



Testimony in Support of HB 2103

May 18, 2017

Rachel Prusak MSN, FNP-C

Chair Monnes Anderson and Members of the Committee:

Thank you for the opportunity to testify in support of HB 2103. My name is Rachel Prusak and I am an active member of Oregon Nurses Association. I have twenty years invested in the world of nursing across a multitude of settings including the last ten years as a nurse practitioner. I currently work for Housecall Providers, serving Portland's most vulnerable population delivering home-based primary, palliative and hospice care. Now participating in the fifth year of a national demonstration project, Independence at Home, HCP has proven that home-based medicine improves quality and efficiency of care for the chronically ill. With the nation's best outcomes in the project, HCP, which is staffed predominately by NPs, has shown its tremendous importance in the future of national health care delivery.

HB 2103 removes an arbitrary barrier to nurse practitioner practice, ensuring each NP can practice to the full extent of their education and training. Currently Nurse Practitioners perform many of the same tasks that physicians do as a matter of routine with equally successful outcomes. Studies show NPs match physicians on invasive procedures, like intubation, arterial catheter insertion, uterine aspiration for miscarriage management, and biopsies. As well as the procedure just mentioned current statutes allow nurse practitioners to perform complex procedures such as bone marrow aspiration, chest tube placement and lumbar puncture. All which are comparable in complexity to a vasectomy. During the five years working in Women's Health, I routinely inserted intrauterine devices and performed uterine biopsies but only after I completed the extensive training by a clinician who was an expert in these procedures. With the appropriate education, training, competency, credentialing, and privileging nurse practitioners are performing these procedures currently which supports the high healthcare needs of our communities. Currently patients throughout the state—in rural and urban areas alike—are waiting up to three months for a vasectomy appointment because there is an increased demand for vasectomy as it is a low risk procedure, performed on an outpatient basis under local anesthesia.

I'd like to call your attention to the informational testimony on OLIS submitted by the Oregon State Board of Nursing. When Oregon State Board of Nursing considers if a skill or procedure such as "vasectomy" is within any nurse's scope of practice, it utilizes The Scope-of-Practice Decision Making Guidelines. The rigorous seven step tool addresses the following:

- Is the role prohibited by the Nurse Practice Act or any other applicable laws, rules/regulations or accreditation standards? No
- Is performing the role consistent with professional nursing standards, evidenced-based nursing, and health care literature? Yes
- Is there practice setting policies and procedures in place to support performing the role, intervention, or activity? Yes

18765 SW Boones Ferry Rd., Suite 200 • Tualatin, OR 97062 • P 503.293.0011 800.634.3552 • F 503.293.0013

E-mail: ona@oregonrn.org • www.oregonrn.org

A Constituent Association of the American Nurses Association

- Has the nurse completed the necessary education to safely perform the role? Yes
- Is there documented evidence of the nurse's current competence (knowledge, skills, abilities, and judgements) to safely perform the role? Yes
- Would a reasonable and prudent nurse perform the role? Yes
- Is the nurse prepared to accept accountability for the role? Yes

After all seven questions are answered appropriately, **then and only then** can the nurse perform the role according to acceptable and prevailing standards of safe nursing care. Should this bill go forward, it would be the expectation of the OSBN that any nurse practitioner who would seek to perform this skill would first become educated, undergo training and show competency in the procedure, become credentialed and privileged by the appropriate agency, and bill independently for these services. This rigor protects the public and holds the individual licensee accountable.

I want everyone to understand a Nurse Practitioner is as conscientious as any physician when it comes to the safety of patients. The American public has ranked nurses as the professionals with the highest honesty and ethical standards for the past consecutive 15 years. For nurses our ethical standards translate to our clinical practice and we would not undertake any procedure we felt was beyond the scope of our practice. While some believe, this bill underestimates the importance of training It is my hope that my testimony made it clear, nurse practitioners fully understand the value of proper education and training when it comes to the safety of our patients.

I respectfully urge your support of HB 2103.