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Greetings from the Chair:

I am proud to present you our spring bulletin with news from around the globe. In December I was invited in the Caribbean for the introduction of the nurse practitioner. Surprisingly enough, I could also congratulate the two first Nurse Practitioners on the island of Curacao. On their own initiative they had followed 'on line' a Dutch masters program on Advanced Nursing Practice. Through Skype and webcams and a lot of support from preceptors and Dutch Educators they graduated; an example of excellent pioneering enthusiasm and courage.

Preparation are being finalised for our next conference in Brisbane and I hope to meet many of you there in September. We promise you an excellent program and wonderful opportunities for networking and learning from one another. I look forward to meeting you there.

Petrie Roodbol, Chair International NP/APN Network International Council of Nurses

Featured Countries:

The Doctorate in Nursing Practice: A New Degree for Advanced Practice Nurses in the U.S.

The Doctorate in Nursing Practice (DNP), a clinical doctoral degree, is designed to provide advanced practice registered nurses (APRNs) with the preparation necessary for practice

and leadership in an evolving, complex, and challenging health care environment. In 2004, a position paper published by the American Association of Colleges of Nursing (AACN) called for the DNP to become the terminal degree for all advanced practice registered nurses by 2015 (AACN, 2004). Some of the opportunities underlying the development of the DNP included the following: (1) parity with members of health related disciplines such as pharmacy, medicine, and physical therapy; (2) changes in the health care delivery system requiring the education of a more scientific clinically sophisticated and knowledgeable nursing workforce; (3) additional avenues to address current shortages of nursing faculty in the United States; (4) an awareness that nursing master's programs require more credits that graduate programs in many other disciplines; and (5) recognition that nursing clinical faculty needs could be met through the development of a clinical doctoral degree (AACN, 2004: Apold, 2008; Marion, et.al., 2003). The prestigious National Academy of Sciences reported that the nursing profession should develop a clinical, non-research doctorate for the preparation of expert clinicians and clinical faculty (National Academy of Sciences, 2005).

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A number of core competencies differentiate DNP educational preparation from PhD and other advanced nursing practice education. These competencies include the development of complex clinical, leadership to augment the knowledge necessary for improved patient outcomes, and to provide a framework for enhanced leadership and improved health care delivery (Apold, 2008). Most significantly, the focus of DNP education is on the development of expert clinicians rather than the preparation of nurses with research focused careers. The differences between the DNP and the PhD are delineated in the eight educational essentials identified as requirements for all DNP educational programs by the AACN (2006), and include: (1) scientific underpinnings for practice; (2) organizational and systems leadership for quality improvement and systems thinking; (3) clinical scholarship and analytical methods for evidence-based practice; (4) information systems/technology and patient care technology for the improvement and transformation of health care; (5) health care policy for advocacy in health care; (6) interprofessional collaboration for improving patient and population health outcomes; (7) clinical prevention and population health for improving the nation's health; and (8) advanced nursing practice.

There are 46 DNP Programs currently educating advanced practice registered nurses within the United States and additional programs are now being developed (AACN, 2006). While the implementation of DNP programs remains controversial for those nursing educators who argue against the addition of a clinical doctorate in nursing, many nurses advocate for this new educational option. Organizations such as the American Association of Nurse Practitioners and the National Organization for Nurse Practitioner Faculties are supportive of the DNP. As Marion and her colleagues (2005) have noted, the DNP has the potential to increase the use of advanced practice registered nurses, producing valuable resources for the nation and ensuring the relevancy of the nursing profession as a whole. Globally, educators should explore the DNP as a force for improved advanced practice registered nursing education.

Andrea Boyle, DNSc, RN, BC

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Advanced Nursing in Wales

The Association for Advanced Nursing Practice Educators held their national meeting at the end of February in Cardiff, Wales where Dr Jean White (member of the Welsh Assembly Committee) discussed the implementation of a strategy for advanced practice in Wales. She reminded the audience that Wales has had graduate level pre-registration preparation since 2004 and she implied that specialization is synonymous with advanced practice. Wales has adopted the framework for Advanced Nurse Practitioners set out in the Advanced Practice Toolkit developed in Scotland, but used throughout the UK, (DH, 2007) with the academic level set at master's level. In Wales all Advanced Nurse Practitioner programmes are set at master's level. Wales has developed an action plan for the development of advanced practice that includes the following: (1), Employers need to ensure that job descriptions reflect the description and role competencies for advanced practice. (2), Advanced Nurse Practitioners post holders have an appropriate master's level award and can demonstrate advanced level knowledge and skills commensurate with the role. (3), Service employers must have transitional arrangements in place to support ANP post holders who do not currently have a masters degree.

The National Leadership & Innovation Agency for Health (NLIAH) has a steering group reviewing the Advanced Practice Toolkit (2007) and will advise in its implementation; this report is due in June 2010.

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Nurse Practitioners in Europe:

Advanced practice is developing fast in Europe! There has been a lot of interest from various countries for the development of the role of the nurse practitioner. In the Netherlands we have recently we had visitors from Denmark, Italy and Switzerland. I also received requests for information from Turkey and Spain.

In Finland there are some movements to start an international masters program in Advanced Nursing Practice. In the Netherlands we are also involved in a project for an international masters program for nurse practitioners in oncology. In spite of the European Union, every country is responsible for its own healthcare system and all relevant healthcare acts. The differences between the numbers of healthcare workers are enormous, for example in the Netherlands we have 13.7 nurses and 3.8 doctors for every 1000 inhabitants and in Turkey they have one nurse and one physician for every 1000 inhabitants. For the introduction of the nurse practitioner role every country needs their own regulation and role competencies to ensure that the new professional roles fit into the healthcare system. Some governments need convincing to change the law. Differences in pre-registration educational programmes may also be an issue as not all countries have registration at bachelor degree level. This may be an issue as the ICN recommends advanced nurse practitioner

programmes at master's degree level. Offering an international master means may also mean offering an international bachelors degree for nurses. So a long way to go, but together we are strong.

Petrie Roodbol

Evidence and future direction of advanced practice nursing in the Philippines.

Advanced Practice Nursing in the Philippines is partly realized through the Nursing Specialty Certification Program (NSCP) which was formally launched through a Board of Nursing resolution in 1999 (BON 99-14). Nursing leaders inducted a Nursing Specialty Certification Council which credentials nurses, and accredits organizations and educational programs highlighting the practice of specialized nursing. These legislations are further enforced through the Comprehensive Nursing Specialty Program stipulated under the Philippine Nursing Law of 2002. Qualified nurses may be given certifications in three levels: Nurse Clinician I, Nurse Clinician II, and Clinical Nurse Specialist, and is guided by Patricia Benner's process of role development and skill acquisition. These nurses work under four (4) major groups of Nursing Specialties: Medical- Surgical, Community Health, Maternal and Child Health, and Mental Health and Psychiatry (Philippine Board of Nursing, 2002). So far, there have been 26 Enterostomal Therapy and Cardiovascular Nurse Clinicians, and 13 Clinical Nurse Specialists certified (Philippine Board of Nursing, 2008). There are also seven (7) specialty organizations accredited to provide educational programs and linkage and networking activities (Fernandez, 2009).

At the outset of these policies is an informal category of nurses working in specialty areas across secondary, tertiary, and specialty hospitals. These nurses may or may not be credentialed under the NSCP. They are mostly trained by their home institutions through formal or informal educational trainings leading towards their specialty. Several of these nurses have Masters Degrees.

A case study performed in one tertiary hospital revealed that the NSCP-certified nurses currently occupy managerial positions and seldom perform direct patient care. On the contrary those that work within the specialty

units were found to be clinically competent, with functions that are specialized but not necessarily expanded. Senior nurses can skillfully collaborate, and some have gained the trust of the physicians to be involved in crucial decision-making for the patient. These nurses are also strong on patient advocacy, which includes performance of health teachings and referral to support groups, but are not often involved in research. There are also subgroups of nurses who provide services or consultations on Enterostomal Therapy and Diabetic Education. Some groups have attempted to launch nursing clinics or homebased care services but these have not been sustainable.

Currently there is no policy provision which formalizes the position of an "advanced practice nurse" in the Philippines; neither there are explicit standards of practice for those who may be working as "advanced nurses." In most health institutions, the generalist and specialty area nurses have the same job descriptions, with a similar sense of patient and professional accountability. These developments provide the impetus to formulate an APN Framework in the Philippines that would define systems, scope and standards of practice, and means to improve the practice of the profession to ultimately contribute to better health outcomes in the country.

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Upcoming ICN INPAPNN Conferences

- 2010 ICN INPAPNN conference, Brisbane, Australia
- 2011 ICN Conference & CNR, Malta
- 2012 ICN INPAPNN conference, London, England

Watch this web site for further details and conference links – www.icn-apnetwork.org

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