



CANNON BUILDING
861 SILVER LAKE BLVD., SUITE 203
DOVER, DELAWARE 19904-2467

STATE OF DELAWARE
DEPARTMENT OF STATE
DIVISION OF PROFESSIONAL REGULATION

TELEPHONE: (302) 744-4500
FAX: (302) 739-2712
WEBSITE: WWW.DPR.DELAWARE.GOV

ADVANCED PRACTICE COMMITTEE Minutes (Approved May 22, 2012)

The Advanced Practice Committee held a meeting on March 27, 2012 at 6:00 P.M. in Conference Room A, Cannon Building, 861 Silver Lake Blvd, Dover, Delaware.

PRESENT: Allen Prettyman, JoAnn Baker, Candace Sandal, Jean Gallagher, Cindy Cunningham, Robert McKennett, Sandy Elliott, Cindy Drew, Leslie Verucci

ABSENT: Lucille Gambardella, Ron Castaldo, Cathy Moore

GUESTS: Megan Williams; Al Sandal; Arin Richter, RN, BSN; Lindsey Seedorf

PRESIDING: Delphos Price

STAFF: Pamela Zickafoose, Executive Director, Delaware Board of Nursing
Patricia Davis-Oliva, Deputy Attorney General for the Board

CALL TO ORDER: Mr. Price called the meeting to order at 6:10 p.m.

REVIEW OF MINUTES: Minutes from the February 29, 2012 meeting were reviewed. Dr. Prettyman made a motion to accept the minutes as written, seconded by Ms. Verucci. With Ms. Cunningham and Ms. Baker abstaining, the motion carried.

NEW BUSINESS

None

UNFINISHED BUSINESS

Rules and Regulations Update

Dr. Zickafoose informed the committee members she shared the document drafted by Mr. McKennett from the last meeting with Ms. Davis-Oliva and question about a "list" for scope of practice. Ms. Davis-Oliva said a "list" was not acceptable for Delaware. Dr. Zickafoose also worked on the current statute and Section 8 Rules to attempt to incorporate the Consensus Model language. Mr. Castaldo submitted an

email requesting a consistent order for the types of APNs in both the statute and rules. Dr. Prettyman suggested an alphabetical listing and the committee agreed.

Mr. Price stated he had conferred with Jana Conover from AANA and she stated that Delaware is in a good position to implement the Consensus Model but the statute must be completed first. Ms. Davis confirmed. Mr. Price commented he will be going to the APRN Roundtable meeting next month and may gather more information from that meeting.

Discussion continued regarding the Joint Practice Committee (JPC). Dr. Zickafoose explained the process for prescriptive authority via the JPC and the Board of Medical Licensure and Discipline (BMLD). Mr. Price commented the BMLD has never contested an APN applicant who met the requirements for prescriptive authority. Dr. Prettyman added we would save money by decreasing the number of committees associated with the Board of Nursing (BON). Ms. Verucci stated a structured format is what the Consensus Model provides allowing nurses more mobility and transparency in licensure. Dr. Prettyman added that another benefit of implementing the Consensus Model would be getting APNs licensed more expeditiously. Mr. McKennett concluded the Consensus Model is what the committee wants and the direct plan of this committee is to proceed with the Model.

Mr. Price asked Ms. Davis-Oliva where this committee might get resistance in implementing the Consensus Model. She replied the JPC may be an issue yet it is not being used as it was intended. Therefore, this may be a good time to start shifting some responsibility since the Secretary of State is reworking Chapter 47- Controlled Substances. Physicians with prescriptive authority may be required to take continuing education regarding prescribing and counting narcotics. Ms. Verucci stated she is on a committee for abuse of prescription drugs and they are considering one-half of the pharmacology CE going toward this issue. Ms. Davis-Oliva stated there is a great concern with prescribing controlled substances and the BMLD has developed regulations for prescribing opiates. Ms. Verucci explained the LACE model which stands for Licensure, Accreditation, Certification, and Education. This acronym forms the basis for the Consensus Model.

Discussion continued regarding APN licensure and RxAPN. Under the Consensus Model all APNs would automatically get RxAPN. Mr. McKennett asked if there were any problems now with the requirements. Dr. Zickafoose commented that APNs who do not have the courses in the 3Ps do not obtain RxAPN. Dr. Prettyman said all schools would have to provide these courses in order for graduates to take the certification exam. Therefore, this issue would resolve itself. Then he commented we may need to allow an opt-out for RxAPN as not all will want or need to prescribe. Ms. Baker added they don't have to get CSR and DEA numbers. Dr. Zickafoose explained the process to obtain CSR and DEA numbers that follows RxAPN. The outcome from the committee was that all APNs would get prescriptive authority with licensure and they must all do the continuing education for renewal whether they

choose to prescribe or not. There would be no change to the current process to obtain CSR and DEA numbers.

Ms. Elliott asked if the JPC was eliminated would this committee be the discipline body for APNs? Ms. Davis-Oliva stated she did not think this committee could be and then she revised her comment and said they might be able to make a recommendation to the board. All of this would require statutory changes. Dr. Prettyman asked about the process and Ms. Davis-Oliva explained that usually DPR will float the bill. She recommended this committee go to the BMLD to talk with them first and educate them about the Consensus Model before a bill is introduced. Ms. Drew stated the JPC and BMLD have never denied an APN that she can recall. Based on the history of the JPC and recent approval practices, members commented there is not a lot to support an objection. Other members of the committee discussed that nationally the doctors are not supportive of eliminating collaborative agreements and not having BMLD approval for RxAPN. Dr. Prettyman stated the lack of a collaborative agreement will impact some physicians financially and some pain groups may want to have a contract/collaborative agreement with APNs. Dr. Prettyman asked what impact the Consensus Model would have for physicians. One positive impact would be from an insurance reimbursement standpoint with increased ability to get paid. Ms. Verucci added there would be a structured educational program so all APNs would meet the same criteria in order to be licensed. Ms. Elliott said they may be able to use the Medicare language under "licensed independent practitioners." Ms. Baker said NPs may have to pay more for malpractice.

Discussion continued about the need for a survey for physicians similar to the APN survey. Mr. McKennett stated he did not feel it was necessary. Mr. Price commented there were basically three outcomes- all doctors against the model, one-half for it and one-half against it, or all for it. Ms. Gallaher said we should sell "happy points" to the BMLD and she did not support a survey. Ms. Elliott commented she applied in 2005 for totally independent practice and was denied due to the fear of loss of business if APNs could "hang out their own shingle." Dr. Prettyman said Christiana Care Health System is planning to staff each of 15 offices with one NP so CCHS is onboard. Mr. McKennett discussed an anticipated power struggle with anesthesiologists, but they do need CRNAs and APNs and the IOM documents support the need for APNs.

Consensus Model Education

Mr. Price offered to do the presentation at the BMLD with Dr. Zickafoose's assistance. Members reiterated the need to educate nurses and APNs prior to the BMLD. Discussed need to review the Powerpoint presentation at the May meeting. Members discussed where the education should take place. It was decided to hold meetings at DTCC in each of the three counties. Hospitals could be invited to attend these meetings. Ms. Baker will check on dates and let us know what is available. Dr.

Zickafoose has plenty of handouts to distribute at each event and they could also be accessed online in the toolkit if the supply is depleted.

OTHER BUSINESS (for discussion only)

Ms. Elliott informed the group the American College of Nurse Midwives had chapters and they asked each state to form an affiliate instead. The Delaware Affiliate of Nurse Midwives was recently created by Ms. Elliott and she is the President. Congratulations were shared with Ms. Elliott.

Mr. Castaldo sent an email inquiring about the Action Coalition and why there was no information on APNs on the website. Megan Williams gave an overview of the action coalition and stated there is AARP funding available. Dr. Zickafoose stated she attended the Future of Nursing meetings and the coalition evolved from those meetings. She asked Dr. Prettyman to chair the APN wing of the coalition and he agreed. Dr. Zickafoose will contact the DNA to have Dr. Prettyman's and Ms. William's names added to the website as contacts for the coalition in regards to APNs. Mr. Price discussed the opt-out aspect of CMS guidelines and several members questioned about this process. Ms. Elliott said chances are positive for change in the Medicare guidelines with Governor Markell and the last time they were opened the CNMs got reimbursement increased from 65 to 100%.

Committee members expressed their appreciation for Ms. Davis-Oliva's attendance and participation in the meeting.

PUBLIC COMMENT

None

NEXT MEETING- May 22, 2012 at 6 PM at the University of Delaware in Newark.

ADJOURNMENT- Ms. Baker made a motion to adjourn, seconded by Ms. Verucci. The meeting was adjourned at 7:52 P.M.

Respectfully submitted,



Pamela C. Zickafoose, EdD, MSN, RN, NE-BC, CNE
Executive Director
Delaware Board of Nursing