

Interstate Licensure

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Abstract

Imagine being able to practice nursing from state to state with one license! As the nursing community is exploring new models of interstate practice regulation to accommodate the condition of workforce mobility and globalization in the country, the National Council of State Boards of Nursing (NCSBN) has devised a mutual recognition model, in which nurses need only one license to practice nursing across state boundaries. States that adopt the model enter into a compact by which they agree to recognize the licenses of nurses in other states involved^{1, 2}. The purpose of this article is to discuss the issue of interstate licensure and its implications for registered nurses (RNs) and advanced practice nurses (APNs).

INTERSTATE LICENSURE

An interstate compact is an agreement among states to coordinate certain activities associated with nursing license and is designed to reduce multiple requirements, enhance information sharing, and establish mechanism for disciplinary actions associated with interstate practice². Currently, there are 19 state boards of nursing that have entered the nurse licensure compact (NLC). Nurses in Arizona, Arkansas, Delaware, Idaho, Indiana, Iowa, Maine, Maryland, Nebraska, New Jersey, North Carolina, North Dakota, South Dakota, Texas, Tennessee, Mississippi, Utah, Wisconsin and New Mexico can legally practice in all of these states with a valid nursing license³. Virginia has enacted the licensure compact and will implement it in January of 2005. According to American Nurses Association, the following state boards of nursing oppose the effort of NLC: California, Colorado, Kansas, Illinois, South Carolina, and New York⁴. The NCSBN reports that NLC can speed up the endorsement process and turn the jurisdiction for nursing practice over to the federal government. The compact includes a provision that would create a national database containing the licensure and disciplinary history over every nurse in the country. Through the database, called NURSIS, state boards of nursing would be able to share licensure and disciplinary information more easily and quickly⁵.

The NCSBN asserted that the NLC would have little effect on the standard of care, as the licensure requirements are essentially the same across the country. However, there are concerns raised by some professional nursing organizations. One of the major concerns is that NLC might lower the

standards of nursing care for one state's citizens or fragment the profession⁵. Other concerns are possible lack of uniform licensure requirements, confidentiality and information sharing, discipline issues, potential for increasing licensing fees, and separate compact and timeline for advanced practice nurses².

Because of the diversity of the practice regulations and the substantial differences in the scope of advanced practice from state to state, the NCSBN has clarified that advanced practice nursing is not to be a part of the mutual recognition model, though the Advanced Practice Task Force of the NCSBN is being developed for future introduction of uniform requirements for APNs⁶. Minarik & Price state that rather than adopting the complex approach of interstate compacts for the regulation of advanced practice, nursing should seize the opportunity to promote a uniform acts model of licensure for APNs, which addresses the education, certification and scope of practice issues that currently vary across the states⁶. The National Association of Clinical Nurse Specialists does not endorse the language of the advanced practice registered nurse compact at this time.

NURSING IMPLICATIONS

Whether or not one is an advocate of the Nurse Licensure Compact, discussions centered on this model have led to a more informed nursing community¹. Not only do nurses need to be familiar with the current regulatory model, the remote and home state's nurse practice acts and regulation, nurses need to become involved with efforts within the states to promote mutual recognition, and begin making their opinions known on the issue². In the midst of workforce

mobility, nurses are encouraged to develop their professional portfolios, consisting of important documents relative to requirements for licensure, certification, performance evaluations and lifelong learning, which offer evidence of their competencies and expertise. The interstate licensure compact offers new opportunities for nurses to practice in new ways, and for pursuing changes in the system that would improve access to quality and cost effective health care services.

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