

2007 NURSING LEGISLATIVE AGENDA

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 should be on nursing's legislative agenda for that session. The following is Nursing's Legislative Agenda for 2007.

1. Nursing Practice Environment

As it does almost every legislative session, nursing will seek legislation to improve the practice environment. In 2005, Texas became the first state in the nation to pass a safe patient handling legislation. This session, nursing will have two practice environment initiatives.

a. Implement Recommendations of Institute of Medicine For Promoting Patient Safety by Focusing More On Improving Systems and Less on Blaming Individuals.

The Institute of Medicine has reported that patient safety is significantly enhanced when errors are seen not as primarily caused by bad individuals but rather as the result of system inadequacies that either made the error likely to occur or failed to provide the safeguards needed to prevent the error from occurring. Nursing is proposing a legislative initiative to shift the regulation of nursing away from an individual-blame oriented model and towards eliminate-the-system-inadequacies and remediate-the-individual model. The initiative will modify the mandatory reporting provisions of the Nursing Practice Act to better ensure nurses are reported to the BNE only when their continued practice poses a risk of harm to patients. It also will encourage greater sharing of information among the various committees that review patient care incidents so that system inadequacies can be identified and corrected.

b. Patient Advocacy and Whistleblower Protections for Nurses

Nursing is proposing a legislative initiative to clarify the patient advocacy and whistleblower protections for nurses. No nurse should be put at risk of retaliation for being a patient advocate. Texas law (Nursing Practice Act, Nursing Peer Review Law and Health and Safety Code) currently provides nurses significant protections when raising patient care concerns. These protections have been enacted on an incremental, piecemeal basis over 20 years. Consequently, it is difficult for nurses to know what rights and protections they have. This initiative will amend the Nursing Practice Act to state clearly not only the rights and protections nurses have when advocating for their patients but also the remedies if retaliated against. It will also increase the monetary recovery for nurses retaliated against.

2. Nursing Shortage

Texas continues to face a critical shortage of registered nurses. The demand for nursing services is expected to continue to increase as the Texas population ages and more of Texas's aging nurse population is lost to retirement. Lack of adequate nurses means less quality care for patients. Despite the shortage, Texas nursing schools are turning away thousands of qualified applicants. Nursing will again partner with the Texas Hospital Association and the Greater Houston Partnership in addressing the shortage. The initiative will seek funding needed to:

- increase the ability of nursing schools to increase enrollments and graduations to meet Texas's projected need of 9700 graduates in academic year 2009-10 (a 46% increase over the 2005-06 academic year).
- increase the average nursing faculty salary by \$10,000 a year to make them competitive with what master's and doctoral-prepared nurses can make in clinical practice.

3. Board of Nurse Examiners Sunset Review

The Board of Nurse Examiners is up for Sunset in 2007. While nursing supports the majority of the Sunset Advisory Commission's recommendations, it has concerns about several of them:

- Sunset Commission recommends a significant change in the BNE's role in regulation of nursing education. Nursing recognizes that nursing education is regulated differently from other health professions. However, it believes that significantly reducing the BNE's role, as Sunset Commission recommends, may have the unintended consequence of actually reducing the quality of nursing education. Furthermore, it may delay innovations in nursing education designed to increase RN graduates.
- Sunset Commission recommends a fundamental change in how Texas addresses nurses experiencing problems with chemical dependency and mental illness. Currently, such nurses may be reported to the Texas Peer Assistance Program for Nurses (TPAPN) and if they successfully complete the two-year program, then they are not reported to the BNE. The Sunset Commission recommends that whenever a third party referral of a nurse involves practice errors that the nurse be reported to the BNE. Nursing believes that this change will have a chilling effect on reporting of nurses to TPAPN and actually result in TPAPN's having less benefit to patient safety, the public and nurses.

As the Sunset bill moves through the legislative process, nursing will attempt to secure amendments to the bill that address its concerns about reducing the BNE's role in the regulation of nursing education and changing how nurses with suspected practice errors are reported to TPAPN. Since the Sunset bill is a potential vehicle for addressing almost any nursing-related issue, nursing also will closely monitor the bill for any attempts to add amendments detrimental to nursing or patient care.

4. Board of Nurse Examiners Appropriations

Nursing will support adequate funding for the Board of Nurse Examiners (BNE). Nursing believes it is in the best interest of both the public and nurses for the BNE 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 BNE even if that requires a license fee increase.

5. Advanced Practice Nursing

CRNAs are essential anesthesia providers in Texas. This is particularly so in rural areas where they are the sole anesthesia provider in many counties. CRNAs are not required to practice under physician supervision. Nursing opposes any attempt to change Texas law to impose physician supervision on CRNA practice, because it is irrelevant to patient safety and creates an artificial barrier to qualified anesthesia services.

6. Mandatory Continuing Education and Nursing School Curriculum

There are 180,000 RNs and 77,000 LVNs licensed in Texas. Almost no subject-specific continuing education or course is likely to be appropriate to all 257,000 nurses. The Sunset Commission is recommending that the BNE be given discretion to implement any mandated CNE to avoid imposing the mandate on nurses who will not benefit. Nursing will oppose mandated subject-specific continuing education unless it is clearly demonstrated that it is appropriate for all nurses or unless the BNE is given the discretion to implement in a manner as Sunset Commission recommends. Nursing has similar concerns about mandating that nursing school curriculum include subject-specific courses.

7. Licensing and Certification of Allied Health Providers

Nursing will oppose legislative initiatives to license, certify or expand the role of allied health providers such as surgical technologists unless the legislation meets the following criteria:

- Practice being requested to be recognized must be consistent with safe patient care.
- If the practice of the allied health practitioner falls within nursing practice, licensing/regulation must be through the BNE. If appropriate, the

practitioner must function under RN delegation or be supervised by a nurse.

- The definition of the allied health practitioner's scope of practice must be precise, not overly broad, and not permit the practice of nursing.
- There must be an explicit exemption for nurses. A general exemption for "licensed practitioners" will not be sufficient.
- The proposed regulation must be consistent with and provide the public protections of accepted regulatory standards such as establishing an effective mechanism for disciplining a practitioner.

If these conditions are met, then nursing will evaluate the public policy need met by licensing/certifying or expanding the role of the particular group of allied health providers in determining its position on particular legislation.

8. School Health Services

The health and nutritional services provided children while at school play a critical role not only in the health of Texas children but also in their ability to learn. 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.

9. Children's Health Insurance Program (CHIP) and Medicaid

Nursing supports full funding of the CHIP program to maximize the amount of federal dollars that Texas can receive. It also supports increased funding for Medicaid.

ENDORSING ORGANIZATIONS

- Texas Nurses Association**
- Texas Emergency Nurses Association**
- Texas Organization for Associate Degree Nursing**
- Assn of Women's Health, Obstetrics & Neonatal Nurses**
- Soc of Otorhinolaryngology & Head & Neck Nurses - Hou**
- Texas Association of Vocational Nurse Educators**
- Tx Assn of Deans & Directors of Professional Nursing Prog**
- Tx Org of Baccalaureate & Graduate Nurse Educators**
- Texas RN First Assistants Network**
- Assn of periOperative Registered Nurses - Hou**
- Houston Organization of Nurse Executives**
- Licensed Vocational Nurses Association of Texas**
- Texas Nursing Students' Association**
- Nursing Education Policy Coalition**
- Texas Association of Nurse Anesthetists**
- Coalition for Nurses in Advanced Practice**
- Texas School Nurses Organization**
- Texas Council of periOperative Registered Nurses**
- Texas Organization of Nurse Executives**