

ESSENTIAL FUNCTIONS OF A NURSING STUDENT

North Carolina's Nursing Practice Act (August 2009), defines nursing as:

"a dynamic discipline which includes the assessing, caring, counseling, teaching, referring and implementing of prescribed treatment in the maintenance of health, prevention and management of illness, injury, disability or the achievement of a dignified death. It is ministering to, assisting, and sustained, vigilant, and continuous care of those acutely or chronically ill; supervising patients during convalescence and rehabilitation; the supportive and restorative care given to maintain the optimum health level of individuals, groups, and communities; the supervision, teaching, and evaluation of those who perform or are preparing to perform these functions; and the administration of nursing programs and nursing services."

Considering the above definition nursing faculty believe that the practice of nursing involves cognitive, sensory, affective, and psychomotor performance requirements. Therefore, the essential eligible requirements for participants in a nursing program shall be further defined according to the following physical and emotional standards.

PHYSICAL AND EMOTIONAL STANDARDS*

Nursing students should possess and be able to demonstrate the following:

1. **Critical Thinking:** critical thinking ability sufficient for clinical judgment. For example: student must be able to identify cause-effect relationships in clinical situations; collect and analyze data to aid in problem solving; develop or participate in the development of nursing care plans.
2. **Interpersonal Skills:** interpersonal abilities sufficient to interact with individuals, families, groups, etc. from a variety of social, emotional, cultural and intellectual backgrounds. For example: student shall establish rapport with client(s) and health care team members.
3. **Communication Skills:** communication abilities sufficient for interaction with others in verbal and written form. For example: explain treatment procedures, initiate health teaching, document and interpret nursing actions and client responses.
4. **Mobility:** physical abilities sufficient to move from room to room and maneuver in small spaces, stand and walk for extensive periods of time. For example: frequent trips from work station to clients' rooms, moves around in clients' rooms, work spaces and treatment areas.
5. **Motor Skills:** gross and fine motor abilities sufficient to provide safe and effective nursing care. For example: calibrate and use equipment, document care, position and move client(s), administer cardiopulmonary procedures, and perform skill procedures.
6. **Hearing:** auditory ability, sufficient to monitor and assess health needs. For example: hear monitor alarms, emergency signals, auscultatory sounds, cries for help.
7. **Visual:** visual ability sufficient for observation and assessment necessary in nursing care. For example: observe client responses, specimen color.

8. Tactile: tactile ability sufficient for physical assessment. For example: perform palpation, functions of physical examination and/or those related to therapeutic intervention, insertions of catheters, and taking pulses.
9. Weight-Bearing: ability to lift and manipulate/move 45-50 pounds daily. For example: position client(s), move equipment.
10. Cognitive Abilities: ability to be oriented to time, place, and person; organize responsibilities, and make decisions. For example: student shall assess client complaints, provide prioritized client care, and implement appropriate plans.

EXAMPLES ARE NOT ALL INCLUSIVE

If a nursing student or applicant believes that he or she cannot meet one or more of the standards without accommodations or modifications, the college must determine, on an individual basis, whether or not the necessary accommodations or modifications can be made reasonably.

*This document has been prepared with the assistance of the Southern Council on Collegiate Education for Nursing and reviewed by:

1. North Carolina Conference of Associate Degree Nursing Directors (January 1994)
2. North Carolina Associate Degree Nursing Council (1994)
3. Department of Community Colleges, Elizabeth Jones, RN, Associate Director of Health Programs (December 1993)
4. Department of Community College attorney Clay Tee Hines (December 1993)
5. North Carolina Board of Nursing (1994, 2016)
6. LCC Nursing Faculty (2008, 2017)

REFERENCES

Association of Community College Trustees, American Association of Community College, 1992.

Institute of Government, ADA, January 1993.

North Carolina Nurse Practice Act, July 2016.

National League for Nursing, "Vision of Nursing Education", June 1993.

Southern Regional Education Board, Red Alert Statement, March 1993.