The Integration of Licensed Vocational Nurses into a Baccalaureate Nursing Program: Regulatory, Program and Facility Considerations

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Disclosures

• Employer: CSU San Bernardino, Department of Nursing
• Conflict of Interest: None
• Sponsorship or Commercial Support: None
Objectives

• List historical influences on the role and scope of practice of the LPN/LVNs.
• Recognize educational and experiential barriers faced by LPN/LVNs in nursing.
• Identify recommended strategies for educational advancement of the LPN/LVNs.
What is an LVN?

- LVN - Licensed Vocational Nurse
- The term is interchangeable with LPN – Licensed Practical Nurse
- Provide basic nursing care under the direction and supervision of RNs and physicians. (U.S. Bureau of Labor Statistics, 2015).
- An entry-level health care provider who is responsible for rendering basic nursing care. A vocational nurse practices under the direction of a physician or registered nurse. The licensee is not an independent practitioner. (CA BVNPT, n.d.)
Background

• There is a significant variability in duties and scope of practice from state to state (Corazzini, 2013).
• The state boards of nursing and accrediting bodies shape the curricula and requirements for completion and/or entry into practice.
• LPN/LVN s practice primarily in non-acute care settings.
• RN versus an LPN/LVN
Problem Statement

• There is a gap in scope of practice between regulatory statements and actual practice activities

• National or statewide educational pathways for LPN/LVN if any, lack visibility.

• There is no national or statewide schema to deploy LPN/LVNs at a time when nursing shortage continues to be a national problem.
Purpose

• The aim of this presentation is to raise awareness about this marginalized group of healthcare providers and their potential for maximum educational development and utilization.
Review of Literature

• ACADEMIC VIEW
  • High cost of training LPN/LVNs to become a RN
    • At risk group
      • Program Outcomes
    • Remediation
    • Transition
Review of Literature

• ACADEMIC VIEW
  • Accreditation standards for the LPN/LVNs
    • Variably defined educational pathway
      • Regional Occupational Program (ROP)
      • Degree Program
      • Diploma Program
      • Certificate Program
    • Wide variations in curricula
    • Varied educator background
Review of Literature

• ACADEMIC VIEW
  • LVN to RN (Non-degree path)
  • LVN to ADN
  • LVN to BSN
Review of Literature

• REGULATORY MANDATES
  • Call for development and training of LPN/LVN
  • Regulations to accelerate completion
  • Push for recruitment of LPN/LVN in higher education
Review of Literature

Facility Considerations

- Widen scope of practice beyond minimal standards
- Piecemeal approach to competencies
- Substitution of labor
- Deliberate blurring of roles

Marginal Substitution of Labor
LPN/LVN Employment Setting by Percentage

Hospital: 29%
Nursing Care Facility: 31%
Physician Office: 8%
Home Health: 6%
Outpatient: 6%
Employment Services: 4%
Other Health Service: 7%
Employment Services: 4%
Other: 9%

HRSA, 2013
(2009 Estimate)
Conclusion

- Schools of nursing are autonomous in recruitment, retention, and education of this student population
- Boards of nursing do not clearly define educational pathways.
- Industry has not played a major role in the advancement of LPN/LVNs
Recommendations

• Conscious decision to incorporate LPN/LVN
  • Standardize educational pathways from LPN/LVN to higher education
  • Commit and dedicate resources for advising and remedial support
• Refine regulatory policies and establish accrediting standards
  • Retire obsolete regulatory policy
  • Mandate LPN/LVN programs to seek accreditation
• Facility should play a role in educational advancement of LPN/LVN
Open Discussion
Reference


Thank You