## PRACTICE DOCTORATE NURSE PRACTITIONER ENTRY-LEVEL COMPETENCIES 2006

# Prepared by the NATIONAL PANEL FOR NP PRACTICE DOCTORATE COMPETENCIES

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### PRACTICE DOCTORATE NURSE PRACTITIONER ENTRY-LEVEL COMPETENCIES 2006

Note: Terms in bold are defined within the glossary found at the end of the competencies.

#### **Preamble**

The practice doctorate for the nurse practitioner (NP) includes additional competencies that are to be combined with the existing Domains and Core Competencies of Nurse Practitioner Practice. The existing NP core competencies have guided educational programs in preparing the highly skilled nurse practitioner clinician to implement full scope of practice as a **licensed independent practitioner**. The competencies are essential behaviors of all nurse practitioners that are demonstrated upon graduation regardless of the specialty focus of program.

Nurse Practitioner graduates of a practice doctorate program have knowledge, skills, and abilities that are important to the NP's clinical practice including refined communication; scientific foundations; mentored patient care experience with emphasis on **independent** and **interprofessional** practice; analytic skills for evaluating and providing **evidence-based**, **patient care** across settings; and advanced knowledge of the health care delivery system. Areas of increased knowledge, skills, and expertise include clinical experience, leadership, and the business of health care.

Therefore, at completion of the program, the NP graduate of the nursing practice doctorate will possess the existing NONPF NP core competencies and the following competencies:

#### **Competency Area: Independent Practice**

- (1) Practices **independently** by assessing, diagnosing, treating, and managing **undifferentiated** patients
- (2) Assumes full accountability for actions as a licensed independent practitioner

#### **Competency Area: Scientific Foundation**

- (1) Critically analyzes data for practice by integrating knowledge from arts and sciences within the context of nursing's philosophical framework and scientific foundation
- (2) Translates research and data to anticipate, predict and explain variations in practice

#### **Competency Area: Leadership**

- (1) Assumes increasingly complex leadership roles
- (2) Provides leadership to foster **interprofessional** collaboration
- (3) Demonstrates a leadership style that uses critical and reflective thinking

### **Competency Area: Quality**

- (1) Uses best available evidence to enhance **quality** in clinical practice
- (2) Evaluates how organizational, structural, financial, marketing, and policy decisions impact cost, quality, and accessibility of health care
- (3) Demonstrates skills in **peer review** that promote a **culture of excellence**

#### **Competency Area: Practice Inquiry**

- (1) Applies clinical investigative skills for evaluation of health outcomes at the patient, family, population, clinical unit, systems, and/or community levels
- (2) Provides leadership in the translation of new knowledge into practice
- (4) Disseminates evidence from inquiry to diverse audiences using multiple methods

#### Competency Area: Technology & Information Literacy

- (1) Demonstrates **information literacy** in complex decision making
- (2) Translates technical and scientific health information appropriate for user need
- (3) Participates in the development of clinical information systems

#### **Competency Area: Policy**

- (1) Analyzes ethical, legal, and social factors in policy development
- (2) Influences health policy
- (3) Evaluates the impact of **globalization** on health care policy development.

#### Competency Area: Health Delivery System

- (1) Applies knowledge of organizational behavior and systems.
- (2) Demonstrates skills in negotiating, consensus-building, and partnering.
- (3) Manages risks to individuals, families, populations, and health care systems.
- (4) Facilitates development of **culturally relevant** health care systems.

#### **Competency Area: Ethics**

(1) Applies ethically sound solutions to complex issues

### NURSE PRACTITIONER PRACTICE DOCTORATE COMPETENCIES GLOSSARY OF TERMS

Clinical Unit – the element of the clinical practice environment in which the NP practices

**Culturally Relevant Health Care** – health care the reflects cultural universal phenomena and their cultural specific expression

**Culture of Excellence** – an accepted set of beliefs concerning highest quality in health care processes and outcomes of care

**Evidence-based Practice** – practice that is predicated on information that is relevant and valid concerning the meaning, cause, course, assessment, prevention, treatment or economics of health problems.

**Globalization** - the interlinking of actions across nations

**Health Policy –** the set of governmental decisions that pertain to health

**Independently** – ability to form clinical decisions using own knowledge and skills without supervision by others

**Information Literacy** –the organization of information, and the nature of knowing the attributes of scholarly knowledge. It includes skills in finding, evaluating, using and effectively communicating information as well as generalization of knowledge and skills to applied settings. The use of new and extant information sources and information is an important component of information literacy.

Interprofessional – a set of professional relationships that depend on each other to achieve a desired goal

**Licensed Independent Practitioner –** health care provider who holds a state license that requires no supervision by another provider

Manages – designs, implements, and evaluates care delivery

**Quality** – the presence of socially-acceptable and desired attributes

**Peer Review** – the process of judging the process and/or outcomes of care by professionals with similar knowledge, skills, and abilities.

Risks – possibilities of harm or other hazard

**Undifferentiated patients** – patients who present without a prior assessment or diagnosis

**END NOTE:** The National Panel for NP Practice Doctorate Competencies recognizes that some competencies may contain awkward or extensive wording but recognized a current need for sufficient detail to clarify the intent of the competency. The National Panel anticipates that refinement will be possible in time for future iterations of these competencies.