



## **NLAC Update: DECEMBER 2019**

Don't forget - NLAC is meeting "virtually" on December 16 to review the 2019 legislative session and discuss the issues and interests each member is examining for the 87<sup>th</sup> Texas Legislature in 2021. **NLAC Representatives speaking on behalf of their organizations should notify Cathy White ([cwhite@texasnurses.org](mailto:cwhite@texasnurses.org)) by Dec. 6,** and include any materials they'd like distributed to attendees.

## **Inviting Texas Legislators to Walk with Nurses**

by Catherine White

This fall, TNA member Jason Spees APRN, L.Ac., FNP-C, invited [Texas State Representative Vikki Goodwin \(D-Austin\)](#) to shadow him at his facility, located in the representative's district, as an opportunity for her to experience, firsthand, some of the issues and concerns affecting nurses in her district. The invitation, inspired by the [unfortunate comments of a Washington State senator this summer](#), was intended to introduce Representative Goodwin to the nursing perspective so that as state health care issues come up in the future, the Representative will be better informed, and will also have contacts to reach out to when health care issues arise during the Texas Legislature.



"I think the idea of having people shadow nurses is great," says Rep. Goodwin. "I think it's a great way for us to better understand what nurses go through."

"We only know what our experience teaches us so, I think having people from different backgrounds is extremely helpful. Sometimes people don't understand all of the intricacies of a career unless they've had a chance to see it firsthand or hear from people who do that job."

Goodwin, a realtor, ran for state representative of House District 47 for the first time, in 2018.

"It was the first time I personally ran for office," she said. "I had helped other candidates in the past and I felt the representation we were getting in our district wasn't what I would hope for. I felt passionate about public education and making sure that we support it, and that was my main motivation to run."

Rep. Goodwin's first legislative session was a blur of getting settled at the Capitol, then jumping right in to the hectic schedule of a regular legislative session that normally only lasts 5 months. While she wasn't on any of the committees dealing with health care issues, Goodwin said that she turned to some of the nurses that were part of her 2018 campaign when nursing legislation came up, as well as relying on fellow [State Representative Donna Howard \(D-Austin\)](#), a longtime ally of nurses at the Texas Capitol.

"It seems like many of the healthcare bills didn't get far this past session, and not being on the Health and Human Services Committee, I waited until bills got to the House floor before I got involved," she said. "We spend so much time in committees debating bills that once they get to the House floor there's not as much debate. Of course, Donna Howard is from Central Texas and Travis County and she's someone that I look up to. And whenever I had questions about bills dealing with health care, I would ask her."

Rep. Goodwin said that she was surprised by the amount of documentation that nurses must do in addition to interacting with the patient and, while she knew how physical nursing is, her experience shadowing Spees reinforced that "a lot of it is very physical work ... Having to help a patient stand up, etc. when the

patient's weight exceeds the nurses and, you know, sometimes the patients can't verbalize what they need, and so, that's difficult."

[Rep. Goodwin is running for reelection in 2020](#) and, if elected, she feels as though her experience shadowing a nurse has been beneficial.

"As I go into the next session I'm sure there will be more bills on health care and now I feel like I have a better communication channel with my nurses so, yeah, I'll definitely be reaching out again."

Read more about the inaugural Walk with Me tour [here](#). TNA's initiative is set to launch in 2020.

*How does your organization encourage advocacy among its members? Do you have any resources to share? What common fears do your members have about contacting their state lawmakers to discuss issues related to nursing and health care in Texas?*

Please send any suggestions or advocacy resources to Cathy White at [cwhite@texasnurses.org](mailto:cwhite@texasnurses.org). We want to make sure Texas nurses are informed, educated and prepared to assist state lawmakers with decisions that affect the profession and Texas patients.



**\*\* Follow us on Twitter at @TXNursesLege, the twitter handle for Nursewatch.**

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## Capitol Brief Update

by Kevin C. Stewart, II

### House and Senate Interim Charges

With the Bonnen controversy out of the way (for the most part), the House and Senate have gotten back to work. Each interim, the Lt. Governor and the Speaker provide a list of charges to the committees in their chamber. These charges are subjects that leadership wants the committees to monitor, research,

and make recommendations on. They often provide insight into the major topics of the following session.

In the Senate, Lt. Governor Patrick asked his committees to tackle some big-ticket issues. The Senate will be monitoring the property tax reform laws passed last session, as well as studying how local governments use tax dollars on lobbying. On the healthcare front, vaping will be front and center next session – Patrick asked both the Criminal Justice Committee and the Health and Human Services Committee to look into the issue. Health care costs will also be discussed in two committees. Patrick also wants committees to look into two politically charged issues: conscience protections for professionals and fetal heartbeat legislation.

The House Interim Charges looked very different. Speaker Bonnen’s charges seem relatively timid, which is understandable now that he has announced retirement. Many of the charges were to simply monitor legislation from last session, such as SB 2 (property tax reform), HB 3 (school finance reform), and SB 21 (tobacco 21). In the Public Health Committee, there were also charges to review behavioral health capacity in the state and how Texas is preparing for state and federal budgetary changes.

#### **Texas Medical Board**

Nursing organizations across the state, in partnership with legislators, hospitals, and other provider groups, are still in the process of fighting the Texas Medical Board rules primarily affecting APRNs. From what we can tell, the Board has received significant negative feedback. They are meeting the first week in December, and we are not expecting any of the rules to be adopted at that time. Stay tuned for updates on that front.



Bookmark [Texas Tribune](#) to get the latest political news!

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**Texas Register: Rules and Regulations**

**November 29, 2019**

**Texas Board of Nursing**

**216.8, Relicensure Process (PROPOSED)** This proposal corrects references in this rule to account for changes adopted earlier to the continuing competency rule.

**217.3, Temporary Authorization to Practice/Temporary Permit (PROPOSED)** This proposal would allow the Board to reissue temporary authorizations to practice if a nurse is unable to complete the required courses within a six-month period.

**217.3, Temporary License and Endorsement (PROPOSED)** This proposal implements SB 1200, creating an expedited licensure process for an out-of-state military spouse with an active license in another state with substantially similar licensing requirements and are not subject to any disciplinary order. The military spouse must submit proof of residency in Texas, notify the Board of intent to practice, and meet the Board's fitness to practice criteria. The military spouse will not be charged a fee for licensure.

#### **Texas Higher Education Coordinating Board**

**40.1 - 40.8, Epinephrine Auto-Injector Policies in Institutions of Higher Education (PROPOSED)** As a result of SB 1367 (85<sup>th</sup>) and HB 4260 (86<sup>th</sup>), institutions of higher education may adopt and implement epinephrine auto-injector policies. These rules would implement those bills, allowing physicians and persons with delegated prescriptive authority to prescribe epinephrine auto-injectors in the name of an entity.

**November 15, 2019**

#### **Texas Higher Education Coordinating Board**

**19 TAC 22.751 - 22.757, Nursing Shortage Reduction Program Rider 328 Study Work Group (EMERGENCY)** The THECB has proposed emergency rulemaking to establish the NSRP Workgroup. Membership will include representative of the Board of Nursing, the Texas Nurses Association, the Center for Nursing Workforce Studies, higher education institutions, and THECB staff. The Workgroup is tasked with studying the effectiveness of the NSRP and discussing other funding strategies.

#### **Texas Board of Nursing**

**22 TAC 216.3, Continuing Competency (ADOPTED)** The Board has adopted rules relating to the opioid prescription bills and the human trafficking bill that passed in the 86<sup>th</sup> Session. As proposed, the rule would have removed three hours of continuing education related to controlled substances and replaced them with the six new hours that are required. In response to comments by the APRN Alliance, the Board decided to count the hours towards existing requirements.

They chose not to reapply the three controlled substance hours, so the hour requirement for APRNs with Prescriptive Authority Agreements has dropped from 28 to 25 per renewal cycle.

**November 8, 2019**

## **Texas Medical Board**

**Rule 193.5, Physician Liability for Delegated Acts and Enforcement (PROPOSED)** The additions to this rule would not apply to PAs and APRNs who have a standing medical order, standing delegation order, prescriptive authority agreement, or other order or protocol with a delegating physician. The amendment goes on to list requirements placed on physicians who delegate to other personnel.

**Rule 193.13, Delegation to Certified Registered Nurse Anesthetists (PROPOSED)** The rule would add “acting under adequate physician supervision” in two parts of the delegation rule. It would also add that the delegating physician is responsible for ensuring that the delegation is reasonable, that it may be safely delegated, and it is not in violation of any other statute. Finally, it would add language saying that the delegating physician is ultimately responsible for the CRNA’s delegated acts.

**Rule 193.17, Nonsurgical Medical Cosmetic Procedures (PROPOSED)** This proposal adds a definition of “administer,” to mean the direct application of a drug or other substance to the body of a patient by injection, inhalation, ingestion or any other non-surgical means. It also adds a definition of qualified personnel, which would include anyone besides an APRN or PA who acts under a physician’s delegation. Supervision is required at all times, and the proposal defines supervision as the “on-site presence of an APRN or PA during performance of a procedure, or immediate availability of the delegating physician for consultation.” The only change to the existing requirement is the word “immediately,” although it is unclear what this would mean in practice. If this proposal is adopted, supervising physicians will be required to submit notification of intent to delegate and supervise procedures to the Texas Medical Board. The notification must include the business owner’s information, a list of delegates at the facility, and the supervising physician’s information. The Board shall provide the form required for this notification. If the notification needs to be updated due to changes at the facility, the notice will need to be updated within thirty days. If the supervising physician will be unavailable, arrangements must be made for an alternate physician. The supervising physician will be subject to disciplinary action for a violation of any applicable law or rule.

**Rule 193.21, Delegation Related to Radiological Services (PROPOSED)** This rule does not apply to PAs and APRNs who have been specifically delegated authority to perform and interpret radiological studies. After the exemption for APRNs and

PAs, the proposed language goes on to list the requirements for physicians who delegate radiological procedures to other providers.

**November 1, 2019**

### **Texas Medical Disclosure Panel**

**25 TAC 601.9, Informed Consent of Patients. (PROPOSED)** The TMDP has proposed a modification to the consent form for anesthesia and/or perioperative pain management. The current language merely states that anesthesia will be administered by an anesthesia provider or the operating practitioner. The proposed language adds that the anesthesia “will be delegated/supervised and/or personally performed by Dr. \_\_\_\_\_.”

### **Texas Medical Board**

**22 TAC 172.21, Other Health Care Providers. (ADOPTED)** The TMB has adopted language clarifying that APRNs, and the physicians who delegate to them, are exempt from the written Prescriptive Authority Agreement (PAA) requirements during a declared disaster. The Board received comments from the Texas Board of Nursing, recommending that they delete “onsite” from the language to clarify that the PAA is not required onsite or otherwise. The Board agreed to make that change.

### **Don't forget ...**

- You can find the [Texas Register](#) on the Texas [Secretary of State](#) website, where **ALL** the rule proposals and adoptions from the Texas BON and other state regulatory agencies are updated weekly on Fridays and published. *Nursewatch* will print some of the more pertinent updates to nursing rules and regulations but you can delve deeper into current and past issues of the Texas Register at your leisure on the S.O.S. website.

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## **Upcoming Events**

- **Texas Tribune Tenth Talks: Health Care**, noon-1 p.m. CST Dec. 9 in Austin. Free. Register [here](#). The discussion will be recorded.
- **TNA Nurse Talks Empowerment Series - The Impact of Artificial Intelligence on Nursing**, 6 p.m. CST Jan. 9. Information available [here](#). This web series is designed to bring more nurses into conversations and

inform TNA's decision-making processes and policy priorities. CE available for this session.

*If your NLAC organization/association is having an open event or you know of a relevant activity/event, please send the information to TNA Government Affairs Coordinator [Cathy White](#) for inclusion in upcoming issues of **Nursewatch**.*



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