

Senate Executive Departments and Administration Committee

Deb Chroniak 271-1403

SB 137-FN, relative to licensure by endorsement granted by the board of nursing.

Hearing Date: February 1, 2017

Time Opened: 9:35 a.m.

Time Closed: 10:22 a.m.

Members of the Committee Present: Senators Carson, Reagan, Gannon and Woodburn

Members of the Committee Absent: Senator Soucy

Bill Analysis: This bill requires the board of nursing to grant licenses to applicants for license by endorsement for persons holding a comparable license issued by Vermont, Massachusetts, New York, or Connecticut.

Sponsors:

Sen. Kahn

Sen. Watters

Sen. Fuller Clark

Sen. Hennessey

Rep. Shepardson

Rep. Bordenet

Who supports the bill: Senator Jay Kahn; Senator Martha Fuller Clark; Rep. Daniel Donovan; Kate Horgan, New Hampshire Association of Counties; Phil Przybyszewski, CCSNH; Amy Matthews, Cheshire Medical Center, Dartmouth Medical; Jessica Lussier, Cheshire Medical Center; Brendan Williams, New Hampshire Health Care Association

Who opposes the bill: Denise Nies, Board Administrator; New Hampshire Board of Nursing

Who is neutral on the bill: Bob Lamberti, Attorney, Office of Professional Licensure and Certification (OPLC)

Summary of testimony presented in support:

Senator John Reagan opened for Senator Kahn who was not present at the opening of the hearing.

Senator Jay Kahn, District 10 (prime sponsor) (testimony provided on Nurse Licensure Compact):

- SB 137 is a workforce bill. Some of the greatest needs in the state are for unfilled nursing positions. There are barriers which were put in place that inhibit our ability to meet the need.
- Those in the business of providing health care are unable to do so because of

the lack of resources. Beds needed for care cannot be filled because of inadequate staffing.

- If there are measures that can be taken as a legislative body that needs to be done.
- The Governor's Commission, which convened a year ago, stated this is a top priority, more reciprocity among professionals serving the health care industry.
- A first time licensee who passes the Board, the state could give a 90-day temporary license, which gives the licensee time to present credentials, which is what happens under the compact. This only works if coming from compact states. A map was passed out with states which were covered by a compact showing only half of the states are covered by the compact and most of those states are beyond our region.
- Positions are unfilled and applicants are willing to come to New Hampshire to work, but we run them through a cycle as if they are not experienced.
- Four neighboring states are feeders and New Hampshire should encourage that movement by welcoming licensed nurses to New Hampshire.

Phil Przybyszewski, Project Director, Workforce Solutions, Community College System of NH (in support):

- Key sectors in the economy that drive workforce; top four are manufacturing, technology, hospitality and health care.
- A lot of analysis has been completed across the state.
- Growth rate for nurses, LPNs and LNAs, the growth rate in the next ten years is projected to be 18 to 20 percent. A good part of that is because of the need due to aging population.
- Fifty-two percent of the workers today are 45 and older.
- Need to find a way to fill the backlog.
- Growth rate for RNs is 15.4 percent; LPNs is 17.4 percent.

Amy Matthews, Nurse, Cheshire Medical Center (in support):

- Representing Cheshire Medical Center and Dartmouth Hitchcock – Keene where she is Senior Director of Patient Care Services
- Extreme need for nurses.
- Has tried to meet a regional need in their area. In FY '15, 119 patients needed to be transferred out of their community due to not having enough staff beds. Last year that dropped to 59 patients, but they left the community because they did not have the staff to support the need.
- Have had problems with licensure taking up to eight to ten weeks to receive license for a nurse coming from a non-compact state.
- Had a Massachusetts RN with no restrictions on her license, who waited eight weeks to be able to begin work.
- She gave many examples of hiring experiences and how long it took to receive a license.
- They have to rely on travel agencies, but only looking at compact states which limits travelers they can receive and will accept positions.
- Patient safety is first and foremost, but they cannot fill these positions and patients still are coming to them.

- Sensitive to the Board's concern. Has no control over other states.
- This bill will help the state.

Senator Reagan asked when they make a new hire, if they could put them to work immediately, what would they do to vet that person? Ms. Matthews stated when making a hire they already are aware they have a license in another state that has no restrictions. They go through a criminal background check and a drug screen as part of their employment. As they do their due diligence as to whether they are a good match for their agency, they start them in their orientation process. For some specialties it takes a while to get them on board. Their agency does due diligence in handling the process of checking to make sure they have a license, etc. **Senator Woodburn** said, last year the compact was renewed. If the solution to this problem were all or nothing, what is the benefit of the compact? Ms. Matthews stated the benefit of the compact is it is easy to get someone into the State of New Hampshire under a compact license due to the ability to move them in immediately. There is consistency in everyone participating in a compact. In 2015, when most states uploaded their information where you could compare state-to-state in what are the differences between state boards of nursing, six states did not participate in that and New Hampshire was one of those. **Senator Woodburn** asked where did they recruit their nurses from, geographically. Ms. Matthews stated heavily in New England, but as a community hospital in a rural setting most New Hampshire nurses come for the experience and then move on. **Senator Gannon** asked if they were losing nurses to Border States, i.e., Massachusetts. Ms. Matthews stated they are close to the Massachusetts border and lose nurses to them because of pay and opportunity.

- As a member of a compact state, all nurses are more portable. Portability of professional licensure is much more important now than it was decades ago.
- We should remove barriers to allow nurses to practice in our state.

Brendon Williams, President, New Hampshire Health Care Association (in support):

- Represent over 90 long-term care facilities state-wide, both for-profit and non-profit.
- Commend the intent of the bill.
- Particular concern in the Keene region.
- Priority is trying to reduce, while preserving patient safety, structural barriers to entry into the health care workforce.
- Wants to emphasize that is it not just the state that has an interest in patient safety the providers have an interest in patient safety because the full liability is upon each provider, as to the conduct of that provider's staff.

Chris Gillessen, Licensed Nursing Home Administrator (in support):

- Operated in the State of Massachusetts for ten years; a non-compact state. New Hampshire is fortunate that it is a compact state based on his experience on trying to hire staff.
- Is part of the Monadnock Health Care Work Force Group. Providers started getting together to talk about serious issues they were having with nursing shortage.
- The bill in front of us today is what they are trying to work towards to help

reduce barriers, but have quality of care.

- The intent and purpose is to start the discussion on how to move forward and get people from other states here, that makes it a process and which makes sense.
- When they start the hiring process, they have to do background checks.
- To hire from a bordering state he would have to wait 30 days plus to get them on board. As employers, they want someone to come in and take care of patients the best as possible. To have unfortunate barriers (non-compact state) creates a barrier for New Hampshire when they are already losing nurses to Border States.
- Trying to breakdown some of these barriers.
- This may be a way to move forward.

Summary of testimony presented in opposition:

Denise Nies, Board Administrator, New Hampshire Board of Nursing (in opposition) (testimony provided):

- Speaking regarding the Board of Nursing stance on SB 137-FN.
- Letter from the Board of Nursing stating that since 2009 New Hampshire has been a member of the Nurse Licensure Compact.
- Enhanced nurse licensing compact just went through in 2016 and waiting for twenty-five states to join the Enhanced Nursing Compact.
- There are four states mentioned in this bill which are not compact states and which the bill states it would like to have a portability agreement with (Vermont, Connecticut, New York and Massachusetts). Three of the four states mentioned in SB 137 are introducing compact licensing; Vermont's plan to introduce legislation will be in 2018; Connecticut will introduce in 2018; Massachusetts will introduce this year, and New York is not planning to introduce Enhanced nurse licensing compact.
- Massachusetts is the largest state we have endorsements from (40%) for nursing.
- Other states are in the single digits for endorsements.
- Board asked the National Council of State Boards of Nursing (NCSBN) to review the language in SB 137-FN. The Board and the National Council are not clear on what the bill is trying to accomplish.
- The endorsement rules in statute are clear. Rules are there for the safety of residents in New Hampshire.
- Feel this bill is not accomplishing anything more than what they are presently doing and does not provide a safe measure against safety gap, when criminal background check or vetting process is not used before licensing someone in New Hampshire.

Senator Reagan asked Ms. Nies if she had suggested language to amend this bill. Ms. Nies stated what the Endorsement rules require is someone provide credentials, licensing, education, and a criminal background check (because it would be an initial license) to their office for review prior to a license being issued. She does not understand what this bill is trying to do based on how it is written.

Summary of testimony provide in neutral position:

Bob Lamberti, Attorney, Office of Professional Licensure and Certification (OPLC):

- Not from the Nursing Board, but from the OPLC. Coming in to this bill late. **Senator Carson** said there were questions as to whether the Nursing Board has seen this legislation and what was their opinion on this type of program.
- Attorney Lamberti's understanding, with limited conversations he has had with the Board Administrator of Nursing, is their concern over balancing the quantity of health care professionals with quality of health care professionals.
- Making sure those individuals coming to the state are qualified, with criminal history, disciplinary history, etc., and which concern is not adequately addressed in SB 137-FN.
- Hesitate to give language without talking to Board directly.

Senator Woodburn wanted a broad perspective because people look at their boards through their own licensing process. The question is the balancing of raising the bar for quality, but not keeping people out. The other issue is the compact of last year. What happens when all our neighbors are not part of the compact and can we craft a way so we can become part of this compact and also be able to hire nurses for hospitals, for example? Attorney Lamberti did not see why New Hampshire could not be part of the compact and also address reciprocity needs, which are not contemplated by the compact. He reiterated that the Board would still want to see more information to vet candidates coming into the state, so quality of health care is kept up to par. **Senator Woodburn** said we need to look at how we deal with regulations. We need to be able to look at the process which governs our licensure and see if we are really serving the customer, the profession; is there a way to balance this. He noted that there are some professions where a wall is created and no one is let in. Attorney Lamberti stated that the Office of Professional Licensure has a duty to protect the people of New Hampshire and they face this type of thing on a daily basis.

Senator Carson will meet with the Board and get their ideas as to how we can proceed with something like this while ensuring patient safety. We do not want to see another Exeter Hospital happen again. **Attorney Lamberti is happy to work with the Board and Committee to find some middle ground.**

Hearing closed at 10:22 a.m.

Future Action: Pending

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Date Hearing Report completed: February 3, 2017

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