Good Morning Dr Warner and members of the Technical Review Committee.

My name is Linda Stones (L_I_N_D_A S_T_O_N_E_S). I am a Registered Nurse of over 30 days and I am here today to on behalf of the Nebraska Board of Nursing. I have been a member of the Board of Nursing for the past 2 years and serve as the Chair of the Practice Committee. The Board of Nursing exists to protect the public. It is our mission. This application’s intent is just that, to ensure that all Nebraskans have access to high quality care. We feel strongly that as you focus on the evidence that was presented in the application that you will find that this application meets the criteria for support from the 407 Technical Review Committee.

In 2010, the Institute of Medicine published a report on the Future of Nursing. The Institute of Medicine, now called the National Academy of Medicine, is an American nonprofit, non-governmental organization that provides national and international advice on issues related to health, medicine, health policy and biomedical science. It aims to provide unbiased, evidence based and authoritative information. It is composed ona group of distinguished scientists and other experts. The Committee included individuals from Medicine, Publish Health, Nursing, Professors of Research, Pediatrics, Health Policy, and these individuals came from a variety of distinguished programs – University of North Carolina, chapel Hill, Columbia University, University of Miami, The Dartmouth Institute and the Cleveland Clinic to name a few.

The report states “The U.S. health care system is characterized by a high degree of fragmentation across many sectors, which raises substantial barriers to providing accessible, quality care at an affordable price. In part, the fragmentation in the system comes from disconnects between public and private services, between providers and patients, between what patients need and how providers are trained, between the health needs of the nation and the services that are offered, and between those with insurance and those without (Stevens, 1999). The report further goes on to state the purpose, “this study was undertaken to explore ..., how nursing can contribute to building a health care system that will meet the demand for safe, quality, patient-centered, accessible, and affordable care.”

This application is in response to two of The Institute of Medicine 4 key messages. These are

1. Nursing should practice to the full extent of their education and training.
2. Nurses should be full partners, with physicians and other health professionals

The Institute of Medicine stated in response to full practice authority:

“To ensure that all Americans have access to needed health care services and that nurses’ unique contributions to the health care team are maximized, federal and state actions are required to update and standardize scope-of-practice regulations to take advantage of the full capacity and education of APRNs. States and insurance companies must follow through with specific regulatory, policy, and financial changes that give patients the freedom to choose from a range of providers, including APRNs, to best meet their health needs. Removing regulatory, policy, and financial barriers to promote patient choice and patient-centered care should be foundational in the building of a reformed health care system.”

The Institute of Medicine in their statement on nurses being full partners with physicians, stated:
“Whether on the front lines, in education, or in administrative positions and health policy roles, nurses have the well-grounded knowledge base, experience, and perspective needed to serve as full partners in health care redesign. Nurses’ unique perspectives are derived from their experiences in providing direct, hands-on patient care; communicating with patients and their families about health status, medications, and care plans; and ensuring the linkage between a prescribed course of treatment and the desired outcome.”

Not only did the Institute of Medicine in 2010 call for changes consistent with this application but consumer groups such as AARP have published papers with similar calls to action. A paper published by AARP, titled, “Advancing Health in Rural America: Maximizing Nursing’s Impact”s This consumer group urges states to amend unduly restrictive state APRN regulations. Another large consumer group, the March of Dimes, has also made a statement that states need to remove barriers for APRN practice.

As we have shared with the committee, 96% of APRNs in Nebraska has full practice authority. They are being allowed to practice to the fullest extent of their training, yet two groups (only 4% of APRNs in Nebraska) have restricted practice. However these two groups of APRNs, the Certified Nurse Midwives and the Certified Clinical Nurse Specialists, care for patients that have a great need – women, pregnant women and their babies and patients with chronic medical conditions. Despite having the same fundamental training, their practice is restricted. Certified Nurse Midwives are required to have an Integrated Practice agreement with a physician and have limited prescriptive authority AND Clinical Nurse Specialists have no prescriptive authority. The application also calls for the remove of Transition to Practice agreements for Nurse Practitioners as this was a legislative concession for full practice authority that has no basis in evidence.

In 1991, the Nebraska Board of Health published a report predicting shortages of providers in rural Nebraska and they called for action. While little has been done since the 1991 report, there is evidence that the predictions of the Board of Health were accurate. There are shortages of providers in rural areas and a significant decline in OB/GYN providers in rural areas. This evidence has been presented to the Technical review committee as part of the application.

The 407 review process was put in place to allow professionals like you, to analyze the evidence and to make decisions based on the evidence and the facts, not on emotions of fear or what ifs, but on fact. As the applicant group and as proponents will share with you, we have evidence and fact to support this application.

There is no evidence that granting full practice authority in our state or other states has had detrimental impacts on the public. There is no evidence that suggests that giving APRNs, specifically, Certified Nurse Midwives or Certified Clinical Nurse Specialists will make the opioid epidemic worse. There is a preponderance of evidence that supports that granting APRNs (All APRNs) full practice authority.

This application addresses the call of the consumer groups and is supported by evidence that all APRNs should have full practice authority. We ask for your support of this application. It is the right thing to do for Nebraska.