The Effect of COVID-19 State Executive Orders on APRN Scope of Practice in the State of Tennessee



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Purpose

Analyze the Advanced Practice Registered Nurse (APRN) scope of practice (SOP) in the state of Tennessee after the enactment of an executive order to permit full practice authority during a specified period. The order was enacted as a response to the COVID-19 pandemic.

Background

APRN SOP prior to pandemic:

- Historically, barriers to APRN practice restrict aspects of patient care and patient access to care, even in states with Full Practice Authority (FPA).
- The COVID-19 pandemic created a need for more health care providers

APRN SOP during pandemic:

- On March 12, 2020, Tennessee enacted Executive Order 15.
 APRNs' did not have to: have medical charts reviewed or have site visits" by a collaborating physician (TN Dept of Health, 2020).
- Order 15, was extended until May 18, 2020. (State of Tennessee, 2020).

Methods

- Tennessee specific data isolated from the nationwide 20item descriptive REDCap survey for analysis
- Demographic information analyzed and counted Inclusion Criteria:
- Licensed and practicing APRNs
- APRN perception of pandemic effects on APRN practice
- APRN knowledge of TN executive orders and its impact on APRN practice
- •Significant change to APRN inpatient vs outpatient practice. Exclusion Criteria:
- Survey items related to patients' symptoms

Results and Limitations

Results

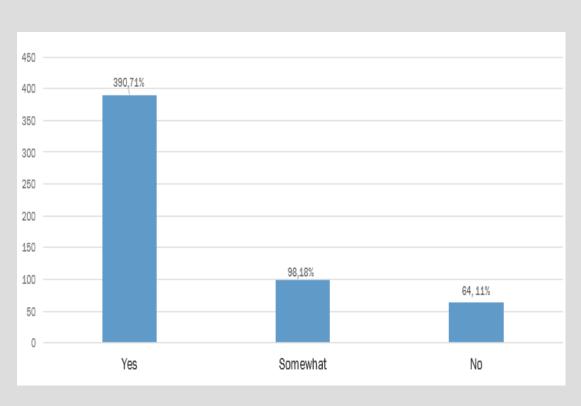
- Executive orders did not change APRN perception of SOP
- •71% of APRN's knew of TN's executive orders
- •22% stopped collaborative physician (CP) visits during pandemic
- •22% stopped medical chart review during pandemic
- •9% felt executive orders changed their APRN practice
- •Facility policy was the predominant reason cited for not stopping CP visits and not stopping chart reviews

Strengths

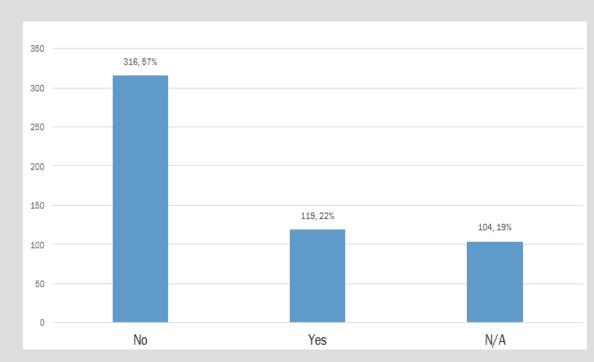
- Large sample size
- Qualitative and quantitative responses

<u>Limitations</u>

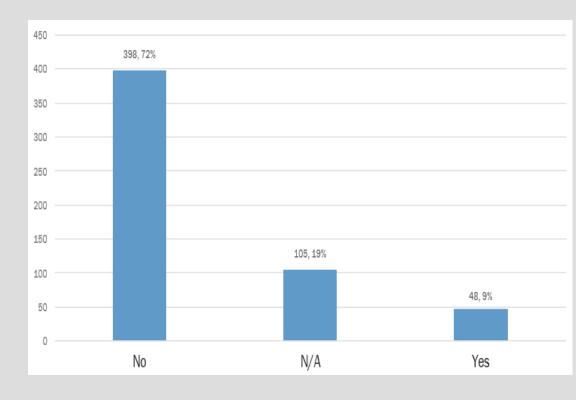
- Subjective responses of APRN's
- Executive orders were in place for limited amount of time



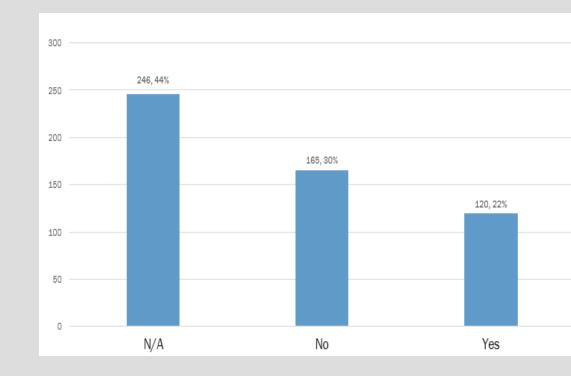
Figure_1.a_APRN knowledge of executive order (n=552)



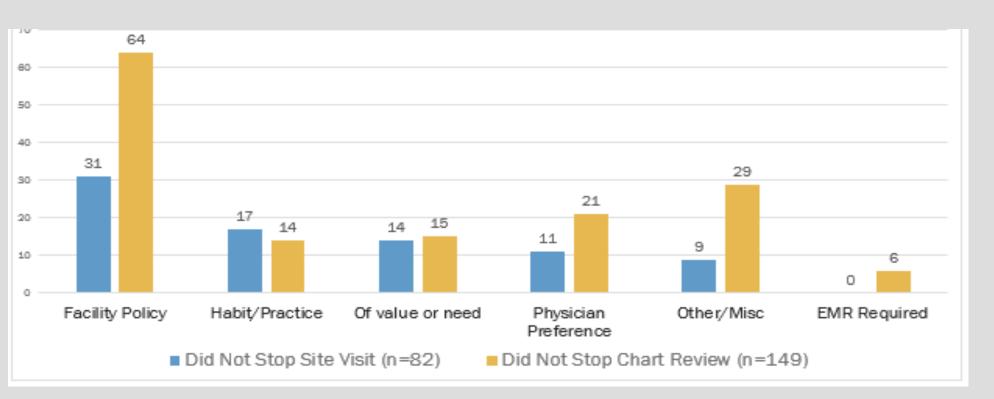
Figure_2.b_Stopped chart review (N=553)



Figure_2.a_Did executive order change APRN practice?



Figure_2.c_Stopped CP visits (N=553)



Figure_3.a_Reasons for Not following Executive Orders



Figure_3.b_Knowledge of Executive Orders vs Effect of Executive Orders

Conclusions

- Highlight the need for further study
- Explore qualitative reasons for not following executive order
- APRN perception of the reality of SOP (and MD/CP)
- Deeper look into APRN's and CP relationship
- Explore how systems and non-legal constructs affect SOP
- APRN's and untapped potential & "learned helplessness"

References

- 1. QR code generated by atomurl.net
- 2. References and poster board images found using QR code & https://tinyurl.com/5xv7rf84

