		Approved	rebruary z	0, 190
		Tippio, od 2	Date	2
MINUTE'S OF THE SENATE COMMITTE	E ONPUBLIC	HEALTH	AND WELFARE	•
The meeting was called to order bySenato	r Jan Meyers	3		at
The meeting was cancer to order by		Chairperso	m	
10 a.m./pxxx. on February 17		, 19 <u>8</u>	4 in room <u>526-S</u>	of the Capitol.
All members were present except:				
Senator Hayden, excused				
Committee staff present:				

Conferees appearing before the committee:

None

Others present: see attached list

 $\underline{\mathtt{SB}}$ 366 - prohibiting discrimination because of a handicap

Emalene Correll, Legislative Research Department

Norman Furse, Revisor of Statutes Office

Senator Meyers asked for discussion and action on SB 366, and reviewed the bill, along with the amendments.

Concern was expressed about landlords having to construct special facilities or fixtures for the handicapped. Norman Furse pointed out that this particular act doesn't require any special facilities or fixtures.

Senator Morris said he felt the bill went too far in relation to the mentally handicapped, and should be studied further.

Senator Morris moved that SB 366 be sent to Interim Committee for further study. Senator Bogina seconded the motion.

Senator Francisco opposed the motion and offered a substitute motion to conceptually amend Sections 8, 9, 10, and 11, pertaining to housing for physically handicapped.

Senator Bogina seconded the motion, and it carried.

SB 634 - concerning midwifery; providing for licensure of midwives

It was the consensus of the committee that midwifery go through the credentialing procedure of SHCC.

SB 586 - concerning medication aides; providing for registration thereof

Senator Meyers told the committee of several letters of protest which she had received from educational institutions over the state.

Senator Johnston suggested an amendment to authorize the Secretary of DH&E to prescribe training adequate to preparing MA's for the purpose of administering medications and especially insulin.

Senator Ehrlich distributed an amendment to SB 586, which made a few language changes and added a section stating "the Secretary of DH&E shall adopt rules and regulations necessary to administer the provisions of this act". (Attachment #1).

There was discussion concerning the cost of training MA's to administer medications, and who would pay for their training. Mr. Hummel said he

CONTINUATION SHEET

MINUTES OF THE _	SENATE	COMMITTEE ON	PUBLIC HEALTH	AND WELFAR	E.
room 526-S Stateho	ouse, at10	a.m. ⁄xoxov . on	February 17		19 84

would be willing to work with agencies in devising a course curriculum. A committee member asked if MA's had to be high school graduates. Mr. Hummel answered that they didn't.

Senator Ehrlich moved that the amendments he submitted to SB 586 be adopted. Senator Vidricksen seconded the motion and it passed.

Senator Francisco moved that SB 586, as amended, be reported favorably. Senator Ehrlich seconded the motion and it carried. Senators Chaney and Meyers voted "nay".

Written testimony in opposition to SB 586 was submitted by Charlotte Cassidy, RN, Instructor, Kansas Area Vocational Technical School, K. C., Ks.; JoAnn Peavler, RN, Medication Aide Instructor, Kaw Area Vocational-Technical School, Topeka; Ada Williams, RN, Kansas City Area Vocational Technical School, Kansas City, Ks.; Dr. Hubert D. Reid, Vocational Technical School, Pittsburg State University, Pittsburg; and a letter in support of SB 586 from Pamela S. Kern, RN, NHA, Director of Nursing Services at Cherry Village, Great Bend, Kansas. (Attachments #2, 3, 4, 5, and 6).

The meeting was adjourned.

SENATE

PUBLIC HEALTH AND WELFARE COMMITTEE

DATE 2-17-84

(PLEASE PRINT) NAME AND ADDRESS	ORGANIZATION
Anne Harven 1828 NW38 Town Gran	
Mariun Brait Lawrence	<u> </u>
Dy Lois Rich Scinetta Touchas	125 BON
Jack survery perry ks	CHRISTING STORMSTORM
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DICK Hummel	KKCA
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Session of 1984

SENATE BILL No. 586

By Senators Ehrlich, Allen, Doyen, Francisco, Harder, Hayden, Montgomery, Vidricksen and Warren

1-26

0016 AN ACT concerning medication aides; providing for the regis-0017 tration thereof; authorizing the administration of certain med-10018 ications thereby; granting certain powers and imposing cer-10019 tain duties upon the secretary of health and environment.

0020 Be it enacted by the Legislature of the State of Kansas:

Section 1. (a) The secretary of health and environment shall maintain a register of the names of the persons certified as medication aides under K.S.A. 1983 Supp. 65-1,120 and amendoments thereto and may refuse to place a person's name on or may remove a person's name from the register for any of the following reasons:

- 0027 (1) The person requests or consents to the removal thereof;
- 0028 (2) the person habitually indulges in the use of narcotic or 0029 other habit-forming drugs or excessively indulges in the use of 0030 alcoholic liquors;
- 0031 (3) the person has been convicted of a felony;
- 0032 (4) the person obtained or attempted to obtain registration 0033 under this act by fraud or deception;
- 0034 (5) the person is incompetent or grossly negligent in the 0035 administration of medications;
- 0036 (6) the person assumes duties or responsibilities for which 0037 such person has not been trained;
- 0038 (7) the person inaccurately records, falsifies or alters infor-0039 mation in a patient's or resident's medical record;
- 0040 (8) the person diverts or ingests medication intended for a 0041 patient or resident; or
- 0042 (9) the person fails to meet the continuing education re-0043 quirement as required under K.S.A. 1983 Supp. 65-1,121 and

maintaining a list of the names of certified medication aides

list

Atch. 1

0045 (b) No action shall be taken under paragraphs (2) to (9), 0046 inclusive, of subsection (a) unless notice has been given and a 0047 hearing held if a hearing is requested by any party to the 0048 proceeding.

0049 (c) A medication aide shall be permitted to administer in-0050 sulin to adult care home residents in addition to other medica-0051 tion which a medication aide is authorized to administer if such 0052 medication aide has successfully completed a state approved 0053 course in insulin administration.

Sec. 2. The secretary of health and environment may bring an action in the district court to enjoin any unlicensed person from the administration of medications as authorized under subsection (i) of K.S.A. 65-1124 and amendments thereto unless the person is registered with the secretary as a medication aide in accordance with this act. In an action under this section for a temporary or permanent injunction, it shall not be necessary to allege or prove at any stage of the proceeding that irreparable damage will occur should the temporary or permanent injunction not be issued or that the remedy at law is inadequate, and the temporary or permanent injunction shall issue without such ones allegation and without such proof.

Sec. 3. No person reporting to the secretary of health and environment under oath and in good faith any information such person may have relating to the qualifications, fitness, competence or character of a medication aide shall be subject to a civil action for damages as a result of reporting such information.

O071 Sec. [4.] This act shall take effect and be in force from and o072 after its publication in the statute book.

certified

Sec. 4. The secretary of health and environment shall adopt rules and regulations necessary to administer the provisions of this act.

5.

Linsas City Area Vocational Technical School

February 9, 1984

Senator Jan Meyers State House Room 128 South Topeka, Kansas 66612

Dear Senator Meyers:

As the instructor of the Medication Aide program at the Kansas City, Kansas Area Vocational Technical School, I am opposing Senate Bill 586 allowing Medication Aides in nursing home facilities to give injectable insulin. My reasons for this decision are as follows:

- 1. Although a Certified Nurse Aide is required to participate in the Certified Medication Aide class, basic education in surgical aseptic technique is limited in the current curriculum.
 - Because of the serious consequences of overdosing or underdosing with insulin and the inability of a percentage of these students to understand measurements.
 - 3. Because of the shortage of licensed personnel in a nursing home facility, the "double checking" of insulin before administration may be overlooked with reliance being placed on another Certified Medication Aid for this responsibility.
 - 4. Also, I feel if the Certified Medication Aide is allowed to give insulin injections, some nursing homes will "bend the rule" and permit the injection of other drugs (such as ampicillin).

If the nursing home administrators pursue this bill, strong guidance should be documented and followed. I suggest the following:

- The Certified Medication Aide must have the experience of passing oral, topical and rectal drugs for at least one year.
- 2. Participate in a diabetes class (offered at Kansas University Medical Center) and probably other programs available.

AVIS

2220 North 59th Street, Kansas City, Kansas 66104 (913) 334-1000

ALCh. 2

Senator Jan Meyers Page 2 February 9, 1984

- Each nursing home assume the responsibility of selecting a responsible, reliable Certified Medication Aide to assume this responsibility.
- 4. Careful monitoring of the Certified Medication Aide for at least one month under supervision of a <u>licensed</u> employee, <u>before</u> the Certified Medication Aide functions alone. Also each time the <u>insulin</u> order is changed to demonstrate the ability to measure accurately.

Sincerely,

Charlotte Cassedy, RN

Instructor

CC/nc

#3- 2-17-84

Kaw Area Vocational-Technical Sciool



5724 Huntoon Phone: (913) 273-7140 TOPEKA, KANSAS 66604

Cooperating Unified Districts

No. 336, Holton—No. 345, Seaman—No. 450, Shawnee Heights No. 501, Topeka—No. 338, Valley Falls—No. 437, Washburn Rural

February 6, 1984

MEMORANDUM

TO

JoAnn Peavler

FROM:

Charlotte Campbell, R.N., Medication Aide Instructor

SUBJECT:

Senate Bill No. 586

It is my feeling that insulin can be administered to adult care home residents at a time when licensed personnel are on duty as long as it is consistently given at the same time each day.

Sixty-four hours of instruction which includes both classroom and clinical experience does not give an instructor enough time to properly instruct students in insulin administration.

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Area Vocational Technical School

February 9, 1984

Senator Jan Meyers State House Room 128 South Topeka, Kansas 66612

Dear Senator Meyers:

I am writing this letter to oppose that portion of Senate Bill 586 that relates to having Medication Aides administer insulin injections.

Administering medication is a serious responsibility requiring a thorough understanding of the basic concepts of drug action. To grasp these concepts further requires a certain background in normal body functioning and the changes caused by disease.

The average course taught Medication Aides is a short term course that does not adequately prepare them with this knowledge base. The concern of the Area Vocational Technical School nursing faculty is that the residents of the nursing facility or hospital deserve to have medication administered competently, safely, and with proper attention to the needs of the patient.

The nursing program for Registered Nurses and Licensed Practical Nurses cover concepts that are necessary for the <u>best</u> and safe administration of drugs. The proper dose is crucial and needs to <u>be measured accurately</u>. For this reason health team members as well as patients must be thoroughly familiar with the symptoms of insulin overdose and underdose.

The health institutions we currently use have a written policy which states that the medication should be checked by another licensed person before being administered.

Sincerely

Ada Williams, RN

Supervision Health Occupations

eda Wellerns

AW/nc

AVIS

2220 North 59th Street, Kansas City, Kansas 66104 (913) 334-1000

Atch. 4



Pittsburg State University

Vocational Technical Institute / Pittsburg, Kansas 66762 / (316) 231-7000, Ext. 401

February 13, 1984

Jan Meyers, Chairperson Public Health & Welfare Committee State Capitol Topeka, Kansas 66612

Dear Ms. Meyers:

This letter is in reference to Senate Bill #586 which would allow Medication Aides to administer insulin injections.

It is the opinion of the Vocational Technical Institute that the Medication Aide course continue to be presented in accordance with the guidelines prescribed by the Kansas Department of Health and Environment in February 1982. These guidelines state that insulin injections shall be administered only by licensed nursing personnel.

In view of the fact that Medication Aides may not be capable of making nursing judgements, we are opposed to this new amendment. We feel that the administration of insulin should remain a function of the licensed nursing staff.

Sincerely,

Hubert D. Reid, Ph.D., Director Vocational Technical Institute

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Atch. 5

6 - 2-17-84

February 7, 1984 Senate Bill # 586

Speaker: Pamla S. Kern, R.N., N.H.A.

Qualifications: Director of Nursing Services at Cherry Village

Intermediate Care Facility, Great Bend, Kansas.

Actively involved in Geriatric nursing and

administration since 1977.

Statement:

Cherry Village is one of the few remaining family owned Nursing Homes in the state of Kansas. It is a closely held Kansas corporation, NOT a member of a chain.

I am here today to speak <u>for</u> Senate Bill # 586; regarding certified medication aides administration of insulin and their accountability. A great responsibility accompanies the administration of medications. Accountability is a safeguard for both the public and the group of people certified as medication aides.

Nursing Homes are a highly regulated industry. State law requires three inspections in each twelve month period. Inspection teams consist of a minimum of one registered nurse and one social worker. They provide an in depth review of a facilities medical records, policies and procedures, medications, medication administration records, diets and patient care. No individual is admitted to a nursing home, in this state, unless they are under the direct care of a physician. State law requires residents are admitted only with a physician's written plan of care which includes medications, their amount, times to be given and the route meds are to be given by. State law and the State Nurse Practice Act requires medications be given according to the physician's order. Additional check sources required are:

- 1. An R.N. must review all medications given in the Intermediate Care Facility and the records pertaining to those administrations every thirty days. This is a state and federal regulation.
- 2. Each facilities consulting pharmacist is required to review medications and their administration record every ninety

ALLA. 6

3. The resident's personal physician is required by regulation (state and federal) to review medications and doseages every ninety days.

These scheduled reviews are over and above the 24 hour vigilence of facility R.N.'s, L.P.N.'s, and C.M.A.'s giving the medications.

Nursing homes as of October of 1983 are required to have all non-certified nurse aides complete a forty hour training program before giving any hands on care. AN R.N. teaches this forty hours. Kansas Department of Health and Environment provides a course outline. All nurse aide trainees are required by state law to complete a ninety hour training course within their first six months of employment. This course is also taught by an R.N. Prior to being labeled Certified Nurse Aides they must successfully complete a state given test.

Certified Nurse Aides may choose to take the one hundred five hour medication aide class. Course objectives are stipulated by Kansas Department of Health and Environment. C.M.A. class objectives include but are not limited to:

*pharmacodynamics

*medical abbreviations

*drug standards and names

*drugs affecting all body

*reactions and adverse reactions

systems

of numerous medications

*administration of medications

*facts about diabetic acidosis and insulin shock

Cost containment and quality patient care are facts of life along with state and federal regulations. Kansas law requires an R.N. or L.P.N. onduty eight hours a day seven days per week on the day tour of duty. Kansas defines day tour of duty as 6:00 a.m. to 9:00 p.m. This individual is probably working an eight hour shift such as 7:00 a.m. - 3:00 p.m., 8:00 a.m. - 4:00 p.m., 9:00 a.m. - 5:00 p.m., etc.

Insulin is routinely scheduled for injection in the early morning between the hours of 6:00 a.m. to 7:00 a.m. and again in

the early evening between the hours of 4:00 p.m. and 6:00 p.m. Obviously this does not fit in with a routine eight hour shift. The nurse is then forced to work at least one hour of overtime in order to give the evening insulin injections. An average R.N. salary is \$8.00 per hour. Overtime cost would be a minimum of \$12.00 per hour. COSTLY! This nurse is, again, obviously not on duty seven hours after the latest insulin injection when an insulin reaction known as hypoglycemia would occur. This life threatening condition is left to be identified and remedied by the facilities trained Certified Medication Aide. The C.M.A. is considered adequately trained to take the proper steps to correct this life threatening condition. She can definitely be taught to draw the correct doseage of insulin and administer it properly to the correct individual.

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The C.M.A. cost per hour is an average \$4.50. A considerable savings over the \$8.00 average of an R.N. Use of a Certified Medication Aide for at least the evening injection of insulin could save one facility \$3,650.00 in one year. Multiply this savings by all of the facilities in Kansas. You see a considerable cost savings without compromising patient care.

I recommend the passage of Senate Bill # 586 as an R.N. administrator.