

7-1-1998

International Classification for Nursing Practice (ICNP): Most-frequently Asked Questions

Judith J. Warren
University of Nebraska at Omaha

Amy Coenen
Marquette University

International Classification for Nursing Practice (ICNP): Most-frequently Asked Questions

Judith J. Warren
*University of Nebraska
Omaha, NE*

Amy Coenen
*Nursing, Marquette University
Milwaukee, WI*

Abstract

The International Classification for Nursing Practice (ICNP) is a collaborative project under the auspices of the International Council of Nurses. The alpha version is available online for comment in preparation for the release of the beta version in 1999. The authors answer the most-frequently asked questions about the ICNP and encourage nurses in the United States to participate in the revision by sending comments and suggestions to the American Nurses Association.

What is the International Classification for Nursing Practice (ICNP)?

The ICNP is a nursing classification being developed by the International Council of Nurses (ICN) in Geneva, Switzerland. The American Nurses Association (ANA), through its Steering Committee

on Databases Supporting Clinical Nursing Practice, has supported this international work by facilitating collaboration between the ICNP team and the developers of the ANA-recognized nursing classifications: the North American Nursing Diagnosis Association (NANDA)¹ Taxonomy 1, Nursing Interventions Classification (NIC),² Omaha System,³ Home Health Care Classification,⁴ and Nursing Outcomes Classifications (NOC).⁵ At the request of the ICN and the ICNP team, the ANA Steering Committee on Databases Supporting Clinical Nursing Practice is encouraging nurses in the United States to participate in the evaluation of this new classification effort.

The ICNP provides a structured and defined vocabulary as well as a classification for nursing and a framework into which existing vocabularies and classifications can be cross-mapped to enable comparison of nursing data.

The three primary elements of the ICNP are: 1) nursing phenomena—i.e., the focus of nursing, sometimes referred to as nursing diagnoses; 2) nursing interventions—i.e., the actions or activities nurses perform; and 3) nursing outcomes—i.e., the results of nurses' actions in terms of change in the focus at a specific time.

Why is the ICNP important?

The objectives of the ICNP, as set out in the initial ICN publication,⁶ are: 1) to establish a common language for describing nursing practice in order to improve communication among nurses and between nurses and others; 2) to describe the nursing care of people (individuals, families, and communities) in a variety of settings, both institutional and non-institutional; 3) to enable comparison of nursing data across clinical populations, settings, geographic areas, and time; 4) to demonstrate or project trends in the provision of nursing treatments and care and the allocation of resources to patients according to their needs based on nursing diagnoses; 5) to stimulate nursing research through links to data available in nursing information systems and health information systems; and 6) to provide data about nursing practice in order to influence health policymaking.

The original proposal also set out the criteria that the

ICNP must meet. The classification must be: 1) broad enough to serve the multiple purposes required by different countries; 2) simple enough to be seen by the ordinary practitioner of nursing as a meaningful description of practice and a useful means of structuring practice; 3) consistent with clearly defined conceptual frameworks but not dependent on a particular theoretic framework or model of nursing; 4) based on a central core to which additions can be made through a continuing process of development and refinement; 5) sensitive to cultural variability; 6) reflective of the common value system of nursing across the world as expressed in the ICN Code for Nurses; and 7) usable in a complementary or integrated way with the family of classifications developed within the World Health Organization, the core of which is the International Classification of Diseases.

If I have been using a classification system, such as the NANDA Taxonomy, do I have to change?

No. The ICNP provides a unifying framework into which existing nursing vocabularies can be cross-mapped to enable comparison of nursing data collected using other recognized nursing vocabularies and classifications.

Does the ICNP restrict multidisciplinary practice?

No. Like the ICD, the development of the ICNP is a long-term project that will provide a structured vocabulary and a classification that can be used to describe and organize data about nursing. The ICNP can be integrated with other health care classification systems to create multidisciplinary health vocabularies or lexicons within information systems.

What other information on the ICNP is available?

The ICN published an alpha version of the ICNP in 1996.⁷ This is available from the ICN (fax: 141-22-908-01-01; e-mail: ICN@uni2a.unige.ch). In addition, there have been a number of

articles about the ICNP published in the ICN's journal, *International Nursing Review*.⁸

The ICNP can be accessed on the Internet. To access the sites you need at least Windows 95 and Microsoft Internet Explorer 3.0. There are two sites:

- You will find the published alpha version at:
<http://www.nethotel.dk/dihnr/Telenurse/ICNP>
- You will find the experimental version, where changes are made in response to feedback, and further development on the road to the beta version at:
<http://www.nethotel.dk/dihnr/Telenurse/ICNP/Beta>

How can I participate?

The alpha version is evaluated in different ways and at several levels. An evaluation form and forms for submitting new terms are included in the appendix of the alpha version, and any other feedback is welcome by the ICN. Individuals may complete these forms and send them to the ICNP team. However, since the ICNP is a product of the ICN, the formal communication network is through ICN member organizations. The ANA is the member organization in the United States. While technical information and a system for monitoring development will be provided by the ICN headquarters in Geneva, Switzerland, individual researchers and organizations are encouraged to collaborate closely with the ICN through their national nurses associations. The ANA has asked the Steering Committee on Databases Supporting Clinical Nursing Practice to coordinate this activity. Please contact either of us if you have questions.

What's next?

At present, much effort is continuing with the translation, dissemination, and evaluation of the alpha version of the ICNP. This work will foster the development of a beta version, scheduled for release and further testing by the ICN in 1999. A process for the continuous revision of the ICNP is under development.

References

1. North American Nursing Diagnosis Association. NANDA nursing diagnoses: definitions and classification, 1992–1993. Philadelphia, Pa: NANDA, 1992.
2. McCloskey JC, Bulechek GM. Nursing Interventions Classification. 2nd ed. St. Louis, Mo: CV Mosby Co, 1996.
3. Martin KS, Scheet NJ. The Omaha System: Applications for Community Health Nursing. Philadelphia, Pa: WB Saunders Co, 1992.
4. Saba VK. Home Health Care Classification. *Caring Mag.* 1992;11(4):58–60.
5. Johnson M, Maas M (eds). Nursing Outcomes Classification (NOC). St. Louis, Mo: CV Mosby Co, 1997.
6. Clark J, Lang NM. Nursing's next advance: an international classification for nursing practice. *Int Nurs Rev.* 1992;39:109–112, 119.
7. International Council of Nurses. The International Classification for Nursing Practice: a unifying framework. Geneva, Switzerland: International Council of Nurses, 1996.
8. Nielson GH, Mortensen RA. The architecture for an International Classification of Nursing Practice (ICNP). *Int Nurs Rev.* 1996;

About the Authors

Affiliations of the authors: University of Nebraska, Omaha, Nebraska (JJW); Marquette University, Milwaukee, Wisconsin (AC).

Correspondence and reprints: Judith J. Warren, PhD, RN, C, FAAN, Chairperson, ANA Steering Committee on Databases Supporting Clinical Nursing Practice, Associate

Professor and Clinical Nurse Researcher, University of Nebraska Medical Center, Omaha, NE 68198-5330. e-mail: <warren@unmc.edu>.