APRN Practice Guidelines / Collaborative Agreement Template

Section A:
Personal Data
( ) Your Name
( ) Role: Choose one of the following [NP, CNM, CRNA, CNS]
( ) Population focus of your certification:
(eg: Adult, Family, Pediatric, Women)
( ) Specialty / Certification:
What organization is your certification through (eg: ANCC, AANP, NBCRNA, PNCB, AMCB)? - Type out full name.

Examples of what the above should look like:

Jane Doe
Family Nurse Practitioner
American Academy of Nurse Practitioners (AANP)

John Doe
Family Psychiatric Mental Health Nurse Practitioner
American Nurses Credentialing Center

Jane Doe
Certified Nurse Midwife
American Midwifery Certification Board

Section B:
Collaborating APRN, MD, or DO: (Needs to fulfill transition to practice hours)
( ) Name
( ) Specialty
( ) Vermont License Number
( ) Practice Name
( ) Practice Address
( ) Contact Telephone Number

Examples of what the above should look like:

John Smith, APRN
Pediatric Nurse Practitioner
Vt. License # 101-XXXX
Pediatric Care Inc.
1 Main Street
Somewhere, VT
802-xxx-xxxx

If you have fulfilled the transition to practice hours and have a “Transition to Practice Attestation” form on file with the Board of Nursing, or have enclosed the completed form with this renewal, you do not need to have this section in your practice guidelines.
Section C:
Clinical Practice:
( ) Practice Name
( ) Physical Practice Address
( ) Practice Telephone Number
( ) Client Population Served (eg: women, adults, pediatrics…)
( ) Type of Care Provided

Examples of what the above should look like:

Pediatric Care, Inc
15 South Street
Somewhere else, VT
802-yyy-yyyy

Client population served: Pediatrics - up to age 18

Section D:
Standards of Clinical Practice:
( ) Standards used to guide and evaluate your practice.
   (eg: American Nurses Credentialing Center, American Nurses Association,
       American Psychological Association, etc.)
( ) References used for clinical practice guidelines
   (Books: provide title, author, edition and date of publication)
   (Web: provide title and web address)
( ) Criteria for professional consultation and referral (When would you seek
    consultation and referral?)
( ) Emergency referral

Examples of what the above should look like:

I will follow the standards set forth by the American Nurses Credentialing Center to
guide and evaluate my practice. The following references will be used as resources for
clinical practice guidelines:
   UpToDate, Rose & Rush, 2011; www.uptodate.com

Professional consultation and referral will be sought when a patient is outside the Nurse
Practitioner’s experience or scope of practice, the patient’s condition fails to respond to
the management plan within an appropriate time frame …

In the case of an emergency, the Nurse Practitioner will contact EMS by calling 911 and
the patient shall be transported to the nearest emergency department which is (name of
hospital)
Section E:
Quality Assurance Plan:
( ) Two or more measurable quality goals/outcomes
( ) Quality indicators and benchmarks
( ) Methods of quality monitoring
( ) Frequency of evaluation (at least quarterly)
( ) Peer review involving at least one other APRN or physician in the evaluation of quality assurance findings
( ) Description of document retention procedures and policies; and
( ) Plan for improvement or corrective action if indicated

Examples of what the above should look like:

The Nurse Practitioners quality improvement plan shall consist of at least two measurable goals with performance benchmarked against professional organizational standards. The following are examples of quality audits but is not limited to management of diabetes by measuring HgbA1c, management of women with UTI’s and proper antibiotic selection …

Performance is benchmarked against professional organization standards such as ACOG, ACHA, USPSTF guidelines…

Quality monitoring will be achieved by chart audits, case reports, patient satisfaction surveys …

Evaluation will occur at least quarterly.

Quality assurance audits occur on-site with a team which consists of 2 APRNs and an MD. The findings of the audit are discussed by the team and at larger provider meetings if applicable. Issues raised by audit findings will seek recommendations for systems improvement by the QI team. These recommendations will be implemented and reviewed within a set time frame to determine success of interventions. Documentation resulting from quality assurance audits will be kept in the quality improvement office of the facility and by the Nurse Practitioner for 4 years.

Section F:
( ) APRN Signature ( ) APRN Date

If transition to practice hours are not met:
( ) Collaborative Providers Signature ( ) Collaborative Providers Date