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Operations Committee

Government Operations and Estates
and Trusts Subcommittee

Health Facilities and
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The Maryland House of Delegates ANNAPOLIS, MARYLAND 21401

Health and Government Operations

HB 936 Health Occupations - Nurses - Delegation of Nursing Tasks

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WHAT DOES THIS BILL DO?

This bill clarifies the language around delegation of some basic nursing tasks by all nurses (Licensed Practical Nurses (LPN), Registered Nurses (RN), and Advanced Practice Nurses (APRN)). It also provides clarification that- delegation to trained unlicensed individuals such as trained medical assistants, can be performed as part of their regular job duties. This fills a vital need, primarily in the primary care setting, as the delivery of care by nurse practitioners is growing, to meet the health care needs of the state of Maryland.

This bill retains patient safety measures that are in the Physician COMAR statues that require the nurse delegating be on site and IMMEDIATELY available should the need arise. No unlicensed individuals will deliver care without appropriate training, supervision and immediately available assistance.

WHAT IS THE NEED FOR THE BILL?

- Regulatory language had 2 barriers to care:
 - It does not specify that APRNs can delegate tasks to unlicensed personnel.
 - This lack of clarity has resulted in inconsistent interpretation. Some APRN's have been told by Maryland Board of Nursing (MBON) staff that they can delegate while other MBON staff have said that they do not have the authority.
 - The ability for APRNs to delegate tasks to unlicensed personnel would increase patient access to care, and would allow APRNs, specifically those APRNs who have independent practices to employ Medical Assistants (MAs).
 - Current regulation states that RNs and LPNs may delegate to unlicensed personnel "provided that acceptance of delegated nursing tasks does not become a routine part of the unlicensed individual's job duties."
 - This appears to be related to unlicensed people who will be providing specific tasks for a limited time to fill an urgent need.
 - This does not allow for the delegation to medical assistants that have completed a training program to deliver specific care, such as taking vital

signs and administering vaccinations, as part of their routine part of their job duties.

- Currently delegation to medical assistants can only be done if a physician is onsite and is the person to “delegate the task.”
- NP only practices cannot utilize medical assistants and so results in decreased number of patients seen daily. Alternatively, they must hire a nurse which is often not fiscally possible.

I urge the Committee to favorably report HB936.