



POSITION STATEMENT

Advanced Practice Registered Nurses in Occupational Health Settings

INTRODUCTION

The advanced practice nurse role was first developed in 1965 by Loretta Ford to fill a critical need for primary care providers for pediatric patients in Colorado (Ridgway, 2013). Since then advanced practice nurses have progressively expanded their role to include several specialties and a skill set extending beyond health promotion and disease prevention to management of acute and chronic health issues in primary, acute and long term care settings. Approximately 222,000 nurse practitioners are practicing throughout the United States, with approximately 20,000 new nurse practitioners joining the workforce annually (AANP, 2017).

Advanced Practice Registered Nurses (APRNs) are integral members of the healthcare team providing direct patient care. APRNs include: Certified Nurse Practitioners (CNP), Certified Nurse Midwives (CNMs), Certified Registered Nurse Anesthetists (CRNAs), and Clinical Nurse Specialists (CNSs) (APRN Consensus Work Group, 2008). The most common APRN found in occupational health settings is the Nurse Practitioner.

RATIONALE

Education, licensing, accreditation, and certification are components of APRN preparation as determined by state nurse licensing boards. Each state independently determines the APRN scope of practice, the criteria for entry into advanced practice nursing and if national certification examinations are required. Regulation at the state level ensures patient safety while simultaneously expanding access to patient care.

The Consensus Model for APRN Regulation: Licensure, Accreditation, Certification and Education (2008), which has been endorsed by 41 nursing

Organizations defines APRN practice, describes the APRN regulatory model, identifies the titles to be used, defines specialty, describes the emergence of new roles and population foci, and presents strategies for implementation. These include:

- Licensure grants authority to practice
- Accreditation is the formal review and approval by a recognized agency of educational degree or certification programs in nursing or nursing-related programs.
- Certification is formal recognition of the knowledge, skills and experience demonstrated by achievement of standards identified by the profession.
- Education is formal preparation of APRNs in graduate degree-granting or post-graduate certification program.

The *National Institute for Occupational Safety and Health* (NIOSH) advocates for nursing by funding nursing education in advanced practice roles specifically for occupational health settings through their Education and Research Centers (CDC, 2013).

Certification for Nurse Practitioners is population-focused (e.g. family, pediatrics, adult/gerontology) and examinations can be taken at entry into practice from the *American Nurses Credentialing Center*(ANCC) or the *American Academy of Nurse Practitioners* (AANP). All certifications require continuing education and active practice with periodic reviews by the certifying agency. The *American Board for Occupational Health Nurses* (ABOHN) (2016) offers an expert nurse certification examination (COHN-S) to eligible nurses (practice experience in occupational health is required) with a Bachelor's degree or higher; being an APRN is not required to qualify for this test, however ABOHN certification recognizes APRNs' expertise in occupational health nursing

Based on AAOHN Standards of Practice (AAOHN, 2012): for the Occupational Health (OH) nursing specialty, the APRN enhances the function of the OH department with the following capabilities

- Assessment: Systematically assesses the health status of the client(s), including ordering and interpreting tests and procedures relevant to the client's current

status.

□ **Diagnosis:** Analyzes assessment data to formulate diagnoses;

- Systematically comparing and contrasting normal and abnormal variations and developmental events in formulating differential diagnoses. ;
- Utilizes complex data and information obtained during interview, examination and diagnostic processes in identifying diagnoses.

□ **Outcome** Identifies outcomes specific to the client(s) Uses advanced practice knowledge to collaboratively develop expected worker outcomes that are derived from the diagnoses, measurable, modifiable according to status changes, and culturally appropriate, realistic, and attainable.

□ **Planning:** Develops a goal-directed plan that is comprehensive and formulates interventions to attain expected outcomes.

- Identifies assessment, diagnostic , and therapeutic interventions including prescribing medications based on current evidence-based practice and clinical knowledge;
- Creates inter-professional processes within the plan to address the current diagnoses.

□ **Implementation:** Implements interventions to attain desired outcomes identified in the plan.

□ **Evaluation:** Systematically and continuously evaluates responses to interventions and progress toward the achievement of desired outcomes.

□ **Resource Management:** Secures and manages the resources that support occupational health and safety programs and services.

□ **Collaboration:** Participates as a team leader and/or member, in providing health and medical care and interacting with professional colleagues to ensure comprehensive care delivery.

□ **Research:** Uses research findings in practice and contributes to the scientific base of occupational and environmental health nursing to improve practice and advance the profession.

□ **Ethics:** Uses an ethical framework for decision-making in practice.

CONCLUSION

APRNs are prepared through education and training to provide initial, ongoing and comprehensive care. Obtaining comprehensive histories, conducting physical examinations as well as other screening and diagnostic testing are foundational to accurate diagnosis and treatment of workers with undifferentiated symptoms as well as those with established diagnoses. APRNs work collaboratively in inter-professional teams to provide care and promote health and safety of workers, their employers and the greater community.

REFERENCES

American Association of Nurse Practitioners (2017). AANP celebrates 75,000 member milestone. AANP. Retrieved from aanp.org/press-room/press-releases/192-press-room/2017-press-release2082-aanp-celebrates-75-000-member-milestone

American Board for Occupational Health Nurses, Inc. (ABOHN) (2016). COHN/COHN-S eligibility. Retrieved from <https://www.abohn.org/certification/cohncohn-s-eligibility>

American Nurses Credentialing Center. Retrieved from <http://www.nursecredentialing.org/APRNR-regulation-Consensus.pdf>

AAOHN (2012). Standards of Practice. Retrieved from <http://aaohn.org/p/cm/ld/fid=1069>
<http://www.aaohn.org/practice/standards.html>

APRN Consensus Work Group and the National Council of State Boards of Nursing APRN Advisory Committee (2008). *Consensus Model for APRN Regulation: Licensure, Accreditation, Certification and Education*. APRN Joint Dialogue Group Report, July 7, 2008. Retrieved from https://www.ncsbn.org/Consensus_Model_for_APRN_Regulation_July_2008.pdf

Centers for Disease Control and Prevention National Institute for Occupational Safety and Health Training Programs. Retrieved from <https://www.cdc.gov/niosh/oep/centers.html>

Ridgway, S. (2013). Loretta Ford founded nurse practitioner movement. Working Nurse. Retrieved from <http://www.workingnurse.com/articles/Loretta-Ford-Founded-Nurse-Practitioner-Movement>

07/17 (AAOHN Practice Committee)