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The current situation of nurse practitioner education focusing on clinical practicums in Korea

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Abstract

The period of education for Korean advanced practice nurse (APN) is over two years, and nurses with at least 3 years' field experience in the corresponding area within the last 10 years are qualified to be admitted to the course. Regardless of area, the students are required to earn 13 credits of common subjects, 10 or more of major theoretical subjects, and 10 or more of major practicums, and a total of 33 credits or more. Common subjects include nursing theory, nursing research with biostatistics, role and policy, advanced assessment, pharmacology, and pathophysiology. Practices in the APN courses are operated mainly by APNs, physicians, nursing professors, etc., but specialists from different job categories may participate depending on the contents of practice. The contents of practice are linked to lectures, and the main goal of practice and lecture is to raise APNs equipped with capabilities in addition to competency. It has been proved that the APN is critical for the improvement of patient safety and for cost-effectiveness of healthcare. Adequate training programs are important to expand APNs' role and employment. The clinical practicum is one of the key points to make APNs qualified properly to practice in clinical settings. Many efforts and strategies are needed continuously until APNs settle down and practice adequately in Korea.

Key words

nurse practitioner, advanced practice nurse, education

1. Development of the advanced practice nurse in Korea

In Korea, certificates began to be issued for the areas of public health, anesthesia, and home health care according to the Medical Service Act from 1973, and it was the beginning of the nurse practitioner in this country. However, such certificates were given through a course of education of just a few months in length. They were also called "generalist", distinguished from "nurse practitioner (NP)". From 2000, the system was changed as the titles "clinical nurse specialist (CNS)", or "nurse practitioner" was introduced in the Medical Service Act. It was agreed that the NP and the CNS would not be distinguished but both would be called "advanced practice nurse (APN)" in Korea (Table 1). Also the core competencies of the APN has been announced by the Korean Accreditation Board of Nursing Education

(KABONE). The first competency is provision of professional nursing practice, which includes data collection, nursing diagnosis, planning, execution and evaluation. The second competency is education and consultation for patients and their families. The other three competencies are research, leadership, and advice and cooperation.

2. Increased number of APNs in Korea

According to the law, the APN certificate is issued by the Ministry of Health and Welfare to those who have completed lectures and practicums of certain hours. Since 2000, new APN courses have been added continuously, and currently as of 2014 APN courses are offered in a total of 13 areas. As of 2012, there were 105 courses opened at 40 institutions, and these courses admitted a total of 817 students (Table 2).

Table 1. Development of the advanced practice nurse in Korea since 1973

Year	1973	1990	2000	2003	2006
Title	'Nurse Generalist'	'Nurse Generalist'	'Nurse Specialist'	'Nurse Specialist'	'Nurse Specialist'
Newly assigned areas of specialty	Public health, Anesthesia, Psychiatric	Home health care	Public health, Anesthesia, Psychiatric, Home health care	Infection control, Occupational health, Emergency Geriatric, Critical care, Hospice	Adult, Pediatric, Oncology
Number of area	3	1	4	6	3

Table 2. Number of advanced practice nurse education institutions in Korea (2012)

Specialty areas	No. of institutions	Entrance quota
Home health care	12	94
Infection control	3	30
Geriatric	31	272
Anesthesia	1	6
Public health	0	0
Occupational health	1	10
Pediatric	1	10
Emergency	6	36
Adult	5	43
Psychiatric	11	62
Oncology	12	104
Intensive care	11	80
Hospice	11	70
Total	105	817

3. The accreditation examination for APNs in Korea

The accreditation examination is managed by the KABONE, and it is held once a year and consists of a primary test with objective questions and a secondary test assessing general problem solving abilities (Table 3). The pass rate of the examination is 80–90%. Since the first accreditation examination was held in 2005, a

total of 4,354 APNs had been certified until 2011, including 973 in home health care, 195 in infection control, 1,416 in geriatric, 38 in anesthesia, 4 in public health, 113 in occupational health, 34 in pediatric, 67 in adult (critical care), 187 in emergency, 211 in psychiatric, 398 in oncology, 432 in intensive care, and 286 in hospice care. Since 2009, about 400 APNs are being certified every year (Figure 1).

Table 3. Domain and number of questions for the primary examination for advanced practice nurses in Korea

Domain	No. of questions	Percentage
Provision of specialized nursing practices	105	70%
Education and consultation	15	10%
Research*	8~15	5~10%
Leadership*	8~15	5~10%
Advice and cooperation	8	5%
Total	150	100%

* The numbers are different by specialty areas, but the total number of questions are equal as 150.

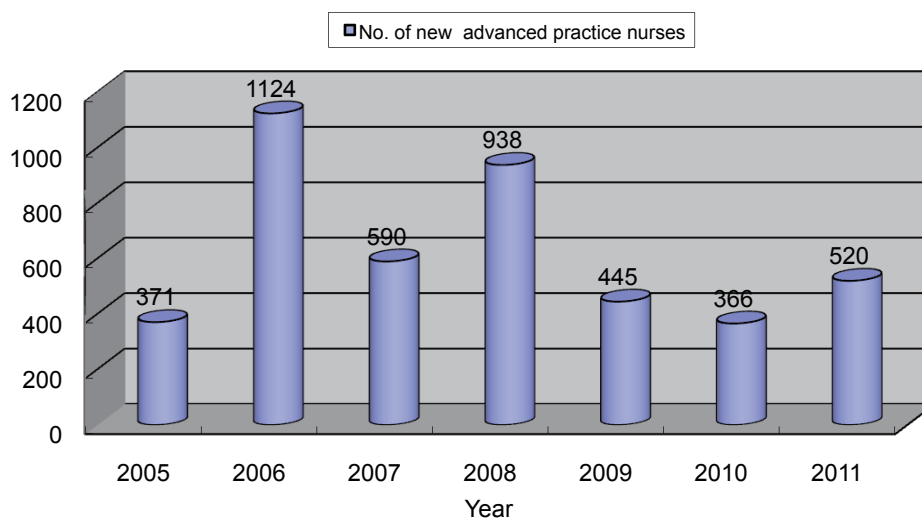


Figure 1. Yearly number of newly licensed advanced practice nurses in Korea

4. APN education institution appointment in Korea

The purpose of appointment is to verify the appropriateness of an education institution with requirements that help APNs fulfill their roles and appointing the institution as such to ensure educational quality levels for the production of competent nurse practitioners and to regulate demand for and supply of professionals by assigning capacity for each institution. The eligibility for APN education institution appointment applications are nursing science departments and nursing colleges with a graduate-

level program, specialized or professional graduate schools with a nursing science major, and other institutions accommodating the appointment standards.

The evaluation standards are secured on a legal basis by Article 5 of the Regulations for Advanced Practice Nurse Licensing Accreditation, etc., and the Guidelines for Advanced Practice Nurse Education Institution Operation, which specify the application standards necessary for eligibility and preparation of education institutions. The evaluation standards consist of 27 evaluation items, in five areas. The five areas are APN

education curriculum, education plan and program operation, admission and coursework completion, student support, and administrative support and planning. The evaluation process has two stages. The primary evaluation is document review. The written evaluation materials are prepared by the applying institution as per the form specified. For the secondary evaluation, the Ministry of Health and Welfare (MoHW) and KABONE commissioners visit the institution.

5. Education programs for APNs in Korea

The period of education for Korean APNs is over two years, and nurses with at least three years of field experience in the corresponding area within the last 10 years are qualified to be admitted to the course. Regardless of area, the students are required to earn 13 credits of common subjects, 10 or more of major theoretical subjects, and 10 or more of major practicums, and a total of 33 credits or more. Common subjects include nursing theory, nursing research with biostatistics, role and policy, advanced health assessment, pharmacology, and pathophysiology. Among the major subjects, lectures have been standardized among the educational institutions through the council of each area, but practicums are operated autonomously by each educational institution. In general, practicums in the APN courses are operated mainly by APNs, physicians, nursing professors, etc., but

specialists from different job categories may participate depending on the contents of practice. The contents of practice are linked to lectures, and the main goal of practice and lectures is to raise APNs equipped with capabilities in addition to competency (Table 4). Because practicums adequate for APNs require the distribution of manpower, time, and resources, the substantiality of contents may be somewhat different among the educational institutions. Moreover, most nurses with APN certificates are not able to find a role as an APN at their workplace, and this becomes an obstacle to the development of adequate contents and methods of practicums.

6. Further issues related to APNs in Korea

Although there is a law for APNs in Korea, it is focused only on the designation of specialty areas, education programs, and education institutions. It is urgently required to legislate for the role and authority of APNs so that they can work legally and be protected from malpractice lawsuits because many APNs are already working in clinical and community institutions. Moreover, details for qualification and allocation standards will help APNs work more properly and effectively.

In Korea, the national health insurance basically covers most healthcare costs. Payment for APNs' services is recognized as one of the most

Table 4. Recommended curriculum for advanced practice nurse (APN) education in Korea

Classification	Title	Credit
Common courses	Nursing Theory	2
	Research (with Biostatistics)	2
	Role of APN and Policy	2
	Advanced Health Assessment	3 (including 1 practicum)
	Pharmacology	2
	Pathophysiology	2
	Subtotal	13
Specialty courses, lecture	Different	≥ 10
Specialty courses, practicum	Different	≥ 10
Total		≥ 33

significant strategies to boost social demand for APNs' services, and thus, should be carefully designed and implemented in the national health insurance. In line with this, key actors in making health insurance policies include the government, national assembly, labor unions, NGOs, civic groups, medical associations, and academia (Kim 2010).

There are 13 APN areas in Korea, and the number of accredited APNs is varied among the specialty areas from 1 in public health to 445 in geriatrics (KABONE report, 2013). Social demand for APNs is currently estimated to be less than 50% of its supply and the APN education programs have difficulties in recruiting students (Kim 2010). It is our continuous task to estimate adequate numbers and areas of APNs in Korea.

The merger of specialty areas of APNs in Korea is another issue. Efforts are being made to reclassify the specialty areas and to combine similar specialties into one area, for example, home health care, geriatrics, and hospice into one area, and intensive care, emergency, and adult advanced care into a larger area. This may promote the employment of APNs and raise the effectiveness of education and training.

In Korea, many acute care hospitals employ physician assistants (PAs) or other assistant healthcare personnel due to the shortage of medical doctors in certain areas and for the purpose of cost savings. Most of these PAs or assistant personnel are registered nurses, but there is no regular training or education program for their new positions and no legislation for their tasks. The Korean Medical Association has performed research and discussed this issue to establish adequate positions and qualifications for PAs (Research Institute for Healthcare Policy, Korean Medical Association 2011). Training, role description, and division between APNs and PAs are other urgent issues in Korea.

7. Conclusion

It has been proved that the APN is critical for

the improvement of patient safety and for cost-effectiveness of healthcare. Adequate training programs are important to expand APNs' role and employment. The clinical practicum is one of the key points to make APNs qualified properly to practice in clinical settings. Many efforts and strategies are needed continuously until APNs settle down and practice adequately in Korea.

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