The practice doctorate approach to assessing advanced nursing practice in Ireland

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Abstract:

Aim: To describe the practice doctorate scholarly approach to assess advanced nursing practice in Ireland to address healthcare and nursing policy initiatives.

Background: A global team from Ireland and the United States collaborated with stakeholders, using a practice doctorate approach to identify geographic healthcare needs, the current state of the education and the evolving roles of advanced nursing practice. In Ireland, current policy initiatives call for expanding the capacity for advanced nurse practitioners to meet healthcare needs in community settings.

Sources of Evidence: Further assessment data were required from stakeholders to inform graduate nursing education to prepare advanced practice nurses to fulfil increasingly complex healthcare needs. The practice doctorate approach included review of literature, current policy and assessment with interviews, dialogue and the development of working relationships with policymakers, academics and practitioners.

Discussion: The current state and future vision of graduate nursing education are evolving. A force field analysis identified promoting and restraining factors to the desired state of development of the primary care advanced practice role. Relationship building with stakeholders and sharing of expertise was key to engage academia and policymakers to address identified restraining forces. Short-term outcomes included development of collaborative relationships between practice, academia and policymakers, curricular development for the primary care nurse practitioner and intentionally shared dissemination to promote community graduate nursing education.

Implications for Nursing Practice: This innovative practice scholarship approach was used to assess and promote advanced nursing practice impact and promote the nursing profession globally.

Implications for Policy: Successful collaboration between two global partners was achieved to promote policy objectives for both nursing and health care, with the ultimate goal of improving health outcomes and population health.

Keywords: Advanced Nursing Practice, Global Health Policy, Health Policy, Nursing Capacity Building, Nursing Education, Nursing Leadership, Policy Implementation

Introduction

As 2020 has been declared the ‘Year of the Nurse’ by the World Health Organization (WHO), there is a focus on leading efforts to promote the global capacity for nursing leaders internationally. Nursing leadership is essential in order for the profession to contribute to the creation of and critical decisions regarding health policy for effective of health and social systems according to the State of the World’s Nursing Report 2020 (WHO, 2020). Nursing leaders require preparation with an advanced nursing skill set and associated competencies to assess, develop and promote evolving policy around nursing and health agendas.
Internationally, nursing is responding to the increasing need to develop the capacity for nursing leaders, particularly in advanced nursing practice roles (Elliott et al., 2016; Maier et al., 2016). Master’s level education is required in most countries to prepare for advanced nursing practice roles. In the United States, practice doctorate degrees are now recommended for advanced nursing practice roles to acquire expanded competencies in leadership, policy/advocacy, informatics, population health and evidence-based care (AACN, 2015; AANA, 2015; NONPF, 2018). Nurses in advanced nursing practice roles are key participants in enacting national healthcare policy objectives to address the complexities of healthcare and improve healthcare outcomes.

Background
A global team from a university in Ireland and three United States (U.S.) universities was formed consisting of practice doctorate-prepared nurses with doctor of nursing practice (DNP) degrees. The global team’s purpose was focused discourse and collaboration with international partners using a practice doctorate approach. An understanding of the specific geographic healthcare needs and the current state of the education and roles of advanced nursing practice were examined. In Ireland, a recent comprehensive healthcare policy initiative calls for expanding the capacity for advanced nurse practitioners (ANPs) to meet healthcare needs (Department of Health, 2019a). The aim of this article was to describe the scholarly approach adopted to assess advanced nursing practice in Ireland.

The practice doctorate approach: the scholarship of practice explained
The American Association of Colleges of Nursing (AACN) has defined scholarship as ‘the generation, synthesis, translation, application, and dissemination of knowledge that aims to improve health and transform health care’ (AACN, 2018, p.2). The purpose of practice scholarship was to improve healthcare outcomes by using evidence-based practice application to generate new knowledge in practice, which leads to the development of practice-based evidence (AACN, 2018). Practice or clinical scholarship is the realm of the practice doctorate, incorporating both integration and application that is rigorous to ensure a scholarly approach to the discipline and to promote leadership to advance the profession. Integration incorporates knowledge in new creative applications that ‘change paradigms and offer keen insights to solve problems’ (Moran et al., 2020, p. 46). This interconnection of ideas from nursing and other disciplines brings innovations to original concepts and research (Boyer, 1990). The complexity of health care demands an integrated, interdisciplinary approach that is collaborative within practice and which can affect change in patient, population and system outcomes. Application scholarship is connected to practice and incorporates evaluation of analysis of outcomes and policy.

Nurses prepared with the practice doctorate, specifically, the doctor of nursing practice degree, bring added value to healthcare (Burson et al., 2016) with contributions to advance the profession, and shape health policy and nursing policy. Acquired skills and competencies from this education facilitate recognition of the context of a healthcare problem and assessment of facilitators and barriers to achieving a desired state. This includes engagement of stakeholders, collaboration and negotiation. As a result, these nurses are perfectly suited to establish the good governance of evidence that can be used to positively impact healthcare outcomes (Moran et al., 2020). Through the existing practice-focused nursing doctorate approach, the nurse engages in interprofessional collaboration to address the gap between the current state of practice and the desired state of practice, which ultimately leads to transformed healthcare systems; timely translation of evidence into practice; and improved healthcare costs associated with quality and satisfaction of care.

Characteristics of the practice doctorate include a commitment to practice, using high level expertise in advanced nursing roles to lead efforts in improving outcomes for individual patients and population health. Practice inquiry methods include an ability to identify and assess the problem in the context of the practice setting and development of the clinical question. The practice scholar uses specific frameworks to assess the evidence around the topic from both the literature and data from the local context. Evidence-based interventions are then developed and modified to the practice context and implemented with specific measures determined for evaluation, interpretation and dissemination (AACN, 2014).

The Actualized DNP Model (Burson et al., 2016), used for this project, is a framework to characterize the components of the practice doctorate to fully understand the impact of the practice doctorate scholarship approach (See Fig. 1). The model succinctly describes how the unique skill set and advanced nursing knowledge attained through completion of the DNP degree provides the framework for the development of innovative advanced practice roles, where the practitioner implements evidence-based knowledge across practice settings (that transcends the bedside) and generates practice-based knowledge.

The nurse with a practice doctorate utilizes competencies that are developed in the education process that incorporates the DNP Essentials (AACN, 2006) in order to implement innovative new roles and generate practice-based knowledge. The DNP Essentials describe competencies that incorporate scientific evidence, organizational knowledge, leadership,
business acumen, informatics skill and policy analysis. These doctoral-level competencies influenced the approach taken by members of the global team in the international community to assess the current state and consider critical factors which may influence contemporary educational requirements for advanced nursing practice in Ireland.

International practice scholarship approach exemplar: assessing advanced nursing practice in Ireland
To address the increasing need for nursing practice leaders globally, a unique approach through the lens of practice scholarship was used to assess advanced nursing practice in Ireland. Particularly, this group focused on contemporary nursing care practice requirements in accordance with global policy and new models of care delivery. The overarching goal was to explore through discourse, the current state of graduate-level nursing education in Ireland to meet the evolving needs of patients, populations and systems through policy. Therefore, the practice doctorate approach was used to guide the project process, beginning with assessment of the current state of advanced nursing practice related to healthcare policy in Ireland.

Sources of Evidence
The sources of evidence for this project involved a review of not only the current literature, but also a critical review of evolving policy. Guided by a conceptual framework, a comprehensive assessment was performed on the status of graduate nursing education and the healthcare environment in Ireland.

Literature review
A thorough literature and policy review was completed to assess the current status of healthcare providers in Ireland. A search of the research literature was undertaken using online databases (PubMed, CINAHL, Google Scholar) from 2013 to 2019. Terms and supplemental keywords searched included “nurse practitioner,” “advanced nursing practice,” “advanced practice nurse,” and “advanced practitioner” and only English language publications considered. To further understand and compare the education and regulation of advanced practice nurses globally, a thorough review of the relevant, unpublished grey literature, such as policy briefs and governmental reports related to national nursing education guidelines was performed from September 2018 to December 2019 with the following results.

The Irish National Evaluation of Clinical Nurse and Midwifery Specialist and Advanced Nurse/Midwife Practitioner Roles (SCAPE – Specialist Clinical and Advanced Practitioner Evaluation) study collated healthcare policymakers’ views of specialist and advanced nursing practice roles in Ireland. Policymakers believed that advanced practice nurses contribute to higher

Figure 1 Actualized DNP Model (Burson et al., 2016).
quality patient care by leading initiatives to improve patient guidelines, staff education and policy development (Begley et al., 2014). Subsequently, the Nursing and Midwifery Board of Ireland (NMBI, 2017) has promoted the roles of registered advanced nurse practitioners (RANPs) and published the Advanced Practice (Nursing) Standards and Requirements to guide post-graduate educational programmes for master’s level preparation. Most recently, the Department of Health (2019b) produced the Policy on the Development of Graduate to Advanced Nursing and Midwifery Practice that included a comprehensive policy and plan to streamline advanced nursing education in Ireland. Further, the Department of Health recommended a 2% increase in the number of advanced practice nurses to reach a goal of an additional 500 ANPs by 2021. This increase in advanced nurse practitioners corresponded to the call for increased nursing capacity to respond to the objectives of a nationwide healthcare policy. To address increasing costs, wait times and improve access to care, Ireland has adopted a comprehensive person-centred, goal-driven strategy called Sláintecare (Department of Health, 2019a).

The goals and detailed National Service Plan (Health Services Executive, 2019) for Sláintecare were thoroughly assessed. Sláintecare outlines the need for reorienting models of care from the current focus on acute care to shifting provision of care to community settings, with an emphasis on prevention and management of chronic disease. The National Service Plan (2019) to implement Sláintecare goals calls for strengthening nursing and midwifery capacity and capability with educational efforts and targeted programmes to promote clinical leadership and practice to support clinical nurse/midwife specialists and advanced nurse/midwife practitioners. The focus on key areas such as primary care, chronic disease management and the development of digital/informatics technology will enhance and develop nursing leaders needed to achieve policy goals. As is the case in many countries, Ireland is experiencing a shortage of healthcare providers that could potentially be addressed by increasing the number of advanced nurse practitioners (ANPs) and midwives, particularly in the primary care setting.

As the team evolved, stakeholders were identified. Collaboration revealed an opportunity to work with academic and policy leaders in Ireland. Negotiation ensued that resulted in an invitation from the Center for Integrated Care (CeIC) at Dublin City University (DCU). Further, two of the U.S. global team members were eligible for sabbatical and secured a Fulbright scholarship to Ireland beginning fall, 2019 to dialogue and collaborate with key stakeholders. The entire team maintained a connection with the project via monthly digital meetings to support the U.S. scholars while in Ireland.

With advanced nursing practice scope/title/role/definition in Ireland evolving (Fealy et al., 2015; NMBI, 2017), further assessment data were required from a variety of stakeholders, including academics, practice and policymakers, to inform the graduate-level advanced practice nursing preparation needed to fulfil increasingly complex healthcare needs in the primary care arena. The project intent was to better understand the current master’s level education of ANPs and the potential for practice doctorate level education for advanced nursing practice in Ireland. Additionally, the assessment of current system-level competencies, including leadership, chronic disease management, informatics and policy/advocacy competencies, was needed to understand and promote appropriate graduate nursing education for expanding roles.

**Conceptual framework**

Critical to the success of the project was the development of working partnerships between the Fulbright scholars, the global team, influential educators, practice leaders and policymakers in Ireland. The conceptual framework for the project work in Ireland was from Spies et al. (2017) Model for Upscaling Global Nursing and Midwifery Partnerships, which links foundational requisites and implementation strategies with resulting outcomes related to upscaling global capacity partnerships (See Fig. 2, Model for Upscaling Global Nursing and Midwifery Partnerships).

Foundational requisites are the ‘necessary resources or infrastructure needed to conduct partnerships’ (Spies et al., 2017, p. 337). These important components included an ‘identified mission, mutual values and goals, intellectual capacity, servant leadership, funding, and professional support’ (Spies et al., 2017, p. 338). The ‘mission, mutual values, and goals’ were established with dialogue and relationship building through frequent and productive meetings with Irish leaders from academia, practice and policymakers, and with collaborative presentations from Irish and U.S. nursing practice scholars. Sharing of expertise from both countries, with the attitude of ‘servant leadership and cultural humility’, on topics regarding graduate nursing education, primary care practice, chronic disease management and informatics competencies, clarified strengths and opportunities for further development. ‘Professional support’ continued via technology with ongoing monthly meetings between the United States and Ireland with global team members and from the Centre for Integrated Care (CeIC). ‘Funding’ from the Fulbright scholarship for U.S. scholars enabled travel and support for the project work and realized the Fulbright mission to ‘foster mutual understanding between the United States and partner nations’ (US Department of State, n.d., p. 1). The formation
of enduring relationships between U.S. and Irish universities was established.

**Assessment process**
The intentional assessment of the Irish healthcare environment was accomplished with interviews, dialogue and the development of working relationships with policymakers, academics and advanced nurse practitioners currently in practice in Ireland. The current state and future vision (desired state) of graduate nursing education in Ireland evolved from this input. A focus in the areas of nursing informatics competencies and chronic disease management, particularly for primary care ANPs was considered. Institutional review board (IRB) determination from both the U.S. and Irish universities designated the project as quality improvement and not research, meaning that official IRB approval was not warranted.

The literature and the assessment identified the specific regional healthcare challenges and opportunities for improvement. Ireland is poised for significant change with the implementation of *Sláintecare* and the Health Services Plan’s goal to move integrated person-centred care to community-based care from acute services. General practice physicians (GPs) are in short supply (Department of Health, 2018; Irish Medical Times, 2017), and the preparation of primary care ANPs to practice in community settings alongside GPs and in primary care centres is a proposed solution to increase the number of community practitioners.

A force field analysis was then developed to identify promoting and restraining factors to the desired state of development of the primary care ANP role in Ireland (see Table 1 for a force field analysis derived from themes identified in the interviews).

Given the driving forces to achieve the desired state outlined in the *Sláintecare* policy, the priority focus was on developing community care services. Ireland has standardized master’s level preparation for advanced nursing practice roles and universities were willing to expand programmes to prepare graduates for primary care and community settings. Therefore, the country was poised to address increasing capacity for community care to improve patient satisfaction related to prolonged wait times for care and ultimately decrease costs of delayed access to primary care to improve healthcare outcomes.

Restraining forces identified from stakeholder interviews would need consideration to achieve the desired state. These included the varied resources available in both public and
private sectors of health care in Ireland to expand primary care access. Advanced nursing practice roles are well established in hospitals in Ireland, but intentional dialogue and collaboration was needed by both medicine and nursing to define and support the evolving role of the community primary care ANP to meet the needs in the changing system. Further, academic support would be needed to develop primary care practice partnerships to provide clinical placements for primary care ANP students.

This thorough assessment of the country’s current state of healthcare delivery and graduate nursing education drove the subsequent evidence-based interventions with practice doctorate leadership expertise. As a result, short-term outcomes were realized to achieve policy goals in Ireland.

**Discussion**

Project interventions by global team members to address the desired state produced short-term outcomes related to progressing towards implementation of the primary care ANP in Ireland. These interventions included relationship building through meetings with stakeholders and sharing of expertise through multiple presentations to engage academia and policymakers to address identified restraining forces.

Dialogue and collaboration were used to achieve the first short-term outcome of engaging nursing academic leaders and the medical community. Sharing of U.S. expertise in the primary care ANP role, particularly in the patient-centred medical home, was formally presented with physician colleagues that illustrated a potential for integrating the ANP into primary care practice in Ireland. The interprofessional primary care presentation fostered further discussion on defining the role, curriculum development, regulation and support for the role post-graduation in terms of a residency programme. This resulted in beginning discussions on a consortia model of multiple university collaboration to combine resources to prepare nurses for the primary care ANP role in Ireland.

Another short-term outcome was the collaboration and consultation on a proposed primary care ANP curriculum for one of the Irish universities. The skill set needed by the primary care ANP in Ireland in relation to current graduate curriculum content on leadership, team delivery and clinical decision-making competency domains was considered. Therefore, through collaborative discourse with faculty, proposed expanded course content for the primary care was developed for this university including patient-centred, interdisciplinary delivery concepts, chronic disease management and informatics/digital technology to prepare advanced practice nurses to deliver care as outlined in Sláintecare policy. Realizing that an expanded skill set was needed to enact policy initiatives, but to also develop, promote and advocate for health and nursing policy, the university has a goal to develop advanced nursing practice education at the practice doctorate level in the near future. Fulbright scholar outcomes were realized with the opportunities to promote mutual understanding with respect regarding cultural differences. Nurse leaders from the United States and Ireland interacted in an open atmosphere of mutual trust and engagement that resulted in positive sharing of ideas and expertise to move nursing, healthcare and population health forward and ensure sustainability of project efforts.

Finally, project lessons learned were intentionally shared through dissemination. Engagement and dialogue with stakeholders from academia, practice and policy led to the acknowledgement of shared expertise that can be gained from
multiple avenues of dissemination. Dissemination of project findings included presentations on the practice doctorate approach to upscaling global capacity at international nursing conferences, including International Network of Doctoral Education in Nursing conference, the AACN Doctoral Education conference and International Council of Nurses Advanced Practice Nursing conference, Diabetes Ireland Conference and Exhibition (DICE) and the World Health Organization Nursing, 2020 conference at the Royal College of Physicians Ireland.

Limitations
Policy work evolves over time, and the main limitation was the short duration of the project work over the period of an academic year for sabbatical leave. This led to short-term outcomes based on establishment of relationships with stakeholders. The time limitation was further impacted by the COVID-19 restrictions in early 2020, leading to early cessation of the Fulbright scholarship experience for one of the team members. However, as identified in the assessment process with key stakeholders, continued interaction and dialogue is needed to address the restraining forces with physician and nursing acceptance and support of the new primary care ANP role. As new primary care ANP programmes are introduced, intentional practice-academic partnerships will need to be created to further clarify the primary care ANP role and facilitate clinical experiences for students. Ultimately, healthcare policy such as Sláintecare, will drive public and private support for resources needed to accomplish population health goals for the country. Nursing leaders will play a key role in addressing restraining forces.

Implications for Nursing Practice
According to the Model for Upscaling Global Nursing and Midwifery Partnerships (Spies, et. al., 2017), in order to upscale global nursing leadership capacity, scholarship efforts are needed to realize the ultimate outcomes that include improving, uplifting and expanding nursing practice and developing nursing practice leaders to achieve advancement of global health. The conceptual model guided a multifaceted project by a global team from the United States and Ireland that resulted in multiple outcomes to promote advanced nursing practice preparation for expanding nursing roles internationally. The practice doctorate approach was critical to initiate and build collaborative relationships in order to move initiatives forward. Sharing expertise and not prescribing solutions to healthcare issues was necessary to establish sustainable partnerships. This occurred through dedicated, multifaceted assessment efforts on the current state of graduate nursing education and practice, as well as intentional listening, with an attitude of cultural humility in order to build credibility and trust with international partners. The result was the establishment of international collaborative partnerships through practice scholarship that ultimately can produce nursing leaders who will advance the profession and improve healthcare outcomes globally.

Implications for Health Policy
This successful collaboration between two global partners in nursing was oriented towards preparing nurses for advanced practice roles to achieve policy objectives for both contemporary nursing and health care, with the ultimate goal of improving outcomes for patient care and population health. This innovative and unique practice scholarship team approach can be used to upscale advanced nursing practice impact and outcomes and promote the nursing profession globally.

Conclusion
In summary, this project demonstrated all the characteristics of the practice scholarship approach to improve healthcare outcomes by using evidence-based practice application to generate new knowledge in practice. The process began with an assessment of the practice setting in Ireland, followed by a literature review of current status of advanced nursing practice in the country and sought evidence-based solutions used around the globe. The practice doctorate team implemented evidence-based interventions and solutions, modified to the context of the educational needs, practice setting and health-care policy mandates in Ireland, and evaluated the methodology and approach used by examining and disseminating the outcomes. This project demonstrated a commitment to practice, a high level of expertise in practice, with leadership in the area of primary care population health and advanced nursing practice role to respond to evolving policy initiatives to impact healthcare in Ireland.

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