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

1988

Legislative Meeting; Series I; File 89

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


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.
THE NEW YORK STATE NURSES ASSOCIATION

Council on Legislation

MINUTES

The Veronica W. Driscoll
Center for Nursing
Guilderland, NY
September 7, 1988
11:30 a.m. - 4:15 p.m.

I. CALL TO ORDER

The meeting was called to order by Jean Heady,
Chairperson, at 11:30 a.m. on September 7, 1988.

II. ATTENDANCE

Present
Josephine Bolus
Susan Fraley
Jean Heady
Carole Kuzmak
Juanita Majewski
Carol Morris
Janice Volland
Kattie Washington

Absent
Louise Gallagher

III. MINUTES OF JUNE 7, 1988

The minutes of June 7, 1988, were accepted as written,
except that Janice Volland's name should be listed as
present at the last meeting.

IV. CONFERENCE ON ENTRY

A review was conducted on the conclusions reached by the
Conference on Entry.

Carol Morris reported on her group which was #3. She
stated that the following sentiments were expressed.

1. The problem of explaining how entry will affect the
   Nursing Shortage.

2. The public perception of the health care worker.

3. Does the public really care about the education
   level of the various health care workers.
4. The associate degree educator will not want to teach at the associate level.

5. If credits in the associate degree program are not transferable than many latter life students will not want to return to school for the BSN.

6. There is the opposition to grandfathering LPNs.

7. The group would support either title.

Susan Fraley addressed the problem of trying to please everybody which only causes more problems. She urged concern about patient care. In the past NYSNA has abandoned LPNs on other issues. Her group, which was #4, called for two (2) levels of nursing.

It was reported by Gail Rosettie in Group 4 that the minimum requirement in AD programs is 40 hours of nursing credits (some give 50) while BSN programs require a minimum of 60 hours.

It was pointed out that transferability was a problem. This will hurt mobility. The need for standardization was clear from the discussion.

(The discussion broke off into general discussion without reference to a number group from the conference.)

V. Proposed Legislative Program for 1989

Josephine Bolus and Juanita Majewski suggested that Entry Legislation be held back for one year while research is done. Jan Volland suggested that a summit be held with AD college presidents and the Associate Degree Nursing Council. Susan Fraley asked that the bill not be held for a year because it implies a lack of commitment and is exactly the action desired by the opposition. Jean Heady commented that not introducing a bill is frightening.

Discussion then centered on building support for Entry. Suggestions were:

1. Let districts know what bills their legislators are sponsoring so districts can create liaisons.

2. Districts must work day by day with Legislators.

3. Seek ways to help inactive districts.
The Council then voted to include Entry Into Practice in the Legislative Program with the understanding that the support building activities would begin prior to the Legislative Session. The Council voted not to specify titles or professional and technical levels. Rather, the Council elected to call for standardization of nursing education maintaining two careers, one at the baccalaureate entry level and one at the associate degree entry level.

The Council then voted to include repeal of the Exemption Clause and protection of the Nurse Practice Act. The Council voted to separate legislative efforts to increase funding for nursing education from legislative efforts to promote recruitment and retention of nurses.

The Council agreed that the Association's commitment to monitor and influencing broad areas of health/social legislation should appear first in the platform and should include reference to environmental health issues. (see attached)

VI. LEGISLATIVE BULLETIN

Janet Mance announced that the Bulletin would no longer be used. That starting this year the Association's Report would be used to transmit the legislative material and information.

VII. LEGISLATIVE RECEPTION

Ms. Mance confirmed that the Legislative Reception was scheduled for Monday, February 27, 1989. The Council then discussed combining the reception with a mini-workshop. They agreed that attendees should come Sunday evening, possibly with a dinner speaker and a workshop Monday morning, visits to Legislators in the afternoon and the reception Monday in late afternoon.

VIII. NEXT MEETING

The next meeting of the Legislative Committee will be in November 1988 (date to be determined) at the Association Headquarters from 9 a.m. to 3 p.m. Members asked that two special items be placed on that agenda:

1. Explore how to help inactive districts.

2. Explore how to educate beginning practitioners about the professional association and the need for legislative involvement. Ms. Mance suggested Karen Ballard attend the meeting in her capacity as NYSNA liaison with the Student Nurse Association.
IX. ADJOURNMENT

The meeting was adjourned at 4:15 p.m., September 7, 1988.

[Signature]
Jean Heady, Chairperson

JH:BTM/ejp
9/21/88
Attachment
Other options for achieving the upgrading and standardization of nursing education may exist. Option #6 could be a composite of the first five options or an entirely new option. If your group choose this option, please include recommendations for entry points, educational requirements, and titles in addition to any other recommendations.
"The existing definitions of registered professional nursing and practical nursing were drafted to describe the nature of nursing practice which is a constant - not the scope of nursing practice which is flexible and changes as health science, health practice and society itself changes. The nature of nursing is that identifying element which distinguishes nursing from other health professions. It is the essence of nursing - and does not change. The scope of nursing practice emanates from the nature of nursing practice and encompasses the range of nursing's actions and activities. It is the functional breadth of nursing practice. Changes in modalities, tools and techniques are changes in scope rather than the nature of nursing practice."

#89 LEGISLATIVE MEETING

OPTION #1

This option provides for two entry points with no change in titles.

- Baccalaureate education for entry into professional nursing.
- Associate degree education for entry into licensed practical nursing.
- All currently licensed RNs and LPNs to be grandfathered.
- An effective date four years after bill becomes law.

Rationale for Support

The two existing careers in nursing bear titles familiar to the public. Professional nurse education would be standardized and allow for curriculum changes consistent with professional nursing practice. A new licensing examination for the RN would be developed reflective of professional education. LPN education would be upgraded, standardized and moved to institutions of higher learning. An entirely new examination would be developed to appropriately test the expanded skills and preparation of the new LPN.

OPTION #2

This option provides for two entry points with change in title for the technical nurse.

- Baccalaureate education for entry into professional nursing.
- Associate degree education for entry into associate nursing.
- All currently licensed RNs and LPNs to be grandfathered.
- An effective date four years after bill becomes law.

Rationale for Support

The need for standardization of professional nurse education at the baccalaureate level is well documented and accepted within the profession. Since baccalaureate education for professional nurses is already well established, no title change is necessary. Curriculum changes consistent with professional nursing practice would occur and a new licensing examination for the RN would be developed reflective of professional education. The licensed practical nurse category would be discontinued and a higher level technical nurse practitioner would be developed within the community college. A new licensing exam would be developed to test the skill and expanded knowledge base of the new associate nurse. Grandfathered LPNs could be required to obtain specific continuing education.
OPTION #5

This option provides for three entry points, all leading to licensure.

Baccalaureate education for entry into professional nursing. All currently licensed RNs to be grandfathered. Associate degree education for entry into associate nursing. An effective date four years after bill becomes law.

LPN education remains vocational education.

Rationale for Support

The need for standardization of professional nurse education at the baccalaureate level is well documented and accepted within the profession. There exists considerable legislative support for maintaining the LPN career option. There is also, within the profession, considerable feeling that a clear distinction must be made between existing vocational LPN training and associate degree technical nursing. Although the associate degree technical nurse was always envisioned as an entirely different nurse from the vocationally trained LPN, this option could dispel those objections.

OPTION #3

This option provides for three entry points with two leading to licensure.

Baccalaureate education for entry into professional nursing. All currently licensed RNs to be grandfathered. An effective date four years after bill becomes law. LPN education remains vocational training.

Rationale for Support

The need for standardization of professional nurse education at the baccalaureate level is well documented and accepted within the profession. The educational requirements and titling of the technical nurse remain controversial within the profession. Outside sources argue for keeping the LPN entry and practice level. Many sources debate the appropriate titling and scope of practice of the associate degree prepared technical nurse. Under this option the associate degree programs could become pre-professional nurse programs offering basic undergraduate required courses for entry into professional nurse baccalaureate programs. Associate degree pre-nursing programs would not lead to licensure but could provide the student with other health career options to pursue, e.g., physical therapy.
OPTION #6
This option provides for three entry points with one phased out over time.

Baccalaureate education for entry into professional nursing.
All currently licensed RNs to be grandfathered.
Associate degree education for entry into associate nursing.
An effective date four years after bill becomes law.
LPN education remains vocational training and is phased out over an established period of time.

Rationale for Support
The need for standardization of professional nurse education at the baccalaureate level is well documented and accepted within the profession. The fact that associate degree nursing programs should not attempt to produce professional nurses is fairly well accepted within the profession. Well accepted is the concept that LPN vocational preparation is greatly different than the education projected for the future associate degree prepared technical nurse. The LPN phase-out period would provide time to establish the new associate nurse curriculum and scope of practice and acquaint the public with the new technical nurse. The phase-out period would also allow for development of pre-technical nursing remedial programs for the educationally disadvantaged who could then enter associate nurse programs.

Thank you first of all for participating in this major conference on Entry into Practice. I would also like to commend the Council on Legislation for generating the ideas for this conference and a special thank you to the staff for doing an excellent job of getting everything arranged within a very short time frame.

Our Council on Legislation has been deeply concerned about the lack of movement on this bill and, specifically, about this issue the single legislative forum for 1978. The 1978 Legislation Program generated much controversy over the introduction of the 1974 bill, which was sponsored by the same legislative body since 1974. Our support for this bill and resolution:

Along with the testifying nurses, nurses and
LEGISLATIVE MEETING

In the first thing we do, let's talk about the House Practice Rule, Chapter 119, which incorporates the laws of 1981. Our efforts to address the Health Industry Labor-Management Report are currently the American Dental Association's Registered Dental Hygienist. Both have implications for our legislative programs.

I know that some have said that entry we need. The meeting shortage held entry, and it should be revised. Some of you have said that this meeting will only affect those in favor of entry. Others have said that nobody will come to a meeting in August about entry. Some have stated that they could not come unless they could be assured that the meeting would not be a waste of time.

One that is what thing we do together. First, a recognition that the last few days of June and now in July. The log, and some have made that obvious and are taking the new approach to developing the 1989 legislative program. You indicated that you have your impact by your presence here to be actively

First, we will together to carry the first, resemble the present and then generate new ideas. Suggestions are strategies for the future, supported. The reason to be that we must objectively look at why we cannot move the legislation. We must try to identify areas of the objection. How can we develop consensus among legislators?

And we must identify the strength, and weakness in each. We must not be defensive but be strong in our argument and then how we look for that argument. Once she is complete, then she can work.

In what areas can we compromise?
LEGISLATIVE MEETING

#84
The conference begins with a dinner meeting on the evening of August 22, 1988 at the Albany Hilton. An all-day conference is scheduled for August 23.

The purpose of the conference is to examine the current status of the Legislation with particular emphasis on sources of nursing support and opposition. The goal is to achieve unification and to plan for implementation.

The conference participants will be broadly representative of nurses throughout the state, many having participated in the 1987 Arden House Conference on Recruitment and Retention in Nursing. Consumer input will be sought by requesting participation of the NYSNA Consumer Advisory Council.

The costs for this workshop, including group meals, your hotel accommodations at the Albany Hilton for one night and related travel expenses, will be incurred by NYSNA.

NYSNA will make your hotel reservations. Please complete the enclosed postcard and return it to NYSNA by August 8, 1988.

We hope that you will join us as a conference participant and help move the standardization of nursing education in New York State forward. I urge you to make every possible effort to attend. The more complete the representation, the more fruitful the conference.

Sincerely,

Janet M. Hunter

New York State Nurses Association

August 5, 1988

Dear Dr. Hunter,

I wanted to write to you personally to explain my absence from the Entry Conference planned for later this month. My husband had a business opportunity which included a trip to Los Angeles. Never having been to Caliifornia before I jumped at the chance to go. We bought our airfare and hotel reservations etc. I then got the notice about the Conference which occurs right in the middle of my trip. I could not attend the Conference without missing out on the trip and losing the price I paid for the plane tickets.

I realize my attendance at legislative Council functions has been poor this year. My health was poor in the fall which forced me to miss a meeting and this last meeting in June was called quickly, after I had just been in Albany for the Advisory Council meeting. I had work obligations that precluded my attendance. I had planned to rest up in the Spring after my election to District 62 Presidency but Janet Mance urged me to stay on until September. Perhaps I should have kept with my original plan since I knew I would be busy with my District Presidential activities.

Please accept my best wishes for a successful conference. I am excited and hopeful that the ideas generated will lead to a viable new "Entry" bill. I have put my ideas on paper per the request of Joan Veitch. Included is a copy. Again, good luck. I look forward to seeing you at our September Advisory Council meeting.

Sincerely,

[Signature]

Jan Veitch

New York State Nurses Association

District 62
Ms. Jean Heady, M.S.N., R.N.
R.D. #2, Box 9
Clayton, N.Y. 13624

Dear Jean,

As per our phone conversation today, I would like to express my deepest regrets at not being able to attend the Conference on Entry Into Practice. The proposed Conference sounds like an exciting attempt to develop a viable plan to achieve standardization of nursing education. My best wishes are with you all as you pursue this vital effort.

I wanted to put down on paper my ideas about Entry Into Practice. Perhaps if appropriate, they may be added somehow to the ideas of the conference. I will not list all of the reasons I feel standardization is important. These reasons are no different from what has been spoken of and written by nurses with more insight than I. My remarks will be limited to the arguments that have defeated N.Y.S.N.A. for so long, as well as strategies I could conceive of to counteract those arguments.

The legislators I have interacted with for so many years now have led me to believe there are 2 basic reasons they have not passed "Entry" in the past, namely the lack of unity within nursing and the philosophy of the Assembly, esp. Assembly Higher Education Committee which frowns on further elevation of educational standards. I will address these and others individually.

1) Lack of Unity - After the passage of the hotly contested Nurse Practitioner BILL, I find this argument laughable, however I strongly believe that if nurses unite on whatever is proposed we could get the bill passed in one legislative session. The nurses within N.Y.S.N.A. and those outside must both agree on the next bill we support or we should not bring it before the legislature. There should be no more chuckling about how many years we have fought each other on this issue. If we bring forth a bill, we must do it as a united front or our efforts will be thwarted.

July 28, 1988

District #2 a constituent of New York State Nurses Association
2) The Philosophy of the Assembly - This argument scares me more than the first, because we are powerless to change it. Reportedly the Assembly feels they should put an end to spiraling educational requirements for professions/occupations. I've heard statements that doctors and lawyers etc, were lucky to have gotten their requirements through before the current Assembly philosophy was enacted. I feel that these feelings may be a stronger deterrent to the "new entry" than any other. I think my strategy for an "apprentice" system would be the only hope for overcoming this roadblock. Read on for that idea. We need to add educational/training requirements for technicians to our master list of the professions and their educational requirement. This information list should have Respiratory Therapists and RT techs, PT and PT techs, Lawyers and paralegals etc. to illustrate the many professions who have respected, educated paraprofessionals.

3) The Shortage - Every legislator we talk to now is quite concerned over the shortage. We need to include in our discussion and perhaps in our bill, how nurses, aides and techs, LPN's, ADN's and BSN's all contribute to our health care system. To tell a legislator you will now need a BSN to be a nurse when the nightly news has horror stories about closing hospital beds, makes no sense. We need to learn how to market the "new entry" as an answer to the shortage. We can't just say nurses will like nursing more. We need to hire a marketing professional to tell us how to make it look the same it looks to us.

Having worked as an ADN educator for 5 years now, I have had the opportunity to speak with many other ADN educators about entry. I will now discuss their arguments, and my strategies to offset them.

1) Title - ADN educators are proud to educate RN's and will not give up that effort easily. I say, let them keep it. Change the BSN's title. The Legislative Committee Chair in my District always says if we were called "Health Care Engineers" we would be paid more. Let's change the professional nurse's title, not the ADN's. Perhaps RN could = ADN and RPN could = BSN. Maybe all nurses should give up the title "nurse" and change to something more gender-neutral and prestigious.

2) Definition - In my mind this is the toughest of the issues. ADN educators will not take lightly the loss of independence. Some ideas: have ready at the conference a worksheet which includes the practice definitions of many professionals and related technicians as a basis from which to draw, come with some examples of new definitions where the second level nurse's definition is not equal to the current LPN, let the ADN keep the current RN's definition and develop an even better definition for the BSN (probably not feasible - but an idea). I realize that the entire scope of practice issue impacts on this definition, but what it comes down to is...

3) Employer's position - ADN's are an excellent "buy" for the hospitals. They ADN's are the ones to do a great job in their independent role. Until employers of nurses are included in the discussion, and until they are willing to go to bat for entry we will have a tough time. The marketplace hires and uses ADN's without complaint. In fact some prefer this level nurse, because nurse graduates outnumber BSN's and diplomas. We have to devise a workplace scenario so people can picture what a unit might be like if ADN's were dependent practitioners. And it has to realistically look at the number of BSN's available in all areas across the state.

4) More - ADN educators have expressed for years the idea that their graduates pass the Boards with better scores and rates than BSN's. Let's allow ADN's to take the same Boards and create a new and more challenging exam for BSN's - including management care planning, research and theory aspects of nursing or have all nurses take the basic exam and have BSN's take an additional exam focusing on those concepts taught that are unique to BSN's.

5) Community College Presidents will reject educating a second level nurse is an argument I have heard. Considering they educate second level dental assist., techs, biomedical techs, engineering techs etc. I find this hard to believe. Educating nurses is costly but if the marketplace hires them I believe the Community Colleges will continue to put them out. Just be aware that this argument may come up.

One final idea I would like to put forth is radical but I know this conference intends to open up the floor for any idea no matter how radical it may seem. My husband is a Professional Engineer (P.E.). A P.E. can be achieved in a variety of ways with certain combinations of work and experience. A B.S.E. can take the P.E. exam after x yrs. of acceptable work experience in the field. The engineering test can also take the P.E. exam, but not until many more years of work. I could see that this type of "apprentice system" could truly make Entry more acceptable to all concerned. Why shouldn't the ADN with say 10 years experience and perhaps a certain amount of continuing education credits, who can pass the exam, be allowed to become a professional nurse. Nursing would benefit too by having a career ladder within itself, as well as by having nurses joining its' professional ranks with a wealth of experience to draw on. Please consider this idea. It works in engineering, it could work in nursing.

In conclusion, I commend you on your efforts to come up with a viable parameterization of Nursing Education Effort. I urge you to think widely within the nursing profession before proposing new legislation. Encourage all to be open-minded and to compromise. We can't be a political force until we learn to give a little to get a lot. I wish you the best of luck in this endeavor.

Sincerely,

J. Head

July 28, 1988
Page Three

cc: Dr. Juanita Hunter
Report To:  New York State Nurses' Association
            President and Board of Directors

Re:  Meeting with Council of Deans of Nursing, Senior
     Colleges and Universities in New York State

Date:  May 6, 1988

Madeline Naegle, President-Elect
Christine Tofflemire, Associate Director Legislative Program

Attendance at the meeting was undertaken with the goals of:

a) facilitating communication with this group re:
the 1988 NYSNA Legislative Program.

b) increasing involvement of this group's members in
achieving passage of entry into practice legislation.

Chris Tofflemire presented the 1988 NYSNA Legislative Program:

1. The handout "The Provisions of Nursing Scholarship/Loans
   Bills" was distributed and the status of major
   scholarship bills was presented.

2. The members of the Council were asked to address their
   concern about the NYSNA Legislative Program. The
   Council's letter to NYSNA February 3, 1988 stated,
   "The Council supports BSN entry into professional
   nursing practice but not other components of the
   1988 legislation proposed by NYSNA such as title of
   LPN, BS graduates writing prescriptions, etc."

   a. Members objected to the perceived plan to include
      prescription privileges in the "Entry into Practice"
      bill. Baccalaureate graduates are not prepared to
      prescribe medication. The basis for the Council's
      understanding that prescription privileges was
      included was a statement in the written rationale
      for the Legislative Program presented at convention:
      "Further, prescriptive legislation is challenged
      because all nurses do not have a broad educational
      base with predictable science and pharmacological
      course work."

   b. Members objected to the title "Licensed Practical
      Nurse" in the Entry Bill for the following reasons:
1. Institutions had stopped hiring LPNs. Keeping the title in The Nurse Practice Act gives the perception that NYSNA endorses hiring LPN's prepared in one-year programs.

2. The title LPN downgrades the graduates of the associate degree program. Those graduates should not be required to take the NCLEX-PN. Graduates of associate degree programs don't want to be called "LPN."

3. Members objected to the definitions of practice.

4. Members expressed the views that the issue of Entry Into Nursing was tearing the nursing community apart and that they disliked dissension among colleagues. Nursing needs a united front to address other issues.

5. Members expressed the view that nurses and legislators have embedded opinion about Entry and have stopped listening or discussing Entry.

3. The Council members made the following recommendations:

a. Withdraw the Entry Bill from the legislature and declare a period of waiting or "cooling down."

b. Differentiate 2 levels of practice and implement in the practice settings. After differentiation occurs in practice, educational requirements will change and entry legislation will be accepted without argument.

c. Upgrade both definitions in The Practice Act. A committee from The Council of Senior Colleges and from The Associate Degree Council have begun to draft language jointly.

d. Consider retaining title "RN" for associate degree graduates.

e. Work on issues of mutual concern to all nurses, on which there is a consensus as to the problem and solution. Examples given were funding for nursing education and recruitment.

f. A suggestion was made that nursing personnel from all levels of preparation were needed.

g. NYSNA should further assess the views of the rank and file regarding entry at this point in time.

h. Reopen discussion regarding the language of the bill.
Madeline Naegle presented the rationale for the 1988 NYSNA Legislative Program and recounted the voting body's decision (October 1987) to use the title LPN. She further encouraged members of the group to share in writing their views about how discussion over entry could be decreased. She further suggested that NYSNA members of the group active on activities related to the Arden House Consortium continue their involvement and expressed thanks for their contributions to date.
Members of the Council of Deans of Nursing, Senior College, and Universities in New York State attending (to the best of Christine Tofflemire's recall, attendance sheet was not available):

<table>
<thead>
<tr>
<th>Name</th>
<th>Institution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dr. Helen Pranzatelli</td>
<td>Elmira College</td>
</tr>
<tr>
<td>Dr. Diane D. Ellint</td>
<td>SUNY College at Brockport</td>
</tr>
<tr>
<td>Dr. Grace Chicadonz</td>
<td>Syracuse University</td>
</tr>
<tr>
<td>Dr. Elizabeth Mahoney</td>
<td>Russell Sage College</td>
</tr>
<tr>
<td>Dr. Jeanette Coleman</td>
<td>SUNY College at Plattsburg</td>
</tr>
<tr>
<td>Dr. Ellen Cohen</td>
<td>SUNY College of Technology</td>
</tr>
<tr>
<td>Ms. Joan Murphy</td>
<td>Utica College of Syracuse University</td>
</tr>
<tr>
<td>Dr. Geraldine Brown Mosley</td>
<td>Dominican College of Blauvelt</td>
</tr>
<tr>
<td>Dr. Marilyn Jaffe-Ruiz</td>
<td>Pace University</td>
</tr>
<tr>
<td>Dr. Evelyll C. Gioiella, President</td>
<td>Hunter College-Bellevue School of Nursing</td>
</tr>
<tr>
<td>Mary Collins</td>
<td>Niagara University</td>
</tr>
<tr>
<td>Dr. Joella Rand, Secretary</td>
<td>Alfred University</td>
</tr>
</tbody>
</table>

CT/ker
7/14/88
NEW YORK STATE NURSES ASSOCIATION
Conference on Entry Into Practice
August 22 & 23, 1988
BREAK-OUT SESSIONS

GROUP I

Co-Group Leaders: Joan Gilbert Carol Brooks
Recorder: Carol Kuzmack
Staff: Ellen Sanders
Members: Lolita Compa
Susan Giampietra
Shirley Haddad
Catherine Hart, Critical Care Nurses
Juanita Hunter
Barbara Melon
Lenora McClean
Laura Simms
Mary Ann Valinski

GROUP II

Co-Group Leaders: Elizabeth Mahoney Margaret Hardie
Recorder: Josephine Bolus
Staff: Elizabeth Carter
Members: Elaine Beletz
Kate Brady
Juanita Hamilton
Delores Long
Madeline Haegele
Veronica O'Day
Evan Pritchard
Lois Ricci
Claude Willis
NEW YORK STATE NURSES ASSOCIATION
Conference on Entry Into Practice
August 22 & 23, 1988
BREAK-OUT SESSIONS

GROUP III

Co-Group Leaders: Kathleen Colling    Daphne Nelson
 Recorder: Carol Morris
 Staff: Gail DeMarco
 Members: Shirley Fondiller
 Susan Freley
 Carol Ann Gramse
 Anna James, LPN Inc.
 Eleanor Lambertson
 Pamela Mayron
 Christine Pakatar
 Elizabeth Plummer
 Janeen Sheehe
 Dorothy M. Williams

GROUP IV

Co-Group Leaders: Jeanette Coleman    Glenda Marshall
 Recorder: Susan Freley
 Staff: Louise Kehn
 Members: Mary Collins
 Veronica Driscoll
 Sheila Gettelson
 Ann Gothler
 Sandra Hazzie
 Erline McGriff
 Francis Morgan
 Anne Quashen
 Gail Rossette
NEW YORK STATE NURSES ASSOCIATION
Conference on Entry Into Practice
August 22 & 23, 1988
BREAK-OUT SESSIONS

GROUP V

Co-Group Leaders: Kathleen Sward Claire Murray
Recorder: Juanita Majewski
Staff: Martha Orr
Members: Judith Broad Connie Cockman William Donovan Paul Hageman Lori Jennings Edna Lauterbach Anita Ogden Dorothy Williams, CRNA Estelle Yahes

GROUP VI

Co-Group Leaders: Marilyn Jaffe-Ruiz Susan Heidtman
Recorder: Kattie Washington
Staff: Barbara Zittel
Members: Patricia Barry Rebecca Bender Ellen Burns Alice Champagne Donna Demarest Carolyn Goetz Edna Newmann Ingrid Pearson Sadie Smiles
NEW YORK STATE NURSES ASSOCIATION
Conference on Entry Into Practice
August 22 & 23, 1988
BREAK-OUT SESSIONS

GROUP VII

Co-Group Leaders: Evelyn Lyke Wanda Hackney
Recorder: Louise Gallagher
Staff: Karen Ballard
Members: Erika Baker Harriet Brathwaite Jerold Cohen Karen Duffy-Durnin, NYSNPA Mary Finnick Evelyn Giolella Patricia Gussey, AORN Jackie Perley Catherine Welch

NEW YORK STATE NURSES ASSOCIATION
Conference on Entry Into Practice

Background for Break-out sessions and option selection

The purpose of this conference is to move the profession's education goals forward. The need to standardize and upgrade nursing education is well established and repeatedly identified as a priority issue for nursing in New York State as well as across the country.

The recommendation that nursing education be upgraded, standardized and take place in institutions of higher learning was first documented in the 1923 famed Goldmark Report.

NYSNA quickly followed ANA's lead in 1965 and published "A Blueprint for the Education of Nurses in New York State" in 1966.

The noted 1985 proposal was the outgrowth of a NYSNA resolution in 1976 which became the centerpiece of the Association's Legislative agenda in 1976. That Legislative quest has continued yearly up to the present. The Association has repeatedly reaffirmed its commitment to the goal through annual voting body action taken on its Legislative agenda.

The goal was identified as the Association's priority in the '86 Action Plan and the 1987 Arden House Conference on Recruitment and Retention.

The goal has been difficult to attain because of the differing opinions about various aspects from within and without the profession. Those interprofessional concerns relate to number of entry points, titles, relationship between the professional and technical nurse, and legal definition of the technical nurse.

This conference is intended to provide for discussion of these differing opinions in order to begin consensus building for unification and implementation of the goal.
Each work group is asked to consider various options for achieving the goal. Those options are all in legislative form since change through regulation is not a viable route in New York State. Each group is asked to recommend one option. One of the five options presented may be selected or a new option #6 (legislative) may be put forth.

Options 1 through 5 deal primarily with titles and entry points. Dealing with all of the issues in each option would make the selection process unworkable. If clear consensus can be reached on titles and entry points much will have been achieved. Please add to your option selection other areas on which your group has reached consensus, e.g., relationship between the professional nurse and technical nurse.

Directions

1. Read all options presented.
2. Return to option #1 and discuss.
   If consensus cannot be reached, identify concerns or objections to that option and proceed to option #2.
3. Follow this format through all 5 options unless consensus on one of the options is reached.
4. If consensus on none of the options can be reached, develop option #6 on points of consensus.
5. Each group is asked to recommend one option.
The principal requirements for nursing licensure specified in law are educational preparation and successful performance on a state administered licensing examination.

The Entry Into Practice Proposal of The New York State Nurses Association has, from its beginning, aimed for the licensing of associate and professional nurses to be based upon completion of different educational programs of different length and purpose and success on different licensing examinations. The education is to be based in and comparable to the mainstream of higher education.

Recently, a number of proposals have surfaced that are in contradiction to the philosophy of the Association's Entry Into Practice Proposal. The theme of these proposals, unacceptable to the Association, is that while associate degree graduates would be licensed on the basis of an examination suitable to their preparation, baccalaureate degree graduates would not. Baccalaureate degree graduates would be licensed on the basis of an examination based on associate degree education and an additional examination, a position which negates the inherent value of baccalaureate education. Further, such proposals are not acceptable because:

1. Society needs and deserves well defined, skilled, accountable nursing practitioners.
2. Our present ambiguous system of nursing education and licensure is not socially responsible in the sense that whatever different educational outcomes are defined, AD, BS and diploma graduates are required to pass the same licensing examination.
3. Associate degree education is either preparation for baccalaureate education through granting the Associate in Arts degree or preparation for immediate employment through granting the Associate in Applied Science degree. Community college
families indicate that nursing programs in those colleges prepare their students to receive the Associate in Applied Science degree, i.e., preparation for employment upon graduation. 2

4. Baccalaureate education, whether liberal arts or professional, includes distribution requirements in humanities and behavioral, social and natural sciences and grants one of the best defined, most successful and accepted degrees in American higher education. 3

5. Sound curriculum planning and structure are rooted in the mission of the institution, and are logical and goal directed. 4

6. Nursing education can only achieve its maximum potential through being within the mainstream of higher education, being consonant with that system’s goals, and by sharing in its rich resources.

7. Both technical and professional education and licensure need individual, singular, specialized goals in order for each to flourish, continue to be refined and excel. 5

8. The accountability of the associate nurse to the professional nurse as defined in the Association’s Entry Into Practice Proposal and the responsibility of the professional nurse for diagnosis and treatment are essential for safe nursing practice.

In addition to providing clearly distinct responsibility, this proposal removes a qualifying statement currently in the law connecting nursing practice to the practice of physicians. Thus, both the associate nurse and professional nurse will be more clearly accountable in a legal sense for their own nursing practice with its enactment.

9. The limits of practice of associate degree graduates have been the subject of continuing debate, and this concern is
increasing in conjunction with increasing complexity of health care. Further, the graduate of the associate degree nursing program as a competitor with the graduate of the baccalaureate nursing program is presently at real risk in the job market.

10. Present day nursing service administrators perceive baccalaureate graduates as essential to make the refined analyses, judgements, decisions and direct care plans that are currently required.

11. Baccalaureate education for nursing must continue to exist as an independent nursing education entity for the nursing profession to be recognized as a profession and, consequently, for its practitioners to make the professional contribution to planning and providing contemporary health care that is needed.

12. It is important to maintain the integrity of the professional curriculum. The idea that the system of education should be able to adapt to needs of individual students who change their goals (and it should) must not interfere with curriculum and licensure to the extent that fundamental purposes of curriculum and licensure become ambiguous and secondary.

The Association's Entry Into Practice Proposal stems from nearly one hundred years of effort on the part of the profession to permit nurses to acquire the intellectual tools provided others who have comparable social responsibility. Altering the proposal to require technical/vocational licensure as a pre-professional requisite would be professionally and educationally unseeml. Professional nursing's role is to assume responsibility for providing and evaluating all nursing care in all settings.
REFERENCES


2. Catalogues of Community Colleges in New York State.


Approved by NYSNA Board of Directors - January 1986
# 89 LEGISLATIVE MEETING

NEW YORK STATE NURSES ASSOCIATION
Conference on Entry Into Practice
For Unification and Implementation
August 22 - 23, 1988

Participant List

Evelyn Baker, RN
Public Health Nursing Staff
15, Main Street
Delhi, NY 13753

Patricia Bishop-Marry, RN
Executive Director
Nurses House, Inc.
10 Columbus Circle
New York, NY 10019

Elaine E. Beletz, RN
Associate Professor
Graduate Program
Nursing Administration
College of Nursing
Villanova University
Villanova, PA 19085

Rebecca Bender, RN
Emergency Room Nurse
Canton-Potsdam Hospital
50 Leroy Street
Potsdam, NY 13676

Josephine Bolus, RN
Pediatric Nurse Practitioner
King’s County Hospital
461 Clarkson Avenue
Brooklyn, NY 11203

Kate Brady, RN
Secretary
District 10, NYSNA
Guy Park Avenue
Amsterdam, NY 12010

Harriet Brathwaite, RN
Assistant Professor of Nursing
Long Island University
Brooklyn Center-University Plaza
Brooklyn, NY 11207

Judith Broad, RN
Assistant Dean, Undergraduate Studies
University of Rochester
School of Nursing
Rochester, NY 14642

Carol A. Brooks, RN
Vice President for Nursing Service
Long Island Jewish-Hillside Medical Center
New Hyde Park, NY

Ellen M. Burns, RN
Associate Professor, Nursing
Fulton-Montgomery Community College
Johnstown, NY 12095

Alice Champagne, RN
District 8, NYSNA
101 Beekman Street
Plattsburgh, NY 12901

Jerald S. Cohen, RN
Director of Patient Services
Brookhaven Memorial Hospital
Medical Center Home Health Agency
4 Phyllis Drive
Patchogue, NY 11772

Jeanette C. Coleman, RN
Director of Nursing
SUNY College at Plattsburgh
Hawkins Hall, Room 205
Plattsburgh, NY 12901

Kathleen Collins, RN
Associate Professor
School of Nursing
SUNY, Binghamton
Vestal Parkway
Binghamton, NY 13901

Mary J. Collins, RN
Dean, School of Nursing
SUNY, Binghamton
Vestal Parkway
Binghamton, NY 13901

Lolita Compas, RN
Clinical Instructor-Ed.
Cabrini Medical Center
227 East 19th Street
New York, NY 10003

Connie Cookman, RN
Administrative Director
District 1, NYSNA
1325 North Forest Road
Williamsville, NY 14221

Donna Demarest, RN
Director, RN Program
College of New Rochelle
New Rochelle, NY 10805

William P. Donovan, RN
Nurse Clinician
Nutrition Support
The Mount Sinai Hospital
One Gustave L. Levy Place
New York, NY 10029

Veronica Driscoll, RN
1 Park Lane, West, Apt. 11
Albany, NY 12204

Karen Duffy-Burnin, RN
Chairperson
New York State Nurses for Political Action
5718 Allen Pagan Road
Macedon, NY 14502

Mary Finnick, RN
President
District 1, NYSNA
2248 Ridge Road
Amherst, NY 14226

Shirley Fondiller, RN
Executive Director
MARS
Columbus Circle
New York, NY 10019

Susan Fraley, RN
Director, Prof. Nursing Service
Bellevue Hospital
2210 Troy Road
Schenectady, NY 12301

Louise Gallagher, RN
Associate Professor
SUNY, Potsdam
Kings County Hospital
Villanova University
Potsdam, NY 13676

Sheila Gettellson, RN
Director, Baccalaureate Studies
Adelphi University
Garden City
Long Island, NY 11530

Susan Apatho Glapietro, RN
President
District 16, NYSNA
3 Old Hamaroneck Road, Apt. 10
White Plains, NY 10605

Joan Gilbert, RN
Ulster County Community College
Stone Ridge, NY 12484

Evelyn Gioiella, RN
Dean and Professor, Hunter Coll.
Bellevue School of Nursing
City University of New York
425 East 25 Street
New York, NY 10010

Carolyn Gotzke, RN
Vice President for Nursing
Our Lady of Mercy Med. Inst.
Bronx, NY

Ann Gochtler, RN
Professor of Nursing
Russell Sage College
45 Perry Street
Troy, NY 12180

Carol Ann Grasme, RN
Assistant Director
Quality Assurance
 Creedmoor Psychiatric Center
80-45 Wincherter Blvd.
Queens Village, NY 11429
Jacqueline E. Perley, RN
Tompkins-Cortland Comm. College
170 North Street
Dryden, NY 13053

Elizabeth M. Plummer, RN
Professor of Nursing
Pace University
Bedford Road
Pleasantville, NY 10570

Anne J. Quashen, RN
Executive Director
District 13, NYSNA
200 Park Avenue, E., Rm. 511
New York, NY 10003

Lois J. Ricci, RN
Director of Staff Development
The Hospital
Pearl Street
Sidney, NY 13838

Gail A. Rossettie, RN
State Board for Nursing
State Education Department
Cultural Education Center
Albany, NY 12230

Laura L. Simms, RN
Past President, NYSNA
South Road, Box 126
South Kent, CT 06785

Sadie Smalls, RN
District 13, NYSNA
301 E. 21st Street
New York, NY 10010

Kathleen Sward, RN
Professor and Director
Nursing Education (retired)
Elmira College
Elmira, NY 14901

Mary Ann Valinski, RN
President
District 12, NYSNA
72 Derick Drive
Fishkill, NY 12524

Kattie Washington, RN
Clinician
City Hospital Center
7901 Broadway
Elmhurst, NY 11369

Cathryn A. Welch, RN
Past Executive Director
NYSNA
1113 Western Avenue
Guilderland, NY 12085

Dorothy M. Williams, RN
Nurse Manager, Post Anesthesia Care Unit
Memorial Sloan-Kettering Cancer Center
1275 York Avenue
New York, NY 10021

Dorothy Williams, RN
President
New York State Association of Nurse Anesthetists, Inc.
95F- Enser Road
Eden, NY 14057

Claude Willis, RN
Unit Care Coordinator
Gracie Square Hospital
420 E. 76th Street
New York, NY 10021

Estelle Yahes, RN
President
District 17, NYSNA
6 Quince Lane
Suffern, NY 10901
Updated information about activities to implement changes in educational requirements for nursing licensure in the 50 states is helpful in gaining an accurate picture of progress being made. That progress must be measured with acknowledgement that the history of change in the educational requirements for any profession is a slow and arduous legislative and regulatory process. The attached compilation of the position of the state nurses associations and their implementation activities reflects progress toward upgrading education requirements for practice.

All states have taken a position that change is needed and most have taken some steps toward implementation. Legislation has been drafted in at least eight states, is being drafted in ten other states and regulations are written in two states. North Dakota remains the only state to have standardized nursing education. The titles "Registered Nurse" and "Associate Nurse" have been chosen for two categories of nurses in 22 states. The titles "Registered Nurse" and "Licensed Practical Nurse" were chosen in four states. Five states selected only the title for the professional nurse, two choosing "Registered Nurse" and three choosing "Registered Professional Nurse." Nine states have selected five other titles, leaving ten undecided as to future titles for nurses.

The information was compiled after a review of state newsletters, American Nurses' Association reports and follow-up phone calls to some state nurses associations. Contacts with the other nurses associations would complete this draft report.
Class Licensed Practical Schools by 1982.

Arizona State Nurses' Association
Resolution 1987
Professional Baccalaureate in Nursing Registered Nurse All registered nurses licensed to practice by date of implementation.
Technical Associate Degree in Nursing (Develop separate and distinct exam for licensure)

Arkansas State Nurses' Association
Resolution 1985
Professional Baccalaureate in Nursing Registered Nurse All registered nurses licensed to practice by date of implementation.
Technical Associate Degree in Nursing (Develop separate and distinct exam for licensure)

California Nurses Association
Resolution 1985
Professional Bachelor of Science in Nursing Registered Nurse All licensed individuals would maintain present license and title.
Technical Associate Degree in Nursing Not designated.

Colorado Nurses' Association
Resolution 1967; 1982; 1985
Professional Baccalaureate with major in nursing Registered Nurse All registered nurses licensed by date of implementation.
Technical Associate Degree with major in nursing awarded by a state chartered institution of higher education.

Connecticut Nurses' Association
Resolution 1967; 1975
Professional Baccalaureate Registered Professional Nurse All registered professional nurses licensed by date of implementation.

District of Columbia Nurses' Association, Inc.
Resolution
Professional Baccalaureate Registered Nurse All registered nurses licensed by date of implementation.
Technical Associate Degree

Florida Nurses Association
Resolution 1984
Professional Baccalaureate Registered Professional Nurse Variety of routes to prepare students for initial licensure.
Technical Associate Degree

Georgia Nurses Association
Resolution 1997
Professional Baccalaureate Not addressed. Not addressed.
Technical Associate Degree

1985 - Supported resolution of Licensed Vocational Nurses Association to increase VNs education to the associate degree level.
1986 - Convened task force on entry issue to develop implementation plan.

1985 - Developed scope of practice statement - role and function statements for two levels.
1984 - Planned task force to develop implementation plan.

1984 - Convened task force on licensure issue to develop implementation plan.
1985 - Supported resolution of Licensed Vocational Nurses Association to increase VN education to the associate degree level.
1986 - Convened task force on entry issue to develop implementation plan.

1984 - Lease of implementation.
1986 - No definite plans.
1987 - No target date established.

1984 - Study committee planned to identify scope of practice - educational structure to meet future needs.

# Legislative
<table>
<thead>
<tr>
<th>Year</th>
<th>Legislation Passed</th>
</tr>
</thead>
<tbody>
<tr>
<td>1979</td>
<td>Professional registration for LBN's.</td>
</tr>
<tr>
<td>1985</td>
<td>Practical nurse, licensed Practical Nurse.</td>
</tr>
<tr>
<td>1987</td>
<td>Technical certificate.</td>
</tr>
<tr>
<td>1987</td>
<td>Associate degree.</td>
</tr>
<tr>
<td>1995</td>
<td>Bachelor of science.</td>
</tr>
<tr>
<td>1995</td>
<td>Associate degree prepared for II.</td>
</tr>
</tbody>
</table>

- Professional registration for LBN's.
- Practical nurse, licensed Practical Nurse.
- Technical certificate.
- Associate degree.
- Bachelor of science.
- Associate degree prepared for II.
- Plan to introduce 1996 legislation.
<table>
<thead>
<tr>
<th>Professional Nurse Practitioner</th>
<th>Bachelor's Degree in Nursing Science in professional practice for two years prior to implementation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Registered Nurse (RN)</td>
<td>Bachelor's Degree in Nursing Science in professional practice for two years prior to implementation</td>
</tr>
<tr>
<td>Licensed Practical Nurse (LPN)</td>
<td>Bachelor's Degree in Nursing Science in professional practice for two years prior to implementation</td>
</tr>
<tr>
<td>Certified Nursing Assistant (CNA)</td>
<td>Bachelor's Degree in Nursing Science in professional practice for two years prior to implementation</td>
</tr>
<tr>
<td>Registered Nurse (RN)</td>
<td>Bachelor's Degree in Nursing Science in professional practice for two years prior to implementation</td>
</tr>
<tr>
<td>Licensed Practical Nurse (LPN)</td>
<td>Bachelor's Degree in Nursing Science in professional practice for two years prior to implementation</td>
</tr>
<tr>
<td>Certified Nursing Assistant (CNA)</td>
<td>Bachelor's Degree in Nursing Science in professional practice for two years prior to implementation</td>
</tr>
</tbody>
</table>

In Kentucky, the Board of Nursing is responsible for the regulation of nursing practice and the protection of the public health. The requirements for nursing practice are set by law and are designed to ensure that nurses are qualified and competent to provide safe and effective care to patients.

The Board of Nursing requires that all nurses meet certain educational and experiential requirements to be licensed. These requirements are intended to protect the public by ensuring that nurses have the knowledge and skills necessary to provide safe and effective care.

New requirements for nursing practice were implemented in 1992, and these requirements are designed to ensure that nurses are prepared to meet the needs of patients in today's healthcare environment. The Board of Nursing continues to monitor and update these requirements to ensure that they remain effective and relevant.

In addition to the requirements for nursing practice, the Board of Nursing also regulates the practice of nurse practitioners. Nurse practitioners are advanced practice nurses who have completed a graduate program in nursing and are authorized to provide care independently or in collaboration with a physician. The Board of Nursing requires that nurse practitioners meet certain educational and experiential requirements to be licensed.

The Board of Nursing is committed to ensuring that all nurses and nurse practitioners meet the highest standards of care and that the public is protected from harm. The Board of Nursing continues to work with healthcare providers and other stakeholders to develop and implement policies and procedures that protect the public and enhance the quality of care provided by nurses and nurse practitioners.
<table>
<thead>
<tr>
<th>Year</th>
<th>Event</th>
</tr>
</thead>
<tbody>
<tr>
<td>1963</td>
<td>Professional Nurse Education Act passed.</td>
</tr>
<tr>
<td>1967</td>
<td>Enacted.</td>
</tr>
<tr>
<td>1984</td>
<td>Professional Nurse Education Act passed.</td>
</tr>
<tr>
<td>1986</td>
<td>Enacted.</td>
</tr>
</tbody>
</table>

All licensed practical nurses (LPN) and registered nurses (RN) educated in LPN programs were to take the NCLEX-RN examination. All continuing education and in-service programs for registered nurses were to be accredited. Act became effective July 1, 1989.
<table>
<thead>
<tr>
<th>State</th>
<th>Year 1</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>Missouri</td>
<td>1982</td>
<td>Legislature passed, registration required for entry into professional nursing.</td>
</tr>
<tr>
<td>Missouri</td>
<td>1983</td>
<td>Task Force to promote efforts to develop licensure examination for entry into professional nursing.</td>
</tr>
<tr>
<td>Montana</td>
<td>1983</td>
<td>Task Force to promote efforts to develop licensure examination for entry into professional nursing.</td>
</tr>
<tr>
<td>Nebraska</td>
<td>1983</td>
<td>Task Force to promote efforts to develop licensure examination for entry into professional nursing.</td>
</tr>
<tr>
<td>Nevada</td>
<td>1983</td>
<td>Task Force to promote efforts to develop licensure examination for entry into professional nursing.</td>
</tr>
<tr>
<td>New Hampshire</td>
<td>1983</td>
<td>Task Force to promote efforts to develop licensure examination for entry into professional nursing.</td>
</tr>
<tr>
<td>New Jersey</td>
<td>1983</td>
<td>Task Force to promote efforts to develop licensure examination for entry into professional nursing.</td>
</tr>
<tr>
<td>New York</td>
<td>1983</td>
<td>Task Force to promote efforts to develop licensure examination for entry into professional nursing.</td>
</tr>
</tbody>
</table>

**Technical**
- Associate Degree
- Registered Nurse
- Institution of Higher Learning
- License exam - NCLEX-RN

**Practical**
- Progress to prepare LPN eliminated after implementation (1990)
- Licensed Practical Nurse
- All Licensed Practical Nurses licensed at time of implementation.

### Missouri Nurses Association
- Resolution 1982
- Professional Nurse
- Baccalaureate Degree
- Registered Nurse
- All Registered Nurses licensed on date of implementation.

### Montana Nurses Association
- Resolution 1983
- Professional Nurse
- Baccalaureate Degree
- Registered Nurse
- All Registered Nurses licensed on date of implementation.

### Nebraska Nurses Association
- Resolution 1983
- Professional Nurse
- Baccalaureate Degree
- Registered Nurse
- All Registered Nurses licensed on date of implementation.

### Nevada Nurses Association
- Resolution 1983
- Professional Nurse
- Baccalaureate Degree
- Registered Nurse
- All Registered Nurses licensed on date of implementation.

### New Hampshire Nurses Association
- Resolution 1983
- Professional Nurse
- Baccalaureate Degree
- Registered Nurse
- All Registered Nurses licensed on date of implementation.

### New Jersey Nurses Association
- Resolution 1983
- Professional Nurse
- Baccalaureate Degree
- Registered Nurse
- All Registered Nurses licensed on date of implementation.

### New York Nurses Association
- Resolution 1983
- Professional Nurse
- Baccalaureate Degree
- Registered Nurse
- All Registered Nurses licensed on date of implementation.

### Nevada Nurses Association
- Resolution 1983
- Professional Nurse
- Baccalaureate Degree
- Registered Nurse
- All Registered Nurses licensed on date of implementation.

### New Hampshire Nurses Association
- Resolution 1983
- Professional Nurse
- Baccalaureate Degree
- Registered Nurse
- All Registered Nurses licensed on date of implementation.

### New Jersey Nurses Association
- Resolution 1983
- Professional Nurse
- Baccalaureate Degree
- Registered Nurse
- All Registered Nurses licensed on date of implementation.

### New York Nurses Association
- Resolution 1983
- Professional Nurse
- Baccalaureate Degree
- Registered Nurse
- All Registered Nurses licensed on date of implementation.

### Nevada Nurses Association
- Resolution 1983
- Professional Nurse
- Baccalaureate Degree
- Registered Nurse
- All Registered Nurses licensed on date of implementation.

### New Hampshire Nurses Association
- Resolution 1983
- Professional Nurse
- Baccalaureate Degree
- Registered Nurse
- All Registered Nurses licensed on date of implementation.

### New Jersey Nurses Association
- Resolution 1983
- Professional Nurse
- Baccalaureate Degree
- Registered Nurse
- All Registered Nurses licensed on date of implementation.

### New York Nurses Association
- Resolution 1983
- Professional Nurse
- Baccalaureate Degree
- Registered Nurse
- All Registered Nurses licensed on date of implementation.
<p>| North Dakota Nurses Association | Professional Baccalaureate Registered Nurse All Registered Nurses and Licensed Practical Nurses already licensed are not required to meet new educational requirements. To be approved by State Board for Nursing, educational programs for nursing must offer baccalaureate program to prepare the registered nurse or an associate degree program to prepare the licensed practical nurse. Schools must apply 1987. |
| Oregon Nurses Association | Professional Baccalaureate Not addressed. All Registered Nurses licensed on date of implementation. 1987 - Developed five year implementation plan for Entry into Practice |
| Pennsylvania Nurses Association | Resolution 1978 Support for new levels of practice: Professional Baccalaureate Not addressed. Not addressed. 1987 - Legislation passed to prevent administrative action to establish new levels of nursing to establish requirements for entry into nursing. |</p>
<table>
<thead>
<tr>
<th>State</th>
<th>Resolution Year(s)</th>
<th>Professional Degree</th>
<th>Registered Nurse</th>
<th>Technical Degree</th>
<th>Support Concept</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rhode Island Nurses' Association</td>
<td>1966</td>
<td>Baccalaureate</td>
<td>Not addressed</td>
<td>Not addressed</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Technical</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Associate Degree in Nursing</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Associate Degree in Nursing</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Associate Degree in Nursing</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>South Carolina Nurses' Association</td>
<td>1966</td>
<td>Bachelor of Science in Nursing</td>
<td>Registered Nurse</td>
<td>Associate Degree in Nursing</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Technical</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Associate Degree in Nursing</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Associate Degree in Nursing</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Associate Degree in Nursing</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>South Dakota Nurses' Association</td>
<td>1978; 1986</td>
<td>Baccalaureate</td>
<td>Registered Nurse</td>
<td>Associate Degree in Higher Education Setting</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Technical</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Associate Degree in Higher Education Setting</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Associate Degree in Higher Education Setting</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tennessee Nurses' Association</td>
<td>1985</td>
<td>Baccalaureate</td>
<td>Registered Nurse</td>
<td>Associate Degree in Nursing</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Technical</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Associate Degree in Nursing</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Associate Degree in Nursing</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Associate Degree in Nursing</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Texas Nurses Association</td>
<td>1984; 1986</td>
<td>Baccalaureate with major in Nursing</td>
<td>Registered Nurse</td>
<td>Associate Degree in Nursing</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Technical</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Associate Degree in Nursing</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Associate Degree in Nursing</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Associate Degree in Nursing</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Utah Nurses' Association</td>
<td>1985</td>
<td>Baccalaureate</td>
<td>Not addressed</td>
<td>Not addressed</td>
<td>Support Concept</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Technical</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Associate Degree in Nursing</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Utah State Board of Nursing</td>
<td>Study 1985</td>
<td>Baccalaureate</td>
<td>No position</td>
<td>Not addressed</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Technical</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Less than Baccalaureate</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Vermont State Nurses Association, Inc.</td>
<td></td>
<td>Baccalaureate</td>
<td>Not addressed</td>
<td>Support Concept</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Technical</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Associate Degree in Nursing</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Virginia Nurses' Association</td>
<td></td>
<td>Baccalaureate</td>
<td>Not addressed</td>
<td>Support Concept</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Technical</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Associate Degree in Nursing</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Washington State Nurses Association</td>
<td></td>
<td>Baccalaureate</td>
<td>Not addressed</td>
<td>technically</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Technical</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Associate Degree in Nursing</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>West Virginia Nurses' Association</td>
<td></td>
<td>Baccalaureate</td>
<td>Not addressed</td>
<td>Support Concept</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Technical</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Associate Degree in Nursing</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Legend:
- **Professional**: Baccalaureate
- **Technical**: Associate Degree
- **Registered Nurse**: Licensed
- **Support Concept**: Appointed task force to study and education requirements for the three categories and report 1987.
- **Legislation passed in 1986 prohibited State Board from changing requirements for licensure of RN or LPN.**
- **Plan to introduce legislation in 1989.**
- **Developed a competency base model for nursing education.**
- **Defined legislative mechanism.**

# Legislation
<table>
<thead>
<tr>
<th>Wyoming Nurses' Association</th>
<th>Professional</th>
<th>Registered Professional Nurse</th>
<th>All registered nurses licensed on date of implementation.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Baccalaureate, Masters or Doctorate in nursing from a college or university</td>
<td>Registered Professional Nurse</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Associate degree in nursing.</td>
<td>Registered Associate Nurse</td>
</tr>
<tr>
<td></td>
<td>Practical</td>
<td>LPN schools should not be licensed to admit students after defined date.</td>
<td>Licensed Practical Nurse</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Licensed practical nurses will continue to practice under current definition.</td>
<td>Registered Practical Nurse</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Wyoming Nurses' Association</th>
<th>Professional</th>
<th>Registered Nurse</th>
<th>Not addressed.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Baccalaureate with a major in nursing.</td>
<td>Registered nurse</td>
<td>Not addressed.</td>
</tr>
<tr>
<td></td>
<td>Technical</td>
<td>Associate with a major in nursing.</td>
<td>No consensus on title.</td>
</tr>
</tbody>
</table>

1986-Appointed Task Force to develop recommendation for a statewide master plan for implementing 2 levels of entry into practice. Requested Attorney General's opinion on whether the education requirements for nursing practice can be altered through changes in the rules and regul