

HB

165



COMPREHENSIVE MENTAL HEALTH SERVICES

Please reply to:

230 E. Paulson, Wasilla, AK 99687
(907) 376-2411 FAX No. 907-376-1626

847 W. Evergreen, Palmer, AK 99645
(907) 745-1000 FAX No. 907-745-6126

P.O. Box 787, Talkeetna, AK 99676
(907) 733-2274 FAX No. 907-733-1222

March 12, 1992

Senator Drue Pearce
Alaska State Legislature
PO Box V (MS 3100)
Juneau, Alaska 99811

Dear Senator Pearce,

As you are aware, the Governor has appointed a task force to evaluate all Boards and Commissions. As a result, HB 165, which renews the Alaska Board of Nursing for four years, remains in the Labor & Commerce Committee. If HB 165 is not approved, the Board will cease to exist.

As a registered nurse, I urge you to support HB 165, and vote for full renewal for the Board of Nursing. As one of approximately 5,000 RNs in the state, I know how effective the board has been in implementing the Alaska Nurse Practice Act. The regulations written and approved by the Board are well respected and emulated throughout the country.

The Board has a major role in protecting the public from receiving care from unqualified or impaired nurses. The present structure allows for rapid, unbiased investigation and fair disciplinary action. A board with less equitable representation from the full range of nursing practice would be slower to respond to complaints from the public, as consultation from outside experts would have to be obtained.

My personal experience with the Board as a Psychiatric Nurse Practitioner has been very positive. The state of Alaska has a large demand for psychiatric services. The agency where I work books psychiatrists time three to four weeks in advance. Psychiatric Nurse Practitioners have made it possible to evaluate clients in a more timely fashion, monitor medications more closely and offer follow-up care more frequently. The Board of Nursing played a key role in helping me to clarify scope of practice issues and in assisting me to be the most effective practitioner I can be. I speak to the Executive Secretary of the Board of Nursing several

Senator Pearce
March 12, 1992
Page 2

times a month and my questions are answered in a timely fashion. Nurses know nursing practice better than anyone. Your vote in granting the Board of Nursing full renewal allows the nursing community to continue to deliver safe, cost effective, quality health care to all Alaskans.

Sincerely,

Tracy Freer

Tracy Freer, MS, RN, CS, ANP
Psychiatric Nurse Practitioner



Alaska
Nurses
Association

237 East Third Avenue
Anchorage, Alaska 99501
(907) 274-0827

... a constituent of American Nurses' Association

March 12, 1992

Governor Walter J. Hickel
P.O. Box A
Juneau, Alaska 99811-0001

Dear Governor Hickel:

On March 11, 1992, the Board of Directors of the Alaska Nurses Association voted to support an increase in the biennial license fee for registered nurses in order to create a financially self-supported Alaska Board of Nursing.

Sincerely,

A handwritten signature in cursive script that reads "Patricia A. Hong".

Patricia A. Hong, MA, RN, CCRN
President

cc: Ann Boudreaux, Director, Division of Occupational Licensing
Gail Stewart, RN, ANP, Chair, Board of Nursing
Representative Mark Hanley, Governor's Task Force on Boards
and Commissions

March 19, 1992

Dear Senator Pearce,

As you are aware, the Governor has appointed a task force to evaluate all Boards & Commissions. As a result, HB 1165, which renews the AK Board of Nursing for 4 years, remains in your committee. If we do not get HB 1165 approved, our Board of Nursing will cease to exist.

I am an RN and I do NOT want this to happen. The BRN is an essential part of our profession and represents over 5,000 RN's. The Board is our quality assurance. It determines education programs as well as reviewing regulations related to our Nurses Practice Act which are our scope of practice, guidelines and under which RN's practice.

If the BRN ceases to exist then all of the services that it presently provides; the NCLEX exam, peer review, impaired nurse program, regulations and standards, will have to be contracted out to an outside agency at a possible higher cost to our State. Why dismantle a cost effective and known program for an unknown?

Consumers of nursing care need to be assured of the quality of that care. Our Board of Nursing guarantees that licenses are issued only to those qualified applicants.

I ask that you carefully review this issue and vote to renew our Board of Registered Nursing. Thank-you for your attention.

Sincerely,

Judy Richards RN
Hospice & Home Care of
Sitka

P.S. Please pass this letter around to the other committee members.

J. Richards
9180 N. Douglas Hwy
Juneau AK 99801

PM
MAY 3
1992



Senator Pearce
State Capitol Rm. 101
Juneau, AK 99801-1182

hold 4th next T. F. mtg.

M.C. 2 4 1992

March 20, 1992

Dear Senator Pearce,

You may or may not recognize my name. I'm Pat Simons, a past constituent, who was your liaison for the Anchorage/Alaska PTAs about a year and a half ago. I now live with my husband in Glasgow, Scotland, on a BP secondment assignment. We still consider Alaska our home and we take a keen interest in current events of the state.

I am also a Registered Nurse. I received a letter from the Alaska Nurses Association that described a current move toward replacing the Alaska Board of Nursing with a "Super Board". I can tell you that I was alarmed that this has a very real possibility of occurring. The present Board advised that we write and explain in our own words why this is not a good idea.

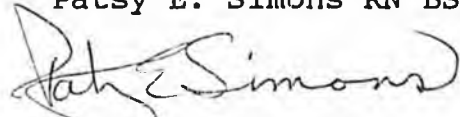
The sheer numbers of nurses in the state alone, would indicate a need for special governance and representation. In addition, there is the issue of the uniqueness of our role in healthcare for the public; not to mention the very diverse services that we provide. You will find nurses working on multiple levels of healthcare throughout the state and with all socio-economic groups. In many incidences, nurses work directly or representatively in areas where physicians, dentists, pharmacists, and ancillary healthcare providers do not. This is a fact that I hope Statespeople and nurses, Virginia Collins and Bette Davis, will attest to.

I understand that the state is making financial cut-backs. I will assume that the grouping of medical professionals under one Board is part of this movement. I would caution against any hasty action without understanding the implications for nurses and the public they serve. Nursing continues to provide many varied basic and specialized services to the public at very reasonable rates. The range of skills, experience and enhanced accessibility to healthcare should be considered. I'm sure that the Alaska Board of Nursing can offer you more detailed information regarding the broad points I've mentioned above.

Lastly, Nurses are independent practioners, who are associated with, but different from, other medical fields of practice. I am asking that you pursue HB 165, Extension of the Board of Nursing.

Thank you for your consideration.

Patsy E. Simons RN BS

A handwritten signature in cursive script, appearing to read "Patsy E. Simons".

5 Lethington Road
Whitecraigs
Glasgow, Scotland
G46 6TA

Simons
Shetkington
Whiteridge
Glasgow, Scotland
G466TA

By air mail
Par avion



Senator Dore Pearce, Chair
Labor and Commerce Committee
State Capital
Juneau, Ak 99811
USA

MAR 31 1992

Senator Drue Pearce
Alaska State Legislature
P.O. Box V (MS 3100)
Juneau, Alaska 99811

Date: 3/23/92

Dear Senator Pearce,

As you are aware, the Governor has appointed a task force to evaluate all Boards and Commissions. As a result, HB 165, which renews the Alaska Board of Nursing for four years, remains in the Labor and Commerce Committee. If HB 165 is not approved, the Board will cease to exist.

As a registered nurse, I urge you to support HB 165, and vote for full renewal for the Board of Nursing. As one of approximately 5,000 RNs in the state, I know how effective the board has been in implementing the Alaska Nurse Practice Act. The regulations written and approved by the Board are well respected and emulate throughout the country.

The Board has a major role in protecting the public from receiving care from unqualified or impaired nurses. The present structure allows for rapid, unbiased investigation and fair disciplinary action. A board with less equitable representation from the full range of nursing practice would be slower to respond to complaints from the public, as consultation from outside experts would have to be obtained.

Your vote in granting the Board of Nursing full renewal allows the nursing community to continue to deliver safe, quality health care to all Alaskans.

Sincerely,

Carol Taylor
Carol Taylor
P.O. Box 87539
Wasilla, AK 99687

MAR 27 1992

Senator Drue Pearce
Alaska State Legislature
P.O. Box V (MS 3100)
Juneau, Alaska 99811

Date: 3/23/92

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Your vote in granting the Board of Nursing full renewal allows the nursing community to continue to deliver safe, quality health care to all Alaskans.

Sincerely,

S. L. Reed

HB 165

Palmer, AK 99645

PUBLIC OPINION MESSAGE

DEAR: SENATOR PEARCE

NAME: RICK BLODGETT
TITLE:
ADDRESS: BOX 532
CITY: TELLER ZIP: 99778
PHONE: 642-3333
BILL NO: SB 433
SUBJECT: REGISTRATION OF PRIVATE AIRCRAFT
MESSAGE: I AM IN OPPOSITION OF AIRCRAFT TAXATION. AIRCRAFT IS OUR LIFE LINE.
TAXATION AND REGULATIONS ARE KILLING AVIATION./CMR

POMID: 03101956
DATE: 92/03/13
TIME: 10:19:56
LIONAME: ANCHORAGE LIO

COPIES: REPRESENTATIVES REPRESENTATIVES SENATORS

BAKER	BARNES	ADAMS
BOYER	BROWN	COLLINS
BRUCKMAN	CARNEY	COTTEN
CHOQUETTE	DAVIDSON	CRAFT
B.DAVIS	C.DAVIS	DUNCAN
DONLEY	ELLIS	ELIASON
FINKELSTEIN	FOSTER	FISCHER
GONZALES	GRUENBERG	FRANK
GRUSSENDORF	HANLEY	HALFORD
HUDSON	IVAN	HOFFMAN
JACKO	KOPONEN	JONES
KUSINA	LARSON	KERTTULA
LEMAN	LINCOLN	MENARD
MACKIE	MACLEAN	POURCHOT
MARTIN	M.A.MILLER	RODEY
M.H.MILLER	MOYER	SHULTZ
NAVARRE	PARNELL	STURGULENSKI
G.PHILLIPS	R.PHILLIPS	UEHLING
SHARP	TAYLOR	ZHAROFF
ULMER	ZAHACKI	

PUBLIC OPINION MESSAGE

DEAR: SENATOR PEARCE

NAME: JEANNE MOLITOR
TITLE:
ADDRESS: 5740 E. 98TH
CITY: ANCHORAGE ZIP: 99516
PHONE: 346-3459
BILL NO: HB 165
SUBJECT: EXTEND BOARD OF NURSING
MESSAGE: I ENCOURAGE YOU TO KEEP THE BOARD OF NURSING INTACT AND SEPARATE FROM
THE OTHER LICENSING BOARDS. /BN

POMID: 03100449
DATE: 92/03/13
TIME: 10:04:49
LIONAME: ANCHORAGE LIO

Answer



From the desk of:
Rod Mourant
Senator Drue Pearce's Office
P.O. Box V
Juneau, AK 99811
Capitol, Room 101
(907) 465-4993

PLEASE CALL DONNA
MEINERS; A LOCAL NURSE,
WHEN THIS BILL IS
SCHEDULED.

789-4748

Senator Drue Pearce
Alaska State Legislature
P.O. Box V (MS 3100)
Juneau, Alaska 99811

Date: 3/23/92

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As a registered nurse, I urge you to support HB 165, and vote for full renewal for the Board of Nursing. As one of approximately 5,000 RNs in the state, I know how effective the board has been in implementing the Alaska Nurse Practice Act. The regulations written and approved by the Board are well respected and emulate throughout the country.

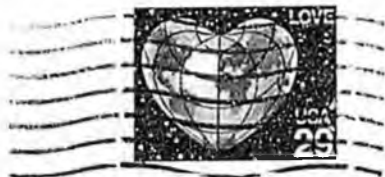
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Your vote in granting the Board of Nursing full renewal allows the nursing community to continue to deliver safe, quality health care to all Alaskans.

Sincerely,

Janice C. Barrett R.N.
School Nurse

Janice C. Barrett RN.
14004 Box 9798
Palmer, AK 99645



Senator Bruce Pease
Alaska State Legislature
PO Box 1 (711 S 3100)
Juneau, AK, 99811

MAR 31 1992

Senator Drue Pearce
Alaska State Legislature
P.O. Box V (MS 3100)
Juneau, Alaska 99811

Date: 3/23/92

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Sincerely,

Mary Moeglein RN

Mary Moeglein
P.O. Box 813146
Wasilla, AK 99687



Senator Arue Pearce
Alaska State Legislature
P.O. Box V (MS 3100)
Juneau, AK 99811

MAR 31 1992

Senator Drue Pearce
Alaska State Legislature
P.O. Box V (MS 3100)
Juneau, Alaska 99811

Date: 3/23/92

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Sincerely,

Margaret Volz, R.N.

Mat. Su School Nurse

Margaret Votz
PO Box 521456
Big Lake, AK
99652



Senator Steve Pearce
Alaska State Legislature
P.O. Box V
Juneau, AK 99811

APR 3 1992

Senator Drue Pearce
Alaska State Legislature
P.O. Box V (MS 3100)
Juneau, Alaska 99811

Date: 3/23/92

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Sincerely,

*Jeani M. Miller, RN
Wanilla Highnurse*

*Quilchik, RN
2300 Coopers Cir.
Wanilla, AK
99654*

APR 13 1992

Senator Drue Pearce
Alaska State Legislature
P.O. Box V (MS 3100)
Juneau, Alaska 99811

Date: 3/23/92

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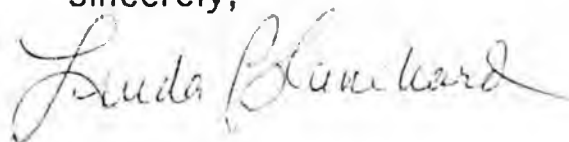
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Your vote in granting the Board of Nursing full renewal allows the nursing community to continue to deliver safe, quality health care to all Alaskans.

Sincerely,

A handwritten signature in cursive script, reading "Linda Blumhard". The signature is written in dark ink and is positioned below the typed name "Linda Blumhard".

Senator Drue Pearce
Alaska State Legislature
P.O. Box V (MS 3100)
Juneau, Alaska 99811

Date: 3/23/92

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Sincerely,

Julie Fleming, R.N.
Charlene Surman, R.N.

Boyle 7/1992
Steph-
Nurses
let's,
pls.
B

Nancy M. Hardman, BSRN
P.O. Box 772781
Eagle River, AK 99577

March 23, 1992

Senator Drew Pearce, Chairman
Senate Labor and Commerce Committee
Alaska State Legislature
State Capitol
Juneau, AK 99801-1182

Dear Senator:

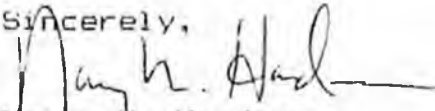
As a registered nurse I strongly object to the recommendation that the Board of Nursing be combined with other health professional boards into a consolidated Citizen's Health Board. Nurses have fought long and hard for their autonomy and, through the existing Board of Nursing, have done a good job of protecting the public health and safety, developing reasonable and uniform standards of nursing practice, and facilitating an adequate supply of nurses to meet the health care needs within the state while assuring that competent nurses provide this care.

Does Alaska really want to be the only state in the U.S. to allow adoption of a proposal which removes the governing power from the professionals who possess the knowledge so important to determine their own standards of practice? It would be equally ridiculous to propose that nurses dictate the standards for physicians, or auto mechanics, or electricians.

The abolition of this independent Board of Nursing threatens not just the quality of health care provided by nurses, but also endangers the very existence of independent nurse practitioners and certified nurse midwives who competently provide alternative health care needs so very important in this time of escalating health-care costs.

In 1991 the sunset review process, established to perform independent audits and ensure that a regulatory board functions in the manner for which it was created, recommended an eight-year extension of the Board of Nursing rather than the traditional four-year extension.

I urge you to support HB 165 which would allow for the extension of the Board of Nursing in the Department of Commerce and Economic Development, thus allowing for the continued provision of excellent care so well deserved by the citizens of Alaska.

Sincerely,

Nancy M. Hardman
Registered Nurse

MAR 27 1992

March 24, 1992
Senator Drue Pearce
Alaska State Legislature
P.O. Box V (MS3100)
Juneau, AK 99811

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Sincerely,

Rosemary A. Timmerman R.N., CCRN

Rosemary A. Timmerman R.N., CCRN
P.O. Box 520153
Big Lake, AK 99652

MAR 31 1992

March 24, 1992

Senator Drue Pearce
Labor and Commerce Committee
State Capital
Juneau, AK. 99811

Dear Drue Pearce:

I am a registered nurse writing to urge you to vote for full renewal of the Alaska Board of Nursing. The board as it is has been effective in its ability to govern and implement the Nurse Practice Act for over 5,000 nurses statewide. This must continue for quality nursing services in Alaska!! Together with the high volume of nurses and the complexity of nursing it is necessary for nurses to have their own Board (ie nursing--administration, education, Nurse Practitioners, staff & charge nurses--RN's & LPN's--supervisors, bush nursing, nurses aides/assistants and public health nursing.) As a board of nursing rapid and fair disciplinary action is possible. This would not be possible with a combined board as the knowledge base would not be available or would involve long prolonged research before action could be taken.

Other professions with smaller numbers of licensed members (MD's, Pharmacists etc) may be able to be a combined board. These do not have the complexity of various levels of function as nursing has. Nursing needs the Board of Nursing as it is now. Please vote to continue the Alaska Board of Nursing. Support HB 165!!! Thank you for your support.

Lorayne Embretson RN

Embretson/Cummings
2460 Chandalar Drive
Anchorage, AK 99504



Senator Duce Pearce
Labor and Commerce Committee
State Capital
Juneau, AK. 99811

Vicky Phillips
1625 Dolina Circle
Anchorage, AK
99508

Drue Pearce, Senator
Chair Senate Labor and Commerce Committee
Room 101, P.O. Box V
Juneau, Alaska

99811-1182

4/7/92

Dear Senator Pearce,

I am writing to express my concern over the possible dissolution of the Alaska Board of Nursing. I have been a registered nurse since 1976 and believe it is very important to have a state board of nursing. The state board of nursing protects the public through the approval process for schools of nursing, examination of applicants, regulating specialty practice (i.e. advanced nurse practitioners) and bringing disciplinary action against those who violate the practice act.

Nursing must regulate nursing practice. The current organization provides for shared services within the Division of Occupational Licensing. Nursing has only one paid staff member (the Executive Secretary) which is very cost effective. Nurses comprise 20% of the licenses in Alaska. Since there are approximately 5,000 licenses issued (@ \$90⁰⁰ each), registered nurses contribute \$450,000 biannually.

The Board of Nursing has existed since 1941 and I strongly support continuation of the Board of Nursing.

Sincerely yours,
Vicky Phillips RN
Supervisor Providence Hospital

APR 13 1992

April 7, 1992

Senator Drue Pearce
Alaska State Legislature
Juneau, Alaska 99811-0001

Dear Senator Pearce:

I have reviewed the recommendation that the Board of Nursing be combined with several other professional boards into one consolidated Citizens Health Board, and I strongly object to that recommendation. My reasons and concerns for this objection include the following:

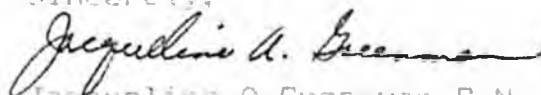
1. The regulation of nursing practice is a very complex task, and is necessary to protect the public's health. The Board of Nursing accomplishes this in several ways.
 - * It assures that licensed nurses are competent to provide safe and effective nursing care to the public.
 - * It develops reasonable and uniform standards for nursing practice.
 - * It facilitates an adequate supply of nurses to meet the health care needs within Alaska.
2. The Board approves curricula and standards for nursing education programs.
3. The Board investigates alleged violation of the Nurse Practice Act, and takes disciplinary action.
4. Such a multi-professional board would be unwieldy in accomplishing the multiple roles that are essential for safe nursing practice in Alaska. It would also be difficult to have these roles done in a timely manner.

The sunset review process was established to ensure that a regulatory board functions in the manner for which it was created. The independent audit which was completed in 1991 found that the Board of Nursing was functioning well in it's role.

It should also be noted that during F.Y. 1990 and 1991 about seventy five (75) percent of the annual cost for Nursing Board activities was covered by revenue generated from nursing licensure fees. The potential for full financial support of the Board of Nursing is there.

As a professional who has worked in the field of public health in Alaska for 34 years I have seen dramatic improvements. I strongly urge that the Board of Nursing be renewed so that all citizens of Alaska can continue to receive good and safe nursing care.

Sincerely,



Jacqueline A. Greenman R.N., M.P.H.

April 7, 1992

Senator Drue Pearce
Alaska State Legislature
Juneau, Alaska 99811-0001

3127 Pleasant Dr.
Anch. Alaska 99502

Dear Senator Pearce:

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As a professional who has worked in the field of public health in Alaska for 34 years I have seen dramatic improvements. I strongly urge that the Board of Nursing be renewed so that all citizens of Alaska can continue to receive good and safe nursing care.

Sincerely,

Anna Belle Engbers RN

AnnaBelle Engbers R.N., B.S.

APR 14 1992

Marjorie VanKooten
3127 Pleasant Hill
Anchorage, Alaska 99502

Senator Drue Pearce
Alaska State Legislature
Juneau, Alaska 99811-0001

Dear Senator Pearce:

I have reviewed the recommendation that the Board of Nursing be combined with several other professional boards into one consolidated Citizens Health Board, and I strongly object to that recommendation. My reasons and concerns for this objection include the following:

1. The regulation of nursing practice is a very complex task, and is necessary to protect the public's health. The Board of Nursing accomplishes this in several ways.
 - * It assures that licensed nurses are competent to provide safe and effective nursing care to the public.
 - * It develops reasonable and uniform standards for nursing practice.
 - * It facilitates an adequate supply of nurses to meet the health care needs within Alaska.
2. The Board approves curricula and standards for nursing education programs.
3. The Board investigates alleged violation of the Nurse Practice Act, and takes disciplinary action.
4. Such a multi-professional board would be unwieldy in accomplishing the multiple roles that are essential for safe nursing practice in Alaska. It would also be difficult to have these roles done in a timely manner.

The sunset review process was established to ensure that a regulatory board functions in the manner for which it was created. The independent audit which was completed in 1991 found that the Board of Nursing was functioning well in it's role.

It should also be noted that during F.Y. 1990 and 1991 about seventy five (75) percent of the annual cost for Nursing Board activities was covered by revenue generated from nursing licensure fees. The potential for full financial support of the Board of Nursing is there.

As a professional who has worked in the field of public health in Alaska for 34 years I have seen dramatic improvements. I strongly urge that the Board of Nursing be renewed so that all citizens of Alaska can continue to receive good and safe nursing care.

Sincerely,

Marjorie VanKooten, RN

Marjorie VanKooten R.N.

Walter J. Hickel
GOVERNOR



APR 16 1992
PHONE
(907) 561-4227

STATE OF ALASKA
OFFICE OF THE GOVERNOR

Governor's Commission
On Children & Youth
3601 C St, Suite 742
Anchorage, AK 99503

April 10, 1992

Senator Drue Pearce
Senate Labor & Commerce Committee
Alaska State Legislature
State Capitol
Juneau, Ak 99801-1182

Dear Senator Pearce:

Young residents are particularly at risk because 90% of smokers begin cigarette addiction before they reach the age of 19.

In our small state we continue to loose many people to cigarette related deaths because of the early start up of children smoking. Cigarettes cause more premature death than AIDS or the use of heroin.

The Commission supports the passage of CSHB84 as a practical method of deterring children from smoking cigarettes.

Sincerely,

A handwritten signature in cursive script that reads "Glenn Ralls".

Glenne Ralls
Commission on Children and Youth

cc: Senator Collins
Senator Eliason
Senator Halford
Senator Kerttula



Alaska
Nurses
Association

237 East Third Avenue
Anchorage, Alaska 99501
(907) 274-0827

... a constituent of American Nurses' Association

April 24, 1992

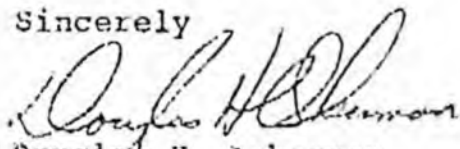
Senator Drue Pearce
Alaska State Senate
State Capitol
Juneau, AK 99801-1182

Dear Senator Pearce:

The Alaska Nurses Association understands that HB 165 (relating to the Board of Nursing) will be heard in the Senate Labor & Commerce Committee on Friday May 1, 1992. It is also our understanding that HB 382 (relating to the Practice of Midwifery) will be heard in the same committee on Wed, April 29, 1992. As I am sure you are aware both of these bills are of importance to our membership.

The Association requests the opportunity for Teleconferencing of HB 165 in both Anchorage and Fairbanks. Additionally we request the opportunity for Teleconferencing of HB 382 in Anchorage.

Sincerely


Douglas H. Askerman
Executive Director

Nursing's Agenda for Health Care Reform

EXECUTIVE SUMMARY

America's nurses have long supported our nation's efforts to create a health care system that assures access, quality, and services at affordable costs. This document presents nursing's agenda for immediate health care reform. We call for a basic "core" of essential health care services to be available to everyone. We call for a restructured health care system that will focus on the consumers and their health, with services to be delivered in familiar, convenient sites, such as schools, workplaces, and homes. We call for a shift from the predominant focus on illness and cure to an orientation toward wellness and care. The basic components of nursing's "core of care" include:

- A restructured health care system which:
 - Enhances consumer access to services by delivering primary health care in community-based settings.
 - Fosters consumer responsibility for personal health, self care, and informed decision making in selecting health care services.
 - Facilitates utilization of the most cost-effective providers and therapeutic options in the most appropriate settings.
- A federally-defined standard package of essential health care services available to all citizens and residents of the United States, provided and financed through an integration of public and private plans and sources:
 - A public plan, based on federal guidelines and eligibility requirements, will provide coverage for the poor and create the opportunity for small businesses and individuals, particularly those at risk because of preexisting conditions and those potentially medically indigent, to buy into the plan.
 - A private plan will offer, at a minimum, the nationally standardized package of essential services. This standard package could be enriched as a benefit of employment or individuals could purchase additional services if they so choose. If employers do not offer private coverage, they must pay into the public plan for their employees.
- A phase-in of essential services, in order to be fiscally responsible:
 - Coverage of pregnant women and children is critical. This first step represents a cost-effective investment in the future health and prosperity of the nation.
 - One early step will be to design services specifically to assist vulnerable populations who have had limited access to our nation's health care system. A "Healthstart Plan" is proposed to improve the health status of these individuals.
- Planned change to anticipate health service needs that correlate with changing national demographics.
- Steps to reduce health care costs include:
 - Required usage of managed care in the public plan and encouraged in private plans.
 - Incentives for consumers and providers to utilize managed care arrangements.
 - Controlled growth of the health care system through planning and prudent resource allocation.
 - Incentives for consumers and providers to be more cost efficient in exercising health care options.
 - Development of health care policies based on effectiveness and outcomes research.
 - Assurance of direct access to a full range of qualified providers.
 - Elimination of unnecessary bureaucratic controls and administrative procedures.
- Case management will be required for those with continuing health care needs. Case management will reduce the fragmentation of the present system, promote consumers' active participation in decisions about their health, and create an advocate on their behalf.
- Provisions for long-term care, which include:
 - Public and private funding for services of short duration to prevent personal impoverishment.
 - Public funding for extended care if consumer resources are exhausted.
 - Emphasis on the consumers' responsibility to financially plan for their long-term care needs, including new personal financial alternatives and strengthened private insurance arrangements.
- Insurance reforms to assure improved access to coverage, including affordable premiums, reinsurance pools for catastrophic coverage, and other steps to protect both insurers and individuals against excessive costs.
- Access to services assured by no payment at the point of service and elimination of balance billing in both public and private plans.
- Establishment of public/private sector review -- operating under federal guidelines and including payers, providers, and consumers -- to determine resource allocation, cost reduction approaches, allowable insurance premiums, and fair and consistent reimbursement levels for providers. This review would progress in a climate sensitive to ethical issues.

Additional resources will be required to accomplish this plan. While significant dollars can be obtained through restructuring and other strategies, responsibility for any new funds must be shared by individuals, employers, and government, phased in over several years to minimize the impact.

1992 LEGISLATIVE SESSION

Revision Date: 04/27/92 Department Affected: Commerce & Economic Development
 Title: An Act extending the Board of Nursing... BRU: Occupational Licensing
 Component: Administration

Sponsor: House Rules/GovernorRequestor: Senate Labor & CommerceCOMPONENT SERIAL NO.

0	3	5	6
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Expenditures/Revenues: (Thousands of Dollars)

OPERATING	FY 93	FY 94	FY 95	FY 96	FY 97	FY 98
PERSONAL SERVICES	0.0	0.0	0.0	0.0	0.0	0.0
TRAVEL	0.0	0.0	0.0	0.0	0.0	0.0
CONTRACTUAL	0.0	0.0	0.0	0.0	0.0	0.0
SUPPLIES	0.0	0.0	0.0	0.0	0.0	0.0
EQUIPMENT	0.0	0.0	0.0	0.0	0.0	0.0
LAND & STRUCTURES	0.0	0.0	0.0	0.0	0.0	0.0
GRANTS, CLAIMS	0.0	0.0	0.0	0.0	0.0	0.0
MISCELLANEOUS	0.0	0.0	0.0	0.0	0.0	0.0
TOTAL OPERATING	0.0	0.0	0.0	0.0	0.0	0.0

CAPITAL	0.0	0.0	0.0	0.0	0.0	0.0
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REVENUE	0.0	0.0	0.0	0.0	0.0	0.0
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FUNDING: (Thousands of Dollars)

GENERAL FUND	0.0	0.0	0.0	0.0	0.0	0.0
FEDERAL FUNDS	0.0	0.0	0.0	0.0	0.0	0.0
OTHER	0.0	0.0	0.0	0.0	0.0	0.0
TOTAL	0.0	0.0	0.0	0.0	0.0	0.0

POSITIONS:

FULL-TIME	0.0	0.0	0.0	0.0	0.0	0.0
PART-TIME	0.0	0.0	0.0	0.0	0.0	0.0
TEMPORARY	0.0	0.0	0.0	0.0	0.0	0.0

Estimate of current year impact: None

ANALYSIS: (Attach a separate page if necessary)

Funding for the Board of Nursing is included in the department's FY 93 operating budget request and, therefore, new funds are not required. Estimated costs for the Board of Nursing are explained on the attached page.

Prepared By: Jennifer Strickler *CS* Phone: 465-2144Division: Occupational Licensing Date: 04/27/92Approved by Commissioner: Glenn A. Olds *Glenn A. Olds*Agency: Department of Commerce & Economic Development Date: 4-29-92

Distribution (by preparer): Legislative Finance, Legislative Sponsor, Requestor, OMB, & Impacted Agency(ies).

CONTINUATION OF FISCAL NOTE ANALYSIS - HB 165

The Division of Occupational Licensing, Department of Commerce & Economic Development, is funded primarily by program receipts generated from licensing fees. All licensing programs share in the responsibility of covering administrative costs which are based on the number of current program licensees divided by the total number of current division licensees plus, the direct program costs.

BOARD OF NURSING

Average Annual Cost: \$ 457.6

Average Annual Revenue: \$ 346.8

The Division of Occupational Licensing is currently working on a regulation project that will adjust licensing fees so that revenue will cover or come close to reflecting the entire costs of administering the program.

HB 165: "An Act extending the Board of Nursing in the Department of Commerce and Economic Development; and providing for an effective date."

The Board of Nursing is responsible for the regulation and licensing of the nursing profession in the state. Under AS 08.03.010(c)(15), the Board of Nursing terminated on June 30, 1991. HB 165 will extend the termination date of the board to June 30, 1995. The statutory authority in Section 1 of the bill requires a correction to reflect the appropriate subsection for the Board of Nursing which should read: AS 08.03.010(c)(15).

There are approximately 6,169 nurses licensed in Alaska. The department concurs with the findings documented in the performance audit conducted by the Division of Legislative Audit; in particular, that the board is necessary to protect the public's health, safety, and welfare, therefore, the board should be reestablished.

The department strongly supports continuation of the Board of Nursing and requests favorable support in passage of HB 165.

Glenn A. Olds Asst Comm

Glenn A. Olds, Commissioner

Date: 4-29-92

ALASKA STATE LEGISLATURE
HOUSE BILL NO. 165

HISTORY IN THE HOUSE

1991

2/25 Read first time and referred to:
HES L&C FIN

4/22 HES RPT CS() New Title
6 DP DNP NR AM
FN OFN Previous FN

5/3 L&C RPT CS() New Title
5 DP DNP NR AM
FN OFN Previous FN

5/10 FIN RPT CS() New Title
10 DP DNP NR AM
FN OFN Previous FN

5/13 Read second time
CS() Adopted

Amended
5/13 NOT advanced

5/14 Advanced

5/14 Read third time

Return to second for specific amendment

5/14 PASSED EFD Same or
Yeas 39 Yeas
Nays 2 Nays
Excused 1 Excused
Absent Absent

Intent adopted

Reconsideration
Reconsideration not taken up

PASSED ON RECON. EFD Same or
Yeas Yeas
Nays Nays
Excused Excused
Absent Absent

Intent adopted

5/14 Reported correctly engrossed
Signed by Speaker, to the Senate

Kristen Gray
Chief Clerk of the House

HISTORY IN THE SENATE

1991

5/15 Read first time and referred to:
L&C

RPT() CS DP NR DNP AM
New Title Same Title Previous FN
FN OFN To

RPT() CS DP NR DNP AM
New Title Same Title Previous FN
FN OFN To

RPT() CS DP NR DNP AM
New Title Same Title Previous FN
FN OFN To

Rules Calendar() CS AM Other
New Title Same Title Previous FN
FN OFN

Read second time

CS Adopted () New Title
Amended Advanced

Read third time

Letter of Intent adopted
Return to second for specific amendment

PASSED EFD Same or
Yeas Yeas
Nays Nays
Excused Excused
Absent Absent

Reconsideration
Reconsideration not taken up

PASSED EFD Same or
Yeas Yeas
Nays Nays
Excused Excused
Absent Absent

Reported correctly engrossed
Signed by President, to the House

Secretary of the Senate

ALASKA BOARD OF NURSING
ANNUAL PERFORMANCE REPORT
FISCAL YEAR 1991

Prepared by:

Gail M. McGill, RN
Executive Secretary
August 30, 1991

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Addendum F - Letter to Tina DeLapp, RN, Ed D

BOARD OF NURSING
MEMBERS AND STAFF
JUNE 30, 1991

BOARD MEMBERS

Janet L. Bunes, R.N., B.S.N. P. O. Box 1192 Wrangell, AK 99929	March 31, 1991
Louise Dean (Public Member) 1911 Waldron Drive Anchorage, AK 99507	March 31, 1994
Tina DeLapp, R.N., Ed. D 13101 S. Bragaw Anchorage, AK 99516	March 31, 1993
Kathi Hewitt, L.P.N., Secretary 1660 Peger Road Fairbanks, AK 99709	March 31, 1991
Gail Stewart, R.N., A.N.P., Chairperson 12220 Rainbow Avenue Anchorage, AK 99516	March 31, 1992
Mary Stroeing, R.N. P. O. Box 020267 Juneau, AK 99802	March 31, 1994
Georgianna Waskey (Public Member) Box 1432 Bethel, AK 99559	March 31, 1991

BOARD STAFF

Gail M. McGuill, R.N.
Executive Secretary
Anchorage, AK

Kym Walker and Linda Gohl
Licensing Examiners
Juneau, AK

Dorothy Fulton, R.N., M.A.
Nurse Aide Program Manager
Anchorage, AK

NARRATIVE SUMMARY

The Alaska Board of Nursing is glad to provide you with the Annual Report for Fiscal Year 1991. This Annual Report reflects the Board's continued attention and support for acceptable standards in nursing education and nursing practice in Alaska. The members of the Board take their responsibility to protect the public seriously and look forward to another year of service to the Alaskan consumers of nursing care.

Membership on the Board of Nursing remained constant this year. Three members have terms expiring March 31, 1991, however, are continuing to serve until Governor Walter Hickel replaces them.

The Board of Nursing conducted three two-day meetings and held two telephone conference calls. One conference call was a regularly scheduled meeting and the other was to take action on disciplinary matters. A wide range of issues was addressed by the Board at its meetings and is detailed in the review of prior year objectives.

The influx of registered nurses leveled off this year even though several facilities are still using traveling nurses to supplement staff. The nursing shortage has encouraged more LPN's to make the transition to RN through additional formal education. New strategies are being used to attempt to get nursing education programs into smaller Alaska communities in order to help increase the local supply of registered nurses.

The members of the Board of Nursing serving during FY 91 included:

Janet Bunes, RN,
Louise Dean, Public Member
Tina DeLapp, RN, EDD
Kathi Hewitt, LPN
Gail Stewart, RN, ANP, Chairperson
Mary Stroeing, RN
Georgianna Waskey, Public Member

Division of Occupational Licensing staff assisting the Board of Nursing during FY 91 were:

Gail M. McGill, RN, Executive Secretary
Kym Walker, Licensing Examiner
Linda Gohl, Licensing Examiner
Dorothy Fulton, RN, Nurse Aide Program Manager
Kevin Henderson, Regulations Specialist
Dorothy Hansen, Investigator
Robert Harrington, Investigator
Gary Veres, Chief Investigator

The Board of Nursing also recognizes and appreciates the assistance to the Board and staff by Assistant Attorneys General Linda O'Bannon and Mary Pinkle.

STATISTICAL OVERVIEW

General Statistics

The licensing activities for the Board of Nursing can be reviewed on the following pages. Table I provides information on the number of permits and licenses issued during fiscal year 1991. This table also indicates the number of active licensees and information on the numbers of advanced nurse practitioners and registered nurse anesthetists.

The number of registered nurses licensed declined over FY 90 but remained stable for practical nurses. The decrease in registered nurses was 20% from FY 90; however, was still higher than the most recent years.

A review of Table II, Five Year Summary FY 1987-1991 shows an average of 549 RN's and 86 LPN's per year in the five years from 1987-1991.

Table III, Disciplinary Summary and Table IV, Enforcement Activity provide information on the investigation and litigation activity for FY 91.

Included in this section is Table V which reports statistics for nurse aide activity for FY 91.

Board of Nursing Activity

The Board of Nursing met five times during FY 91. The dates and places were:

September 6, 7, 1990	Soldotna
November 1, 31, 1990	Anchorage
February 21, 22, 1991	Anchorage Teleconference meeting: included Anchorage, Fairbanks, Mt. Village & Wrangell
March 28, 1991	Anchorage
May 9, 1991	Teleconference meeting: included Anchorage, Fairbanks, Juneau, Mt. Village & Wrangell

LICENSING ACTIVITY
FISCAL YEAR ENDING JUNE 30, 1991

<u>ACTIVITY FY 91</u>	<u>RN's</u>	<u>LPN's</u>
Temporary Permits Issued by Exam	64	7
Temporary Permits Issued by Endorsement	316	26
TOTAL PERMITS	380	33
Licensed by Examination	85	25
Licensed by Endorsement	512	81
TOTAL LICENSED DURING FY 91	597	106
Active Licenses	4,775	766
Lapsed	9,504	3,845
GRAND TOTAL LICENSED SINCE 1941	14,279	4,611

ADVANCED PRACTICE AUTHORIZATIONS FY 91

	<u>ANP</u>	<u>RNA</u>
Temporary Permits	4	
Preceptorship Permits	2	
Initial Authorizations	21	17
Active Authorizations	159	69
Lapsed	78	48
Grand Total	237	117

NOTE: Advanced Nurse Practitioner (ANP), Registered Nurse Anesthetists (RNA)

TABLE II

NURSE LICENSING ACTIVITY
FIVE YEAR SUMMARY FY 1987 - 1991

Registered Nurse	<u>1987</u>	<u>1988</u>	<u>1989</u>	<u>1990</u>	<u>1991</u>
Endorsement	328	383	465	654	512
Exam	<u>88</u>	<u>67</u>	<u>75</u>	<u>89</u>	<u>85</u>
TOTAL	<u>416</u>	<u>450</u>	<u>540</u>	<u>743</u>	<u>597</u>
Licensed Practical Nurse	<u>1987</u>	<u>1988</u>	<u>1989</u>	<u>1990</u>	<u>1991</u>
Endorsement	44	56	84	95	81
Exam	<u>9</u>	<u>10</u>	<u>14</u>	<u>12</u>	<u>25</u>
TOTAL	<u>53</u>	<u>66</u>	<u>98</u>	<u>107</u>	<u>106</u>
Five Year Average Licensed per year	Registered Nurses				549
	Licensed Practical Nurses				86

BOARD OF NURSING
DISCIPLINARY SUMMARY

FY 91

Investigations

Cases Pending July 1, 1990	<u>24</u>
New Cases Opened During FY 91	<u>27</u>
Cases Closed	<u>21</u>
Cases Closed Without Action	<u>15</u>
Cases Forwarded to Litigation (i.e., Formal Action Being Pursued)	<u>2</u>
Total Number of Cases under Investigation as of June 30, 1991	<u>30</u>

Litigation

Cases Pending July 1, 1990	<u>0</u>
Cases Opened During FY 91	<u>2</u>
Discipline Imposed	<u>1</u>
Total Number of Cases in Litigation as of June 30, 1991	<u>1</u>

Ongoing Disciplinary Monitoring

Cases Pending July 1, 1990	<u>16</u>
Discipline Cases Transferred to Monitoring in 1991	<u>2</u>
Monitored Cases Closed	<u>4</u>
Total Number of Cases Being Monitored as of June 30, 1991	<u>14</u>

STATE OF ALASKA
ENFORCEMENT ACTIVITY
FY 91

A. Accusations	<u>0</u>
B. Cease and Desist Orders	<u>0</u>
C. Licenses Denied (Statement of Issues)	<u>3</u>
D. Licenses Suspended (Including Summary Suspension)	<u>0</u>
E. Licenses Revoked	<u>0</u>
F. Memorandums of Agreement	<u>4</u>
G. Stipulations	<u>0</u>
H. Letters of Reprimand	<u>0</u>
I. Probation	<u>2</u>
J. Fines	<u>0</u>
K. Cases Dismissed (by AG)	<u>0</u>
L. Hearings	<u>0</u>
M. Licenses Surrendered	<u>2</u>
N. Compliance	<u>0</u>

Examination Statistics

The Board of Nursing in conjunction with the Division of Occupational Licensing administered the National Council Licensing Examination for licensure by exam for practical nurses and registered nurses. Examinations were administered according to contract and security measures with the National Council State Boards of Nursing by the Executive Secretary, Program Manager Licensing Examiner, Board Members and Registered Nurse Proctors. The following are dates and places that the exams for this reporting period were given:

July 11-12, 1990	Series 790 (RN)	Anchorage, Juneau and Fairbanks
October 16, 1990	Series 090 (PN)	Anchorage and Juneau
February 5-6, 1991	Series 291 (RN)	Anchorage and Juneau
April 16, 1991	Series 491 (PN)	Anchorage

Table VI, Exam Results for Alaska Candidates, provides information on the pass rate for first time and other candidates on all exams administered in Alaska. Information is provided on the number of first time candidates taking the exam who are graduates of a school of nursing in the United States. The other category includes candidates who are repeating the exam and/or who have graduated from foreign schools of nursing.

Table VII, Alaska Schools of Nursing Exam Results, data shows the percentages of passing scores for Alaska candidates on exams given in the state. These tables reflect information for University of Alaska graduates from the BSN and ADN programs as well as for Everett Community College graduates who completed the Ketchikan program.

The statistical information on the performance of Alaska graduates on the examination is important to the Board of Nursing when they review the nursing programs.

NURSE AIDE ACTIVITY

FY 91

Nurse Aides Certified:	
by Examination	283
by Deemed Status	245
by Endorsement	119
Total Certified to Registry	647
Grand Total	1,166

EXAM RESULTS FOR ALASKA CANDIDATES

RESULTS OF RN EXAM BY TYPE OF CANDIDATE

<u>Series</u>	<u># 1st time</u>	<u># Pass</u>	<u>% Pass</u>	<u># Others</u>	<u># Pass</u>	<u>% Pass</u>
790	62	60	97%	21	4	19%
291	14	14	100%	14	7	50%
Total	76	74	97%	35	11	31%

RESULTS OF FN EXAM BY TYPE OF CANDIDATE

<u>Series</u>	<u># 1st Time</u>	<u># Pass</u>	<u>% Pass</u>	<u># Other</u>	<u># Pass</u>	<u>% Pass</u>
090	9	7	78%	9	4	44%
491	11	11	100%	6	3	50%
Total	20	18	90%	15	7	47%

Note: Alaska does not have a practical nurse education program.

TABLE VII

ALASKA SCHOOLS OF NURSING EXAM RESULTS
First Time Candidates

<u>Series</u> <u>790</u>	<u>School</u>	<u>N</u>	<u>N Passed</u>	<u>% Passed</u>
	Everett Community College (Ketchikan campus)	5	5	100%
	Univ. of Alaska ADN	29	27	93%
	Univ. of Alaska BSN	17	17	100%
	Alaska Total	51	49	96%
	All U.S. Jurisdictions	52,286	48,032	92%
<u>Series</u> <u>291</u>				
	Univ. of Alaska BSN	12	12	100%
	Alaska Total	12	12	100%
	All U.S. Jurisdictions	15,192	13,845	91%

SUNSET AUDIT RECOMMENDATIONS

The Division of Legislative Audit released the Audit Report on the Board of Nursing on October 11, 1990.

The report concluded the Board of Nursing should be reestablished for eight years. This was based upon the auditors' conclusions. The Board of Nursing has consistently been found to satisfy a public purpose and the Board's business is conducted in a professional, competent and efficient manner.

No recommendations for improvement were made.

REVIEW OF PRIOR YEAR OBJECTIVES

FY 90

1. Objective: The Board of Nursing will continue to define, review, maintain, develop and interpret standards of nursing care that protect the Alaska consumer.

Actions:

This objective is seen by the Board as one of its most important continuing responsibilities. The Board advises staff on issues related to scope of practice. This year the Board denied expanding the RN scope to include suturing. The Board supported expansion of practice to legally allow Registered Nurses to pronounce death under certain circumstances. The Alaska Nurses Association pursued a legislative charge to allow this practice and were successful.

The Board also addressed issues related to Advanced Nurse Practitioner scope of practice. The Boards actions based upon the regulations do not allow ANP's to practice outside the scope identified by the certifying body.

The Executive Secretary continuously responds to inquiries regarding scope of practice issues by utilizing the Board's position statement "Registered Nurse and Advanced Nurse Practitioner Scopes of Practice" and past interpretive statements.

2. Objective:

The Board of Nursing through the Division of Occupational Licensing will continue to license individuals in a timely manner consistent with the Alaska Statutes and Regulations and Board of Nursing Policy.

Actions:

The Licensing Examiner for the Board of Nursing processes all applications for licensure. Completed files are reviewed by the Executive Secretary, Program Manager or Board members and approved for licensure as appropriate. All applications which fall out of the parameters are reviewed and acted upon by the Board. The full Board acted upon three RN applications, two LPN applications and one ANP application.

The Board of Nursing continues to contract with the National Council State Boards of Nursing for use of the national licensing exams for registered and practical nursing. In accordance with provisions of the contract, the Board nominated interested registered nurses for service as content experts and item writers. The National Council chose Mary Sue Nikodym, RN of Wrangell to serve as a Practical Nurse item writer.

It is appropriate here to discuss the results of the Continued Competency Audits. The audit was managed differently for this most recent renewal. The random selection was chosen prior to the mailing of renewal notices. If the nurse was part of the audit at renewal, a letter was sent requesting documentation and the nurses license was renewed for only six months. Once the documentation was submitted and accepted another license was issued for the remainder of the licensing period. This procedure helped the compliance with the audit. As of June 30, 1991, 79% of the LPNs and 94% of the RNs had complied with the audit request. Those who didn't comply, now have a lapsed license.

3. Objective:

Maintain the Board's regulatory function related to nursing education programs.

Actions:

The Schools of Nursing annual reports were reviewed and discussed by the Board at the November meeting. The University of Alaska Baccalaureate Nursing Program and Associate Degree Nursing Program continue to be fully approved by the Board.

The Everett Community College Associate Degree Nursing Program completed it's offering in Ketchikan with all graduates taking the exam being successful on the RN licensure exam.

The Board held a public open forum in Soldotna in September, 1991. As a result of that meeting, the UAA Associate Degree Nursing Program began offering it's program of study in Sldotna. Sheldon Jackson College in Sitka has began discussion with the Board regarding the offering of a Baccalaureate Nursing Program there. Inquiries have also been made by Alaska Technical Center in Kotzebue.

Through the efforts of Dr. Tina DeLapp, Board member, the guidelines for approval of nursing education program were revised and adopted by the Board for use.

4. Objective:

Advise the Investigative Staff regarding Nurse Practice Act violations as necessary and to act upon cases as indicated after litigation hearings. Continue to utilize appropriate probationary agreements in lieu of contested hearings.

Actions:

In order to protect the objectivity of the Board members, limited advice is requested from the Board. The Board takes action to close cases under investigation. The Board's

Executive Secretary and at times individual Board Members provide more in-depth advice and assistance to the investigator.

A summary of the disciplinary action by the Board reflects the Board's objective for utilizing stipulations for nurses recovering from chemical dependency. One registered nurse and one licensed practical nurse were placed on probation. The Board accepted license surrender from one RN and one LPN. The Board denied licenses to two registered nurses, one licensed practical nurse, and denied authorization as a family nurse practitioner to a certified nurse midwife.

Three RNs and one LPN were reinstated after completing terms of probation during this fiscal year.

5. Objective.

Continue to implement procedures for monitoring probationary agreements. Review progress of nurses with stipulated licenses at each Board meeting.

Dorothy Fulton, RN, MA, monitors the nurses on probation for the Division. This process involves requesting and follow-up of drug screening, employer and counselor reports. The nurses are periodically interviewed and AA/NA documentation is reviewed. Telephone communication is maintained with all nurses in the Board's monitoring program.

Reports were given to the Board at each regularly scheduled meeting about the progress of those nurses on probation. Requests for appropriate release from terms of agreements such as counseling are taken up by the Board during the probation report time.

The procedures have been refined as the number of nurses in the program increased and are functioning well for our purposes.

6. Objective:

Participate in the Division Task Force on Impaired Health Practitioners and support efforts to seek legislation for alternatives to disciplinary sanctions and for uniform procedures for all health regulatory boards.

Actions:

Gail Stewart, Chairperson and Gail McGill, Executive Secretary served as Board representative and staff of the Task force during the year. The Task Force concluded the year with a proposed plan for the Alaska Practitioner Recovery

Program (APRP) which will be an alternative to discipline for chemically addicted licensed health care professionals. The health regulatory board representatives have been phased out of the Task Force and the representatives of the health professional organizations will remain to promote development of the APRP. They have drafted legislation supported by the Boards to allow the APRP as an alternative to the discipline process.

7. Objective:

Review and revise regulations to comply with Statutes as needed.

Develop and implement regulations to bring Alaska into compliance with P.L. 100-203, including program approval, competency testing, certification and registry for nurse aides in conjunction with other state agencies as appropriate.

Actions:

The Nurse Aide Program Manager drafted language for regulations and forwarded these to the Division regulation specialist for formatting and to begin the formal regulatory process. This process was begun in FY 90. Other projects in the Division have had priority over this regulation project.

We anticipate activity in the next fiscal year on this project.

b. Amend Registered Nurse Anesthetist regulations to provide for the regulatory authority of the RNA to prescribe drugs.

Actions:

New regulations authorizing Registered Nurse Anesthetists (RNA) to prescribe legend drugs and controlled substances were drafted early in the year. The proposed regulations were public noticed May 15, 1991. The Board will review the comments at their first meeting in FY 92. (See Addendum A)

8. Objective:

Take public comment on the recommendations of the final report from the level of Entry Subcommittee. Begin to develop statutory and regulatory changes based upon committee's recommendations and public comment.

Actions:

Some public comment was received on the report of the Level of Entry Subcommitty. No further work was undertaken an this objective.

9. Objective:

Increase awareness by licensees and consumers of Board of Nursing activities. Continue to provide continuing education offerings on the Nurse Practice Act, Position Papers, regulations and related issues.

Actions:

The Board's Executive Secretary, Gail McGuill, has continued to provide educational offerings on the Alaska Nurse Practice Act, regulations and position statements.

Ms. McGuill writes a column, "Notes from the Board of Nursing" which is published in the Alaska Nurse bimonthly magazine. During the past year, she addressed several classes at both schools of nursing and meetings of the Alaska Nurses' Association District One, Alaska Nurses Association State Convention, Sigma Theta Tau Nursing Health Society and several health care facilities, Alaska Hospital and Nursing Home Association. She also responded to individual and groups of nurses with questions related to nursing practice issues. A total of 23 presentations were made between July 1990 and May 1991 to groups of nurses.

In November, 1990, Ms. McGuill addressed the annual meeting of the AARP Consumer Advocacy Center. This presentation was made in Washington, D.C. before consumer members of health regulatory boards. Ms. McGuill spoke as regulation of advanced nurse practitioners.

This past year, Ms. McGuill was appointed by Commissioner Ted Mala to a task force to address public health nursing and other nursing issues. This task force is now called the Alaska Nurse Leadership Council and Ms. McGuill continues to be an active member of that group.

The fact sheet on the continued competency regulations continues to be used and was updated to reflect the most current information. It includes a form to assist nurses in documenting volunteer professional activities and employment. This has helped provide essential information on these regulations which went into effect with the 1988 renewal.

One of the presentations Ms. McGuill presents is called "When Nurses Need Help." It is done with Cynthia Gough, RN, an addictions nurse and a nurse who is recovering from an addiction. The offering is accredited for 2.4 contact hours of continuing education by the Alaska Nurses Association.

10. Objective:

Continue to increase Board awareness and involvement in National Council State Boards of Nursing (NCSBN) activities by reviewing reports on NCSBN activities and by seeking funding for Board member attendance at NCSBN meetings. Provide

educational sessions on computer adaptive testing and computer simulated testing for use with NCLEX to improve Board members' knowledge base.

Actions:

The best way to increase Board member knowledge is direct involvement in NCSBN activities. This has been very positive with Dr. Tina DeLapp's continuing membership on the NCSBN Nursing Practice and Education Committee. This year Gail Stewart was appointed to the NCSBN committee on advanced practice.

This participation at the NCSBN meetings has helped the Board members to understand their roles and to provide a better service to the state in protection of the public.

Gail McGill, Executive Secretary, continues on the NCSBN Board of Directors as the Area I Director representing the Western United States. Her participation at the national level has helped the Alaska Board of Nursing to be on the leading edge of nursing regulation.

The Executive Secretary continues to provide reports and information on Council matters to the Board members for review. Board member participation in Council activities and member Board surveys is encouraged.

Kathi Hewitt, Board member, attended the August 1990, annual meeting of the NCSBN in Portland, Maine.

Mary Stroeing, Board member, attended the Spring Area I meeting in March 1991 in Jacson Hole, Wyoming.

11. Objective:

Followup on the recommendations from the report on nursing in Alaska correctional facilities by a followup visit to correctional facilities and a report to the Board.

Actions:

Gail Stewart, Chair and Gail McGill, Executive Secretary, visited Spring Creek, Wildwood, Wildwood Pretrial, Hiland Mountain and Meadow Creek Correctional facilities in September, 1990. All issues which had been raised in the 1989 report were examined. Nine recommendations were made in the report which are intended to assist correctional staff to improve delivery of nursing services. One recommendation related to management of controlled drugs will require followup which should occur in Fall 1991. (Addendum B)

12. Objective:

Review problems with foreign nurse graduates not being successful on the exam and alternatives for helping them. Prepare an information sheet on licensing of foreign nurse graduates to assist those nurses in seeking licensure.

Actions:

Individual counseling and assistance of foreign educated nurses with the licensing process is an ongoing activity for Board staff.

The Board reviewed information related to the Commission on Graduates of Foreign Nursing Schools. (CGFNS), its exam, and pass rates on NCLE - RN of CGFNS certificate holders. It was the Board's decision to recommend a statute change to no longer issue temporary permits to CGFNS holders. Recent experience in Alaska shows a poor pass rate for foreign educated nurses with permits who are employed. This has the potential for danger to the public when nurses can not demonstrate entry level competence by passing the licensure exam.

A fact sheet on licensure of foreign educated nurses was developed and approved by the Board for use. This fact sheet is sent to foreign educated nurses who inquire about licensing in Alaska. (Addendum C)

13. Objective:

Review the Board's current practice of licensure endorsement for Canadian nurses who took the Canadian Nurses Association Test Services (CNATS) exam in relation to the 1989 paper issued by National Council State Board's of Nursing on a comparison of CNATS to NCLEX-RN. Revise Alaska Statutes and/or regulations if indicated.

Actions:

The Board reviewed the information on CNATS as compared to NCLEX-RN. Based upon this analysis, it is the Board's opinion that CNATS is not equivalent to NCLEX-RN. The Alaska Statutes 08.68.200 allow the Board to determine if CNATS is comparable to the exam administered by this state. Consequently a regulation change to 12AAC 44.310(d) was public noticed May 15, 1991. This change sets a cut off date of July, 1992 for accepting the CNATS exam. (See Addendum A)

14. Objective:

Update the guidelines for RN & LPN refresher courses.

Actions:

In March 1991, Gail McGuill requested copies of refresher course or reentry course guidelines from other states. This information will be compiled and used to revise Alaska's guidelines in the Fall 1991.

15. Objective:

Provide consultation to long-term care facilities and home health care agencies on the nurse aide/home health aide education program approval process, competency testing, certification and inservice education requirements.

Actions:

Dorothy Fulton, Nurse Aide Program Manager, provides consultation to long-term care facilities, home health agencies and educational facilities on the nurse aide approval process, competency testing and certification. She does the training for the nurse evaluators who do the nurse aide/home health aides competency testing, both written and manual skills components. She also works with individual nurse aides/home health aides who are seeking certification. She frequently administers practice tests to nurse aides. During this fiscal year, she has visited all of the new nurse aide training programs both in the long term care facilities and in educational settings to do an onsite visit for program approval. Eighteen programs have state approval as required by the federal regulations. Ms. Fulton continues to meet and consult with the three advisory groups to keep the lines of communication open between the Division and the industry.

Ms. Fulton participated in the Older Alaskans Commission project which developed a competency-based model curriculum which has been field tested and is ready for use by organizations providing home-based care in the native communities for training the Native Alaskan paraprofessionals.

Ms. Fulton also attended a meeting of nurse aide and home health aide State and federal regulators sponsored by The National Council of State Boards of Nursing in Baltimore Maryland, September 13 and 14, 1990.

16. Objective:

Develop standards of practice for Practical Nurses in accordance with 08.68.100(9). Include a review and inclusion as necessary of position statements; LPN Utilization in Administration of Oral Subcutaneous and IM Medications and Nursing Responsibilities in Intravenous Therapy.

Actions:

This objective continues to be a major focus of Board activity. The survey of Boards of Nursing and regulatory information on practical nurse scope practice was analyzed. The data collected in Alaska on scope of practice was tabulated and analyzed. The information on both surveys led the Board to conclude there is a different scope of practice for experienced practical nurses compared to those beginning practice. Based upon this work, the Board has drafted a new position paper on the LPN scope of practice. It is anticipated that this paper will be adopted by the Board at its first meeting in FY'92.

In an effort to share the results of our research activities, Dr. Tina DeLapp submitted an abstract for consideration for presentation at the 1991 NCSBN Delegate Assembly. The abstract was selected and Dr. DeLapp is scheduled to present a paper on the scope of practice of the Licensed Practical Nurse.

17. Objective:

Implement strategies for solutions to the nursing shortage that continue to safeguard the health and welfare of public.

ACTIONS:

The Division activities in streamlining licensing procedures have assisted the community by providing licensed nurses where needed. Many of the Board's activities with regulation of practice such as development of the LPN scope of practice statement are strategies to assist with solutions to the nursing shortage.

18. Objective:

After the 1990 renewal cycle, review the Division Board of Nursing budget including revenues and expenditures in relation to assessing the adequacy of the current fee structure.

Action:

The Board delayed examining the fee structure pending a detailed look at the revenues and expenditures which has not been available to the Board in the fiscal year due to the renewal cycle.

19. Objective:

Begin to develop guidelines to aid nurses, employers and others on specifically what nursing practice problems should be reported to the board.

Actions:

Due to other issues which were more pressing, action on this objective was deferred to FY 91.

OBJECTIVES
FY 92

1. The Board of Nursing will continue to define, review, maintain, develop and interpret standards of nursing care that protect the Alaska consumer.
2. The Board of Nursing through the Division of Occupational Licensing will continue to license individuals in a timely manner consistent with the Alaska Statutes and Regulations and Board of Nursing Policy.
 - a. To continue the licensing procedures to include: Licensed Practical Nurse and Registered Nurse endorsements and authorization to practice for Advanced Nurse Practitioners and Registered Nurse Anesthetists.
 - b. To license by examination LPN's and RN's. To fulfill contract responsibilities with the National Council of State Boards of Nursing.
3. Maintain the Board's regulatory function related to nursing education programs.
 - a. Review annual reports from Alaska Nursing Education Programs for evaluation of continued approval.
 - b. To perform site visits to the schools of nursing as required by statute and regulations. A visit to the UAA Associate Degree Nursing Program is planned for Spring 1992 in conjunction with an NLN accreditation site visit.
4. Advise the Investigative Staff regarding Nurse Practice Act violations as necessary and to act upon cases as indicated. Continue to utilize appropriate probationary agreements in lieu of contested hearings.
5. Continue to implement procedures for monitoring probationary agreements. Review progress of nurses with stipulated licenses at each Board meeting.
6. Review and revise regulations to comply with statutes as needed.
 - a. Develop and implement regulations to bring Alaska into compliance with P.L. 100-203, Nursing Home Reform Act, including program approval, competency testing, certification and registry for nurse aides/home health aides in conjunction with other state agencies as appropriate.

- b. Amend Registered Nurse Anesthetist regulations to provide for the regulatory authority of the RNA to prescribe drugs.
 - c. Revise regulations pertaining to licensure by endorsement for Canadian nurses who took the Canadian Nurses Association Test Services (CNATS) exam.
 - d. Promulgate regulations to allow for sanctions of nurses practicing on a lapsed license.
7. Increase awareness by licensees and consumers of Board of Nursing activities. Continue to provide continuing education offerings on the Nurse Practice Act, Position Papers, regulations and related issues.
 8. Continue to increase Board awareness and involvement in National Council State Boards of Nursing (NCSBN) activities by reviewing reports on NCSBN activities and by seeking funding for Board member attendance at NCSBN meetings. Provide educational sessions on computer adaptive testing and computer simulated testing for use with NCLEX to improve Board members' knowledge base.
 9. Update the guidelines for RN & LPN refresher courses.
 10. Provide consultation to long-term care facilities and home health care agencies on the nurse aide/home health aide education program approval process, competency testing, certification and inservice education requirements.
 11. Complete development of standards of practice for Practical Nurses
 12. Begin to develop guidelines to aid nurses, employers and others on specifically what nursing practice problems should be reported to the board.
 13. Research delegation issues and develop a position paper or regulations on delegation of nursing activities to unlicensed personnel.
 14. Plan and conduct with other organizations a 50th Anniversary Celebration to include continuing education offerings on legal aspects of nursing and social events.
 15. Conduct a random review of the practice of 10% of nursing practitioners to determine compliance with the plans for consultation and referral and other regulations.
 16. Seek legislation to grant regulatory authority to the Board of Nursing for nurse aides and to change statutes to not allow foreign nurse exam applicants to have a temporary permit.
 17. Review an RN licensing exam during the next exam review cycle.

BOARD TRAVEL REQUEST

A. Board Meetings

The Board of Nursing is authorized by statute to hold at least four meetings. Consequently, the Board requests funding to hold four meetings. The proposed sites are listed below:

FY 92	FY 93
Anchorage	Fairbanks
Anchorage	Anchorage
Juneau	Juneau
Anchorage	Anchorage

B. Out of State Travel

The prioritized out-of-state travel requests are as follows:

1. NCSBN Annual Meeting in Chicago, Illinois, August, 1991
2. Area I Meeting in Portland, Oregon, April, 1992
3. NCSBN Annual meeting in Colorado Springs, Colorado, August, 1992.

For FY 93 requests will be submitted for two members to attend the same two meetings. The Spring Area I meeting will likely be held in Utah with the August annual delegate assembly scheduled for Colorado or as noted above.

It should be noted that as the Board's Executive Secretary is currently the Area I Director on the NCSBN Board of Directors, she will be attending the Council's proposed meetings at the expense of the Council.

BUDGET RECOMMENDATIONS

The following items are based on the FY 92 objectives and require fiscal consideration.

1. Continue to provide funding for two RN and two LPN exam administrations as required by contract with the National Council State Boards of Nursing (NCSBN). This should be done according to statutory requirements for statewide administration (08.68.190) in conjunction with Board policy. This would also require continuing the contract with NCSBN for the licensure examinations at the current cost of \$3,000.00 per year.
2. Hold public hearings on the proposed regulations for nurse aide education and competency testing.
3. Secure travel funds for the nurse educator on the Board to do a site visit to Sheldon Jackson College in Sitka if they proceed with development of a nursing education program.

LEGISLATIVE RECOMMENDATIONS

The Board of Nursing believes it is important to seek legislation which grants authority to the Board to regulate nurse aides. Nurse Assistant personnel perform delegated nursing functions and as such should be regulated in the same manner nurses are regulated.

The Board of Nursing will also recommend to the Division to delete the current statute which allows for foreign nurse graduates who hold a Certificate from the Commission on Graduates of Foreign Nursing Schools (CGFNS) to be granted temporary permits. The pass rate of CGFNS holders on the NCLEX-RN has dropped and the Board believes that neither consumers, nurses or employers are well served by the current law.

The Board supports all efforts to obtain legislation to put into place the Alaska Practitioner Recovery Program as an alternative to discipline for chemically impaired health professional's.

REGULATION RECOMMENDATIONS

As indicated in the objectives for FY 92, the Board will continue to participate in the regulation of long term care and home health care nurse aides in accordance with the Governor's Administrative Order 415. The initial drafting of the regulations was done by Dorothy Fulton, Nurse Aide Program Manager. They are based upon the OBRA requirements for nurse aide education, competency testing and certification to a registry. The content of the proposed regulations will parallel the Nurse Aide Training and Competency Evaluation Criteria Manual revised August 1989 and the most current federal regulations on the subject. Use of the regulatory process will serve to protect the consumer by defining the standards for education and competency based testing for nurse aides employed in long term care and home health care.

The second regulatory project deals with defining the RNA's role in prescribing medications preoperatively and postoperatively. Further definition is needed to protect the public so RNA's will continue to practice within their appropriate scope of practice.

Proposed Regulations
BOARD OF NURSING
RNA Prescriptive Authority and other provisions

RNA PRESCRIPTIVE AUTHORITY

Notice is given that the Board of Nursing, Department of Commerce and Economic Development, under authority vested by AS 08.68.100 and AS 08.68.200, proposes to adopt a new regulation in Title 12 of the Alaska Administrative Code, dealing with licensure by endorsement for foreign trained applicants, the prescriptive authority of an advanced nurse practitioner, and the granting of prescriptive authority to qualified registered nurse anesthetist's (RNA), all of which serve to implement, interpret, and make specific AS 08.68.100 and AS 08.68.200 as follows:

1. 12 AAC 44.310(d), dealing with the licensure of foreign school graduates, is rewritten to reflect the board's finding that the National Canadian Nursing Examination is no longer equivalent to the NCLEX examination and will not be accepted after the specific date;
2. 12 AAC 44.440(e), dealing with ANP prescriptive authority, is amended to authorize the Board of Nursing to terminate an ANP's prescriptive authority for a violation of a state or federal law pertaining to nursing practice;
3. 12 AAC 44.525, RNA PRESCRIPTIVE AUTHORITY, is a new section that authorizes an RNA to prescribe legend drugs and controlled substances, requires that a list of authorized RNA's be provided to the Board of Pharmacy, establishes application requirements and minimum qualifications for prescriptive authorization, describes an acceptable prescription, identifies the reasons an RNA's prescriptive authority may be terminated, describes authorization renewal requirements, establishes continuing education requirements, requires that the Board of Pharmacy be notified when an RNA's prescriptive authority is changed.

Notice is also given that any person interested in making written comments or suggestions concerning these proposals for board consideration may do so by mailing those comments to Kevin Henderson, Regulations Specialist, Division of Occupational Licensing, P.O. Box D, Juneau, AK 99811. Written comments must be received by MONDAY, JULY 22, 1991.

Copies of the proposed regulations may be obtained by writing to the above address or by telephoning (907) 465-2537.

This action is not expected to require an increased appropriation.

The Board of Nursing, after the deadline stated above, will either adopt these or other proposals dealing with the same subject, without further notice, or decide to take no action on them.

Ann P. Boudreaux
 Ann P. Boudreaux, Director
 Division of Occupational Licensing
 Date: May 15, 1991

PROPOSED REGULATIONS

BOARD OF NURSING

CHAPTER 44

12 AAC 44.310(d) is repealed and readopted to read:

(d) The board will, in its discretion, issue a license by endorsement under AS 08.68.200, to an applicant who was licensed in Canada as a result of passing the national Canadian examination

(1) before August 1980, with a score of at least 350 on each of the five parts of the examination; or

(2) after July 1980 but before July 1992, with a score of at least 400 on each of the five parts of the examination. (Eff. 10/14/72, Register 43; am 4/27/83, Register 86; am / / , Register)

Authority: AS 08.68.100

AS 08.68.190

AS 08.68.200

AS 08.68.210(a)

12 AAC 44.440(e) is amended to read:

(e) Prescriptive authorization will, in the board's discretion, be terminated if the ANP has

- (1) not maintained current authorization as an ANP;
[OR]
(2) prescribed outside the ANP scope of practice or
for other than therapeutic purpose; or
(3) violated any provision of state or federal
statutes and regulations pertaining to nursing practice.
(Eff. 1/13/80, Register 73; am 12/1/84, Register 91; am 11/7/87,
Register 104; am / / , Register)

Authority: AS 08.68.100

12 AAC 44 is amended by adding a new section to read:

12 AAC 44.525. RNA PRESCRIPTIVE AUTHORITY. (a) The board will, in its discretion, authorize a registered nurse anesthetist or "RNA" to prescribe legend drugs and schedule II through V controlled substances in accordance with applicable state and federal laws.

(b) The board will transmit to the Board of Pharmacy a list of all RNAs with prescriptive authority. The list will include

- (1) the name of the authorized RNA;
- (2) the prescriber's identification number assigned by the board; and
- (3) the effective date of prescriptive authority.

(c) A registered nurse who applies for authorization to prescribe drugs shall

- (1) be currently authorized as an RNA in Alaska;
- (2) provide evidence of completion of 15 contact hours of education in advanced pharmacology related to the administration of anesthesia within the two-year period immediately before the date of application; and
- (3) submit a completed, notarized application, on a form provided by the department, accompanied by the application fee established by 12 AAC 02.280.

(d) Authorized prescriptions by an RNA must

- (1) comply with all applicable state and federal laws; and
- (2) be signed by the prescriber with the initials "RNA" and the prescriber's identification number assigned by the board.

(e) Prescriptive authorization will, in the board's discretion, be terminated if the RNA has

- (1) not maintained current authorization as an RNA;
- (2) prescribed outside the RNA scope of practice or for other than therapeutic purposes; or
- (3) violated any provision of state or federal statutes and regulations pertaining to nursing practice.

(f) RNA prescriptive authority must be renewed biennially with the RNA authorization. Documentation of eight contact hours of advanced pharmacology relating to the administration of

anesthesia during the previous two years must be submitted at the time of renewal.

(g) The board will notify the Board of Pharmacy within 24 hours after termination of, or change in, a registered nurse anesthetist's prescriptive authority. (Eff. / / , Register)

Authority: AS 08.68.100

**DEPARTMENT OF COMMERCE &
ECONOMIC DEVELOPMENT**

DIVISION OF OCCUPATIONAL LICENSING

7TH FLOOR FRONTIER BLDG.
3601 C STREET, SUITE 722
ANCHORAGE, ALASKA 99503
PHONE: (907) 561-2878

February 7, 1991

Lloyd Hames, Commissioner
Department of Corrections
P.O. Box T
Juneau, AK 99811

Dear Commissioner Hames:

The Alaska Board of Nursing has recently completed a follow up review of nursing services provided in state correctional facilities. The Board of Nursing undertook this series of reviews based upon their authority to "publish advisory opinions regarding whether nursing practice, procedures or policies comply with acceptable standards of nursing practice as defined under this chapter" as provided in AS 08.68.100(10).

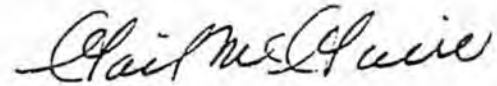
The Board is forwarding the enclosed report for your consideration. At its last meeting, the Board of Nursing approved the report provided to it by Gail Stewart, ANP, Board Member and myself. The recommendations were adopted by the Board for submission to the Department of Corrections.

The Board of Nursing staff and board members have developed a good working relationship with the Corrections health services administration. We believe through our continued communication and collaboration, the recommendations will be resolved.

The board again expresses appreciation to corrections staff who assisted them in their review of the nursing services in the correctional facilities. Martha Quimby, Nurse Supervisor for the Department of Corrections, was present at the Board of Nursing meeting where this report and recommendations were discussed. The board appreciates her continued participation in this process.

If you have any questions regarding the report or recommendations, do not hesitate to contact me. I will be in contact with Ed Thielen and Martha Quimby regarding follow up on the recommendations in the future.

Sincerely,



Gail M. McGill, RN
Executive Secretary
Alaska Board of Nursing

cc: Richard Bentson
Ed Thielen
Commissioner Glen Olds
Department of Commerce and Economic Development
Marcia Bissell, Acting Director
Division of Occupational Licensing

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**DEPARTMENT OF COMMERCE &
ECONOMIC DEVELOPMENT**

DIVISION OF OCCUPATIONAL LICENSING

7TH FLOOR FRONTIER BLDG.
3601 C STREET, SUITE 722
ANCHORAGE, ALASKA 99503
PHONE: (907) 561-2878

DATE: September 20, 1990
TO: Board of Nursing
FROM: Gail Stewart, ANP, Board Member
Gail McGuill, RN, Executive Secretary
SUBJECT: Follow-up of the February 1989 Evaluation of
Nursing Service in Correctional Facilities
Report of 1990 Visits to Correctional Facilities

GOALS

The Goal of the visit was to assess the nursing services offered in correctional facilities, keeping in mind the following goals for correctional health services;

1. The health care provided in the correctional facilities should be equivalent to that available in the community and subject to the same regulations.
2. Preserve and promote the health in the incarcerated individual within the broader goal of security.

INTRODUCTION

From October 1988 through January 1989 the Board of Nursing conducted a review of the nursing services provided in the Anchorage Area correctional facilities. Subsequently, recommendations were made to the Board of Nursing in February 1989, and these recommendations were forwarded to the Department of Corrections. The Department of Corrections responded in September 1989 with comments and plans for improvement in services.

The purpose for the visits in September 1990 by Board of Nursing representatives was to review the status of the recommendations made to the Department of Corrections.

Visits were made to Spring Creek, Wildwood, Wildwood Pretrial, Hiland Mountain, and Meadow Creek correctional

facilities. Interviews were conducted with Dolores Sage, RN, Dorothy Locke, medical records technician, Carolyn Townsend, RN, Ed Lindquist, RN, Jody Hatt, RN, and Deanna Ahlstrand, RN. The clinic, examination and infirmary areas; emergency equipment; and narcotic storage areas were visited. Procedures for medication administration and the use of standing orders were discussed. A random selection of medical records was reviewed.

This report is written with the issues identified by the Board in 1988 being presented first and the current finding indicated next. The site visitors have made recommendations for the Board to consider as a result of their findings.

ISSUES REVIEWED

1. LPN's are requested to use nursing skills which are beyond their scope of practice.

Findings: The RN's interviewed all felt the LPN's were working within their scope of practice. There were no LPN's available to be interviewed. The assessment skills were praised by the RN's and they reported the LPN's are calling the PA on call in most instances. A review of randomly selected medical records shows appropriate care and charting techniques. In fact, the nursing notes reviewed were exceptionally well written.

2. Prescription medications may be administered by unlicensed ancillary personnel. Current Alaska practice provides for PA's to prescribe drugs which are dispensed by a pharmacist and administered by licensed nurses.

Findings: Medical Technologists (Med Techs) are still administering medications at Wildwood and Cook Inlet, however, it is noted that there are fewer med techs at Cook Inlet. The Wildwood med tech works part-time and an effort is being made to recruit an RN or LPN for the facilities.

"Bubble paks" are being used on a regular basis and stock meds are being kept available. We did not find the use of one inmate's medications for another inmate being done on a regular basis. There were no complaints about getting medications from the pharmacy in a timely manner.

3. Correctional officers (guards) are reported to be administering Schedule II narcotics which are signed out by the nurse. The drugs are labeled for the inmate and turned over to the guard.

Findings: There were no reports of correctional officers administering medication except for over the counter medications.

4. Medication (and other orders written by the PA's or other

prescribers such as dentists and surgeons) are transcribed to the medication and treatment records by the staff person available, not necessarily an RN. Stop dates for medications are not uniformly used.

Findings: There appears to be some confusion regarding the transcription and co-signing of orders. It is the intention of the Board of Nursing to have the PA, Physician, or Dentist write medical orders. These orders are then transcribed onto medication sheets by the licensed nurse and signed off by an RN. It is the intention not to have med techs write original orders or to recopy orders onto med sheets without a co-signature. This is to prevent errors which may not be easily recognized by those without a medical or nursing education.

Medication sheets were reviewed and had stop dates noted in most instances.

5. LPN's reported being told they could administer PRN medications including controlled drugs if they deemed them necessary and the PA would write the order in the morning.

Findings: Medical records were reviewed for inmates seen when the PA was not available. The LPN did an assessment within her/his scope, called the PA and discussed the case; verbal orders were given and the orders were co-signed the following morning.

Wildwood Correctional Facility has a set of standing orders which require nurses to use assessment skills beyond the legal scope of practice for RN's and LPN's. For example, diagnosing an inmate with back pain and starting the inmate on Feldene is not within the nursing scope of practice. This medication has side effects and may aggravate other pre-existing conditions.

6. Institute a quality assurance program to evaluate and make improvements where indicated in nursing practice.

Findings: No quality assurance plan was available at the facilities for reviewing, however central office indicated a draft was available.

7. Policy and procedures should be developed for nursing services.

Findings: A draft of policies and procedures for nursing services is currently being developed and was reviewed. We urge continuation of this project.

8. Increase orientation time of nursing staff to observe skill levels, teach policies and procedures, improve communication and promote teamwork.

Findings: There appears to be a need to increase orientation time and to include orientation in security procedures and the special skills needed to work with inmates. Orientations were described at each facility. They generally consist of three shifts of work with another nurse but without formal orientation to security.

9. Provide a position description at time of hire to describe an initial overview of responsibilities.

Findings: A position description was not consistently found at every facility at the time of the visit.

10. Institute a correction's medical job skill checklist for use at time of hire/orientation as part of quality assurance to provide for consistency and to document knowledge base.

Findings: A skill checklist is in the draft policy and procedure book.

11. Provide RN staffing on every shift for the health and safety of inmates in accordance with national standards.

Findings: RN staffing is not provided on all shifts. The visitors recognize that the facilities differ significantly in population and health care needs. For instance, Wildwood appears to be a very quiet facility, where Meadow Creek was very busy on the day we visited. A concern does remain; however, as there is the potential for an LPN to be in a position to need to administer IV meds. This situation can be prevented with the hiring of a temporary RN or scheduling changes.

12. The policy should be enforced so that the medical records go with the inmate at time of transfer. This is a basic quality assurance item which provides for continuity of care between facilities.

Findings: This still remains a problem; however, one nurse noted an improvement over the last nine months. There appears to be better verbal communication between facilities if the chart does not go with the inmate at time of transfer. One example was given of an inmate transferred without medical records and it was three weeks until the error was realized.

13. Clearly designate a supervisor for nursing staff and a chain of command to identify the flow of responsibility.

Findings: The nurses could describe the chain of command and could identify who was responsible for care on a given shift.

14. Support hiring a statewide Nursing Coordinator to maintain quality assurance standards of practice and

provision of ongoing continuing education.

Findings: A Nurse IV has been hired as a Nursing Coordinator. She has maintained good communication with the Board of Nursing. We support the development of the policy and procedure book currently in draft form. We also support the development of a standardized statewide quality assurance program for the health services offered in a correctional facility. We also encourage the development of an ongoing nursing inservice program throughout the system.

15. A licensed nurse does not delegate medication administration or invasive procedures to unlicensed personnel and the unlicensed person is therefore responsible for his own actions.

Findings: It is noted from a memo dated September 6, 1989 from the Commissioner of the Department of Corrections that the PA or ANP acts as the IHCO and is responsible for the health care delivery of the assigned personnel. The nurses were able to verbalize who their supervisor was and for whom they were responsible.

16. Procedure is necessary to maintain controlled drugs under two locks and to provide for wastage of drugs in accordance with DEA regulations.

Findings: There is a need for a standard method to account for receiving narcotics from the pharmacy, storage of the medications, signing out the medications, and returning the unused medications to the pharmacy. At Wildwood, although the supply is limited, the narcotics are not under two locks. At Hiland there is some difficulty in accounting for the medications. In fact, we were unable to do an accurate narcotic count at Highland during our visit.

At one facility Tylenol #3 was not found under lock and key. At Hiland Mountain, the doors were left open at the same time controlled drugs were set out on the counter easily accessible to any inmate or staff member present in the clinic area.

17. Use of treatment protocols be established and not use standing orders which require assessment and diagnosis.

Findings: A set of standing orders was found at Wildwood. We strongly encourage abolishing the use of standing orders. Often the use of standing orders requires diagnosing and prescribing which is not in the scope of practice for RN's or LPN's.

RECOMMENDATIONS

1. It is critical that the narcotic storage and accountability be standardized. A mechanism needs to be in

place to account for drugs delivered to the facility, drugs returned to pharmacy, storage of drugs, and a method to allow for easy counting with every shift change.

2. Abolish the use of standing orders by nursing staff.
3. Institute a quality assurance plan which is standardized among all the facilities.
4. Increase orientation time and include an orientation to security procedures. Ideally, an inservice program on a regular basis could be offered. We suggest filing documentation of orientation including orientation to security in each nurse's personnel file.
5. Licensed nursing personnel transcribe the medical orders onto medication sheets and the orders must be signed off by a registered nurse within 24 hours. Should an inmate's medication sheets need to be recopied, a licensed nurse should review the sheets and co-sign the new sheet to verify accuracy in order to prevent errors.
6. Continue to encourage the transfer of the medical records with the inmate at the time of transfer. Promote verbal communication among the facilities should the record not go with the transfer of the inmate.
7. Support the continued development of the policy and procedure book currently in progress.
8. Support the hiring of an RN for every shift and the use of LPN's for support personnel.
9. Records of work schedules, CPR updates, and continuing education should be available in each nurse's file.

1215n/mh

Alaska Board of Nursing
FACT SHEET

LICENSING OF FOREIGN EDUCATED REGISTERED NURSES

Endorsement Information

In order to be licensed in Alaska, a nurse must pass the National Council Licensing Exam for Registered Nurses (NCLEX-RN). If the nurse was licensed by exam in another state or U.S. Territory (jurisdiction), the nurse is eligible for a license by endorsement in Alaska. This requires:

- completion of an application,
- payment of fees,
- verification of current licensure in another jurisdiction,
- verification of original license from the state where the NCLEX-RN examination was taken,
- completion of the reference/work verification and
- submission of a transcript from the applicants nursing program.

It is acceptable for the nurse to obtain a certified true copy of the transcript from the Board of Nursing where the nurse was originally licensed. If the nurse holds a certificate from the Commission on Graduates of Foreign Nursing Schools (CGFNS), a certified true copy of the certificate may be submitted in lieu of transcripts.

Nurses applying for license by endorsement who hold a current license in another jurisdiction are eligible for a temporary permit.

Examination Information:

If a nurse seeking to be licensed is not licensed in another United States jurisdiction, the nurse must take the NCLEX-RN. The license by exam process includes completion of the state application and submission of fees, verification from a nursing education program attesting to completion of RN education and submission of the original transcript from the school of nursing. An application and fee must also be submitted to the NCLEX Data Center to reserve a seat for the examination.

Alaska does not require foreign nurse graduates to hold a certificate from the Commission on Graduates of Foreign Nursing Schools. If the nurse does hold a CGFNS certificate, the nurse is eligible for a temporary permit by exam. Transcripts from CGFNS are acceptable in lieu of transcripts from the school of nursing. The Alaska Board of Nursing recognizes the CGFNS certificate holder as meeting the educational requirements for licensure in Alaska. If the applicant was accepted to take CGFNS exam but didn't take it or failed the exam, the Alaska board will accept the CGFNS transcript review as meeting our education requirement, once a copy of the CGFNS transcript review is received.

The Board of Nursing has recently evaluated the statutes and regulations which pertain to the CGFNS requirement. The Board of Nursing is in the process of beginning to seek statutory changes so that Alaska will no longer issue temporary permits to CGFNS holders. The Board is following a national trend in this regard. The studies on NCLEX RN pass rates of CGFNS certificate holders indicate the success rate has declined. The CGFNS certificate does not have an expiration date so a nurse could hold a certificate but not have practiced nursing in five or more years. Another problem which has been noted is that CGFNS certificate holders may take the exam in several states unsuccessfully then apply to take NCLEX here as first time candidates thus qualifying for a temporary permit.

At the request of Boards of Nursing, the Commission is exploring the possibility of offering a credential review service to foreign educated nurses. This would provide the Board with information on whether the foreign nurses' education is equivalent to that required in Alaska.

The Alaska Board of Nursing advises foreign nurse graduates who do not hold CGFNS certificates to take the Test of English as a Foreign Language (TOEFL) exam to ascertain whether English comprehension skills are adequate to proceed with the nurse licensure exam. Information on this exam is available through the University of Alaska Counseling Center offices. If the nurse believes her/his English skills to be adequate, the board suggests the nurse take the National Council Licensing Exam for practical nurses. If the nurse passes this exam, she/he may then work as an LPN and gain valuable nursing experience in Alaska as well as the health care terminology used here. The successful LPN may then proceed to take the RN exam.

Canadian Nurses

Alaska Statute 08.68.200(2) allows for license by endorsement of a registered nurse who has passed the Canadian Nurses' Association Testing Service (CNATS) exam. We currently issue temporary permits to Canadian nurses with active licenses from provinces who use the CNATS exam.

If the nurse is from a province that does not use CNATS (Ontario) or a province that allows the exam to be taken in French, the nurse must apply for licensure by examination.

The Board has reviewed recent information on the CNATS exam and found that the current exam is no longer comparable to NCLEX-RN. It is the Board's intention to initiate changes in these regulations in the next year.

H-1 Visa Information:

The Alaska Board of Nursing frequently receives inquiries from foreign educated nurses who want to work in Alaska. If the nurse is not a citizen of the United States, an H-1 work visa is required to work here. Visa information is available through Immigration and Naturalization Services. The H-1 work visa requires a nurse to be currently licensed (or hold a temporary permit and a CGFNS certificate) and be sponsored by an agency who is willing to employ the nurse. The Board of Nursing recommends to employers and foreign nurse graduates that the nurse hold a permanent license prior to applying for the H-1 work visa. This prevents the situation where an H-1 work visa is issued to a nurse on a temporary permit who then fails the examination and is unable to continue to be employed as a licensed nurse.

Further information on licensing and regulation of foreign educated nurses is available from the Executive Secretary, Board of Nursing, 3601 C Street, Suite 722, Anchorage, AK 99503.

NURSING EDUCATION PROGRAMS IN ALASKA

BACCALAUREATE DEGREE PROGRAM

University of Alaska, Anchorage
School of Nursing and the Health Sciences
3221 Providence Drive
Anchorage, Alaska 99508
Phone: (907) 786-1267

Dean: Laura MacLachlan, PhD, RN
Established: 1968 at Alaska Methodist University
Accreditation by Alaska Board of Nursing in 1973

MASTER'S DEGREE PROGRAM

University of Alaska, Anchorage
School of Nursing and the Health Sciences
3221 Providence Drive
Anchorage, Alaska 99508

Dean: Laura MacLachlan, PhD, RN
Established: 1981

ASSOCIATE DEGREE PROGRAMS

University of Alaska, Anchorage
3221 Providence Drive
Anchorage, Alaska 99508
Phone: (907) 786-1273

COORDINATOR: Anita Watts-Soquet, RN, MN
Established: 1970
Accreditation by Alaska Board of Nursing in 1973

0011n
12/91

STATE OF ALASKA

NURSE AIDE APPROVED PROGRAMS

PROCARE Professional Training Systems, Inc. Suite 1525 1201 Peachtree Street, N.E. Atlanta, Georgia 30361	#1
St. Ann's Nursing Home 415 6th Street Juneau, AK 99801 Contact: Cathy Kolligan, R.N.	#2
University of Alaska Southeast 7th & Madison Ketchikan, AK. 99901 Contact: Pat Clevenger, RN	#3
Kotzebue Senior Citizens Cultural Center P. O. Box 1073 Kotzebue, AK 99901 Contact: Nancy Farrington, RN, DDN	#4
Quyaana Care Center P. O. Box 966 Nome, AK 99762 Contact: Linda Peters, RN, DDN	#5
Our Lady of Compassion 4900 Eagle Street Anchorage, AK 99503 Contact: Belle Cunningham, LPN	#6
Kenai Peninsula College 34820 College Drive Soldotna, AK 99669 Contact: Forrest Tressler/Connie Smith, RN	#7
Heritage Place 232 Rockwell Soldotna, AK 99669 Contact: Connie Smith, RN Director of Nursing	#8
South Peninsula Hospital, LTC 4300 Bartlett Homer, Alaska 99603 Contact: Sue Brooks, LPN	#9

Denali Center 1949 Gilliam Way Fairbanks, Alaska 99701 Diane Lingle, R.N.	#10
Alaska Home Health Care Agency Kodiak Branch Office 305 Center Ave P.O. Box 4010 Kodiak, Alaska 99615 Contact: Joan Minks, RN	#11
University of Alaska Fairbanks Northwest Campus Pouch 400 Nome, Alaska 99762 Contact: Amelia Dickerson	#12
University of Alaska Southeast Juneau Campus 11120 Glacier Campus Juneau, Alaska 99801-8675 Contact: Pat Clevenger, R.N.	#13
Wesley Rehabilitation Care Center P.O. Box 430 431 First Avenue Seward, Alaska 99664 Contact: B.J. Blackwell, R.N.	#14
Older Persons Action Group American Red Cross 325 E. 3rd Avenue Anchorage, Alaska 99501 Contact: Geri Ivy, R.N.	#15
PWSCC & Harborview Development Center P.O. Box 487 Valdez, Alaska Contact: Sarah Matten, R.N.	#16
Alaska Technical Center P.O. Box 51 Kotzebue, Alaska 99752 Contact: Cindy Lincoln, R.N.	#17
Anvil Mountain Correctional Center P.O. Box 730 Nome, Alaska 99762 Jean Rom, Education Associate II	#18

Humana Hospital Alaska #19
P.O. Box 143889
2801 Weharr Road
Anchorage, Alaska 99514
Contact: Elizabeth Blair, R.N.

Petersburg General Hospital #20
and Long Term Care Center
P.O. Box 589
Petersburg, Alaska 99833
Lois DeBoer, R.N. and Phyllis Daniels, R.N.

PWSCC and Cordova Community Hospital LTC #21
P.O. Box 160
Cordova, Alaska 99574
Julie Winton, R.N. ADDN

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NATIONAL
COUNCIL
OF STATE BOARDS OF NURSING, INC.

676 North St. Clair Street
Suite 550
Chicago, Illinois 60611-2921

312 787.6555
FAX 312 787.6898

Addendum F

May 13, 1991

Tina D. DeLapp
University of Alaska Anchorage
3211 Providence Drive
Anchorage, AK 99508

RECEIVED
MAY 13 1991
Division of Occupational Licensing

Dear Ms. DeLapp:

On behalf of the Board of Directors and the Communications Committee, I am pleased to inform you that the study, "Scope of Practice for Beginning and Experiences LPNs" has been selected for verbal presentation during the 1991 Research Forum to be held in conjunction with the 13th Annual Meeting of the National Council of State Boards of Nursing. The Forum is scheduled for Friday, August 1, 1991 from 9 - 10 AM. Since reports will be made on three different projects, plan on having approximately 15 - 20 minutes for your presentation, including time for questions.

Enclosed is a copy of the Cover Page you previously submitted. Please review this carefully and either confirm that all study titles, presenter's names, equipment requests, and other information is correct or make the necessary corrections. Sign the form and return it to my attention by June 17, 1991. I also need to remind you that all travel and per diem expenses incurred in relation to your participation in this activity can not be underwritten by the National Council

We look forward to hearing your presentation. If you have any questions please call me at 1-312-787-6555.

Sincerely,

Carolyn J. Yocom, Ph.D., R.N.
Director of Research Services

cc: Alaska Board of Nursing

NATIONAL COUNCIL OF STATE BOARDS OF NURSING

THIRTEENTH ANNUAL CONVENTION

JULY 30 - AUGUST 2, 1991

CHICAGO, ILLINOIS

COVER PAGE

Name of Member Board: Alaska Board of Nursing

Title of study/project: Scope of Practice for Beginning and Experienced

LPNs

Study/project commissioned by: Alaska Board of Nursing

Study/project conducted by: Tina D. DeLapp, RN, EdD (primary)

with assistance from: Gail McGill, RN, BS (Executive Officer), Gail

Stewart, RN, MS (Board Chairperson), Janet Bunes, RN, BS, Mary

Stroeing, RN, Kathy Hewitt, LPN, Georgann Waskey and Louise Dean (public members)

Presenter(s): Tina D. DeLapp, RN, EdD

For which presentation format do you wish to be considered?

(xx) Paper () Poster () Paper or Poster

What audiovisual equipment will be required if selected for a paper presentation?

(xx) Slide projector () Overhead projector

STATE OF ALASKA

JAN 9 1992

WALTER J. HICKEL, GOVERNOR

DEPARTMENT OF COMMERCE & ECONOMIC DEVELOPMENT

DIVISION OF OCCUPATIONAL LICENSING

7TH FLOOR FRONTIER BLDG.
3601 C STREET, SUITE 722
ANCHORAGE, ALASKA 99503
PHONE: (907) 561-2878

December 31, 1991

Senator Drue Pearce, Chair
Senate Labor and Commerce Committee
Room 101
P. O. Box V
Juneau, Alaska 99811-1182

Dear Senator Pearce,

The Alaska Board of Nursing discussed your letter regarding the Sunset Review Legislation and possible options for the Board's future existence at its November 19, 1991 meeting. The Board members support continuation of the Board as an independent Board within Occupational Licensing, not combined with any other regulatory Board. A Board of Nursing made up of registered nurses, practical nurses and consumers has the expertise to handle the variety of nursing issues which must be addressed. Resolution of issues rely on the nursing knowledge of the Board members combined with their concern for public safety which is shared by the consumers.

The Board expressed a number of concerns relating to termination of the Board of Nursing. These concerns relate to the Board's responsibilities for examination of nurses, licensure and discipline of nurses and as important, regulation of schools of nursing. A school of nursing must be Board approved in order for graduates of the program to be eligible for a license by exam in Alaska and a license by endorsement elsewhere in the United States. During the last two years, the Board approved the operation of Everett Community College Associate Degree Nursing Program offered in Ketchikan in order to educate Practical Nurses (LPNs) to become Registered Nurses (RNs) in that city. This program met a unique need in a rural community by allowing the hospital to lessen its nursing shortage by educating practical nurses who had proven work records and were residents of Ketchikan.

The contract Alaska enters into with the National Council State Boards of Nursing (NCSBN) for use of the national exam is with the Board of Nursing and requires a Registered Nurse

to be administratively responsible for the security of each exam administered in our State. This national exam is called the National Council Licensure Exam and one is offered for practical nursing and one for registered nursing, each exam being offered twice a year. The contract with NCSBN provides

Alaska the right to give the national nurse licensure exams and to counsel with other jurisdictions on matters related to regulation of nursing practice such as scope of practice, discipline and advanced practice issues. Should Alaska not have a Board of Nursing to regulate nursing practice, it is unlikely that we would continue to be allowed access to the national exam.

While the Board discussed several major issues regarding Board combination, a few are paramount. The first involves the Board's ability to respond to requests for interpretation of scope of practice situations. Many of these questions are handled by the Board's Executive Secretary, a position which requires a registered nurse license. Some, however, require full Board discussion and response. Since nursing science like other health professions has its own body of knowledge, it is inappropriate to ask non nurses to make these scope of practice determinations.

Additionally, there are concerns about shifting the focus from public safety to economics with turf issues arising especially with physicians and nurses in advanced practice. The Nursing Board has successfully regulated advanced nursing practice allowing improved access to care for many Alaskans who otherwise would not have primary health care, while at the same time protecting the public's health and welfare with regard to nursing care. This regulation includes monitoring of scope of practice including specific quality assurance mechanisms and allowing independent prescriptive authority. A joint board of health care professionals would likely be limited in representation of nurses and these issues would not receive the necessary attention needed to assure consumer protection.

A combined Board would require the involvement of at least "expert panels" to provide the expertise to advise the oversight Board on professional standards. This type of structure would increase costs of government regulations and would delay response on many of the important issues addressed by the Board. The Board now acts in a timely and effective manner. A good example of this is the Board's recent completion of a comprehensive guide addressing scope of practice of the practical nurse which was requested by the industry. A review of the enclosed most recent annual report details many of the Board's projects.

The nurse employers rely on the Board's judgment in matters related to discipline, monitoring of nurses in recovery from

chemical dependency and nursing scope of practice. They have learned that the Board plays an important and assistive role when they have a problem with a nurse whether it relates to something like not meeting standards of practice or to a chemically addicted nurse. The Nursing Board has many more years of experience managing the chemically addicted nurse than have other regulatory boards. Employers and nurses have been educated about the procedures for getting nurses into treatment and the Board's monitored aftercare program which protects the public yet allows nurses to safely go back to work. With one in five to one in seven nurses at risk for chemical dependency, the Board is gravely concerned that this program might be lost under a combined system of boards.

The members of the Board are in full agreement that under any circumstances an Executive Secretary position must be maintained. The purpose of this position is evident when one reviews the accomplishments of the Board. The Executive Secretary is essential to the prompt licensing of nurses especially as the nursing shortage continues to affect areas of our state. The Executive Secretary is also responsible for overseeing the licensing and regulation of approximately 5500 licensees. This includes communication with nurses and employers statewide particularly in rural Alaska where the incumbent staff member serves in a consultant role. The Executive Secretary is essential to the functioning of the Board's program for intervening with nurses who are addicted to controlled substances. The Board's goal of returning nurses to the work setting safely and within a reasonable time after the nurse is in recovery is accomplished using Memorandums of Agreement. This staff member provides assistance to the investigators as she is knowledgeable in nursing practice, procedures and issues.

Reports of discussions at the Task Force on Boards and Commissions indicated inaccurate financial information related to the Board's operations. While the Division is responsible for the budget, the Board continually remains aware of the financial picture. I would also like to point out that because of the biennial renewal cycle, revenue must be averaged over the two years. The Board asks for budgetary information annually in order to evaluate the fee structure and will be doing so again at it's next meeting. The Board members themselves show fiscal responsibility by meeting most often in Anchorage which is less expensive and by booking tickets in advance and using lowest available airfares. In November, 1991, the Board hosted a 50th Anniversary Celebration of the Board of Nursing which used no state funds but gained much good will and provided two days of valuable nursing continuing education.

The Board members consider it an honor to serve the state as members of the Nursing Board. They give countless hours of their volunteer time to the Board as they are not compensated except for travel and for per diem when outside of their home community. In addition to the actual meeting times, Board members often have assignments between meetings and they may meet with groups of nurses and/or consumers in their communities. Importantly, the Board members have remained non-partisan and view the professional issues from a consumer safety viewpoint which is something professional associations do not always do.

I hope this information will contribute to the continuation of the Board of Nursing. Should you have any questions, do not hesitate to contact me at my office at 257-1555 or my home at 345-3996 or contact Gail McGill, Executive Secretary at the above address.

Sincerely,

Gail Stewart

Gail Stewart
Chairperson
Alaska Board of Nursing

1415n/ds

cc: Ann Boudreaux, Director
Occupational Licensing

MAR 12 1992

2138 Churchill Dr
Anchorage, AK 99517

DANIEL A. GERETY
2138 CHURCHILL DRIVE
ANCHORAGE, AK 99503

March 2, 1992

Dear Senator Pearce:

I am writing regarding
in support of HB 165 Extension
of the Board of Nursing.

I am opposed to the initiative
to combine the medical, dental,
pharmacy & nursing boards into
a "super board".

To my knowledge most of
the boards are self supporting.
The state is reducing costs.
I have a few suggestions. Each
of the about medical related boards take
great pride in carrying and upholding their
profession. This contact may be necessary
information needed. (Daniel Gerety)

Buey

FEB 7 1992

Gail Stewart
12220 Rainbow
Anchorage, AK 99516

January 29, 1992

Dear Senator Drue Pearce;

Re: HB 165 Sunset of the Board of Nursing

On December 31, 1991 I sent to you the official response from the Board of Nursing to your request from the Governor's Task Force on Boards and Commissions. I would like to give you my personal opinion also.

The Board of Nursing has two main functions: 1. To protect the public and 2. To operate in a cost effective manner.

To Protect the Public

Every license application is reviewed twice for completeness, references, and accuracy. The Executive Secretary gives much personal attention to each applicant, assuring enough flexibility to get the person a license if at all possible while protecting patients and employers from fraud or incompetence.

The Board has established a chemical dependency program for the impaired nurse. The Executive Secretary has done a tremendous job in educating employers and establishing trust with nurses. Both employers and impaired nurses call her requesting advice and assistance. The Board has established Memorandums of Agreements with impaired nurses. These are public record and require close monitoring of the nurse yet have saved the state thousands of dollars in investigations, accusations, and hearings. Other Boards do not agree with our philosophy. I would be saddened to see such a worthwhile program lost if we were combined with another board.

The Board of Nursing has taken a pro-active approach in trying to provide the public with competent, knowledgeable nurses. We audit nurses for continued competency requirements and review nurse practitioners' advance practice. The Board does not wait for calls of complaint but actively attempts to monitor the nurses.

Cost

Has the Board of Nursing operated in a cost effective manner? I believe we have showed fiscal restraint by holding meetings in Anchorage which has cheaper airfares, staying over Saturday nights for lower airfares, and using teleconferences when possible. In the past 4 years, we have met outside of Anchorage twice- in Fairbanks and Soldotna. Both meetings were at the request of the public (which I considered an honor to be requested) and both were done during the off season for less expensive rates. Two years ago the division came to us with dollar figures that showed we were spending much more than we brought in with revenue. The Boards voted to raise license fees.

Public View

Our meetings have an open forum on every agenda. This forum allows anyone to discuss any topic with the Board, without an appointment, and in an open manner. I feel the Board of Nursing has made genuine efforts to reach out to the public and listen. Our meetings always have community members actively participating.

If I could change anything, it would be to increase the number of public members on the board to 4, require one seat to be a currently employed staff RN in a hospital, one seat to be a nurse educator, and one seat for a nurse in advanced practice.

Other functions of the Board

When UAA was unable to provide nursing programs to rural sites due to budget constraints, the Board carefully and completely reviewed the Everett College Nursing Program to be offered in Ketchikan. This allowed LPN's to upgrade their skills to RN's and kept nurses employed in Alaska. The time this project required may not have been possible if we were to combine with another Board.

The Alaska Board of Nursing is respected throughout the country. Board members travel to present research the Board has done, to explain how our practice act works in providing access to care in rural areas and for the underserved and underinsured. For example-- Gail McGill, Executive Secretary is the Area I Director for the National Council of State Boards of Nursing and went to Washington D.C. to present for the AARP Consumer Advocacy Center and the National Rural Health Association; Tina DeLapp RN, EdD is a member of the Practice and Education committee for the National Council, and I went to Kansas City for the National Rural Health Association to present the Alaska nursing rules and regulations and how they provide access to care in rural area. At all of these activities we are representing the State of Alaska and at no cost to the state. These organizations paid our airfares and per diem for our knowledge. This is something in which the State of Alaska should take pride.

If it sounds like I am bragging about the Board of Nursing it is because I am proud of the state, its nursing practice act, and the board. My term expires 3-31-92 and I have considered it an honor to serve this state. I never had the appreciation of Boards of Nursing until I served these 4 years.

I ask you to seriously consider what could be lost if the Board of Nursing was combined with another board. The legislative audit says we are good enough to go for 8 years instead of the usual 4. The ombudsman office only had 1 complaint in 4 years. Somehow, we must be doing something right.

Thank you for your time in reading such a lengthy letter. If you have any questions, please feel free to call me at work 257-1555 or home 345-3996. I look forward to meeting you February 13 and discuss this and other issues.

Sincerely,

Gail Stewart



FEB 6 1992

Billy

1-29-92

bills HB 165, SR 211

Members of the Senate Labor and Commerce Committee State Capitol
Juneau, Alaska
99801-1182

Dear Drue:

This is a letter to encourage you to vote yes for the bills HB 165, and SR 211 to endorse the Board of Nursing to have an independent board.

The reasons I feel this should be endorsed are as follows:

- Board of Nursing has proven to provide safety for the public in regards to caring for people in the State of Alaska
- Is very important that we have an independent board so they can follow up on all the applicants in regards to their applications to practice Nursing in the State and also for discipline action if necessary
- There is no way a Super Board could regulate the four thousand plus nurses that are practicing in the State of Alaska and provide safety for the communities

I am the first Family Nurse Practitioner to set up an independent practice in the State of Alaska. The Board of Nursing was there for me and also the public when they had questions about my practice. If the boards are suppose to be in affect for the safety of the public than I see no way this could be possible with a Super Board.

I trust that if concern is for the State you will endorse the fact that the Board of Nursing needs to be independent from any other board. I feel that they need to meet as often as they have in the past years.

Any questions of concerns on my reasons for you supporting bills HB 165, and SB 211 please contact my office at 694-4080.

Sincerely,

Lila McEwen, F.N.P.

LM/js

cc: Governor Hickel

P.O. Box 1035
Palmer, AK 99645-1035
January 29, 1992

Senator Drue Pearce, Chair
~~Senate Labor and Commerce Committee~~
State Capitol
Juneau, AK 99801-1182

Dear Senator Pearce:

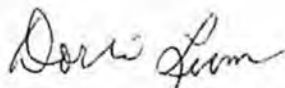
Please offer your support for the passage of HB 165
(extension of the Board of Nursing) out of committee.

The Board of Nursing has provided leadership for the largest group of voting health professionals in Alaska. They take a strong position on self-governance which would be a great loss to the quality of health care services should the nursing board be merged with the boards of other disciplines.

One paid staff member achieves a large volume of results, and has the high respect of the nursing community, not only for adherence to quality standards, but for attentiveness to public input as well.

Please retain the Board of Nursing.

Sincerely,



Doris Lum, RN, C. ANP, MS

FS 7 1992

Billy



Alaska Nurses Association

237 East Third Avenue
Anchorage, Alaska 99501
(907) 274-0827

... a constituent of American Nurses' Association

February 3, 1992

Senator Drue Pearce
Alaska State Legislature
P.O. Box V (MS 3100)
Juneau, Alaska 99811

Dear Senator Pearce:

The Alaska Nurses Association is very concerned that HB 165, which would extend the Board of Nursing for four years, will fail to pass out of the Senate this session and result in the demise of the Board. The Association, which represents professional nurses throughout the state, has wholeheartedly supported the continuation of the Alaska Board of Nursing through the years, most recently at the 1991 Convention held in Sitka. We are very concerned about the many rumors regarding the Board and the future of professional nursing in Alaska. Nursing is an important and complex component of health care, and the Board, through its regulatory functions, lays a sound base upon which the profession builds the high quality of care currently delivered throughout the state. The Association has grave concerns regarding the quality of care and the safety of the public should the Board be terminated or combined with another regulatory board.

Please let us know what the Labor & Commerce Committee plans to do with HB 165. We would be most happy to speak in support of the bill should hearings be scheduled.

Sincerely,

Patricia A. Hong, MA, RN, CCRN
President

cc: Senator Virginia Collins

encl: 1991 Resolution regarding the Alaska Board of Nursing



**Alaska
Nurses
Association**

237 East Third Avenue
Anchorage, Alaska 99501
(907) 274-0827

... a constituent of American Nurses' Association

Resolution No. 5

REGARDING ALASKA BOARD OF NURSING

WHEREAS, the State of Alaska has a Sunset Law which requires routine review of all regulatory Boards and Commissions and their termination if no longer functional, and

WHEREAS, the Board of Nursing has existed since 1941 and has undergone its third such review in 1987, and

WHEREAS, the Board of Nursing has received a positive review with a recommendation for continuation of the Board, and

WHEREAS, the Board of Nursing has received public praise for its hard work and effectiveness and has been praised as a model for other Boards, and

WHEREAS, the Board of Nursing has succeeded in accomplishing its objectives of regulating nursing for the protection of the consumer, and

WHEREAS, the Board of Nursing continues to respond to the profession with helpful advice and positions on matters of practice,

BE IT RESOLVED, that the Alaska Nurses' Association expresses great confidence in the Alaska Board of Nursing and appreciation for its accomplishments for the profession of nursing, and

BE IT FURTHER RESOLVED, that the Alaska Nurses' Association supports continuation of the Board of Nursing.

Submitted by: Barbara Miller

Copy to: Governor Hickel; All Legislators; State Board of Nursing

5 February 1992

Senator Pearce
 Alaska State Legislature
 PO Box V (MS 3100)
 Juneau, Alaska 99811

Billy

Dear Senator Pearce,

As you are aware, the Governor has appointed a task force to evaluate all Boards and Commissions. As a result, HB 165, which renews the Alaska Board of Nursing for four years, remains in the Labor + Commerce Committee. If HB 165 is not approved, the Board will cease to exist.

As a registered nurse, I urge you to support HB 165, and vote for full renewal for the Board of Nursing. As one of approximately 5,000 RNs in the state, I know how effective the board has been in implementing the Alaska Nurse Practice Act. The regulations written and approved by the Board are well respected and emulated throughout the country.

The Board has a major role in protecting the public from receiving care from unqualified or impaired nurses. The present structure allows for rapid, unbiased investigation and fair disciplinary action. A board

with less equitable representation from the full range of nursing practice would be slower to respond to complaints from the public, as consultation from outside experts would have to be obtained.

Your vote in granting the Board of Nursing full renewal allows the nursing community to continue to deliver safe, quality health care to all Alaskans.

Sincerely —

Sandra McAnarney, RN

SANDRA McANARNEY, RN
3521 Forest Grove Drive

TUNEAU, Alaska 99801

FEB 1 0 1992
B. Kelly

February 6, 1992

Senator Pearce
Alaska State Legislature
PO Box V (MS 3100)
Juneau, AK 99811

Dear Senator Pearce,

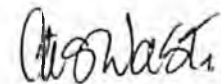
I am writing to express my concern about HB 165 which renews the Alaska Board of Nursing for four years. If the bill is not approved, the Board will cease to exist with some distressing consequences.

Should there be no Board of Nursing, who would regulate the practice of nursing? Who would protect the public from incompetent or impaired nurses? Who would approve or deny approval to nursing schools in the state? Who will examine and licence applicants to practice nursing? Who would review licences, grant temporary licences, and provide for inactive status? Who will regulate specialty practice? And who will discipline those who violate the nurse practice act?

As a registered nurse I urge you to support HB 165 and vote for full renewal for the Board of Nursing. As one of approximately 5,000 RN's in the state, I know how effective the board has been in implementing the Alaska Nurse Practice Act. The regulations written and approved by the board are well respected and emulated throughout the country.

Your vote in granting the Board of Nursing full renewal allows the nursing community to continue to deliver safe, quality health care to all Alaskans.

Sincerely,



Cris Waste RN

FEB 10 1992

Billy

February 6, 1992

Senator Pearce
P.O. Box V
Juneau, Alaska 99811

Dear Senator Pearce,

I am writing regarding HB 165, pertaining to the existence and functioning of the Board of Nursing. As both a registered nurse and a member of the public, I am concerned about decisions that may be made pertaining to the Board of Nursing, and their consequent impact on the delivery of healthcare in Alaska.

The Board of Nursing fulfills a number of functions which, if compromised, could have serious consequences. A few are as follows:

1. The UAA School of Nursing requires Board approval in order to graduate nurses to be licensed. Without a Board of Nursing who would fulfill this function? Would this service be contracted out? If so, at what cost? Or, if a combined Board was formed, how could non-nursing professionals acceptably fulfill this role?
2. The Board presently has an active program for dealing with drug impaired nurses, providing disciplinary measures, monitoring, and support. Its aim is to both protect the public and return as many nurses to safe practice as possible. What will happen to this program?
3. Healthcare is one of the fastest growing and complex industries today. It is obviously one of the top priorities on both the national and state level. Nursing is an independent profession with its own knowledge base that is continuously expanding with ever increasing technological developments. This requires timely and astute decision making pertaining to scope of practice issues and development of standards of care. Such standards and statements require professional acumen that would not be possible to expect from a Board comprised of non-nursing professionals. We are in a time of rapid change. Healthcare institutions and individual professionals look to the Board of Nursing for interpretive statements. If the Board is allowed to sunset, or if a combined Board is formed, there will not be a vehicle available to meet those needs.

4. The Board deals with issues of professional competence. I have personally work with a nurse whose competency was indeed suspect. The Board of Nursing successfully investigated the matter and revoked this individual's license. Without a Board of Nursing who will deal with such critical issues? What protection will you offer the public?

The Board of Nursing represents over 5000 licensed nurses in the State of Alaska, practicing in multifarious fields of healthcare. We need our own Board, comprised of nursing professionals with the expertise to meet today's and tomorrow's demands. In an effort to practice cost containment, do not make the mistake of instituting changes such as elimination of a professional board, incurring hidden and sometimes unknown costs as a consequence. It has been said that "Profits, like sausages, are often esteemed most by those who do not know what goes into them." The same can also be said of cost containment measures. I urge you to see that HB 165 is passed out of the Labor and Commerce Committee as soon as possible.

Sincerely,

A handwritten signature in cursive script, appearing to read "Linda Giannino".

Linda Giannino

Channing
Box 21015
Nuke Bay, AK 99821



Senator Pares
P.O. Box 1
Juneau, AK 99811

Boey

February 6, 1992

Senator Drue Pearce
Alaska State Legislature
PO Box V (MS 3100)
Juneau, Alaska 99811

Dear Senator Pearce;

As you are aware, the Governor has appointed a task force to evaluate all Boards and Commissions. As a result, HB 165, which renews the Alaska Board of Nursing for four years, remains in your Labor and Commerce Committee. If HB 165 is not approved, the Board of Nursing will cease to exist.

As a Registered Nurse, I urge you to support HB 165, and vote for full renewal for the Board of Nursing. As one of approximately 5,000 RNs in the state, I know how effective the board has been in implementing the Alaska Nurse Practice Act. The regulations written and approved by the Board are well respected and emulated throughout the country.

The Board has a major role in protecting the public from receiving care from unqualified or impaired nurses. The present structure allows for rapid, unbiased investigation and fair disciplinary action. A board with less equitable representation from the full range of nursing practice (administration, education, nurse practitioner, staff RN, staff LPN, and a public member) would be slower to respond to complaints from the public, as consultation from outside experts would have to be obtained.

Your vote and support in granting the Board of Nursing full renewal allows the nursing community to continue to deliver safe, quality health care to all Alaskans.

Sincerely,

Kathy Andrews R.N.

Gus & Kathy Address
P.O. Box 9-2782
Anchorage, AK 99509-2782



Senator Bruce PEARCE
Alaska State Legislature
PO Box V (MS 3100)
Juneau
AK 99811

FEB 12 1992

February 6, 1992

Senator Drue Pearce
Alaska State Legislature
PO Box V (MS 3100)
Juneau, Alaska 99811

Dear Senator Pearce;

As you are aware, the Governor has appointed a task force to evaluate all Boards and Commissions. As a result, HB 165, which renews the Alaska Board of Nursing for four years, remains in your Labor and Commerce Committee. If HB 165 is not approved, the Board of Nursing will cease to exist.

As a Registered Nurse, I urge you to support HB 165, and vote for full renewal for the Board of Nursing. As one of approximately 5,000 RNs in the state, I know how effective the board has been in implementing the Alaska Nurse Practice Act. The regulations written and approved by the Board are well respected and emulated throughout the country.

The Board has a major role in protecting the public from receiving care from unqualified or impaired nurses. The present structure allows for rapid, unbiased investigation and fair disciplinary action. A board with less equitable representation from the full range of nursing practice (administration, education, nurse practitioner, staff RN, staff LPN, and a public member) would be slower to respond to complaints from the public, as consultation from outside experts would have to be obtained.

Your vote and support in granting the Board of Nursing full renewal allows the nursing community to continue to deliver safe, quality health care to all Alaskans.

Sincerely,

Evelyn (Kempson)



EMMSM
@rehab

SISTERS OF
PROVIDENCE

SERVING IN THE WEST SINCE 1856

PROVIDENCE HOSPITAL
3200 PROVIDENCE DRIVE
P.O. BOX 190004
ANCHORAGE, ALASKA 99519-0004



SENATOR DON W. PEACE
ALASKA STATE LEGISLATURE
P.O. BOX 1 (MSBIDD)
JUNEAU, AK 99801

FEB 19 1992

February 6, 1992

Senator Drue Pearce
Alaska State Legislature
PO Box V (MS 3100)
Juneau, Alaska 99811

Dear Senator Pearce;

As you are aware, the Governor has appointed a task force to evaluate all Boards and Commissions. As a result, HB 165, which renews the Alaska Board of Nursing for four years, remains in your Labor and Commerce Committee. If HB 165 is not approved, the Board of Nursing will cease to exist.

As a Registered Nurse, I urge you to support HB 165, and vote for full renewal for the Board of Nursing. As one of approximately 5,000 RNs in the state, I know how effective the board has been in implementing the Alaska Nurse Practice Act. The regulations written and approved by the Board are well respected and emulated throughout the country.

The Board has a major role in protecting the public from receiving care from unqualified or impaired nurses. The present structure allows for rapid, unbiased investigation and fair disciplinary action. A board with less equitable representation from the full range of nursing practice (administration, education, nurse practitioner, staff RN, staff LPN, and a public member) would be slower to respond to complaints from the public, as consultation from outside experts would have to be obtained.

Your vote and support in granting the Board of Nursing full renewal allows the nursing community to continue to deliver safe, quality health care to all Alaskans.

Sincerely,

Anna A. Moore RN

M. Mark
9903 Wacker
ER AK 99577



Senator Drew Pierce
Ak. State Legislature
PO Box V (MS 3100)
Juneau, AK 99811

FEB 12 1992

February 7, 1992

Margaret McNaughton, A.N.P.
12700 Lupine Road
Anchorage, AK 99516

Senator Drue Pearce
Senate Labor & Commerce Committee
State Capitol
Juneau, AK 99801-1182

Dear Senator Pearce:

My purpose in writing is to request your support of HB165, which serves to extend the Board of Nursing. As a registered nurse and Advanced Nurse Practitioner I believe that it is essential that the Board of Nursing continue, and continue as a board separate from other professional boards.

Nursing is a unique health care science. Nurses are highly skilled professionals who have long demonstrated responsibility for their professional actions. It is imperative that nurses continue to be responsible for management of the nursing profession within Alaska. Continuation of the Board of Nursing will allow myself and other dedicated nurses to continue to work and grow within our profession and will allow Alaskans to continue to benefit from the high quality of nursing care available within the state of Alaska.

I sincerely hope that you share my concern that the Board of Nursing be extended and will work for passage of HB165.

Sincerely,



Margaret McNaughton, MS, RN, C, ANP
Certified Family Nurse Practitioner

Alaska State Legislature

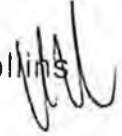
FEB 11 1992

During Session
State Capitol
Juneau, Alaska 99801-1182
(907) 465-2828

During Interim
3111 C Street, Suite 540
Anchorage, Alaska 99503
(907) 561-2040

Senator Virginia Collins

To: Senator Drue Pearce
Senate Labor and Commerce Chair

From: Senator Virginia Collins 

Subject: Alaska Board of Nursing

Date: February 10, 1992

The Alaska Board of Nursing provides a valuable service to Alaskans. This board protects Alaskans and has proven to be strong and effective. Only a supervisory board composed of nurses can understand the problems and needs of nurses. This board should continue to have control over the education, licensure and discipline of nurses and advanced nurse practitioners.

I respectfully ask that you schedule a hearing for HB 165 in Senate Labor and Commerce at your earliest convenience. I am available to discuss this board. Thank you for your consideration.



February 6, 1992

FEB 10 1992

Senator Collins
P.O. Box V
Juneau, Alaska 99811

Dear Senator Collins,

I am writing regarding HB 165, pertaining to the existence and functioning of the Board of Nursing. As both a registered nurse and a member of the public, I am concerned about decisions that may be made pertaining to the Board of Nursing, and their consequent impact on the delivery of healthcare in Alaska.

The Board of Nursing fulfills a number of functions which, if compromised, could have serious consequences. A few are as follows:

1. The UAA School of Nursing requires Board approval in order for graduate nurses to be licensed. Without a Board of Nursing who would fulfill this function? Would this service be contracted out? If so, at what cost? Or, if a combined Board was formed, how could non-nursing professionals acceptably fulfill this role?
2. The Board presently has an active program for dealing with drug impaired nurses, providing disciplinary measures, monitoring, and support. Its aim is to both protect the public and return as many nurses to safe practice as possible. What will happen to this program?
3. Healthcare is one of the fastest growing and complex industries today. It is obviously one of the top priorities on both the national and state level. Nursing is an independent profession with its own knowledge base that is continuously expanding with ever increasing technological developments. This requires timely and astute decision making pertaining to scope of practice issues and development of standards of care. Such standards and statements require professional acumen that would not be possible to expect from a Board comprised of non-nursing professionals. We are in a time of rapid change. Healthcare institutions and individual professionals look to the Board of Nursing for interpretive statements. If the Board is allowed to sunset, or if a combined Board is formed, there will not be a vehicle available to meet those needs.

4. The Board deals with issues of professional competence. I have personally work with a nurse whose competency was indeed suspect. The Board of Nursing successfully investigated the matter and revoked this individual's license. Without a Board of Nursing who will deal with such critical issues? What protection will you offer the public?

The Board of Nursing represents over 5000 licensed nurses in the State of Alaska, practicing in multifarious fields of healthcare. We need our own Board, comprised of nursing professionals with the expertise to meet today's and tomorrow's demands. In an effort to practice cost containment, do not make the mistake of instituting changes such as elimination of a professional board, incurring hidden and sometimes unknown costs as a consequence. It has been said that "Profits, like sausages, are often esteemed most by those who do not know what goes into them." The same can also be said of cost containment measures. I urge you to see that HB 165 is passed out of the Labor and Commerce Committee as soon as possible.

Sincerely,

A handwritten signature in cursive script, appearing to read "Linda Giannino".

Linda Giannino

1000
Belen

Senate Labor and Commerce Committee
Mr. Drue Pearce, Chm.
State of Alaska
Juneau, Alaska 99801-1182

Dear Mr. Pearce:

May I introduce myself in order to put my comments in perspective? By profession I have been a Registered Nurse since 1960 and an Advanced Nurse Practitioner since 1976. I have lived in Alaska since 1967 and have been employed as a Itinerant Public Health Nurse, Public Health Nurse Coordinator, and Nurse Practitioner.

Re: HB 16 re extension of the Board of Nursing. It is my understanding that a proposal has been made to combine the Boards for Medicine, Denistry, and Nursing. While administratively it would appear to be a great idea, in reality it would result in chaos. Philosophically, as well as technically, each of these professions represent very different disciplines and in day to day practice are not always in harmony with each other. As a nurse with some "medical type experiences", I would find it very difficult to presume I could direct doctors and dentists in their fields. Neither do I feel they are qualified to define and direct nursing practice.

As an example of this lack of understanding consider the response of the American Medical Association to the national shortage of nurses. Their solution was to create a new person who would be called a technician, do tasks similar to those of a nurses aide and/or Licensed Practical Nurse, and be trained and controlled by the phycsians who then would expect nurses to provide on the job supervision, etc. It would seem far simpler and more logical to put energy into making nursing a more attractive profession by promoting education and salary benefits.

In Alaska nursing is well represented: over 4000 hold licenses. That adds up also to over \$400,000 paid to the State for related fees. Of that the State provides only one paid staff member. As a taxpayer that appears to me to be a good return on a small investment.

Summarizing: The Board of Nursing needs to remain in order to continue the job they have done well at relatively minor expense. Each of the Health Professions Boards needs to be enabled to focus on the unique needs and opportunities within their profession and not dilute their talents by asking them to take on another's responsibilities. As the saying goes, If it ain't broke don't fix it. The Board of Nursing is strong and healthy; don't break it.

Sincerely,
Charles Wolfe Jost
3832 Young St
Anch AK 99508
561 6652

The Green Bough
BED AND BREAKFAST
HARRY & PHYLLIS JOST
7832 VINTAGE
SOUTH BAY, CALIF. 90281



Mr. James F. ...
Santa Cruz ...
State of Alaska
... Alaska, U.S.

February 10, 1992

Senator Drue Pearce
Alaska State Legislature
P.O. Box V (MS 3100)
Juneau, Alaska 99811

Dear Senator Pearce:

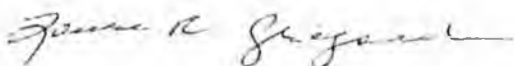
As you are aware, the Governor has appointed a task force to evaluate all Boards and Commissions. As a result, HB 165, which renews the Alaska Board of Nursing for four years, remains in the Labor & Commerce Committee. If HB 165 is not approved, the Board will cease to exist.

As a registered nurse, I urge you to support HB 165, and vote for full renewal for the Board of Nursing. As one of approximately 5,000 RN's in the state, I know how effective the board has been in implementing the Alaska Nurse Practice Act. The regulations written and approved by the Board are well respected and emulated throughout the country.

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Your vote in granting the Board of Nursing full renewal allows the nursing community to continue to deliver safe, quality health care to all Alaskans.

Sincerely,



Laura R. Gregovich
P.O. Box 20281
Juneau, Alaska 99802

FEB 14 1992

Mary Anne Wilson, RN, ANP
PO Box 364
King Salmon, AK 99613

Drue Pearce, Chair
Senate Labor and Commerce Committee
Alaska State Legislature
PO Box V (MS 3100)
Juneau, AK 99801-1182

February 12, 1992

Dear Senator Pearce;

As you are aware, the Governor has appointed a task force to evaluate all Boards and Commissions. As a result, HB 165, which renews the Alaska Board of Nursing for four years, remains in the Labor and Commerce Committee. IF HB 165 is not approved, the Board will cease to exist.

As a registered nurse, I urge you to support HB 165 and vote for full renewal for the Board of Nursing. As one of approximately 5,000 RN's in the state, I know how effective the board has been in implementing the Alaska Nurse Practice Act. The regulations written and approved by the Board are well respected and emulated throughout the country.

The Board approves schools of nursing in Alaska, examines all applicants for nursing licenses and advanced nurse practitioner licenses, regulates specialties of nursing, and brings disciplinary action against those who violate the practice act.

The Board has a major role in protecting the public from receiving care from unqualified or impaired nurses. The present structure allows for rapid, unbiased investigation and fair disciplinary action. A board with less equitable representation from the full range of nursing practice would be slower to respond to complaints from the public, as a consultation from outside experts would have to be obtained.

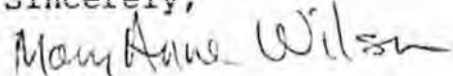
The public is fully aware, upon inquiry, about the status of the board's memorandums of agreement with "impaired practitioners," unlike other boards who choose to keep the impaired practitioners anonymous.

Acknowledging budgetary constraints, nurses contribute over \$400,000. to the state in licensing fees with only one paid staff.

Additionally, an independent audit gave the Board an outstanding evaluation and recommended an eight year continuation instead of four years.

Your vote in granting the Board of Nursing full renewal allows the nursing community to continue to deliver safe, quality health care to all Alaskans.

Sincerely,



Mary Anne Wilson, RN
Advanced Nurse Practitioner

cc: Governor Hickel

PUBLIC OPINION MESSAGE

DEAR: SENATOR PEARCE

NAME: SHARON MYTAL
TITLE:
ADDRESS: PO BOX 20063
CITY: JUNEAU, AK. ZIP: 99802
PHONE: N/R-
BILL NO: HB 165
SUBJECT: BOARDS
MESSAGE: I DO NOT SUPPORT A JMT. BOARD OF MEDICINE, DENTISTRY & NURSING. PLEASE
SUPPORT HB 165 AND CONTACT ME IF YOU WANT FURTHER INFORMATION.

POMID: 00100514
DATE: 92/02/13
TIME: 10:05:14
LIONAME: JUNEAU LIO

COPIES: SENATORS

COLLINS
HALFORD
KERTTULA
CRAFT

PUBLIC OPINION MESSAGE

DEAR: SENATOR PEARCE

NAME: BETSEY BURDOTT
TITLE:
ADDRESS: BOX 9143
CITY: KETCHIKAN, AK ZIP: 99901
PHONE: 225-8829
BILL NO: SB 16
SUBJECT: EDUCATION EMPLOYEE COLLECTIVE BARGAINING
MESSAGE: THANK YOU FOR SUPPORTING SB 16 AND FOR ALL YOUR HARD WORK!

POMID: 09184923
DATE: 92/02/13
TIME: 18:49:23
LIONAME: KETCHIKAN LIO

COPIES: SENATORS

COLLINS
COTTEN
DUNCAN
ELIASON
FISCHER
FRANK
HALFORD
JONES
KERTTULA
MENARD
POURCHOT
ROEY
SHULTZ
STURGULEWSKI
HOFFMAN
ZHAROFF

PUBLIC OPINION MESSAGE

DEAR: SENATOR PEARCE

NAME: FRAN KINKEAD

TITLE: A.N.P.

ADDRESS: P.O. BOX 22320

CITY: JUNEAU

PHONE: N/R-

BILL NO: HB 165

SUBJECT: ~~EXTEND BOARD OF NURSING~~

ZIP: 99802

MESSAGE: I AM A CERTIFIED NURSE MID-WIFE AND REGISTERED NURSE. I SUPPORT HB 165 AND WOULD LIKE IT MOVED OUT THE THE SENATE LABOR AND COMMERCE COMMITTEE. I DO NOT SUPPORT A JOINT BOARD OF MEDICINE, DENISTRY AND NURSING. THANK YOU FOR YOUR SUPPORT.

POMID: 00095404

DATE: 92/02/13

TIME: 09:54:04

LIONAME: JUNEAU LIO

COPIES: REPRESENTATIVES SENATORS

HANLEY
LARSON
G.PHILLIPS

ADAMS
COLLINS
HALFORD
KERTTULA
CRAFT

PUBLIC OPINION MESSAGE

DEAR: SENATOR PEARCE

NAME: DAPHNE HOFSCULTE

TITLE:

ADDRESS: PO BOX 55226

CITY: NORTH POLE

PHONE: 488-2251

BILL NO: SB 16

SUBJECT: EDUCATION EMPLOYEE COLLECTIVE BARGAINING

ZIP: 99705

MESSAGE: THANK YOU FOR YOUR SUPPORT OF SB 16. EVERYONE BENEFITS FROM AN EFFICIENT AND REASONABLE PROCESS. WE APPRECIATE YOUR HELP IN MAINTAINING PERA. THANK YOU

POMID: 07101428

DATE: 92/02/13

TIME: 10:14:28

LIONAME: FAIRBANKS LIO

COPIES: SENATORS

COLLINS
COTTEN
DUNCAN
CRAFT
FISCHER
FRANK
HALFORD
JONES
KERTTULA
MENARD
POURCHOT
RODEY
SHULTZ
STURGUIEWSKI
UEHLING
ZHAROFF
ELIASON

February 18, 1992

Dear Governor Hickel and Esteemed Legislators:

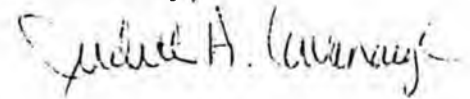
I am a Registered Nurse in Alaska and have worked at Bartlett Memorial Hospital for more than six years. I have always been proud to be a nurse and was therefore greatly concerned to hear that the Alaska State Board of Nursing will "sunset" if you do not pass legislation by 30 June 1992 to renew it. I urge you to renew this most important Board for the nurses of this state.

I know you have received a large volume of mail on this issue and have heard the multitudes of reasons for renewing it. There are more than 5000 nurses in this state and we depend on the Board of Nursing to: maintain professional peer review; the Impaired Nurses Program; certification of state nursing school curriculum; and recommending regulations and standards for nursing practice in this state.

The Board of Nursing should not be combined with other Boards, as has been proposed, as we have unique needs, and those needs will not be met to my satisfaction by combining those Boards to save a few dollars. Health care is an important issue to all Alaskans, and the maintaining of high quality nursing care is vitally important to all nurses in this state.

The State Board of Nursing plays a fundamental role in maintaining the high quality of nursing in this state. I urge you to renew this board.

Sincerely,



Judith A. Cavanaugh
510 3rd Street
Juneau, AK. 99801

2-10-92

FEB 19 1992

Senator Drue Pearce
Alaska State Legislature
P.O. Box V
Juneau, Alaska 99811

Senator Pearce,

As a Registered Nurse, I am asking you
to send HB 165 to the Senate and
personally urge you to vote for its
passage.

I believe that Nurses working under
Nursing Peers regulate themselves and
the Board which exists, does have a
major role of protecting our Alaskans, the
public.

Thank you for your prompt attention to a
very important issue, HB 165, renewal of
the Alaska Board of Nursing.

Sincerely,

Rebecca J. Jaeger, RN.
3451 Meander Way
Juneau, Alaska 99801

FEB 18 1992

8321 Counterpane Lane
Juneau, Alaska 99801
11 February 1992

Senator Pearce
Alaska State Legislature
P.O. Box V (MS 3100)
Juneau, Alaska 99811

Dear Senator Pearce,

As you are aware the Governor has appointed a task force to evaluate all boards and commissions. As a result HB 165, which renews the Alaska Board of Nursing for four years, remains in the Labor and Commerce Committee. If HB 165 is not approved, the board will cease to exist. This may not at first glance appear to have significant implications if the functions of the Board of Nursing are not well known to you. Basically the Board of Nursing sets the standards from which we practice. They write and implement the rules and regulations of the Nurse Practice Act, which is a law defining and regulating how we practice nursing. This protects the public by making nurses accountable for their nursing practice. In practical terms, accountability means:

- the review and granting or denial of nursing licenses (we could lose our ability to become licensed, relicensed, or to have impaired nurse's licenses revoked)
- the administration of nursing licensure examinations (new nursing graduates will no longer be able to become licensed in Alaska)
- approval or denial of approval of nursing programs (the University of Alaska nursing program could no longer be accredited in state, so it may be lost)
- setting the rules from which we practice and modifying them as the needs arise (examples include: allowing Certified Nurse Practitioners to prescribe medications and extending the allowable practices of Licensed Practical Nurses to include regulating IVs.) In the unique settings of Alaska, this ability to change and regulate practice standards is even more crucial than any other state, because of the remoteness of so many of the villages and the special needs that they experience.

In my position as nurse manager of a Critical Care Unit, I train newly hired nurses to work in our unit then evaluate their performances. Four years ago we hired a nurse who was having a great deal of difficulty functioning in her capacity as a staff nurse. We tried various types of remedial training including lengthening her probation period to nearly double the normal time, giving her special one-on-one training, additional counselling, and special classes. None of these methods were effective in helping to improve the quality of her care or her

SENT
LETTERS! ☺

For your
LAC files

♡ SJS

ability to function. When it was evident that she would or could not change, she was let go. Because of the severity of her deficiencies, we took her case before the Board of Nursing for review. They sent an investigator who researched her professional career quite thoroughly, then after the investigation, her Alaska nursing license was revoked. Without the Board of Nursing, we could have terminated her position at this hospital, but would have had no way to prevent her from working as a nurse at any other Alaska facility including: clinics, hospitals, schools, or businesses. Because of the Nursing Board, she will no longer be able to practice in Alaska.

One issue the Board is currently researching, is the licensing and training of nurse's aides. Because of the trend toward shorter hospital stays and more time spent with in-home care, there is a desperate need for trained health aides for home bound patients. A few months ago, we had two patients in our unit at the same time who were going to require 24 hour home care. Their families wanted very much to take them home, but no trained help could be found, and the families simply could not care for them without it.

These are only a few examples of what the Alaska Board of Nursing has and is planning on accomplishing that has affected myself, my staff, and my patients. There are many more. These are not issues that can be addressed by a combination board attempting to solve conflicting difficulties or problems of unrelated professions. They are issues that uniquely affect nurses. The Alaska Board of Nursing has functioned well for 50 years setting standards after which other states have patterned their own.

I urge you to support HB 165, and vote for full renewal of the Board of Nursing. To lose the ability to protect the public from impaired or unqualified nurses or change the practice of nursing as the needs of the public changed, would be a sad and frightening legacy to leave behind.

Sincerely,

A handwritten signature in cursive script that reads "Janice L. Gray R.N. CCRN". The signature is written in dark ink and is positioned above the printed name.

Janice L. Gray, R.N., CCRN

Senator Drue Pearce, Chair
Sneate Labor and Commerce Committee
Room 101
P.O. Box 5
Juneau, AK 99811-1182

2/17/92

Dear Senator Pearce,

I am writing in regard to the issue of Boards and Commissions, and the plans that have been discussed for combining them or their elimination due to inertia.

First, I am a nurse and appreciate the direction the Board of Nursing takes in regard to issues that affect my practice. For instance, the Nursing Board undertook a project several years ago to better define the different levels of nursing education by changing the distinction in the naming of nurses. This action has long term effects in that the various levels of education are acknowledged (ie, LPN, one year, RN, 2-3 years, and Professional Nurse, 4 years of education, in a University setting). Most nurses aspire to the BSN, or 4-year degree, but the public is unaware of the various distinctions and hospitals are not willing to adapt differences because they prefer to hire according to the lowest common denominator of education that they can get away with. A combined "super board" would not have considered such action important, and/or, physicians would have opposed it, as most physicians see nurses in a menial manner. (They usually hire LPN's for their offices, as they are the least expensive and the least likely to challenge their decisions.)

Second, the Board of Nursing is important to protection of the public in it's role of monitoring chemically impaired professionals. I had the opportunity to read a report from the Board of Nursing regarding a nurse who agreed to participate in the program. The nurse agreed to all the provisions of the agreement. If a super-board were in place, would there be such detail? Such monitoring? I doubt it!

Third, it is difficult to compare Nursing with any other health care profession. There are about 5,400 licensed nurses in Alaska and about 1200 MD's, and fewer Pharmacists, Chiropractors, etc. Nurse's jobs are often controlled by physicians. Anyone who doubts this only has to look at the fact that Providence Hospital has over 800 nurses on staff and guess how many there are on the Board of Directors? ?? You are correct. None. Guess how many physicians? Last I heard, there were 3 out of (I think) 12 positions. Although MD's might be able to influence the position of Pharmacists, Respiratory Therapists, and other licensed health care workers, there is no group so vulnerable to the whims of MD's as nurses. To combine the Nurses on a board with MD's would be a step back-ward for the primarily female (97%) nurses against the primarily male (60-70%) MD's.

I'm sure you are aware of the need to reduce state spending. However, I am not convinced that this is the proper manner in which to do it. I would like very much to see your committee move to extend the Board of Nursing for 4 years.

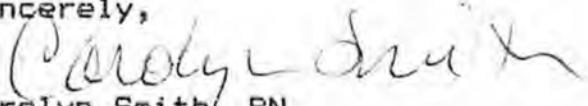
I had the opportunity to request the support of the Board for a Masters' Thesis project I started on (and haven't finished). This was in regard to Native RN's. They were very supportive of me and provided me with the data I was seeking regarding how many Native RN's were licensed in the State. (only 26 for the 88 licensure survey.) I recently asked for an update on the 90 licensure data and was told that the Board didn't have enough money or time to analyze the data. They really are operating in a tight budget! I'd like to know the results of the 90 survey!

On a different matter, I am fully in support of your "Prevention of Teen Pregnancy" plan. I am a school nurse (Steller Secondary) in Anchorage, and although we have not had a single pregnancy this school year yet, I am fully aware of the devastation that occurs with this social problem. I am very, very supportive of all efforts to prevent teen pregnancy. Our school recently voted in favor of having condoms available in the school. The impression I got was that the students would rather not get them from the nurse, but from restroom vending machines. I agree.

The conservative approach is that this will encourage sexual activity. I asked students about this and they indicated that this idea was ridiculous! They said teens have sex all the time, and having condoms in restrooms (for purchase, at a dollar a condom or so) would simply make it less embarrassing for them to protect themselves.

I hope you will consider my request for a 4 year continuance of the Board of Nursing. And, Please contact me if you have further questions.

Sincerely,


Carolyn Smith, RN

1521 Shore Drive
Anchorage, AK 99515

FEB 24 1992

**Kodiak
Area
Native
Association**



February 18, 1992

402 Center Avenue
Kodiak, Alaska 99615
Phone (907) 486-5725

Representative Cliff Davidson
Room 108, Capitol
P. O. Box V
Juneau, Alaska 99811

Dear Mr. Davidson:

I am writing to support House Bill 168, a continuance for Board of Nursing for the next four (4) years. Professional licensure is a very deep issue for nursing. Nursing is both an art and a science who's discipline is independent, interdependent and dependent upon medical practice. Even though nursing interrelates in a team manner, our scientific base for practice is very different from that of medicine, veterinary science, or chiropractic medicine etc. Nursing is best versed to address licensure concerns, legal issues related to professional practice and to plan the direction of change for future nursing practice. Unless a professional has been educated and mentored in our scientific practice base, it would be impossible to address the intricacy of practice issues and related legal issues.

Nursing has enjoyed it's own direction and structure for decades. To structure nursing within a pool of health care professionals to address licensure issues is a step back not only for nursing, but for other disciplines involved.

I ask sincerely for the future viability of the nursing profession to continue the Nursing State Board as is. Considering any other structure would be the end of the autonomous nursing practice we have and continue to struggle for daily.

Respectfully,

KODIAK AREA NATIVE ASSOCIATION
KELLY SIMEONOFF, JR., PRESIDENT

Lauren J. Salamone, M.S., R.N.
CHAF Manager

cc: Drew Pearce

LJS/mr

Senator Pearce
Alaska Senate Labor and Commerce Committee
State Capitol
Juneau, Alaska 99801-1182

February 24, 1992

Dear Senator Pearce

As a member of the Labor and Commerce Committee you are aware of the task force appointed by Governor Hickle to evaluate all Boards and Commissions. HB 165, which renews the Alaska Board of Nursing for four years, is currently before your committee. If HB 165 is not approved, the Board of Nursing will cease to exist.

As a registered nurse, I urge you to support HB 165, and vote for full renewal for the Board of Nursing. As one of approximately 5,000 RNs in the state, I know how effective the board has been in implementing the Alaska Nurse Practice Act. The regulations written and approved by the Board are well respected and emulated throughout the country.

The Board has a major role in protecting the public from receiving care from unqualified or impaired nurses. The present structure allows for rapid, unbiased investigation and fair disciplinary action. A board with less equitable representation from the full range of nursing practice would be slower to respond to complaints from the public, and more costly, as consultation from outside experts would have to be obtained.

Your vote in granting the Board of Nursing full renewal allows the nursing community to continue to deliver safe, quality health care to all Alaskans.

Sincerely,

Lianne Rogers RN

MAR 3 1992

Senator Pearce
Alaska Senate Labor and Commerce Committee
State Capitol
Juneau, Alaska 99801-1182

February 24, 1992

Dear Senator Pearce

As a member of the Labor and Commerce Committee you are aware of the task force appointed by Governor Hickle to evaluate all Boards and Commissions. HB 165, which renews the Alaska Board of Nursing for four years, is currently before your committee. If HB 165 is not approved, the Board of Nursing will cease to exist.

As a registered nurse, I urge you to support HB 165, and vote for full renewal for the Board of Nursing. As one of approximately 5,000 RNs in the state, I know how effective the board has been in implementing the Alaska Nurse Practice Act. The regulations written and approved by the Board are well respected and emulated throughout the country.

The Board has a major role in protecting the public from receiving care from unqualified or impaired nurses. The present structure allows for rapid, unbiased investigation and fair disciplinary action. A board with less equitable representation from the full range of nursing practice would be slower to respond to complaints from the public, and more costly, as consultation from outside experts would have to be obtained.

Your vote in granting the Board of Nursing full renewal allows the nursing community to continue to deliver safe, quality health care to all Alaskans.

Sincerely,

Marilee Atwell

The Powells
8871 Pioneer Dr.
Anchorage, AK 99504



Senator Pearce
Alaska Senate Labor and Commerce Committee
State Capitol
Juneau, Alaska. 99801-1182.

MAR 3 1992

February 24, 1992

Senator Drue Pearce
Alaska State Legislature
P O. Box V (MS 3100)
Juneau, Alaska 99811

Dear Senator Pearce,


I understand that you are the Chair of the Labor and Commerce Committee. HB 165, which renews the Alaska Board of Nursing for four years, has been and remains in your committee. If HB 165 is not approved, the Nursing Board will cease to exist. This sun-downing is due to occur this year.

As a Registered Nurse, I urge you to move this bill out of your committee so that it can be voted on and the Board of Nursing renewed. The Board of Nursing is effective in many areas, most notably for the development of the Alaska Nurse Practice Act. These regulations are well respected and emulated throughout the nation.

The Board has a major role in protecting the public from receiving care from unqualified or impaired nurses. The present structure allows for rapid, unbiased investigation and fair disciplinary action. In this age of spiraling health care costs and health care related litigation, it is in the best interest of all Alaskans that a functioning Board of Nursing be present.

The nursing community wants to continue to deliver safe, quality health care to our clients. Renewing the Alaska Board of Nursing will help us do just that.

Sincerely,


Therese T. Frank R.N. CCRN
426 Gold St.
Juneau, Alaska 99801

I support extending the Alaska Board of Nursing as a separate Board. The health and safety of Alaskans are served well by this Board as it functions now.

Signed:

Date:

Kenneth J. Kokjer

25 Feb 92

*Kenneth J. Kokjer
Box 80907
Fairbanks AK 99705*

Alaska Board of Nursing
Fact Sheet
March 1992

- Composition: 4 Registered Nurses - 1 from baccalaureate nursing education
- Betsy McCune, RN, MN 3/93
3 members at large
- Gail Stewart, RN, ANP (Anchorage) 3/92
- Mary Stroeing, RN (Juneau) 3/94
- Susan Gass, RN (Ketchikan) 3/95
1 Licensed Practical Nurse - vacant
2 Public Members - Louise Dean (3/94)
Georgeann Wasky (term expired 3/91)
- Functions: Adopt regulations pertaining to nursing practice
- Prescriptive authority for advanced nurse practitioners
- Authorization to practice for CRNAs and ANPs
- Continued competency requirement for license renewal and reinstatement
Formulate standards of nursing practice
- Position Paper on Expanded Practice for Experienced LPNs
- Scope of Practice for Registered Nurses and Advanced Nurse Practitioners
- LPN Utilization in Administration of Oral, Subcutaneous and IM Medications
- Nursing Responsibilities in Intravenous Therapy
- Activities of Unlicensed Nursing Personnel
Examine, license, renew the licenses of qualified applicants
- NCLEX-RN held February 1992 and July 1992
- NCLEX-PN held October 1991 and April 1992
- Biennial renewal November 1992 for all registered nurses
Investigate alleged violations of the Nurse Practice Act and take disciplinary action
- Approximately 35 investigations ongoing @ any one time
- Litigation in progress for 3 cases
- Approximately 19-35 individuals monitored as a result of impaired practice (each requires 3 year monitor cycle)
- Board spends 25% of each quarterly meeting dealing with disciplinary issues
- Board participates in 2 additional conference calls per year dealing with disciplinary issues
Approve curricula and adopt standards for basic education programs
- One time approval for Everett Community College to sponsor LPN-->ADN program in Ketchikan
Approve nursing education programs
- Most recent approval for BSN & ADN Programs Nov 1991
Survey basic nursing education programs within state
Provide advisory opinions regarding whether nursing practice procedures & policies comply with acceptable practice standards
Keep records of proceedings and submit annual reports
- Proceedings of Board meetings available on a quarterly basis and circulated to health care facilities, schools of nursing, AANA
- Annual reports available
- Budget: Average FY 90 and 91 Annual Costs for Board = \$457,613
Average FY 90 and 91 Annual Revenue = 335,050
Difference = \$122,563

(If the 5700 RNs and LPNs increased licensure fees by \$20 per biennium, the Board of Nursing would be entirely self-support.)

Compiled by the Alaska Nurses Association

RESPONSE SENT 3/5

Donna Frostad
4010 Wispen Circle
Anchorage, Alaska 99517
March 1, 1992

Dear Senator Pearce,

This is being written to voice my opinion on HB 165.

I do not believe that the Alaska Board of Nursing should be dissolved. Last year the Alaska House of Representatives recommended an eight year extension for the board of nursing.

I do not feel that a board that is not familiar with requirements of nursing, monitoring and setting up qualifications and ongoing educational requirements should monitor our licensing.

Please do not take away the current Board of Nursing. Thanks you

Donna Frostad
Registered Nurse, Certified

NURSES!

Ms Donna A Frostad
4010 Wispen Cir #A
Anchorage AK 99517-2827



Senator Bruce Pease
Chair Labor and Commerce Committee
State Capital
Juneau, Ak.
99811

RESPONSE SENT
3/5

2321 Southview Drive
Anchorage, Alaska 99502
March 1, 1992

Senator Drue Pierce, Chair
Labor and Commerce Committee
State Capitol
Juneau, Alaska 99811

Dear Senator Pierce

I was disturbed to hear that the Alaska Board of Nursing will cease to exist at the end of June unless HB 165 Extension of the Board of Nursing is passed by the Senate during this session. This board was recommended for an eight year extension last year by the House of Representatives.

The Board of Nursing represents and monitors the practice of over 5000 nurses statewide. I do not feel that the initiative to combine the medical, dental, pharmacy and nursing boards into one super board is acceptable. The standards of practice and ethics set forth in the Alaska Nurse Practice Act can be best monitored by nurses who are intimately knowledgeable in the fine points of nursing practice. I am certain that members of the medical, dental and pharmacy professions feel equally as strong about the dilution of their boards of practice. In this lawsuit-conscious society, it is imperative that the boards remain separate in order to best maintain the high quality of the professions in this state.

I hope you and your committee will quickly vote on this bill and recommend it be passed by the entire Senate as soon as possible.

Thank you for your help on this vital issue.

Sincerely,

Christine G. Boone RN

Christine G. Boone, RN

March 1, 1992

Patty M. Scott RN
P.O. Box 142872
Anchorage, AK 99514

Senator Drue Pearce
Alaska State Legislature
P.O. Box V (MS 3100)
Juneau, Alaska 99811

Dear Senator Mr. Pearce,

As you are aware, the Governor has appointed a task force to evaluate all Boards and Commissions. As a result, HB 165, which renews the Alaska Board of Nursing for four years, remains in the Labor & Commerce Committee. If HB 165 is not approved, the Board will cease to exist.

As a registered nurse, I urge you to support HB 165, and vote for full renewal for the Board of Nursing. As one of approximately 5,000 RNs in the state, I know how effective the board has been in implementing the Alaska Nurse Practice Act. The regulations written and approved by the Board are well respected and emulated throughout the country.

The Board has a major role in protecting the public from receiving care from unqualified or impaired nurses. The present structure allows for rapid, unbiased investigation and fair disciplinary action. A board with less equitable representation from the full range of nursing practice would be slower to respond to complaints from the public, as consultation from outside experts would have to be obtained.

Your vote in granting the Board of Nursing full renewal allows the nursing community to continue to deliver safe, quality health care to all Alaskans.

Sincerely,



Patty M. Scott

Billy

March 1, 1992

Senator Drue Pearce, Chair
Labor and Commerce Committee
State Capitol
Juneau, Alaska 99811

Senator Pearce:

I am a Registered Nurse with nearly 15 years of work history in the State of Alaska. This letter is to express my desire to have the Board of Nursing to continue to represent and monitor the practice of the 5000+ nurses in the State of Alaska. The Board of Nursing was recommended LAST YEAR for an eight year extension by the Alaska House of Representatives. The initiative to combine the medical, dental, pharmacy and nursing boards into a "Super Board" is not acceptable to me. Only nurses, or the Board of Nursing, should have power over the Alaska Nurse Practice Act. As a working member of one of the largest labor forces in the state, I urge you to pass HB 165 Extension of the Board of Nursing out of your committee.

Sincerely,

Marjorie King

Marjorie King, RN
7307 Foxridge Circle #2
Anchorage, Alaska 99518

*Steph -
Send 'new'
nurses letter, pl.
13*

March 1, 1992

Dear Senator Pearce,

Currently, the Alaska Board of Nursing is in danger of being eliminated through the Sunset Review process. I am pleased that we have a process through which we examine the purpose, efficiency, and effectiveness of our state's Boards and Commissions, and eliminate those that are no longer needed. This is not the case for the Alaska Board of Nursing.

As a former member of the Board, I am aware that in the past ten years, the responsibilities of the Board have almost doubled. The Board licenses the single largest group of health professionals in the state (6,000), reviews two schools of nursing for safety, appropriateness of curricula, and preparation of its students for licensure and practice, monitors the practice of nurses in the state, and investigates complaints or concerns regarding nursing practice, and gives the licensing exams. The Board has also taken on the certification of nurses aides in the past several years.

The Board carries out these duties without unnecessary travel or meetings. It holds meetings by teleconference when it can, has packed agendas, and the efficient staff provide board members with background information in advance so that the members are prepared for the deliberations.

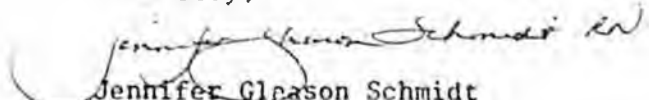
At a time when medical and nursing care is becoming more complex by the month, and cost containment measures are increasing, it is all the more important that there is a well-functioning, experienced Board of NURSING to ensure that nurses are functioning within the scope of their education and experience and within the Nurse Practice Act.

One of the concerns that I have about possibly combining the Board of Nursing with some other health boards is that it is not uncommon for nurses to be asked to provide patient care for which they are not prepared, covered, nor paid. Physicians, dentists, pharmacists, and health care administrators sometimes ask nurses to act outside their scope, so that they won't have to get up and run into the hospital, stay around and monitor the patient, or pay another provider. It's important for nurses to know that there is a board that can understand their concerns and back them up in such circumstances.

In November of 1991, Alaska's nurses celebrated the 50th Anniversary of the Alaska Board of Nursing. I am proud to have worked with the nursing leaders and consumers who have donated their time to promote the safest nursing care possible for Alaska's residents. I see great benefit in utilizing experienced volunteers who understand Alaska's unique health care systems, rather than contracting out many of the services that the state must provide.

Please support the continuation of this essential board, for a full four years.

Sincerely,



Jennifer Gleason Schmidt

Box 82944, Fairbanks, Alaska, 99708
4572312

I support extending the Alaska Board of Nursing as a separate Board. The health and safety of Alaskans are served well by this Board as it functions now.

Signed:

Date:

Jarisa B. Disamoto, RN
3-2-92

Fairbanks Head Start
1027 Evergreen Street
Fairbanks, AK

Dear Senator Pearce,

March 2, 1992
MAY 5 1992

It has come to my attention that there is a bill, namely HB 165 Extension of The Board of Nursing, that needs to be passed out of committee. If it is not, the Alaska Board of Nursing will no longer exist. Instead a "super board" combining medical, dental, pharmacy and nursing boards will be enacted. This is not acceptable to me, a nurse.

I feel that each of the professions noted above needs its own governing body i.e. board to insure continuing quality of professional service. Each profession noted above is unique and cannot and should not be lumped into one unit.

Sincerely,

Dolores Ingram RN
3522 W. 27th Ave.
Anchorage, Alaska 99517

March 3, 1992

Senator Arue Pearce
Alaska State Legislature
PO Box V (US 3100)
Juneau, Alaska 99811

Dear Senator Pearce,

As you are aware, the Governor has appointed a task force to evaluate all boards and commissions. As a result, HB165, which renews the Alaska Board of Nursing for four years, remains in the favor of Commerce Committee. If HB165 is not approved, the Board will cease to exist.

As a registered nurse, I urge you to support HB165, and vote for full renewal for Board of Nursing. As one of approximately 5,000 RNs in the state, I know how effective the Board has been in implementing the Alaska Nurse Practice Act. The regulations written and approved by the Board are well respected and emulated throughout the country.

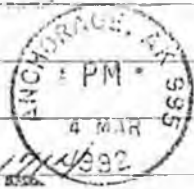
The Board has a major role in protecting the public from receiving care from unqualified or impaired nurses. The present structure allows for rapid, unbiased investigation and fair disciplinary action. A board with less equitable representation from the full range of nursing practice would be slower to respond to complaints from the public, as consultation from outside experts would have to be ob-

Thank you.

Your vote in granting the Board of
Nurses full renewal allows the nursing
community to continue to deliver safe, quality
health care to all Massans.

Sincerely,
Melinda Ann Pellegrino RN.

W.A. Williams RV
1638 N. Pine Street
Anchorage, AK 99508-1714



Senator & Dr. George
Alaska State Legislature
PO Box V (C153100)
Juneau, Alaska 99811

MAR 5 1992

To: Senator Drue Pearce
State Capitol
Juneau, AK. 99801-1182

From: Robert Chatfield
9573 Eagle St.
Juneau, Ak. 99801

March 3, 1992

In the last months, I have done some investigating into the functioning of the Board of Nursing and the proposals of the Task Force on Boards and Commissions. I am a Registered Nurse in the state of Alaska and I do have my biases, however I think there are some grave problems with the proposals under consideration by the task force. It also has become apparent that the task force has no other agenda than to consolidate boards and commissions within the State of Alaska. I think you have been asked to improve a round wheel by finding another shape that will work better, instead of improving on the round wheel. Good Luck.

The Division of Occupational Licensing and our present licensing structure are working examples that other states look to as a model for consolidation of functions. The screening of applications, secretarial work, computer input, investigative work, renewal of licenses are all handled centrally by the Division. I can't speak to what happens in other boards, but the Board of Nursing essentially rubber stamps applications that have been screened by Occupational Licensing and spends their time addressing questionable applications and questions involving the Nursing Practice Act of the State of Alaska. The monitoring of persons found to have violated the Nursing Practice Act is also done by members of the board. I understand this usually has to do with drug abuse offenses, and the health professions and the Division of Occupational Licensing have proposals made regarding the Alaska Practitioner Recovery Program (HB323?) which will consolidate much of the monitoring function now carried on by the Board of Nursing and other boards. With all this consolidation, why not just consolidate the boards into the Citizens Health Board?

As a Registered Nurse in the State of Alaska, I could participate on the State Board of Nursing and I think I'm qualified to function conscientiously and well in that capacity. I have a good idea of the standards of nursing practice and the issues regarding the practice of nursing in general. I don't have the vaguest idea of what the standards are of dental practice or occupational therapy, but according to the design of the Citizens Health Board, I could be asked to make decisions about whether a person didn't meet their standards or had violated their standards. I feel just as ignorant of the practice of law and the standards to which lawyers are held. Why shouldn't I be on the Board of Governors of the AK Bar? Now, if these small points regarding the practice of a profession are to be delegated to a subcommittee of the Citizens Health Board, to report back to the entire Citizens Health Board, and the subcommittee is composed of experts in the field. What have you got? In my case, you have a Board of Nursing, under a larger Board. Has Per Diem and travel expense been cut for the subcommittee to meet, and later the expense of the Citizens Health Board? I doubt it.

When I'm sitting on the Citizens Health Board, and a questionable application regarding a physical therapist comes up, am I to rubber stamp the recommendation of the representative of the field, or do I ask for the representative to explain just what it is that is troubling them about their standard of practice that is questionable in this case, so I can understand what it is I'm about to vote on? If I don't ask, then this position on the Board, in fact all positions on the Board, are just a rubber stamp waste of time. The decisions about an applicant have been made before we met, by the expert in the field. So I ask to understand the standard of practice in the field of physical therapy to better understand what I'm about to vote on, and it takes time. The dentist wasn't sure either, so there's more time taken. It seems to me very unlikely we're going to be able to stick to the allotted

time for this agenda item. How long do you expect these meetings to take? I'd plan on a lot more time. With the diversity of the composite boards proposed, I'd say you have the equivalent of a jury of citizens. And for the evidence to be presented, the standard of practice to be presented, and its violation to be understood by the other members of the board, time will have to be taken. The Citizens Health Board will be the equivalent of a Grand Jury with only the prosecutors presenting all the information, the prosecutors in this case being the representative of the profession (expert in the field). I find it hard to think this is going to be less time consuming and more cost efficient. How long do you think this Board is going to meet? Are you really going to find people with the time to volunteer for this board? Even jurors are paid \$25.00 a day to sit through this process, let alone professionals being asked to volunteer their time.

I personally haven't any interest in the practice of Occupational Therapy, and might have to go back to work when their cases are presented. The present system relies on volunteers in their professions, with an interest in their professions, volunteering their time and energy to protect the area of interest not just politically, but from those in practice who shouldn't be in practice in the first place. Who can afford to spend a lot of time on professions in which they have no expertise, no interest, and who could have standards actually antithetical to my own. Did the dentist who removed the wisdom tooth act outside his area of expertise? Should an oral surgeon have been consulted? Time, time, and more time is money.

Well, all that these Boards are doing is licensing under our proposal. Just giving tests and deciding who passed or not. The Board of Nursing is involved with the National Council of State Boards of Nursing (NCSBN) and is responsible for giving the NCLEX-RN. Active participation in these organizations and formulation of the questions in the national exam, keep Alaska up-to-date and a leader in the national organizations. The administering of the RN licensing exam is part of this participation at a national level. It assures that a nurse licensed in Alaska can get a license in another state, and vice versa. I'm not sure who you plan to have going to these organizations or participating in their activities on the part of nursing, but I hope it isn't the expert from the Citizens Health Board. They're still back at the voluntary meetings they agreed to when they said they'd be a member of the Citizens Health Board. I don't know what the other boards have to do to keep their national licensing status, but it is important to hospitals and nurses to know they can get nurses to Alaska in part due to the reciprocity involved with national exams. To do this, we must maintain our involvement with the national organizations. I suppose we could pay Per Diem and travel expense to someone from the State of Washington to come to Alaska to give the exam to the students in Anchorage (both ACC and UAA), but that costs money. Will the Division of Occupational Licensing be able to maintain participation in these national organizations. Have you checked? I can't find out. They want to know what the organization of the Citizens Health Board would be like and what level of nursing activity can be expected in their organizations. In FY 91, 85 students were licensed by examination, and 512 were licensed by endorsement as RNs, due to our participation in these national organizations. I have no idea what happens to the other professions. How about the Bar exams? What would happen if they weren't accepted nationally? Would you be here now?

Regarding the budget deficits of running the Division of Occupational Licensing and the Board of Nursing in particular, I have some interesting information about the numbers involved and it may apply to other boards as well. In 1990, Occupational Licensing notified the Board of Nursing that the board had a deficit in its expenses. The Board of Nursing responded and increased its biannual licensing fee, trying to be fiscally responsible. The license renewals occur on even years and the by the time the board had made its decision, the renewal licenses for 1990 had been sent out at the previous licensing fee rate. This year, 1992, is the first year the new license rate is to be in effect. The Division of Occupational Licensing couldn't provide for the Board of Nursing the effect of this change in renewal fees and I'm sure you can't see it in the statistics you've been provided. My concern is that other boards were also given this information and responded appropriately, but find their efforts and increases not reflected in the past performances of fiscal responsibility by their

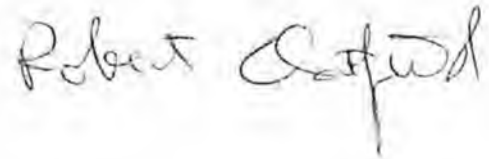
boards. The nature of licensing involves a time delay of a year or two. The deficit now encountered may go away due to the efforts made two years ago by the Division of Occupational Licensing. The difficulty occurs in understanding that time lag. Will the formation of the Citizens Health Board or any of the other consolidated boards change this? I don't think so. The Division finds the deficit involved with the Citizens Health Board and asks for increases. The Board responds and grants increased fees. One or two years later, the results of the increase are appreciated. What would happen if the Division of Occupational Licensing found it had an excess of revenue. I bet the Legislators would figure in the first year to have cut some of the state appropriations to the division, even though the division was only starting to play catch up with past deficits. In the second year, more was cut. The third year, there is a deficit and someone has to explain. Is there a problem? NO. It's just the cyclical nature of delayed recovery of funds.

I think I'm harping on the same old theme. The wheel isn't broken. It can always stand improvement, but from within the system where it is best understood. I don't pretend to understand this entire system, but I contend that neither do you. The changes that will improve the functioning of the board and commission system will come from within the system itself, not from those of us outside the system. I see the Division of Occupational Licensing as a kind of omelet that has specific ingredients added and in the end I can still find a specific item, mushroom or shrimp (Nursing or Dentist). To make this omelet better, I would go to the cook and say what I wanted to add or delete to make the omelet better. Then I'd let the expert in their field cook up the omelet in whatever fashion delivered the hoped for results. If I went and told them what to do to get the expected more desirable omelet, I know I'd get scrambled eggs.

It seems the consolidation of the present boards would produce nothing more than scrambled eggs. A dish of scrambled eggs in which if I looked for a place to take a question of policy or a grievance about how I'd been treated, I'd not find anyplace to go. No identifiable ingredient that could answer my question. No place that could tell me if I had a valid concern whether I was outside my field of practice or whether the scope of practice needed to be changed to accommodate my situation which in the end isn't unique.

I guess I have concerns regarding the amount of time and research you've been able to do. Also, the surety you have about the ability to actually save money of the people of the state with these proposals, while still providing a similar level of protection to the public and service to the professionals by consolidating the various boards.

Thank You,



P.S. By the way, it seems the legal profession would be championing a the bit to have the Board of Governors of the AK Bar included with the Professional Services Board. Why not? What guidelines have you applied?

March 3, 1992

Senator Drue Pearce
Chair of Labor and
Commerce Committee
State Capital
Juneau, Alaska 99811

Dear Senator Pearce:

I am writing to you in regard to House Bill 165, that is, the extension of the Board of Nursing. In 1990, the Alaska House of Representatives recommended that there be an eight year extension to the Alaska Board of Nursing. The Board of Nursing represents and monitors the practice of over 5,000 registered nurses in the State of Alaska. The initiative to combine the medical, dental, pharmacy, and nursing boards into a super board is not acceptable to registered nurses in the Alaskan community.

Nurses, held to the national standards required of registered nurses, are better served by nurses exercising supervisory power over nurses licensed by the State of Alaska.

Sincerely,



Linda A. Webb, R.N., J.D.

LAW:pp
LAW9

7613 HIGHLANDER DRIVE
ANCHORAGE AK 99516



SENATOR DRUE PEARCE
CHAIR OF THE LABOR AND
COMMERCE COMMITTEE
STATE CAPITAL
JUNEAU AK 99811



I support extending the Alaska Board of Nursing as a separate Board. The health and safety of Alaskans are served well by this Board as it functions now.

Signed:

Date:

Barbara McCullay

3 March 92

address: P.O. Box 83259

Fairbanks AK

99708



TANANA CHIEFS CONFERENCE, INC.

CHIEF ANDREW ISAAC HEALTH CENTER

1638 COWLES STREET

FAIRBANKS, ALASKA 99701-5999

PHONE (907) 451-6682 FAX (907) 451-1002

MAR 9 1992

March 4, 1992

Senator Drue Pearce, Chair
Labor and Commerce Committee
Alaska State Legislature
House of Representatives
P.O. Box V
Juneau, Alaska 99811.

Dear Senator Pearce:

As a health care administrator and as a manager in a Native, non-profit regional corporation, I am writing to you and the Senate Labor and Commerce Committee to support HB-165, "An Act extending the Board of Nursing in the Department of Commerce and Economic Development; and providing for an effective date."

Chief Andrew Isaac Health Center (CAIHC) is operated by Tanana Chiefs Conference, Inc., under a Public Law 93-638 contract with the Indian Health Service. CAIHC serves Native people in Fairbanks and about 35 communities in interior Alaska. Our ambulatory clinic employed 25 nurses at some time during the last year. Particularly because the labor pool for nurses in our community is somewhat dependent upon the military, there is relatively high turnover in nursing staff. State licenses for nurses are essential in the hiring process. This assures that nurses are qualified and prepared to do the job for which they are hired. It also reduces our liability and it is a necessary component in the Joint Commission on Accreditation of Health Care Organization (JCAHO) accreditation which the Indian Health Service contract requires.

I understand that license fees cover most of the cost of Board of Nursing activities. While some people suggest that this could be done by a professional organization or a private corporation, I believe it should remain a state responsibility. The Board of Nursing has the authority to investigate complaints. With the number of providers impaired by alcohol and drugs in all health care professions, it is essential that the State's powers to investigate be maintained in order to protect consumers. Furthermore, in Alaska we have nurse practitioners who are practicing independently in various small communities throughout the state. Again, to assure consumer protection, the credentials

of these nurse practitioners must be reviewed by a board with authority granted by the State.

The proposal to combine the Board of Nursing with other boards is not a good idea at this time. In the last decade or so, nursing has undergone some fairly dramatic changes. There is a wide variety of training throughout the country. Particularly for older nurses who received their training years ago, it is often difficult to match the training with the licensing requirements. Only professional nurses can make these distinctions with credibility. With the leadership and independence accorded to nurses in recent years, the State Board of Nursing empowers them to have more control over their profession. To eliminate this power would be a major step backwards for what traditionally has been a profession dominated by women.

Health care is a huge industry in our state and in our nation. Nurses comprise a large segment of this work force. Both for consumer protection and for administrative efficiency, the Board of Nursing should be maintained in its present form.

Sincerely yours,



Mim Dixon
Health Center Director

MD:md

cc: Interior Delegation

Patricia Dooley
8701 Kathleen
Anchorage AK 99507
RAGE, AK
DIRECT
MAR 26 1992
392



USA 19

Senator Dan Pearce
Chair
Labor + Commerce Comm.
State Capital
Juneau AK 99811

LETTER SENT 3/5

Dear Senator -

This post card is to express my strong feeling as a Nurse that HB 165 Extension of the Board of Nursing be passed out of committee. Each Health Care discipline needs a Board to specifically address that groups needs + concerns. Please move HB 165 out of committee -
Thank you - Patricia Dvorley RW

March 5, 1992

Senator Drue Pearce
Alaska State Legislature
PO Box V (MS 3100)
Juneau, Alaska 99811

Dear Senator Pearce:

As you are aware, the Governor has appointed a task force to evaluate all Boards and Commissions. As a result, HB 165, which renews the Alaska Board of Nursing for four years, remains in your Labor and Commerce Committee. If HB 165 is not approved, the Board of Nursing will cease to exist.

As a Registered Nurse, I urge you to support HB 165, and vote for full renewal for the Board of Nursing. As one of approximately 5,000 RNs in the state, I know how effective the board has been in implementing the Alaska Nurse Practice Act. The regulations written and approved by the Board are well respected and emulated throughout the country.

The Board has a major role in protecting the public from receiving care from unqualified or impaired nurses. The present structure allows for rapid, unbiased investigation and fair disciplinary action. A board with less equitable representation from the full range of nursing practice (administration, education, nurse practitioner, staff RN, staff LPN, and a public member) would be slower to respond to complaints from the public, as consultation from outside experts would have to be obtained.

Your vote and support in granting the Board of Nursing full renewal allows the nursing community to continue to deliver safe, quality health care to all Alaskans.

Sincerely,

Margaret Auble, R.N.
Margaret Auble R.N.

Margaret Auble
2961 Bass St.
Anchorage, Alaska
99507



Senator Drue Pearce
Alaska State Legislature
P.O. Box J (MS 3100)
Juneau, Alaska
99811



March 10, 1992

Senator Drue Pearce, Chair
Labor and Commerce Committee
State Capitol
Juneau, AK 99811

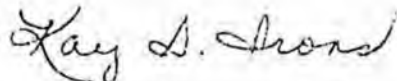
Dear Senator Pearce,

On behalf of the nurses employed at Home Health Care - Providence Hospital and myself, I would like to object highly to Governor Hickel's plan for consolidation of the numerous boards in our state. Of particular concern to me is the proposed Citizens Health Board to encompass nursing, medicine, dentistry, optometry, physical and occupational therapy, and chiropractic care; and the Behavioral Sciences Board which would include social workers.

From a financial standpoint, I can certainly understand the Governor's need to reduce the \$40,000,000 annual burden of the occupational licensing division. What I do not appreciate, however, is the proposed management of the Nurse Practice Act in Alaska by non-nurses. I have been licensed in six states and have professionally interrelated with those respective boards of nursing over the years, but have found the Alaska Board of Nursing the most responsive and supportive board of all. A classic example is the manner in which they assisted all the home care providers in the state to comply with the OBRA '87 regulations for certification of home health aides in August of 1990. Their ongoing commitment to aide certification reaffirms their professionalism.

I urge you to pass HB 165, Extension of the Board of Nursing, out of the Committee on Labor and Commerce for the professional well-being of over 5,000 nurses in Alaska.

Sincerely,



Kay S. Irons, R.N.
Director

PROVIDENCE HOSPITAL

3200 PROVIDENCE DR
PO BOX 190004
ANCHORAGE ALASKA 99519-0004
PHONE (907) 562-2211



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Fax Transmission Form

Date: 03-10-92

Fax Number: (907) 463-5352

To: Senator Druce Pearce

Company: State Capitol

Department: _____

Address: _____

Telephone: (907) 561-2038 (Anchorage)

From: Kay Irons

Fax Number: (907) 261-3042

Company: Home Health Care

NO. of Pages: 2

Address: 3200 Providence Dr.

Department: _____

Telephone: (907) 261-3173

COMMENTS

PUBLIC OPINION MESSAGE

DEAR: SENATOR PEARCE

NAME: EFFIE GRAHAM, RN
TITLE:
ADDRESS: 2033 JAMES TOWN CIRCLE
CITY: ANCHORAGE ZIP: 99507
PHONE: 344-7556
BILL NO: HB 165
SUBJECT: EXTEND BOARD OF NURSING
MESSAGE: REQUEST IMMEDIATE CALENDARING OF HB 165. NECESSARY THAT ACTION BE
TAKEN THIS LEGISLATIVE SESSION. /BN

POMID: 03120039
DATE: 92/03/10
TIME: 12:00:39
LIONAME: ANCHORAGE LIO

Nurses letter
BOTH
LETTERS
WENT OUT
TO THESE GALS.

MAR 10 1992

704 Perry,
Fairbanks, AK 99701
March 1, 1992

Dear Senator Pearce,
I am writing this letter to urge you to support retention of the Alaska Board of Nursing. It is essential for the protection of medical consumers in Alaska and for effective coordination of the profession that nurses make decisions related to nursing.

Thank you for your attention to my concerns. I am appalled at the idea of our state regressing.

Sincerely,

Pantine Dickey
RN ANP

LETTERS SENT!

NURSES!

MAR 12 1992

2421 TASHA DRIVE
ANCHORAGE, AK. 99502
MARCH 10, 1992

SENATOR DRUE PEARCE, CHAIR
LABOR AND COMMERCE COMMITTEE
STATE CAPITOL
JUNEAU, AK. 99811

DEAR SENATOR PEARCE:

THIS LETTER CONCERNS THE PASSAGE OF HB 165 OUT OF COMMITTEE WHICH WOULD ALLOW THE ALASKA ~~BOARD OF NURSING~~ TO CONTINUE TO EXIST. LAST YEAR THE HOUSE OF REPRESENTATIVES RECOMMENDED AN EIGHT YEAR EXTENSION. I AM NOT IN FAVOR OF A "GENERIC SUPER BOARD." WITH 5,000 NURSES IN STATE I FEEL IT IS IMPORTANT TO MAINTAIN OUR AUTONOMY.

THANK-YOU FOR YOUR CONTINUED SUPPORT OF NURSING.

YOURS RESPECTFULLY,

Connie M. Federmann R.N.

CONNIE M. FEDERMANN R.N.

PUBLIC OPINION MESSAGE

DEAR: SENATOR PEARCE

NAME: MARY LARSEN
TITLE:
ADDRESS: P. O. BOX 984
CITY: WARD COVE ZIP: 99928
PHONE: 247-8394
BILL NO: SB 7
SUBJECT: STATE AID FOR EDUCATION
MESSAGE: PLEASE PASS SB7 WITH \$63,000 PER UNIT FUNDING FOR ALL SCHOOLS AS OUR CHILDRENS FUTURES ARE AT STAKE.

POMID: 08150604
DATE: 92/03/12
TIME: 15:06:04
LIONAME: KETCHIKAN LIO

COPIES: SENATORS

ADAMS
COLLINS
COTTEN
CRAFT
DUNCAN
ELIASON
FISCHER
FRANK
HALFORD
HOFFMAN
JONES
KERTTULA
MENARD
FOURCHOT
RCDEY
SHULTZ
STURGULEWSKI
UEHLING
ZHAROFF

PUBLIC OPINION MESSAGE

DEAR: SENATOR PEARCE

NAME: MARGARET BJORNTON
TITLE:
ADDRESS: 4745 PIPER, #7
CITY: ANCHORAGE ZIP: 99507
PHONE: 561-4473
BILL NO: HB 165
SUBJECT: EXTEND BOARD OF NURSING
MESSAGE: PLEASE PASS IT OUT OF COMMITTEE SO THAT THE NURSES COULD BE REGULATED BY NURSES. /CHR

POMID: 03160542
DATE: 92/03/12
TIME: 16:05:42
LIONAME: ANCHORAGE LIO

*need to
do the
nurses
letter.*