

POSITION STATEMENT

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GAPNA Geropsychiatric Nursing Position Statement: Call to Update of the Geropsychiatric Nursing Competency Enhancements for Advanced Practice

Description and Purpose:

This position statement from the Gerontological Advanced Practice Nurses Association (GAPNA) calls for an immediate and strategic update to the 2010 Geropsychiatric Nursing Competency Enhancements (GPNCE) for Advanced Practice Registered Nurses (APRNs) (Beck, Buckwalter, Dudzik, & Evans, 2011). As the aging population grows and the complexity of their mental health care needs intensifies, APRNs across specialties must be equipped with current, evidence-based competencies to provide high-quality, person-centered, integrated mental health care. The purpose of this statement is to advocate for the revision and advancement of the GPNCE to reflect the evolving landscape of geropsychiatric nursing practice, education, policy, research, and interprofessional collaboration. The GPNCE encompasses the needs and expectations for lifespan mental health care for older adults and their families/caregivers.

GAPNA Position:

GAPNA strongly supports the advancement of geropsychiatric nursing as a recognized and essential subspecialty of gerontological advanced practice nursing. Geropsychiatric nursing is within the scope and standard of gerontological advanced practice nursing (American Nurses Association, 2019). We assert that it is critical for APRNs to have updated geropsychiatric competencies to meet the mental health needs of older adults across all care settings. The outdated 2010 enhancements must be revised to incorporate current scientific knowledge, policy developments, interprofessional frameworks, technology integration, and population health strategies. Updated competencies will ensure that APRNs are adequately prepared to address the multifaceted mental health concerns of older adults and to lead in innovative, interdisciplinary models of care (GAPNA, 2019; s, Massimo, Harris, Evans, & Buckwalter, 2020). The revised competencies must be advanced by dissemination to stakeholders through presentations, publications, webinars, social media, and other methods to strengthen excellence in geropsychiatric nursing, the nursing profession, and mental health care of older adults.

Background:

Advanced Practice Registered Nurse Competencies

The APRN Consensus Model (2008) and the AACN Essentials (2021) define competency-based expectations for APRNs that are population-focused and outcome-oriented. Since the release of the GPNCE in 2010, significant changes have occurred in APRN education, such as the merging of Adult and Gerontological Nurse Practitioner



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roles and expanded expectations for lifespan mental health care. However, current competency statements still lack sufficient geropsychiatric integration, particularly in Psychiatric-Mental Health and Adult-Gerontology Primary Care programs (Stephens, Massimo, Harris, Evans, & Buckwalter, 2020; Harris, Mayo, Balas, Aaron, & Buron, 2013).

The GPNCE was originally developed as supplemental enhancements for core competencies and not meant as a replacement, with key domains including assessment, management, approach to older adults, and role definition. These domains remain vital, but require re-evaluation in the context of integrated care, traumainformed practice, substance use management, and social determinants of health.

Geropsychiatric Nursing

Geropsychiatric nursing is defined as the holistic support for the care of older adults and their families/caregivers as they anticipate and/or experience developmental and cognitive challenges, mental health concerns, and psychiatric/substance misuse disorders across a variety of health and mental health care settings (American Academy of Nursing, 2010, p.1). As a field, geropsychiatric nursing continues to make notable progress over the past decade through initiatives such as the Geropsychiatric Nursing Collaborative (GPNC), national conferences, interdisciplinary curriculum efforts, and integrated care models such as the Emory Integrated Memory Care Clinic (Stephens, Massimo, Harris, Evans, & Buckwalter, 2020). Despite these advances, the formal recognition of geropsychiatric nursing as a subspecialty and the widespread adoption of competencies in graduate curricula remain limited (GAPNA, 2019). Few programs offer specialized tracks, and the proportion of schools infusing any geropsychiatric nursing (GPN) content has stagnated at less than 70% (Stephens, Massimo, Harris, Evans, & Buckwalter, 2020).

Barriers to Mental Health Services

Mental health disorders affect approximately one in five older adults, yet behavioral health services remain underutilized due to stigma, inadequate workforce preparation, and fragmented systems of care. Many APRNs working in primary care report insufficient training in managing complex geriatric, psychiatric, and substance use conditions.

Additional barriers include:

- Lack of GPN-trained faculty and mentors
- Outdated curriculum and web-based resources
- Limited interprofessional education and simulation models
- No subspecialty certification or formal credentialing path in GPN
- Scope of practice restrictions and reimbursement challenges (Stephens, Massimo, Harris, Evans, & Buckwalter, 2020; Harris, Mayo, Balas, Aaron, & Buron, 2013)

Need for Updating Geropsychiatric Nursing Competency Enhancements



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The original GPNCE served a critical role in shaping geropsychiatric educational content across APRN specialties. However, the past 15 years have brought significant changes in demographics, health systems, interprofessional care models, and educational technology that demand a refreshed set of competencies. Key drivers for updating the GPNCE include:

- Rising prevalence of dementia, depression, and substance use disorders among older adults
- Widening racial and socioeconomic disparities in access to geropsychiatric care
- Increased emphasis on integrated behavioral health in primary care
- New frameworks such as the AACN Essentials (2021), Interprofessional Education Collaborative (IPEC)
 Core Competencies, and trauma-informed care
- Gaps in curriculum coverage and faculty expertise, especially in non-psychiatric APRN programs
 (Stephens, Massimo, Harris, Evans, & Buckwalter, 2020; Harris, Mayo, Balas, Aaron, & Buron, 2013)

Recommendations:

GAPNA recommends the following actions to update and enhance the Geropsychiatric Nursing Competency Enhancements:

Recommendation #1 - Revise and Advance the GPNCE for Advanced Practice

- Engage a national task force of APRNs, educators, interprofessional experts, and older adult advocates to revise the GPNCE.
- Ensure alignment with AACN Essentials (2021), NONPF competencies, IPEC Core Competencies, and contemporary practice models.
- Incorporate emerging priorities such as trauma-informed care, culturally responsive care, digital/Alenabled mental health interventions, and palliative psychiatric care.

Recommendation #2 - Integrate Updated Competencies Across APRN Curricula

- Promote that all APRN programs (not only PMHNP tracks) embed updated GPN content within didactic and clinical experiences.
- Provide faculty development grants, teaching toolkits, and curricular modules for implementation.
- Recommendation #3 Promote Subspecialty Recognition and Credentialing Pathways
- Explore the development of a formal GPN subspecialty certification or credential.
- Encourage nursing organizations and certifying bodies to acknowledge and support GPN as a recognized subspecialty (Melillo, 2017).
- Recommendation #4 Foster Interprofessional Education and Practice
- Expand partnerships with interprofessional organizations to embed GPN within team-based learning and care models.



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 Encourage clinical training sites to adopt integrated geriatric mental health models and preceptor development.

Conclusion:

GAPNA urges national nursing leadership, academic institutions, policymakers, and funders to prioritize the update and implementation of the Geropsychiatric Nursing Competency Enhancements. The health and dignity of our aging population depend on a nursing workforce equipped to meet their complex mental health needs with skill, compassion, and innovation.

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