

# 2021

## Differentiated Essential Competencies of Graduates of Texas Nursing Programs

Evidenced by Knowledge,  
Clinical Judgments, and  
Behaviors



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## Introduction

### **Differentiated Essential Competencies of Graduates Of Texas Nursing Programs Evidenced by Knowledge, Clinical Judgments, and Behaviors 2021**

#### Background of the DEC's

The original Board charge to develop differentiated competencies for nursing education programs was issued by the then Board of Nurse Examiners (BNE) following a legislative mandate in 1988. Three different versions have been developed by Board staff with input from Board-appointed stakeholders (nursing educators, professional organizations, practicing nurses, state agencies, and consumers):

- 1993 – First Edition - Nursing Education Advisory Committee (NEAC)
- 2002 – Second Edition – Differentiated Entry Level Competencies of Graduates of Texas Nursing Programs (DELCS)
- 2010 – Third Edition – Differentiated Essential Competencies of Graduates of Texas Nursing Programs (DECs)

A team of Board Staff that included both Nursing Consultants for Education and Nursing Consultants for Practice collaborated in the 2021 Fourth Edition to ensure a focus on both perspectives. Following the previous processes, a comprehensive review of current literature, practice standards, accreditation requirements, regulations, and research findings ensued.

The guiding principles that were established by the first DEC's committee have continued to be sound and useful in making revisions:

1. The DEC's are client-focused, rather than institution-focused.
2. The DEC's would not be developed as a list of tasks or skills.
3. Competencies will provide essential role responsibilities, knowledge, and clinical behaviors and judgments in broad terms
4. Programs will be able to develop and create curricula for their communities, level of education, and program outcomes by focusing on the DEC's.
5. The DEC's are not all-inclusive of all nursing competencies but list competencies necessary for the nursing graduate to seek licensure and enter nursing practice.

#### Nursing Education and Scope of Practice

The legal scope of practice for licensed nurses in Texas is dependent upon the educational preparation in vocational, professional, and graduate nursing education programs. Licensed vocational nurses (LVNs) and registered nurses (RNs) provide a wide range of nursing care through the roles of Member of the Profession, Provider of Patient-Centered Care, Patient Safety Advocate, and Member of the Health Care Team.

The *Differentiated Essential Competencies (DECs) of Graduates of Texas Nursing Programs* include 25 basic competencies within the four nursing roles and describe the required outcomes for VN and RN nursing education with progressive differentiation of competency level for each

educational level [Vocational Nursing Education (VN), Associate Degree Nursing Education (ADN), and Baccalaureate Degree Nursing Education (BSN)]. Further delineation of the competencies is expanded through sub-competencies with accompanying required subject content (*Knowledge*) and expected *Clinical Judgments and Behaviors*. Texas-approved nursing education programs are required to operationalize the DEC's in the curriculum to assure that graduates have been educated to carry out the competencies. The competencies for each educational level build upon the competencies from the previous level.

#### Comments about the Competencies

The competencies provide a set of outcomes expected of nursing education programs to ensure that newly licensed nurses enter practice with a knowledge base and a set of skills, including decision-making abilities, for safe practice. As the practicing nurse gains experience and perfects nursing skills and clinical judgment, their competencies continue to grow as they move from novice to expert.

Any redundancies across the initial competencies are intentional to allow the competencies under each role to stand alone as performance characteristics. Some competencies are identical for each educational level since the same expectations apply to all licensed nurses, such as the standards for safety. Differences in competencies among educational levels reflect their respective assignments, level of autonomy in planning and practice decisions, required supervision, administrative roles, leadership responsibilities, and capacity for evaluation of care and caregivers.

The DEC's are useful as a basis for curriculum in nursing programs, orientation and internship programs for practicing nurses in health care settings, and the creation of evaluation tools for nursing education and practice. The DEC's are consistent with Board Position Statements, Rules and Regulations, Education Guidelines, and other Board documents.

**Executive Summary**  
**Differentiated Essential Competencies**  
**Of Graduates of Texas Nursing Programs**  
**Evidenced by Knowledge, Clinical Judgments, and Behaviors**  
**2021**

Background

The Differentiated Essential Competencies (DECs) is the fourth generation of the Texas Board of Nursing (BON or Board) competencies with differentiation based upon the education outcomes of the three levels of prelicensure nursing education programs. The current revision was developed through a comprehensive review of current literature and research, nursing standards, state and national regulations, changes in the health care environment, and advances in nursing practice. Board Staff and a Board-appointed DECs Work Group provided guidance and expertise to the process.

Purpose

The DECs were designed to provide guidance to prelicensure nursing education programs to prepare graduates to enter nursing practice as safe, competent nurses, as well as to provide a baseline for the health care setting of the nursing knowledge, skills, abilities, and judgment among graduates from Texas nursing programs. It is acknowledged that not all competencies can be evaluated upon graduation from a nursing program, but the graduate will have received the educational preparation to demonstrate each competency. As the novice nurse gains practice experience, the entry-level competencies from education will continue to grow as the nurse demonstrates an expanding expertise.

Outline of the DECs

Twenty-five core competencies in the DECs are categorized under four main nursing roles:

- Member of the Profession
- Provider of Patient-Centered Care
- Patient Safety Advocate
- Member of the Health Care Team

Each core competency is further developed into specific knowledge areas and clinical judgments and behaviors based upon the knowledge areas. Redundancy is intentional so that the section under each role can stand alone. Competencies for each level of educational preparation are presented in a table format. The competencies are differentiated and progressive by educational preparation. The scope of practice and competency level may be compared across the table.

Implications

For Nursing Education:

- Guideline for curriculum development and revision
- Benchmark for measuring program outcomes
- Statewide standard to ensure that graduates are prepared to enter practice as safe, competent nurses

For Employers of Nurses:

- Guide for development of employee orientation and internship programs
- Baseline for job descriptions and career ladders
- Description of entry-level competencies for new nurses
- Information helpful for reviewing and revising policies and procedures for nursing care

## Texas Board of Nursing Vocational Nursing Education – Education and Scope

The curriculum for vocational nursing (VN) education is delivered as a certificate program of approximately one year in length offered by a college, university, or career school or college, or in a hospital or military setting. Texas Board of Nursing (BON or Board) Rule 214 for Vocational Nursing Education requires didactic and clinical learning experiences designed to prepare graduates to practice as safe, competent nurses who are able to demonstrate the competencies outlined in the DEC's.

The BON approved curriculum includes requirements for instruction in the five basic areas of nursing care: (1) children; (2) mothers and newborns; (3) elderly; (4) adults; and (5) individuals with mental health problems. The initial clinical instruction takes place in the skills and simulation laboratories, progressing to faculty supervised, hands-on clinical experiences with actual patients in health care settings. Clinical experiences in psychiatric nursing are optional, but the mental status of patients should be considered in all clinical settings.

Required nursing and support courses provide instruction in nursing roles; biological, physical, social, behavioral, and nursing sciences, including body structure and function, microbiology, pharmacology, nutrition, signs of emotional health, human growth and development; vocational nursing scope of practice, and nursing skills. Content may be integrated within the core nursing curriculum or may be taken as stand-alone courses. With advances of education and practice, programs may include content in the use of technology and informatics through learning experiences in the clinical practice arena, simulated practice, and skills laboratories.

All levels of prelicensure nursing education prepare graduates to demonstrate the DEC's and the competencies for each educational level are based upon the preparation in the program of study. Graduates of VN nursing education programs who have qualified and completed all aspects of the application to take the NCLEX-PN® will receive a temporary authorization to practice under direct supervision **up to** 75 days while awaiting testing and licensure.

The entry-level graduate of a VN program provides nursing care within a directed scope of practice under appropriate supervision. The vocational nurse uses a systematic problem-solving process in the care of multiple patients with predictable health care needs to provide individualized, goal-directed nursing care. The vocational nurse contributes to the plan of care by collaborating with interdisciplinary team members and with the patient's family. The new graduate can readily integrate technical skills and use of computers and equipment into practice.

Educational opportunities exist for Licensed Vocational Nurses (LVNs) to articulate into professional nursing education programs. Vocational nursing represents the beginning level of the nursing practice continuum in the roles of Member of the Profession, Provider of Patient-Centered Care, Patient Safety Advocate, and Member of the Health Care Team. The entry-level competencies of the VN graduate are listed on the following pages:

## **Core Competencies of Graduates of Vocational Nursing Education**

### **I. Member of the Profession**

- A. Function within the nurse's legal scope of practice and in accordance with regulation and the policies and procedures of the employing health care institution or practice setting.
- B. Assume responsibility and accountability for the quality of nursing care provided to patients and their families.
- C. Contribute to activities that promote the development and practice of vocational nursing.
- D. Demonstrate responsibility for continued competence in nursing practice, and develop insight through reflection, self-analysis, self-care, and lifelong learning.

### **II. Provider of Patient-Centered Care**

- A. Use clinical reasoning and knowledge based on the vocational nursing program of study and established evidence-based practice as the basis for decision-making in nursing practice.
- B. Assist in determining the physical and mental health status, needs, and preferences influenced by culture, spirituality, ethnicity, identity, and social diversity of patients and their families, and in interpreting health-related data based on knowledge derived from the vocational nursing program of study.
- C. Report data to assist in the identification of problems and formulation of goals/outcomes and patient-centered plans of care in collaboration with patients, their families, and the interdisciplinary health care team.
- D. Provide safe, compassionate, basic nursing care to assigned patients with predictable health care needs through a supervised, directed scope of practice.
- E. Implement aspects of the plan of care within legal, ethical, and regulatory parameters and in consideration of patient factors.
- F. Identify and report alterations in patient responses to therapeutic interventions in comparison to expected outcomes.
- G. Implement teaching plans for patients and their families with common health problems and well-defined health learning needs.
- H. Assist in the coordination of human, information, and physical resources in providing care for assigned patients and their families.

### **III. Patient Safety Advocate**

- A. Demonstrate knowledge of the Texas Nursing Practice Act and the Texas Board of Nursing Rules that emphasize safety, as well as all federal, state, and local government and accreditation organization safety requirements and standards.
- B. Implement measures to promote quality and a safe environment for patients, self, and others.

- C. Assist in the formulation of goals and outcomes to reduce patient risks.
- D. Obtain instruction, supervision, or training as needed when implementing nursing procedures or practices.
- E. Comply with mandatory reporting requirements of the Texas Nursing Practice Act.
- F. Accept and make assignments that take into consideration patient safety and organizational policy.

IV. Member of the Health Care Team

- A. Communicate and collaborate in a timely manner with patients, their families, and the interdisciplinary health care team to assist in the planning, delivery, and coordination of patient-centered care to assigned patients.
- B. Participate as an advocate in activities that focus on improving the health care of patients and their families.
- C. Participate in the identification of patient needs for referral to resources that facilitate continuity of care, and ensure confidentiality.
- D. Communicate patient data using technology to support decision-making to improve patient care.
- E. Assign nursing activities to LVNs or unlicensed personnel based upon an analysis of patient or work place need.
- F. Supervise nursing care by others for whom the nurse is responsible.
- G. Assist health care teams during local or global health emergencies or pandemics to promote health and safety, and prevent disease.



## **Texas Board of Nursing**

### **Diploma and Associate Degree Nursing Education – Education and Scope**

Although the programs for Diploma Nursing and Associate Degree Nursing (ADN) education vary in missions and philosophies of the governing institutions, competencies have been determined as common for graduates of both programs. These competencies describe the expectations for entry-level into registered nursing practice.

Diploma programs are hospital-based, single purpose schools of nursing usually consisting of two years of general education and nursing courses. These programs follow the missions, values, and purposes of the governing institutions, and prepare graduates to provide and coordinate health care of individuals and their families throughout the life span across the health continuum. General education courses from an accredited college or university may be required as prerequisites courses offered prior to or concurrently with nursing courses. The general education courses may provide a foundation in communication, psychology, human growth and development, and related sciences to support the nursing courses. A Diploma program of study completed after December 31, 2014, must entitle a student to receive a degree [Texas Occupation Code 301.157(a-1)].

ADN programs, located in community colleges, senior colleges, and career schools, are completed within a time frame equivalent to two academic years but not more than four calendar years. The curriculum includes courses in the liberal arts; natural, social, and behavioral sciences; and nursing science. Degree requirements in public colleges and universities must not be greater than 60 semester credit hours, with approximately half the program requirements in nursing courses. General education courses provide a foundation for nursing content in ADN education and enable graduates to apply theoretical content and evidence-based findings in the provision of nursing care. The BON requires didactic instruction and clinical learning experiences in five content areas: medical-surgical, maternal/child health, pediatrics, geriatrics, and mental health nursing.

Nursing courses in Diploma and ADN nursing programs must provide opportunities for students to demonstrate competence in the application of nursing knowledge and clinical judgments and behaviors in health care settings. The entry-level graduate from a Diploma or ADN program integrates knowledge from general education and sciences for the delivery of safe and compassionate care for patients and their families. The nursing content prepares students to establish therapeutic relationships with patients and their families in the promotion, prevention, rehabilitation, maintenance, and restoration of health for individuals of all ages. The curriculum also promotes skills in nursing care supervision and management, and in providing care within legal and ethical parameters.

All levels of prelicensure nursing education prepare graduates to demonstrate the DEC's and the competencies for each educational level are based upon the preparation in the program of study. Graduates of Diploma and Associate Degree nursing education programs who have qualified and completed all aspects of the application to take the NCLEX-RN® will receive authorization to practice under direct supervision of a registered professional nurse for **up to 75 days** while awaiting testing and licensure.

The primary role of the entry-level graduate of a Diploma or ADN program is to provide direct nursing care to or coordinate care for a limited number of patients in various health care settings. Such patients may have complex multiple needs with predictable or unpredictable outcomes. With additional experience and continuing education, the Diploma or ADN graduate can increase the numbers of assigned patients, provide independent direct care, supervise health care of patients and their families, and receive certification in various specialty areas. Through articulation, graduates may continue their education to prepare for expanded roles.

The entry-level competencies of the Diploma and ADN graduate build upon the entry-level competencies of the Vocational Nursing graduate and are listed on the following pages:

## **Core Competencies of Graduates of Diploma and Associate Degree Nursing Education**

### **I. Member of the Profession**

- A. Function within the nurse's legal scope of practice and in accordance with regulation and the policies and procedures of the employing health care institution or practice setting.
- B. Assume responsibility and accountability for the quality of nursing care provided to patients and their families.
- C. Participate in activities that promote the development and practice of professional nursing.
- D. Demonstrate responsibility for continued competence in nursing practice, and develop insight through reflection, self-analysis, self-care, and lifelong learning.

### **II. Provider of Patient-Centered Care**

- A. Use clinical reasoning and knowledge based on the diploma or associate degree nursing program of study and evidence-based practice outcomes as a basis for decision-making in nursing practice.
- B. Determine the physical and mental health status, needs, and preferences influenced by culture, spirituality, ethnicity, identity, and social diversity of patients and their families, and the interpretation of comprehensive health assessment findings compared with evidence-based health data derived from the diploma or associate degree nursing program of study.
- C. Analyze comprehensive assessment data to identify problems, formulate goals/outcomes, and develop plans of care for patients and their families using information from evidence-based practice in collaboration with patients, their families, and the interdisciplinary health care team.
- D. Provide safe, compassionate, comprehensive nursing care to patients and their families through a broad array of health care services.
- E. Implement the plan of care for patients and their families within legal, ethical, and regulatory parameters and in consideration of disease prevention, wellness, and promotion of healthy lifestyles.
- F. Evaluate and report patient outcomes and responses to therapeutic interventions in comparison to benchmarks from evidence-based practice, and plan follow-up nursing care.
- G. Develop, implement, and evaluate teaching plans for patients and their families to address health promotion, maintenance, and restoration.
- H. Coordinate human, information, and physical resources in providing care for patients and their families.

### III. Patient Safety Advocate

- A. Demonstrate knowledge of the Texas Nursing Practice Act and the Texas Board of Nursing Rules that emphasize safety, as well as all federal, state, and local government and accreditation organization safety requirements and standards.
- B. Implement measures to promote quality and a safe environment for patients, self, and others.
- C. Formulate goals and outcomes using evidence-based data to reduce patient risks.
- D. Obtain instruction, supervision, or training as needed when implementing nursing procedures or practices.
- E. Comply with mandatory reporting requirements of the Texas Nursing Practice Act.
- F. Accept and make assignments and delegate tasks that take into consideration patient safety and organizational policy.

### IV. Member of the Health Care Team

- A. Coordinate, collaborate, and communicate in a timely manner with patients, their families, and the interdisciplinary health care team to plan, deliver, and evaluate patient-centered care.
- B. Serve as a health care advocate in monitoring and promoting quality and access to health care for patients and their families.
- C. Refer patients and their families to resources that facilitate continuity of care; health promotion, maintenance, and restoration; and ensure confidentiality.
- D. Communicate and manage information using technology to support decision-making to improve patient care.
- E. Assign and/or delegate nursing activities to other members of the health care team based upon an analysis of patient or work place need.
- F. Supervise nursing care by others for whom the nurse is responsible by using evidence-based nursing practice.
- G. Participate with health care teams during local or global health emergencies or pandemics to promote health and safety, and prevent disease.

## Texas Board of Nursing Baccalaureate Degree Nursing Education – Education and Scope

Baccalaureate Degree Nursing (BSN) education, offered in college and university settings, and career schools, provides students with a broad perspective and understanding of nursing; health and healing; the environment; and persons as diverse individuals, families, populations, and communities. The BSN program integrates approximately 60 semester credit hours from liberal arts and natural, social, and behavioral science courses, and approximately 60 semester credit hours of nursing courses. Graduates of BSN programs are prepared to provide and direct care for patients, families, populations, and communities experiencing complex and unpredictable health care needs in structured and unstructured settings. In addition to the broad liberal arts education that provides a solid foundation for the development of clinical judgment skills, BSN education includes instruction in community health, public health, research, nursing leadership, and nursing management. The studies and clinical learning activities in community health focus on the expanded nurse's role in providing care for groups, vulnerable peoples, and global and public populations, and working collaboratively with other providers in the health care team. The BSN student is prepared to apply theories in management and organization to assume leadership roles in supervising team members and in developing health care policies.

BSN graduates synthesize information from various disciplines, think logically, analyze critically, and communicate effectively with patients, other health care professionals, and the public. The BSN prepares the graduate to use research findings in planning and implementing care. Graduates are expected to demonstrate all the competencies (knowledge, clinical judgments, and behaviors) of the preceding levels of education, but with greater depth and breadth of application and synthesis.

Qualified graduates of BSN programs typically receive authorization to practice under direct supervision of a registered professional nurse **up to** 75-days while waiting to take the licensure examination. These graduates generally begin their careers in structured settings but may move into community-based settings and/or leadership roles. A BSN degree allows the nurse to pursue graduate education to become nurse educators, researchers, administrators, or advanced practice nurses.

All levels of prelicensure nursing education prepare graduates to demonstrate the DEC's and the competencies for each educational level are based upon the preparation in the program of study. The entry-level competencies of the BSN graduate build upon the entry-level competencies of the Diploma and Associate Degree Nursing graduate and are listed on the following pages:

## **Core Competencies of Graduates of Baccalaureate Degree Nursing Education**

### **I. Member of the Profession**

- A. Function within the nurse's legal scope of practice and in accordance with regulation and the policies and procedures of the employing health care institution or practice setting.
- B. Assume responsibility and accountability for the quality of nursing care provided to patients, families, populations, and communities.
- C. Promote the practice of professional nursing through leadership activities and advocacy.
- D. Demonstrate responsibility for continued competence in nursing practice, and develop insight through reflection, self-analysis, self-care, and lifelong learning.

### **II. Provider of Patient-Centered Care**

- A. Use clinical reasoning and knowledge based on the baccalaureate degree nursing program of study, evidence-based practice outcomes, and research studies as the basis for decision-making and comprehensive patient care.
- B. Determine the physical and mental health status, needs, and preferences influenced by culture, spirituality, ethnicity, identity, and social diversity of patients, families, populations, and communities and the interpretation of comprehensive health assessment findings compared with evidence-based health data and a synthesis of knowledge derived from a baccalaureate degree nursing program of study.
- C. Synthesize comprehensive assessment data to identify problems, formulate goals/outcomes, and develop plans of care for patients, families, populations, and communities using information from evidence-based practice and published research in collaboration with the above groups and the interdisciplinary health care team.
- D. Provide safe, compassionate, comprehensive nursing care to patients, families, populations, and communities through a broad array of health care services.
- E. Implement the plan of care for patients, families, populations, and communities within legal, ethical, and regulatory parameters and in consideration of disease prevention, wellness, and promotion of healthy lifestyles.
- F. Evaluate and report patient, family, population, and community outcomes and responses to therapeutic interventions in comparison to benchmarks from evidence-based practice and research findings, and plan follow-up nursing care.
- G. Develop, implement, and evaluate teaching plans for patients, families, populations, and communities to address health promotion, maintenance, restoration, and population risk reduction.
- H. Coordinate the management of human, information, and physical resources in providing care for patients, families, populations, and communities.

### III. Patient Safety Advocate

- A. Demonstrate knowledge of the Texas Nursing Practice Act and the Texas Board of Nursing Rules that emphasize safety, as well as all federal, state, and local government and accreditation organization safety requirements and standards.
- B. Implement measures to promote quality and a safe environment for patients, self, and others.
- C. Formulate goals and outcomes using an evidence-based and theoretical analysis of available data to reduce patient and community risks.
- D. Obtain instruction, supervision, or training as needed when implementing nursing procedures or practices.
- E. Comply with mandatory reporting requirements of the Texas Nursing Practice Act.
- F. Accept and make assignments and delegate tasks that take into consideration patient safety and organizational policy.

### IV. Member of the Health Care Team

- A. Coordinate, collaborate, and communicate in a timely manner with patients, families, populations, and communities, and the interdisciplinary health care team to plan, deliver, and evaluate care.
- B. Serve as a health care advocate in monitoring and promoting quality and access to health care for patients, families, populations, and communities.
- C. Use multiple referral resources for patients, families, populations, and communities, considering cost; confidentiality; effectiveness and efficiency of care; continuity and continuum of care; and health promotion, maintenance, and restoration.
- D. Communicate and manage information using technology to support decision-making to improve patient care and delivery systems.
- E. Assign and/or delegate nursing activities to other members of the health care team based upon an analysis of patient or organizational need.
- F. Supervise nursing care provided by others for whom the nurse is responsible by using best practices of management, leadership, and evaluation.
- G. Coordinate, collaborate, and lead health care teams during local or global health emergencies or pandemics to promote community stability, health, safety, and prevent disease.

**Texas Board of Nursing Differentiated Essential Competencies  
(DECs) – Core Competencies**

<b>Vocational Nursing</b>	<b>Diploma and Associate Degree Nursing</b>	<b>Baccalaureate Degree Nursing</b>
<b>I. Member of the Profession</b>	<b>I. Member of the Profession</b>	<b>I. Member of the Profession</b>
A. Function within the nurse's legal scope of practice and in accordance with regulation and the policies and procedures of the employing health care institution or practice setting.	A. Function within the nurse's legal scope of practice and in accordance with regulation and the policies and procedures of the employing health care institution or practice setting.	A. Function within the nurse's legal scope of practice and in accordance with regulation and the policies and procedures of the employing health care institution or practice setting.
B. Assume responsibility and accountability for the quality of nursing care provided to patients and their families.	B. Assume responsibility and accountability for the quality of nursing care provided to patients and their families.	B. Assume responsibility and accountability for the quality of nursing care provided to patients, families, populations, and communities.
C. Contribute to activities that promote the development and practice of vocational nursing.	C. Participate in activities that promote the development and practice of professional nursing.	C. Promote the practice of professional nursing through leadership activities and advocacy.
D. Demonstrate responsibility for continued competence in nursing practice, and develop insight through reflection, self-analysis, self-care, and lifelong learning.	D. Demonstrate responsibility for continued competence in nursing practice, and develop insight through reflection, self-analysis, self-care, and lifelong learning.	D. Demonstrate responsibility for continued competence in nursing practice, and develop insight through reflection, self-analysis, self-care, and lifelong learning.

<b>Vocational Nursing</b>	<b>Diploma and Associate Degree Nursing</b>	<b>Baccalaureate Degree Nursing</b>
<b>II. Provider of Patient-Centered Care</b>	<b>II. Provider of Patient-Centered Care</b>	<b>II. Provider of Patient-Centered Care</b>
A. Use clinical reasoning and knowledge based on the vocational nursing program of study and established evidence-based practice as the basis for decision-making in nursing practice.	A. Use clinical reasoning and knowledge based on the diploma or associate degree nursing program of study and evidence-based practice outcomes as a basis for decision-making in nursing practice.	A. Use clinical reasoning and knowledge based on the baccalaureate degree nursing program of study, evidence-based practice outcomes, and research studies as the basis for decision-making and comprehensive patient care.
B. Assist in determining the physical and mental health status, needs, and preferences influenced by culture, spirituality, ethnicity, identity, and social	B. Determine the physical and mental health status, needs, and preferences influenced by culture, spirituality, ethnicity, identity, and social diversity of patients and their	B. Determine the physical and mental health status, needs, and preferences influenced by culture, spirituality, ethnicity, identity, and social diversity of patients, families,



diversity of patients and their families, and in interpreting health-related data based on knowledge derived from the vocational nursing program of study.	families, and the interpretation of comprehensive health assessment findings compared with evidence-based health data derived from the diploma or associate degree nursing program of study.	populations, and communities and the interpretation of comprehensive health assessment findings compared with evidence-based health data and a synthesis of knowledge derived from a baccalaureate degree nursing program of study.
C. Report data to assist in the identification of problems and formulation of goals/outcomes and patient-centered plans of care in collaboration with patients, their families, and the interdisciplinary health care team.	C. Analyze comprehensive assessment data to identify problems, formulate goals/outcomes, and develop plans of care for patients and their families using information from evidence-based practice in collaboration with patients, their families, and the interdisciplinary health care team.	C. Synthesize comprehensive assessment data to identify problems, formulate goals/outcomes, and develop plans of care for patients, families, populations, and communities using information from evidence-based practice and published research in collaboration with the above groups and the interdisciplinary health care team.
D. Provide safe, compassionate, basic nursing care to assigned patients with predictable health care needs through a supervised, directed scope of practice.	D. Provide safe, compassionate, comprehensive nursing care to patients and their families through a broad array of health care services.	D. Provide safe, compassionate, comprehensive nursing care to patients, families, populations, and communities through a broad array of health care services.
E. Implement aspects of the plan of care within legal, ethical, and regulatory parameters and in consideration of patient factors.	E. Implement the plan of care for patients and their families within legal, ethical, and regulatory parameters and in consideration of disease prevention, wellness, and promotion of healthy lifestyles.	E. Implement the plan of care for patients, families, populations, and communities within legal, ethical, and regulatory parameters and in consideration of disease prevention, wellness, and promotion of healthy lifestyles.
F. Identify and report alterations in patient responses to therapeutic interventions in comparison to expected outcomes.	F. Evaluate and report patient outcomes and responses to therapeutic interventions in comparison to benchmarks from evidence-based practice, and plan follow-up nursing care.	F. Evaluate and report patient, family, population, and community outcomes and responses to therapeutic interventions in comparison to benchmarks from evidence-based practice and research findings, and plan follow-up nursing care.
G. Implement teaching plans for patients and their families with common health problems and well-defined health learning needs.	G. Develop, implement, and evaluate teaching plans for patients and their families to address health promotion, maintenance, and restoration.	G. Develop, implement, and evaluate teaching plans for patients, families, populations, and communities to address health promotion, maintenance, restoration, and population risk reduction.

H. Assist in the coordination of human, information, and physical resources in providing care for assigned patients and their families.	H. Coordinate human, information, and physical resources in providing care for patients and their families.	H. Coordinate the management of human, information, and physical resources in providing care for patients, families, populations, and communities.
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<b>Vocational Nursing</b>	<b>Diploma and Associate Degree Nursing</b>	<b>Baccalaureate Degree Nursing</b>
<b>III. Patient Safety Advocate</b>	<b>III. Patient Safety Advocate</b>	<b>III. Patient Safety Advocate</b>
A. Demonstrate knowledge of the Texas Nursing Practice Act and the Texas Board of Nursing Rules that emphasize safety, as well as all federal, state, and local government and accreditation organization safety requirements and standards.	A. Demonstrate knowledge of the Texas Nursing Practice Act and the Texas Board of Nursing Rules that emphasize safety, as well as all federal, state, and local government and accreditation organization safety requirements and standards.	A. Demonstrate knowledge of the Texas Nursing Practice Act and the Texas Board of Nursing Rules that emphasize safety, as well as all federal, state, and local government and accreditation organization safety requirements and standards.
B. Implement measures to promote quality and a safe environment for patients, self, and others.	B. Implement measures to promote quality and a safe environment for patients, self, and others.	B. Implement measures to promote quality and a safe environment for patients, self, and others.
C. Assist in the formulation of goals and outcomes to reduce patient risks.	C. Formulate goals and outcomes using evidence-based data to reduce patient risks.	C. Formulate goals and outcomes using evidence-based and theoretical analysis of available data to reduce patient and community risks.
D. Obtain instruction, supervision, or training as needed when implementing nursing procedures or practices.	D. Obtain instruction, supervision, or training as needed when implementing nursing procedures or practices.	D. Obtain instruction, supervision, or training as needed when implementing nursing procedures or practices.
E. Comply with mandatory reporting requirements of the Texas Nursing Practice Act.	E. Comply with mandatory reporting requirements of the Texas Nursing Practice Act.	E. Comply with mandatory reporting requirements of the Texas Nursing Practice Act.
F. Accept and make assignments that take into consideration patient safety and organizational policy.	F. Accept and make assignments and delegate tasks that take into consideration patient safety and organizational policy.	F. Accept and make assignments and delegate tasks that take into consideration patient safety and organizational policy.

<b>Vocational Nursing</b>	<b>Diploma and Associate Degree Nursing</b>	<b>Baccalaureate Nursing</b>
<b>IV. Member of the Health Care Team</b>	<b>IV. Member of the Health Care Team</b>	<b>IV. Member of the Health Care Team</b>

A. Communicate and collaborate in a timely manner with patients, their families, and the interdisciplinary health care team to assist in the planning, delivery, and coordination of patient-centered care to assigned patients.	A. Coordinate, collaborate, and communicate in a timely manner with patients, their families, and the interdisciplinary health care team to plan, deliver, and evaluate patient-centered care.	A. Coordinate, collaborate, and communicate in a timely manner with patients, families, populations, communities, and the interdisciplinary health care team to plan, deliver, and evaluate care.
B. Participate as an advocate in activities that focus on improving the health care of patients and their families.	B. Serve as a health care advocate in monitoring and promoting quality and access to health care for patients and their families.	B. Serve as a health care advocate in monitoring and promoting quality and access to health care for patients, families, populations, and communities.
C. Participate in the identification of patient needs for referral to resources that facilitate continuity of care, and ensure confidentiality.	C. Refer patients and their families to resources that facilitate continuity of care; health promotion, maintenance, and restoration; and ensure confidentiality.	C. Use multiple referral resources for patients, families, populations, and communities, considering cost; confidentiality; effectiveness and efficiency of care; continuity and continuum of care; and health promotion, maintenance, and restoration.
D. Communicate patient data using technology to support decision-making to improve patient care.	D. Communicate and manage information using technology to support decision-making to improve patient care.	D. Communicate and manage information using technology to support decision-making to improve patient care and delivery systems.
E. Assign nursing activities to LVNs or unlicensed personnel based upon an analysis of patient or work place need.	E. Assign and/or delegate nursing activities to other members of the health care team based upon an analysis of patient or work place need.	E. Assign and/or delegate nursing activities to other members of the health care team based upon an analysis of patient or organizational need.
F. Supervise nursing care by others for whom the nurse is responsible.	F. Supervise nursing care provided by others for whom the nurse is responsible by using evidence-based nursing practice.	F. Supervise nursing care provided by others for whom the nurse is responsible by using best practices of management, leadership, and evaluation.
G. Assist health care teams during local or global health emergencies or pandemics to promote health and safety, and prevent disease.	G. Participate with health care teams during local or global health emergencies or pandemics to promote health and safety, and prevent disease.	G. Coordinate, collaborate, and lead health care teams during local or global health emergencies or pandemics to promote community stability, health, safety, and prevent disease.

**I. Member of the Profession**

A licensed nurse (LVN or RN) who exhibits behaviors that reflect commitment to the growth and development of the role and function of nursing consistent with state and national regulations and with ethical and professional standards; aspires to improve the discipline of nursing and its contribution to society; and values self-assessment, self-care, and the need for lifelong learning.

<b>Vocational Nursing</b>	<b>Diploma and Associate Degree Nursing</b>	<b>Baccalaureate Degree Nursing</b>
<b>A. Function within the nurse's legal scope of practice and in accordance with regulation and the policies and procedures of the employing health care institution or practice setting.</b>	<b>A. Function within the nurse's legal scope of practice and in accordance with regulation and the policies and procedures of the employing health care institution or practice setting.</b>	<b>A. Function within the nurse's legal scope of practice and in accordance with regulation and the policies and procedures of the employing health care institution or practice setting.</b>
<b>Knowledge</b>		
1. a. Texas Nursing Practice Act. b. Texas Board of Nursing Rules, Position Statements, and Guidelines. c. Federal, state, or local laws, rules, and regulations affecting nursing practice.	1. a. Texas Nursing Practice Act. b. Texas Board of Nursing Rules, Position Statements, and Guidelines. c. Federal, state, or local laws, rules, and regulations affecting nursing practice.	1. a. Texas Nursing Practice Act. b. Texas Board of Nursing Rules, Position Statements, and Guidelines. c. Federal, state, or local laws, rules, and regulations affecting nursing practice.
2. Nursing scope of practice in relation to delegated medical acts and facility policies.	2. Nursing scope of practice in relation to delegated medical acts and facility policies.	2. Nursing scope of practice in relation to delegated medical acts and facility policies.
3. Standards and guidelines from professional organizations.	3. Standards and guidelines from professional organizations.	3. Standards and guidelines from professional organizations.
4. Facility policies and procedures.	4. Facility policies and procedures.	4. Facility policies and procedures.
<b>Clinical Judgments and Behaviors</b>		
1. Function within a directed scope of practice of the vocational nurse with appropriate supervision.	1. Function within the scope of practice of the registered nurse.	1. Function within the scope of practice of the registered nurse.
2. Assist in determination of predictable health care needs of patients to provide	2. Use a systematic approach to provide individualized, goal-directed nursing care to	2. Use a systematic approach to provide individualized, goal-directed nursing care to

individualized, goal-directed nursing care.	meet health care needs of patients and their families.	meet health care needs of patients, families, populations, and communities.
3. a. Practice according to facility policies and procedures and provide input in the development of facility policies and procedures. b. Question orders, policies, and procedures that may not be in the patient's best interest.	3. a. Practice according to facility policies and procedures and participate in the development of facility policies and procedures. b. Question orders, policies, and procedures that may not be in the patient's best interest.	3. a. Practice according to facility policies and procedures and participate in the development of facility policies and procedures. b. Question orders, policies, and procedures that may not be in the patient's best interest.

Vocational Nursing	Diploma and Associate Degree Nursing	Baccalaureate Degree Nursing
<b>B. Assume responsibility and accountability for the quality of nursing care provided to patients and their families.</b>	<b>B. Assume responsibility and accountability for the quality of nursing care provided to patients and their families.</b>	<b>B. Assume responsibility and accountability for the quality of nursing care provided to patients, families, populations, and communities.</b>
Knowledge		
1. a. Texas Board of Nursing Standards of Practice. b. National standards of vocational nursing practice and care. c. National Federation of Licensed Practical Nurses Code of Ethics. d. Advocacy process.	1. a. Texas Board of Nursing Standards of Practice. b. National standards of nursing practice and care. c. American Nurses Association Code of Ethics. d. Models of ethical decision making. e. Advocacy process.	1. a. Texas Board of Nursing Standards of Practice. b. National standards of nursing practice and care; process for the development of standards of nursing practice and care. c. American Nurses Association Code of Ethics. d. Models of ethical decision making. e. Legislative advocacy process. f. Resources and strategies for access to standards of practice.
2. Legal parameters of vocational nursing practice and the Texas Nursing Practice Act, including Nursing Peer Review.	2. a. Legal parameters of professional nursing practice and the Texas Nursing Practice Act, including Nursing Peer Review. b. Legal principles relative to health care.	2. a. Legal parameters of professional nursing practice and the Texas Nursing Practice Act, including Nursing Peer Review. b. Legal principles and practice theories and principles relative to health care.

3. Issues affecting the vocational nurse role and the delivery of culturally-sensitive care to patients and their families.	3. Issues affecting the registered nurse role and the delivery of culturally-sensitive care to patients and their families.	3. Issues affecting the registered nurse role, the BSN role, and the delivery of culturally-sensitive care to patients, families, populations, and communities.
4. Continuing competency and professional development.	4. Continuing competency and professional development.	4. a. Continuing competency and professional development. b. Principles of staff development and learner behavior
5. Self-evaluation, staff evaluation, and peer evaluation processes.	5. Self-evaluation, staff evaluation, and peer evaluation processes.	5. a. Self-evaluation, staff evaluation, and peer evaluation processes. b. Human resource management and performance evaluation processes.
6. Employment setting policies and procedures.	6. a. Employment setting policies and procedures. b. Methods for the development of policies and procedures.	6. a. Employment setting policies and procedures. b. Methods for the development of policies and procedures. c. Role of committees in the development of health care policies and procedures. d. Communication skills in the areas of writing, speaking, and presenting as required to function in leadership positions.
7. a. Professional characteristics that conform to generally accepted standards of nursing care and of regulation. b. Aspects of professional behavior and in providing service excellence. c. Communication techniques to maintain professional boundaries.	7. a. Professional characteristics that conform to generally accepted standards of nursing care and of regulation. b. Aspects of professional behavior and in providing service excellence. c. Communication techniques and management skills to maintain professional boundaries.	7. a. Professional characteristics that conform to generally accepted standards of nursing care and of regulation. b. Aspects of professional behavior and in providing service excellence. c. Communication techniques, management and leadership skills, and role modeling to maintain professional boundaries.
8. Principles of quality improvement.	8. Principles of quality improvement and basic outcome measurement in health care organizations.	8. Principles and tools of quality improvement and outcome measurement in systems of care delivery.

Clinical Judgments and Behaviors		
1. Practice according to the Texas laws and regulations.	1. Practice according to the Texas laws and regulations.	1. Practice according to the Texas laws and regulations.
2. a. Provide nursing care within the parameters of vocational nursing knowledge, scope of practice, education, experience, and ethical/legal standards of care. b. Participate in evaluation of care administered by the interdisciplinary health care team.	2. a. Provide nursing care within the parameters of professional nursing knowledge, scope of practice, education, experience, and ethical/legal standards of care. b. Evaluate care administered by the interdisciplinary health care team. c. Advocate for standards of practice through professional memberships.	2. a. Provide nursing care within the parameters of professional nursing knowledge, scope of practice, education, experience, and ethical/legal standards of care. b. Evaluate care administered by the interdisciplinary health care team. c. Advocate for standards of practice using professional and legislative processes.
3. a. Practice nursing in a caring, nonjudgmental, nondiscriminatory manner. b. Provide culturally sensitive health care to patients and their families. c. Provide holistic care that addresses the needs of diverse individuals across the lifespan.	3. a. Practice nursing in a caring, nonjudgmental, nondiscriminatory manner. b. Provide culturally sensitive health care to patients and their families. c. Provide holistic care that addresses the needs of diverse individuals across the lifespan.	3. a. Practice nursing in a caring, nonjudgmental, nondiscriminatory manner. b. Provide culturally sensitive health care to patients, families, populations, and communities. c. Provide holistic care that addresses the needs of diverse individuals and populations across the lifespan. d. Advocate for policy development to support care of vulnerable populations and communities.
4. a. Use performance and self-evaluation processes to improve individual nursing practice and professional growth. b. Evaluate the learning needs of self, peers, and others and intervene to assure quality of care.	4. a. Use performance and self-evaluation processes to improve individual nursing practice and professional growth. b. Evaluate the learning needs of self, peers, and others and intervene to assure quality of care. c. Apply management skills in collaboration with the interdisciplinary health care team to implement quality patient care.	4. a. Use performance and self-evaluation processes to improve individual nursing practice and professional growth. b. Evaluate the learning needs of self, peers, and others and intervene to assure quality of care. c. Apply leadership and management concepts and skills in collaboration with the interdisciplinary health care team to implement quality patient care.

5. a. Assume accountability for individual nursing practice. b. Follow established evidence-based clinical practice guidelines.	5. a. Assume accountability for individual nursing practice. b. Promote accountability for quality nursing practice through participation on policy and procedure committees. c. Implement established evidence-based clinical practice guidelines.	5. a. Assume accountability for individual nursing practice. b. Promote accountability for quality nursing practice through participation on policy and procedure committees. c. Implement established evidence-based clinical practice guidelines. d. Participate in designing systems that support quality nursing practice. e. Apply research findings and principles of research to enhance evidence-based practice.
6. a. Follow established policies and procedures. b. Question orders, policies, and procedures that may not be in the patient's best interest. c. Use nursing judgment to anticipate and prevent patient harm, including implementing Nursing Peer Review.	6. a. Follow established policies and procedures. b. Question orders, policies, and procedures that may not be in the patient's best interest. c. Use nursing judgment to anticipate and prevent patient harm, including implementing Nursing Peer Review.	6. a. Follow established policies and procedures. b. Question orders, policies, and procedures that may not be in the patient's best interest. c. Use nursing judgment to anticipate and prevent patient harm, including implementing Nursing Peer Review.
7. Demonstrate professional characteristics that display a commitment to nursing care and to recognizing and meeting patient needs.	7. Demonstrate professional characteristics that display a commitment to nursing care and to recognizing and meeting patient needs.	7. Demonstrate professional characteristics that display a commitment to nursing care and to recognizing and meeting patient needs.
8. Use communication techniques to maintain professional boundaries in the nurse/patient relationship.	8. Use communication techniques and management skills to maintain professional boundaries between patients and individual health care team members.	8. a. Use communication techniques and management skills to maintain professional boundaries between patients and individual health care team members. b. Use leadership and role modeling skills to promote professional boundaries among the members of the interdisciplinary team.
9. Uphold professional behavior in nursing comportment and in following organizational standards and policies.	9. Uphold professional behavior in nursing comportment and in following organizational standards and policies.	9. Uphold professional behavior in nursing comportment and in following organizational standards and policies.



10. Implement principles of quality improvement in collaboration with the health care team.	10. Collaborate with interdisciplinary team on basic principles of quality improvement and outcome measurement.	10. Collaborate with interdisciplinary team on principles and tools of quality improvement and outcome measurement in systems of care delivery.
<b>Vocational Nursing</b>	<b>Diploma and Associate Degree Nursing</b>	<b>Baccalaureate Degree Nursing</b>
<b>C. Contribute to activities that promote the development and practice of vocational nursing.</b>	<b>C. Participate in activities that promote the development and practice of professional nursing.</b>	<b>C. Promote the practice of professional nursing through leadership activities and advocacy.</b>
<b>Knowledge</b>		
1. Historical evolution of nursing practice.	1. Historical evolution of professional nursing.	1. Links between nursing history and medical, social, political, religious, and cultural influences.
2. Issues affecting the development and practice of vocational nursing.	2. Issues and trends affecting nursing practice, the nursing profession, and health care delivery.	2. a. Issues and trends affecting nursing practice, the nursing profession, and health care delivery system. b. Inquiry, analysis, and information approaches in addressing practice issues.
3. The role of vocational nursing organizations, regulatory agencies, and health care organizations.	3. The role of professional nursing organizations, regulatory agencies, and health care organizations.	3. a. The role of professional nursing organizations, regulatory agencies, and health care organizations. b. Research related to organizational and societal change.
4. Factors affecting the public image of nursing.	4. Strategies to influence the public perception of nursing.	4. Strategies to influence the public perception of nursing.
5. Distinctions between the evolving vocational and professional nursing roles.	5. a. The evolving practice roles of professional nurses and their contributions to the profession. b. Types of leadership. c. Political processes to promote professional nursing practice.	5. a. Evolving leadership roles in the advancement of the nursing profession; distinction of roles and scopes of practice among nursing and other health care professions. b. Theories of leadership. c. Strategies to influence legislative action processes and public policy.

Clinical Judgments and Behaviors		
1. Identify historical evolution of nursing practice and issues affecting the development and practice of vocational nursing.	1. Analyze the historical evolution of professional nursing and the application to current issues and trends.	1. Synthesize the links between nursing history and medical, social, political, religious, and cultural influences to promote professional nursing practice.
2. Work collegially with members of the interdisciplinary health care team.	2. Promote collegiality among interdisciplinary health care team members.	2. Provide leadership in collaboration with the interdisciplinary health care team.
3. Participate in activities individually or in groups through organizations that promote a positive image of the vocational nursing role.	3. a. Participate in activities individually or in groups through organizations that promote a positive image of the profession of nursing. b. Collaborate with nursing colleagues and health care organizations to promote the profession of nursing. c. Articulate the values and roles of nursing to the public.	3. a. Participate in activities individually or in groups through organizations that promote a positive image of the profession of nursing. b. Collaborate with nursing colleagues and health care organizations and with others outside the health care industry to promote the profession of nursing. c. Articulate the values and roles of nursing to the public. d. Communicate with state legislators and representatives of other regulatory bodies to promote a competent nursing workforce and protection of the public's safety and welfare.
4. Recognize roles of vocational nursing organizations, regulatory agencies, and organizational committees.	4. Recognize roles of professional nursing organizations, regulatory agencies, and organizational committees.	4. Recognize and analyze the impact of professional nursing organizations, regulatory agencies, and organizational committees upon the nursing profession and the roles of nurses.
5. Practice within the vocational nursing role and Scope of Practice.	5. Practice within the professional nursing role and Scope of Practice.	5. Practice within the professional nursing role and Scope of Practice.
6. Serve as a positive role model for students, peers, and members of the interdisciplinary health care team.	6. a. Serve as a positive role model for students, peers, and members of the interdisciplinary health care team. b. Participate in activities that promote consumer awareness of nursing's contribution to society.	6. a. Serve as a positive role model for students, peers, and members of the interdisciplinary health care team. b. Participate in activities that promote consumer awareness of nursing's contribution to society.

Vocational Nursing	Diploma and Associate Degree Nursing	Baccalaureate Degree Nursing
<b>D. Demonstrate responsibility for continued competence in nursing practice, and develop insight through reflection, self-analysis, self-care, and lifelong learning.</b>	<b>D. Demonstrate responsibility for continued competence in nursing practice, and develop insight through reflection, self-analysis, self-care, and lifelong learning.</b>	<b>D. Demonstrate responsibility for continued competence in nursing practice, and develop insight through reflection, self-analysis, self-care, and lifelong learning.</b>
<b>Knowledge</b>		
1. Texas Board of Nursing rules for continuing competence.	1. Texas Board of Nursing rules for continuing competence.	1. Texas Board of Nursing rules for continuing competence.
2. Resources, tools, and processes to assess vocational learning needs.	2. Resources, tools, and processes to assess professional learning needs.	2. Resources, tools, and processes to assess professional learning needs.
3. Lifelong learning opportunities to facilitate continuing competence (e.g., certifications, educational articulation/ mobility, and pathways for academic progression).	3. Lifelong learning opportunities to facilitate continuing competence (e.g., certifications, educational articulation/ mobility, and pathways for academic progression).	3. Lifelong learning opportunities to facilitate continuing competence (e.g. certifications and graduate education).
4. Changing roles and competencies in vocational nursing.	4. Changing roles and competencies in professional nursing.	4. Changing roles and competencies in professional nursing.
5. Research in self-care practices of nurses.	5. Research in self-care practices of nurses.	5. Research in self-care practices of nurses.
<b>Clinical Judgments and Behaviors</b>		
1. Participate in educational activities to maintain/ improve competency, knowledge, and skills.	1. Participate in educational activities to maintain/ improve competence, knowledge, and skills.	1. Participate in educational activities to maintain/ improve competence, knowledge, and skills.
2. <i>* Participate in nursing continuing competency activities to maintain licensure.</i>	2. <i>* Participate in nursing continuing competency activities to maintain licensure.</i>	2. <i>* Participate in nursing continuing competency activities to maintain licensure.</i>
3. Use self-evaluation, reflection, peer evaluation, and feedback to modify and improve practice.	3. Use self-evaluation, reflection, peer evaluation, and feedback to modify and improve practice.	3. Use self-evaluation, reflection, peer evaluation, and feedback to modify and improve practice.
4. Demonstrate accountability to reassess and establish new competency when changing practice areas.	4. Demonstrate accountability to reassess and establish new competency when changing practice areas.	4. Demonstrate accountability to reassess and establish new competency when changing practice areas.
5. Demonstrate commitment to the value of lifelong learning.	5. Demonstrate commitment to the value of lifelong learning.	5. Demonstrate commitment to the value of lifelong learning.

6. Engage in self-care practices that promote work-life balance.	6. Engage in self-care practices that promote work-life balance.	6. Engage in self-care practices that promote work-life balance.
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## II. Provider of Patient-Centered Care

A licensed nurse (LVN or RN) who, based on educational preparation and scope of practice, accepts responsibility for the quality of nursing care and provides safe, compassionate nursing care using a systematic process of assessment, analysis, planning, intervention, and evaluation that focuses on the needs and preferences of patients and their families. The nurse incorporates professional values and ethical principles into nursing practice. The patients for LVNs and for Diploma and ADN educated RNs include individual patients and their families; the BSN-educated RN is also prepared to provide care to populations and communities.

Vocational Nursing	Diploma and Associate Degree Nursing	Baccalaureate Degree Nursing
<b>A. Use clinical reasoning and knowledge based on the vocational nursing program of study and established evidence-based practice as the basis for decision-making in nursing practice.</b>	<b>A. Use clinical reasoning and knowledge based on the diploma or associate degree nursing program of study and evidence-based practice outcomes as a basis for decision-making in nursing practice.</b>	<b>A. Use clinical reasoning and knowledge based on the baccalaureate degree nursing program of study, evidence-based practice outcomes, and research studies as the basis for decision-making and comprehensive patient care.</b>
Knowledge		
1. A systematic problem-solving process in the care of patients and their families based on sciences taught in the vocational nursing program and evidence-based practice outcomes.	1. a. A systematic problem-solving process in the care of patients and their families based on selected liberal arts and sciences, and evidence-based practice outcomes. b. Conceptual frameworks of nursing practice as a means of planning care and solving clinical problems in care of patients and families.	1. a. A systematic problem-solving process in the care of patients and families based on the liberal arts, sciences, and evidence-based practice outcomes and research studies. b. Conceptual frameworks of nursing practice as a means of planning care and solving clinical problems in care of patients and families. c. Nursing frameworks, theories, and models that relate to managing and evaluating health care delivery with consideration of related costs in care

		of patients, families, populations, and communities.
2. a. Priority setting based on patient health status and individual characteristics. b. Characteristics of vulnerable patients. c. Clinical reasoning processes.	2. a. Priority setting based on patient health status and individual characteristics. b. Characteristics of vulnerable patients. c. Clinical reasoning processes, systematic clinical judgment, and best practices.	2. a. Priority setting based on patient health status and individual characteristics. b. Characteristics of vulnerable populations. c. Clinical reasoning models, systematic clinical judgment, research process, and best practices.
3. Application of current literature, available work setting resources, and evidence-based practice to assist in decision-making.	3. Application of current literature and/ or research findings and evidence-based practice in improving patient care.	3. a. Research utilization and evidence-based practice. b. Analysis of reliability, validity, and limitations of quality of evidence. c. Informed consent for participation in research.
4. Resources from scientifically valid sources.	4. Resources for accurate and scientifically valid current information.	4. a. Resources for accurate and scientifically valid current information. b. Research and evaluation methodologies.
<b>Clinical Judgments and Behaviors</b>		
1. Use problem-solving approach and nursing knowledge to make decisions regarding care of assigned patients.	1. Use clinical reasoning and nursing science as a basis for decision-making in nursing practice.	1. Use systematic approaches for clinical decision-making, including nursing research, epidemiology, and political, social, ethical, and legal processes.
2. a. Organize care for assigned patients based upon problem-solving and identified priorities. b. Proactively manage priorities in patient care and follow-up on clinical problems that warrant investigation with consideration of anticipated risks. c. Recognize potential care needs of vulnerable patients.	2. a. Organize care based upon problem-solving and identified priorities. b. Proactively manage priorities in patient care and follow-up on clinical problems that warrant investigation with consideration of anticipated risks. c. Apply principles of assisting vulnerable patients.	2. a. Organize care based upon problem-solving and identified priorities. b. Proactively manage priorities in patient care and follow-up on clinical problems that warrant investigation with consideration of anticipated risks. c. Apply knowledge from genomics, epidemiology, bioterrorism, and current population demographics in decision-making to reduce health risks in communities and vulnerable populations.

3. Identify and communicate patient physical and mental health care problems encountered in practice.	3. Use knowledge of societal and health trends and evidence-based outcomes to identify and communicate patient physical and mental health care problems.	3. Use knowledge of societal and health trends and current research findings to identify and communicate patient physical and mental health care problems.
4. Apply relevant, current nursing practice journal articles to practice and clinical decisions.	4. Apply relevant, current nursing practice journal articles and evidence-based outcomes from research findings to practice and clinical decisions.	4. Analyze and incorporate research findings/studies and evidence-based data into nursing practice and clinical decisions.

Vocational Nursing	Diploma and Associate Degree Nursing	Baccalaureate Degree Nursing
<b>B. Assist in determining the physical and mental health status, needs, and preferences influenced by culture, spirituality, ethnicity, identity, and social diversity of patients and their families, and in interpreting health-related data based on knowledge from the vocational nursing program of study.</b>	<b>B. Determine the physical and mental health status, needs, and preferences influenced by culture, spirituality, ethnicity, identity, and social diversity of patients and their families, and the interpretation of comprehensive health assessment findings compared with evidence-based health data derived from the diploma or associate degree nursing program of study.</b>	<b>B. Determine the physical and mental health status, needs, and preferences influenced by culture, spirituality, ethnicity, identity, and social diversity of patients, families, populations, and communities and the interpretation of comprehensive health assessment findings compared with evidence-based health data and a synthesis of knowledge derived from a baccalaureate degree nursing program of study.</b>
Knowledge		
1. Steps of a systematic process in clinical decision-making that includes vocational nursing scope of practice in focused assessment, planning, implementation, and evaluation.	1. Steps of a systematic approach, which includes assessment, analysis, planning, implementation, and evaluation.	1. <ol style="list-style-type: none"> <li>Steps of a systematic approach, which includes assessment, analysis, planning, implementation, and evaluation.</li> <li>Systematic processes, including nursing research, epidemiologic, psychosocial, and management.</li> <li>Systematic approach to performing a community assessment.</li> </ol>
2. Components of a focused nursing assessment.	2. Comprehensive nursing assessment of patients and their families.	2. Comprehensive nursing assessment of patients, families, populations, and

		communities. Analysis of nursing research, epidemiological, and social data to draw inferences and conclusions.
3. Structured data collection tools and techniques of assessment of patients including interviewing.	3. Structured and unstructured data collection tools and techniques of assessment of patients and their families including interviewing.	3. a. Structured data collection tools and techniques of assessment of patients including interviewing. b. Unstructured data collection tools and techniques for assessment of patients, families, populations, and communities. c. Components of comprehensive databases and methods for data collection, health screening and case finding.
4. Characteristics, concepts, and processes related to patients, including: gross anatomy; basic physiology and pathophysiology; psychosocial growth and development; basic psychopathology; ethical reasoning; and major cultural and spiritual belief and practices related to health, illness, birth, death, and dying.	4. Characteristics, concepts, and processes related to patients, including: anatomy and physiology; physical and psychosocial growth and development; pathophysiology and psychopathology; ethical reasoning; and cultural and spiritual beliefs and practices related to health, illness, birth, death and dying.	4. Characteristics, concepts, processes, and theories related to patients including: anatomy and physiology; physical and psychosocial growth and development; pathophysiology and psychopathology; cultural and spiritual beliefs and practices related to health, illness, birth, death and dying; history; research; statistics; humanities; genomics; global health; ethics; and logical and ethical reasoning.
5. Cultural differences of patients across the lifespan.	5. Cultural differences of patients across the lifespan and major needs of vulnerable patients.	5. Cultural differences and integration of patient needs across the lifespan into the health care system including comprehensive needs of vulnerable patients, families, populations, and communities.
6. Characteristics, concepts, and processes related to transmission of common communicable diseases including individual risk factors and preventive health practices.	6. Characteristics, concepts, and processes related to disease transmission, risk factors, preventive health practices and their implications for selected populations and community resources.	6. Characteristics, concepts, and processes related to communities, including epidemiology, risk factors and preventive health practices and their implications for vulnerable populations, resources and resource assessment techniques, environmental factors and social organizations.



7. Common disease processes, medication administration, and other therapies and treatments.	7. Disease processes, pharmacotherapeutics, and other therapies and treatments.	7. Disease processes, pharmacotherapeutics, and other therapies and treatments.
8. Introduction to established approaches that guide nursing practice.	8. Introduction to established theories, models and approaches that guide nursing practice.	8. Nursing theories, research findings, and interdisciplinary roles to guide nursing practice.
9. Family processes that impact health.	9. Characteristics, concepts and processes related to families, including family development, risk factors, family communication patterns, and decision-making structures. Functional and dysfunctional characteristics of families that impact health.	9. Characteristics, concepts and processes related to families, including family development, risk factors, family communication patterns, and decision-making structures. Functional and dysfunctional characteristics of families that impact health.
10. Application of clinical technology in the delivery of safe patient care and documentation.	10. Application of clinical technology and use of nursing informatics in the delivery of safe patient care.	10. Application of clinical technology, information management, and use of nursing informatics in the delivery of safe patient care.
11. Introduction to patients with multiple healthcare problems.	11. Introduction to complex and multiple healthcare problems and issues, including evidence-based complementary health care practices.	11. Complex and multiple health care problems and issues, integrating evidence-based traditional and complementary healthcare practices, and population interventions and solutions.
12. Political, economic, and societal forces affecting health of individuals. Social determinants of health.	12. Political, economic, and societal forces affecting the health of individuals and their families. Social determinants of health.	12. Political, economic, and societal forces affecting health care for patients, families, populations, and global communities. Social determinants of health.
<b>Clinical Judgments and Behaviors</b>		
1. Use structured assessment tool to obtain patient history.	1. Use structured and unstructured data collection tools to obtain patient and family history in areas of physical, psychiatric/mental health, spiritual, cultural, familial, occupational, and environmental information, risk factors, and patient resources.	1. a. Use structured and unstructured data collection tools to obtain patient and family history in areas of physical, psychiatric/mental health, spiritual, cultural, familial, occupational, environmental information, risk factors, and patient resources. b. Expand and modify data collection tools using evidence-based practice.

2. Perform focused assessment to assist in identifying health status and monitoring change in patients.	2. Perform comprehensive assessment to identify health needs and monitor changes in health status of patients and families.	2. Perform comprehensive assessment and monitor changes to include factors impacting health status and health needs of patients, families, populations, and communities.
3. Report and document focused patient assessment data.	3. a. Validate, report, and document comprehensive assessment data for patients and families, including physical and mental health status and needs for patients and their families. b. Evaluate the use of safe complementary health care practices.	3. a. Validate, report, and document comprehensive assessment data, including physical and mental health status and needs for patients, families, populations, and communities. b. Evaluate evidence supporting traditional and complementary health care practices being used by patients, families, populations, and communities.
4. Identify predictable and multiple health needs of patients and recognize signs of decompensation.	4. Identify complex multiple health needs of patients, with consideration of signs and symptoms of decompensation of patients and families.	4. Identify complex multiple health needs of patients, with consideration of signs and symptoms of decompensation of patients and families.
5. Share observations that assist members of the health care team in meeting patient needs.	5. Use clinical reasoning to identify patient needs based upon analysis of health data and evidence-based practice outcomes and communicate observations.	5. Use clinical reasoning to identify patient needs based upon analysis of health data, evidence-based practice outcomes and research findings and communicate observations.
6. Assist with health screening.	6. Perform health screening and identify anticipated physical and mental health risks related to lifestyle and activities for prevention.	6. Perform health screening and case finding, and identify links between physical and mental health, lifestyle, prevention, and cost and access to health care.
7. Differentiate abnormal from normal health data of patients.	7. Interpret and analyze health data for underlying pathophysiological changes in the patient's status.	7. Interpret and analyze health data of patients, families, populations, and communities including pathophysiology, genomics and epidemiological considerations.
8. Recognize healthcare outcomes and report patient status.	8. Incorporate multiple determinants of health when providing nursing care for patients and families.	8. Incorporate the multiple determinants of health when providing nursing care for

		patients, families, populations and communities.
9. a. Recognize that economic and family processes affect the health of patients. b. Identify health risks related to social determinants of health.	9. a. Recognize that political, economic, and societal forces affect the health of patients and their families. b. Identify health risks related to social determinants of health.	9. a. Recognize that political, economic, and societal forces affect the health of patients, families, populations, and communities. b. Identify health risks related to social determinants of health. c. Examine populations at risk from epidemiological, social and environmental perspectives.
10. N/A	10. N/A	10. Use epidemiological, social and environmental data to draw inferences about the health status of populations and communities.

Vocational Nursing	Diploma and Associate Degree Nursing	Baccalaureate Degree Nursing
<b>C. Report data to assist in the identification of problems and formulation of goals/outcomes and patient-centered plans of care in collaboration with patients, their families, and the interdisciplinary health care team.</b>	<b>C. Analyze comprehensive assessment data to identify problems, formulate goals/outcomes, and develop plans of care for patients and their families using information from evidence-based practice in collaboration with patients, their families, and the interdisciplinary health care team.</b>	<b>C. Synthesize comprehensive assessment data to identify problems, formulate goals/ outcomes, and develop plans of care for patients, families, populations, and communities using information from evidence-based practice and published research in collaboration with the above groups and the interdisciplinary health care team.</b>
Knowledge		
1. Process to establish the nurse-patient/family relationship including cultural aspects of care.	1. a. Principles of establishing nurse-patient/family relationship including cultural aspects of care. b. Principles for recognizing functional and dysfunctional relationships.	1. a. Principles of establishing nurse-patient/family relationship including cultural aspects of care. b. Models for understanding the dynamics of functional and dysfunctional relationships.

2. Written, verbal, and non-verbal modes of communication including electronic information technologies.	2. a. Techniques of written, verbal, and nonverbal communication including electronic information technologies. b. Principles of effective communication and the impact on nursing practice.	2. a. Techniques of written, verbal, and nonverbal communication including electronic information technologies. b. Communication theories and their impact on nursing practice.
3. Fundamental principles of disease prevention and health promotion/restoration for patients.	3. Principles of disease prevention, health promotion, education, and rehabilitation for patients.	3. a. Principles and theories of disease prevention, health promotion, education, and rehabilitation for patients. b. Principles of epidemiology and genomics.
4. a. Interventions to support the patients and their families during life stages, including end-of-life care. b. Interdisciplinary collaboration.	4. a. Evidence-based clinical practice guidelines as a basis of interventions to support patients and their families throughout the lifespan, including end-of-life care. b. Interdisciplinary collaboration.	4. a. Evidence-based clinical practice guidelines as a basis of interventions to support patients and families throughout the lifespan, including end-of-life care. b. Interdisciplinary interventions, including nursing care across all settings.
5. Relationships among the nursing plan of care, the therapeutic regimen, the plan of care of other interdisciplinary health care team members, and basic cost factors.	5. Congruence of the relationships among the nursing plan of care, the therapeutic regimen, the plan of care of other interdisciplinary health care team members, and basic cost factors.	5. Congruence of the relationships among the nursing plan of care, the therapeutic regimen, the plan of care of other interdisciplinary health care team members and cost factors in multiple settings.
6. Criteria for setting priorities in planning and evaluating care.	6. A systematic approach for problem-solving and decision-making for prioritizing and evaluating the plan of care.	6. A variety of systematic approaches for problem-solving and decision-making for prioritizing and evaluating the plan of care.
7. Steps and procedures in discharge planning process.	7. Strategies for collaborative discharge planning.	7. a. Strategies for collaborative discharge planning. b. Research findings related to nursing care and discharge planning.
8. Concepts from basic sciences and support courses.	8. Concepts from humanities and natural, social, and behavioral sciences applied to care planning for patients and their families.	8. Concepts and principles of arts, humanities, and natural, social, and behavioral sciences as applied to care

		planning for patients, families, populations, and communities.
<b>Clinical Judgments and Behaviors</b>		
1. Integrate concepts from basic sciences and humanities to deliver safe and compassionate care in delivery of patient care.	1. Integrate knowledge from general education and sciences for the direct and indirect delivery of safe and compassionate care for patients and their families.	1. Synthesize theory and research-based knowledge from arts, humanities, and sciences for the direct and indirect delivery of safe and compassionate care for patients, families, populations, and communities.
2. Identify short-term goals and outcomes, select interventions considering cultural aspects, and establish priorities for care in collaboration with patients, their families, and the interdisciplinary team.	2. Establish short- and long-term goals and outcomes, select interventions considering cultural aspects, and establish priorities for care in collaboration with patients, their families, and the interdisciplinary team.	2. Establish short- and long-term goals and outcomes, select interventions considering cultural aspects, and establish priorities for care with patients, families, populations, communities, and the interdisciplinary team.
3. Participate in the development and modification of the nursing plan of care across the lifespan, including end-of-life care.	3. a. Use current technology and evidence-based information to formulate and modify the nursing plan of care across the lifespan, including end-of-life care. b. Assist with collection of data from direct patient care to redefine practice guidelines.	3. a. Use current technology and evidence-based information to formulate and modify the nursing plan of care across the lifespan, including end-of-life care. b. Assist in the development of clinical practice guidelines using evidence-based based practice and research findings.
4. Contribute to the plan of care by collaborating with interdisciplinary team members.	4. Collaborate with interdisciplinary team members to plan for comprehensive services for patients and their families.	4. Collaborate with interdisciplinary team members to plan for comprehensive services for patients, families, populations, and communities.
5. Assist in the discharge planning of selected patients.	5. Plan, implement, and evaluate discharge planning using evidence-based guidelines in collaboration with the interdisciplinary health care team.	5. Use research findings and evidence-based guidelines to plan, implement, and evaluate discharge plans in collaboration with the interdisciplinary health care team.
6. Demonstrate fiscal accountability in providing patient care.	6. Demonstrate fiscal accountability in providing care for patients and their families.	6. In collaboration with the interdisciplinary team, use knowledge of financial resources to demonstrate fiscal accountability for health care of patients, families, populations, and communities.

7. Demonstrate basic knowledge of disease prevention and health promotion in delivery of care to patients and their families.	7. Demonstrate knowledge of disease prevention and health promotion in delivery of care to patients and their families.	7. Demonstrate knowledge of disease prevention and health promotion in delivery of care to patients, families, populations, and communities.
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Vocational Nursing	Diploma and Associate Degree Nursing	Baccalaureate Degree Nursing
<b>D. Provide safe, compassionate, basic nursing care to assigned patients with predictable health care needs through a supervised, directed scope of practice.</b>	<b>D. Provide safe, compassionate, comprehensive nursing care to patients and their families through a broad array of health care services.</b>	<b>D. Provide safe, compassionate, comprehensive nursing care to patients, families, populations, and communities through a broad array of health care services.</b>
Knowledge		
1. a. Components of compassionate, patient-centered care. b. Standards of Care; Standards of Practice; institutional policies and procedures for delivery of nursing care. c. Professional ethics. d. Aspects of professional behavior that conform to generally accepted standards of nursing care and of regulation.	1. a. Components of compassionate, patient-centered care. b. Standards of Care; Standards of Practice; institutional policies and procedures for delivery of nursing care. c. Professional ethics. d. Aspects of professional behavior that conform to generally accepted standards of nursing care and of regulation. e. Nursing unit and staffing management.	1. a. Components of compassionate, patient-centered care. b. Standards of Care; Standards of Practice; institutional policies and procedures for delivery of nursing care. c. Professional ethics. d. Aspects of professional behavior that conform to generally accepted standards of nursing care and of regulation. e. Nursing unit staff management. f. Resource management and organizational behavior.
2. Characteristics, trends, and issues of health care delivery.	2. Characteristics, trends, and issues of health care delivery.	2. a. Characteristics, trends, and issues of health care delivery. b. Models for health care delivery in organizations and communities.
3. a. Basis for determining nursing care priorities in patient care. b. Principles of decision-making.	3. a. Basis for determining nursing care priorities in patient care. b. Principles for determining priorities and organization of nursing care.	3. a. Basis for determining nursing care priorities in patient care. b. Principles for determining priorities and organization of nursing care.

		c. Models of priority setting and organizational management.
4. Scope of responsibilities and accountability for supervision and collaboration.	4. a. Scope of responsibilities and accountability for supervision and collaboration. b. Principles of delegation, supervision, and collaboration including Texas Board of Nursing delegation rules. c. Models and patterns of nursing care delivery.	4. a. Scope of responsibilities and accountability for supervision and collaboration. b. Principles of delegation, supervision, and collaboration including Texas Board of Nursing delegation rules. c. Systems of nursing care delivery.
5. Channels of communication for decision-making processes within the work setting.	5. a. Channels of communication for decision-making processes within work settings. b. Principles of decision making.	5. a. Channels of communication and decision-making processes within work settings, organizations, and communities. b. Decision-making principles and models.
<b>Clinical Judgments and Behaviors</b>		
1. Assume accountability and responsibility for nursing care through a directed scope of practice under the supervision of a registered nurse, advanced practice registered nurse, physician assistant, physician, podiatrist, or dentist using standards of care and aspects of professional character.	1. Assume accountability and responsibility for nursing care provided within the professional scope of practice, standards of care, and aspects of professional character.	1. Assume accountability and responsibility for nursing care provided within the professional scope of practice, standards of care, and aspects of professional character.
2. a. Identify priorities and make judgments concerning basic needs of multiple patients with predictable health care needs in order to organize care. b. Manage multiple responsibilities. c. Recognize changes in patient status. d. Communicate changes in patient status to other providers.	2. a. Identify priorities and make judgments concerning the needs of multiple patients in order to organize care. b. Anticipate and interpret changes in patient status and related outcomes. c. Communicate changes in patient status to other providers. d. Manage priorities and multiple responsibilities to provide care for multiple patients.	2. a. Identify priorities and make judgments concerning the needs of multiple patients, families, communities, and populations in order to organize care. b. Anticipate and interpret changes in patient and group status and related outcomes. c. Communicate changes in patient status to other providers. d. Manage priorities and multiple responsibilities to provide care for patients and groups.

3. a. Implement plans of care for multiple patients. b. Collaborate with others to ensure that healthcare needs are met.	3. a. Implement plans of care for multiple patients. b. Collaborate within and across health care settings to ensure that healthcare needs are met, including primary and preventive health care. c. Manage care for multiple patients and their families.	3. a. Implement plans of care for multiple patients. b. Collaborate within and across a broad array of settings to ensure that healthcare needs are met, including primary and preventive health care. c. Manage care for multiple patients, families, communities, and populations.
4. Participate in management activities.	4. Apply management skills to assign and/or delegate nursing care to other members of the nursing team.	4. Apply concepts and skills from management theory to assign and/or delegate nursing care to other members of the nursing team in a variety of settings.

Vocational Nursing	Diploma and Associate Degree Nursing	Baccalaureate Degree Nursing
<b>E. Implement aspects of the plan of care within legal, ethical, and regulatory parameters and in consideration of patient factors.</b>	<b>E. Implement the plan of care for patients and their families within legal, ethical, and regulatory parameters and in consideration of disease prevention, wellness, and promotion of healthy lifestyles.</b>	<b>E. Implement the plan of care for patients, families, populations, and communities within legal, ethical, and regulatory parameters and in consideration of disease prevention, wellness, and promotion of healthy lifestyles.</b>
Knowledge		
1. Common health practices and behaviors of patients and their families related to their developmental level, gender, culture, belief system, and the environment.	1. a. Health practices and behaviors and early manifestations of disease in patients and their families related to their developmental level, gender, culture, belief system, and the environment. b. Healthy lifestyles and early manifestations of disease in patients and their families.	1. a. Health practices and behaviors and early manifestations of disease in patients, families, communities, and populations related to developmental level, gender, cultures, belief systems, and the environment. b. Healthy lifestyles, early manifestations of disease, and epidemiology in populations. c. Health behavior change strategies to promote health and manage illness.



2. Methods of therapeutic communication.	2. Patterns and modes of therapeutic and non-therapeutic communication, delegation, and collaboration.	2. Theories, models, patterns, and modes of therapeutic and non-therapeutic communication, delegation, and collaboration.
3. Rights and responsibilities of patients related to health care and basic advocacy.	3. a. Rights and responsibilities of patients related to health care and advocacy. b. Advocacy for health promotion for patients and their families.	3. a. Rights and responsibilities of patients related to health care and advocacy. b. Public policy advocacy.
4. Basic physiological and mental health aspects of nursing interventions.	4. a. Physiological, psychiatric, and mental health aspects of nursing interventions. b. Approaches to comprehensive healthcare, including health promotion and preventive practices for patients and families.	4. a. Physiological, psychiatric, and mental health aspects of nursing interventions. b. Approaches to comprehensive healthcare, including health promotion and preventive practices for patients, families, populations, and communities.
5. Principles and factors that contribute to the maintenance or restoration of health and prevention of illness.	5. Principles and factors that contribute to the maintenance or restoration of health and prevention of illness.	5. Principles and research findings of factors that contribute to the maintenance or restoration of health and prevention of illness.
6. a. Properties, effects, and basic principles underlying the use and administration of pharmacotherapeutic agents, including patients' responses. b. Effects of misuse of prescription and nonprescription medications and other substances.	6. a. Principles and rationale underlying the use, administration, and interaction of pharmacotherapeutic and psychopharmacotherapeutic agents using evidence-based outcomes which impact patients' responses to these agents. b. Effects of misuse of prescription and nonprescription medications and other substances	6. a. Principles and rationale underlying the use, administration, and interaction of pharmacotherapeutic and psychopharmacotherapeutic agents and research studies impacting patients' responses to these agents. b. Effects of misuse of prescription and nonprescription medications and other substances
7. Coping mechanisms for managing stress and identifying resources for crisis management.	7. Principles and strategies of stress management, crisis intervention, and conflict management.	7. Principles, strategies, theories, and models of stress, crisis responses, and conflict management.
8. Code of vocational nurse ethics and patient's rights.	8. Code of ethics, ethical practices, and patient's rights and framework for ethical decision-making.	8. Code of ethics, ethical practices, current issues, and patient's rights in the health care delivery system.
9. Legal parameters of vocational nursing practice and health care.	9. Legal parameters of professional nursing practice and health care.	9. Legal standards and implications for professional nursing care in multiple health care delivery settings.

10. Available intradisciplinary and interdisciplinary resources within the employment setting.	10. Intradisciplinary and interdisciplinary resources and organizational relationships including structure, function, and utilization of resources.	10. Intradisciplinary and interdisciplinary resources and organizational relationships including structure, function, and utilization of health care delivery system resources.
11. Key federal and state statutes and institutional policies regarding patient confidentiality.	11. a. Key federal and state statutes and institutional policies regarding patient confidentiality. b. Issues and factors impacting confidentiality. c. Management of nursing informatics using principles of confidentiality.	11. a. Key federal and state statutes and institutional policies regarding patient confidentiality. b. Issues and factors impacting confidentiality. c. Information systems management consistent with principles of confidentiality.
12. Nursing interventions to implement plan of care.	12. Nursing interventions to implement plan of care, reduce risks, and promote health for patients and their families.	12. Nursing interventions to implement plan of care, reduce risks, and promote health for individuals, families, populations, and communities.
13. Clinical reasoning in the delivery of care to patients with predictable health care needs using knowledge from the vocational program of study.	13. Clinical reasoning for patients and their families with complex health care needs using framework of knowledge derived from the diploma or associate degree nursing program of study.	13. Clinical reasoning for complex health care needs of patients, families, communities, and populations using a broad framework of knowledge from the baccalaureate nursing program of study.
<b>Clinical Judgments and Behaviors</b>		
1. Implement individualized plan of care to assist patient to meet basic physical and psychosocial needs.	1. Implement individualized plan of care to assist patients and their families to meet physical and mental health needs.	1. Implement individualized plan of care to assist patients, families, communities, and vulnerable populations to meet comprehensive physical and mental health care needs in multiple settings.
2. Implement nursing interventions to promote health, rehabilitation, and implement nursing care for clients with chronic physical and mental health problems and disabilities.	2. a. Implement nursing interventions to promote health and rehabilitation. b. Implement nursing care to promote health and manage acute and chronic physical and mental health problems and disabilities. c. Assist patients and their families to learn skills and strategies to protect and promote health.	2. a. Implement nursing interventions to promote health and rehabilitation. b. Implement nursing care to promote health and manage acute and chronic physical and mental health problems and disabilities. c. Assist patients and families to learn skills that promote and protect health in multiple settings.

3. Initiate interventions in rapidly-changing and emergency patient situations.	3. a. Adjust priorities and implement nursing interventions in rapidly-changing and emergency patient situations. b. Participate with the interdisciplinary team to manage health care needs for patients and their families.	3. a. Adjust priorities and implement nursing interventions in rapidly-changing and emergency patient situations. b. Participate with the interdisciplinary team to manage health care needs of patients, families, populations, and communities.
4. Communicate accurately and completely and document responses of patients to prescription and nonprescription medications, treatments, and procedures to other health care professionals clearly and in a timely manner.	4. Communicate accurately and completely and document responses of patients to prescription and nonprescription medications, treatments, and procedures to other health care professionals clearly and in a timely manner.	4. Communicate accurately and completely and document responses of patients to prescription and nonprescription medications, treatments, and procedures to other health care professionals clearly and in a timely manner.
5. Foster coping mechanisms of patients and their families during alterations in health status and end of life.	5. a. Facilitate coping mechanisms of patients and their families during alterations in health status and end of life. b. Apply evidence-based practice outcomes to support patient and family adaptation during health crises.	5. a. Facilitate patient and family coping during alterations in health status and end of life. b. Apply evidenced-based practice outcomes and research findings to support patient, family, population, and community coping and adaptation during health crises.
6. a. Assist interdisciplinary health care team members with examinations and procedures. b. Seek clarification as needed. c. Provide accurate and pertinent communication when transferring patient care to another provider.	6. a. Collaborate with other health care providers with treatments and procedures. b. Promote interdisciplinary team collaboration in carrying out the plan of care. c. Seek clarification as needed. d. Provide accurate and pertinent communication when transferring patient care to another provider.	6. a. Collaborate with other health care providers with treatments and procedures. b. Promote interdisciplinary team collaboration in carrying out the plan of care. c. Seek clarification as needed. d. Provide accurate and pertinent communication when transferring patient care to another provider.
7. a. Inform patient of Patient Bill of Rights. b. Encourage active engagement of patients and their families in care.	7. a. Inform patient of Patient Bill of Rights. b. Evaluate and clarify patient's understanding of health care rights. c. Encourage active engagement of patients and their families in care.	7. a. Inform patient of Patient Bill of Rights. b. Evaluate and clarify patient's understanding of health care rights. c. Encourage active engagement of patient, family, population, and community in care.

8. Communicate ethical and legal concerns through established channels of communication.	8. Use interdisciplinary resources within the institution to address ethical and legal concerns.	8. Use interdisciplinary, institutional, community, and scholarly resources to address ethical and legal concerns.
9. Use basic therapeutic communication skills when interacting with patients, their families, and other professionals.	9. Use therapeutic communication skills when interacting with and maintaining relationships with patients and their families, and other professionals.	9. a. Use therapeutic communication skills when interacting with and maintaining relationships with patients and families, and other professionals. b. Apply communication theory and techniques in maintaining professional relationships with patients, families, populations, and communities.
10. Apply current technology and informatics to enhance direct patient care while maintaining patient confidentiality and promoting safety.	10. Apply current technology and informatics to enhance patient care while maintaining confidentiality and promoting safety.	10. a. Apply current technology and informatics to enhance patient care while maintaining confidentiality and promoting safety. b. Use informatics to promote health and reduce risk in the community.
11. Facilitate maintenance of patient confidentiality.	11. Facilitate maintenance of patient confidentiality.	11. Facilitate maintenance of patient confidentiality.
12. a. Demonstrate accountability by providing nursing interventions safely and effectively using a directed scope of practice. b. Provide nursing interventions safely and effectively using established evidence-based practice guidelines.	12. a. Demonstrate accountability by using independent clinical judgment and established clinical guidelines to reduce risks and promote health. b. Provide nursing interventions safely and effectively using evidence-based outcomes.	12. a. Demonstrate accountability by using independent clinical judgment and established clinical guidelines to reduce risks and promote health. b. Provide nursing interventions safely and effectively using current research findings and evidence-based outcomes.
13. Provide direct patient care in disease prevention and health promotion and/or restoration.	13. Provide direct and indirect patient and family care in disease prevention and health promotion and/or restoration.	13. a. Provide direct and indirect patient and family care in disease prevention and health promotion and/or restoration. b. Provide direct and indirect care in community-based programs whose primary goals are disease prevention and health promotion and/or restoration.

Vocational Nursing	Diploma and Associate Degree Nursing	Baccalaureate Degree Nursing
<b>F. Identify and report alterations in patient responses to therapeutic interventions in comparison to expected outcomes.</b>	<b>F. Evaluate and report patient outcomes and responses to therapeutic interventions in comparison to benchmarks from evidence-based practice, and plan follow-up nursing care.</b>	<b>F. Evaluate and report patient, family, population, and community outcomes and responses to therapeutic interventions in comparison to benchmarks from evidence-based practice and research findings, and plan follow-up nursing care.</b>
<b>Knowledge</b>		
1. Mechanisms to evaluate specific nursing interventions and patient outcomes.	1. Methods to evaluate health care processes and patient outcomes.	1. Systematic processes to assess methods for evaluating patient outcomes, including reliability and validity of evaluation tools.
2. Factors indicating changes that have potential for life-threatening consequences based on knowledge of life sciences.	2. Factors indicating changes that have potential for life-threatening consequences based on knowledge including physiology, pathophysiology, and pharmacology.	2. Factors indicating changes that have potential for life-threatening consequences based on knowledge including advanced pathophysiology, neurobiology, pharmacology, genomics, chemistry, humanities, and liberal arts education.
3. Basic performance improvement activities in patient care delivery.	3. Introduction to performance improvement concepts in patient care delivery.	3. Performance improvement concepts, motivation theory, and research/evaluation outcome measures to evaluate efficacy and effectiveness of care.
<b>Clinical Judgments and Behaviors</b>		
1. Report changes in assessment data.	1. <ol style="list-style-type: none"> <li>Report changes in assessment data.</li> <li>Evaluate need to intervene to stabilize and prevent negative patient outcomes and/or to support end-of-life care.</li> <li>Evaluate patterns of behavior and changes that warrant immediate intervention.</li> </ol>	1. <ol style="list-style-type: none"> <li>Report changes in assessment data.</li> <li>Evaluate need to intervene to stabilize and prevent negative patient outcomes and/or to support end-of-life care.</li> <li>Evaluate patterns of behavior and changes that warrant immediate intervention.</li> </ol>

2. Use standard references to compare expected and achieved outcomes of nursing care.	2. a. Use standard references to compare expected and achieved outcomes of nursing care. b. Analyze patient data to compare expected and achieved outcomes for patient using evidence-based practice guidelines.	2. a. Use standard references to compare expected and achieved outcomes of nursing care. b. Analyze patient data and use research findings, evidence-based practice guidelines, and a variety of systematic processes to compare expected and achieved outcomes for patient.
3. Communicate reasons for deviations from plan of care to supervisory health care team member.	3. a. Communicate reasons and rationale for deviation from plan of care to interdisciplinary health care team. b. Use nursing knowledge to recommend revisions of plan of care with interdisciplinary team.	3. a. Communicate reasons and rationale for deviation from plan of care to interdisciplinary health care team. b. Use research findings to help explain deviations from plan of care and revise plan of care with interdisciplinary health care team.
4. Assist in modifying plan of care.	4. Modify plan of care based on overt or subtle shifts in patient status and outcomes.	4. Modify plan of care based on overt or subtle shifts in patient status, research findings, and evaluation data.
5. Report and document patient's responses to nursing interventions.	5. a. Report and document patient's responses to nursing interventions. b. Evaluate and communicate quality and effectiveness of therapeutic interventions. c. Collaborate with interdisciplinary health care team to evaluate plan of care and to promote quality and effectiveness of care.	5. a. Report and document patient's responses to nursing interventions. b. Evaluate and communicate quality and effectiveness of therapeutic interventions. c. Collaborate with interdisciplinary health care team to evaluate plan of care and to promote quality and effectiveness of care.
6. Assist in evaluating patient care delivery based on expected outcomes in plan of care and participate in revision of plan of care.	6. Evaluate the effectiveness of nursing interventions based on expected patient outcomes; modify interventions to meet the changing needs of patients; and revise plan of care as a result of evaluation.	6. a. Evaluate the effectiveness of nursing interventions based on expected patient outcomes; modify interventions to meet the changing needs of patients; and revise plan of care as a result of evaluation. b. Evaluate evidence-based data for use in providing comprehensive, efficient, cost-effective care to diverse patients, families, populations, and communities.

Vocational Nursing	Diploma and Associate Degree Nursing	Baccalaureate Degree Nursing
<b>G. Implement teaching plans for patients and their families with common health problems and well-defined health learning needs.</b>	<b>G. Develop, implement, and evaluate teaching plans for patients and their families to address health promotion, maintenance, and restoration.</b>	<b>G. Develop, implement, and evaluate teaching plans for patients, families, populations, and communities to address health promotion, maintenance, restoration, and population risk reduction.</b>
Knowledge		
1. Lifespan development and common situational variables affecting learning, such as stress, pain, and fear.	1. a. Lifespan development and sociocultural variables affecting the teaching/learning process. b. Techniques for assessment of learning needs and factors affecting learning.	1. a. Lifespan development and sociocultural variables affecting the teaching/learning process. b. Techniques for assessment of learning needs and factors affecting learning. c. Techniques for assessment of community health literacy, learning needs, and factors affecting quality of life and health care.
2. Basic principles of the teaching/ learning process.	2. a. Principles, methods, strategies, and outcomes of learning and teaching. b. Methods and strategies to evaluate learning and teaching.	2. a. Principles, methods, strategies, and outcomes of learning and teaching. b. Learning theories and best practices for evaluating methods, strategies, and outcomes of learning and teaching.
3. Resources that support patient health care knowledge, decision-making, and self-advocacy.	3. a. Resources that support patient health care knowledge, decision-making, and self-advocacy. b. Methods for advocating for patient and family health.	3. a. Resources that support patient health care knowledge, decision-making, and self-advocacy. b. Methods for advocating for patient, family, population, and community health.
Clinical Judgments and Behaviors		
1. Identify health-related learning needs of patients and their families.	1. Assess learning needs of patients and their families related to risk reduction and health promotion, maintenance, and restoration.	1. a. Assess learning needs of patients, families, populations, and communities related to health promotion, maintenance, and restoration.

		<ul style="list-style-type: none"> <li>b. Assess genetic, protective, and predictive factors that influence the learning needs of patients, families, populations, and communities, related to risk reduction and health promotion, maintenance, and restoration.</li> </ul>
2. Contribute to the development of an individualized teaching plan.	<ul style="list-style-type: none"> <li>a. Collaborate with the patient and interdisciplinary health care team to develop individualized teaching plans based upon developmental and health care learning needs.</li> <li>b. Use best practice standards and other evidence-based findings in developing and modifying teaching plans for patients and their families.</li> </ul>	<ul style="list-style-type: none"> <li>a. Collaborate with the patient and interdisciplinary health care team to develop individualized teaching plans based upon developmental and health care learning needs.</li> <li>b. Use best practice standards and other evidence-based findings in developing and modifying teaching plans and strategies for patients, families, populations, and communities.</li> </ul>
3. Implement aspects of an established teaching plan for patients and their families.	3. Develop and implement comprehensive teaching plans for health promotion, maintenance, and restoration and risk reduction for patients and their families with consideration of their support systems.	3. Develop and implement comprehensive teaching plans for health promotion, maintenance and restoration and risk reduction of patients, families, populations, and communities.
4. Assist in evaluation of learning outcomes using structured evaluation tools.	4. Evaluate learning outcomes of the patients and their families receiving instruction.	4. Evaluate learning outcomes of comprehensive teaching plans for patients, families, populations, and communities.
5. Teach health promotion and maintenance and self-care to individuals from a designated teaching plan.	<ul style="list-style-type: none"> <li>a. Modify teaching plans for health promotion and maintenance and self-care to accommodate patient and family differences.</li> <li>b. Teach health promotion and maintenance and self-care to individuals and their families based upon teaching goals.</li> </ul>	<ul style="list-style-type: none"> <li>a. Modify teaching plans for health promotion and maintenance and self-care to accommodate patient and family differences.</li> <li>b. Develop teaching plans with special considerations for vulnerable populations.</li> <li>c. Teach health promotion and maintenance and self-care to individuals, families, and groups based upon teaching goals.</li> </ul>
6. Provide the patient with the information needed to make choices regarding health.	6. Provide patients and their families with the information needed to make choices regarding health.	<ul style="list-style-type: none"> <li>a. Provide patients, families, populations, and communities with the information</li> </ul>



		needed to make choices regarding health. b. Implement risk reduction strategies to address social and public health issues.
7. Provide patients and families with basic sources of health information.	7. Serve as an advocate and resource for health education and information for patients and their families.	7. Advocate for health education, healthy lifestyles, and early detection and treatment of disease, targeting vulnerable populations.

Vocational Nursing	Diploma and Associate Degree Nursing	Baccalaureate Degree Nursing
<b>H. Assist in the coordination of human, information, and physical resources in providing care for assigned patients and their families.</b>	<b>H. Coordinate human, information, and physical resources in providing care for patients and their families.</b>	<b>H. Coordinate the management of human, information, and management of physical resources in providing care for patients, families, populations, and communities.</b>
Knowledge		
1. Organizational mission, vision, and values as a framework for care.	1. Organizational mission, vision, and values as a framework for care and management.	1. Organizational mission, vision, and values as a framework for care, management, and leadership.
2. Lines of authority and accountability within structured health care settings.	2. Types of organizational frameworks of various health care settings.	2. Organizational theories/principles of organizational behavior.
3. a. Workplace safety and civility consistent with current federal, state, and local regulations and guidelines. b. Prevention of workplace violence. c. Promoting a safe environment and a culture of safety.	3. a. Workplace safety and civility consistent with current federal, state, and local regulations and guidelines. b. Prevention of workplace violence. c. Promoting a safe environment and a culture of safety.	3. a. Workplace safety and civility consistent with current federal, state, and local regulations and guidelines. b. Prevention of workplace violence. c. Safe environmental management and promoting a culture of safety.
4. Vocational nursing role in implementing established cost containment measures.	4. a. Key issues related to budgetary constraints impacting the use of resources. b. Basic models of reimbursement.	4. a. Workplace unit budgeting and workforce resource management. b. Basic models of reimbursement.

5. Communication within organizational framework.	5. Basic principles of management and communication within an organization.	5. a. Management and communication within an organization. b. Leadership and management theory, practice, and skills.
6. Roles and responsibilities of members of the interdisciplinary health care team.	6. Roles and responsibilities of members of the interdisciplinary health care team.	6. Roles and responsibilities of members of the interdisciplinary health care team.
7. Individual response to organizational change.	7. Change process and strategies for initiating and evaluating effectiveness of change.	7. Change theory, processes, and strategies and change agent role, including methods for evaluating effectiveness of change.
<b>Clinical Judgments and Behaviors</b>		
1. Participate in implementing changes that lead to improvement in the work setting.	1. Identify and participate in activities to improve health care delivery within the work setting.	1. a. Identify and participate in activities to improve health care delivery within the work setting. b. Assess the management structure and nursing care delivery system within a health care organization and recommend changes for improvement.
2. a. Report unsafe patient care environment and equipment. b. Report threatening or violent behavior in the workplace.	2. a. Report the need for corrective action within the organization for safe patient care. b. Report threatening or violent behavior in the workplace.	2. a. Report the need for corrective action within the organization for safe patient care. b. Report threatening or violent behavior in the workplace. c. Design and implement strategies (e.g., coaching to increase the effectiveness of teamwork) to respond to the need for corrective action to promote a safe work environment.
3. Implement established cost containment measures in direct patient care.	3. Collaborate with interdisciplinary health care team to select human and physical resources that are optimal, legal, and cost effective to achieve patient-centered outcomes and meet organizational goals.	3. Collaborate with interdisciplinary health care team to use human and physical resources that are optimal, legal, and cost efficient to achieve patient-centered outcomes, meet organizational goals, and promote health in the community.

4. Assign patient care activities taking patient safety into consideration according to Texas Board of Nursing rules (217.11).	4. Use basic management and leadership skills, act as a team leader, supervise and delegate care, and contribute to shared goals.	4. a. Supervise and delegate care and contribute to shared goals. b. Use management, leadership, teambuilding, and administrative skills; organize, manage, and evaluate the functioning of groups of individuals and staff.
5. Use management skills to assign to licensed and unlicensed personnel.	5. a. Use management skills to delegate to licensed and unlicensed personnel. b. Demonstrate leadership role in achieving patient goals.	5. a. Use management skills to delegate to licensed and unlicensed personnel. b. Demonstrate a leadership role in achieving patient/ family/ population/ community goals and management goals.
6. Assist with maintenance of standards of care.	6. Implement established standards of care.	6. a. Implement established standards of care. b. Collaborate in the development of standards of care based on evidence-based practice congruent with organizational structure and goals.

### III. Patient Safety Advocate

A licensed nurse (LVN or RN) who promotes safety in the patient and family environment by: following scope and standards of nursing practice; practicing within the parameters of individual knowledge, skills, and abilities; identifying and reporting actual and potential unsafe practices; and implementing measures to prevent harm. The BSN-educated RN is also prepared to be a patient safety advocate for populations and communities.

Vocational Nursing	Diploma and Associate Degree Nursing	Baccalaureate Degree Nursing
<b>A. Demonstrate knowledge of the Texas Nursing Practice Act and the Texas Board of Nursing Rules that emphasize safety, as well as all federal, state, and local government and accreditation organization safety requirements and standards.</b>	<b>A. Demonstrate knowledge of the Texas Nursing Practice Act and the Texas Board of Nursing Rules that emphasize safety, as well as all federal, state, and local government and accreditation organization safety requirements and standards.</b>	<b>A. Demonstrate knowledge of the Texas Nursing Practice Act and the Texas Board of Nursing Rules that emphasize safety, as well as all federal, state, and local government and accreditation organization safety requirements and standards.</b>
Knowledge		
1. Texas Nursing Practice Act and Texas Board of Nursing rules.	1. Texas Nursing Practice Act and Texas Board of Nursing rules.	1. Texas Nursing Practice Act and Texas Board of Nursing rules.
2. National Standards of Nursing Practice.	2. National Standards of Nursing Practice.	2. National Standards of Nursing Practice.
3. Federal, state, and local government and accreditation organizations' safety requirements and standards.	3. Federal, state, and local government and accreditation organizations' safety requirements and standards.	3. Federal, state, and local government and accreditation organizations' safety requirements and standards.
4. Facility policies and procedures.	4. Facility policies and procedures.	4. Facility policies and procedures.
5. Facility licensing agency or authority standards.	5. Facility licensing agency or authority standards.	5. Facility licensing agency or authority standards.
6. Principles of quality improvement.	6. Principles of quality improvement and outcome measurement in health care organizations.	6. Principles and tools of quality improvement and outcome measurement in systems of care delivery.

*\* Advanced competencies italicized and identified by an asterisk are likely to be demonstrated by the graduate following licensure and after a period of transition into practice. Educational activities such as clinical experiences and simulation scenarios provide a foundation for future proficiencies in practice.*

Clinical Judgments and Behaviors		
1. Attain and maintain nursing licensure.	1. Attain and maintain nursing licensure.	1. Attain and maintain nursing licensure.
2. Practice according to Texas Nursing Practice Act and Texas Board of Nursing rules.	2. Practice according to Texas Nursing Practice Act and Texas Board of Nursing rules.	2. Practice according to Texas Nursing Practice Act and Texas Board of Nursing rules.
3. Seek assistance if practice requires behaviors or judgments outside of individual knowledge and expertise.	3. Seek assistance if practice requires behaviors or judgments outside of individual knowledge and expertise.	3. Seek assistance if practice requires behaviors or judgments outside of individual knowledge and expertise.
4. Use standards of nursing practice to provide and evaluate patient care.	4. Use standards of nursing practice to provide and evaluate patient care.	4. Use standards of nursing practice to provide and evaluate patient care.
5. Recognize and report unsafe practices and contribute to quality improvement processes.	5. a. Recognize and report unsafe practices. b. Manage personnel to maintain safe practice including participation in quality improvement processes for safe patient care.	5. a. Recognize and report unsafe practices. b. Manage personnel to maintain safe practice and manage quality improvement processes for safe patient care.
6. Participate in nursing peer review.	6. Participate in nursing peer review.	6. Participate in nursing peer review.

Vocational Nursing	Diploma and Associate Degree Nursing	Baccalaureate Degree Nursing
<b>B. Implement measures to promote quality and a safe environment for patients, self, and others.</b>	<b>B. Implement measures to promote quality and a safe environment for patients, self, and others.</b>	<b>B. Implement measures to promote quality and a safe environment for patients, self, and others.</b>
Knowledge		
1. a. Principles of patient safety including safe patient handling. b. Promoting a culture of safety implementing principles of just culture.	1. a. Principles of patient safety including safe patient handling. b. Management of the patient environment for safety.	1. a. Principles of patient safety including safe patient handling. b. Quality improvement, environmental management, and risk management with a focus on patient safety.

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	c. Promoting a culture of safety implementing principles of just culture.	c. Promoting a culture of safety implementing principles of just culture.
2. Methods for promoting safety in the patient care environment consistent with current standards and guidelines.	2. Methods for promoting safety in the patient care environment consistent with current standards and guidelines.	2. Methods for promoting safety in the patient care environment consistent with current standards and guidelines.
3. a. Role in safety and risk management for patients and others. b. De-escalation of potential or actual violent behavior. c. Civility vs incivility.	3. a. Role in safety and risk management for patients and others. b. De-escalation of potential or actual violent behavior. c. Civility vs incivility.	3. a. Leadership role in quality, safety, and patient risk management and management of the environment for patient and others' safety. b. De-escalation of potential or actual violent behavior. c. Civility vs incivility.
4. Principles of a culture of safety including safe disposal of medications and hazardous materials.	4. Principles of a culture of safety including safe disposal of medications and hazardous materials.	4. Principles of a culture of safety including safe disposals of medications and hazardous materials.
5. Texas Board of Nursing rules related to mandatory reporting, nursing peer review, and "Whistleblower" protection.	5. Texas Board of Nursing rules related to mandatory reporting, nursing peer review, and "Whistleblower" protection.	5. Texas Board of Nursing rules related to mandatory reporting, nursing peer review, and "Whistleblower" protection.
<b>Clinical Judgments and Behaviors</b>		
1. Promote a safe, effective, caring environment conducive to the optimal health, safety, and dignity of the patients, their families, the health care team, and others consistent with the principles of just culture.	1. Promote a safe, effective caring environment conducive to the optimal health, safety, and dignity of the patients, their families, the health care team, and others consistent with the principles of just culture.	1. Promote and manage a safe, effective caring environment conducive to the optimal health, safety, and dignity of the patient, family, health care team, population, and community consistent with the principles of just culture.
2. Accurately identify patients.	2. Accurately identify patients.	2. Accurately identify patients.
3. a. Safely perform preventive and therapeutic procedures and nursing measures including safe patient handling. b. Safely administer medications and treatments.	3. a. Safely perform preventive and therapeutic procedures and nursing measures including safe patient handling. b. Safely administer medications and treatments.	3. a. Safely perform preventive and therapeutic procedures and nursing measures including safe patient handling. b. Safely administer medications and treatments.

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	c. Reduce patient risk related to medication administration and treatment based on evidenced-based data.	c. Use epidemiologic process to manage and reduce risks related to medication and treatment administration and modify techniques in a variety of settings.
4. Clarify any order or treatment regimen believed to be inaccurate, non-efficacious, contraindicated, or otherwise harmful to the patient.	4. Clarify any order or treatment regimen believed to be inaccurate, non-efficacious, contraindicated, or otherwise harmful to the patient.	4. Clarify any order or treatment regimen believed to be inaccurate, non-efficacious, contraindicated, or otherwise harmful to the patient.
5. Document and report reactions and untoward effects to medications, treatments, and procedures and clearly and accurately communicate the same to other health care professionals.	5. Document and report reactions and untoward effects to medications, treatments, and procedures and clearly and accurately communicate the same to other health care professionals.	5. Document and report reactions and untoward effects to medications, treatments, and procedures and clearly and accurately communicate the same to other health care professionals.
6. Report environmental and systems incidents and issues that affect quality and safety, and promote a culture of safety.	6. Report environmental and systems incidents and issues that affect quality and safety, promote a culture of safety, and participate in organizational initiatives that enhance a culture of safety.	6. a. Report environmental and systems incidents and issues that affect quality and safety, and promote a culture of safety. b. Participate in organizational initiatives that enhance a culture of safety for patients, families, populations, and communities.
7. Use evidence-based information to contribute to development of interdisciplinary policies and procedures related to a safe environment including safe disposal of medications and hazardous materials.	7. Use evidence-based information to participate in development of interdisciplinary policies and procedures related to a safe environment including safe disposal of medications and hazardous materials.	7. Use evidence-based findings to develop interdisciplinary policies and procedures related to a safe environment including safe disposal of medications and hazardous materials.
8. Implement measures to prevent risk of patient harm resulting from errors and preventable occurrences.	8. Assess potential risk for patient harm related to accidents and implement measures to prevent risk of patient harm resulting from errors and preventable occurrences.	8. Use evidence-based findings to initiate accident prevention measures for patients and implement measures to prevent risk of patient harm resulting from errors and preventable occurrences.

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9. Inform patients regarding their plans of care and encourage participation to ensure consistency and accuracy in their care.	9. Inform patients regarding their plans of care and encourage participation to ensure consistency and accuracy in their care.	9. Inform patients regarding their plans of care and encourage participation to ensure consistency and accuracy in their care.
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Vocational Nursing	Diploma and Associate Degree Nursing	Baccalaureate Degree Nursing
<b>C. Assist in the formulation of goals and outcomes to reduce patient risks.</b>	<b>C. Formulate goals and outcomes using evidence-based data to reduce patient risks.</b>	<b>C. Formulate goals and outcomes using an evidence-based and theoretical analysis of available data to reduce patient and community risks.</b>
Knowledge		
1. a. Principles of disaster preparedness and fundamental principles of communicable disease prevention for patients and their families. b. Elements of health care setting and community readiness for disrupting events such as disasters and major interferences with the health and well-being of the many.	1. a. Principles of disaster preparedness and communicable disease prevention and control for patients and their families. b. Elements of health care setting and community readiness for disrupting events such as disasters and major interferences with the health and well-being of the many.	1. a. Principles and theoretical models of epidemiology and communicable disease prevention and control for patients, families, populations, and communities. b. Evidence-based risk reduction. c. Epidemic and pandemic prevention and control. d. Disaster preparedness, response, and recovery. e. Elements of health care setting and community readiness for disrupting events such as disasters and major interferences with the health and well-being of the many.
2. Current national and state standards and guidelines and local procedures for infection control.	2. Current national and state standards and guidelines and local procedures for infection control.	2. Current international, national, and state standards and guidelines and local procedures for infection control.

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Clinical Judgments and Behaviors		
1. Assist in the formulation of goals and outcomes to reduce patient risk of health care-associated infections.	1. Formulate goals and outcomes using evidence-based data to reduce the risk of health care-associated infections.	1. Formulate goals and outcomes using an evidence-based and theoretical analysis of available data to reduce the risk of health care-associated infections.
2. a. Implement measures to prevent exposure to infectious pathogens and communicable conditions. b. Anticipate risk for the patient.	2. a. Implement measures to prevent exposure to infectious pathogens and communicable conditions. b. Anticipate risk for the patient.	2. a. Implement measures to prevent exposure to infectious pathogens and communicable conditions. b. Anticipate risk for the patient, family, population, and community.
3. Implement established policies related to disease prevention and control.	3. Participate in development of policies to prevent exposure to infectious pathogens, communicable conditions, and occupational hazards	3. a. Assist in developing policies and procedures to prevent exposure to infectious pathogens, communicable conditions, and other occupational hazards. b. Participate in programs and systems to address safety of patients, families, populations, and communities in the event of emergency or disaster.

Vocational Nursing	Diploma and Associate Degree Nursing	Baccalaureate Degree Nursing
<b>D. Obtain instruction, supervision, or training as needed when implementing nursing procedures or practices.</b>	<b>D. Obtain instruction, supervision, or training as needed when implementing nursing procedures or practices.</b>	<b>D. Obtain instruction, supervision, or training as needed when implementing nursing procedures or practices.</b>
Knowledge		
1. a. Standards of Practice. b. Texas Board of Nursing rules (including Scope of Practice), Texas Board of	1. a. Standards of Practice. b. Texas Board of Nursing rules (including Scope of Practice), Texas	1. a. Standards of Practice. b. Texas Board of Nursing rules (including Scope of Practice), Texas

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Nursing Position Statements and Guidelines. c. Facility policies and procedures.	Board of Nursing Position Statements and Guidelines. c. Facility policies and procedures.	Board of Nursing Position Statements and Guidelines. c. Facility policies and procedures.
<b>Clinical Judgments and Behaviors</b>		
1. Evaluate individual scope of practice and competency related to assigned task.	1. Evaluate individual scope of practice and competency related to assigned task.	1. Evaluate individual scope of practice and competency related to assigned task.
2. Seek orientation/ training for competency when encountering unfamiliar patient care situations.	2. Seek orientation/ training for competency when encountering unfamiliar patient care situations.	2. Seek orientation/ training for competency when encountering unfamiliar patient care situations.
3. Seek orientation/ training for competency when encountering new equipment and technology.	3. Seek orientation/ training for competency when encountering new equipment and technology.	3. Seek orientation/ training for competency when encountering new equipment and technology.

<b>Vocational Nursing</b>	<b>Diploma and Associate Degree Nursing</b>	<b>Baccalaureate Degree Nursing</b>
<b>E. Comply with mandatory reporting requirements of the Texas Nursing Practice Act.</b>	<b>E. Comply with mandatory reporting requirements of the Texas Nursing Practice Act.</b>	<b>E. Comply with mandatory reporting requirements of the Texas Nursing Practice Act.</b>
<b>Knowledge</b>		
1. a. Standards of Practice. b. Texas Board of Nursing rules, Position Statements and Guidelines. c. Scope of Practice.	1. a. Standards of Practice. b. Texas Board of Nursing rules, Position Statements and Guidelines. c. Scope of Practice.	1. a. Standards of Practice. b. Texas Board of Nursing rules, Position Statements and Guidelines. c. Scope of Practice.
2. Facility policies and procedures.	2. Facility policies and procedures.	2. Facility policies and procedures.
<b>Clinical Judgments and Behaviors</b>		
1. Report unsafe practices of healthcare providers using appropriate channels of communication.	1. Report unsafe practices of healthcare providers using appropriate channels of communication.	1. Report unsafe practices of healthcare providers using appropriate channels of communication.

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2. Understand nursing peer review rules and implement when appropriate.	2. Understand nursing peer review rules and implement when appropriate.	2. Understand nursing peer review rules and implement when appropriate.
3. Report safety incidents and issues through the appropriate channels.	3. Report safety incidents and issues to the appropriate internal or external individual or committee.	3. Report safety incidents and issues to the appropriate internal or external individual or committee.
4. Implement established safety and risk management measures.	4. Participate in committees that promote safety and risk management.	4. a. Participate in committees that promote quality, safety, and risk management. b. Interpret and guide others toward safe and legal clinical practice. c. Identify systems issues that impact nursing practice.

Vocational Nursing	Diploma and Associate Degree Nursing	Baccalaureate Degree Nursing
<b><i>*F. Accept and make assignments that take into consideration patient safety and organizational policy.</i></b>	<b><i>*F. Accept and make assignments and delegate tasks that take into consideration patient safety and organizational policy.</i></b>	<b><i>*F. Accept and make assignments and delegate tasks that take into consideration patient safety and organizational policy.</i></b>
Knowledge		
1. a. Standards of Practice. b. Texas Board of Nursing Rules (including awareness of RN Delegation Rules), Position Statements, and Guidelines. c. Scope of Practice.	1. a. Standards of Practice. b. Texas Board of Nursing Rules (including RN Delegation Rules), Position Statements, and Guidelines. c. Scope of Practice.	1. a. Standards of Practice. b. Texas Board of Nursing Rules (including RN Delegation Rules), Position Statements, and Guidelines. c. Scope of Practice.
2. Facility policies and procedures.	2. Facility policies and procedures.	2. Facility policies and procedures.
Clinical Judgments and Behaviors		
1. Accept only those assignments and administrative responsibilities that fall	1. Accept only those assignments and administrative responsibilities that fall	1. Accept only those assignments and administrative responsibilities that fall

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within individual scope of practice based on experience and educational preparation.	within individual scope of practice based on experience and educational preparation.	within individual scope of practice based on experience and educational preparation.
2. <i>* When making assignments, ensure clear communication regarding other caregivers' levels of knowledge, skills, and abilities.</i>	2. <i>* When making assignments and delegating tasks, ensure clear communication regarding other caregivers' levels of knowledge, skills, and abilities.</i>	2. <i>* When making assignments and delegating tasks, ensure clear communication regarding other caregivers' levels of knowledge, skills, and abilities.</i>
3. <i>* When assigning nursing care, retain accountability and supervise personnel based on Texas Board of Nursing rules according to the setting to ensure patient safety.</i>	3. <i>*a When assigning and delegating nursing care, retain accountability and supervise personnel according to Texas Board of Nursing rules based on the setting to ensure patient safety.</i> <i>*b. Implement and participate in development of organizational policies and procedures regarding assignments and delegated tasks.</i>	<i>*a. When assigning and delegating nursing care, retain accountability and supervise personnel according to Texas Board of Nursing rules based on the setting to ensure patient safety.</i> <i>*b. Implement and develop organizational policies and procedures regarding assignments and delegated tasks.</i>

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#### IV. Member of the Health Care Team

A licensed nurse (LVN or RN) who provides patient-centered care by collaborating, coordinating, and/ or facilitating comprehensive care with an interdisciplinary/multidisciplinary health care team to determine and implement best practices for the patients and their families. The BSN-educated RN is also prepared to become a leader of the health care team as well as to provide care to populations and communities.

Vocational Nursing	Diploma and Associate Degree Nursing	Baccalaureate Degree Nursing
<b>A. Communicate and collaborate in a timely manner with patients, their families, and the interdisciplinary health care team to assist in the planning, delivery, and coordination of patient-centered care to assigned patients.</b>	<b>A. Coordinate, collaborate, and communicate in a timely manner with patients, their families, and the interdisciplinary health care team to plan, deliver, and evaluate patient-centered care.</b>	<b>A. Coordinate, collaborate, and communicate in a timely manner with patients, families, populations, communities, and the interdisciplinary health care team to plan, deliver, and evaluate care.</b>
Knowledge		
1. a. Structure and function of the health care delivery system. b. Roles and functions of interdisciplinary health care team members including group dynamics.	1. a. Structure, function, and interdisciplinary relationships within the health care delivery system. b. Models of care delivery and roles of interdisciplinary health care team members including group process.	1. a. Structure, function, and interdisciplinary relationships within the health care delivery system. b. Models of care delivery and using group process in decision-making and care. c. Social, economic, and political processes impacting the access to and delivery of health care in communities.
2. Principles of effective communication and collaboration with patients, their families, and the interdisciplinary health care team.	2. Patterns and processes of effective communication and collaboration including assertiveness, negotiation, conflict resolution, and delegation.	2. a. Theories and strategies of effective communication and collaboration including assertiveness, negotiation, conflict resolution, and delegation.
3. a. Strategies to deal with b. Principles of interpersonal conflict management, assertiveness, problem-	3. a. Change theory and managing change. b. Principles of conflict management, decision-making, assertiveness,	3. a. Role theory, change theory, management and leadership theory.

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solving, data collection, and basic time management.	motivation, delegation, supervision, and time management.	b. Principles of conflict management, decision-making, motivation, delegation, systems theory, assertiveness, budgeting, delegation, time management, supervision, and performance appraisal.
4. a. Patient advocacy and consumer rights and responsibilities. b. Legal and ethical processes related to health care.	4. a. Patient advocacy and consumer rights and responsibilities. b. Legal and ethical processes related to health care.	4. a. Patient advocacy and consumer rights and responsibilities. b. Legislative, legal, and ethical processes related to health care.
5. Contribution of evidence-based practice in development of health care and quality improvement.	5. a. Principles of evidence-based practice and application of evidence-based outcomes related to health care. b. Methods of evaluation for continuous quality improvement.	5. a. Evidence-based practice and research findings related to health care. b. Process of translating current evidence into practice. c. Methods of evaluation for continuous quality improvement. d. Processes of continuous quality improvement and application of quality improvement data.
<b>Clinical Judgments and Behaviors</b>		
1. Involve patients and their families with other interdisciplinary health care team members in decisions about patient care across the lifespan.	1. Involve patients and their families in collaboration with other interdisciplinary health care team members in planning health care delivery to improve the quality of care across the lifespan.	1. a. Involve patients, families, populations, and communities in collaboration with interdisciplinary health care team members in planning health care delivery to improve the quality of care across the lifespan. b. Use models of health care delivery to plan and improve health care for patients, families, populations, and communities.
2. Cooperate and communicate to assist in planning and delivering interdisciplinary health care.	2. a. Use strategies of cooperation, collaboration, and communication to	2. a. Use strategies of cooperation, collaboration, and communication to

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	plan, deliver, and evaluate interdisciplinary health care. b. Promote the effective coordination of services to patients and their families in patient-centered health care.	plan, deliver, and evaluate interdisciplinary health care. b. Promote and provide leadership in the effective coordination of services to patients, families, populations, and communities.
3. Participate in evidence-based practice in development of patient care policy with the interdisciplinary team to promote care of patients and their families.	3. Apply principles of evidence-based practice and methods of evaluation with the interdisciplinary team to provide quality care to patients and their families.	3. Synthesize evidence-based practices, research findings, and methods of evaluation with the interdisciplinary team by translating current evidence into practice for patients, families, populations, and communities.

Vocational Nursing	Diploma and Associate Degree Nursing	Baccalaureate Degree Nursing
<b>B. Participate as an advocate in activities that focus on improving the health care of patients and their families.</b>	<b>B. Serve as a health care advocate in monitoring and promoting quality and access to health care for patients and their families.</b>	<b>B. Serve as a health care advocate in monitoring and promoting quality and access to health care for patients, families, populations, and communities.</b>
Knowledge		
1. a. Rights and responsibilities of patients regarding health care, including self-determination and right of refusal. b. Current legal factors relating to safeguarding patient rights.	1. a. Rights and responsibilities of patients regarding health care, including self-determination and right of refusal. b. Current legal and societal factors that influence access to health care for patients and their families relating to safeguarding patient rights.	1. a. Rights and responsibilities of patients regarding health care, including self-determination and right of refusal. b. Current economic, legal, and political factors that influence access to health care delivery for patients, families, populations, and communities.
2. a. Individual responsibility for quality of nursing care.	2. a. Individual responsibility for quality of nursing care.	2. a. Individual responsibility for quality of nursing care.

*\* Advanced competencies italicized and identified by an asterisk are likely to be demonstrated by the graduate following licensure and after a period of transition into practice. Educational activities such as clinical experiences and simulation scenarios provide a foundation for future proficiencies in practice.*

b. Role of the nurse as patient advocate for patients and their families.	b. Role of the nurse as advocate for patients and their families.	b. Role of the nurse as advocate for patients, families, populations, and communities. c. Research and theories related to advocacy for access to health care for patients, families, populations, and communities.
3. a. Role of nurse in quality improvement process. b. Nursing peer review committee. c. Knowledge of reliable online sites for quality health care data.	3. a. Role of organizational committees, nursing peer review committees, nursing organizations, and community groups involved with improving the quality of health care for patients and families. b. Knowledge of reliable online sites and other resources that provide quality health care data.	3. a. Leadership role in organizational committees, nursing peer review committees, nursing organizations, and community groups involved with improving the quality of health care for patients, families, populations, and communities. b. Formal and informal sources of power and negotiation processes. c. Historical development of professional advocacy groups and the growth of consumer advocacy. d. Knowledge of reliable online sites and other resources that provide quality health care data.
4. Responsibility for reporting to licensing and public protective agencies, which may involve mandatory reporting.	4. Role and responsibility for public safety and welfare, which may involve mandatory reporting.	4. Health care policies and regulations related to public safety and welfare, mandatory reporting, and development of the future workforce.
<b>Clinical Judgments and Behaviors</b>		
1. Respect the privacy and dignity of the patient.	1. a. Support the patient's right of self-determination and choice even when these choices conflict with values of the individual professional.	1. a. Support the patient's right of self-determination and choice even when these choices conflict with values of the individual professional.

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	b. Apply legal and ethical principles to advocate for patient well-being and preference.	b. Apply legal and ethical principles to advocate for human and societal well-being and preferences.
2. Identify unmet health needs of patients.	2. Identify unmet needs of patients and their families from a holistic perspective.	2. a. Identify the unmet needs of patients, families, communities, and populations from a holistic perspective. b. Identify problems that patients and vulnerable populations have in accessing health care and disparities in health care.
3. Act as an advocate for patient's basic needs, including following established procedures for reporting and solving institutional care problems and chain of command.	3. a. Act as an advocate for patient's basic needs, including following established procedures for reporting and solving institutional care problems and chain of command. b. Advocate on behalf of patients and their families with other members of the interdisciplinary health care team. c. Teach patients and families about access to reliable and valid sources of information and resources including health information.	3. a. Act as an advocate for patient's basic needs, including following established procedures for reporting and solving institutional care problems and chain of command. b. Advocate on behalf of patients, families, populations, and communities with other members of the interdisciplinary health care team by implementing strategies for improving health care delivery systems. c. Teach patients, families, populations, and communities about access to reliable and valid sources of information and resources including health information.
4. Participate in quality improvement activities.	4. a. Participate in quality improvement activities. b. Participate in professional organizations and community groups to improve the quality of health care.	4. a. Participate in quality improvement activities. b. Participate in professional organizations and community groups to improve the quality of health care.
5. Refer patients and their families to community resources.	5. a. Refer patients and their families to community resources.	5. a. Refer patients, families, populations, and communities to resources.

*\* Advanced competencies italicized and identified by an asterisk are likely to be demonstrated by the graduate following licensure and after a period of transition into practice. Educational activities such as clinical experiences and simulation scenarios provide a foundation for future proficiencies in practice.*

	b. Serve as a member of health care and community teams to provide services to individuals and their families who experience unmet needs.	b. Serve as a member of health care and community teams to provide services to individuals and communities with unmet needs. c. Initiate and participate in community partnerships and coalitions to provide health care to targeted, diverse populations.
<b>Vocational Nursing</b>	<b>Diploma and Associate Degree Nursing</b>	<b>Baccalaureate Degree Nursing</b>
<b>C. Participate in the identification of patient needs for referral to resources that facilitate continuity of care, and ensure confidentiality.</b>	<b>C. Refer patients and their families to resources that facilitate continuity of care; health promotion, maintenance, and restoration; and ensure confidentiality.</b>	<b>C. Use multiple referral resources for patients, families, populations, and communities, considering cost; confidentiality; effectiveness and efficiency of care; continuity and continuum of care; and health promotion, maintenance, and restoration.</b>
<b>Knowledge</b>		
1. Work setting and major community resources.	1. Institutional and community resources including agencies/ services and health care providers.	1. Institutional, community, state, and federal resources including agencies/ services and health care providers.
2. Role of the case manager.	2. Principles of case management.	2. Theory and principles of case management, population characteristics, and epidemiology.
3. Roles of family and significant others in providing support to the patient.	3. Roles of family and significant others in providing support to the patient.	3. a. Roles of family and significant others in providing support to the patient. b. Family systems theory.
4. a. Functions of members of the interdisciplinary health care team. b. Confidentiality regulations.	4. a. Roles and functions of members of the interdisciplinary health care team. b. Confidentiality regulations.	4. a. Roles and functions of members of the interdisciplinary health care team. b. Confidentiality regulations.

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5. Need for patient referrals to promote continuity of care.	5. Referral processes for patients and their families to promote continuity of care.	5. Referral processes and methods for promoting continuity of care and improving access to health care for patients, families, populations, and communities.
6. Issues in current treatment modalities.	6. Issues and trends in health care delivery.	6. a. Issues and trends in health care delivery. b. Implications of demographic, epidemiological, and genetics data on the changing needs for health care resources and services.
7. Cost of health care services.	7. Major current issues affecting public/ government/ private health care services, programs, and costs.	7. Past, present, and future issues affecting public/ government/ private health care services, programs, policies and costs.
8. Organizational and local resources for health promotion, maintenance, and restoration.	8. Organizational, local, and state resources for risk reduction, and health promotion, maintenance, and restoration.	8. Organizational, local, state, federal, and global resources for risk reduction and health promotion, maintenance, and restoration.
<b>Clinical Judgments and Behaviors</b>		
1. a. Identify support systems of patients and their families. b. Identify major community resources that can assist in meeting needs.	1. a. Assess the adequacy of the support systems of patients and their families. b. Work with families to use resources to strengthen support systems. c. Identify providers and national and community resources to meet the needs of patients and their families.	1. a. Assess the adequacy of the support systems of patients, families, populations, and communities. b. Work with family and community resources to develop and strengthen support systems for patients, families, populations and communities. c. Identify providers and national and community resources to meet the needs of patients, families, populations and communities.
2. a. Communicate patient needs to the family and members of the health care team.	2. a. Facilitate communication among patients, their families, and members of the health care team to use institutional	2. a. Facilitate communication among patients, families, and interdisciplinary

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<ul style="list-style-type: none"> <li>b. Maintain confidentiality.</li> <li>c. Promote system-wide verbal, written, and electronic confidentiality.</li> </ul>	<ul style="list-style-type: none"> <li>or community resources to meet health care needs.</li> <li>b. Maintain confidentiality.</li> <li>c. Promote system-wide verbal, written, and electronic confidentiality.</li> </ul>	<ul style="list-style-type: none"> <li>team to use institutional or community resources to meet health care needs.</li> <li>b. Maintain confidentiality.</li> <li>c. Promote system-wide verbal, written, and electronic confidentiality.</li> </ul>
<ul style="list-style-type: none"> <li>3. a. Advocate with other members of the interdisciplinary health care team on behalf of patients and families to procure resources for care.</li> <li>b. Assist patient to communicate needs to their support systems and to other health care professionals.</li> </ul>	<ul style="list-style-type: none"> <li>3. a. Advocate with other members of the interdisciplinary health care team on behalf of patients and families to procure resources for care.</li> <li>b. Assist patients and their families to communicate needs to their support systems and to other health care professionals.</li> </ul>	<ul style="list-style-type: none"> <li>3. a. Advocate with members of the interdisciplinary health care team and community resources on behalf of patients, families, and vulnerable populations to procure resources for care.</li> <li>b. Assist patients, families, and vulnerable populations to communicate needs to their support systems and to other health care professionals.</li> <li>c. Advocate for public policies to support health care access for vulnerable populations.</li> </ul>
<ul style="list-style-type: none"> <li>4. Identify treatment modalities and cost of health care services for patients and their families.</li> </ul>	<ul style="list-style-type: none"> <li>4. Collaborate with interdisciplinary team concerning issues and trends in health care delivery affecting public/ government/ private health care services, programs, and cost to patients and families.</li> </ul>	<ul style="list-style-type: none"> <li>4. a. Collaborate with interdisciplinary team concerning issues and trends in health care delivery.</li> <li>b. Analyze demographic and epidemiology data on the changing needs for health care resources and services.</li> <li>c. Participate in meetings/ organizations addressing past, present, and future issues affecting public/ government/ private health care services, programs, and cost to patients, families, populations, and communities.</li> </ul>

*\* Advanced competencies italicized and identified by an asterisk are likely to be demonstrated by the graduate following licensure and after a period of transition into practice. Educational activities such as clinical experiences and simulation scenarios provide a foundation for future proficiencies in practice.*

Vocational Nursing	Diploma and Associate Degree Nursing	Baccalaureate Degree Nursing
<b>D. Communicate patient data using technology to support decision-making to improve patient care.</b>	<b>D. Communicate and manage information using technology to support decision-making to improve patient care.</b>	<b>D. Communicate and manage information using technology to support decision-making to improve patient care and delivery systems.</b>
<b>Knowledge</b>		
1. a. Current information and communication systems for managing patient care, data, and the medical record. b. Current technology-based information and communication systems.	1. a. Current information and communication systems for managing patient care, data, and the medical record. b. Current technology-based information and communication systems.	1. a. Current information and communication systems for managing patient care, data, the medical record, and population-based data. b. Current technology-based information and communication systems. c. Information management for health care systems.
2. Regulatory and ethical considerations protecting confidentiality when using technology.	2. Regulatory and ethical considerations protecting confidentiality when using technology.	2. Regulatory and ethical considerations protecting confidentiality when using technology.
3. Technology skills including word-processing, e-mailing, and accessing multiple online resources.	3. Technology skills including word-processing, e-mail, accessing databases, bibliographic retrieval, and accessing multiple online resources.	3. Technology skills including word-processing, e-mail, accessing databases, bibliographic retrieval, and accessing multiple online resources.
<b>Clinical Judgments and Behaviors</b>		
1. a. Identify, collect, process, and manage data in the delivery of patient care and in support of nursing practice and education. b. Use recognized, credible sources of information, including internet sites.	1. a. Identify, collect, process, and manage data in the delivery of patient care and in support of nursing practice and education. b. Evaluate credibility of sources of information, including internet sites.	1. a. Identify, collect, process, and manage data in the delivery of patient care and in support of nursing practice, administration, education, and research. b. Evaluate credibility of sources of information, including internet sites.

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c. Access, review, and use electronic data to support decision-making.	c. Access, review, and use electronic data to support decision-making. d. Participate in quality improvement studies.	c. Access, review, and use electronic data to support decision-making. d. Participate in designing, conducting, and evaluating quality improvement studies.
2. a. Apply knowledge of facility regulations when accessing client records. b. Protect confidentiality when using technology. c. Intervene to protect patient confidentiality when violations occur.	2. a. Apply knowledge of facility regulations when accessing client records. b. Protect confidentiality when using technology. c. Intervene to protect patient confidentiality when violations occur.	2. a. Apply knowledge of facility regulations when accessing client records. b. Protect confidentiality when using technology. c. Intervene to protect patient confidentiality when violations occur.
3. a. Use current technology and informatics to enhance communication, support decision-making, and promote improvement of patient care. b. Advocate for availability of current technology.	3. a. Use current technology and informatics to enhance communication, support decision-making, and promote improvement of patient care. b. Advocate for availability of current technology. c. Use informatics to promote health care delivery and reduce risk in patients and their families.	3. a. Use current technology and informatics to enhance communication, support decision-making, and promote improvement of patient care and delivery systems. b. Advocate for availability of current technology. c. Use informatics to promote health care delivery and reduce risk in patients, families, populations, and communities.
4. Document electronic information accurately, completely, and in a timely manner.	4. Document electronic information accurately, completely, and in a timely manner.	4. Document electronic information accurately, completely, and in a timely manner.

Vocational Nursing	Diploma and Associate Degree Nursing	Baccalaureate Degree Nursing
<i>*E. Assign nursing activities to LVNs or unlicensed personnel based upon an analysis of patient or work place need.</i>	<i>*E. Assign and/ or delegate nursing activities to other members of the health care team based upon an analysis of patient or work place need.</i>	<i>*E. Assign and/ or delegate nursing activities to other members of the health care team based upon an analysis of patient or organizational need.</i>

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Knowledge		
1. Awareness of Texas Board of Nursing RN Delegation Rules.	1. Texas Board of Nursing RN Delegation Rules.	1. Texas Board of Nursing RN Delegation Rules.
2. a. Principles of supervision and team work/ group dynamics. b. Competencies of assistive personnel and other licensed team members. c. Structure and function of the interdisciplinary team. d. Patient care requirements and focused assessments.	2. a. Principles of supervision and management, team work/ group dynamics, and nursing care delivery systems. b. Competencies of assistive personnel and other licensed team members. c. Structure and function of the interdisciplinary team. d. Patient care requirements and assessment techniques. e. Evaluation processes and methods to assess competencies.	2. a. Principles of supervision, team work/ group dynamics, nursing care delivery systems, and health policy. b. Competencies of assistive personnel and other licensed team members. c. Structure and function of the interdisciplinary team. d. Patient care requirements and assessment techniques. e. Evaluation processes and methods to assess competencies. f. Management and systems theory.
3. Time management.	3. Time management.	3. Time management.
4. a. Principles of communication. b. Regulatory laws and facility policies	4. a. Principles of communication. b. Regulatory laws and facility policies.	4. a. Principles of communication. b. Regulatory laws and facility policies. c. Motivational theories.
Clinical Judgments and Behaviors		
1. <i>* Compare needs of patient with knowledge, skills, and abilities of assistive and licensed personnel prior to making assignments.</i>	1. <i>*a. Compare needs of patient with knowledge, skills, and abilities of assistive and licensed personnel prior to making assignments or delegating tasks. *b. Assess competency level and special needs of nursing team members. *c. Facilitate decision-making related to delegation and assigned tasks.</i>	1. <i>*a. Compare needs of patient with knowledge, skills, and abilities of assistive and licensed personnel prior to making assignments or delegating tasks. *b. Assess competency level and special needs of nursing team members. *c. Facilitate decision-making and establishing facility policy related to delegated and assigned tasks.</i>

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2. <i>*a. Assign and monitor tasks of unlicensed and licensed personnel in compliance with Texas Board of Nursing rules.</i> <i>*b. Reassess adequacy of care provided.</i>	2. <i>*a. Assign, delegate, and monitor performance of unlicensed and licensed personnel in compliance with Texas Board of Nursing rules.</i> <i>*b. Assign patient care based on analysis of patient or organizational need</i> <i>*c. Reassess competency and learning needs of team members.</i>	2. <i>*a. Assign, delegate, and monitor performance of unlicensed and licensed personnel in compliance with Texas Board of Nursing rules.</i> <i>*b. Use leadership skills to promote team building and team work.</i> <i>*c. Assign patient care based on analysis of patient or organizational need.</i> <i>*d. Reassess competency and learning needs of team members.</i>
3. <i>*a. Document and/ or report responses to care or untoward effects.</i> <i>*b. Provide feedback on competency levels of team members.</i>	3. <i>*a. Evaluate responses to delegated and assigned tasks and make revisions based on assessment.</i> <i>*b. Plan activities to develop competency levels of team members</i>	3. <i>*a. Evaluate responses to delegated and assigned tasks and make revisions based on assessment.</i> <i>*b. Plan and manage activities to develop competency levels of team members.</i>

Vocational Nursing	Diploma and Associate Degree Nursing	Baccalaureate Degree Nursing
<i><b>*F. Supervise nursing care provided by others for whom the nurse is responsible.</b></i>	<i><b>*F. Supervise nursing care provided by others for whom the nurse is responsible by using evidence-based nursing practice.</b></i>	<i><b>*F. Supervise nursing care provided by others for whom the nurse is responsible by using best practices of management, leadership, and evaluation.</b></i>
Knowledge		
1. Principles of supervision and group dynamics.	1. Principles of management and organizational behavior.	1. Theories of management and leadership, and evaluation of organizational behavior.
2. Principles of communication in groups.	2. Principles of communication and group process.	2. Communication theory and group process.
3. Principles of teaching and learning.	3. a. Assessment of learning needs. b. Instructional methods.	3. a. Assessment of learning needs. b. Instructional methods.

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	c. Evaluation of teaching effectiveness.	c. Evaluation of teaching effectiveness.
4. a. Facility policies and procedures. b. Organizational structure including chain of command.	4. a. Facility policies and procedures. b. Organizational structure including chain of command.	4. a. Facility policies and procedures. b. Organizational structure including chain of command and various health care delivery systems.
<b>Clinical Judgments and Behaviors</b>		
1. <i>* Provide instruction where needed to members of the health care team to promote safe care.</i>	1. <i>* Provide staff education to members of the health care team to promote safe care.</i>	1. <i>*a. Use leadership skills to provide staff education to members of the health care team to promote safe care. *b. Evaluate the effectiveness of the process for staff education. *c. Develop new policies and procedures.</i>
2. <i>* Seek direction and clarification from supervisors when questions arise to promote safe care by health care team.</i>	2. <i>* Provide direction and clarification to health care team members or seek additional direction and clarification to promote safe care by health care team.</i>	2. <i>* Provide direction and clarification to health care team members or seek additional direction and clarification to promote safe care by health care team.</i>
3. <i>*a. Oversee and monitor patient care provided by unlicensed assistive personnel and vocational licensed personnel as assigned. *b. Base assignments on individual team member competencies.</i>	3. <i>*a. Oversee and follow through on patient care provided by health team members. *b. Base assignments and delegation on team member competencies.</i>	3. <i>*a. Oversee and follow through on patient care provided by health team members. *b. Base assignments and delegation on team member competencies.</i>
4. <i>*Ensure timely documentation by assigned health team members.</i>	4. <i>*a. Ensure timely documentation by assigned health team members. *b. Ensure documentation of patient care follow-up.</i>	4. <i>*a. Ensure timely documentation by assigned health team members. *b. Ensure documentation of patient care follow-up.</i>

<b>Vocational Nursing</b>	<b>Diploma and Associate Degree Nursing</b>	<b>Baccalaureate Degree Nursing</b>
<b>G. Assist health care teams during local or global health emergencies or pandemics</b>	<b>G. Participate with health care teams during local or global health emergencies or</b>	<b>G. Coordinate, collaborate, and lead health care teams during local or global health</b>

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to promote health and safety, and prevent disease.	pandemics to promote health and safety, and prevent disease.	emergencies or pandemics to promote community stability, health, and safety, and prevent disease.
<b>Knowledge</b>		
1. Impact of global health on local communities.	1. Impact of global health on local communities.	1. Impact of global health on local communities.
2. a. Global health organizations. b. Sources of global health information and data.	2. a. Global health organizations. b. Sources of global health information and data.	2. a. Global health organizations. b. Sources of global health information and data.
3. Nursing roles during global or local emergencies and pandemics.	3. Nursing roles during global or local emergencies and pandemics.	3. Nurse leader roles during global or local emergencies and pandemics.
4. Factors that impact global and local health: social justice and equity; holistic care; advocacy for global health; sustainability of nurses in global health (including environmental conditions and self-care); and interprofessional collaboration.	4. Factors that impact global and local health: social justice and equity; holistic care; advocacy for global health; sustainability of nurses in global health (including environmental conditions and self-care); and interprofessional collaboration.	4. Factors that impact global and local health: social justice and equity; holistic care; advocacy for global health; sustainability of nurses in global health (including environmental conditions and self-care); and interprofessional collaboration.
<b>Clinical Judgments and Behaviors</b>		
1. Recognize the impact and prepare to respond to an emergent global or local health issue in an assistant role.	1. Recognize the impact and prepare to respond to an emergent global or local health issue in a supportive role.	1. Recognize the impact and prepare to respond to an emergent global or local health issue in a leadership role.
2. Guide patients, staff, and others in understanding the extent of the emergency and their response.	2. Provide information to patients, staff, and others in understanding the extent of the emergency and their response.	2. Take a leadership role with patients, staff, and others in understanding the extent of the emergency and taking any necessary actions.
3. Participate with the health care team to promote safety and maintain health during an emergency or pandemic.	3. Fulfill an assigned role with the health care team to promote safety and health for the staff and public during an emergency or pandemic.	3. Assume a leadership role with the health care team to promote safety and health for the staff and public during an emergency or pandemic.
4. Include public health strategies in the care of individuals and communities that address	4. Include public health strategies in the care of individuals and communities that address	4. Include public health strategies in the care of individuals and communities that

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resolution of a global or local crisis and promotion of health among the population.	resolution of a global or local crisis and promotion of health among the population.	address resolution of a global or local crisis and promotion of health among the population.
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*\* Advanced competencies italicized and identified by an asterisk are likely to be demonstrated by the graduate following licensure and after a period of transition into practice. Educational activities such as clinical experiences and simulation scenarios provide a foundation for future proficiencies in practice.*

**Differentiated Essential Competencies  
Of Graduates of Texas Nursing Programs  
Evidenced by Knowledge, Clinical Judgments, and Behaviors  
2021**

**Implementing the DEC's in Education and Practice**

The competencies in the DEC's describe the outcomes for graduates of the Texas prelicensure nursing education programs and they ensure that graduates have received the preparation to practice at their educational level as safe, competent entry-level nurses. The DEC's provide a common standard of expectation in practice abilities of new nursing graduates as they seek employment in health care settings.

It is recommended that nursing education programs:

- Review the revised DEC's for alignment with the curriculum and make adjustments as needed;
- Consider how each core competency is addressed in the curriculum and whether curriculum changes are in order;
- Ensure that the DEC's are integrated into course and clinical objectives;
- Reinforce the meaning of the DEC's throughout the program reminding students that competencies will continue to be developed in the program and as they gain experience in nursing practice.

This exercise in curriculum review and revision will update the curriculum and familiarize the faculty with the entire program of study.

Implementing the DEC's in Practice Settings

The DEC's provide an expected level of knowledge, skills, abilities, and clinical judgment for new graduates and offer a starting point for the growth of competencies as they enter practice.

It is recommended that practice settings:

- Review the revised DEC's to ensure that the expectations for new graduates are consistent with the competencies taught in nursing programs;
- Consider the DEC's in a review of the orientation of new graduates or for internships offered to new nurses;
- Utilize the leveling of the core competencies when considering the scope of practice for each educational preparation.

The DEC's also will provide a guideline for establishing career ladders, making assignments to new graduates, reviewing job descriptions, establishing policies and procedures, and planning in-services and staff development programs.

## Glossary

### Explanation of Terms Used in the DEC's

1. **Civility** - behavior usually demonstrated through manners, courtesy, politeness, and a general awareness of the rights, wishes, concerns, and feelings of others. Civil behavior in nursing contributes to a positive environment and is related to the health and well-being of the nurses and patients. Aspects of civil behavior includes tolerating, listening, respecting, and treating others with dignity and honor. Incivility is recognized by actions such as berating and insulting others, showing disrespect, and blaming and accusing with the intent to hurt. Incivility in healthcare can lead to unsafe working conditions, stress, poor patient care, burnout, and increased medical costs (My American Nurse, 2012; Clark, 2017; Laschinger et al., 2009.)
2. **Clinical Reasoning** - the process by which nurses collect cues, process and analyze the information, come to an understanding of a patient problem or situation, weigh alternative actions, plan and implement interventions, evaluate outcomes, and reflect on and learn from the process (Griffits et al., 2017).
3. **Competency** - an expected and measurable level of nursing performance that integrates knowledge, skills, abilities, and judgment, based on established scientific knowledge and expectations for nursing practice (ANA, 2015, p. 86).
4. **Delegation** - a registered nurse authorizing an unlicensed person to provide nursing services while retaining accountability for how the unlicensed person performs the task. It does not include situations in which an unlicensed person is directly assisting a RN by carrying out nursing tasks in the presence of a RN [Texas Board of Nursing §224.4(3)]. [Another pertinent rule is §225.4(6)].
5. **Evidence-based Practice** - a conscientious, problem-solving approach to clinical practice that incorporates the best evidence from well-designed studies, patient values and preferences, and a clinician's expertise in making decisions that individualize a patient's care (Stevens, 2013).
6. **Global Health** - the health and well-being of the global population and as such, is linked to public health; content in global health that promote competencies include travel and migration, determinants of health, environmental factors, cultural competency, communication, health care delivery, ethics, human rights, collaboration, and management skills (Clark et al., 2016).
7. **Just Culture** - a culture in which the reporting of errors and near misses in practice is supported without fear of retribution, creating an atmosphere of trust and encouraging and rewarding nurses and health care workers (Barnsteiner & Disch, 2019).
8. **Nursing Peer Review** - the evaluation of nursing services, the qualifications of a nurse, the quality of patient care rendered by a nurse, the merits of a complaint concerning a nurse or nursing care, and a determination or recommendation regarding a complaint (NPA Sec. 303.001).

9. **Predictable Health Care Needs** - health issues that follow a common course of patterned symptoms and expected prescribed care with likely outcomes.
10. **Social Determinants of Health** - conditions in the places where people live, learn, work, and play that affect a wide range of health risks and outcomes. Retrieved from: <https://www.cdc.gov/socialdeterminants/index.htm>)
11. **Service Excellence** - caring in action that is fundamental to the achievement of optimal health outcomes for the patient, nurse, and system. Service excellence is a combination of compassionate caring and competent practice. Nurses may experience challenges in providing service excellence such as the changing demographics and increasing diversity, the growing use of technology, globalization of the world's economy and society, consumer education, the increasing complexity of patient care, the rising cost of health care, the impact of health policy and regulation, interdisciplinary practice, the nursing shortage, the need for lifelong learning, and advances in nursing science and research (Aliyu et al., 2014).
12. **Vulnerable Patients/Populations** - those at greater risk for poor health status and healthcare access, experience significant disparities in life expectancy, access to and use of healthcare services, morbidity, and mortality. Their health needs are complex, intersecting with social and economic conditions they experience. This population is also likely to have 1 or more physical and/or mental health conditions. (The American Journal of Managed Care, 2006). Retrieved from: <https://www.ajmc.com/view/nov06-2390ps348-s352>

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## **Members of the DEC's Work Group and Board Staff**

### **Board-Appointed Committee:**

<b>Name</b>	<b>Representing</b>
Joan Becker, MA, BSN, RN	Texas Organization of Associate Degree Nursing (TOADN)
April Ernst, MSN, RN, CNE	Texas Association of Vocational Nurse Educators (TAVNE)
Heather M. McKnight, DNP, MSN, RN, NE-BC	Texas Organization of Baccalaureate and Graduate Nursing Education (TOBGNE)
Paula J. Webb, DNP, RN, NEA-BC, FAONL Valerie Kiper, DNP, MSN, RN, NEA-BC	Texas Organization of Nurse Leaders (TONL)
Renae Schumann, PhD, RN, CNE	Texas Nurses Association (TNA)
Tara Dailey, DNP, MSN, RN	Texas League for Nursing (TLN)
Adam Ramirez, LVN	Licensed Vocational Nurses Association of Texas (LVNAT)
Karen Schwind, RN	Texas School Nurses Organization (TSNO)
Karen Kendrick, MSN, RN	Texas Hospital Association (THA)
Robin Hayes, RN, CDP	Texas Health Care Association (THCA)

**Texas Board of Nursing Liaison:** Tamara Rhodes, MSN, RN

### **Texas Board of Nursing Staff:**

Virginia Ayars, EdD, MS, RN, CNE, Nursing Consultant for Education

Jackie Ballesteros, Administrative Assistant

Kristin Benton, DNP, RN, Director of Nursing

Alexandria Chamberlain, MSN, RN, Nursing Consultant for Practice

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Timothy Sherman, MSN, APRN, FNP-C, Nursing Consultant for Practice

Beverly Skloss, MSN, RN, Nursing Consultant for Education

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