NONPF Statement
On Nurse Practitioner Specialization

NONPF is the leader in education for preparing a quality nurse practitioner (NP) workforce to meet evolving societal needs. Over the years, there has been a proliferation of specialties that make NP regulation very difficult. There are currently 56 boards of nursing of which 28 recognize the NP with no specialty designation (National Council of State Boards, 2002). In addition, there are 31 different recognized names for NP specialties within these boards of nursing. In order to promote consistent criteria for nurse practitioner recognition and eliminate confusion in regulation, NONPF reaffirms its position on this issue.

For the purposes of NP education, a specialty must be broader than a system, a disease or a setting. NONPF proposes this criterion in addition to the proposed recognition and definition of an APRN specialty defined in the APN Consensus Work Group Report (p.5, 2006) which includes three additional criteria.

Nurse practitioners, as nurses and health care providers, provide holistic quality care to the individual, family, or community. Specialties that are broad based allow the nurse practitioner to span the conditions those individuals confront while promoting healthy lifestyles. Current specialties that are widely recognized in regulation include the following: Adult Acute Care NP, Adult NP, Family NP, Gerontology NP, Neonatal NP, Pediatric Acute Care NP, Pediatric NP, Women’s Health NP, Psych-Mental Health NP.

Restricting care to a specific setting, disease, or system limits the scope of practice and creates care dilemmas when problems occur beyond a restricted area of practice. This fosters fragmentation of care by focusing on the disease and not the patient. Sub-specialties, such as oncology, diabetes, neurology, and the emergency department, are value-added to the specialties. Sub-specialties promote an increased depth of knowledge to provide focused high quality care for specific diseases, systems and settings. Sub-specialties are recognized through certification as the need and numbers increase to allow for psychometrically sound testing. A suggested example is an Adult NP with a sub-specialization in diabetes care.

NONPF has been a proud participant in the APN Consensus Work Group and supports its recommendations with the addition of this crucial distinction.

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Reference