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## Assisted living nurse competencies

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## ABSTRACT

The Assisted Living (AL) nurse competencies article identifies the application of Benner's theoretical framework (novice to expert) and a sample structure for several key domains of nursing practice knowledge from the AL Nursing: A Manual for Management and Practice. On behalf of the American Assisted Living Nurse Association (AALNA), the co-authors seek feedback on the proposed structure for identifying important nurse competencies for the Assisted Living nurse community/facility leader.

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The American Assisted Living Nurses Association's (AALNA) mission is "To promote nursing practice by enhancing the competencies of nurses working within the unique Assisted Living environment". Recognizing that other organizations and professional bodies have delineated competencies for nursing practice in specialty environments that provide care for a specific patient or resident population, AALNA established a goal to develop assisted living (AL) nurse competencies. The intention for this work is to help define nursing practice in assisted living and provide guidance with nurse development, recruitment and retention.

When reviewing nurses' roles in the various assisted living settings along with what these competencies should focus on, it was determined that nurses in assisted living are mostly in leadership positions and that they include both registered nurses (RNs) and licensed practical nurses/licensed vocational nurses (LPNs/LVNs). AALNA is a nursing organization that supports and is open to membership by LPNs/LVNs; therefore, these competencies need to be applicable to all licensed nurses. Another aspect considered in developing the competencies is the domains of knowledge that should be covered by the competencies. Even though residents in assisted living have chronic and acute illness and disease processes, clinical competencies are addressed in other ways and would not be focused on as much as nurse leadership and management.

With these broad concepts in mind, the next step that was contemplated was how to organize and structure the development of competencies so they could be easily understood as well as critiqued and modified as needed. A structure that includes a theoretical

framework and process was adopted to allow for the methodical development and validation of the competencies that would be considered for a nurse in assisted living.

## Theoretical framework

It was decided that Patricia Benner's well-known theoretical framework would be an excellent model to use to develop competencies for all licensed nurses. The unique relationship of nursing theoretical knowledge, education and practice experience is woven throughout Dr. Patricia Benner's book *From Novice to Expert: Excellence and Power in Clinical Nursing Practice*<sup>1</sup>. She builds from the Dreyfus model of skills acquisition and applies this model to nursing knowledge and practice, which for the nurse, grows over time. For AL nursing, we can then ask the question: How does the state of "knowing" AL concepts then evolve into the "how" of applying these concepts in real practice? In the course of defining the specific skill set for the assisted living nurse, Benner's theoretical framework of novice to expert became the structure for outlining the current AL nurse competencies.

The five stages of learning and expertise in this model are described as 1) novice, 2) advanced beginner, 3) competent, 4) proficient and 5) expert. These stages reflect a movement in a nurse's professional development path from past abstract concepts through concrete experiences. With each stage of learning, the nurse grows and builds from these abstract principles and expands in competence by applied clinical experience. The five stages are briefly described below:

1. **Novice:** In this stage, the nurse begins her/his nursing career, relying on general rules when performing nursing tasks. Behavior is

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limited and inflexible because performing the task according to the procedural steps is the goal.

2. **Advanced beginner:** Here, the nurse demonstrates acceptable performance and has gained experience in actual situations, following specific principles which guide her/his actions.
3. **Competent:** This stage typically describes a nurse with two to three years of experience in a particular area of nursing practice encountering similar day-to-day situations. The nurse has by now a perspective on planning shift responsibilities using abstract concepts and analytical thinking, which fosters a greater efficiency, confidence and organization of their work.
4. **Proficient:** A proficient nurse demonstrates an understanding of the clinical situation from a 'holistic' perspective which helps to improve the decision-making process. They learn what to expect from certain situations and then how to modify the plan accordingly.
5. **Expert:** The expert nurse no longer relies solely on the rules to guide their actions. They can recognize and intuitively grasp a situation based on their own knowledge and experience. Their focus is on relevant problems, and their performance is flexible and highly proficient.

### Domains of knowledge

Once Benner's framework was identified as a good way to delineate competencies for the nurse, the domains of knowledge for assisted living nursing practice needed to be outlined. These domains would provide the categories for the competencies. The domains of knowledge for nursing in assisted living consider, among other things, the patient/resident population and the environment where nursing care is provided. The uniqueness of the environment requires the nurse to adapt and perfect skills and competencies in order to function within the scope of practice, which is especially important in assisted living, since there are many regulatory and licensure requirements, depending on the respective state. Additionally, the domains of knowledge facilitate the ability to identify behaviors required in a specific area or specialty.

As mentioned earlier, the role of the nurse in assisted living is complex and multifaceted and requires abilities that go beyond clinical care. By analyzing the role and responsibilities of the assisted living nurse, major functional aspects emerged as essential to performing successfully. These include clinician, educator, manager and leader. Some of the important skills necessary to achieving success in the role include communication, collaboration, influencing and critical thinking. Critical thinking can be a difficult skill to describe. In this context it means the ability to analyze, synthesize and formulate information and solutions when new or varied circumstances occur.

As the complexity of the role and the required skills were considered, it became clear that an outline to organize this process was needed to help define the domains of knowledge. AALNA uses the book *Assisted Living Nursing: A Manual for Management and Practice*<sup>2</sup> as a resource for the Assisted Living Nurse certification test. This book is organized in chapters that delineate management, leadership and the approaches to resident care specific to the assisted living environment. It is this book that was used to identify and outline the domains of knowledge for nursing in assisted living.

The chapters in the book that are used to inform the domains of knowledge for the competencies are:

1. Nursing Practice Setting
2. Public Policies, Assisted Living Models and Regulations
3. The Economics of Assisted Living
4. Marketing/Quality/Consumer Choice and Admission Agreements
5. Nursing and Organizational Theory, Practice and Culture
6. Leadership/Management Style and Assessment
7. Problem Solving/Change Management and Team Building
8. Staff Development and Training
9. Staffing, Assignments, Delegation and Time Management

10. Medication Management
11. Finance and Budget
12. Law, Legal Issues and Labor Relations
13. Quality Improvement, Research and Education
14. Resident Assessment and Service Plan Construction
15. Cultural Aspects of Care
16. Psychosocial Aspects of Aging
17. The Continuum of Care

It is in these chapters that the domains of knowledge were synthesized in order to create categories for the competencies specific to leadership and management responsibilities for nurses when overseeing the provision of care and services to residents in assisted living.

### Definitions

In the course of blending the structure of the theoretical model and domains of AL nursing practice, it became increasingly important to address a common understanding and definition of some baseline terms, such as competency, skills and tasks. Often, these three terms are used interchangeably; however, clearly demonstrating competency with critical thinking ability is different from performing a task or possessing a specific skill.

For the purpose of this work, we defined competency as the demonstration of the nurse's knowledge, skills and ability in the performance of their clinical and leadership role in assisted living. Inherent in the nurse's practice to demonstrate competency is the ability to ask the 'why' questions that challenge the assimilation of knowledge and experience. For example: "Why is this resident prescribed an antipsychotic medication when psychotic symptoms such as hallucinations or delusions are not present?" or "Why is this resident experiencing confusion and a change in condition since he or she just returned from the hospital two days ago?"

Skill is defined as the knowledge and ability to perform tasks according to standards and practices based in the disciplines of nursing, management and leadership. Leadership skills, such as communication, maximizing team performance in quality improvement, coaching for associate/employee growth, etc. are important skills in leading successful teams.

Tasks are defined as specific activities that require special training and knowledge, such as performing a pressure wound treatment procedure or using a mechanical lift device to move a resident from a bed to a chair.

In reviewing the language associated with articulating the stage of competency in each category, the progression from novice to expert could be described by using verbs associated with each stage. These verbs, along with the explanation of how they are applied, help to differentiate the nurse's behaviors in each domain. This taxonomy is listed below with the verbs in bold type for each stage.

- **Novice: Verbalizes** or **speaks** in general terms.
- **Advanced beginner: Practices** according to policies and procedures in a structured manner.
- **Competent: Applies** critical thinking and abstract problem solving skills.
- **Proficient: Collaborates, teaches,** or **creates** new methods and processes to achieve goals.
- **Expert: Innovates** using research, best practices, experience, and new learning solutions to **improve** daily operations, care programs or **develop** new research.

### Structure

The table below shows the integrative format used to display the blending of the domain, theoretical framework listing the stage of expertise, the level of nursing licensure for which this applies and the corollary description of the behavior that demonstrate the competency. This

format is designed to be applicable for the new assisted living nurse or one with several years of experience who is focused on professional growth.

In the following example, the Nursing Practice Setting Domain identifies the specific competency for each of the five stages of proficiency. An 'Advanced Beginner' would be able to articulate the differences between the assisted living community where he or she works and other assisted living communities in their region, whereas an 'Expert' would be participating in public policy regulations or research/ innovations that could impact the assisted living industry.

Competency domain	Theoretical framework	RN/LPN/LVN	How to demonstrate competency knowledge and skill
Nursing Practice Setting	Novice	RN/LPN/LVN	1. List the various assisted living products or know the different types of assisted living communities.
	Adv Beginner	RN/LPN/LVN	2. Able to communicate the difference between your community and other assisted living communities in your area.
	Competent	RN/LPN/LVN	3. Explain the nursing practice setting in assisted living settings and how it differs from other practice settings, such as skilled nursing.
	Proficient	RN/LPN/LVN	4. Creates new programs and methods for delivering assisted living on behalf of residents and staff.
	Expert	RN/LPN/LVN	5. Participates in public policy on assisted living regulations, research studies and implements research innovations in the assisted living setting.

In another example, in the domain of Public Policy, a 'Novice' would be able to list the state-specific regulations for assisted living and any state programs impacting the older adult population, while the 'Proficient' nurse would be advising residents and their families on public policies and information in their state on assisted living requirements, such as resident rights or admission/discharge criteria.

Competency domain	Theoretical framework	RN/LPN/LVN	How to demonstrate competency knowledge and skill
Public Policies	Novice	RN/LPN/LVN	1. Lists the various federal and state programs and public policies for older adults that affect assisted living.
	Adv Beginner	RN/LPN/LVN	2. Discuss the way that the public policies directly impact the residents and the community. For example, reimbursement, resident self-determination, regulatory oversight.
	Competent	RN/LPN/LVN	3. Integrate aspects of public policies into community-based programs and services for residents and families.
	Proficient	RN/LPN/LVN	4. Advise prospects, residents, and families on public policies that provide the framework for their community's assisted living program.
	Expert	RN/LPN/LVN	5. Serves on committees and boards to provide expert advice on public policy decisions. Participates in documenting responses to governmental comment periods for new regulations, proposals, etc.

This integrative format is designed to facilitate the professional development continuum for nurses entering assisted living or those growing in their experience as a nurse leader.

### Practical application

The ability to apply these competencies in practice is paramount to their development and justifies the efforts made to ensure that they are demonstrative of a nurse's knowledge, skill and ability in nursing practice in the assisted living setting.

Generally speaking, this work can be used to extrapolate information that can help consumers understand the nurse's role in assisted living as well as to support senior living owners and operators with clarity about what nurses do and why they need a nurse in their communities.

More specifically, the competencies should be able to be applied as a way to organize topics for nurses to do self-assessment for professional growth, to assist employers to identify responsibilities and expectations for nurses and for educators to develop curriculum and practicum objectives.

When tying assisted living nurse competencies to bigger industry issues such as recruitment and retention they can help to address quality of work/life in a variety of ways. Some areas that these competencies can help address include creating better job descriptions and job clarity that can help select candidates, orientation and on-boarding so that a nurse is at the competency level before assuming role autonomy, performance reviews that quantitatively explain accomplishments and areas for development; pay scale ranges that objectively determine placement of nurses within the range and development of clinical ladders which becomes an opportunity to grow qualified staff from within the company.

Of course an important reason for creating nurse competencies is to help further define the discipline of nursing in newer practice settings as they continue to evolve and grow.

### Contributions and feedback

This work is in the beginning stage and needs further refinement. To that end there is an open invitation to critique and contribute to these competencies by those who would like to express an interest.

Comments may be sent to [www.alnursing.org](http://www.alnursing.org) by clicking on the *Contact Us* link at the bottom of the home page and submitting your comments and recommendations.

### References

1. *From Novice to Expert: Excellence and Power in Clinical Nursing Practice*, Patricia Benner, RN, Ph.D. (Prentice Hall; 1984).
2. *Assisted Living Nursing: A Manual for Management and Practice* (Springer Publishing Company; 1st edition [July 13, 2009] by Dr. Barbara Resnick PhD CRNP FAAN [Editor], Dr. Ethel Mitty EDD RN [Editor]).

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