Although the language used to articulate these Domains and Core Competencies was significantly revised from the 2002 and earlier versions to reduce redundancy and facilitate measurement and evaluation, the content remains the same. Based on feedback from nurse educators, it became evident that the 2002 and earlier competencies as stated were often redundant and their large number unwieldy when attempting to construct evaluation instruments. NONPF obtained consultation from experts in competency evaluation and measurement to help identify future directions. NONPF undertook further refinement of these competencies to enhance their usability. The purpose of this revision was not to change the content of the competencies but rather to revise the language and presentation to facilitate measurement and evaluation. The resulting articulation of the Core Competencies reduces the number of terminal competencies to be measured by removing redundant competencies that appeared in several of the seven domains and by clustering competencies into aggregates.

All Nurse Practitioners should be able to demonstrate these core competencies at graduation. Each set of specialty competencies builds upon this set of core competencies. Throughout the competencies, patient is defined as the individual, family, group, and/or community.

**DOMAINE ONE: Management of Patient Health/Illness Status**

**COMPETENCIES**
The nurse practitioner demonstrates competence in the management of patient health/illness status when she/he:

1. Provides health promotion services
2. Provides disease prevention services
3. Provides health protection interventions
4. Provides anticipatory guidance
5. Provides counseling
6. Promotes healthy environments
7. Incorporates community needs, strengths, and resources into practice
8. Applies principles of epidemiology and demography in clinical practice
9. Demonstrates critical thinking and diagnostic reasoning skills in clinical decision making
10. Obtains a health history from the patient
11. Performs a physical examination
12. Differentiates between normal, variations of normal and abnormal findings
13. Employs screening and diagnostic strategies
14. Analyzes data to determine health status
15. Develops differential diagnosis
16. Formulates a diagnosis
17. Prioritizes health needs/problems
18. Formulates an evidence-based action plan
19. Initiates therapeutic interventions
20. Manages the health/illness status over time
21. Prescribes medications within legal authorization
22. Counsels the patient on the use of complementary/alternative therapies
23. Evaluates outcomes of care
24. Communicates effectively using professional terminology, format, and technology
25. Provides for continuity of care

**DOMAIN 2: The Nurse Practitioner-Patient Relationship**

**COMPETENCIES**
The nurse practitioner demonstrates competence in the nurse/patient relationship when she/he:

26. Attends to the patient's responses to changes in health status and care
27. Creates a climate of mutual trust
28. Provides comfort and emotional support
29. Applies principles for behavioral change
30. Preserves the patient's control over decision making
31. Negotiates a mutually acceptable plan of care
32. Maintains confidentiality and privacy
33. Respects the patient's inherent worth and dignity
34. Uses self-reflection to further a therapeutic relationship
35. Maintains professional boundaries
DOMAIN 3: The Teaching-Coaching Function

COMPETENCIES
The nurse practitioner demonstrates competence in the teaching-coaching function when she/he:
36. Assesses the patient's educational needs
37. Creates an effective learning environment
38. Designs a personalized plan for learning
39. Provides health education
40. Coaches the patient for behavioral changes
41. Evaluates the outcomes of patient education

DOMAIN 4 Professional Role

COMPETENCIES
The nurse practitioner demonstrates competence in the professional role when she/he:
42. Demonstrates evidence-based approaches to care
43. Delivers safe care
44. Functions in a variety of roles
45. Communicates personal strengths and professional limits
46. Advocates for the advanced practice role of the nurse
47. Markets the nurse practitioner role
48. Participates as a member of health care teams
49. Collaborates with other health care providers
50. Consults with other health care providers
51. Advocates for the patient
52. Acts ethically
53. Incorporates current technology
54. Evaluates implications of health policy
55. Participates in policy making activities
56. Provides leadership
57. Accepts personal responsibility for professional development
DOMAIN 5: Managing and Negotiating Health Care Delivery Systems

COMPETENCIES
The nurse practitioner demonstrates competence in managing and negotiating health care delivery systems when she/he:

58. Incorporates access, cost, efficacy and quality when making care decisions
59. Demonstrates current knowledge of health care system financing as it affects delivery of care
60. Analyzes organizational structure, functions, and resources to affect delivery of care
61. Practices within an authorized scope of practice
62. Applies business strategies
63. Evaluates the impact of the health care delivery system on care.
64. Participates in all aspects of community health programs
65. Advocates for policies that positively affect health care
66. Negotiates legislative change to influence health care delivery systems

DOMAIN 6: Monitoring and Ensuring the Quality of Health Care Practice

COMPETENCIES
The nurse practitioner demonstrates competence in monitoring and ensuring the quality of health care practice when she/he:

67. Monitors quality of care
68. Assumes accountability for practice
69. Engages in continuous quality improvement

DOMAIN 7: Culturally-Sensitive Care

COMPETENCIES
The nurse practitioner demonstrates competence in culturally-sensitive care when she/he:

70. Prevents personal biases from interfering with the delivery of quality care
71. Provides culturally sensitive care
72. Assists patients of diverse cultures to access quality care
73. Incorporates cultural preferences, values, health beliefs and behaviors into the management plan
74. Assists patients and families to meet their spiritual needs
75. Incorporates patient's spiritual beliefs in care