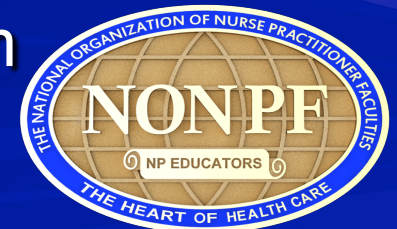


APRN Consensus Model: Leading the Way to Advance the Nursing Profession NONPF PERSPECTIVE

Doctors of Nursing Practice Conference
September 30, 2010

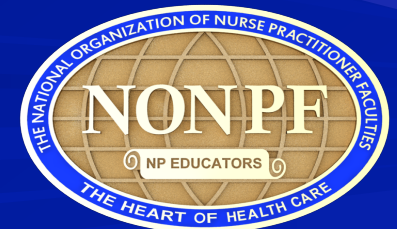
Shirlee Drayton-Brooks, PhD, RN, FNP, BC, FAANP
President, NONPF
Professor, & Director DNP Program
Widener University



Objective

Identify next steps needed to facilitate the APRN Consensus Model in transitioning for future advanced nursing practice (APN)

From the perspective of NONPF, an active participant in development and implementation of the Consensus Model



Significance of the Model

- Nursing community leadership
- Common definition & roles of APRNs
- Common understanding of regulation
- Value of APRNs in health care reform



NONPF Role

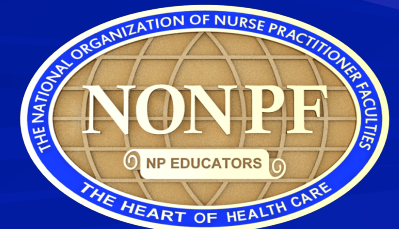
- NONPF Mission: “The leader in education for preparing a quality nurse practitioner workforce to meet evolving societal health needs.”
- Part of Alliance for APRN Credentialing, APRN Consensus Work Group, and Joint Dialogue activities
- Membership 1200 NP educators who will implement model



NONPF Priority for Next Step

Clarify model

- How specialties fit
- PMHNP curriculum
- The 3 Ps



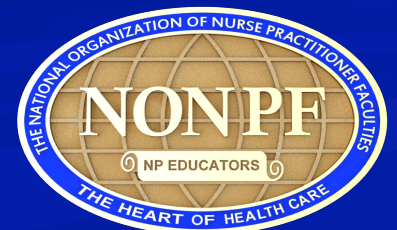
Baseline for Implementation

Clarification of Nurse Practitioner Specialty and Subspecialty Clinical Track Titles, Hours, and Credentialing

- Wide variation of track titles
 - Wide range of speciality & subspecialties in NP tracks
 - No consistency of Web descriptions
-

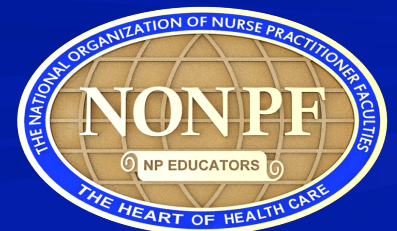
The model “describes the APRN regulation, identifies the titles to be used, defines specialty, describes the emergence of new roles and population foci, and presents strategies for implementation.”

(Retrieved from <http://www.nonpf.org/associations/10789/files/ProjectFinalReport.pdf>)



Intended Outcomes

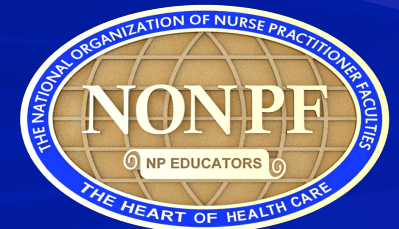
- Consistency in licensure
- Assessment of APRN programs against accreditation assessment standards
- Establishment of certification assessment standards and processes
- Assuring program educational standards for APRN core, role core, and population core competencies, and program approvals.



Significance to DNP Programs

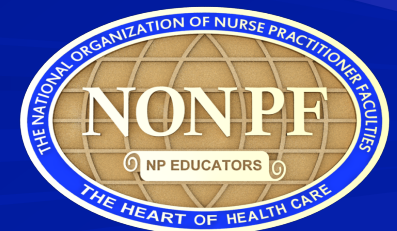
A Doctor of Nursing Practice (DNP) program that is preparing an individual for entry into an APRN role must meet all of the criteria put forth in the Model” (FAQ #21, 2010, <http://www.nonpf.org/associations/10789/files/FAQsfinal2010.pdf>)

All NP programs must have congruence with Model, National Task Force’s *Criteria for Evaluation of Nurse Practitioner Programs*, NP core competencies, and population-focused competencies.



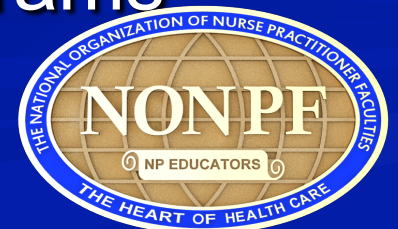
Shared Commitment to Implementation

- Ask critical questions – work together
- Recognize that consensus is not unanimity



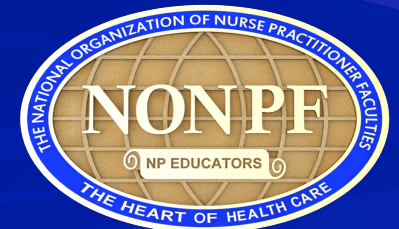
NONPF's Response

- Ongoing representation on LACE
- Endorsement of paper
- Plenary sessions at annual conference
- Webinar on the model for NONPF members
- Contributor to article
- Fields member questions
- Web-based resource center
- Task force on competencies
- Updating evaluation criteria for NP programs



Steps to Implement Model

- Changes to all LACE components will be necessary
- Joint Dialogue to reconvene to address questions/lack of clarity in document
- Document must be open to critique & evolution
- Faculty development
- Regular updating & dissemination of curriculum & program standards for congruence with model



Summary

End Goals:

Licensure, accreditation, certification, and education consistent, reasonable, and verifiable

Nursing establish the vision, practice & of APRN – not someone else!

