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INTRODUCTION

The American Academy of Ambulatory Care Nursing (AAACN) is a specialty nursing organization for nurses practicing in ambulatory care settings. AAACN is responsible for establishing and maintaining the standards for ambulatory care professional nursing practice. Ambulatory care is defined as outpatient care, across the life span, in which individuals stay less than 24 hours in the health care environment and are then discharged to their residential situation following the care episode.

This publication is an updated scope of practice statement and 17 revised standards for the clinical and administrative professional practice of ambulatory care registered nurses (RNs). The standards promote effective clinical and administrative management of increasingly complex ambulatory care RN roles and responsibilities in a changing health care environment.

This publication may be used to:

1. Guide outpatient care systems in the development of structure and processes for delivery of ambulatory care nursing practices (e.g., policies, procedures, role descriptions, and competencies).
2. Guide the delivery of quality nursing care for patients, populations, and communities.
3. Facilitate the development of professional nursing knowledge in ambulatory care.
4. Facilitate the evaluation of professional nursing performance as evidenced in performance appraisals, peer reviews, and reflective practice.
5. Stimulate participation in research and evidence-based practice.
6. Guide performance improvement initiatives in clinical and organizational environments.
7. Guide ethical practice, cultural humility, and patient advocacy.
8. Serve as a tool to advance ambulatory care professional nursing practice, patient health states, and performance outcomes of ambulatory care health care settings.

The scope of practice statement addresses the definition and unique characteristics of ambulatory care nursing, the conceptual framework, its history over the past 35 years, diverse types of ambulatory care settings, roles of ambulatory care RNs, trends and issues in ambulatory care, and future directions. The standards specify the competencies needed for professional clinical and administrative practice. Together, the scope and the standards provide a structure for cataloging and unifying distinct nurse-patient interactions, and organizational and population activities that occur in diverse ambulatory care environments.

Overview of the AAACN Standards 10th Edition

In 1987, AAACN published the first edition of the standards. That document contained the landmark standards for professional ambulatory care nursing and administration. It outlined, for the first time, a definition, philosophy, and standards reflecting the unique ambulatory care nursing environment.

Ambulatory care nursing is dynamic – changing and expanding to meet the health care needs of the populations served, along with the demands of organizations delivering care. Inspired by the visions, values, and traditions of the past, these standards reflect current professional norms, practices, and expectations. The standards recognize the evolving landscape of professional practice by regular review with needed revisions since 1987, ensuring usefulness, relevancy, accuracy, and measurable outcomes. The standards are now in their 10th edition.

This set of revisions represents the work of the Scope and Standards of Practice for Professional Nurses Task Force members who conducted a broad scope of activities from November 2021 to October 2022. Task Force members searched a broad base of literature for knowledge and evidence, and consulted with nurses practicing in diverse organizational settings. Recognized ambulatory care nurse leaders provided additional input through reviews and comments.

The 10th edition of the *Scope and Standards of Practice for Professional Ambulatory Care Nursing* contains some significant revisions from previous versions. In addition to the revised scope of practice, this publication contains 17 standards. The first six standards address the phases of the nursing process; the last 11 standards address professional performance. The depth and breadth to which ambulatory care RNs engage in the total scope of professional ambulatory care nursing practice is dependent upon their education, experience, role, practice setting, and the populations served (American Nurses Association [ANA], 2021).

Each standard contains three sections:

1. A statement of the standard addressed.
2. Measurement criteria that may be used for demonstrating competency for meeting the standard.
3. Additional standard statements and measurement criteria for nurse executives, administrators, and managers.

These changes offer clarification and specificity for the distinct domains of clinical and administrative nursing practice in ambulatory care settings.

- Perform a critical role in the delivery of telehealth services and virtual care. The art and science of telehealth practice have improved access to care, reduced patient risk, and expanded the coordination of health care services (AAACN, 2016). As the number of terminal-degreed ambulatory care RNs increase, the nursing community is better equipped to conduct research, apply evidence-based care, and improve systems, and the health and well-being of populations (American Association of Colleges of Nursing [AACN], 2022).

Advanced Practice Registered Nurses (APRNs)

Ambulatory care APRNs are RNs who have acquired specialized advanced clinical knowledge and skills to provide health care. Expectations of APRNs include holding a master's or doctoral degree and an APRN licensure to practice.

APRNs have built on the practice of the RN by demonstrating a deeper and broader scope of knowledge, a greater synthesis of data, increased complexity of skills and interventions, and significant role autonomy. APRN is an umbrella term identifying four advanced practice roles in ambulatory care:

- Certified RN anesthetist.
- Certified nurse midwife.
- Clinical nurse specialist.
- Nurse practitioner.

In ambulatory care, APRNs may practice independently or in collaboration with physician staff as providers of health care, directing the patient's medical diagnosis, treatment, and management. Collegial relations exist between APRNs and RNs who function in the clinic or telehealth services. They practice according to standards set by their specialty certification, state law(s), and organizational policies and guidelines.

Establishing the professional scope and standards for APRN practice in ambulatory care settings is the responsibility of the appropriate advanced specialty certification organization. However, as the national dialogue regarding expectations of nurse leaders at all levels continues, APRNs prepared at the doctoral level will assume more responsibility for the translation of evidence to practice and population-based outcomes.

Nursing Leadership Roles

As the complexity of care and systems in the ever-expanding ambulatory care environment continues to grow, nursing leadership has many forms. Nursing leadership roles are found in clinical practice (e.g., APRNs), administration, informatics, and technology. Nurse leaders are also innovators, inventors, and educators. Ambulatory care nurse leaders may be researchers who develop evidence-based practice, create new knowledge, and advance our understanding of ambulatory care and community policy. Effective nurse leadership is critical for driving innovation and inspiring transformative change (Hughes, 2022).

VII. Professional Trends and Issues

The field of ambulatory care continues to expand as the landscape of health care changes from an emphasis on acute to ambulatory care. There is a paradigm shift in focus from illness management to health promotion and wellness, as well as providing value-based care focused on quality outcomes for both individual patients and populations. Quality care provided with the Quadruple Aim focuses on better outcomes, enhanced patient experience, lower costs, and improved clinician satisfaction (Bachynsky, 2019). Rising industry trends driving clinical excellence and best practices can be summarized by addressing turnover, burnout, and workplace violence (Bernardes et al., 2021; Mitchel, 2022; Shaffer & Curtin, 2020; Stemley, 2022). Patient volumes remain in flux during a dynamic post-pandemic era and creating a significant virtual shift in care delivery (Wosik et al., 2020). Advancements in technology, competing priorities, and the speed of change make resilience a key priority for nurses in the ambulatory care setting.

General Trends and Issues

To improve patient safety, a national incentive program to use electronic health records (EHRs) was offered through the American Recovery and Reinvestment Act of 2009 (Singh & Sittig, 2016). Today, most hospitals and health care providers have implemented EHRs and data sharing or exchange capabilities to promote interoperability, allowing ambulatory care RNs to stay abreast of a comprehensive information database. EHR interoperability and access for the ambulatory care nurse improves care delivery, aligns with care coordination and transition management standards across health care entities, and integrates care plans across the continuum of care (Yaraghi & Lai, 2021).

With the passage of the PPACA on March 23, 2010, Americans without health insurance were able to choose low-cost insurance coverage in an open competitive market. Today, more patients have health care coverage than ever before, and the demand for primary care practitioners and ambulatory care RNs continues to rise. The general population has more complex health care needs, which require special care in the ambulatory care setting (Davis et al., 2021). Concurrently, nursing attrition is on the rise, impacted by retirements and resignations. Coupled with decreased numbers of new graduates into the profession due to faculty vacancies, the shortage of ambulatory care RNs continues to escalate. Additionally, health care demands of the COVID-19 pandemic have added to significant burnout, compassion fatigue, and turnover within ambulatory care nursing (AACN, 2020).

Health care access and delivery are expanding beyond traditional borders. Professional nurses have shifted from systems-level thinking to a more

STANDARD 7

Ethics

Standard

The RN practicing in the ambulatory care setting incorporates professional codes of ethics with compassion and respect for the inherent dignity, worth, and unique attributes of every person.

Competencies

Ambulatory care RNs:

1. Participate in the identification and resolution of ethical concerns using the nursing process, incorporating the Code of Ethics for Nurses (ANA, 2015; Fowler, 2015) and organizational policies.
2. Actively engage in addressing the ethical concerns of patients, colleagues, or systems through dialogue with nursing, and interprofessional communication may include members of the organizational ethics committee.
3. Apply knowledge of principles contained in the ANA (2003) Social Policy Statement and Code of Ethics as evidenced by nursing care and professional interactions.
4. Serve as the patient's advocate in matters of rights to confidentiality, privacy, and self-determination within legal, regulatory, and ethical parameters.
5. Ensure patient care reflects the cultural, spiritual, intellectual, age, educational, and psychosocial differences of individual patients, families, groups, and communities.
6. Disclose any observed illegal or incompetent practices, including decisions made by impaired or suspected health care personnel to supervisory leadership, appropriate professional bodies, and reporting agencies.
7. Educate and support patients in developing skills for self-efficacy.
8. Ensure informed decision-making by the patient or legally designated representative.
9. Ensure patients have opportunities to voice opinions, without fear of retaliation, regarding care and services received, and to have these issues reviewed and resolved per organizational policy and regulatory guidelines.
10. Foster therapeutic interactions with patients and effective interactions with interprofessional team members while maintaining professional boundaries.
11. Develop activities consistent with self-efficacy through personal and professional growth.
12. Engage in activities that promote an ethical environment for the provision of patient care and interactions with co-workers.

Additional Competencies for Nurse Executives, Administrators, and Managers

Ambulatory care nurse executives, administrators, and managers:

1. Model ethical practices in all business and patient care interactions, including adherence to regulatory, professional, and practice standards.
2. Create and maintain a just and accountable culture through transparent communication, and nondiscriminatory and equitable human resource practices.
3. Actively participate in decisions that address ethical risks, benefits, and outcomes for patients and staff.

STANDARD 9

Research and Evidence-Based Practice

Standard

The RN practicing in the ambulatory care setting actively participates in evidence-based practice initiatives and research activities to advance ambulatory care nursing and improve patient outcomes.

Competency

Ambulatory care RNs:

1. Review and evaluate current literature for research and evidence relevant to nursing practice.
2. Utilize current research findings and other evidence to expand professional knowledge, enhance role performance, and increase knowledge of nursing professional issues.
3. Identify clinical problems related to patient care delivery and nursing practice.
4. Evaluate the research evidence using criteria for scientific merit and optimal application in clinical practice settings.
5. Disseminate relevant evidence and research findings across organizational, community, and professional forums.
6. Integrate evidence and research findings into clinical practice.
7. Evaluate and reevaluate the outcomes of evidence-based interventions.
8. Initiate, support, and/or participate in clinical nursing, health care, and health system research studies conducted by professional, credentialed researchers.

Additional Competencies for Nurse Executives, Administrators, and Managers

Ambulatory care nurse executives, administrators, and managers:

1. Institute strategies that facilitate the utilization of research as an evidence base for nursing practice.
2. Use research findings and/or evidence-based practices in the development of all applicable policies, procedures, and guidelines for patient care.
3. Ensure research conducted in the clinical and/or organizational environment undergoes review and approval by an Institutional Review Board and adheres to ethical principles.
4. Validate that research studies are congruent with organizational and national goals and priorities for applicability to nursing practice.
5. Serve as a champion for nursing staff to participate in learning opportunities, organizational quality and performance improvement activities, and relevant research initiatives that advance the delivery of nursing and health care services in the outpatient setting.
6. Promote the integration of nursing research into clinical practice to improve quality.
7. Balance the costs and benefits to patients, staff, and the organization for participating in research studies.
8. Advocate for adequate organizational resources to enable nurses to learn and participate in evidence-based nursing practice, nursing research, and scholarly inquiry.
9. Evaluate the demands on staff and organizational resources before participating in research studies.
10. Collaborate with organizational and nursing colleagues to establish opportunities for nursing staff to participate in research and research findings implementation.
11. Participate in studies that enhance patient care delivery, person-centered outcomes, nursing practice, and organizational effectiveness.
12. Support and encourage nurse researchers to disseminate findings through activities, such as presentations, publications, consultations, professional nursing organizations, journals, and clubs.
13. Recognize staff for participation in evidence-based practice and research activities.
14. Create infrastructure that supports shared professional governance committees and the incorporation of evidence-based practices.
15. Develop and implement processes that provide structures for nursing staff to practice at the top of their license through a collaborative partnership that aligns with individual nurse practice acts.

STANDARD 17

Cultural Humility

Standard

The RN practicing in the ambulatory care setting integrates cultural humility and congruent practices that are person-centered and ethically driven by the principles of diversity, equity, inclusion, and belonging (DEIB). Adapted from ANA, 2021.

Competency

Ambulatory care RNs:

1. Apply knowledge of diversity, equity, inclusion, and belonging in all nursing practices.
2. Assess the effects and impact of discrimination and oppression on practice within and among vulnerable persons and groups.
3. Communicate with appropriate language and behaviors, including the use of medical interpreters and translators following consumer preferences.
4. Utilize skills and tools that are appropriately vetted for the culture, literacy, and language of the populations served.
5. Explore one's values, beliefs, implicit bias, and cultural heritage to identify and resolve gaps in knowledge, skills, and attitude.
6. Promote equal access to services, tests, interventions, health promotion programs, enrollment in research, education, and other opportunities.
7. Participate in research and quality improvement initiatives to improve health care and health care outcomes for culturally diverse consumers.
8. Identify the consumer's needs with consideration of social determinants of health and integrate patient-centered care, utilizing available and appropriate resources for the consumer.
9. Facilitate research, collaboration, and safe discussions to reduce the impact of bias in ambulatory care.

Additional Competencies for Nurse Executives, Administrators, and Managers

Ambulatory care nurse executives, administrators, and managers:

1. Advance organizational policies, programs, services, and practices that reflect respect, equity, and values for diversity, inclusion, and belonging.
2. Respect consumer decisions based on generational beliefs, tradition, family influence, and stage of acculturation.
3. Advocate for processes that improve access to care and improved quality of care for all people of the population served.
4. Engage consumers, key stakeholders, and others in designing and establishing cross-cultural partnerships.
5. Develop empathy in practice and apply it to all settings for consumers and colleagues.
6. Acknowledge one's values, beliefs, implicit bias, and cultural heritage to identify and resolve gaps in knowledge, skills, and attitude.
7. Integrate health-related beliefs, practices, and cultural values of diverse populations within nurse competency development.
8. Explore illness and diagnostic incidence and prevalence among culturally and ethnically diverse populations.
9. Recognize individuals' characteristics rather than generalizations.
10. Engage in and support lifelong learning to expand knowledge of cultures, social determinants of health, and other health equity challenges.
11. Value diversity and operate with curiosity and empathetic listening.
12. Develop strategic training programs to promote diversity, equity, inclusion, and belonging.