IMPLEMENTING THE APRN CONSENSUS MODEL : LACE

AACN Spring Annual Meeting

March 16, 2013

Washington, DC

Joan Stanley, PhD, CRNP, FAAN, FAANP

Senior Director of Education Policy

American Association *of* Colleges *of* Nursing
ADVANCING HIGHER EDUCATION IN NURSING

Objective:
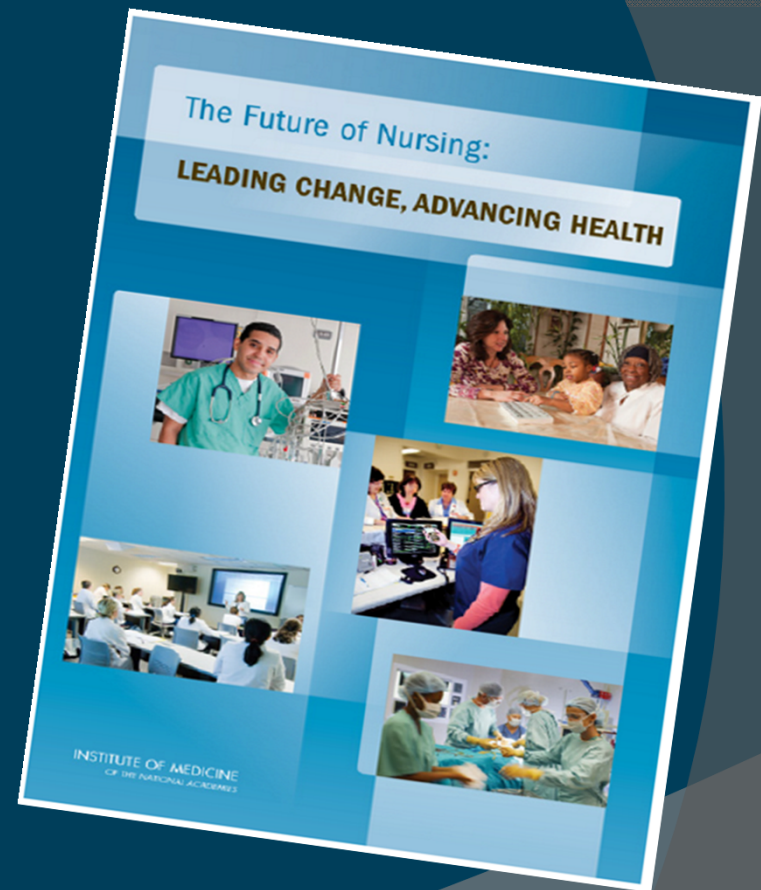
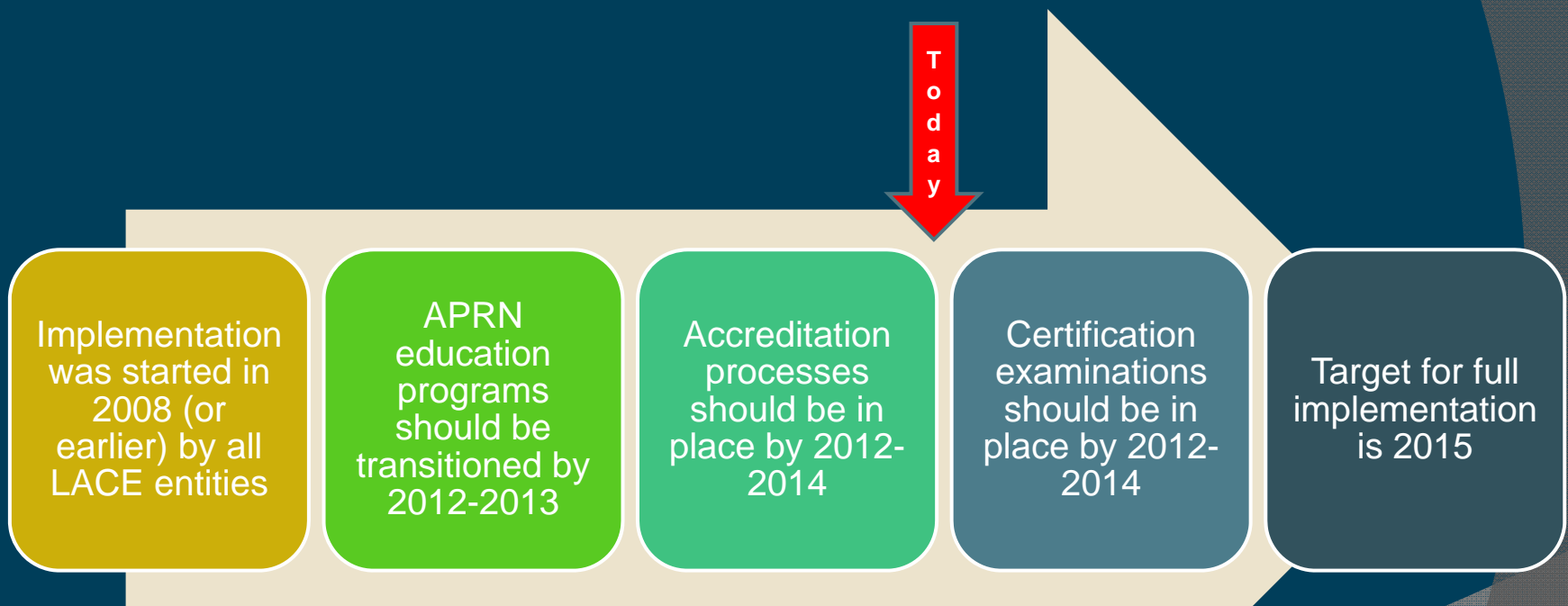- Identify components of the Consensus Model with which APRN programs are expected to comply.

IOM *The Future of Nursing* (2010)

Key Messages :

◉ Nurses should practice to full extent of their education and training

◉ Nurses should be full partners with physicians and other HPs in redesigning HC in U.S.

◉ Remove scope of practice barriers for APRNs

◉ Expand opportunities for nurses to lead improvement efforts.

◉ Double the number of nurses with a doctorate by 2020

The Future of Nursing:
LEADING CHANGE, ADVANCING HEALTH

INSTITUTE OF MEDICINE
OF THE NATIONAL ACADEMIES

Timeline for Sequential Implementation of *Model*

Today

| Implementation was started in 2008 (or earlier) by all LACE entities | APRN education programs should be transitioned by 2012-2013 | Accreditation processes should be in place by 2012-2014 | Certification examinations should be in place by 2012-2014 | Target for full implementation is 2015 |

Implementation of *LACE Network*

- In August 2010, MOU was signed by 28 organizations who agreed to support the implementation of LACE electronic network

- Currently, 28 organizations are supporting and participating in LACE electronic network (27 original + 1 new)
  - Ensure transparent and ongoing communication among LACE entities
  - Provide a platform for the ongoing work
  - LACE not a formal, separate organization

American Association *of* Colleges *of* Nursing
ADVANCING HIGHER EDUCATION IN NURSING

LACE Network

Topics	Started By	Views	Posts	Latest
Public Information *This area is used for publishing information to the site public page.*				
General Information Related to APRN Regulation	Joan Stanley1	203	1	05/17/11 1:46 PM
Information for NP Education Programs	Joan Stanley1	124	1	05/13/11 8:19 AM
List of LACE Organizations	Joan Stanley1	154	1	05/23/11 11:28 AM
NACNS Education Standards open for Public Comment	Kelly Goudreau1	33	1	06/01/11 9:09 AM
NCSBN Campaign for APRN Consensus	Joan Stanley1	75	1	05/04/11 12:58 PM
NP AND CNS Certification Rulemaking Guide	LACE Network1	13	1	08/26/11 12:07 PM
Recommendations on Psych/MH APRN Implementation	Joan Stanley1	66	1	05/04/11 12:04 PM
The APRN-LACE Network	Joan Stanley1	305	1	03/07/11 2:40 PM

All times are displayed in your local time (Pacific)

www.APRNLACE.org

APRN REGULATORY MODEL

APRN SPECIALTIES
- ⊙ Focus of practice beyond role and population focus
- ⊙ Linked to health care needs
- ⊙ *Examples include but are not limited to: Oncology, Older Adults, Orthopedics, Nephrology, Palliative Care, Pain management*

⬆

Licensure occurs at Levels of Role & Population Foci

POPULATION FOCI

(Family/Individual Across Lifespan) (Adult-Gerontology) (Neonatal) (Pediatrics) (Women's Health/Gender - Related) (Psychiatric-Mental Health)

⬆ ⬆ ⬆ ⬆ ⬆ ⬆ ⬆

APRN ROLES

(**Nurse Anesthetist**) (**Nurse-Midwife**) (**Clinical Nurse Specialist**) (**Nurse Practitioner**)

*

APRN REGULATORY MODEL

APRN SPECIALTIES

- ⊙ Focus of practice beyond role and population focus
- ⊙ Linked to health care needs
- ⊙ *Examples include but are not limited to: Oncology, Older Adults, Orthopedics, Nephrology, Palliative Care, Pain management*

⬆

POPULATION FOCI

Family/Individual Across Lifespan **Adult-Gerontology** **Neonatal** **Pediatrics** **Women's Health/Gender-Related** **Psychiatric-Mental Health**

⬆ ⬆ ⬆ ⬆ ⬆ ⬆ ⬆

APRN ROLES

Nurse Anesthetist Nurse-Midwife Clinical Nurse Specialist Nurse Practitioner *

Licensure occurs at Levels of Role & Population Foci

APRN REGULATORY MODEL

APRN SPECIALTIES
- Focus of practice beyond role and population focus
- Linked to health care needs
- *Examples include but are not limited to: Oncology, Older Adults, Orthopedics, Nephrology, Palliative Care, Pain management*

POPULATION FOCI

| Family/Individual Across Lifespan | Adult-Gerontology | Neonatal | Pediatrics | Women's Health/Gender-Related | Psychiatric-Mental Health |

Licensure occurs at Levels of Role & Population Foci

APRN ROLES

| Nurse Anesthetist | Nurse-Midwife | Clinical Nurse Specialist | Nurse Practitioner * |

Implications of *CM* for Education Programs

- Timeline for education programs to transition continues to be 2012-2013!

- Ensure that graduates are eligible for national certification/licensure

- All **new** APRN programs/tracks must be pre-accredited/pre-approved prior to admitting students

- All post-graduate certificate APRN programs will need to be accredited by 2015

Number of Master's Programs in Adult and Gerontology

Source: AACN IDS 2013 ; Data is result of an agreement between AACN - NACNS and AACN - NONPF

	# Programs	Enrollments
	2012	2012
Adult Health CNS	92	1,128
Acute-Critical Care CNS- Adult	33	461
Gero CNS	20	95
Adult Gerontology CNS	16	185
Adult NP	123	4,604
Gerontology NP	29	173
Adult Acute Care NP	61	2,494
Adult Gero Primary Care NP	62	2,456
Adult Gero Acute Care NP	24	929
Adult Psychiatric NP	49	889

# No National Certification Examination in Declared Specialty Available - MSN Programs in 2012

Specialty Area	Number of Programs	Enrollments	Graduations
Parent/Child CNS	3	7	8
Rehabilitation CNS	2	0	1
Women's Health CNS	2	51	11
Family Health CNS	2	14	5
Perioperative CNS	1	8	4
Forensic CNS	1	16	8
Perinatal	2	15	4
Totals:	13	111	41

Building a Curriculum

Competencies

Professional Certification
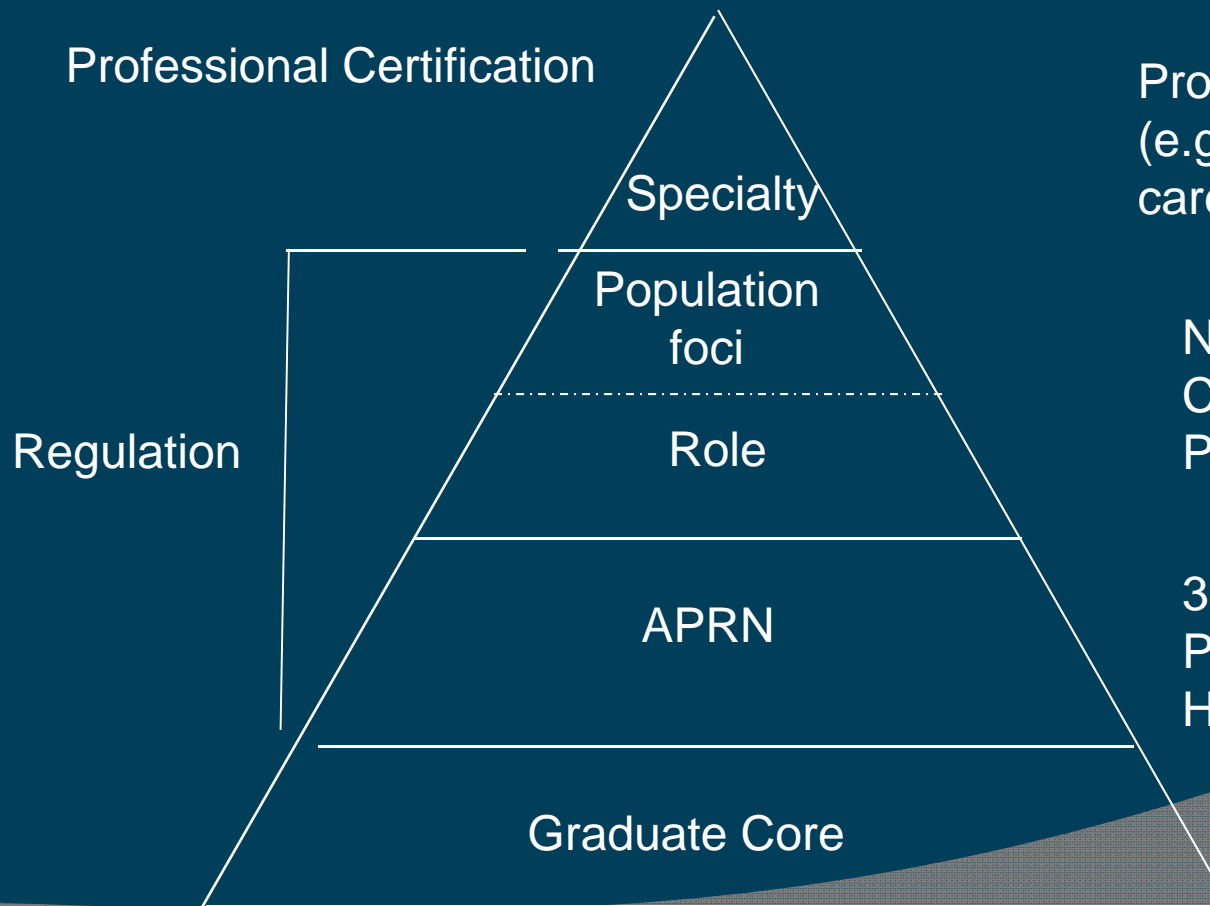
Professional Organizations (e.g. oncology, palliative care, nephrology)

Specialty

Population foci

NP, CRNA, CNM CNS
Core competencies in
Population context

Regulation

Role

APRN

3 Ps (Advanced Pathophys, Pharmacology, Health Assessment)

Graduate Core
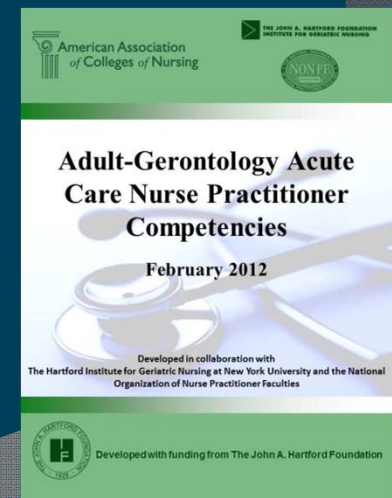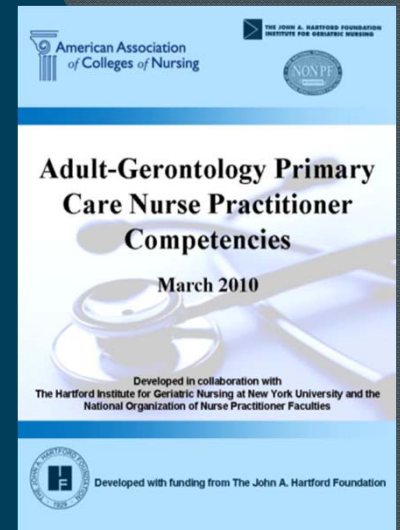
2011 AACN
Master's or 2006
DNP Essentials

Adult/Gerontology NP Competencies

- Adult-Gerontology Primary Care NP Competencies (2011)

- Adult-Gerontology Acute Care NP Competencies (2012)

- Adult-gerontology Clinical Nurse Specialist Competencies (2011)

http://www.aacn.nche.edu/geriatric-nursing/competencies

Implementation Issues for Education

- Clarification of APRN Core (3 P's)
- Official Transcript
- Age parameters
- Clinical experiences in curriculum
- Preparation of CNSs from wellness to acute care
- Inclusion of wellness in all APRN curricula
- Enhancing content related to care of older adults in all APRN curricula

APRN Core

- 3 P's (separate graduate-level courses)
  - Advanced physiology/pathophysiology, including general principles *that apply across the lifespan; (lifespan is defined as prenatal through old age including death).*

  - Advanced health assessment, which includes *all systems and advanced techniques.*

  - Advanced pharmacology, which includes …. *all broad categories of agents*- not solely for population

Specific competencies delineated in 1996 *Master's Essentials* & 2006 *DNP Essentials* (www.aacn.nche.edu/education-resources/essential-series)

Transcript

- CM states that the transcript or official document must state the *role and population of program* from which student graduated.

Example: Adult-Gerontology CNS

Neonatal CNS

Pediatric CNS

Age Parameter for Populations

- Intent of CM is not to be prescriptive or restrictive
- Age Parameter statement posted on the LACE site
- *…"rigid establishment of population age parameters is not in the best interest of patients. The definition of a population identified by specific age ranges may create barriers and limit access to care for patients with specific needs or health conditions. Circumstances exist in which a patient, by virtue of age, could fall outside the traditionally defined population focus of an APRN but, by virtue of special need, is best served by that APRN. Such patients may be identified as non-traditional patients for that APRN. In these circumstances, the APRN may manage the patient or provide expert consultation to assure the provision of evidence-based care to these patients."*

All APRNs & Preparation to Care for Older Adults

- CM states that all APRNs in any of the 4 roles providing care to the adult population, e.g. family or women's health, must be prepared to meet the growing needs of the older adult population

- Recommended Competencies for Older Adult care for Non- Adult-Gerontology CNSs
  - WH and Across the Lifespan CNSs

http://www.aacn.nche.edu/education-resources/competencies-older-adults

American Association *of* Colleges *of* Nursing
ADVANCING HIGHER EDUCATION IN NURSING

Incorporation of Wellness in All APRN Curricula

"All APRNs are educationally prepared to provide scope of services across health wellness-illness continuum… however emphasis and implementation within each role varies." (CM p. 10)

- Requires review and enhancement of national core competencies for roles and population foci
- Evaluation of curricula
- Enhancement of certification examinations
- **CNS educated and assessed across the continuum from wellness through acute care**
- New A-G CNS competencies reflect this scope and breadth of preparation

Facilitating Transition to the Adult-Gerontology APRN Curriculum

- APRN Resource Center funded by JAHF
  - Teaching resources developed and compiled
  - Archived webinars
  - Curricular exemplars
  - Content slides
  - Speakers/Consultant Bureau
  - Case studies
  - Assessment items New

    http://consultgerirn.org/aprncenter

American Association *of* Colleges *of* Nursing
ADVANCING HIGHER EDUCATION IN NURSING

Acute & Primary Care NP

Consensus Model states*: The CNP is prepared with the acute care NP competencies and/or the primary care NP competencies. This applies only to the pediatric and adult-gerontology CNP.*

Programs may prepare individuals across both the primary care or acute care; however, then individuals must be prepared with consensus based competencies for both roles and obtain certification in both.

NONPF is developing a statement for employers of NPs clarifying the intent of the CM.

For additional information or questions:
http://www.aacn.nche.edu

jstanley@aacn.nche.edu