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ABSTRACT

This paper reports the results of a study conducted to (1) assess the need for career mobility within the nursing program at Delaware County Community College (Pennsylvania); (2) demonstrate the range of complexity in nursing situations which require diversified educational programs; and (3) propose a model to assess the skills and knowledge of licensed practical nurse applicants to associate degree nursing programs. Sources of data for the study included college nursing program records, Pennsylvania state licensing laws, competencies expected by the State Board of Nurse Examiners, job descriptions, and a questionnaire administered to practical and associate degree nursing students, supervisory nurses, nursing instructors, and members of the community. Results of the study confirmed that there was a need for diversified education for nursing students, that there was a basic core of knowledge for all health practitioners, and that development of a core curriculum would enhance potential health worker mobility. Terminal behaviors for the associate degree nurse were developed based on the findings, and a learning module based on one of the behaviors was developed to demonstrate the usefulness of criterion referenced testing to assess the competency level of the licensed practical nurse applicant. Recommendations for implementing an articulated licensed practical nurse/associate degree nurse program are presented. Survey responses, the learning module, an extensive bibliography, and other study materials are appended. (JDS)

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**THE FEASIBILITY OF DEVELOPING A LICENSED PRACTICAL NURSE--
ASSOCIATE DEGREE NURSE ARTICULATION PROGRAM AT
DELAWARE COUNTY COMMUNITY COLLEGE**

by

BEST COPY AVAILABLE

Gilberta M. Trani

Delaware County Community College

A PRACTICUM PRESENTED TO NOVA UNIVERSITY
IN PARTIAL FULFILLMENT FOR THE REQUIREMENT FOR THE
DEGREE OF DOCTOR OF EDUCATION

NOVA UNIVERSITY

APRIL 20, 1976

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INTRODUCTION

Flexible open educational patterns, responsive to individual needs, are required to provide learning opportunities for personal development, career preparation and mobility. The 601,000 residents of Delaware County are served by Delaware County Community College, seven liberal arts colleges and two vocational schools. Two colleges, as well as Delaware County Community College, provide a graduate nurse curriculum. About one hundred and fifty graduate nurses and approximately seventy practical nurses graduate each year from these programs. The practical nurse graduate electing to become eligible for registered nurse licensure should have available to her the opportunity to pursue such a career without loss of time or energy and without repeating material previously learned. Open end (articulation) curricula can provide this opportunity.

The graduates of both the graduate and the practical nurse programs are absorbed into the health care system of Delaware County. Health care institutions include a medical center, a psychiatric hospital, a mental health institute, a geriatric center, several general hospitals and nursing homes. Additionally, physicians, dentists, community nurse associations, industry and school systems require nurses to meet the health needs of the community.

Service to mankind is the primary function and the reason for the existence of the nursing profession. The need for nurses continues to expand as more and more people seek health care. Moreover, there is a growing community awareness of the responsibilities of the registered nurse. The client expects care to be relevant to his needs and to those

of the provider of care (i.e., cognizant of the increase in number of licensed practical nurses applying for transfer into graduate nurse programs). To provide nursing care that will be equitable for all citizens, it will be necessary that the graduate nurse be able to cope with the needs of a changing society. Furthermore, external forces continue to impinge upon academic freedom and curriculum development. One such force is the public expectation for career mobility in educational programs. Adults of all ages are seeking learning opportunities for first and second careers as well as mobility within a career. The changes made in educational programs must be well planned, based on the needs of the students, the philosophy of the nursing program and the society served. Lenburg (1975) succinctly states:

Concern of both sides of the career mobility issue are real and specific. Individuals seeking advancement in nursing believe that they have a right to expect that educational institutions will respond to that need without imposing undue restrictions or penalties. They also expect recognition of their past education and experience and individual consideration of their educational goals. On the other hand, educational institutions and nursing departments believe that they have the right to conduct sound programs according to their philosophy and objectives.

Nursing education programs should be designed in response to the many situational factors within the community, within the field of health and within the health education system.

Delaware County Community College exists to serve community needs. The college is committed to offering career oriented curricula. Community colleges are not as concerned with transferability of credit as with the need to put the graduates into the work world after graduation. Nurse educators, as part of the faculty, should be responsive to trends within the community, particularly those in the health field.

Limited mobility, laterally and vertically, among nursing programs to achieve the fullest utilization of manpower and a continued need for registered nurses within and surrounding Delaware County Community College are major concerns in identifying the need for a licensed practical nurse-associate degree nurse articulation program. Economy of time as well as the need for developing each individual to his fullest potential should be the prime concern of nurse educators if nursing is to meet society's increasing demand and needs for skilled workers in nursing.

Nursing has been a series of dead ends. An individual who chooses one type of nursing program bars himself from all others, unless he chooses to go back and begin at the beginning of a new type of curriculum that may well repeat what his previous education and experience has already taught him. Students are adamant about "lock step" education. They are demanding that the educational programs be more responsive to their needs. In addition, they seek articulation so that minimum difficulty is experienced in advancing from one level to the next in the educational hierarchy (i.e., licensed practical nurse to the associate degree level.) Frequently, licensed practical nurses and their employers request that consideration of past learning experiences be considered in qualifying them for advanced placement in associate degree nursing programs. Additionally, the directors of practical nurse programs seek transfer credit for graduates of their programs. It is imperative that this pool of applicants be given reasonable opportunity to demonstrate their knowledge and competence. Thus, the licenced practical nurse could be appropriately placed in the associate degree nursing program.

IMPORTANCE OF THE STUDY

Societal forces such as an increase in the nation's population, a result of lowered infant mortality, control and elimination of disease, expanded public health education and increased life span, have immeasurably increased the need for prepared health workers. Moreover, contemporary society is both knowledgeable and affluent. These factors have increased the need for more efficient and effective health care delivery. Tomlinson (1971) states that:

Democratic advances in the health sciences have been concomitant with major social changes. The results of these changes have given rise to a service oriented society that is requiring more and better prepared personnel who are able to cope with technological progress and rapid skill obsolescence.

The consumer of health care has become more articulate regarding his concern for the quality of health service. Furthermore, he is now in a position to evaluate health care. The public is becoming increasingly aware and involved in the appropriation of resources and the ordering of priorities. As never before, educational institutions are having to prove their effectiveness not only in providing occupational preparation, but in providing equitable opportunities for various segments of the population. Tomlinson (1971) states:

In providing responsive health care one dimension affecting both health facilities and educational programs is the continuing search for balance between level of preparation and performance of function. Programs and curricula must be designed to facilitate occupational preparation, mobility and upgrading of the worker.

Articulation programs have been developed in Pennsylvania, offering the licensed practical nurse the opportunity to become a registered nurse with a year's additional preparation. There have been both regional and national workshops focusing on career mobility. Much has been

written in the past decade in both general education and the nursing literature about "flexibility" and "career ladder" opportunities. Trends in nursing education indicate a need for reviewing curriculum patterns noting the impact of independent study, progression according to individual ability and provision for individual differences.

Regarding articulation of nursing education programs, Russell (1970) admonished that, "there should be every opportunity for qualified individuals to transfer from any type of preparatory program in order to pursue higher career goals." The challenge method, universally accepted as a valid means for assessing individual achievement, provides for individual differences, encourages self-directedness and implements the principle of learning readiness. The objectives of many college courses can be achieved by means other than attendance at regular college classes. Achievement of course objectives can be measured by examination and satisfactory scores on examination provide an acceptable basis for granting course credit. No individual should be required to repeat courses he has already mastered and credit should be awarded to individuals who can demonstrate on an examination that they have obtained a level of achievement equivalent to that of regularly enrolled individuals earning credit in a course. Every individual should have available to him opportunities for training and education that will enable him to achieve his fullest potential.

Nurse educators are increasingly involved in an intensive study of career mobility. Admittedly, there is a range of complexity in nursing situations which require diversified educational programs. There is a recognized need for both technical and professional educational programs. The nurse educator must understand nursing practice in general

and specifically the responsibility of the licensed practical nurse and the associate degree nurse to be able to resolve the problems in career mobility for the practical nurse. A problem facing nurse educators is how to assess the knowledge of the licensed practical nurse and develop an educational program which will prepare them for the role they must assume. The question raised by the licensed practical nurse, their employers and nurse educators is what are the functions of the various levels of nursing practice.

In reference to the second concern, Delaware County Community College has offered an associate degree nursing program since September, 1968. The program is accredited by the National League for Nursing and has been since June, 1972. Over two hundred individuals have graduated, a significant figure. According to statistics available from the Commonwealth of Pennsylvania, 12,463 nurses were needed in 1975 to continue to meet the health needs of the citizens. Of this total, 4,148 was predicted as being an "unmet need" for the Delaware Valley area. This projection can be interpreted to mean that anticipated graduation of nurses from existant programs of nursing will not meet the demand for this level of practitioner. Hence, an articulation plan to meet a portion of this need can be justified. Such a plan will not solve the problem, but may well be the impetus for the growth of similar programs in community college settings that will enable the qualified licensed practical nurse to reenter the health care market, a registered nurse, after reasonable additional preparation.

A further justification for developing an articulation program is the current status of practical nurse education. Educational programs have been enriched. The role expectation of the licensed practical nurse

has changed. Through structured staff development programs in community colleges, these individuals are being placed in positions of charge nurse, recovery room nurse and in some instances, supervisory nurse. This has occurred because employers of nursing are obligated to provide care to patients and because the licensed practical nurse has demonstrated that she can assume additional responsibility. Many of these nurses aspire to become registered nurses. Yet, educational institutions offer little opportunity for career advancement without the person entering as a new student in the nursing education program.

Recognizing the need for a greater number of registered nurses and the potentiality for career mobility of licensed practical nurses, the licensed practical nurse would be able to become a registered nurse with no loss of time, energy or money in an articulated program. The qualified student could advance as his capabilities permitted. The feasibility of the development of a licensed practical nurse - associate degree nurse articulation program will be the focus of this study.



THE OPEN CURRICULUM IN NURSING EDUCATION

A Statement Approved by the Board of Directors,
National League for Nursing, February 1976

An open curriculum is one educational approach designed to accommodate the changing career goals and learning needs of students. It facilitates entry into and exit from educational programs by capitalizing on the student's relevant education and experience. The open curriculum in nursing recognizes areas of achievement common to the graduates of various types of educational programs, as well as the value of learning that takes place outside the academic setting. This is one of nursing's responses to the needs of students for more flexibility in entering the nursing education system.

The National League for Nursing supports the open curriculum in nursing education. NLN believes that:

- Individuals who wish to change career goals in nursing or enter nursing from other fields should have the opportunity to do so without unnecessary repetition of course content or clinical experience. In any type of nursing program, opportunity should be provided to students to validate previous learning and to facilitate advanced placement.
- Prospective students should be provided with effective guidance to select the nursing education program best suited to their career goals and to assist them in all stages of their nursing education.
- Schools of nursing should be supported in their efforts to experiment with innovative patterns in nursing education, including open curriculum concepts. All phases of an open curriculum program must be carefully planned with continual and follow-up evaluation as an integral part of the program's accountability to society. Open curriculum programs also need assurance of continuing financial support and of academic and community resources.
- Faculty in open curriculum programs are encouraged to carefully develop curriculum designs that meet NLN's criteria for accreditation. League accreditation is based on a nursing program's meeting the specified criteria of an appropriate NLN education council, on the "general excellence" of the program, and on the program's ". . . achievement with regard to its stated objectives."¹

NLN will continue to provide a forum for nursing schools interested in the development of educational innovations, including the open curriculum concept. This policy reflects the League's continuing commitment to assist nursing education in meeting society's needs.

APPENDIX C

**DELAWARE COUNTY COMMUNITY COLLEGE
DEPARTMENT OF ALLIED HEALTH - NURSING
QUESTIONNAIRE - LPN/RN ARTICULATION**

The statements below relate to basic beliefs relative to articulation. Please check in the column to the right the statement which most appropriately describes your opinion.

Please include any additional statements you deem pertinent to any discussion of career mobility in the space provided (include any specific recommendations for the implementation of a licensed practical nurse/associate degree nursing program at Delaware County Community College).

STATEMENTS	Strongly Disagree	Mildly Disagree	Disagree	No Opinion	Agree	Mildly Agree	Strongly Agree
1. The DCCC nursing program should serve as a ladder to permit advancement from one level to another.							
2. Opportunity for career advancement is essential to retain workers in the field of nursing.							
3. Public policy implicit in Federal regulation and manpower demands that individuals be afforded the opportunity for advancement from the lowest to the highest level within the career of nursing.							
4. Associate Degree Nursing programs have failed to provide mechanisms whereby the knowledge and skill of the licensed practical nurse could be assessed.							
5. Development of a core curriculum leading into various health careers would improve the potentiality of mobility of health workers.							
6. A system should be established whereby the LPN can get the additional education to move forward as rapidly as possible (i.e., within one year or less).							
7. LPN's should be able to complete a performance based test to demonstrate their knowledge and competence and be appropriately placed in an associate degree nursing curriculum.							
8. The combined graduates of all nursing education programs is inadequate to meet the current demands for nursing service now and in the next decade.							
9. Some nursing education programs are developing articulation programs that take into account differences in preparation and learning capacity among students.							
10. A performance based practicum to evaluate the clinical competencies of LPN applicants should be developed.							
11. There is a core of knowledge basic to all health practitioners.							
12. The job responsibilities identified by the employing agency for the graduate nurse are clearly different							

APPENDIX D

Delaware County Community College

Media, Pennsylvania 19063

353-5400

February 19, 1976

Dear Colleague:

I respectfully request your assistance in identifying the need for development of an Licensed Practical Nurse-Associate Degree Articulation Program at Delaware County Community College.

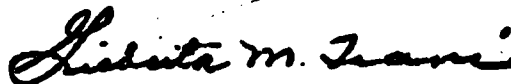
The purpose of this survey is to provide useful information to the directors of nursing services and of practical nurse and associate degree programs. Therefore, a summary of the survey will be forwarded to you upon completion. In addition to its prime purpose, the study will partially fulfill requirements for a doctoral program at Nova University.

Please complete the enclosed questionnaire which deals with data germane to an articulation program.

Please provide a check (✓) in the appropriate areas and a written response when indicated. It would be most appreciated if this questionnaire could be returned as soon as possible, so that cumulative results can be returned to you.

Thank you for your cooperation in this endeavor.

Sincerely,



Gilberta M. Trani
Director, Allied Health Programs

APPENDIX E

The Practical Nurse Act

Act of Pennsylvania General Assembly, March 2, 1956, P.L. (1935) 1211, as amended, January 13, 1966, P.L. (1965) 1295.

SECTION 1. CITATION OF ACT.

This act shall be known and may be cited as the "Practical Nurse Law."

SECTION 2. DEFINITIONS.

When used in this act the following words and phrases shall have the following meaning, unless the context clearly indicates otherwise.

(1) The "practice of practical nursing" means the performance of selected nursing acts in the care of the ill, injured or infirm under the direction of a licensed professional nurse, a licensed physician or a licensed dentist which do not require the specialized skill, judgment and knowledge required in professional nursing.

(2) "Board" means the State Board of Nurse Examiners.

SECTION 3. LIMITATION TO PRACTICAL NURSING.

This act confers no authority to practice any profession other than practical nursing.

This act does not prohibit:

(1) Home care of the sick by friends, domestic servants, nursemaids and companions or household aides of any type so long as such persons do not represent or hold themselves out to be practical nurses or use in connection with their names any designation tending to imply that they are licensed to practice under the provisions of this act.

(2) Gratuitous care of the sick by friends or members of the family.

(3) Domestic administration of family remedies by any person.

(4) Nursing services by anyone in case of an immediate emergency.

(5) Nursing by a person temporarily in this Commonwealth in accordance with an engagement made outside of this Commonwealth which engagement requires that such person accompany and care for a patient while temporarily in this Commonwealth whenever the engagement shall not be of more than six (6) months' duration.

(6) Care of the sick without compensation or personal profit when done in connection with the practice of the religious tenets of any church adherents thereof.

(7) Nursing services rendered by a student enrolled in an approved school of practical nursing, when these services are part of the course of study.

(8) Nursing services rendered by a graduate of an approved school of practical nursing in Pennsylvania or any other State working under qualified supervision, during the period not exceeding one (1) year between completion of his or her course of nursing education and notification of the results of a licensing examination taken by such person, and during such additional period as the board may in each case especially permit.

(9) Nursing services rendered by a person who holds a current license or other evidence of the right to practice practical nursing as that term is defined in this act, issued by any other state or territory of the United States or province of the Dominion of Canada, during the period that an application filed by such person for licensure in Pennsylvania is pending before the board; or for a period of one (1) year, whichever period first expires.

(10) Auxiliary services rendered by persons carrying out duties necessary for the support of nursing service, including those duties which involve minor nursing service for patients, performed in hospitals or elsewhere under the direction of licensed physicians or as delegated by licensed registered nurses and performed under the direction of professional nurses or licensed practical nurses.

SECTION 4. EXAMINATION AND ISSUE OF LICENSE CERTIFICATE

The board shall once every year and at such other times and under such conditions as shall be provided by its regulations examine all applicants eligible for examination to determine whether they are qualified to be licensed, and shall authorize the issue to each person

passing said examination to the board, which shall issue a certificate setting forth that such person is qualified to practice as a licensed practical nurse.

SECTION 5. APPLICATION FOR LICENSE

No application for licensure as a licensed practical nurse shall be considered unless accompanied by a fee of five dollars (\$5.00). Every applicant for examination as a licensed practical nurse shall furnish evidence satisfactory to the board that he or she is eighteen years of age or over, is a citizen of the United States or has legally declared intention to become such, is of good moral character, has resided at least eight years and after January 1, 1967, received a high school diploma or the equivalent as required by the Department of Public Education, and has satisfactorily completed a course in practical nursing, approved by the board in a school, hospital or other institution, of not less than fifteen hundred hours and within a period of not less than twelve months.

SECTION 6. LICENSING WITHOUT EXAMINATION

The board may license without examination a graduate of an approved school for the training of practical nurses in any other state, territory, province or country, who has completed a course of study in practical nursing considered by the board to be equivalent to that required in this Commonwealth and who was licensed in such state, territory, province or country, by examination and has met the foregoing requirements as to age, character, citizenship and preliminary education.

SECTION 7. LICENSING APPLICATION TO PRESENTLY LICENSED ATTENDANTS

Every person licensed to practice as a licensed attendant and to use the letters "LA" at the time this act becomes effective shall be considered as licensed to practice under this act and may continue to practice as such upon the annual renewal* of his or her license as required herein and subject to the provision hereof. Any person licensed as a licensed attendant may exchange such license

* By administrative action changed to biennial renewal.

practical nurse and may thereafter use the letters "LPN" after his name. Nothing in this act shall affect any person who is in an approved school or institution at the effective date of this act for examination as to take said examination, but the license issued to him shall be as a licensed practical nurse. The board shall make such provisions therefor as necessary and may authorize the board to make this provision effective.

APPOINTMENT OF COMMITTEE TO ESTABLISH RULES AND REGULATIONS.

The board, with the approval of the Commissioner of Labor and Occupational Affairs, shall appoint a committee consisting of three practical nurses and one licensed professional nurse having practical nurse education and, in consultation with the board, subject to the provisions of the Administrative Code Act of 1928 (Act No. 1388), and its amendments, shall have the authority to establish reasonable rules and regulations in accordance with the provisions of this act. Copies of such rules and regulations shall be made available to persons who may be interested therein. The board shall have no power in any way to fix salaries or control the salaries of any licensed practical nurse or licensed attendant.

Any member of said committee a licensed practical nurse who is a member for membership in the Licensed Practical Nurses Association of Pennsylvania, and a licensed professional nurse with practical nurse education must be eligible for membership in the Pennsylvania Nurses Association.

To qualify as a member of said committee, an appointee must be a licensed practical nurse or a licensed professional nurse in Pennsylvania for a minimum period of five (5) years.

The term of office for each committee member shall be for a term of one (1), three (3) and five (5) years and no committee member may serve for a longer term than two (2) consecutive terms; however, the first appointee shall be for terms of one (1), three (3) and five (5) years and at the expiration of these original appointments subsequent terms shall be for five (5) years. In calculating the

term of office of a committee member shall be for a term of five (5) years.

SECTION 9. LISTS OF APPROVED SCHOOLS.

The board shall annually prepare and publish a list of all schools and institutions of combination thereof for the training of practical nurses approved by the board, the graduates of which shall be eligible for examination for licensure as licensed practical nurses. On January 1, 1967, all candidates for admission to any school or institution for the training of practical nurses shall be required to complete at least a high school diploma or its equivalent. The board shall have the authority to remove or suspend from the approved list any school or institution if the board is not satisfied with the removal of any school or institution from the approved list shall not make any person who is a student therein at the time of said removal ineligible for examination.

SECTION 10. INSIGNIA "LPN".

An insignia bearing the initials "LPN" may be worn by persons licensed under the provisions of this act.

SECTION 11. RECORD.

The board shall maintain a record of all licenses issued under the provisions of this act and renewals thereof as hereinafter provided.

SECTION 12. TIME LIMIT OF LICENSE.

Each original license issued and recorded under the provisions of this act shall authorize the holder to practice nursing as a licensed practical nurse from the date of the issuance of said license until the last day of June next succeeding, unless said license shall be revoked or suspended for cause as hereinafter provided.

SECTION 13. RENEWAL OF LICENSE.

Every licensed practical nurse receiving a license under the provisions of this act shall, annually, during the month of June, apply for renewal of such license, whereupon the board shall upon the payment of the fee of one dollar (\$1.00) issue a renewal of said license for the term of one year and such renewal shall be duly recorded as hereinafter provided.

* By administrative action changed to license renewal.

SECTION 14. PROHIBITIONS.

Except as otherwise herein provided, it shall be unlawful for any person, association, partnership, corporation or institution, after the effective date of this act, to

(1) Furnish, sell or obtain by fraud or misrepresentation a record of any qualifications required for a license, or aid or abet therein;

(2) Use in connection with his or her name the words practical nurse, licensed practical nurse, or the letters "PN", or "LPN", or any designation tending to imply that he or she is a practical nurse, or licensed practical nurse, unless he or she is duly licensed to so practice under the provisions of this act;

(3) Practice practical nursing during the time his or her license issued under the provisions of this act is suspended or revoked;

(4) Practice practical nursing without a valid current license;

(5) To transfer, offer to transfer, or permit the use by another of any license issued under this act;

(6) To aid or abet any person to violate any provision of this act;

(7) Otherwise violate any of the provisions of this act.

SECTION 15. PENALTY.

Any person or an officer or employe of any association, corporation, institution or partnership, violating any of the provisions of this act shall, upon summary conviction therefor, be sentenced to pay a fine of not less than fifty dollars (\$50) for the first offense, and for a second and subsequent offense not less than one hundred dollars (\$100.00) nor more than two hundred dollars (\$200.00), and in default of the payment of such fine and costs to undergo imprisonment for a period not to exceed thirty (30) days.

SECTION 16. CAUSES FOR SUSPENSION OR REVOCATION OF LICENSE.

The board may suspend or revoke any license in any case where the board shall find, that the licensee

(1) Is guilty of gross immorality;

(2) Is unfit or incompetent by reason of negligence, habit or other causes;

(3) Has willfully or repeatedly violated any of the provisions of this act or of the regulations of the board;

(4) Has committed fraud or deceit in the practice of practical nursing or in securing his or her admission to such practice;

(5) Has been convicted or has pleaded guilty or entered a plea of nolo contendere or has been found guilty by a judge or jury of a crime, or has been dishonorably discharged or has been discharged under circumstances amounting to dishonorable discharge from the military forces of the United States or of any other country;

(6) Is an habitual drunkard or is addicted to the use of morphine, cocaine or other drugs having a similar effect, or if he or she has become mentally incompetent;

(7) Is continuing to practice nursing when such licensee knows he or she has an infectious, communicable or contagious disease;

(8) Has been guilty of unprofessional conduct or such conduct as to require a suspension or revocation in the public interest;

(9) That said licensee having obtained a license or certificate of record upon declaration of intention to become a citizen of the United States has not become a citizen of the United States within seven years from the date of such declaration of intention.

SECTION 17. REGULATIONS FOR SUSPENSION OR REVOCATION.

All suspensions and revocations shall be made only in accordance with the regulations of the board and only by majority vote of the members of the board, and shall be subject to the right of notice, hearing and adjudication and the right of appeal therefrom in accordance with the provisions of the Administrative Agency Law, approved June four, one thousand nine hundred forty-five (Pamphlet-Laws 1388), or any amendment or reenactment thereof relating to adjudication procedure. The board by majority action and in accordance with its regulations may reissue any license which has been suspended or revoked.

Printed by the Pennsylvania Nurses Association, 2515 North Front Street, Harrisburg, Pennsylvania 17110. Additional copies are available at the following rates: 1-10 copies, 20¢ each; 11-25 copies, 15¢ each; 26 or more copies, 10¢ each. Payment must accompany order.

This represents the current law governing the practice of professional nursing in the Commonwealth of Pennsylvania. It is a consolidation of Act No. 69 and all subsequent amendments to that act.



The Professional Nursing Law

AN ACT

Relating to the practice of professional nursing; providing for the licensing of nurses and for the revocation and suspension of such licenses, subject to appeal, and for their reinstatement; providing for the renewal of such licenses; regulating nursing in general; prescribing penalties and repealing certain laws.

The General Assembly of the Commonwealth of Pennsylvania hereby enacts as follows:

Section 1. This act shall be known and may be cited as "The Professional Nursing Law."

Section 2. When used in this act, the following words and phrases shall have the following meanings unless the context provides otherwise:

(1) The "Practice of Professional Nursing" means diagnosing and treating human responses to actual or potential health problems through such services as casefinding, health teaching, health counseling, and provision of care supportive to or restorative of life and well-being, and executing medical regimens as prescribed by a licensed physician or dentist. The foregoing shall not be deemed to include acts of medical diagnosis or prescription of

medical therapeutic or corrective measures, except as may be authorized by rules and regulations jointly promulgated by the State Board of Medical Education and Licensure and the Board, which rules and regulations shall be implemented by the Board.

(2) "Board" means the State Board of Nurse Examiners.

(3) "Approved" means approved by the State Board of Nurse Examiners.

(4) "Diagnosing" means that identification of and discrimination between physical and psychosocial signs and symptoms essential to effective execution and management of the nursing regimen.

(5) "Treating" means selection and performance of those therapeutic measures essential to the effective execution and management of the nursing regimen, and execution of the prescribed medical regimen.

(6) "Human responses" means those signs, symptoms and processes which denote the individual's interaction with an actual or potential health problem.

Section 2.1. The Board shall have the right and duty to establish rules and regulations for the practice of professional nursing and the administration of this act. Copies of such rules and regulations shall be available for distribution to the public.

Section 3. Any person who holds a license to practice professional nursing in this Commonwealth, or who is maintained on inactive status in accordance with section 11 of this act, shall have the right to use the title "registered nurse" and the abbreviation "R.N." No other person shall engage in the practice of professional nursing or use the title "registered nurse" or the abbreviation "R.N." to indicate that the person using the same is a registered nurse. No person shall sell or fraudulently obtain or fraudulently furnish any nursing diploma, license, record, or registration or aid or abet therein.

Section 4. This act confers no authority to practice dentistry, podiatry, optometry, chiropractic, medicine or surgery, nor does it prohibit—

(1) Home care of the sick by friends, domestic servants, nursemaids, companions, or household aides of any type, so long as such persons do not represent or hold themselves out to be licensed nurses, licensed registered nurses, or registered nurses; or use in connection with their names, any designation tending to imply that they are licensed to practice under the provisions of this act nor services rendered by any physicians, osteopaths, dentists or chiropractors, podiatrists, optometrists, or any person licensed pursuant to the act of March 2, 1956 (P.L. 1211 No. 376), known as the "Practical Nurse Law."

(2) Care of the sick, with or without compensation or personal profit, when done solely in connection with the practice of the religious tenets of any church by adherents thereof.

(3) The practice of professional nursing by a person temporarily in this Commonwealth licensed by another state, territory or possession of the United States or a foreign country, in compliance with an engagement made outside of this Commonwealth, which engagement requires that such person accompany and care for a patient while temporarily in this Commonwealth: Provided, however, that said engagement shall not be of more than six (6) months' duration.

(4) The practice of professional nursing by

a graduate of an approved program of professional nursing in Pennsylvania or any other state, working under qualified supervision, during the period not to exceed one (1) year between completion of his or her program and notification of the results of a licensing examination taken by such person, and during such additional period as the Board may in each case especially permit.

(5) The practice of professional nursing by a person who holds a current license or other evidence of the right to practice professional nursing, as that term is defined in this act, issued by any other state, territory or possession of the United States or the Dominion of Canada, during the period that an application filed by such person for licensure in Pennsylvania is pending before the Board, but not for a period of more than one (1) year.

(6) The practice of professional nursing, within the definition of this act, by any person when such person is engaged in the practice of nursing as an employee of the United States.

Section 5. (a) The Board shall, once every year and at such other times and under such conditions as shall be provided by its regulations, examine all eligible applicants for licensure; and shall, subject to the provisions of Section 6 of this act, issue a license to each person passing said examination to the satisfaction of the Board.

(b) The Board may admit to examination any person who has satisfactorily completed an approved nursing education program for the preparation of registered professional nurses in Pennsylvania or such a program in any other state, territory or possession of the United States, considered by the Board to be equivalent to that required in this Commonwealth at the time such program was completed, and who meets the requirements of character and preliminary education.

(c) The Board may admit to examination any person who has satisfactorily completed a nursing education program for the preparation of registered professional nurses in a country or territory not mentioned above who has been

APPENDIX F

licensed, registered, or duly recognized there as a professional nurse provided such a program is considered by the Board to be equal to that required in this Commonwealth at the time such program was completed and who meets the requirements of character and preliminary education.

Section 6. No application for licensure as a registered nurse shall be considered unless accompanied by a fee of ten dollars (\$10). Every applicant, to be eligible for examination for licensure as a registered nurse, shall furnish evidence satisfactory to the Board that he or she is of good moral character, has completed work equal to a standard high school course as evaluated by the Board and has satisfactorily completed an approved program of professional nursing.

Section 6.1. The Board shall establish standards for the operation and approval of nursing education programs for the preparation of registered professional nurses and for the carrying out of the rights given to the Board under this act. Programs for the preparation of registered professional nurses shall be established or conducted only with the approval of the Board.

The Board shall establish standards and approve organized programs of study offered to foreign graduate nurses in the United States on nonimmigration status who are studying in this Commonwealth. Initial approval shall be followed by at least annual survey and review of the program to assure maintenance of acceptable standards. Such programs shall be conducted only with approval of the Board. Each hospital maintaining an exchange visitor educational program for foreign graduate nurses shall pay a fee as established by the Board. Such fee shall be related to the actual costs incurred by the Board in rendering services in connection with such programs.

Section 6.2. The Board shall annually prepare and make available for public distribution a list of all programs approved and classified by it. Any student who shall be enrolled in any school which shall be removed from the approved list shall be given credit

toward the satisfaction of the Board's requirements for examination for such of the requirements of the Board which any said student shall satisfactorily complete prior to the removal of said school from the approved list, and said student shall upon the satisfactory completion of the remainder of said requirements in any approved school be eligible for examination for licensure. The Board may withhold or remove any school from the approved list if the school fails to meet and maintain minimum standards, as established by regulation of the Board of education, curriculum, administration, qualifications of the faculty, organization and functions of the faculty, staff and facilities.

Section 7. The Board may issue a license without examination to a graduate of a school of nursing who has completed a course of study in nursing considered by the Board to be equivalent to that required in this State at the time such course was completed, and who is registered or licensed by examination in any other state, or territory of the United States or the Dominion of Canada, and who has met all the foregoing requirements as to character, and preliminary education.

Section 8. The Board shall issue to each person who meets the licensure requirements of this act, a certificate setting forth that such person is licensed to engage in the practice of professional nursing and entitled to use the title "registered nurse" and the letters "R.N."

Section 9 & Section 10. Repealed (content now contained in Sections 2.1 and 6.2 respectively).

Section 11. (a) Licenses issued pursuant to this act shall expire on the thirty-first day of October of each biennium, or on such other biennial expiration date as may be established by regulation of the Board. Application for renewal of a license shall biennially be forwarded to each registrant holding a current license prior to the expiration date of the current renewal biennium. The application form may be completed and returned to the Board, accompanied by the required fee of

of license.

(b) Any registrant licensed under this act may request an application for inactive status. The application form may be completed and returned to the Board. Upon receipt of each application, the applicant shall be maintained on inactive status without fee and shall be entitled to apply at any time and to receive a current license by filing a renewal application as in subsection (a) hereof.

Section 12. Repealed (content now contained in Section 3).

Section 13. Any person, or the responsible officers or employees of any corporation, co-partnership, institution or association violating any of the provisions of this act, shall, upon summary conviction thereof, be sentenced to pay a fine of three hundred dollars (\$300); and in default of the payment of such fine and costs, to undergo imprisonment for a period of ninety (90) days, unless nonpayment of said fine is shown by affidavit made by the defendant to the court, to be the result of the defendant's indigency.

Section 14. The Board may suspend or revoke any license in any case where the Board shall find that—

(1) The licensee is on repeated occasions negligent or incompetent in the practice of professional nursing.

(2) The licensee is unable to practice professional nursing with reasonable skill and safety to patients by reason of mental or physical illness or condition or physiological or psychological dependence upon alcohol, hallucinogenic or narcotic drugs or other drugs which tend to impair judgment or coordination, so long as such dependence shall continue. In enforcing this clause (2), the Board shall, upon probable cause, have authority to compel a licensee to submit to a mental or physical examination as designated by it. After notice, hearing, adjudication and appeal as provided for in Section 15, failure of a licensee to submit to such examination when directed shall constitute an admission of the ab-

entered without the presentation of evidence under this paragraph shall, at reasonable intervals be afforded an opportunity to demonstrate that he can resume a competent practice of professional nursing with reasonable skill and safety to patients.

(3) The licensee has willfully or repeatedly violated any of the provisions of this act or of the regulations of the Board.

(4) The licensee has committed fraud or deceit in the practice of nursing, or in securing his or her admission to such practice.

(5) The licensee has been convicted, or has pleaded guilty, or entered a plea of nolo contendere, or has been found guilty by a judge or jury, of a felony in the courts of this Commonwealth or any other state, territory or country.

(6) The licensee has his license suspended or revoked in another state, territory or country.

Section 15. All suspensions and revocations shall be made only in accordance with the regulations of the Board, and only by majority vote of the members of the Board after a full and fair hearing before the Board. All actions of the Board shall be taken subject to the right of notice, hearing and adjudication, and the right of appeal therefrom, in accordance with the provisions of the Administrative Agency Law, approved the fourth day of June, one thousand nine hundred forty-five (Pamphlet Laws 1338), or any amendment or reenactment thereof, relating to adjudication procedure. The Board, by majority action and in accordance with its regulations, may reinstate any license which has been suspended or revoked.

Note: Act Number 69, P.L. 317, May 22, 1951 as amended by

Act Number 151, July 3, 1974

Act Number 118, P.L. 35, May 6, 1970

Act Number 73, P.L. 135, May 29, 1968

Act Number 689, P.L. 1889, December

17, 1959

TEST PLAN FOR STATE BOARD TEST POOL EXAMINATION
FOR PRACTICAL NURSE LICENSURE
ADOPTED BY THE COMMITTEE ON BLUEPRINT FOR LICENSING EXAMINATIONS OF THE
ANA COUNCIL OF STATE BOARDS OF NURSING

JANUARY, 1976

The measurable abilities are not mutually exclusive. A single test item may test subabilities under two or more of the major abilities. The range of percentage of items in each major ability in an Examination is included in parentheses.

Measurable Abilities

Limitations

- | | |
|---|---|
| <p>I. Understands what the licensed practical nurse's responsibilities are as a member of a vocation, an individual, and as a member of a health team.</p> <p>8%)</p> | |
| <p>A. Scope of functions of licensed practical nurses.</p> | |
| <p>1. Range and limitations of functions</p> | <p>Will not be tested on leadership role.</p> |
| <p>2. Administrative lines</p> | <p>Will not be tested on administrative lines other than those which a licensed practical nurse used directly.</p> |
| <p>3. Problems that should be referred to the physician or the registered nurse</p> | <p>Will not be tested on details of differentiation of functions of professional workers in the health field.</p> |
| <p>B. Ethical responsibilities</p> | |
| <p>C. Legal responsibilities</p> | |
| <p>D. Basic principles of communication and cooperative action</p> | <p>Will not be tested on principles of group leadership.</p> |
| <p>E. Vocational growth</p> | |
| <p>1. Trends in nursing</p> | <p>Will not be tested on history other than general trends.</p> |
| <p>2. Authoritative sources of information in nursing</p> | <p>Will not be tested relative to fine distinctions among sources.</p> |
| <p>3. Roles and characteristics of nursing organizations</p> | <p>Will not be tested on details of structure or function of organizations other than aspects affecting practical nursing or licensed practical nurses.</p> |

Understands basic facts and principles of the natural and biological sciences and related terminology.

Measurable Abilities

Limitations

I. 3%) Knows the signs of physical health and normal physical growth and development throughout the life cycle.

A. Gross signs of physical health and development

B. Optimum and normal health as differentiated from abnormal states

C. General physical needs

D. General nutritional needs

Will not be tested relative to subtle variations.

Will not be tested on evaluation of diets in terms of measurements other than average servings.

E. General environmental needs

V. 3%) Knows phycho-social facts and principles that are basic to individual adjustment and to safe nursing practice.

V. -7%) Knows the gross signs of emotional and mental health and development in all age groups, recognizes states of faulty adjustment, and understands general emotional needs and their possible effects on behavior.

Will not be tested on subtle variations in mental or emotional health, or on theories of psychological development.

I. 10%) Understands basic principles of human relations and knows what measures are likely to be helpful to persons under stress.

Will not be tested on psychotherapeutic concepts, formal nondirective techniques, or on subtle judgements relative to patients' readiness to learn.

I. 3%) Knows the general causes, modes of transfer, and relative incidence of common diseases and abnormal conditions and understands methods for their prevention and control

Will not be tested on uncommon diseases or conditions, on the theory of immunity, or on details of preventive programs.

A. Important causes of, and factors predisposing to, diseases and abnormal conditions

B. Transmission of disease

C. Conditions which constitute major health problems

D. Prevention and control of communicable diseases

E. Prevention and control of noncommunicable diseases and conditions

F. Roles of major organizations and agencies concerned with prevention and control of disease and maintenance and improvement of physical and mental health.

Will not be tested on details of structure or functions of the organizations.

Measurable Abilities

Limitations

- I. Knows gross manifestations of common diseases and abnormal conditions
 - A. Symptoms and course
 - B. Gross effects on the tissues
 - C. Prognosis and complications
- IX. Knows purposes, effects, and dangers of common measures used: preventive, diagnostic, therapeutic, supportive, and rehabilitative. (-20%)
- X. Understands common nursing measures and knows how to carry out or assist with commonly used procedures (exclusive of VI). (-32%)
 - A. Selection of specific nursing measures in accordance with patient needs
 - B. Differentiation between safe and unsafe modifications of nursing measures
 - C. Preparation for, implementation of, or assistance with measures used in care of patients
 - D. Reporting and recording
 - E. Evaluation of priority of patients' needs based upon possible choices of nursing care

Will not be tested on uncommon conditions or any but the most important manifestations.

Will not be tested on other than gross physiologic effects of treatments and medications.

Will not be tested on selection of complex nursing measures.

Will not be tested on evaluation of procedures in terms of scientific principles.

Will not be tested on calculated dosage problems and conversion between metric and apothecary systems.

Will not be tested on evaluation of equipment in terms of scientific principles.

Will not be tested on ability to establish priorities of nursing care of patients with complex needs.

APPENDIX H

TEST PLAN FOR STATE BOARD TEST POOL EXAMINATION
FOR REGISTERED NURSE LICENSURE
ADOPTED BY THE COMMITTEE ON BLUEPRINT FOR LICENSING EXAMINATIONS OF THE
ANA COUNCIL OF STATE BOARDS OF NURSING

JANUARY, 1976

The measurable abilities below are not mutually exclusive. A single test item may test subabilities under two or more of the major abilities. The range of percentage of items in each major ability in an Examination is included in parentheses.

- I. Understands the registered nurse's accountability for practice.
(3-4%)
- A. Range and limitations of functions of nurses, other groups in nursing and other members of health and related disciplines.
 - B. Ethical responsibilities.
 - C. Legal aspects.
 - D. Principles of cooperative action and communication.
 - E. Factors important for professional growth.
 - 1. Roles and characteristics of nursing organizations.
 - 2. Authoritative sources of information.
 - 3. Trends in nursing and related health fields.
 - F. Administrative lines.
- II. Understands principles and knows facts of the natural and biological sciences that are applicable to nursing practice and basic to plans for care.
(7-10%)
- A. Chemistry and physics.
 - B. Anatomy and physiology.
 - C. Microbiology.
 - D. Nutrition.
- III. Recognizes physical health and understands physical needs throughout the life cycle.
(4-6%)
- A. Normal physical development.
 - B. Signs of deviations within normal physical health, differentiated from abnormal.
 - C. Physical needs.
 - D. Nutritional needs.
 - E. Environmental needs.
- IV. Understands principles and knows facts of the social and behavioral sciences that are applicable to nursing practice and basic to plans for care.
(2-4%)
(Exclusive of the abilities included in categories V and VI.)
- A. Psychology.
 - B. Sociology.
- V. Recognizes mental and emotional health and understands emotional needs throughout the life cycle.
(7-9%)
- A. Normal mental and emotional development.
 - B. Signs of deviations within emotional and mental health and of normal adjustment to stress and anxiety, as differentiated from abnormal.
 - C. Mental and emotional needs.
 - D. Behavior in terms of needs; value and effects of self-directed actions; steps toward or away from emotional health; defenses and interpersonal dynamics.
 - E. Effects of interpersonal or other influences and climates on emotional health.

- VI.** Understands effective human relations; knows what verbal and nonverbal measures are likely to be helpful to persons under stress, or with specific mental or emotional problems, and is able to use the measures or assist in their use.
(10-12%)
- A. Approaches that foster emotional maturation or promote emotional well-being.
 - B. Teaching, motivating, or orienting patients or others.
 - C. Consideration of inherent human rights and of ideas, beliefs and customs.
 - D. Useful verbal responses to meet specific emotional needs of patients or others.
 - E. Measures such as nonverbal responses or referrals to meet mental or emotional needs.
 - F. Priorities in needs of a patient with emotional problems, in terms of choices of care.
- VII.** Knows causes, modes of transfer, and incidence of diseases and abnormal conditions and understands methods for their prevention and control.
(5-8%)
- A. Causes of, and factors predisposing to, physical and mental diseases and abnormal conditions.
 - B. Transmission of diseases.
 - C. Incidence and relative importance of diseases and health problems.
 - D. Prevention and control of communicable diseases.
 - E. Prevention and control of noncommunicable diseases and conditions.
 - F. Roles and characteristics of organizations and agencies concerned with prevention and control of major health problems and maintenance and improvement of physical and mental health.
- VIII.** Knows manifestations of diseases and abnormal conditions, with major emphasis upon those which are common.
(11-14%)
- A. Symptoms and course of physical and mental diseases and abnormal conditions.
 - B. Pathology and its relationship to symptoms and progress.
 - C. Prognosis, including knowledge of reasonable goals for patients.
 - D. Complications and sequelae.
- IX.** Understands theory of nursing and medical care.
(15-21%)
- A. Purposes and effects of measures used: preventive, diagnostic, therapeutic (including diet, drug and other therapies), supportive, and rehabilitative.
 - B. Dangers and toxic or untoward effects of measures used.
 - C. Additional facts and principles related to measures used.
- X.** Understands what nursing measures are safe and effective and knows how to carry out or assist with commonly used procedures. (Exclusive of the abilities included in category VI.)
(21-25%)
- A. Assessment of patient's needs as a basis for selection of specific measures of care.
 - B. Evaluation of nursing procedures.
 - C. Planning for; implementation of, assistance with: preventive, diagnostic, therapeutic, supportive, and rehabilitative measures.
 - D. Reporting and recording.
 - E. Evaluation of priority of patients' needs based upon possible choices of nursing care.

APPENDIX I

RESPONSIBILITIES LISTED IN JOB DESCRIPTIONS FOR THE LICENSED PRACTICAL NURSE SUBMITTED BY DELAWARE COUNTY HEALTH INSTITUTIONS

- I. Position: Licensed Practical Nurse
- II. Definition: Perform a wide variety of patient care activities as directed by the charge nurse and/or team leader.
- III. Qualifications:
 - A. Graduation from an approved school of practical nursing.
 - B. Current registration as a licensed practical nurse with the Pennsylvania State Board of Nurse Examiners, or eligible for licensure within one year.
- IV. Responsibility:
 - A. Provides nursing care for selected patients.
 - B. Observe patient, recording and reporting pertinent facts to the appropriate person.
 - C. Administer medications following the completion of a pharmacology course.
 - D. Perform certain treatments and procedures as assigned, assist nursing and medical personnel in rendering treatments.
 - E. Carry out medical asepsis as instructed on selected patients.
 - F. Assist patients in activities of daily living.
 - G. Record accurately and completely nursing care given.

APPENDIX J

RESPONSIBILITIES LISTED IN JOB DESCRIPTION FOR THE REGISTERED NURSE
SUBMITTED BY DELAWARE COUNTY HEALTH INSTITUTIONS

- I. Position: General Duty Nurse
- II. Definition: Renders nursing care to patients on a nursing unit or in a specialty area.
- III. Qualifications:
 - A. Graduation from an approved school of nursing.
 - B. Current registration as a registered nurse with the Pennsylvania State Board of Nurse Examiners, or eligible for licensure.
- IV. Responsibility:
 - A. Develop and implement nursing care plans based on scientific and nursing principles.
 - B. Observe, record and report to the appropriate person symptoms and progress of assigned patients, assisting with or instituting remedial measures for any adverse changes in the patient.
 - C. Administer medications as prescribed by the attending physician, noting any untoward reaction.
 - D. Perform independent and dependent (as prescribed by medical authority) functions.
 - E. Assist in patient and family teaching.
 - F. Communicates and acts as liason between patient, family, physician hospital personnel and community agencies.
 - G. Assist in patient education and rehabilitation, including the promotion of mental and physical health.
 - H. Maintain accurate and complete record of nursing observations and care.
 - I. Teaches and directs other professional and non-professional personnel for whom she is assigned responsibility.

APPENDIX K

EXPECTED TERMINAL BEHAVIOR OF THE ASSOCIATE DEGREE GRADUATE NURSE

PURPOSE: The graduate of an associate degree nursing program is a generalist, proficient in using a body of integrated knowledge as a basis for clinical judgment in nursing intervention. He is competent to function as a beginning practitioner in health care facilities.

OBJECTIVES:

At the completion of the program, the graduate will:

1. function as a competent beginning practitioner of nursing;
2. be guided by a humanistic philosophy that promotes the respect and acceptance of others;
3. function with an understanding of his accountability for practice as a graduate registered nurse;
4. apply principles of the bio-physical and psycho-social sciences in planning nursing intervention;
5. make sound judgments and decisions in assessing the individual's nursing needs;
6. demonstrate his understanding of the physiological and psychological components of illness by therapeutic intervention;
7. function independently within the limits of his preparation, capabilities and responsibilities;
8. perform nursing and other therapeutic measures skillfully and safely;
9. coordinate his activities with other members of the health team in administering health care to individuals;
10. participate actively in nursing organizations;
11. assume responsibility for continuing education to keep abreast of current nursing knowledge.

APPENDIX L

SUMMARY OF
PRACTICAL NURSE STUDENT RESPONSES
TO QUESTIONNAIRE
(N= 24)

STATEMENTS	Strongly Disagree	Mildly Disagree	Disagree	No Opinion	Agree	Mildly Agree	Strongly Agree
1. The DCCC nursing program should serve as a ladder to permit advancement from one level to another.		1	3		13		7
2. Opportunity for career advancement is essential to retain workers in the field of nursing.			1	1	7	2	13
3. Public policy implicit in Federal regulation and manpower demands that individuals be afforded the opportunity for advancement from the lowest to the highest level within the career of nursing.		1		3	11	1	8
4. Associate Degree Nursing programs have failed to provide mechanisms whereby the knowledge and skill of the licensed practical nurse could be assessed.	1		6	8	4	1	4
5. Development of a core curriculum leading into various health careers would improve the potentiality of mobility of health workers.			2	3	9		10
6. A system should be established whereby the LPN can get the additional education to move forward as rapidly as possible (i.e., within one year or less).			4	2	7	3	8
7. LPN's should be able to complete a performance based test to demonstrate their knowledge and competence and be appropriately placed in an associate degree nursing curriculum.	1		1	1	11	1	9
8. The combined graduates of all nursing education programs is inadequate to meet the current demands for nursing service now and in the next decade.	4	2	9	6	3		
9. Some nursing education programs are developing articulation programs that take into account differences in preparation and learning capacity among students.			5	7	10	1	1
10. A performance based practicum to evaluate the clinical competencies of LPN applicants should be developed.	1			2	12		9
11. There is a core of knowledge basic to all health practitioners.					16	1	7
12. The job responsibilities identified by the employing agency for the graduate nurse are clearly different from those for the licensed practical nurse.	1	1	1	4	10	2	5

SUMMARY OF
LICENSED PRACTICAL NURSES
RESPONSES TO QUESTIONNAIRE
(N= 73)

STATEMENTS	Strongly Disagree	Mildly Disagree	Disagree	No Opinion	Agree	Mildly Agree	Strongly Agree
1. The DCCC nursing program should serve as a ladder to permit advancement from one level to another.		1	1	7	39	6	19
2. Opportunity for career advancement is essential to retain workers in the field of nursing.	1	2	2		25	5	38
3. Public policy implicit in Federal regulation and manpower demands that individuals be afforded the opportunity for advancement from the lowest to the highest level within the career of nursing.		1	3	7	26	8	26
4. Associate Degree Nursing programs have failed to provide mechanisms whereby the knowledge and skill of the licensed practical nurse could be assessed.	3	3	16	22	16	4	9
5. Development of a core curriculum leading into various health careers would improve the potentiality of mobility of health workers.		1		2	24	3	43
6. A system should be established whereby the LPN can get the additional education to move forward as rapidly as possible (i.e., within one year or less).	1	1	3	2	33	7	26
7. LPN's should be able to complete a performance based test to demonstrate their knowledge and competence and be appropriately placed in an associate degree nursing curriculum.			1	2	24	7	39
8. The combined graduates of all nursing education programs is inadequate to meet the current demands for nursing service now and in the next decade.	6	6	15	17	18	4	7
9. Some nursing education programs are developing articulation programs that take into account differences in preparation and learning capacity among students.	3	2	9	16	22	8	13
10. A performance based practicum to evaluate the clinical competencies of LPN applicants should be developed.	1	2	4	4	31	7	24
11. There is a core of knowledge basic to all health practitioners.	2	1	8	3	13	8	38
12. The job responsibilities identified by the employing agency for the graduate nurse are clearly different from those for the licensed practical nurse.	14	6	10	13	20	4	6

SUMMARY OF
ASSOCIATE DEGREE NURSE STUDENT
RESPONSE TO QUESTIONNAIRE
(N= 62)

STATEMENTS	Strongly Disagree	Mildly Disagree	Disagree	No Opinion	Agree	Mildly Agree	Strongly Agree
1. The DCCC nursing program should serve as a ladder to permit advancement from one level to another.		2	2	11	24	4	19
2. Opportunity for career advancement is essential to retain workers in the field of nursing.	2	1	1	1	26	6	25
3. Public policy implicit in Federal regulation and manpower demands that individuals be afforded the opportunity for advancement from the lowest to the highest level within the career of nursing.		1	1	17	22	5	16
4. Associate Degree Nursing programs have failed to provide mechanisms whereby the knowledge and skill of the licensed practical nurse could be assessed.	1	3	12	18	5	6	8
5. Development of a core curriculum leading into various health careers would improve the potentiality of mobility of health workers.	1	1		3	21	13	23
6. A system should be established whereby the LPN can get the additional education to move forward as rapidly as possible (i.e., within one year or less).		1	2	4	29	6	20
7. LPN's should be able to complete a performance based test to demonstrate their knowledge and competence and be appropriately placed in an associate degree nursing curriculum.	2	2	3	6	21	8	20
8. The combined graduates of all nursing education programs is inadequate to meet the current demands for nursing service now and in the next decade.	6	16	20	7	8	4	1
9. Some nursing education programs are developing articulation programs that take into account differences in preparation and learning capacity among students.	3		1	21	26	7	4
10. A performance based practicum to evaluate the clinical competencies of LPN applicants should be developed.	2	2	5	14	13	7	17
11. There is a core of knowledge basic to all health practitioners.	3	3	4	13	14	3	22
12. The job responsibilities identified by the employing agency for the graduate nurse are clearly different from those for the licensed practical nurse.		3	7	13	26	5	8

SUMMARY OF
SUPERVISORY NURSE RESPONSE
TO QUESTIONNAIRE
(N= 60)

STATEMENTS	Strongly Disagree	Mildly Disagree	Disagree	No Opinion	Agree	Mildly Agree	Strongly Agree
1. The DCCC nursing program should serve as a ladder to permit advancement from one level to another.	1		2	12	17	6	22
2. Opportunity for career advancement is essential to retain workers in the field of nursing.			3	3	20	2	32
3. Public policy implicit in Federal regulation and manpower demands that individuals be afforded the opportunity for advancement from the lowest to the highest level within the career of nursing.		1	6	12	20	5	16
4. Associate Degree Nursing programs have failed to provide mechanisms whereby the knowledge and skill of the licensed practical nurse could be assessed.	5		5	16	13	8	13
5. Development of a core curriculum leading into various health careers would improve the potentiality of mobility of health workers.			3	4	26	5	22
6. A system should be established whereby the LPN can get the additional education to move forward as rapidly as possible (i.e., within one year or less).	1	1	1	3	27	9	18
7. LPN's should be able to complete a performance based test to demonstrate their knowledge and competence and be appropriately placed in an associate degree nursing curriculum.	6	2	3	1	18	4	26
8. The combined graduates of all nursing education programs is inadequate to meet the current demands for nursing service now and in the next decade.	7	1	9	13	9	5	16
9. Some nursing education programs are developing articulation programs that take into account differences in preparation and learning capacity among students.		1	4	26	18	3	8
10. A performance based practicum to evaluate the clinical competencies of LPN applicants should be developed.	1			7	24	3	25
11. There is a core of knowledge basic to all health practitioners.	4	1	7	3	14	5	26
12. The job responsibilities identified by the employing agency for the graduate nurse are clearly different from those for the licensed practical nurse.	2		14	3	21	3	17

SUMMARY OF
PRACTICAL NURSE INSTRUCTOR
RESPONSES TO QUESTIONNAIRE
(N= 10)

STATEMENTS	Strongly Disagree	Mildly Disagree	Disagree	No Opinion	Agree	Mildly Agree	Strongly Agree
1. The DCCC nursing program should serve as a ladder to permit advancement from one level to another.				1	5	1	3
2. Opportunity for career advancement is essential to retain workers in the field of nursing.			2		3		4
3. Public policy implicit in Federal regulation and manpower demands that individuals be afforded the opportunity for advancement from the lowest to the highest level within the career of nursing.			2	2	3		3
4. Associate Degree Nursing programs have failed to provide mechanisms whereby the knowledge and skill of the licensed practical nurse could be assessed.			3	2	2	2	1
5. Development of a core curriculum leading into various health careers would improve the potentiality of mobility of health workers.			1		4	2	3
6. A system should be established whereby the LPN can get the additional education to move forward as rapidly as possible (i.e., within one year or less).		1	2		4	1	2
7. LPN's should be able to complete a performance based test to demonstrate their knowledge and competence and be appropriately placed in an associate degree nursing curriculum.				1	5	1	3
8. The combined graduates of all nursing education programs is inadequate to meet the current demands for nursing service now and in the next decade.		1	4	3			2
9. Some nursing education programs are developing articulation programs that take into account differences in preparation and learning capacity among students.	1	1		3	4		1
10. A performance based practicum to evaluate the clinical competencies of LPN applicants should be developed.				1	5	1	3
11. There is a core of knowledge basic to all health practitioners.				1	3	3	3
12. The job responsibilities identified by the employing agency for the graduate nurse are clearly different from those for the licensed practical nurse.		1	2	1	3	1	2

SUMMARY OF
 ASSOCIATE DEGREE NURSE INSTRUCTOR
 RESPONSES TO QUESTIONNAIRE
 (N= 15)

STATEMENTS	Strongly Disagree	Mildly Disagree	Disagree	No Opinion	Agree	Mildly Agree	Strongly Agree
1. The DCCC nursing program should serve as a ladder to permit advancement from one level to another.				2	4		9
2. Opportunity for career advancement is essential to retain workers in the field of nursing.					7		8
3. Public policy implicit in Federal regulation and manpower demands that individuals be afforded the opportunity for advancement from the lowest to the highest level within the career of nursing.				6	3		6
4. Associate Degree Nursing programs have failed to provide mechanisms whereby the knowledge and skill of the licensed practical nurse could be assessed.	1		4	3	3		4
5. Development of a core curriculum leading into various health careers would improve the potentiality of mobility of health workers.			2	2	3	2	6
6. A system should be established whereby the LPN can get the additional education to move forward as rapidly as possible (i.e., within one year or less).	1	1	2		4		7
7. LPN's should be able to complete a performance based test to demonstrate their knowledge and competence and be appropriately placed in an associate degree nursing curriculum.			3	2	3	1	6
8. The combined graduates of all nursing education programs is inadequate to meet the current demands for nursing service now and in the next decade.	1	1	4	3	4	2	
9. Some nursing education programs are developing articulation programs that take into account differences in preparation and learning capacity among students.				3	6	2	4
10. A performance based practicum to evaluate the clinical competencies of LPN applicants should be developed.			1	3	2	3	6
11. There is a core of knowledge basic to all health practitioners.				2	5	2	6
12. The job responsibilities identified by the employing agency for the graduate nurses are clearly different from those for the licensed practical nurse.	1		5	2	1	4	2

**SUMMARY OF
MEMBERS OF COMMUNITY RESPONSES
TO QUESTIONNAIRE
(N= 110)**

STATEMENTS	Strongly Disagree	Mildly Disagree	Disagree	No Opinion	Agree	Mildly Agree	Strongly Agree
1. The DCCC nursing program should serve as a ladder to permit advancement from one level to another.		4	3	18	46	12	27
2. Opportunity for career advancement is essential to retain workers in the field of nursing.		11	5	12	31	13	38
3. Public policy implicit in Federal regulation and manpower demands that individuals be afforded the opportunity for advancement from the lowest to the highest level within the career of nursing.			2	25	29	18	36
4. Associate Degree Nursing programs have failed to provide mechanisms whereby the knowledge and skill of the licensed practical nurse could be assessed.	5	4	22	43	23	10	3
5. Development of a core curriculum leading into various health careers would improve the potentiality of mobility of health workers.		1		4	36	6	63
6. A system should be established whereby the LPN can get the additional education to move forward as rapidly as possible (i.e., within one year or less).			2	7	54	11	36
7. LPN's should be able to complete a performance based test to demonstrate their knowledge and competence and be appropriately placed in an associate degree nursing curriculum.	1		5	11	49	12	32
8. The combined graduates of all nursing education programs is inadequate to meet the current demands for nursing service now and in the next decade.	8	7	27	31	26	3	8
9. Some nursing education programs are developing articulation programs that take into account differences in preparation and learning capacity among students.		2	14	44	26	13	11
10. A performance based practicum to evaluate the clinical competencies of LPN applicants should be developed			3	21	51	8	27
11. There is a core of knowledge basic to all health practitioners.		1	6	22	46	16	19
12. The job responsibilities identified by the employing agency for the graduate nurse are clearly different from those for the licensed practical nurse.	2		11	32	38	11	16

SUMMARY
OF
RESPONSES TO QUESTIONNAIRE
(N= 354)

STATEMENTS							
	Strongly Disagree	Mildly Disagree	Disagree	No Opinion	Agree	Mildly Agree	Strongly Agree
1. The DCCC nursing program should serve as a ladder to permit advancement from one level to another.	1	4	6	6	129	28	170
2. Opportunity for career advancement is essential to retain workers in the field of nursing.	3	15	14	17	119	28	154
3. Public policy implicit in Federal regulation and manpower demands that individuals be afforded the opportunity for advancement from the lowest to the highest level within the career of nursing.		4	16	72	114	37	111
4. Associate Degree Nursing programs have failed to provide mechanisms whereby the knowledge and skill of the licensed practical nurse could be assessed.	25	10	68	112	66	31	42
5. Development of a core curriculum leading into various health careers would improve the potentiality of mobility of health workers.	1	7	13	53	142	32	106
6. A system should be established whereby the LPN can get the additional education to move forward as rapidly as possible (i.e., within one year or less).	10	8	33	43	112	36	122
7. LPN's should be able to complete a performance based test to demonstrate their knowledge and competence and be appropriately placed in an associate degree nursing curriculum.	10	4	16	24	131	34	135
8. The combined graduates of all nursing education programs is inadequate to meet the current demands for nursing service now and in the next decade.	32	34	88	80	66	18	34
9. Some nursing education programs are developing articulation programs that take into account differences in preparation and learning capacity among students.	7	6	33	120	112	34	42
10. A performance based practicum to evaluate the clinical competencies of LPN applicants should be developed.	7	14	13	42	138	29	111
11. There is a core of knowledge basic to all health practitioners.	2	3	8	19	167	39	116
12. The job responsibilities identified by the employing agency for the graduate nurse are clearly different from those for the licensed practical nurse.	20	11	50	68	119	30	56

ADDITIONAL COMMENTS

PRACTICAL NURSE STUDENT

Would like to continue education, financially unable to attend baccalaureate program.

Lack of cooperation between types of programs of articulation.

Required courses in Anatomy and Physiology, Microbiology, etc, should be made available on a part time student basis.

Classes during evening and weekend should be provided.

There is more than just nursing education involved in making an LPN into an R.N., psychological understanding, too.

LICENSED PRACTICAL NURSE

An LPN with experience of two or more years should be evaluated for entrance at a higher level than a new graduate LPN.

Judgment should be strictly on the individual.

The nursing field needs a lot of organization. One school produces one type of nurse, another produces another type. One should be educated by what skills they do have, since these skills are varied.

Need one year or longer to be a good course.

ASSOCIATE DEGREE NURSE STUDENT

These questions could be more accurately answered by a statistician in the health field or an administrator in that field.

Program might cause too much competition among students.

LPN should be able to get credit by challenge examination.

A lot of aides became an LPN and carry unfavorable practice. In some cases, bad habits have to be unlearned.

SUPERVISORY NURSE

Just because a person enters a school to pursue a health related education pursuant to an associate degree in nursing (or any degree) does not qualify that one as a nurse.

A real nurse is a special person (I.e., compassionate, congenial, concerned and caring, combined with an immense amount of common sense). She must be willing to stoop, yet capable of supervision and accepting and handling responsibility. Nursing is a profession and not everyone can handle it. I believe we are permitting students to enter the nursing profession who are working at it as a job, rather than a genuine love for humanity. This is why I feel more stringent rules for acceptance into nursing are long overdue, yet extremely necessary if we are to maintain our professional status.

The "basic core" of knowledge is not as total or strong as it should be. There's a big difference between performance of activities and knowledge of why they are done, but there definitely should be.

I was in an ADN program that allowed for total advancement at a rate that was individualized - but the entrance screening was not stringent enough. There are many difficulties with people who didn't have enough basic science or reading skills to allow them to advance at any rate of speed to keep up with the curriculum. It proved frustrating to them and to those who should advance very fast---a really good screening program is necessary

In addition to testing clinical competency, there should be a tool provided to evaluate theoretical concepts as taught in AD programs. At present, practical nursing and technical nursing do not have the same basic philosophy.

All associate degree nurses should work as nurse aides on some of their time off to get more practice in bedside nursing and responsibilities.

So much depends on the evaluation test planned to separate the shaft from the wheat before I could be sure of the feasibility of such a program.

I believe ADN program should be basic LPN should also have BSN basic for nursing with upward mobility a possibility for all programs.

I believe that the schools in the area should provide programs where the LGPN would receive some credit for the previous educational and clinical experience. If such a program would be established I think many LGPN's would take advantage of it.

The associate degree program should serve as a ladder to permit advancement from one level to another, only in part of the total program.

Salary increases as well as career advancement would also help retain workers in the field of nursing.

Not all employing agencies differentiate between the duties of the licensed practical nurse and the registered nurse.

LICENSED PRACTICAL NURSE INSTRUCTOR

Clinical competencies - ambiguous- could mean many things with various degrees of understanding.

There are changing needs for the registered nurse, also inadequate nurse is a regional problem.

Licensed practical nurses should be tested for both theoretical knowledge and clinical competency

ASSOCIATE DEGREE NURSE INSTRUCTOR

Assessment should not be only performance based.

Job responsibilities are minimally differentiated. The differences between the LPN and the RN are often waived or overlooked.

It is my considered opinion that the shortage of nursing personnel would not be nearly as acute (as is claimed) if, in fact, personnel were utilized with greater discretion, in nursing services.

Since I have participated in some planning relative to the implementation of Primary Nursing Care, I am aware that this does not provide for the use of the LPN and feel that "nursing" owes this person the opportunity to move into the realm of technical nursing, rather than losing this LPN to the "health care field." I realize that this plan (Primary Nursing on every patient) is not wholly feasible at this time, having seen how nursing has moved in its direction in the past twenty five years --slowly-- I know, but moved--I feel this plan might some day be a mode of nursing and therefore eliminate the LPN. Therefore, articulation programs would be necessary.

Other programs as well as Associate Degree Nursing programs have failed to provide the necessary mechanisms whereby the knowledge and skill of the LPN could be assessed.

I think there is too much variability in the quality of the LPN programs thus, the LPN should not move forward in less than one year.

The job responsibilities of the associate degree nurse and the licensed practical nurse should be different, but I see little difference in assignments, etc.

The student should be able to move forward as rapidly as possible at the person's own speed.

To enter the program, the student should have the capacity to learn.

An LPN is not equipped with education equal to that of the registered nurse.

The licensed practical nurse and the registered nurse are not all clearly different in employing agencies.

MEMBER OF THE COMMUNITY

There should be a special program for the licensed practical nurse to become a registered nurse. With a community college, why is this not built into the program.

All nursing programs should be open-ended to provide an opportunity for those who wish to continue to develop their skills.

The similarities of their responsibilities should be identified and a plan to progress be built on the differences.

APPENDIX N

TERMINAL BEHAVIORS OF THE ASSOCIATE DEGREE NURSE
 COMPARED TO THE MAJOR ABILITIES TESTED BY
 THE STATE BOARD OF NURSE EXAMINERS

TERMINAL BEHAVIORS	ABILITIES TESTED
1. Function as a competent beginning practitioner of nursing.	1. Understands theory of nursing and medical care.
2. Be guided by a humanistic philosophy that promotes the respect and acceptance of others.	2. Understands effective human relations.
3. Functions with an understanding of his accountability for practice as a graduate registered nurse.	3. Understands the registered nurses' accountability for practice.
4. Apply principles of the bio-physical and psycho-social sciences in planning nursing intervention.	4. Understands principles and known facts of the social and behavioral sciences that are applicable to nursing practice and basic to plans of care. Understands principles and known facts of the natural and biological sciences that are applicable to nursing practice and basic to plans of care.
5. Make sound judgments and decisions in assessing the individual's nursing needs.	5. Knows causes, modes of transfer and incidence of diseases and abnormal conditions and understands methods for prevention and control. Know manifestations of disease and abnormal conditions, with major emphasis upon those which are common.
6. Demonstrate his understanding of the physiological components of illness by therapeutic intervention.	6. Recognizes physical health and understands physical needs throughout the life cycle. Recognizes mental and emotional health and understands emotional needs throughout the life cycle.
7. Function independently within the limits of his preparation, capabilities and responsibilities.	7. Understands theory of nursing and medical care.

TERMINAL BEHAVIORS

8. Perform nursing and other therapeutic measures skillfully and safely.
9. Coordinates his activities with other members of the health team in administering health care to individuals.
10. Participates actively in nursing organizations.
11. Assume responsibility for continuing education to keep abreast of current nursing knowledge.

ABILITIES TESTED

8. Understands what nursing measures are safe and effective and knows how to carry out or assist with commonly used procedures.

APPENDIX O

OBJECTIVES OF THE DELAWARE COUNTY COMMUNITY COLLEGE NURSING PROGRAM

At the completion of the program, the graduate will:

1. function as a competent beginning practitioner of nursing;
2. be guided by a humanistic philosophy that promotes the respect and acceptance of others;
3. evaluate nursing situations objectively;
4. make sound judgments and decisions in planning, implementing and evaluating nursing care;
5. apply principles of the physical, biological, social and behavioral sciences in nursing intervention;
6. demonstrate his understanding of the psychological and emotional components of illness by therapeutic intervention;
7. communicate effectively;
8. function independently within the limits of his preparation, capabilities and responsibilities;
9. assume responsibility for his actions;
10. coordinate his activities with other members of the health team in meeting patient needs;
11. participate actively in nursing organizations; and
12. assume responsibility for continuing education to keep abreast of current nursing knowledge.

CENTRAL OBJECTIVE: The student will: describe the roles and functions of both legal and quasi-legal agencies that have direct effect on the nature and structure of nursing education programs; identify the approval and accreditation processes that have been completed by DCCC nursing program; define mandatory and permissive licensure; and describe bases for legal action that can be taken against the nurse practitioner.

TIME:
3 hours

OBJECTIVE	CONTENT	LEARNER ACTIVITIES
<p>The student will:</p> <p>Describe the roles and functions of both legal and quasi-legal agencies that have direct effect on the nature and structure of nursing education programs.</p> <p>Identify the approval and accreditation processes that have been completed by Delaware County Community College (DCCC) Nursing Program.</p>	<p>I. Legal Agencies</p> <p>A. State Board of Nurse Examiners</p> <ol style="list-style-type: none"> 1. Legal agency created by State Legislature 2. Composition 3. Responsibilities defined by Nurse Practice Act <p>II. Quasi-Legal Agencies</p> <p>A. American Nurses' Association</p> <ol style="list-style-type: none"> 1. State association 2. Major functions <p>B. National League for Nursing</p> <ol style="list-style-type: none"> 1. State leagues 2. Major functions <p>C. "Middle States"</p> <p>D. Student Nurse Association of Pennsylvania (SNAP)</p> <p>III. DCCC Nursing Program in Terms of Relationships With Above Agencies</p> <ol style="list-style-type: none"> A. Approval status B. Accreditation status 	<p>Rules and Regulations of the State Board of Nurse Examiners for Programs of Professional and Technical Nursing. Criteria for the Evaluation of Associate Degree Nursing Programs.</p> <p>Read: Role of ANA and ABE.</p>

APPENDIX P

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DIRECTIONS FOR MODULE I

Read the underlying principles, objectives and vocabulary for the module.
Listen to assigned audio tapes.
View films as assigned.

If you have previously learned facts about legal aspects you may discuss with your instructor the possibility of completing the pre-test. In the written pre-test, you will answer with a minimum 80 per cent accuracy questions related to the following criterion behaviors.

If 80 per cent or better mastery is not obtained, complete the learning activities and readings (those with an asterisk are required readings). Following completion of the learning activities and reading, the student will take the post test and complete it with a minimum 80 per cent accuracy questions related to the criterion behaviors.

REMEMBER: COMMUNICATE - ASK QUESTIONS: SEEK HELP WHEN YOU NEED IT.

CRITERIA: LEGAL ASPECTS - PRE AND POST ASSESSMENT

Following completion of this module, you will be able to:

- I. Describe the role and function of:
 - A. State Board of Nurse Examiners
 - B. American Nurses Association
 - C. National League for Nursing
 - D. Student Nurse Association of Pennsylvania
- II. Identify the status of Delaware County Community College Nursing Program as to:
 - A. Approval by the State Board of Nurse Examiners
 - B. Accreditation by the National League for Nursing
- III. Contrast mandatory, permissive and institutional licensure.
- IV. Describe "torts" as it relates to nurse practice.
- V. Describe "negligence and malpractice" as it relates to nurse practice.
- VI. Describe "crimes" in relation to nurse practice.
- VII. Describe the responsibility of a person who witnesses a will in relation to nursing.
- VIII. Cite an example of a privileged act.
- IX. Describe the purpose of a code of ethics.
- X. Define the words listed in the vocabulary.

PRE TEST: MODULE I

- I. 1. The State Board of Nurse Examiners is:
 - A. Made up of a group of individuals interested in nursing.
 - B. Concerned only with licensing graduates of practical and professional programs.
 - C. Responsible for approving the practical and nursing education programs in the state.

2. The American Nurses Association:
 - A. Publishes the Nursing Outlook.
 - B. Has both nurse and interested individuals as members.
 - C. Develops test material for accreditation of educational programs.
 - D. Is an organization of registered professional nurses.

3. The National League for Nursing is:
 - A. An organization whose membership is open only to registered professional nurses.
 - B. Is the accrediting agency for schools of practical and professional nursing.
 - C. Is responsible for reviewing State Boards of Nurse Examiners.

4. A mandatory Nurse Practice Act:
 - A. Has been legislated in each of the fifty states.
 - B. Provides for an approved health institution to license nurse practitioners.
 - C. Forbids anyone not licensed to practice the profession of nursing.
 - D. Forbids anyone to say licensed nurse if they are not licensed.

5. The branch of law which deals with negligent conduct is a part of the law of:
 - A. Crimes
 - B. Torts
 - C. Contracts

6. A legal nurse patient relationship is based upon:
 - A. The provision of nursing care to a consenting patient.
 - B. The provision of nursing care to someone by a person with a registered professional nurse license.
 - C. The provision of nursing care in any nurse patient relationship.

7. A nurse in a given situation is judged as acting with reasonable care mainly by:
 - A. The extensiveness of her education and experience.
 - B. The degree to which she adhered to a doctor's orders or followed hospital routine.
 - C. Her conduct compared with that of other nurses with similar education.
 - D. Whether it is an emergency situation.

8. A nurse is deemed negligent if:
- She cuts a patient's hair without his or her consent.
 - She fails to respond or to ask someone else to respond promptly to a patient's call light or signal, if because of such failure, a patient attempts to take care of his own needs and is injured.
 - She ejects a visitor from a patient's room without the patient's consent.
 - She forces an undernourished adult to eat her prescribed diet.
9. All other things being equal, the best thing a nurse can do to forestall the possibility of malpractice claims is to:
- Stress the psychosocial aspects of patient care, even if there is a resultant degree of inattention to physical needs.
 - Regard the patient as someone with physical and psychosocial needs which she should treat in a competent manner.
 - Place emphasis on meeting the patient's physical needs in an competent manner.
10. A nurse can be the defendant and charged with "crime" if:
- She fails to raise the siderails on the bedside of a confused patient and the patient falls sustaining a fractured hip.
 - She administers an unordered narcotic which extends the hospital stay of the patient.
 - She discusses with individuals other than hospital personnel the extent of a patient's illness.
 - Fails to administer aspirin, as ordered, because the patient was not complaining of pain.
11. Code of ethics is:
- A guide of responsibility for individual action delegated to the nurse.
 - A guide to individual competence required in nursing practice.
 - A guide to standard of conduct based on moral judgment guiding nursing conduct.
12. Assault as defined legally is:
- Carelessness resulting in injury to the patient.
 - An illegal act against society.
 - An attempt to use force or violence with an intent to injure another.
 - A crime of a serious nature.

II. Choose the correct answer for the following. Place an "A" if assault applies and a "N" if negligence applies.

1. _____ Cutting a patient's hair or having it cut without his or her consent.
2. _____ Careless attention to a patient's personal belongings.
3. _____ Forcing a patient to submit to a treatment for which he has not given his consent either expressly in writing, orally, or by implication.
4. _____ Failure to respond or to ask someone else to respond promptly to a patient's call light or signal, if because of such failure, a patient attempts to take care of his own needs and is injured.
5. _____ Lifting a protesting patient from his bed to a wheelchair or stretcher.
6. _____ Threatening to strike or actually striking an unruly patient, except in self-defense.
7. _____ Failure to use adequate precautions to protect the patient against injury.
8. _____ Ejecting a visitor from a patient's room without the patient's consent.
9. _____ Failure to carry out orders for treatments or medication.
10. _____ Failure to take whatever steps are necessary in certain emergencies to protect the victim from further injury until medical care is available.

III. Practicum:

Respond appropriately to a legal situation presented by your instructor. Evaluation of response will be considered as to nursing and legal principles mentioned.

PRACTICUM - MODULE I: LEGAL ASPECTS

Directions: Respond appropriately with 80 per cent accuracy to the following legal situation. Take no more than twenty minutes to formulate an answer.

Situation 1

Nursing Student A, following confirmation by graduate nurse in charge of the unit, administered an aspirin to a Ms. N. who complained of a severe headache. There was no written order on the patient's chart for the drug. The patient responded unfavorably and developed a severe rash requiring longer hospitalization. The estate of Ms. N. sued the nursing student for malpractice.

Response:

1. The nursing student is personally responsible for her own acts.
2. Administering a medication that has not been ordered constitutes malpractice.
3. The nursing student can be sued for malpractice.

PRACTICUM - MODULE I: LEGAL ASPECTS

Directions: Respond appropriately with 80 per cent accuracy to the following legal situations. Take no more than twenty minutes to formulate an answer.

Situation 2

First semester Nursing Student B was instructed to catheterize Mrs. M. Although she had not been taught this nursing skill, Nursing Student B catheterized Mrs. M. Subsequently, the patient developed a bladder infection. Nursing Student B was named the plaintiff in a lawsuit brought by Mrs. M. accusing the student of malpractice.

Response:

1. The nursing student is personally responsible for her own acts.
2. Catheterizing a patient prior to being instructed in this nursing technique constitutes malpractice.
3. The nursing student can be named the defendant in a malpractice suit.

PRACTICUM - MODULE I: LEGAL ASPECTS

Directions: Respond appropriately with 80 per cent accuracy to the following legal situation. Take no more than twenty minutes to formulate an answer.

Situation 3A

Nurse B placed a heat cradle over the infected leg of Mr. X. The written order read that heat cradle should be a minimum of 6" from the patient's leg and left in position for 20' out of each hour. Nurse B's next task took longer than she had anticipated and upon removal of the lamp, the patient complained of severe pain and a feeling of extreme burning. Mrs. B was named defendant in a malpractice suit with Mr. X the plaintiff.

Response:

1. Nurse B is responsible for her own acts.
2. The comfort and safety of the patient is one of the nurses fundamental responsibilities.
3. A prudent nurse would remove the heat cradle at the designated time. By jeopardizing the safety of the patient, Nurse B can be liable as the defendant in a malpractice suit.

PRACTICUM - MODULE I: LEGAL ASPECTS

Directions: Respond appropriately with 80 per cent accuracy to the following legal situation. Take no more than twenty minutes to formulate an answer.

Situation 3B

The Commonwealth of Pennsylvania has a statute which provides that only a physician or dentist may prescribe, administer or dispense drugs. Violation of this statute is made a crime, punishable by fine or imprisonment or both.

Doctor L ordered a specified quantity of a pain killing narcotic to be given one time at a specific time to Mrs. O. Nurse N. administered the drug as directed. Five hours later, the patient complained of severe pain. Nurse N. was unable to contact Doctor L. She nevertheless administered the specified quantity of the pain killing narcotic a second time. The patient lapsed into a comatose state, and expired within a short lapse of time. The estate of Mrs. O. named Nurse N. defendant in a lawsuit.

Response:

1. Nurse N. is responsible for her own acts.
2. By prescribing a narcotic drug for a patient Nurse N. violated the Commonwealth statute.
3. Nurse N. can be held criminally liable for violating the commonwealth's narcotic drug statute.

PRACTICUM - MODULE I: LEGAL ASPECTS

Directions: Respond appropriately with 80 per cent accuracy to the following legal situation. Take no more than twenty minutes to formulate an answer.

Situation 4

Nurse D. knocked over an I.V. stand in a patient's room. The stand struck the ankle of her patient, Mrs. H. Mrs. H. sustained a fracture of the right ankle requiring her to be hospitalized an additional ten days. Nurse D. was named defendant in a malpractice lawsuit filed by Mrs. H.'s attorney.

Response:

1. Nurse D. is responsible for her own acts.
2. The comfort and safety of her patient is one of the nurse's fundamental responsibilities.
3. The proper positioning of an IV stand is a function the prudent nurse would normally be expected to perform with care to assure the patient's safety and welfare. By jeopardizing the patient's safety, Nurse D. can be liable as the defendant in a malpractice suit.

PRACTICUM - MODULE I: LEGAL ASPECTS

Directions: Respond appropriately with 80 per cent accuracy to the following legal situation. Take no more than twenty minutes to formulate an answer.

Situation 5

Nurse S. was assigned responsibility for placing a hot water bottle on the right leg of Mrs. J. She was observed testing the water by tapping a few drops on her wrist. Following removal of the hot water bottle it was evident that Mrs. J. had sustained a second degree burn. Nurse S. was named defendant in a malpractice suit filed by Mrs. J's attorney.

Response:

1. Nurse S. is responsible for her own acts.
2. The comfort and safety of the patient is one of the nurse's fundamental responsibilities.
3. A prudent nurse would test the water temperature with a bath thermometer prior to placing a hot water bottle on any patient. By jeopardizing the safety of the patient, Nurse S. can be liable as the defendant in a malpractice suit.

PRACTICUM - MODULE I: LEGAL ASPECTS

Directions: Respond appropriately with 80 per cent accuracy to the following legal situation. Take no more than twenty minutes to formulate an answer.

Situation 6

Nurse L. interpreted an illegible medication order to read Lente insulin U60 rather than U10 as written by the attending physician. She administered U60 to Mr. J. and four hours later the patient was in insulin shock. Mr. J.'s attorney filed a lawsuit naming Nurse L. liable for malpractice.

Response:

1. Nurse L. is responsible for her own acts.
2. Nurse L. failed to exercise reasonable care as she failed to question the physician concerning an illegible medication order.
3. In failing to exercise reasonable care as would any prudent nurse, Nurse L. can be named the defendant in a malpractice suit.

PRACTICUM - MODULE I: LEGAL ASPECTS

Directions: Respond appropriately with 80 per cent accuracy to the following legal situation. Take no more than twenty minutes to formulate an answer.

Situation 7

Nurse M. administered Seconal gr. ISS to a geriatric patient, Mr. F. She failed to raise the siderail. One hour later Mr. F. fell from the bed to the floor and sustained a fracture of the left hip and left wrist. Nurse M. was named defendant in a lawsuit and claimed negligent.

Response:

1. Nurse M. is responsible for her own acts.
2. Nurse M.'s negligent conduct resulted in a fall of the patient in which injury was sustained.
3. In failing to assure the safety of the patient, as would any prudent nurse, Nurse M. can be liable as the defendant in negligence action.

PRACTICUM - MODULE I: LEGAL ASPECTS

Directions: Respond appropriately with 80 per cent accuracy to the following legal situation. Take no more than twenty minutes to formulate an answer.

Situation 8

Nurse O. assisted Mrs. N., a confused patient to a lounge chair in the patient's room. Mrs. N.'s roommate cried out in pain. Nurse O. left Mrs. N. unattended and went to the aid of the other patient. Mrs. N. attempted to walk, fell and fractured her right leg. Mrs. N.'s attorney filed a lawsuit naming Nurse N. as negligent.

Response:

1. Nurse O. is responsible for her own actions.
2. Nurse O.'s negligent conduct resulted in a fall of the patient in which injury was sustained.
3. In failing to assure the safety of the patient, as would any prudent nurse, a negligent action can be brought against Nurse O.

PRACTICUM - MODULE I: LEGAL ASPECTS

Directions: Respond appropriately with 80 per cent accuracy to the following legal situation. Take no more than twenty minutes to formulate an answer.

Situation 9

Nurse H. and Nursing Assistant transferred an elderly patient, Mr. R., from a wheelchair to a bed. In transferring the patient, his arm slipped between the bed and stretcher. The patient sustained a fracture of the wrist. Mr. R.'s attorney filed a lawsuit naming Nurse H. as defendant.

Response:

1. Nurse H. is responsible for her own actions.
2. Nurse H.'s negligent conduct (failure to protect the patient from injury) resulted in harm to the patient.
3. In failing to assure the safety of the patient, as would any prudent nurse, a negligent action can be brought against Nurse H.

PRE TEST: KEY - MODULE I

Section I

- | | |
|------|-------|
| 1. C | 7. C |
| 2. D | 8. B |
| 3. B | 9. B |
| 4. C | 10. B |
| 5. B | 11. C |
| 6. A | 12. C |

Section II

1. A
2. N
3. A
4. N
5. A
6. A
7. N
8. A
9. N
10. N

MODULE I: VOCABULARY

1. Assault
2. Battery
3. Common Law
4. Constitutional Law
5. Crime
6. Defendant
7. Ethics
8. Felony
9. Good Samaritan Law
10. Invasion of Privacy
11. Law
12. Lawsuit
13. Liable
14. Libel
15. Malpractice
16. Mandatory Nurse Practice Act

MODULE I - DEFINITIONS OF VOCABULARY WORDS

- Assault -** intentional and unlawful threat to physically injure another, sufficient to create fear of imminent peril, and apparent ability to carry out the threat.
- Battery -** unlawful touching of another without his authority.
- Common Law -** judicially created principles - evolved from noted decisions made in previous cases.
- Constitutional Law -** statutes, legislation and constitution.
- Crime -** is primarily a wrong against the public although the crime may be the result of wrongful conduct against a person or his property - is a wrong which is punishable by state or federal government.
- Defendant -** party against whom a complaint is made - one who is allegedly responsible.
- Ethics -** a set of moral principles or values.
- Felony -** crime of a serious nature.
- Good Samaritan Law -** absolving from legal involvement those who help another in distress.
- Invasion of Privacy -** public disclosure of private facts, (i.e., information or photographs of a highly personal nature published without consent of the person claiming invasion).
- Law -** rule of conduct pronounced by a controlling authority, which may be enforced

**Permissive Nurse
Practice Act -**

does not forbid but forbids them to say licensed
if not licensed.

Plaintiff -

individual claiming damages.

Privilege -

right or immunity granted as a peculiar benefit,
advantage or favor.

Slander -

intentional, defamatory words tending to prejudice
another in his reputation, office, trade or business

Statutory Law -

enacted by a legislative body.

Tort -

theory of liability for harm resulting from unreasonable
conduct among individuals.

Will -

written declaration of what a man desires to have done
with his possessions upon his death.

READING:

- *1. Bernzweig, Eli P. The Nurse's Liability for Malpractice A Programmed Course. New York: McGraw-Hill Book Company, 1975.
2. Craighton, Helen. Law Every Nurse Should Know. Philadelphia: W. B. Saunders Company, 1970.
3. DuGas, Beverly Witter. Introduction to Patient Care. Philadelphia: W. B. Saunders Company, 1972. pp. 148-154.
4. Fuerst, Elinor V. and LuVerne Wolfe. Fundamentals of Nursing, 5th ed. Philadelphia: W. B. Saunders Company, 1974, pp. 37-46.
5. Kelly, Lucie Young. Dimensions of Professional Nursing, 3rd ed. New York: Macmillan Publishing Company, Inc., 1975. pp. 246-302; 332-448.
6. Lewis, LuVerne Wolff. Fundamental Skills in Patient Care. Philadelphia: J. B. Lippincott Company, 1976. pp. 18-27.
7. Springer, Eric W. (Editor, Health Law Center). Nursing and The Law. Pittsburgh: Aspen Systems Corporation, 1970.
- *8. Wood, Lucile A. Nursing Skills for Allied Health Services, Volume I. pp. 1-6. Philadelphia: W. B. Saunders Company, 1973.

Reserve Booklet:

- *A. Institutional Licensure
- *B. Nurse Practice Act: Commonwealth of Pennsylvania
- *C. Nursing Practice Acts
- *D. The Biography of a Bill
- *E. The Patient's Bill of Rights

- *7. _____, "Nursing Practice Acts," A.J.N., 74:1310-1319, July, 1974.
- *8. Lambertson, Eleanor C., "The Changing Role of Nursing and Its Regulation," The Nursing Clinics of North America, 9:395-402, September, 1974.
- *9. "Nursing Ethics: The Admirable Professional Standards of Nurses: A Survey Report," Nursing '74, 4:34-44, September, 1974.
10. Silva, Mary Cipriano, "Science, Ethics and Nursing," A.J.N., 74:2004-2007, November, 1974.
11. Stahl, Adele G., "State Boards of Nursing: Legal Aspects," The Nursing Clinics of North America, 9:505-512, September, 1974.

POST-TEST: MODULE I

Fill in the following with the most appropriate answer.

1. Two functions of the State Board of Nurse Examiners are:
 - a. approval of _____ and
 - b. administration of _____
2. The _____ limits membership in its association to registered professional nurses.
3. Accreditation of the nursing educational program at Delaware County Community College was through the _____.
4. _____ is an organized nurse-licensing authority, within each state, responsible for the licensing of all practical and professional nurses.
5. _____ is the autonomous national organization for nursing students in the U.S.A.

Match the following:

- | | | |
|----------|------------|--|
| 1. _____ | Civil law | a. An action in violation of a state law. |
| 2. _____ | Liability | b. A law affecting relations between individuals. |
| 3. _____ | Negligence | c. A law affecting relations between individuals and the government. |

Choose the correct answer for the following: Place an "A" if assault applied; a "B" if battery applied; an "N" if negligence applied; and a "P-J" if prudent judgment applied.

1. _____ Threatening to physically restrain a belligerent patient.
2. _____ Failure to administer pain medication when required.
3. _____ Restraining a confused patient in bed.
4. _____ Forcing a patient to take a pre-operative sleeping pill even if he/she refuses, because it was ordered by the physician.
5. _____ Failure to raise siderails on a confused patient.
6. _____ Giving A.M. care to an elderly patient even though the patient does not want the care.
7. _____ Failure to administer aspirin, as ordered, because the patient was not complaining of pain.
8. _____ Withholding pain medication until the desired time has elapsed.
9. _____ Forcing an undernourished adult to eat her prescribed diet.
10. _____ Failure to administer medication ordered p.r.n. when requested by the patient.

Practicum:

Respond appropriately to a legal situation presented by your instructor. Evaluation of response will be considered as to nursing and legal principles mentioned

POST TEST: KEY

1. Nursing Education Programs

State Licensing Examinations

2. ANA

3. NLN

4. State Board of Nurse Examiners

5. NSNA

1. B

6. C

2. D

7. G

3. F or I

8. J

4. A

9. E

5. H

1. A

6. B

2. N

7. N

EVALUATION OF THE MODULE

Please complete an assessment of the module.

1. Do you feel the material dealt with in this module is relevant to your present or future needs?

Yes _____ No _____

2. How much did you enjoy working through this unit?

_____ Very much Some _____ Very little _____ Not at all _____

3. Do you feel the module was:

Too easy _____ Too hard _____ Too long _____

interesting _____ enjoyable _____ concise _____

understandable _____ Other _____

4. Indicate the learning experiences and activities you preferred for this module.

5. Did you receive adequate guidance and resources from the instructor?

6. I (do _____); (do not _____) feel the need for additional instruction on legal aspects in nursing.