

EDITORIAL

When we talk about Advanced Practice Nursing, are we talking about the same thing?

¿Cuándo hablamos de enfermería de práctica avanzada, hablamos de lo mismo?

Quando falamos em enfermagem de prática avançada, estamos falando da mesma coisa?

Roberto Galao-Malo^{1*}

 <https://orcid.org/0009-0000-6274-6957>

1. Doctor of Nursing Practice, Mount Sinai Hospital: New York, New York, USA

Autor para correspondencia: roberto.galao-malo@mountsinai.org

Received: 01/04/2024

Accepted: 17/04/2024

Advanced Practice Nursing

Interest in Advanced Practice Nursing (APN) continues to grow at the same pace as the confusion surrounding the concept. The International Council of Nurses (ICN) recognized this situation and in 2020 launched the “Advanced Practice Nursing Guidelines” ⁽¹⁾. Far from clarifying it, a quick analysis of the constructs discussed shows the incompatibility of some of them with each other, existing some logical flaws. For example, the term “advanced” is not explained, but is included in the definitions, making them circular definitions.

The ICN Guidelines, incidentally, are a reflection of different understandings of APN around the world.

The ICN text is not alone in highlighting this confusion. The Pan American Health Organization's document on expanded roles in nursing includes Nurse Case Managers (RN case manager), but not Clinical Nurse Specialists. It also refers to Advanced Practice Nurses as if it were a synonymous of the role known in the United States (US) as "Nurse Practitioner" ⁽²⁾. In a recent document issued by the World Health Organization/Europe, CNMs were not included in the APN, but UK Nurse Consultants were included ⁽³⁾.

Attempting to classify these currents could help to understand this trend. In a very simplified way, there are currently two approaches to APN at a global level: One defines it as an umbrella term, and the other at the practice level. The USA is the country that, par excellence, uses the umbrella concept. Throughout the evolution of nursing in the USA, four roles were developed, characterized by the incorporation of expanded clinical competencies. These roles emerged in response to population health problems or in response to problems in the health care system, and include Nurse Practitioners, Clinical Nurse Specialists, Nurse Anesthetists, and Nurse Midwives.

Around the 1980s, it was proposed to incorporate these roles within a single concept, to give consistency to academic curricula and strengthen joint interests in opposition to the legislators. The name chosen was APN, which had already been in use since the 1950s in the context of specialization. The debate ended in 2008 with the approval of the "Consensus Model", which describes the minimum educational and regulatory characteristics common to these four roles ⁽⁴⁾.

As an umbrella concept, APN is understood as a regulatory term, not as a person or role per se.

Additionally, in the 1990s in the United Kingdom, the idea that the APN should incorporate other figures within nursing who were considered to have a higher level of practice, either because they advised general nurses on complex cases or because they participated in quality improvement projects ⁽⁵⁾ began to emerge. Some authors from Australia enlarged this view and developed a self-assessment questionnaire by means of which a nurse could achieve an "advanced" level when



his/her score was above a certain number ⁽⁶⁾. This line of thought has probably influenced several authors to speak of a fifth role: the APN role. This “APN role” remains undefined, and one might even question whether it really exists.

Beyond the dialectical debate, this situation generates practical problems. It is creating the misperception that outcomes associated with specific roles, such as those developed by Nurse Practitioners, can be extended to other roles simply because they are associated with the “advanced” concept. It can also cause uncertainty among social and political actors when trying to get their support to implement some role within the APN, particularly when it must be explained that an APN nurse ranges from one who has passed a survey to one with a doctoral degree.

Accordingly, countries interested in the APN could consider some principles. First, they should conduct an extensive study of the health problems of their population and their healthcare system and, second, an assessment should be made of what vision of the APNs and what specific role it can play to better respond to these challenges. Attempting to develop “APN” as a primary objective in itself is doomed to failure. The APN should not be seen as the solution to all ills afflicting healthcare systems or nursing as a profession. Nor should it be a distracting diversion from the struggle to continue to increase the number of “general” nurses and improve their working conditions. In any case, the nursing community must ask itself whether when we talk about APN we are talking about the same thing, since this state of confusion continues to weaken our discourse.

References

1. Consejo Internacional de Enfermería (CIE). Directrices de enfermería de práctica avanzada [Internet]. Ginebra; 2020 [cited 22 mar 2024]. Available at: https://www.icn.ch/system/files/documents/2020-04/ICN_APN%20Report_ES_WEB.pdf
2. Pan American Health Organization (PAHO). Expanding the roles of nurses in primary health care [Internet]. Washington, D.C.; 2018 [cited 22 mar 2024]. Available at: https://iris.paho.org/bitstream/handle/10665.2/34958/9789275120033_eng.pdf?sequence=6&isAllowed=y.
3. World Health Organization Regional Office for Europe. Technical brief on strengthening the nursing and midwifery workforce to improve health outcomes: what is known about advancing



- roles for nurses: evidence and lessons for implementation. [Internet]. WHO Regional Office for Europe; 2023 [cited 22 mar 2024]. Available at: <https://iris.who.int/handle/10665/373780>
4. National Council of State Boards of Nursing. Consensus model for APRN regulation: licensure, accreditation, certification & education [Internet]. 2008 [cited 22 mar 2024]. Available at: https://www.ncsbn.org/public-files/Consensus_Model_for_APRN_Regulation_July_2008.pdf
 5. Manley K. A conceptual framework for advanced practice: An action research project operationalizing an advanced practitioner/consultant nurse role. JCN [Internet]. 1997 [cited 22 mar 2024];6(3):179-190. Available at: <https://doi.org/10.1111/j.1365-2702.1997.tb00303.x>
 6. Chang AM, Gardner GE, Duffield C, Ramis MA. A Delphi study to validate an advanced practice nursing tool. JAN [Internet]. 2010 [cited 22 mar 2024];66(10):2320-2330. Available at: <https://doi.org/10.1111/j.1365-2648.2010.05367.x>

How to cite this article: Galao-Malo R, ¿Cuándo hablamos de enfermería de práctica avanzada, hablamos de lo mismo?. SANUS [Internet]. 2024 [citado dd mmm aaaa];9(20):e528. Available at: DOI/URL

