.

00:01:50 Gabby Bolanos

I will now have the panelists introduce themselves, so hope we'll start with you.

00:01:56 Hope Castellani

Hi, Gabby. Hi, everyone. Thank you for having me. My name is hope Castellani. I'm a senior staff nurse of the Manhattan campus in Kimmel Pavilion on the 13th floor for the surgical ICU and transplant unit. We have my CRN and I'm also a learner fellow.

00:02:14 Hope Castellani

For the 2025 year, and I'm also Co chair with human for the geriatric resource Nurse Practice Council for across campus, for the Tish Kibble campus.

00:02:25 Iman Dolah

Hello I'm Iman Dolah. I'm a Co chair of the geriatric resource. This council. I am a certified psychiatric mental health senior staff nurse at the Tish Camel campus. I am currently working on the adult and patient psychiatric unit, as well as an RN for Team Lavender and the behavioral emergency response.

00:02:46 Iman Dolah

Team that responds to all ages, from Pediatrics to geriatrics.

00:02:52 Kristen Mahlstedt

Hi everyone, I'm Kristen Mahlstedt. I am the clinical resource nurse for inpatient psychiatry as well as the behavioral emergency Response team and team Lavender. I am very excited to be here and thank you so much for having me.

00:03:05 Tannies Sinclair

Hello everyone. I am Tannies Sinclair. I am a nurse care manager at the Long Island campus and one of the inaugural team members responsible for implementing the volunteer Cognitive Stimulation program on three main and Long Island. I am also a Masters prepared nurse with my masters.

00:03:25 Tannies Sinclair

In nursing education, thank you for having me.

00:03:28

00:03:29 Melissa Keating

Hi everyone, I'm Melissa Keating. I'm the nurse manager of 17 W of the Tish campus adult acute medicine. I have my Med surge certification as well as my gerontological nursing certification. I was a previous Co chair of the GRNPC.

00:03:49 Melissa Keating

And continue to be.

00:03:50 Melissa Keating

An active member, thanks so much for having me.

00:03:53 Marilyn Lopez

Hi everyone, I'm Marilyn Lopez. I'm a board certified geriatric nurse practitioner with a doctorate in nursing practice. I lead our nurses improving care for health system elders, otherwise known as niche at the Tish Kimmel Main campus and the program director to nursing geriatrics as an advanced practice.

00:04:14 Marilyn Lopez

Person gerontology. I've had the privilege and have the privilege to work with numerous cross campus nurses, geriatric resource nurses, key stakeholders and team experts in developing and implementing enhancing geriatric care delivery in line with our organizational goals.

00:04:31 Marilyn Lopez

Niche and age friendly principles which drive high quality standardized care.

00:04:37 Gabby Bolanos

Thank you so much to all of our panelists again for joining us today. I will start with our questions and this one will be posed primarily to Maryland. But of course, anyone else that is participating or has participated in GRPC containment as well. But can you tell us a little bit more about your exact involvement with GRPC? And then for those listeners that are familiar with?

00:05:00 Gabby Bolanos

It can you provide some background on the purpose of the GRN Practice Council

00:05:05 Marilyn Lopez

Thank you, Gabby. I'll start us off by providing brief context how we came to establish her GRNPC council. We've been very early pioneers in geriatrics and have done a tremendous amount of grassroots work and have been also continuing to do that to develop through homegrown innovations team.

00:05:24 Marilyn Lopez

Science and strong collaborative partnerships with national leader experts and Rory Meyers and NYU Rory Myers College of Nursing the Hartford Institute.

00:05:34 Marilyn Lopez

and also very own organization nursing senior leadership not only to meet the needs, sustaining the program, exemplary recognition, but also age friendly principles for the listeners unfamiliar with niche, it is a leading nurse driven program designed to help hospitals improve.

00:05:46

00:05:54 Marilyn Lopez

Care for older adults. The niche program complements numerous hospitals and to professional models and frameworks.

00:06:02 Marilyn Lopez

Which provides us with the geriatric research nurse model, which is a clinical improvement model and a core component of the niche program, and empowers nurses to become unit based leaders and consultants to improve care outcomes for our older adults. Niche National Yearly membership provides us with.

00:06:22 Marilyn Lopez

Online educational modules, numerous resources and clinical training to prepare our nurses as unit geriatric experts on the frontline.

00:06:33 Marilyn Lopez

Today, the Tish Kimmel campus. We're very proud that we're among a small group of institutions to sustain our niche exemplar, top level recognition nationally. And this is among 350 niche organizations around the country. And we've been a niche recognized site as exemplar. Since 2014, we have developed strategic approaches.

00:06:54 Marilyn Lopez

To training our geriatric resource nurses

00:06:57 Marilyn Lopez

To ensure our exemplary goals and standards of care, our niche hybrid program incorporates not only training elements such as homegrown tools to supplement niche national materials, but also strengthens our GR and training to stay current with geriatric nurse practice. We've also leverage our hospital.

00:07:17 Marilyn Lopez

Technology to also trend metrics according to our organizational goals. Our program matured over the years and we've identified areas for improvement and expansion of our program.

00:07:30 Marilyn Lopez

Most importantly, we found that we needed to create synergy with our GRN partnerships. We recognized that we needed a cohesive workforce with strategies to bring all GRNS together and have a common purpose that is motivating and also fulfilling to us. Therefore, GRPC community was established.

00:07:51 Marilyn Lopez

To add value to one another with commitment to knowledge and also strategies to spread innovate.

00:07:58 Marilyn Lopez

And also to solve complex problems in our older population. Also it establishes a clear sense of direction, open communication and instills a sense of ownership. So post COVID, we expanded our GMC community to across campus council led by GRN's.

00:08:18 Marilyn Lopez

With the aim of strengthening our partnerships, our knowledge, our clinical practice and also for certification, and Gabby, I would say the GMC also sustains innovations by having GMs today Lead Practice Council meet.

00:08:32 Marilyn Lopez

And also lead our professional grounds and participate in research activities with our nurse researchers in our CC department and most of them have also contributed to the literature with their quality improvement initiatives. And Gabby, I know you've joined me in our net expansion journey with other niche coordinators.

00:08:53 Marilyn Lopez

And know how important it is as a niche coordinator, leader to train, mentor, and facilitate the growth of future geriatric nurse expert workforce as we face a growing population.

00:09:05 Marilyn Lopez

Not only with multi complex illnesses, but also we have new pharmacological therapies that are very challenging. Therefore today I'm honored to be part of this panel with you, Gabby and our GRN leaders among them, actually one of our leaders as a nurse manager. And I also would like for them to share.

00:09:26 Marilyn Lopez

Their own niche journey experiences with our.

00:09:29 Hope Castellani

Yes, nurse. Hi. Thank Marilyn. Yeah. I participated in one of the first niche GRPC program and this really solidified the pathway for my journey as and to your end. I became certified and really have used or learned in the niche program to inform my practice.

00:09:51 Hope Castellani

As a career lifelong medicine nurse before I was a medicine nurse leader, I was a medicine.

00:09:58 Hope Castellani

Nurse at the bedside.

00:09:59 Hope Castellani

And a majority of our patients are seniors and you just it really is with great pride that I care for our geriatric population treating our geriatric population with dignity and meeting their

needs and meeting them where they're at. The niche program along with the GRPC which I've been involved with for several years now, helps our nurses.

00:10:20 Hope Castellani

To.

00:10:20 Hope Castellani

Care for geriatric patients with the lens of outstanding patient centered care where we are really focusing on the needs of our geriatric patients.

00:10:30 Gabby Bolanos

Thank you for that. Do any of the other clinical nurses want to chime in about, you know, kind of their work and how they got involved with RPC?

00:10:39 Iman Dolah

As a senior staff nurse working at bedside and as well as part of the behavioral Emergency Response Team, I was able to join the GRPC from being nominated by my past CRM and thankfully through that she's introduced me to me.

00:10:58 Iman Dolah

Maryland and Maryland has given myself and hope the opportunity to be junior Co chairs and then grow as two Co chairs. And with that, just as you mentioned before, work on research and work alongside the CC department team and even present at a conference.

00:11:18 Iman Dolah

In Nebraska, so the GRPC has really helped my knowledge and understanding of geriatric care and also the other opportunities that we have for geriatric care in.

00:11:33 Iman Dolah

The hospital system.

00:11:35 Hope Castellani

Will continue. What Iman saying. I met Marilyn on orientation. I was a new graduate on the surgical ICU and I had this very, very delirious patient. And I was on day shift at this time and all of a sudden, Marilyn starts running up to me with the biggest smile on her face.

00:11:55 Hope Castellani

And.

00:11:55 Hope Castellani

She goes doctor Lopez like I'm the geriatrics director. I have this idea. This might help your patient because it sounds like he's delirious. He's had multiple bird calls, which is like a behavioral emergency response team that imo's a part of and everything. And she's like, I have this idea and she like to help me. This, like, non pharmacological like Tao.

00:11:56 Hope Castellani

I am.

00:12:16 Hope Castellani

Method just to help redirect his hands.

00:12:18 Hope Castellani

And then she's like, we'll keep in touch and ever since then, we've kept in touch. She's like, how's it going? And she would call me and everything she goes, I think we have a vision together. And she's like, we're gonna be a part of the GRPC. And I'm like, what is this like? No, like, I'm in the ICU. I don't really know. I have, like, a role here.

00:12:38 Hope Castellani

Especially as a new graduate, but like under her wing and the guidance of, like the cheer on PC, I really felt empowered as a new graduate, a new baby nurse, and also as an ICU nurse, being like a big advocate for older adults because older adults do get surgery to.

00:12:57 Hope Castellani

So it's just very exciting. So that's my experience with the Chiron PC.

00:13:02 Tannies Sinclair

I was introduced to the GRPC by woodland, who's the niche coordinator of the Long Island campus, on three main there are two specialized rooms. Each room has four beds that are dedicated to patients with acute confusion, delirium, and cognitive impairment, with or without behavioral disturbance.

00:13:21 Tannies Sinclair

It is on this unit where we piloted and maintained the volunteer Cognitive stimulation program. This is an interprofessional initiative where nursing collaborates with the volunteer psychiatry and rehabilitation departments with physical and occupational therapists to provide non pharmacologic interventions.

00:13:41 Tannies Sinclair

And meaningful engagement and interaction to our patients in an effort to prevent and manage delirium, nurses are able to use the UB Cam or Cam as it applies stellarium screening tool to activate nursing care plans.

00:13:58 Tannies Sinclair

A delirium order sets and non pharmacologic interventions.

00:14:03 Gabby Bolanos

Thank you. And I really appreciate you all sharing kind of your stories. I think you know for a lot of us it just takes one person to inspire us to, you know, kind of advance our knowledge to advance our participation and and really advancing our nursing practice. And I think that kind of leads into this idea of like, you know, for those that are listening that are interested in getting involved in GRPC.

00:14:25 Gabby Bolanos

Or if you're unable to.

00:14:26 Gabby Bolanos

Like, can anyone chime in on how they suggest they're getting involved in GRPC? Or, you know, in general how to enhance their knowledge and advocacy for this vulnerable patient population at their local campus?

00:14:39 Hope Castellani

I think we can start with the nurses who are interested should jump on a meeting. We have monthly meetings for our GRPC. There's also a website with a wealth of resources of.

00:14:52 Hope Castellani

Really interesting topics that come up, as well as initiatives that are going on across the campuses. They reach out to the to your NPC chairs if they'd like to be included. And leaders can certainly share with their team ways for the staff nurses to get involved with the GRT.

00:15:12 Hope Castellani

The.

00:15:13 Hope Castellani

Or both like to add, especially for new graduates. I feel like it's a little intimidating when you're first at the bedside and then being involved in a practice Council. Cause I know for myself, it's like, oh, I don't have enough experience. Or maybe the more senior nurses know more than me about this. That's not true. Like we said before, like it takes one person.

00:15:34 Hope Castellani

If you're passionate about something and you want to learn more, it doesn't matter. The experience. Just go for it and people with more experience will help you, and then you'll eventually become to be that person. So really like being your biggest advocate. So that way you can best advocate for your patience that would.

00:15:52 Hope Castellani

Be my advice.

00:15:54 Gabby Bolanos

Thank you so much. Hope for mentioning that you know as someone that you know in my position works with a lot of new grads and and kind of facilitates orientation and follow up with the orientees as they progress. I highly recommend to all my new grad orientees that the sooner you get involved in shared governance the better.

00:16:13 Gabby Bolanos

Even if you feel like you said like you don't really have a strong background or expertise in this, because a lot of learning happens at shared governance councils, so you are enhancing your practice, enhancing your knowledge so early on in your career by participating and joining in these Council.

00:16:30 Gabby Bolanos

Goals. And again, it really kind of shows your commitment to not only your leadership and your colleagues, but kind of, you know shows your dedication to everyone of how serious you are about enhancing your knowledge when it comes to you know, let's say for us here and you're on PC bettering the care of our older adults. So thank you so much for mentioning that.

00:16:50 Gabby Bolanos

As our panelists introduce themselves, a lot of them come from different specialties and different backgrounds. So I just want everyone to kind of share just a little bit about why is it important for your specific specialty or your specific?

00:17:04 Gabby Bolanos

That to have you know expertise or knowledge and the needs of geriatric patients just because you know, I think the amazing thing about geriatrics that it does intertwine with so many specialties. It doesn't matter if you're and the story inpatient parry up leadership, frontline staff, geriatrics applies to all of us.

00:17:25 Gabby Bolanos

In the nursing workforce, so anyone can go ahead and start, but I just want to hear.

00:17:29 Gabby Bolanos

Your.

00:17:30 Gabby Bolanos

Side of the story when it comes to like, why is it so important for your specialty to have geriatrics also be a key?

00:17:36 Gabby Bolanos

Part of that.

00:17:38 Kristen Mahlstedt

So as the clinical resource nurse of the behavioral Emergency Response team as well as in patient psychiatry, it's so important to have knowledge and expertise in geriatrics, as we frequently work with this population both on our unit HTC10, which is the inpatient psychiatric unit here at Tish, as well as the birth service, the behavioral Emergency Response team.

00:17:57 Kristen Mahlstedt

And it's also a population I really enjoy working with.

00:18:01 Kristen Mahlstedt

So here at Tish, the most common contributing factor for behavioral emergencies in the Medical Center is delirium, and the second most common contributing factor is neurocognitive disorders and dementia, which are both very common amongst the geriatric population with the birth service. We also do proactive rounding on patients that may be at high risk for a behavioral.

00:18:21 Kristen Mahlstedt

Emergency and I have really loved working with Maryland and her work on the Delirium toolkit and been able to facilitate the use of some of the items.

00:18:30 Kristen Mahlstedt

That we have stocked, that we can use on proactive rounding as the non pharmacological items, we have stuffed cats, stuffed dogs, we have fidget toys as well as some activity books. All of these are evidence based items to help prevent delirium. My personal favorite is the more about me invite card that Marilyn and her team.

00:18:51 Kristen Mahlstedt

Designed. I just love this tool. My manager shout out to Karen Ammer had the idea to have this printed on some really sturdy card stock so patients can fill this out in combination with their family members, support persons and treatment.

00:19:04 Kristen Mahlstedt

Team and it's a foldable card that can sit at the bedside and then serve as a point of conversation with patients and their treatment teams, and it helps them maintain a sense of identity, their sense of self, which as we know, can sometimes be lost when someone is a patient in the hospital. We keep a supply of this in the burnt bag, which the burnt nurses use as they go around the Medical Center.

00:19:26 Kristen Mahlstedt

Do their proactive rounding and I have really found this to be a fun tool that helps patients connect with their treatment team.

00:19:34 Tannies Sinclair

I'll echo what?

00:19:35 Tannies Sinclair

Kristen said my role now is a nurse care manager. It includes facilitating a safe and appropriate discharge or transition of care plan to promote positive health outcomes, and this is particularly a barrier when dealing with patients with cognitive impairments, delirium, neurocognitive conditions.

00:19:55 Tannies Sinclair

As a care manager, we do a thorough assessment of the patients needs, including their medical needs, functional and cognitive status.

00:20:03 Tannies Sinclair

Their support system we see if they have caregivers, what support they get from those caregivers, their transportation needs, home environment. We screen patients for social determinants of health. That SDH significantly impacts the health. And when well-being of our geriatric patients.

00:20:23 Tannies Sinclair

With an emphasis on economic stability, can they afford the level or type of care that they need? Their social support ability to get to appointments, ability to access?

00:20:34 Tannies Sinclair

Food. So we advocate for their needs and collaborate with our partners, among or interprofessional teams within the hospital and also for external services and agencies, and having the knowledge. And I mentioned before, gaining the knowledge from being on three main.

00:20:54 Tannies Sinclair

Having that type of knowledge, it really helps to advocate for our patients. It helps for us to really learn about our patients and to provide patient centered care because we can't use one brush to paint a broad.

00:21:08 Tannies Sinclair

Look so that way we know what our patients need and we are advocate for them, collaborate with or care team to get them what they need to promote those positive patient outcomes.

00:21:19 Iman Dolah

And to add on that as well, in like the psychiatry department in patient, it's really important to understand on how these psychiatric diseases manifest and look in the geriatric population because it is quite different with young adults and Pediatrics.

00:21:39 Iman Dolah

So just having that understanding is really important and sharing that knowledge with newer nurses that are coming in, Marilyn has thankfully let hope and I if in the event that Marilyn is unable to attend nurse residency, lectures, hope and I will sub in for her and provide those lectures.

00:21:58 Iman Dolah

To the nurse residents, so those new grad nurses, new nurses starting at NYU and kind of giving them more of a foundation that they're comfortable with and geriatric.

00:22:08 Iman Dolah

Care. And then on top of that, as Kristen mentioned earlier, with the Burt team, we have safety huddles and with those safety huddles, we're really able to have patient centered care because as the Burt nurse, we are including other leaders and specialties into this huddle and.

00:22:27 Iman Dolah

It.

00:22:28 Iman Dolah

Turns into really an interdisciplinary huddle.

00:22:31 Iman Dolah

And we'll have geriatrics. We'll have psychiatry, dietary, physical therapy, all of that. So we can really plan for the patients care while they're in the hospital, as well as discharge planning. And how can they have a safe discharge? And we also will obviously include the fact.

00:22:48 Iman Dolah

Only if they are present in the patients life and circle and they usually have some good like points for us that we are able to mention in our all about me booklet.

00:23:01 Hope Castellani

And just to add my \$0.02 into all of this, since I'm on the surgical ICU, we see lots of delirium besides just having older adults have surgery too, because surgery doesn't have an age limit, a lot of the delirium we see and currently I'm on. And Marilyn and I are working on a quality improvement on delirium.

00:23:21 Hope Castellani

Vacation on the floor and I I won't speak too much about this, but just kind of just show that geriatrics is everywhere and reeducating nurses and empowering them to advocate for their patient to say, like, hey, here are a couple warning signs and try to deescalate the behavior before they have to get medications that might not be that.

00:23:42 Hope Castellani

Great for them.

00:23:43 Hope Castellani

Instead, and maybe we can use constant observations and advocate to get a patient care technician to sit there. Or even I know Nina Sachs has been in charge of a virtual constant observation, so it will help monitor the patient, but also make sure that staffing is OK on the unit for PCT's and everything.

00:24:03 Hope Castellani

Too, to help they keep an eye on the patients, promote patient safety as well. So there's lots of different layers to geriatrics, and that's how I see it.

00:24:12 Hope Castellani

On my floor.

00:24:14 Gabby Bolanos

Thank you so much all for sharing, I really appreciate those of you that mentioned considerations related to this field planning. You know someone that you know came from an orthopedic background myself here at LH. A lot of our hip fracture patients were considered 65 plus and you know that was a constant struggle, you know, trying to really figure out you.

00:24:34 Gabby Bolanos

What their living situation was? Could they go back? Do they have the support that they need to be as functional as possible, recovering from a hip factor when having a surgery to correct that? So again, thank you so much all for sharing that in our conversation that we have had so far in this episode. We talked a lot about delirium and managing that.

00:24:56 Gabby Bolanos

That so, Marilyn, can you just touch a little bit upon this delirium toolkit that is available for staff across the enterprise?

00:25:05 Marilyn Lopez

Sure. Thank you. Gabby, I just want to under score, it's not only inpatient, but this moves patients also to the post setting and all the quality improvement projects that were involved in or have been involved in are all evidence based. So the literature does support the non pharmacological interventions to be the cornerstone actually of delirium.

00:25:07 Iman Dolah

Fine. I'll just.

00:25:25 Marilyn Lopez

Management and we did a needs assessment across campus sites, which I,

00:25:30 Marilyn Lopez

Know Gabby you've been in.

00:25:31 Marilyn Lopez

And one of the first things we wanted to do is to standardize delirium, multi component, non pharmacologic prevention strategy is the most effective strategy to reduce delirium, which incorporates not only sensory but visual memory coordination, orientation creative, meaningful strategies for our patients.

00:25:52 Marilyn Lopez

Also, experts have found that delirium is a risk factor for dementia and needs to be recognized and managed quickly and to address this, we have established across campus robust delivery and prevention task force, which I know Gabby, you've been part.

00:26:08 Marilyn Lopez

Love and this is led by nurses that include also geriatric experts, volunteer services into this plenary team members, patient experience and patient and family education team, as well as others. The project initiatives actually emphasize non pharmacologic interventions our aim.

00:26:28 Marilyn Lopez

Was to tailor these intervention in a bundle that incorporates a person centered approach as.

00:26:33 Marilyn Lopez

You've been hearing.

00:26:34 Marilyn Lopez

Some of our GRN's mentioned and that it's meaningful and meaningful. That is evidence based, non pharmacologic activities to minimize not only the risk of harm to our patients but also to our.

00:26:46 Marilyn Lopez

Half, therefore, we created the learning prevention bundle with the person centered approach to guide non pharmacologic interventions and as mentioned before the more about me has been very popular at the bedside. It's actually in the form of a card, an invitation card to identify what matters to patients.

00:27:06 Marilyn Lopez

The patients are asked about their favorite routines, as Christen had mentioned, things they would like to have near their bed, things that they enjoy in the bundle, which right now is in our GRPC Intranet web.

00:27:20 Marilyn Lopez

Side we also have the patient at high risk for delirium that the bundle speaks to. These are the patients that screen positive for delirium, has a history of delirium with dementia, specifically older adults. Everyone can get delirious, but specifically older adults are actually at risk 65 and older.

00:27:40 Marilyn Lopez

Patients on virtual constant observation.

00:27:42 Marilyn Lopez

Patients requiring also patient constant observation that benefit from meaningful conversations implementation during our project included e-learning modules that were customized not only to nurses but patient care technician. Our Patient care technicians also in other campus site known as Nursing.

00:28:03 Marilyn Lopez

Assistance. We also tailor it to volunteers with our volunteer managers to boost not only knowledge but also confidence in delivering.

00:28:11 Marilyn Lopez

Management, we created a staff bundle. The bundle has a menu and options for nurses and other staff members include strategies like comfort items that were mentioned by Kristen Memory, Challenge puzzles, fidgets, mindfulness activities like art, which includes modern and contemporary artists.

00:28:31 Marilyn Lopez

And people can print those out. Generational music also very shared family photos to invoke.

00:28:38 Marilyn Lopez

Memory and also to add to reminiscence therapy, which is a strategy approach to discussion and exploring past experiences for the older patients. The tool kit also has a wonderful case study, workflows, tip sheets, guides and links to numerous resources. These are national and homegrown.

00:28:58 Marilyn Lopez

An example just to give you guys an example of a homegrown resource that's here with medication fall risks. And Melissa and I were involved in this and it's in line with the beard criteria guideline and it increases what medications actually increase the risk of delirium. We know anticholinergic expenses and opium.

00:29:18 Marilyn Lopez

Droids, when used with other medications, also can lead to delirium and how important this is. So overall, Gabby, our pilot that we initiated actually has very favorable outcomes and we decided to expand this and make the bundle available to all campus sites.

00:29:37 Gabby Bolanos

Thank you so much, Marilyn. Next, I just want to focus the topic that you know is very important for, you know, my role as a nursing professional development specialist. I think certification is super vital for all of us to take on just because again, it really shows our dedication to our crew.

00:29:54 Gabby Bolanos

And I know patients really love to see and hear that, you know, we are certified in certain specialties. So those are on the panel that do have their gerontological nursing certifications. Can you just share a little bit about what being geriatric certified means to you and do you have any advice for those that are interested in becoming certified?

00:30:15 Hope Castellani

Yeah. So I've been certified for several years and have recently recertified for my cherry oncological nursing certification. As I said, as a medicine leader, a nurse leader as well as a lifelong medicine nurse, I think it is with great pride that I am certified in geriatrics.

00:30:35 Hope Castellani

I feel like I draw upon my training daily.

00:30:38 Hope Castellani

I interact with so many other people on this panel as well as the interdisciplinary team. I really feel like it's such an important certification to have. It really does overlap with so many different specialties and in medicine I often will talk to my team and reinforce.

00:30:58 Hope Castellani

The fact that because a majority of our patients are seniors are geriatric patients, that we are.

00:31:04 Hope Castellani

Specialty and it's a sub specialty and many other areas as well. And so I encourage the jury certification to the nurses who are interested in it and really try to get them involved in the GRPC, especially as a starting point. If it's something that they're interested in pursuing or certification.

00:31:23 Marilyn Lopez

I just want to also echo with Melissa that our niche coordinators and our German PC chairs every now and then we want to get the pulse of our GM PC community. So we actually have anonymous and voluntary Council survey responses and I.

00:31:40 Marilyn Lopez

Just wanted to share that.

00:31:41 Marilyn Lopez

That a lot of our community have expressed their gerontological certification has elevated their practice and provided growth opportunities with stronger clinical practice skills. That's from our GRPC community.

00:31:55 Gabby Bolanos

Thank you. And you know, I would just like to share from my own experience. You know I became certified shortly after I became a geriatric resource nurse, and I felt like the educational modules provided by NIST really assisted in my studying for the gerontological nursing certification test.

00:32:15 Gabby Bolanos

It really just gave me all the information that I needed and all I really had to do.

00:32:20 Gabby Bolanos

After completing all.

00:32:21 Gabby Bolanos

The modules was really focused on study questions and you know, seeing what topics were a little weaker than others. So I think those that are interested in certification in general, I think geriatrics is one of those that again like we've said.

00:32:35 Gabby Bolanos

All this session is really applicable to all service lines and all settings. So if you are interested in gerontological nursing certification, I definitely.

00:32:45 Gabby Bolanos

Empower you to reach out to anyone on the panel here. Reach out to the hashtag. Your PC distribution list for any advice. Reach out to your local nursing professional development specialists or nurse educators for guidance on certification. But it's definitely one of those things that I think taking a test in general.

00:33:06 Gabby Bolanos

They seem very scary, but you'll be surprised at how much you know regarding this topic. You know, because it is. So that is so prevalent not only in our day-to-day practice.

00:33:16 Gabby Bolanos

But you know more and more nursing programs, nursing schools are really focusing on geriatrics and specialty of importance. So I really empower all of you that are not geriatric certified, you know to again consider it as an option because I feel like it is a very approachable certification for all.

00:33:36 Gabby Bolanos

I just want to thank our panelists for joining us today and being truly a valuable resource for our nursing staff across the SYS.

00:33:44 Gabby Bolanos

Some if you are looking for, you know additional resources and information that were mentioned in today's episode, you can find additional resources and handouts on our geriatric resource Nurse Practice Council web page. We also have additional websites through inside health related to geriatrics and of course always welcome to reach out to the.

00:34:04 Gabby Bolanos

GNPC distribution list.

00:34:07 Gabby Bolanos

For any comments or questions, please e-mail hashtag nursing station podcast or hashtag nursing station podcast and why you letting go of that org as a reminder, this session is eligible for contact hours. A survey will be posted with the recording. Please access and complete the evaluation survey to obtain your certificate for the contact.

00:34:27 Gabby Bolanos

Ours once again, it's been a pleasure to listen to all the great work that the system is doing related to geriatrics and until next time it's been Gabby Balanos from the Nursing station podcast team. Thank you for your time.