

Critical Elements in Managing Advanced Practice Environments

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An advanced Practice Registered Nurse (APRNs) are important healthcare providers in the healthcare system. They provide quality and affordable care, and also provide a solution to primary care shortage. These healthcare professionals hold a post-graduate education in nursing such as a master's certificate or higher levels in clinical nursing program. They have proficient knowledge, multifaceted decision-making capabilities, and clinical skills essential for advanced practice. Some of their roles include diagnosing, treating, and managing chronic health conditions and educate the community on diverse health problems. Example of APRNs includes Certified Nurse-Midwives, Certified Nurse Practitioners, Clinical Nurse Specialists, and Certified Registered Nurse Anesthetists. These healthcare professionals are licensed through a state board of nursing to offer patient care within their scope of practice. In most states, they are given the right to practice without get supervised by a physicians. But in those states embracing restrictive models, APRNs perform their roles with physician oversight (American Association of Nurse Practitioners, 2017). The essay compares and contrast the practice authority and scope of practice differences among APRNs in two states.

NP Definition

In Maryland, a nurse practitioner (NP) is regarded as an advanced practice registered nurse who is qualified to offer health care to patients. In this state, a NP is permitted to offer personalized healthcare to diverse populations without getting supervised by a physician. Thus, they are held held to the same legal and ethical standards of care (American Association of Nurse Practitioners, 2017). However, in Texas, the NP works under the supervision of a physician.

Practice Authority

Maryland has adopted the Full Practice Authority. Thus, they allow nurse practitioners to practice independently without getting supervised by a physician. But, in Texas, the state laws require NPs to be supervised by physicians. This agreement must be outlined in writing. Thus, this state practices restricted practice authority (American Association of Nurse Practitioners, 2017).

Scope of Practice

In Maryland, NPs are the authority to perform various functions without the supervision of a physician. Some of the roles they can perform independently include prescribing medications to their patients, physical assessment, setting up medical diagnosis, providing emergency care, referring patients to relevant accredited physicians, and other approved healthcare professionals. Also, they can collect, analyze, and interpret laboratory and diagnostic tests. In Texas, Nurse practitioners are not allowed to prescribe controlled substances even under physician supervision (American Association of Nurse Practitioners, 2017).

Licensure Requirements

In both states, licensing of NPs is done by the state Board of Nursing. One of the ways through which an NP gets licensed in this state includes the NCLEX licensure examination. Here, the applicant must pass the NCLEX exam to get a license. Also, an applicant has to provide satisfactory evidence to Maryland or Florida Nursing Board that his/her primary state of residence is Maryland or Texas and is not a party state. Thus, those who do not meet this requirement are not examined for a license in Maryland. Also, an NP can get a license by endorsement. However, this is for foreign students only.

Prescriptive Authority and Requirements to attain DEA Number

NPs are authorized to prescribe CDS in Maryland. However, for them to perform this role, NPs need to be registered with PDMP. To get a DEA number, they need to apply first to the office of Controlled Substances Administration (OCSA) to get a CDS number, which is also required when applying for a DEA number. In the other state, NPs prescribe CDS under supervision and protocol requirements. They also need a DEA number to perform this role, which they obtain by applying at the DEA website (Drug Enforcement Administration, n.d).

Education Requirements

For one to be allowed to work a NP in Maryland, he/she has to meet various educational requirements. The applicant must have graduated with a Master's degree or higher in a clinical nursing program from an NP education program that is recognized nationally. Also, applicants in Texas need to meet similar educational requirements to become recognized NPs (National Council of State Boards of Nursing, 2010).

Certification Requirements

In both Maryland and Texas, certification for NPs is done by a state's board of nursing. Applicants seeking to get certified as nurse practitioners need to meet particular requirements. First, the applicant needs to have graduated from a graduate level program for NPs with a Master's nursing degree or higher and accredited by the state's nursing Board. Secondly, the applicant should hold an active Maryland or Texas license or a multistate license privilege to practice. Thirdly, the applicant should have a current national certification from ANCC, PNC or other Board approved national certifying body (National Council of State Boards of Nursing, 2010).

Future of APRN Practice

The proposed House Bill 1792 advocates for full practice authority in Texas. This proposed legislation recommends NPs be given the freedom to prescribe and dispense certain drugs, prescribe therapeutic and corrective measures, treat actual and potential health conditions, formulate primary and differential, medical diagnoses, and advanced assessments, and even order, perform and interpret diagnostic tests (Klick, 2019).

Full Practice Authority

De Bruijn-Geraets et al, (2018) organized a study to investigate the impacts of implementing full practice authority (FPA). The researcher found that the policy presents various new opportunities to nurse practitioners. They include the ability to perform and delegate prescriptions, injections, catheterizations, and other minor surgical procedures independently. Thus, the policy enhanced access to high-quality care. As a result, the researchers supported the policy initiative aimed to implement and support full practice authority in nursing practice.

Conclusion

In summary, APRNs play a key role in providing quality and affordable care, and also provide a solution to primary care shortage. Some states such as Maryland adopt full practice authority policy that allow NPs to perform various functions like diagnosing, treating, and managing chronic health conditions and educate the community on diverse health problems independently. On the other hand, Texas adopts a restrictive nursing model, whereby NPs are required to work under the supervision of physicians and other protocols. Various efforts have been made by healthcare stakeholders and legislators to push for the establishment of FPA policy in Texas, including creating bills.

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