



Improving Nursing Practice through Legislation

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The increase in APRNs and advance degree nurses should be reflected in the Maryland Board of Nursing (Board) composition. Two APRNs will be appointed to the Board. One will always be a CRNP. All APRNs will be eligible for a second term re-appointment. Advance degree nurses will provide more practice area diversity.

The definition for Advanced Practice will be corrected to Advanced Practice Registered Nurses (APRN) and designate the four major practice areas recognized by other states and the National Council of State Boards of Nursing (NCSBN). Specialty APRN nursing areas will be defined in regulations as needed

A grandfather clause will be added for Clinical Nurse Specialists who were educated, licensed and certified before October 1, 2012. Current language in the NPA does not permit the Board to recognize their national certification.

The Rehabilitation Program and Committee will be renamed the "Safe Practice Program and Committee". The Board does not rehabilitate anyone. Instead, it monitors the progress of all the program participants and is authorized to make recommendations to the Board for case dispositions. The name change reflect the program's goal to ensure safe practice. The term "habitual intoxication" will be changed to "substance abuse disorder" to reflect current terminology.

Renewal applicants with a positive background check have been experiencing delays with their renewals because of the time it takes to submit the documents the Board requires for review of the background check. The NPA will be changed to permit the Board to renew a license with a provision that the applicant must submit the required documents within 90 days with the possibility of one 90 day extension. Safety will not be compromised because the Board has the option to suspend a license for cause.

There are some changes to Board rules and authority. The Board President will be a Registered nurse, a simple majority of the appointed members present will constitute a quorum, and election of Board officers will take place in June every two years and as needed. The Board has had to postpone hearings because there was no quorum. This is a hardship for respondents and witnesses who have taken time off and traveled to Maryland for a hearing. Other Health Occupation Boards have a similar provision. Moving the election of officers to June instead of July will ensure that someone with Board experience will be eligible for election as an officer. New appointments are made in July or later and there was concern that someone not familiar with the Board and its proceeding could be elected.

Explicit authority will be granted to the Board to delegate certain activities to Board staff. This will improve performance by allowing staff, with guidelines, to handle Board duties of a routine nature.

Obsolete terms such as reference to a state administered licensure exam will be updated.