



## New Growth

### A Decade of Cultivating Leaders in Geriatric Nursing

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Older adults constitute the “core business” of health care. They occupy roughly 50 percent of hospital beds, 90 percent of nursing home beds, and constitute 70 percent of home care cases. Unfortunately, in all of these settings, stunning lapses in quality of care occur, making a significant impact on the ability of older adult patients to maintain a high quality of life—and even life itself. Although the nursing staff’s contribution is absolutely central to the work of any hospital, nursing home, or home care agency, most nurses who work in these settings have had little or no training in geriatrics or gerontology. Therefore, they are unprepared to deliver the best possible care to older adults—a demographic group on the rise. By 2010,

more than 72 million, or one in five Americans will be over the age of 65.

In response, the mission of the John A. Hartford Foundation (JAHF) has been to work on improving the health of older adults by creating a more highly skilled workforce and a better designed health care system. This focus reflects two factors:

- The growing older adult population, especially those over age 85
- The gap between the special health care needs of older people and the knowledge and skills of the health professionals who care for them

### The Road to Success

Data collected from Building Academic Geriatric Nursing Capacity (BAGNC) program awardees who responded to evaluation team surveys in spring 2010 show substantial progress in meeting program goals. For example, most alumni have gone on to become nursing faculty: already 87 of 111 program alumni (78.3 percent) have faculty positions in nursing.<sup>1</sup>

Since receiving their awards, the current and former Scholars and Fellows report that they have:

- Published over 1,100 papers relevant to the care of older adults, almost all peer-reviewed;
- Received over \$72 million in grants related to the care of older adults;
- Taught over 11,000 undergraduate students in courses containing at least 50 percent gerontological content; and
- Formally mentored over 1,000 master’s students on topics related to the care of older adults.

<sup>1</sup> This percentage will likely grow as more of the Scholars complete their dissertations.

## The Need for Leaders in Geriatric Nursing

Our nearly 3 million nurses, at the RN level or higher, represent the single largest profession caring for older adults. Yet nursing education often fails to include what we know about best practices for these patients, leaving graduates unprepared to provide the highest quality of care. Further, while the pool of available data documenting best practices is expanding, there are still many problems that require more research, as well as many barriers to wide implementation of best practices.

As noted in the Institute of Medicine's 2008 report *Retooling for an Aging America: Building the Health Care Workforce*, current demographic imperatives require a three-pronged approach: enhancing the geriatric competence of the entire workforce; increasing the recruitment and retention of geriatric specialists and caregivers; and ultimately, improving care delivery. The lack of nursing faculty with deep knowledge of how best to assess and treat older patients across health care settings has seriously limited our ability to meet these goals for nurses. These faculty are necessary to provide a solid foundation in geriatric nursing for all nursing students, to inspire and provide in-depth training to those who choose to specialize, and to generate new knowledge about best practices in care through research.

Given these circumstances, JAHF embarked on a strategy in 2000 to use scholarship awards to recruit, prepare, and launch the careers of people who aspired and had the ability to become faculty members and ultimately leaders in geriatric nursing. Since then, JAHF has granted awards totaling nearly \$30 million to this effort, to support not only individual awardees but also the program infrastructure that sustains their development. The program, called Building Academic Geriatric

Nursing Capacity (BAGNC), has awarded a total of 129 pre-doctoral scholarships and 87 Claire M. Fagin Post doctoral Fellowships.

This report tells the story of the experiences and achievements of these remarkable women and men over the last ten years. It includes aggregated data, about the Scholars and Fellows, obtained through annual surveys conducted by the Hartford Geriatric Nursing Initiative (HGNI)<sup>1</sup> Evaluation Team at Baruch College. It also includes what the team learned from interviews with key players in the initiative and a few individual award recipients, bringing the broader story into a more personal focus.

As noted by Patricia Archbold, DNSc, RN, program director of BAGNC, and Patricia D. Franklin, MSN, RN, who has been program manager since shortly after BAGNC began, not only was the lack of geriatric nursing faculty and leadership an issue for teaching and research, it also meant that:



Claire M. Fagin



Patricia Archbold



Patricia D. Franklin

<sup>2</sup> The Hartford Geriatric Nursing Initiative (HGNI) is a cluster of projects that focus on improving the professional training of nurses in geriatrics.



- Nursing students were not exposed to experts whose passion, knowledge, and skill would stimulate their interest in geriatrics.
- Nurses in leadership positions frequently lacked the geriatric nursing knowledge needed to manage organizations and set policies to maximize older people's health and quality of life.

## Program Beginnings

A planning committee of geriatric nursing experts, brought together by JAHF in the late 1990s, identified the need for an innovative model to build capacity in academic geriatric nursing. Building on their work, three key people built the foundation of the Scholars and Fellows program—Claire M.

Fagin, PhD, FAAN, former dean of the University of Pennsylvania School of Nursing and the founding program director of BAGNC; Donna Regenstreif, PhD, then senior program officer at JAHF; and Corinne Rieder, EdD, the Foundation's executive director. The program was housed at the American Academy of Nursing (AAN), where Ada Sue Hinshaw, PhD, RN, FAAN, then AAN president, welcomed and supported it.

Once at AAN, a small but strong infrastructure was built to support the work of BAGNC. Pat Archbold and Patty Franklin note that from the beginning the goal was to produce a cadre of

## The critical role of mentors who care

A physician colleague introduced Beth Galik, PhD, CRNP, a BAGNC Scholar from 2003 to 2005, to her mentor, Dr. Barbara Resnick, professor of nursing at the University of Maryland School of Nursing, because of their shared interests in maximizing physical function and activity for older adults living in long-term care settings. Having heard about the BAGNC Scholarship from Dr. Fagin and Dr. Lois Evans from the University of Pennsylvania, where she received her undergraduate degree, Beth contacted Dr. Fagin and then Patty Franklin, who encouraged her to apply. She immediately took the plunge, applied, and was accepted to the doctoral program at the University of Maryland, where she could work with Dr. Resnick.

According to Beth, her relationship with Dr. Resnick is the most significant "gift" the program has given her: the chance to work with someone who, like her, wants to use research to address problems faced in clinical practice. They share a passion to see better care for older adults with dementia, recognizing that they often have more ability to function on a daily basis than many clinicians—including nurses and nurse practitioners—believe. As she notes, older adults with dementia "can't always give you a reliable history or tell you what's wrong. So some clinicians shy away from them because they are more challenging to assess and engage in daily activities."

Beth wants her nurse practitioner colleagues to know that persons with dementia can often do more than we think they can. "We can teach health professionals who work with this group how to hone assessment skills, interpret behaviors, and also adjust their expectations to their clients' abilities," she says.

Beth focuses in particular on increasing physical function and activity with this population, and avoiding the tendency—often reinforced by some patient safety initiatives—to limit their mobility and activity, which reduces their quality of life.



**Beth Galik**

academic leaders who were balanced across research, education, clinical concerns, and policy involvement. This balance has continued since the program's onset. Rachael Watman, MSW, the Foundation's senior program officer for BAGNC, makes it clear that while research is very important, Hartford is not looking to support people who "focus on research for research's sake, but rather for people committed to improving care for older persons through research, teaching and leadership."



Rachael Watman

## Key Elements of the Program

A key ingredient of any award program is, of course, funding. Each Scholar receives \$50,000 per annum for two years while each Fellow generally receives \$60,000. The funds cover tuition and fees for Scholars, research costs for both Scholars and Fellows, and a stipend for Scholars and Fellows that can be used to "buy-out" salary for Fellows already in faculty positions. These generous awards allow Scholars and Fellows to devote full-time effort to their professional development and research. The schools, colleges, and universities where awardees are based have shown great vision in supporting awardees' involvement with BAGNC. Without the willingness of these institutions to provide time and support, BAGNC's efforts to develop future faculty could not have been successful.

### *The gift of great mentors*

Money, however, is only the beginning. Another critical program element is the requirement that each awardee has at least one and sometimes several mentors. While mentors are usually faculty at the awardee's academic home, they can also be based at

other institutions, if they bring expertise, interest, or connections that are highly related to the awardee's specific topic of interest. Everyone has a mentor from geriatric nursing, and many also have mentors from other fields, such as medicine or the social sciences. Our surveys reveal that awardees rate their mentors' support for their geriatric nursing scholarship and career development very highly. Of the current and former awardees surveyed, 81.4 percent rate having a geriatric nursing mentor as an especially useful aspect of their experience. Some alumni have gone on to be mentors themselves, which they see as a great honor and an opportunity to "give back."

### *An annual "deep dive" into leadership*

Leadership is a core goal of BAGNC. Founding director Dr. Claire M. Fagin, a former dean, sees the trajectory of Scholars and Fellows as ultimately leading to deanships and other leadership positions across the country—just as an early National Institute of Mental Health Scholarship did for her. In her view, the program has planted "strong trees that are going to take over the forest."

It is no surprise, then, that another key element of the BAGNC program is the Annual Leadership Conference held in November before the meeting of the Gerontological Society of America (GSA). All current Scholars and Fellows participate in this event, along with mentors, alumni, CGNE Directors, BAGNC and JAHF staff, and guest speakers drawn from leaders in nursing and health care broadly and geriatric nursing in particular. Since the outset, Angela McBride, PhD, RN, FAAN, former dean of the Indiana University School of Nursing, has shepherded the Annual Leadership Conference, in concert with BAGNC staff and the advisory committee. The goals of these meetings are to:



- Help Scholars and Fellows orchestrate full academic careers;
- Develop skills needed to build excellence and leadership in geriatric nursing;
- Support the development of a national network of geriatric nurse leaders/researchers; and
- Link geriatric nursing research to practice and policy changes.

## Fully immersed in scholarship

Jennifer Hagerty Lingler's love for geriatric nursing began when she worked in a nursing home in high school. Her interest only increased when she witnessed her grandparents aging. She wanted to know why some individuals were able to stay healthy as they aged, while others had a very different trajectory. After receiving her bachelor's degree from Case Western Reserve University, she began her journey toward earning her MA in Bioethics, MSN, and PhD in Nursing from the University of Pittsburgh. Her ideas for her dissertation were still developing when she learned about the BAGNC scholarship. She felt that "the award really supported me during the critical period of my doctoral work." Until then, Jennifer had been attending school on a part-time basis, but receiving the BAGNC scholarship in 2001 allowed her to transition to a full-time student status and immerse herself in her studies. She finished her dissertation in 2004.

In addition to accelerating the pace of her education, Jennifer reflects that one of the most important benefits of being a BAGNC Scholar was having the structured opportunities provided by the BAGNC program to interact with others beyond her own institution. During her scholarship, the networking opportunities at GSA and the leadership conference allowed her to meet fellow researchers. Over time, through continued interaction at GSA and regional conferences, Jennifer's networks developed organically into working relationships. For example, she has co-authored a paper with two other members of her 2001 cohort, Rita Jablonski, PhD, RN, ANP, and Meg Bourbonniere, PhD, GNP.

Looking back, Jennifer feels that participation in the leadership conference helped her evolve as a leader as her career progressed because "in that early stage of one's career, to have someone help you envision yourself as a leader is really important."

Along with teaching undergraduate and graduate students, she directs the education and outreach efforts of the University of Pittsburgh's Alzheimer's Disease Research Center, funded by the National Institute on Aging, and is very proud of starting a group to help undergraduate students learn about geriatric nursing research early in their career path.

Jennifer continues to focus her research on the psychosocial well-being of persons with cognitive impairment and their family caregivers. She is currently investigating illness perceptions and their relation to health behaviors in persons at heightened risk for Alzheimer's disease. In addition, she is researching how patient and caregiver factors interact to influence decisions regarding enrollment and retention in clinical research on Alzheimer's disease.



**Jennifer Hagerty Lingler**

## How we collect our data

Each year, we invite all Scholars and Fellows to respond to a Web-based survey designed to capture the information you see here and much more. The survey was designed in collaboration with the BAGNC and JAHF staff. After we administered it the first time, we called about 20 respondents to conduct “cognitive interviews” that assess whether people understood our questions as we had intended. Some confusing items were clarified as a result. Only the Baruch Evaluation Team can see individual surveys, but reports aggregating the results are regularly created and posted on our Web portal ([www.hartfordnursingeval.org](http://www.hartfordnursingeval.org)). These reports are available to the public. Our response rates are typically close to or slightly over 90 percent, which in itself reflects the continuing commitment of awardees. We also administer a participant evaluation survey at each year’s leadership conference. The results are used to continue refining the sessions.

Each year, a theme is chosen for the meeting. For example, the 2009 meeting emphasized interdisciplinary work. A highlight of the conference is the Mary Starke Harper Award presentation and lecture, where senior leaders in the field of nursing attend to reflect on their career pathways and the roles they have played. Over the years, these leaders have included Florence Wald, RN, MN, MA; Shirley Chater, PhD, RN; and Gloria Smith, PhD, RN. Scholars and Fellows almost always find these leaders’ personal reflections the most inspiring part of the conference.

Overall, awardees identify the leadership conference as an especially useful part of the award program because of the intellectual stimulation and the quality of the presenters. Another perennial highlight is a session led by Dr. McBride, who presents a framework awardees can use in conceptualizing their career trajectory and in seeing what it takes to move onward and upward through a series of critical professional transitions. Second year Scholars and Fellows also get a chance to do a research poster session, with support from The John A. Hartford Foundation’s communication consultant, John Beilenson.

As is true for so many conferences, however, the chance to network with each other, to spend extended “face time” with distance mentors, and actually to meet guest speakers and others in the forefront of geriatric nursing all contribute value to this experience. Awardees get a chance to hear from

nursing leaders who hold senior positions in the world of academia and also in major government agencies such as the Health Resources and Services Administration, the Centers for Disease Control and Prevention, and the National Institute on Aging. Leaders from foundations and national nonprofit organizations are also frequent guests. In sum, it is not surprising that 78.2 percent of current and former awardees rate the leadership conference as an especially useful part of the BAGNC program.

## *Participating in the Gerontological Society of America (GSA)*

As we noted, all Scholars and Fellows must participate in the GSA Annual Scientific Meeting, which provides a structured and respected forum for presenting research on aging and the care of older adults. In our last round of surveys, 72.4 percent identified this as an especially valuable element of the program. Dr. Fagin thinks attending an interdisciplinary conference of a key organization in geriatrics such as GSA is a great way to move a career forward and make contacts. She notes that this requirement was introduced at the outset to encourage an interdisciplinary approach, as caring for older adults is inherently a team effort.

## *The role of the BAGNC Coordinating Center*

The award programs are clearly a “hands-on” enterprise. From recruitment, application review, helping match awardees to institutions and mentors, and managing the myriad fiscal mazes of multiple academic settings, to handling logistics at the



leadership conference, the BAGNC Coordinating Center staff is front and center. Rachael Watman says of these stalwart BAGNC leaders, “The people I am blessed to work with really make my job terrific in good times or bad. Pat and Patty are proactive, creative, thoughtful, and flexible leaders.” Scholars must report in regularly, giving Pat and Patty a chance both to bask in the glow

of achievements and intervene early to ensure people stay on track.

Housing the Coordinating Center at the American Academy of Nursing adds to its prestige and ability to understand trends in the broader field of nursing.

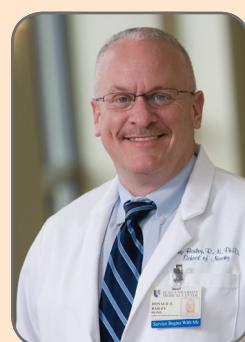
## “The best script you can write for your career”

Donald (Chip) Bailey, PhD, RN, knew he was needed in geriatric nursing the first time he had a clinical rotation in a nursing home. He recalls seeing shadowy figures lined up against a wall who turned out to be residents, sitting in wheelchairs and covered with blankets, waiting to take a shower. Clearly, this was not the way Chip wanted to see older adults treated. He finished his PhD in 2002 and took the advice of a friend and colleague to go to a University of Iowa summer “boot camp” focusing on gerontological nursing research.

At the end of the session, Meridean Maas, PhD, RN, FAAN, then director of the Iowa College of Nursing Hartford Center of Geriatric Nursing Excellence (HCGNE), handed him the Claire M. Fagin Fellowship application materials and informed him that he was going to apply. At that point, he hadn’t even considered doing a post doc, but after that week in Iowa, he thought, “this sounds like an amazing opportunity for me.” He had already committed to geriatric nursing and realized that “there must be something about him that these folks thought could be of benefit to the future” of the field. It appears they were right. Among other accolades, Chip received the award for the best “stand-alone” course in geriatric nursing from the American Association of Colleges of Nursing in 2004.

Chip did his post doc at the University of Iowa and at Duke University. In his view, the award gave him access to a broad array of geriatric nursing researchers (he may take the prize with a total of five mentors) and 100 percent release time from teaching, allowing him to “jumpstart” his career and fully explore his research agenda. His dissertation research focused on how men responded to “watchful waiting” as a way to address prostate cancer. He went on to examine this longitudinally in his post doc and is now transferring the idea to people who are aging with hepatitis C, while continuing his work on prostate cancer. For Chip, however, doing research is particularly meaningful when it influences practice—another reason teaching is so important to him.

“Giving back” means a great deal to Chip. He worries a bit when he considers that his resume has many articles on which he is not the senior author—until he realizes he got involved in these articles because of people who asked for his help. Already, Chip is recruiting BAGNC Scholars and Fellows, co-mentoring a Scholar and a Fellow, and staying as involved with HGNI as he can. When asked what he would like to be able to say to younger people when he retires, he replies, “In some small way he improved care for older adults, especially those who have to turn to residential care.”



**Donald (Chip) Bailey**

## Being part of a truly important profession

When Fang Yu was a nurse in China, her boyfriend's parents made him break off their relationship because being a nurse was not important enough. Luckily for all of us, Fang remained a nurse. But she also moved to the U.S., where opportunities and demands were quite different. Here, she found, nursing was a well-respected, science-based profession that in fact could be very important.

A key element of difference for Fang was research. At that time in China, there was no role for nurses in research. While studying to be a geriatric nurse practitioner at the University of Pennsylvania, where she also earned her PhD, she wondered how to build research from her roots in clinical practice. The rigor of the UPenn faculty research programs impressed her, and watching her husband doing biological research inspired her to think she could do it also. So she went to talk with Neville Strumpf, PhD, RN, FAAN, who at that time headed UPenn's Hartford Center of Geriatric Nursing Excellence (HCGNE), to simply ask "what to do." Professor Strumpf recommended she apply for a post doctoral Claire M. Fagin Fellowship. Fang's husband was going to Penn State to pursue his career, and Professors Strumpf and Lois Evans both recommended that she connect with Ann Kolanowski, PhD, RN, FGSA, FAAN, who shared a research interest with Fang—dementia. Professor Kolanowski, who now heads the newer HCGNE at Penn State, welcomed her and helped her think through how she could build on her dissertation.

Fang was buoyed by the fact that in her dissertation the rehabilitation intervention she tested actually showed positive results. She began to see a pathway for herself in mediating the declining trajectory of patients with Alzheimer's and other dementias.

After the post doc, Fang moved to the faculty of the University of Minnesota. People warned her that a move at this point could slow down her research, and it has indeed been a struggle building the relationships with local service agencies she needs to recruit study participants. She has been working hard to get funding to facilitate recruitment and has had early success. Fang says she "wants to be nothing but a professor." But we may want to watch carefully to see whether or not this "strong tree" ends up as a Dean someday.



Fang Yu

## Partnerships Enhance and Extend Opportunities

Partnerships expand resources to ensure sustainability, but even more importantly, enable additional highly qualified applicants to receive awards. As noted by Rachael Watman, the BAGNC program is grateful for the support of its funding partners. Atlantic Philanthropies began supporting the Claire M. Fagin Fellowship in 2004, with total awards to date of nearly \$5.5 million. The Mayday Fund has recently provided additional funding for Scholars and Fellows who pursue the important issue of pain management. The Jonas Center for Nursing Excellence is supporting the early career development of a Scholar at each Hartford Center

of Geriatric Nursing Excellence (HCGNE). This major new collaboration is expected to enrich both the Jonas and Hartford Scholars. New partnerships can sustain and extend the awards program to increase the pace of progress.

Expanding partnerships is a high priority, as more people than ever before are applying for the Scholar and Fellow awards. In spite of the successes of the program to date, there is still work to do in ensuring that every nursing student in the country can learn about the care of older adults from faculty with deep knowledge and commitment. More well-trained faculty are needed across the country.

## **Attracting Leaders for the Future**

From the beginning, a strong and multi-faceted effort was mounted to recruit applicants. Initially, most applicants were referred by the people who would ultimately be their mentors, including many faculty associated with the HCGNEs, which began at about the same time. Directors of the five original HCGNEs also formed the core of the initial advisory committee for BAGNC, which did double duty as the selection committee. Leaders in key nursing organizations, such as AAN and the American Association of Colleges of Nursing (AACN), as well as the National Institute on Aging and the National Institute for Nursing Research, joined center directors on the advisory committee. Now that there are nine HCGNEs, the center directors rotate on and off the committee and continue to support and mentor a number of Scholars and Fellows. Indeed, two thirds of the awardees have a relationship with an HCGNE, while most of the rest have a relationship with another aging research institute.

Currently, recruitment efforts include letters to Deans of Nursing Schools, to past and present mentors, presentations at AACN meetings for deans and doctoral program directors, participation in regional nursing research society annual meetings, an exhibit at GSA, ads in professional nursing journals, the BAGNC Web site ([www.geriatricnursing.org](http://www.geriatricnursing.org)), and regular newsletters. Nevertheless, most Scholars and Fellows will point to individuals who didn't just "suggest" that they apply but rather instructed them in no uncertain terms to do so. The growing prestige of the awards and of the John A. Hartford Foundation within geriatric nursing means that those who get this message feel honored rather than coerced.

### ***Expanding the leadership pool***

A good deal of effort has been put into ensuring that the BAGNC awardees reflect the diversity of the older adults they serve. About 18 percent of

Scholars and 16 percent of Fellows are either African-American, Latino/a, Asian, or Native American, reflecting a diversity far greater than that of the national nursing workforce. Most awardees are women, accounting for 89.8 percent of Scholars and 93.7 percent of Fellows. The average Scholar is 40 years old, but their age when they start their award ranges from 23 to 56 years. The average Fellow is 46 years old, with the average starting age ranging from 28 to 60 years. In addition to being diverse, however, awardees are highly accomplished, as we will see below.

## **BAGNC By the Numbers**

It is important to get a sense of the scale of the BAGNC awards program. Including the 2010 cohort, BAGNC has awarded 129 scholarships and 87 Claire M. Fagin Fellowships. One hundred two Scholars and 70 Fellows have completed the program. There are 23 current Scholars and 17 current Fellows. Twenty-one people have received both scholarships and fellowships. Sometimes, awardees continue directly into a fellowship while in other cases some time elapses, typically to finish the dissertation, but on occasion, to begin their academic career in a new setting.

## **A Record of Achievement**

During his or her award, the average Scholar produces one additional publication related to the care of older adults. Almost all (94.0 percent) present a poster at an academic conference or meeting, while 71.4 percent give a presentation. Conference posters and presentations are signal achievements for a doctoral student. In addition, 29.8 percent show leadership by organizing a symposium or conference, and 44 percent gain leadership experience serving as an officer/chair of a governing board, advisory group, committee, or task force. We are beginning to see alumni of the

## Pursuing one's passion

Tracie Harrison's dissertation at the University of Texas at Austin focused on the meaning of aging for women with childhood onset disability. "I was just starting to look at what it was like to age early in life with a disability," she says. "Given that I had been studying polio, I didn't think many funders would be interested in funding it, but I was very passionate about it." Through the funds provided by the 2003 Hartford Scholarship, Tracie was able to travel to collect her data for her dissertation. "When I looked at the polio survivors, they had done so much as a group to overcome social barriers when they were young. Whenever they started having complications in later years, health care professionals really did not do anything in response to that."

Tracie went on to receive a Claire M. Fagin Fellowship in 2005 to continue her work focusing on aging women with disabilities. The connections she developed with her mentors were a highlight for Tracie during and after her Hartford funding. "Those connections have a lasting impact...that someone believes in the work you are doing made me work a little harder." One of her mentors is now a co-investigator and others are consultants on her current National Institute of Nursing Research grant, focusing on health disparities among Mexican American women with disabilities.

She also found great benefit from participating in the GSA meeting. "I think that one thing the award did was push me to be a member of GSA and attend. I still try to stay involved. It would have been overwhelming and it is so large—I don't know if I would have maintained that connection without the experience through JAHF. It provided avenues for connections to meet people."

Tracie is now a newly tenured associate professor at the School of Nursing, University of Texas at Austin. She is looking forward to continuing her research and mentoring graduate students. "I have a federally funded research grant in its third year. I am resubmitting another one. I have a pilot study that I am submitting. I have more data to analyze on pain and mobility. I have lots and lots of ideas. I am interested in disparities issues and that is where my next step is going with my work."



**Tracie Harrison**

Claire M. Fagin Fellows program inducted into the American Academy of Nursing, the recognized organization for nurse leaders.

The average Fellow produces five more publications during his or her award period, three related to the care of older adults. Almost all (87.3 percent) have given a presentation about the care of older adults at an academic conference or meeting, 90.9 percent have presented a poster, and 23.2 percent have organized a symposium or conference. A great many (83.6 percent) have served as journal reviewers, and 14.3 percent have been editors of journals or special issues of journals. Serving as a reviewer or journal editor is an indicator that peers in the field recognize the quality of your own

research. In addition, 39.3 percent have been an officer/chair of a governing board, advisory group, committee, or task force.

### *Meeting the need for geriatric nursing faculty*

A majority of alumni Scholars, the first of whom completed their award in 2002, are currently nursing faculty, with 38.9 percent holding non-tenure track faculty positions, 25.9 percent on a tenure-track but not yet tenured, and 3.7 percent tenured. Of those who hold a faculty position, 18 (50 percent) are assistant professors, while two are associate professors, and two are full professors. Many hold clinical positions, including three clinical instructors, three clinical assistant

professors, and one clinical professor. In addition three serve as instructors and adjunct faculty.

Almost all (95.5 percent) of the alumni Fellows are currently nursing faculty, with 42.2 percent on a tenure-track but not yet tenured, 35.6 percent achieving tenure, and 17.8 percent in a non-tenure track faculty position. Fellows who hold faculty positions include 18 assistant professors, 20 associate professors, and four full professors, plus one person with an endowed chair. There are also two clinical associate professors and two adjunct faculty. In addition, 10 alumni Scholars and seven alumni Fellows currently hold research positions.

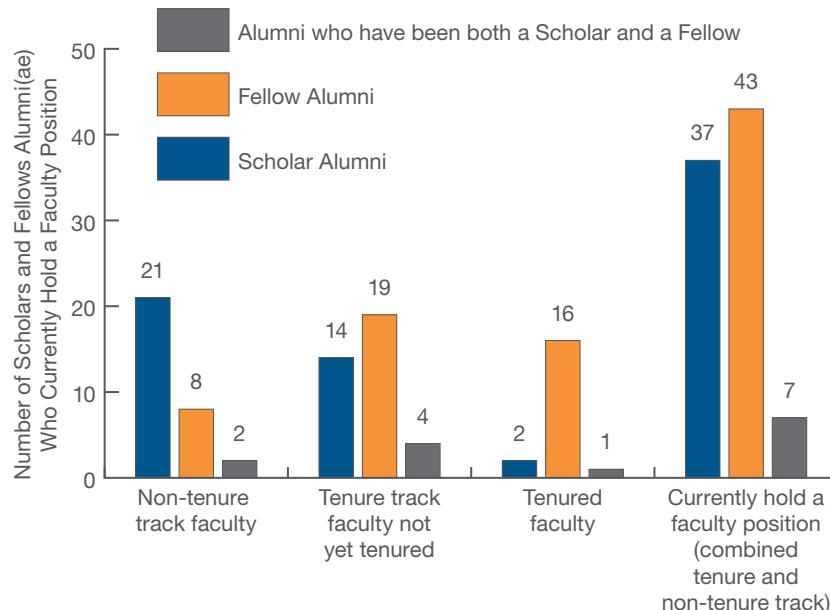
### ***Building and disseminating the evidence base in geriatric nursing***

Since receiving their awards, Scholars and Fellows as a group have received 367 funded grants with either some or high relevance to the care of older adults. These grants come to a total value of \$72 million dollars, breaking down to \$65 million with high relevance and \$7 million with some relevance to the care of older adults. Further, they have

produced 1,133 published articles and book chapters related to the care of older adults. These include 994 peer reviewed articles, 597 empirical research articles, and 62 articles focused on research methodology. In addition to the inherent value of research and dissemination, academic leaders view acquiring grants and gaining visibility through publication as important assets that raise the prestige of work related to the care of older adults.

### ***Building the next generations of nurses trained to care for older adults***

Since receiving their award, current and former Scholars and Fellows who responded to our survey have taught 11,032 undergraduate nursing students, 3,774 master's students, and 261 doctoral students about the care of older adults. They have also formally mentored, advised, or given research support on topics related to the care of older adults to 784 undergraduates, 1,079 master's students, 257 doctoral students, and 41 postdoctoral candidates.





## Whither BAGNC?

The fruits of the BAGNC program are just beginning to develop. With each passing year, alumni Scholars and Fellows will continue to make contributions to advancing academic geriatric nursing and mature into positions of greater and greater influence. Their commitment to older adults is strong and their sense of identity is clear. The Scholars and Fellows have deeply assimilated program director Dr. Archbold's challenge: "From those to whom much has been given, much will be expected." Not just individual academics committed to their career success, the BAGNC Scholars and Fellows see themselves as members of a movement dedicated to spreading the word and making radical change in the care of older adults. Already, a group of alums has begun to create an Alumni Network for former Scholars and Fellows, who can continue accessing the benefits of networking with extraordinary people, offer their expertise through formal and informal mentoring to the Scholars and Fellows of the future, and even make financial contributions.

The need for the program is even more urgent now than in 2000. Demands on nurses will only grow

as we work to improve quality and safety, bend the cost curve, and embark on groundbreaking efforts to extend coverage to millions.

The recent Institute of Medicine (IOM) report, *The Future of Nursing: Leading Change, Advancing Health* ([http://books.nap.edu/openbook.php?record\\_id=12956](http://books.nap.edu/openbook.php?record_id=12956)), is a clear reflection of the expanded roles and responsibilities all nurses will and should face. The IOM noted that to achieve this, "Nurses should achieve higher levels of education and training through an improved education system that promotes seamless academic progression."

As the first baby boomers reach 65 in 2011, geriatric nursing will face heightened demands. The BAGNC program has proven a valuable vehicle to produce academic geriatric nurse leaders who can build a robust evidence base, translate research into practice, work with colleagues from other disciplines, inspire and train new generations of nursing students, and play a more central role in policy. We are confident that they will help achieve the mission of the John A. Hartford Foundation to improve care for older adults.

## Acknowledgments

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