UPDATE: Current state of Dermatology NP Practice

Hello to All!

We hope this email finds everyone healthy and excited for the arrival of summertime. There is so much to tell you about all of the changes occurring in our specialty. They are exciting and developing very rapidly. Below is an update of what has been developing over the short period of the past 2-3 months. These topics will be posted on the DSPG website (more on that below) and open for discussion. They will also be the main topics of discussion at the AANP Annual Conference, SIG Dermatology meeting on Friday, June 12th at 2:45. There are more than 270 attendees registered for the meeting. We are very excited. The future of dermatology NP practice can (and will) be determined by the dedication and energy that all of us invest in it. We are off to a great start!

WHO ARE DERMATOLOGY NPS?

We have been struggling to identify the actual NPs practicing dermatology. We know there are a lot of derm NPs out there but we haven't really had a count due to membership in different organizations and attendance at different educational events. The AANP has helped us identify almost 4000 NPs practicing in dermatology in the U.S. There are over 700 clinically active AANP members who specialize in dermatology. This is the largest derm NP membership of ANY organization. Although AANP hasn't focused on Derm NP practice in the past, we are changing this to meet the needs of all dermatology NPs by forming a subspecialty group under the AANP. This is great news!

AANP DERMATOLOGY SPECIALTY PRACTICE GROUP (DSPG)

As many of you know, the AANP made the novel decision to incorporate subspecialties into the largest NP organization in the world. With a membership of 53,000 members (exclusively NP), the AANP selected two NP groups to launch this new direction in recognizing the impact and value of specialty care. Dermatology and Acute Care were chosen as the inaugural specialties for the AANP Specialty Practice Groups (SPG). We have been working with AANP over the past 3 months to help bring the concept to reality. It wasn't easy as the traditionally primary care based AANP had to stretch beyond their traditional boundaries. In several situations we challenged the traditional ideas/plans proposed by the AANP. And on every occasion/issue, the AANP thoughtfully considered our requests and changed their position to accommodate our needs as specialists. They have been incredibly supportive and have dedicated resources to help us develop a platform for dermatology.

The result is that Dermatology NPs now have a professional home as the AANP Dermatology Specialty Practice Group (DSPG). This provides us with a forum to communicate, organize, develop and promote our professional practice. With AANP behind us, the DSPG will have more power, support, visibility and guidance than we have ever had in our past. We have the tools and resources to grow and develop.
The intention of the DSPG is not to be an exclusive membership replacing other professional organizations (DNA, SDPA, NAPNAP, NADNP, etc) or participation in other educational venues. The hope is to unify dermatology NPs who have been splintered into groups, into a larger and more powerful voice DEDICATED only to dermatology NP practice. We acknowledge that the DSPG cannot meet all of our needs. So it is likely that most of us will continue to attend the outstanding continuing education conferences that are currently available from various organizations (why re-invent the wheel?).

The DSPG is NOT intended for those "dabbling" in dermatology. Formation of the DSPG is intended to organize ONLY those dedicated to clinical practice in dermatology. It does not include those working as primary care NPs or other levels of dermatology providers such as RNs, LPNs, MAs or aestheticians. We have drafted a generic definition of dermatology NP practice for the website and invite those interested to join. Of course we cannot prevent "wanna-be's" from joining. None of the dermatology organizations can do that either. WE know that many folks slip through the cracks. Truth is there may be many NPs trying to get into derm but can't figure out how. So they may join the DSPG to learn how to achieve a successful career in dermatology. As the specialty of dermatology rises rapidly, the DSPG can help us mentor the next generation of NPs. It will also allow us to work together to define "What is a dermatology NP" along with, who, how long and where. The only way to achieve an exclusive group would be to require certification for entry into the organization—this isn’t realistic.

DSPG members will have online access (see below) to important communication, formation of goals and vision for our specialty, accurate information on important issues/events, improved access to resources including education, and development of important position statements. Most of all, it gives each one of us a voice to be heard and opportunities to grow. This has historically been difficult for us as we don’t have a central meeting or organization, making our communication challenging.

The initial leadership for the DSPG will be co-Chairs Margaret Bobonich and Mary Nolen. Lakshi Aldredge will be the Chair-elect with several other dermatology NPs who have volunteered to provide leadership for some of the committees and goals that we pursue. Anyone interested in leadership or active engagement on committees, please let us know. We are a large group with vast experience and talents—we welcome everyone.

DSPG WEBSITE

So here is what happens next. Initially, all AANP members will receive a marketing blast about the new SPG, focusing on Dermatology and Acute Care NP Specialty Groups. AANP members who wish to become a part of the Dermatology SPG can join for a nominal fee of $20 (in addition to their AANP membership fee/renewal).

The AANP Dermatology SPG website is now OPEN! The site is a temporary one as AANP is building a new enhanced platform for us and is expected to be converted at the end of 2015. For those of you who are AANP members, you can go to the www.aanp.org site and register. Once you are a member, DSPG members can access our website from spg.aanp.org. It will take 1-2 working days to become
activated.
If you are NOT an AANP member, you must join as a member first. Then you will have the opportunity to join in a SPG at that time (Dermatology and Acute Care are only ones available at this time).

From this point forward, updates from us will be changed from email to the DSPG website. This will allow EVERYONE to engage in discussion on topics. It will provide updates on current issues and developments as well as shared information regarding resources and education. It will help us provide more transparency. Position statements like that regarding the AAD Derm Care Team can be published here. It is logical given that other dermatology organizations who release their position statements predicate their position on the AANP statements. Therefore, it is logical that important documents regarding dermatology NP practice be guided and published on AANP DSPG.

**SCOPE OF PRACTICE & STANDARDS OF CARE (SOP/SOC)**

The greatest issue/concern that has been voiced over the past couple years is inability to “define” our specialty. In order to be recognized as a NP “Specialty Practice”, we must meet 14 criteria published in the APRN the Consensus Mode (2008). We fall short of these criteria on several measures. An important element missing is a Dermatology NP SOP/SOC. A SOP statement defines who, what, where, when, why and how about our nursing specialty (ANA, 2010). Without a SOP/SOC, we will not be recognized as a “specialty”. Furthermore, we will not be able to seek accreditation for the current certification exam.

Development of a SOP/SOC for dermatology is a high priority. The ANA clearly outlines the process for the development and approval for specialty nursing standard statements (September 2010). These are not brief or generic statements like those drafted in the past. The DSPG and DNA should collaborate on this project.

**COMPETENCIES****

The first goal the new AANP DSPG is to form a Dermatology NP Validation Panel to establish *Dermatology NP Competencies*. The proposal is to convene a work group to examine current evidence, review data from a published Delphi study, and develop clinical and professional competencies. Competencies delineate the unique aspects and specific knowledge, skills and abilities required for entry into practice as a dermatology NP. Competencies also provide a model for dermatology NP practice and guides specialty education. We cannot develop educational programs for dermatology NPs unless we have competencies.

We are proposing a Validation Panel comprised of clinicians, educators and administrators from several organizations along with key stakeholders. A facilitator will guide the group through a consensus process to produce a final document that will be published. This is going to be a priority that we have already started to prepare for and will be presented at the AANP SIG meeting. If anyone is interested or has experience with development of competencies and would like to participate in the Validation Panel, please let us know. Our goal is to meet in the Fall.

**CERTIFICATION**
Another important goal for many is a certification exam to validate specialty knowledge competencies (separate from APRN core competencies) for Dermatology NPs. So many of our physician colleagues, employers and the public have been asking us about our credentials. Certification, which validates professional knowledge competencies, is even greater importance since dermatology NPs do NOT have a formalized educational process.

Several smaller groups are proposing their own Dermatology NP Certification based on THEIR interpretation. Our specialty should have ONE validated NP certification exam. If Dermatology NPs have multiple exams or ones that are not accredited, it will cause confusion and dilute the value of certification.

So evaluation of the current DCNP exam becomes very important. Mary Nolen, Margaret Bobonich, Lakshi Aldredge and Susan Tofte had a conference call with the DNA’s BOD and DCNB Chair (Paula Berman) to discuss the current DCNP certification. At this point, no one wants to see the DCNP fail or be retired. But we expressed several concerns about the exam and the governance over it. We explored the possibility where the DSPG and DNA could collaborate and promote ONE certification.

We have made these recommendations for the DCNP credential:  

a) The DCNP has been eligible to apply for accreditation but has not done so. Costs associated with the process has been a significant barrier for the DNA and DCNB. However, critical elements required for accreditation have not been met and must be established BEFORE the DCNP can be accredited. Of great concern to the DSPG is that there must be a current SOP/SOC established before this can be achieved. There must also be defined educational criteria and specific knowledge base identified for our specialty.

b) Voices in the dermatology NP community have also expressed concern that the DCNP exam is not reflective of current dermatology NP practice. We believe that the exam content should be re-evaluated through input of a larger (more representative) sample of the 4000 derm NPs currently practicing in the U.S.

c) If the DCNP is to be a valued certification, then we suggest that oversight of the DCNP exam should be by an NP-only group that is representative of all clinicians nationally and not just NPs from the DNA.

d) We are hopeful that DSPG and DCNB can work together to improve and preserve the DCNP exam/credentials. We recognize that the certification is owned by the DCNB who will ultimately make the determination regarding it’s future. We are awaiting their decision and plan.

e) If the DCNP cannot or will not be modified to address these concerns, we have explored other options to create a new national Dermatology NP certification. We have been in discussions with AANP and AANPCP (national certifying body for FNP and Adult-Gero NP) who have been informative about the process behind an ACCREDITED certification exam which must be legally defensible. The emphasis is on establishing an examination based on validated competencies representative of our specialty. These discussions have been eye-opening and can help guide DSPG to make quality decisions. In addition to conversations with the AANPCP, we have discussed developing a certification with other national certification accrediting organizations.
There you have it. Again, we apologize for the lengthy letter but we believe that Dermatology NPs deserve a comprehensive update regarding the state of our profession. We hope that this will engage many of you to actively participate in some of these new developments that are important for dermatology. Your feedback, comments and suggestions are encouraged and can be posted on the AANP SPG website for all to view.

Hope to see everyone in New Orleans for the AANP Conference and/or at Maui Derm NP+PA in Colorado Springs. The AANP SPG will meet at both conferences. Feel free to share this with other dermatology colleagues.

Respectfully,

Margaret Bobonich
Mary Nolen