

# International Council of Nurses

The Role of the Advanced Practice Nurse/Nurse  
Practitioner – The International Perspective

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# Outline of presentation

- Brief overview of ICN
- ICN definition and characteristics of advanced practice and evolution
- Information on status of advanced practice nursing from 2011 global survey
- Sample of country-specific models in advanced practice nursing

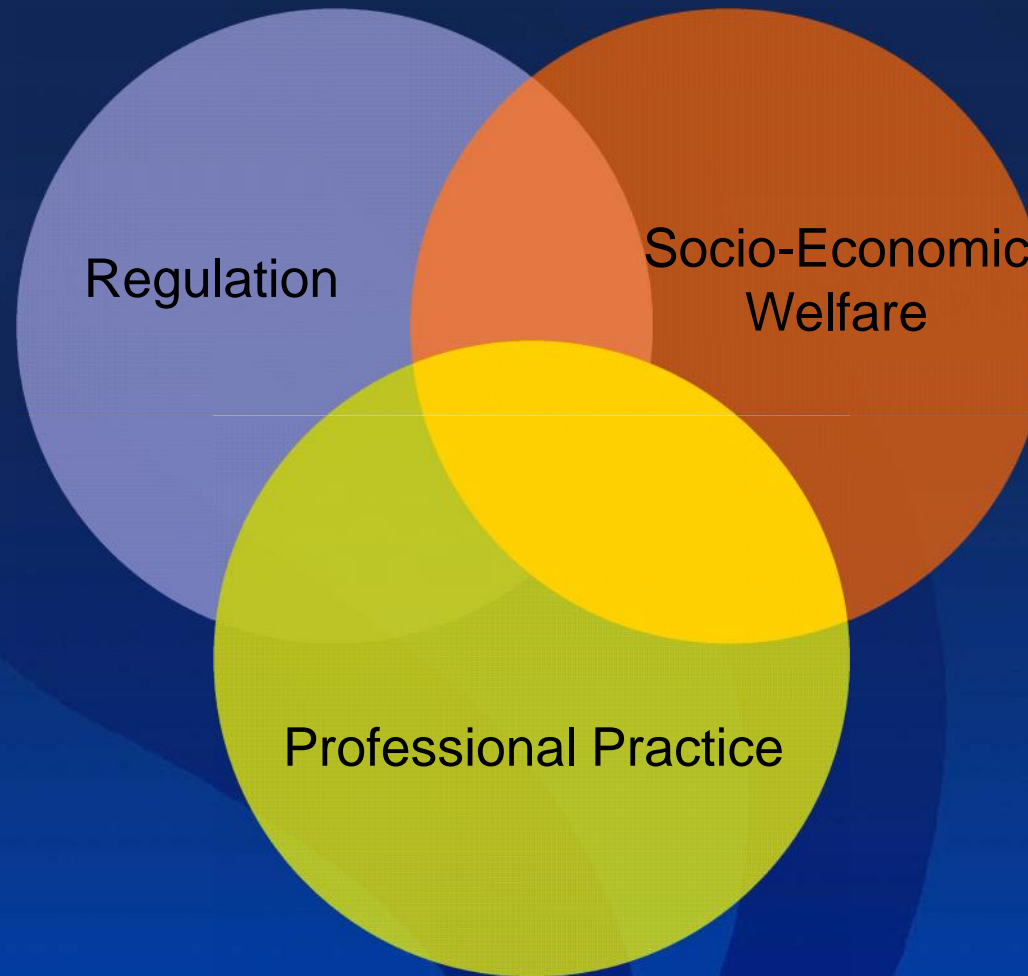


## International Council of Nurses (ICN)

- Federation of over 130 countries representing the more than 16 million nurses in the world.
- Our Mission is to represent nursing worldwide, advancing the profession and influencing health policy.



# The ICN Domains of Activity and Advocacy



# Supports to Advanced Practice Nursing

- Publications - Competencies and Scope of practice APN and Nursing Care Continuum Framework and Competencies
- INP/APN Network - over 2400 members in 91 countries, core steering group and 7 sub-groups
- Network meeting, ICN Conference, Seoul, Korea June 2015
- Network bulletins (2 per year)
- Website - <http://international.aanp.org/>



# Website content

- Policy documents
- Presentations
- Research reports
- Research tools and resources
- Ask a researcher
- Country specific profiles – Canada, Germany, Ireland, UK, Hong Kong, mainland China
- Network forum



# International conference every 2 years

- Website <http://www.icn-inpapn2016.org/>



# Advanced Practice Nursing - Definition, Characteristics (Education, Nature and Scope of Practice) and Evolution





# ICN DEFINITION

## Definition:

- A Nurse Practitioner/Advanced Practice Nurse is a registered nurse who has acquired the expert knowledge base, complex decision-making skills and clinical competencies for expanded practice, the characteristics of which are shaped by the context and/or country in which s/he is credentialed to practice. A master's degree is recommended for entry level.



# Characteristics of Advanced Practice Nursing

## Educational Preparation

- Educational preparation at advanced level
- Formal recognition of educational programs preparing nurse practitioners/advanced nursing practice roles are accredited or approved
- There is a formal system of licensure, registration, certification and credentialing



# Characteristics of Advanced Practice Nursing

## Nature of practice

- Integrates research, education, practice and management
- High degree of professional autonomy and independent practice
- Case management/own case load



# Characteristics of Advanced Practice Nursing

## Nature of practice (Continued)

- Advanced health assessment skills, decision-making skills and diagnostic reasoning skills
- Recognized advanced clinical competencies
- Provision of consultant services to health providers
- Plans, implements & evaluates programs
- Recognized first point of contact for clients



# Characteristics of Advanced Practice Nursing

Regulatory mechanisms – Country specific regulations underpin NP/APN practice

- Officially recognized title(s) for nurses working in advanced practice roles
- Legislation to confer and protect the title
- Legislation or some other form of regulatory mechanism specific to advanced practice nurses



# Characteristics of Advanced Practice Nursing

Regulatory Mechanisms: Scope of practice may include:

- Right to diagnose
- Authority to prescribe medication
- Authority to prescribe treatment
- Authority to refer clients to other professionals
- Authority to admit patients to hospital



# Why regulate advanced practice nursing?

- Gives the public assurance of preparedness (education) and competency to practice at advanced level
- With a broader scope of practice there is a greater degree of risk of harm
- If no title protection, anyone can call themselves an APN - much misuse of title now occurring
- Provides APNs with a defined scope and the legal authority to practice to that broader scope.



# Advanced Practice Nursing Difference

- APN practice builds on the competencies of registered nurses by demonstrating
  - greater depth and breadth of knowledge
  - greater synthesis of data
  - increased complexity of skills and interventions and
  - greater role autonomy





# Why Advanced Practice Nursing?

- Advanced practice roles have developed in response to society's increased need for accessible and equitable health care.
- APNs build nursing knowledge, advance the nursing profession and contribute to sustainable and effective health-care systems.
- The ability of APNs to provide safe, cost-effective, high-quality care is well documented in many studies over the past 30 years including in 2011 systematic review.



# APN Evolution

- APNs have expanded in numbers and capabilities over the past several decades with APNs being highly valued and an integral part of an increasing number of countries' health care systems.
- The evolution by country differs based on the situations in the country (e.g. physician shortages, need for practitioners in rural and remote settings, needs related to access to cost effective care, capacity of the profession to move APN forward, inter-professional dynamics, support from government and others)



# Challenges in moving forward

- Many countries still do not have role or nurses doing parts of role without proper preparation or authority
- Poor role clarification and proliferation of titles
- Varying levels of education for entry, scopes of practice and degree of regulation
- Challenges with recognition within nursing and with other professions
- Scope of practice overlaps with other health professions
- Challenges with legal authorisations and reimbursement systems
- Failure to get ANP into human resources planning



# Strengths in moving forward

- Ever-growing body of evidence
- Interest in innovative healthcare delivery models
- APNs being seen as a means to provide access to care and meet unmet health needs
- Increasingly aware and vocal consumers who want to be involved in health decision making
- Increasingly complex client population (aging, chronic illness) calling for innovative solutions
- Focus of governments on Universal Health Coverage, Sustainable Development Goals and Global Human Resources for Health Strategy



# APN- Stakeholders

- Many stakeholders are involved in advanced practice nursing
  - The individual advanced practice nurse
  - Other members of the profession
  - Professional groups (associations, regulatory bodies, certification agencies and specialty organisations)
  - Educational institutions
  - Employers
  - Governments
  - The public
  - Other health care professions



# Research on Global Models (Education, Regulation and Scope of Practice) of Advanced Practice Nursing and Country-Specific Examples



# 2011 Research on Global Models with Respect to Education, Regulation and Scope of Practice

- Conducted by ICN INP/APN Network
- International on-line survey
- Invitation to ICN member countries
- Heard from 36 countries (more than one response some countries)
- Overall results – Continued wide variation of APN scope of practice, education requirements, regulation worldwide





# Countries Represented in the APN Survey (36)

- Angola
- Australia
- Austria
- Bahamas
- Bolivia
- Botswana
- Bulgaria
- Canada
- Congo, Democratic Republic of
- Finland
- France
- Gambia, The
- Greece
- Iran, Islamic Republic of
- Ireland, Republic of
- Italy
- Japan
- Lebanon
- Malaysia
- Mongolia
- Netherlands
- New Zealand
- Poland
- Sierra Leone
- Singapore
- Spain
- Sri Lanka
- Suriname
- Switzerland
- Taiwan
- Tanzania
- Thailand
- Togo
- Trinidad and Tobago
- United Kingdom
- United States







# APNs Identified

- Nurse Practitioner: 16 countries
- APN: 12 countries
- Clinical Nurse Specialist: 18 countries
- Nurse Specialist: 15 countries
- Nurse Midwife: 2 countries
- Nurse Anesthetist: 2 countries
- Clinical Nurse Consultant: 1 country
- No APN role: 4 countries



# Results - Education

- Education
  - 42 of the 52 responses identified there was a minimum level of education required –
  - 25 required Masters preparation
- Educational requirements ranged from:
  - post basic certificate (non-academic)
  - baccalaureate
  - masters
  - post masters certificate
  - doctorate



# Regulation Results

- Number who have regulation of role out of number who responded
- Nurse Practitioners - 8 out of 15
- Advanced Practice Nurses - 5 out of 11
- Clinical Nurse Specialist - 4 out of 14
- Nurse Specialists - 6 out of 10
- Nurse midwives 2 out of 2
- Clinical Nurse Consultant = 0 out of 1



# Practice Requirements and Credentialing Mechanisms

- Title protection - 19 out of 49
- Licensing exam - 20 out of 49 (4 indicated varied by jurisdiction)
- Of the credentialing mechanisms required, an approved education program was the most commonly cited



# Scope of Practice Results

- Scope of Practice (47 responses) – Number indicated that was within APN scope of practice
  - Diagnosing - (30) – 64%
  - Prescribing - (18) – 38%
  - Ordering diagnostic tests –(20) – 43%
  - Admitting to hospital – (16 ) – 34%
  - Referring to other health care providers - (31) – 66%



# Regulatory Models for Advanced Practice Globally

- Multiple models exist
- A continuum from
  - no regulation beyond that of the generalist nurse; to
  - certification but not regulation; to
  - regulation of some advanced practice roles such as Nurse Practitioner but not others such as CNSs; to
  - regulating all advanced practice roles; to
  - having only one title and role - advanced practice nurse and regulation of that title and role





# Models - Singapore

- Advanced Practice Nurse (APN) – Protected Title
- Must be Registered Nurse with Nursing Board
- Complete a clinically focused approved Masters
- Complete a minimum of 1 year internship in APN role after graduation
- Required minimum number of practice hours and continuing education (30 hours with at least 15 related to ANP) each year





# Models – Taiwan, Thailand

- **Taiwan**
- Nurse practitioner – title protection since 2000; defined scope of practice; amended in 2012 to include prescriptive authority
- NP after one year hospital course – Baccalaureate or Master's not required.
- **Thailand**
- Over 1000 NPs but most baccalaureate educated with additional 4 month NP course
- Being required to upgrade to Master's level



# Models- UK and Ireland

- **UK**
- Titles used Nurse Practitioner and Advanced Nurse Practitioner
- No separate regulation, scope not defined in legislation and title not protected
- Other groups (e.g. RCN) attempting to address – competencies, programme accreditation
- **Ireland**
- Legislation passed in 2010 to create separate register
- Titles - Registered Advanced Nurse Practitioner/  
Registered Advanced Midwife Practitioner



## Models - Canada

- Two roles – clinical nurse specialist and nurse practitioner
- Requirements CNS
  - Current RN licence
  - Title not protected
  - Requirements are similar to the RN

### Requirements NP

- Current RN licence
- Title protected
- Graduation from an approved NP program
- Practice hours
- Licensing exam



# Models – Australia and New Zealand

- **Australia**
- First NP endorsed/authorised in 2000
- Was previously state-based regulation but since 2010 - national license
- Have CNSs but not regulated separately
- **New Zealand**
- NP regulated – CNS not regulated



# Models - USA

- Have had advanced practice for over 40 years
- Close to 340,000 Advanced Practice Nurses
- State-based regulation - Aiming toward Consensus Model for APRN Regulation, Licensure, Accreditation, Certification and Education
- APRN – 4 roles –NP, CNS, Nurse Anaesthetist, Nurse Midwife



# Conclusion

- Advanced practice is moving forward globally but with great diversity
- Nursing Associations need to keep momentum up and work as partners with nursing councils, educational institutions, practice settings, governments and the public to ensure quality education, regulation and practice for advanced practice nursing.

