Table of Contents

Acknowledgements

Overview of the Content

Essential Documents of Dermatology Nursing

Additional Content

Audience for this Publication

Dermatology Nursing Practice

Definition of Dermatology Nursing

Dermatology Nursing’s Scope of Practice

Definition of Dermatology Nursing

History and Evolution of Dermatology Nursing Scope and Standards of Practice

Scope of Practice for the Dermatology Nurse

Education Preparation for Dermatology Nurse

Education Preparation for Dermatology Nurse Practitioner
Focused Practice Competencies for Advanced Practice Registered Nurse

Continuing Professional Development and Lifelong Learning

Evidence-based Practice and Research

Teaching and Mentoring

The Code of Ethics for Dermatology Nurses

Standards of Practice for Dermatology Nursing

Standard 1 Assessment

Standard 2 Diagnosis

Standard 3 Outcomes Identification

Standard 4 Planning

Standard 5 Implementation

Standard 5A Coordination of Care

Standard 5B Health Teaching and Health Promotion

Standard 6 Evaluation

Standards of Professional Performance for Dermatology Nursing

Standard 7 Ethics

Standard 8 Culturally Congruent Care

Standard 9 Communication

Standard 10 Collaboration

Standard 11 Leadership

Standard 12 Education

Standard 13 Evidence-based Practice and Research

Standard 14 Quality of Practice
Acknowledgements

This document was developed in collaboration with the Dermatology Nurses’ Association (DNA) and the Dermatology Nurse Practitioners Coalition (DNPC). The Dermatology Scopes and Standards of Practice Workgroup, from these groups, gratefully acknowledges the efforts of all of those who have contributed to the content of the document, as well as those who helped to revise drafts of the document. The Scope and Standards are the product of many hours of thoughtful review by the members of the Workgroup, including multiple in-person meetings, teleconferences, reviews and revisions, and research and volunteer time. Their commitment to the advancement and recognition of dermatology nursing as a specialty is commendable.

A special thanks is extended to past presidents of the DNA, Noreen Nicol-Heer, PhD, RN, FNP, NEA-BC and Eileen Leach, MPH, RN who have provided historical information regarding the dermatology nurse and the DNA.

This document has been reviewed through the following processes:

- internal review through task force;
- review by the American Nurses Association (ANA) Committee on Nursing Practice Standards;
- organization members’ input and public comment period;
• evaluation by the ANA Committee on Nursing Practice Standards
• approval by the ANA Board of Directors (PENDING THIS PROCESS).

Dermatology Scopes and Standard of Practice Task Force

Lakshi Aldredge MSN, ANP-BC, DNCP
Dermatology Specialty Practice Group: American Association of Nurse Practitioners

Paula Bermann MSN, DCNP
Dermatology Nursing Certification Board

Margaret Bobonich DNP, FNP-C, DCNP, FAANP
Dermatology Specialty Practice Group: American Association of Nurse Practitioners

Cathleen Case, MS, ANP-BC
Reliant Medical Group Worcester, MA

Theresa Coyner MSN, ANP-BC, DCNP
Nurse Practitioner Society of the Dermatology Nurses’ Association

Virginia Hanchett RN, MS, APRN-BC, DNCP, COCN, CWCN
Dermatology Nurses’ Association

Kelley Jimenez RN, BSN, DNC
Dermatology Nurses’ Association

Linda Markham RN, DNC
Dermatology Nurses’ Association

Katrina Masterson RN, DNP, FNP-BC, DCNP
Nurse Practitioner Society of the Dermatology Nurses’ Association

Heather Onoday RN, MN, FNP-C, Chairperson Scopes and Standards Task Force
Nurse Practitioner Society of the Dermatology Nurses’ Association

Mary Nolen MS, ANP-BC, DCNP
Dermatology Specialty Practice Group: American Association of Nurse Practitioners

Marianne Tawa, RN, MSN, NP
Center for Cutaneous Oncology
Overview of Content

Essential Resources of Dermatology Nurses
Code of Ethics for Nursing with Interpretive Statement
Mission Statement of the Dermatology Nurses’ Association
https://www.dnanurse.org/aboutdna/
Position Statement of the Nurse Practitioner Society of the Dermatology Nurses’ Association
https://www.dnanurse.org/aboutdna/np-society/
Mission and Philosophy of the Dermatology Nursing Certification Board
Competencies for Dermatology Nurse Practitioners. JAANP. (Accepted for publication).

SCOPE OF PRACTICE OF DERMATOLOGY NURSING PRACTICE

Definition of Dermatology Nursing

Dermatology nursing is specialized nursing care, focused on the optimization of dermatologic health in diverse practice settings. The essence of dermatology nursing is assessment, detection, treatment, prevention and education of dermatologic disease in individuals, families, communities, and populations.
Dermatology nurses are registered nurses (RNs), graduate-level prepared registered nurses, and advanced practice registered nurses (APRNs) who focus on health promotion, disease and injury prevention, sign and symptom recognition, disease management; and self-care knowledge and adherence to improve patient and population outcomes for those at risk, or living with, dermatologic diseases.

Graduate-level prepared registered nurses and advanced practice registered nurses (APRNs) specializing in dermatology have additional scope and competencies for health promotion, disease and injury prevention, early recognition of signs and symptoms, disease management, self-care knowledge, and adherence to improve patient and population outcomes for those at risk for, or living with, dermatologic disease. A dermatology nurse practitioner is defined as “an advanced practice registered nurse licensed as a nurse practitioner that specializes in the assessment, diagnosis, management, and advocacy of individuals and communities with health and illness of the hair, skin, and nails” (Dermatology Nurse Practitioner Coalition, 2017).

The phenomena of dermatology nursing are concern with cutaneous health, personal experiences, quality of life, in the context of individuals, families, groups, communities, and populations. Dermatologic conditions profoundly affect the lives of millions, including skin cancer which is the most common cancer in the United States (Guy, Machlin, Ekwueme, & Yabroff, 2015). Approximately 7.5 million people in the United States (U.S.) have psoriasis (Menter, et al, 2008) while atopic dermatitis affects an estimated 25 percent of children in the U.S. (Eichenfield et al. 2014). Acne is the most common skin condition in the U.S., affecting up to 50 million Americans annually (Bickers et al. 2006). Dermatology nurses are passionate about preventing and eliminating the suffering associated with skin disease.

There are thousands of skin diseases affecting healthcare consumers, and may be chronic or acute. Dermatologic conditions may be limited to the skin, like benign nevi or angiomas. Others, may present as cutaneous manifestations of underlying systemic diseases such as lupus, Crohn's, psoriasis, or cutaneous T-cell lymphoma. Many skin diseases can significantly impact the quality of life, like atopic dermatitis, bullous diseases, and pruritic disorders. Others can be life-threatening, including Stevens-Johnson syndrome, necrotizing fasciitis, meningococcemia, staphylococcal scalded skin syndrome, erythroderma, and toxic epidermal necrolysis. Some dermatologic conditions such as acne, hidradenitis suppurativa, hyperhidrosis, vascular lesions, giant congenital nevi, and skin cancer can have significant psychological and social implications. There are also dermatoses that are inherited skin conditions, such as epidermolysis bullosa, ichthyosis, and xeroderma pigmentosum. The scope of care of these skin diseases and their impact on the lives of healthcare consumers validates the basis for dermatology nursing practice.

The burden of skin disease significantly impacts healthcare consumers emotionally, physically and financially. The effects on each individual will vary, however they all share the common goal to live their lives through thoughtful care of their skin. Dermatology nurses share
this goal and seek to achieve this through compassionate, informed care, while holistically
approaching nursing interventions to achieve the optimal outcomes. In addition to the goal of
delivering the highest quality of care, dermatology nurses seek to prevent disease; through
public education, contributions to innovation in nursing care, and research. Dermatology nurses
participate in, develop, and implement nursing and interprofessional dermatologic research to
address the knowledge gaps in the prevention, diagnosis, and treatment of dermatologic
disease.

Key elements of dermatology nursing practice include:

- Curriculum development to ensure that all levels of nursing education programs are
  providing evidence-based, up-to-date dermatologic practice standards.
- Development of evidence-based standards of practice and competencies that promote
  cutaneous health.
- Education and counseling regarding skin care, disease management and prevention.
- Interventions that reduce risk factors for the development of skin disease.
- Individualized, evidence-based interventions that maintain or improve physical and
  psychosocial health.
- Interventions that facilitate and optimize the therapeutic relationships between the
  dermatology care team, patient, family, and caregivers.
- Interventions that facilitate and optimize behavioral change and treatment adherence
  throughout the continuum of care.
- Investigational research; participation in data collection, direct patient care and direct
  reporting to principle investigator.
- Advocacy and policy development to support patients and families during the planning,
  implementation, and evaluation of their care.

The increasing demand for dermatologic care enables dermatology nurses to serve as
leaders in in cutaneous healthcare management. Dermatology nurses play a key role in
providing, coordinating, and improving cost-effective methodologies for providing the quality
care outcomes with a resultant meaningful improvement in quality of life. The dermatology
nurse plays a key role in the collaborative and holistic care provided to the healthcare consumes
in all settings of care.

Dermatology nurses seek to engage health care consumers, communities, professional
membership, and other organizations through education, annual conferences, research
initiatives, advocacy, networking, journal publications and various methods of the healthcare consumer education. Dermatology nurses are the primary educators of patients regarding their dermatologic concerns and seek to help them navigate within a complex healthcare environment.

Public interest in the specialty is drawn from many factors:

- Public education regarding sun protection, prevention and early detection of skin cancer, and overall health of skin, nails and hair.
- Advocacy toward protecting youth, enhancing education, influencing healthcare policy, safe practice environments, and scope of practice, all at the community, state and federal level.
- Education in legislative arena for policy-making to benefit the public and dermatology healthcare consumers.

Dermatology nurses develop collaborative partnerships with many professional practitioners for true interdisciplinary healthcare teams working toward improving the quality care and optimal patient outcomes. These nurses also forge strong, trusting relationships with healthcare consumers to promote self-care, early recognition, and treatment of disease, as well as effective management of chronic dermatologic conditions.

Dermatology nurses have demonstrated, through evidence, their contributions to improving dermatologic care and their impact on healthcare consumer outcomes. For example, nurse-led clinics have demonstrated the ability to reduce the severity of childhood atopic dermatitis by providing adequate time for education and demonstration of treatments (Moore, 2006). The level of care provided by a dermatology nurse practitioner showed improvement in the eczema severity and quality of life outcomes that were comparable with dermatologists (Schuttelaar, Vermeulen, Drukker, & Coenraads, 2010).

In randomized controlled trials, dermatology-trained nurses demonstrated that they provide effective patient education and support in managing chronic skin conditions (Gradwell, Thomas, English, & Williams, 2002). Patient adherence to skin self-examination recommendations was shown to improve when nurses trained in pigmented lesions provided educational intervention by using photographs (Oliveria, et al. 2004). There is also evidence of improved use of topical therapies and reduced severity of skin conditions associated with nurse-led care in dermatology. (Courtenay & Carey, 2006).

Another important aspect of dermatology nursing is the utilization of advanced technologies to learn, educate, provide care, and promote the dermatologic profession. Methods include peer-reviewed point of care tools for visual and medical diagnoses, risk assessment tools for melanoma, and algorithms for dermoscopy. Evidenced-based applications are also utilized in practice to calculate risks or for healthcare consumer education and skin monitoring such as melanoma staging guidelines (Gershenwald, et al., 2017).
History and Evolution of Dermatology Nursing as a Specialty Practice

History of the Dermatology Nurse

The practice of nursing has evolved from general practice settings into specialized practice areas. The need for expertly trained nurses in the dermatology setting has led to strong team foundations of care for the healthcare consumer. Historically, education of nurses came directly from the dermatologists who sought the support of nurses in the setting of dermatologic care.

In the late 1970s, nurses who cared for dermatology healthcare consumers began to recognize the need for more education in specialized therapies. In particular, nurses that delivered specialized psoriasis therapies, such as phototherapy, began to collaborate seeking the opportunities to learn from each other.

In 1978, while attending a conference with their dermatologist colleagues, approximately 13 nurses from many private and academic dermatology clinics met as a group. Their purpose was to enhance their nursing competencies in the dermatology specialty area. These nurses discussed methods of delivering dermatology nursing care and, in doing so, realized there was a need to bring nurses in the dermatology setting together for collaboration opportunities. The overall goal was to educate and disseminate dermatology knowledge to improve care for their healthcare consumers.

Shortly after this meeting, two nurses, Eileen Leach, working in phototherapy, and Jeanette Anders, who had a family member diagnosed with melanoma, recognized a need to develop curriculum to teach nurses specializing in dermatology. They went on to develop a dermatology program with collaborating dermatologist and nursing faculty who delivered a one-day educational program. They reached 200 nurses with curriculum covering many topics and emphasizing the nursing role in dermatology.

In the early 1980’s, many nurses from this core group set out to define the role of dermatology nurses and promote specialty education. They established the first professional organization dedicated to dermatology nursing. Their goals were networking, education and curriculum development, and establishing a professional dermatology nursing journal for the dissemination of evidenced-based practice, research, and professional practice issues.

In 1982, these pioneers in dermatology nursing gathered to formally collaborate and establish the specialty nursing organization. This would be considered the first convention for dermatology nurses. Officers were elected to the organization named the Dermatology Nurses’ Association. As one of the core leaders to advance dermatology nursing, Jeanette Anders was elected as the first President of the DNA in 1983. In 1989, Dermatology Nursing was launched realizing their goal of publishing the first journal with the focus on education for nurses.
specializing in dermatology. Since that time, conventions have been held annually, supporting
the educational needs of nurses in dermatology and giving them another platform to help
advance their nursing profession as a specialty. In 2008, the official journal of the DNA was
changed to The Journal of the Dermatology Nurses’ Association.

Nurse Practitioners have provided direct care and impacted clinical and behavioral outcomes for
patients with dermatological problems for greater than four decades. It was in those very early years of
advanced dermatology nursing practice that our NP pioneers made their keen observations on a shifting
dermatology workforce demographic. The NP’s discovered and sought to resolve issues surrounding
patients’ access to dermatology care. Moreover, these NP pioneers successfully carved out a niche
specialty (Dermatology), where fundamentals of nursing practice aimed at assessment, preservation of
skin integrity, and patient/family education could be expanded upon to include advanced assessment,
critical thinking, and strategic treatment planning. In response to this identified need, members of the
Dermatology Nurses’ Association (DNA) formed the Nurse Practitioner Society (NPS) of the DNA in 2005.
The initial goals of the NPS were to provide a venue for educational resources, networking and
leadership opportunities, and to initiate/begin to identify standards of practice for the NP in
dermatology.

In the United States, dermatology care and practice has and continues to be impacted by an
undersupply of medical dermatologists coupled with prolonged wait times for both new and established
patients (Watson & Kvedar, 2008). The movement of NP’s into this practice arena was thought to be
resultant from these phenomena.

What we learned from the 2007 dermatology workforce practice study (Resneck & Kimball 2008) was
that approximately 30% of dermatologists utilized NP’s in their practices, yet little was known about
how they got there and why they stayed. It was not until 2009, that Van Cott, Kimball and Cheng
surveyed nurse practitioner (NP) members of the Dermatology Nurses’ Association to gain a greater
understanding of their work settings, training, and job satisfaction levels. Of the 300 surveys sent, 65%
were returned, providing self-reported data points on demographics, training, competency, scope of
practice, level of supervision, income, job satisfaction, professional acceptance, and importance of
certification (Cheng, Kimball and Van Cott, 2010). The survey found that the Nurse Practitioners in
Dermatology were largely female (97%), seasoned RNs and NPs. They gravitated towards medical
dermatology patients and problems (86%) with cosmetic or procedural dermatology less commonly
encountered (51%). Most of the respondents (73%), reported acquisition of dermatology knowledge
through “on the job training” under the tutelage of supervising dermatologists or seasoned NPs.
Additional dermatology specific knowledge was gained through attending courses and conferences
(Cheng, Kimball and Van Cott, 2010).

Key trends and direction for future work was generated from the 2010 Cheng, Kimball and Van
Cott survey. It was clear that NPs practicing in dermatology settings chose this path for the critical
thinking challenge, autonomy, work life balance, and income. Professional acceptance by dermatologist
and other health care professionals was high at 67%, but unfortunately not 100%. The majority (60%)
felt certification in the specialty might improve the acceptance statistic (Cheng, Kimball and Van Cott,
2010). Leadership within the DNA and NPS charged the Dermatology Nursing Certification Board to
develop a certification exam for nurse practitioners. The exam was developed by DNCB in collaboration
with the Center for Nursing Education and Testing (C-NET) and initially administered in 2008.
In 1996, the Dermatology Nurse Certification Board (DNCB) was created by nurses who were motivated to develop a certification for nurses in dermatology. The goal was to establish a formal method to recognize and validate registered nurses who acquire a core body of specialized knowledge in dermatology in accordance with the Scope and Standards of Dermatology Nursing established in 1992. The first Dermatology Nurse Certified exam was given in 1998 (Chussil, Meyer, Vargo, Nankin, & Siegal, 1999). Since that time, more than 560 nurses have become certified in the specialty. (Bermann, 2017).

In 2008, the first Dermatology Certified Nurse Practitioner (DCNP) examination was developed and administered for nurse practitioners in dermatology seeking recognition and validation of the highest standard in their specialty. There are currently over 240 nurse practitioners have been certified in the specialty of dermatology. (Bermann, 2017).

History of Dermatology Nursing as a Specialty Practice

The original scope and standards of practice document for dermatology nursing was developed in 1992 and approved by the American Nurses Association in 1993 (Scope of Practice/Standards of Care 1993, DNA archives). It was updated in 2002 (Scope of Practice/Standards of Care 2002, DNA archives). Ensuring that the dermatology nursing scope and standards of practice were current, a workgroup of expert dermatology registered nurses and nurse practitioners began collaboration in 2016, working toward revision of the documents. There was also the need to include into the APRN scope and standards component within one document. The original APRN scope and standards document was developed in 2006, from a collaborative effort between the Nurse Practitioner Society of the DNA (NPS) and the DNA (Appendix C). Many of the same members have contributed to this document.

The profession of dermatology nursing has evolved considerably in the 21st century. As with many other specialties, there has been shortage of nurses, which has impacted the role of dermatology nurses. In dermatology, the registered nurse has been met with the demand to expand their scope of practice in delivering care and advancing nursing practice in realms of skin cancer, psoriasis, atopic dermatitis, immune-mediated inflammatory diseases, cutaneous surgery, cosmetics, and laser therapies, among many other diagnoses. Management of these dermatologic conditions requires specialized education and competencies that are increasingly complex. Biologic therapies, gene-targeted therapies, and photomedicine are examples of new treatments that involved nursing as a key team member providing education, assessment, administration, and enhancing access for healthcare consumers.

There have also been considerable technological advances in the dermatology field that have impacted dermatology nursing practice, including teledermatology, advancement in photographic imaging, dermoscopic evaluation of cutaneous lesions and conditions, digital mole mapping, and mole mapping software. Dermatology nurses continue to contribute to the creation of, and dissemination of research knowledge, evidenced based literature, and formal
and informal teaching to advance the profession and dermatologic care in these technical areas.

**Scope of Practice of the Dermatology Nurse**

The dermatology nurse is a licensed professional nurse of varying levels of education ranging from an associate to a doctorate degree with the appropriate licensure that accompanies the degree such as registered nurse, graduate-level prepared nurse, and advanced practice registered nurse. A nurse in dermatology is employed in any area where healthcare consumers may seek dermatologic care. A nurse specializing in dermatology provides care in a variety of settings, including by not limited to private offices, hospitals, academic centers, corrections facilities, home health settings, long-term care settings, community clinics, telemedicine and ambulatory care settings. Dermatology nurses may subspecialize within the specialty of general dermatology to provide even more focused care in areas like pediatrics, aesthetics, surgical, oncologic, immunodermatology, and other evolving areas of care.

**Registered Nurse:**

The dermatology registered nurse must practice in accordance with state and federal laws and regulations. The dermatology registered nurse focuses on and influences the promotion of skin health, prevention of disease, education, political/public policy and research benefitting individuals with medical and cosmetic conditions of the skin and their potential psychological sequelae. The management of health care needs places emphasis on making the healthcare consumer an integral part of the decision-making, taking into consideration their cultural traditions, personal preferences, values, family situations, and their lifestyles.

Based on nursing theory, specialty training, competency and certification, the dermatology registered nurse will be able to assess, identify problems, implement plans of care, and evaluate outcomes of individuals with dermatological conditions independently or in collaboration with other health care practitioners and multidisciplinary teams.

The dermatology registered nurse should strive to attain certification in dermatology by successfully fulfilling the educational, practice, and written examination requirements such as those put forth by the Dermatology Nursing Certification examination. This examination is only
offered by the Dermatology Nurse Certification Board. The awarded credential is Dermatology Nurse Certified (DNC).

**Advanced Practice Registered Nurse:**

The role of APRNs in dermatology are expanding rapidly in response to the population’s needs with improved access to quality dermatologic care. The dermatology APRN practices in accordance with applicable state and federal laws, regulatory language, and individual state Nurse Practice Acts. Organizations or enterprises may further delineate practice privileges through credentialing. APRNs may work autonomously or, when appropriate, in collaboration with other healthcare professionals to assess, diagnoses, prescribe, and manage the healthcare needs of consumers and communities. Additionally, the APRNs translate and utilize research as well as participate in clinical trials for the advancement of patient outcomes in practice.

There are four APRN roles that provide direct patient care: Certified Nurse Anesthetist, Certified Nurse-Midwife, Clinical Nurse Specialist, and Certified Nurse Practitioner. In the specialty of dermatology, nurse practitioners constitute the largest numbers of APRNs with smaller number of clinical nurse specialists. Thus, there have been more advances in defining the Scope and Practice, Standards of Practice, curriculum, professional competencies and certifications for dermatology nurse practitioners.

The clinical nurse specialist (CNS) practices within a specific clinical focus and are considered the expert clinician in that foci (National Association of Clinical Nurse Specialist). Core competencies of the CNS include direct care, consultation, system leadership, collaboration, support of clinical staff, research and interpretation of evidence. They function as educators and consultants to staff, ensuring adherence to evidenced-based practice guidelines which lead to quality patient outcomes (Lewandowski & Adamle, 2009). The dermatology CNS undertakes responsibility for diagnosis and treatment of dermatologic conditions and also promotes skin health through prevention and reduction of risk behaviors (APRN Consensus Model, 2008).

“A dermatology nurse practitioner is an advanced practice registered nurse licensed as a nurse practitioner that specializes in the assessment, diagnosis, management, and advocacy of individuals and communities with health and illness of the hair, skin, and nails” (Dermatology Nurse Practitioner Coalition, 2017). They can independently provide direct patient care and consultative services; participate in research, develop curriculum and educational programs; write scholarly publications; and, engage in healthcare policy.

Nurse practitioners specializing in dermatology or responsible for the acquisition and maintenance of specialized knowledge, skills, and abilities. Dermatology nurse practitioner competencies are assessed separately and in addition to role/population core competencies. The specialty competencies for dermatology nurse practitioners have been established and
published (Bobonich & Nolen, 2018). The current method for the assessment of professional
competencies and expertise in dermatology nurse practitioner practice is through a specialty
certificate examination, *Dermatology Certified Nurse Practitioner* by the Dermatology Nurse
Practitioner Certification Board.

**Educational Preparation for Dermatology Nurses**

Education requirements for the dermatology nurse consists of completion of either an
associate or baccalaureate degree in nursing. The dermatology nurse maintains active licensure
and continuing education requirements as required by individual state nursing licensing and
regulatory bodies. The dermatology nurse should strive to obtain certification and the
designation Dermatology Nurse Certified (DNC). Although registered nurses receive basic
dermatologic training within their undergraduate programs, dermatology nurses need
additional training focused on the nursing care of dermatologic conditions in the practice
setting. Dermatology registered nurses usually participate in on-the-job proctoring programs
where they learn specialized knowledge and skills from expert nurses, APRNs and
endorsed by the DNA, defines and standardizes the essential knowledge and skills concepts that
dermatology nurses should acquire for the development of specialty competencies. The
curriculum augments their in-office clinical education and training and prepares them for the
DNC examination.

**Educational Preparation for Dermatology Advanced Practice
Registered Nurses**

Educational preparation for the dermatology APRN begins with completion of a master’s
or doctoral degree in nursing with preparation in an accredited APRN program. Although APRN
roles include nurse midwives and nurse anesthetists, this document will specifically refer to
nurse practitioners and clinical nurse specialist as APRNs who are actively engaged in clinical
dermatology.

Graduate-level registered nurses (Clinical Nurse Specialists) must successfully complete
a master’s, post-master’s certificate or doctoral degree program in their area of expertise.
Clinical nurse specialists must obtain national certification in one of the core populations: adult-
gerontology, pediatrics, and neonatal (Consensus Module, 2008). The dermatology CNS is
licensed through individual state’s licensing board which dictates and oversees their practice
rules and regulations. The CNS who specializes in dermatology must acquire and maintain
knowledge pertinent to the specialty.

Dermatology nurse practitioners must successfully complete a master’s, post-master’s
certificate or doctoral degree program in one of the core populations: adult-gerontology,
neonatal, pediatrics, family/individuals across the lifespan, women’s health/gender-relation,
and psychiatric/mental health (Consensus Model, 2008). They are nationally certified in the population foci by accrediting bodies and licensed through individual state’s licensing board who oversees their practice rules and regulations. Nurse practitioners who specialize in dermatology must acquire and maintain specialty knowledge and skills in addition to their core competencies in their primary certification.

The core curriculum for dermatology nurse practitioners was published in 2012 from a Delphi study providing a consensus of opinion regarding the most important curricular content items for dermatology nurse practitioner education (Bobonich & Cooper, 2012). However, the education preparation of most dermatology nurse practitioners does not occur in a formal setting. It is usually through on-the-job training with dermatologists and/or expert dermatology nurse practitioners. Many acquire additional specialty knowledge and training through national dermatology conferences and workshops. There are currently only a few formal dermatology post-Masters training programs with plans for several other programs being developed.

Dermatology APRN’s will also gain specialty knowledge through independent continuing education activities such as those offered by the DNA, American Academy of Dermatology (AAD), American Academy of Nurse Practitioners (AANP), and other dermatology-focused educational groups. Completion of various education offerings will supply participants with certifications of completion, particularly those programs with skills training and elements of competencies. As noted above, dermatology specialty certification for nurse practitioners, DCNP, is available and highly recommended for documentation and recognition of expertise knowledge.

**Dermatology Specialty Practice Competencies for Advanced Practice Registered Nurse**

Dermatology nurse practitioner practice requires unique knowledge, skills, and judgement for care of a specific patient population (APRN Consensus Module, 2008). Nursing competencies are key in helping healthcare consumers, colleagues, employers, and the general public to establish expectations about our professional performance. In 2017, a national task force was convened for the purpose of defining and standardizing entry level competencies for dermatology nurse practitioners. The task force, a volunteer group of expert dermatology nurse practitioners, reviewed the existing Delphi data on specialty curriculum and worked to achieve a consensus for entry-level competencies that were current. A validation panel then reviewed the competency items for relevance, specificity, comprehensiveness, and level of expertise (novice or advanced). The resulting document, *Competencies for Dermatology Nurse Practitioner* (Bobonich & Nolen, 2018), has established professional competencies for nursing practitioners aiming to specialize in dermatology.
Continuing Professional Development and Lifelong Learning

The specialty practice of dermatology, like all health sciences, is constantly evolving and requires the dermatology nurse to engage in lifelong learning through continuing education. Such education should be sought from high-level sources, including peer-reviewed journals, training programs, professional dermatology organizations, and unbiased resources. This commitment to ongoing education helps prepare the dermatology nurse to provide continued excellence in dermatology care to individuals, families, groups, communities, and populations.

The DNA hosts an annual conference for those specializing in dermatology nursing. The curriculum addresses the focused education element in dermatology for registered dermatology nurses, graduate-level prepared registered nurses, and advanced practice nurses.

The AANP Dermatology Specialty Practice Group offers a community within the AANP for professional development, education, discussions, document sharing, and promotion of quality dermatology specialty practice. Dermatology curriculum is offered for nurse practitioners specializing or transitioning into specialty practice. Other organizations host specialized dermatology conferences and online dermatology education at varied levels of expertise.

Evidence-based Practice and Research

The dermatology nurse utilizes evidence-based practice to provide dermatology care. They may directly design and participate in dermatology research and/or disseminate quality research practice in their respective care settings. Dermatology nurses engage in research that is peer-reviewed, utilizing high level evidence, utilizes statistical methodologies, and is collaborative in nature. They seek to discover optimal nursing interventions, define cause-outcome relationships, increase knowledge of physiology and pathophysiology, and develop new or improved methods of caring for dermatology healthcare consumers. Quantitative, qualitative, exploratory, and descriptive research is among many types of research used by dermatology nurses to contribute to their body of knowledge.

Teaching and Mentoring

The dermatology nurse actively engages in teaching individual patients, families, groups, communities, and populations about skin conditions, optimization of skin health, and prevention of skin disorders. Their professional role as a dermatology nurse includes educations in academic programs (medical and nursing), clinical preceptor, and mentoring novice nurses specializing in dermatology practice.
The Code of Ethics for Dermatology Nurses

The Code of Ethics for Nurses with Interpretive Statements (ANA, 2015) serves as the framework for ethics in dermatology nursing, as it does for all nurses in all settings. The dermatology nurse encompasses and seeks to exemplify the Code’s nine provisions of ethics.

There is a universal need for health care and the care provided by dermatology nurses spans the differences with respect to culture, values, and preferences of individuals, families, groups, community and populations. Dermatology nurses are aware of and responsive to the changing needs of the healthcare consumer. One objective of dermatology nursing is to seek positive outcomes that improve quality of life for the healthcare consumer. In order to consistently achieve such outcomes, they accept and embrace the cultural, value, and spiritual differences of individuals, families, groups, communities and populations.

Provision 1. The nurse practices with compassion and respect for the inherent dignity, worth, and unique attributes of every person.

Dermatology nurses recognize the value of every person. They appreciate and respect the elements of each person that makes them unique. Because we value these attributes, we recognize that care should be adapted to the individual. Dermatology nurses ensure that they incorporate an understanding for the cognitive, sociocultural, and religious values of the consumer when offering their services.

Dermatology nursing would also account for the cultural difference that can be seen among individuals with respect to their attitudes and beliefs about skin cancer and health promotion strategies. They pay particular attention to ensuring that they provide appropriate care unique to that individual’s needs.

Dermatology nurses are aware, for example, of the unique dermatologic needs for the transgender healthcare consumer who is in the complex process of transitioning, such as those involving hair, sebum production, surgical interventions, and skin presentations. They strive to offer an experience that feels safe, respectful, and inclusive as they consider their specific dermatologic needs.

Provision 2. The nurse’s primary commitment is to the patient, whether an individual, family, group, community, or population.
Dermatology nurses focus their care on the well-being of the individual, family, group, community or population as the recipient of dermatologic care. In environments which compete with economic sustainability, political consensus, and societal factors, dermatology nurses remain focused on their commitment to the healthcare consumer.

Provision 3. The nurse promotes, advocates for, and protects the rights, health, and safety of the patient.

Dermatology nurses prioritize safety and advocacy on behalf of the healthcare consumer. When misinformation is presented to the public such as that perpetuated by tanning bed establishments, it is the responsibility of the dermatology nurse to educate the public, promote responsible legislation for protecting children, and seek methods to reduce false statements in advertising. Dermatology nurses believe that the rights and health of the healthcare consumer deserve to be in concert with those who have the knowledge to advocate on their behalf.

Provision 4. The nurse has authority, accountability, and responsibility for nursing practice; makes decisions; and takes action consistent with the obligation to promote health and to provide optimal care.

The dermatology nurse remains aware of and accountable in their knowledge of current scope of practice. They demonstrate competency and are informed and make decisions based on current, evidence-based practice. They demonstrate their obligation to promote health, educating youth in methods of protecting their skin through projects such as SunAWARE of the Children’s Melanoma Prevention Foundation (CMPF), which incorporates both sun protection and skin cancer detection in their curriculum.

Provision 5. The nurse owes the same duties to self as to others, including the responsibility to promote health and safety, preserve wholeness of character and integrity, maintain competence, and continue personal and professional growth. Dermatology nurses recognize the value of promoting and preserving their own health and spirit. They seek to identify and
utilize effective coping mechanisms in an environment of care that can be stressful, demanding, and complex.

They function with integrity and character as individuals and when they represent the dermatology nursing profession, as educator, student, provider of care or advocate for others. They fully recognize the need to maintain competence in their specialty through continuing education and maintenance of certification.

Provision 6. The nurse, through individual and collective effort, establishes, maintains, and improves the ethical environment of the work setting and conditions of employment that are conducive to safe, quality health care.

Dermatology nurses promote an ethical work setting by identifying unethical behaviors or rhetoric, oppressive tactics, or unconscious biases. They seek to improve conditions of employment to ensure safety and appropriate care of the healthcare consumer. This includes ensuring, for example, that staffing levels or allocated staff time is appropriate to provide for adequate care during visits in clinic, while admitted in the hospital, or when seeking authorization for much needed dermatologic medications. Policies and procedures must be up-to-date and relative to the care that is being delivered including policies regarding safe delivery of phototherapy, appropriate disposal of sharps after cutaneous procedures or appropriate storage of chemicals used in treatment or while processing specimens. Dermatology nurses participate in the developing, monitoring, and implementing policies and procedures that promote safe and quality healthcare.

Provision 7. The nurse, in all roles and settings, advances the profession through research and scholarly inquiry, professional standards development, and the generation of both nursing and health policy.

Dermatology nurses seek to discover and innovate. They are committed to improving healthcare consumer care, through evidence-based research. They facilitate programs and opportunities to promote research within their work settings, their professional organizations, and in collaboration with academic centers, medical research centers, and industry. They seek to promote awareness and understanding of dermatologic research and seek to influence dermatology nursing practice and policy. Their objective is to develop a common strategy to conduct, participate in, and generate dermatology research.
Provision 8. The nurse collaborates with other health professionals and the public to protect human rights, promote health diplomacy, and reduce health disparities.

Health care disparities are prevalent, the nursing shortage, increased cost and demand for services have an absolute effect on access to care across all specialties. The dermatology nurse recognizes this dilemma and supports the healthcare consumer by identifying resources for financial support, raising awareness of health disparities in populations, volunteering their time at skin cancer screenings and skin disease camps, and acting as patient-navigators in a complex medical system.

Provision 9. The profession of nursing, collectively through its professional organizations, must articulate nursing values, maintain the integrity of the profession, and integrate principles of social justice into nursing and health policy.

Dermatology nurses, in collaboration with professional organizations such as the DNA and AANP seek to afford equal rights to all, regardless of wealth, status, gender, race, ethnicity, nation of origin, sexual orientation, or class. They maintain the integrity of the nursing profession by being morally accountable and responsible for their own judgement and actions.

Dermatologic professional organizations promote integrity in the dermatology nursing profession: The AANP recognized the values of integrity as “[...trust, transparency, accountability, ethical commitment, reliability, and respect in promoting high quality healthcare in dermatology].” [https://www.aanp.org/education/163-about-aanp/strategic-focus-tabs/1860-vision-and-values](https://www.aanp.org/education/163-about-aanp/strategic-focus-tabs/1860-vision-and-values)

The DNA adheres to the core organization value as, “Integrity: Evidenced by transparent decisions, honest actions and ethical behavior consistent with an abiding respect for the dignity and value of individuals.” [https://www.dnanurse.org/aboutdna/](https://www.dnanurse.org/aboutdna/)

Dermatology nurses also seek to expand their target audience to reduce risk and promote health by educating hair stylists, tattoo artists, teachers, primary care providers, aestheticians, and others in the community who advocate and care with dermatologic concerns.
Standards of Practice for Dermatology Nursing

Standard 1 Assessment

The dermatology registered nurse collects pertinent data and information relative to the healthcare consumer’s health and/or the situation.

Dermatology Nursing Competencies

The dermatology registered nurse:

- Collects pertinent data, including but not limited to demographics, social determinants of health, health disparities, and physical, functional, psychological, social, emotional, cognitive, sexual, cultural, age-related, environmental, spiritual/transpersonal, and economic assessments in a comprehensive, systematic, and ongoing process with compassion, considering that all persons are deserving of respect for their inherent dignity, value, and unique attributes.

- Recognizes the importance of the assessment parameters identified by World Health Organization (WHO), Healthy People 2020, or other organizations that influence nursing practice.

- Integrates knowledge of global and environmental factors into the assessment process.

- Respectfully elicits the healthcare consumer’s values, personal preferences, expressed and unexpressed needs, and knowledge of their healthcare situation.

- Recognizes the impact of one’s own personal attitudes, values, and beliefs on the assessment process.

- Identifies barriers to effective communication based on psychosocial, literacy, financial, and cultural considerations.
• Assesses the impact of various family dynamics on healthcare consumer health and wellness.

• Engages the patient and other interprofessional team members in holistic, culturally sensitive data collection, as appropriate.

• Prioritizes data collection based on the healthcare consumer’s immediate condition or the anticipated needs of their health situation.

• Uses evidence-based dermatologic assessment techniques, instruments, tools, available data, information, and knowledge relevant to the situation to identify patterns and variances.

• Applies ethical, legal, and privacy guidelines and policies to the protected collection, maintenance, use, and dissemination of healthcare consumer data and information.

• Recognizes the healthcare consumer as the authority on their own health by honoring their care preferences while being congruent with health care standards.

• Documents relevant data accurately and in a manner accessible to the interprofessional team.

Additional competencies for the graduate-level prepared registered nurse

In addition to the registered nurse competencies, the graduate-level prepared registered nurse:

• Assesses the effect of interactions among individuals, family, community, socioeconomics, and social systems on dermatologic health and conditions.

• Considers the aggregation of all results and information to guide clinical understanding.

Additional competencies for the advanced practice registered nurse

In addition to the competencies of the registered nurse and the graduate-level prepared registered nurse, the advanced practice registered nurse:

• Uses advanced assessment, knowledge, and skills to maintain, enhance, or improve dermatologic health conditions.
**Standard 2 Diagnosis**

The dermatology registered nurse analyzes assessment data to determine actual or potential diagnoses, problems, and issues.

**Dermatology Nursing Competencies**

The dermatology registered nurse:

- Identifies actual or potential risks to the healthcare consumer’s health and safety or barriers to health, which may include but are not limited to interpersonal, systematic, cultural, or environmental circumstances.

- Uses assessment data, standardized classification systems, technology, and clinical decision-making support tools and resources to determine dermatologic or other diagnoses, problems, and health issues.

- Verifies the diagnoses, problems, and issues with the individual, family, group, community, population, and interprofessional colleagues.

- Prioritizes diagnoses, problems, and issues to meet the needs of the healthcare consumer across the health–illness continuum, based on mutually set goals with the healthcare consumer.

- Documents diagnoses, problems, and issues in a consistent manner that facilitates the determination of the anticipated best outcomes and plan.

**Additional competencies for the graduate-level prepared registered nurse,**
In addition to the registered nurse competencies, the graduate-level prepared registered nurse and the advanced practice registered nurse:

- Incorporate clinical findings with normal and abnormal variations to formulate a differential diagnosis.
- Utilizes history, examination, and diagnostic procedures in identifying diagnoses.

**Additional competencies for the advanced practice registered nurse**

- Initiates diagnostic tests and procedures relevant to the healthcare consumer’s current status.

  Formulates differential diagnoses based on assessment, history, physical examination and diagnostic test results.

**Standard 3 Outcomes Identification**

The dermatology nurse identifies expected outcomes for a plan individualized to the healthcare consumer or the health situation.

**Dermatology Nursing Competencies**

The dermatology registered nurse:

- Involves and engages the patient, the interprofessional health care team, and others to identify agreed expected outcomes.
• Identifies culturally sensitive anticipated outcomes derived from assessments and diagnoses.

• Uses clinical dermatology expertise and current evidence-based practice to identify health risks, benefits, costs, and/or expected trajectory of the condition and outcomes.

• Collaborates with the healthcare consumer to define expected outcomes integrating their culture, values, and ethical considerations.

• Develops expected outcomes and uses these to facilitate coordination of care.

• Generates a time frame for the patient to expect anticipated outcomes.

• Modifies expected outcomes based on the ongoing appropriate evaluation of the status of the patient and health situation.

• Documents clearly and consistently the expected outcomes as measurable goals or plans.

• Evaluates the outcomes relative to expected outcomes, safety, and quality standards.

Additional competencies for the graduate-level prepared registered nurse, including the advanced practice registered nurse

In addition to the competencies of the registered nurse, the graduate-level prepared registered nurse or the advanced practice registered nurse:

• Defines expected outcomes that incorporate expense, clinical efficacy, participation, and alignment with outcomes in collaboration with patient and identified by members of the interprofessional team.

• Differentiates outcomes that may require healthcare process actions or interventions from those that require system-level actions or interventions.

• Integrates scientific evidence with best practices in order to achieve expected outcomes.

• Advocates for outcomes that are conscious of the consumer’s culture, values, and ethics.

Standard 4 Planning

The dermatology nurse develops a plan that prescribes strategies to attain expected, measurable outcomes.
Dermatology Nursing Competencies

The dermatology registered nurse:

• Develops an individualized, holistic, evidence-based plan together with the patient and interprofessional team.

• Advocates for responsible, ethical, and appropriate use of interventions in order to minimize unnecessary or unwanted treatment and prevent patient suffering.

• Prioritizes elements of the plan based on the assessment of the healthcare consumer’s overall risk and safety needs to prevent unintended consequences.

• Includes evidence-based strategies in the plan to address identified dermatologic diagnoses, problems, or issues. These strategies may include but are not limited to:
  □ Promotion and restoration of health,
  □ Prevention of illness, injury, and disease,
  □ Facilitation of healing,
  □ Alleviation of suffering, and
  □ Supportive, nurturing care

• Develops and utilizes an implementation pathway that describes steps and milestones.

• Identifies cost and economic implications of the plan, incorporating patient preferences.

• Develops a plan that is in compliance with current statutes, rules and regulations, and standards.

• Modifies the plan according to the ongoing assessment of the patient’s response and other outcome indicators.

• Documents the plan using standardized language or recognized terminology.

Additional competencies for the graduate-level prepared registered nurse

In addition to the registered nurse competencies, the graduate-level prepared registered nurse:

• Designs strategies and tactics to meet the multifaceted and complex needs of healthcare consumers or others.
• Leads the design and development of interprofessional processes to address the identified diagnoses, problems, or issues.

• Designs innovative nursing practices.

• Actively participates in the development and continuous improvement of systems that support the planning process.

**Additional competencies for the advanced practice registered nurse**

In addition to the competencies of the registered nurse and graduate-level prepared registered nurse, the advanced practice registered nurse:

• Integrates assessment strategies, diagnostic strategies, and therapeutic interventions that reflect current evidence-based knowledge and practice.

---

**Standard 5 Implementation**

The dermatology nurse implements the identified plan.

**Dermatology Nursing Competencies**

The dermatology registered nurse:

• Partners with the healthcare consumer to implement the plan in a safe, effective, efficient, realistic, and consumer-centered manner, without disparity.

• Integrates interprofessional team partners in the implementation process of the plan through collaboration and communication across the continuum of care.

• Demonstrates caring and compassionate behaviors to develop therapeutic relationships.

• Provides culturally congruent, holistic care, which focuses on the healthcare consumer, while addressing the advocacy and other needs of diverse individual populations across the lifespan.
• Uses evidence-based interventions and strategies to achieve the mutually-identified goals and outcomes specific to the dermatologic and other needs.

• Integrates critical thinking and technology solutions to implement the nursing process to collect, measure, record, retrieve, trend, and analyze data and information to enhance nursing practice and healthcare consumer outcomes.

• Delegates appropriately, according to the health, safety, and welfare of the patient and with consideration of circumstance, person, task, direction or communication, supervision, evaluation, as well as the state nurse practice act regulations, institution, and regulatory entities while maintaining accountability for the care.

• Documents implementation and any modifications, including additions, changes, or omissions, of the identified plan.

• Applies appropriate dermatologic expertise and knowledge while implementing plan of care.

**Additional competencies for the graduate-level prepared registered nurse**

In addition to the competencies of the registered nurse, the graduate-level prepared registered nurse:

• Uses systems, organizations, and community resources to lead effective change and implement the plan.

• Applies quality principles while articulating methods, tools, performance measures, and standards as they relate to implementation of the plan.

• Translates evidence into practice.

• Leads interprofessional teams to communicate, collaborate, and consult effectively.

• Demonstrates leadership skills that emphasize ethical and critical decision-making, effective working relationships, and a systems perspective.

• Serves as a consultant to provide additional insight and potential solutions.

• Uses theory-driven approaches to effect organizational or system change.

**Additional competencies for the advanced practice registered nurse**

In addition to the competencies of the registered nurse and graduate-level prepared registered nurse, the advanced practice registered nurse:

• Uses systems, organizations, and community resources to lead effective change and implement the plan.

• Applies quality principles while articulating methods, tools, performance measures, and standards as they relate to implementation of the plan.

• Translates evidence into practice.

• Leads interprofessional teams to communicate, collaborate, and consult effectively.

• Demonstrates leadership skills that emphasize ethical and critical decision-making, effective working relationships, and a systems perspective.

• Serves as a consultant to provide additional insight and potential solutions.

• Uses theory-driven approaches to effect organizational or system change.
• Uses prescriptive authority, procedures, referrals, treatments, and therapies in accordance with state and federal laws and regulations.

• Prescribes traditional and integrative evidence-based treatments, therapies, and procedures that are compatible with the healthcare consumer’s cultural preferences and norms.

• Prescribes evidence-based dermatologic pharmacological agents and treatments according to clinical indicators and results of diagnostic and laboratory tests.

• Provides clinical consultation for healthcare consumers and professionals related to dermatologic complex clinical cases to improve care and healthcare consumer outcomes.

Standard 5A. Coordination of Care

The dermatology nurse coordinates care delivery.

Dermatology Nursing Competencies

The dermatology registered nurse:

• Organizes the components of the plan.

• Collaborates with the healthcare consumer to manage health care based on mutually agreed outcomes.

• Engages the health care consumer in self-care to achieve preferred goals focused on quality of life.

• Assists the healthcare consumer to identify options for care that are congruent with their desires.

• Communicates with the healthcare consumer, the interprofessional team, and community-based resources to achieve safe transitions in continuity of care.
• Advocates on the healthcare consumer’s behalf for the delivery of dignified and holistic care by the interprofessional team.
• Documents the coordination of care.

**Additional competencies for the graduate-level prepared registered nurse**

In addition to the registered nurse competencies, the graduate-level prepared registered nurse:

• Provides leadership in the coordination of interprofessional health care for integrated delivery of healthcare consumer services to achieve safe, effective, efficient, timely, patient-centered, and equitable care.

**Additional competencies for the advanced practice registered nurse**

In addition to the competencies of the registered nurse and the graduate-level prepared nurse, the advanced practice registered nurse:

• Manages identified healthcare consumer panels and populations.
• Serves as the health consumer’s coordinator of healthcare services in accordance with state and federal laws and regulations.
• Synthesizes data and information to prescribe and provide the necessary system and community support measures to achieve anticipated outcomes, including modifications of environments.

**Standard 5B. Health Teaching and Health Promotion**

The dermatology nurse employs strategies to promote health and a safe environment.
Dermatology Nursing Competencies

The dermatology registered nurse:

- Provides opportunities for the health consumer to identify needed dermatologic information, health promotion, disease prevention, and self-management topics.
- Uses health promotion and health teaching methods in collaboration with the patient’s values, beliefs, health practices, developmental level, learning needs, readiness and ability to learn, language preference, spirituality, culture, gender identity and socioeconomic status.
- Utilizes feedback and evaluations from the healthcare consumer to determine the effectiveness of the employed strategies.
- Utilizes current technologies to communicate health education, health promotion and disease prevention information to the patient.
- Provides the healthcare consumer with information about intended effects and potential adverse effects of the plan of care.
- Engages consumer alliance and advocacy groups in health teaching and health promotion activities for healthcare consumers.
- Provides anticipatory guidance to the healthcare consumer to promote dermatologic health and prevent or reduce the risk of negative health outcomes.

Additional competencies for the graduate-level prepared registered nurse, including the advanced practice registered nurse

In addition to the competencies of the registered nurse, the graduate-level prepared registered nurse, and the advanced practice registered nurse:

- Synthesizes and utilizes empirical evidence on risk behaviors, gender roles/identities, learning theories, behavioral change theories, motivational theories, translational theories for evidence-based practice, epidemiology, and other related theories and frameworks when designing health education information and programs.
• Evaluates health information resources for applicability, accuracy, readability, and comprehensibility to help the health consumer access quality health information.

Standard 5C Prescriptive Authority and Treatment

The dermatology nurse practitioner utilizes prescriptive authority, procedures, referrals, treatments and other therapies, based on their competencies and credentialing, certification and APRN scope of practice, in accordance with their given state and federal laws and regulations.

Standard 6 Evaluation

The dermatology nurse evaluates progress toward attainment of goals and outcomes.

Dermatology Nursing Competencies

The dermatology registered nurse:

• Performs a holistic, systematic, ongoing, and criterion-based evaluation of the goals and outcomes based on the components, processes, and timeline within the plan.

• Collaborates with the healthcare consumer and others involved in the care or situation in the evaluation process.

• Determines the effectiveness of the plan based on anticipated outcomes.
• Uses ongoing assessment data to revisit and revise the diagnoses, anticipated outcomes, plan, and implementation strategies.

• Shares evaluation data and conclusions in an ongoing and interactive manner with the healthcare consumer and other interprofessional team in accordance with federal and state regulations.

• Documents the results of the evaluation.

**Additional competencies for the graduate-level prepared registered nurse, including the advanced practice registered nurse**

In addition to the competencies of the registered nurse, the graduate-level prepared registered nurse including the advanced practice registered nurse:

• Evaluates the progress toward outcomes individualized to healthcare consumer’s dermatologic conditions and overall health status. The results of evaluation are used to make or recommend changes in plan of individual care and should be utilized to effect system wide process or structural changes, including policy, procedure, or protocol revision as appropriate.

• Evaluates effectiveness of interventions and revisits and revises the plan based on outcome criteria in relation to components, process, and timeline within the plan.

• Determines the impact of dermatologic treatment both positive, unintended, and adverse, long-term effects on the healthcare consumer, their family, and interprofessional team, and adequacy of support systems.

• Communicates effectiveness and documents ongoing evaluation and modifications to plan of care in collaboration with the healthcare consumer, family and others interprofessional team

• Incorporates new knowledge and technology in ongoing evaluation of plan of care.

• Performs ongoing monitoring and evaluation of high risk patients.

• Initiates appropriate collaboration for healthcare consumers with complex dermatologic disease and those with unexpected outcomes.
Standards of Professional Performance for Dermatology Nursing

Standard 7 Ethics
The registered nurse practices ethically.

Dermatology Nursing Competencies
The dermatology registered nurse:

- Integrates the *Code of Ethics for Nurses with Interpretive Statements* (ANA, 2015) to guide nursing practice and articulate the moral foundation of nursing.
- Practices with compassion and respect for the inherent dignity, worth, and unique attributes of all people.
- Advocates for healthcare consumers’ rights to informed decision-making and self-determination.
- Seeks guidance in situations where the rights of the individual conflict with public health guidelines.
- Endorses the understanding that the primary commitment is to the healthcare consumer regardless of setting or situation.
- Maintains therapeutic relationships and professional boundaries.
- Advocates for the rights, health, and safety of the healthcare consumer and others.
- Safeguards the privacy and confidentiality of healthcare consumers, others, and their data and information within ethical, legal, and regulatory parameters.
- Demonstrates professional accountability and responsibility for nursing practice.
- Maintains competence through continued personal and professional development.
- Demonstrates commitment to self-reflection and self-care.
- Contributes to the establishment and maintenance of an ethical environment that is conducive to safe, quality health care.
- Advances the profession through scholarly inquiry, professional standards development, and the generation of policy.
Collaborates with other health professionals and the public to protect human rights, promote health diplomacy, enhance cultural sensitivity and congruence, and reduce health disparities.

- ARTiculates nursing values to maintain personal integrity and the integrity of the profession.

- Integrates principles of social justice into nursing and policy.

**Standard 8 Culturally Congruent Practice**

The registered nurse practices in a manner that is congruent with cultural diversity and inclusion principles.

**Dermatology Nursing Competencies**

The dermatology registered nurse:

- Demonstrates respect, equity, and empathy in actions and interactions with all healthcare consumers.

- Participates in life-long learning to understand cultural preferences, worldview, choices, and decision-making processes of diverse consumers.

- Creates an inventory of one’s own values, beliefs, and cultural heritage.

- Applies knowledge of variations in health beliefs, practices, and communication patterns in all nursing practice activities.

- Identifies the stage of the consumer’s acculturation and accompanying patterns of needs and engagement.

- Considers the effects and impact of discrimination and oppression on practice within and among vulnerable cultural groups.

- Uses skills and tools that are appropriately vetted for the culture, literacy, and language of the population served.
• Communicates with appropriate language and behaviors, including the use of medical interpreters and translators in accordance with consumer preferences.

• Identifies the cultural-specific meaning of interactions, terms, and content.

• Respects consumer decisions based on age, tradition, belief and family influence, and stage of acculturation.

• Advocates for policies that promote health and prevent harm among culturally diverse, under-served, or under-represented consumers.

• Promotes equal access to services, tests, interventions, health promotion programs, enrollment in research, education, and other opportunities.

• Educates nurse colleagues and other professionals about cultural similarities and differences of healthcare consumers, families, groups, communities, and populations.

Additional competencies for the graduate-level prepared registered nurse

In addition to the competencies of the registered nurse, the graduate-level prepared registered nurse:

• Evaluates tools, instruments, and services provided to culturally diverse populations.

• Advances organizational policies, programs, services, and practice that reflect respect, equity, and values for diversity and inclusion.

• Engages consumers, key stakeholders, and others in designing and establishing internal and external cross-cultural partnerships.

• Conducts research to improve health care and healthcare outcomes for culturally diverse consumers.

• Develops recruitment and retention strategies to achieve a multicultural workforce.

Additional competencies for the advanced practice registered nurse

In addition to the competencies of the registered nurse and graduate-level prepared registered nurse, the advanced practice registered nurse:

• Evaluates tools, instruments, and services provided to culturally diverse populations.

• Advances organizational policies, programs, services, and practice that reflect respect, equity, and values for diversity and inclusion.

• Engages consumers, key stakeholders, and others in designing and establishing internal and external cross-cultural partnerships.

• Conducts research to improve health care and healthcare outcomes for culturally diverse consumers.

• Develops recruitment and retention strategies to achieve a multicultural workforce.
• Promotes shared decision-making solutions in planning, prescribing, and evaluating processes when the healthcare consumer’s cultural preferences and norms may create incompatibility with evidence-based practice.

• Leads interprofessional teams to identify the cultural and language needs of the healthcare consumer.
Standard 9 Communication
The registered nurse communicates effectively in all areas of practice.

Dermatology Nursing Competencies
The dermatology registered nurse:

- Assesses one’s own communication skills and effectiveness.
- Demonstrates cultural empathy when communicating.
- Assesses communication ability, health literacy, resources, and preferences of healthcare consumers to inform the interprofessional team and others.
- Uses language translation resources to ensure effective communication.
- Incorporates appropriate alternative strategies to communicate effectively with healthcare consumers who have visual, speech, language, or communication difficulties.
- Uses communication styles and methods that demonstrate caring, respect, deep listening, authenticity, and trust.
- Conveys accurate information.
- Maintains communication with interprofessional team and others to facilitate safe transitions and continuity in care delivery.
- Contributes the nursing perspective in interactions with others and discussions with the interprofessional team.
- Exposes care processes and decisions when they do not appear to be in the best interest of the healthcare consumer.
- Discloses concerns related to potential or actual hazards and errors in care or the practice environment to the appropriate level.
- Demonstrates continuous improvement of communication skills.
Additional competencies for the graduate-level prepared registered nurse, including the advanced practice registered nurse

In addition to the competencies of the registered nurse, the graduate-level prepared registered nurse or advanced practice registered nurse:

- Assumes a leadership role in shaping or fashioning environments that promote healthy communication.

Standard 10 Collaboration

The registered nurse collaborates with the healthcare consumer and other key stakeholders in the conduct of nursing practice.

Dermatology Nursing Competencies

The dermatology registered nurse:

- Identifies the areas of expertise and contribution of other professionals and key stakeholders.
- Clearly articulates the nurse’s role and responsibilities within the team.
- Uses the unique and complementary abilities of all members of the team to optimize attainment of desired outcomes.
- Partners with the healthcare consumer and key stakeholders to advocate for and effect change, leading to positive outcomes and quality care.
- Uses appropriate tools and techniques, including information systems and technologies, to facilitate discussion and team functions, in a manner that protects dignity, respect, privacy, and confidentiality.
- Promotes engagement through consensus building and conflict management.
- Uses effective group dynamics and strategies to enhance team performance.
- Exhibits dignity and respect when interacting with others and giving and receiving feedback.
- Partners with all stakeholders to create, implement, and evaluate a comprehensive plan.
Additional competencies for the graduate-level prepared registered nurse, including the advanced practice registered nurse

In addition to the competencies of the registered nurse, the graduate-level prepared registered nurse, or advanced practice registered nurse:

- Participates in interprofessional activities, including but not limited to education, consultation, management, technological development, or research to enhance outcomes.
- Provides leadership for establishing, improving, and sustaining collaborative relationships to achieve safe, quality care for healthcare consumers.
- Advances interprofessional plan-of-care documentation and communications, rationales for plan-of-care changes, and collaborative discussions to improve healthcare consumer outcomes.

Standard 11 Leadership

The registered nurse leads within the professional practice setting and the profession.

Dermatology Nursing Competencies

The dermatology registered nurse:

- Contributes to the establishment of an environment that supports and maintains respect, trust, and dignity.
- Encourages innovation in practice and role performance to attain personal and professional plans, goals, and vision.
- Communicates to manage change and address conflict.
- Mentors colleagues for the advancement of nursing practice and the profession to enhance safe, quality health care.
- Retains accountability for delegated nursing care.
- Contributes to the evolution of the profession through participation in professional organizations.
- Influences policy to promote health.
Additional competencies for the graduate-level prepared registered nurse, including the advanced practice registered nurse

In addition to the competencies of the registered nurse, the graduate-level prepared registered nurse or advanced practice registered nurse:

- Influences decision-making bodies to improve the professional practice environment and healthcare consumer outcomes.
- Enhances the effectiveness of the interprofessional team.
- Promotes advanced practice nursing and role development by interpreting its role for healthcare consumers and policy makers.
- Models expert practice to interprofessional team members and healthcare consumers.
- Mentors colleagues in the acquisition of clinical knowledge, skills, abilities, and judgment.
Standard 12 Education
The registered nurse seeks knowledge and competence that reflects current nursing practice and promotes futuristic thinking.

Dermatology Nursing Competencies
The dermatology registered nurse:

- Identifies learning needs based on nursing knowledge and the various roles the nurse may assume.
- Participates in ongoing dermatology and other applicable educational activities related to nursing and interprofessional knowledge bases and professional topics.
- Mentors nurses new to their roles for the purpose of ensuring successful enculturation, orientation, and emotional support.
- Demonstrates a commitment to lifelong learning through self-reflection and inquiry for learning and personal growth.
- Seeks experiences that reflect current practice to maintain and advance knowledge, skills, abilities, attitudes, and judgment in clinical practice or role performance.
- Acquires knowledge and skills relative to the role, population, dermatology, setting, and global or local health situation.
- Participates in formal dermatologic consultations or informal discussions to address issues in nursing practice as an application of education and knowledge.
- Identifies modifications or accommodations needed in the delivery of education based on healthcare consumer and family members’ needs.
- Shares educational findings, experiences, and ideas with peers.
- Supports acculturation of nurses new to their roles by role modeling, encouraging, and sharing pertinent information relative to optimal care delivery.
Facilitates a work environment supportive of ongoing education of healthcare professionals.

Maintains a professional portfolio that provides evidence of individual dermatology competence and lifelong learning.

Standard 13 Evidence-based Practice and Research
The registered nurse integrates evidence and research findings into practice.

Dermatology Nursing Competencies
The dermatology registered nurse:

- Articulates the values of research and its application relative to the healthcare setting and practice.
- Identifies questions in the healthcare setting and practice that can be answered by nursing research.
- Uses current evidence-based knowledge, including research findings, to guide practice.
- Incorporates evidence when initiating changes in nursing practice.
- Participates in the formulation of evidence-based practice through research.
- Promotes ethical principles of research in practice and the healthcare setting.
- Appraises nursing research for optimal application in practice and the healthcare setting.
- Shares peer reviewed research findings with colleagues to integrate knowledge into nursing practice.

Additional competencies for the graduate-level prepared registered nurse, including the advanced practice nurse
In addition to the competencies of the registered nurse, the graduate-level prepared registered nurse and advanced practice registered nurse:

- Integrates research-based practice in all settings.
- Uses current healthcare research findings and other evidence to expand knowledge, skills, abilities, and judgment; to enhance role performance; and to increase knowledge of professional issues.
- Uses critical thinking skills to connect theory and research to practice.

- Integrates nursing research to improve quality in nursing practice.

- Contributes to nursing knowledge by conducting or synthesizing research and other evidence that discovers, examines, and evaluates current practice, knowledge, theories, criteria, and creative approaches to improve healthcare outcomes.

- Encourages other nurses to develop research skills.

- Performs rigorous critique of evidence derived from databases to generate meaningful evidence for nursing practice.

- Advocates for the ethical conduct of research and translational scholarship with attentiveness to the protection of the healthcare consumer as a research participant.

- Promotes a climate of collaborative research and clinical inquiry.

- Disseminates research findings through activities such as presentations, publications, consultation, and journal clubs.
Standard 14 Quality of Practice
The registered nurse contributes to quality nursing practice.

Dermatology Nursing Competencies

- The dermatology registered nurse:
  - Ensures that nursing practice is safe, effective, efficient, equitable, timely, and patient-centered.
  - Identifies barriers and opportunities to improve healthcare safety, effectiveness, efficiency, equitability, timeliness, and patient-centeredness.
  - Recommends strategies to improve nursing quality.
  - Uses creativity and innovation to enhance nursing care.
  - Participates in quality improvement initiatives.
  - Collects data to monitor the quality of nursing practice.
  - Contributes in efforts to improve healthcare efficiency.
  - Provides critical review and/or evaluation of policies, procedures, and guidelines to improve the quality of health care.
  - Engages in formal and informal peer review processes.
  - Collaborates with the interprofessional team to implement quality improvement plans and interventions.
  - Documents nursing practice in a manner that supports quality and performance improvement initiatives.
  - Achieves professional certification, when available.

Additional competencies for the graduate-level prepared registered nurse

- In addition to the competencies for the registered nurse, the graduate-level prepared registered nurse:
  - Analyzes trends in healthcare quality data, including examination of cultural influences and factors.
• Incorporates evidence into nursing practice to improve outcomes.
• Designs innovations to improve outcomes.
• Provides leadership in the design and implementation of quality improvement initiatives.
• Promotes a practice environment that supports evidence-based health care.
• Contributes to nursing and interprofessional knowledge through scientific inquiry.
• Encourages professional or specialty certification.
• Engages in development, implementation, evaluation, and/or revision of policies, procedures, and guidelines to improve healthcare quality.
• Uses data and information in system-level decision-making.
• Influences the organizational system to improve outcomes.

**Additional competencies for the advanced practice registered nurse**
In addition to the competencies for the registered nurse and graduate-level prepared registered nurse, the advanced practice registered nurse:

• Engages in comparison evaluations of the effectiveness and efficacy of diagnostic tests, clinical procedures and therapies, and treatment plans, in partnership with healthcare consumers, to optimize health and healthcare quality.
• Designs quality improvement studies, research, initiatives, and programs to improve health outcomes in diverse settings.
• Applies knowledge obtained from advanced preparation, as well as current research and evidence-based information, to clinical decision-making at the point of care to achieve optimal health outcomes.
• Uses available benchmarks as a means to evaluate practice at the individual, departmental, or organizational level.

**Standard 15 Professional Practice Evaluation**
The registered nurse evaluates one’s own and others’ nursing practice.
Dermatology Nursing Competencies

The dermatology registered nurse:

- Engages in self-reflection and self-evaluation of nursing practice on a regular basis, identifying areas of strength as well as areas in which professional growth would be beneficial.
- Adheres to the guidance about professional practice as specified in the *Nursing: Scope and Standards of Practice* and the *Code of Ethics for Nurses with Interpretive Statements*.
- Ensures that nursing practice is consistent with regulatory requirements pertaining to licensure, relevant statutes, rules, and regulations.
- Uses organizational policies and procedures to guide professional practice.
- Influences organizational policies and procedures to promote interprofessional evidence-based practice.
- Provides evidence for practice decisions and actions as part of the formal and informal evaluation processes.
- Seeks formal and informal feedback regarding one’s own practice from healthcare consumers, peers, colleagues, supervisors, and others.
- Provides peers and others with formal and informal constructive feedback regarding their practice or role performance.
- Employs strategies to achieve goals identified during the evaluation process.

Standard 16 Resource Utilization

The registered nurse utilizes appropriate resources to plan, provide, and sustain evidence-based nursing services that are safe, effective, and fiscally responsible.
Dermatology Nursing Competencies

The dermatology registered nurse:

- Assesses healthcare consumer care needs and resources available to achieve desired outcomes.
- Assists the healthcare consumer in factoring costs, risks, and benefits in decisions about care.
- Assists the healthcare consumer in identifying and securing appropriate services to address needs across the healthcare continuum.
- Delegates in accordance with applicable legal and policy parameters.
- Identifies impact of resource allocation on the potential for harm, complexity of the task, and desired outcomes.
- Advocates for resources that support and enhance nursing practice.
- Integrates teledermatology and mobile health technologies into practice to promote positive interactions between healthcare consumers and care providers.
- Uses organizational and community resources to implement interprofessional plans.
- Addresses discriminatory healthcare practices and the impact on resource allocation.

Additional competencies for the graduate-level prepared registered nurse

In addition to the competencies of the registered nurse, the graduate-level prepared registered nurse:

- Designs innovative solutions to use resources effectively and maintain quality.
- Creates evaluation strategies that address cost effectiveness, cost benefit, and efficiency factors associated with nursing practice.
- Assumes complex and advanced leadership roles to initiate and guide change.

Additional competencies for the advanced practice registered nurse

In addition to the competencies of the registered nurse and graduate-level prepared registered nurse, the advanced practice registered nurse:

- Engages organizational and community resources to formulate and implement interprofessional plans.
Standard 17 Environmental Health
The registered nurse practices in an environmentally safe and healthy manner.

Dermatology Nursing Competencies
The dermatology registered nurse:

- Promotes a safe and healthy workplace and professional practice environment.
- Uses environmental health concepts in practice.
- Assesses the environment to identify risk factors.
- Reduces environmental health risks to self, colleagues, and healthcare consumers.
- Communicates information about environmental health risks and exposure reduction strategies.
- Advocates for the safe, judicious, and appropriate use and disposal of products in health care.
- Incorporates technologies to promote safe practice environments.
- Uses products or treatments consistent with evidence-based practice to reduce environmental threats.
- Participates in developing strategies to promote healthy communities and practice environments.

Additional competencies for the graduate-level prepared registered nurse, including the advanced practice registered nurse
In addition to the competencies of the registered nurse, the graduate-level prepared registered nurse and the advanced practice registered nurse:

- Analyzes the impact of social, political, and economic influences on the global environment and human health experience.
- Creates partnerships that promote sustainable global environmental health policies and conditions that focus on prevention of hazards to people and the natural environment.


Appendix C: Scope of Practice and Standards of Practice for the Nurse Practitioner in Dermatology (2006)

Glossary

Advanced practice registered nurse-registered nurse who has completed an accredited graduate-level education program and received licensure for one of the following APRN roles: certified nurse practitioner, certified registered nurse anesthetist, clinical nurse specialist and certified nurse midwife

Dermatology nurse- dermatology nurses are registered nurses (RNs) and advanced practice registered nurses (APRNs) who focus on health promotion, disease and injury prevention, sign and symptom recognition, dermatologic disease management, and self-care knowledge and adherence to improve patient and population outcomes for those at risk, or living with, dermatologic diseases

Dermatology nursing-dermatology nursing is specialized nursing care focused on the optimization of dermatologic health across the life span and in diverse practice settings. The essence of dermatology nursing is assessment, detection, treatment, prevention and education of dermatologic disease in individuals, families, communities, and populations

Dermoscopy- a noninvasive method that allows the in vivo evaluation of colors, microstructures and patterns of the skin or skin lesions through a magnifier and light source to better define and/or diagnose dermatologic conditions; also termed epiluminescence microscopy (ELM)

Graduate-level prepared registered nurse-register nurse who is prepared at the master’s or doctoral education level and have advanced skills, knowledge, judgement and aptitude; perform at an advanced level of function

Healthcare consumer-the individuals, families, communities, and populations who are the focus of attention and to whom the dermatology registered nurse provides services

Teledermatology- a subspecialty of dermatology whereby telecommunication technologies are used to transfer dermatologic medical information through audio, visual and data communication to deliver and receive care
References


