

**New Mexico Consortium for Nursing Workforce Development**

***Standards for Differentiated Competencies  
of the  
Nursing Workforce  
at Time of Entry/Advanced Beginner©***

***Approved by Steering Committee  
March 5, 1999***

*We would appreciate input on your use of this document.  
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# ***NEW MEXICO CONSORTIUM FOR NURSING WORKFORCE DEVELOPMENT***

## **Standards for Differentiated Competencies of the Nursing Workforce at Time of Entry/Advanced Beginner©**

**Approved by Steering Committee  
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### **Philosophy**

We believe that patients are entitled to competent, culturally sensitive, comprehensive, individualized nursing care. We believe that patients have rights, as enumerated in the “Patients' Bill of Rights (AHA, 1992).” The scope of practice for licensed nurses is delineated in the New Mexico Nursing Practice Act, and we believe that any individuals delivering nursing care must do so within the provision of this act.

We believe that nurses should supervise unlicensed people who are performing nursing care. We believe that patients should be able to identify their nursing caregivers by name, licensure status, and employment status. We recognize that nursing care can be delivered in a variety of settings, including many nontraditional ones; however, we believe that the quality of nursing care must be maintained regardless of the setting.

Entry level competency in nursing is assured by completion of an approved program in nursing, regardless of the level, by licensure at the LPN and RN levels, and certification at the advanced practice level. Continued competency is demonstrated by practice that meets accepted standards of care. (See Reference List). As individuals grow in their practice, they may advance along Benner's stages from Advanced Beginners to Expert.

The field of health care changes rapidly, and to keep current with accepted practice requires lifelong learning. We believe that excellent nursing practice is research based.

In New Mexico, the definition of nursing is stated in the Nursing Practice Act, which states:

“Practice of nursing’ means assisting individuals, families, or communities in maintaining or attaining optimal health, assessing and implementing a plan of care to accomplish defined goals, and evaluating responses to care and treatment. This practice is based on specialized knowledge, judgment, and nursing skills acquired through educational preparation in nursing and in the biological, physical, social, and behavioral sciences. This includes, but is not limited to, (1) initiating and maintaining comfort measures; (2) promoting and supporting optimal human functions and responses; (3) establishing an environment conducive to well-being or to the support of a dignified death; (4) collaborating on the healthcare regimen; (5) administering medications and performing treatments prescribed by a person authorized in this state or in any other state in the United States to prescribe them; (6) recording and reporting nursing observations, assessments, interventions, and responses to healthcare; (7) providing counseling and health teaching; (8) delegating nursing interventions that may be performed safely by others and are not in conflict with the NPA; and (9) maintaining accountability for safe and effective care.” (Nursing Practice Act. State of New Mexico, 1991. 61-3-3-J, 1-9).

Nursing care requires participation in collaborative practice with other health professionals to meet the goal of providing positive patient outcomes.

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**I. DIRECT CARE:** Those nursing practices that encompass all activities which support therapeutic interventions, preventive care, and health promotion for patients. A crucial skill for all members of the nursing workforce is cultural competency, in which the patient/family's unique understanding of health and illness is known and respected, within the context of providing excellent nursing care.

<b>Unlicensed Assistive Personnel</b>	<b>Licensed Practical Nurse</b>	<b>Associate Degree Nurse</b>	<b>Baccalaureate Nurse</b>	<b>Master's Nurse</b>	<b>Doctoral Nurse</b>
<b>Assessment</b>					
Identifies basic patient needs and identifies obvious deviations from normal; collects and reports specific data as directed	Collects basic data according to established protocol	Obtains and analyzes data from patient, family, others	Assesses complex patient needs from pre-admission to post-discharge within context of clients' culture	Demonstrates advanced clinical judgment and cultural sensitivity in assessment of individuals, families, groups, and communities	Contributes to policy development
<b>Nursing Diagnosis</b>					
	Uses established nursing diagnoses to describe needs of patients with common, well-defined problems	Formulates appropriate nursing diagnoses for individuals and families to describe actual and potential health problems	Formulates nursing diagnoses for individuals, families, groups, and communities in complex situations	Validates nursing diagnoses for individuals, families, groups, and communities in complex situations	Adds to taxonomy of nursing diagnoses through research
<b>Planning</b>					
Follows directions for care within the context of the developed care plan	Participates in formulation of care plans	Develops care plans for individuals; establishes goals and priorities for care with family and other members of the health care team	Modifies care plans based on nursing theory or research	Uses research to design protocols/ programs for specific patient populations	Does research that elucidates needs for new protocols or programs

## I. DIRECT CARE (continued)

Unlicensed Assistive Personnel	Licensed Practical Nurse	Associate Degree Nurse	Baccalaureate Nurse	Master's Nurse	Doctoral Nurse
<b>Implementation</b>					
Carries out assignment as directed	Provides care according to standards for patients with common, well-defined problems	Adjusts priorities for nursing care as patient situation changes	Provides comprehensive care to patients with complex needs	Implements advanced practice role and coordinates interdisciplinary teams	Integrates nursing care within system; provides impetus for continuous quality improvement
<b>Evaluation</b>					
Collects specific data, as directed, related to outcomes of patient care	Modifies nursing care approaches based on systematic evaluation of patient	Determines effectiveness of care and revises plan of care for individual patients and their families	Evaluates effectiveness of care provided to families, aggregates, and communities	Evaluates continuity of care throughout the health system for patients with complex needs; develops new standards for emerging nursing care problems	Generates outcome data which can be used to systematically improve health status of patients and populations

## II. RELATIONSHIPS WITH PATIENTS AND OTHER HEALTH CARE PROFESSIONALS:

Relationships with patients and other health care professionals are crucial to achieving the goals of health care. Members of the nursing workforce serve as patient advocates. This is done collegially with all members of the health care team through communication, collaboration, and cooperation in the organization and management of care.

Unlicensed Assistive Personnel	Licensed Practical Nurse	Associate Degree Nurse	Baccalaureate Nurse	Master's Nurse	Doctoral Nurse
<b>Advocacy</b>					
Reports patient concerns/problems to nurse	Supports patient decisions	Advocates for patients	Advocates for patients and providers	Advocates for providers, peers, clients, and communities	Influences health care policy through advocacy
<b>Collaboration/Coordination</b>					
Contributes to team functioning	Collaborates with patients, families, and team members	Collaborates and coordinates with other team members	Collaborates and coordinates with groups within the community	Coordinates and consults with organizations and related professional groups	Collaborates and consults with institutions, organizations, and professions

## II. RELATIONSHIPS (continued)

Unlicensed Assistive Personnel	Licensed Practical Nurse	Associate Degree Nurse	Baccalaureate Nurse	Master's Nurse	Doctoral Nurse
<b>Therapeutic Communication and Interpersonal Relationships</b>					
Uses selected medical terms and abbreviations; communicates a caring and helpful attitude to patients	Interacts with patients, families, and health team members	Uses effective verbal and written communication techniques with individuals, families, and health team members	Uses effective verbal and written communication skills with patient populations and professional communities	Uses advanced communication skills, including conflict resolution, with individuals and groups; analyzes and evaluates effectiveness of interpersonal relationships established by health care team	Researches effectiveness of therapeutic communication techniques; develops outcomes criteria and expectations for the effectiveness of IPR and communication
<b>Management and Supervision</b>					
Understands limits of own role and responds appropriately to supervision; manages own assignment	Organizes and manages care for own patients and delegates to UAP	Organizes patient care and delegates nursing care to peers, UAPs, and LPNs; accountable for care done under supervision	Accountable for and supervises health care personnel in carrying out delegated responsibilities	Accountable for planning, supporting, and evaluating patient care provided directly or delegated to others; identifies strategies for improving care	Modifies health care delivery based on evaluation of nursing practice
<b>Professional Development</b>					
Able to state requirement of obtaining 12 hours of CE annually	Able to state requirement of obtaining 30 hours of CE per licensure biennium	Able to state requirement of obtaining 30 hours of CE per licensure biennium	Able to state requirement of obtaining 30 hours of CE per licensure biennium	Able to state requirement of obtaining CE as indicated for advanced practice certification and relicensure	Able to state requirement of obtaining CE as indicated for advanced practice certification and relicensure
Interested in self improvement	Develops personal potential	Values professional growth in others and participates in professional development activities	Fosters professional and personal growth in self and health team members	Plans and implements experiences which foster professional and personal growth in self and members of the health care team	Committed to establishing professional environment in which all members of the team reach highest possible functioning

## II. RELATIONSHIPS (continued)

Unlicensed Assistive Personnel	Licensed Practical Nurse	Associate Degree Nurse	Baccalaureate Nurse	Master's Nurse	Doctoral Nurse
<b>Leadership</b>					
Practices under supervision of licensed person	Practices under supervision of RN, MD, or dentist	Practices within license; supervises team members	Demonstrates leadership role in delivery of nursing care to patients, families, and groups	Assumes leadership in advanced practice settings and mentors others for leadership responsibilities	Provides leadership to the profession; provides intellectual leadership to the discipline

**III. MEMBERSHIP IN THE DISCIPLINE:** Membership in the discipline of nursing creates expectations for individual accountability, personal responsibility for professional growth and nursing's public image, and a commitment to practice within ethical and legal frameworks. Members of the nursing workforce differ in the expectations the discipline of nursing holds in respect to accountability and personal responsibility for professional growth. All members of the nursing workforce are expected to commit to a practice that is within the individual's scope of legal practice, and is fully ethical according to accepted standards.

Unlicensed Assistive Personnel	Licensed Practical Nurse	Associate Degree Nurse	Baccalaureate Nurse	Master's Nurse	Doctoral Nurse
<b>Ethics and Legal Issues</b>					
Adheres to standards of confidentiality and ethical behavior	Practices within legal definition of role; adheres to nursing code of ethics	Demonstrates knowledge of ethical/legal principles as applied to self, patients, and others	Assists other team members to recognize legal limits of practice	Applies ethical/legal frameworks in evaluating nursing practice	Explores, through research and reflection, parameters of ethical ambiguities in practice
<b>Accountability</b>					
Accountable for actions and understands limits of role	Accountable for own practice and for nursing care delegated to UAPs	Accountable for own practice and delegated care; implements standards of care	Incorporates practice standards from professional organizations into own practice	Develops and incorporates standards of advanced practice	Advances the profession through research which is disseminated
<b>Professional Responsibility</b>					
Seeks opportunity to improve own knowledge base; takes advantage of opportunities for building skills	Assesses own abilities and potential and sets goals; demonstrates ongoing personal and professional development	Understands role of professional organizations and actively participates	Is actively involved in specialty and/or professional organizations in leadership roles	Achieves certification in advanced practice roles	Contributes to assuring that professional associations reflect appropriate standards for the discipline

### III. MEMBERSHIP (continued)

Unlicensed Assistive Personnel	Licensed Practical Nurse	Associate Degree Nurse	Baccalaureate Nurse	Master's Nurse	Doctoral Nurse
<b>Image of Nursing</b>					
Aware that own actions reflect upon discipline of nursing	Promotes a positive personal and professional image of nursing	Encourages improvements in image of nursing in public media	Promotes consumer awareness of nursing's contribution to health care and is actively involved in consumer groups	Interprets advanced nursing practice to the public and other health professionals	Assumes leadership in assuring that image of nursing is constantly improved within organizations and society
<b>Values</b>					
Values opportunities to work with health care team	Values role and LPN contributions to care	Values profession and demonstrates professional caring	Articulates and models the values of caring	Utilizes theories of caring as a means of valuing patient interactions	Contributes to theoretical constructs which lead to research and reflection upon the core values of nursing

**IV. CONTEXT:** The nursing workforce is responsible for the promotion, restoration, maintenance, and rehabilitation of health in a variety of settings. To carry out this responsibility, members of the nursing workforce are embedded within complex systems of care. As in all systems, there is a reciprocal relationship between the nursing workforce and the larger political, social, cultural, economical, and technological systems that form the context for all nursing care.

Unlicensed Assistive Personnel	Licensed Practical Nurse	Associate Degree Nurse	Baccalaureate Nurse	Master's Nurse	Doctoral Nurse
<b>Political Activism</b>					
Is aware that political involvement can influence health care	Is aware that political involvement can influence health care	Uses political processes appropriate to the system to improve patient care, nursing practice, and the context of health care	Develops strategies to obtain needed health care resources within the practice environment	Demonstrates leadership skills and knowledge of the political process to effect change within the practice setting	Assumes responsibility for influencing the political environment of nursing practice
<b>Resource Management</b>					
Demonstrates awareness of cost effective measures, and follows directions in implementing them properly	Provides patient care in a cost effective manner	Identifies concerns about cost containment strategies needed to preserve resources	Participates in preparation and management of unit level budget	Analyzes health care delivery mechanisms and designs and implements cost containment strategies needed to preserve human and material resources	Analyzes system-level strategies for balancing cost containment and positive patient outcomes

#### IV. CONTEXT (continued)

Unlicensed Assistive Personnel	Licensed Practical Nurse	Associate Degree Nurse	Baccalaureate Nurse	Master's Nurse	Doctoral Nurse
<b>Technology</b>					
Uses selected technology safely	Uses current technology to enhance patient care; minimal computer literacy	Participates in the evaluation of the efficacy of technology	Participates in planning for adoption of new technologies	Compares and promotes adoption of innovations for patient care; teaches utilization of new technology	Participates in developing and researching the efficacy of new technologies
<b>Scope of Role</b>					
Provides care to individuals only in structured settings where guidance is available	Provides care to individuals and groups in structured settings under supervision	Provides care to individuals, families, and groups in structured and unstructured settings	Provides community-centered care to patients in primarily unstructured settings	Provides advanced generalized and specialized practice in any setting; may include direct care, administration, or teaching of nursing	Provides family or group care which transcends organizational boundaries; provides care to communities; develops systems of care where none exist

**V. RESEARCH:** Scientific acquisition of knowledge is necessary to the further development of the discipline of nursing. Depending upon the educational preparation of the member of the nursing workforce, the individual member carries varying responsibility for the development of new knowledge, use of evidence-based nursing practice, and evaluation of nursing outcomes, based upon scientific methods.

Unlicensed Assistive Personnel	Licensed Practical Nurse	Associate Degree Nurse	Baccalaureate Nurse	Master's Nurse	Doctoral Nurse
<b>Research</b>					
Follows directions	Participates in data collection within established studies	Applies research findings in the implementation of nursing care	Evaluates the appropriateness of research findings to current practice	Plans and implements nursing research studies and disseminates findings; contributes to interdisciplinary studies; advocates for evidence-based nursing practice	Designs, implements, and disseminates research studies; conveys findings to practitioners in usable form for improvement of clinical practice

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We are very grateful for the use of each of these documents in building this updated list of competencies.

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## Resources

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## EXAMPLES OF TASKS/SKILLS

### \*\*\*\*\*UNLICENSED ASSISTIVE PERSONNEL\*\*\*\*\*

**The following Appendix is to be used as a guide and is not all-inclusive.** Students are usually taught these skills in laboratory settings, and may have had limited experience in the clinical area in performing certain skills.

The **UNLICENSED ASSISTIVE PERSON** is expected to **assist** the nurse in implementing the plan of care for a given patient or group of patients. There are a variety of titles, depending upon the institution in which they work and the training they receive. Examples include: Nurse Assistant, Nurse Aide, Nurse Technician, Health Care Technician, Med-Surg Technician. Nursing Assistants who have a minimum of 75 hours of instruction and pass a certification exam for long term care, are called Certified Nursing Assistants. Some UAPs have specialized training which prepares them for more complex skills requiring knowledge of sterile technique and invasive procedures. In this document, these UAPs are referred to as **Health Care Technicians (HCTs)**.

#### **I. SAFETY AND COMFORT**

##### **A. Patient protection**

1. Adjusts side rails and height of bed
2. Practices handwashing and medical asepsis
3. Maintains isolation techniques
4. Follows policies regarding care of patient's possessions
5. Explains and applies smoking regulations
6. Applies restraints when ordered
7. **HCT:** Applies sterile dressings, bandages, and gloves
8. **HCT:** Opens sterile packages and handles sterile equipment

##### **B. Personal hygiene and general comfort**

1. Provides patient privacy
2. Changes soiled linens and clothing
3. Assists patient with dressing and undressing
4. Makes patient's bed
5. Gives or assists with oral hygiene and bath or shower
6. Gives backrubs
7. Cares for patient's hair, including shampooing
8. Provides skin care
9. Cares for the comatose patient's skin and general hygiene
10. Uses anti-pressure devices, footboards, pads, sheepskins, cradles, trochanter rolls, sandbags
11. Gives general skin care to patients in traction
12. Cares for prosthesis and stump
13. Assists or shaves male patients

##### **C. Assisting patient in overcoming hazards of immobility**

1. Places patient in correct body alignment
2. Turns patient
3. Assists patient to dangle legs and get out of bed
4. Assists patient to ambulate
5. Transports patient in wheelchair or stretcher
6. Practices body mechanics for self
7. Provides range of motion exercises
8. Uses hydraulic lift to move patient
9. Cares for patient with therapeutic bed or mattress

## Unlicensed Assistive Personnel (continued)

### I. SAFETY AND COMFORT

- C. Assisting patient in overcoming hazard of immobility (continued)
  - 10. **HCT:** Maintains traction
  - 11. **HCT:** Applies braces and removes them

### II. NUTRITION AND ELIMINATION

- A. Assisting patient with food and fluids
  - 1. Assures correct diet for patient
  - 2. Positions patient for meals
  - 3. Serves food trays
  - 4. Assists patient's eating as necessary
  - 5. Observes, measures, and records food and fluid intake
  - 6. Dispenses fluids, supplemental feedings as ordered
  - 7. **HCT:** Feeds infants and incapacitated patients
  - 8. **HCT:** Observes intravenous fluids and reports
  - 9. **HCT:** administers gavage and gastrostomy feedings
- B. Elimination needs
  - 1. Assists patient in using bedpan, urinal, or bedside commode
  - 2. Observes, measures, and records output
  - 3. **HCT:** Checks manually for fecal impaction and distended bladder
  - 4. **HCT:** Gives disposable or cleansing enemas
- C. Oxygen transport and exchange needs
  - 1. Assists with selected oxygen therapy tasks such as checking liter flow and adjusting cannula, applying mask, tent, or prongs
  - 2. Assists patient with coughing, deep breathing, and positioning
  - 3. **HCT:** Suctions patient's throat and nasal passages

### III. TREATMENT, PROCEDURES AND DIAGNOSTIC ACTIVITIES

- A. Treatment and procedures
  - 1. Admits, transfers, or discharges patients
  - 2. Cares for the deceased
  - 3. **HCT:** Assists or applies elastic bandages or binders
  - 4. **HCT:** Applies unsterile heat and cold compresses, lamps, packs
  - 5. **HCT:** Helps patient with sitz baths
- B. **Health Care Technicians (HCT) competencies following special training:**
  - 1. **HCT:** Assists in observing blood transfusions
  - 2. **HCT:** Observes drainage or suction tubes, reports deviations
  - 3. **HCT:** Connects catheters and tubing to drainage
  - 4. **HCT:** Inserts urinary catheters
  - 5. **HCT:** Irrigates bladder, colostomy, and nasogastric tubes
  - 6. **HCT:** Does pre-and postoperative tasks
- C. Diagnostic Activities
  - 1. Takes temperature (oral, rectal, axillary)
  - 2. Counts pulse at radial artery
  - 3. Counts respirations
  - 4. Takes blood pressure
  - 5. Collects and cares for specimens
  - 6. Performs simple bedside tests if trained and certified by employer
  - 7. Weighs and measures patient

**Unlicensed Assistive Personnel (continued)**

**III. TREATMENT, PROCEDURES AND DIAGNOSTIC ACTIVITIES**

- C. Diagnostic Activities (continued)
  - 8. **HCT:** Assists with physical examination under guidance or direction
  - 9. **HCT:** Checks neurological signs

**IV. ADMINISTRATION, COORDINATION, AND HOUSEKEEPING**

- A. Coordination
  - 1. Assists team members with nursing care as directed
  - 2. Provides delivery and messenger service as directed
  - 3. Locates specialized equipment
  - 4. **HCT:** Prepares requisitions, charges
  - 5. **HCT:** Assists in transcribing physician's orders
- B. Housekeeping functions
  - 1. Distributes supplies and equipment
  - 2. Cleans equipment, rooms, environment for patient care
  - 3. Keeps patient care areas clean and neat

**\*\*\*\*\*EXAMPLES OF TASKS/SKILLS – LICENSED PRACTICAL NURSE\*\*\*\*\***

**Licensed practical nurses** do all tasks listed for unlicensed assistive personnel, **plus** these additional tasks:

**I. SAFETY AND COMFORT**

- A. Institutes and maintains isolation techniques
- B. Personal hygiene and comfort
  - 1. Gives eye care including artificial eyes, glasses, and contact lenses

**II. NUTRITION AND ELIMINATION**

- A. Checks dietary restrictions, allergies, and personal preferences for food
- B. Changes intravenous feedings
- C. Administers gavage and gastrostomy feedings
- D. Sets up and regulates oxygen equipment
- E. Assists patient with postural drainage
- F. Cares for tracheostomy

**III. TREATMENTS, PROCEDURES AND DIAGNOSTIC ACTIVITIES**

- A. Administers medications via oral, subcutaneous, intradermal, intramuscular, rectal, vaginal, and topical medications
- B. Administers medicated baths
- C. Applies infra-red, UV, and bilirubin or other heat lamps
- D. Applies medicated soaks and compresses
- E. Does nose, throat, and wound cultures
- F. Reads skin tests
- G. Checks urine for specific gravity

**IV. ADMINISTRATION AND COORDINATION**

- A. Inventories drugs, counts narcotics

**\*\*\*\*\*EXAMPLES OF TASKS/SKILLS – ASSOCIATE DEGREE NURSE\*\*\*\*\***

**In addition to** the tasks listed for UAPs and LPNs, **Associate Degree Nurses** perform the following tasks:

**I. SAFETY AND COMFORT**

- A. Preoperative preparation, assessment, teaching according to patient need

**II. NUTRITION AND ELIMINATION**

- A. Starts intravenous fluids
- B. Monitors and records fluid and medication delivered
- C. Starts, regulates, and discontinues blood products
- D. Inserts oral airway
- E. Performs tracheal suction

**III. TREATMENTS, PROCEDURES, MEDICATIONS, AND DIAGNOSTIC ACTIVITIES**

- A. Administers medications intravenously
- B. Completes a surgical scrub
- C. Inserts nasogastric tubes
- D. Irrigates stomach
- E. Monitors central venous pressure, arterial lines
- F. Does nursing history and physical assessment resulting in problem identification
- G. Differentiates normal from abnormal EKG or monitor strip
- H. Prepares patient for cardiac monitoring by placing electrodes and teaching patient

**IV. ADMINISTRATION AND COORDINATION**

- A. Assigns UAPs and licensed personnel for most efficient and effective patient care
- B. Assists physician with rounds or seeing patients
- C. Takes and records physicians' verbal orders; checks accuracy of transcribed orders
- D. Assists in supervising and evaluating performance of team members
- E. Initiates service or referral for patients
- F. Conducts nursing care conferences
- G. Analyzes nursing care requirements and reports staffing needs

**\*\*\*\*\*EXAMPLES OF TASKS/SKILLS -- BACCALAUREATE NURSE\*\*\*\*\***

**In addition to** the tasks listed for unlicensed assistive personnel, licensed practical nurses, and associate degree nurses, **Baccalaureate Prepared Nurses** are able to do the following tasks in any setting:

**I. TREATMENTS, PROCEDURES AND DIAGNOSTIC AND THERAPEUTIC ACTIVITIES**

- A. Screening physicals with nursing history and health history
- B. Community assessment and diagnosis
- C. Case management across the lifespan and in any setting
- D. Provides simple group therapy

**II. ADMINISTRATION AND COORDINATION**

- A. Management of nursing staff to accomplish organizational goals
- B. Management of nursing staff to accomplish patient care and unit goals
- C. Assists in appraisal of health team effort
- D. Staff development programs
- E. Management of utilization of resources within a nursing unit

**\*\*\*\*\*EXAMPLES OF TASKS/SKILLS - MASTER'S NURSE\*\*\*\*\***

**In addition to** the UAP, LPN, ADN and BSN tasks listed earlier, the **Master's Prepared Nurse** is able to do the following tasks, depending upon the specialized training received:

**I. TREATMENTS, PROCEDURES AND DIAGNOSTIC ACTIVITIES**

- A. Performs diagnostic physical assessment and medical/nursing history
- B. Orders appropriate laboratory tests, within scope of practice
- C. Orders appropriate medications based on diagnosis, within established practice formulary
- D. Manages treatment plan within established practice guidelines
- E. Manages perinatal care, labor and delivery, and neonatal care, within established certification guidelines
- F. Manages specialized care such as anesthesia administration, if certified
- G. Assesses and plans care, utilizing families or communities as “patient”
- H. Leads group therapy

**I.**

**II. ADMINISTRATION AND COORDINATION**

- A. Assumes management and leadership accountability in a variety of settings
- B. Manages budgeting and monitoring responsibilities within organizations
- C. Assumes responsibility for long term planning for nursing care delivery within organizations
- D. Assumes responsibility for maintaining continuous quality improvement of nursing care within organizations
- E. Helps establish a climate within organizations for adoption of evidence-based nursing practice.

\*\*\*\*\*End of Document\*\*\*\*\*

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**NEW MEXICO CONSORTIUM FOR NURSING  
WORKFORCE DEVELOPMENT**

A goal of the New Mexico Consortium for Nursing Workforce Development is to facilitate nursing schools, hospitals, and other nursing institutions to initiate workforce development systems. A vision of the Consortium is to encourage the planning, implementation, and long term support of action programs to benefit nurses in the emerging health care system.

We believe it is necessary to address the drastic changes in today's health care system. These changes have been caused by: Prepayment plans and provider organizations, such as HMOs and hospital chains which have incentives to reduce costs; a lower number of hospital admissions; development of case management; an increased use of outpatient and community-based health and preventive care services.

With these health care changes, the roles of nurses and other medical personnel must also change. Nurses need to be prepared to practice in a variety of settings and serve in many different capacities. They must be able to practice nursing, help establish policies, and provide management.

One accomplishment of the NM Consortium for Nursing Workforce Development is creation of the *Standards for Differentiated Competencies of the Nursing Workforce at Time of Entry/Advanced Beginner?*. A copy of this document can be seen on our Website: [www.nmnurseswork.org](http://www.nmnurseswork.org). The Consortium has also created templates that are based on the *Standards* document to be used by employers of **new graduates** to evaluate their abilities and skills. The information in these templates would then be sent to the appropriate nursing institution to evaluate their program and curriculum. For copies of the templates, please contact Carol O'Brien at (505) 821-7913 or e-mail [nmnurseswork@aol.com](mailto:nmnurseswork@aol.com)

We would appreciate your input as you use the *Standards* document. Please take a few moments to answer the questions listed below. Then detach this page from the document and mail to us at: NMCNWD, PO Box 92048, 87199-2048. If you have any questions, please contact us. **THANK YOU!**

- 
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  3. **Standards** should be implemented statewide:
    - a. **Yes** \_\_\_\_\_
    - b. **No** \_\_\_\_\_
    - c. **Why?** \_\_\_\_\_
  
  4. **ALL** UAPs (unlicensed assistive personnel) should be certified by the State of New Mexico:
    - a. **Yes** \_\_\_\_\_
    - b. **No** \_\_\_\_\_
    - c. **Why?** \_\_\_\_\_
  
  5. **I am a/an:**
    - a. **LPN** \_\_\_\_\_
    - b. **ADN** \_\_\_\_\_
    - c. **BSN** \_\_\_\_\_
    - d. **MSN/MN** \_\_\_\_\_
    - e. **PhD** \_\_\_\_\_
    - f. **Other** \_\_\_\_\_
  
  6. **My primary employer is:**
    - a. **Education** \_\_\_\_\_
    - b. **Service** \_\_\_\_\_
    - Other \_\_\_\_\_

If Service is checked, please list type of facility, i.e., Long Term Care, Acute Care, Home Health, etc. \_\_\_\_\_