



CANADIAN NURSES ASSOCIATION  
ASSOCIATION DES INFIRMIÈRES ET INFIRMIERS DU CANADA

# Advanced Nursing Practice A National Framework

2008

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February 2008

ISBN 978-1-55119-212-3

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***Advanced nursing practice*** is an umbrella term describing an advanced level of clinical nursing practice that maximizes the use of graduate educational preparation, in-depth nursing knowledge and expertise in meeting the health needs of individuals, families, groups, communities and populations. It involves analyzing and synthesizing knowledge; understanding, interpreting and applying nursing theory and research; and developing and advancing nursing knowledge and the profession as a whole.

research

nurse practitioner

collaboration

clinical nurse specialist

leadership

advanced nursing practice

clinical practice

consultation



# Introduction

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Society and its health-care needs are always evolving. As a result, health care in Canada today faces many challenges, including rising costs, shortages of professionals, an aging population, the introduction of new technology and difficulties with access to care. The demand for collaborative, innovative clinical practitioners to act as leaders in health care has never been stronger.

Society and its health-care needs are always evolving. As a result, health care in Canada today faces many challenges, including rising costs, shortages of professionals, an aging population, the introduction of new technology and difficulties with access to care. The demand for collaborative, innovative clinical practitioners to act as leaders in health care has never been stronger. Nurses in advanced nursing practice are well positioned to respond to the evolution of health care. In particular, advanced nursing practice plays a key role in meeting the health needs of Canadians, by building nursing knowledge, advancing the nursing profession and contributing to a sustainable and effective health-care system.

The Board of Directors of the Canadian Nurses Association (CNA) approved the key elements of a national framework for advanced nursing practice in June 1999. The first edition of *Advanced Nursing Practice: A National Framework* was published in May 2000. That document defined advanced nursing practice, identified its characteristics and *competencies*,<sup>1</sup> and described the necessary educational preparation, the various domains of practice and potential roles, and its *regulation*. The framework was deliberately broad, in part to allow for variations among jurisdictions and in part to allow for evolution of advanced nursing practice roles. In March 2002,

the CNA Board of Directors revised one of the key elements of the framework by establishing a *graduate degree* in nursing as the minimum educational requirement for advanced nursing practice.

The overall objective of this national framework is to promote a common understanding of advanced nursing practice in Canada and

**...advanced nursing practice plays a key role in meeting the health needs of Canadians, by building nursing knowledge, advancing the nursing profession and contributing to a sustainable and effective health-care system.**

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<sup>1</sup> Terms defined in the glossary are presented in italics on first appearance in the text.

thereby to increase consistency in role definition, curricula and competency development.

The framework has already been used for a variety of purposes, including developing educational courses, outlining concepts for research, shaping government position statements and interpreting advanced nursing practice for employers, the public, other health-care workers and policy-makers.

In 2005, CNA organized the Dialogue on Advanced Nursing Practice to bring together nursing stakeholders – including educators, policy-makers, administrators and representatives of nursing organizations – to discuss what could be learned from the existing advanced nursing practice roles, to identify what more could be done to support the evolution of advanced nursing practice and to identify principles and strategies that would promote the introduction of other advanced nursing practice roles. Participants identified the national framework for advanced nursing practice as a useful guide in the continued development of this form of practice in Canada and recommended that it be updated periodically to respond to the needs of its users and to reflect changes in health-care system environments.

The Canadian Nurse Practitioner Initiative, launched in 2004, helped in the development of a framework for the integration and sustainability of the nurse practitioner role in Canada's health-care system. Recommendations for practice, education, legislation and regulation, and health human resources planning were considered in the current revision of the advanced nursing practice framework.

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The advanced nursing practice framework contains the following key elements:

- evolution of advanced nursing practice
- definition and characteristics
- educational preparation
- roles
- regulation
- competencies
- impact of advanced nursing practice
- support for advanced nursing practice





# Evolution of Advanced Nursing Practice

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Advanced nursing practice has emerged over the past decades as health-care systems and governments around the world have come to recognize “that optimizing the nursing contribution to health care through expanding their role is an effective strategy for improving health services” (Schober & Affara, 2006, p. 2).

**Nurses can choose from a variety of diverse and equally valuable practice opportunities, of which advanced nursing practice is one.**

Advanced nursing practice<sup>2</sup> has emerged over the past decades as health-care systems and governments around the world have come to recognize “that optimizing the nursing contribution to health care through expanding their role is an effective strategy for improving health services” (Schober & Affara, 2006, p. 2). Despite the common development of this realm of nursing practice,

the understanding of what constitutes advanced nursing practice varies from one country to another and even within countries. Advanced practice nurses are viewed as experts in their respective domains, engaged in activities that extend beyond the narrow application of technically complex procedures. In particular, advanced nursing practice involves the sophisticated use of knowledge and skills (Daly & Carnwell, 2003, p. 163).

Two advanced nursing practice roles are recognized in Canada today: the *clinical nurse specialist* and the *nurse practitioner*. These two roles evolved from different roots. Clinical nurse specialists first emerged in the 1970s as client care grew more complex. Their role was to provide clinical guidance and leadership to nursing staff managing complex care, to improve the quality of care and to promote evidence-based practice. Cutbacks in the 1980s and 1990s led to the elimination of many of these positions, but as concern over the quality of care builds in the early 21st century, there is reason to believe that the clinical nurse specialist role will regain prominence.

In Canada, the origin of the nurse practitioner lies in the work of nurses who, decades ago, provided care that was otherwise unavailable in rural and remote areas. Nurse practitioners gained formal recognition in the 1970s, when this role was recommended by policy-makers as a way of providing health care to isolated populations. Education programs were started,

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<sup>2</sup> Advanced nursing practice is used by CNA as the umbrella term for the advanced level of clinical practice described in this framework; individuals in advanced nursing practice roles are referred to in this document as advanced practice nurses. Nurses refers to registered nurses.

but a perceived oversupply of physicians, a lack of enabling legislation and problems related to remuneration caused interest to wane. Interest was rekindled in the 1990s by health-care

reform, an increased demand for access to primary health care and the need for integrated care. The Canadian Nurse Practitioner Initiative was launched in 2004 to develop a pan-Canadian framework to encourage full integration of nurse practitioners into Canadian health care.

As demand, technology and knowledge change the ways in which health care is delivered, interest in advanced nursing practice is on the rise. Trends in the delivery of health care are providing opportunities for nurses to expand current roles and create new ones. Nurses can choose from a variety of diverse and equally valuable practice opportunities, of which advanced nursing practice is one. As nurses move along the continuum of experience and education, they acquire additional competencies that become incorporated into their practice. This evolution enables nurses to contribute to the health-care system in new ways.

Although all nurses contribute to the health-care system through their work in clinical practice, education, administration, research and policy, advanced nursing practice focuses on the clinical domain in a wide array of practice settings. Clinical practice not only incorporates direct client care but also involves a supportive and consultative role. Canadian advanced practice nurses have the education, clinical expertise, leadership skills and understanding of organizations, health policy and decision-making to play an important role in client and health-care system outcomes now and in the future.

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# Definition and Characteristics

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## Definition

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*Advanced nursing practice* is an umbrella term describing an advanced level of clinical nursing practice that maximizes the use of graduate educational preparation, in-depth nursing knowledge and expertise in meeting the health needs of individuals, families, groups, communities and populations. It involves:

- analyzing and synthesizing knowledge;
- understanding, interpreting and applying nursing theory and research; and
- developing and advancing nursing knowledge and the profession as a whole.

## Characteristics

In advanced nursing practice, nurses build on their expertise in a specialty area, integrating and consistently displaying the following features and characteristics:

- provision of effective and efficient care, delivered with a high degree of autonomy, to an identified population;
- demonstration of leadership and initiation of change to improve client, organization and system outcomes;
- deliberate, purposeful and integrated use of in-depth nursing knowledge, research and clinical expertise, as well as integration of knowledge from other disciplines;
- depth and breadth of knowledge that draws on a wide range of strategies to meet the needs of *clients* and to improve access to and quality of care;
- ability to explain and apply the theoretical, empirical, ethical and experiential foundations of nursing practice;

- understanding, development and dissemination of evidence-based nursing knowledge;
- ability to initiate or participate in planning, coordinating, implementing and evaluating programs to meet client needs and support nursing practice;
- use of knowledge-transfer techniques to put research-based knowledge into practice;
- demonstration of advanced judgment and decision-making skills; and
- critical analysis of and influence on health policy.







## Educational Preparation

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The minimum educational preparation for advanced nursing practice is a graduate degree in nursing. A nurse with this type of graduate preparation has a thorough grounding in the theoretical foundation of nursing and can promote nursing research, generate new knowledge and use academic preparation, synthesis and knowledge-transfer skills to interpret and incorporate new knowledge into clinical practice.

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Although a graduate degree is essential for advanced nursing practice, nurses who have completed one or more graduate degrees cannot assume that their practice is at an advanced level on the basis of these educational *credentials* alone. It is the combination of graduate education and clinical experience that allows nurses to develop the competencies required in advanced nursing practice.

Like all nurses, advanced practice nurses are committed to lifelong learning. In addition to pursuing such learning for themselves, they are committed to promoting, leading and contributing to the lifelong learning of others.



## Roles

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Advanced nursing practice focuses on clinical practice, whether through a direct relationship with clients or through a supportive and consultative role. Nurse educators, researchers and administrators must demonstrate competencies in advanced nursing practice and must have clinical practice as a significant part of their role if they are to be considered as functioning within advanced nursing practice.

Advanced nursing practice focuses on clinical practice, whether through a direct relationship with clients or through a supportive and consultative role. Nurse educators, researchers and administrators must demonstrate competencies in advanced nursing practice and must have clinical practice as a significant part of their role if they are to be considered as functioning within advanced nursing practice.

Only two advanced nursing practice roles are recognized in Canada today: the clinical nurse specialist and the nurse practitioner. These two roles are fundamentally different. Clinical nurse specialists provide expert nursing care for specialized client populations. They play a leading role in the development of clinical guidelines and protocols, promote the use of evidence, provide expert support and consultation, and facilitate system change (Association of Registered Nurses of Newfoundland and Labrador, 2007). In contrast, nurse practitioners provide direct care focusing on health promotion and the treatment and management of health conditions. They are “registered nurses with additional educational preparation and experience who possess and demonstrate the competencies to autonomously diagnose, order and interpret diagnostic tests, prescribe pharmaceuticals and perform specific procedures within their legislated scope of practice” (CNA, 2006a).

**With a focus on health promotion and disease prevention, both the clinical nurse specialist and the nurse practitioner “enhance the provision of timely, accessible, cost-effective and quality health care for all Canadians”**

(CNA, 2006b, p. 3).

Clinical nurse specialists and nurse practitioners spend different amounts of time providing direct clinical care, but both roles incorporate education, research, consultation and leadership components. Client, organization and system needs will help to shape and determine the role of individual clinical nurse specialists and nurse practitioners.

With a focus on health promotion and disease prevention, both the clinical nurse specialist and the nurse practitioner “enhance the provision of timely, accessible, cost-effective and quality health care for all Canadians” (CNA, 2006b, p. 3). It is anticipated that new advanced nursing practice roles will develop to meet the existing and emerging health-care needs of Canadians. For example, several jurisdictions are exploring an advanced nursing practice role within anesthesia care.

**“The clinical nurse specialist plays a pivotal role in the provision of safe, effective, evidence-based care, supporting nurses to ensure that they maximize their skills and abilities.”**

– Bernadine Wallis, clinical nurse specialist  
Winnipeg, Manitoba

**“A nurse practitioner complements rather than replaces other health-care providers, bridges the gap in service delivery for patients, expands care options, and supports a shift to wellness-based care.”**

– Mary Nugent, nurse practitioner  
Taber, Alberta





## Regulation

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A framework describing advanced nursing practice allows for a coordinated national approach, permits flexibility among provinces and territories, and allows new roles to develop. Such a coordinated approach is necessary to ensure that the public has access to consistent, high-quality nursing services across the country. It will also facilitate labour mobility for advanced practice nurses who are subject to specific provincial or territorial legislation.

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Advanced practice nurses are registered nurses who are licensed by and accountable to the registered nursing regulatory body established by legislation in each province and territory. For many advanced practice nurses, additional regulation and standards are not required because they practise within the scope of registered nursing in their respective jurisdictions. In some cases, the *scope of practice* includes additional responsibilities, such as prescriptive authority, that may require additional regulatory authority, but these additional authorities are all within the scope of practice of nursing.

The regulation of nursing practice is intended to safeguard the public by ensuring that nurses meet standard levels of knowledge and education. In Canada, regulatory titles, including “registered nurse” and “RN,” are protected, but other titles, such as “nurse,” “nurse practitioner” and “NP,” may or may not be protected according to the legislation of specific jurisdictions.

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Currently, the only advanced nursing practice role with additional regulation and title protection in Canada is the nurse practitioner, although the specific title used varies among the provinces and territories. As new roles in advanced nursing practice emerge, they may or may not require additional legislation and regulation.





# Competencies

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Competencies are the specific knowledge, skills, judgment and personal attributes required for a registered nurse to practise safely and ethically in a designated role and setting (CNA, 2005). Core competencies for advanced nursing practice are based on an appropriate depth, breadth and range of nursing knowledge, theory and research, enhanced by clinical experience.

Competencies are the specific knowledge, skills, judgment and personal attributes required for a registered nurse to practise safely and ethically in a designated role and setting (CNA, 2005). Core competencies for advanced nursing practice are based on an appropriate depth, breadth and range of nursing knowledge, theory and research, enhanced by clinical experience.<sup>3</sup> They cut across specialty lines and are exhibited by all advanced practice nurses. This framework separates competencies into four categories: clinical, research, leadership, and consultation and collaboration. However, it is the effective and simultaneous interaction, blending and execution of knowledge, skills, judgment and personal attributes in a wide variety of practice environments that characterizes advanced nursing practice.

## Clinical Competencies

The cornerstone of advanced nursing practice is expertise in a *specialized area of nursing*. Through a holistic and integrated approach, the nurse works in partnership with the client and other members of the health-care team in the provision of comprehensive care.

An advanced practice nurse integrates extensive clinical experience with theory, research and in-depth nursing and related knowledge to:

- develop multiple advanced assessment and intervention strategies within a client-centred framework for individual clients, communities and populations;
- use qualitative and quantitative data from multiple sources, often in ambiguous and complex situations, when making clinical decisions and initiating and managing change;
- analyze the complex interaction of sociological, psychological and physiological processes, determinants of health and clients' lived experience;

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<sup>3</sup> *Competencies specific to the nurse practitioner role and responsibilities are identified in Canadian Nurse Practitioner: Core Competency Framework (CNA, 2005).*

- anticipate and explain the wide range of client responses to actual or potential health problems and recommend action;
- guide decision-making in complex clinical situations;
- engage clients and other team members in resolving issues at the individual, organizational and health-care system levels;
- identify and assess trends or patterns that have health implications for individuals, families, groups or communities;
- generate and incorporate new nursing knowledge and develop new standards of care, programs and policies;
- plan, initiate, coordinate and conduct educational programs based on needs, priorities and organizational resources; and
- manage a wide range of patient responses to actual and potential health problems.

## Research Competencies

Generating, synthesizing and using research evidence is central to advanced nursing practice.

An advanced practice nurse is able to:

- identify and implement research-based innovations for improving client care, organizations or systems;
- as either primary investigator or collaborator with other members of the health-care team or community, identify, conduct and support research that enhances or benefits nursing practice;

**Advanced practice nurses are leaders in the organizations and communities where they work.**

- evaluate current practice at individual and system levels in light of research findings;
- collect data on, and evaluate the outcomes of, advanced nursing practice for clients, the nursing profession and the health-care system;
- critique, interpret, apply and disseminate evidence-based findings; and
- contribute to nursing and the health-care system by disseminating new knowledge through formal and informal channels, including presentation and publication at the local, regional, national and international levels.

## Leadership Competencies

Advanced practice nurses are leaders in the organizations and communities where they work. They are agents of change, consistently seeking effective new ways to practise, to improve the delivery of care, to shape their organizations, to benefit the public and to influence health policy.

An advanced practice nurse demonstrates leadership by:

- advocating for individuals, families, groups and communities in relation to treatment, the health-care system and policy decisions that affect health and quality of life;
- identifying the learning needs of nurses and other members of the health-care team and finding or developing programs and resources to meet those needs;
- *mentoring* and coaching nursing colleagues, other members of the health-care team, and students;
- advocating for and promoting the importance of health-care access and advanced nursing practice to nurses and other health professionals, the public, legislators and policy-makers;

- contributing to and advocating for an organizational culture that supports professional growth, continuous learning and collaborative practice;
- evaluating programs in the organization and the community and developing innovative approaches to complex issues;
- understanding and integrating the principles of resource allocation and cost-effectiveness in organizational and system-level decision-making;
- identifying gaps in the health-care system and developing partnerships to facilitate and manage change;
- developing and clearly articulating a vision for nursing practice, influencing and contributing to the organization's and the health-care system's vision and implementing approaches to realize that vision;
- advising clients, colleagues, the community, health-care institutions and policy-makers on issues related to nursing, health and health care;
- identifying problems and initiating change to address challenges at the individual, organizational or system level; and
- understanding legislative and socio-political issues that influence health policy, and building strategies to improve health, health-care access and healthy public policy.

# Consultation and Collaboration Competencies

Effective collaboration and communication with clients and others on the health-care team represent important aspects of any nursing practice. The ability to consult and collaborate with colleagues across sectors and at the organizational, provincial, national and international level is a characteristic of nurses in advanced practice.

A nurse in advanced practice is able to:

- initiate timely and appropriate consultation, referrals and collaboration with other health-care providers;
- consult and collaborate with members of the health-care team to develop quality-improvement and risk-management strategies;
- work with others to gather and synthesize qualitative and quantitative information on determinants of health from a variety of sources;
- practise collaboratively and build effective coalitions;
- apply theories related to group dynamics, roles and organizations;

**“Collaboration is a complex process requiring knowledge sharing and joint responsibility for patient care, management and outcomes.”**

– Sandra Duke, nurse practitioner  
Halifax, Nova Scotia

- demonstrate knowledge and skill in communication, negotiation and conflict resolution, including the ability to analyze, manage and negotiate conflict;
- clearly articulate the contribution of advanced nursing practice within the interprofessional health-care team;
- participate in collaborative projects with academic institutions and maintain cross-appointments; and
- advocate for changes in health policy by participating on regional, provincial/territorial, and federal committees that influence decision-making at those levels.







# Impact of Advanced Nursing Practice

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Advanced nursing practice has evolved to meet the demands of modern health care through increasingly advanced knowledge and skills. It is not merely technical and educational progress that has driven the development of advanced nursing practice; the health needs of clients and the growing complexity of care have also contributed.

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experience and education to take nursing practice to new levels, as they have moved from a supportive to a leading role in client care.

Evidence about the benefits of advanced nursing practice is now building. Cunningham (2004, p. 219) has stated that nurses in advanced nursing practice “enrich” health care by adding value to the delivery of health-care services. Bryant-Lukosius, DiCenso, Browne and Pinelli (2004, p. 526) found that advanced practice nurses may improve client and health-care system outcomes related to health status, functional status, quality of life, satisfaction with care and cost efficiency. DeGrasse and Nicklin (2001, p. 8) reported

that the use of advanced practice nurses decreased the number of hospital admissions and emergency department visits, shortened lengths of stay and resulted in cost savings for the institutions where they were employed. Other outcomes that improved with advanced nursing practice included fewer readmissions for heart failure, shorter lengths of stay when patients were readmitted and lower rates of urinary tract infections, skin breakdown and pneumonia (Kleinpell, 2007, p. 20). Kleinpell also reported that advanced nursing practice helped promote evidence-based care, improved patients’

**“Clinical nurse specialists, with their focus on patient care from a nursing perspective, can advance nursing practice through education, research and the development of systems that meet patient and family needs.”**

– Erlene Seaborne, clinical nurse specialist  
Hamilton, Ontario

**“Clinical nurse specialists support and teach other health-care providers and can influence and improve health care at the individual and the system level.”**

– Linda Read Paul, clinical nurse specialist  
Calgary, Alberta

adherence to health promotion and built the evidence base of nursing. Advanced nursing practice is an innovative and exciting development that provides nurses with an opportunity to work at an advanced level of clinical practice (Furlong & Smith, 2005, p. 1062).

The role of the nurse practitioner has been studied for many years. In a literature review commissioned by the College of Registered Nurses of Nova Scotia and released in June 2007, Sangster-Gormley reported that client satisfaction and education are the most commonly researched outcomes of nurse practitioner care. However, the author went on to describe solid evidence for many other benefits to care: nurse practitioners are more likely to follow practice guidelines, and their patients have shorter stays, fewer readmissions and other successful outcomes.

The body of research on advanced nursing practice is smaller than is the case for many other topics in nursing. In another review of recent research, Oerman and Floyd (2002, p. 140) identified and described this lack of evidence. They found that research on outcomes has focused too much on cost savings, ignoring important aspects of the work of advanced practice nurses such as resolution of symptoms, enhancement of clients' quality of life and improvements in knowledge among patients and families. They called for advanced practice nurses to lead more research on the results of specific nursing interventions.

For their annotated bibliography, published in 2004, Fulton and Baldwin reviewed 70 research papers that had been written by nurses or had examined the impact of clinical nurse specialists. Fulton and Baldwin identified many ways in which clinical nurse specialists improved care, such as reducing the number of visits to emergency departments by clients with asthma and improving prenatal care of and generating

better outcomes for very low birth weight babies; they also found that cancer patients whose care team included a clinical nurse specialist had fewer complications. Perhaps the most important aspect of the article was the scope of information it covered: in addition to the research pieces, the authors reviewed 31 publications about program development and evaluation and 25 anecdotal accounts. These numbers are a sign that the knowledge base for advanced nursing practice is building, but Fulton and Baldwin (2004, p. 22) warned that “although the number of articles had drastically increased, the scope of everyday [clinical nurse specialist] accomplishments is not completely captured in published work. [Clinical nurse specialists] improve care practice on a daily basis.”



# Support for Advanced Nursing Practice

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Advanced nursing practice must be supported at many levels if it is to operate effectively and provide a full range of benefits to clients, other members of the health team, organizations and the community as a whole.

Advanced nursing practice must be supported at many levels if it is to operate effectively and provide a full range of benefits to clients, other members of the health team, organizations and the community as a whole. The *University Health Network Framework for Advanced Nursing Practice* states that “significant challenges have emerged in role implementation and development, as a result of inconsistent professional and organizational support for [advanced nursing practice]. Role clarity, demonstrated value and consistent support have been identified in the literature as keys to successful role implementation” (Micevski et al., 2004, p. 53).

To flourish, advanced nursing practice needs:

- leadership by CNA, other nursing organizations and governments to encourage creation of positions for nurses in this type of practice;
- leadership by CNA and other nursing organizations to identify opportunities for the introduction of future advanced nursing practice roles that align with current and emerging population health and system needs;
- health human resources planning that takes a pan-Canadian, interprofessional approach and that is based on a conceptual framework;
- organizational and administrative support and resources to implement, develop and sustain various aspects of advanced nursing practice;
- communication and education tools to inform the public, policy-makers, administrators and other professions about the contributions of advanced nursing practice;
- human resources policies that allow nurses to pursue graduate education;
- specially designed graduate curricula based on the characteristics and competencies of advanced nursing practice;
- flexible pathways to graduate nursing education;

- support for professional development and lifelong learning;
- funding for research about and by nurses in advanced nursing practice;
- interprofessional education and organizations that foster team work;
- resources to put in place the positions, technology, administrative infrastructure and culture for advanced practice nurses to work most effectively; and
- policy processes that promote advanced nursing practice and are shaped by the expertise of advanced practice nurses.







## Looking to the Future

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Canada's health-care needs are growing with the aging of the population, continued shortages in the supply of health human resources, increasing complexity of the health-care system and mounting pressure to contain costs. Advanced nursing practice is helping to meet these growing needs. To have a far-reaching impact, however, advanced nursing practice must be promoted and sustained.

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New advanced nursing practice roles should be introduced only in response to the health-care needs of Canadians and must be based on solid evidence of those needs. CNA's position statement *National Planning for Human Resources in the Health Sector* states that needs-based planning anticipates health needs on the basis of "demographic, epidemiological, and cultural factors" and includes benchmarking for regional variation and review of specialty mix within and between disciplines (CNA, 2006c).

**New approaches to health care, based on strategies that will enhance access to service delivery while improving the health of the population, must be developed collaboratively.**

Progress has been made in providing guidelines for the introduction and evaluation of advanced nursing practice roles (Bryant-Lukosius & DiCenso, 2004, p. 531; Winnipeg Regional Health Authority, 2005, 2006). In particular, Bryant-Lukosius and DiCenso (2004, p. 532) presented the PEPPA framework, a "participatory, evidence-based, patient-centred process for [advanced nursing practice] role development, implementation and evaluation," which set out nine steps for determining whether a new advanced nursing practice role is needed and whether it will be effective. These steps include defining the patient population, defining new models of care and the place of the advanced practice nurse within them, implementing the new models of care and long-term monitoring.

The Canadian Nurse Practitioner Initiative includes an implementation and evaluation toolkit, which serves as a practical guide to assessing the need and readiness for the nurse practitioner role. In addition, the toolkit identifies key steps and factors to support the implementation of this role and ongoing monitoring of its effectiveness through a

structured, forward-looking evaluative approach. In particular, the toolkit offers guidance on tailoring the planning, implementation and evaluation of the nurse practitioner role to the unique requirements of specific practice settings. The design of the toolkit was based on the PEPPA framework, extensive literature review and experimental research, key stakeholder consultation and a review of best practices (CNA, 2006d). In addition, a needs-based simulation model for health human resources planning was developed in conjunction with the Canadian Nurse Practitioner Initiative; this model is applicable to primary health care nurse practitioners across all jurisdictions in Canada. It goes beyond the traditional planning models, which are based on supply and projected population-to-provider ratios, to consider population health needs and the level of services required to meet those needs (CNA, 2006e).

Coordination of the preparation and roles for advanced nursing practice is another necessary step. The development of educational and experiential goals and programs for advanced practice nurses should be aligned across the provinces and territories, to reinforce their place in health care overall and to permit labour mobility. The goal must be to ensure that all Canadians have access to similar types of expertise.

To effectively develop and sustain the health-care system, the roles of health-care providers, including advanced practice nurses, must be optimized. Canadians can anticipate many new challenges to their health-care system, including increases in chronic diseases such as diabetes mellitus and arthritis. Nonetheless, a shift in focus from illness to health is expected, whereby clients will become more educated and more strongly engaged and will participate more actively in developing and maintaining their own health (Villeneuve & MacDonald, 2006). Advanced practice nurses must be part of the solution to these health-care challenges and the changes that lie ahead.

New approaches to health care, based on strategies that will enhance access to service delivery while improving the health of the population, must be developed collaboratively. With commitment and an understanding of its importance at all levels of health care, advanced nursing practice can play a key role in meeting the health needs of Canadians, building nursing knowledge and contributing to a sustainable and effective health-care system.

# Glossary

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## **Advanced nursing practice**

Umbrella term for an advanced level of clinical nursing practice that maximizes the use of graduate educational preparation, in-depth nursing knowledge and expertise in meeting the health needs of individuals, families, groups, communities and populations. It involves:

- analyzing and synthesizing knowledge;
- understanding, interpreting and applying nursing theory and research; and
- developing and advancing nursing knowledge and the profession as a whole.

## **Client**

The beneficiary of care; may be an individual, family, group, population or entire community

## **Client-centred care**

“Nurses achieve client-centred care by actively including the client and significant others as partners in the care, [and by] identifying the client’s goals, wishes and preferences and making these the basis of the plan of care...” (College of Nurses of Ontario, 2006)

## **Clinical nurse specialist**

A registered nurse who holds a master’s or doctoral degree in nursing with expertise in a clinical nursing specialty; uses in-depth knowledge and skills, advanced judgment and clinical experience in a nursing specialty to assist in providing solutions for complex health-care issues

## **Competencies**

Integrated knowledge, skills, judgment and personal attributes required of a registered nurse to practise safely and ethically in a designated role and setting (CNA, 2005)

## **Credentials**

Marks or “stamps” of quality and achievement communicating to employers, payers and consumers what to expect from a “credentialed” nurse, specialist course or program of study, institution of higher education, hospital or health service, or health-care product, technology or device

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**Graduate education**

Education beyond the baccalaureate level, including master's, doctoral and postdoctoral levels (Field, Stinson & Thibaudeau, 1992)

**Mentoring**

A voluntary, mutually beneficial, long-term relationship in which an experienced and knowledgeable leader (the mentor) supports the maturation of a less experienced nurse with leadership potential (the “mentee”)

**Nurse practitioner**

A registered nurse with additional educational preparation and experience who possesses and demonstrates the competencies to autonomously diagnose, order and interpret diagnostic tests, prescribe pharmaceuticals and perform specific procedures within the legislated scope of practice (CNA, 2006a)

**Regulation**

All of those legitimate and appropriate means – governmental, professional, private and individual – whereby order, identity, consistency and control are brought to the profession; through regulation, the profession and its members are defined, the scope of practice is determined, standards of education and of ethical and competent practice are set and systems of accountability are established (Styles & Affara, 1997)

**Scope of nursing practice**

The activities that nurses are educated and authorized to perform, as established through legislated definitions of nursing practice, complemented by standards, guidelines and policy positions issued by professional nursing bodies (CNA, 2005)

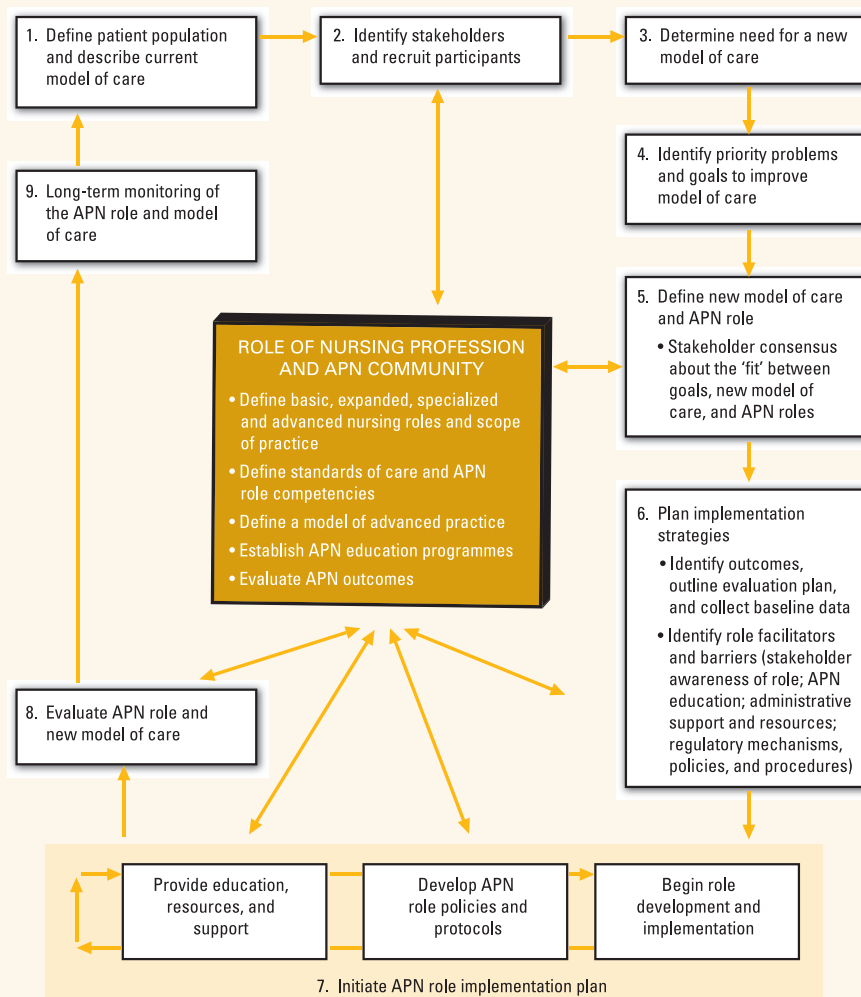
**Specialized practice**

Practice that concentrates on a particular aspect of nursing, related to the client's age (e.g., pediatrics, gerontology), the client's problem (e.g., pain management, bereavement), the diagnostic group (e.g., orthopedics, vascular surgery), the practice setting (e.g., home care, emergency) or the type of care (e.g., primary health care, palliative care, critical care)

# Appendix A

## PEPPA Framework

**Participatory, evidence-based, patient-centred process for advanced practice nurse [APN] role development, implementation and evaluation**



From: Bryant-Lukosius, D., & DiCenso, A. (2004). A framework for the introduction of an evaluation of advanced practice nursing roles. *Journal of Advanced Nursing*, 48(5), 530-540. Reprinted with the permission of Blackwell Publishing.

# Appendix B

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## The Consultation Process

The Board of Directors of the Canadian Nurses Association (CNA) approved the key elements of a national framework for advanced nursing practice in June 1999. The framework was first published in May 2000 in *Advanced Nursing Practice: A National Framework*. In March 2002, the CNA Board of Directors revised one of the key elements of the framework by establishing a graduate degree in nursing as the minimum educational requirement for advanced nursing practice

Changes in practice that emerged during CNA's 2005 Dialogue on Advanced Nursing Practice and the Canadian Nurse Practitioner Initiative (2004-06) signalled the need to update CNA's framework on advanced nursing practice.

In 2006, the CNA Board of Directors created a national working group to guide revision of the framework. Its consultations involved one face-to-face meeting, numerous teleconferences and circulation of several draft documents among member jurisdictions and national nursing and other health-care organizations. In addition, a discussion of the draft framework by the CNA Board of Directors helped to guide the final version.

Feedback from the consultation process was extensive. Hundreds of responses were received from associations, organizations and individual nurses. Although views on specific aspects of the framework differed, there was strong consensus on the key concepts for advanced nursing practice. Taking into consideration the feedback received and the consensus recommendations from the national working group, the CNA Board of Directors approved the updated framework for advanced nursing practice in November 2007.

# Appendix C

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## Members of the National Working Group

### Co-Chairs

Christine Rieck Buckley	Canadian Nurses Association
Debbie Philipchuk	College & Association of Registered Nurses of Alberta

### Members

Karen Antoni	Canadian Association of Advanced Practice Nurses
Gail Beatty	Registered Nurses' Association of Ontario
Michèle Brennan	College of Registered Nurses of Nova Scotia
Suzanne Durand	Ordre des infirmières et infirmiers du Québec
Stephen Leck	Registered Nurses Association of Northwest Territories and Nunavut
Francis Loos	Saskatchewan Registered Nurses' Association
Betty Lundrigan	Association of Registered Nurses of Newfoundland and Labrador
Patricia McGarr	Yukon Registered Nurses Association
Blake Parkin	Association of Registered Nurses of Prince Edward Island
Cheri Vigar	College of Nurses of Ontario
Barb Waters	Nurse Practitioner Council of Canada
Jo Wearing	College of Registered Nurses of British Columbia
Doug Wheeler	Nurses Association of New Brunswick
Joanne Winsor	College of Registered Nurses of Manitoba



# References

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- Association of Registered Nurses of Newfoundland and Labrador. (2007). *Advanced practice-clinical nurse specialist* [Position statement]. St. John's: Author.
- Bryant-Lukosius, D., & DiCenso, A. (2004). A framework for the introduction and evaluation of advanced practice nursing roles. *Journal of Advanced Nursing*, 48(5), 530-540.
- Bryant-Lukosius, D., DiCenso, A., Browne, G., & Pinelli, J. (2004). Advanced practice nursing roles: Development, implementation and evaluation. *Journal of Advanced Nursing*, 48(5), 519-529.
- Canadian Nurses Association. (2005). *Canadian nurse practitioner: Core competency framework*. Ottawa: Author.
- Canadian Nurses Association. (2006a). *Practice framework for nurse practitioners in Canada*. Ottawa: Author.
- Canadian Nurses Association. (2006b). *Report of 2005 dialogue on advanced nursing practice*. Ottawa: Author.
- Canadian Nurses Association. (2006c). *National planning for human resources in the health sector* [Position statement]. Ottawa: Author.
- Canadian Nurses Association. (2006d). *Canadian nurse practitioner initiative: Implementation and evaluation toolkit for nurse practitioners in Canada*. Ottawa: Author.
- Canadian Nurses Association. (2006e). Health human resources chapter. In: *Canadian nurse practitioner technical report*. Ottawa: Author.
- College of Nurses of Ontario. (2006). Learning module: *Therapeutic communication and client-centred care*. *Therapeutic Nurse-Client Relationship, Revised 2006, practice standard: Therapeutic Communication and Client-Centred Care*, slide 8. Retrieved February 7, 2008, from <http://www.cno.org/prac/learn/modules/tncr/pdf/TNCR-Chapter3.pdf>
- Cunningham, R. S. (2004). Advanced practice nursing outcomes: A review of selected empirical literature. *Oncology Nursing Forum*, 31(2), 219-230.
- Daly, W., & Carnwell, R. (2003). Nursing roles and levels of practice: A framework for differentiating between elementary, specialist and advancing nursing practice. *Journal of Clinical Nursing*, 12, 158-167.
- DeGrasse, C., & Nicklin, W. (2001). Advanced nursing practice: Old hat, new design. *Canadian Journal of Nursing Leadership*, 14(4), 7-12.

- Field, P. A., Stinson, S., & Thibaudeau, M-F. (1992). Graduate education in nursing in Canada. In A. J. Baumgart & J. Larsen (Eds.), *Canadian nursing faces the future*. Toronto: CV Mosby, 1998.
- Fulton, J., & Baldwin, K. (2004). An annotated bibliography reflecting CNS practice and outcomes. *Clinical Nurse Specialist*, 18(1), 21-39.
- Furlong, E., & Smith, R. (2005). Advanced nursing practice: Policy, education and role development. *Journal of Clinical Nursing*, 14, 1059-1066.
- Kleinpell, R. M. (2007). APNs: Invisible champions? *Nursing Management*, 38(5), 18-22.
- Micevski, V., Korkola, L., Sarkissian, S., Mulcahy, V., Shobbrook, C., Belford, L., et al. (2004). The University Health Network framework for advanced nursing practice. *Nursing Leadership*, 17(3), 52-64.
- Oerman, M. H., & Floyd, J. (2002). Outcomes research: An essential component of the advanced practice nurse role. *Clinical Nurse Specialist*, 16(3), 140-144.
- Sangster-Gormley, E. (2007). *Nurse practitioner-sensitive outcomes*. Halifax: College of Registered Nurses of Nova Scotia.
- Schober, M., & Affara, F. (2006). *Advanced nursing practice*. Geneva: International Council of Nurses.
- Styles, M. M., & Affara, F. A. (1997). *ICN on regulation: Towards a 21st century model*. Geneva: International Council of Nurses.
- Villeneuve, M., & MacDonald, J. (2006). *Toward 2020: Visions for nursing*. Ottawa: Canadian Nurses Association.
- Winnipeg Regional Health Authority. (2005). *A guide to the implementation of the nurse practitioner role in your health setting*. Winnipeg: Author.
- Winnipeg Regional Health Authority. (2006). *Improve patient care outcomes: Adding a clinical nurse specialist to your team*. Winnipeg: Author.



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