

# The Way to Regulation of APN Roles – Project Planning

## Project partners

- *Fachkonferenz Gesundheit (FKG) der Fachhochschulen / Conférence spécialisée Santé (CSS) des Hautes Ecoles Spécialisées*
- *Institut für Pflegewissenschaft (INS), Universität Basel*
- *Institut universitaire de formation et recherche en soins (IUFRS), Université de Lausanne*
- *Schweizer Berufsverband der Pflegefachfrauen und Pflegefachmänner (SBK) / Association suisse des infirmiers et infirmières (ASI)*
- *Schweizerischer Verein für Pflegewissenschaft (VFP) / Association suisse pour les sciences infirmières (APSI)*
- *Swiss ANP (Interessengruppe / Groupe d'intérêt commun Advanced Nursing Practice)*
- *Swiss Nurse Leaders.*

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## 1. Introduction

### 1.1 Rationale for this Project

Due to demographic developments and the increase of non-communicable diseases NCDs, the Swiss health system faces new challenges. The increased care needs of an aging population suffering from, e.g. diabetes, cancer, depression, dementia as well as polymorbidity, require new models of care based on coordination and continuity of care, self-management support and interprofessional collaboration. Within these new models of care, due to their specific educational profile, Advanced Practice Nurses (APNs) play a central role (Schweizerische Gesundheitsdirektorenkonferenz & Schweizerisches Bundesamt für Gesundheit, 2012). The contribution of Advanced Practice Nurses to an affordable, easy accessible and patient- and family-centred health care focusing self-management, continuity, coordination, and interprofessionality has also gained momentum in Switzerland within the last years. International experiences and a variety of research findings as well as different national pilot projects have demonstrated that APNs can contribute substantially to high quality health care (Imhof, Naef, Wallhagen, Schwarz, & Mahrer-Imhof, 2012; Johnson, 2015; Moore & McQuestion, 2012; Newhouse et al., 2011; Skilbeck & Payne, 2003; van der Biezen et al., 2016). It has been shown that APNs are beneficial in acute care, long term care as well as in primary care (Bryant-Lukosius et al., 2015; van der Biezen et al., 2016). However, in order for APNs to unfold their full scope of competencies and to meet the needs of the population, the health care system and the patients, role clarity constitutes a core element. The regulation of APN roles is one step toward achieving role clarity on the structural level. This has been shown to be pivotal for quality assurance adding to patient safety and is found to be of utmost importance to increase role acceptability by health care professionals as well as patients and families (Bryant-Lukosius et al., 2015; Burgt, Roi, Derckx, & Meuleoas, 2015; Freund et al., 2015; Martínez-González et al., 2014; Ullmann et al., 2017).

In September 2016 the Swiss parliament voted on the law for health professionals on undergraduate (BSc) level. This law represents a legal basis provision for the accreditation of educational programs at university level, the regulation of independent practice, as well as a register for all nurses. Currently, the necessary bylaws and regulations are being prepared. The implementation of the law for health professionals is expected by 2020. Nursing stakeholders lobbied together to additionally obtain a legal basis provision for a separate regulation of the APN role, which is per definition a role on Master's level.

The Swiss National Parliament eventually did not agree to include a separate regulation of APN in the law for health professionals. However, the joint efforts of the nursing stakeholders and allied health professionals led to more awareness for the necessity of definition and regulation of the APN roles. Therefore, the proposed project targets the development of a regulatory framework to capture the developing APN roles, the definition of a self-regulatory body, and adds to clarity of educational and clinical requirements to register as an APN.

## 1.2 Background

### APN Workforce

Graduate education at university level with a clinical focus leading to a Master of Science in nursing degree – which is required as a prerequisite for Advanced Practice Nursing – is available in Switzerland since 2000. Due to a high need of highly qualified nurses in clinical practice, several programmes have been implemented and nowadays several hundred nurses have attended a clinically focused Master of Science in Nursing programme at the University Basel, the University Lausanne, the Universities of Applied Sciences in Winterthur, St. Gallen and Bern, leading to broader and more profound nursing knowledge and skills. Most recently also the private University of Applied Sciences Kalaidos in Zürich offers a clinically focused track in their educational programmes. Therefore, a growing number of APNs are entering the workforce and need a regulatory framework to negotiate job descriptions and to assume responsibilities toward employers, patients and families.

### Career Pathway

APNs with a specialised and expanded clinical practice are well prepared to take on new roles in the interprofessional teams in integrated care models which include responsibility for coordination and care management. Currently many nurses have already obtained specialty education (e.g. MAS in gerontological care, oncology care, intensive care or wound management) and make an important contribution to high quality health care services. A gap exists between these specialists' education and APN requirements. Therefore, an additional and appropriate educational pathway to obtain graduate education leading to a Master of Science in Nursing degree is needed. A regulatory framework is necessary to define the gaps and to develop the appropriate programs.

### Professional Associations and Universities create APN Task Force

The nurses' associations VFP-APSI, IG swissANP and SBK-ASI have a solid history of joint action for the positioning of APNs in the Swiss health system. Since in 2011 differing definitions and position papers prevented the Swiss nursing community from being heard and respected, the above-mentioned associations, the IUFRS and the universities of applied sciences decided to speak with one voice. Together they created the APN Task Force, and agreed on one document, which describes the common vision on the cornerstones for APN in Switzerland<sup>1</sup>.

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<sup>1</sup> [http://www.swiss-anp.ch/fileadmin/3\\_ANP\\_Berufsrolle/2012\\_EckpunktepapierANP.pdf](http://www.swiss-anp.ch/fileadmin/3_ANP_Berufsrolle/2012_EckpunktepapierANP.pdf)

The document includes the following definition:

*“Eine **Pflegeexpertin APN** ist eine registrierte Pflegefachperson, welche sich durch akademische Ausbildung, Expertenwissen, Fähigkeiten zur Entscheidungsfindung bei hoch komplexen Sachverhalten und klinische Kompetenzen für eine erweiterte pflegerische Praxisangeeignet hat. Pflegeexpertinnen APN sind fähig, in unterschiedlichsten Settings vertiefte und erweiterte Rollen zu übernehmen und diese in eigener Verantwortung im interprofessionellen Team auszufüllen. Die Kernkompetenzen einer Pflegeexpertin APN sind: direkte klinische Praxis, Experten-Coaching,*

*Beratung, Ethische Entscheidungsfindung, interdisziplinäre Zusammenarbeit, klinisches und fachspezifisches Leadership und Forschungskompetenz.*

**Voraussetzung** für die Anerkennung und Registrierung als Pflegeexpertin APN ist ein Master in Pflegewissenschaft (mindestens 90 ECTS) mit einem APN-Fokus, der für eine vertiefte und erweiterte Pflegepraxis vorbereitet. Für den Titelerhalt sind der regelmässige Nachweis von kontinuierlicher Weiterbildung nach Vorgaben des aktiven Berufsregisters und der Nachweis regelmässiger direkter klinischer Praxis notwendig.”

*«Une infirmière de pratique avancée APN est une infirmière enregistrée qui, par sa formation académique, a acquis un savoir d’experte ainsi que les aptitudes nécessaires pour prendre des décisions dans des situations complexes et qui possède des compétences cliniques indispensables à un exercice professionnel infirmier avancé. Les infirmières de pratique avancée APN sont capables, dans des situations les plus diverses, de se charger de rôles avancés et élargis, ce qu’elles assument sous leur propre responsabilité au sein d’une équipe interprofessionnelle. Les compétences clés d’une infirmière de pratique avancée APN sont: la pratique clinique directe, le coaching en tant qu’experte, la consultation / guidance, le processus de la prise de décision éthique, la collaboration interdisciplinaire, le leadership clinique et spécialisé et les compétences en matière de recherche.*

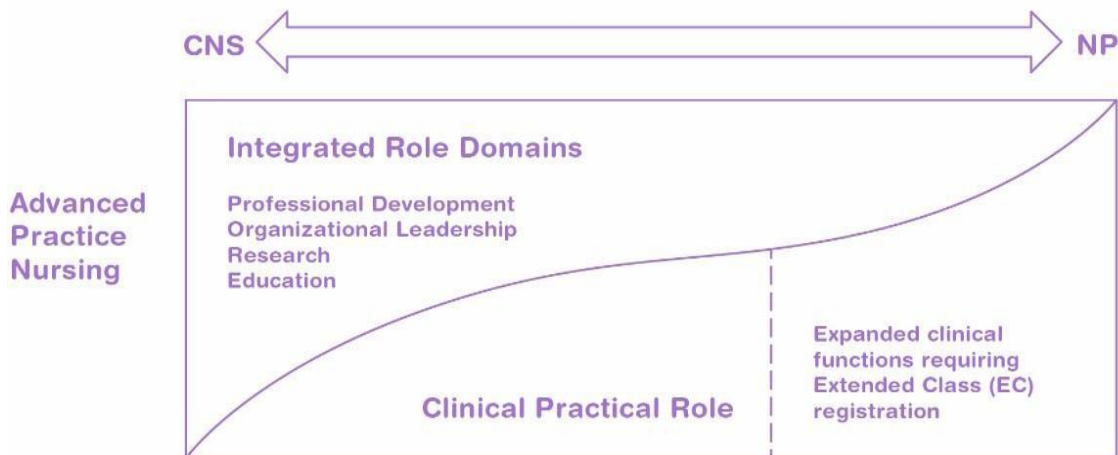
*Pour obtenir la reconnaissance et l’enregistrement en tant qu’infirmière de pratique avancée APN, il faut être titulaire d’un Master en sciences infirmières (d’au minimum 90 ECTS) avec un focus en pratique infirmière avancée (APN) qui prépare spécifiquement à un exercice professionnel avancé et élargi. De plus, pour conserver ce titre, il est nécessaire d’apporter la preuve régulière d’une formation continue prise au sens des prescriptions du registre professionnel actif, ainsi que la preuve d’une pratique clinique directe régulière.»*

Thus, a basis has been set and a common understanding has been developed. There is a need to perpetuate the shared understanding of defined roles, the necessary regulation and the regulatory body. The APN Task Force has been started in 2012. Since then all nurse key stakeholders became eventually Task Force members and are the project owners.

### 1.3 Future Perspectives for the Swiss Context

Bryant-Lukosius (2004&2008) has defined Advanced Practice Nursing on a continuum between the role of Clinical Nurse Specialist and Nurse Practitioner, and internationally, a variety of APN roles have been described and developed according to the health care needs of the different countries and populations.

#### Continuum of APN Roles



Bryant-Lukosius, D. (2004 & 2008). The continuum of advanced practice nursing roles. Unpublished document.

Within this continuum, several profiles can be defined. However, despite differences in role components and the main addressees in daily practice, all these ANP roles focus on providing direct care to patients and families in complex health conditions.

In Switzerland, the development of two main APN profiles can be observed: the clinical nurse specialist CNS and the nurse practitioner NP. Both, clinical nurse specialist and nurse practitioners, work clinically with patients and their families. However, nurses working in these two profiles have different task allocation and responsibility in their daily work. Whereas the clinical nurse specialist is often responsible to provide care standards for the organisation and to coach nursing colleagues in their work, the nurse practitioner has its emphasis primarily on care delivery to patients and families and to a lesser extend coaching and development tasks toward nurses and other health professional colleagues. The members of the APN Task Force agree and propose that both roles should be regulated within one framework such as Hamric et al. or the Canadian framework.

## 2. Overall Goal and Objectives

The overall goal of the proposed project is the regulation of the roles of Advanced Practice Nurses APNs, including both profiles clinical nurse specialists (CNS) and nurse practitioners (NP) in order to contribute to high quality health care for all residents of Switzerland in the future. For the definition of the scopes of practice interprofessional discussion with other providers is essential.

### Objective 1

The role profiles of the clinical nurse specialist CNS and the nurse practitioner NP are defined within one APN framework (e.g., Hamric et al. or the Canadian framework).

The scope of practice, based on patient needs, is discussed with the other main providers in the same field.

### **Objective 2**

Main elements of the regulation of APNs (CNS and NPs) are formulated. They may include the following fields:

- Education
- Work experience
- Professional practice
- Continuous professional development CPD
- Title protection
- Course accreditation
- Possible federal examination
- Pathway for specialist nurses
- ...

### **Objective 3**

Requirements for a regulatory body and its elements are formulated. Such a regulating body is in place, and may include the following fields:

- A responsible organ
- An expert commission
- An implementing structure
- A sustainable financing model
- ...

### **Objective 4**

The connection and harmonisation with health system developments and political environment is made by monitoring, communication and stakeholder involvement.

## **3. Close Link between APN Role Development and Political Lobbying**

To position Advanced Practice Nursing as an important player for access and quality and safety in healthcare, there is a need for a twofold process, in the political and in the technical/professional fields. Some activities are taking place at the same time; others might be dependent on the successful completion of earlier activities. The role definition and examples of practical implementation of APN roles in Switzerland are needed for convincing politicians and authorities. Only the openness of decision makers and therefore continuous information from the nurses' side leads to an openness to allow pilot projects and the development of the necessary legal and financial framework to make the APN roles sustainable and attractive for nurses, patients and potential employers.

## **4. The Project and its Planning**

### **4.1 Principles**

Regarding the expected importance of APN in Switzerland for the future, it is essential to have harmonised common and shared positions within the nursing profession. Hence, a culture of consensus is paramount. In the Swiss context, the APN's scope of practice actually needs to be negotiated in each setting or even each workplace between APNs, physicians and employers. Regulation is the basis for independent practice, adequate financing and determination of the scope of practice. Therefore, in the course of the project employers and the physicians' specialist groups will be timely included in feedback loops and consensus processes.

Additionally, the project will be influenced by political and other developments. Therefore, it is useful to work with a rolling wave planning, to set milestones and specify activities year by year.

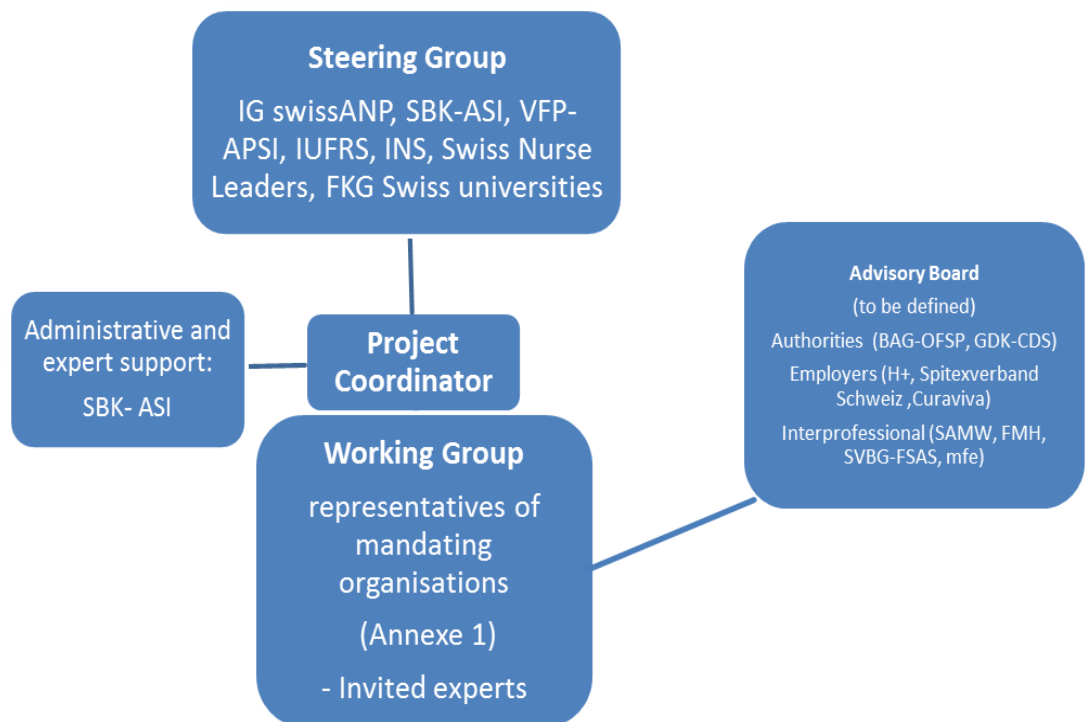
At the end of every working year the steering group meets and endorses a short report about the finishing year and agrees with the planning of the following year. The first working year begins with the kick off meeting on September 19<sup>th</sup> 2017 and ends on September 18<sup>th</sup> 2018.

## 4.2 Foundations

This document is based on the project concept (2.7.2017) prepared by the APN Task Force for decision making in the individual organisations. Common documents published and decisions already taken by the mandating organisations as well as the work relationships within the APN Task Force are important and the fundament for this project. This includes the “Eckpunkte Papier/cornerstone document”, developed by the Task Force in 2013.

Monitoring of the environment, and the integration of relevant developments, e.g. at national or at EU level, is necessary. For 2017 the coordination and integration with the project “definition of masters-competencies” by the conference of the health departments at the Swiss Universities of Applied Sciences (mandated by the federal office of public health) is essential.

## 4.3 Structure of the Organisation



## 4.4 Role and Tasks of Each Element of the Project Organisation

### ***Steering group***

- one person per mandating organisation
- elects a chairperson at the beginning of each meeting
- mandates the members of the APN working group to plan and implement the project
- endorses the overall project planning
- decides on the annual budget
- decides on major changes of the project planning
- endorses the annual work plan and annual project report
- endorses the final overall project report
- decides on further steps, such as planning of the implementation of APN regulation
- decides by simple majority

### ***Working group***

- all project owners are represented
- prepares the annual work plan
- implements the annual work plan
- has a culture of shared decision shaping and consensus
- prepares annual report for feed back to the steering group
- contributes its expertise to all documents and activities
- feeds back to the mandating organisation on a regular basis
- is present during steering group meetings
- decides on milestones
- decides by simple majority

### ***Project coordinator***

Is also a member of the working group and has the following additional tasks:

- coordination
- detailed planning of work packages and meetings
- drafting project documents
- organising meetings of steering group, working group and advisory board
- communication with external stakeholders and the public

### ***Administrative and expert support***

- Support of project coordinator and the working group
- Participation in all meetings
- Preparation of documents, minutes, etc.

### ***Advisory board***

Is constituted of representatives of various stakeholder organisations with the objective to contribute and give views through hearings and written consultations. The working group decides when such consultations should take place.

### ***Language of documents and meetings***

The project planning document is in English. Other documents, such as annual work plans, will be prepared in German; important further documents will be translated into French. The steering group meetings can be held in English, French or German. No resources for simultaneous translation are budgeted.

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