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Public Health and Welfare Committee
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Written Neutral Testimony for SB 218
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Good Afternoon Madam Chair and Members of the Public Health and Welfare Committee. The Board of Nursing is providing written neutral testimony on behalf of the Board Members for SB 218.

National Council of State Board of Nursing and the Advance Practice Nursing Consensus Work Group developed the Advanced Practice Registered Nurse (APRN) Consensus Model for APRN Regulation which arrives at "best practice" in the uniform preparation and regulation of APRNs. The best practice is to regulate the APRN roles under the Board of Nursing.

APRN practice is built on the platform of the registered nurse role; therefore, regulation of both roles (RN and APRN) by the nursing board provides expert knowledge of nursing practice and skills in the progression from RN to APRN. The determination of diagnoses and formulation of a plan of care are integral to nursing roles. Advanced practice nurses are educated to safely prescribe medications within their scope and to diagnose and treat, as well as to promote wellness. Nurses have expertise in medication administration, medication interactions, and monitoring medication effects.

Boards of Nursing have safely watched over the public's interests as recipients of care for a hundred years. APRN practice has occurred over the span of fifty years and Boards have experience regulating the advanced roles in nursing since 1970s. Over these years of APRN practice growth and evolution, nursing has remained the most publicly trusted profession.

Some physicians have expressed concerns for public safety if medicine does not oversee the practice of APRNs, but they fail to produce any evidence that patient safety has been adversely affected in states in which APRNs are able to practice fully and are overseen by Boards of Nursing. When safety issues surface related to the practice of an APRN, Boards of Nursing hold disciplinary investigations and possess tools and expertise to address the issues. There is no evidence that oversight by a Board of Medicine would improve on what Boards of Nursing already do.

45 states and jurisdictions have Board of Nursing oversight of both the registered nurse role and the advanced practice registered nurse roles. One state, Nebraska, has a separate APRN Board. Several years ago in Mississippi, dual regulation for APRN was removed with sole regulation returned to the Board of Nursing. Discussion with states that have dual regulation revealed a common theme that dual regulation adds a layer of regulation, extends the time for development and implementation of regulations, and is an added expense to the agency.

Thank you and if you have any questions please contact the Board of Nursing.