

## Georgia Public Health Expanded-Role Nurses

### History

In 1965, all 159 counties in Georgia had a County Board of Health and at least one public health nurse in every county in the state. In June of 1965, the Public Health's Family Planning Program made oral contraceptives available to county health departments. The Family Planning Program expanded the role of Georgia Public Health Nurses (Registered Professional Nurses) to include the provision of Family Planning services to underserved populations. In 1968, Public Health Nurses began providing expanded-role nursing services for children birth to age 21 in response to newly implemented Medicaid services such as those included in the Early Periodic Screening, Diagnosis and Treatment (EPSDT) Program (Source; The History of Public Health Nursing in Georgia, 1898-2002, 2006). Initially, Georgia Expanded-Role RNs practiced under standing orders until 1989, when the Nurse Protocol legislation (O.C.G.A. § 43-34-23) was enacted.

### Definition

Expanded-Role Nurses are Registered Professional Nurses in Georgia Public Health who have completed specialized training and meet all statutory, regulatory and training requirements to practice under a nurse protocol agreement, as delegated by a physician licensed by the Georgia Composite Medical Board.

### Statutory Authority

Registered Professional Nurses (RNs) and Advanced Practice Registered Nurses (APRNs) who are agents or employees of a county board of health or the Georgia Department of Public Health are among those authorized to practice under nurse protocol (O.C.G.A. § 43-34-23). Under this statutory authority, a physician may delegate the performance of certain medical acts to RNs and APRNs who are agents or employees of a county board of health or the Department of Public Health. These medical acts, which are not performed by most other RNs, may include any of the following:

- Ordering, administering and dispensing dangerous drugs
- Ordering medical treatments
- Ordering diagnostic studies
- Performing cervical cancer screening
- Identifying infections through microscopic exams
- Case management of HIV care

The delegated medical acts must be performed by the RN or APRN in accordance with a current nurse protocol, which has been signed by the RN or APRN and the delegating physician, and in accordance with a drug dispensing procedure. In addition, the RN or APRN operating under nurse protocol must comply with all rules and regulations established by the Georgia Board of Nursing and the Georgia Board of Pharmacy. Prior to practicing under nurse protocol, there must be documentation that the RN or APRN has been adequately trained and prepared to perform the delegated medical acts. Public health has a statewide and standardized system of Quality Assurance/Quality Improvement that delineates the specific

training required to practice under nurse protocol by program area (e.g., Women's Health, Child Health) and provides a system of oversight for RN and APRN practice under nurse protocol.

### **Oversight of Expanded-Role Nurses Practicing Under Nurse Protocol**

The Department of Public Health coordinates a statewide, standardized system of Quality Assurance/Quality Improvement that is used by public health at the local level to assure that Expanded-Role Nurse practice is consistent with the Georgia nurse practice act, all relevant rules and regulations, standards of care and best practices. Guidance documents that are used as part of the statewide system are posted at <https://dph.georgia.gov/office-nursing>. Components of the system of oversight include the following:

1. Standard Nurse Protocols
2. Nurse protocol agreements reviewed, revised or updated annually
3. Peer Review conducted at least annually
4. Direct observation of clinical skills conducted at least annually
5. Record reviews by delegating physician conducted quarterly
6. Access to consultation by delegating physician

### **Standard Nurse Protocols**

The Office of Nursing works with each of the state office programs to coordinate the process of reviewing and revising the standard nurse protocols for over 75 standard nurse protocols, which are used by the Expanded-Role Nurses and Advanced Practice Registered Nurses (APRNs) in the county health departments.

The standard nurse protocols are posted on the web at <http://dph.georgia.gov/nurse-protocols>. A few of the groupings of standard nurse protocols with some examples include the following:

- Tuberculosis (e.g., Uncomplicated Pulmonary Tuberculosis)
- Sexually Transmitted Infections (e.g., Chlamydia, Gonorrhea, Syphilis)
- Immunization (e.g., Childhood and Adult Immunization Program)
- Emergency Guidelines, Policies, Procedures and Protocols (e.g., Emergency Checklist for Public Health Clinic Sites, Evaluation Tool for Practice Drill, Guidelines for Suspected Opioid Overdose)
- Child Health (e.g., Impetigo, Head Lice, Scabies, Pin Worms)
- Women's Health (e.g., Oral Contraceptives)
- HIV/AIDS-Related (e.g., Continuation of Antiretroviral Therapy, Diarrhea, Herpes Zoster, Oral Candidiasis, Seborrheic Dermatitis)
- Other Infectious Diseases (e.g., Preventive Treatment of Contacts to Pertussis, Preventive Treatment to Contacts of Haemophilus Influenzae Meningitis)

### **Requirements for Expanded-Role Nurses**

Expanded-Role Nurses in Georgia must meet the following requirements:

1. Licensed by the Georgia Board of Nursing as a Registered Professional Nurse.
2. Practice in accordance with the Georgia Nurse Practice Act (O.C.G.A. § 43-26).
3. Compliance with the Nurse Protocol Statute, which is an amendment to the Georgia Medical Practice Act, O.C.G.A. § 43-34-23.
4. Georgia Board of Nursing rules for practice under Nurse Protocol (Chapter 410-11).
5. Georgia Board of Pharmacy rules for dispensing drugs under Nurse Protocol (Chapter 480-30).

6. Successful completion of all of the training requirements, as delineated in the *Quality Assurance/Quality Improvement Manual for Public Health Nurses*, Georgia Department of Public Health, **2017** which may be viewed at <https://dph.georgia.gov/sites/dph.georgia.gov/files/QA.QI%20for%20Public%20Health%20Nursing%20Practice%20Manual%20October%202017%20revised%20to%20post%202.25.19%20FINAL.pdf>
7. For Family Planning, training requirements include courses in Contraceptive Technology, Microscopy and Sexually Transmitted Infections.
8. Successful completion of a baccalaureate-level health assessment course.
9. Successful completion of a clinical preceptorship and performance of the following competencies:
  - a. Evidence-based knowledge of and ability to perform health assessments for designated or assigned ages, sexes, and populations.
  - b. Ability to communicate effectively via written, oral, electronic, and other means with various, diverse individuals and populations.
  - c. Ability to elicit data for a health history that includes physical, social, cultural, nutritional, mental, developmental and environmental information.
  - d. Ability to differentiate normal/abnormal findings.
  - e. Ability to interpret and apply findings to develop an appropriate plan of care to improve health.
10. Successful completion of all annual training requirements.

### Advantages

- In **FY2019**, there were **1036** Public Health Nurses (LPNs, RNs and APRNs) located among the 159 county health departments in Georgia.
- They provide cost-effective quality services to the populations served.
- They provide screening and treatment to prevent spread of HIV-AIDS, Sexually Transmitted Infections and Tuberculosis and this allows Public Health to coordinate the screening and treatment of these diseases with Public Health mandates to provide contact tracing and preventive treatment, when appropriate. The bulk of the treatment and control of HIV-AIDS, Sexually Transmitted Infections and Tuberculosis is provided by Public Health and without Expanded-Role RNs to perform the screening and treatment, the rates of these diseases would be far greater than they currently are and the increased burden of disease would put a tremendous strain on health care providers in the private sector or the persons infected would go untreated and would be at risk of infecting a greater proportion of the population.
- They provide ongoing disease management for HIV-AIDS and Tuberculosis.
- They provide breast and cervical cancer screening to underserved populations, which involves significant amounts of clinical services, case management, referral of abnormal clinical findings, tracking, follow up and transitioning for those diagnosed with breast cancer for treatment.
- They help prevent unnecessary visits to the local emergency rooms.

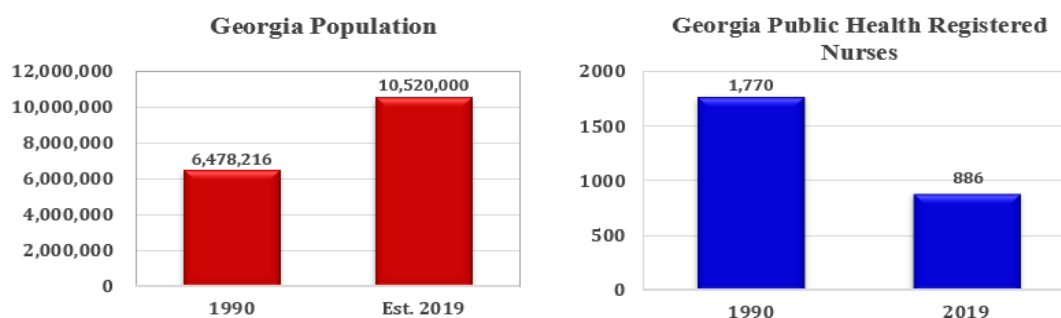
- They are skilled in providing health assessments and treatment of minor child health problems, which may also contribute to unnecessary school absenteeism, especially in the rural areas.
- They identify abnormal findings that need referral to a higher-level provider.
- They represent a potential solution for providing access to health care.
- They are in position to assist with responses to bioterrorism attacks, such as anthrax, and they provide most of the nursing services for the American Red Cross shelters during an emergency response to hurricanes, tornados and other disasters.
- Allows Public Health to make maximum use of the authority of its very small number of physicians.
- Public Health seeks to expand in-network provider enrollment with private health insurance companies to maximize revenue for nurse provided services. Expanded-Role Nurses and APRNs are critical to providing the type of covered services that will bring in revenue for county health departments.

### Opportunity for Reducing Health Care Costs

The Expanded-Role Nurse model of practice under a nurse protocol agreement, as delegated by a Georgia-licensed physician, has effectively and economically served the public health needs of Georgia for a quarter of a century. With the growing population and increasing complexity of population needs, the Expanded-Role Nurse model could be used, if staffing increases, to serve a greater proportion of the population, especially in areas where there is no or limited access to health care. However, the model is currently threatened by the steady decline in the number of Expanded-Role Nurses due to funding reductions and non-competitive salaries. Based on a standard of

1 RN:5000 population, Georgia Public Health needs an additional 1218 RNs to meet the national minimum staffing standard (*Source: Association of Public Health Nurses, formerly the Association of State and Territorial Directors of Nursing, October 2008*).

### Georgia's Population Grows While Public Health Nursing Workforce Falls



**Georgia needs to increase the PHN workforce by 1218 RNs to meet national standard of 1 RN per 5,000 population.**

*(Association of Public Health Nurses, formerly the Association of State and Territorial Directors of Nursing, October 2008)*

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