









# Interstate Practice, Education, and Licensure Changing Practice, Evolving Regulation TriCouncil for Nursing & National Council of State Boards of Nursing November 2014

#### INTRODUCTION

Nursing practice is always evolving both to drive and in response to changes within society and health care. As a result, nursing education, professional self-regulation, and statutory regulation must also continually evolve. With the advent of the information age and digital era, nursing regulation must address the unique needs of interstate practice enabled by telehealth technologies. As leaders, the TriCouncil for Nursing (American Association of Colleges of Nursing, American Nurses Association, American Organization of Nurse Executives, National League for Nursing) and the National Council of State Boards of Nursing (NCSBN) seek a broad based dialogue to address the impact of telehealth and other interstate care delivery models on nursing practice, education, professional regulation, and licensure.

# **BACKGROUND**

Beginning in January 2014, the TriCouncil and NCSBN recognized that, while nuanced to the organization's particular interest, each organization had valuable, legitimate, albeit differing perspectives about nursing regulation, particularly as it relates to telehealth and interstate practice. Individual organizations had begun internal dialogues to describe the nature of the conflicting perspectives and identify strategies to create a mutual understanding and approach. Through national leadership discussions it became clear that this shared issue merited a high-level, high-impact, broadly representational dialogue and plan of action to ensure success in moving forward with a comprehensive regulatory approach. This approach must keep the public and patients safe, maintain the integrity of the nurses' practice, and support innovation and evolution within nursing practice.

Driving this work are the changes in health care delivery and need for access to nursing care with emerging technologies. There is a desire to address long-standing and unresolved conflicting perspectives about the optimal regulatory solution to meet modern care delivery models that leverage technology for interstate practice. Telehealth and other forms of virtual practice have and will continue to grow. The mobility of both patients and nurses challenge the notion of state borders, legal residence, and state of practice. Traditional boundaries associated with the scope of practice within and across professions are changing. Clearly understanding these drivers and the impact on general and specialty nursing practice is essential to developing a flexible, responsive regulatory system.

Underlying this conversation is the recognition that nursing regulation encompasses education, professional self-regulation, and the state-based licensure process. Constituents in each of these areas have a uniform commitment to assure that patients and the public are protected and receive high quality, safe nursing care. In addition, this conversation focuses on general registered nurse practice and not that of the advanced practice registered nurse.

#### FRAMING PRINCIPLES

Fundamental to this work is the understanding that as the delivery system evolves, there is a need to ensure professional accountability and that nurses function at the highest ethical standards. There is a professional and regulatory responsibility to assure that patients are safe and receiving quality care and that there is a need for trust and uniformity in the regulatory processes that support achieving this goal. TriCouncil and NCSBN identified five framing principles that would shape the next steps:

- 1. Uniform commitment by all stakeholders to the primary goal of protecting the public and patients
- 2. A clear and consistent process for regulating nursing practice in order to protect the public and deliver high quality, safe care to patients
- 3. Enhance access to care and facilitate care delivery
- 4. Nursing regulation evolves as practice evolves
- 5. Maximize the ease and ability of nurses to readily move across jurisdictions while continuing to protect the public

## **NEXT STEPS**

TriCouncil and NCSBN anticipate that this will be an iterative process involving the broad interests of representative nurses, consumers, regulators, and other health professionals. While the TriCouncil and NCSBN can serve as a high-level steering committee to ensure that work continues to move forward, a multi-pronged approach to the dialogue will be established to engage a larger stakeholder group. Background documents detailing the current state of regulation and potential gaps in the three areas (education, professional self-regulation, and state-based licensure) will be developed to level the understanding across the stakeholders and provide a common reference point for moving forward. In addition, individual groups may proceed with initiatives to advance this work, but there is a commitment to communicating about both parallel and joint work to all interested stakeholders.

# **Short Term Strategic Actions**

Using the framing principles, TriCouncil and NCSBN identified four initial areas of work to address some immediate concerns where there is mutual consensus to strengthen the regulatory process. These steps can be taken while engaging in dialogue to address broader questions.

- 1. Develop a standardized decision tree for determining scope of practice.
- 2. Collaborate to support the uniform implementation of the federal biometric background licensure requirement.
- 3. Review, evaluate, and make recommendations for alternatives to discipline programs for nurses with substance use disorders.
- 4. Review and evaluate existing practice models to facilitate ongoing dialogue.

## **CONCLUSION**

This paper is about the desire to develop an approach and a plan for moving forward with a regulatory model that ensures patient safety, facilitates mobility, and fosters evolution in nursing practice. Inherent in this work is a commitment to ongoing communication, thoughtful deliberation, and acknowledgement of the contributions of all to ensuring that the public and patients have access to safe nursing care.