# O R I G I N A L   P A P E R

## Advanced Practice Nursing Roles: The Phases of the Successful Role Implementation Process

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**Abstract**

*Background:*  In a vast amount of international literature, scholars have described the attributes of advanced practice nursing roles; however, fewer have discussed the successful implementation process of these positions within healthcare settings. As several countries are developing or re-examining their advanced practice nursing roles, the successful implementation process is drawing increased attention.

*Objectives:* To explore and describe experts' views on the introduction of advanced practice nursing roles into Finland. The ultimate aim is to describe a nationwide successful role-implementation process.

*Methodology:* A descriptive qualitative study. This is the second part of a nationwide study investigating advanced practice nursing roles. A purposive sampling method was used to recognize expert panelists in the areas of advanced practice nursing. The response rate was 71% (n=25). Data were collected via a Web-based online survey and analysis software. Data was analyzed using qualitative content analysis.

*Results*: Several strategies entail the effective introduction of advanced practice nursing roles. The continuous process of successful implementation includes the phases of establishing, engaging, and securing the advanced practice nursing niche. The role of nurse manager, for example, is essential and the investment of various stakeholders is required to allow these processes to be actualized.

*Conclusions*: Careful planning in introducing these roles will help to create the necessary conditions to support the best development and integration of these roles. Benchmarking national roles and strategies will benefit both national and international advanced practice nursing communities and nursing scholarship.

**Keywords**: advanced practice nursing, clinical nurse specialist, implementing nursing roles, nursing

## Introduction

Advanced practice nursing (APN) roles are multifaceted, contemporary nursing roles. The role's aim is to ensure the provision and access of quality care, to develop the nursing practice and to improve staff competencies, and to retain experienced nurses in the clinical environment (Bryant-Lukosius et al. 2004, Fairley, Closs 2006, Delamaire, Lafortune 2010, Jokiniemi et al. 2012, Roche 2013). APN is beyond front-line nursing (Davies, Hughes 2002, Bryant-Lukosius et al. 2004, Sheer, Wong 2008), and it encompasses the domains of advanced clinical practice, practice development, education, consultation, research, and leadership (Hanson, Hamric 2003, Jokiniemi

et al. 2012, Dowling et al. 2013, Gardner 2013, Roche 2013, Hutchinson 2014), which are utilized in the spheres of patients, nurses/nursing, and organizations/systems (Lewandowski, Adamle 2009, American Nurses Association 2010). Internationally, an advanced practice registered nurse is defined as a masters-prepared nurse with an expert knowledge base, complex decision-making skills, and clinical competencies for expanded practice (ICN 2011). A high level of evidence, shown by vast research of APN, secures these roles' footing and furthermore contributes to their continuous global expansion. APN outcomes include improved quality and accessibility of care with decreased costs, increased patient satisfaction and quality of care, and advancements in hospitals' magnetism and nurses' job satisfaction (Brooten et al. 2004, Naylor et al. 2004, Newhouse et al. 2011).

Over the last hundred years, the APN roles have experienced distinct patterns of evolution (Ketefian et al. 2001, Hanson, Hamric 2003), and today the evolution continues as several countries are developing these roles for nurses in an attempt to answer multiple healthcare demands. As APN roles run through all specialties of nursing and as over 50 countries are currently developing these roles for nurses (Sheer, Wong 2008, Pulcini et al. 2010), these changes are a matter of interest to millions of nurses, nurse managers, policy developers, stakeholders, and the public. Although in some countries these roles have only existed since the 1960s and the 1970s, the global awakening of the APN role introduction emerged around the turn of the century, at which time several European countries, including all Nordic countries, introduced these roles (Lorensen, Jones & Hamilton 1998, Furlong, Smith 2005, Fagerström 2009, Pulcini et al. 2010, Altersved et al. 2011, Doody 2011, Oddsdóttir, Sveinsdóttir 2011, Kennedy 2012, Bonnel 2014, ter Maten-Speksnijder et al. 2014). Today, there is a sizeable amount of international literature on APN roles; thus, one should be able to observe characteristics and behaviors that are distinctive to these practitioners. The strategies and structures to support the role introduction are scarce, yet greatly needed, thus drawing increased attention to the successful implementation process. (Bryant-Lukosius et al. 2004, McNamara et al. 2009, Delamaire, Lafortune 2010, Sangster-Gormley, Martin-Misener & Burge 2013) Prior planning for the advanced practice registered nurses role has been noted as important; nevertheless, lack of

planning and preparation for these roles is evident within local environments (Bryant-Lukosius et al. 2004, Weaver Moore, Leahy 2012). National frameworks are needed to shape and to integrate advanced practice registered nurses' role descriptions, to inform practice and policy development, and to guide curriculum development.

Within the Finnish healthcare setting, too, APN roles were first introduced after the turn of the century (Meretoja 2002, Korhonen 2008, Fagerström, Glasberg 2011). Today these roles are generally consistent with the International Council of Nurses definition and congruent with the international role (Fagerström 2009, Jokiniemi, Haatainen & Pietilä 2014). With the absence of separate legislation, and national policy and regulation (Hukkanen & Vallimes-Patomäki 2005) these roles are, however, regulated by the legislation on registered nurses and guided by individual organizational policies. A national policy Delphi study was conducted in 2013 to shed light on and to inform the APN policy formulation aspirations and the implementation process to assist the consistent national development of these roles. This paper contains a data section extracted from the nationwide policy Delphi study that describes a successful APN role implementation process. Internationally, the study's reflection on an effective APN role introduction is a timely issue and the presented implementation process may offer those wishing to develop such roles a point of reference.

The objective of this study was to explore and to describe the experts' views on the introduction of the APN role with the ultimate aim of describing a successful, nationwide role-implementation process. The research question was: "How is the successful nationwide advanced practice nursing role implementation process described in light of introduction strategies?"

**Methods and materials**

A descriptive qualitative design was used (Sandelowski 2000). The participants were recruited through a purposive sampling method (Panacek, Thompson 2007). The inclusion criteria were 1) position as advanced practice registered nurse, healthcare manager, or advanced practice registered nurse educator and 2) expertise in advanced practice nursing, advanced practice registered nurse management or education, healthcare workforce development, or

international APN roles. Thirty-five experts were recognized through the recommendation of nursing directors in five university hospitals, the National Institute of Health and Welfare, the Ministry of Social Affairs and Health, the nursing trade organization, and the universities and universities of applied sciences. Twenty-five experts, which was a response rate of 71%, responded to Web-based online survey in 2013.

Qualitative data of this sub study was extracted from a nationwide policy Delphi study to perform an in-depth analysis of effective strategies of APN role introduction. The data was analyzed using inductive methods in a qualitative content analysis with the focus on manifest content, the visible, and the obvious components of the texts. The texts were read through several times, and meaningful units of the text (here strategies) were extracted, condensed, and coded, and finally the codes were categorized into subcategories and then into three main categories. (Graneheim, Lundman 2004) The expert panelists (n=25) generated nearly 150 strategies or ideas for successful implementation of the CNS role. These strategies were categorized into three main categories: establishing, engaging, and securing the APN niche. An example of the data analysis process may be seen in table 1.

The study was carried out in accordance with The Code of Ethics of the World Medical Association Declaration of Helsinki (2013). There was no direct patient intervention in this study, hence, according to Finnish law (Medical Research Act 1999/488, 2004/295, 2010/794) and ethical guidelines (2009), an ethical approval was not needed. Research approvals were given by all participating organizations. Prior to the study, the participants were sent a cover letter informing them about the study. Their answering the survey was regarded as their giving informed consent.

## Results

Several strategies are entailed in an effective APN role introduction. After grouping these strategies into subcategories, continuous phases of establishing, engaging, and securing the advanced practice nursing niche started to emerge (Figure 1). All of these phases manifested a continuum with inevitable movement between each phase. The nurse managers' role was seen as imperative thus possibly appearing as the most probable catalyst and agent in the APN role-implementation process. Additionally, investment

from various stakeholders was seen as being required to allow the processes to become actualized. Below, the phases of a successful role implementation process are detailed in more depth.

*Establishment of the APN niche* begins when the need and subsequent goals for individual APN roles against the current care models are recognized. This need analysis should be a foundation for rationalizing any role execution. Following the need analysis, the establishment of the APN role continues with the development of a policy to guide the role's introduction. This should be done in collaboration with stakeholders and should include role definitions, goals, scopes of practice, domains, and competencies, as well as educational requirements. The basis for policy formulation needs to arise from coherently stated national regulations and guidelines.

*"A need for the new roles has to be clearly indicated and shown to central stakeholders..."* (Expert 20)

*"New roles and possible new labor division needs to be planned together with central stakeholders and additionally the multidisciplinary team needs to be informed about the roles and their effectiveness."* (Expert 25)

Additionally, determining nomenclature, driving for national regulation, and being cohesive were categorized as role establishment strategies. All these processes require considerable collaboration between central stakeholders in order to increase engagement and to ascertain as many viewpoints as possible, as the introduction of new APN roles will possibly affect the reorganization or the modification of other positions within an organization. Throughout all of these processes, it is imperative to enforce a level of international cohesion to improve communication, to increase possibilities for conjoint efforts in national role development, and to improve comparability and thereby enable research and nurses' mobility in various national and international healthcare settings. The proposed APN role establishment phases are continuous and move seamlessly between various steps, as appropriate.

*"The legislation should cover the APN position and possible role expansion."* (Expert 25)

*"We need to be in sync with the international APN role, so that we will be understood, and also*

*so that we would speak 'same language' with our international colleagues."* (Expert 6)

*Table 1:* An example of the data analysis process

| Main category | Sub-category | Condensed meaning unit | Examples of extracted data |
|---|---|---|---|
| Securing the APN niche | Anticipate the future | Providing APRN access to new knowledge | "Advanced practice nurses need to be able to access latest nursing procedures." (Expert 23) |
| | | Anticipation of changes and new trends | "To enable advanced practice nurses job, the healthcare changes and new trends need to be taken into account." (Expert 9) |

APN=advanced practice nursing

APRN=advanced practice registered nurse

**Establishing the APN niche**

- **Indicate need** for the basis of setting goals
- **Develop policy in collaboration with stakeholders** to include clear definitions, goals, scope of practice, domains, competencies, and educational requirements
- **Determine nomenclature** to include various sub-roles
- **Drive for national regulation** specifying standards and requirements for licensure and education
- **Be cohesive** to allow communication and cooperation

**Securing the APN niche**

- **Strengthen evidence base** by utilizing EBP and research. Also ensure data gathering to enable evaluations.
- **Identify risks** impairing advanced practice nurses' performance
- **Anticipate the future** to assure cutting edge performance
- **Be involved in policy building** to ascertain participation in role designing

**Engaging the APN niche**

- **Advocate role to healthcare** in order to specify and justify roles and inform staff
- **Educate society** about the roles and their possibilities
- **Commit organization** with the aim of creating and determining role positions, clarifying expectations, and allocating sufficient resources
- **Implement roles** to support organizations performance and achieving of goals
- **Ensure advanced practice nurse knowledgebase** to ascertain advanced know-how and continuous learning
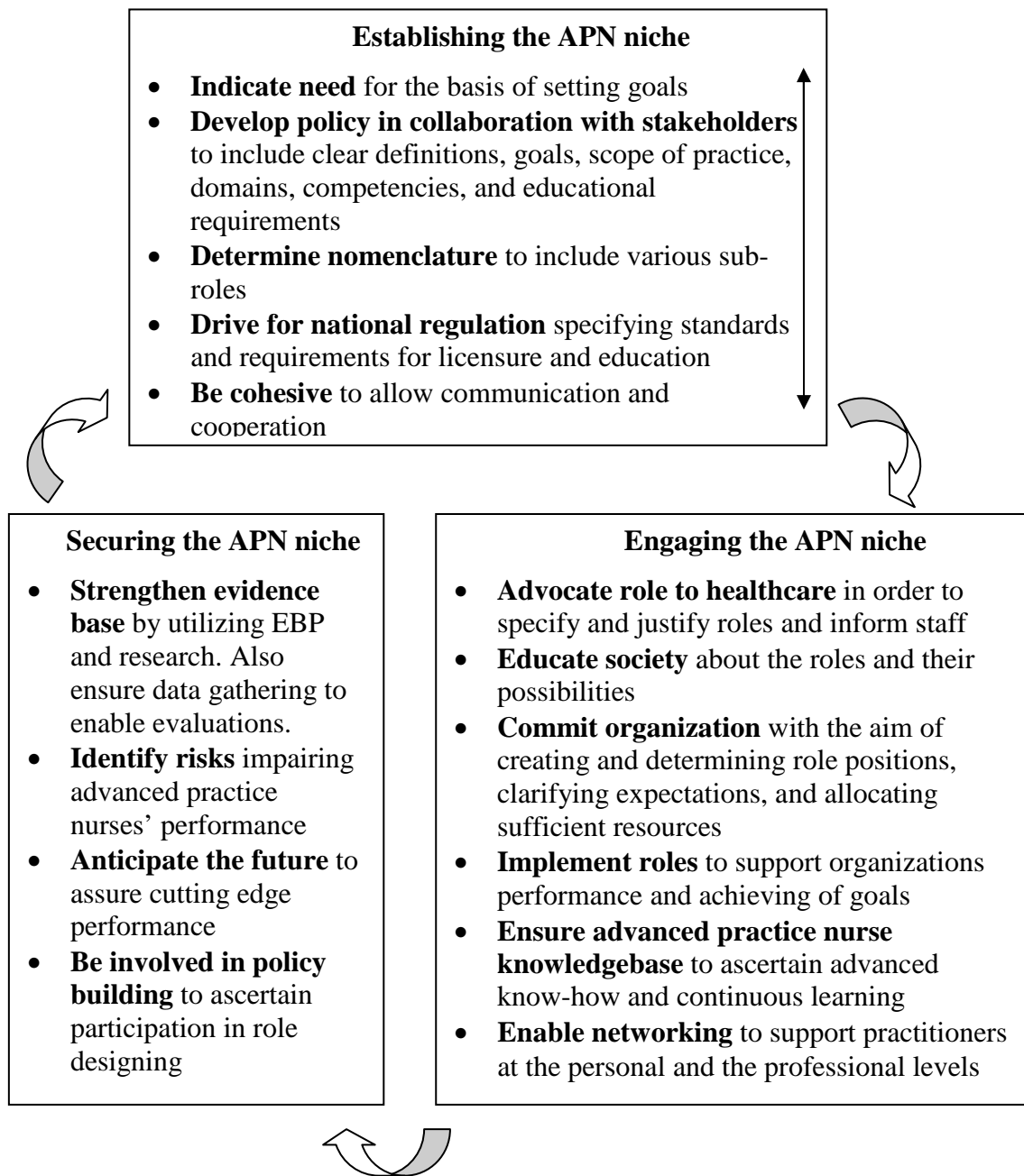- **Enable networking** to support practitioners at the personal and the professional levels

*Figure 1*: Continuous process of establishing, engaging and securing the advanced practice nursing niche

APN= advanced practice nursing
EBP= evidence based practice

*Engaging of the APN niche* includes advocating the designed role to the wider healthcare spectrum, educating society about the roles, committing the organizations to the implementation process, implementing new roles, ensuring APN knowledgebase and enabling networking. The informing of patients, nurses, multidisciplinary teams, and organizations is required to specify and justify these roles as important additions to the current care design. Only after people know about these roles and their possibilities can they begin to appreciate and insist on the care of and collaboration with these practitioners.

*"People need to be informed about the role...our own profession, multidisciplinary team, patients, community... we need to make people want this role"* (Expert 20)

Committing organizations on multiple levels begins the role establishment phase through collaborative participation in role designing, and it continues with creating and determining positions and expectations, allocating sufficient resources, and informing staff about the new roles.

*"More APN positions with clear job descriptions and entry requirements, which are in line with national and international competency descriptions, need to be created."* (Expert 3)

*"Appreciation of the APN roles is important. This should be seen in both role positions as well as in remuneration."* (Expert 6)

Furthermore, an implicit organizational perquisite of the role success and implementation is the manager's support and networking opportunities with various affiliates. Finally the nationally defined APRN career programs and opportunity for continuous education will help the achievement and sustainment of these practitioners' advanced knowledgebase be ascertained.

*Securing the APN niche*: A final phase of the implementation process, includes strengthening the evidence base, identifying risks, anticipating the future, and being involved in policy building. Strengthening the evidence base of the APN roles involves both utilizing the EPB procedures and research in APN practice as well as gathering the data to enable an evaluation of the APN role achievement. Supporting the actualization of these strategies requires assurance of APN research and EBP skills as well as prior planning of evaluation

strategies. Additionally, close cooperation with research resources, such as universities, has been recognized as important.

*"The reduced healthcare resources and the following requirement for increased effectiveness need to be taken into consideration when designing these roles. We need clear evidence about the necessity and efficacy of these positions in patient care."* (Expert 7)

Furthermore, the identification of possible distractions, risk factors, from the advanced practice nurses' performance in their roles was identified as significant in securing the APN niche. These risk factors need to be recognized and responded to in order to ensure early intervention. Finally, anticipating the future and being involved in organizational and national policy building with central stakeholders to assure cutting edge performance and ascertaining participation in future role design were also recognized as crucial in securing the APN niche in healthcare and in the community.

**Discussion**

The aim of this study was to explore and to describe the strategies that lead to a successful implementation of the advanced practice registered nurses role. Based on the findings of this study, the successful implementation process includes the phases of establishing, engaging, and securing the APN niche, where several strategies are utilized to introduce the role effectively into healthcare settings. These study's findings are congruent with earlier papers that have reported APN implementation (Bryant-Lukosius, DiCenso 2004, Sangster-Gormley et al. 2011, Wintle, Newsome & Livingston 2011). Although this was a national study, benchmarking these strategies at the national level will offer a foundation for countries developing these roles; thus, the results may be utilized in other countries and benefit both the national and the international APN communities as well as nursing scholarship.

As several healthcare settings in many countries are developing APN roles, it is essential to recognize the strategies and structures supporting the effective introduction of these roles. Although the systematic introduction of these positions is recognized as important, it does not always occur (Weaver Moore, Leahy 2012). To successfully implement the APN roles into practice setting is a complex process that is influenced by numerous factors. Adding a new role into setting where

recognized roles and work patterns already exist is neither simple nor straightforward. (Sangster-Gormley et al. 2011) The development of APN roles will face many hurdles, from role designing, evaluation, and validation of such roles. To help overcome these hurdles, utilizing a framework, such as the one proposed in this study can help organizations be better guided and prepared for the upcoming development processes. (Weaver Moore, Leahy 2012, Hutchinson 2014). Nevertheless, in many countries the absence of policies and frameworks to support this role's development has led to an insufficiently designed role introduction (Bryant-Lukosius et al. 2004, Furlong, Smith 2005, Kilpatrick et al. 2013, Rounds 2013). With the absence of policies and without careful consideration of the factors hindering role achievement, the benefits of this position will be hampered.

Factors at the individual, at the organizational, and at the community levels can create barriers but can also facilitate a successful role implementation (Sangster-Gormley et al. 2011, Jokiniemi, Haatainen & Pietilä 2014). Central strategies recognized by this study to facilitate an effective role introduction include but are not limited to: need analysis, collaboration, national consensus on central role attributes, reforming of healthcare roles, informing about new roles, national and international cohesion, manager support, and role evaluation. Collaboratively planning and implementing these roles will ensure rapport between the key stakeholders. Stakeholder involvement in the implementation process promotes role clarity within local environments thus allowing a common understanding and shared vision, which are necessities of the role, to emerge (Bryant-Lukosius, DiCenso 2004, Sangster-Gormley et al. 2011). Conjointly agreed role attributes will help policy makers to define the role and its competencies, educators to develop curriculums, and people to understand what the advanced practice registered nurse is and what these nurses do, thus assisting consistent understanding and positive role evolution. (Ketefian et al. 2001, Daly, Carnwell 2003, Glover et al. 2006, Humphreys et al. 2007, Mantzoukas, Watkinson 2007, Lewandowski, Adamle 2009). Additionally, the role needs to be actively promoted to increase the awareness of the role within multidisciplinary teams and among patients. Only after people know about these practitioners can they begin to demand their care and collaboration.

The study's limitation is the small number of informants and thus relatively little data. Data analysis was based only on written material from open-ended questions. Individual or group interviews, would have amplified the data and subsequent illustration of a successful role implementation process. Additionally, the produced implementation process was not altered for participant validation which would have increased the validity of the findings and enabled further development of the successful implementation process description. Furthermore, the proposed implementation process needs to be validated and elaborated through further empirical research.

## Conclusion

Advanced practice nursing has an inherent value in that it contributes to healthcare accessibility, quality, and cost, benefits which are not to be underestimated. The development of APN roles and their successful implementation require continuous concept clarification, policy and regulatory preparation, collaboration, and cohesive procedures to effectively introduce and secure these roles in healthcare settings. The results of this study will inform the organizations that are introducing APN roles about the strategies of successful role implementation. Careful planning in introducing this role will help to create necessary conditions that support the role's development and integration. Benchmarking the national roles and strategies to blueprint, introduce and secure these roles will benefit national as well as international APN communities with increased common understanding, cohesive communication, and the positive evolvement of these roles.

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