



# College of Health Professions

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December 4, 2008

Ann Steffanic  
Board Administrator  
Pennsylvania State Board of Nursing  
P.O. Box 2649  
Harrisburg, Pennsylvania 17105-2649

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2008 DEC 10 PM 1:44  
INDEPENDENT REGULATORY  
REVIEW COMMISSION

Dear Ms. Steffanic:

The purpose of this letter is to support the following proposed changes to Pennsylvania's nursing practice act: (1) removal of the 4:1 CRNP to physician ratio; (2) allow 30-day prescriptions for Schedule II controlled substances; and (3) allow 90-day prescriptions for Schedule III and IV drugs.

As the David R. Devereaux Chair of Nursing at Temple University, and as a practicing adult certified registered nurse practitioner in Pennsylvania, I believe these proposed changes to be reasonable, needed, and safe for citizens. Nurse practitioners extend primary health care delivery across diverse settings, including community health centers, ambulatory practices, health departments, long-term care environments, and others. They are valuable, competent, and accessible providers capable of alleviating much of the disproportionate burden currently falling on hospital emergency departments, particularly in urban settings among uninsured and under-insured populations.

To enable nurse practitioners to become a wide safety net for primary care delivery within community settings, the regulations must remove barriers to their practice. Most importantly, the barrier imposed by limiting the number of nurse practitioners who can collaborate with any one physician must be eliminated. As efficient primary care providers working as members of physician-nurse teams, nurse practitioners greatly extend care delivery within the neighborhoods and communities of urban, rural, and suburban Pennsylvania. The math is simple: more care can be provided if the artificial barrier of a ratio of nurse practitioners working with one physician is removed. The issue at hand is care delivery, not maintenance of unaccountable guild policies.

As a practitioner, I fully support the extensions on prescriptions for controlled dangerous substances. Patients cared for by nurse practitioners require such consideration, as do all patients, irrespective of the discipline of their provider. The nursing faculty at Temple University provides primary care at four nurse-managed health centers in Philadelphia. These nurse practitioners, and their collaborating physicians, are severely and capriciously restricted in their patient capacity by the current artificial, self-serving regulations.

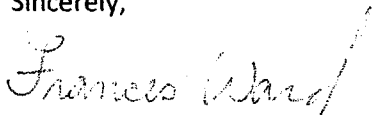
If nurse practitioners are to be a part of the solution to the pervasive inequity of America's current health care system, then they must be supported by state regulations that take the training wheels off their practice. Such practitioners have already been tested and proven safe.

Ann Steffanic  
December 3, 2008  
page 2

If you have any questions on my comments, please give me a call at 215-707-8327.

Thank you.

Sincerely,

A handwritten signature in cursive script that reads "Frances Ward". The signature is written in dark ink and is positioned above the printed name and title.

Frances Ward, PhD, RN, CRNP  
Professor and Adult Nurse Practitioner  
David R. Devereaux Chair of Nursing