

MINUTES OF THE HOUSE COMMITTEE ON PUBLIC HEALTH AND WELFARE

The meeting was called to order by Marvin Littlejohn at
Chairperson

1:30 ~~A.M.~~/p.m. on February 24, 1983 in room 423-S of the Capitol.

All members were present except: Rep. J.C.Long, excused

Committee staff present: Emalene Correll, Research Department
Bruce Hurd, Revisor's Office
Sue Hill, Secretary to Committee

Conferees appearing before the committee:

- Dr. Lois Rich Scibetta, Executive Director of Ks. State Board of Nursing
- Lynelle King, Executive Director of Ks. State Nurses' Association
- Dr. Alice Young, Director of School of Nursing, Washburn University
- Mr. Bill Berry, Director of Vo-Tech School in Manhattan, Kansas
- Patricia Bayles, Ks. Council of Associate Degree Nurse Educators, Eldorado, Ks.
- Joan Felts, Chairman of Dept. of Nursing at Ks. Newman College, Wichita, Ks.

Visitor's register, see (Attachment No. 1.)

Chairman called meeting to order.

Chairman noted that the first 45 minutes of meeting today will be given to opponents of HB 2143 since proponents had the same time allotment for giving testimony in a prior meeting. After that time, anyone else wishing to testify on HB 2143 is invited to do so.

Hearings on HB 2143 began:

Dr. Lois Scibetta distributed to committee a printed statement, see (Attachment No. 2.). She stated she is in strong opposition to HB 2143. Feels that there are problems to be resolved, but feels legislation is not necessarily the way to resolve them. Stated that in discussions regarding this legislation, the Board of Nursing was not asked to comment, or to give input on problems brought before this committee. The group from education chose not to involve the Board of Nursing, although their Board had made efforts to improve communication in meetings, etc. For further and specific comments on this bill, refer to her attachment No.2.

Dr. Scibetta fielded many questions from committee and staff.

Mrs. Lynelle King of KSNA stated her great respect for the sponsor of this bill, (Rep. Anita Niles), but those she represents do oppose HB 2143. Ms. King distributed a printed statement to committee, see (Attachment No. 3.) for detailed comments. Ms. King cited a few specific concerns, i.e., pg. 4, lines 145 through 149; lines 149 through 164. Pg. 8, lines 302 through 310 of the bill, as set out in attachment No. 3.

The decisions of a regulatory body are not always popular she stated. Many times decisions are judgement decisions. If there are problems she believes they can be resolved without legislation. Nurse educators they have spoken with and have contacted in regard to HB 2143 are in opposition to it.

Unless specifically noted, the individual remarks recorded herein have not been transcribed verbatim. Individual remarks as reported herein have not been submitted to the individuals appearing before the committee for editing or corrections.

CONTINUATION SHEET

MINUTES OF THE HOUSE COMMITTEE ON PUBLIC HEALTH AND WELFARE,

room 423-S, Statehouse, at 1:30 A.M./p.m. on February 24, 1983.

Hearings on HB 2143 continue:

Mrs. Patricia Bayles, spoke representing Kansas Council of Associate Degree Nurse Educators. They have 2 major concerns. Pg. 8, lines 0295 through 0312. No. 1 concern,--Standardized curriculum would seriously impede academic freedom. If this bill passes, nursing education in the state of Kansas would regress rather than progress. No. 2 concern,--Supervisory activity for the State Department of Education. This would give unnecessary supervisory authority to the State Department of Education. This power would promote resentment and unnecessary restraints. Feels this bill is reactionary and implies that the State Board of Nursing is not competent in regulating educational programs and policies.

To the best of her knowledge no AD directors were consulted in the drafting of HB 2143.

Ms. Bayles answered questions from committee.

Dr. Alice Young, Dean of School Nursing Program of Washburn University cited problems that could occur in the report issued after a site visit, (survey visit) considerable time is needed in order to write these reports. Pg. 4, lines 0155 through 0161 is problematic in its language as to what the responsibility of the survey visitor would be. Pg. 8, lines 0307 through line 0310. Pg. 2, lines 0078 through 0082 are also areas of great concern. Pg. 3, the language in regard to standards and regulations requirements are of concern. Survey visits she commented also have commendations and recommendations and do point out many positive things. She felt the language in the bill was very negative in this regard.

Bill Barry, Director of Vo-Tech School in Manhattan commented he and those he represents are not against the State Board of Nursing. Stated they do not intend to inhibit their testing and licensure program in any way. Feels they must work in cooperative fashion with the State Board of Nursing and the State Board of Education. Encourages continued accreditation, but feels there is a better manner in which it could be done. Also continues to support the site visits. This is an important function, but the reporting of this visit is of concern. Asked what problem is there with having an exit session with this staff person before they make their report to the State Board, in regard to discussion on weaknesses and short-comings, and also the good?

Mr. Barry asked if he felt closed cooperative efforts between the two Boards could be brought about with legislation by committee, and his reply was he just didn't know, but felt it might get the ball rolling.

Joan Felts, Chairman of Department of Nursing at Ks. Newman College spoke in opposition to HB 2143. State Board of Nursing is and should be the authority of nursing curriculum in Kansas she stated. Nursing needs to be innovative and build up a body of knowledge so that we can improve practices. Should not be restricted in this process. Faculty could develop this program for the students in their local setting, and of course it should be approved by the State Board of Nursing. She supports the State Board of Nursing as the authority for nursing in the state of Kansas.

Further questions of several of the conferees from committee and staff. Lengthy discussion with the conferees took place.

Chairman asked for action on the committee minutes through February 23rd. Rep. Harder moved these minutes be approved, seconded by Rep. Buehler. Motion carried.

Meeting adjourned at 3:00 p.m. until next scheduled meeting for February 28, 1983, 1:30 p.m.

Date: 2-24-83

GUEST REGISTER

HOUSE

1082

PLEASE PRINT

PUBLIC HEALTH AND WELFARE

NAME	ORGANIZATION	ADDRESS
Dr. Lois B. Scheibler	KSBN	503 Kansas Ave.
Lynelle King	KS St. Nurse Assn	Topoka
Dwight Spurts	KS Nursing / Home Health	Lenexa KS
Sr. Judith Sutera	Ks. Assoc. Home Health	Atchison
Linda Wright, R.N.	CLINICARE FAMILY HEALTH	KC, Ks.
Frieda Schriener RN	Topoka-Shawnee County Health Dept	Topoka, KS
Charlotte Toler RN	Visiting Nurse Services #	KC KS
KEITH R LANDIS	CHRISTIAN SCIENCE COMMITTEE ON PUBLICATION FOR KANSAS	TOPOKA
John Reavler	KSBN	Topoka Ks
Joan Remmers	Nemaha Co. Home Health	Sabetha Ks
NANCY SOLSCHEID	VISITING NURSE SERVICES	K.C. KS.
Alie Young	Washburn Univ School of Nursing	Topoka
Tony Molina	Clinicare	413 Division K.C. KS.
Mary Ann Butler	Clinicare	" "
Jean Sakumura	Clinicare	" "
Deib Hummel	Ks Health Care Assn	Topoka
DEAN Edson	Ks. Assoc. of Homes for the Aging	TOPOKA
Ray Berry	KAN AOTS - Topoka	Topoka
Bin Berry	Manhattan Vo-Tech - Manhattan	
RJ Metcalf	FLINT HILLS AOTS	Emporia, KANSAS

(attachment
no. 1.)



KANSAS STATE BOARD OF NURSING

BOX 1098, 503 KANSAS AVENUE, SUITE 330
TOPEKA, KANSAS 66601

Telephone 913/296-4929

TO: The Honorable Marvin Littlejohn, Chairman, and Members of the
House Public Health and Welfare Committee

FROM: Dr. Lois Rich Scibetta, ^{LR} Executive Director

RE: Additional Comments on H.B. 2143 as Amended by the House Ways
And Means Committee

DATE: February 24, 1983

Thank you Mr. Chairman. My name is Dr. Lois Rich Scibetta, Executive Administrator of the State Board of Nursing. I am here today to speak in strong opposition to HB 2143.

GENERAL COMMENTS

I would like to take this opportunity to bring some significant issues related to this Bill before the Committee.

I want to thank Representative Anita Niles for her cooperation in modifying this Bill after our discussion about the Board objections to the Bill. The Board cannot however accept the Bill even as it has been amended.

As Executive Administrator, I do not deny that there have been communication problems related to some of the issues raised in this Bill. These problems however, should not be resolved through legislation in our judgment.

The Board of Nursing experienced significant budget cuts by the legislature in the 1982 session. Staffing and funding were a problem. One half-time nursing practice specialist was cut from the budget and the travel funds were cut \$20,000.00 originally, another \$7,000.00 by the Governor and another cut is anticipated. These are the funds for Board meetings and staff travel. In the past, the Nursing Education Specialist was allowed at least three days for a visit, and has now been reduced to two days for a survey visit. I bring these fiscal constraints to your attention because they are related to our operation. The Board is short-staffed professionally, we have a total of three professionals including myself.

The Board of Nursing was evaluated by the Legislative Post Audit Division under the Sunset Law in 1982. They thoroughly reviewed the Board functions related to education, and did not make any suggestions for change. If any serious problems had occurred, we would have been advised of them and asked to correct them.

(Attachment
No. 2.)

Representative Marvin Littlejohn

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February 24, 1983

In all of the early discussions regarding this legislation, the Board of Nursing was not asked to comment, give input or asked to discuss the problems brought before this Committee. The group from education chose not to involve the Board of Nursing, although our Board has made efforts to improve communication in meetings, etc.

To our knowledge, the Nurse Directors of the education programs involved have not been asked for input in regard to this matter.

(SPECIFIC COMMENTS ON BILL:)

The preliminary survey cannot be the final report to the school. (L045-0161) The visitor is an employee of the Board and as such, reports the findings back to the Board who then discuss, review and decide what specific directions will be given to the school.

The "oversight" function of the decisions of the Board is not acceptable. (L0303-0310) There is considerable legislative oversight on all Board actions, regulations, etc. Public hearings are held and the public has a right to comment. Why is additional review necessary. Why is the Board of Nursing being singled out for this type of review?

Thank you for your attention. I will be happy to answer any questions.

KSNA

the voice of Nursing in Kansas

(Attachment
no. 3.)

Statement of the Kansas State Nurses' Association
by Lynelle King, R.N., M.S., Executive Director
Before the House Public Health and Welfare Committee
February 24, 1983

In Opposition to H.B. 2143 "Board of Nursing" - changes
in Accreditation

Mr. Chairman and members of the Committee, my name is Lynelle King and I am the Executive Director of the Kansas State Nurses' Association, the professional organization for Registered Nurses in Kansas. We are a constituent of the American Nurses' Association.

With great respect and appreciation for the sponsor, we must oppose H.B. 2143. We appreciate the opportunity to let this committee know of our concerns.

I attend at least part of every meeting of the State Board of Nursing, as an observer, and I must say I was surprised to hear of the statements of the proponents. KSNA believes that the SBN carries out its legislative mandates conscientiously and competently. It does sound as if a practical nurse program or two has been unhappy with some facets of the survey of their program by the Board of Nursing. We would hope that this could be worked out without legislation. The decisions of a regulatory body are not always popular, especially if they are doing their job of trying to assure quality education and thus quality nursing care for citizens of Kansas.

The timeliness of response by the Board of Nursing is affected by budgetary factors - KSNA has testified for several years that the SBN needs additional staffing and funding in order to carry out their legislative mandates.

To give a better idea of the context of the situation, I would direct your attention to a brief summary of the activities and responsibilities of the State Board of Nursing (attached). Their performance is remarkable, we believe, in light of the magnitude of their responsibilities and their relatively small budget and staff. We have always found the administration of the SBN will-

(Attachment
no. 3)

ing to work amicably and cooperatively with all factions and various agencies.

Our specific problems with H.B. 2143 (as amended) include the following:

1. lines 145 - 149 - requiring the SBN to conduct their survey, to the extent possible, at the same time as accreditation surveys. Other organizations often are on a different timing factor (that is, it depends upon the school as to whether they must be surveyed every year, every four years, every eight years and so on by the NLN). Each accrediting group - e.g., NLN, State Board, higher ed, etc. is looking at different things, uses different criteria, involves different people. It would be administratively difficult to have to be managing the visits of two or more groups at one time, each of which are vital to the existence of the school.
2. lines 149 - 164. While we recognize this has been amended a little, unfortunately the amendment does not take care of the following concern: we do not feel it is appropriate or contributory to proper oversight by the Board of Nursing (as opposed to one member of its staff) for the preliminary staff report to in essence be the final report. Lines 157 - 160 states that all deficiencies shall be... listed and no additional deficiencies shall be assessed based upon the data gathered at that time.

Problem - we believe the staff could give an exit interview and perhaps give a tentative list of some data she has collected, but we believe the interpretation of the total data and the decision about what should be done about that data must be left to the Board of Nursing, the statutory body to make the decision about accrediting the school. Actually lines 162 - 164 seem contradictory to the preceding lines.

3. lines 302 - 310 mandate that the SBN cannot adopt any educational regulations without first submitting them to the State Board of Education "within 30 days prior to their adoption".

Problems (a) This is unnecessary, there already is a mechanism for all interested parties to get copies of the proposed regs and comment in writing or during the public hearing.

(b) We object to singling out another state agency to have oversight over the SBN. (Why not require submitting them also to the Board of Regents? and on and on)

(c) This is burdensome and time-consuming and will slow down the process of regulations through the already lengthy approval process.

In summary, I would note a sensitive matter but an important one: that the proponents we heard on Tuesday, February 22, were non-nurse administrators. Nursing faculty actually teaching in those schools may (and we know in fact that some do) have quite a different view of the survey and its results. Administrators worry about money, about having sufficient number of students in order to receive money. The nursing faculty may have pointed out that to admit as many classes as was being done with as small staff of faculty, it was impossible to follow minimal standards of nursing education.

Additionally, the administrators (all non-nurses) had the very unorthodox idea that the Board of Nursing should write up a complete curriculum for each program and that the schools should then just follow that by rote. That is not the view of any nurse educator we've spoken with. The role of the SBN regulations is to set broad standards, criteria for curriculum, but educators in all fields of which I am familiar cherish the academic freedom to be creative, innovative in their curriculum development, to take into account the specific needs/resources of the community.

Please note that this legislation would apply to all schools of nursing: B.S., A.D., Diploma as well as practical nurse schools. All the nurse educators we've spoken with or who have contacted us oppose this bill.

Is there a problem? If so, can it be resolved without legislation? (We believe it can). Will this legislation solve the problems the conferees related? (We don't believe so.) Will the legislation add more burdensome regulation to schools of nursing and to the SBN and cause more problems? (We believe strongly that would be the case).

Thank you for the opportunity to comment. I'll be happy to answer any questions.

SUMMARY

Activities and Responsibilities of the State Board of Nursing**

1. Licensing, renewing and regularizing licensees
RNs - 21,617
LPNs - 7,063
LMHTs - 1,737
30,417 licensees
2. Examining new graduates of these categories for a total of 1,812 examinees
3. Endorsing nurses from other states - 1,017 - verifying nurses to other states 1,223
4. Approving schools of nursing and mental health technique - RN - 29, LPN - 16, LMHT - 9 = 54 schools
5. Continuing Education (for RNs and LPNs) approving providers, keeping records, setting policies
6. Regulating and certifying the Advanced Registered Nurse Practitioner (141 to date until judge's ruling invalidating law). Board has had years of effort on this, hearings, testimony, writing regulations.
7. Regulating nursing practice, investigating 21 complaints of illegal/unethical practices; hearings - 14; licenses revoked - 3; insufficient evidence - 2; licenses limited - 3; licenses suspended - 3; insufficient evidence - 2; no action taken - 2; licenses reinstated based on evidence of rehabilitation - 3.

**from FY 1982 Annual Report of SBN