**POSITION STATEMENT:**

**Professional Titling and Credentialing for Advanced Practice Registered Nurses – Psychiatric Mental Health**

**Introduction**

The intent of this paper is to clarify the scope of advanced practice psychiatric mental health nursing, recommend a unified title that accurately reflects the specialty nature of psychiatric nursing, and set forth competencies that can be utilized to validate advanced practice nursing clinical expertise. This position paper has been revisited, first published in 1996, because of changes in the mental health care delivery system. These changes served as a catalyst for changes and advances in psychiatric-mental health nursing education, and has influenced both an expansion of and clarification of scope of practice, credentialing, titling and roles in Psychiatric-mental health nursing practice. In addition, lack of clarity now exists regarding the various responsibilities of entities involved in titling, licensing and credentialing. There is also a lack of clarity regarding the titles assigned to advanced practice psychiatric mental health nurses. These significant factors have prompted the revision of APNA’s original position paper. Because Psychiatric-Mental-Health Advanced Practice Nurses have functioned autonomously /independently for years as direct providers in an ever changing mental health care environment, there is an ongoing need for clarification regarding scope, titling, and role. The role development of the advanced practice psychiatric nurse is presented in a companion document Historical Development of the Role of the Advanced Practice Psychiatric Mental Health Nurse (APNA, 2003).

**Background and Definitions**

Scope of practice refers to a body of specific knowledge which is operationalized as a range of activities a provider may engage in based on educational preparation. Scope of practice, based on a specific body of knowledge in a specialty, is usually defined by specialty nursing organizations. For psychiatric mental health nursing, this scope is outlined in the Scope and Standards for Psychiatric-Mental Health Nursing Practice developed by ANA in collaboration with the two PMHN specialty organizations, the American Psychiatric Nurses Association (APNA) and the International Society of Psychiatric Nursing (ISPN) (ANA, 2000). Scope of practice documents AND defines competencies or measurable outcomes that are expected for the advanced practice nurse following a proscribed program of study. Core competencies are basic and required outcomes of a given clinical curriculum in nursing that reflect entry level practice competencies (AACN, Essentials of Masters Education, 1996; NONPF, 2002). Educational preparation for the advanced practice registered psychiatric-mental health nurse (APRN-PMH) is undertaken in a graduate program in which a minimum of a Master's degree is obtained (SERPN, 1994). Following graduation, APRNs-PMH become certified, referred to as credentialing (AACN, White Paper, 1998).

Credentialing is a national process that involves successfully passing an examination.
given by an accredited organization, resulting in obtaining a certificate. Thus credentialing and certification are used synonymously in defining a level or standard of excellence achieved. The national examination tests knowledge and competencies obtained through graduate education. Many certifications are offered. The American Nurses Credentialing Center (ANCC) has been certifying psychiatric mental health nurses at the specialist level since 1974 (Smoyak and Skiba-King, 1998).

All states have requirements regarding the education criterion (a minimum of a Master's degree) and the credential necessary (certification) to apply for authorization to practice as an Advanced Practice Nurse (NCSBN, 2002). State Boards of Nursing, are responsible for regulating nursing practice. In addition to education and certification requirements each defines the scope of practice for the advanced practice nurse. States usually rely on a published document such as the ANA Scope and Standards for Psychiatric-Mental-Health Nursing in developing scopes which are contained in nurse practice acts (laws) (NCSBN, 2002). However, states are independent entities in regulating nursing practice and in some instances have constrained the breadth of the scope of practice for nurses in their jurisdiction even though there is a nationally recognized scope and accepted standards for the specialty (Kaas & Moller, 2002). This results in a lack of consistency regarding the range of practice activities an advanced practice nurse can undertake from state to state (Haber, 2001). These constraints increase fragmentation of mental health treatment and have the potential for reducing access to mental health care and to qualified providers. On the other hand, when practicing in states that have adopted the nationally accepted scope, APRNs provide comprehensive mental health services, including prescribing medication, thus decreasing fragmentation.

When applicants meet the state requirements to practice at an advanced level, (education and credentialing), they are licensed and are assigned a title. Titles differ from state to state for advanced practice nurses further presenting confusion for consumers, payors and other providers. Titles, in the form of acronyms, (CS, CNS, NP, APRN, ARNP) may differ from state to state even though individual state practice acts contain the exact same, nationally accepted, scope of practice. The National Council of State Boards of Nursing utilized the title APRN in its publication on a "model nursing act and rules" (NCSBN, 2002).

The whole issue of functional role further complicates the titling issue. Advanced practice registered psychiatric-mental health nurses usually practice within a defined role such as Clinical Nurse Specialist or Nurse Practitioner. These role titles in the form of acronyms (CNS, NP) are also part of the titling confusion (Shea, 1999).

Confusion has also evolved over the last several years among entities (e.g. specialty organizations, educational institutions, credentialing bodies, states) regarding their role in defining scope of practice, deciding on appropriate curricula, titling and credentialing nurses at an advanced level. Titling and credentialing, the actual end products of education, often have seemed to define education, and/or scope of practice. Scope of practice is the responsibility of nationally recognized specialty organizations. Nurse-Educators plan curriculum based on the scope of practice, standards for practice and a
defined set of core competencies, or measurable outcomes set forth by the specialty organization(s) being mindful of society's mental health needs. Some graduate programs add other expected competencies related to a specific population (e.g., geriatrics) or a specific role (e.g., consultant, nurse practitioner). States are responsible for regulating nursing practice and some states in doing such have been selecting, from the defined nationally accepted scope of practice, only certain competencies/activities for the advanced practice registered psychiatric-mental health nurse. For example, some states have prescriptive authority within the scope of practice for the advanced practice PMH registered nurse, and some do not (Kaas & Moller, 2002). Thirty-eight states do have prescriptive authority for CNS-PMH and all states have prescriptive authority for NP-PMH. Moreover, credentialing, the testing of educational preparation, has in recent years become more of a driver for nursing practice. When credentialing bodies develop examinations that are not representative of an accepted body of knowledge and scope of practice, standards and competencies, as defined by the specialty but rather test functional role (CNS, NP), confusion for states in their functions of licensing and titling may occur.

Scope of Practice and Competencies
Advanced Practice Registered Nurses in Psychiatric Mental Health Nursing (APRN-PMH) who are educationally prepared at the Master's level, focus their clinical practice on individuals, families or populations across the life span who are at risk for developing or presently have psychiatric disorders. The APRN-PMH is a specialist who provides primary mental health care to patients seeking mental health services in a wide range of inpatient and outpatient settings. Primary mental health care and treatment provided by APRN-PMHs involves the continuous and comprehensive services necessary for the promotion of optimal mental health, prevention and treatment of mental illness and health maintenance. This includes the assessment, diagnosis, and management of mental health problems and psychiatric disorders and/or referral for mental health and general health problems (Haber & Billings, 1995; ANA, 2000; NONPF, 2001, in press). The APRNs-PMH practice is based on knowledge and competencies in health assessment, differential diagnosis, multiple treatment interventions including individual, group, and family psychotherapy and prescription of psychopharmacological and related medications. These core competencies, coupled with expertise in the organization and management of complex delivery systems, qualify the APRN-PMH to:

- complete comprehensive assessments,
- develop the differential diagnosis,
- formulate and implement a treatment plan,
- conduct individual, group, and family psychotherapy,
- prescribe, monitor, and evaluate psychotropic and related medications,
- clinically manage psychiatric disorders including but not limited to, severe and persistent neurobiological disorders
- provide psychiatric/mental health services in general health settings,
- direct and provide home health services,
In addition advanced practice psychiatric-mental health nurses may function in roles that primarily focus on research, consultation, education, and program planning. Using a mental health focus, APRN-PMHs also develop, implement, and evaluate programs that include: client, family, and provider education, health risk factor modification, crisis stabilization, psychiatric rehabilitation, community-based intensive case management, and outreach activities (Haber & Billings, 1995; Talley, 1997).

**Position**

Given the critical juncture between scope of practice, titling issues and credentialing requirements, and the need for conceptual clarity about the rapidly evolving specialty competencies of the advanced practice psychiatric-mental health nurse (APRN-PMH), APNA takes the following position:

There is a common body of knowledge in advanced practice psychiatric-mental health nursing that encompasses a set of core competencies. This body of knowledge reflects a single scope of practice.

Advanced practice psychiatric-mental health nursing core competencies are implemented in a variety of ways according to practice site, role function, and patient care needs. This body of knowledge reflects a single scope of practice.

The American Psychiatric Nurses Association approves and endorses the American Nurses Association Scope and Standards (2000) identified title of APRN-PMH as the accepted title to recognize the licensed ADVANCED PRACTICE REGISTERED NURSE.

The APRN is educationally prepared at a minimum of a Master's Degree and may assume roles such as a clinical nurse specialist or a nurse practitioner. The American Psychiatric Nurses Association approves and endorses the American Nurses Association's Scope and Standards (2000) which identifies all APRNs-PMH as having a single scope of practice.

This single scope of practice must therefore be measured by one comprehensive national certification examination.

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References


