Board Action; Series I; File 21

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NEW YORK STATE NURSES ASSOCIATION
2113 Western Avenue, Guilderland, N.Y. 12084, (518) 456-5371

April 4, 1988

TO: Presidents and Executive Directors, Constituent District
Nurses Associations (Board of Directors - For Your Information)

FROM: Martha L. Orr, Executive Director

RE: MARCH 1988 BOARD ACTION

Significant action taken by the NYSNA Board of Directors at its
March 17-18, 1988 meeting included approval of: (Note that
official NYSNA position statements approved at this meeting are
attached to this memorandum):

--- sponsorship of malpractice insurance offering to NYSNA
members

--- Board policy governing consideration of formation of clinical
practice and functional units

--- funding for New York State Fair exhibit (constituent district
nurses associations in the area will be requested to assist
in maintaining the exhibit)

--- co-sponsorship with HANYS of fall 1988 conferences on case
management

--- development of strategies for action that would have the
impact of augmenting salaries of nurses in NYS

--- Joint NYSNA Pennsylvania Nurses Association activities at
1988 ANA Convention aimed toward increasing understanding of
the associations' position on ANA membership qualifications,
including: conduct of special forum; presentation of exhibit; dissemination of joint position paper

--- proposal to 1988 ANA House of Delegates of adoption of
position to ensure protection of ANA credentialing activity

--- nomination to ANA Cabinet on Nursing Research

--- conduct of invitational reception at 1988 ANA Convention

--- appointments to 1988 Awards Committee and special Committee
On Impaired Nursing Practice

--- Council on Nursing Education's recommended: Statement on
Gerontological Nursing in the Curriculum; Entry into
Professional Nursing Practice Position Statement for
Dissemination to Presidents of Universities and Colleges
(copies attached)

--- School Health Nursing Clinical Practice Unit's recommended
Position Statement on School Health Nursing (copy attached)

--- Council on Nursing Practice's recommended revision of NYSNA
Guidelines for Interpretation of the Scope of Professional
Nursing Practice (copy attached)

--- Committee on Impaired Nursing Practice's recommendation that
the ANA Committee on Bylaws be requested to reconsider amend-
ment of ANA bylaws to provide protection of the membership
rights of nurses who have voluntarily surrendered licenses
because of impairment and who have enrolled in mandated
professional assistance programs

--- activities aimed toward accomplishing: familiarization of
NYSNA unit members with work of National Commission on
Nursing Implementation Project (NCNIP); and effective use by
units of NCNIP work

Districts/Board
April 4, 1988
Page Two

WMB
Attachments
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THE NEW YORK STATE NURSES ASSOCIATION
COUNCIL ON NURSING EDUCATION
STATEMENT RE GERONTOLOGICAL NURSING IN THE CURRICULUM

Professional Nursing educators must provide the necessary leadership for structuring undergraduate and graduate curriculums in nursing to include specific content on care of the older person.

According to the U.S. Department of Health and Human Services (1980) there were 25.6 million persons 65 years of age and over in 1981; five million were 80 years or older, and two million were 85 years or older. By the year 2020, one in five persons will have reached their sixth-fifth birthday. Demographics show that the number of older adults, particularly the frail elderly, is increasing at an alarming rate.

The nurse practices in a variety of settings that may include home, hospital or nursing home and plans care that emphasizes the person's health and well-being. Developmental theories address human responses over the entire life span. Content related to alterations in physical and mental health and socio-cultural issues all form a composite knowledge base upon which to provide care to the elderly.

Nursing practice focuses on assessing health status, planning and providing appropriate nursing and health care services, and evaluating the effectiveness of such care. Emphasis is placed on maximizing independence in the activities of everyday living; promoting, main-
taining, and restoring health: preventing and controlling acute and chronic illness; and maintaining life in dignity and comfort until death.

Nursing has significance in the promotion, maintenance, and restoration of health consistent with the limitations imposed by the aging process and/or chronic illness. In caring for the elderly, the nurse strives to identify and use the strengths of the older adult and his family and assists them to use those strengths to maximize independence. The older person brings a rich diversity of experience which influences alternatives and strategies for care. The nurse provides an opportunity for the older adult and his family to be actively involved to the fullest extent of their capabilities in the decision-making that is a part of everyday living.

In order to meet society's need for expert nursing care, nursing education must put more emphasis on care of the elderly. Therefore, the NYSNA Council on Nursing Education recommends that schools of nursing in New York State reexamine their curriculums and strengthen content to prepare to meet the needs of the growing number of older Americans.

03/09/88

APPROVED BY THE NYSNA BOARD OF DIRECTORS, MARCH 17-18, 1988
At this time, schools of nursing are experiencing declining enrollments. Statistics clearly indicate, moreover, that fewer potential students are considering nursing as a career. At the same time, The Department of Health and Human Services (1986) Report to the President and The Congress on the Status of Health Personnel in the United States cites that by the year 2000 there will be a need for 1,000,000 nurses with baccalaureate degrees but an estimated supply of only 510,000 nurses prepared at the baccalaureate level.

The need for broadly prepared professional nurses has grown steadily over the last several years due in large part to changes in society and in health care. Factors contributing to the increased need for these nurses include: increased requirements for specialized, acute and intensive nursing care; the proliferation of complex technology in hospitals; the intensification of level of acuity in hospitalized patients; the increased proportion of elderly patients. For the health care needs of New York State and the nation to be met, nurses must receive an education that adequately prepares them for the scope and depth of their patient care responsibilities. Nursing must also be seen as an attractive career of choice for highly qualified students. Currently, the
program that best prepares for beginning professional practice is the baccalaureate program.

We live and work in a nation which is rapidly becoming a service-based economy. Throughout history, our society has demonstrated enormous respect for education and has rewarded those who are best educated with prestige, economic compensation, and a high degree of autonomy in their work. The nursing profession must achieve commensurate recognition and professional autonomy if it is to attract and retain highly skilled practitioners.

The current shortage of nurses represents a crisis in health care delivery, especially nursing services. In addition, however, this shortage offers new challenges and opportunities for a career in nursing. With an increasing awareness on the part of the public and health care institutions, working conditions are improving, salaries are increasing and the image of nursing as a lifetime choice is improving.

Therefore, the New York State Nurses Association’s Council on Nursing Education solicits your and your colleagues’ strong support for the proposed New York State Nurses Association legislation which would require a baccalaureate degree for entry into professional nursing practice.

01/11/99
APPROVED BY THE NYSNA BOARD OF DIRECTORS, MARCH 17-18, 1999
OVERVIEW

Physical and psychosocial challenges to the health of students in New York State and the nation are increasing dramatically. Chronic illnesses, disabilities, infectious diseases, pregnancy, depression and suicide, child abuse, substance abuse, complex diseases and behavioral disorders are among the many problems confronting professional nurses in the educational setting. Changing risks in childhood are being brought about by recent trends in American society and family life. Professional nurses, within the educational setting, must have the expertise required to meet these complex health care needs. The school nurse must be able to assess and manage health problems, offer skilled health counseling and make appropriate referrals. The professional nurse is often the primary care provider to health services for children with limited access.

RATIONALE

The main purpose of nursing in the educational setting is the promotion and maintenance of an optimal level of wellness. The professional nurse participates in a multi-disciplinary approach to student health in assessing, planning, implementing, and evaluating programs and other school health activities. Coordination of the health care plan by nursing reduces duplication and fragmentation of services, enhances student care and, therefore, contributes to cost effectiveness.

The educational process is enhanced when the health care plan provides for the modification and removal of health related barriers to learning. When assessing health care needs, the professional nurse incorporates the physical, emotional, social, environmental and spiritual aspects of individual students.

The practice of nursing in the school setting requires a broad theoretical background with concepts of community and public health nursing as well as knowledge of teaching/learning theory.

The School Health Nursing Clinical Practice Unit believes that the baccalaureate prepared professional nurse is best qualified to provide the full range of care required by the school population and the community at large. This is in keeping with the baccalaureate degree as a minimum educational standard for other school professionals.

The complex health care needs of today's student demands expert nurse clinicians in leadership positions. The Clinical Nurse Specialist, prepared at the masters level, has the knowledge and skill to function as consultant to the school nurse generalist and other personnel in the educational setting. This nurse specialist has the ability to assess the health needs of both the school and the community at large.
and implement appropriate interventions and evaluations. Through education and experience, the Clinical Nurse Specialist is also able to initiate and evaluate clinical research to provide objective data for the direction of nursing services within a given school district.

RECOMMENDATIONS

The School Health Nursing Clinical Practice Unit recommends that:

1. The New York State Education Law be amended to require school districts to employ registered professional nurses.

2. The New York State Education Law be amended to require that school health services be provided by registered professional nurses.

3. Qualifications for the professional school nurse include licensure as a registered nurse and a baccalaureate degree in nursing from an accredited college or university. A process should be enacted for the professional school nurse whereby certification is consistent with the State Education Department's provisional and permanent certification policies for all teachers.

4. Registered nurses currently employed in the school setting be grandfathered into the professional school nurse role with a requirement to complete a baccalaureate degree within a time frame established by the New York State Education Department not to exceed eight (8) years.

5. Educational programs in New York State provide access for completion of a baccalaureate degree in nursing consistent with New York State requirements in professional education for eligibility as a professional school nurse.

6. School Districts provide a sufficient number of professional school nurses to ensure that nurse to student ratios are sufficient to meet the health care needs of the students. The American Nurses' Association recommends 1:750 in general school populations; 1:225 in mainstreamed populations; and 1:125 in severely/profoundly handicapped populations.

7. The qualifications for school nurse teachers be amended to include a career ladder which would include a Clinical Nurse Specialist role and that such positions be promoted through school districts to provide consultation, coordinate research, determine cost effectiveness of services, implement quality assurance, and identify the health care needs of student population/school district community.

APPROVED BY NYSHA'S BOARD OF DIRECTORS ON MARCH 16, 1989
BIBLIOGRAPHY


THE NEW YORK STATE NURSES ASSOCIATION
Council on Nursing Practice

GUIDELINES FOR INTERPRETATION OF
THE SCOPE OF PROFESSIONAL NURSING PRACTICE

Introduction

The ongoing advances in nursing theory and health care technology, the diffusion of general knowledge and the expanding parameters of professional nursing responsibility preclude precise and comprehensive delineation of the specific responsibilities of any professional nurse at any given time or in a specific setting. Hence, questions regarding the scope of practice of professional nurses arise on a continuing basis.

The New York State Nurses Association has repeatedly emphasized that the nursing profession has the responsibility and authority for determining the nature and scope of nursing practice. (1)

The introduction in ANA's Scope of Nursing Practice statement has an excellent review of this issue. It states that:

The 1985 House of Delegates of the American Nurses' Association directed ANA's Cabinets on Nursing Education, Practice, and Services to jointly delineate the future scope of practice for persons educated with a baccalaureate or higher degree in nursing and for those educated with an associate degree in nursing. The Task Force on Scope of Practice was formed to address the charge of the House of Delegates. The task force report was received by the ANA Board of Directors and forwarded as amended to the 1987 ANA House of Delegates which amended and adopted the report as the position of the American Nurses' Association.

In its deliberations, the task force clarified the differences between two concepts: the scope of practice and the nature of nursing. The task force concluded that the nature of nursing and its unique contribution to society had been described in Nursing: A Social Policy Statement.

The social policy statement describes the nature of nursing as complex and highly interactive, and asserts that society has historically understood nursing to be a noninvasive, nurturing discipline, focused more on creating the physiological, psychological, and sociocultural environment in which the patient can gain or maintain health or heal than on the diagnosis and treatment of disease. (2)

The Council on Nursing Practice believes that the scope of professional nursing practice is dynamic and evolves as the patterns of human response amenable to nursing intervention evolves: nursing diagnoses are formulated and classified; nursing skills and patterns of intervention are made more explicit; and patient outcomes responsive to nursing intervention are evaluated.
Guidelines

When determining whether a particular service or responsibility falls within the scope of professional nursing practice, the professional nurse should:

1. Understand the following concepts regarding the nature and scope of nursing practice:
   a. The nature of nursing practice is that intrinsic characteristic that distinguishes nursing from other health professions. It is the essence of nursing, it is a constant and remains unchanging.
   b. The scope of nursing practice emanates from the nature of nursing practice and encompasses the range of nursing's actions and activities. It is an external force which utilizes knowledge and competence to maintain, promote and restore an individual's integrity. It is flexible and therefore changes as health science, health practice and society itself changes. (3)

2. Review the New York State Nurse Practice Act, ANA Standards of Practice, and Code for Ethics.

3. Have acquired, either through basic, special or continuing education, the preparation essential to performance of those services for which they assume responsibility.

4. Review the professional literature relevant to the particular services.

5. Review the policies of the particular practice setting.

In conclusion, the Council on Nursing Practice believes that the depth and breadth to which the individual professional nurse engages in the total scope of professional nursing practice are defined by the knowledge base of the particular nurse, the role of that nurse and the nature of the client population within a specific practice environment.
References


APPROVED BY NYSNA BOARD OF DIRECTORS ON SEPTEMBER 17, 1976 AND MARCH 18, 1986

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9/17/76
Reviewed FTF/mbh
8/3/85
Revised KAB/kac
1/27/88