Public Law 111–148
111th Congress

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,
TO NAME A FEW......

- Pharma
- Durable Medical Equipment Makers
- Hospitals
- Extended Care Facilities
- Ambulatory Surgical Centers
- Community Clinics
- Convenience Clinics
- Home Health
- Hospice
- Commercial Insurance
- Employers
- State and Federal Insurance
- Clinicians
Florida law restricting doctors' gun talk blocked by federal judge

Related Content
- Physicians, gun advocates tangle over Florida law

By Marcia G. Cooke
The Miami Herald

A federal judge Wednesday blocked a Florida gun law that restricted doctors from asking patients about firearms.

Judge Marcia G. Cooke said doctors had a First Amendment right to ask about firearms, and she rapped the state's lawyers for failing to provide more than anecdotal evidence to show the law was needed.

"The State has attempted to inveigle this Court to cast this matter as a Second Amendment case," Cooke wrote. "Despite the State's insistence that the right to "keep arms" is the primary constitutional right at issue in this litigation, a plain reading of the statute reveals that this law in no way affects such rights."

Gov. Rick Scott, who signed the "Firearm Owners' Privacy Act into law June 2nd vowed to appeal
Thursday, October 6, 2011

The docket pages

For those interested in checking the docket pages at the Supreme Court, here are the docket pages for the five cases in which cert petitions have thus far been filed (in order of their docket numbers):

* No. 11-117: *Thomas More Law Center v. Obama*.

* No. 11-393: *National Federation of Independent Businesses v. Sebelius*.

* No. 11-398: *HHS v. Florida*.

* No. 11-400: *Florida v. HHS*.

* No. 11-420: *Virginia v. Sebelius*. 
THIRTEEN MILLION MORE PEOPLE UNINSURED IN 2010 THAN IN 2000

Millions of uninsured

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<th>Year</th>
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On the 6th anniversary of Hurricane Katrina, the National Association of Free Clinics served 1,000 uninsured patients with the help of an incredible army of volunteers. On this day over 900 free prescriptions were filled, 1 case of HIV was found, 1 patient was sent to the emergency room, connection to 100 free mammograms were given and 5 cases of cancer were diagnosed.
National Health Expenditures, 2008

- Hospital care: 31%
- Physician/clinical services: 21%
- Other professional services: 6%
- Dental: 4%
- Nursing home care: 6%
- Home health: 3%
- Rx drugs: 10%
- Other retail products: 3%
- Program Administration: 7%
- Govt. public health activities: 3%
- Investment: 7%

Total = $2.3 Trillion

Source: Centers for Medicare and Medicaid Services, Office of the Actuary, National Health Statistics Group.
**AND TO TOP IT OFF.....**

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<th>Country Rankings</th>
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<th>2.34-4.66</th>
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</table>
DISEASE BURDEN

5 Most Common Causes of Death, Connecticut Compared with United States, 2005

- Diseases of the Heart: 172.9 in CT, 211.1 in US
- All cancers: 175.7 in CT, 183.8 in US
- Stroke: 34.7 in CT, 48.6 in US
- Chronic Lower Respiratory Diseases: 35.3 in CT, 43.2 in US
- Unintentional Injuries: 29.8 in CT, 39.1 in US

At minimum, two-year averages were used to improve the precision of the annual estimates.

Rate per 100,000 population
Age adjusted to 2000 total U.S. population
AND OTHER COMPONENTS:

- MEANINGFUL ACCESS
- VALUE-ADDED HEALTHCARE
- EFFICACY
- EVIDENCE-BASED
- HAND-OFFS
- CHRONIC DISEASE MANAGEMENT
- EARLY INTERVENTION
- DISEASE PREVENTION
WHERE IS NURSING?
AND OTHER COMPONENTS:

- MEANINGFUL ACCESS
- VALUE-ADDED HEALTHCARE
- EFFICACY
- EVIDENCE-BASED
- HAND-OFFS
- CHRONIC DISEASE MANAGEMENT
- EARLY INTERVENTION
- DISEASE PREVENTION
CURRENT NURSING PRESENCE IN “HEALTH REFORM”:

- NDNQI
- AIKEN
- CHRONIC CARE MODEL PILOTS
- VACCINATIONS AND MATERNITY/WELL-BABY
- TRANSITIONAL NURSING
- NURSE-MANAGED HEALTH CENTERS
- APRN PRACTICE
SO WHAT’S NEXT?

SCOPE
WHAT SCOPE WAS.....

MEDICINE
WHAT SCOPE BECAME:

- RN
- PA
- RX
- OPTO
- TECHS
OR THIS:
ONE PICTURE OF WHAT SCOPE REALLY IS:
OR MAYBE THIS:
SOME GOOD IDEAS....

“Our objective is to liberate the talents and skills of all the workforce so that every patient gets the right care in the right place at the right time.....”
For nurses in primary care this will mean:

- A service where patients and the public have a greater choice and a greater voice
- Opportunities to provide more secondary care in community settings
- Extending nursing roles including taking on some work currently done by GPs
- A key role in delivering 24-hour first contact care across a range of settings
- A major role in delivering National Service Frameworks
- Having a greater voice in decision making
- A focus on prevention and tackling inequalities
- Greater skill mix and leadership opportunities.
- Health Promotion
- Chronic and complex care management in community
- Community-based mental health care
- Responsive maternal-child-family health services
- Aged care in community and residential settings
- Generalist FRONTLINE health care services across all settings
- Liaison services between community and acute services
- Health Promotion, illness/injury prevention and continuity of care
SCOPE IN OUR STATE:

• Primary source is Nurse Practice Act
• For RNs -
  • Human responses
  • Supportive/restorative care
  • Health teaching
  • Case-finding
  • Collaborating in implementation of plan
  • Executing the medical regimen under direction of….
SCOPE IN OUR STATE:

- For APRNS:
  - Alterations in health status
  - Mandatory collaborative agreement
    - In writing if prescribing
SO LET’S SAY WE WANT TO:

START NURSE-LED CARDIOVASCULAR CLINICS....
ASSUME SCOPE IS OUR ONLY CHALLENGE.....

Connecticut Board of Examiners For Nursing
Nursing Competency / Scope of Practice
Decision - Making Model

Stop

No

Is the act or task permitted by the laws and regulations of the state in which you are currently licensed?

Not Sure

Stop

Yes

Is the skill for RNs / LPNs within the generally recognized scope and standards of practice?

Not Sure

Stop

No

Is the skill for APRNs within the generally recognized scope and standards of your certifying body?

Yes
SO NOW WHAT?
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MAKING THE CASE....

• Data is key

• As is “framing”

• And getting a toe-hold on leadership’s interest
A PERFECT STORM EXISTS....

- Nationally
  - PPACA
  - IOM’s Future of Nursing
  - Those high expenditures
  - Those horrible outcomes
A PERFECT STORM EXISTS....

- **Statewide:**
  - Enduring reform efforts since 2006
    - SPCAA
    - HIT
    - Health First
    - Coalition of Advanced Practice Nurses
    - Connecticut Center for Primary Care
    - Our Congressional members care about health
A PERFECT STORM EXISTS....

- Locally:
  - Pay-for Performance on Acute Indicators
  - Community interventions now seen as useful
  - Magnet status
  - IOM! And use your international colleagues…
  - Money