



May 24, 2016

Re: House Bill 483

Good Afternoon Chairman Oelslager, Vice Chair Coley, Ranking Minority Member Skindell and members of the Senate Finance Committee. Thank you for allowing me to be here today. My name is Tiffany Bukoffsky and I am a registered nurse and the Director of Health Policy and Nursing Practice for the Ohio Nurses Association. I am here to testify on behalf of our association on House Bill 483 and to ask for consideration of two proposed amendments. The Ohio Nurses Association has had concerns about an amendment that was added to House Bill 483 while it was in the Ohio House and we stand before you today with the same concerns. We want to thank the Ohio House for allowing us to be part of several conversations and for holding interested party meetings between ONA, the Ohio Board of Nursing, and the Ohio Health Care Association, but feel this language still needs further considerations before being rushed through the legislative process. The two amendments we would like to propose are two solutions that we feel alleviate some of the safety concerns and provide clarity in the role of two unique classifications of health care workers.

First, we would like to acknowledge and applaud the administration, specifically the Department of Developmental Disabilities, in their efforts to bring health care to more individuals with disabilities so they may live a quality life outside of institutional settings. As registered nurses, we realize all Ohioans are receiving more health care and services in our communities, and individuals with disabilities are no exception. We, like you, want to ensure all people in our state receive the quality, affordable health care they need. With this movement, we want to thank the Department of Developmental Disabilities for approaching and meeting with the Ohio Nurses Association and the Ohio Board of Nursing. The Department realizes and acknowledges the nurse's role in the health care setting and we appreciate the interested party meetings that explained the provisions included within the "As Introduced" version of House Bill 483 and the thoughtful responses we received that addressed our questions and concerns, prior to an amendment being added in.

The current language, as we understand it, does not propose changing the authorities granted to certified medication aides or MR/DD personnel, but rather allowing them to use their authorities in facilities with 17 resident beds and larger. ONA believes that although there may not be a change to these two groups' authorities, the current language would allow them to take care of more patients at one time, in a population that is more at-risk. We believe the more demands placed on *any* health care worker provides an opportunity for additional errors and puts patients at risk. We still firmly believe that there is a vast difference between facilities that hold 16 beds versus those with 130 beds.

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The safeguards that were put in place over a decade ago for 16 or fewer beds preserve patient safety and these size limitations were set for exactly that reason. The two proposals ONA would like to discuss, we believe, are more than fair considering the resident bed limits were originally set for safety reasons.

The first suggested amendment offers that delegated nursing standards be withdrawn from the bill and allow the certified medication aide portions to remain. The rationale for keeping the medication aide language within the bill is that this group of health care workers has more education and training than that of the unlicensed MR/DD personnel and they have oversight by the Ohio Board of Nursing. This oversight keeps strict parameters around what certified medications aides can and cannot do, but allows for this group of health care workers to work to their full scope of education and training. The Board of Nursing is already certifying this group and collects workforce data at each certificate renewal. This allows the state of Ohio to easily monitor the use and effectiveness of extending certified medication aides to 17 bed and above intermediate care facilities (ICFs).

The second suggested amendment would require the department of developmental disabilities to gather information from the facilities that would be utilizing unlicensed MR/DD personnel under the new language in HB 483. An annual detailed summary of the information gathered would be reported to JMOC, as well as the House and Senate health committee chairs each year. The reports shall be considered public record and collect all, but not limited to the following: the incidence of medication errors made by MR/DD personnel; the number of MR/DD personnel utilized to administer medications in large facilities; the safeguards in place that ensure MR/DD personnel are accurately receiving and transcribing prescriptions into the medication administration record (MAR); identification of all errors made by MR/DD personnel relative to receiving and transcribing prescriptions into the MAR; and, as a general concept, tracking the annual turn-over rate of MR/DD personnel administering medications.

In conclusion, ONA is not opposed to House Bill 483 in theory. However, we would like to see safeguards put in place to protect one of Ohio's most vulnerable populations. We believe the two amendments brought forward today offer thoughtful solutions to two unique classifications of health care workers who would be working in the larger intermediate care facilities. Thank you for your time and consideration.

A handwritten signature in black ink, appearing to read "Tiffany D. Bukoffsky".

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Director of Health Policy & Nursing Practice
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