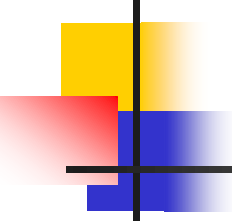


Advanced Practice Nursing Definition and Scope of Practice



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Defining Advanced Practice Nursing

- As anyone with a master's degree
- As particular roles (CNS, NP, CRNA, CNM)
- As a constellation of competencies
(my approach)



Evolution of an Integrative Model

- We must be able to describe and define advanced practice nursing for it to exist.
- The concept cannot be so broad as to lack meaning in practice.
- When we say what advanced practice IS, we must also be clear about what it is NOT.
 - **The advanced practice of nursing is NOT the junior practice of medicine.** (Hamric, 2009, p.78)
- Differentiation of levels of nursing practice is necessary for clarity. *All nurses are valuable but we are not all the same.*



My Fundamental Premises

- Advanced practice nursing is a *concept*, not a *role* – there are many APN roles.
- To be considered an Advanced Practice Nurse, core similarities must be evident.
- Direct clinical practice is central to APN definition.
 - Some specialties (such as administration, informatics) do not meet this definition.



Specialization vs APN

- Specialization
 - Selected concentration in clinical area
 - All nurses are specialized in this sense
- Advanced Practice Nursing Includes, but Goes Beyond Specialization
 - Specialization
 - Practice Expansion
 - Educational Advancement



Evolution of an Integrative Approach in USA -- Hamric

- First published in 1996
 - Thinking began in 1993-4
 - Derived from CNS model, 1989
- Used literature from 4 APN specialties:
 - CNS (clinical nurse specialist)
 - NP (nurse practitioner)
 - CRNA (nurse anesthesia)
 - CNM (nurse midwifery)
- Identified competencies core to all roles



A Definition of Advanced Practice Nursing

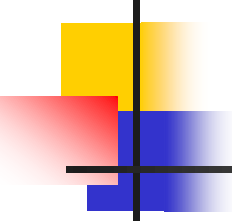
Advanced practice nursing is the application of an expanded range of practical, theoretical, and research-based competencies to phenomena experienced by patients within a specialized clinical area of the larger discipline of nursing.

Hamric, 2009, p. 78



Areas of Expansion

- Increased skills in health assessment, diagnosis, medical management
 - CNS: increased knowledge and skills related to care of complex specialty patients
 - NP: manage patients in primary or acute care settings in collaboration with physician
- Focus on disease prevention and health promotion
- APN Core Competencies
 - Ex., Coaching patients through complex health-illness transitions; ability to apply EBP to patient care



Integrative Model of Advanced Practice Nursing -- Elements

- Conceptual Definition
- Primary Criteria
 - Necessary, but not sufficient
- Core Competencies
 - One Central to all the others
 - Each has a definition *unique* to APN practice
- Critical Environmental Elements in APN Environments
 - Must be managed for the APN to succeed

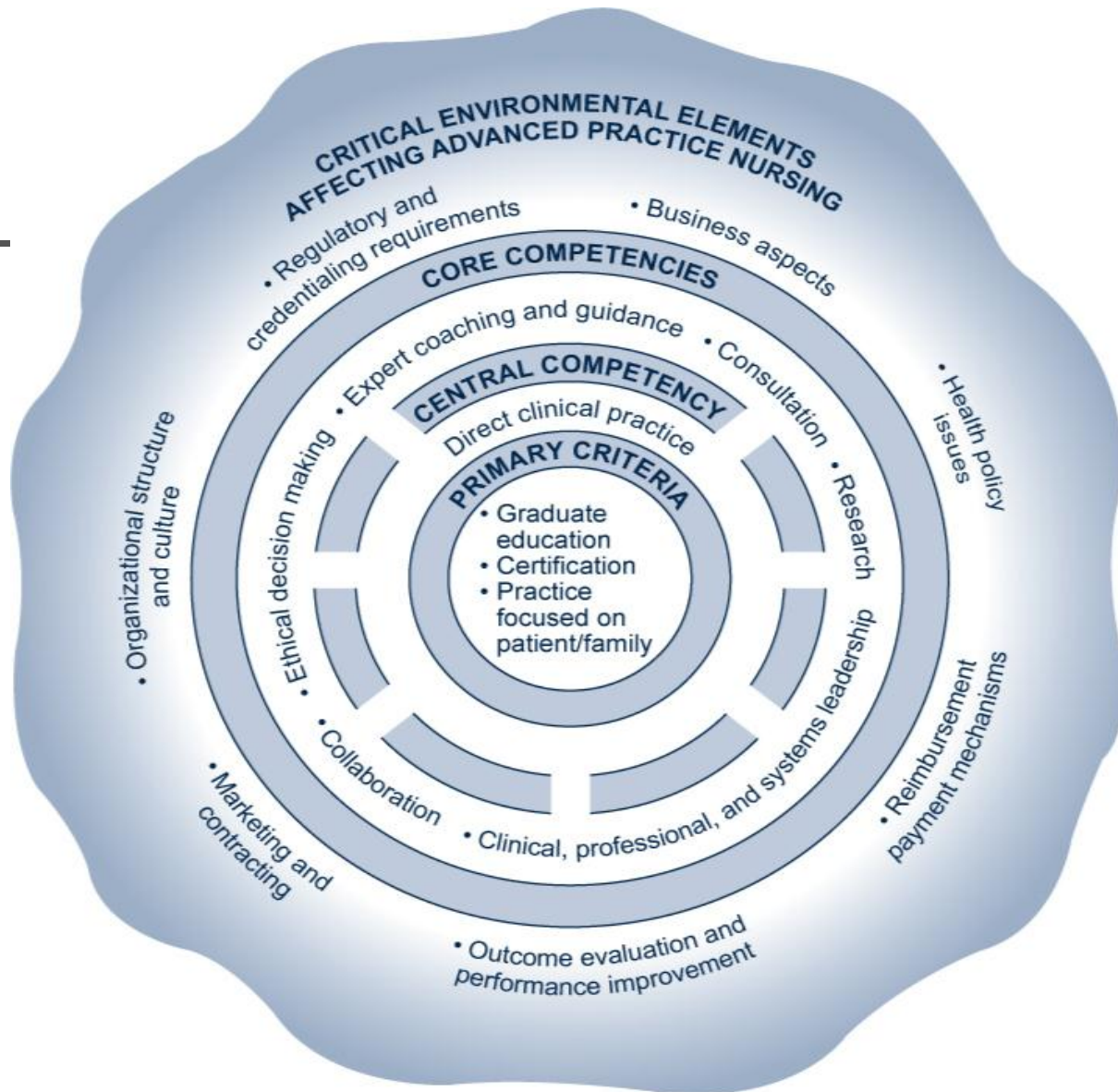
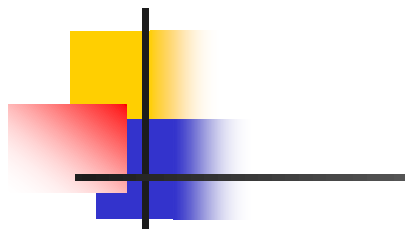


Fig. 3-6. Critical elements in advanced nursing practice environments.



International Models

- Commonalities:
 - Newer models are competency-based
 - Some use of multiple roles
 - Requirement for direct clinical practice
- Divergences:
 - Terminology confusing
 - Only NPs considered as APNs in some countries
 - Competencies not similar in all models
 - No evidence of additive conceptualizations building on previous work



What Do APNs Do?

- Clinical Nurse Specialists (CNS)
 - 3 spheres of influence:
 - Patient, Nurse, System
- Nurse Practitioners (NP)
 - Primary care and Acute Care

What Differences do APNs Make?



- Improved patient outcomes
 - Physiologic health state
 - Knowledge and improved adherence to treatment
 - Enhanced ability to manage self-care
 - Improved coping
- Improved nursing care delivery and strengthening nursing as a discipline
 - Bring EBP to patient care
 - Clinical career path for nurses
- Improved structures for providing care to specialty patient populations
- Improved collaborative teams



Scope of Practice

- Describes practice limits and parameters within which APNs may legally practice.
 - Activities an individual practitioner is permitted to perform
- In the USA, APN scope is legally defined at state level in Practice Act; then specified in regulations.
- However, federal Medicare regulations also specify APN activities as well, so 2 layers.



Certification and Licensure

- APNs are recognized in all states (generally as APRNs), but there are differences in scope of practice
 - Second licensure vs recognition
- All states allow some prescriptive authority for certain APN groups
- APNs are certified by professional organizations at an advanced level
 - Some CNS specialties don't have certification

Scope of Practice Derivation in the USA



■ National Scope

- professionally derived

■ State Law Scope - nurse practice act

- legislatively derived – CANNOT EXCEED

■ Institutional Scope - job description

- organizationally derived

■ Service-related Scope - practice agreement

- collaboratively derived with MD

■ Individual Scope


- individually derived



State Regulation – the Primary Criteria

- Graduate Education – accredited prog
 - Specific APN specialty category
 - FNP vs ACNP vs specialty NP
- Certification
 - In an APN specialty category
 - Complex for CNSs, since exams not available in all areas
- Licensure in a particular APN Role
 - Direct Clinical Practice

Education/Practice Congruence



- Must practice in the area for which you have been educated
- Educational specialty and role focus must match certification
- PCNPs cannot interchange with ACNPs and vice versa; ACNPs are not CNSs
- NCSBN/Joint Dialogue Group calls:
 - More stringent monitoring of congruence
 - National vs state standards



State Regulation

Different Levels of Stringency:

- Least restrictive: Voluntary Registration
 - Earliest; no longer common
- Required Registration AKA Credentialing
 - generally includes title protection
- Second Licensure – becoming the norm
 - provides title protection
 - "APRN" designation
- Most restrictive: Prescriptive Authority
 - Generally separate from licensure
 - Imposes additional requirements



Conclusion

- “The nursing profession, nationally and internationally, is at a critical juncture with regard to advanced practice nursing. The need to move forward with one voice on this issue is urgent if APNs and the nursing profession as a whole are to fulfill their social contract with the individuals, the institutions, and the communities we serve”.
- Spross & Lawson, 2009



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