

S.42

An act relating to requiring at least one member of the Green Mountain Care Board to be a health care professional

Presentation to House Committee on Health Care

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The Role of the Green Mountain Care Board (GMCB) corresponds with the role of Vermont nurses

- The GMCB ensures that our health care system provides quality, affordable health care to all Vermonters while reducing waste and controlling costs
 - ANA-Vermont represents professional nurses in Vermont and our mission: To advocate for the nursing profession, health for people in Vermont, and affordable access to quality care for all (on a strict budget).
 - Nurses in Vermont manage costs & provide quality care, which can be more difficult if decisions are made only by people outside the complex system who have a direct effect on care implementation
 - Quality care cannot be achieved without involving top stakeholders who are affected. Hence we strongly that a health care professional be on the Board



GMCB 3 Main Responsibilities: Regulation, Innovation, and Evaluation.

- Nurses witness the impact of health insurance rates, (& deductibles), create hospital budgets, and are CNO's & case managers with knowledge of reimbursement issues, capitation, and cost expenditures, and regulation such as HIPAA.
- The nursing process includes: assess, plan, implement, *evaluate*.
- Innovation, testing new ways to pay for and deliver health care
 - Nurses are continually innovative in research and practice. We see what needs to be improved first hand & implement pathways. ANA even offers innovation workshops

Health Professionals Make Decisions Affecting Lives, and know the System

- The GMCB evaluates innovation projects, proposals for benefits to be included in Vermont's new health system, proposals for funding the system, and the effect.
 - The Board needs the inside perspective of the intended effect, or unintended effects will be common. A health professional can provide insight
- Board consistently works closely with Vermont health care providers and health care consumers to enhance health system transparency and consumer involvement.
 - Nurses involve family, communities, schools, communicate with other care providers using interdisciplinary teamwork, evidence-based care research, arranging and managing hospital or home care... Nurse professionals advocate for patients from birth, to end-of-life.

There are over 25,000 nurses in Vermont (BON, 2019 compact report)
4 Million Nurses in America. They Merit Representation

Nurses spend more time with patients than any other health care providers; hence are more aware of patient outcomes and care quality (DeLucia, Ott, & Palmieri, 2009). There is knowledge, and a valuable perspective to be shared

Nurses are extremely aware of workforce issues as by 2022 ANA national research anticipates more RN jobs available than any other profession, at more than 100,000 per year, >500,000 seasoned RNs anticipated to retire.

- U.S. Bureau of Labor Statistics projects the need for 1.1 million new RNs for expansion and replacement of retirees
- Statewide, between 2015 and 2030 demand for registered nurses will grow 22% with highest growth rates expected in nursing home and residential care settings (69%), & home health (41%)(AHEC, 2017)



Nurses Have Incentive On Many Issues

- More experience on knowledge of violence and injury at workplace:
 - Over 75 % of nurses questioned said they had been abused at work physically or verbally (Dvorak, 2017).
 - In America, health-care workers are five to 12 times more likely than other workers to experience violence at work; worldwide, nurses are more likely to be attacked at work than prison guards and police officers (The Conversation, 2017).
 - Cost example: 30 nurses requiring treatment for violent injuries in a year: total cost \$94,156 (\$78,924 for treatment and \$15,232 for lost wages) (OSHA, 2015)
- Higher Education
 - The nurse faculty vacancy rate is climbing; 1715 in 872 nursing schools (AACN, 2018). Average salary of a nurse practitioner, is at \$20,000 to 60, 000 more than a master's-prepared nurse educator (RWJF, 2007;AACN, 2017). More nurses are needed in education and practice to maintain quality care, yet nationally >75,000 were turned away (AACN,2019)

Nurses Understand the Opioid Crisis and Issues Surrounding End-of-Life Care

Opioid crisis support

- Issue Brief <https://www.nursingworld.org/practice-policy/work-environment/health-safety/opioid-epidemic/>
- Buprenorphine /Suboxone patients leaving prison are at greatest risk of overdose 2-4 weeks after release. Per Dr Fisher Vermont State Medical Director Centurion (2018) for the first year a doctor can only treat 30, the 2nd 100, and the maximum is 275, yet nearly 400 of Vermont's population of 1500 inmates needed buprenorphine daily. More need training to meet the treatment need as the opioid crisis is epidemic.
- The National Council State Boards of Nursing supplement to the April 2018 issue of Journal of Nursing Regulation helps serve as a guide to nursing practice with medical marijuana:
<https://www.ncsbn.org/12780.htm>

Quality end-of-life care for an aging population- we are there

The GMCB wants the best witness to whether care is quality, accessible, and affordable

- We witness the impact and must problem-solve solutions regarding inability to pay for medications, and lack of health care access
- Nurses rated highest for honesty and ethics for 17th consecutive year (Brenan, 2018)
- Nurses are experienced in dealing with crisis management, from trauma, to lack of a hospital bed, to advisory boards. Nurses oversee, develop and evaluate health curriculum, quality of care programs, develop college programs and lead consulting firms For example, current work on our state disaster plan collaborating with others.
- Health professionals work well with others

The Statute

- ANA –Vermont strongly supports the wording in the statute to include “an individual licensed as a registered nurse or an advanced practice registered nurse under 26 V.S.A. chapter 28”.
- S.42 sec. 1. 18 V.S.A. § 9374 wording has been clarified sufficiently to ensure that the health care professional will not have to cease employment to be on the Board, or be disqualified, as the GMCB provides indirect oversight on many nursing and medical personnel, such as in ACO/All Payer Model implementation
 - “Provided that for the health care professional, the employment restriction in this subdivision shall not be construed to limit generally the ability of the health care professional to practice his or her profession”
- Sec. 2: ANA-Vermont agrees with the intent to allow current GMCB members to continue to serve and not have the requirement to appoint a health care professional disrupt the current Board until a vacancy occurs

Collaboration and Advocacy



Nurses are not the only ones who believe a health care professional needs to be on the GMCB. Others include:



- Vermont Medical Society
- American Academy of Pediatrics Vermont Chapter
- Vermont Academy of Family Physicians
- Physician Assistant Association of Vermont
- Vermont Psychiatric Association
- Bi-State Primary Care
- VNAs of Vermont
- Vermont Dental Society
- Vermont Psychological Association
- Vermont Nurse Practitioners Association
- American Nurses Association Vermont
- American Lung Association Vermont
- Vermont Climate and Health Alliance



References

American Association of Colleges of Nursing (AACN). (2018). *Special survey on vacant faculty positions*. From: <https://www.aacnnursing.org/News-Information/Fact-Sheets/Nursing-Faculty-Shortage>

American Association of Colleges of Nursing (2019). AACN's report on 2018-2019 enrollment and graduations in baccalaureate and graduate programs in nursing. From: <https://www.aacnnursing.org/News-Information/Fact-Sheets/Nursing-Faculty-Shortage>

Brenan, M. (2018). Nurses again outpace other professions for honesty, ethics. *Gallup*.

Retrieved from: <https://news.gallup.com/poll/245597/nurses-again-outpace-professions-honesty-ethics.aspx>

DeLucia, P. R., Ott, T. E., & Palmieri, P. A. (2009). Performance in Nursing. *Reviews of Human Factors and Ergonomics*, 5(1), 1-40. <https://doi.org/10.1518/155723409X448008>

Dvorak, P. (2017, Sept. 11). What's one of America's most dangerous professions? It's not what you think. *Washington Post*.

OSHA. (2015). Workplace violence in healthcare. Understanding the challenge From: <https://www.osha.gov/Publications/OSHA3826.pdf>

Robert Wood Johnson Foundation (RWJF). (2007). The nursing faculty shortage; Public and private partnerships address a growing need. *Charting Nursing's Future, A Publication of the Robert Wood Johnson Foundation*, 4. From: http://www.rwjf.org/content/dam/farm/reports/issue_briefs/2007/rwjf13911

The Conversation.(2017)Violence against nurses is on the rise but protections remain weak. From:

<http://theconversation.com/violence-against-nurses-is-on-the-rise-but-protections-remain-weak-76019>