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An Integrative Approach

ADVANCED NURSING PRACTICE

An Integrative Approach

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PREFACE

These are times of uncertainty and rapid change in both the health-care system and the nursing profession. The health-care reform initiatives of the early 1990s mobilized the nursing profession to re-examine all advanced nursing practice roles. The nursing profession highlighted advanced practice nurses as key providers who could meet the needs of many Americans for primary health care and illness management (American Nurses Association, 1993). The American Nurses Association recognizes four advanced nursing practice roles: the clinical nurse specialist, the nurse practitioner, the nurse anesthetist, and the nurse-midwife. As the profession rallied around advanced nursing practice as a response to the need for reform, considerable discussion and debate arose around merging the clinical nurse specialist and nurse practitioner roles. Another recurrent theme has focused attention exclusively on the nurse practitioner role. We believe it is time for a thorough exploration of advanced nursing practice and its definition, competencies, and roles. To fully understand the meaning of advanced nursing practice and its potential contributions to shaping the future of health care, the contributions of all advanced nursing practice roles, whether established or evolving, must be considered. It is also essential to identify the opportunities for advanced practice that can be envisioned in a future health-care system where advanced practice nurses and all nurses participate more fully, visibly, and equitably with medical and other colleagues.

TERMINOLOGY

Consistent terminology has been used throughout the book in referring to advanced nursing practice (ANP), the advanced practice nurse (APN), and particular ANP roles (clinical nurse specialist [CNS], nurse practitioner [NP], certified nurse-midwife [CNM], and certified registered nurse anesthetist [CRNA]). In the literature generally and in clinical arenas, the terms "advanced nursing practice" and "advanced practice nursing" are used interchangeably. Other than in Chapter 2, no distinctions are intended between these terms. For the sake of clarity and consistency, we have chosen to use the former term. Thus the practice is designated ANP and the nurse is designated APN.

Additionally, throughout the book, persons with health-care needs will be variously referred to as individuals, patients, clients, or consumers. These terms

should also be viewed as being interchangeable. The differences reflect the differing preferences of our authors as well as differing terminology in the literature.

PURPOSE

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This is a new book for a new time. For readers familiar with Hamric and Spross's earlier work on the CNS, it is important to underscore that this book is a new text and not another edition of that earlier work. This book is considerably different in emphasis and scope, as it addresses *all* ANP roles and the broad issues important to advanced nursing practice. Even though some of the authors and chapter titles are the same, the contents of the chapters are quite different in this volume, as they have been reworked to enlarge their focus to include all APNs and to be consistent with the book's central concept of advanced nursing practice. The editors' experiences as APNs, educators, administrators, and leaders on the front lines shaping advanced nursing practice over the past 20 years have informed the ideas presented here.

Advanced Nursing Practice: An Integrative Approach represents a comprehensive, in-depth exploration of advanced nursing practice as well as the varied and evolving roles that APNs assume in the health-care system. Distinguishing features include the integration of literature from all of the ANP roles and a holistic, inclusive, and unified vision of advanced nursing practice consistently applied throughout the text.

This book is grounded in a conviction that advanced nursing practice must have a definable and describable core even as it must have differing roles to enact the varied practices that APNs undertake. All of the advanced practice roles described in this book are beneficial to the health of patients. These ANP roles are also crucial to the continuing evolution and strengthening of the nursing profession. Rather than debate whether the CNS and NP roles should separate or merge, the position here is that both separate and blended NP and CNS roles, in addition to other ANP roles, are valuable and needed in an increasingly complex health-care system. Rather than ignore CRNAs and CNMs in the description of advanced practice, this book explicitly includes these roles and their related literature in every chapter. Rather than promote only one role as "the" ANP role, as some nursing leaders are doing with the blended CNS/NP role or the NP role in its primary care and acute care forms, we support variety, diversity, and continued permutations of existing ANP roles so long as they remain within the umbrella concept of advanced nursing practice (described in Chapter 3), and titles are kept consistent. The reality is that no one nurse can master all the practice roles currently being enacted by APNs. There is danger in any one role claiming to be "all things to all people" and ignoring the contributions of other ANP roles to health care.

This vision of advanced nursing practice is consistent with the Report of the American Association of Colleges of Nursing Task Force on the Essentials of Master's Education for Advanced Practice Nursing (American Association of Colleges of Nursing, October, 1995). It described CNS, NP, CRNA, and CNM roles as having "equal relevance to advanced practice" (p. 3), even as the Association recognized that advanced practice roles continue to evolve.

ORGANIZATION

Advanced Nursing Practice: An Integrative Approach is organized into four major parts. In Part I, Historical and Developmental Aspects of Advanced Nursing Practice,

the history of advanced nursing practice is traced. Conceptualizations of advanced nursing practice are described and analyzed, and a core definition of advanced nursing practice is developed. As noted, this definition is followed throughout the book, giving conceptual clarity and consistency to the discussions. Issues in ANP education are identified, and a curricular plan is proposed. Role development literature from all of the advanced practice roles is described, and key themes and issues are identified.

In Part II, Competencies of Advanced Nursing Practice, the eight core competencies that define advanced nursing practice are examined as they are enacted in practice. These competencies include expert clinical practice, expert coaching and guidance, consultation, research skills, clinical and professional leadership, collaboration, change agent skills, and ethical decision-making skills.

In Part III, Advanced Practice Roles: The Operational Definitions of Advanced Nursing Practice, the varied job roles assumed by APNs are described and differentiated from one another. These include the established ANP roles of CNS, primary care NP, CNM, and CRNA, as well as the evolving roles of ANP case manager, acute care NP (ACNP), and the blended CNS/NP.

The final section, Part IV, Issues in the Continuing Evolution of Advanced Nursing Practice, describes faculty practices, deals with health policy and legislative and regulatory issues, provides strategies for developing markets for advanced nursing practice, and describes the realities of program and practice management. The critical issue of administrative support and justification for advanced practice is also discussed. Data from ANP evaluation and research literature are summarized and commonalities identified in the chapter on evaluating the processes and impact of advanced nursing practice. Finally, we use the themes from the first chapter on the history of advanced nursing practice to reflect upon future challenges and opportunities for APNs.

AUDIENCE

This book is intended for practicing APNs in all roles, graduate students, educators, administrators, and leaders in the nursing profession. For practicing APNs, the book contains both theoretical and practical content to guide role implementation. Individuals interested in strengthening or changing their roles will find many strategies for accomplishing these changes. The book will be useful to graduate students studying for any advanced practice role throughout their program of study. Indeed, we believe the book will be most useful if students begin reading content in initial core courses and continue to use the book in later ANP and functional role courses. For educators, the book will serve as a comprehensive curricular resource in preparing APNs for practice. It also serves as a guide to standardize core education for advanced practice. Nursing administrators will appreciate the descriptions of various ANP roles and the strategies for justifying and supporting ANP positions. For nursing leaders, this book is a clarion call to come to common ground regarding our understandings of advanced nursing practice and the roles APNs assume, so that we speak with authority and consistency to policy makers, to other disciplines, and to one another.

APPROACH

We have sought to describe advanced nursing practice at its best, as it is being enacted by APNs throughout the country. Certainly we recognize that there is much

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work to be done: not all ANP students are educated to practice with the competencies described herein; too many nurses are in ANP roles without the necessary credentials or competencies, so that true advanced practice is not demonstrated; and there is too much "alphabet soup" in role titles (for example, the ACNP is variously called tertiary care NP, critical care NP, pediatric intensivist, and so on and so on).

Creating this book has been an immensely challenging undertaking. One of the early learnings was how disparate and separated different ANP groups are—integrating and incorporating the perspectives of all the ANP specialties was difficult. The literature from the various advanced practice specialty groups is also unfortunately separated, and clinicians and educators tend to read only their own group's literature. In addition, not all groups have addressed the core concept of advanced practice or the competencies of APNs in a complete or consistent manner. One of the major contributions of this book is the attempt at synthesis regarding advanced nursing practice. Adopting this integrative approach, as challenging as it has been, has immeasurably enriched this understanding of advanced nursing practice.

Our approach is unified around core criteria and competencies but flexible enough to accommodate emerging ANP roles. There is no doubt that roles will continue to evolve as nursing continues to mature in its understanding and enactment of advanced nursing practice. But advanced nursing practice must be distinct, recognizable, and describable if it is to continue to exist. As the AACN Task Force Report (1995) noted, "The greater concerns for consumer confidence, quality graduate education, and clear outcomes mandate that a more coherent and consistent set of curricular standards be articulated. Moreover, titling must be simplified and specifically relevant to the core clinical competencies that an advanced practice nurse brings to the health care delivery process" (pp. 2–3). It will be clear to the reader that the diverse roles described in Part III, while they share the core criteria and competencies of advanced nursing practice, are different and distinct from one another in their role enactment. This should be a cause for celebration, as nursing recognizes its strength and range in meeting client needs.

We are convinced that advanced nursing practice is absolutely essential to improving the health and well-being of the citizens of this nation! Advanced practice nurses can and must be active participants in solving some of the pressing problems in health-care delivery being experienced as we move into the 21st century.

Ann B. Hamric Judith A. Spross Charlene M. Hanson

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