The Scope and Standards of Nursing Professional Development Practice

**Overview of Nursing Professional Development**

The American Nurses Association (ANA) defines the Standards of Practice for all professional nurses. Nursing specialties may elect to further define the expectations, based on expertise from within. The Association for Nursing Professional Development (ANPD) is the professional organization that advocates for nursing professional development practice, consistent with the ANA Code of Ethics for Nurses Provision 7 (ANA, 2015, p. v).

Nursing professional development is a specialized nursing practice that facilitates the professional role development and growth of nurses and other healthcare personnel along the continuum from novice to expert (Benner, 1984). Functioning in the intertwined roles of change agent, mentor, facilitator of learning, leader, advocate for the NPD specialty, champion of scientific inquiry, and partner for role transitions, the NPD practitioner draws on adult learning theories, experience, knowledge, and evidence-based practice to transform learning.

Building on a strong and proud past (ANA 1974; 1984; 1990; 1994; 2000; ANA & ANPD, 2010), the 2016 revision of the Scope and Standards describes current practice and examines trends to forecast the future of the NPD specialty. Based on the findings of the NPD Role Delineation Study (Warren & Harper, 2015), specific consideration has been given to interprofessional education and collaboration along with delineation of NPD practitioner roles and levels of practice. In this edition of the Scope and Standards, emphasis is placed on the NPD professional's role in:

- transitioning roles and practice,
- managing change,
• championing scientific inquiry
• interprofessional collaboration, and
• advocating for the profession as a leader and mentor.

Another major change in the 2016 Scope and Standards builds on the recognition that NPD practice varies depending on the practice setting, the population of the learners, and the knowledge, educational level, and experience of the nurse functioning in the NPD role. Therefore, addressing the NPD role from a singular, general perspective is no longer feasible or reflective of practice. The 2016 Scope and Standards differentiates “basic” competencies and competencies demonstrated by the graduate prepared specialist, including a definition of the “NPD generalist” and “NPD specialist.” This differentiation clarifies and defines advancement in the role of the NPD professional in alignment with the American Nurses Association (ANA) Nursing Scope and Standards of Practice (2010) and the Institute of Medicine (IOM) Future of Nursing (2010) recommendations. The goal of the 2016 edition of the Scope and Standards is to provide the NPD practitioner with a futuristic guide that defines the who, what, where, when, why, and how of the NPD specialty.

Nursing Professional Development Practice Evolution

In the 2000 and earlier editions of the Scope and Standards, nursing professional development practice was conceptualized as interactive domains of staff development, continuing education, and academia. Over the past fifteen years, a major evolution in NPD practice has occurred as reflected in the change from a model of interactive domains to a systems model.

In 2010, the most profound transformation of NPD practice had been within the staff development domain and technology. Now, the focus on interprofessional education
and collaboration is further transforming NPD practice. While the need for NPD practitioners to use their expertise in the educational process to create change and promote quality in the practice and learning environments remains, the prior focus on nurses has expanded to encompass the entire healthcare team.

Due in part to advances in science and technology, people are living longer, have complex health needs and co-morbidities, and are being seen in their homes, community centers, independent living facilities, assisted living facilities, and skilled nursing facilities in addition to traditional acute, sub-acute, and ambulatory settings. The IOM (2003) suggested that interprofessional teams of healthcare professionals can best collaborate and effect positive outcomes for those with challenging needs. While in the past the NPD practitioner focused mainly on the education and professional development of nurses, the trend now is on interprofessional continuing education (IPCE) where members from two or more professions learn with and from each other. This interprofessional focus allows for deeper understanding, appreciation, shared values, and respect for other healthcare professionals (Interprofessional Education Collaborative Expert Panel, 2011).

In addition to interprofessional collaboration, the IOM (2003) recommended a focus on evidence-based practice (EBP). Evidence-based practice integrates the best research evidence, clinical expertise, and patient values to facilitate decision-making (Schmidt & Brown, 2015). Though EBP has been increasingly emphasized as a driver of healthcare since the 1990's, barriers still exist to its full implementation. The NPD practitioner is challenged to deal with these identified barriers including the lack of knowledge and access to evidence-based practice, time, organizational culture, and leader resistance (Melnyk, Fineout-Overholt, Gallagher-Ford & Kaplan, 2012).
As a facilitator, champion, and leader of interprofessional education and EBP, the NPD practitioner must lead change and advance health. The IOM (2010) Future of Nursing report states “nurses have great potential to lead innovative strategies to improve healthcare” (p. 124). While this potential has expanded immensely since the 2010 report, much work remains. As a result, the NPD scope of practice has evolved.

The Scope of Practice for Nursing Professional Development

The scope of practice for the nursing professional development (NPD) practitioner supports the changing landscape in health care. The NPD Scope of Practice defines the who, what, where, when, why, and how that drive nursing professional development practice. As governing bodies, regulations, health policy, technological advances, and consumer awareness continue to evolve, so do the expectations, requirements, demands, and responsibilities of the NPD practitioner, thus requiring the scope of practice to broaden. In alignment with the broadened scope, the NPD practice model has also been revised.

The NPD Practice Model is a systems model. (See Figure: Nursing Professional Development (NPD) Practice Model.) Based on the work of Katz and Kahn (1978), open systems theory encompasses structures, relationships, and interdependence. Characteristics of open systems include inputs, through-puts, and outputs that occur in a cyclic pattern. Inputs consist of items imported from the external environment such as supplies or human resources. Through-put involves the work that is conducted within the system to transform the input. The output is the product that is exported into the environment. This output, in turn, provides feedback to the environment and the cycle begins again.
The following content defines the diverse dimensions of the scope of practice as depicted in the NPD practice model.

**NOTE:** The model is a rough draft that will be sent to a graphic designer for final copy. An easier to view copy is available at: [insert link]

### Where: NPD Practice Model Environment

All NPD activities occur in the context of interprofessional practice and learning environments. The NPD practitioner and learner operate in these two environments that have fluid and evolving boundaries. The NPD practice environment may overlap with the learner’s environment. In the NPD Practice Model, the environment is represented by the rectangular background and represents the “where” of the NPD scope of practice.

The interprofessional practice environment consists of the structural, social, and cultural setting in which healthcare occurs. This environment is multidimensional and is subject to local, state, regional, national and international regulations, initiatives, and
108 trends. It creates the context that influences practice behaviors and outcomes. The professional development system is dependent on the material and human resources that exist within the practice environment. The NPD practitioner promotes a healthy practice environment through transformational leadership and support of collaborative relationships.

113 The interprofessional learning environment is any context in which learning occurs. This environment may overlap with the practice environment. It is not limited to a physical classroom but includes alternate settings including virtual ones.

116 Examples of these environments may include, but are not limited to:

Practice environments – any environment in which healthcare is delivered to individuals, families, and communities including, but not limited to:

119 • Academic institutions

120 • Community-clinic settings – (such as, but not limited to)

121 • Home health

122 • Hospitals

123 • Long term care including skilled nursing, assisted living, and independent living facilities

125 • Mental health facilities

126 • Outpatient/Ambulatory clinics

127 • Public health

128 • Schools

129 • Virtual health

130 • Any setting where NPD practitioners support quality outcomes
Learning environments – any environment in which NPD practice is delivered, including, but not limited to:

- Academic settings
- Classrooms
- Conference, seminar, and workshop settings
- Independent self-directed learning settings
- Learners’ practice settings
- Simulation centers
- Virtual environments

**NPD Practice Model Inputs**

The inputs of the NPD Practice Model delineate the “when” and “who” in the scope of practice.

**When: Gaps in knowledge, skills and/or practice.** The Nursing Scope and Standards of Practice state that nurses are responsible for developing and maintaining competence (ANA, 2010. p 12). When opportunities for improvement are recognized, NPD practice begins. The NPD practitioner assesses the opportunity for improvement to determine if a gap in knowledge, skills, and/or practice exists. This needs assessment uses various sources of data to identify educational needs that include but are not limited to emerging issues, new or updated evidence-based guidelines, comparison of current performance and/or outcomes with national databases, and use of new tools and techniques. Analysis of these data helps determine if the gap is one that is amenable to educational intervention or a problem that must be addressed through other organizational channels.
Who: NPD practitioners and learners.

The learner and nursing professional development practitioner interface to contribute to the nursing professional development processes and the achievement of positive outcomes. In the NPD Practice Model, they are represented as overlapping circles depicting the interactive nature of their relationship that allows for each to learn from the other.

**NPD practitioner.** The NPD practitioner is a registered nurse who influences professional role competence and professional growth of learners in a variety of settings. The NPD practitioner supports lifelong learners in an interprofessional environment that facilitates continuous development and learning for the healthcare team.

The NPD practitioner may function at either the generalist or specialist level.

**Nursing professional development generalist.** The NPD generalist is a bachelor’s prepared nurse with or without NPD certification OR a graduate level prepared nurse without NPD certification.

**Nursing professional development specialist.** The NPD specialist is prepared at the graduate level in nursing or a related field and certified in NPD. If the graduate degree is in a related field, the baccalaureate degree must be in nursing.

An NPD specialist may function as the administrator of an NPD department. The executive leader for NPD ideally holds an advanced degree in nursing, is prepared at the doctoral level in nursing or education, and certified in NPD.

**Learner.** The learner is an individual or a group with an educational need who actively engages in professional development activities and assumes responsibility and
accountability for lifelong learning. Learners may include all organizational staff and
interprofessional team members.

**NPD Practice Model Throughputs**

A number of developmental and educational processes that revolve around the NPD Standards of Practice and Performance combine to contribute to the professional growth of practicing nurses and other interprofessional learners. All throughputs occur in the context of the interprofessional practice and learning environments. NPD practitioners facilitate these processes based on the inputs. As inputs vary, so will the throughputs. The throughputs represent the “how” and “what” of the NPD scope of practice.

**How: NPD Standards of Practice and Performance.** The NPD Standards of Practice and Performance form the core of the NPD Practice Model. They are represented inside the gear that drives all throughputs of the model, illustrating the concept that these standards are central to how the NPD practitioner functions. The standards provide the framework that delineates the expected level professional performance as NPD practitioners engage in their specialty practice.

The Standards of Practice for NPD describe the duties that all NPD practitioners are expected to perform competently as the minimum guidelines for practice. The Standards of Practice are divided into two categories – the Standards of Professional Practice and the Standards of Professional Performance.

The Standards of Professional Practice describe the NPD practitioner’s use of critical thinking in the application of the nursing process to the specialty. These standards include:

1. Assessment
2. Identification of Issues and Trends
3. Outcomes Identification

4. Planning

5. Implementation
   a. Coordination
   b. Facilitation of Positive Practice and Learning Environments
   c. Consultation

6. Evaluation

The Standards of Professional Performance describe the expectations for how the NPD practitioner “adheres to the Standards of Practice, completes the nursing process, and addresses other nursing practice issues and concerns” (ANA, 2010, p. 3). The NPD Standards of Professional Performance include:

7. Ethics

8. Education

9. Evidence-based Practice and Research

10. Quality of Nursing Professional Development Practice

11. Change Management

12. Leadership

13. Collaboration

14. Professional Practice Evaluation

15. Resource Utilization

16. Mentorship/Advancing the Profession

Recognizing that NPD practitioners possess varying levels of education and expertise and in alignment with the ANA Nursing Scope and Standards of Practice (2010),
the competency measures for each standard are separated into basic competencies that should be demonstrated by all NPD practitioners and additional competencies for the graduate level prepared, certified specialist.

**What: Roles and Responsibilities of the NPD Practitioner.**

The roles and responsibilities of the NPD practitioner make up the “what” of the scope of practice. Roles are “rights, obligations and expected behavior patterns” (Dictionary.com, 2015) associated with NPD practice. Responsibilities, on the other hand, are duties that are required or expected of the NPD practitioner (Merriam-Webster, 2015).

**Roles.** In the NPD Model, each cog on the central gear of the throughputs identifies a role of the NPD practitioner. These seven cogs are powered by the NPD Standards of Practice and Professional Performance and engage the responsibilities described below. NPD practitioners apply these roles, often simultaneously, as they guide the learner(s) through the responsibilities in the model’s throughputs. Identified in an NPD Role Delineation Study (Warren & Harper, 2015), these roles expand upon the intertwined elements of practice from the previous NPD Scope and Standards (ANA & NNSDO, 2010) and coalesce to form the NPD practitioner’s unique organizational function. The NPD practitioner’s multiple skills, expertise and contributions are used and intertwined throughout all responsibilities.

The roles of the NPD practitioner include:

**Partner for role transitions.** The NPD practitioner supports the transition of nurses and other healthcare team members across learning and practice environments, roles, and life stages.
Learning facilitator. The NPD practitioner uses the educational design process to close the knowledge, skills, and/or practice gaps identified through needs assessment.

Change agent. The NPD practitioner actively works to transform processes at micro, meso, and macro system levels through inspiration, initiation, adoption, and sustainment of and adaptation to change using project management and improvement processes.

Mentor. The NPD practitioner advances the profession by contributing to the professional development of others and supporting life-long learning as individuals develop across practice, professional and educational settings.

Leader. The NPD practitioner influences the interprofessional practice and learning environments, the NPD specialty, the profession of nursing, and healthcare.

Champion of Scientific Inquiry. The NPD practitioner promotes the generation and dissemination of new knowledge and the use of evidence to advance NPD practice, guide clinical practice, and improve patient care.

Advocate for NPD Specialty. The NPD practitioner actively supports, promotes, and demonstrates nursing professional development as a nursing practice specialty.

Responsibilities. Responsibilities filled by the NPD practitioner include:

Onboarding/Orientation. Onboarding is the fluid process of hiring, orienting, socializing, and integrating an employee to the organization with a focus on retention and growth. Orientation is one facet of the onboarding process and is comprised of an individualized program to guide the new hire towards job competency.

Orientation occurs during onboarding and also when changes in roles, responsibilities, and practice settings occur (ANA, 2000). The NPD practitioner may
develop, coordinate, manage, facilitate, conduct, and evaluate on-boarding and orientation programs for nursing and other healthcare personnel.

**Competency Management.** Competency is “an expected level of performance that integrates knowledge, skills, abilities, and judgment” (American Nurses Association, 2014, pg. 3). Competency management is a dynamic process designed to support ongoing assessment and evaluation of performance. Competence is measured by “using tools that capture objective and subjective data about the individual’s knowledge base and actual performance and are appropriate for the specific situation and the desired outcome...” (ANA, 2014, p. 6). The NPD practitioner has expertise in competency assessment and may develop, coordinate, manage, facilitate, conduct, and evaluate competency programs.

**Education.** NPD education is designed to improve the professional practice of nursing and the provision of quality patient care. To accomplish that goal, NPD practitioners design educational activities to address practice gaps for identified target audiences, which may include licensed and non-licensed healthcare personnel. Educational experiences are developed to achieve specific outcomes related to identified deficits or opportunities for improvement in knowledge, skill, or practice. The NPD practitioner uses knowledge and skills identified in this Scope and Standards of Practice to enhance the professional development of nurses and other healthcare personnel.

Continuing nursing education (CNE) is the provision of learning activities “intended to build upon the educational and experiential bases of an individual for the enhancement of practice, education, administration, research, or theory development, to the end of improving the health of the public” (ANCC, in press). Quality continuing education begins with identification of a professional practice gap and determination of a desired outcome.

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for the target audience. Use of best practice standards in planning, design, implementation and evaluation of educational activities facilitates achievement of desired outcomes for learners. Continuing nursing education contact hours may be awarded based on the regulations of the accrediting body.

Interprofessional continuing education (IPCE) has been described as occurring “when two or more professions learn with, about, and from each other to enable effective collaboration and improve health outcomes” (Brandt, 2014).

IPCE requires that members of the interprofessional team work deliberatively together in all components of continuing education – from planning to evaluation. The National Center for Interprofessional Practice and Education (n.d.) notes that when teamwork and collaboration are a foundation for healthcare education, the result is “shared responsibility for achieving health outcomes and improving education.”

In alignment with continuing nursing education, the NPD practitioner collaborates with representatives of other professions to create, manage, implement, coordinate and evaluate IPCE. Use of the NPD Scope and Standards of Practice, as well as related resources such as the CEhp National Learning Competencies published by the Alliance for Continuing Education in the Health Professions (2013), ensures that quality is maintained in development of interprofessional educational experiences.

*Professional role development.* Professional role development involves identification and development of strategies to facilitate a continuous process of maturation through lifelong learning. This type of development allows for role transition, role integration, skill acquisition, and mastery as learners advance from novice to expert in their professions (Benner, 1984; Dreyfus, 1980; Kramer, Maguire, Halfer, Brewer, & Schmalenberg, 2011).
The IOM (2010) recommends transition-to-practice programs for new graduate or advanced practice degree RNs, or when an RN is transitioning into a new clinical practice area. Practice transition is defined by ANCC (2014a) as “A formal program of active learning implemented across all settings for nurses designed to support their progression from an education environment to practice setting or between practice settings” (p. 31).

The NPD practitioner may assist others in their professional role development, practice role transitions, and succession planning. NPD practitioners may counsel others, coordinate, facilitate, conduct and evaluate activities that promote professional role development and role transition.

**Research/Evidence-based Practice/Quality Improvement.** Participation in research, evidence-based practice (EBP) and quality improvement (QI) activities is highly dependent on the practice environment and role preparation of the NPD practitioner.

Nursing research is the use of systematic inquiry to develop or refine knowledge (Polit & Beck, 2012). Scholarship is “an evolutionary process that raises the level of the profession through participation in the generation of new knowledge and through the process of scientific and social exchange” (Tymkow, 2014, p. 64). In NPD, scholarship may encompass the components of academic scholarship as described by the American Association of Colleges of Nursing (AACN, 1999): discovery, teaching, practice and integration, as well as the elements of clinical scholarship that are used “to solve clinical problems and improve outcomes” (Sigma Theta Tau, 1999, p. 4).

Clinical scholarship is embodied in the implementation of evidence-based practice (EBP) and quality improvement (QI). EBP, as applied to NPD practice, is the integration of the best research evidence, educational and clinical expertise, and learner preferences to
facilitate decision-making (Schmidt & Brown, 2015). Quality improvement is defined as “systematic and continuous actions that lead to measurable improvement in health care services and the health status of targeted patient groups” (HRSA, 2011, para 1). For the NPD practitioner, quality improvement is also applied to education and professional development activities.

NPD practitioners must promote and integrate the science of the NPD specialty in order to continuously improve their practice. In addition, they promote research, EBP, and QI in patient care settings. NPD practitioners may conduct, encourage, facilitate and/or participate in research, EBP, and QI, including dissemination of findings.

Collaborative partnerships. A collaborative partnership is a mutually beneficial relationship between two or more individuals, groups or organizations that work jointly toward common goals. Collaborative partners share expertise in planning and decision making to achieve the desired results (Carnwell & Carson, 2009). Interprofessional collaboration involves multiple healthcare personnel from different professional backgrounds collaborating to deliver the highest quality of care (Interprofessional Collaborative Expert Panel, 2011).

NPD practitioners are most frequently involved in academic/practice partnerships. Other examples of collaborative partnerships include IPCE, community partnerships with emergency medical services and public/community health departments to address threats to population health or disaster management, and collaboration with other health care organizations. Within these partnerships, NPD practitioners may teach, coordinate, serve as liaisons, and/or advise nurses and other learners concerning education and learning.

Why: NPD Practice Model Outputs/Desired Outcomes
The overall desired outcomes of NPD represent the “why” of the NPD scope of practice.

Goals of NPD practice. The rationale for licensure of nurses is protection of the public (NCSBN, n.d.). In addition, the Code of Ethics for Nurses states that nursing practice is committed to the promotion of health and the provision of optimal care (ANA, 2015, p. v). NPD practitioners support these mandates by leading and engaging learners. As a result, quality of care is enhanced and patient outcomes and safety are improved.

The primary outputs of NPD practice include learning, change, and professional role competence and growth. In the NPD practice model, these outputs are depicted as a side-lying pyramid in which each layer is a prerequisite to the next.

Learning. Learning is the acquisition of knowledge, skills, abilities, and attitudes upon which to base practice. Learning is influenced by various factors such as individual characteristics, perceived needs, and teaching methodology. Learning is a prerequisite to change.

Change. Sullivan (in press) defines change as “the process of making something different from what it was.” This difference subsequently becomes the basis for further change. Change is reflected by adoption of new behaviors and/or processes in practice. Constructive change is a prerequisite to professional role competence and growth.

Professional role competence and growth. Learning and change lead to professional role competence and growth. Professional role competence is performance that meets defined criteria based on the specialty area, context, and model of practice in which an individual is engaged (American Nurses Association, 2014). Professional growth is defined as advancement through Benner’s (1984) stages of clinical competence or
progression in an organizational hierarchy. One measure of professional role competence and growth is specialty certification. Specialty certification “validates nurses' skills, knowledge, and abilities... within their professional sphere of activity and contributes to better patient outcomes” (American Nurses Credentialing Center, n.d.). NPD practitioners pursue certification in the specialty of NPD while promoting certification of professional nurses in their respective nursing specialty.

**NPD Practice Model Feedback**

The feedback loop represents continuous lifelong learning and growth that influences the constantly evolving interprofessional practice and learning environments, model inputs, and model throughputs.

**Influence.** Influence is the process of affecting change, behaviors, and decisions of others. NPD practitioners influence change by employing skills and knowledge to design, implement and evaluate programs that produce desired outcomes. The NPD practitioner influences decisions of others by using credible data, technology, relevant information and documented outcomes within the learning and practice environment to shape both the system inputs and throughputs.

**Advocacy and Ethics**

Advocacy and adherence to ethical principles are essential components of NPD practice. With consideration of the learner in lieu of the client/patient, NPD practitioners incorporate and promote the ethical provisions of the Code of Ethics for Nursing (ANA, 2015) into their practice in many ways including diversity awareness (Provision 1), commitment to learners – both individuals and groups (Provision 2), recognition of the rights of the individual learner (Provision 3), accepting and promoting accountability for
personal practice (Provision 4), engaging in and developing professional development activities (Provision 5), promotion and maintenance of an ethical work environment (Provision 6), advancing the nursing profession and NPD specialty through scholarly activity (Provision 7), promoting and engaging in interprofessional collaboration to protect human rights (Provision 8), and advocating for the specialty and profession (Provision 9).

One example of how an NPD practitioner demonstrates “compassion and respect for the inherent dignity, worth, and unique attributes of every person” (ANA, 2015, p. v) is by planning and implementing educational programs that support the needs of diverse learners (See NPD Standard 4: Planning). In addition, the NPD practitioner promotes learning in a nonjudgmental and nondiscriminatory manner that is supportive of the learner (See NPD Standard 12, Ethics). Furthermore, NPD practitioners provide confidentiality for learners as they promote learning opportunities, collect data, and complete competency assessments (See NPD Standard 12, Ethics).

As part of NPD practitioners’ responsibilities, they maintain an ethical interprofessional learning environment through adherence to content integrity standards for industry support (See NPD Standard 12: Ethics). This adherence to content integrity standards ensures that NPD practitioners “plan, implement and evaluate quality continuing nursing educational activities with integrity, free from the undue influence of commercial interest organizations” (ANCC, 2014b, p.2). In addition, they incorporate and respect other professions’ codes of ethics as they participate in interprofessional continuing education.

Current and Future Issues, Innovations, and Trends

Like past editions of the NPD Scope and Standards of Practice, this edition reflects the trends and potential opportunities projected for the future that may impact NPD
practice and all of healthcare. As predicted in the 2010 edition of the NPD Scope and Standards, healthcare remains in a dynamic state, an evolution that places NPD practitioners in the pivotal role of helping their organizations adapt to the demands of healthcare change. NPD practitioners must remain flexible and focus on the future, proactively leading change rather than reacting to emerging trends. In addition to trends specific to healthcare, this edition reflects trends associated with society in general, particularly related to technological advances and the political environment.

Moving forward, NPD practitioners must seek support from international, national, state and local nursing organizations, health policy makers, as well as state and federal officials to achieve their ultimate goal of protecting the public. Projected trends include:

**Workforce**

- Multiple generations in the workforce
- Loss of expertise with baby-boomer retirement
- Increasing diversity in nurses
- Anticipated growth in shortages of healthcare professionals
- Increased focus on nurses practicing to the full extent of their scope including pay for services
- Increased demand for transition to practice programs and mandated nurse residencies for licensure
- Progressive education expectations for nurses
- Increasing emphasis on nursing certification for employment and promotion

**Practice Environment**

- Burgeoning technology for patient care
• Emphasis on decision support systems and electronic health records
• Focus on evidence-based practice
• Increasing emphasis on fatigue management and shift length
• Ongoing focus on achieving excellence initiatives, quality outcomes, and patient safety
• Focus on interprofessional teamwork
• Prevention of patient recidivism
• Demonstration of NPD’s impact on patient outcomes
• Promotion of healthy workplace environments
• Patient populations with more complex clinical needs associated with the impact of chronic illnesses, aging and greater cultural diversity
• Developments in genetics/genomics
• Transition from focus on clinical setting to provision of nursing services across the continuum of care
• Ongoing demands for clinical placements of students
• Increasing collaborative partnerships as healthcare increasingly transitions to the outpatient setting.
• Move toward a culture of health.
• Nurses functioning within the full scope of practice (not just advanced practice nurses)
• Reimbursement for nursing services

Organization
Identification of optimal nursing professional development organizational structures (centralized vs. decentralized, reporting structure)

Increased organization complexity due to mergers, acquisitions, and expansions

Ongoing challenges in healthcare funding and reimbursement

Technological Influences

Increasing emphasis on privacy of patient data

Use of mobile devices to communicate and retrieve information

Availability of large complex data sets

Proliferation of social networking

Proliferation of personal electronic devices

Increasing use of virtual health programs

Political Influences

Increases in number of insured individuals seeking healthcare services

Impacts of a global economy

Increasing scrutiny of healthcare outcomes and pay for performance

Implications of the federal government as primary payor for healthcare

Growing costs of healthcare

Professional Development Practice Changes

Growing need for succession planning for future nurse leaders

Growing need for nurses to be prepared for the boardroom of health related corporations and non-profit organizations

Preparing nurses for the political arena (local, state, and federal)
• Retooling the workforce to enhance nurses’ ability to practice not only in acute care but across the entire continuum of care

• Promoting learning as an investment in human capital and cost avoidance versus an expenditure

• Accreditation and funding of nursing residencies

• Greater use of technology, including simulation, in continuing education

• Increases in interprofessional continuing education (IPCE)

• Demonstration of NPD return on investment (ROI)

• Demands for just-in-time training and rapid cycle development of education

• Less emphasis on traditional classroom-based learning

• Demand for evidence-based teaching and learning strategies

• Demand for rigorous, multi-site research related to NPD practice
STANDARDS OF NURSING PROFESSIONAL DEVELOPMENT PRACTICE

STANDARD 1. ASSESSMENT

The nursing professional development practitioner collects data and information related to educational needs and other pertinent situations.

COMPETENCIES

The nursing professional development generalist:

1. Collects data systematically and purposefully from a variety of sources including, but not limited to, direct observation of nursing practice, nurses and the interprofessional healthcare team, professional organizations, regulatory agencies, consumers, healthcare experts, health-related trends, key stakeholders, and legislative venues.

2. Assesses knowledge, skill, and practice gaps within a microsystem.

3. Prioritizes data collection activities based on the immediate or anticipated needs of the situation including alignment with organizational strategic goals.

4. Uses technologies to facilitate comprehensive assessment of current and future individual and organizational needs.

5. Collects pertinent data using valid and reliable techniques and instruments including, but not limited to, questionnaires and evaluations of past programs.

6. Uses evidence-based assessment techniques or instruments to define potential issues, problems, and needs.

7. Conducts initial and ongoing assessment of competence.

8. Uses existing analytical models and assessment tools that facilitate gap analysis.

9. Documents learning needs assessment and relevant data in a retrievable format.
10. Sustains an ongoing process for data collection.

ADDITIONAL COMPETENCIES FOR THE NURSING PROFESSIONAL DEVELOPMENT SPECIALIST

The nursing professional development specialist:

1. Oversees the systematic and purposeful collection of data, information, knowledge, and evidence.

2. Synthesizes evidence relevant to the situation to identify patterns, trends, and variances.

3. Assesses the meso and macro system.


5. Collects pertinent data using valid and reliable techniques and instruments including, but not limited to, focus groups, review of evidence, and analysis of trends.
STANDARD 2. IDENTIFICATION OF ISSUES AND TRENDS

The nursing professional development practitioner analyzes issues, trends, and supporting data to determine the needs of individuals, organizations, and communities in relation to health care.

COMPETENCIES

The nursing professional development generalist:

1. Derives target audience needs and abilities from the assessment data.
2. Validates identified needs with key stakeholders.
3. Prioritizes individual and microsystem needs in order to address them in a timely manner.
4. Documents evidence of gaps in knowledge, skills, and/or practice in a manner that facilitates the educational planning process.

ADDITIONAL COMPETENCIES FOR THE NURSING PROFESSIONAL DEVELOPMENT SPECIALIST

The nursing professional development specialist:

1. Prioritizes meso and macro system needs in order to address them in a timely manner.
2. Forecasts potential needs based on environmental scanning.
STANDARD 3. OUTCOMES IDENTIFICATION:

The nursing professional development practitioner identifies desired outcomes of the educational plan:

COMPETENCIES

The nursing professional development generalist:

1. Develops expected outcomes that reflect competence, learning and change.
2. Defines expected outcomes using measurable terms.
3. Documents expected outcomes that demonstrate learning and activity or program impact.

ADDITIONAL COMPETENCIES FOR THE NURSING PROFESSIONAL DEVELOPMENT SPECIALIST

The nursing professional development specialist:

1. Involves learners and key stakeholders in formulating expected outcomes.
2. Develops context specific outcomes based on organizational, stakeholders’ and learners’ values, goals, current evidence and regulations.
3. Revises outcomes based on trends, evidence, and/or changes in stakeholders’ expectations.
STANDARD 4. PLANNING

The nursing professional development practitioner establishes a plan that prescribes strategies, alternatives, and resources to achieve expected outcomes.

COMPETENCIES

The nursing professional development generalist:

1. Develops content in collaboration with representatives of the target audience and subject matter experts.
2. Respects diversity by considering cultural, ethnic, generational, and other differences in planning to meet learner needs.
3. Prepares content reflective of the desired outcomes and current evidence.
4. Uses adult learning concepts and instructional design principles when planning an activity.
5. Individualizes content to the target audience (e.g. basic education, experience, culture, language, and preferred method of learning), the resources available, and the domains of learning.
6. Collaborates with other professions to enhance the comprehensiveness of the plan.
7. Markets the plan using promotional materials that are accurate, comprehensive, and appeal to a diverse target audience.
8. Plans for awarding continuing education contact hours, if desired, in accordance with accrediting agency requirements.
9. Documents the planning process.
ADDITIONAL COMPETENCIES FOR THE NURSING PROFESSIONAL DEVELOPMENT

SPECIALIST

The nursing professional development specialist:

1. Incorporates theories pertaining to learning, behavioral change, motivation, epidemiology, and other frameworks in designing educational materials and programs.

2. Analyzes cost and anticipated return on investment for learning activities, programs, and/or projects.

3. Exhibits systems thinking throughout the entire planning process.
STANDARD 5. IMPLEMENTATION

The nursing professional development practitioner implements the identified plan.

COMPETENCIES

The nursing professional development generalist:

1. Implements the plan in a coordinated and timely manner.

2. Demonstrates respect, equity, and empathy in actions and interactions with diverse learners.

3. Uses current, evidence-based content specific to the issue or trend to achieve the defined outcomes.

4. Collaborates with colleagues and other stakeholders.

5. Implements an educational plan using principles and concepts of quality.

6. Engages participants in learning activities.

7. Documents implementation and modifications, including changes or omissions, of the identified plan.

ADDITIONAL COMPETENCIES FOR THE NURSING PROFESSIONAL DEVELOPMENT SPECIALIST

The nursing professional development specialist:

1. Uses quality principles and concepts in the implementation of system-wide programs and/or projects.

2. Adjusts materials and teaching strategies appropriate to the situation and the learner’s developmental level, learning needs, readiness, ability to learn, language preference, and culture.

3. Engages organizational systems and resources that support implementation.
STANDARD 5-A. COORDINATION

The nursing professional development practitioner coordinates educational initiatives and activities.

COMPETENCIES

The nursing professional development generalist:

1. Coordinates implementation of an educational plan, including activities and resources necessary to achieve desired outcomes.

2. Documents the coordination of the activities.

ADDITIONAL COMPETENCIES FOR THE NURSING PROFESSIONAL DEVELOPMENT SPECIALIST

The nursing professional development specialist:

1. Leads in the coordination of interprofessional healthcare and community resources (for example: human, clinical, financial, technical, educational, cultural) for integrated educational services.
STANDARD 5-B. FACILITATION OF POSITIVE LEARNING AND PRACTICE ENVIRONMENTS

The nursing professional development practitioner employs strategies to facilitate positive learning and practice environments.

COMPETENCIES

The nursing professional development generalist:

1. Facilitates education of learners to meet their professional development needs.
2. Selects appropriate psychomotor, cognitive, affective educational content, materials, techniques and strategies to establish a positive learning environment.
3. Manages the practice gaps between academia and service.
4. Implements strategies for seamless transitions to practice.
5. Uses skills and tools that are appropriately vetted for the culture, literacy, and language of the learners served.
6. Uses various educational strategies to meet the needs of learners.
7. Promotes anticipatory thinking to identify future needs of patients.
8. Integrates learning resources into programs that also address health and a healthy work environment.
9. Evaluates educational resources within the area of practice for accuracy, currency, readability, and comprehensibility.
10. Creates opportunities for feedback and evaluation of the effectiveness of the educational content, teaching strategies, and the learning environment.
ADDITIONAL COMPETENCIES FOR THE NURSING PROFESSIONAL DEVELOPMENT

SPECIALIST

The nursing professional development specialist:

1. Evaluates diverse learning environments (such as virtual) and their suitability to the organization and target audience.

2. Establishes the value of positive learning and practice environments.

3. Role models practices for creating and sustaining positive learning and practice environments.

STANDARD 5-C. CONSULTATION (Only NPD Specialist)

The nursing professional development practitioner provides consultation to influence plans, enhance the abilities of others, and effect change.

COMPETENCIES

The nursing professional development specialist:

1. Synthesizes data and information, while incorporating conceptual or theoretical frameworks when providing consultation.

2. Facilitates the effectiveness of a consultation by involving the learner, stakeholders, and other specialties in the decision-making process and negotiation of role responsibilities.

3. Communicates consultation recommendations that influence the identified plan, facilitate understanding by stakeholders, enhance the work of others, and effect change.

4. Establishes formal and informal consultative relationships that may lead to professional development or mentorship opportunities.

5. Advises in the design, development, implementation, and evaluation of materials and teaching strategies appropriate to the situation and the learner’s developmental level, learning needs, readiness, ability to learn, language preference, and culture.

6. Incorporates theories pertaining to learning, behavioral change, motivation, epidemiology, and other related frameworks in consulting and collaborating when designing educational materials and programs.

7. Develops recommendations and strategies to address problems and complex issues.
STANDARD 6. EVALUATION

The nursing professional development practitioner evaluates progress toward attainment of outcomes:

COMPETENCIES

The nursing professional development generalist:

1. Uses valid, reliable and relevant methods and instruments to measure processes and outcomes.
2. Involves learners in the evaluation process.
3. Documents the results of evaluation.
4. Revises learning activities based on evaluation data.
5. Disseminates the evaluation results of learning activities.

ADDITIONAL COMPETENCIES FOR THE NURSING PROFESSIONAL DEVELOPMENT SPECIALIST

The nursing professional development specialist:

1. Involves stakeholders in the evaluation process.
2. Formulates a systematic and effective evaluation plan aimed at measuring processes and outcomes, which are relevant to programs, learners and stakeholders.
3. Synthesizes evaluation data to guide decision making about educational programming.
4. Demonstrates program value based on achieved outcomes.
5. Disseminates the evaluation results of educational programs.
STANDARDS OF PROFESSIONAL PERFORMANCE FOR NURSING PROFESSIONAL DEVELOPMENT

STANDARD 7. ETHICS

The nursing professional development practitioner integrates ethics in all areas of practice.

COMPETENCIES

The nursing professional development generalist:

1. Incorporates the Code of Ethics for Nurses with Interpretive Statements (ANA, 2015), the Scope and Standards of Practice for Nursing Professional Development, and other relevant standards, guidelines, benchmarks, regulations and laws to guide practice.

2. Protects the autonomy, dignity, confidentiality and rights of all individuals involved in the learning process.

3. Performs role in a nonjudgmental, nondiscriminatory, and ethical manner that is sensitive to learner diversity.

4. Educates learners and other stakeholders with regard to rights, responsibilities, and accountability involved in the collection, access, use, and exchange of protected information.

5. Maintains procedures for monitoring the integrity of educational activities including screening for potential or actual unethical behavior, commercial bias, compromise of intellectual property rights, or conflict of interest.

6. Guides peers and others through resolution of ethical conflicts.
7. Reports behaviors that are illegal, unethical, inconsistent with practice standards or reflective of impaired practice.

8. Documents that the requirements of the accrediting bodies are consistently followed, reporting relevant issues and information to the respective body.

ADDITIONAL COMPETENCIES FOR THE NURSING PROFESSIONAL DEVELOPMENT SPECIALIST

The nursing professional development specialist:

1. Analyzes factors related to privacy, security, and confidentiality in the use and handling of records related to educational programs.

2. Develops processes for monitoring the integrity of educational activities including screening for potential or actual unethical behavior, commercial bias, compromise of intellectual property rights, or conflict of interest and to identify and address ethical issues within the learning environment.
STANDARD 8. EDUCATION

The nursing professional development practitioner maintains current knowledge and competency in nursing and professional development practice.

COMPETENCIES

The nursing professional development generalist:

1. Participates in educational activities related to the NPD specialty.

2. Acquires knowledge and skills appropriate to the specialty area, practice setting, role, and learner diversity.

3. Seeks experiences to develop, maintain, and improve competence in nursing professional development.

4. Uses reflective practice and inquiry to identify personal learning needs.

5. Uses current research findings and other evidence to expand knowledge, enhance role performance, and increase knowledge of professional issues.

ADDITIONAL COMPETENCIES FOR THE NURSING PROFESSIONAL DEVELOPMENT SPECIALIST

1. Uses environmental scanning to determine current and future NPD educational needs.
STANDARD 9. EVIDENCE-BASED PRACTICE (EBP) AND RESEARCH

The nursing professional development practitioner acts as a champion of scientific inquiry, generating new knowledge and integrating best available evidence into practice.

COMPETENCIES

The nursing professional development generalist:

1. Uses the best available evidence to guide practice decisions.
2. Creates a supportive environment for nursing research, scientific inquiry, quality improvement and evidence-based practice.
3. Supports research activities that align with the organizational strategic plan.
4. Participates in research activities at various levels appropriate to the NPD practitioner’s education and role.
5. Participates in quality initiatives.
6. Disseminates research findings through educational programs, courses, and other activities.

ADDITIONAL COMPETENCIES FOR THE NURSING PROFESSIONAL DEVELOPMENT SPECIALIST

The nursing professional development specialist:

1. Synthesizes and appraises the best available evidence to recommend practice changes.
2. Recommends and/or implements research activities to align with the organizational strategic plan.
3. Contributes to interprofessional practice by supporting, conducting, and/or synthesizing research and evidence-based practice.

4. Leads quality initiatives.

5. Disseminates research, EBP, and quality improvement findings through activities such as presentations, publications, and consultation.
STANDARD 10. QUALITY OF NURSING PROFESSIONAL DEVELOPMENT PRACTICE

The nursing professional development practitioner systematically enhances the quality and effectiveness of nursing professional development practice.

COMPETENCIES

The nursing professional development generalist:

1. Applies the educational process in a responsible, accountable, and ethical manner.
2. Uses creativity and innovation to improve the quality of the learning experience.
3. Uses quality improvement processes to enhance NPD practice.
4. Uses current best evidence, new knowledge and skills to initiate change.
5. Documents the outcomes of nursing professional nursing development activities.

ADDITIONAL COMPETENCIES FOR THE NURSING PROFESSIONAL DEVELOPMENT SPECIALIST

The nursing professional development specialist:

1. Develops, measures and analyzes NPD unit/department quality outcomes to demonstrate impact on nursing care delivery such as patient outcomes, nurse competency, practice improvements.
2. Leads quality improvement processes based on NPD unit/department quality outcome analysis.
3. Collaboratively develops improvement plans for those with competency deficits in NPD practice.
4. Synthesizes evaluation data, trends and expectations to guide decision-making about changes and improvement of all components of nursing professional development practice.

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STANDARD 11. CHANGE MANAGEMENT (new standard in 2015)

The nursing professional development practitioner acts as a change agent within and beyond the acute care setting.

COMPETENCIES

The nursing professional development generalist:

1. Introduces and supports new ideas.
2. Works with others to identify problems and solutions.
3. Embraces meaningful change.
4. Assesses readiness for change within the microsystem.
5. Develops goals for change processes.
6. Applies improvement processes (e.g. Lean Six Sigma) to effect practice change.
7. Communicates the vision for change.
8. Identifies and addresses barriers to change.
9. Develops programs to educate staff or help staff cope with change.
10. Exhibits creativity and flexibility through times of change.
11. Monitors effectiveness and progress throughout change process.
12. Assists in the implementation of change strategies.
13. Sustains change at the clinical micro system level.

ADDITIONAL COMPETENCIES FOR THE NURSING PROFESSIONAL DEVELOPMENT SPECIALIST

The nursing professional development specialist:

1. Continuously scans the environment for trends and issues that require change.
3. Collaboratively creates the change strategy.
4. Leads the implementation of change strategies.
5. Assesses meso and macro system readiness for change.
6. Fosters acceptance, adoption, and action toward change.
7. Creates a climate for change.
8. Manages organizational change.
10. Sustains change at the meso and macro system level.
STANDARD 12. LEADERSHIP

The nursing professional development practitioner provides leadership in the professional practice setting and the profession.

COMPETENCIES

The nursing professional development generalist:

1. Creates and maintains healthy work environments in educational and practice settings.
2. Collaborates with other stakeholders to ensure educational programs are aligned with organizational goals and strategic plan.
3. Demonstrates emotional intelligence in decision-making.
4. Demonstrates energy, excitement, and a passion for quality work.
5. Supports a culture for innovation and risk-taking.
6. Promotes the professional development program’s mission, goals, action plans, and outcome measures.
7. Maintains records to comply with regulatory bodies’ standards.

ADDITIONAL COMPETENCIES FOR THE NURSING PROFESSIONAL DEVELOPMENT SPECIALIST

The nursing professional development specialist:

1. Creates a culture in which innovation and risk-taking are promoted and expected.
2. Assumes leadership roles representing nursing professional development.
3. Partners with academia to create and implement nursing roles for the future.
4. Demonstrates return on investment.
5. Influences decision-making bodies to maintain and improve quality nursing and professional development programs.

6. Ensures NPD department compliance with reporting to regulatory bodies.

7. Incorporates transformational leadership into all activities.

8. Leads organizational committees and/or shared governance councils.

9. Assumes a leadership role in Magnet® and other excellence recognition initiatives.

10. Participates in local, state, regional, and/or national healthcare initiatives.

11. Prepares for and seeks opportunities to serve on health related boards of directors.
STANDARD 13. COLLABORATION

The nursing professional development practitioner collaborates with interprofessional teams, leaders, stakeholders and others to facilitate nursing practice and positive outcomes for consumers.

COMPETENCIES

The nursing professional development generalist:

1. Communicates with healthcare personnel and key stakeholders regarding educational programs and activities.
2. Partners with others to effect change and generate positive outcomes.
3. Collaborates with others in the planning and implementation of lifelong learning activities for individuals and groups of learners.
4. Documents plans and communications of collaborative endeavors.

ADDITIONAL COMPETENCIES FOR THE NURSING PROFESSIONAL DEVELOPMENT SPECIALIST

The nursing professional development specialist:

1. Develops partnerships and coalitions to enhance health care through interprofessional initiatives (e.g. quality improvement and organizational excellence initiatives).
2. Develops collaborative partnerships for the planning, development, implementation and evaluation of interprofessional continuing education.
3. Evaluates the effectiveness of collaborative endeavors.
STANDARD 14. PROFESSIONAL PRACTICE EVALUATION

The nursing professional development practitioner evaluates personal practice in relation to professional practice standards and guidelines, and relevant statutes, rules and regulations.

COMPETENCIES

The nursing professional development generalist:

1. Participates in reflection on personal values and beliefs and their impact on performance.
2. Participates in systematic peer review.
3. Seeks feedback regarding personal practice from learners, interprofessional colleagues, peers, supervisors and others as appropriate.
4. Applies current standards, guidelines and relevant rules and regulations.
5. Interacts with peers and colleagues to enhance personal professional nursing practice and role performance.
6. Evaluates personal performance on a regular basis, identifying areas of strength as well as needed professional development.
7. Takes action to achieve goals identified during the professional practice evaluation process.

ADDITIONAL COMPETENCIES FOR THE NURSING PROFESSIONAL DEVELOPMENT SPECIALIST

1. Seeks interaction, peer review, and feedback from colleagues beyond the immediate practice environment.
2. Obtains and maintains professional certification in NPD.
STANDARD 15. RESOURCE UTILIZATION

The nursing professional development practitioner considers factors related to quality, safety, effectiveness and cost in regard to professional development activities and expected outcomes.

COMPETENCIES

The nursing professional development generalist:

1. Evaluates factors that impact professional development activities and expected outcomes.
2. Assists stakeholders in identifying and securing appropriate and available learning opportunities.
3. Delegates tasks based on the knowledge, skills and abilities of the individual, the complexity of the task, and predictability of the outcomes.
4. Identifies resources needed for educational programs.
5. Monitors resource allocation and utilization.
6. Documents resource utilization decisions and activities.

ADDITIONAL COMPETENCIES FOR THE NURSING PROFESSIONAL DEVELOPMENT SPECIALIST

The nursing professional development specialist:

1. Allocates human, financial and material resources based on identified needs and goals and in alignment with organizational strategic plan.
2. Develops innovative solutions and strategies to secure appropriate resources and technology for professional development initiatives.
3. Administers human resources, facilities, materials, equipment, and technology for educational activities.
STANDARD 16. MENTORSHIP/ADVANCING THE PROFESSION (NEW)

The nursing professional development practitioner advances the profession and the specialty through mentoring and contributions to the professional development of others.

COMPETENCIES

The nursing professional development generalist:

1. Describes NPD as a specialty.
2. Identifies strategies to recognize the role of the NPD practitioner within the organization.
3. Shares knowledge and skills with others through activities such as presentations at meetings and professional conferences and participation in professional organizations.
4. Fosters ongoing professional growth experiences for nurses and others.
5. Promotes a culture of lifelong learning.
6. Interacts with others to enhance professional nursing, professional development practice, and role performance.
7. Participates in organizational committees and/or shared governance councils.
8. Supports Magnet® and other excellence recognition initiatives.
9. Mentors colleagues, other nurses, students, and others as appropriate.

ADDITIONAL COMPETENCIES FOR THE NURSING PROFESSIONAL DEVELOPMENT SPECIALIST

The nursing professional development specialist:

1. Promotes NPD as a nursing specialty.
2. Models expert practice to peers, inter-professional team members, healthcare consumers, and learners.

3. Advances the profession through publications, presentations, and other scholarly work.

4. Collaborate with interprofessional colleagues on activities to advance the profession.

5. Develops programs to recognize the role of the NPD practitioner within the organization.