

OVERVIEW OF EMERGENCY NURSE PRACTITIONERS (ENPs)

BACKGROUND INFORMATION There are currently an estimated 12,000 emergency nurse practitioners (NPs) in the United States (AANP, 2014). Emergency departments have been using NPs of all specialties to fill manpower gaps since the 1980's. Until the 1990's there were limited programs available to prepare NPs to work specifically in emergency care. There are now currently seven NP programs that include specialty preparation in emergency care (Emory, Jacksonville University, Loyola, Rutgers University, University of Texas at Houston, University of Maryland, and Vanderbilt).

CONGRUENCY WITH ADVANCED PRACTICE REGISTERED NURSE (APRN) MODEL In 2008, the APRN Consensus (or LACE Model) was adopted nationally as the regulatory framework for NP licensure, accreditation, certification, and education. The model delineates advanced practice nursing (APN) based on role (nurse practitioner, clinical nurse specialist, nurse midwife, or nurse anesthetist) and population focused competencies (family/individual across the life span, adult-gerontology, pediatrics, neonatal, psych/mental health, and women's health/gender specific). NP educational preparation further differentiates population focused competencies based on primary or acute care needs. Although patient care is not setting specific, NPs who are prepared as primary care providers have different competencies than those prepared for acute care roles. These unique educational differences govern an NP's scope of practice. In addition to educational preparation based on role, population and acute or primary care focus, NPs may become specialty providers. Competencies and certification at the specialty level are determined by specialty organizations (i.e. emergency, cardiology, oncology, orthopedics gastroenterology, etc.). Competencies for the ENP were initially published in 2008 and are now currently being revalidated by AAENP.

EMERGENCY NURSE PRACTITIONER BOARD CERTIFICATION (ENP-BC) Currently the only board certification for emergency nurse practitioners is offered through ANCC utilizing a portfolio process. This is the only NP level specialty certification in which this process is currently utilized. Eligibility for certification requires two years or 2000 hours of emergency clinical practice within the past 3 years, certification in a population foci (FNP, AGNP, PNP, ACNP), completion of 30 hours of continuing education in emergency care, and demonstrated exemplary performance in two of five professional development and leadership categories (ANCC, 2013). The applicant must also submit self and peer performance evaluations and submit a written exemplar that shows expertise as an emergency care clinician. Graduates of emergency focused educational programs as described above are not eligible for this certification at the time of graduation.

AAENP INITIATIVES The ENP role is unique in that it spans population and acuity continuums, and by the physician model under which our colleagues (Physician Assistants) & those hiring us train. In order to remain present and competitive in this workforce, the ENP role must be clearly understood by the inter-professional team in which we practice, by those in positions of hiring for ENP positions, and by regulatory agencies. Although all State Nursing Boards require certification, consistency regarding certification type is lacking which has resulted in experienced ENPs being fired from current positions under the auspices of improper certification. Current initiatives are focused on expanding national education regarding the unique role of the ENP, supporting the practice of current ENPs, updating competencies and exploring potential partnerships with nursing and medical organizations. Conversations with American College of Emergency Physicians (ACEP), American College of Osteopathic Emergency Physicians (ACOEP), American Academy of Nurse Practitioners (AANP), and the American Nurses Credentialing Center (ANCC) are ongoing regarding certification opportunities via exam.



Authors:

Jennifer Wilbeck, DNP, ACNP-BC, FNP-BC
Theresa Campo, DNP, FNP-C, ENP-BC, FAANP
Dian Evans, PhD, FNP-BC, ENP-BC, FAANP
Sue Hoyt, PhD, FNP-BC, FAANP, FAEN, FAAN
Elda Ramirez, PhD, FNP-BC, ENP-BC, FAANP, FAEN

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