

The Role of Advanced Practices Nursing in Patient Care

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The role of advanced practice nurses (APNs) with post baccalaureate graduate education in providing high quality patient care is increasingly recognized around the world. In the context of an aging population, technological advances, and highly specialized patient care, it is vital for nurses to be prepared for an advanced role with greater scope of practice and complexity.

In many countries, the role of advanced practice nursing is well established while in others it is still developing. While some countries have adopted the American model of APN, other countries have developed its own path in establishing the role of advanced practice nursing based on specific legislative and local requirements.

This presentation will allow an audience to take a brief glance at the author's personal journey into the role of a Neonatal Nurse Practitioner and learn about:

- APN background
- APN educational preparation and educational requirements for APN in different countries
- APN scope of practice
- APN specialties
- Comparison of the APN role in different countries
- Comparison of the care provided by APNs and physicians
- Future of APN.

Background: Advanced registered nurse practice is a word used to include certified nurse-midwife (CNM), certified registered nurse anesthetist (CRNA), clinical nurse specialist (CNS), and nurse practitioner (NP). Advanced practice nursing is generally characterized as nursing activities that affect health care outcomes, including the direct care of individual patients, the management of individuals and communities.

The CNS is an expert clinician within a specialized nursing practice area. The specialty may be a population (for example, pediatrics), a environment (for example, critical care), a condition (for example, medical or mental health), or a form of issue (for example, wound or pain). CNSs are engaged in direct clinical practice; act as consultants in their field of expertise; provide expert coaching and guidance; interpret, evaluate and participate in research; provide clinical.

NPs are registered nurses who are prepared to provide a wide range of preventive and acute health care services to individuals of all ages, through advanced education and clinical training. NPs take health history and provide complete physical examinations; diagnose and treat

many common acute and chronic problems; interpret laboratory results and x-rays; prescribe and manage medicines and other therapies; provide health education and counseling with emphasis on disease prevention and maintenance; and refer patients as needed to other health professionals.

A selected sample of APNs and quality and safety research was conducted because much of the APN research lacked randomization, had sample sizes too small to be generalizable to the national health care system, or had no relevance to quality or safety. The summary of the preceding research samples suggests that the care provided by APN* is at least equivalent, across settings, to that provided by the physician in terms of safety and quality. In the case of CNSs, it appears that as case managers for patients transitioning from intensive care to home care, CNSs show expertise and cost savings.

However, the designs of the study and the sample sizes are too limited to draw conclusions generalizable for the population of the United States. Widely recognized statistical methods and analysis best practices as outlined in the Agency for Healthcare Research and Quality's study, Evidence Assessment to Test the Strength of Scientific Evidence, have not been applied to new APN practice and quality research. Methodological quality was characterized as the degree to which all aspects of design and conduct of a study can be demonstrated to protect against systematic bias, non-systemic bias and inferential error.

Many design elements in the previous APN study design, conduct or review which have been shown by empirical work to protect against bias or which are long-accepted procedures in epidemiology and related fields of science. These criteria for evaluating research include quality, quantity, and consistency, which are well-established variables to characterize how confidently one can conclude that a body of knowledge provides information on which clinicians or policy makers can act. As APN and quality research evolves over time, it will improve the rigor of the research and its ability to influence policy.

The growing demand for healthcare services on all levels is putting tremendous pressure on healthcare systems throughout the world. Escalating demands coupled with a shortage of General Practitioners have prompted governments in many countries to reevaluate the allocation of job tasks and areas of responsibility between various healthcare workers. Registered nurses' roles and scope of practice in many countries have been expanded, and the quality and costeffectiveness of healthcare systems have improved.

The patient-related effects include advanced APN treatments that influence attitudes, desires or awareness of patients. In one emergency care research patients reported higher rates of APN treatment satisfaction relative to GP treatment. Nonetheless, there were no variations between those two classes about symptoms, recovery periods or unplanned follow-up. Clear evidence was found in a meta-analysis of 75 studies that patient outcomes are comparable for NPs and GPs in

terms of functional status, blood glucose, blood pressure, emergency room visits, hospitalization and mortality.

APN treatment has contributed to substantial changes in the quality of life (emotional and cognitive functioning) and a reduction in anxiety ratings in a longitudinal study evaluating the effects of palliative care. In a randomized controlled trial of clinical nurse specialist (CNS) administered care for high-risk women in childbearing, patients had fewer re-hospitalizations, infants with low birth weight were less likely to be given birth, and care costs were lower.

The performance-related results measure the effect of APN interventions on quality of care, interpersonal skills, technical quality, documentation completeness and comprehensiveness of clinical examination. A

Cochrane review of the substitution of GPs with primary care nurses concluded that adequately trained nurses are capable of providing patients with equally high quality care and good health outcomes.¹⁹ APN clinical outcomes, care processes, service utilization and costeffectiveness were found to be equivalent to or superior to GP care.

Well-educated APNs that have master's clinical education and extensive work-experience, embrace a holistic and person-centered perspective and develop a trusting relationship with patients form the basis of APN. However, successful implementation of APN requires political organizational and managerial support, ongoing evaluation and good cooperation between colleagues, particularly with regard to cooperation between APN and GP.