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introduction

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

This publication delineates the scope and standards of practice for professional ambulatory care nursing. The standards promote effective clinical and administrative management of increasingly complex ambulatory care nursing roles and responsibilities in a changing health care environment.

This publication can be used to:

1. Provide guidance for the development of structure and processes in the delivery of ambulatory care nursing (e.g. policies, procedures, role descriptions, and competencies).
2. Guide the nursing delivery of quality patient care.
3. Facilitate the development of professional ambulatory care nursing knowledge.
4. Facilitate the evaluation of professional nursing performance as evidenced in performance appraisals and peer reviews.
5. Stimulate participation in research and evidence-based practice.

This document includes the first scope of practice statement developed and published by AAACN. The statement addresses the definition of ambulatory care nursing, its history over the past 30 years, the diverse types of ambulatory care settings, the roles of ambulatory care nurses, and the trends and issues in ambulatory care.

Included in the scope of practice statement is an updated version of the conceptual framework for ambulatory care nursing that now includes three concepts: patient, nurse, and environment. This framework offers a structure for cataloguing and unifying the distinct nurse-patient interactions and organizational activities that occur in diverse outpatient environments.

This document may be used as a tool to advance ambulatory care professional nursing practice, patient health, and the performance outcomes of outpatient health care institutions.

Review of the AAACN Standards 2010 Edition

The first edition of the Standards was published in 1987. As the specialty of ambulatory care nursing expanded and the outpatient environment experienced dramatic changes, it became apparent that periodic revisions of the Standards would be necessary. These revisions ensure that AAACN Standards are relevant, appropriate, measurable, and useful.

Ambulatory care nursing is dynamic – changing and expanding to meet the health care needs of the populations served and the demands of the institutions where care is received. Inspired by the visions, values, and traditions of the past, these standards reflect current professional norms, practices, and expectations, and recognize the constantly evolving landscape of our professional practice systems.

This set of revisions represents the work of the Task Force members who conducted a broad scope of activities from January to December 2009. Task Force members searched a broad base of literature for knowledge and evidence, and consulted with nurses practicing in diverse organizational settings. Additional input was obtained through the members' review and comment period on the AAACN Web site in December 2009.

The 2010 edition of the Scope and Standards of Practice for Professional Ambulatory Care Nursing contains a significant revision from previous versions. Sixteen standards are provided in this publication. The first six standards address the six phases of the nursing process; the last ten standards address professional performance. Each standard contains a standard statement and measurement criteria that can be used for demonstrating compliance with the standard. These changes offer clarification and specificity for the distinct domains of clinical and administrative nursing practice in ambulatory care settings.
I. Definition of Professional Ambulatory Care Nursing

Professional ambulatory care nursing is a unique domain of specialty nursing practice that focuses on health care for individuals, families, groups, communities and populations. Nursing care occurs in primary and specialty care outpatient venues, non-acute community outpatient settings, during telehealth nursing encounters that occur in centers and medical offices, or by individual nurses in the home.

Ambulatory care nursing is characterized by professional nursing staff caring for high volumes of patients in short periods of time (always less than 24 hours), often dealing with issues in each individual encounter that can be unknown and unpredictable. Ambulatory care nurses address, in partnership and collaboration with other health care professionals, patients’ wellness, acute illness, chronic disease, disability, and end-of-life needs. As nurses, they are responsible for patient advocacy, coordination of nursing and other health services, implementation of nursing services, and continuity of care.

Professional ambulatory care nursing includes those clinical, organizational, and professional activities engaged in by registered nurses for and with individuals, groups, and populations that seek care for health-related problems and concerns or seek assistance with health maintenance and/or health promotion. These individuals, groups, or populations engage predominantly in self-care and self-managed health activities or receive care from family members or significant others outside institutional settings.

Ambulatory care nursing services are episodic and occur as a single encounter or a series of encounters over hours, days, weeks, months, or years. Despite time-limited episodic encounters, ambulatory care nurses generally have long-term relationships with patients, families, and caregivers, teaching and translating plans of care into doable activities to meet health needs. Ambulatory nurse-patient encounters take place in health care facilities, telehealth service situations, and electronic communiqués as well as in community-based settings, including outpatient health systems, private medical offices, freestanding clinics, schools, workplaces, or homes.

The major objectives of ambulatory care nursing are aligned with other types of nursing to:
- Protect and promote health
- Minimize suffering
- Maximize understanding during medical diagnostic and treatment phases
- Prevent illness and injury
- Apply nursing interventions to human responses in health, illness, disease, disability, and end-of-life circumstances
- Actively advocate for optimal health care of individuals, families, communities, and populations

Interactions between patients and ambulatory care nurses to achieve patient goals occur in the context of caring, compassion, and sensitivity to the patient’s cultural, ethnic, and age-related needs.

Using the nursing process, professional ambulatory care nurses in person-to-person and telehealth settings perform problem-focused assessments of patients’ and/or caregivers’ primary concerns, identify the problem(s), analyze and integrate subjective and objective data, decide on a plan of nursing action, apply the appropriate nursing intervention, and evaluate the outcomes.

II. Conceptual Framework

In 1998, AAACN nursing leaders and members collaborated to develop a conceptual framework for ambulatory care nursing practice, identifying two major concepts – patient and nurse. The current conceptual framework extends the original 1998 framework, identifying three major concepts: 1) patient, 2) environment, and 3) nurse. See Figure 1 for the conceptual framework diagram that delineates the relationships among the concepts.

Patient

Inherent within the concept of patient is that each individual is unique, functions holistically as a biological, psychosocial, and spiritual being, and is the center of ambulatory care patient-nurse interactions. The term ‘patients’ in the ambulatory care setting refers to individuals, families, caregivers/support systems, groups, and populations that approach the health care system in a variety of circumstances or health states. Patient health states are categorized as wellness or health, acute illness, chronic disease and/or disability, and end-of-life.

Generally it is the patient that initiates contact with the ambulatory care system to meet their wellness concerns and health needs. Patients maintain control of the encounter and treatment, with the nurse acting in a consultative role.
Environment

Environment as a concept helps define ambulatory care nursing practice, setting it apart from other nursing specialties. In addition to the nurse-patient relationships and interactions, ambulatory care nurses address organizational, social, economic, legal, and political factors within the health care system and in the external health care environment.

The internal ambulatory care environment has two major dimensions:
1. The internal care delivery environment where patients initially access and receive care and the nurse actually practices;
2. The external health care environment refers to both the geographic locale of the specific health care practice and contextual factors in the greater ambulatory care environment.

**Internal care delivery environment.** The ambulatory nursing care delivery environment is dynamic and diverse. It includes a broad scope of practice settings in which patients seek health care treatment and where the professional nurse functions. The ambulatory nursing care delivery environment includes such settings as an individual physician’s office, group office practices, free standing health or nursing clinics, ambulatory surgery centers, telehealth services, care coordination organizations (e.g., case, care, and disease management organizations), multispecialty health organizations (e.g. health maintenance organizations), military bases, prisons, schools, or comprehensive, integrated health care systems. Regardless of the setting, ambulatory encounters are always less than 24 hours.

**External health care environment.** The external environment refers both to the physical location of each health care practice setting as well as to health care contextual factors in the greater environment that affect ambulatory care nursing in unique ways.

The external geographic locale and contextual factors that affect an individual ambulatory health care setting often influence that setting’s mission, patient population, and practices. These external contextual factors include, but are not necessarily limited to, the surrounding community population’s specific needs, perceptions and resources, health policy, governmental laws, professional practice regulations, accrediting agencies, health care financing systems, and advances in science and technology (i.e., scientific knowledge and diagnostic and treatment technologies, as well as the information management systems that support and coordinate patient care through virtual information exchange). Further, each health care delivery setting is affected by such general circumstances as socioeconomic conditions, cultural considerations,
AAACN has established and published the standards for ambulatory care nursing practice. These standards are authoritative statements that describe the responsibilities for which ambulatory care nurses are accountable. In this version, the standards have been separated into two domains: Clinical Practice and Professional Performance.

**Standards of Clinical Practice**

The six Clinical Practice Standards address the science and art of nursing clinical practice in ambulatory care through the nursing process, a rational, systematic method of planning and providing nursing care. It was developed by Ida J. Orlando in the late 1950’s as she observed nurses as they practiced (Faust, 2002).

The nursing process has been refined by the profession over the intervening decades and now has six steps that are the basis of the standards of clinical practice in nursing (ANA, 2009):

- **Assessment**: The professional nurse’s systematic, dynamic collection and analysis of the patient and the presenting problem, using physiological, psycho-socio-cultural, spiritual, economic, age, and lifestyle data as well as the patient’s response to the problem.

- **Nursing Diagnosis**: A professional nursing statement that represents the nurse’s clinical judgment about the patient’s response to actual or potential health conditions or needs.

- **Identification of expected outcomes/goals**: The professional nurse identifies, using input from the patient/family, other health care professionals, and current scientific evidence, the expected outcomes of an individualized plan of therapies and/or treatment(s).

- **Planning**: The professional nurse outlines a set of written statements that set measurable and achievable short and long-term goals to meet expected outcomes.

- **Implementation**: The professional nurse provides nursing care services to meet the patient’s needs and goals and documents all activities.

- **Evaluation**: The professional nurse’s continual appraisal of the patient’s status and the effectiveness of the care received. The care plan and interventions are revised as appropriate.

**Standards of Professional Performance**

The ten Professional Performance Standards for ambulatory care nursing identify a competent level of behavior in the organizational and professional dimensions of each ambulatory care nurse’s specific role. These behaviors include activities related to:

- Performance improvement
- Education
- Professional practice evaluation
- Collegiality
- Collaboration
- Ethics
- Research
- Environment
- Resource Utilization
- Leadership

standards of practice for professional ambulatory care nursing
standard 1

Assessment

Standard
Ambulatory care registered nurses systematically collect focused data relating to health needs and concerns of a patient, group, or population.

Measurement Criteria
Ambulatory care registered nurses:
1. Collect subjective and objective health status data from multiple sources (patients, caregivers, members of the health care team, documented records, and other relevant sources).
2. Use appropriate evidence-based assessment techniques and instruments related to ambulatory care nursing in collecting pertinent patient or population data.
3. Prioritize data collection activities based on the patient’s, group’s, or population’s immediate health need or the nurse’s judgment of anticipated patient needs.
4. Synthesize available data, information, and nursing knowledge relevant to the presenting health situation to identify patterns and variances.
5. Prioritize the data and information collected based on the patient’s or population’s condition and preferences, the situation, and/or anticipated needs.
6. Document the information and data collected in a retrievable, understandable, and readable format.

Additional Measurement Criteria for Nurse Executives, Administrators, and Managers
Ambulatory care nurse executives, administrators, and managers:
1. Identify assessment elements specific to patient indicators for a given practice setting.
2. Ensure that information systems are in place that support the input and retrieval of reliable data.
3. Evaluate assessment practices to ensure timely, reliable, valid, and comprehensive data collection.
4. Use current research findings/practice guidelines to improve data collection elements.
standard 5
Implementation

Standard
Ambulatory care registered nurses implement the identified plan.

Measurement Criteria
Ambulatory care registered nurses:
1. Implement the plan of care in partnership with the patient, caregivers, and other health care professionals in a timely manner.
2. Prioritize interventions based on the patient’s condition, preferences, situation, and/or anticipated needs.
3. Implement the plan utilizing the unique knowledge, skills, and competencies required in ambulatory care nursing practice to promote, maintain, or restore health or support end-of-life situations.
4. Utilize competent, evidence-based ambulatory care nursing interventions during clinical visits, telephone encounters, and electronic communications according to state regulations, regulatory agency standards, and organizational policies and procedures.
5. Provide age-appropriate, population-specific care in a compassionate, caring, culturally, and ethnically sensitive manner.
6. Document all nursing care and services implemented in the patient health record.
7. Use available organizational technology, including automated patient health records, in nursing interventions and documentation.
8. Ensure that all components of the nursing process are documented in the patient health record, including nursing assessments, plans, interventions, patient outcomes, and evaluations.

Additional Measurement Criteria for Nurse Executives, Administrators, and Managers
Ambulatory care nurse executives, administrators, and managers:
1. Establish organizational systems that ensure implementation strategies are consistent with established plans.
2. Facilitate staff participation in decisions to improve implementation of the plan.
3. Collaborate with organizational peers to improve information systems documenting nursing care.
standard 5a
Coordination of Care

Standard
Ambulatory care registered nurses coordinate the delivery of care within the practice setting and across health care settings.

Measurement Criteria
Ambulatory care registered nurses:
1. Adhere to organizational staffing plans, position descriptions, policies, protocols, and procedures related to nursing professional practice.
2. Delegate appropriate nursing interventions to ambulatory care nursing team members based on their demonstrated competency, state practice acts, available evidence-based guidelines, regulatory and governmental standards, and organizational policies with defined outcome measures.
3. Conduct a reevaluation and follow-up of nursing care delivered based on the patient’s needs, the patient’s condition, or the patient’s request.
4. Provide relevant information across levels of care within one or more health care systems and when the patient’s care is transferred between and among different specialties and/or within one or more organizations.
5. Serve as the point of contact for coordination of care across multiple service agencies and/or health care organizations.
6. Coordinate with community resources when appropriate.
7. Facilitate continuity of care using the nursing process, multidisciplinary collaboration, and coordination of all appropriate health care services and community resources across the care continuum.

Additional Measurement Criteria for Nurse Executives, Administrators, and Managers
Ambulatory care nurse executives, administrators, and managers:
1. Develop and implement a plan or contracts of agreement between multidisciplinary health care service providers, community resource providers, and allied health care providers to facilitate seamless continuity of care throughout the ambulatory care setting.
2. Develop and evaluate documentation tools that ensure and support continuity of care within the organization and across health care systems.
3. Institute practices that promote the organization’s capacity to provide resources that ensure continuity of care among health care specialties and disciplines and across health care systems.
standard 7
Performance Improvement

Standard
Ambulatory care registered nurses enhance the quality and effectiveness of clinical practice, the organizational system, and professional nursing practice.

Measurement Criteria
Ambulatory care registered nurses:
2. Participate in quality and performance improvement studies.
3. Evaluate the findings of quality and performance improvement studies.
4. Institute evidence-based improvements into ambulatory care nursing clinical, organizational, and professional practice.
5. Eliminate or minimize factors in situations that pose actual or potential risks to safety.
7. Integrate into practice the findings of quality of care and performance improvement initiatives that improve the quality of ambulatory care nursing practice, outpatient care services, consumer outcomes, and organizational effectiveness and efficiency.

Additional Measurement Criteria for Nurse Executives, Administrators, and Managers
Ambulatory care nurse executives, administrators, and managers:
1. Lead the development, implementation, and evaluation of care delivery models and services that exceed patient and customer expectations.
2. Identify opportunities and set priorities to continuously improve ambulatory care nursing quality of care, patient outcomes, and organizational performance.
3. Sustain an environment where patients, families, caregivers, visitors, and staff provide input for patient care improvement activities.
4. Set standards and expectations for conducting and participating in ambulatory care nursing quality of care and performance improvement initiatives.
5. Provide resources and educational opportunities to implement quality of care and performance improvement activities.
6. Foster communication, collaboration, and coordination of improvement efforts.

continued on next page
7. Elicit input from staff, patients, and families for ways to improve patient care and organizational services.
8. Delegate quality of care and performance improvement activities as appropriate.
9. Ensure the systematic aggregation and analysis of quality data and the use of appropriate statistical tools and techniques.
10. Use data analysis to make changes that improve quality of care, treatment and services, customer satisfaction and outcomes, work environment, patient and staff safety, and organizational performance.
11. Continually compare internal data over time.
12. Identify variances that may indicate excellence or the need to improve.
13. Compare organizational findings against appropriate benchmarking opportunities.
14. Implement an ongoing, proactive program to identify and eliminate safety risks to patients or staff and risks for unanticipated adverse events.
15. Facilitate quality and performance improvement activities that foster excellence in nursing practice and patient care, improved health outcomes, and enhanced organizational services.
16. Integrate nursing quality improvement activities into the organizational plan.
17. Foster interdisciplinary collaboration to improve care, services, patient outcomes, and organizational performance.
18. Identify the effectiveness of nursing care across delivery systems.
19. Implement processes for identifying, addressing, and avoiding real and potential adverse events.
standard 11

Collaboration

Standard

Ambulatory care registered nurses collaborate with patients, family members, caregivers, and other health care professionals in the conduct of ambulatory care nursing practice.

Measurement Criteria

Ambulatory care registered nurses:

1. Communicate openly with patients, caregivers, and other health care professionals regarding patient care and the ambulatory care nurse’s role in the provision of that care.
2. Partner with patients, caregivers, and appropriate health care providers and resource agencies to develop a documented plan of ambulatory care nursing that is focused on outcomes and decisions related to treatment modalities and the delivery of services.
3. Unite with colleagues to achieve positive clinical and other changes that improve patient and organizational outcomes.
4. Use effective professional communication skills and tools to acquire and disseminate relevant information to patients, caregivers, and health care providers across the care continuum.

Additional Measurement Criteria for Nurse Executives, Administrators, and Managers

Ambulatory care nurse executives, administrators, and managers:

1. Collaborate with professional nursing staff, using shared decision making, to implement the scope and standards of ambulatory care nursing practice across the organization for registered nurses and technical and assistive nursing personnel.
2. Partner collaboratively with others at all levels of the organization to create an environment of excellence, trust, and continual learning.
3. Collaborate with organizational colleagues and act within organizational guidelines to formulate strategic, operational, and financial plans that:
   a. Establish the parameters and allocate the resources required to deliver safe, evidence-based, affordable, culturally competent, and age-relevant nursing care and services.
   b. Maintain communication conduits that promote nurse collaboration with other health care team members.
4. Advocate during budgeting cycles for the funding of appropriate staff positions, equipment, and supplies that ensure the delivery of safe, cost-effective, quality ambulatory nursing care and services.
5. Represent nursing on organizational decision making boards and committees, providing input into strategic, operational, and financial plans and system changes that impact the delivery of ambulatory nursing care and services and patient care outcomes.