Putting Patients First Modernization of APRN Statutes in Kansas

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Fifth Annual Advanced Practice Registered Nurse CE Conference Innovated Thinkers, Creating New Pathways September 28, 2018 Wichita, Kansas

Disclaimer



For all of us:

- We have no conflict of interest.
- We are not being paid by a specialinterest group.
- We are here as professional APRNs with leadership and policy expertise

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Objectives



- Review APRN Consensus Model & IOM Report
- Explore challenges and opportunities created by introducing a Bill
- Discuss the proposed APRN Bill and how it meets the Consensus Model language
- Examine current strategies for policy change

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APRN Consensus Model



APRN definition:

- "licensed independent practitioners who are expected to practice within standards established by the licensing body."
- National Certification
- * Title: APRN- separate from RN license; 4 Recognized Roles:
 - · Certified Nurse Midwife (CNM),
 - Dinical Nurse Specialist (CNS),
 - Certified Registered Nurse Anesthetist (CRNA) and
 - Certified Nurse Practitioner (CNP)
- Six population foci: family, adult-gerontology, pediatrics, neonatal, women's health, psych/mental health

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IOM Report



- All health professionals practice to the full extent of their education and training.
- * Remove APRN scope of practice (SOP) barriers
- Provide APRN direct reimbursement from 3rd party
- Ensure that APRNs are eligible for clinical privileges, admitting privileges, and membership on medical staff
- Expand access to quality care by utilizing APRNs
- Not physician extenders or substitutes; APRNs integrate skills including medicine, social work, nutrition, physical therapy grounded in nursing education

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American Hospital Assoc. White Paper



- Current state licensing acts restrict some practitioner's full scope of practice & create a barrier to redesigning primary care
- The APRN will increasingly be used as the admitting provider and hospitalist, especially acute care patients.
- Move away from the physician as the only team leader
- APRNs will be full partners in collaboration with and complementary to primary care and specialty physicians.
- Full partners in the design, implementation, improvement, and evaluation of health care delivery.

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Have we made progress?



- Since 2010, 9 more states have implemented FPA making a total of 22 states and Washington, DC
- Since 2010, new models have emerged: APRNs with FPA finding new more efficient, high-quality methods of practice.
- In 2012, a federal ruling permitted medical staff to include other practitioners
- In Dec 2016, The Department of Veteran's Affairs passed a federal rule for VAs to implement FPA for 3 of the APRN roles (CNM, CNS, CNP).

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What is Full Practice Authority?



<u>Full Practice</u>: Practice and licensure laws provides for all APRNs to evaluate patients, diagnose, order and interpret diagnostic tests, initiate and manage treatments—including prescribing medications and controlled substances—under the exclusive licensure authority of the state board of nursing.

Model recommended by National Academy of Medicine (formerly IOM)
National Council of State Boards of Nursing

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Kansas "Report Card"



- . Brief overview of current Kansas Statutes
- Written protocol, responsible physician
 - collaborative agreement language in Rules/Regs
- No requirement for malpractice insurance
- No requirement for national certification
- No definition of APRN practice
- APRN Taskforce -2008, unstructured, started from KSNA
- Transition to Kansas Advanced Practice Nurses (KAPN) in 2016.
- Now Professionally "at the Table"

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Proposed Bill Highlights



- Definition: conducting an advanced assessment; ordering and interpreting diagnostic procedures; establishing primary and differential diagnoses; prescribing, ordering, administering and furnishing therapeutic measures as set forth by Board of Nursing; delegating and assigning therapeutic measures to assistive personnel; consulting with other disciplines and providing referrals to health care providers.
- Require national certification
- Require malpractice insurance
- Removes "written protocol authorized by a responsible physician" language. (AKA the "collaborative agreement" in Rules and Regs)

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Get involved



- ❖ Goal: Introduce bill January 2019
- * Your voice and involvement needed:
 - Help with connecting with patients, business, organizations
 - * Educating legislators-personal visits, emails, phone calls
 - * Monitor the opposition
 - Talk with your legislator, your patients, your family, your doctor, About our bill and why

Modernization of APRN Statutes Puts Patients First

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APRN voices are needed to:



- ❖ Partner with KAPN leaders and meet with agency administrators,
- * Attend Board of Nursing meeting Dec 12 to show support
- Attend upcoming conferences to talk about full practice authority, help staff the KAPN booth at these conferences:
 - ❖ WSU conference Sept 27-28 (Wichita)
 - * KANA Oct 12-14 (Wichita)
 - ❖ Wheat State APRN Conference Oct 12-13 (Hays)
 - Advanced Practice Professionals (APP) Conference (Kansas City)
- Participate in other nursing conferences
- Let KAPN know what you are doing to support our patients

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APRN voices are needed to:



- Your story is needed: access problems; benefits of full practice authority
- Contact/visit legislators; at the Capitol, (at home)
- * Speak up on social media share our story
- Help strengthen KAPN, recruit new members, grow our organization, meet with APRN students
- Share your APRN expertise in videos; patient stories, testimonies of support
- Offer your ideas in support of our patients and the profession, in working toward FPA

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Elevator Speech



- * Brief introduction, eye contact, shake hands
- Describe your role
- * State your case, use details, avoid jargon
 - . I wanted to visit with you about the APRN legislation bill #_
 - ❖ I'll give you 3 main reasons that this bill would benefit Kansans:
 - ❖ Increase health care providers: Kansans have more choices & access
 ❖ Rural hospitals and communities need and rely on APRNs for emergency
 - department/clinic/hospital/nursing home, help control overhead costs
 - Majority of mental health management provided by APRNs; passing our legislation helps ensure continuity of mental health care, not dependent on whether psychiatrist signs agreement
 - What are your thoughts about this? Have you had experiences with nurse practitioners before?
 - . I would be honored to visit with you more about this issue, there are other aspects of the bill to discuss. Can I call your office and see you again?
 • Give your business card, encourage legislator to call you anytime

 - ❖ Send a thank you

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Discussion/Questions

KAPN Kansas Advanced Practice Nurses Assoc.

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