

# Nursing Care Quality Assurance Commission (NCQAC) Advanced Practice Subcommittee Meeting Minutes August 18, 2021 7:00 p.m. to 8:00 p.m.

Committee Members:	Laurie Soine, PhD, ARNP, Chair Donna Poole, MSN, ARNP, PMHCNS-BC Joanna Starratt, MSN, ARNP, CRNA Kathleen Errico, PhD, ARNP, Pro Tem Lindsey Frank, CD, OB-RNC, ARNP, CNM Megan Kilpatrick, MSN, ARNP-CNS, AOCNS Shannon Fitzgerald, MSN, ARNP Deb Smith DNP, ARNP, FNP-BC Bianca Reis, DNP, MBA, ARNP, PMHNP-BC
Staff:	Mary Sue Gorski, PhD, RN, Director, Advanced Practice and Research

Jessilyn Dagum, Research Assistant

### I. 7:00 PM Opening – Laurie Soine, Chair Call to order

- Introduction
- Public Disclosure Statement
- Roll Call
  - Laurie called the meeting to order at 7:00 PM. The Advanced Practice subcommittee members and staff were introduced. The Public Disclosure Statement was read aloud for the meeting attendees.

Karl Hoehn, JD, FRE, Assistant Director, Discipline - Legal

- Laurie noted the reordering of the standard agenda which allowed public comment towards the middle of the meeting and prior to the subcommittees' final discussion. Those who wished to speak during that time were asked to sign-up by emailing jessilyn.dagum@doh.wa.gov.
- Laurie also reminded the meeting participants that subcommittees' do not have decision making authority and that recommendations from the subcommittee may be presented at the next scheduled commission meeting.

#### II. 7:05 PM Standing Agenda Items

- Announcements/Hot Topic/NCQAC Business Meeting Updates
- Review of Advanced Practice Draft Minutes: July 21, 2021
  - Laurie announced Paula and she would be attending the National Council State Boards of Nursing (NCSBN)'s annual meeting from August 18-19th, 2021. Two states have adopted the APRN Nurse Licensure Compact. In order for the APRN Nurse Licensure Compact to go into effect it must be adopted by seven states.
  - Reviewed with the consensus to bring to the September commission meeting for approval.

#### III. Old Business

- **7:10 PM** Sunrise Reviews Subcommittee Discussion
  - o <u>Optometrist</u>
    - The subcommittee has no concerns.
  - o <u>Midwifery</u>

• Lindsey provided further background for the draft potential comment language. The subcommittee agreed to recommend the potential comment to the commission:

"A thorough case is made that providing limited prescriptive authority to midwives would increase access to care in rural and underserved areas. A plan for curriculum changes in schools and education needed for midwives in practice is outlined with a focus on safety and quality."

- o <u>Anesthesiologist Assistant</u>
  - The subcommittee reviewed and edited the drafted potential comment. Joanna noted that the second paragraph was inaccurate and needed to be removed:

"Currently there are two professions providing safe effective anesthesia services in the state, anesthesiologists and CRNAs. Is there a need for a new profession to increase access to services? If increased access is needed, might this be achieved by assuring institutional barriers to full practice authority for CRNAs are minimized or removed rather than adding a new regulated profession?

If there is a need for a new supervised profession, it seems both CRNAs and anesthesiologists, would be qualified to provide the supervision of anesthesia assistants."

- 7:25 PM Sunrise Reviews Public Comment (15 min. total, 2 min. limit per comment)
  Anesthesiologist Assistant (AA)
  - Louise Kaplan, ARNPs United Urged the subcommittee to oppose the new profession. Arguments laid out by the anesthesiology association propose a false solution to a workforce problem that can be resolved by decreasing barriers to placements for CRNA students. Louise noted that states, where anesthesiologist assistances are currently licensed or are delegated authority, have restricted practice for ARNPs.
  - Melissa Johnson, Washington Association of Nurse Anesthetists Noted concerns regarding the bill that was proposed with the sunrise review application. Stated that the "supervision" definition in the legislation is much too broad. Provided examples in which onsite supervision would not be enough. Noted that on-call does not meet the requirement of being on site. Stated that the anesthesiologist ratio established in the legislation is too high and provided examples.
  - Ellen Kraus-Schaeffer, President, Washington Association of Nurse Anesthetists - Spoke to the subject of AAs, the access to care and why they're not the best solution. AAs can only practice in about 15 states including the District of Columbia and primarily on the East Coast. Noted that because AAs are required to be directly supervised that a team is also one of the costliest anesthesia delivery models.
  - Brad Hemingway Spoke in opposition of the sunrise review. Noted that many have no interest in having AAs in their practice because they do not have the ability into a supervised versus non-supervised environment.
  - Kristie Hoch, CRNA Spoke to the national practice of AAs. Currently, only 17 states allow AAs to practice due to three key performance indicators: education, effectiveness and economics. CRNAs prepare to practice autonomously upon graduation. AA curriculum is characterized by training that allows them to be assistance, therefore a scope of practice is limited. The quality of care that AAs provide is unproven and there is no meaningful data regarding their safety, yet the care and outcomes provided by CRNAs

has been repeatedly demonstrated in published peer reviewed studies. AAs legally cannot provide patient care without supervision based on CMS billing and reimbursement rules. CRNAs are the most costeffective model. States have realized they do not need another anesthesia provider.

- Adrianna Silva Provided the perspective of a recent nurse anesthesia graduate. Noted she was trained to be safe and effective anesthesia provider for every patient.
- 7:40 PM Resumption of Subcommittee's Discussion and Recommendations
  - Laurie thanked the speakers for their comments. The subcommittee reviewed and revised the draft potential comment language.

## IV. 7:55 PM Ending Items

- Review of Recommendations
- Meeting Evaluation All
- Date of Next Meeting September 15, 2021
- Adjournment 8:00 PM