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Kansas State Board of Nursing

Laura Kelly, Governor

Health and Human Services Committee February 17, 2021 Written Proponent Testimony regarding House Bill 2256 Carol Moreland, M.S.N, R.N. Executive Administrator

Chair Landwehr and Committee Members.

The Kansas State Board of Nursing (KSBN) licenses Advanced Practice Registered Nurses (APRNs) to practice within Kansas. Presently there are 7,378 APRNs licensed in Kansas that encompass the four different roles of APRNS (nurse practitioners, clinical nurse specialists, registered nurse anesthetists and nurse midwives). The mission of the Board of Nursing is to assure the citizens of Kansas are provided safe and competent practice by nurses. The Board of Nursing supports HB 2256 for the following reasons:

- 1. <u>Scope of Practice</u>: HB 2256 does not change the scope of practice for APRNs in Kansas. APRNs will continue to conduct an advanced assessment; ordering and interpreting diagnostic procedures; establishing primary and differential diagnoses; prescribing, ordering, administering and furnishing therapeutic measures, delegating and assigning therapeutic measures to assistant personnel, collaborating and consulting with physicians and other healthcare providers; providing referrals to healthcare providers, agencies and community resources.
- 2. Competency of APRNs to fulfill their scope of practice: HB 2256 includes national standards for education, certification, registration with the DEA and proof of malpractice insurance at the time of licensure and renewal of license. The education of APRNs is very focused to their scope and practice. It includes didactic content and clinical hours with a preceptor establishing initial competence in the advanced practice role. Requiring the nursing program to be an accredited graduate or post-graduate program aligns with national standards for education programs, further refining all aspects of the educational program. HB 2256 requires APRNs licensed in Kansas to complete 4,000 clinical practice hours or clinical instructional hours within four years under an authorization for collaborative practice. During this time competency can be further developed while practicing. Once the 4,000 hours are completed, the APRN will be authorized to engage in the practice of advanced practice registered nursing without an authorization for collaborative practice. Nothing in HB 2256 prohibits an APRN from voluntarily entering into a collaborative practice agreement. Requiring proof of national certification ensures Kansas is aligned with other states in the U.S. that require national certification for APRN licensure. National certification provides a method for APRNs to validate their education, knowledge, expertise, and competency. HB 2256 requires APRNs to demonstrate maintenance of national certification in the appropriate advanced practice registered nurse role at the time of renewal.
- 3. **<u>Regulation of APRNS</u>**: KSBN has regulated APRNs since legislation was implemented in 1976 for the certification of advanced practice nurses and 1986 when legislation to authorize nurse anesthetists to practice was implemented. All APRNs licensed in Kansas are required to maintain an RN license also. APRNs are represented on the Board of Nursing, as it is required at least one

Board member be engaged in practice as an APRN *K.S.A* 74-1106 (b). The Advanced Practice Committee serves as an advisory body to the Board. In addition to a minimum of three Board members including at least one APRN member there are up to five non-Board members on this committee representing each of the categories of APRNs: clinical nurse specialist, nurse midwife, nurse practitioners and registered nurse anesthetist and one K-TRACS representative appointed by the Board. The Board of Nursing has continued to regulate APRNs during the time their need for a collaborative agreement with a physician was changed. While supporting a facility's response to the COVID-19 pandemic, APRNs and registered nurse anesthetists have been permitted to provide care without a written collaborative agreement, protocols and physician supervision. They can provide medical services appropriate to their education, training, and experience. This was granted in Executive Order No. 20-26 issued by Governor Kelly on 4-22-2020, House Bill 2016 and Senate Bill 14 implemented by the Legislature. KSBN has the knowledge and expertise among Board Members to regulate APRNs and registered nurse anesthetists.

In conclusion, the Board of Nursing supports HB 2256. The changes to the practice of APRNs contained within HB 2256 will continue to provide public protection and competent care and increase healthcare access for more citizens of Kansas. It will no longer require the need for physician supervision, rather collaboration and consultation, and allow the APRNs to provide care as per their education, certification and demonstrated competencies and experience.