



Real Nurses. Real Issues. Real Solutions.

NURSE LICENSURE COMPACT (NLC) POSITION STATEMENT

BACKGROUND

Numerous social, physical, and economic factors, as well as a growing reliance on telecommunications technologies, have led to the acceptance of telehealth nursing as a vital method of patient care delivery. The provision of care using telecommunications technology has been recognized as a cost effective means of providing quality patient care and thus has become a fundamental component of ambulatory care nursing.

Use of telecommunications technologies has eliminated the geographical barriers traditionally associated with direct patient care. This shift has improved access to healthcare and enabled ambulatory care nurses to interact with patients who are located outside of the nurse's primary state of licensure. In 1999, the National Council of State Boards of Nursing (NCSBN) proposed the Nurse Licensure Compact (NLC) which allows for the mutual recognition of nurse licensure for nurses who reside and maintain licensure in a state that is a member of the Compact.

Nurses speaking to patients who are calling from states not covered by the Compact (and/or in which the nurse is not licensed) often find themselves facing a dilemma. The provision of care to patients in states in which the nurse is not licensed potentially poses legal concerns regarding the unlicensed practice of nursing in those remote states. Efforts to obtain licensure from multiple states would be essentially cost prohibitive for individual nurses and poses a significant financial burden on organizations which have assumed that responsibility for its nurses. Furthermore, efforts to obtain and maintain multistate licensure is extremely time and labor intensive, often necessitating the creation of one or more organizational positions to support these efforts. Additionally, the rules and regulations addressing nursing practice vary from state to state. This variability creates confusion for ambulatory care nurses involved in the practice of telehealth regarding what is and is not considered to be within the scope of practice for nurses in various states.

The current healthcare milieu widely supports the provision of nursing care using telecommunications technology, enabling the delivery of remote care business travelers, vacationers, and "snow birds" or other temporary residents in other states. . It is anticipated that this practice modality will continue to grow in depth, breadth and significance over the coming years. Measures to clarify and standardize practice and support mutual recognition of nurse licensure across state lines will ensure the highest quality of patient care by eliminating barriers to care that result from confusion about regulations governing telehealth nursing.

While many states have adopted legislation to enact the NLC, others are slow to take this action. Providing care to patients in multiple states poses significant challenges for registered nurses in a wide variety of settings including but not limited to call centers and centers of excellence that have nationwide patient bases. Resistance to introduction of legislation supporting the Compact varies from state to state. For some states, resistance is based primarily on potential loss of revenues and inability to dictate or control standards for nurses practicing in the host state. States' sovereignty has been cited, and the question of constitutionality of the Nurse Licensure Compact has been raised by a limited number of States. For other states, reluctance to enter the Compact may be related to issues with labor relations and collective bargaining.

Nurses who are expected to provide care to patients in states in which the nurse is not licensed are in an untenable position. They must either provide care to the patient, knowing they are not licensed in the state in which the patient is physically located or decline to provide care to the patient, often after the nurse/patient relationship has been established, giving rise to the question of patient abandonment and posing multiple risks to the patient, the nurse, and the organization. Neither of these are acceptable options from the perspectives of professionalism and patient safety. Confusion is compounded by varying rules, regulations and interpretations relative to provision of telehealth nursing services from state to state.

DEFINITIONS

The NCSBN has defined telehealth nursing as "...the practice of nursing care over distance using telecommunications technology." (NCSBN, 1997). The AACN has defined telehealth nursing as "The delivery, management, and coordination of care and services provided via telecommunications technology within the domain of nursing..." (2004, pg 22). AACN identifies the Registered Nurse as the level of preparation necessary for provision of patient care via most forms of telehealth nursing, especially those requiring patient assessment, planning and evaluation. Therefore, in this document, the term "nurse" refers to Registered Nurses. It is acknowledged, however, that in some states it is permissible for LPNs and LVNs to participate in select forms of telehealth nursing not requiring independent assessment, diagnosis, planning or evaluation.

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The lack of uniform adoption of the Nurse Licensure Compact among all of the United States and its territories poses a significant risk to ambulatory care and other nurses involved in interstate practice. Additionally, patients are potentially at risk when lack of licensure serves as a deterrent to nurses providing care across state lines. Uniform adoption of the Nurse Licensure Compact (NLC) would benefit ambulatory care nurses who provide care via telecommunications technology and organizations that provide telehealth nursing services. Adoption would ultimately serve to improve patient care and safety.

AAACN endorses the Nurse Licensure Compact and encourages all States and US Territories to introduce legislation in support of uniform adoption of the Nurse Licensure Compact. Furthermore, in support of the NLC, AAACN endorses the need for all telehealth nurses to be licensed in each state in which they provide care via telecommunications technology.

Approved by AAACN Board of Directors
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REFERENCES

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