NONPF Nurse Practitioner Role Core Competencies Table

The table presents the Essentials Level 2 sub-competencies to the left and the NP Role Competencies to the right. This design shows how the NP Role competencies are scaffolded from the Essentials. The NP Role Core Competencies are an extension of the Level 2 sub-competencies and are integrated with and complement the Essential competencies.

NP Programs are to meet all the Essential competencies as well as to NONPF's NP Role Core Competencies.

	AACN Essentials Advanced-Level Nursing Education	NONPF Nurse Practitioner (NP) Role Core Competencies	
	Domain 1: Knowledge for Nursing Practice Descriptor: Integration, translation, and application of established and evolving disciplinary nursing knowledge and ways of knowing, as well as knowledge from other disciplines, including a foundation in liberal arts and natural and social sciences. This distinguishes the practice of professional nursing and forms the basis for clinical judgment and innovation in nursing practice.	NP Domain 1: Knowledge of Practice The nurse practitioner integrates, translates, and applies established and evolving scientific knowledge from diverse sources as the basis for ethical clinical judgement, innovation, and diagnostic reasoning.	
	1.1 Demonstrate an understanding of the discipline of nursing's distinct perspective and where shared perspectives exist with other disciplines.	NP 1.1 Demonstrate an understanding of the discipline of nursing's and the NP's role distinct perspective and where shared perspectives exist with other disciplines.	
	1.1e Translate evidence from nursing science as well as other sciences into practice.		NP 1.1h: Integrate historical, foundational and population focused knowledge into NP practice.
	1.1f Demonstrate the application of nursing science to practice.		NP 1.1i: Translate evidence from nursing science and other sciences into NP practice.
	1.1g Integrate an understanding of nursing history in advancing nursing's influence in health care.		NP 1.1j: Evaluate the application of nursing science to NP practice.
	1.2 Apply theory and research-based knowledge from nursing, the arts, humanities, and other sciences.	NP 1.2 Apply theory and research-based knowledge from nursing, the arts, humanities, and other sciences.	
Domain 1	1.2f Synthesize knowledge from nursing and other disciplines to inform education, practice, and research.		NP 1.2k: Synthesize evidence from nursing and other disciplines to inform and improve NP practice at a micro, meso, and macro level.
	1.2g Apply a systematic and defendable approach to nursing practice decisions.		NP 1.2l: Translate science-based theories and concepts to guide one's overall NP practice.

1.2h Employ ethical decision making to assess, intervene, and evaluate nursing care.	NP 1.2m: Employ ethical decision making to manage and evaluate patient care and population health.
1.2i Demonstrate socially responsible leadership.	NP 1.2n: Practice socially responsible leadership.
1.2j Translate theories from nursing and other disciplines to practice.	
1.3 Demonstrate clinical judgment founded on a broad knowledge base.	NP 1.3 Demonstrate clinical judgment founded on a broad knowledge base.
1.3d Integrate foundational and advanced specialty knowledge into clinical reasoning.	NP 1.3f: Demonstrate clinical judgement using a systematic approach to inform, improve, and advance NP practice processes and outcomes.
	NP 1.3g: Demonstrate clinical judgement to inform and improve NP practice based on the foundational knowledge of advanced physiology/pathophysiology, advanced health assessment and advanced pharmacology.
1.3e Synthesize current and emerging evidence to Influence practice.	NP1.3h: Synthesize current and emerging evidence to influence NP practice.

Domain 2: Person-Centered Care Descriptor Person-centered care focuses on the individual within multiple complicated contexts, including family and/or important others. Person-centered care is holistic, individualized, just, respectful, compassionate, coordinated, evidence-based, and developmentally appropriate. Person-centered care builds on a scientific body of knowledge that guides nursing practice regardless of specialty or functional area.	**NP Domain 2: Person-Centered Care** The nurse practitioner uses evidence-based and best practices to design, manage, and evaluate comprehensive person-centered care that is within the regulatory and educational scope of practice. Fundamental to person-centered care is respect for diversity, differences, preferences, values, needs, resources and determinates of health unique to the individual.
2.1 Engage with the individual in establishing a caring relationship.	**NP 2.1 Engage with individuals and/or caregivers in establishing a caring relationship.**
2.1d Promote caring relationships to effect positive outcomes.	NP 2.1f: Practice holistic person-centered care to include confidentiality, privacy, comfort, emotional support, mutual trust, and respect.
2.1e Foster caring relationships.	NP 2.1g: Engage in shared decision making with consideration of determinants of health.
2.2 Communicate effectively with individuals.	**NP 2.2 Communicate effectively with individuals.**
2.2g Demonstrate advanced communication skills and techniques using a variety of modalities with diverse audiences.	NP 2.2k: Utilize communication tools and techniques to promote therapeutic relationships with individuals and/or caregiver.
2.2h Design evidence-based, person-centered engagement materials.	NP 2.2l: Apply motivational interviewing techniques to engage individual and/or caregiver in management of health.
2.2i Apply individualized information, such as genetic/genomic, pharmacogenetic, and environmental exposure information in the delivery of personalized health care.	NP 2.2m: Communicate findings to the interprofessional team, including the preceptor, in a systematic, concise manner to accurately convey the health status of the patient.
2.2j Facilitate difficult conversations and disclosure of sensitive information.	NP 2.2n: Demonstrate empathy and compassion in communication with others.
2.3 Integrate assessment skills in practice.	**NP 2.3 Integrate advanced assessment in NP practice.**
2.3h Demonstrate that one's practice is informed by a comprehensive assessment appropriate to the functional area of advanced nursing practice.	NP 2.3i: Utilize advanced critical thinking to determine the appropriate focused or comprehensive relevant patient history.

	area of advanced nursing practice.		NP 2.3j: Apply advanced assessment skills to perform a comprehensive patient physical assessment utilizing appropriate techniques.
			NP 2.3k: Apply advanced assessment skills to perform a focused patient physical assessment utilizing appropriate techniques.
			NP 2.3l: Order the appropriate diagnostic and screening tests based on patient's risk factors and chief complaint.
			NP 2.3m: Identify health risk factors.
			NP 2.3n: Evaluate determinants of health that may influence the patient's well-being.
			NP 2.3o: Utilize appropriate evidence-based screening tools.
			NP 2.3p: Document comprehensive history, screening, and assessment.
	2.4 Diagnose actual or potential health problems and needs.	NP 2.4 Diagnose actual or potential health problems and needs.	
	2.4f Employ context driven, advanced reasoning to the diagnostic and decision-making process.		NP 2.4h: Analyze physical findings to differentiate between normal, variations of normal, and signs of pathology to formulate actual and differential diagnoses.
	2.4g Integrate advanced scientific knowledge to guide decision making.		NP 2.4i: Utilize diagnostic reasoning to formulate actual and differential diagnoses.
	2.5 Develop a plan of care.	NP 2.5 Manage care of individuals	
	2.5h Lead and collaborate with an interprofessional team to develop a comprehensive plan of care.		NP 2.5k: Provide holistic person-centered care by developing a mutually acceptable, cost-conscious, and evidence-based plan of care.
	2.5i Prioritize risk mitigation strategies to prevent or reduce adverse outcomes.		NP 2.5l: Synthesize data to develop and initiate a person-centered plan of care.
Domain 2	2.5j Develop evidence-based interventions to improve outcomes and safety.		NP 2.5m: Prescribe medications safely and accurately using patient data and following legal and regulatory guidelines.

	NP 2.5n: Order appropriate nonpharmacological interventions.
	NP 2.5o: Anticipate risks and take action to mitigate adverse events.
2.5k Incorporate innovations into practice when evidence is not available.	NP 2.5p: Incorporate health promotion, maintenance and restoration of health into plan of care.
2.6 Demonstrate accountability for care delivery.	NP 2.6 Demonstrate accountability for care delivery.
2.6e Model best care practices to the team.	NP 2.6k: Provide healthcare services within scope of practice boundaries, which include health promotion, disease prevention, anticipatory guidance, counseling, disease management, palliative, and end of life care.
2.6f Monitor aggregate metrics to assure accountability for care outcomes.	NP 2.6l: Collaborate with the interprofessional team to formulate a plan of care.
2.6g Promote delivery of care that supports practice at the full scope of education.	NP 2.6m: Order consultations or referrals based on evidence and standards of professional care.
2.6h Contribute to the development of policies and processes that promote transparency and accountability.	NP 2.6n: Document the comprehensive care provided.
2.6i Apply current and emerging evidence to the development of care guidelines/tools.	NP 2.6o: Engage caregivers and support systems in care planning for the individual.
2.6j Ensure accountability throughout transitions of care across the health continuum.	
2.7 Evaluate outcomes of care.	NP 2.7 Evaluate outcomes of care.
2.7d Analyze data to identify gaps and inequities in care and monitor trends in outcomes.	NP 2.7g: Evaluate individual outcomes based on evidence-based interventions.
2.7e Monitor epidemiological and system-level aggregate data to determine healthcare outcomes and trends.	NP 2.7h: Revise plan of care based on effectiveness.

2.7f Synthesize outcome data to inform evidence-based practice, guidelines, and policies.	NP 2.7i: Analyze data to evaluate interventions, inequities, and gaps in care.
2.8 Promote self-care management.	NP 2.8 Promote self-care management.
2.8f Develop strategies that promote self-care management.	NP 2.8k: Integrate the principles of self-care management.
2.8g Incorporate the use of current and emerging technologies to support self-care management.	
2.8h Employ counseling techniques, including motivational interviewing, to advance wellness and self-care management.	NP 2.8l: Incorporate coaching in patient and family self-care management.
2.8i Evaluate adequacy of resources available to support self-care management.	NP 2.8m: Create partnerships with community organizations to support self-care management.
2.8j Foster partnerships with community organizations to support self-care management.	
2.9 Provide care coordination.	NP 2.9 Provide care coordination.
2.9f Evaluate communication pathways among providers and others across settings, systems, and communities.	NP 2.9k: Implement evidence-based guidelines and strategies that enable effective transitions of care and care coordination.
2.9g Develop strategies to optimize care coordination and transitions of care.	
2.9h Guide the coordination of care across health systems.	
2.9i Analyze system-level and public policy influence on care coordination.	
2.9j Participate in system-level change to improve care coordination across settings.	

Domain 3: Population Health Descriptor Population health spans the healthcare delivery continuum from public health prevention to disease management of populations and describes collaborative activities with both traditional and non-traditional partnerships from affected communities, public health, industry, academia, health care, local government entities, and others for the improvement of equitable population health outcomes. (Kindig & Stoddart, 2003; Kindig, 2007; Swartout & Bishop, 2017; CDC, 2020).	NP Domain 3: Population Health The nurse practitioner partners, across the care continuum, with public health, healthcare systems, community, academic community, governmental, and other entities to integrate foundational NP knowledge into culturally competent practices to increase health promotion and disease prevention strategies in effect the care of populations.
3.1 Manage population health.	NP 3.1 Manage population health.
3.1j Assess the efficacy of a system's capability to serve a target sub-population's healthcare needs.	NP 3.1o: Evaluate outcomes of population health using available sources of data to inform NP practice, guidelines, and policies.
3.1k Analyze primary and secondary population health data for multiple populations against relevant benchmarks.	
3.1l Use established or evolving methods to determine population-focused priorities for care.	
3.1m Develop a collaborative approach with relevant stakeholders to address population healthcare needs, including evaluation methods.	NP 3.1p: Integrate findings of population health data to impact competent care.
3.1n Collaborate with appropriate stakeholders to implement a sociocultural and linguistically responsive intervention plan.	
3.2 Engage in effective partnerships.	NP 3.2 Engage in effective partnerships.
3.2d Ascertain collaborative opportunities for individuals and organizations to improve population health.	

Domain 3	3.2e Challenge biases and barriers that impact population health outcomes.	NP 3.2i: Contribute clinical expertise and knowledge from advanced practice to interprofessional efforts to protect and improve health.
	3.2f Evaluate the effectiveness of partnerships for achieving health equity.	
	3.2g Lead partnerships to improve population health outcomes.	
	3.2h Assess preparation and readiness of partners to organize during natural and manmade disasters.	
	3.3 Consider the socioeconomic impact of the delivery of health care.	NP 3.3 Consider the socioeconomic impact of the delivery of health care.
	3.3c Analyze cost-benefits of selected population-based interventions.	NP 3.3g: Appraise ethical, legal, and social factors to guide population health policy development.
	3.3d Collaborate with partners to secure and leverage resources necessary for effective, sustainable interventions.	
	3.3e Advocate for interventions that maximize cost-effective, accessible, and equitable resources for populations.	
	3.3f Incorporate ethical principles in resource allocation in achieving equitable health.	
	3.4 Advance equitable population health policy.	NP 3.4 Advance equitable population health policy.
	3.4f Identify opportunities to influence the policy process.	
	3.4g Design comprehensive advocacy strategies to support the policy process.	
	3.4h Engage in strategies to influence policy change.	
	3.4i Contribute to policy development at the system, local, regional, or national levels.	

3.4j Assess the impact of policy changes.	
3.4k Evaluate the ability of policy to address disparities and inequities within segments of the population.	
3.4l Evaluate the risks to population health associated with globalization.	
3.5 Demonstrate advocacy strategies.	NP 3.5 Demonstrate advocacy strategies.
3.5f Appraise advocacy priorities for a population.	
3.5g Strategize with an interdisciplinary group and others to develop effective advocacy approaches.	
3.5h Engage in relationship-building activities with stakeholders at any level of influence, including system, local, state, national, and/or global.	
3.5i Demonstrate leadership skills to promote advocacy efforts that include principles of social justice, diversity, equity, and inclusion.	
3.6 Advance preparedness to protect population health during disasters and public health emergencies.	NP 3.6 Advance preparedness to protect population health during disasters and public health emergencies.
3.6f Collaboratively initiate rapid response activities to protect population health.	NP 3.6k: Summarize the unique roles and responsibilities of NPs in emergency preparedness and disaster response.
3.6g Participate in ethical decision making that includes diversity, equity, and inclusion in advanced preparedness to protect populations.	

	3.6h Collaborate with interdisciplinary teams to lead preparedness and mitigation efforts to protect population health with attention to the most vulnerable populations.	3.6l: Collaborate with a team to advance preparedness for potential public health emergencies.
	3.6i Coordinate the implementation of evidence-based infection control measures and proper use of personal protective equipment.	
	3.6j Contribute to system-level planning, decision making, and evaluation for disasters and public health emergencies.	NP 3.6m: Evaluate the impact of globalization on population health.

	Domain 4: Scholarship for the Nursing Discipline Descriptor The generation, synthesis, translation, application, and dissemination of nursing knowledge to improve health and transform health care (AACN, 2018).	NP Domain 4: Practice Scholarship and Translational Science The nurse practitioner generates, appraises, synthesizes, translates, integrates, and disseminates knowledge to improve person-centered health and systems of care.	
	4.1 Advance the scholarship of nursing.	NP 4.1 Advance the scholarship of NP nursing practice.	
	4.1h Apply and critically evaluate advanced knowledge in a defined area of nursing practice.		NP 4.1n: Translate advanced practice knowledge to inform practice and patient outcomes.
	4.1i Engage in scholarship to advance health.		
	4.1j Discern appropriate applications of quality improvement, research, and evaluation methodologies.		NP 4.1o: Lead scholarly activities resulting in the focus of the translation and dissemination of contemporary evidence into practice.
	4.1k Collaborate to advance one's scholarship.		
	4.1l Disseminate one's scholarship to diverse audiences using a variety of approaches or modalities.		NP 4.1p: Apply clinical investigative skills to improve health outcomes.
	4.1m Advocate within the interprofessional team and with other stakeholders for the contributions of nursing scholarship.		
Domain 4	4.2 Integrate best evidence into nursing practice.	NP 4.2 Integrate best evidence into NP practice.	
	4.2f Use diverse sources of evidence to inform practice.		NP 4.2l: Evaluate quality improvement processes and evidence-based outcomes.
	4.2g Lead the translation of evidence into practice.		
	4.2h Address opportunities for innovation and changes in practice.		

4.2i Collaborate in the development of new/revised policy or regulation in the light of new evidence.	NP 4.2m: Disseminate findings from quality improvement, implementation science, and research to improve healthcare delivery and patient outcome.
4.2 j Articulate inconsistencies between practice policies and best evidence.	
4.2k Evaluate outcomes and impact of new practices based on the evidence.	
4.3 Promote the ethical conduct of scholarly activities.	NP 4.3 Promote the ethical conduct of scholarly activities.
4.3e Identify and mitigate potential risks and areas of ethical concern in the conduct of scholarly activities.	NP 4.3j: Translate knowledge from clinical practice to improve population health outcomes through diversity, equity, and inclusion.
4.3f Apply IRB guidelines throughout the scholarship process.	
4.3g Ensure the protection of participants in the conduct of scholarship.	
4.3h Implement processes that support ethical conduct in practice and scholarship.	NP 4.3k: Utilize ethical principles to ensure participant safety through scholarship activities.
4.3i Apply ethical principles to the dissemination of nursing scholarship.	

Domain 5	Domain 5: Quality and Safety Descriptor Employment of established and emerging principles of safety and improvement science. Quality and safety, as core values of nursing practice, enhance quality and minimize risk of harm to patients and providers through both system effectiveness and individual performance.	NP Domain 5: Quality and Safety The nurse practitioner utilizes knowledge and principles of translational and improvement science methodologies to improve quality and safety for providers, patients, populations, and systems of care.
	5.1 Apply quality improvement principles in care delivery.	NP 5.1 Apply quality improvement principles in care delivery.
	5.1i Establish and incorporate data driven benchmarks to monitor system performance.	NP 5.1p: Systematically evaluate quality and outcomes of care using quality improvement principles.
	5.1j Use national safety resources to lead team-based change initiatives.	
	5.1k Integrate outcome metrics to inform change and policy recommendations.	
	5.1l Collaborate in analyzing organizational process improvement initiatives.	NP 5.1q: Evaluate the relationships and influence of access, populations, cost, quality, and safety on healthcare.
	5.1m Lead the development of a business plan for quality improvement initiatives.	
	5.1n Advocate for change related to financial policies that impact the relationship between economics and quality care delivery.	NP 5.1r: Evaluate the impact of organizational systems in healthcare to include care processes, financing, marketing, and policy.
	5.1o Advance quality improvement practices through dissemination of outcomes.	
	5.2 Contribute to a culture of patient safety.	NP 5.2 Contribute to a culture of patient safety.
	5.2g Evaluate the alignment of system data and comparative patient safety benchmarks.	

5.2h Lead analysis of actual errors, near misses, and potential situations that would impact safety.		NP 5.2k: Build a culture of safety through quality improvement methods and evidence-based interventions.
5.2i Design evidence-based interventions to mitigate risk.		
5.2j Evaluate emergency preparedness system-level plans to protect safety.		
5.3 Contribute to a culture of provider and work environment safety.		NP 5.3 Contribute to a culture of provider and work environment safety.
5.3e Advocate for structures, policies, and processes that promote a culture of safety and prevent workplace risks and injury.		
5.3f Foster a just culture reflecting civility and respect.		
5.3g Create a safe and transparent culture for reporting incidents.		
5.3h Role model and lead well-being and resiliency for self and team.		

	Domain 6: Interprofessional Partnerships Descriptor Intentional collaboration across professions and with care team members, patients, families, communities, and other stakeholders to optimize care, enhance the healthcare experience, and strengthen outcomes.	NP Domain 6: Interprofessional Collaboration in Practice The nurse practitioner collaborates with the interprofessional team to provide care through meaningful communication and active participation in person-centered and population-centered care.	
	6.1 Communicate in a manner that facilitates a partnership approach to quality care delivery.	NP 6.1 Communicate in a manner that facilitates a partnership approach to quality care delivery.	
	6.1g Evaluate effectiveness of interprofessional communication tools and techniques to support and improve the efficacy of team-based interactions.		NP 6.1m: Engage in collaboration with multiple interprofessional stakeholders (e.g. individuals, community, integrated health care teams, and policy makers) to impact a diverse and inclusive healthcare system.
	6.1h Facilitate improvements in interprofessional communications of individual information (e.g. EHR).		NP 6.1n: Demonstrate equitable and quality health care through interprofessional collaboration with the health care team.
	6.1i Role model respect for diversity, equity, and inclusion in team-based communications.		NP 6.1o: Advocate for the patient as a member of the health care team.
	6.1j Communicate nursing's unique disciplinary knowledge to strengthen interprofessional partnerships.		
	6.1k Provide expert consultation for other members of the health care team in one's area of practice.		NP 6.1p: Demonstrate sensitivity to diverse organizations, cultures, and populations.
	6.1l Demonstrate capacity to resolve interprofessional conflict.		
Domain 6	6.2 Perform effectively in different team roles, using principles and values of team dynamics.	NP 6.2 Perform effectively in different team roles, using principles and values of team dynamics.	
	6.2g Integrate evidence-based strategies and processes to improve team effectiveness and outcomes.		NP 6.2k: Assume different roles (e.g. member, leader) within the interprofessional, health care team.

6.2h Evaluate the impact of team dynamics and performance on desired outcomes.	
6.2i Reflect on how one's role and expertise influences team performance.	
6.2j Foster positive team dynamics to strengthen desired outcomes.	
6.3 Use knowledge of nursing and other professions to address healthcare needs.	NP 6.3 Use knowledge of nursing and other professions to address healthcare needs.
6.3d Direct interprofessional activities and initiatives.	
6.4 Work with other professions to maintain a climate of mutual learning, respect, and shared values.	NP 6.4 Work with other professions to maintain a climate of mutual learning, respect, and shared values.
6.4e Practice self-assessment to mitigate conscious and implicit biases toward other team members.	NP 6.4j: Promote a climate of respect, dignity, inclusion, integrity, civility, and trust to foster collaboration within the health care team.
6.4f Foster an environment that supports the constructive sharing of multiple perspectives and enhances interprofessional learning.	
6.4g Integrate diversity, equity, and inclusion into team practices.	NP 6.4k: Collaborate to develop, implement, and evaluate healthcare strategies to optimize safe, effective systems of care.
6.4h Manage disagreements, conflicts, and challenging conversations among team members.	
6.4i Promote an environment that advances interprofessional learning.	

	Domain 7: Systems-Based Practice Descriptor Responding to and leading within complex systems of health care. Nurses effectively and proactively coordinate resources to provide safe, quality, and equitable care to diverse populations.	NP Domain 7: Health Systems The nurse practitioner demonstrates organizational and systems leadership to improve healthcare outcome.
	7.1 Apply knowledge of systems to work effectively across the continuum of care.	NP 7.1 Apply knowledge of systems to work effectively across the continuum of care.
	7.1e Participate in organizational strategic planning.	NP 7.1i: Apply knowledge of organizational practices and complex systems to improve healthcare delivery.
	7.1f Participate in system-wide initiatives that improve care delivery and/or outcomes.	
	7.1g Analyze system-wide processes to optimize outcomes.	
	7.1h Design policies to impact health equity and structural racism within systems, communities, and populations.	
	7.2 Incorporate consideration of cost-effectiveness of care.	NP 7.2 Incorporate consideration of cost-effectiveness of care.
	7.2g Analyze relevant internal and external factors that drive healthcare costs and reimbursement.	NP 7.2m: Demonstrate fiduciary stewardship in the delivery of quality care.
	7.2h Design practices that enhance value, access, quality, and cost-effectiveness.	
Domain 7	7.2i Advocate for healthcare economic policies and regulations to enhance value, quality, and cost-effectiveness.	
	7.2j Formulate, document, and disseminate the return on investment for improvement initiatives collaboratively with an interdisciplinary team.	

7.2k Recommend system-wide strategies that improve cost-effectiveness considering structure, leadership, and workforce needs.	
7.2l Evaluate health policies based on an ethical framework considering cost-effectiveness, health equity, and care outcomes.	
7.3 Optimize system effectiveness through application of innovation and evidence-based practice.	NP 7.3 Optimize system effectiveness through application of innovation and evidence-based practice.
7.3e Apply innovative and evidence-based strategies focusing on system preparedness and capabilities.	
7.3f Design system improvement strategies based on performance data and metrics.	
7.3g Manage change to sustain system effectiveness.	
7.3h Design system improvement strategies that address internal and external system processes and structures that perpetuate structural racism and other forms of discrimination in healthcare systems.	

Domain 8: Informatics and Healthcare Technologies Descriptor Information and communication technologies and informatics processes are used to provide care, gather data, form information to drive decision making, and support professionals as they expand knowledge and wisdom for practice. Informatics processes and technologies are used to manage and improve the delivery of safe, high-quality, and efficient healthcare services in accordance with best practice and professional and regulatory standards.	NP Domain 8: Technology and Information Literacy The nurse practitioner envisions, appraises, and utilizes informatics and healthcare technologies to deliver care.	
8.1 Describe the various information and communication technology tools used in the care of patients, communities, and populations.	NP 8.1 Appraise the available information and communication technologies used in the care of patients, communities, and populations.	
8.1g Identify best evidence and practices for the application of information and communication technologies to support care.		NP 8.1l: Evaluate technologies and communication platforms in the care of patients.
8.1h Evaluate the unintended consequences of information and communication technologies on care processes, communications, and information flow across care settings.		
8.1i Propose a plan to influence the selection and implementation of new information and communication technologies.		
8.1j Explore the fiscal impact of information and communication technologies on health care.		
8.1k Identify the impact of information and communication technologies on workflow processes and healthcare outcomes.		
8.2 Use information and communication technology to gather data, create information, and generate knowledge.	8.2 Use information and communication technologies to gather data, create information, and generate knowledge.	

	8.2f Generate information and knowledge from health information technology databases.	
	8.2g Evaluate the use of communication technology to improve consumer health information literacy.	NP 8.2k: Analyze data to impact care delivery at the person, population, or systems' levels.
	8.2h Use standardized data to evaluate decision-making and outcomes across all systems levels.	NP 8.2l: Use technology systems to generate, analyze, and interpret data on variables for the evaluation of healthcare.
	8.2i Clarify how the collection of standardized data advances the practice, understanding, and value of nursing and supports care.	
	8.2j Interpret primary and secondary data and other information to support care.	NP 8.2m: Select appropriate technology and communication tools to promote engagement and share credible information that is congruent with patient needs, values, and learning styles.
Domain 8	8.3 Use information and communication technologies and informatics processes to deliver safe nursing care to diverse populations in a variety of settings.	NP 8.3 Use information and communication technologies and informatics processes to deliver safe care to diverse populations in a variety of settings.
	8.3g Evaluate the use of information and communication technology to address needs, gaps, and inefficiencies in care.	
	8.3h Formulate a plan to influence decision-making processes for selecting, implementing, and evaluating support tools.	
	8.3i Appraise the role of information and communication technologies in engaging the patient and supporting the nurse-patient relationship.	
	8.3j Evaluate the potential uses and impact of emerging technologies in health care.	
	8.3k Pose strategies to reduce inequities in digital access to data and information.	

8.4 Use information and communication technology to support documentation of care and communication among providers, patients, and all system levels.	NP 8.4 Use information and communication technology to support documentation of care and communication among providers, patients, and all system levels.
8.4e Assess best practices for the use of advanced information and communication technologies to support patient and team communications.	NP 8.4h: Assess the patient's and caregiver's learning and communication needs to address gaps in access, knowledge, and information literacy.
8.4f Employ electronic health, mobile health, and telehealth systems to enable quality, ethical, and efficient patient care.	NP 8.4i: Evaluate the design and implementation of clinical information systems within the contexts of quality care, accountability, ethics, and cost-effectiveness.
8.4g Evaluate the impact of health information exchange, interoperability, and integration to support patient-centered care.	
8.5 Use information and communication technologies in accordance with ethical, legal, professional, and regulatory standards, and workplace policies in the delivery of care.	NP 8.5 Use information and communication technologies in accordance with ethical, legal, professional, and regulatory standards, and workplace policies in the delivery of care.
8.5g Apply risk mitigation and security strategies to reduce misuse of information and communication technology.	NP 8.5m: Use information technology safely, legally, and ethically to manage data to ensure quality care and organizational accountability to promote interprofessional communication.
8.5h Assess potential ethical and legal issues associated with the use of information and communication technology.	
8.5i Recommend strategies to protect health information when using communication and information technology.	
8.5j Promote patient engagement with their personal health data.	
8.5k Advocate for policies and regulations that support the appropriate use of technologies impacting health care.	

8.5l Analyze the impact of federal and state policies and regulation on health data and technology in care settings.

Domain 9: Professionalism Descriptor Formation and cultivation of a sustainable professional identity, including accountability, perspective, collaborative disposition, and comportment, that reflects nursing's characteristics and values.	NP Domain 9: Professional Acumen The nurse practitioner demonstrates the attributes and perspectives of the nursing profession and adherence to ethical principles while functioning as a committed equal partner of the interprofessional health care team.
9.1 Demonstrate an ethical comportment in one's practice reflective of nursing's mission to society.	NP 9.1 Demonstrate an ethical comportment in one's practice reflective of nursing's mission to society.
9.1h Analyze current policies and practices in the context of an ethical framework.	NP 9.1l: Demonstrate the ability to apply ethical principles in complex health care situations.
9.1i Model ethical behaviors in practice and leadership roles.	NP 9.1m: Develop strategies to prevent one's own personal biases from interfering with delivery of quality care.
9.1j Suggest solutions when unethical behaviors are observed.	NP 9.1n: Actively seeks opportunities for continuous improvement in professional practice.
9.1k Assume accountability for working to resolve ethical dilemmas.	
9.2 Employ participatory approach to nursing care.	NP 9.2 Employ participatory approach to NP care.
9.2h Foster opportunities for intentional presence in practice.	NP 9.2m: Demonstrate an NP professional identity.
9.2i Identify innovative and evidence-based practices that promote person-centered care.	
9.2j Advocate for practices that advance diversity, equity, and inclusion.	NP 9.2n: Demonstrate accountability to practice within the regulatory standard and scope of educational preparation.
9.2k Model professional expectations for therapeutic relationships.	
9.2l Facilitate communication that promotes a participatory approach.	
9.3 Demonstrate accountability to the individual, society, and the profession.	NP 9.3 Demonstrate accountability to the individual, society, and profession.

	9.3i Advocate for nursing's professional responsibility for ensuring optimal care outcomes	
	9.3j Demonstrate leadership skills when participating in professional activities and/or organizations.	NP 9.3p: Participate in professional organizations to advance the NP profession and improve health.
	9.3k Address actual or potential hazards and/or errors.	
	9.3l Foster a practice environment that promotes accountability for care outcomes.	
	9.3m Advocate for policies/practices that promote social justice and health equity.	
	9.3n Foster strategies that promote a culture of civility across a variety of settings.	NP 9.3q: Reflect on past experiences to guide present and future practice.
Domain 9	9.3o Lead in the development of opportunities for professional and interprofessional activities.	
	9.4 Comply with relevant laws, policies, and regulations.	NP 9.4 Comply with relevant laws, policies, and regulations.
	9.4d Advocate for polices that enable nurses to practice to the full extent of their education.	NP 9.4i: Advocate for policies that support population focus NPs to practice at the full extent of their education.
	9.4e Assess the interaction between regulatory agency requirements and quality, fiscal, and value-based indicators.	
	9.4f Evaluate the effect of legal and regulatory policies on nursing practice and healthcare outcomes.	NP 9.4j: Articulate the regulatory process that guides NP practice at the national and individual state level.
	9.4g Analyze efforts to change legal and regulatory policies that improve nursing practice and health outcomes.	

9.4h Participate in the implementation of policies and regulations to improve the professional practice environment and healthcare outcomes.	NP 9.4k: Analyze laws, policies, and regulations to describe scope of practice in future population focus.
9.5 Demonstrate the professional identity of nursing.	NP 9.5 Demonstrate the professional identity of nursing.
9.5f Articulate nursing's unique professional identity to other interprofessional team members and the public.	NP 9.5j: Articulate NPs unique professional identity to other interprofessional team members and the public.
9.5g Evaluate practice environment to ensure that nursing core values are demonstrated.	
9.5h Identify opportunities to lead with moral courage to influence team decision-making.	NP 9.5k: Demonstrate the ability to effectively educate and mentor peers, students or members of the interprofessional healthcare team.
9.5i Engage in professional organizations that reflect nursing's values and identity.	
9.6 Integrate diversity, equity, and inclusion as core to one's professional identity.	NP 9.6 Integrate diversity, equity, and inclusion as core to one's professional identity.
9.6d Model respect for diversity, equity, and inclusion for all team members.	
9.6e Critique one's personal and professional practices in the context of nursing's core values.	
9.6f Analyze the impact of structural and cultural influences on nursing's professional identity.	
9.6g Ensure that care provided by self and others is reflective of nursing's core values.	
9.6h Structure the practice environment to facilitate care that is culturally and linguistically appropriate.	

9.6i Ensure self and others are accountable in upholding moral, legal, and humanistic principles related to health.

Domain 10		
	Domain 10: Personal, Professional, and Leadership Development Descriptor Participation in activities and self-reflection that foster personal health, resilience, and well-being; contribute to lifelong learning; and support the acquisition of nursing expertise and the assertion of leadership.	NP Domain 10: Personal and Professional Leadership The nurse practitioner participates in professional and personal growth activities to develop a sustainable progression toward professional and interpersonal maturity, improved resilience, and robust leadership capacity.
	10.1 Demonstrate a commitment to personal health and well-being.	NP 10.1 Demonstrate a commitment to personal health and well-being.
	10.1c Contribute to an environment that promotes self-care, personal health, and well-being.	NP 10.1e: Create an environment that promotes self-care, health, and well-being.
	10.1d Evaluate the workplace environment to determine level of health and well-being.	NP 10.1f: Support for whole person health and holistic well-being of self.
	10.2 Demonstrate a spirit of inquiry that fosters flexibility and professional maturity.	NP 10.2 Demonstrate professional maturity.
	10.2g Demonstrate cognitive flexibility in managing change within complex environments.	NP 10.2k: Demonstrate responsibility to practice in the NP population focus area defined by your education, certification and license.
	10.2h Mentor others in the development of their professional growth and accountability.	NP 10.2l: Employ empathy to communicate effectively.
	10.2i Foster activities that support a culture of lifelong learning.	NP 10.2m: Conduct self in a professional manner.
	10.2j Expand leadership skills through professional service.	NP 10.2n: Uphold standards of the NP profession.
	10.3 Develop capacity for leadership.	NP 10.3 Develop capacity for leadership.
	10.3j Provide leadership to advance the nursing profession.	NP 10.3r: Articulate the complex leadership role of the NP.
	10.3k Influence intentional change guided by leadership principles and theories.	

10.3l Evaluate the outcomes of intentional change.		NP 10.3s: Execute leadership skills in the translation of new knowledge to improve outcomes.
10.3m Evaluate strategies/methods for peer review.		NP 10.3t: Provide leadership on teams, and in different team roles, across a variety of practice settings.
10.3n Participate in the evaluation of other members of the care team.		
10.3o Demonstrate leadership skills in times of uncertainty and crisis.		NP 10.3u: Mentor peers.
10.3p Advocate for the promotion of social justice and eradication of structural racism and systematic inequity in nursing and society.		
10.3q Advocate for the nursing profession in a manner that is consistent, positive, relevant, accurate, and distinctive.		NP 10.3v: Engage in advocacy efforts to address health disparities, social justice, and equity to improve healthcare outcomes.