Book Reviews

Advanced Practice Nursing: An Integrative Approach (4th ed.)
Edited by Ann B. Hamric, Judith A. Spross, Charlene M. Hanson
St. Louis: Saunders Elsevier, 2009, 822 pp.
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Reviewed by Marjorie MacDonald

This is the fourth edition of the popular textbook on advanced practice nursing (APN) in the United States. Because there is no similar Canadian text on APN, this is the one most likely to be used in nursing schools across the country. We use it in more than one course in the graduate programs in my own school. This latest edition meets the standard set by previous editions in terms of its comprehensive coverage of key issues and topics relevant to American advanced practice nurses, educators, and administrators. Many of the issues are less relevant to the Canadian context because of the different stage of APN development in Canada, differences in our definition of APN, different health-care systems, and significant regulatory and reimbursement differences. This concern will be taken up below.

Overall, this edition is thoroughly up to date, incorporating the latest literature and research. The chapter authors are well known in their respective areas of expertise. The book's organization and framework are comprehensive and cohesive, and the content flows logically from the book's underlying premises, which are unchanged from the previous edition. The editors continue to express the conviction that APN must have a defined core to provide a framework that standardizes the understanding of advanced practice across the profession. The entire text explicates that core in relation to the focus of each major part of the book.

Each previous edition has included significant new content, and this edition is no different. The content is divided into four sections: Historical and Developmental Aspects of APN, Competencies of APN, Advanced Practice Roles: The Operational Definitions of APN, and Critical Elements in Managing APN Environments. The first part, containing four chapters, focuses on the history of APN development in the United States, conceptualizations and definitions of APN, and role development. New topics have been added, including research on the history of prescriptive authority and recent work to conceptualize APN emerging from the APRN Joint Dialogue Group (2008). Chapter 3

contrasts the more expansive definition of APN put forward in the document Essentials of Doctoral Education for Advanced Nursing Practice (American Association of Colleges of Nursing, 2006) with the narrower definition reflected in this book, which embodies a hegemonic American perspective and which arguably conflicts with the developing conceptualization of APN in Canada. The danger lies in Canadian nurses uncritically adopting this US perspective without careful consideration of the uniquely Canadian values undergirding our health-care system and our definition of nursing, which includes individuals, families, groups, communities, and populations as clients. Given that public health nurses were not at the table for a consensus meeting to define the nature of APN practice in the United States (APRN Joint Dialogue Group, 2008), it is no surprise that the nature and focus of public health nursing, for example, would be excluded from consideration as a definitional feature of APN. There is a significant but marginalized opposition in the United States to the definition of APN presented in this book. In chapter 2 Hamric acknowledges that many different definitions and interpretations of APN exist in the United States but argues that for APN to achieve its full potential the profession must agree on key issues, such as definition.

Part 2 of the book outlines the seven core competencies of APN: direct clinical practice, expert coaching and guidance, consultation, research, leadership, collaboration, and ethical decision-making. Some new content has been included in this edition. For example, in chapter 9 the notion of systems leadership has been added to that of clinical and professional leadership. Also, the argument that direct clinical practice includes *only* practice with individuals and families has been strengthened within the definition of APN in chapter 5. It is this definition that some nursing specialties, most notably public health nursing, take particular exception to. I was very pleased to see that social justice, however brief and narrowly understood, has been added to the conceptualization of advanced practice as it relates to ethical decision-making. A social justice focus has a long history in public health nursing, and it is interesting to see the emerging emphasis on social justice in APN at the same time that public health nursing is being excluded from its definition.

In part 3 the editors include a discussion of the various established APN roles (Clinical Nurse Specialist, Primary Care and Acute Care Nurse Practitioner, Nurse Anesthetist, Nurse Midwife) as well as the blended role of clinical nurse specialist/nurse practitioner and currently emerging APN specialties such as the NP Hospitalist role, Forensic Nursing, and Wound, Ostomy, and Continence Nursing. One chapter that was included in the third edition (The Advanced Practice Nurse

Case Manager) has been eliminated entirely from part 3 of this new edition, although no explanation for this decision is provided in the preface or the early chapters. In the previous edition, the case manager role was discussed as a new APN role and the chapter authors expressed some uncertainty with respect to whether the APN Case Manager role would become a sanctioned APN specialty. Its absence from this edition suggests that the editors have concluded that Case Manager is not a unique advanced practice role.

In the Canadian context, only two APN roles have been identified: nurse practitioner (NP) and clinical nurse specialist (CNS). Although the Nurse Anesthetist role is emerging in Ontario, its future is uncertain and it seems unlikely that an Advanced Practice Nurse/Midwife role will be developed in Canada, although advanced midwifery practice may well develop (MacDonald, Schreiber, & Davis, 2005). I worry that at this stage of APN's development in Canada, restricting the definition of APN to established roles will defeat the opportunity for the emergence of new forms of advanced practice. An earlier study of opportunities and challenges for advanced practice in Canada (Schreiber et al., 2003) identified many nurses who exemplified the characteristics and competencies of advanced practice according to the CNA Framework on Advanced Nursing Practice. These nurses did not, however, fit the role definitions of NP or CNS. Are we to leave these innovative practices out of consideration? I would argue that this is one of the dangers of adopting, uncritically and in its entirety, the American conceptualization of advanced practice nursing reflected in this book.

In part 4 the authors discuss in some depth the various environments within which American APNs must practise, and they provide good direction on how to manage practice in those environments. Some of the chapters have less relevance to APN practice in Canada — for example, business planning and reimbursement mechanisms. Others, however, are quite relevant and very useful; these include the chapter on strengthening APN in organizational structures and cultures. Another change is that the final chapter in the third edition, Outcome Evaluation and Performance Improvement, has been divided into two chapters in the fourth edition, one providing an excellent integrative review of the research on APN outcomes and the other discussing the use of data and information technology to improve practice.

Overall, this is an excellent, comprehensive, well-written text on the status, development, issues, and conceptualization of APN in the United States. There is much here to learn from and to use in our teaching and practice in Canada, but I recommend that we view it through a critical lens.

Book Reviews

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Outcome Assessment in Advanced Practice Nursing (2nd ed.)

Edited by Ruth M. Kleinpell New York: Springer, 2009, 311 pp. ISBN 978-0-8261-2583-5

Reviewed by Joan Tranmer

Assessing the outcomes of advanced practice nursing (APN) care is imperative, especially in economically and socially challenging times. Ruth M. Kleinpell has provided advanced practice nurses, researchers, and decision-makers with an updated book on strategies and resources relevant to the assessment of outcomes of advanced nursing practice. The chapters in the book, authored by experts in their fields, provide theoretical and practical overviews of APN outcomes research, measurement strategies for specific nursing specialties and patient conditions, and, importantly, a framework for developing APN roles and assessing their effectiveness.

The first part of the book focuses on methodological issues in outcomes research. Chapter 1 sets the stage by identifying and classifying types of outcomes relevant to the assessment of APN interventions, including outcomes related to care, patients, and performance, and studies in which these outcome measures have been assessed. Chapter 2, Analyzing Economic Outcomes in Advanced Practice Nursing, provides an overview of types of economic evaluation analyses and details for the practitioner and researcher to consider when incorporating economic evaluation into their assessments. This is extremely valuable information, and it is presented in a comprehensive but succinct manner. Chapter 3 clearly presents the challenges faced by advanced practice nurses in selecting both nurse-sensitive and organizationally relevant outcomes. Issues related to data availability and efficiency and specificity of measures are discussed. Chapter 4, General Design and Implementation Challenges in Outcome Assessment, outlines common design issues, such as ensuring that the study design and purpose are linked; selecting objective, measurable, and relevant outcomes; and maximizing the design and analysis to link cause and effect, and not solely associations. One of the more helpful suggestions in this chapter is to use, where possible, established theoretical or organizing frameworks. The final chapter in this first section provides advice on locating outcome measurement assessment tools for APN. The first five chapters of the book serve as a comprehensive template for advanced practice nurses to use when planning outcome assessment and evaluation of practice in their organization.

The next five chapters are centred on outcome assessment methodologies relevant to cardiovascular nursing, ambulatory care, clinical nurse specialist practice, nurse-midwifery, and advanced practice in nurse anesthesia. Each chapter details specific examples or illustrations of relevant outcome measures, study questions/designs, and analysis of findings. The case examples illustrate very clearly the pitfalls, challenges, and opportunities associated with outcome assessment. In this group of chapters, the different roles and scopes of practice for the various APN positions are impressive. For example, the chapter in which Nancy Dayhoff and Brenda Lyon explore outcome assessment in clinical nurse specialist practice illustrates the broad and complex scope of the CNS role. These authors provide a very useful summary that categorizes the outcomes of CNS practice and roles across three spheres of influence — patient-client, nurse, and organization-network — and give examples of advanced practice interventions and potential evaluation strategies.

The final chapter of the book, Resources to Facilitate APN Outcomes Research, offers an overview of three key resources to facilitate APN research: an innovative Research Chair Program sponsored by the Canadian Health Services Research Foundation, an evaluation framework, and an APN data-collection toolkit. The chair of the Research Chair Program, and a co-author of this chapter (Alba DiCenso), articulates the impact of a well-funded chair program in increasing the capacity of applied APN research at both a clinician and a graduate-student level. One of the key outputs of the Research Chair Program has been the development, by another co-author (Denise Bryant-Lukosius) during her doctoral and postdoctoral studies, of the Participatory, Evidence-Based, Patient-Centred Process for Advanced Practice Nursing Role Development, Implementation, and Evaluation — the PEPPA framework. The PEPPA framework is a nine-step process, including steps related to establishing roles and structures, implementation processes, and evaluation. As the authors state, there is sufficient evidence to support the effectiveness of APN roles, but now the questions need to focus on the identification of those patient populations, conditions, and models of care in which APN roles are most effective.

The editor and authors of this book are to be commended for providing an important resource for advanced practice nurses and nurses in leadership and professional practice positions who are challenged to develop and evaluate models of nursing care delivery. Outcomes assessment and evaluation are necessary for the future development and growth of nursing. *Outcome Assessment in Advanced Practice Nursing* is an important resource for fulfilling this professional mandate.

Book Reviews

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