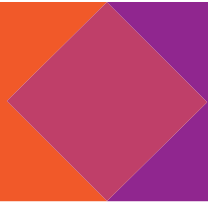


LE



teams. Some of the topics we went over included the oversight of nursing education programs, nursing discipline, the Nursys® database, Transition to Practice® (TTP), the APRN Consensus Campaign, the Institute for Regulatory Excellence, the enhanced Nurse Licensure Compact, nurse practice acts, and long-term care.



**What common issues do you face in your position at the Lutheran Home, and/or with long-term care in general?**

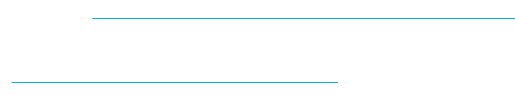
On the long-term side, the number one challenge we face is with transitions. We have a broad continuum that we move people through at the Lutheran Home, and transitioning them to a higher level of care is definitely one of our big challenges. Getting everyone on board with a need for a higher level of care, which usually coincides with a decline in the function of a person, can be difficult. On the short-term side, it is probably the reimbursement structure, and monitoring our patients when they go out to physician appointments.

**What surprised you about the work of NCSBN?**

The thing that surprised me the most is that NCSBN is very involved in unifying the voice of nursing. Beforehand, aside from the NCLEX® and regulating education, I didn't realize the full scope of what NCSBN did. Helping states accomplish things like the APRN Compact or the enhanced Nurse Licensure Compact, they work to unify those voices

**What NCSBN resources/programs did you find most useful to your daily work?**

I went over the delegation guidelines a lot because we do face challenges here with the Illinois Department of Public Health telling us that certain things cannot be delegated. This can go against the nurse practice act, so it can be kind of a sticky situation. That being said, going over the delegation guidelines was very helpful. I also really enjoyed reading about long-term care, such as the Long-term Care Monograph and the Phase 2



**T**he current opioid crisis began insidiously — perhaps starting with too many pills being prescribed for pain and too little education about deliberate and careful use,

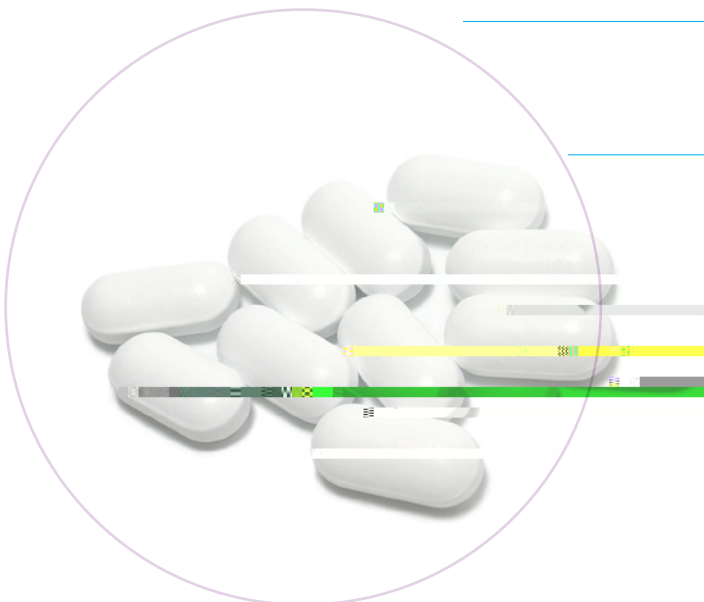
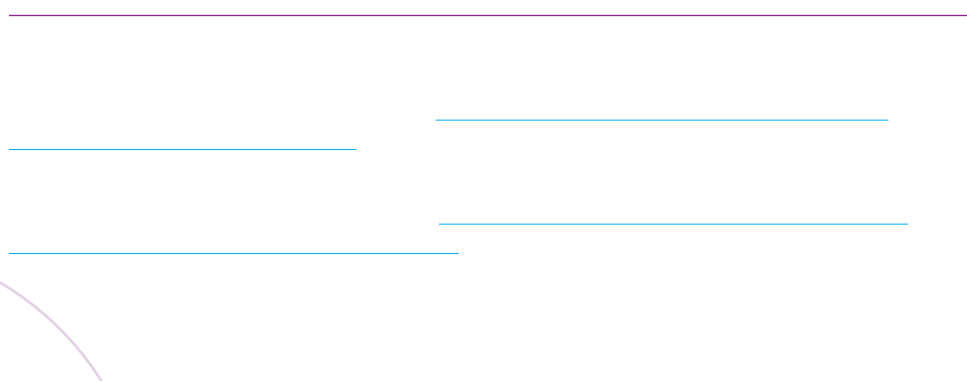
... APRN prescribers have a duty to understand the best management of pain, without inadvertently contributing to this national crisis.

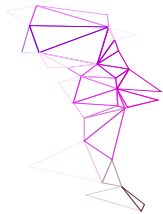


and effective prescribing, would be an additional source of MAT. At the time of the passage of CARA, only 25,000 physicians held a waiver to prescribe MAT. There are far too few health care providers to address the expansive need of this crisis. The authors of the CARA legislation put a lot of hope into the rapid expansion of NP prescribers, but it has not progressed as fast as they had anticipated. They expanded prescribers to include NPs but failed to realize that their language would exclude psychiatric mental health certified nurse specialists (CNSs), who could have been very helpful in this effort. In addition, the constraints of state regulations placed greater restrictions on the ability of some NPs to obtain a waiver than they had anticipated. In certain states, the specialty focus of the NP and supervising physician must be the same. SAMHSA found that, in those cases, unless the physician also obtained a waiver, the nurse practitioner could not, despite many nurse practitioners actively pursuing the waiver and additional education.

We are now a year into CARA, which addressed NP prescribers over a five-year timeframe. We do not yet have sufficient numbers of trained medication-assisted prescribers for substance use disorder. Adjustments are needed, and have been proposed at the state level, if it

The APRN professional organizations will help to construct and introduce legislation at the state level, if it is needed.














# Regulation 2030: Regulators Chart their Future

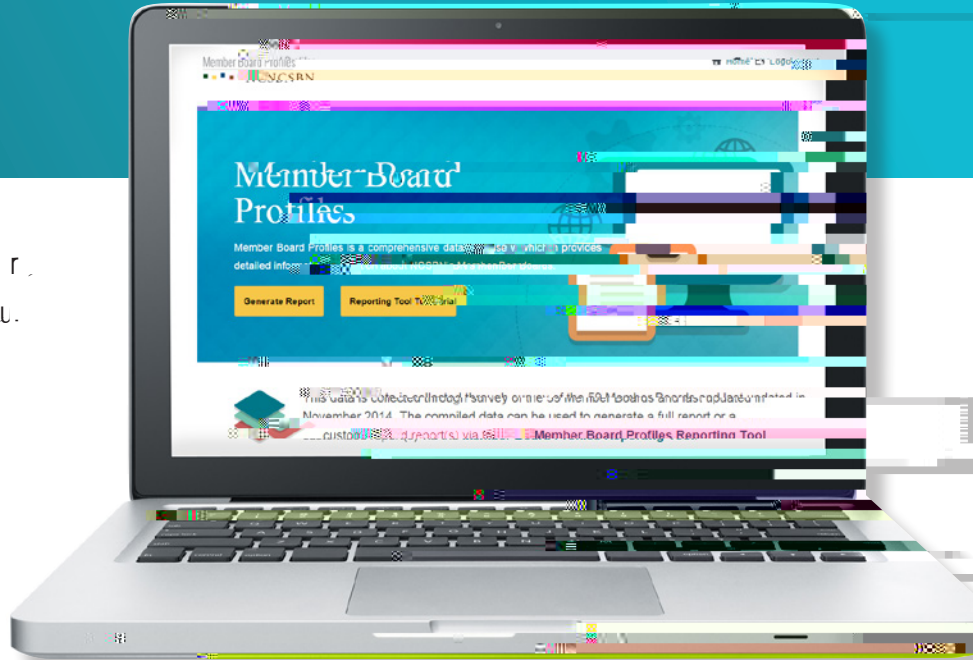
**F**rom Oct. 2–3, 2016, 80 regulators from around the world convened in Chicago to chart the future of nursing regulation by 2040 through a concept mapping exercise (Benton & Alexander, 2017). Historically, in response to high-profile regulatory failures, government has initiated changes in the regulatory system. Today, regulators must lead change through the develop-



The essence of the work was illustrated in detailed concept maps (Benton & Alexander, 2017), where the groups envisioned the future. For the Education maps, some of the concepts identified included:



The data is collected through a survey of the 600+ schools that participated in  
 November 2014. The compiled data can be used to generate a full report or a  
 custom report via the Member Board Profiles Reporting Tool.



- The data is collected through a survey of the 600+ schools that participated in November 2014.
- The compiled data can be used to generate a full report or a custom report via the Member Board Profiles Reporting Tool.
- The data is collected through a survey of the 600+ schools that participated in November 2014.
- The compiled data can be used to generate a full report or a custom report via the Member Board Profiles Reporting Tool.

B

—

---

