

# Advanced Practice Nursing (APN)

Advanced practice nursing is a term used across various fields of nursing. It is a level of practice and includes nurses in a wide range of advanced roles. The idea and education of nurse practitioners (NPs), or advanced practice nurses (APNs), as they were later called, originated in the USA in the 1960s. Today, examples of APNs include clinical nurse specialists (CNSs), NPs, midwives and nurse anaesthetists.

Over the past two decades, APNs have become well established in many countries, for example in Australia, Canada, the Netherlands, New Zealand, the UK and the USA. In the Nordic countries, the first APNs graduated in Sweden as early as 2005 and in Finland in 2006.<sup>1</sup>

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Observing the need to improve the visibility and international representation of the emerging advanced practice nursing discipline, the International Council of Nurses (ICN) launched the International Nurse Practitioner/Advanced Practice Nurse Network (INP/APNN) in 2000 ([www.icn-apnetwork.org](http://www.icn-apnetwork.org)). In 2002, the ICN provided an official position on APN.<sup>2</sup>

The ICN’s definition of advanced practice nursing emphasises that the model for each country should be applied and modified with respect to the culture, traditions and history of the country.<sup>2,3</sup>

## Existing research

Existing research on the size of the NPs workforce is limited. To date, comparisons have been made primarily between the education, management and regulation of NP’s titles.<sup>4-8</sup>

A study of primary care in six countries found that the total number of NPs is low in most

countries.<sup>9</sup> However, only the total number of NPs was reported, without further information on the relative size of the ANP workforce compared to other professions, or time trends.

An important 2010 report by the Organisation for Economic Co-operation and Development (OECD) found that, for example, the neurological nursing workforce was largest in the USA (in terms of absolute and relative size compared to the total nursing workforce); followed by Canada, Australia and Ireland.<sup>5</sup>

However, the report did not differentiate between activity levels and did not indicate time-trend data. At the individual country level, there are a number of studies, led by the USA, that have sought to quantify the total number of NPs by employment, specialty and clinical practice area.<sup>10-15</sup>

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The European Federation of Nurses Associations (EFN) has been working to address this data gap, with a survey of advanced practice across its 36 member organisations.

The EFN members fed back on 60 items, concerning key features of advanced practice nursing, with a view to mapping existing developments and understanding the ‘state of the art’, with the ultimate aim of identifying avenues for future efforts to focus on

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developing the standardisation of advanced practice nursing across the EU and Europe.

This research identified a significant level of variation in how Member States that reported having an APN framework define what APN means, and how it is regulated at training and practice levels.

Based on these findings, more research is needed to investigate whether this is the result of designing models of advanced practice nursing that work in different contexts and what impact a standardised regulatory framework would have on the number of qualified APNs across the EU and Europe.

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### **Are the roles cost-effective?**

There are no rigorous studies showing the cost-effectiveness of ANPs.<sup>16</sup> However, systematic reviews of studies examining healthcare delivery indicate that well-defined advanced practice nursing roles can result in reduced healthcare costs.<sup>17-24</sup>

### **Definition of advanced practice nurses**

The ICN has defined the APN as ‘a generalist or specialised nurse who has acquired, through additional graduate education (minimum of a Master’s degree), the expert knowledge base, complex decision-making skills and clinical competencies for Advanced Nursing Practice, the characteristics of which are shaped by the context in which they are credentialed to practice’ (adapted from ICN, 2020).<sup>3</sup> The two most commonly identified APN roles are CNSs and NPs.

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### **What are the roles of advanced practicenurses?**

APNs are prepared through Master’s-level academic study and supervised practice to perform a variety of complex tasks in patient care and in the broader healthcare system.<sup>25,26</sup>

### **What are the characteristics of an advanced practice nurse?**

To support and complement the definition of an advanced practice nursing, the ICN has identified the characteristics of an APN and has made the following recommendations.<sup>3</sup> These are consistent with the EFN’s core competencies, established in 2017.<sup>25</sup>

#### **1. Recommendations pertaining to educational preparation include:**

- The ICN (2020) states in its guidelines that educational preparation to at least Master’s level is crucial in developing the roles to the required level of nursing
- preparation and formal (accredited) recognition of educational programmes that prepare the APN
- a formally sanctioned system of recognition such as licensing, registration, certification and credentialing.<sup>26</sup>

#### **2. Recommendation relating to the nature of practice include:**

- an ability to integrate research [evidence-based practice], education and clinical management
- a high degree of professional autonomy and independent practice
- advanced skills in assessment, decisionmaking, diagnostic reasoning and case management
- formally recognised high-level clinical competence
- an ability to provide consultative services to other healthcare professionals
- planning, implementing and evaluating programmes of care.

### 3. Recommendations concerning regulatory mechanisms – country-specific professional regulations that form the basis of advanced practice nursing – include:

- the right to diagnose
- the right to prescribe drugs and treatments
- the right to refer to specialists in other disciplines
- the right to admit patients to hospitals and discharge them
- officially recognized titles for nurses working in advanced practice roles
- legislation, policy or some form of regulatory mechanism specific to advanced practice nursing

### What are the categories of advanced practice nurse?

The CNS and the NP are commonly identified categories of APN.<sup>26-28</sup>

The CNS is a nurse, educated above the level of a nurse or nurse specialist, with advanced knowledge and skills in making complex decisions in the clinical specialty area, and using a systems approach to provide optimal care in healthcare organisations.<sup>27</sup>

The NP is the other commonly identified category of APN.<sup>28,29</sup> NPs are general nurses who, after additional education (minimum of a Master's degree for entry level), are autonomous clinicians.

The two roles remain largely separate yet there is some overlap.<sup>28,29</sup> The CNS is an expert clinician with a specialised area of practice, defined in terms of population, setting, disease or medical subspecialty, type of care or problem, which includes a systems perspective in the delivery of healthcare services.<sup>30</sup> The NP's practice focus emphasises the population primarily in primary healthcare, but now includes both primary healthcare and acute care.<sup>31</sup>

Fundamental differences between CNSs and NPs show that CNSs focus more on intermediate

care, supporting clinical excellence in a systems approach, while NPs focus more on direct patient care in a variety of clinical settings.<sup>32, 33</sup>

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### Advanced practice nurse leadership

APNs can exert their leadership influence in far-reaching ways, ranging from bedside care to the highest political level.<sup>38</sup> In the ICN's (2020) new guidelines on advanced practice nursing, CNSs are seen to function as 'expert clinicians in a specialty and are leaders in advancing nursing practice by teaching, mentoring, consulting and ensuring nursing practice is evidence-based/evidence-informed'.<sup>3</sup>

Studies have shown that achieving a full Master's qualification not only enhances the clinical attributes but also has a positive impact on leadership, education of others, integrating research and critical thinking.<sup>34,35</sup>

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### Implications

APNs are qualified and skilled in assessing individuals, families and community health needs and diagnosing the type of nursing intervention that is needed. Their high skills and critical thinking background allow them to lead integrated care, including disease management, making or receiving referrals and supervising and guiding caregivers. This improves outcomes for people and populations.<sup>35,36</sup>

Master's-level-educated APNs can meet the growing current and future care needs of both inpatient and primary care settings. APNs have been shown to treat undiagnosed patients with

undifferentiated health problems with the same results as primary care providers, thus easing the burden on the healthcare system.<sup>37</sup>

APNs have been shown to be effective in managing chronic health problems in older adults, reducing unplanned hospital admissions and improving self-care and compliance.<sup>38</sup>

APNs have excellent clinical training and extensive professional experience, take a holistic and person-centred perspective, and build trusting relationships with patients. However, successful implementation of APN roles requires: political, organisational and managerial support; continuous evaluation; and good collaboration among colleagues, especially in primary care/ family care.<sup>39</sup>

It is important to note that APNs working in an autonomous position are having a positive impact, continually increasing awareness of the global capabilities of this role in addressing healthcare crises.<sup>38</sup>

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## Digitalisation

The increasing use of digital, and the integration of technology with health and society, mean that nursing leaders must adopt a proactive approach to digital transformation. Specifically, we argue that nursing informatics specialists are core to providing a much-needed scaffold for the safe delivery and deployment of healthcare.<sup>40,41</sup>

Areas where the advanced role is well placed to contribute to this include systems design to build strong, evidence-based infrastructure and clinical guidance to support citizen/patient education, research and practice. We suggest for these advanced roles to develop over time, nursing informatics should be a core competency for the nursing profession in the delivery of a safe and trustworthy digital-enabled society.

Exciting opportunities for nurses as context experts to provide insights and knowledge include: the safe diffusion of artificial intelligence and machine learning; systems design; requirements identification; and realising the benefits of technology for a quality-orientated global healthcare service.

## Recommendations

### What should policy makers do?

1. **Support APNs** in establishing roles and advanced levels of practice, identifying and aligning guidelines for employers, organisations and health systems implementing advanced practice nursing.
2. **Carry out more research** into the opportunities of advanced practice nursing, its impact and implementation strategies within countries.

### What should nurse leaders do?

1. **Facilitate Master's-level education.**
2. **Intensively guide the development of educational programmes** specific to APNs (including CNSs and NPs) and support all countries in developing this professional pathway.
3. **Promote transparency**, increase recognition with regulation within country regulatory systems and reduce variation.
4. **Demonstrate how APNs are leading** and improving the quality of care.



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