

Expertise in action: The role and reception of advanced practice nurses in clinical settings

N. Sim Aygul¹, Emine Senyuva²

¹Nursing Education PhD Programme, Institute of Graduate Studies, Istanbul University-Cerrahpasa, Turkey

²Nursing Education Department, Istanbul University-Cerrahpasa Florence Nightingale Faculty of Nursing, Turkey

Corresponding Author: Emine Senyuva, e-mail: esenyuva@iuc.edu.tr

Abstract:

Advanced Practice Nurses (APNs) play a crucial and expanding role in modern healthcare by improving patient care quality and outcomes through their specialized knowledge and evidence-based practice. This study aims to explore the expectations and perceptions of both physicians and patients regarding APN services within clinical settings, based on their direct experiences. A phenomenological descriptive qualitative design was employed to capture the lived experiences of participants. Data was collected through semi-structured, face-to-face interviews and analyzed using thematic content analysis to identify key patterns and themes. The analysis revealed four primary themes: the utilization of specialized knowledge and skills, effective communication, problem-solving capabilities, and the importance of increasing the number of APNs working in clinical environments. Participants consistently reported that APN services contributed positively to care quality and patient satisfaction. Patients especially emphasized the need for APNs to apply their advanced expertise in practice and expressed a strong desire for greater APN availability in clinical settings. These findings highlight the essential role of APNs in enhancing healthcare delivery and suggest that healthcare institutions should actively support the growth and integration of APN roles to further improve patient outcomes and clinical effectiveness.

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INTRODUCTION

The complexity and scope of patient care requirements in clinical settings have expanded substantially, driven by advances in medical technology, demographic changes such as population aging, and the rising prevalence of chronic and multifaceted health conditions. Enhancing the quality of nursing care is increasingly dependent on specialization, which integrates scientific knowledge, research evidence, and clinical expertise. Contemporary literature indicates a growing global demand for specialized nursing roles throughout the twenty-first century (Drury et al., 2023). The International Council of Nursing (ICN) underscores the indispensable contribution of the nursing profession to the provision of high-quality, safe, and accessible healthcare services worldwide. Given that nurses comprise the largest segment of the healthcare workforce and are responsible for most of the patient care, particularly in primary care settings, investment in nursing is fundamental to optimizing patient outcomes (ICN, 2020).

The development and implementation of advanced nursing roles vary internationally, reflecting diverse stages of workforce evolution across countries. Nursing specialization typically entails two to four years of postgraduate education following undergraduate training. Advanced Practice Nurses (APNs) are characterized by advanced clinical competencies and autonomous decision-making capabilities that enable them to deliver specialized care across various domains including mental health, pediatrics, geriatrics, gynecology, community health, surgical nursing, occupational health,

school nursing, diabetes care, and wound management (Clarke, 2021; Schober, 2019; Drury et al., 2023; Rautiainen et al., 2016). APNs significantly contribute to improving patient care quality and hold considerable potential to enhance health outcomes at a population level (Htay & Whitehead, 2021).

The conceptualization of advanced practice nursing emerged in the latter part of the twentieth century alongside the formalization of postgraduate nursing education. Notably, Dr. Hildegard Peplau introduced the new term “Nurse Practitioner” in 1938, emphasizing the necessity for nurses to possess at least a master’s degree to attain expertise within their field (Brennan, 2020). The United States institutionalized the role of APNs in the 1960s, with subsequent adoption in Asia and Europe during the following decades. The competencies and responsibilities of specialist nurses have been extensively delineated in scholarly publications (Ford & Gardenier, 2015; Mayo et al., 2017). The objective of advanced nursing education is to train nurses with comprehensive professional knowledge, sophisticated clinical skills, critical thinking abilities, and a professional attitude necessary for high-level practice. The scope of APN practice transcends conventional nursing roles by encompassing clinical proficiency, expanded responsibilities, and greater accountability within a defined specialty (Hudspeth & Klein, 2019). This practice is grounded in a robust foundation of nursing theory and applied medical knowledge (ICN, 2020; Htay & Whitehead, 2021). Globally, APNs are integrated within approximately 70% of healthcare systems, reflecting the widespread recognition of their importance (Parker & Hill, 2017).

APNs apply evidence-based approaches in their clinical practice, engage in the design and execution of research projects, and contribute scientific solutions to contemporary healthcare challenges (Clark et al., 2021; Drury et al., 2023). Empirical evidence suggests that nursing specialization is associated with improvements in care quality, reductions in clinical errors, enhanced patient and nurse satisfaction, and decreased staff turnover, attributed to the advanced expertise of specialist nurses (Daly et al., 2019; Parker & Hill, 2017). Furthermore, APNs’ involvement in healthcare policy development and advocacy enhances professional recognition and contributes to systemic improvements (Daly et al., 2019). Studies have also demonstrated a positive correlation between specialized nursing care and patient satisfaction as well as overall care quality (Chan et al., 2020; Loke et al., 2015; Neal-Boylan, 2020).

Advanced Practice Nurses (APNs), as frontline healthcare professionals, deliver high-quality care, help patients adapt to illness, and improve quality of life. Due to their ongoing contact with patients, they play a vital role in shaping the care experience. Their clinical expertise and communication skills directly affect patient satisfaction, treatment outcomes, and the course of recovery (Karaca & Durna, 2019; Mojaradi & Rad, 2022; Vermeir et al., 2017; Yangyang et al., 2021).

In clinical environments, physicians are the primary collaborators of specialist nurses. Effective interprofessional collaboration between physicians and nurses is essential for optimizing healthcare delivery and enhancing patient outcomes (Matusov et al., 2022; Vermeir et al., 2017). While physicians generally support cooperation with nursing colleagues, barriers persist, including limited understanding of nursing roles, reluctance to engage in collaborative practice, and lack of mutual respect (Vermeir, 2017). Addressing these barriers necessitates fostering positive clinical work environments, improving nurse job satisfaction, and mitigating ethical conflicts (Kim et al., 2022; Matusov et al., 2022).

The landmark 2015 report by the Institute of Medicine (IOM), *The Future of Nursing: Leading Change, Advancing Health*, identified key impediments to the full utilization of specialist nurses in clinical practice. These barriers include insufficient legal frameworks, limited public and professional awareness of advanced nursing roles, negative workplace dynamics, and inadequate institutional support (IOM, 2015). In light of these findings, it is imperative to evaluate contemporary perceptions of advanced practice nursing from the perspectives of both patients receiving care and physicians collaborating with APNs. Such evaluation is critical for assessing the current status and impact of nursing specialization. This study aims to explore the subjective perceptions of the role and effectiveness of APNs in clinical settings, thereby contributing to the global discourse on the advancement and promotion of nursing specialization.

Problem Statement:

Although Advanced Practice Nurses (APNs) play an increasingly vital role in healthcare, limited research exists on physicians' and patients' perceptions and expectations of APN services in clinical settings. This gap presents a significant barrier to optimizing the integration and effectiveness of Advanced Practice Nurses (APNs). Gaining a comprehensive understanding of stakeholder perspectives is essential to inform policy development, advance clinical practice, and ultimately improve patient outcomes.

METHOD

A maximum variation sampling strategy was employed to ensure diverse perspectives among participants. The study included 23 patients who had received nursing care and treatment from Advanced Practice Nurses (APNs) during their clinical stay at institutions where research permission was granted, and who voluntarily agreed to participate. Additionally, 23 physicians working alongside APNs in the clinical setting were recruited. Diversity among patients was ensured by selecting individuals varying in age, gender, educational level, length of hospitalization, and clinical unit of treatment. This sampling method aimed to capture a broad range of experiences related to specialized nursing practice.

Research data were collected by the same researcher between July and December 2020 in Istanbul. The data was collected during face-to-face individual in-depth interviews in line with the questions in the Semi-Structured Interview Form prepared separately for patients and physicians. Before the research, the participants and the researcher did not know each other. Interviews with physicians were conducted in a quiet room with the researcher and the participant alone. Interviews with physicians take approximately 30 minutes. The physician interview recording time was 8 hours in total. The interviews with patients were carried out by the same researcher in the patient rooms, while most of the patients were accompanied by their companions. The patient interviews lasted an average of 25 minutes. The total interview recording time was 7 hours and 35 minutes. The interviews were recorded with the permission of physicians and patients to prevent data loss, and a voice recorder was used. Physicians and patients were not interrupted while expressing their opinions. At the end of the interview, the participants were asked what they wanted to add by summarizing the answers to the questions, and the interview was completed. Interviews were terminated when data saturation was reached.

The tools used for data collection were the Physician Information Form, Patient Information Form, and Semi-Structured Interview Forms. Physician Information Form: There were 8 questions to determine the descriptive characteristics of physicians (institution, age, gender, education level, total working time, service, duty, working time with the APN). In the semi-structured interview form (for Physicians), there were 6 open-ended questions to determine the opinions of physicians working with APNs about the contributions of APNs to the clinical field and their expectations from them. Patient Information Form; there were 7 questions to determine the descriptive characteristics of the patients (health care institution, age, gender, education level, unit/service where they were treated, length of stay, and companion status). In the semi-structured interview form (for Patients), there were 6 open-ended questions to determine the views of the patients receiving service from APN roles about their knowledge, experience, and perceptions about APNs and their expectations from them.

All recorded opinions of physicians and patients participating in the study were included in the study, and no data were excluded. A specialist decoded the audio files, recording the opinions, and converted them into written text. The transcripts of the interviews were coded by the researcher, and thematic analyses were performed with the content analysis method. In this process, support was received from the MAXQDA Pro 2022 program. The systematic coding order of the content analysis was created according to the Miles Huberman model (Creswell, 2016). A total of 193 codes were obtained. All codes were brought together under sub-theme titles, and sub-themes were gathered under main theme titles; thus, simplifying the findings. A deductive path was followed, and the findings were obtained while adhering to the original theme framework of the data. Data were visualized under 4 main themes and 5 sub-themes related to the purpose of the research (Table 3). All analyses and coding were evaluated by the consultant, the second researcher, and three expert

academics three times at different points and were given their final form. In the findings section, one-to-one quotations from the opinions of the participants are presented. Participant names were not used when giving citations, and participants were numbered (Patient1, Patient2, Physician1, Physician2, etc.).

RESULT

Descriptive Characteristics of Participants

In line with the aim of the study, the findings obtained from individual in-depth interviews with 23 physicians and 23 patients are presented as themes.

Table 1. Descriptive Characteristics of Physicians

Code	Age	Gender	Graduate	Clinic	Task	Working time as a Physician	Working time with the Advanced Nurse
Physician1	26	Male	Medicine	Palliative Care	Assistant	2	1
Physician2	46	Male	Medicine	Thoracic Surgery	Medical Specialist	20	3
Physician3	43	Male	Medicine	CVC Surgery	Education Specialist	20	5
Physician4	40	Female	Medicine	NICU	Manager Physician	15	6
Physician5	39	Male	Medicine	Orthopedic	Clinic Manager Physician	15	3
Physician6	41	Female	Medicine	Oncology	Medical Specialist	6	5
Physician7	26	Female	Medicine	Nephrology	Assistant	2	2
Physician8	28	Female	Medicine	Internal Medicine	Assistant	4	2
Physician9	27	Female	Medicine	NICU	Assistant	3	3
Physician10	36	Female	Medicine	NICU	Manager Physician	12	4
Physician11	30	Female	Medicine	NICU	Assistant	4	2
Physician12	31	Male	Medicine	Pediatric Surgery	Assistant	4	4
Physician13	28	Male	Medicine	Palliative Care	Assistant	2	1
Physician14	46	Male	Medicine	Thoracic Surgery	Medical Specialist	10	4
Physician15	45	Male	Medicine	CVC Surgery	Education Specialist	21	4
Physician16	40	Female	Medicine	NICU	Manager Physician	15	6
Physician17	41	Male	Medicine	Orthopedic	Clinic Manager Physician	13	4
Physician18	41	Female	Medicine	Oncology	Medical Specialist	6	6
Physician19	26	Female	Medicine	Nephrology	Assistant	2	2
Physician20	27	Female	Medicine	NICU	Assistant	3	3
Physician21	36	Female	Medicine	NICU	Manager Physician	12	4
Physician22	29	Female	Medicine	NICU	Assistant	4	3
Physician23	31	Male	Medicine	Pediatric Surgery	Assistant	4	3

The mean age of physicians was 34.91±1.9 years (min: 26, max: 46), 39% were female, and 61% were male. Physicians were highly specialized in the field in which they worked. The average working time as a physician was 8.65 ±1.8 years (min: 2, max: 21). The average working time with APNs was 3.47±0.4 years (min: 1, max: 6) (Table 1).

Table 2. Descriptive Characteristics of Patients

Code	Age	Gender	Graduate	Clinic	Hospitalization period/day
Patient1	27	Female	Middle School	Palliative Care	8
Patient2	37	Female	Middle School	Hematology	30
Patient3	66	Female	Middle School	Pediatric Surgery	8
Patient4	48	Male	Middle School	Hematology	12
Patient5	32	Female	Bachelor's Degree	Pediatric Surgery	4
Patient6	47	Male	High School	Internal Medicine	11
Patient7	63	Male	Middle School	CVC Surgery	3
Patient8	42	Female	Middle School	Oncology	30
Patient9	56	Male	Middle School	Oncology	30
Patient10	33	Male	High School	Nephrology	20
Patient11	60	Male	Bachelor's Degree	Organ Transplantation	8
Patient12	39	Male	Bachelor's Degree	Orthopedic	3
Patient13	34	Male	High School	CVC Surgery	5
Patient14	26	Female	Middle School	Palliative Care	7
Patient15	38	Female	Middle School	Hematology	31
Patient16	65	Female	Middle School	Pediatric Surgery	8
Patient17	49	Male	Middle School	Hematology	10
Patient18	32	Female	Bachelor's Degree	Pediatric Surgery	6
Patient19	47	Male	High School	Internal Medicine	10
Patient20	62	Male	Middle School	CVC Surgery	4
Patient21	43	Female	Middle School	Oncology	30
Patient22	55	Male	Middle School	Oncology	25
Patient23	34	Male	High School	Nephrology	25

The mean age of the patients was 44.9±3.5 years (min: 27, max: 66), 43% were female, and 34% were high school graduates and above. The mean hospital stay of the patients was 14.3±2.9 days (min: 3, max: 30) (Table 2).

Evaluating the Role of Advanced Practice Nurses

The data obtained from the views of physicians and patients about their evaluations of APNs are listed under 4 main themes and 5 sub-themes: using specialist knowledge, effective communication skills, and effective problem-solving skills (Table 3).

Table 3. Evaluating the Role of Advanced Practice Nurses–Themes and Codes

No	Themes	Codes
1	Using specialized knowledge and skills	<p>Use in nursing care and services</p> <p><i>“Experienced, knowledgeable and I expect the best in terms of service.”</i> Patient6</p> <p><i>“Trained nurses are better. For example, it is always better to be close to the patient, to take care of them, to use the tools, to know the drugs, to have information about the diseases and the treatment process.”</i> Patient4</p> <p><i>“I think the more experienced and educated they are, the better it will be in taking care of us and serving us. For example, I don't want inexperienced, uninformed nurses to take care of me.”</i> Patient22</p> <p><i>“They have increased knowledge about better treatment and care practices, and they should reflect this in the field.”</i> Physician1</p> <p><i>“I mean, in general, I think they are ahead in terms of clinical knowledge about the patient, so we expect patients to recover more quickly.”</i> Physician3</p>

No	Themes	Codes
		<p><i>“Obviously, their experience in clinical practice, especially when we had neonatal intensive care patients, was beneficial for me, but I don't know if this experience was due to education or because they had worked in the intensive care unit before, but it makes a difference.” Physician9</i></p> <p>Sharing professional knowledge with teammates</p> <p><i>“When APRNs work with other nurses or interns, they immediately see and intervene in small problems. It helps them improve themselves by explaining what can be done to prevent medical errors.” Patient6</i></p> <p><i>“It is very useful for us that they reflect their knowledge on clinical practice, evaluate patients with a holistic approach and take part in the training of new staff. Residents are often alone with nurses in the field. Their contribution to our learning is very valuable.” Physician7</i></p>
2	Effective communication skills	<p>Communication with patients and relatives</p> <p><i>“I think it is essential for an APRN to inform the patient; the answer I got to the question I asked was explanatory and satisfactory. It would be very good if they tell me what I hesitate before I ask, I feel more comfortable when I see them in the ward.” Patient2</i></p> <p><i>“Of course, it may vary according to the specialty, but the way they approached us and explained the practices was always within a reasonable framework. We were happy that they were helpful and knowledgeable about the difficult situation we were in.” Patient13</i></p> <p>Team communication</p> <p><i>“Their communication within the team has improved and they have a more professional and ethical approach towards patients and their relatives. I can say that multidisciplinary work has become easier. Improved communication within the team is very crucial.” Physician2</i></p> <p>Empathic approaches</p> <p><i>“I expect nurses to empathize with us. When they become specialists, they can put themselves in the patient's shoes and approach them in that way. Because I think the undergraduate education is not enough to empathize.” Patient12</i></p>
3	Effective problem-solving skills	<p><i>“They give the best in terms of experience, knowledge and good service. And when we have a problem, they solve it immediately.” Patient6</i></p> <p><i>“When there is any problem, they help to solve it. When there is a problem, there are people in the ward or clinic who say they don't know the job, and there are people who solve the problem. APRNs are the people who solve this problem. When there is a problem with the patient or medicines, even if the problem cannot be solved when you tell them, they will take a step towards a solution.” Physician18</i></p>
4	Being a barrier to prevent medical error	<p><i>“They have experience, firstly. Since they have a lot of knowledge, they also have a lot of self-confidence. They know better how care should be directed. Such as advising the patient about side effect management, when appropriate. As a result, fewer mistakes are made in the clinic thanks to their attention.” Physician5</i></p> <p><i>“Of course, we sometimes overlook patients, who are not provided with treatment and medication, they warn us about this, or there are points that patients warn us about in their care, and they catch the missing points in the treatment and warn us. Their approach to patient care is more detailed and they help us a lot.” Physician7</i></p> <p><i>“..... They can detect and note most risks or developments before us. We trust them, they notice the differences in the patients better than others. I mean in terms of patient follow-up and care, but is it the effect of the master's degree or clinical experience? After all, these nurses have been working here for longer than other nurses.” Physician8</i></p> <p><i>“Of course, there is a difference in the service quality of the specialist nurse and of course it definitely gave me more confidence.” Patient15</i></p>

No	Themes	Codes
		<p><i>"Better. I don't know, I feel more comfortable and safer as if no mistakes will be made. But when I hear that you are not an expert, I try to be a little more careful."</i> Patient2</p> <p><i>"You feel better and safer. Because they prevent mistakes, they have expert knowledge. It was an event that I personally experienced here. We were chatting with the nurse lady, and she said that the dietitian gave you quince and all yellow fruits contain potassium. Since my kidneys do not work well, when potassium is taken in excess, it causes heart problems. So, the nurse stopped that."</i> Patient17</p>

1st Main Theme: Using Specialized Knowledge and Skills

The main theme of using specialized knowledge and skills is presented in two sub-themes: use in nursing care and services and sharing professional knowledge with teammates (Table 3).

1. Use in nursing care and services

The interviewees stated that APNs use the knowledge and skills acquired through postgraduate education professionally during nursing care and practice.

2. Sharing professional knowledge with teammates

Patients stated that APNs contributed to their development by sharing their knowledge, skills, and experience with their teammates. Nurses provide care in 12-hour shifts in hospitals, and patients receive care from more than one nurse during their hospital stay. Patients felt that sharing this information improved the overall quality of nursing care they received. Physicians stated that they always benefit from the deep knowledge of APNs and that it is important for them to share their knowledge within the team.

2nd Main Theme: Effective Communication Skills

The main theme of effective communication skills had three sub-themes of communication with patients and relatives, team communication, and an empathic approach.

1. Communication with patients and relatives

Patients stated that they expected APNs to use their communication skills effectively when communicating with patients and their relatives.

2. Team communication

Physicians stated that they expected APNs to use their communication skills effectively in communication with patients and their relatives and to show a more professional approach within the healthcare team.

3. Empathic approaches

Patients stated that they expected APNs to empathize with them while giving nursing care or during treatment.

3rd Main Theme: Effective Problem-Solving Skills

Physicians and patients stated that they expected APNs to find easy and fast solutions to the problems experienced by the patients.

4th Main Theme: Being a Barrier to Prevent Medical Error

Patients thought that receiving service from the APNs made them feel safe, that they received qualified nursing care, and they even thought that the APNs acted as validation and a preventive control mechanism for treatment given by the physician. Physicians stated that APNs used their knowledge and skills in their specialization in the clinical field and contributed to the prevention of malpractice and medication errors that may occur. However, some physicians stated that they could not distinguish whether the difference was because of the postgraduate education of nurses or the knowledge, skills, and experience they gained working in the same field for many years.

The most frequently used words in evaluations of APNs



Figure 1. The Most Frequently Used Words in Evaluations of APNs - Word Cloud

The patients frequently used the words better, good, service, nice, kind, helpful, and high (in that order) when expressing their experience of receiving service and nursing care from APNs (Figure 1).

DISCUSSION

Today, the expectation of patients to receive qualified health services, regardless of attending a private or public health institution, is increasing. One of the most important ways to ensure patient satisfaction by meeting these increasing expectations is to provide qualified nursing service and care, one of the most important ways to ensure patient satisfaction by meeting these increasing expectations is to provide qualified nursing service and care by specialized nurses (Duingnan, 2024; Gray, 2016; McMullan et al., 2023; Parker & Hill, 2017; Russell et al., 2015; Schober, 2019). Patient expectations included effective communication from nurses and physicians, not being seen only as a disease or room number, but to be seen as a human. Patients expect a holistic approach, that their needs will be understood, that staff make efforts for their recovery, are accessible, willing to explain, care about them, and communicate effectively (Goh et al., 2016; Yuan et al., 2022). In addition, when the most important expectations of patients from nurses were examined in the recent literature, it was emphasized that nurses should have advanced care practice experience and knowledge in order to provide qualified care and to inform patient relatives about the patient's current condition and care (Machado et al., 2022; Panchapakesan et al., 2015; Yuan et al., 2022). For all these reasons, the employment of APNs in the clinical field is important for all health institutions in terms of improving nursing care and increasing quality.

The average length of time that participating physicians worked with APNs was 3.47 ± 0.4 years (Table 1). The mean hospital stay of the patients was 14.3 ± 2.9 days (Table 2). Both of these periods were assumed to be an adequate period of time for patients to evaluate the knowledge and experience of specialized nursing and the role of APNs in the clinical field. Patients in the study found APNs were more knowledgeable, skilled, and experienced than other nurses, and they thought that they used their knowledge, skills, and experience in their field of specialization while giving nursing care. This result shows that APNs reflect their knowledge and skills specific to their field of specialization in nursing care and service delivery, and thus, patients perceive the difference between specialist nurses and other nurses. Another finding was the words used by the patients when expressing their experiences of receiving service and nursing care from APNs. When the word cloud was analyzed, the order was better, good, service, nice, helpful, and high (Figure 1). The fact that the first three words were "good, better, service" supports the finding that APNs make a difference in service delivery in the clinical field.

Russell (2015) and later Saygılı & Celik (2020) stated in their research in the palliative care unit that since palliative care is an area that requires expertise, nurses working in the unit should be able to evaluate the patient holistically, be highly educated and competent in pain and disease symptom management and communicate effectively (Russell et al., 2015; Saygılı & Çelik, 2020). They found that the care received from nurses specialized in palliative care reduced the symptom levels of the patients and increased patient satisfaction. In their study, Kersu et al. (2020) stated that as the educational level of nurses increases, service quality and patient satisfaction increase. In the study, the interviewees stated that specialist nurses used the knowledge and skills they acquired through postgraduate education in nursing care and practices and shared this knowledge and these skills with their teammates, thereby improving the quality of care (Table 3). The results of the research, which are similar to the literature, show that the quality of nursing care in the clinical field increases when specialist nurses use the knowledge and skills, they have acquired in nursing care and practice and include evidence-based scientific care practices in their roles, especially in clinical units requiring expertise. It is desirable but not possible for all nurses to be well-educated and to have expertise in the fields in which they work. Kısacık (2020) stated that more than half of nurses found the theoretical and practical training given to students during their university education insufficient, and the inadequacy of the education increased the need for specialization in nursing (Kısacık & Sonmez, 2020; Schober, 2019). Tanaka et al. (2017) found that nurses with a master's degree exhibited higher professionalism and autonomy.

In nursing, where care is combined with art and science, it is necessary to understand the importance of empathy in order to accurately determine the needs of patients. Providing qualified care to the patient can be achieved with effective communication and empathy skills (Dávila et al., 2023; McMullan, 2023). The individual who feels understood by the nurse will think that they are cared for and valued (Sharifnia et al., 2023). Thus, nurses should develop empathic sensitivity and improve their communication skills through advanced training (Schober, 2019; Kim & Sim, 2020). Specialist nurses used their communication skills effectively when communicating with patients and their relatives, and it was important for specialist nurses to empathize with them while providing nursing care or during treatment. Physicians also emphasized that specialized nurses used their communication skills effectively when communicating with patients and their relatives and displayed a more professional approach within the healthcare team (Table 3). Based on this result, it can be said that nurses with effective communication skills increase their professional motivation, improve the quality of nursing care, realize effective team communication, and thus increase patient satisfaction.

Nurses need to be well-educated in order to develop problem-solving skills and learning agility (Aygul, 2022; Hickman et al., 2018). In the study, physicians and patients stated that specialist nurses should find easy and fast solutions to problems experienced by patients (Table 3). This result can be interpreted as those physicians and patients observed the knowledge, skills, and experience of APNs in the field of specialization as well as their fast and effective problem-solving approaches. APNs play a critical role in medication safety by preventing errors before they happen. APNs prepare and administer medications to patients using basic medication safety checklists (Monahan et al., 2018). Physicians stated that APNs used their knowledge and skills in their specialization in the clinical field and contributed to the prevention of malpractice and medication errors that may occur. However, some physicians stated that they could not distinguish whether the difference was due to the effect of postgraduate education of nurses or the knowledge, skills, and experience they gained working in the same field for many years. Patients thought that receiving service from the specialist nurses made them feel safe, that they received qualified nursing care, and they even thought that the APNS acted as validation and a preventive control mechanism for treatment given by the physician. With this result, it can be argued that APNs who are experts in their field and have advanced training have a high awareness of the prevention of medication errors.

CONCLUSION

This study sets out to explore the expectations of physicians and patients from Advanced Practice Nurses (APNs) based on their service experiences, under the hypothesis that these

expectations significantly shape their perceptions of care quality. The findings support this hypothesis by revealing four key thematic expectations: the use of specialized knowledge and skills, effective communication, effective problem-solving, and acting as a barrier to medical errors.

Participants consistently emphasized that APNs positively influenced their satisfaction with care and sense of safety, aligning with the assumption that experience-driven expectations play a pivotal role in evaluating nursing quality. Physicians also highlighted increased trust in clinical collaboration with APNs, confirming the value of advanced nursing competencies in practice.

These results affirm that specialized nursing services not only meet but also exceed the expectations of both patient and physician stakeholders. Consequently, it is essential to expand the number of APNs in clinical practice, invest in postgraduate nursing education, and strengthen institutional and policy-level support to ensure sustainable, high-quality, patient-centered care. Furthermore, the findings align with clinical guidelines promoting interdisciplinary care and highlight the potential of APNs in advancing public health goals, such as preventive care and chronic disease management. By expanding APN roles, health systems can improve access and promote health equity, particularly for underserved populations. These results support integrating APNs into strategies aimed at delivering more equitable and effective care.

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CONFLICT OF INTEREST

The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper.

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