

Defining np scope of practice nursing essay



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This original research was conducted in a large teaching hospital in the North West of England that examined ward-based Advanced Nurse Practitioners (ANPs) and aimed to clarify their roles and expectations in patient care and how they impact the clinical practice.

Study participants (which consist of five ANPs, 14 ward-based nurses, and five patients) were observed and invited to participate in interviews. The roles and skills of ANPs were observed and gathered from the interviews. ANPs were described as pivotal in the management of patient care and served as an invaluable link between the medical and nursing team. They frequently translated medical information for nurses, patients and other allied healthcare professional to make sure that the plan of care was well understood and provide further explanations if necessary. ANPs were observed to be confident practitioners, good information resource and by using their technical knowledge and skills served as a role model to support the nurses and junior doctors to enable them to be more efficient in providing care. In addition, ANPs were found to be less intimidating than doctors and more approachable in resolving care issues. Meanwhile, ANPs were faced with a number of challenges and have to overcome skepticism from other health professionals who have different views on the ANP role expectation and scope of practice. ANPs perceived that their education had not adequately prepared them for their clinical role.

ANPs have great impact in nursing practice and patient care. Although the study strives to clarify the role of the ANPs, the findings regarding the role of ANPs are not clearly defined and lack consistency that may lead to role conflict and overload.

Running Head: How are acute care nurse practitioners enacting their roles in healthcare teams? A descriptive multiple-case study

This multiple-case study conducted in two-university affiliated teachings hospitals in Quebec, Canada aimed to understand how cardiology acute Care nurse practitioners (ACNPs) enacted their roles in healthcare teams. Data were collected from interviews, field notes, documents and time and motion study of NP activities. The work activity pace was faster before noon due to patient care demands. Participants in one hospital believed that NP role was not an integrated role of medical and nursing components but an expanded role because they assumed more expanded nursing role components than the medical role. In addition, NPs needed to consult with physicians for patient care decision making that were within their scope of practice. They did not have that much authority in regards to decision making due to lack of structures to formalize the organizational role. There were also inconsistent messages about the role expectations to attempt to formalize the prescriptive authority of NPs which had not been approved by the medical advisory board. On the other hand, participants in the other hospital believed that NPs enacted their role more in the medical component since the medical directives and prescriptive privileges had been approved by the medical advisory board. NPs had greater autonomy in their role and prescriptive authority. It was also noted that NPs participated very little in nursing activities such as implementing nursing care plans or use of clinical care pathways. In both hospitals, the largest role component was the clinical role.

The transfer of prescriptive and decision-making authority must be addressed to enable NPs to work their full scope of role to optimize patient

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outcomes. Clarifying role structures were expected to enable the NPs enact their role in healthcare team and prevent role confusion.

Running Head: Defining NP scope of practice and associated regulations:

Focus on acute care

This review of literature was conducted to define the NP scope of practice (SOP) with emphasis on NPs in acute care setting. Documents were gathered from different resources including National Council of State Board of Nursing (NCSBN), individual state board of nursing, and NP scope and standards of practice. According to Federation of State Medical Boards (2005) and NCSBN (2009), “ SOP is a set of rules, regulations and boundaries within which a fully qualified NP may practice”. It defines what activities a profession can undertake. Both practice acts (state regulatory board form of statutes approved by legislators) and its rules and regulations define NP SOP and require approval from legislators to become law. The Consensus Model for Advanced Practice Registered Nurses (APRN) Regulation was developed to resolve different issues concerning inconsistent APRN education and licensure requirement across jurisdiction and issues in certification. It helps standardize regulations for APRNs. Professional regulators are working together in implementing a consistent SOP for NPs in all jurisdictions. According to American Academy of Nurse Practitioners (AANP), NPs are licensed independent practitioners that provide nursing and medical services emphasizing on health promotion and disease prevention. In addition, NPs have a collaborative practice agreement with the physicians.

However, regulations are different from state to state NP SOP are not clearly defined and further clarifications are needed especially as it pertains to NPs working in acute care to ensure that NPs are practicing according to their education, training and competency as evidenced by the certifications they hold.

Running Head: NURSE-DIRECTED INTERVENTIONS TO REDUCE CATHETER-ASSOCIATED URINARY TRACT INFECTION

This research focuses on the evidence-based practice guidelines conducted at the University of Colorado Hospital as a quality improvement project to initiate a nursing-driven approach to reduce the incidence of catheter-associated urinary tract infection and improve patient outcomes.

A catheter-associated urinary tract infection (CAUTI) is the most common cause of healthcare-associated infection. It is a major health concern leading to prolonged hospital stay and increased healthcare cost. Evidence-based use of indwelling urinary catheter (IUC) must be enforced to reduce the prevalence of CAUTI.

In this project, an intervention design was implemented to evaluate the nurse-driven intervention incorporating evidence-based guidelines. The goal is to decrease the prevalence CAUTI by emphasizing health education on specific unit-based nursing practice. Improving the nursing care by educating the nurses regarding insertion, management and early removal of IUC to ensure the best practice and expanding this education to ancillary services (eg. rehabilitation and transport staffs) were found to positively impact the CAUTI rates. Focused unit interventions such as providing education on <https://assignbuster.com/defining-np-scope-of-practice-nursing-essay/>

postoperative catheterization, use of bladder scanner to check for urinary retention to minimize IUC reinsertion, and encouraging early removal of the urinary catheter were found to decrease the catheter days and prevent infection. Providing education by infusing the best evidence into current practice are important interventions to raise awareness. Incorporating evidence-based guidelines and strategies by focusing of nursing-driven interventions can improve patient outcomes.