Editorial

Uniform Licensure Requirements

In this issue of *JNR*, you will find the newly revised 2011 Uniform Licensure Requirements (ULRs) adopted by the state delegates at the National Council of States Boards of Nursing’s (NCSBN) Annual Meeting this past August. The 2011 ULRs serve as important licensure standards for regulators and provide guidance for the future of nursing education and practice. It is hoped that states will adopt the 2011 ULRs to enhance mobility of the profession and decrease the confusion that may occur when nurses move to other states and find that they have to comply with different requirements for licensure.

While one may ask whether the concept of uniformity is in contrast to state sovereignty, uniform laws are not unique to nursing regulation. In fact, their evolution dates back more than a century when the legal profession began addressing many of the same issues we discuss today. In 1898, states (44 at that time) were becoming more interdependent, and the population was becoming increasingly mobile. Fluctuations in laws from one state to another were often perceived as barriers, created confusion, and seemed unwarranted. Much discourse resulted around the notion of uniformity. At the 12th Annual Meeting of the American Bar Association (ABA), the issue of uniformity emerged, and 2 years later in 1891, the ABA recommended the establishment of the Conference of State Boards of Commissioners on Promoting Uniformity of Law in the U.S. This nonprofit organization, made up of state commissions on uniform laws from each state, the District of Columbia, the Commonwealth of Puerto Rico, and the U.S. Virgin Islands, was derived for the purpose of promoting “uniformity in state laws on all subjects where uniformity is deemed desirable and practicable.” The uniform regulations are developed by the organization and then handed over to the states with the hope that they will be adopted across all jurisdictions. The organization has drafted over 200 uniform laws since it was founded and continues today as an integral component of the U.S. legal system (*Lectric Law Library*, n.d.). The conference rarely addresses regulatory laws; thus, for nursing, it is up to the state boards to determine where there should be uniformity and to propose the requirements.

Uniform licensure requirements provide consistent standards and promote a health care system that is fluid and accessible by removing barriers to care and maximizing portability for nurses. Even more importantly, they assure the consumer that a nurse in one state has met the same requirements as nurses in every other state. Unified licensure requirements eliminate “weak links” in the regulatory system. These are regulations that might be less rigorous in one state than others and allow less competent or less qualified individuals to practice under less stringent requirements.

As described in the article, the ULR Committee put a rigorous amount of work, attention, and detail into the development of 2011 ULRs. The NCSBN Delegate Assembly made some thoughtful modifications. Working together, the state boards have developed robust uniform licensure requirements that will lead us into the next decade. Please support these when your state is ready to adopt them.

One additional note: There is another article in this issue I would like to call to your attention, and that is “The First National Survey of Medication Aides” by Jill S. Budden. This study raises some important questions about the education, supervision, and regulation of medication aides in nursing homes and other types of facilities. From the data presented, medication aides are being asked by employers to take on responsibilities that are exceeding state regulations and surpassing their education and training. Over the course of the next year, NCSBN will be addressing this topic to ensure that all medication aides are administering medication safely and within the limits of state laws. We ask for your help and support. This issue also features a companion article by Vogelsmeier on RNs delegating safely to Unlicensed Assistive Personnel, which is an excellent teaching tool for nurses working with medication aides.

As 2011 comes to a close and we look forward to the upcoming year, let me thank all of you for your contributions, support, and positive comments about *JNR* throughout the past year.

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Reference