



**NCSBN**

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## **Licensure of Nurses: An Integral Part of Public Protection**

This paper discusses the importance of nursing licensure in the provision of safe health care. It presents the purpose of licensure, addresses how it protects the public and discusses the role of the board of nursing.

In a hypothetical situation, State X has decided to eliminate licensure for nurses. There is a nursing shortage and many believe that it is not the responsibility of state government to ensure the qualifications of nurses working in their state. Imagine being a patient undergoing surgery in State X. A nurse admits you, takes your health history and is part of the team that ensures the correct procedure is done to the right patient. A nurse anesthetist puts you to sleep, monitors you during surgery and must be ready to rapidly respond if there is a problem. After surgery, the recovery room nurse observes you for post-operative complications. She provides you with IV narcotic pain medicine before you are transferred to the floor where many other nurses will assess your condition and administer medication and treatments. Now, imagine that because nurses are not licensed in State X, you have no way of knowing that these nurses have gone to approved nursing programs, have passed licensure/certification exams or have the knowledge and skills to care for you. Without licensure, the health care consumer has no assurance that nurses performing high level functions in a highly technical environment have met regulatory standards and are safe to practice.

While one would like to believe that only those who are educated as nurses accept employment as nurses and hospitals are diligent in their responsibility to hire only qualified individuals, there are imposters, fraudulent education programs and unqualified or incompetent individuals working in every profession. Only licensure, regulated by qualified members of the profession serving on boards of nursing, can ensure the public that the nurse caring for them has met professional standards and has the qualifications to practice safely. Only licensure assures the public that an individual that is reported to the board of nursing for problems with their practice or for other reasons, such as substance use, will be monitored and/or removed from practice.

### **Components of Licensure**

#### ***Education***

At the most basic level, nursing licensure assures the public that individuals calling themselves a nurse are nurses. The first responsibility in licensing a nurse is to ensure that applicants have completed a nursing education program approved by a state board of nursing or a state commission on higher education. The board of nursing sets the standards for nursing education programs ensuring that their curriculum meets national nursing education standards, that the students have proper clinical experiences and that faculty are qualified to teach. In addition, boards of nursing monitor nursing education programs on an ongoing basis to ensure that they continuously provide quality education.

Programs run by unqualified administrators and faculty that do not meet state/national standards do exist. Allowing graduates from these programs to practice nursing is a risk to public safety. The steps in the licensure process that boards of nursing use to verify education and transcripts protects against having someone practice nursing that hasn't received his/her nursing education from a state-approved program.

In addition to undergraduate education and a registered nurse (RN) license, advanced practice registered nurses (APRNs) require graduate education. These nurses diagnose, treat, deliver babies and administer anesthesia. As with RNs and licensed practical/vocational nurses (LPN/VNs), licensure of APRNs assures the public that the APRN has completed graduate education from an accredited program.

An important part of the licensure process is ensuring that the nursing education transcript is authentic. This is a time consuming process that requires specific training. Without licensure, hiring a nurse would be an arduous process for employers that would require human resource departments to have specialists on staff to analyze education transcripts. Since 2009, 313 individuals were reported as nurse imposters in the National Council of State Board of

Nursing (NCSBN) Falsified Identity Tracking System (FITS). These individuals have attempted to practice nursing or obtain a license with forged credentials. Were it not for the vigilance of boards of nursing and the rigors of their licensure process, these individuals, who are not nurses, would potentially be administering nursing care for patients in hospitals or other facilities across the country.

### **Testing**

Another requirement for nursing licensure in the U.S. is the passage of a secure, high-stakes, psychometrically sound licensure examination. Across all U.S. jurisdictions, the national nursing licensure examination is the NCLEX. Passage of this exam indicates that the individual has the minimal competency needed to practice nursing safely.

Most states require APRNs to be certified from a state approved certification body prior to receiving a license. In order to be certified, an APRN must meet specific education requirements and pass an examination. Again, as with the NCLEX, this ensures that the nurse not only was educated, but is competent to perform advanced skills.

### **Other Protections**

Licensure affords other protections to the public as well. In many states, boards of nursing require state and federal criminal background checks prior to licensure and applicants are screened for a history of substance use as well as for discipline in other states. All these actions that are part of the licensure process provide the public assurance that the individual is safe to practice. In the state of Texas from 2005-2008, 11.9 percent of 110,605 applicants for nursing licensure were found to have a positive hit on criminal background checks<sup>1</sup>. The Texas Board of Nursing was then able to examine each offense and determine whether the applicant posed a risk to the public.

### **Professional Standards/Enforcement**

Once a license is granted, nurses are expected to uphold the state laws and regulations outlined in the state nurse practice act. Boards of nursing enforce these laws and regulations and hold those who violate them or exceed their scope of practice accountable for their actions. Those who commit violations are subject to discipline by the board of nursing under the state nurse practice act. Monitoring nurses that have practice deficiencies, removing them from practice and/or ensuring they receive remediation is part of the role of the board of nursing. In addition, boards of nursing require any nurse with substance use problems to receive professional assistance.

### **International Nurses**

Licensure also ensures that foreign educated nurses meet U.S. standards. Extensive analyses (credentials evaluation) are done on all foreign nurse applicants for licensure in the U.S. to ensure they have met the same education requirements as domestic graduates, have passed the licensure exam, have passed tests of the English language and have had no history of discipline on their license in the country of origin. The licensure process holds foreign educated nurses to the same standards as U.S. nurses, ensuring the public that these nurses are as qualified to practice as nurses educated in the U.S. The process of evaluating a foreign nursing education transcript requires extensive knowledge about international nursing programs and curriculums. In addition, the process of verifying that a nurse was in good standing in the country of origin is also complex requiring specialized knowledge. These processes would be a significant burden for employers were it not for the licensure process.

### **The Role of Boards of Nursing**

In addition to all the functions described above, boards of nursing bring quality and expertise to the regulatory arena. The decisions made by a board of nursing regarding licensure, enforcement and other aspects of regulation are reliant upon thorough knowledge of nursing education at all levels, competency testing, certification, professional standards and scope of practice. This level of expertise is held only by members of the nursing profession and is beyond the capacity of an employer or a non-nursing board.

Baldwin and Cave (1999) describe "expertise" as being an essential component of effective regulation in ensuring public safety. Expertise is derived from the profession. While it can be argued that another group/board, such as physicians, may have overlapping knowledge and skills, as stated by Baldwin and Cave, "it is the ongoing proximity

<sup>1</sup> Statistics provided by the Texas Board of Nursing, 2011.

of links with the profession or membership that keeps expertise honed and information up to date—such ongoing links are unlikely to be sustained when regulators are independent of the regulated group” (Baldwin and Cave, 1999, p. 127). Throughout the history of professional regulation in the U.S., experts chosen from the profession are delegated the responsibility to make determinations regarding licensure, practice and discipline. To entrust these responsibilities to employers or to a different profession (i.e. medicine) is unfair to nurses; to the employers, who must expand their capability for hiring a nurse; to the physicians, which have limited knowledge of nursing; and to the consumer, who expects that the individuals with the most knowledge about the intricacies of the profession make up the regulatory board. To say that anyone/group beside a board of nursing can regulate nurses is a serious underestimation of the complexity and individuality of nursing and a significant disregard for the basic principles of regulation. Nursing regulation should be based on a nursing model and the role of a nurse is different from that of any other profession.

Licensure and regulation of a profession by that profession is one of the hallmarks of regulatory principles in the U.S. Boards of nursing have effectively protected the public for more than 100 years. They safeguard the public and maintain the standards of the profession. Elimination of licensure and/or regulation by a board of nursing violates the basic principles of public protection and puts an entire state’s health care at risk.

## References

Baldwin, R. A. (1999). *Understanding regulation: Theory, practice and strategy*. New York: Oxford University Press.

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*Mission: NCSBN provides education, service and research through collaborative leadership to promote evidence-based regulatory excellence for patient safety and public protection.*

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