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TO:	Finance Committee
FROM:	LeadingAge Maryland
SUBJECT:	Senate Bill 960, State Board of Nursing – Sunset Extension, Licensure Exceptions, and Board Operations and Membership
DATE:	March 14, 2023
POSITION:	Favorable

LeadingAge Maryland supports Senate Bill 960, State Board of Nursing – Sunset Extension, Licensure Exceptions, and Board Operations and Membership.

LeadingAge Maryland is a community of more than 140 not-for-profit aging services organizations serving residents and clients through continuing care retirement communities, affordable senior housing, assisted living, nursing homes and home and community-based services. Members of LeadingAge Maryland provide health care, housing, and services to more than 20,000 older persons each year. Our mission is to be the trusted voice for aging in Maryland, and our vision is that Maryland is a state where older adults have access to the services they need, when they need them, in the place they call home. We partner with consumers, caregivers, researchers, public agencies, faith communities and others who care about aging in Maryland.

Senate Bill 960 makes several significant changes to the Board of Nursing (BON):

- 1. <u>Annual Report</u>: In the BON annual report to Secretary, Governor and General Assembly, the BON must include any additional aggregate data, identified by the board in consultation with stakeholders, determined to be necessary to facilitate workforce and health planning purposes that does not reference any individual's name or other personal identifier.
- 2. <u>Applicants</u>: A person can be a registered nurse if the individual has taken and failed an examination required under this title but has not failed the examination more than one time within the 120–day period immediately preceding the submission of the application to the BON.

- 3. <u>Authority of the Secretary</u>: This bill gives the Secretary of Maryland Department of Health (MDH) authority over the "infrastructure operations" (administrative operations of a Board or Commission including tools and resources for the use and support of deliberative actions; does not include licensing, investigation or disciplinary activities). The BON fund cannot be used for infrastructure operations. The Secretary can employ staff for the BON and designate the Executive Director which need not be a registered nurse.
- 4. <u>Uncodified language</u>: The BON must hire an external consultant to conduct an independent evaluation of the Board to develop an action plan to implement the recommendations identified in the report the Board submitted as required by the Fiscal 2022 Joint Chairmen's Report. The action plan must include:
 - a gap analysis to address the Board's immediate infrastructure needs and to identify resources needed for the Board's long-term sustainability and a plan to fill all Board staff vacancies and process personnel actions
 - the identification of new workflows to reduce the time to fill Board staff vacancies
 - a plan to hire additional nurse and non-nurse investigators to ensure timely processing of complaints submitted to the Board
 - an update of the organizational structure of the Board to make leadership more effective and the provision of the new organizational chart to Board staff and members and the Maryland Department of Health
 - a plan to create and staff a new Office of Compliance to implement relevant recommendations to ensure ongoing adherence to State and national standards
 - a plan to create and staff a Communications Department within the Operations Division to relieve operational staff of duties related to constituent communication and provide responsive service, improve public perception of the Board, and upgrade social media interaction
 - strategic goals established in collaboration with the Board President and Executive Director; and
 - a review of the Board's fee structure and rates and a comparison of the fees and rates with neighboring states.

On or before December 1, 2023, the Board shall report to the Governor and General Assembly on average processing times for fiscal year 2023 for:

• issuing initial licenses, certifications, and renewals, as measured from the date the applicant passed the NCLEX, if applicable, or from the date the initial

application was submitted, as opposed to the date the completed application was submitted

- the issuance of authorization to test; and
- the approval of proposed nursing curriculum revisions, new nursing education programs, new certified nursing assistant education programs, new faculty, and new clinical sites.

Lastly, the bill changes the terms of the members of the BON. The terms of five members shall end on July 1, 2023. The terms of five members shall end on October 1, 2023. The terms of four members shall end on January 1, 2024.

Our field is confronting a workforce crisis. The number of professionals working in healthcare and aging services is insufficient to meet the demand today, let alone the growing needs of Maryland's future aging population. At the base of this crisis is a critical shortage in nursing professionals. Our members often report significant challenges in working with the Maryland Board of Nursing; namely delays and unnecessary obstacles for those seeking licensure and certification, which in turn worsens the shortage problem. If enacted, Senate Bill 960 could effectively address many of these issues. Our members have reported the following examples of challenges they've encountered while working with the Maryland Board of Nursing:

- Recurring issues with communication. Applicants fail to receive timely responses to phone calls, emails, questions, and concerns. It is common for emails to go unanswered, and our members also report call wait times of 5-6 hours. When calls are answered, applicants are not always provided with correct information, leading to further delays in their licensing.
- Lack of procedural consistency. Some staff members were reported to accept documents in a certain form that other staff members wouldn't. Applicants report being told different procedural steps from different staff members. For example, applicants are sometimes instructed to come in person, and when they arrive in person, are told they can only apply online. When applicants do go in person, the submission process can take several hours due to the long lines.
- Exorbitant delays in processing new licenses and certifications. For example, it can take several months for a new Registered Nurse, Licensed Practical Nurse, Certified Medicine Aid or Geriatric Nursing Assistant license to register, which means even though the individual may be fully qualified to work in that licensed or certified role, they must wait. For example, one of our members reported this week that she has two individuals who completed their CMT course in August of 2021 but they have yet to receive their official certification from the Maryland Board of Nursing.

- Issues with counting one-time DEI training. Providers report that the coursework that was required as a one-time training on DEI does not populate at renewal, and thus applicants are forced to take the one-time course again in order to receive their renewed license.
- Issues relating to Certified Medical Technicians (CMT) and Certified Medicine Aide (CMA) licenses. Some applicants reported difficulty finding required forms online and little to no help from in-person staff.

These and many other issues are negatively impacting the readiness and availability of qualified nursing professionals in Maryland to go out into the workforce. Senate Bill 960 has several goals, all of which would be beneficial in ensuring the Maryland Board of Nursing operates more effectively and efficiently in the future.

For these reasons, LeadingAge Maryland respectfully requests a <u>favorable report</u> for Senate Bill 960.

For additional information, please contact Aaron J. Greenfield, 410.446.1992