

# ND CENTER FOR NURSING BOARD OF DIRECTORS

North Dakota Nurses Association

College and University Nurse Education Administrators

North Dakota Area Health Education Center

North Dakota Emergency Nurses Association

North Dakota Organization for Nursing Leadership

North Dakota Board of Nursing

North Dakota Nurse Practitioners Association

North Dakota Public Health Association, Nursing Section

Nursing Student Association of North Dakota

North Dakota Directors of Nursing Administration-Long Term Care

Sigma Xi Kappa at Large Chapter

North Dakota Association of Nurse Anesthetists

Public/Consumer Member at Large

40+ Nursing organizations, state agencies, nursing program and other stakeholders

#### Targeted Solutions for

#### North Dakota's Nursing Crisis

The North Dakota Center for Nursing is a non-profit, 501c3 organization was developed in 2001 to represent over 20,000 nurses and over 40 nursing organizations across North Dakota. The mission of the North Dakota Center for Nursing is through collaboration guide ongoing development of a well-prepared and diverse nursing workforce to meet health care needs in North Dakota through research, education, recruitment and retention, advocacy and public policy. This policy agenda has been approved by our Board of Directors and is an official policy of the North Dakota Center for Nursing.

A shortage of nurses compared to demand has existed to some extent for twenty-five years and yet today's shortage is uniquely serious. The retirement of baby boomers, the aging population and the associated increase in healthcare needs of our nation's largest generation has intensified the issue, leading to the need for more nurses and supporting healthcare workers across the state. Nursing forms the base for the economic engine for North Dakota's communities. With COVID, facilities have been pushed to the brink of collapse with many unable to provide needed care due to a shortage of nurses. The rural North Dakota landscape makes this shortage particularly acute due to the limited program capacity and distance.

ND's nurses need your help!

Solution 1: Legislative support to provide one-time state appropriation to provide support for organizational structure and to build new nursing workforce recruitment and retention programs serving North Dakota. (SB X)

Solution 2: Legislative support to move funding for the North Dakota Nursing Education Consortium (NEC) from the University of North Dakota budget to the North Dakota University System.

Solution 3: Legislative support to continue Career Builders Program (Bill X), waive the required match or allow use of state dollars for Public and Government employees and add bachelor and graduate degrees to Career Builders Loan Repayment program eligibility to support Nursing Faculty that should be added to the High Needs list. Support continued funding for the ND Health Care Professional Student Loan Repayment Program (NDDOH) (43-12.3)

Solution 4: Legislative support for the APRN Nurse Licensure Compact bill (HB #1044).



#### Solution 4: Legislative support for APRN Nurse Licensure Compact bill.

The Advanced Practice Registered Nurse Compact (APRN Compact) increases access to care, protects patient safety and reduces costs while supporting state- of-the-art health care delivery. The APRN Compact allows for APRNs with 2,080 hours or more of practice to have one multistate license in their home state, with the privilege to practice in other APRN Compact party states without obtaining additional licenses.

#### Benefits of the APRN Compact

- Access to Care: Increases access to APRN services across the country quickly and efficiently, which is essential for the health of many rural and underserved communities.
- Telehealth: Enables APRNs to practice in person or provide telehealth services to patients located across the country seamlessly and efficiently.
- Disaster/Pandemic Relief: Allows APRNs to immediately cross state borders and provide vital services in the event of an emergency, without the need to wait for executive declaration.
- Military Families: Allows military spouse APRNs to seamlessly continue working upon relocation and change of employment.
- Online Education: Facilitates online nursing education.
- Efficient: Eliminates redundant, duplicative regulatory processes and unnecessary fees.
- Cost Effective: APRNs do not have to obtain additional nursing licenses, making practicing across state borders affordable and convenient. The APRN Compact also removes a burdensome expense for organizations that employ APRNs and may share the expenditure of obtaining and maintaining multiple licenses.
- Facilitates Interstate Information Sharing: Grants the necessary legal authority to facilitate
  interstate information sharing and investigations in the event of adverse actions to ensure
  public protection.
- Flexible Licensure: Allows APRNs to obtain or maintain a single state license if preferred.



## Key Points for North Dakota's Legislative Bill

## Repeal-and-replace/Revise

The APRN compact we adopted did not get enough states to become effective. In order to create licensure mobility for APRNs, we need to enact the new APRN Compact.

This compact increase transparency by ensuring every multistate licensee meets the uniform licensure requirements in article III. These requirements mirror many of those in our successfully operating NLC and represent the national standards for APRN regulation.



#### **Effective date**

This compact will become effective sooner—once 7 states have enacted the legislation, down from 10 in the previous compact. Several states have expressed interest and plan on introducing the legislation in the upcoming legislative sessions. The changes made to the new language increase the pool of states eligible and interested in enacting the law.

#### COVID-19

Had the APRN Compact been enacted prior to the COVID-19 pandemic, there would have been an immediately available workforce to assist in compact states. In an emergency such as a pandemic—one that is impacting the entire country, having a mobile workforce to respond to hot spots as they arise would have helped both facilities respond to patients with severe illness and also to increase the primary care workforce that we know is critical for testing and less-acute illness. For practitioners, the options for practicing via telehealth would help to keep their practices afloat all while increasing access to care for our residents and those across the country.

We can contrast this with registered and licensed practical nurses. Nurses in 34 states that are party to the NLC were able to be mobilized immediately, while APRNs who wanted to provide critical services in states other than where they are licensed had to navigate complex and patchwork regulatory structures created by statute, regulation, and the many executive orders and emergency regulations that lacked uniformity across states in both purpose and duration.

For more information about the ND APRN Nurse Licensure Compact Contact: Dr. Stacey Pfenning, Executive Director, North Dakota Board of Nursing at spfenning@ndbon.org