

Scope of Practice for Advanced Practice Registered Nurses in Emergency Care

Introduction and Background

The Institute of Medicine¹ recommends that all nurses practice to the fullest extent of their education and training and that State scopes of practice for advanced practice registered nurses (APRN) support this expanded practice. The role of the APRN in emergency care continues to expand and evolve, and APRNs are assuming more responsibility providing health care. For the continued advancement of APRNs in emergency care, the natural evolution, promoted by professional and societal forces, is to clarify the scope of practice for APRNs in emergency care.

There are two types of scopes of practice: legal and professional. A legal scope of practice, delineated by each State Board of Nursing, defines the legal boundaries of practice and the activities that are allowable by the profession being regulated. The professional scope of practice is written by professional nursing organizations to articulate the activities expected of nurses within the discipline of nursing and specialty.²

The purpose of this scope of practice document for APRNs in emergency care is to:

- 1) define advanced practice registered nurse;
- 2) delineate the roles of APRNs (e.g., clinical nurse specialists and nurse practitioners in emergency care);
- 3) describe the educational preparation of APRNs in emergency care;
- 4) delineate the scope of practice for APRNs in emergency care and endorse the National Council of State Boards of Nursing *Consensus Model for APRN Regulation*³ as the basis for APRN regulation in emergency care; and
- 5) discuss the regulation, accountability and responsibilities of APRNs.

Definition and Roles

APRNs are registered nurses who are educated at the master's or doctoral level with a clinical focus. APRNs possess specialized knowledge, expanded skills and model behaviors.⁴⁻⁶ There are four advanced practice roles: clinical nurse specialist (CNS), nurse practitioner (NP), certified nurse midwife (CNM), and certified registered nurse anesthetist (CRNA).³ A central competency among the four advanced practice roles is that all APRNs must have a direct clinical practice of individuals.^{3,7}

NPs are licensed independent practitioners and therefore practice autonomously and in collaboration with health care professionals and other individuals to assess, diagnose, treat and manage the patient's health problems or needs. They serve as health care researchers, interdisciplinary consultants and patient advocates.⁸ The Emergency Nurses Association (ENA, 2008) defined the scope of practice for nurse practitioners in emergency care.⁹

CNSs focus on the provision of advanced practice nursing care to manage complex and vulnerable populations, educate and support interdisciplinary staff, and facilitate change and innovation in health

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care systems.¹⁰ CNSs practice autonomously and in collaboration with health care professionals to assess, diagnose, treat, and manage the patient's and family's health needs.¹¹ As experts in the synthesis, integration, transformation and translation of best practices, the CNS facilitates bridging the gap between research and practice.¹²

Educational Preparation

The educational preparation for APRNs in emergency care requires graduate education at the Master's, post-Master's or doctoral levels. The educational program should adhere to the educational curriculum standards set forth by the American Association of Colleges of Nursing and other regulatory agencies responsible for advanced practice educational programs. The APRN in emergency care is educated to care for families/individuals across the lifespan and as either a nurse practitioner and/or clinical nurse specialist.

In addition to graduate course completion, APRNs wishing to specialize in emergency care must obtain educational preparation related to emergency care and may do so through various pathways including: 1) successful academic course completion specific to emergency care; 2) continuing education course completion; and/or 3) on-the-job instruction in emergency care.

Scope of Practice

The CNS and NP acquire advanced clinical knowledge and skills preparing him/her to provide direct and indirect care to patients.³ APRN practice builds on the competencies of registered nurses by demonstrating a greater depth and breadth of knowledge, a greater synthesis of data, increased complexity of skills and interventions, and greater role autonomy. The CNS and NP are educationally prepared to assume responsibility and accountability for health promotion and/or maintenance as well as the assessment, diagnosis and management of acute episodic and acute exacerbation of chronic issues, which includes the ordering, prescribing and dispensing of pharmacologic and non-pharmacologic interventions. APRNs engage in activities of education, advocacy, consulting, quality improvement, research and leadership in their professional roles.

The scope of practice for APRNs is further shaped by regulatory provisions for practice and promotes inclusion of a variety of advanced practice roles that are present in a country or locale.¹³ The scope of practice of APRNs in emergency care is grounded in the core values and scope of practice for the generalist nurse. APRNs adhere to the American Nurses Association's *Nursing Social Policy Statement*,⁴ *Nursing Scope and Standards of Practice*,¹⁴ and the *Code of Ethics for Nurses*.¹⁵ APRNs in emergency care also adhere to the ENA *Code of Ethics*¹⁶ and the ENA *Scope and Standards of Practice*,¹² and possess the core knowledge and skills of emergency nurses as described in the *Emergency Nursing Core Curriculum*¹⁷ and *Emergency Nursing Procedures*.¹⁸

The National Association of Clinical Nurse Specialists (NACNS) Statement on Practice and Education delineates the general core values and scope of practice for all CNSs regardless of specialty or practice setting.¹⁹ The American Academy of Nurse Practitioners, American College of Nurse Practitioners, and

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the National Organization of Nurse Practitioner Faculties describe the general core values and scope of practice for NPs regardless of specialty or practice setting.²⁰⁻²²

Specific Population

NPs and CNSs work in emergency care settings. These APRNs address the needs of individuals across the lifespan (e.g., patients, family members); staff and interdisciplinary colleagues; and communities. APRNs in emergency care practice in a variety of primary, acute, tertiary and community settings including, but not limited to, emergency departments, ambulatory clinics, pre-hospital settings, prisons and schools.

APRNs in emergency care practice from the perspective that all patients are assumed to have a life-threatening condition, until proven otherwise, irrespective of the initial chief complaint or reason for seeking care. This perspective is unique to and dictates how health care is provided in emergency care. Domains of advanced practice nursing in emergency care include critical care, urgent care, primary care, behavioral medicine, public health and social medicine.²³

Regulation, Accountability and Responsibility

Regulation

The titles of *Nurse Practitioner* and *Clinical Nurse Specialist* are or should be protected titles by legislation or regulation under the umbrella term of *Advanced Practice Registered Nurse*. Each State Board of Nursing determines the regulation and legal scope of practice of APRNs. ENA endorses the *Consensus Model for APRN Regulation*³ as the recommended basis of regulation and APRN scope of practice across the United States.

Accountability

APRNs are accountable for the care they provide to patients and must provide competent, safe and quality care to individuals and communities. This accountability requires certification, periodic peer review, clinical outcome evaluations, a code for ethical practice, evidence of continuing professional development and maintenance of clinical skills.²⁰ In addition, APRNs are eligible for reimbursement for their services based on regulatory agency laws and policies.

Responsibility

The role of the APRN continues to grow and evolve in response to society's health care needs and demands. In addition to serving as providers of care, APRNs act as educators, researchers and leaders. APRNs in leadership capacities are responsible for ensuring that professional standards are constantly maintained via professional association involvement and through active participation in public health policy initiatives at all branches of government and internationally.

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Approved by the ENA Board of Directors: December 2010.

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