Oral Testimony

HB276 Titled: Clinical Nurse Specialists - Prescribing Authority

Dr. Sharon H. Allan, certified and registered Clinical Nurse Specialist in the State of Maryland and current President of the Chesapeake Bay Affiliate (Maryland Chapter) of the National Association of Clinical Nurse Specialists.

The Clinical Nurse Specialist is one of "4" Advanced Practice (APRN) nursing roles prepared at the Master's or Doctoral level, educated and trained to diagnose, treat disease / illness and prescribe. Currently 80% of the 50 states and US Department of Veterans Affairs have granted CNSs prescribing privileges and yet Maryland still has not.

CNSs are change agents working across the continuum of healthcare to improve patient outcomes, increase access to quality care, identify and decrease patient safety hazards and on the frontline of work done to set evidence-based nursing standards of care. The CNS is not a duplicate role to the other Advanced Practice roles but able to fill the gaps and partner with other APRNs and Medical Providers to make improvements in the efficiency and effectiveness of healthcare delivery.

Prescribing is a very complex process that involves much more than ordering medications. Prescribing authority would allow the CNS to follow through on treatment plans they have set up for a patient, order patient referrals, lab work, diagnostic tests, titrate medications, equipment needs such as a pressure relieving bed, a walker, wheelchair, wound care supplies – all of which would improve patient access to care and safe effective management of even the most vulnerable and complex patients.

Not having prescribing authority is crippling to the continuity of quality care and requires a CNS to interrupt the work flow of another provider, who may not even know the patient involved, simply to have them sign orders entered into an electronic medical chart or written on a prescription pad.

CNS prescribing eliminates many of the inefficiencies in the "system", "nursing" and "patient care" and not solely as a primary provider. I stand in strong support of this bill and are asking you to vote "Yes" to HB276 Respectfully, Sharon

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