



Committee: House Health and Government Operations Committee

Bill: House Bill 407 – Health Occupations – Health Care Staffing Shortages
Emergency – Declaration and Licensing Practice Requirements (Health
Care Heroes Act)

Hearing Date: February 10, 2022

Position: Support with Amendments

The Maryland Nurses Association (MNA) supports *House Bill 407 – Health Occupations – Health Care Staffing Shortages Emergency – Declaration and Licensing Practice Requirements (Health Care Heroes Act)*. Our support is strongly contingent upon the adoptions of amendments that address our concerns with the bill.

MNA supported many, but not all, of the measures that have been enacted under the Governor’s declaration of a public health emergency. In essence, we recognize that in a total state of emergency, it can be better to have under-prepared practitioners rather than no practitioners at all. However, we have learned much from this pandemic, and we think those lessons learned should be applied to any future emergencies or acute staffing shortages.

Even during a staffing shortage, the State of Maryland carries a responsibility that health care practitioners are qualified, provide safe and competent care, and can work effectively as part of a care team.

We have some underlying concerns that a future Secretary of Health could use this bill intermittently to address nursing workforce shortages, rather than working on underlying solutions to the problem. Nevertheless, we do acknowledge that there could be future shortage situations that could rise to the level as needed to put in place some of the flexibilities contemplated by this bill.

Therefore, MNA will support the legislation only if the following amendments are adopted. We look forward to working with the Governor’s Office, the Committee and other

stakeholders. If we can provide any additional information, please contact Robyn Elliott at relliott@policypartners.net or (443) 926-3443.

Amendment 1: Recognizing school shortages:

On page 2 on line 25, insert “(14) PRIMARY AND SECONDARY SCHOOLS”

Explanation: As the current pandemic has demonstrated, our public schools, which are already understaffed in the health area, are severely affected by shortages of nurses, certified medical technicians, school psychologists, occupational therapy professionals, and speech pathologists.

Amendment 2: Stakeholder Involvement is Critical in Declaring a Staffing Shortage:

On page 3 in line 6 after “EMERGENCY” insert “AFTER CONSULTATION WITH HEALTH PROFESSIONAL ASSOCIATIONS, HEALTH OCCUPATION BOARDS, AND HEALTH FACILITIES”.

Explanation: As written, the Secretary has no requirements to consult with a broad range of stakeholders. In fact, the bill is slanted towards consultation with the health facilities only, as all of the data used to determine if there is a shortage would come from the facilities. The Secretary will need to perspective of all stakeholders to make such decisions.

Amendment 3: Limitations of Length of Staffing Shortage Emergency:

On page 3 in line 29 after “180 DAYS”, insert “AND MAY NOT BE RENEWED WITHIN A TWO-YEAR PERIOD.”

Explanation: As written, there is nothing precluding the Secretary from continuously renewing a staffing shortage emergency instead of addressing the underlying issues of the shortage.

Amendment 4: Ensuring Permanent Licenses are Only Given to Individuals who Meet State Requirements

On page 5:

- In line 4 insert after “LICENSE”, “FOR INDIVIDUALS WHO MEET STATE LICENSURE REQUIREMENTS”

- In line 6 after “STATE”, insert “AND WHO MEETS STATE LICENSURE REQUIREMENTS”
- In line 7 after “LICENSEE”, insert “WHO MEETS STATE REQUIREMENTS FOR REINSTATEMENT OF AN ACTIVE LICENSE”
- In line 8 after “PRACTITIONER”, insert WHO MEETS STATE REQUIREMENTS FOR REINSTATEMENT OF AN ACTIVE LICENSE”
- In line 9, strike “A NURSING GRADUATE”

Explanation: This provision would award permanent licensure to individuals well-beyond any emergency staffing shortage. Therefore, it is imperative that individuals meet state licensure requirements. Of particular note, nursing graduates, as defined in the bill, would *never* meet State licensure requirements as they have not completed the NCLEX exam. If Maryland recognizes nursing graduates as licensees before they successfully pass the NCLEX exam, we are in danger of violating the provisions of the nursing compact and risk becoming disqualified to participate.

Amendment 5: Requiring a completed criminal history records check for permanent licensure

On page 18, insert “FOR A TEMPORARY HEALTH OCCUPATIONS LICENSE OR A TEMPORARY PRACTICE LETTER; AND A COMPLETED CRIMINAL HISTORY RECORDS CHECK AS REVIEWED AND APPROVED BY THE HEALTH OCCUPATIONS BOARD FOR PERMANENT HEALTH OCCUPATIONS LICENSE”

Explanation: We believe this amendment corrects a drafting error. While many boards have a process where they grant a temporary license if there is a delay in obtaining a criminal history records check, permanent licensure should be contingent on having the board review a completed criminal history records check.

Amendment 6: Defining who qualifies for a temporary license

We do not have a specific amendment at this time. We are unclear of who would qualify for a temporary license or practice letter as that does not seem to be defined in the bill.

Amendment 7: Individuals who represent themselves as a nurse or any other health care professional should meet state requirements, or else the public would be at risk.

Strike the entire provision on page 6 from lines 7 through 11.

Explanation: There are no circumstances in which people who do not meet the State's nursing licensure requirements should be allowed to practice using the title "nurse". This jeopardizes public safety. MNA has been very consistent in opposing this concept in other proposals.

Amendment 8: Nursing graduates should not practice as registered nurses until they meet all qualifications for licensure.

Strike line 21 on page 7 through line 5 on page 8 in its entirety.

Explanation: Nursing graduates can certainly play an expanded role in health facilities during shortages – or in other circumstances. However, it is unfair to the public to place someone who is not qualified to be a nurse in the role of a nurse; and it is equally unfair to the nursing graduate who will be placed in situations where they have a high probability of making an error which would effect their chances of permanent licensure.

