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## <u>Testimony in support of LD 2128: An Act Relating to Delegation of Nursing Activities and Tasks to Unlicensed Assistive Personnel by Registered Professional Nurses</u>

Greetings Senator Bailey and Representative Perry, and members of the committee on Health Coverage, Insurance and Financial Services. I am Bridget Quinn, Associate State Director of Advocacy and Outreach for AARP Maine.

AARP is the nation's largest nonprofit, nonpartisan organization dedicated to empowering Americans 50 and older to choose how they live as they age. On behalf of our nearly 200,000 members statewide, thank you for the opportunity to share testimony today. I am testifying in support of LD 2128: An Act Relating to Delegation of Nursing Activities and Tasks to Unlicensed Assistive Personnel by Registered Professional Nurses. We thank Representative Perry for your work on this bill.

In Maine, we have nearly 166,000 family caregivers. These care partners provide 155 million hours of unpaid care. Their work is critical, especially at a time when Maine is lacking the needed home and community-based care support to aid older adults who wish to age in place. AARP research has shown that the majority of adults 50 and older wish to age in their homes and communities. For many, at some point, they will need the support of a caregiver to do that.

Nurse delegation is a critical tool in supporting Maine's family caregivers and allowing more adults to be able to age in place. Families benefit from policy that expands the types of health maintenance tasks that registered nurses can delegate. Nurse delegation helps family caregivers who may have to otherwise leave work during the day or hire a nurse to perform these routine tasks.

In 2023, AARP released our latest edition of the Long-Term Services and Supports (LTSS) Scorecard (the Scorecard). The Scorecard is a compilation of state data and analysis based on a vision of a high-performing state long-term services and supports (LTSS) system. One of the indicators used to score states is Supports for Family Caregivers and under this heading, nurse delegation is one of the indicators.

<sup>&</sup>lt;sup>1</sup> Reinhard, Susan C., Selena Caldera, Ari Houser, and Rita B. Choula. Valuing the Invaluable 2023 Update: Strengthening Supports for Family Caregivers. Washington, DC: AARP Public Policy Institute. March 8, 2023. <a href="https://doi.org/10.26419/ppi.00082.006">https://doi.org/10.26419/ppi.00082.006</a>

<sup>&</sup>lt;sup>2</sup> Phillips, Arthur. Phillips, Josie. The High Cost of Undervaluing Direct Care Work. Augusta, ME. Maine Center for Economic Policy. April 26, 2023. <a href="https://www.mecep.org/wp-content/uploads/2023/04/The-High-Cost-of-Undervaluing-Direct-Care-Work.pdf">https://www.mecep.org/wp-content/uploads/2023/04/The-High-Cost-of-Undervaluing-Direct-Care-Work.pdf</a>

<sup>&</sup>lt;sup>3</sup> Binette, Joanne, and Fanni Farago. 2021 Home and Community Preference Survey: A National Survey of Adults Age 18-Plus. Washington, DC: AARP Research, November 2021, https://doi.org/10.26419/res.00479.001

Maine ranks 37th on Nurse Delegation.

AARP used a sample of 22 tasks that can be delegated to home care aides and responses from a survey of State Boards of Nursing to inform and rank of states in this indicator. The 22 sample tasks are listed in a follow up page to this testimony.

In Maine, 12 of these 22 tasks are already able to be completed by a home health aide. The list of these 12 tasks is in a follow up page to this testimony. The delegated tasks were provided to AARP through an AARP "Survey on Nurse Delegation in Home Settings," from the Executive Director of the Maine State Board of Nursing in Oct 2022.

This leaves Maine slightly below the national average of 15 delegated tasks and quite far behind the best performers who delegate all 22 tasks. AARP Maine supports RNs' ability to delegate tasks to unlicensed assistive personnel. Especially in the home and community when patients are relatively stable and need some support to remain at home.

LD 2128 will define unlicensed assistive personnel as someone trained in a supportive role. Having unlicensed assistive personnel delegated care tasks will ensure greater access to care for Mainers.

LD 2128 is a step in the right direction to support more Mainers, who wish to age in place, and their care partners. We urge this committee to support LD 2128. If you have any questions for me at a later time I can be reached at <a href="mailto:bquinn@aarp.org">bquinn@aarp.org</a> or at 207-272-8563.

Bridget Quinn AARP Maine



## Appendix A: AARP LTSS Scorecard delegated tasks indicator all 22 tasks

- 1. Oral medication
- 2. PRN medication
- 3. Pre-filled insulin/insulin pen
- 4. Draw up insulin
- 5. Other injectable medication
- 6. Glucometer testing
- 7. Medication through tubes
- 8. Insertion of suppositories
- 9. Eye/ear drops
- 10. Non-sterile/clean
- 11. Sterile
- 12. Nasogastric tube feeding
- 13. Gastrostomy tube feeding
- 14. Administer enema
- 15. Perform intermittent catheterization
- 16. In-dwelling catheter care
- 17. Perform ostomy care including skin care and changing appliance
- 18. Perform nebulizer treatment
- 19. Administer oxygen therapy
- 20. Oral suctioning
- 21. Tracheostomy suctioning
- 22. Perform ventilator respiratory care

## Appendix B: Basic health tasks Maine nurses can delegate

- 1. Oral medication
- 2. Pre-filled insulin/insulin pen
- 3. Glucometer testing
- 4. Insertion of suppositories
- 5. Eye/ear drops
- 6. Non-sterile/clean
- 7. Gastrostomy tube feeding
- 8. Administer Enema
- 9. Intermittent bladder catheterization
- 10. In-dwelling catheter care
- 11. Ostomy care (skin care, change appliance)
- 12. Oxygen Therapy \* Transition from portable tank to stationary tank



## **Nurse Delegation**

