



The Pennsylvania Organization of Nurse Leaders
Position Statement
on the
Educational Preparation for Pennsylvania Professional Registered Nurses

Brief Statement about PONL

PONL is a state wide organization of nurse leaders. The PONL Mission is to provide innovative leadership in shaping health care policy and cost effective patient delivery systems. PONL functions as a networking and information vehicle for Pennsylvania Nursing leaders and is the state affiliate of the American Organization of Nurse Executives (AONE).

PONL's Position

PONL believes that newly licensed registered professional nurses should attain a baccalaureate in Nursing within 10 years of initial licensure in order to practice. We believe that if/when legislation is introduced that requires a BSN within 10 years of licensure that all currently licensed registered nurses should be "grand parented" and be exempt from having to meet these requirements. While the requirement of a BSN will not affect currently licensed nurses we do encourage them to advance their education.

We acknowledge the need for various levels of entry into practice and encourage the development of and financial support for programs that enable nurses to obtain a BSN.

PONL is committed to partnering with other nursing and health care leaders and government and educational agencies to facilitate a smooth, successful transition to attain these desired outcomes. In 2008, 6,643 nurses graduated in Pennsylvania. Of this number, 43.2% had a BSN, 39.4% an associate degree and 17.4% a diploma (PA Dept. of Health, 2009).

Support for This Position

The provision of patient care and coordination of patient resources is highly complex and technologically demanding. These challenges require professional nurses who are educationally prepared to handle these challenges. Nurses with a baccalaureate education have displayed a positive impact on lowering mortality rates (Estabrooks et al., 2005; Tourangeau et al., 2007), better outcomes and improved patient safety (Fagin, 2001; Delgado, 2002) than their peers without a BSN. BSN prepared graduates have been found to have better skills in communication and in care coordination (Doran et al., 2002). Higher levels of educational preparation were related to greater professional behavior and leadership skills and a more intense focus on psychosocial needs, patient teaching, and continuity of care and patient outcomes (Goode et al., 2001). Baccalaureate nursing preparation has been correlated with reducing surgical patient mortality and failure to rescue (Aiken et al., 2003). As a critical constituent of

the patient care team, professional nurses should not be the least educated member and should be on equal status with their colleagues who have advanced degrees.

Survey of chief nursing officers has indicated their preference to hire nurses with BSN's (Goode et al., 2001). Facilities with or desiring ANCC Magnet Recognition desire a high proportion of BSN prepared staff.

Several other states are contemplating or are actively in the process of introducing legislation that will mandate baccalaureate preparation for practice or a baccalaureate within ten years of licensure.

The BSN requirement for practice is supported by the American Association of Nursing Executives (2005), The American Nurses Association (1965), and The National Advisory on Nurse Education and Practice (1996). The United States Army, Navy and Air Force all require a minimum of a BSN of their professional nurses.

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