

## 2011 NURSING LEGISLATIVE AGENDA WITH OUTCOMES

Prior to each legislative session, the Texas Nurses Association hosts a series of meetings of nursing organizations in Texas to identify significant nursing and health care related issues that will comprise nursing's legislative agenda for that session. Nineteen nursing organizations signed on to the Nursing Legislative Agenda for 2011, and the following outcomes were achieved.

| 2011 NURSING LEGISLATIVE AGENDA  | OUTCOMES  |
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| <p><b>1. Patient Advocacy Protections for Nurses</b></p> <p>Nursing supports strengthening patient advocacy protections for nurses. Patients are best served when nurses can advocate for their patients without fear of retaliation. Texas recently received national attention when two nurses in Winkler County were criminally indicted and terminated by their employer as a result of reporting a physician to the Texas Medical Board. This case highlighted that Texas law can be strengthened to better protect nurses against retaliation for engaging in protected patient advocacy activities. Nurses need protections not only against civil liability, but also against criminal liability. Licensing agencies need authority to access significant financial penalties that deter retaliation. Publicly employed nurses need the right to sue if retaliated against whenever they raise patient care concerns. Nurses, who advise their nurse colleagues about the protections available when advocating for patients, also need protections from retaliation.</p>  | <p><b>A. PASSED. SB 192</b> providing for enhanced patient advocacy protections for nurses passed. Enhancements include: 1) immunity from criminal liability; 2) authorizing regulatory agencies to impose fine up to \$25,000 for illegal retaliation; and 3) extending protections to nurses who advise other nurses about protections for engaging in patient advocacy activities.</p> <p><b>B. DID NOT PASS. HB884/SB1542</b> Legislation giving publicly-employed nurses limited right to sue governmental entity for illegal retaliation. Although supported by public hospitals, it was opposed by associations representing counties.</p> |
| <p><b>2. Prescriptive Authority for Advanced Practice Registered Nurses</b></p> <p>Nursing supports allowing Advanced Practice Registered Nurses (APRNs) to practice to the full extent of their education and national certification. Texas faces an unprecedented health care delivery crisis. More than 180 counties have been designated as primary health professional shortage areas and Texas families are finding it more and more difficult to obtain primary care services. The status quo is simply unacceptable and Texas residents deserve better. APRNs are a vital part of the solution to this ever growing problem. APRNs already diagnose and prescribe. Accordingly, the Texas Legislature should implement the recommendation of many consumer and public policy organizations to immediately improve access to primary care services by eliminating physician delegation requirements and granting APRNs full prescriptive authority. These organizations include the Texas Public Policy Foundation, AARP Texas, National Alliance on Mental Illness San Antonio, CATO Institute, Center for American Progress, Heritage Foundation, Institute of Medicine, Josiah Macy, Jr. Foundation, and the Legislative Budget Board. Nursing is committed to insuring Texas residents have access to safe, most-effective health care. Granting APRNs full prescriptive authority is an important step in achieving this goal.</p> | <p><b>DID NOT PASS.</b> Bills filed addressing prescriptive authority: <b>HB708/HB1266/SB1260, HB915/SB1339, SB1770/HB3164.</b></p> <p>Many non-nursing groups supported the legislation including AARP-Texas, Texas Organization of Rural and Community Hospitals, and the Texas Association of Business. Medical associations actively opposed this legislation.</p>  |
| <p><b>3. Nursing Education Funding</b></p> <p>Nursing supports the Nursing Workforce Shortage Coalition's goal that the 82<sup>nd</sup> Legislature not significantly reduce the investment previous Legislatures have made in nursing education -- \$44.7 mil. in special funding in 2009. While Texas faces a large budget shortfall, major cuts in funding for nursing education would mean Texas will lose most -- if not all -- the gains made in producing more registered nursing graduates. Investing in nursing education is an investment in Texas jobs.</p> <p>Texas still needs nurses and the demand will only increase. The current economic downturn does have nurses remaining in the workforce longer and has attracted some experienced nurses out of retirement. However, as the economy recovers, these nurses will retire, leave the workforce or return to part-time employment. Aging of the Texas population will continue to increase the demand for nurses.</p> <p>The Coalition consists of approximately 100 organizations including Texas Hospital Association, Texas Nurses Association, Texas Association of Business, local chambers of commerce, local hospitals and hospital councils, Texas Association of Community Colleges and other nursing education organizations.</p>  | <p><b>A. PASSED.</b> Appropriations Bill included \$30 million special funding for the Nursing Shortage Reduction Program. (Compared to \$44.6 million had been appropriated in 2009.)</p> <p><b>B. PASSED.</b> SB 794 extending the dedication of certain tobacco lawsuit settlement funds to nursing education. Only the income from funds is appropriated. Estimate income for 2012-13 biennium is \$5-6 million.</p>  |
| <p><b>4. Violence Against Nurses in the Workplace</b></p> <p>Nursing supports enhanced punishment for individuals who assault nurses. Unfortunately, nurses, not only in the emergency room but in all settings, are subject to physical abuse by patients and their families. Nurses should not be subject to assault as part of their job and deserve to be protected to the greatest possible extent from such assault. At</p>  | <p><b>DID NOT PASS. HB 703 and SB 295</b> (not companion). SB 295 reflected an agreement among nursing, hospitals and a majority of the mental health advocacy groups. However, a couple of advocacy groups remained opposed. SB 295 died on House Calendar on the last day to pass Senate</p>  |

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| <p>a minimum, nurses should be given the same protections currently provided police and emergency services personnel. When they are assaulted, the penalty is enhanced from a misdemeanor to a felony.</p>   | <p>Bills. The Texas Hospital Association actively supported this legislation.</p>   |
| <p><b>5. Health Care in Schools</b></p> <p>The health and nutritional services provided to children while at school play a critical role not only in the health of Texas children, but also in their ability to learn. Professional Registered School nurses are essential to schools providing effective health services. Nursing will support initiatives to improve health and nutritional services in Texas schools including initiatives to ensure every child has access to a school nurse and that parents are informed of whether there is a school nurse at their child's school.</p>   | <p><b>A. PASSED.</b> Several bills (SB 27; HB 742) addressing care of students with food allergies which were actively supported by nursing.</p> <p><b>B. DID NOT PASS.</b> Legislation requiring parents to be notified if no RN on child's campus.</p>  |
| <p><b>6. Nursing Regulatory Environment</b></p> <p>Nursing supports a regulatory framework that permits the Board of Nursing to effectively and efficiently regulate the practice of nursing while providing a fair process for the individual nurse. The goal of regulation should be patient safety. Nursing believes patient safety is best promoted by giving the BON both the tools to effectively discipline nurses unable to practice safely and the flexibility to address mistakes made by competent, conscientious nurses in a non-punitive manner through remediation.</p>  | <p><b>PASSED.</b> SB 193 making several amendments to NPA. Main substantive changes were: 1) enhanced protection for personal information provided as part of licensure process, and 2) establishing a confidential depository to which facilities may report error classification data to facilitate identification of recurring errors so action can be taken to reduce. The bill also makes technical and cleanup changes to the NPA.</p>  |
| <p><b>7. Self-Directed, Semi-Independent Status for BON</b></p> <p>Nursing supports self-directed, semi-independent status for the Texas Board of Nursing. Self-directed, semi-independent status would permit the Board to regulate more efficiently. Having this status removes an agency from the appropriations process and gives the agency more flexibility in allocating resources as needed. However, the agency continues to be audited by the State Auditor and otherwise subject to legislative oversight on non-appropriation matters. The Board of Public Accountancy, Board of Professional Engineers, Board of Architectural Examiners, Texas Finance Commission, Texas Department of Banking, Department of Savings and Mortgage Lending, and Office of Consumer Credit Commissioner and Credit Union Department currently have this status on a pilot or permanent basis.</p> | <p><b>DID NOT PASS.</b> Similar legislation for Pharmacy Board also did not pass but legislation giving self-directed status to Real Estate Commission did pass.</p>  |
| <p><b>8. Board of Nursing Appropriations</b></p> <p>Nursing supports adequate funding for the Board of Nursing (BON). Nursing believes it is in the best interest of both the public and nurses for the BON to be funded at a level that permits it to perform its responsibilities efficiently and effectively. Nursing believes it is appropriate that the profession bear the costs associated with adequately funding the BON even if that requires a license fee increase.</p>  | <p>The BON did get most of its 5% reduction restored and also some additional funding relating to enforcement. Will result in a fee increase in RN license renewal fees for about \$8 for RNs and \$4 for LVNs.</p>   |
| <p><b>9. Licensing and Certification of Allied Health Providers</b></p> <p>Nursing will evaluate legislative initiatives to license, certify or expand the role of allied health providers based on:</p> <ul style="list-style-type: none"> <li>• Whether the practice is consistent with safe patient care.</li> <li>• The relationship between the allied health provider and the nurse.</li> <li>• The allied health technologist's scope of practice must not permit the practice of nursing.</li> <li>• There being an explicit exemption for nurses.</li> <li>• The proposed regulation complies with accepted regulatory standards.</li> </ul>  | <p><b>A. PASSED.</b> 1) Legislation (SB1360) permitting unlicensed persons expanded authority to administer medication in certain Medicaid waiver programs for persons with developmental and intellectual disabilities. Was agreed to legislation by nursing, provider groups, DADS and BON.</p> <p>2) Legislation permitting greater use of medication aides in correctional health care systems passed as part of SB 1 in the First Special Session.</p> <p><b>B. DID NOT PASS.</b> Legislation licensing anesthesiologist assistants.</p> |
| <p><b>10. Health Policy</b></p> <p>Nursing will join with consumer advocacy and provider groups to support health policy designed to improve the health of Texans and their access to quality care. Nursing supports the 2011 legislative priorities of the Texas Public Health Coalition, the Texas CHIP Coalition and the Texas Pain Advocacy and Information Network's Position Statement on Quality Pain Management</p>  | <p><b>A. PASSED:</b> 1) Legislation relating to obesity and nutrition.</p> <p>2) Legislation requiring hospitals have policies on mandatory vaccinations of persons providing direct care was passed in the First Special Session.</p> <p><b>B. DID NOT PASS.</b> 1) Legislation relating to immunization registry. 2) Anti-smoking legislation.</p>  |