



FUTURE OF NURSING™

Campaign for Action

Iowa Action Coalition
Advanced Practice Nurse Summit
July 30, 2013

IOM Recommendations. State of Practice & Summit Goals
Rita A. Frantz, PhD, RN, FAAN



CENTER TO
CHAMPION NURSING
IN AMERICA



Health Care System Challenges



High costs



Primary care
shortage

Fragmentation



Health care
disparities



Aging and sicker
population

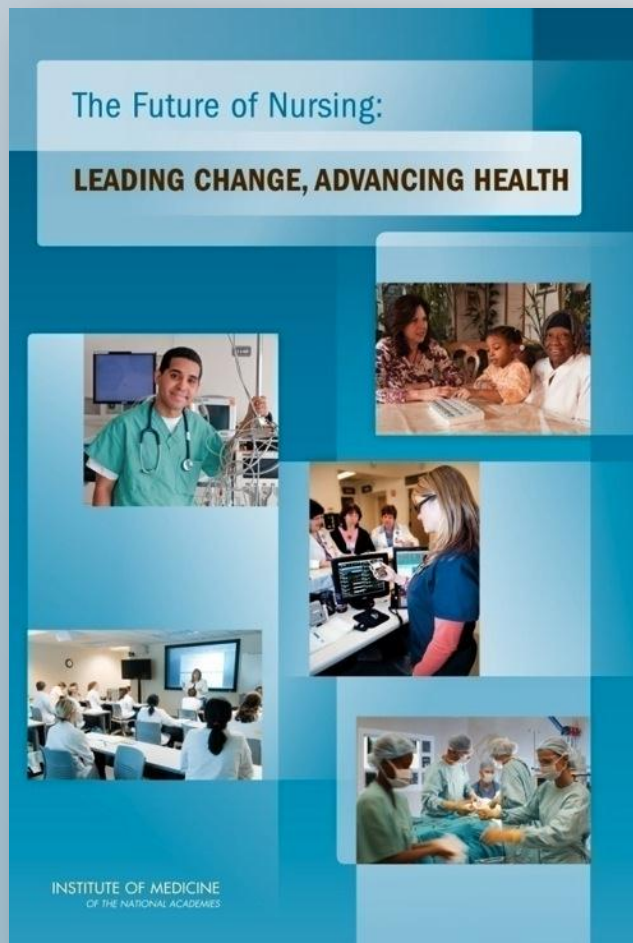


Institute of Medicine Report



High-quality, patient-centered health care for all will require a transformation of the health care delivery system

Current nursing workforce not prepared to meet changing health care needs & must be restructured



Campaign for Action Pillars



**Advancing Education
Transformation**



**Removing Barriers to
Practice and Care**



Nursing Leadership

Interprofessional Collaboration

Diversity

DATA

Removing Barriers to Practice: Key Recommendations



- Expand Medicare coverage of APRN services within the scope of practice of applicable state law
- Authorize ARNPs to perform Medicare admission assessments & certification of patients for home health, hospice & skilled nursing services
- Increase Medicaid reimbursement rates for APRNs providing primary care services

Removing Barriers to Practice: Key Recommendations



- Change CMS requirements for Medicare hospital participation to ensure that APRNs are eligible for clinical & admitting privileges
- Urge states to amend unduly restrictive state APRN regulations

Implementation of Campaign for Action



Center to Champion Nursing in America

- Established in December, 2010
- Partnership between Robert Wood Johnson Foundation, AARP and AARP Foundation
- Implement recommendations from IOM Future of Nursing Report
- Action Coalitions in all 50 states & DC

Iowa Action Coalition



- Action Coalition formally established February 23, 2012
- Co-leaders in Iowa
 - Rita Frantz, Dean of the UI College of Nursing
 - Wendy Gray, Program Office Director, Iowa Area Health Education Center (AHEC) Program

Iowa Action Coalition Goals



- Three primary goals
 1. Increase proportion of Iowa nurses with at least BSN from 26% to 50% by 2020 (IOM recommends 80%)
 2. Establish residency programs for all institutions employing new graduates
 3. Eliminate barriers to scope of practice
- Basis of initial goals of Iowa Action Coalition
 - Survey of participants in statewide summit on 11/3/2011
 - State of nursing in Iowa vs. IOM recommendations

Iowa Action Coalition Structure



- Co-leaders
- Steering Committee
 - Leaders of stakeholder organizations outside of nursing
- Task Forces for each goal
 - Education – formed June, 2011
 - Nurse residency – formed September, 2012
 - Barriers to practice – to be formed Summer, 2013

Advanced Practice Nurse Summit



- Goals
 - Identify barriers to advanced practice nurses in Iowa practicing to their full capability
 - Identify strategies to reduce these barriers

Practice



All practitioners should practice to the full extent of their **education** and **training**

Physicians, nurses and other health professionals work in a team-based model of care delivery

Models of care maximize time that providers can spend on their respective roles and responsibilities to patients



Practice



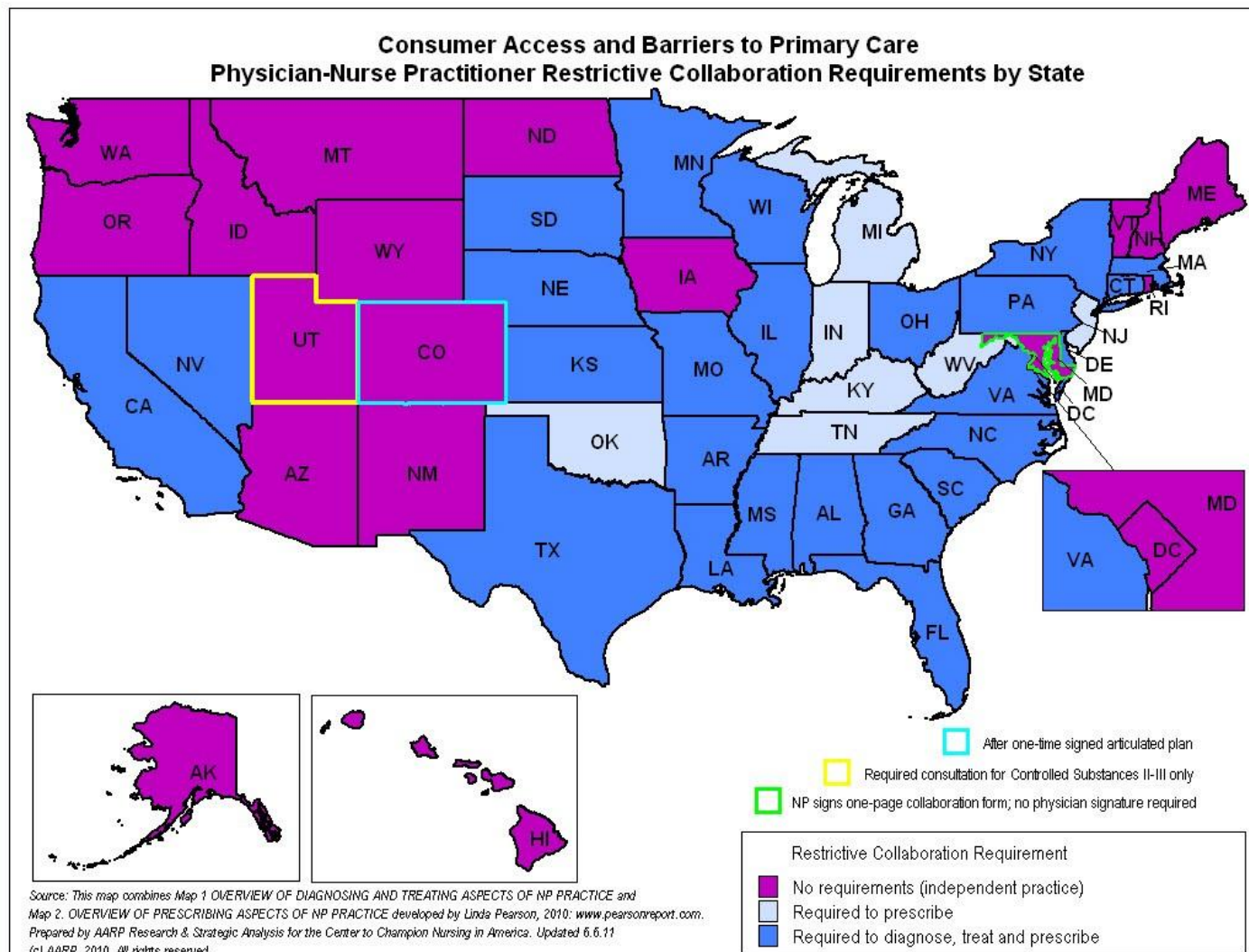
Evidence

Studies show that APRNs permitted to practice to full extent of education and training provide equal or better care

Systematic review of published literature between 1990 and 2008 indicate patient outcomes of care provided by APRNs equivalent or better than MD

Patient satisfaction • Length of stay • NPs: BP, glucose, lipid control • CNMs: Fewer C-sections, fewer episiotomies

State Nurse Practice Act Variability



Barriers to Advanced Nursing Practice Nationally



Institutional Policies

Medicare Regulations

State Laws



Institutional Barriers



- Hospital credentialing & privileging
 - Credentialing – ensures practitioner has qualifications to direct care
 - Privileging – authorizes credentialed provider to perform or order diagnostic or therapeutic services
- Credentialing & privileging defined by hospital bylaws
 - Bylaws vary across institutions

Institutional Barriers (continued)



Joint Commission Standards on privileging APRNs

- Permits hospitals to privilege APRNs
- Facilities must follow same privileging process used for physicians
- Permits hospitals to privilege APRNs as less than active medical staff & without medical staff membership
 - Only active medical staff members can admit patients
 - Only active medical staff members have voice & vote in medical staff governance
- APRNs can be voted off medical staff rosters individually & categorically without recourse

Medicare Barriers



Medicare Hospital Conditions of Participation (COP)

- States “the medical staff must be composed of doctors of medicine or osteopathy & **may be** composed of other practitioners appointed by the governing body.”
- Stipulates “the medical staff must adopt and enforce bylaws to carry out its responsibilities and those bylaws must include a requirement that a physical examination and medical history be done no more than 7 days before or 48 hours after an admission for each patient by a **doctor of medicine or osteopathy.**”

Medicare Barriers (continued)



Medicare Hospital Conditions of Participation (COP)

- Prevents APRNs from performing admission histories and physical exams in hospitals
 - ARNPs qualified to do so through their education and certification
 - Medicare reimburses APRNs for performing these services in outpatient settings.

Medicare Barriers (continued)



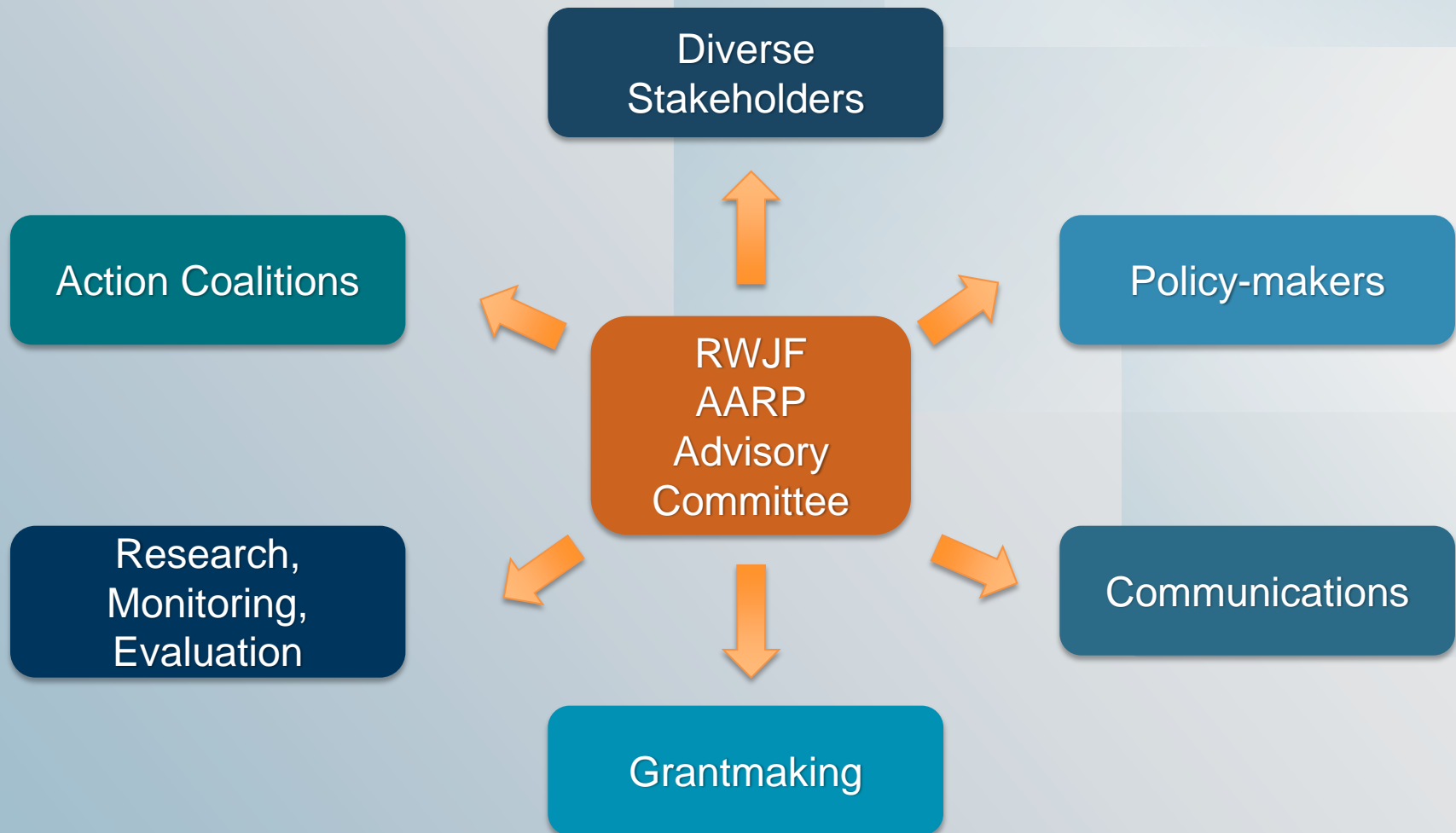
- Reimbursement for Services
 - APRNs reimbursed at 85% of physician rate for identical services
- Admission assessments & certifications for home health, hospice & skilled nursing services
 - Regulations stipulate a physician must conduct assessment & authorize admission

State Law Barriers



- State statutes vary
- Some state laws stipulate that hospitals can limit NPs'
 - scope of practice
 - require monitoring by physicians
 - require that NPs co-admit with a physician
- Regulations inconsistent across state agencies

Addressing National Barriers



National Barriers: State of Iowa View



- National barriers provide context for understanding barriers at state level
- Breakout Sessions
 - Drill down to specific barriers experienced by NPs in Iowa
 - Identify stakeholders to engage in addressing challenges