



VOTE "YES" ON SB 339 AMENDS PRACTICE ACT
CHIEF SPONSOR SENATOR TOI HUTCHINSON

CLARIFY REGISTERED NURSE DELEGATION IN VARIED WORK ENVIRONMENTS

THE NURSE PRACTICE ACT (NPA) HAS CONFUSING LANGUAGE

Registered Nurses (RNs) who work in hospital settings are prohibited from delegating medication administration to unlicensed persons; *but* may delegate medication administration to unlicensed persons in community/in-home settings.

Nurses are accountable for delegating medication administration to unlicensed persons in the community and in-home setting, *but* medication administration has disappeared from the definition of registered professional nursing.

RNs are prohibited from delegating nursing judgment to non-nurses, *but* have been left with only one definition of work in their nurse practice act: "nursing intervention" is defined as **"any treatment based on clinical nursing judgment or knowledge that a nurse performs.**

Are you aware of the Licensed Medication Aide Pilot in Long Term Care which runs to June 30, 2019? Permanently end this "experiment" that allows minimally trained persons to administer medications to vulnerable nursing home patients!

"WORK" DELEGATED TO OTHERS MUST BE CLEAR:

- ◇ Restore the definition of "task" which is work delegated by the RN to others not requiring nursing knowledge. RNs delegating medication administration to unlicensed workers in the hospital setting has not changed.
- ◇ A new scope of practice regarding delegation is established in the 2018 NPA: community and in-home setting must include a definition of nursing authority if the RN decides to delegate medication administration to unlicensed persons.
- ◇ Replacing nurses with minimally trained less expensive workers affects patient mortality and morbidity and increases overall care costs now exists in NPA.

REMEDY:

- ◇ Restore the definition of "task" which identifies work not requiring nursing knowledge or judgement as delegated by the RN in hospital setting;
- ◇ Restore medication administration in registered nurse definition;
- ◇ Add a new definition of "selected nursing task" to clarify how RNs delegate to others including unlicensed persons in the community and in-home setting;
- ◇ Terminate the long term care medication aide Pilot in Provision 80 in 2019.

If the new NPA has "expanded" the nurses' authority—the language must be reflected clearly in definition what, to whom and where the registered nurse will determine is a safe delegation of work because RNs are accountable for delegation.

For the intent of a law to be useful to legislators and citizens, terms or phrases used in statutes must be clear and unambiguous.

https://www.ncsbn.org/2012_JNR_NPA_Guide.pdf

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**NURSES EQUAL VALUE!
REPLACING NURSES WITH
LESS EDUCATED WORKERS
CREATES CARE GAPS...
QUALIFIED NURSING STAFF
PROTECT PATIENTS
INSIDE & OUTSIDE THE
WALLS OF THE HOSPITAL.**

Registered nurses fill in the health gaps in our state, limiting patients access to qualified nursing nurses will cause unnecessary deaths in Illinois.

www.countyhealthrankings.org/health-gaps/illinois

**CARE COORDINATION
REQUIRES SKILLS OF THE
REGISTERED NURSE
PRODUCING POSTIVE
PATIENT RESULTS & COST
SAVINGS:**

- Reduction in Emergency Room visits;
- Noticeable decreases in medication costs;
- Reduced inpatient charges;
- Reduced overall charges;
- Average savings per patient;
- Significant increases in survival with fewer readmissions;
- Lower total annual Medicare costs;
- Increased patient confidence and self-managing care;
- Improved quality of care;
- Increased safety of older adults in transition from acute care setting to the home;
- Improved clinical outcomes and reduced costs;
- Improved patient satisfaction overall.

www.nursingworld.org/ccexecutivesummary

Senators & Representatives

Vote to YES for SB 339 to amend the Illinois Nurse Practice Act. Include: "task", "selected nursing task", restore medication administration to registered nurse definition and end cost cutting strategies to replace nursing in long term care!