

2-18-2020

Dear Senator Giessel:

I am writing in support of SB 120, a bill that will allow advanced practice nurses (APRNs) and physician assistants (PAs) to prescribe crisis period medications for patients during hospitalization. As a psychiatric nurse practitioner at Alaska Psychiatric Institute (API), it is very important that I am able to provide effective orders for my patients in crisis. The current statute requires a physician to give these orders.

As you know, Alaska has a dearth of psychiatric providers. Because of this, API has been forced to utilize contractors and locum tenens providers to assist with the care of our most seriously mentally ill. The psychiatric APRNs and one psychiatric PA at API have remained constant over the past 4 years and have been providing the bulk of care for the past year.

The difficulty with locum and contract providers is that they are usually unfamiliar with Alaska practice and mental health laws, giving them pause to utilize crisis medications – a concept that is unfamiliar to them – for a patient they often don't know. The APRNs and PA at API are very familiar with crisis period medications. In the current situation, the nurses are having to call a physician who may or may not be familiar with the patient or crisis medications and try to get an order – sometimes while the APRN or PA is standing right there. This is not the best situation for our most vulnerable patients, as being in a crisis is very unsafe, not just from an injury standpoint, but due to the neurological harm that can result from prolonged psychosis and agitation.

The medications that are used in crisis periods are often the same medications that APRNs and PAs at API are already prescribing. We are very familiar with these medications. Additionally, the Joint Commission requires that the licensed independent practitioner most familiar with the patient be responsible for that patient's care. Lastly, APRNs and PAs are able to petition for court ordered medications without the assistance of a physician.

In closing, I am very much in support of SB 120. It is the best practice for our patients, meets standards, and is not beyond the scope of APRNs and PAs.

Thank you for your consideration.

Sincerely,
Cynthia Montgomery, PhD, MSN, APRN, PMHNP-BC
Alaska Psychiatric Institute
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