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NYSNA
General Info

JAN 12 1987

State of North Dakota
SUPREME COURT
BISMARCK

CLERK OF THE SUPREME COURT
MRS. LUELLE DUNN

January 8, 1987

Mr. Gary Lee
Attorney at Law
Bosard, McCutcheon and Rau
P.O. Box 939
Minot, ND 58702-0939

Mr. Calvin N. Rolfson
Special Assistant Attorney General
P.O. Box 2712
Bismarck, ND 58502

RE: Trinity Medical Center et al v.
North Dakota Board of Nursing et al
#11,257

Gentlemen:

The Supreme Court has today rendered an opinion in this case wherein the Supreme Court affirms the trial court in its answers to both certified questions. Neither party will recover costs.

A copy of the decision of the Court is enclosed.

Sincerely yours,

Luella Dunn
Luella Dunn
Clerk
Supreme Court

LD:ls: @
Enclosure

cc and encl: The Honorable Bert L. Wilson
Lundberg, Nodland, Lucas and Schulz
Mr. Larry Kraft
Zuger and Bucklin
Vedder, Price, Kaufman and Kamholz

*Enclosed News release regarding
Supreme Court Opinion - It certainly
is a super opinion!!
Betty -*

North Dakota
Board of Nursing

JAN 12 1987

Telephone
(701) 224-2974

Kirkwood Office Tower
7th & Arbor Ave.
Suite 504
Bismarck, North Dakota
58501



FOR IMMEDIATE RELEASE

January 9, 1987

Yesterday the North Dakota Supreme Court issued its opinion on the case of Trinity Medical Center et al v. North Dakota Board of Nursing et al. The opinion affirms the trial court in its answers to both certified questions.

The certified questions are as follows:

- 1) whether the authority given by the state legislature to the North Dakota Board of Nursing constitutes a standardless delegation of legislative authority; and
- 2) whether the nursing board usurped purely legislative powers in promulgating the new requirements for nursing education programs.

The Honorable Bert Wilson, Judge of the District court of Northwest Judicial District answered both questions "no". Chief Justice Ralph Erickstad, speaking for a unanimous Supreme Court, wrote that "Section 43-12.1-08(6) is not unconstitutional as unlawful delegation of legislative power" and "the Board, through its rule-making power in determining who may recommend a person to take the test, has not usurped legislative power."

In the opinion, Chief Justice Erickstad wrote that "It requires no leap of logic to equate high standards of nursing in the interest of public health with a requirement that those who train nurses be accredited pursuant to appropriate authority and that applicants for licensure in nursing receive an appropriate degree before being permitted to write an examination for licensure." He further stated that "The Board has the authority pursuant to Section 43-12.1-08(6) to direct that only associate and baccalaureate degree graduates may sit for practical and registered nursing license examinations respectively." The opinion was issued by all five justices of the North Dakota Supreme Court without dissent.

The opinion upholds the decisions of the Honorable Bert Wilson regarding the certified questions and affirms the delegation of standard setting by the legislature to the North Dakota Board of Nursing. The text of the opinion includes reference to the broad standards included in the Nurse Practices Act which give direction to the Board in its rule-making authority.

The effect of the N.D. Supreme Court opinion is to allow the Board of Nursing to enforce the nursing education rules found in the North Dakota Administrative Code 54-03.1. Those rules will affect only those persons enrolling in nursing programs after January 1, 1987, and have no effect on students currently enrolled in board approved nursing programs or currently licensed nurses. All North Dakota nursing programs with the exception of the two programs involved in the lawsuit have voluntarily begun working towards compliance with the new administrative rules.

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THE NEW YORK STATE NURSES ASSOCIATION

*1985 Position Statement on Continuing Education
and Practice Competency*

Commitment to lifelong learning is a fundamental responsibility of the nursing profession.

In a rapidly changing technological society, information processing through participation in continuing education is essential in maintaining and increasing competence in the provision of quality nursing care.

It is the position of The New York State Nurses Association Council on Continuing Education that professional nurses have primary responsibility for their own continuing education within the profession. However, employing agencies can provide support for lifelong learning by endorsing continuing education for career ladder mobility and giving recognition on performance evaluations.

Continuing education is fostered in an environment which: 1) is based on principles of adult learning; 2) makes use of independent study modules; 3) provides opportunities for attendance at conferences, workshops, conventions and participation in agency committees; and, 4) endorses self directed learning and advanced formal education.

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THE NEW YORK STATE NURSES ASSOCIATION

Membership in
 Clinical and Functional Units

I. RECENT BYLAW PROVISIONS

A. Bylaws as amended October 9, 1975

"Article XVIII - Organizational Units
 Section 1.

C. Qualified members and associates may belong to two
 organizational units."

[organizational units included Community Health, Gerontological,
 Maternal Child Health, Medical-Surgical, and Psychiatric-
 Mental Health Nursing Practice Conference Groups and Clinical
 Nursing Specialists, Deans, Directors and Faculty Nursing
 Education Programs, Directors, Associates and Assistants,
 Nursing Practice and Services and Private Nurse Practitioners
 Specialty Groups]

B. Bylaws as amended October 16, 1977

"Article XV - Organizational Units
 Section 1.

C. Qualified members may belong to two organizational units."

[in 1977 organizational units were as 1975 Bylaws except for
 elimination of Clinical Nursing Specialists and addition of
 Primary Care Practitioners; in 1978 the School Nurse Teachers
 and Providers of Continuing Education/Staff Development were
 added as Specialty Groups and the Private Nurse Practitioners
 were eliminated as a Specialty Group]

C. Bylaws adopted October 21, 1980

"Article VIII - Clinical and Functional Units
 Section 4.

Members may hold office in only one clinical and one functional
 unit."

[the units included were Clinical Practice Units essentially the
 same as the Nursing Practice Conference Groups and Functional
 Units the same as the former Specialty Groups]

D. Bylaws as amended October 22, 1983

"Article XII - Nominations
 Section 3.

The Nominating Committee shall prepare a ticket of at least two
 members for each office to be filled. Members shall be eligible
 to serve in only one elective position in NYSNA at any one time."
 The 1980 Article VIII, Section 4 was deleted.
 [the units included were the same as those included in 1980]

II. MEMBERSHIP IN CLINICAL PRACTICE UNITS NOVEMBER 1, 1985

Numbers and Percent of NYSNA Members in CPUs

	Category of Membership							
	Dist. and NYSNA		NYSNA		Bi- Level		Total	
	No.	%	No.	%	No.	%	No.	%
Community Health	2,155	16.3	1,696	9.9	2	-	3,853	12.7
Gerontological	1,014	7.7	667	3.9	3	-	1,684	5.5
Parent-Child Health	2,066	15.6	2,465	14.4	4	-	4,535	14.9
Medical-Surgical	5,125	38.8	7,483	43.7	15	-	12,623	41.6
Psychiatric-Mental Health	1,050	7.9	770	4.5	1	-	1,821	6.0
No Response	2,179	16.5	4,687	27.4	3	-	6,869	22.6
Total	13,589	102.8*	17,768	103.8*	28	-	31,385*	103.3*
Mbrshp.	13,220		17,133				30,378	

*Some members (1007) have chosen more than 1 CPU; % figures are calculated on actual number of members and are spurious but provide an approximation.

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III. MEMBERSHIP IN FUNCTIONAL UNITS NOVEMBER 1, 1985

Number and Percent of NYSNA Members in FUs

	Category of Membership							
	Dist. and NYSNA		NYSNA		Bi-Level		Total	
	No.	%	No.	%	No.	%	No.	%
Dir., Assoc., Asst., Nsg., Prac. & S.	1,745	13.2	1,126	6.6	0	-	2,871	9.5
Deans, Dir., Fac., Nsg. Ed.	832	6.3	127	0.7	0	-	959	3.2
Prim. Care Practitioner	3,158	23.9	4,046	23.6	0	-	7,206	23.7
CE/SD	713	5.4	376	2.2	2	-	1,089	3.6
School Nurse Tchrs.	116	0.9	162	1.0	0	-	271	0.9
No Response	6,656	50.3	11,296	65.9	23	-	17,975	59.1
Total	13,220	100.0*	17,133	100.0*	25		30,378	100.0*
Mbrshp.	13,220		17,133		25		30,378*	

*Members do not select more than 1 Functional Unit. Therefore numbers of members match total numbers in Functional Units. Percents are valid.

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American Nurses' Association, Inc.

2420 Pershing Road, Kansas City, Missouri 64108

(816) 474-5720

Eunice R. Cole, R.N.
President

Judith A. Ryan, Ph.D., R.N.
Executive Director

UCI 27-188



Washington Office:
1101 14th Street, N.W.
Suite 200
Washington, D.C. 20005
(202) 789-1800

October 22, 1985

Martha Orr, M.N., R.N.
Executive Director
New York State Nurses Association
2113 Western Avenue
Guilderland, New York 12084

Dear Martha:

In reference to your telephone call of October 16, 1985, I am providing you with the context of the ANA Board of Directors policies on conducting business between board meetings.

- Between meetings of the Board of Directors, board action may be required on various items of business. To permit efficient action on items of business requiring urgent attention, the president may request a referendum vote. The Board of Directors will ratify the action taken by referendum at the next regularly scheduled meeting of the board.
- Between regularly scheduled meetings, discussion or action may be required by the board, the executive committee, or the committees of the board on various items of business. To permit such discussion or action on items of business requiring urgent attention, the board or its committees may choose to hold a conference call. The Board of Directors or board committees will receive a written report of the conference call at its next regularly scheduled meeting and will formally ratify any actions approved during the conference call.
- The powers transferred by the Board of Directors to the Executive Committee shall be:
 - 1) to transact business of an emergency nature between board meetings
(Business of an emergency nature is defined to be a combination of circumstances of such significance that delay would have impact on the organization and affect its ongoing business.)
 - 2) to transact business which the Board of Directors delegates to the committee
(The Board of Directors may also take formal action to assign disposition of a matter to the executive committee that may not require the attention of the entire board.)

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- 2 -

Board members shall receive a copy of the summary of the executive committee actions immediately and a copy of the executive committee minutes for information purposes as soon as possible.

I hope these policies will be helpful to you as you prepare policies for your board.

Sincerely,

Kaye

Kaye Sullivan
Director
Governance Support Services

KS:mr
bd15x01

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NYSNA Membership Demographic Reports

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NYSNA Membership Demographic Reports

SUMMARY

This report was compiled to provide a better understanding of who our members are. The first section includes some trends in the membership from 1975-1980, the second section compares the membership to the general RN population of the state and country, and the third section looks at the membership in bargaining units by district and E & GW region. The Appendix contains supplemental tables. The narrative is limited to pointing out some of the more meaningful changes and/or aspects to be noted in the tables. The data give rise to a variety of explanations and questions about the changes which have occurred in membership and the differences which exist between the members and the general RN population.

Table 1 shows the change in total NYSNA membership by age groupings - 1975-1980. Since 1975 there has been a drop in members ages 20-29 and an increase in members ages 30-39 and 40-49.

Table 2 breaks the membership down by position title. It shows quite clearly that there has been a drop in the percentage of members who consider themselves to be nurse managers and educators and an increase in members who are staff nurses. Tables 11 and 12 in the Appendix break the nurse managers and educators group into its component positions. These tables show, among other things, that there has been a large loss of faculty.

Table 3, NYSNA Members by Highest Degree Held, demonstrates the expected decrease in members with diploma as their highest degree and increases in members holding Associate, Baccalaureate, Masters and Doctorate degrees. Although there has been a decrease since 1975 in the no response rate, the rate remains higher than any other no response rates for the other trends in membership statistics. An even higher rate occurs in Table 16 which compares new members to total membership by highest degree held. Here the no response rate for new members surpasses 30%.

Table 4 compares total NYSNA members to NYS and U.S. RNs by age as of 1977. The membership is similar in age to other RNs in the state and country.

Table 5 shows how the NYSNA total membership compares with other RNs in the state and country in terms of highest degree held. Even when the high NYSNA no response rate is taken into account, it appears the membership is better educated than the general RN population.

Table 6 indicates that some differences exist between the membership and the general RN population when comparing them by employment setting.

Table 1

NYSNA MEMBERS BY AGE
1975 - 1980

Age	10/31/75	5/14/76	10/28/77	9/29/78	11/2/79	11/6/80
	N=27,294 %	N=27,345 %	N=27,431 %	N=29,187 %	N=28,236 %	N=27,578 %
Under 20	0.1	0.1	0.1	0.1	0.1	0.1
20-29	27.2	25.0	24.9	24.5	25.6	23.9
30-39	25.4	26.8	28.0	27.5	27.9	27.8
40-49	18.6	19.1	18.9	18.3	19.2	19.7
50-59	13.7	13.9	13.3	12.6	13.0	13.2
60-69	5.7	5.6	5.0	4.9	5.0	5.1
70-79	0.7	0.9	0.9	0.9	1.1	1.2
80 & Over	0.2	0.1	0.2	0.2	0.1	0.2
No Response	8.4	8.5	8.7	11.0	8.0	8.8
Total	100.0	100.0	100.0	100.0	100.0	100.0

SAS/l's
1/15/81

Table 2

NYSNA MEMBERS BY POSITION TITLE
1975 - 1980

Position ¹	10/31/75	5/14/76	10/28/77	9/29/78	11/2/79	11/6/80
	N=27,294 %	N=27,345 %	N=27,431 %	N=29,187 %	N=28,236 %	N=27,578 %
Nrs. Mgrs. & Educators	22.0	20.9	18.4	17.0	16.3	15.9
Head Nrs. & Ass't. Head Nrs.	13.8	13.7	13.1	12.0	11.7	11.4
Staff Nurse	43.0	44.3	47.9	48.7	51.9	51.3
Others	11.2	11.2	10.3	11.2	10.1	9.8
No Response	10.0	9.9	10.3	11.1	10.0	11.6
Total	100.00	100.0	100.0	100.0	100.0	100.0

¹See Position Title Key

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Table 3

NYSNA MEMBERS BY HIGHEST DEGREE HELD
1975 - 1980

Degree	10/31/75	5/14/76	10/28/77	9/29/78	11/2/79	11/6/80
	N=27,294 %	N=27,345 %	N=27,431 %	N=29,187 %	N=28,236 %	N=27,578 %
Diploma	38.2	37.5	34.3	30.9	31.9	30.9
Associate	13.4	14.0	14.1	14.7	16.1	16.5
Bacc. Nursing	16.8	17.0	18.0	18.2	19.5	19.2
Bacc. Other	3.8	3.8	5.4	6.0	6.5	6.8
Masters-Nrsg.	7.8	7.8	7.7	7.5	7.9	8.1
Masters-Other	2.0	1.9	2.6	2.7	2.8	3.0
Doctorate	0.6	0.6	0.6	0.7	0.7	0.8
No Response	17.4	17.4	17.3	19.3	14.6	14.7
Total	100.0	100.0	100.0	100.0	100.0	100.0

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1/15/81

Table 4

TOTAL U.S. RNs, EMPLOYED U.S. RNs, NYS RESIDENT RNs,
NYS EMPLOYED RNs, NYSNA MEMBERS
% BY AGE - 1977

Age	U.S. RNs	U.S. Employed RNs	N.Y.S. Resident RNs	N.Y.S. Employed RNs	NYSNA Members
	N=1,375,208 %	N=958,308 %	N=132,209 %	N=98,667 %	N=27,431 %
Under 29	22.7	28.2	22.5	26.4	25.0
30-39	25.9	26.9	28.5	29.5	28.0
40-49	19.4	20.6	20.7	21.8	18.9
50-59	16.1	16.1	16.1	15.5	13.3
60 & Over	9.8	5.9	10.3	5.4	6.1
No Response	6.1	2.3	1.9	1.4	8.7
Total	100.0	100.0	100.0	100.0	100.0

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1/15/81

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General Info

Table 5

TOTAL U.S. RNs, EMPLOYED U.S. RNs, NYS RESIDENT RNs,
 NYS EMPLOYED RNs, NYSNA MEMBERS
 % BY HIGHEST DEGREE HELD - 1977

Degree	U.S. RNs	U.S. Employed RNs	N.Y.S. Resident RNs	N.Y.S. Employed RNs	*NYSNA Members
	N=1,375,208 %	N=958,308 %	N=132,209 %	N=98,667 %	N=27,431 %
Diploma	59.8	60.5	60.1	57.4	34.3
Associate	12.2	14.9	14.2	16.4	14.1
Bacc. Nursing	15.0	16.5	14.5	15.2	18.0
Bacc. Other	3.1	3.2	4.5	4.9	5.4
Masters-Nrsg.	2.4	2.8	3.6	3.8	7.7
Masters-Other	1.4	1.4	1.9	1.8	2.6
Doctorate	0.2	0.2	0.3	0.2	0.6
No Response	5.9	0.5	0.9	0.3	17.3
Total	100.0	100.0	100.0	100.0	100.0

*NOTE: Higher "No Response" for NYSNA members should be taken into account when comparing data.

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Table 6

EMPLOYED U.S. RNs, NYS EMPLOYED RNs, NYSNA MEMBERS
 % BY EMPLOYMENT SETTING - 1977

Setting	Employed U.S. RNs (Adj.)	Employed NYS RNs	NYSNA Members
	N=1,028,000 %	N=98,667 %	N=27,431 %
Hospital	65.9	63.0	70.4
Nursing Home	7.7	8.2	3.1
School of Nursing	3.4	3.0	3.8
Private Practice	2.8	5.8	1.2
Public Health	5.6	5.1	3.7
School Health	3.5	4.7	0.5
Occupational Health	2.2	2.1	0.4
Phys. or Dent. Office	6.3	4.0	0.3
Self Employed	0.4	0.4	NA
Ambulatory Care	NA	NA	NA
Other	2.2	2.3	4.7
No Response	-	1.4	11.9
Total	100.0	100.0	100.0

SAS/LS
1/15/81

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General Info

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 NYSNA
 General Info

Table 7

NYSNA NURSE MANAGERS & EDUCATORS &
 % OF NYSNA MEMBERSHIP
 1975 - 1980

Position	10/31/75 N=27,294	5/14/76 N=27,345	10/28/77 N=27,431	9/29/78 N=29,187	11/2/79 N=28,236	11/6/80 N=27,578
Dir. of Nrsg. Srvc. %	397 1.4	372 1.4	318 1.2	306 1.0	280 1.0	283 1.0
Dean or Dir. Nrsg. Ed. %	80 0.3	61 0.2	57 0.2	47 0.2	54 0.2	56 0.2
Dir. of Nrsg. Srvc. & Education (dual appt.) %	12 0.04	6 0.02	4 0.01	8 0.02	13 0.05	23 0.08
Ass't. Dir. Nrsg. Srvc. or Ass't. Dir. Nrsg. Ed. %	622 2.3	558 2.0	491 1.8	395 1.4	382 1.3	341 1.2
Faculty-Nrsg. Ed. %	1308 4.8	1211 4.4	991 3.6	973 3.3	816 2.9	795 2.9
Clinical Nurse Spec. Nurse Clinician %	300 1.1	306 1.1	330 1.2	323 1.1	289 1.0	328 1.2
Supervisor; Ass't. Sprvs. Public Hlth. Emp., etc. %	2839 10.4	2755 10.1	2507 9.1	2567 8.8	2374 8.4	2195 8.0
Supervisor - Instructor (dual appt.) %	10 0.04	8 0.03	11 0.04	17 0.06	11 0.04	18 0.06
Inservice Ed. (all positions) %	441 1.6	430 1.6	326 1.2	312 1.1	390 1.4	352 1.3
Academic Dean %	2 0.007	2 0.007	3 0.01	3 0.01	4 0.01	6 0.02
Sub-Total %	6011 22.0	5709 20.9	5038 18.4	4951 17.0	4613 16.3	4397 15.9

SAS/1s
 2/2/81

Table 8

% CHANGE IN MEMBERSHIP OF NYSNA
 NURSE MANAGERS AND EDUCATORS 1975 - 1980

Position	% Change of Share of Total NYSNA Membership 1975 - 1980	% Change of Difference in Actual Numbers of Managers
	%	%(n)*
Director of Nursing	-28.6	-28.7 (397)
Dean or Director Nrsg. Ed.	-33.3	-30.0 (80)
Dir. of Nrsg. Srvc. & Education (dual appt.)	+50.0	+47.8 (23)
Ass't. Dir. Nrsg. Srvc. or Ass't. Dir. Nrsg. Ed.	-47.8	-45.2 (622)
Faculty - Nursing Ed.	-39.6	-39.2 (1308)
Clinical Nurse Spec. Nurse Clinician	+8.3	+8.5 (328)
Supervisor; Ass't. Sup.; Pub. Hlth. Emp., etc.	-23.1	-22.7 (2839)
Supervisor - Instructor (dual appt.)	+33.3	+44.4 (18)
Insrvc. Ed. (all positions)	-18.8	-20.2 (441)
Academic Dean	+65.0	+66.6 (6)
All Nrs. Mgrs. & Educators	-27.7	-26.8 (6601)

*n = larger of the 1975/1980 figures

SAS/1s
 2/2/81

Table 9

NYSNA MEMBERS BY EMPLOYMENT SETTING

1975 - 1980

Setting	10/31/75	5/14/76	10/28/77	9/29/78	11/2/79	11/6/80
	N=27,294 %	N=27,345 %	N=27,431 %	N=29,187 %	N=28,236 %	N=27,578 %
Hospital	68.8	69.4	70.4	68.8	71.4	70.5
Nursing Home	3.3	3.1	3.1	2.9	2.8	2.9
School of Nursing	4.9	4.6	3.8	3.5	3.5	3.5
Private Practice	1.7	1.6	1.2	1.1	1.0	1.0
Public Health	3.9	3.7	3.7	3.6	3.8	3.9
School Health	0.5	0.5	0.5	0.9	0.9	0.8
Occupational Health	0.4	0.4	0.4	0.3	0.3	0.3
Phys. or Dent. Office	0.4	0.3	0.3	0.3	0.3	0.3
Ambulatory Care	NA	NA	NA	NA	1.0	1.4
Other	4.6	4.6	4.7	4.6	3.6	3.1
No Response	11.5	11.8	11.9	14.0	11.4	12.3
Total	100.0	100.0	100.0	100.0	100.0	100.0

SAS/1s
1/15/81

Table 10

NYSNA MEMBERSHIP BY EMPLOYMENT STATUS

1975 - 1980

Status	10/31/75	5/14/76	10/28/77	9/29/78	11/2/79	11/6/80
	N=27,294 %	N=27,345 %	N=27,431 %	N=29,187 %	N=28,236 %	N=27,578 %
Full Time	76.2	75.7	75.4	73.0	75.8	74.3
Part Time	9.8	10.0	9.5	9.5	9.8	10.3
Unemployed	4.5	4.7	5.2	4.9	5.7	5.7
No Response	9.5	9.6	9.9	12.6	8.7	9.7
Total	100.0	100.0	100.0	100.0	100.0	100.0

SAS/1s
1/19/81

NYSNA
 Central File
 # 79

NEW MEMBERS COMPARED TO TOTAL MEMBERSHIP

Table 11

QUARTERLY PERCENT BY:

AGE

Age	1st Quarter 11/79-1/80		2nd Quarter 2/80-4/80		3rd Quarter 5/80-7/80		4th Quarter 8/80-10/80	
	New Members N = 1924 %	Total Mbrshp. N = 27941 %	New Members N = 1537 %	Total Mbrshp. N = 28108 %	New Members N = 1449 %	Total Mbrshp. N = 27866 %	New Members N = 1691 %	Total Mbrshp. N = 27578 %
Under 20	0.2	0.8	0.1	0.8	0.1	0.1	0.1	0.1
20-29	35.5	23.3	32.7	24.0	37.1	24.0	34.4	23.9
30-39	28.0	28.0	28.1	28.2	24.7	28.0	22.9	27.8
40-49	12.0	19.9	13.3	19.0	10.6	19.7	12.9	19.7
50-59	4.9	13.4	6.6	13.3	6.2	13.3	5.0	13.2
60-69	1.4	5.4	1.8	5.3	1.4	5.2	1.5	5.1
70-79	0.2	1.0	0.3	1.2	0.1	1.2	0.1	1.2
80 & Over	0.2	0.2	0.0	0.2	0.0	0.2	0.1	0.2
No Response	17.6	8.0	17.1	8.0	19.8	8.3	23.0	8.8
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

SAS/lis
1/7/81

NEW MEMBERS COMPARED TO TOTAL MEMBERSHIP

Table 12

QUARTERLY PERCENT BY:

HIGHEST DEGREE HELD

Degree	1st Quarter 11/79-1/80		2nd Quarter 2/80-4/80		3rd Quarter 5/80-7/80		4th Quarter 8/80-10/80	
	New Members N = 1924 %	Total Mbrshp. N = 27941 %	New Members N = 1537 %	Total Mbrshp. N = 28108 %	New Members N = 1449 %	Total Mbrshp. N = 27866 %	New Members N = 1691 %	Total Mbrshp. N = 27578 %
Diploma	18.6	31.8	21.3	31.6	18.2	31.3	18.0	30.9
Associate	20.7	16.3	18.7	16.3	18.8	16.4	17.1	16.5
Bacc. - Nursing	18.8	19.3	18.0	19.3	20.1	19.4	19.5	19.2
Bacc. - Other	4.9	6.5	5.7	6.7	5.9	6.7	5.6	6.8
Masters - Nursing	6.0	8.0	5.1	8.0	5.4	8.0	5.3	8.1
Masters - Other	2.6	2.8	2.7	2.8	2.1	2.9	2.1	3.0
Doctorate	0.3	0.7	0.6	0.8	0.3	0.8	1.0	0.8
No Response	28.1	14.6	27.9	14.5	29.2	14.5	31.4	14.7
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

SAS/lis
1/6/81

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Table 13

NEW MEMBERS COMPARED TO TOTAL MEMBERSHIP

QUARTERLY PERCENT BY:

EMPLOYMENT STATUS

Status	1st Quarter 11/79-1/80		2nd Quarter 2/80-4/80		3rd Quarter 5/80-7/80		4th Quarter 8/80-10/80	
	New Members	Total Mbrshp.	New Members	Total Mbrshp.	New Members	Total Mbrshp.	New Members	Total Mbrshp.
	N = 1924 %	N = 27941 %	N = 1537 %	N = 28108 %	N = 1449 %	N = 27866 %	N = 1691 %	N = 27578 %
Full Time	65.2	75.5	62.1	75.4	62.0	75.0	60.0	74.3
Part Time	11.5	9.9	13.2	10.0	12.6	10.2	11.2	10.3
Unemployed	2.8	5.8	3.4	5.7	3.4	5.7	2.5	5.7
No Response	20.5	8.8	21.3	8.9	22.0	9.1	26.4	9.7
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

SAS/l's
1/7/81

NEW MEMBERS COMPARED TO TOTAL MEMBERSHIP

Table 14

QUARTERLY PERCENT BY:

POSITION TITLE

Position ¹	1st Quarter 11/79-1/80		2nd Quarter 2/80-4/80		3rd Quarter 5/80-7/80		4th Quarter 8/80-10/80	
	New Members	Total Mbrshp.	New Members	Total Mbrshp.	New Members	Total Mbrshp.	New Members	Total Mbrshp.
	N = 1924 %	N = 27941 %	N = 1537 %	N = 28108 %	N = 1449 %	N = 27866 %	N = 1691 %	N = 27578 %
Nurse Mgrs. & Ed.	8.4	15.9	10.2	15.9	9.0	15.9	9.3	16.0
Head Nurse & Ass't. Head Nurse	3.5	11.6	4.7	11.5	3.0	11.4	4.1	11.4
Staff Nurse	56.5	52.2	52.5	52.1	55.4	51.7	51.5	51.2
Others	5.4	9.9	6.2	9.8	6.4	9.9	4.9	9.9
No Response	26.2	10.4	26.4	10.7	26.2	11.1	30.2	11.5
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

¹See position title keySAS/l's
1/7/81

10/5/80
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Table 15

NEW MEMBERS COMPARED TO TOTAL MEMBERSHIP

QUARTERLY PERCENT BY:
EMPLOYMENT SETTING

Setting	1st Quarter	11/79-1/80	2nd Quarter	2/80-4/80	3rd Quarter	5/80-7/80	4th Quarter	8/80-10/80
	New Members N = 1924 %	Total Mbrshp. N = 27941 %	New Members N = 1537 %	Total Mbrshp. N = 28108 %	New Members N = 1449 %	Total Mbrshp. N = 27866 %	New Members N = 1691 %	Total Mbrshp. N = 27578 %
Hospital	67.9	71.5	64.0	71.3	65.1	71.2	60.3	70.5
Nursing Home	3.0	2.9	2.6	2.9	1.9	2.8	3.2	2.9
School of Nursing	2.0	3.4	2.3	3.4	1.7	3.4	3.1	3.5
Private Practice	0.4	1.0	0.8	1.0	0.8	1.0	0.6	1.0
Public Health	2.4	3.7	4.3	3.9	3.9	3.9	3.2	3.9
School Health	0.4	0.8	0.4	0.9	0.3	0.8	0.4	0.8
Occupational Health	0.3	0.3	0.0	0.3	0.3	0.3	0.1	0.3
Phys. or Dent. Office	0.1	0.3	0.1	0.3	0.0	0.3	0.1	0.3
Ambulatory Care	1.4	1.2	1.8	1.2	1.9	1.3	2.1	1.4
Other	0.8	3.4	0.8	3.3	0.6	3.2	0.5	3.1
No Response	21.3	11.5	22.9	11.5	23.5	11.8	26.4	12.3
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

SAS/1s
1/5/81

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ADVANCE PAY DELETIONS 11/79 - 10/80 AS
COMPARED TO TOTAL ADVANCE PAY MEMBERSHIP (10/80)
BY AGE

Table 16

Age	Total Advance Pay Deletions 11/79 to 10/80		Total Advance Pay Membership in Each Category	
	NYSNA N = 1558 %	Total (NYSNA, BI & TRI Level) N = 3944 %	NYSNA N = 5396 %	Total (NYSNA, BI & TRI Level) N = 13585 %
Under 20	.0	.0	.04	.05
20-29	27.5	30.4	20.5	23.2
30-39	34.2	27.4	33.3	25.8
40-49	18.6	17.9	22.9	19.8
50-59	10.5	12.0	13.6	15.8
60-69	3.5	5.0	3.7	8.0
70-79	0.2	1.3	0.1	2.3
80 & Over	.0	.05	.0	0.2
No Response	5.5	6.0	5.8	4.7
Total	100.0	100.0	100.0	100.0

SAS/1s
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 ADVANCE
 PAY DELETIONS

Table 17

ADVANCE PAY DELETIONS 11/79 - 10/80 AS
 COMPARED TO TOTAL ADVANCE PAY MEMBERSHIP (10/80)
 BY HIGHEST DEGREE HELD

Degree	Total Advance Pay Deletions 11/79 to 10/80		Total Advance Pay Membership in Each Category	
	NYSNA	Total (NYSNA, BI & TRI Level)	NYSNA	Total (NYSNA, BI & TRI Level)
	N = 1558 %	N = 3944 %	N = 5396 %	N = 13585 %
Diploma	35.1	23.4	40.4	28.6
Associate	17.7	13.5	16.1	11.6
Bacc. - Nursing	20.0	26.6	18.5	23.0
Bacc. - Other	7.5	7.2	8.1	7.5
Masters - Nursing	2.8	12.4	2.6	14.3
Masters - Other	3.0	4.5	1.7	4.5
Doctorate	0.0	0.9	.05	1.7
No Response	13.8	11.5	12.5	8.7
Total	100.0	100.0	100.0	100.0

Table 18

ADVANCE PAY DELETIONS 11/79 - 10/80 AS
 COMPARED TO TOTAL ADVANCE PAY MEMBERSHIP (10/80)
 BY EMPLOYMENT STATUS

Status	Total Advance Pay Deletions 11/79 to 10/80		Total Advance Pay Membership in Each Category	
	NYSNA	Total (NYSNA, BI & TRI Level)	NYSNA	Total (NYSNA, BI & TRI Level)
	N = 1558 %	N = 3944 %	N = 5396 %	N = 13585 %
Full Time	77.2	73.0	77.3	72.1
Part Time	14.4	10.8	15.7	11.2
Unemployed	1.5	9.0	0.7	11.4
No Response	6.9	7.2	6.3	5.3
Total	100.0	100.0	100.0	100.0

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 NYSNA
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Table 19

ADVANCE PAY DELETIONS 11/79 - 10/80 AS
 COMPARED TO TOTAL ADVANCE PAY MEMBERSHIP (10/80)
 BY POSITION TITLES

Position Title ¹	Total Advance Pay Deletions 11/79 to 10/80		Total Advance Pay Membership in Each Category	
	NYSNA	Total	NYSNA	Total
	N = 1558 %	(NYSNA, BI & TRI Level) N = 3944 %	(NYSNA, BI & TRI Level) N = 5396 %	(NYSNA, BI & TRI Level) N = 13585 %
Nrs. Mgrs. & Eductrs.	11.4	20.9	9.0	22.3
Head Nrs. & Ass't	10.8	7.7	15.6	9.6
Staff Nurse	61.4	46.4	61.9	42.1
Others	7.5	17.0	4.5	19.4
No Response	8.8	3.0	8.9	6.6
Total	100.0	100.0	100.0	100.0

¹ See Position Title Key

Table 20

ADVANCE PAY DELETIONS 11/79 - 10/80 AS
 COMPARED TO TOTAL ADVANCE PAY MEMBERSHIP (10/80)
 BY EMPLOYMENT SETTING

Setting	Total Advance Pay Deletions 11/79 to 10/80		Total Advance Pay Membership in Each Category	
	NYSNA	Total	NYSNA	Total
	N = 1558 %	(NYSNA, BI & TRI Level) N = 3944 %	(NYSNA, BI & TRI Level) N = 5396 %	(NYSNA, BI & TRI Level) N = 13585 %
Hospital	74.7	63.4	80.6	63.5
Nursing Home	3.6	3.6	3.2	3.6
School of Nrsng.	1.1	5.5	0.8	6.6
Private Practice	0.5	1.8	0.3	2.0
Public Health	5.7	4.6	4.2	4.3
School Health	3.8	2.2	1.8	1.4
Occupational Health	0.1	0.4	0.1	0.6
Phys. or Dent. Office	0.3	0.4	0.3	0.6
Ambulatory Care	0.9	1.8	1.1	1.9
Other	2.3	5.0	1.7	5.2
No Response	6.7	11.2	5.8	10.4
Total	100.0	100.0	100.0	100.0

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POSITION TITLE KEY

The following explains which position titles were telescoped into the four titles used in the table.

NURSE MANAGERS & EDUCATORS:

- Director of Nursing Services
- Dean or Director of Nursing Education
- Director of Nursing Service and Education (refers to dual appointment)
- Associate and/or Assistant Director of Nursing Services or Associate and/or Assistant Director of Nursing Education
- Faculty, Nursing Education Program
- Clinical Nursing Specialist, Nursing Clinician
- Assistant Supervisor; Administrative Assistant; Home Care Coordinator; Supervisor; Staffing Coordinator; Nurse Care Coordinator; Public Health Employee
- Supervisor - Instructor (refers to dual appointment)
- Inservice Education - All Positions; Staff Development
- Academic Dean

HEAD NURSE & ASSISTANT HEAD NURSE:

- Assistant Head Nurse and Head Nurse
- Team Leader
- Charge Nurse
- Senior Staff Nurse

STAFF NURSE:

- Staff Nurse

OTHERS:

- Private Practice; Private Duty; Registrar for Private Duty
- Consultant
- School Nurse-Teacher
- Office Nurse
- Industrial Nurse
- Nurse Anesthetist (C.R.N.A.)
- Nurse-Midwife
- Retired; Inactive; Unemployed
- College Health Service Nurse
- Miscellaneous
- State Nurses Association Staff
- District Nurses Association Staff
- American Nurses' Association Staff
- Assistant to Physician/Dentist/Pharmacist
- Assistant/Hospital Administrator Assistant/ Nursing Home Administrator
Assistant/Community Health Administrator
- Student in Undergraduate, Graduate or Doctoral Program
- Position Unrelated to the Health Field
- Oncologist

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NYSNA DISTRICT
Bureau of Nursing



LOCATIONS OF NURSING
EDUCATION PROGRAMS IN
NEW YORK STATE
BY NYSNA DISTRICT

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NYSNA
General Info

LIST OF SCHOOLS OFFERING
PRACTICAL NURSING PROGRAMS
IN NEW YORK STATE

<u>School</u>	<u>NYSNA District</u>
1. Cattaraugus-Wyoming Erie Counties BOCES	
South Center Olean	1
North Center Elicottville	1
2. Edna G. Dyett School of PN Millard Fillmore Hosp. Buffalo	1
3. Erie Co. BOCES Lancaster	
Kenton Center Tonawanda	1
Harkness Center Cheektowaga	1
Potter Road Center West Seneca	1
4. Buffalo Voc. Tech. Center Buffalo	1
5. Jamestown School of PN Jamestown	1
6. Orleans-Niagara BOCES Medina	
Niagara Voc. Center Sanborn	1
Orleans Voc. Center Medina	1
7. St. Francis Hospital Olean	1
8. Trott Voc. H.S. Niagara Falls	1

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 NYSNA
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PRACTICAL NURSING PROGRAMS (CONT'D)

<u>School</u>	<u>NYSNA District</u>
9. Catherine McAuley School St. Jerome Hosp. Batavia	1
10. Educational Opportunity Ctr. Rochester	2
11. Marion S. Whalen School Geneva General Hospital Geneva	2
12. Isabella Graham Hart School Rochester	2
13. Rochester School of PN Rochester	2
14. Wayne-Finger Lakes BOCES Wayne Co. Occupational Ctr. Williamson	2
 Finger Lakes Education Ctr. Stanley	2
15. Schuyler-Chemung-Tioga BOCES Elmira	3
16. Steuben Co. BOCES Wildwood Career Ctr. Hornell	3
 Coopers Career Ctr. Painted Post	3
17. Tompkins Cortland Community College Dryden	3
18. Cayuga-Onondaga Counties BOCES Auburn	4
19. Onondaga-Madison Counties BOCES Syracuse	4
20. Oswego County BOCES Oswego	4
 Mexico	4

PRACTICAL NURSING PROGRAMS (CON'T)

<u>School</u>	<u>NYSNA District</u>
21. Syracuse Central Tech. H.S. Syracuse	4
22. Broome-Delaware-Tioga Counties BOCES Binghamton	5
23. St. Lawrence-Lewis Counties BOCES Northwest Technical Ctr. Ogdensburg	6
 Seaway Area Technical Ctr. Norwood	6
24. Jefferson-Lewis Counties BOCES Jefferson Vocational Tech. Watertown	6
 Lewis County Glenfield	6
25. Herkimer County BOCES East Herkimer	7
26. Oneida County BOCES Whitesboro	7
27. Utica School for Practical Nursing Utica Free Academy HS Utica	7
28. Madison-Oneida Counties BOCES Verona	7
29. North Country Community College Malone Extension Center Malone	8
 Saranac Lake Center Saranac Lake	8
30. John W. Harrold Education Ctr. Plattsburgh	8
31. Albany Occupational Ctr. Albany	9
32. Rensselaer-Columbia Counties BOCES Troy	9

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 NYSNA
 General Info

PRACTICAL NURSING PROGRAM (CONT'D)

<u>School</u>	<u>NYSNA District</u>
33. Saratoga-Warren BOCES Program	
F. Donald Myers Occupational Ctr. Saratoga Springs	9
Dix Avenue Occupational Ctr. Hudson Falls	9
34. Albany-Schoharie-Schenectady BOCES Albany	9
35. Hamilton-Fulton-Montgomery BOCES Johnstown	10
36. Ulster County BOCES Port Ewen	11
37. Dutchess County BOCES Poughkeepsie	12
38. Putnam and Westchester Counties BOCES	
Putnam Technical Ctr. Carmel	12
Northeast Westchester Technical Ctr. Yorktown Heights	16
39. Westchester Community College Valhalla	16
40. Mid-Westchester Program for PN Valhalla	16
41. Yonkers Public School Yonkers	16
42. Elizabeth Seton College Yonkers	16
43. Rockland County BOCES West Nyack	17
44. Orange County BOCES Goshen	18
45. Curtis High School Staten Island	13
46. Dodge Vocational High School Bronx	13

PRACTICAL NURSING PROGRAM (CON'T)

<u>School</u>	<u>NYSNA District</u>
47. Hospital for Special Surgery New York	13
48. Jane Addams Vocational High School Bronx	13
49. Julia Richman High School New York	13
50. Mabel Dean Bacon Vocational High School New York	13
51. Hillcrest High School Queens	14
52. Queens Vocational High School Long Island City	14
53. Calendonian Hospital Brooklyn	14
54. Clara Barton High School of Health Professions Brooklyn	14
55. Wyckoff Heights Hospital Brooklyn	14
56. East Meadow Public Schools W. Tresper Clarke High School Westbury	14
57. Harry B. Ward Occupational Ctr. Suffolk BOCES Riverhead	14
58. Lewis A. Wilson Technical Ctr. Suffolk BOCES Dix Hills	14
Lindenhurst Ctr. Lindenhurst	14
Northport Ctr. Northport	14
59. Mid-Suffolk School for PN Suffolk BOCES Patchogue	14
Brookhaven Occupational Ctr. Bellport	14

PRACTICAL NURSING PROGRAMS (CON'T)

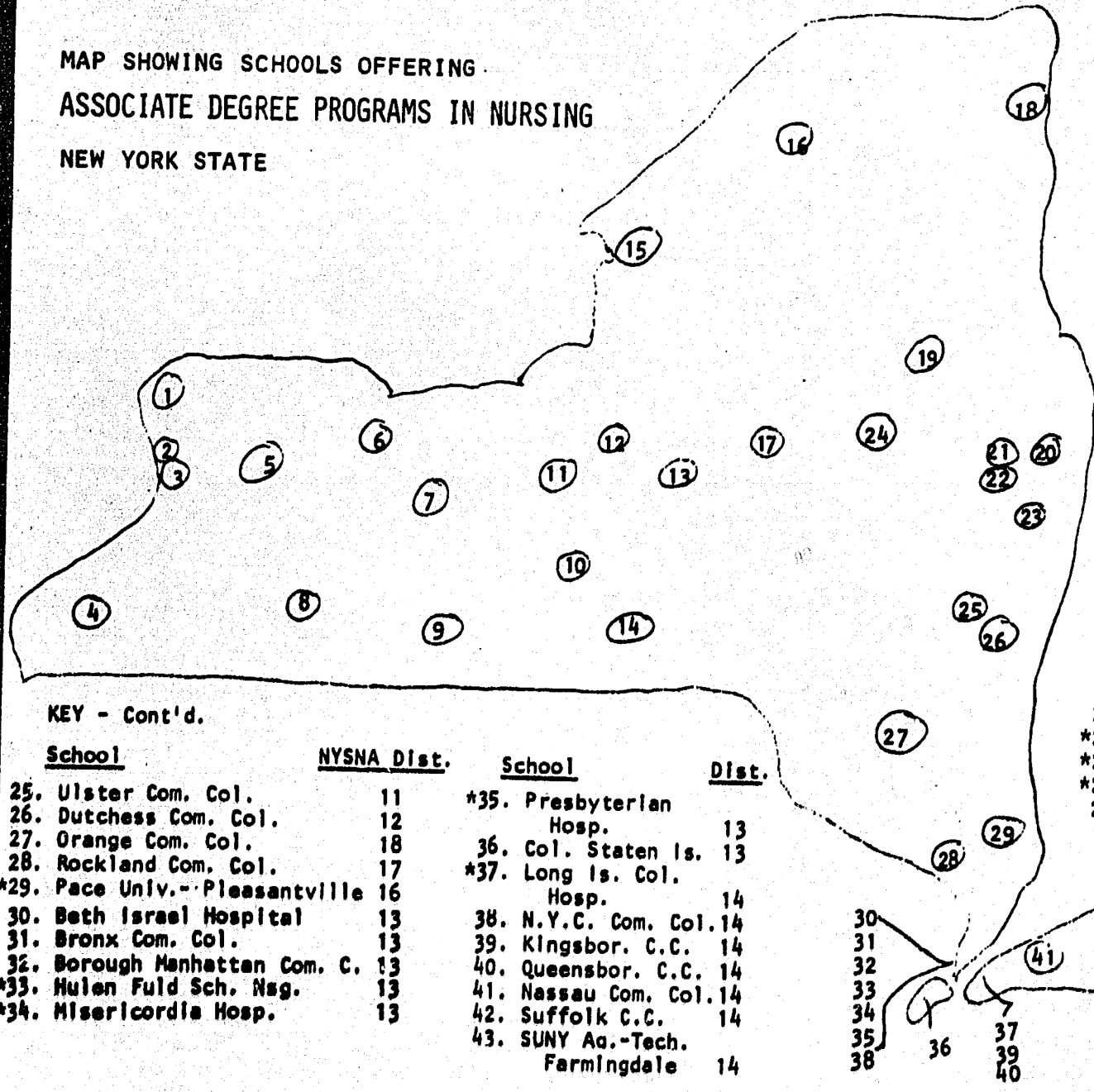
School	NYSNA District
60. Nassau County BOCES Westburg	14
61. Newfield High School Selden	14
62. Vocational Education and Extension Board Uniondale	14
63. Otsego Area School of PN Oneonta	15
Otsego Area Occupational Ctr. Hilford	15
Fox Hospital Oneonta	15
64. State Univ. Agricultural & Tech. College Delhi	15

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General Reg

MAP SHOWING SCHOOLS OFFERING
ASSOCIATE DEGREE PROGRAMS IN NURSING
NEW YORK STATE



KEY

School	NYSNA Dist.
1. Niagara Com. Col.	1
2. Erie Com. Col.	1
*3. Trocaire College	1
4. Jamestown Com. Col.	1
5. Genesee Com. Col.	1
6. Monroe Com. Col.	2
7. Com. Col. of the Finger Lakes	2
8. SUNY Ag.-Tech. - Alfred	2
9. Corning Com. Col.	3
10. Tompkins-Cortland Com. Col.	3
11. Cayuga Com. Col.	4
12. Onondaga Com. Col.	4
13. SUNY Ag.-Tech. Morrisville	7
14. Broome Com. Col.	5
15. Jefferson Com. Col.	6
16. SUNY Ag.-Tech.- Canton	6
17. Mohawk Valley Com. Col.	7
18. Clinton Com. Col.	8
19. Adirondack Com. Col.	9
20. Hudson Valley Com. Col.	9
*21. Jr. Col. of Albany	9
*22. Maria College	9
*23. Columbia Mem. Hosp.	9
24. Fulton-Montgomery Com. Col.	10

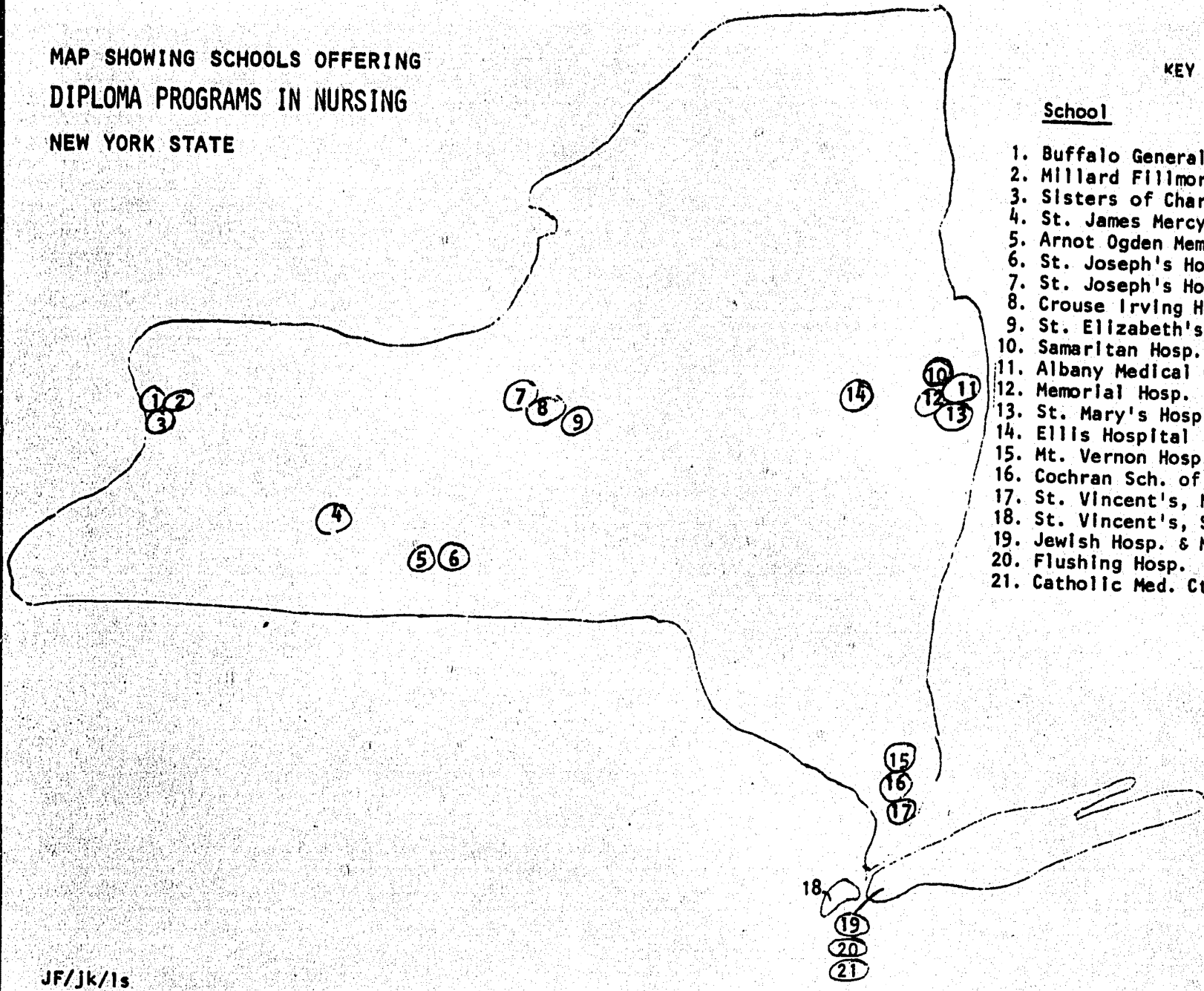
KEY - Cont'd.

School	NYSNA Dist.	School	Dist.
25. Ulster Com. Col.	11	*35. Presbyterian Hosp.	13
26. Dutchess Com. Col.	12	36. Col. Staten Is.	13
27. Orange Com. Col.	18	*37. Long Is. Col. Hosp.	14
28. Rockland Com. Col.	17	38. N.Y.C. Com. Col.	14
*29. Pace Univ.-Pleasantville	16	39. Kingsbor. C.C.	14
30. Beth Israel Hospital	13	40. Queensbor. C.C.	14
31. Bronx Com. Col.	13	41. Nassau Com. Col.	14
32. Borough Manhattan Com. C.	13	42. Suffolk C.C.	14
*33. Hulen Fuld Sch. Nsg.	13	43. SUNY Ag.-Tech. Farmingdale	14
*34. Misericordia Hosp.	13		

*Independent

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MAP SHOWING SCHOOLS OFFERING
DIPLOMA PROGRAMS IN NURSING
NEW YORK STATE

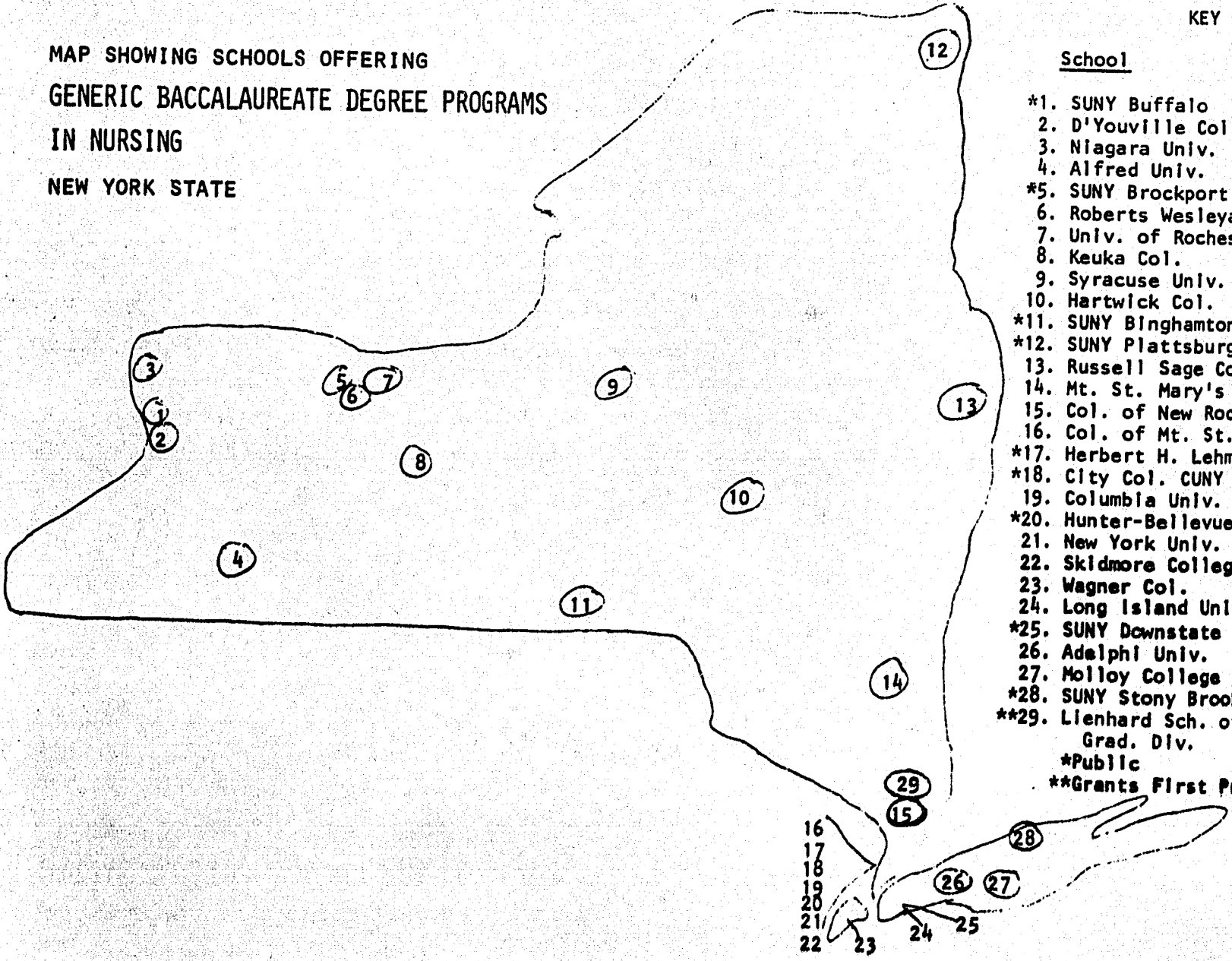


School	NYSNA Dist.
1. Buffalo General Hosp.	1
2. Millard Fillmore Hosp.	1
3. Sisters of Char. Hosp.	1
4. St. James Mercy-Hornell	3
5. Arnot Ogden Mem. Hosp.	3
6. St. Joseph's Hosp.-Elmira	3
7. St. Joseph's Hosp.-Syr.	4
8. Crouse Irving Hosp.	4
9. St. Elizabeth's Hosp.	7
10. Samaritan Hosp.	9
11. Albany Medical Ctr.	9
12. Memorial Hosp.	9
13. St. Mary's Hosp.	10
14. Ellis Hospital	10
15. Mt. Vernon Hosp.	16
16. Cochran Sch. of Nsg.	16
17. St. Vincent's, NYC	13
18. St. Vincent's, S.I.	13
19. Jewish Hosp. & Med. Ctr.	14
20. Flushing Hosp.	14
21. Catholic Med. Ctr.	14

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NYSNA
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MAP SHOWING SCHOOLS OFFERING
GENERIC BACCALAUREATE DEGREE PROGRAMS
IN NURSING
NEW YORK STATE

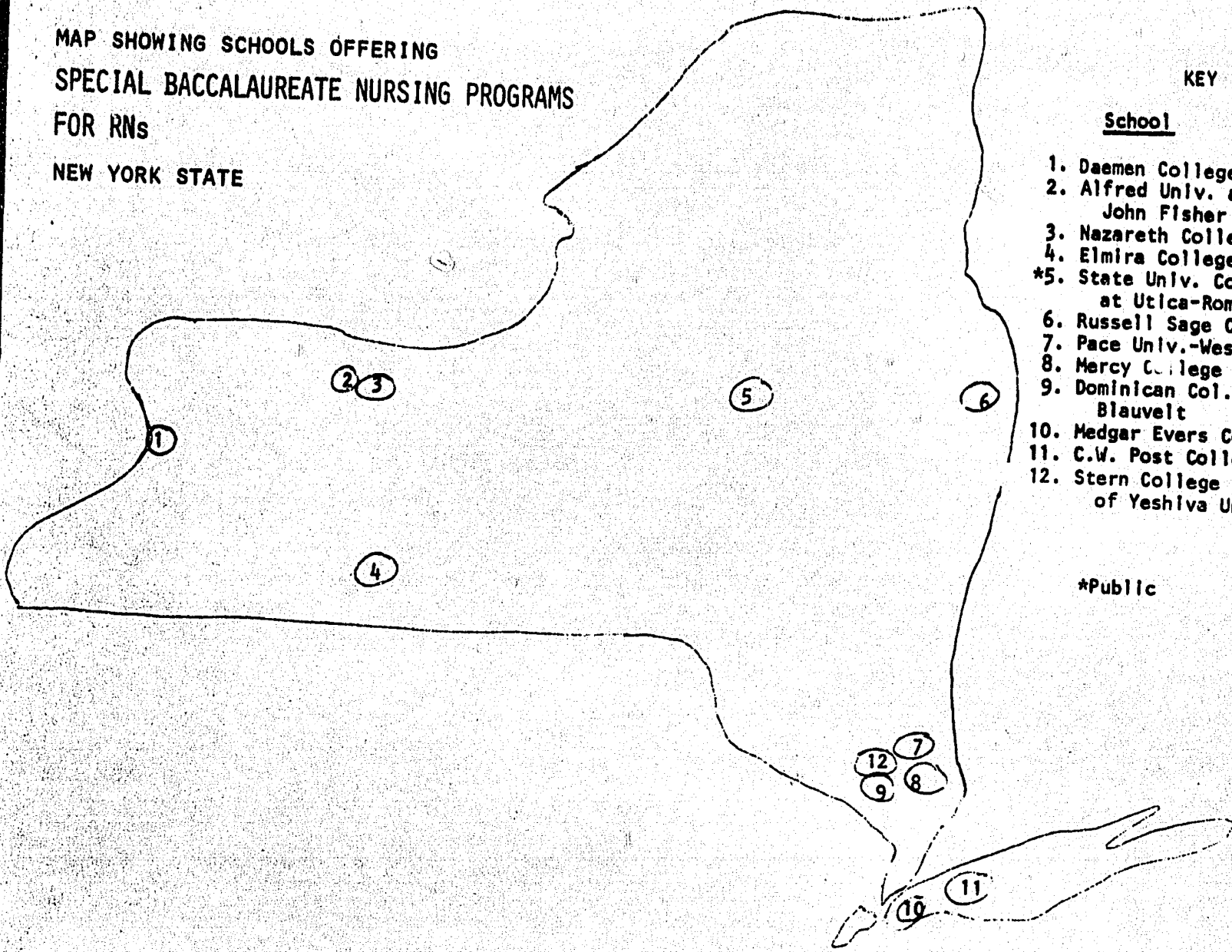


School	NYSNA Dis
*1. SUNY Buffalo	1
2. D'Youville Col.	1
3. Niagara Univ.	1
4. Alfred Univ.	2
*5. SUNY Brockport	2
6. Roberts Wesleyan Col.	2
7. Univ. of Rochester	2
8. Keuka Col.	2
9. Syracuse Univ.	4
10. Hartwick Col.	15
*11. SUNY Binghamton	5
*12. SUNY Plattsburgh	8
13. Russell Sage Col.	9
14. Mt. St. Mary's Col.	18
15. Col. of New Rochelle	16
16. Col. of Mt. St. Vincent	13
*17. Herbert H. Lehman Col. CUNY	13
*18. City Col. CUNY	13
19. Columbia Univ.	13
*20. Hunter-Bellevue CUNY	13
21. New York Univ.	13
22. Skidmore College	13
23. Wagner Col.	13
24. Long Island Univ.	14
*25. SUNY Downstate Med. Ctr.	14
26. Adelphi Univ.	14
27. Molloy College	14
*28. SUNY Stony Brook	14
**29. Lienhard Sch. of Nrsng. Grad. Div.	16

*Public
**Grants First Professional Masters

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MAP SHOWING SCHOOLS OFFERING
SPECIAL BACCALAUREATE NURSING PROGRAMS
FOR RNs
NEW YORK STATE



KEY

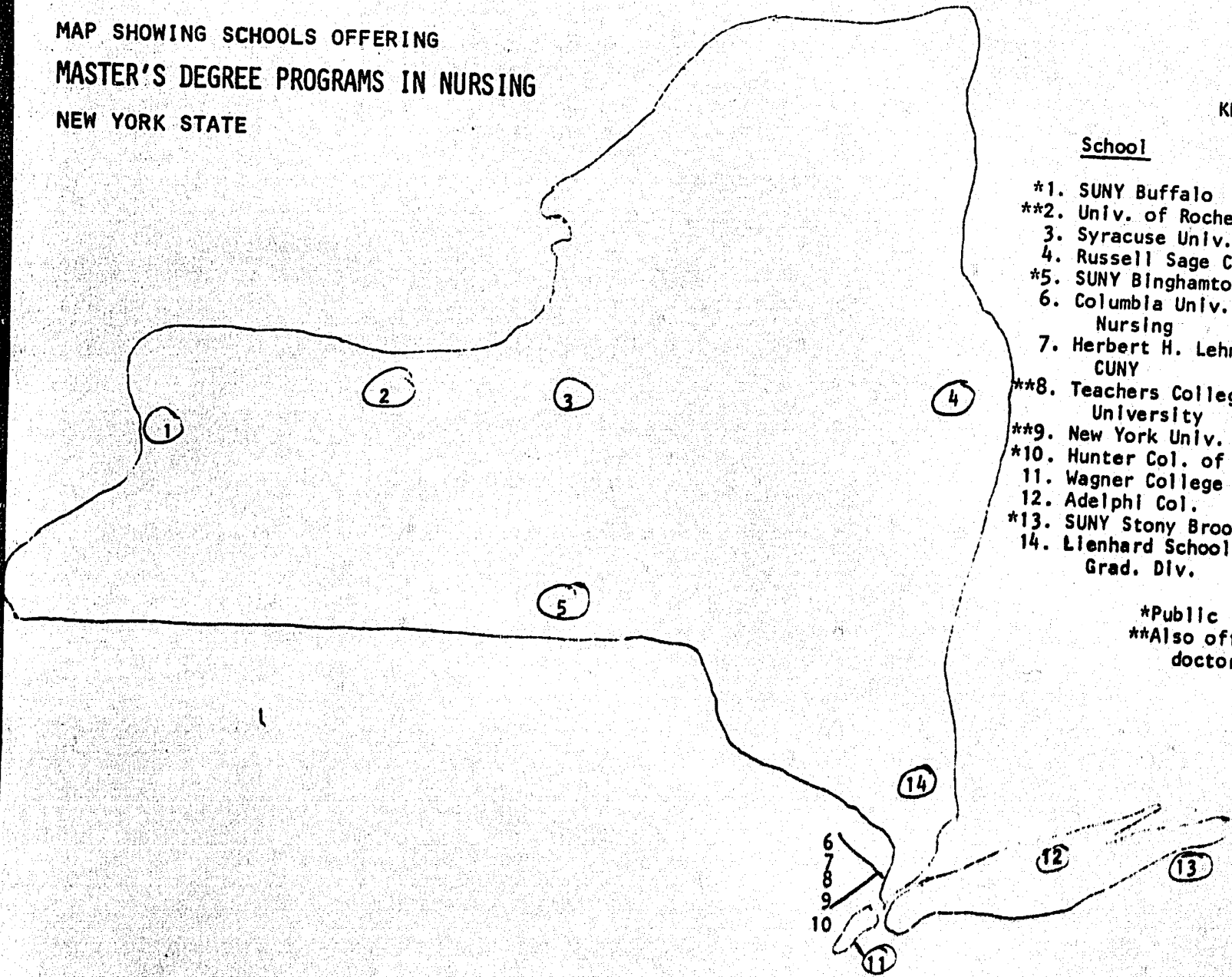
School	NYSNA Dist.
1. Daemen College	1
2. Alfred Univ. at St. John Fisher College	2
3. Nazareth College	2
4. Elmira College	3
*5. State Univ. Col. of Tech. at Utica-Rome	7
6. Russell Sage College	9
7. Pace Univ.-Westchester	16
8. Mercy College	16
9. Dominican Col. at Blauvelt	17
10. Medgar Evers College	14
11. C.W. Post College	14
12. Stern College for Women of Yeshiva Univ.	14

*Public

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MAP SHOWING SCHOOLS OFFERING
MASTER'S DEGREE PROGRAMS IN NURSING
NEW YORK STATE



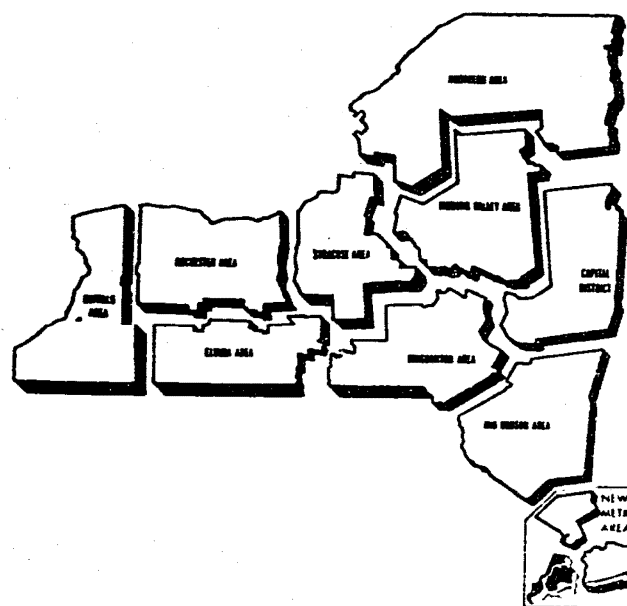
KEY

School	NYSNA Dist.
*1. SUNY Buffalo	1
**2. Univ. of Rochester	2
3. Syracuse Univ.	4
4. Russell Sage Col.	9
*5. SUNY Binghamton	5
6. Columbia Univ., Sch. of Nursing	13
7. Herbert H. Lehman Col. CUNY	13
**8. Teachers College, Col. University	13
**9. New York Univ.	13
*10. Hunter Col. of CUNY	13
11. Wagner College	13
12. Adelphi Col.	14
*13. SUNY Stony Brook	14
14. Lienhard School of Nrsng. Grad. Div.	16

*Public
**Also offer programs of doctoral study in nursing.

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12/6/77
Revised 2/4/80

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A BLUEPRINT FOR THE EDUCATION OF NURSES IN NEW YORK STATE

assuming a responsibility

When The New York State Nurses Association was founded in 1901, included among the purposes for its existence were the following:

- "To further the efficient care of the sick and disabled and others requiring nursing service;
- "To advance the educational and professional standards of nursing;
- "To maintain the honor, character and dignity of the nursing profession;
- "To promote the educational and professional advancement of nurses."

Within the ensuing 65 years the Association continuously appraised and examined and met, successfully, the forces and factors which made it necessary to change or advance standards of nursing practice and education. A study of the developments in these areas from 1901 to the present will reveal the extent of these changes.

The issuance of "A Blueprint for the Education of Nurses in New York State," which will be found on the following pages, is further evidence of the Association assuming its responsibility "to advance the educational and professional standards of nursing." The startling social changes which have occurred within the past few years, and will continue to occur, mandate once again new changes for the profession: therefore, the "Blueprint." ■

Reprinted from NEW YORK STATE NURSE, January, 1967
Official Publication of The New York State Nurses Association

foreword

In December, 1965, the American Nurses' Association issued a statement on the educational preparation required for nursing. This document sets forth the professional nursing association's position concerning the education necessary for the practice of nursing.

The New York State Nurses Association, in accepting the concepts enunciated in the position paper of the American Nurses' Association, recognizes its responsibility to provide the direction and guidance for the implementation of the position in New York State.

In May, 1966, the Board of Directors of The New York State Nurses Association authorized the Association's Committee on Education to construct a blueprint for the orderly transition of nursing education in New York State.

The Committee defined its blueprint as "a design to bridge the gap between what nursing education has been and is to a system within the mainstream of American higher education as applied to the multiplicity of resources and programs within New York State; a detailed program of action of who, what, when, how, to serve as a foundation for a coordinated plan of implementation." The base upon which the Committee built its design was a realistic acceptance of the need in New York State for planned transition in nursing education without disruption or interruption of vitally needed nursing services. The apex at which the design culminates is the commitment that the nursing needs of the people of New York State will be met by qualified practitioners of nursing.

"A Blueprint For The Education of Nurses in New York State" was approved by the Board of Directors of The New York State Nurses Association on October 23, 1966.

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introduction

The State of New York faces critical problems in insuring even minimum nursing services for the present and in the years ahead unless bold and well coordinated measures are adopted to increase both its qualitative and quantitative supply of nurses.

The New York State Nurses Association believes the stark reality of the present nursing situation in this state does not require further study or appraisal because there already exists a wealth of excellent material on the subject. In the preparation of this blueprint numerous past and current studies, reports, and recommendations concerning the nursing needs of New York State were examined (see Appendix 1). We know from the analysis what the problems are. Commitment to action is needed now to avoid loss of additional valuable time in closing the gap between the demands for nursing services and the nursing resources available.

The Association therefore presents this blueprint for action to meet the nursing needs of the people of New York State, and calls upon all individuals and groups, throughout the state, responsible for and concerned with education and health services to cooperate in its implementation.

assumptions

The assumptions underlying the development of the blueprint are:

1. The nature and complexity of health services will demand an increasing number of highly qualified nursing personnel.
2. The quality of nursing services is directly influenced by the educational preparation of personnel providing this service.
3. There will be a continuing need for practitioners of nursing prepared at the technical level and the professional level.
4. Expansion of programs of nursing will be affected by the availability of qualified faculty.
5. The needs and resources available for the preparation of nurse practitioners will vary within geographic areas of New York State.
6. Planning and action for transition in nursing education will be achieved by professional nurses in cooperation with representative community planning groups.
7. Economics will distinctly affect community planning for nursing education.

objective

This blueprint was designed with one primary objective:

That the Nursing Needs of the People of New York State Will Be Met by Qualified Practitioners of Nursing Prepared in Institutions of Higher Education.

To achieve this objective The New York State Nurses Association proposes the following:

1. Plans be completed for the transfer of all programs in New York State preparing practitioners of nursing to institutions of higher learning by 1972.
2. No new hospital diploma programs in nursing be established after January 1, 1967.
3. No new programs in practical nursing be established after January 1, 1967.
4. Priority be given to the expansion of baccalaureate degree programs in order to meet the demands for teachers, supervisors, administrators, and professional practitioners.
5. Based on the estimates of projected needs, the ratio be increased by 1976 from the current 14 per cent of nurses prepared annually at the professional level and 86 per cent at the technical level to 30 per cent at the professional level and 70 per cent at the technical level.
6. Every effort be made to assist graduates of hospital diploma programs and associate degree programs to continue their preparation toward a baccalaureate degree in nursing.
7. Every effort be made to assist licensed practical nurses, qualified to do so, to seek preparation in degree-granting programs in nursing.
8. Every effort be made to provide opportunities for graduates of hospital diploma, associate degree, and practical nursing programs for advanced placement in degree programs through proficiency examinations administered by the New York State Education Department.
9. Minimum preparation for beginning generalized nursing practice be associate degree education in nursing.

General Practitioners: prepared at the technical level, and capable of carrying out nursing measures, as well as medically delegated techniques, with a high degree of skill, using principles of an ever-expanding body of science.

10. Minimum preparation for beginning professional nursing practice be baccalaureate degree education in nursing.

Professional Practitioners: prepared at the baccalaureate level, who are required for nursing team leadership in hospitals, public health agencies, and other related health agencies, to assume the increasing demands for clinical nursing judgments in the complex nurse-patient-family situation. Clinical judgments which require a nurse with the ability to plan, provide, and evaluate nursing care; to supervise, teach, and direct all those who give nursing care; to collaborate with those in other disciplines in planning and in implementing care; to coordinate and synchronize medical and other professional and technical services as these affect patients.

action

The New York State Nurses Association assumes the responsibility for spearheading this program of action. In order to implement, successfully, the proposals set forth in this blueprint, specific responsibilities will need to be assumed by each of the following:

A. The New York State Nurses Association:

1. Provide the necessary leadership.
2. Coordinate the plan of action by:
 - a) serving as an informational and resource center to district nurses associations and community planning groups;
 - b) providing a forum for progress reports by community planning groups through the establishment of a New York State Council on Regional Planning for Nursing Education.
3. Sponsor and support legislation to:
 - a) establish or augment scholarship and/or loan assistance programs for students and practitioners of nursing;
 - b) establish new associate and baccalaureate degree programs in nursing within the State University system.
4. Appraise the Nursing Practice Act and initiate changes needed to assure maintenance of standards enunciated by the profession.
5. Encourage private junior and senior colleges and universities to expand existing programs in nursing or to establish new programs.

6. Maintain continuing liaison activities with state agencies and organizations responsible for and concerned with education and health services.

B. District Nurses Association:

1. Appoint a committee on education as recommended by The New York State Nurses Association.
2. Assume leadership in the formation of an on-going community planning group whose function would be to initiate a program of action for nursing education in the area.
3. Support and promote a continuing program of education designed to inform members and the community at large of the standards enunciated by the profession.

C. Community Planning Group:

1. Assume, with the cooperation of professional nurses, the responsibility for meeting the nursing needs in the community.
2. Be aware of the standards enunciated by the nursing profession concerning the education and utilization of nurses.
3. Appraise the total needs for nursing services within the community.
4. Identify the educational and clinical resources available for nurse preparation programs.
5. Move as expeditiously as feasible to insure that programs for the preparation of nurse practitioners are located in institutions of higher education.
6. Stimulate the establishment of programs of nursing in colleges and universities where adequate clinical and financial resources are available.
7. Initiate effective and forceful nurse recruitment programs and publicize the career potential for practitioners prepared at the technical and professional levels.
8. Critically examine programs preparing a limited number of nurse practitioners.
9. Urge consolidation or discontinuance of existing small programs in nursing in the interest of conservation of qualified faculty and clinical and financial resources.
10. Urge existing hospital diploma schools of nursing to participate with colleges and universities in planning for the utilization of faculty and clinical resources for the development of associate, baccalaureate, and higher degree programs in nursing.

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11. Actively support governmental and private scholarship and financial assistance programs for all students interested in pursuing a career in nursing.
12. Seek continuing counsel from state agencies responsible for education and health services in developing or initiating plans of action.
13. Utilize all types of media to obtain full public support of proposed plans or activities.
14. Maintain a continuing liaison relationship with The New York State Nurses Association and submit reports as requested.

- d) hospitals and other health agencies
- e) medical profession
- f) industry
- g) labor
- h) civic groups
- i) consumer

Suggested Structure of a Community Planning Group

A community planning group for nursing education should:

- a) be an ongoing permanent group
- b) establish formal structure with provisions for officers, regularly scheduled meetings, handling financial needs, etc.
- c) determine short- and long-range goals

Resources for Community Planning Groups

Guidance and direction will be provided by The New York State Nurses Association. In addition, community planning groups are encouraged to seek advice and consultation from the following:

- a) New York State League For Nursing
- b) New York State Education Department
- c) New York State Health Department
- d) any other groups which could be of assistance

timetable

The timetable for the initial implementation of the blueprint is as follows:

1. January 1, 1967: formation of district committees on education
2. June 1, 1967: formation of community planning groups
3. January 1, 1968: formation of New York State Council on Regional Planning for Nursing Education
4. June 1, 1968: submission of initial reports by community planning groups
5. January 1, 1970: submission of interim reports by community planning groups
6. January 1, 1972: submission of first major reports by community planning groups

■ ■ ■

mechanics

Immediate and successful implementation of the blueprint will depend upon the concerted and forceful action of community planning groups throughout the state. It is expected that professional nurses will take the leadership in initiating the formation of such groups.

In considering regional planning for nursing education for the entire state, it was decided that the proposed community planning groups should coincide in geographic boundaries with the areas defined by the State Department of Commerce as the "Economic Areas of New York State." This decision was based on the fact that valuable data and statistics, which would be needed by the community planning groups in their work, have been compiled and are available for these areas.

The geographic boundaries of the district nurses associations and of the proposed community planning groups do not coincide. Guidance in developing a coordinated working relationship among districts in the formation of community planning groups will be provided by The New York State Nurses Association.

Number and Location of Community Planning Groups

Community planning groups should be established in each of the ten economic areas of the state (see Appendix II). The New York metropolitan area would be subdivided into three areas, resulting in a total of twelve community planning groups for the entire state.

Suggested Composition of a Community Planning Group

A community planning group should be composed of individuals who provide a broad range of professional, institutional, and community points of view. It is essential that the appointees be men and women of competence and dedication, who are well informed about and interested in the field of education and health service. Representatives from the following should be considered in the selection:

- a) district nurses association
- b) local league for nursing
- c) secondary and higher education

appendix I

Materials

The following studies and reports were reviewed in preparation of the blueprint:

"Annual Reports of Secretary, Board of Examiners of Nurses of New York State" (1956-1966).
 "A Survey of Registered Professional Nurses Employed in Hospitals in New York State" (University of the State of New York, State Education Department, Division of Professional Education, 1965).
 "Basic and Highest Degree Preparation of Faculties of Schools of Nursing in New York State" (University of the State of New York, State Education Department, Division of Professional Education, 1965).
 "Education for the Health Professions," Report to the Governor and the Board of Regents (New York State Committee on Medical Education, 1963).
 "Education For Nursing Practice," 1966 Arden House Conference (New York State Nurses Association, 1966).
 "Educational Preparation For Nurse Practitioners and Assistants to Nurses . . . A Position Paper" (American Nurses' Association, 1965).
 "Experimental Programs in Nursing Curricula . . . New York State" (University of the State of New York, State Education Department, Division of Professional Education, 1957).
 "Facts About Nurses and Nursing in New York State" (Office of Nurse Education, Division of Professional Education, New York State Education Department, 1966).
 "Professional Nurses Registered in New York State during the First Four Months of the Biennium September 1, 1955-August 31, 1957" (University of the State of New York, State Education Department, Office of Assistant Commissioner for Professional Education).
 "Needs and Facilities in Practical Nursing Education in New York State" (The Nurse Resources Study Group, University of the State of New York, State Education Department, 1961).
 "Needs and Facilities in Professional Nursing Education in New York State" (The Nurse Resources Study Group, University of the State of New York, State Education Department, 1959).
 "Second Interim Revision, 1964 Master Plan for the City University of New York" (Board of Higher Education, City of New York, 1966).
 "The Master Plan, State University of New York," rev. edition (State University of New York, 1964).
 "The New York State Associate Degree Nursing Project, A Final Report to the W. K. Kellogg Foundation" (University of the State of New York, State Education Department, 1964).
 "The Regents Statewide Plan for the Expansion and Development of Higher Education, 1964" (University of the State of New York, State Education Department, 1965).
 "Toward Quality in Nursing . . . Needs and Goals," Report of the Surgeon General's Consultant Group on Nursing (U.S. Department of Health, Education and Welfare, U.S.P.H.S., 1963).
 "Trends of Enrollments in Basic Professional Nursing Programs in New York State 1957-1962" (University of the State of New York, State Education Department, Division of Research in Higher Education, Division of Professional Education, 1964).

appendix II

Economic Areas of New York State

- I. BUFFALO AREA includes counties of: Cattaraugus, Chautauqua, Erie, Niagara
- II. ROCHESTER AREA includes counties of: Genesee, Livingston, Monroe, Orleans, Seneca, Wayne, Wyoming, Yates
- III. ELMIRA AREA includes counties of: Allegany, Chemung, Schuyler, Steuben, Tompkins
- IV. SYRACUSE AREA includes counties of: Cayuga, Cortland, Madison, Onondaga, Oswego
- V. BINGHAMTON AREA includes counties of: Broome, Chenango, Delaware, Otsego, Tioga
- VI. MOHAWK VALLEY AREA includes counties of: Fulton, Hamilton, Herkimer, Montgomery, Oneida
- VII. NORTHERN AREA includes counties of: Clinton, Essex, Franklin, Jefferson, Lewis, St. Lawrence
- VIII. CAPITAL DISTRICT AREA includes counties of: Albany, Rensselaer, Saratoga, Schoenectady, Schoharie, Warren, Washington
- IX. MID-HUDSON AREA includes counties of: Columbia, Dutchess, Greene, Orange, Putnam, Sullivan, Ulster
- X. NEW YORK METROPOLITAN AREA
 - A. Westchester and Rockland counties
 - B. Kings, Queens, Richmond, New York and Bronx counties
 - C. Nassau and Suffolk counties

Based on the New York State Department of Commerce definition of Economic Areas.

NOTES:

**The New York State Nurses Association
 Committee on Education 1965-1967**

Chairman:
 Esther M. Thompson, R.N., Director of Graduate Studies, Department of Nursing, School of Medicine and Dentistry, University of Rochester

Members:
 Marian H. Hosford, R.N., former Chairman, Department of Nursing, Mount Saint Mary College, Newburgh, N.Y.
 Sister Marie Michael, R.N., Director of Nursing, St. Joseph's Hospital, Elmira
 Sue A. Sabia, R.N., Chairman, Department of Nursing, Long Island University
 Williams B. Obermeyer, R.N., Assistant Supervisor, Medical Department, Mount Sinai Hospital, New York, N.Y.

Consultant:
 Eleanor C. Lambertsen, R.N., Chairman, Department of Nursing Education, Teachers College, Columbia University

The committee gratefully acknowledges the assistance of Miss Agnes Gellinas, R.N., in the preparation of this material.

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The Tripartite Link to Successful Transition . . .

It is recognized that achievement of *orderly* transition of nursing education in New York State from its present status to that outlined in the NYSNA Blueprint will be directly related to the degree of acceptance and implementation of three specific Blueprint proposals. These are:

6. Every effort be made to assist graduates of hospital diploma programs and associate degree programs to continue their preparation toward a baccalaureate degree in nursing.
7. Every effort be made to assist licensed practical nurses, qualified to do so, to seek preparation in degree granting programs in nursing.
8. Every effort be made to provide opportunities for graduates of hospital diploma, associate degree and practical nursing programs for advanced placement in degree programs through proficiency examinations administered by the New York State Education Department.

Without orderly and planned transition, valuable time will certainly be lost in the attainment of the Blueprint's primary objective: "That the nursing needs of the people of New York State will be met by qualified practitioners

of nursing prepared in institutions of higher education." The Association believes that proposals 6, 7, and 8 are the tripartite link to successful transition. It is, therefore, moving vigorously, with plans to:

1. Survey colleges and universities conducting programs in nursing regarding existing policies governing advanced placement for graduates of hospital diploma programs, associate degree programs, and practical nurse programs.
2. Compile and make available the above information to all interested nurses.
3. Compile and make available information regarding sources of financial aid for education.
4. Seek additional financial aid for education for RNs through NYSNA's legislative program.
5. Urge all colleges and universities conducting programs in nursing to re-examine existing policies governing advanced placement for RNs and LPNs and to explore new approaches in this area.
6. Urge employers to assist and encourage those nurses who are seeking additional educational preparation through establishing tuition refund plans, arranging and permitting flexible work hours, according monetary recognition for increased qualifications, and maintaining high standards of nursing practice.
7. Urge the State Education Department to move as expeditiously as possible in developing proficiency examinations in nursing. (In connection with this extremely important area we are happy to report that the machinery has already commenced toward development of such examinations and the Department considers this a priority activity.)

The profession must act quickly to close the gap between the demand for quality nursing services and the nursing resources available. Successful transition is the first move!