

1998 House of Delegates Action Interstate Practice

That the American Nurses Association:

1. Continue commitment to consumer access to nursing services, recognizing that nursing practice occurs across state borders;
2. Develop model guidelines for SNAs that desire to pursue legislation which allows agreements with other states to facilitate nursing practice across state borders and assist in the resolution of interstate practice issues in ways other than multi state licensure agreements such as compacts;
3. Continue to allocate resources including, but not limited to, legal analysis to assist states in evaluating proposed compact components;
4. Support actions that may lead to the implementation of approaches to state licensure, including, but not limited to, interstate practice, the interstate compact, multi-state licensure or mutual recognition only if the following guidelines are met:
 - a. Interstate practice legislation should clearly define key terms and be precisely drafted to ensure that the primary objective to be accomplished by interstate practice is achieved, i.e., asserting jurisdiction over out-of-state nurses practicing in a state;
 - b. The rule-making process to implement any interstate practice legislation should be clearly spelled out in the legislation, and proposed implementation regulations of key provisions should be developed simultaneously with any legislation;
 - c. Clear parameters should be established related to the confidentiality of any information shared with other states as well as who shall have access to such information;
 - d. The sharing of any information related to disciplinary matters, other than final orders and emergency suspensions, should be prohibited unless there is a clear and convincing need to do so to protect the public;
 - e. The process for selecting an entity to conduct data collection or provide other services related to implementation of interstate practice shall be open and competitive;
 - f. Before any immunity from liability is extended to non-governmental entities, there should be careful scrutiny to ensure those entities are appropriately accountable for their actions;
 - g. Mechanisms should be established to ensure that the process used by any entity collecting data be reconciled with state law and procedures regarding collecting, maintaining and distributing licensure and disciplinary information;
 - h. The right of individual nurses to a fair hearing of any disciplinary matter must be protected; and, no unfair or undue burden, financial or otherwise, should be placed on a nurse's exercising his/her right to a fair hearing;
 - i. Approaches to interstate advanced practice nursing should be addressed for consistency in connection with interstate practice for other RNs;

- j. Mechanisms should be in place that ensure nurses have ready and ongoing access to practice-related information, including current board of nursing policies;
- k. Mechanisms should be in place to ensure that a board of nursing knows who is practicing in its state under authority of a license granted by another state or through an interstate practice agreement;
- l. The state of predominant practice should be the state of licensure; if the nurse is not practicing, the nurse should be licensed in his/her state of residence;
- m. Employers must be held accountable for ensuring that they utilize staff who are licensed (or otherwise authorized to practice) under state law;
- n. Interstate practice must not be implemented in a way that allows persons to circumvent or contravene existing public policy as expressed by a state's laws or policies, including laws on the use of strikebreakers and striker replacement or initial and continuing licensure requirements