

CCNBNA President Ethel Walton

Lobbyists: Dr. Mildred Taylor and Pamela Robbins MSN, RN

Changes in the 2017 Nurse Practice Act allow unlicensed non-nurses to perform *nursing interventions* in the Community setting unsupervised. Correcting this dangerous language to uphold the public's safety receiving nursing care by qualified licensed nurses as outlined in the NPA Legislative Purpose.

Below are excerpts of the existing Illinois Nurse Practice Act:

"Nursing intervention" means any treatment based on clinical nursing judgment or knowledge that a nurse performs. An individual or entity shall not mandate that a registered professional nurse delegate nursing interventions if the registered professional nurse determines it is inappropriate to do so. A nurse shall not be subject to disciplinary or any other adverse action for refusing to delegate a nursing intervention based on patient safety.

The language within the 2017 was amended and does not follow the Nurse Practice Act (NPA), particularly the NPA's Legislative Purpose on who is **qualified and authorized** to practice nursing.

(225 ILCS 65/50-5) (was 225 ILCS 65/5-5)

(Section scheduled to be repealed on January 1, 2028)

Sec. 50-5. Legislative purpose. The practice of professional and practical nursing in the State of Illinois is hereby declared to affect the public health, safety, and welfare and to be subject to regulation and control in the public interest. It is further declared to be a matter of public interest and concern that the practice of nursing, as defined in this Act, merit and receive the confidence of the public and that **only qualified persons be authorized to so practice in the State of Illinois**. This Act shall be liberally construed to best carry out these subjects and purposes.

Changes in the 2017 NPA delegation language now allow unlicensed persons to perform "nursing interventions" in the Community settings (clinics, schools etc.) and does not follow the intent of the law only qualified authorized persons practice nursing. The 2017 rewrites in the delegation language have opened the door in Community settings like clinics and schools to replace nurses with medical assistants who are neither educated in nursing nor licensed as a nurse to perform nursing interventions. These unlicensed persons specifically are allowed to administer medications!

The changes of the 2017 NPA has given a green light to employers to replace nurses in the Community setting across our state. The inequity was created when prohibiting the RN to delegate nursing to non-nurses in a hospital setting but allows such dangerous nurse delegation in the community setting. This creates healthcare inequity in the community to access qualified licensed nurses to deliver care.

This erasure of nurses in the Community setting creates missed nursing care. Harm. Lack of expert nursing assessments, creating plans of patient care, patient teaching. Injury and up to death without qualified nurses to assess patient needs and perform 5 core nursing process identified by American Nurses Association and taught in every accredited nursing program assessment, diagnosis, outcome planning, implementation and evaluation: <https://www.nursingworld.org/practice-policy/workforce/what-is-nursing/the-nursing-process/> Illinois is now proposing multiple nurse replacing legislation, some have been successful some have not. Fighting for qualified nurses to be present across all care settings improves patient outcomes, reduces overall costs, reduces errors, recidivism (return visits to clinics),

Locate your state legislator: <https://www.illinoispolicy.org/maps/>

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2024 Legislative Objectives:

- **Promoting health, prevention and wellness** must be the objective for Illinoisans across all care settings.
 - **Restoring qualified licensed nurses to deliver nursing interventions in the Community** setting should be an objective of Public Health.
 - **Restoring health access equitability should be a Public Health objective.** Non-educated unlicensed nurse proposals subject patients to inequitable, lower standards of care than hospital setting care. Care delivered by unqualified non nurses create opportunities for errors, missed diagnoses, inadequate assessments, and failure to intervene, lack of creating patient plans of care which can costs more to the patient and to the healthcare's bottom line. Public health should support proposals that follow the NPA legislative Purpose.
 - **Prospective legislative proposals must be measured regarding nursing care to align with the NPA Legislative Purpose** to promote public safety, health and prevention of injury and death across all care settings.
 - **Aligning future legislation that supports the NPA Legislative Purpose** protects the unsuspecting public when considering future proposals who is qualified to practice nursing.
 - **Restoring safety in the healthcare delivery system across ALL CARE SETTINGS to be set** as a priority to correcting the NPA dangerous delegation language.
- ✓ Public safety is linked to nursing care delivered by qualified (educated) authorized (licensed) nurses.
 - ✓ There are 30 plus years of research denoting that more nurses with less patients have improved outcomes. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8810730/>
 - ✓ There is **NO EVIDENCE** that an absence of nurses in a care setting improves care.

Senate Bill (SB) 1277/House Bill (HB) 3739 Restores RN delegation in Community settings <https://www.ilga.gov/legislation/billstatus.asp?DocNum=1277&GAID=17&GA=103&DocTypeID=SB&LegID=145522&SessionID=112> restores only qualified authorized nurses who are allowed to perform nursing interventions requiring nursing knowledge, not the current state of the Illinois NPA.

HB 3338/SB2314 sets minimum standards of care in hospital settings to care for patients. There is no nursing shortage in Illinois (or across the USA for that matter) it is an industry business strategy to cut costs. This abuse of understaffing for decades has created nurses leaving the bedside due to unsafe staffing created by employers. To draw nurses back to the bedside, fix the problem, adequate nurse staffing.

- ❖ **ASK STATE LEGISLATORS TO SUPPORT & Sponsor SB 1277/HB3739 Restore safe nurse delegation in community settings.**
- ❖ **ASK STATE LEGISLATORS TO SUPPORT & Sponsor HB3338/SB2314 Safe Nurse to Patient Ratios**

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