

State University of New York College at Buffalo - Buffalo State University

Digital Commons at Buffalo State

Juanita Hunter, RN & NYSNA Papers
[1973-1990]

Organizations and Individual Collections

1988

Guidelines-Nursing Education; Series I; File 81

Juanita Hunter

Follow this and additional works at: <https://digitalcommons.buffalostate.edu/jhunter-papers>



Part of the [Health Law and Policy Commons](#), [History Commons](#), and the [Nursing Commons](#)

Recommended Citation

"Guidelines-Nursing Education; Series I; File 81." Juanita Hunter, RN & NYSNA Papers [1973-1990]. Monroe Fordham Regional History Center, Archives & Special Collections Department, E. H. Butler Library, SUNY Buffalo State.

<https://digitalcommons.buffalostate.edu/jhunter-papers/130>

This Article is brought to you for free and open access by the Organizations and Individual Collections at Digital Commons at Buffalo State. It has been accepted for inclusion in Juanita Hunter, RN & NYSNA Papers [1973-1990] by an authorized administrator of Digital Commons at Buffalo State. For more information, please contact digitalcommons@buffalostate.edu.

#81 GUIDELINES - NURSING EDUCATION

DRAFT

THE NEW YORK STATE NURSES ASSOCIATION
COUNCIL ON NURSING EDUCATION GUIDELINES FOR
UNDERGRADUATE NURSING EDUCATION
IN NEW YORK STATE

TABLE OF CONTENTS

	<u>Page</u>
INTRODUCTION	1
ASSUMPTIONS	2
RATIONALE	2
CHARACTERISTICS: BACCALAUREATE AND ASSOCIATE DEGREE NURSING PROGRAMS IN NEW YORK STATE	3
BEHAVIORAL OUTCOMES OF NURSING EDUCATION PROGRAMS	
A. Outcomes Related to Nursing Practice	5
B. Outcomes Related to Organizing, Coordinating and Delegating Nursing Care Services	7
C. Outcomes Related to Accountability for Practice	7
D. Outcomes Related to Practice Settings	7
E. Outcomes Related to Nursing Career Responsibilities	8
MEETING FUTURE NEEDS OF RNS	9
MEETING FUTURE NEEDS OF LPNS	13
CONCLUSION	14
SELECTED RESOURCES	15
CONTRIBUTING NYSNA GROUPS	15

81 GUIDELINES - NURSING EDUCATION

INTRODUCTION

These guidelines and recommendations represent a major effort of the Council on Nursing Education to implement the Association's Action Plan to "develop a written document defining the components of associate degree and professional nursing curriculums as distinctly different based upon current curriculum thought and previous NYSNA entry level work."

In formulating this document, the Council conducted an intensive review of work completed external and internal to the Association.

The Entry Into Practice Proposal introduced in the Legislature annually since 1975 defines practice for the baccalaureate prepared nurse and the associate degree prepared nurse.

These guidelines distinguish the different characteristics that exist between the baccalaureate and associate degree educational programs. These differing characteristics are based upon the two definitions for practice as delineated in the Entry Into Practice Proposal.

ASSUMPTIONS

1. Curriculums for both baccalaureate and associate degree programs are based on the synthesis of nursing science and empirical knowledge derived from physical, social and behavioral sciences with the humanities.
2. The nursing curriculums of baccalaureate and associate degree programs are uniquely different.
3. The associate degree nursing curriculum is not equivalent to the first two years of the baccalaureate degree nursing curriculum.
4. Two scopes of practice exist: one for the baccalaureate degree graduates and one for associate degree graduates.
5. There is commonality and uniqueness in each scope of practice.
6. All baccalaureate and associate nursing education programs should be administered by colleges and universities.
7. Changing health needs of the population alter patterns of health care delivery and influence nursing education.

RATIONALE

Assumptions 1-5

Baccalaureate and associate degree programs share elements of a common core in the humanities, physical and social sciences. The uniqueness of each curriculum is expressed by differences in the nursing components which comprise a major portion of each curriculum. Four year colleges and universities have different purposes and resources from those of two year colleges.

Student bodies of four year colleges and universities have different educational needs and goals from student bodies of two year colleges. The two types of institutions and the individuals whom they serve have two different missions.

By definition the baccalaureate graduate is educationally prepared to function as a skilled diagnostician and therapist of human responses. The associate degree graduate is educationally prepared to function as a skilled therapist of human responses.

Assumption 6

The knowledge base which underwrites practice at the baccalaureate and associate degree levels must be based upon the sciences and humanities which are best offered in institutions of higher learning. The nurse as an educated person benefits from shared learning opportunities and experiences which can only be offered in an institution of higher education.

Assumption 7

To justify its existence, a service profession must respond to societal trends and needs.

#81 GUIDELINES - NURSING EDUCATION

CHARACTERISTICS: ASSOCIATE DEGREE AND BACCALAUREATE NURSING CURRICULUMS

IN NEW YORK STATE

<u>Characteristic</u>	<u>Baccalaureate</u>	<u>Associate Degree</u>
Site	Four year colleges and universities	Two year colleges
Degree	Bachelor's Degree with a major in Nursing	Associate Degree with a major In Nursing
Product	The baccalaureate degree graduate diagnoses and treats human responses to actual and potential health problems; establishes, implements and evaluates nursing regimens for individuals, families, groups and communities.	The associate degree graduate participates with the baccalaureate degree graduate in establishing the data base necessary for formulating nursing diagnoses and implements prescribed regimens in accordance with protocols and standards as developed by the baccalaureate graduate, and participates in evaluating effects of regimens for individuals.
Philosophy/ Purpose/ Objectives	The curriculum must be consistent with: the philosophy of parent institution; principles of baccalaureate education and "NYSNA Behavioral Outcomes of Nursing Education Programs". The purpose and objectives of the educational program should also be consistent with practice mandates as defined in the proposed legal definition of practice for baccalaureate graduates.	The curriculum must be consistent with: the philosophy of parent institution; principles of technical education and "NYSNA Behavioral Outcomes of Nursing Education Programs". The purpose and objectives of the educational program should also be consistent with practice mandates as defined in the proposed legal definition of practice for the associate degree graduate.
Liberal Arts/ General Education Courses	Basic natural and behavioral sciences and humanities courses are necessary to prepare a liberally educated person and form a foundation for baccalaureate nursing education.	Basic natural and behavioral sciences and humanities courses are necessary to prepare a liberally educated person and form a foundation for associate degree nursing education.

<u>Characteristic</u>	<u>Baccalaureate</u>	<u>Associate degree</u>
Nursing Science	An indepth investigation and analysis of the current status of nursing science allows the baccalaureate degree graduate to gain knowledge and expertise necessary for developing nursing diagnoses, prescribing and implementing nursing regimens and evaluating the effects of such regimens. Nursing science forms the rational basis for all prescribed nursing regimens.	Review of current status of nursing science allows the associate degree graduate to gain knowledge and expertise to participate as a colleague with the baccalaureate graduate in collecting data necessary for formulating nursing diagnoses and evaluating effects of prescribed nursing regimens. Nursing science forms the rational base upon which the associate degree graduate understands the reasons for implementing a prescribed nursing regimen.
Faculty	Doctoral preparation preferred. Minimally, all faculty should have a Master's degree in nursing, and be prepared in and proficient in major clinical specialties.	All prepared minimally with Master's degree in nursing, and be prepared in representative clinical specialties.
Resources	Four year college or university. Health care agencies including those which are community based to support program objectives.	Two year community and/or junior college. Health care agencies to support program objectives.

Graduates of baccalaureate and associate degree nursing programs evidence different behaviors. The contrasting expected behavioral outcomes were first defined by the 1978 NYSNA Council on Nursing Education and the special Task Force on Behavioral Outcomes. Subsequently, it was adopted by the Board of Directors and Voting Body. This document reflects further revision of those outcomes.

The outcomes stem directly from the definitions of practice for baccalaureate and associate degree graduates in the Entry Into Practice Proposal. They are organized according to ANA's Standards of Nursing Practice; nursing service responsibilities; accountability; the practice setting, and career responsibilities.

#81 GUIDELINES - NURSING EDUCATION

BEHAVIORAL OUTCOMES OF NURSING EDUCATION PROGRAMS

A. OUTCOMES RELATED TO NURSING PRACTICE

BACCALAUREATE GRADUATE

ASSOCIATE DEGREE GRADUATE

- I. **Standard I: The collection of data about the health status of the client/patient is systematic and continuous. The data are accessible, communicated and recorded.*
- | | |
|--|--|
| 1. Collects health status data for purposes of formulating nursing diagnosis, establishing nursing regimens and evaluating effects of prescribed nursing regimens. | 1. Participates in collection of health status data for purposes of establishing nursing regimens and evaluating effects of prescribed nursing regimens. |
|--|--|
- II. **Standard II: Nursing diagnoses are derived from health status data.*
- | | |
|----------------------------------|---|
| 1. Formulates nursing diagnoses. | 1. Participates in collection of data used in the formulation of nursing diagnoses. |
|----------------------------------|---|
- III. **Standard III: The plan of nursing care includes goals derived from the nursing diagnoses.*
- | | |
|---|--|
| 1. Formulates goals derived from nursing diagnosis. | 1. Contributes to the data base for the formulation of clients' goals. |
|---|--|
- IV. **Standard IV: The plan of nursing care includes priorities and the prescribed nursing approaches or measures to achieve the goals derived from the nursing diagnoses.*
- | | |
|--|--|
| 1. Establishes priorities and the prescribed nursing approaches to achieve the goals derived from the nursing diagnosis. | 1. Contributes to the establishment of the priorities and the prescribed nursing approaches to achieve the goals derived from the nursing diagnosis. |
|--|--|

*Standards of Nursing Practice. American Nurses' Association. Kansas City, Missouri, 1973

A. OUTCOMES RELATED TO NURSING PRACTICE (CONT.)

BACCALAUREATE GRADUATE

ASSOCIATE DEGREE GRADUATE

- V. **Standard V: Nursing actions provide for client/patient participation in health promotion, maintenance and restoration.*
- and
- VI. **Standard VI: Nursing actions assist the client/patient to maximize his health capabilities.*
- | | |
|--|--|
| 1. Establish and implement nursing actions which provide for client/patient participation in health promotion, maintenance and restoration directed toward maximizing health capabilities. | 1. Implements nursing actions which provide for client/patient participation in health promotion maintenance and restoration directed toward maximizing health capabilities. |
|--|--|
- VII. **Standard VII: The client's/patient's progress or lack of progress toward goal achievement is determined by the client/patient and the nurse.*
- | | |
|---|---|
| 1. Establishes and implements evaluative criteria and methods by which evaluation of goal achievement shall take place, incorporating the client/patient. | 1. Contributes data toward the establishment of evaluative criteria and methods by which evaluation of goal achievement shall take place, incorporating the client/patient. |
| 2. Implements method by which evaluation shall occur. | 2. Assists in implementing method by which evaluation shall occur. |
| 3. Analyzes nursing interventions to determine their effectiveness. | 3. Contributes data toward analyzing nursing interventions to determine their effectiveness. |
| 4. Validates the effectiveness of nursing intervention with the client. | 4. Validates effect of own nursing actions with the client. |
- VIII. **Standard VIII: The client's/patient's progress or lack of progress toward goal achievement directs reassessment, reordering of priorities, new goal setting and revision of the plan of nursing care.*
- | | |
|--|---|
| 1. Determines the efficacy of the plan and alters the regimens as necessary. | 1. Contributes information to the data base necessary for determining the efficacy of the plan and its alterations. |
|--|---|

*Standards of Nursing Practice. American Nurses' Association. Kansas City, Missouri, 1973.

#81 GUIDELINES - NURSING EDUCATION

B. OUTCOMES RELATED TO ORGANIZING, COORDINATING AND DELEGATING NURSING CARE SERVICES

BACCALAUREATE GRADUATE

1. Organizes and coordinates nursing care for clients:
 - assesses client needs
 - formulates nursing diagnoses and establishes prescribed nursing regimens
 - sets priorities for meeting client goals
 - determines appropriateness of delegation of prescribed regimens
 - determines appropriate staff to implement nursing regimens
 - provides direction and supervision of the delivery of nursing care
 - evaluates the performance of nursing personnel according to established standards and criteria
2. Identifies learning needs of other personnel and provides or facilitates needed instruction.
3. Coordinates nursing and other health care delivery.

ASSOCIATE DEGREE GRADUATE

1. Organizes and coordinates nursing care for assigned clients:
 - contributes toward assessment of client needs
 - contributes towards the establishment of priorities for meeting client goals
 - implements prescribed nursing regimens
 - participates in the evaluation of own performance
2. Participates in identifying learning needs of personnel and assists in facilitating needed instruction.
3. Provides information that assists in the coordination of health care delivery.

C. OUTCOMES RELATED TO ACCOUNTABILITY FOR PRACTICE

BACCALAUREATE GRADUATE

1. Accountable to self, client, colleagues, profession and society.

ASSOCIATE DEGREE GRADUATE

1. Accountable to self, client, baccalaureate prepared nurse, associates and society.

D. OUTCOMES RELATED TO PRACTICE SETTINGS

BACCALAUREATE GRADUATE

1. Functions in any setting within the scope of nursing practice as defined for the baccalaureate graduate.

ASSOCIATE DEGREE GRADUATE

1. Functions in any setting within the scope of nursing practice as defined for the associate degree graduate.

E. OUTCOMES RELATED TO NURSING CAREER RESPONSIBILITIES

BACCALAUREATE GRADUATE

1. Demonstrates career commitment through such activities as reading professional journals, maintaining membership in the professional association, attending professional meetings, volunteering for and participating in professional committee work.
2. Demonstrates awareness of the impact of the multiple systems that affect nursing (e.g., political, legal, economic, social, etc.) and exerts leadership to bring about needed change.
3. Analyzes systems that facilitate or impede the practice of nursing and exerts leadership to bring about needed change.
4. Initiates and participates in political activity to effect change in the health care system.
5. Facilitates interdisciplinary collaboration with clients and others.
6. Articulates the baccalaureate graduate role in the delivery of health care to clients, the public and other professionals.
7. Effects needed changes within own area of responsibility.
8. Assumes responsibility for continual improvement of nursing practice.
 - a. Assesses own performance using established standards of practice.
 - b. Participates in development of new standards
 - c. Participates in peer review system.
 - d. Assumes responsibility for own continuing education.

ASSOCIATE DEGREE GRADUATE

1. Demonstrates career commitment through such activities as reading relevant journals, maintaining membership in the appropriate association, attending meetings and volunteering for and participating in committee work.
2. Recognizes the multiple systems that affect nursing (e.g., political, legal, economic, social, etc.)
3. Recognizes and reports factors that facilitate or impede the practice of nursing.
4. Participates in political activity to effect change in the health care system.
5. Establishes effective interpersonal relationships with co-workers, clients and others.
6. Articulates the associate degree graduate role to clients, the public and other health care personnel.
7. Effects needed changes within own area of responsibility.
8. Assists in the improvement of nursing practice.
 - a. Assesses own performance using established criteria.
 - b. Participates in defining areas of own responsibilities and limitations.
 - c. Participates in peer review system.
 - d. Assumes responsibility for own continuing education.

#81 GUIDELINES - NURSING EDUCATION

E. OUTCOMES RELATED TO NURSING CAREER RESPONSIBILITIES (CONT.)

<u>BACCALAUREATE GRADUATE</u>	<u>ASSOCIATE DEGREE GRADUATE</u>
9. Demonstrates commitment to nursing research through such activities as use of research studies and findings.	9. Demonstrates awareness of the value of nursing research.
10. Contributes to the further development of the science of nursing through participating in testing and refining of nursing theories.	10. Understands existing nursing theories.
11. Participates through the professional society in developing the ANA "Code for Nurses". Practices in accordance with ANA's "Code for Nurses".	11. Practices in accordance with ANA's "Code for Nurses."
12. Identifies need for consultation and seeks assistance of other professional nurses and colleagues from other disciplines.	12. Identifies need for consultation and seeks assistance of other associate degree and baccalaureate graduates.

Upon completion of the statement of behavioral outcomes, the Council on Nursing Education recognized that guidelines were needed for the educational and practice future of LPNs and RNs who would be "grandfathered" with enactment of the Entry Into Practice Proposal.

MEETING FUTURE NEEDS OF RNS

In order to assist individuals registered as professional nurses in meeting their educational and professional practice needs, a 1979 NYSNA Task Force on Professional Practice Needs of RNs prepared the following recommendations. These have been reviewed and revised for currency.

RECOMMENDATIONS FOR THE "GRANDFATHERED RN"

A. Recommendations for Meeting Educational Needs for Professional Nursing

Recommendation #1

Modify the existing system of baccalaureate nursing education to facilitate program access and completion by adult learners.

Discussion:

NYSNA recognizes that there is a broad population of nurses qualified to pursue a baccalaureate degree in nursing. Availability of sufficient programs designed to meet the needs of the adult learner, as well as financial support to students is essential.

NYSNA also recognizes existing impediments to obtaining a baccalaureate degree in nursing. Among these are inflexibility of time, place and the nature of learning experiences; failure to recognize the knowledge and skills which these nurses bring to their education and build upon them; and failure to fully recognize students' ability to participate in the design as well as the implementation of learning experience. Further, the task force believes that these impediments have been overcome in some programs and that these programs can serve as models for many others.

Recommendation #2

Develop increased numbers of continuing education programs which assist registered nurses to assume the baccalaureate prepared nurse role.

Discussion:

NYSNA recognizes that there is a group of nurses unable to pursue a baccalaureate degree in nursing for a number of different reasons. Continuing education which exposes them to the knowledge, skills, attitudes and values essential to that role can enhance their professional socialization.

Recommendation #3

Increase the numbers of graduate programs in nursing administration which will prepare nursing administrators in the field of management as well as enhance the theory and practice of nursing.

Develop more graduate programs to prepare nurse educators to deal with increasing demands for baccalaureate and continuing education.

Discussion:

The climate of professional nursing practice is established, supported and maintained by nursing administration. To be recognized as leaders in nursing and change agents in health care delivery nursing administrators must have expertise in both nursing and management.

There will be an increasing need for appropriately prepared faculty to meet the profession's responsibility to assist the "grandfathered RN" to develop professional role competencies.

Recommendation #4

Establish demonstration centers where professional nursing practice is developed and implemented jointly by nursing service, administration and education.

Discussion:

NYSNA envisions these demonstration centers, established in various types of health care agencies, as places where nurses continue their learning under the guidance of other nurses expert in the theory and practice of professional

#81 GUIDELINES - NURSING EDUCATION

nursing. The focus of learning will be on defining professional nursing in the context of the setting, structuring the environment to permit delivery of professional nursing care, and assuming full responsibility for and accountability to clients and themselves for the quality of care they give.

Recommendation #5

Emphasize in nursing education and practice the importance of verbal, written and psychosocial skills necessary for assertive self-expression and risk-taking.

Discussion:

Given the bureaucratic environments within which many nurses practice, nurses must be able to communicate their professional needs and goals in clear and effective ways. In addition, nurses must receive support from administration in order to maximize the use of these skills, and to effect the climate in which nursing is practiced.

Recommendation #6

Assist registered professional nurses to view nursing as autonomous and to develop greater autonomy and accountability for their professional performance in ways which enhance their perceptions of themselves and nursing.

Discussion:

Self-concept is an important determinant of behavior, and nursing education can assist nurses to view themselves as professionals. Nursing will mature as a profession if individual professional nurses grow and see themselves as autonomous and accountable for their knowledge and skill in nursing practice.

Recommendation #7

Assist registered nurses through baccalaureate and continuing education programs to utilize the primary health care model and research findings when providing health care.

Discussion:

The emerging primary health care model with its emphasis upon health maintenance can have an impact upon the definition and delivery of professional nursing care. The primary health care model is consistent with trends in health care delivery. Utilization of the primary health care model and research findings will help to clarify the nature and scope of professional practice.

B. Recommendations for Meeting Professional Practice Needs of Nurses

Recommendation #1

Identify, support and develop professional nurse role models in health care agencies and in private practice.

Discussion:

Role models play an important part in socializing nurses into the professional role. They can also stimulate enthusiasm for creative practice, facilitate implementation of standards of care and foster accountability.

Recommendation #2

Recognize excellence in clinical practice and seek to increase opportunities for beginning practitioners to work with nurses so recognized.

Discussion:

Respect for and recognition of achievement in nursing is a significant component of professional self-esteem. Most recognition systems are still related to vertical promotion rather than clinical performance. NYSNA suggests improving monetary rewards for nurses who choose to increase their expertise and responsibility in direct patient care rather than move up the vertical ladder in nursing; and developing a system of mentorship.

Recommendation #3

Develop regional consultation arrangements wherein nursing expertise is shared among peers.

Discussion:

In order to make access to expert consultation economically feasible the task force recognizes the value of development of regional pools of highly qualified practitioners to serve as consultants.

Recommendation #4

Support joint practice arrangements and activities which include but are not limited to multidisciplinary audits and clinical conferences.

Discussion:

A multidisciplinary team approach to patient care, where each profession's contribution is recognized and maximized, improves patient care. The nursing contribution is strengthened through effective and satisfying interactions with professionals of all disciplines.

Recommendation #5

Develop programs to support nurses to become more self-directed in defining professional goals, personal standards, and career objectives.

Self governance is essential to autonomy in practice and attainment of professional status.

Job satisfaction, productivity and concern for improving standards of health care are often tied to a view of nursing as a career, not a job.

81 GUIDELINES - NURSING EDUCATION

MEETING FUTURE NEEDS OF LPNs

In order to assist individuals licensed as practical nurses to meet their particular educational and practice needs, a 1978 NYSNA Task Force addressed issues of transitioning the LPN to the associate degree prepared nurse role and made the following recommendations. These have been reviewed and revised for currency.

RECOMMENDATIONS FOR THE "GRANDFATHERED LPN"

I. Individual Licensed Practical Nurses

- A. Where circumstances permit, LPNs should seek course work for academic credit in the subject areas of: 1) advanced communication skills; 2) basic principles of natural and behavioral sciences; 3) pharmacodynamics for nurses; and 4) theoretical basis for nursing practice. This course work may or may not be taken as part of an effort to obtain an associate degree in nursing. Individual LPNs should be certain that nursing course work is offered by a nursing department within a college or university that offers a degree in nursing. If course work other than nursing is taken in another institution, it must be validated as transferable by the institution granting the degree in nursing.
- B. Where taking course work for academic credit is not feasible, licensed practical nurses should participate in approved continuing education in the general subject areas defined in A.
- C. All active licensed practical nurses should be involved in activities of their Association, thereby keeping abreast of trends and new developments in education as they occur.

II. Colleges and Other Providers of Continuing Education

- A. Credit and non-credit course work should be made readily available to licensed practical nurses.
- B. Nursing course work offered for academic credit should be offered by a nursing department within a college or university that offers a degree in nursing.
- C. Credit and non-credit course work for licensed practical nurses should be relevant and substantive.
- D. All course work offered in conjunction with the transition should be approved by a bonafide accrediting body and should be priced consistent with cost and value.
- E. Existing and new resources for credit and non-credit course work should be developed to provide continuing education on an outreach basis.

III. Employers

- A. Employees should be encouraged to participate in continuing education consistent with the transition.
- B. Employers should communicate educational needs of their employees to academic institutions within their communities.
- C. The cost of providing and obtaining degree education and/or continuing education consistent with the transition should be shared by employers and employees.
- D. The use of clinical and institutional facilities for educational purposes should be encouraged.
- E. Directors of nursing should be responsible for assessing the preparation and competencies of nursing employees throughout the transition and for ensuring appropriate utilization.

IV. Related Professional and Regulatory Agencies

- A. NYSNA and appropriate organizations of Licensed Practical Nurses and Licensed Practical Nurse educators should establish a Coordinating Council on LPN Transition to:
 1. Provide continuing direction for nurses during the transition.
 2. Monitor the transition process.
 3. Coordinate the transition by matching needs with resources and encouraging development of new resources where there is need and demand.
 4. Insure that adequate counseling and advisement services are available to individual LPNs statewide.
- B. The State Education Department should continue its efforts to encourage articulation of practical nursing education programs with nearby community and junior colleges.

CONCLUSION

In these Guidelines, characteristics of Baccalaureate and Associate Degree nursing education have been described. It is the basis for distinguishing scopes of practice for baccalaureate and associate degree prepared nurses. Also provided are recommendations to assist those who are licensed as professional nurses to achieve and maintain a baccalaureate level of practice and recommendations to assist the licensed practical nurse in achieving and maintaining associate degree level of practice.

This work is consistent with the definitions of nursing specified in the Association's Entry Into Practice Proposal and partially fulfills the Council on Nursing Education's responsibility for implementation of the Association's Action Plan.

#81 GUIDELINES - NURSING EDUCATION

SELECTED RESOURCES

American Association Colleges of Nursing
American Nurses' Association
National Commission on Nursing Implementation Project
National League for Nursing
New York State Education Department
New York State Nurses Association

CONTRIBUTING NYSNA GROUPS

Council on Nursing Education, 1988

Paul T. Hageman, Chairperson
Jeannette Coleman
Rose Marie McMahon
Cecilia Mulvey
Marilyn Jaffe-Ruiz

Council on Nursing Education, 1987

Mary X. Britten, Chairperson
Evelynn Gioiella
Kathleen A. Powers
Paul T. Hageman
Rose Marie McMahon

Council on Nursing Education, 1978

Mary Ramshorn, Chairperson
Jacqueline Andrews
Mary Britten
JoAnn Donahue
Alice Rines
Sharline Weeden
Dorothy Whittingham
Joan Murphy
Anita Ogden

Council on Nursing Education, 1976

Marlene Werner, Chairperson
Ann Gothler
Rose Marie McMahon
Anita Ogden
Thelma Prescott
Alice Rines
Judy Sullivan
Sharline Weeden
Dorothy Whittingham

Task Force on Professional Practice Needs of RNs, 1978

Gloria Callandro, Chairperson
Georgia Autorino
Carolee Brooks
Mary Hurley
Martha Leonard
Linnea Luuri
Theresa Pistolessi
Sharline Weeden

Task Force on LPN to AN Transition, 1978

Anamae Matthews, Chairperson
Celia Heffron
Marian Hosford
Theresa Hulub
Jacqueline Perley
Thelma Prescott
Doris Spencer

Representatives, LPN & T of NY, Inc.
Sylvia Allison
Henrietta Carrington
Sister Rose Esther Massara
Mae Quarterman
Carolyn Sherry

Task Force on Behavioral Outcomes of Nursing Education Programs, 1976

Marlene Werner, Chairperson
Barbara Beeker
Evajane Canon
Keville Frederickson
Edna Lauterbach
Elizabeth McFadden
Rose Marie McMahon
Claire Murray
Lembi Saarman
Adeline Winner
Laura Zamora