

**REPORT OF RECOMMENDATIONS AND FINDINGS  
ON THE LPN PROPOSAL FOR CHANGE IN SCOPE OF PRACTICE**

By the Nebraska  
State Board of Health

To the Director of the Division of Public Health of the Department of Health  
and Human Services, and the Members of the Health and Human  
Services Committee of the Legislature

March 20, 2017

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## **Part One: Preliminary Information**

### **Introduction**

The Credentialing Review Program is a review process advisory to the Legislature which is designed to assess the need for state regulation of health professionals. The credentialing review statute requires that review bodies assess the need for credentialing proposals by examining whether such proposals are in the public interest.

The law directs those health occupations and professions seeking credentialing or a change in scope of practice to submit an application for review to the Department of Health and Human Services, Division of Public Health. The Director of this Division will then appoint an appropriate technical review committee to review the application and make recommendations regarding whether or not the application in question should be approved. These recommendations are made in accordance with statutory criteria contained in Section 71-6221 of the Nebraska Revised Statutes. These criteria focus the attention of committee members on the public health, safety, and welfare.

The recommendations of technical review committees take the form of written reports that are submitted to the State Board of Health and the Director of the Division along with any other materials requested by these review bodies. These two review bodies formulate their own independent written reports on the same credentialing proposals. All reports that are generated by the program are submitted to the Legislature to assist state senators in their review of proposed legislation pertinent to the credentialing of health care professions.

## **The Members of the Nebraska State Board of Health**

Kevin Borchert, PharmD, RP

Jim Trebbien (public member)

Shane Fleming, BSN, MSN, RN

Michael Hansen, (Hospital Administrator)

Russell Hopp, DO

Diane Jackson, APRN

Kevin Low, DDS

Dale Michels, MD

Anthony Moravec, DVM

Debra Parsow (public member)

Teresa Konda, PE

Paul Salansky, OD (Vice Chair)

Wayne Stuberg, PhD, PT (Chair)

Travis Teeter, MD

Joshua Vest, DPM

Douglas Vander Broek, DC

Jeromy Warner, PsyD, LP

### **Meetings Held**

The Meeting of the Credentialing Review Committee of the Board, January 23, 2017

The Meeting of the Full Board of Health, January 23, 2017

## **Part Two: Summary of Recommendations on the LPN Proposal**

### **Summary of the Technical Committee Recommendations**

The LPN Technical Review Committee recommended approval of the LPN proposal.

### **Summary of the Recommendations of the Nebraska State Board of Health**

The members of the Nebraska State Board of Health recommended approval of the LPN proposal.

## **Part Three: Summary of the LPN Proposal**

The profession currently credentialed in Nebraska is the LPN, with a specialty certification credential for LPN-C. The Nebraska Board of Nursing is requesting a repeal of the LPN-C statute, with a new provision in the Nurse Practice Act (Neb. Stat. 38-2201-2236) for the LPN to be able to provide select IV therapy activities that are outlined in the LPN-C practice as part of the legal scope of practice of all LPNs.

**The following amendment was submitted to the Committee members during the review: The following is the “Plan for State-wide Education of Existing LPNs in IV Therapy”:**

### **Objective**

Five year transition for all LPNs to have the same basic IV therapy knowledge. After five years, all LPNs would have met the requirements. Ongoing competency requirements are currently spelled out in Title 172, Chapter 101 for licensed nurses.

### **Plan**

Two prong approach, knowledge for all, and skills for those who will utilize them in the clinical setting for any LPN graduating prior to 2016

***Didactic/Theory*** (mandatory for all LPNs as above)

- 1) Didactic 8-10 contact hours
  - a. Legal issues in IV therapy
  - b. Peripheral IVs
  - c. Current practices with central lines
- 2) Traditional classroom or online
- 3) LPN would send a transcript of this course to the Department with license renewal (odd year renewal cycle)

***Clinical*** (mandatory for all LPNs practicing the skill)

Handled through a competency assessment approach by employers – current examples ... ACLS certification, PALS certification – required to function in specialty areas; only LPNs working with IV skills would need this; this certificate would stay with the licensee as he/she moves between employers; employer’s generally do initial and annual competency evaluation on all licensed nurses

**Providers** (theory and/or skills education)

- a. Community colleges (current home of LPN-C education)
- b. Large employers
- c. Annual LPN association meeting
- d. Other

This proposal would include identifying 1-2 pilot facilities

**Cost**

8-10 hours of theory x 10-20 dollars per hour \$80-200 at a minimum

Skills lab – may be setting specific, for example larger employers may have a learning lab where all employees can access equipment; community college lab fees or professional meeting fees could run around \$100 (estimates based on current market practice)

**The information in Part Three, above, can be found under the Licensed Practical Nurses' subject area on the credentialing review program link at <http://dhhs.ne.gov/licensure/Pages/credentialing-review.aspx> under 'Applicants' Proposal'.**

## **Part Four: Discussion on the Issues by the Credentialing Review Committee of the Board during their January 23, 2017 Meeting**

### **Comments by supporters of the proposal:**

Karen Weidner, RN, spoke on behalf of the applicant group which is the Nebraska State Board of Nursing. Ms. Weidner stated that the proposal would eliminate the LPN-C credential and would require that LPNs acquire only one credential in order to do their work. The proposal would also incorporate the IV therapy components of LPN practice under this one LPN credential and allow those LPNs who meet the educational and training standards to provide IV therapy.

Ms. Weidner stated that this proposal would allow all LPNs who meet the standards to engage in full LPN practice. The proposal would also make it much easier for LPNs from other states to practice in Nebraska. The proposal would eliminate the current confusion regarding which LPNs are qualified to provide IV therapy and which are not.

Ms. Weidner stated that the proposal would lower the costs of credentialing for LPNs and that as a result more LPNs would choose to pursue the provision of IV therapy as part of their LPN practice. She added that this proposed consolidated LPN credential would also lower the overall costs of education and training for LPNs as well.

### **General Discussion by the Board Committee members on the issues:**

Dr. Hopp asked the applicants how many surrounding states currently have similar credentialing requirements for LPNs to Nebraska. Ms. Weidner replied that there are a total of six states that have similar credentialing requirements for LPNs to Nebraska. Dr. Hopp asked the applicants to name these six states, but the applicants did not have that information available.

Dr. Stuberg asked the applicants if a clinical training component is required under the terms of the proposal. Ms. Weidner responded that successful completion of a clinical training component is necessary for those who choose to provide IV therapy. Dr. Stuberg asked how many LPNs would likely be seeking to provide IV therapy. Ms. Weidner replied that approximately 600 LPNs would likely be interested in providing this kind of therapy. Ms. Weidner reiterated that those LPNs who wish to provide this kind of therapy must complete all of the requisite education and training.

Dr. Hopp asked the applicants to compare the amount of education and training LPNs receive with the amount of education and training that RNs receive. Ms. Weidner responded that LPNs typically receive about a year of education and training whereas RNs typically receive about two years of education and training plus any additional training associated with any specialty service areas they may have. Ms. Weidner added that RNs are allowed to administer more powerful medications than LPNs and can do more with central lines as well.



Dr. Hopp asked the applicants if there is ever a situation where LPNs are not under the supervision of an RN. Ms. Weidner responded that this might occur at assisted living facilities, for example, but that no complex medical services such as IV therapy are provided in these facilities anyway. Otherwise an RN will always be present.

Dr. Stuberg asked the applicants why the public needs their proposal. Ms. Weidner replied that the proposal would provide for greater access to LPN services than currently exists. Mr. Fleming commented that access to nursing care is an issue in rural areas of our state, and that the proposal would greatly help to address this access to care problem.

Dr. Hopp expressed concern about the ability of hospitals to successfully track LPNs who have the requisite skills as opposed to those who do not have these skills. Mr. Fleming responded that hospitals have been providing this kind of tracking for many years and that this aspect of the issue should not be a problem.

Dr. Hopp asked the applicants why their proposal does not require all LPNs to meet all of the necessary requirements for providing IV therapy, adding that this would greatly simplify the administration of the terms of the proposal. An applicant spokesperson responded that a survey of LPNs has revealed that as many as 20 percent of LPNs would quit their jobs if they were to be required to meet the full standards of the IV practice component of the proposal. The loss of so many LPNs could be devastating for assisted living facilities, for example.

## **The Formulation of Recommendations by the Board Committee members**

**Action taken on each of the six criteria:** Actions were taken regarding whether or not the applicants' proposal satisfied the six criteria. An 'aye' vote indicates that the applicants' proposal satisfies a given criterion. A 'nay' vote indicates that it does not.

**Criterion one:** The health, safety, and welfare of the public are inadequately addressed by the present scope of practice or limitations on the scope of practice.

### **Action taken:**

Voting aye on this criterion were Fleming, Hopp, Trebbien, and Stuberg. Voting nay on this criterion were Jackson, Borchert, and Moravec.

**Criterion two:** Enactment of the proposed change in scope of practice would benefit the health, safety, or welfare of the public.

**Action taken:**

Voting aye on this criterion were Moravec, Fleming, Jackson, Borchert, and Stuberg. Voting nay were Hopp and Trebbien.

**Criterion three:** The proposed change in scope of practice does not create a significant new danger to the health, safety, or welfare of the public.

**Action taken:**

Voting aye on this criterion were Moravec and Fleming. Voting nay were Hopp, Trebbien, Borchert, Jackson, and Stuberg.

**Criterion four:** The current education and training for the health profession adequately prepares practitioners to perform the new skill or service.

**Action taken:**

Voting aye on this criterion were Moravec, Fleming, Hopp, Jackson, Stuberg, Trebbien, and Borchert. There were no nay votes or abstentions.

**Criterion five:** There are appropriate post-professional programs and competence assessment measures available to assure that the practitioner is competent to perform the new skill or service in a safe manner.

**Action taken:** Voting aye on this criterion were Moravec, Fleming, Trebbien, Borchert, Jackson, and Stuberg. Voting nay on this criterion was Hopp.

**Criterion six:** There are adequate measures to assess whether practitioners are competently performing the new skill or service and to take appropriate action if they are not performing competently.

**Action taken:** Voting aye on this criterion were Moravec, Fleming, Trebbien, Jackson, and Stuberg. Voting nay on this criterion Hopp and Borchert.

**Action taken on the entire proposal by the Board Committee Members**

The Board Credentialing Review Committee Members took action to advise the full Board of Health on whether or not to recommend approval of the LPN proposal.

Voting to approve the proposal were Moravec, Fleming, Jackson, and Stuberg. Voting not to approve the proposal were Hopp, Trebbien, and Borchert.

By this vote the members of the Board's Credentialing Review Committee recommended approval of the LPN proposal.

## **Part Five: Discussion on the Issues by the Full Board of Health during the afternoon session**

During this session the members of the full Board of Health discussed the recommendations of their Credentialing Review Committee on the LPN proposal and asked questions of the applicant representatives that were in attendance. Dr. Borchert asked Ms. Weidner to summarize the changes the proposal would bring if it were to pass. Ms. Weidner responded by stating that the proposal would eliminate the LPN-C credential and would require that LPNs acquire only one credential in order to do their work. The proposal would also incorporate the IV therapy components of LPN practice under this one LPN credential and allow those LPNs who meet the educational and training standards to provide IV therapy. Ms. Weidner went on to state that all of the major health care organizations in Nebraska are supporting their proposal including the Nebraska Medical Association, The Nebraska Nurses Association, The Nebraska Hospital Association, and the Nebraska Healthcare Association. She added that there has been no opposition to the proposal.

Dr. Hopp commented that the proposal is redundant in that it doesn't do anything for the public beyond what is already occurring and that the effort to advance this proposal seems to be driven almost entirely by cost and administrative concerns.

## **Part Six: Recommendations of the Full Board of Health on the Proposal**

### **Actions Taken by the Board Members:**

The members of the full Board of Health took the following action on the recommendation of their Credentialing Review Committee to recommend approval of the LPN proposal as follows:

Voting aye were Borchert, Fleming, Hansen, Jackson, Konda, Low, Moravec, Stuberger, Salansky, and VanderBroek. Hopp and Trebbien voted nay. There were no abstentions.

By this action the members of the full Board approved the recommendation of their Credentialing Review Committee that the LPN proposal be approved.