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#240
Correspondence
(Nurse Practitioner)

Nurse Practice Revision Backed

Editor: On May 18 you ran an article on the proposed change in the Nurse Practice Act to cover nurse practitioners. The current proposal (A-11922) is the result of statewide hearings on the act, and a collegium consisting of representatives of interested groups — New York State Medical Society, State Nurses Association, Coalition of Organized Nurse Practitioner Associations, pharmacists, etc.

Assemblymen Siegel and Tallon worked very diligently to write a bill which would protect the consumer, ensure proper preparation for the role, and yet not unduly restrict nurse practitioners. This proposed bill does exactly that.

It is ironic that our opposition comes from a group which should be supporting and representing its members — the State Nurses Association. Leadership of this organization is misinforming both its members and the public by stating that the current Nurse Practice Act covers nurse practitioners, when in fact the State Education Department has the legal opinion that it does not. Counsel Stone's opinion on this topic is very important since he is counsel for the very agency which approves programs that prepare nurse practitioners.

The Education Department and State Board for Nursing are regulatory agencies for nursing; and since the state nurse practitioners are not covered by the current Nurse Practice Act, it is imperative that this situation be remedied.

Many of your readers have received care from nurse practitioners. I urge them to contact their legislators and express their support. Without these well-prepared health care practitioners, many people would have no accessibility to health care — those in rural settings and inner city areas which have few physicians, elderly homebound patients, etc.

The utilization of nurse practitioners in these areas enables physicians to concentrate on the more complex cases for which they were prepared.

Joan Kostusiak
President

Kenmore

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Correspondence
(Nurse Practitioner Controversy)

127 Shirley Avenue
Buffalo, New York 14215
June 23, 1982

Editor
Courier Express
795 Main Street
Buffalo, NY 14240

Dear Editor:

I would like to respond to the June 7th article in your paper regarding the current nurse practitioner controversy. The writer of the article stated that Assemblyman Siegel had written a bill which did not unduly restrict nurse practitioners. The article further stated that the opposition to the bill comes from a group which should be supporting nurse practitioners, the New York State Nurses Association. The Association was charged with misinforming the public and its members by adhering to the position that the current Nurse Practice Act covers nurse practitioners.

First, and foremost, the New York State Nurses Association which represents 28,000 professional nurses in the State has a legal responsibility as a corporate entity, to promote the educational and professional advancement of all nurses. The association is mindful of, and very concerned about the confusion and doubt which has been casted over the right of nurses including nurse practitioners to provide primary health care services. Those primary health care services have always been an essential component of nursing practice. The writer is reminded of the fact that the current definition of nursing practice does state that a nurse may diagnose and treat human responses to actual or potential health problems.

The New York State Nurses Association opposes the Siegel-Tallon Bill because it places the nurse practitioner under physician control through written agreements and it singles out in law one nursing specialty as distinct from all other nurses. This bill also introduces an additional level of supervisory control through a prescription advisory committee.

However, the association does support the Governor's Bill, A 7721/S6361 as an appropriate resolution of the conflict. The Governor's bill reaffirms the right of professional nurses to provide primary health care services, and thus, would facilitate public access to quality health services.

The American Nurses Association, several state nurses association, the Council of Deans of Nursing Senior Colleges, and Universities in New York State, and individual nurse practitioners, all support the association position. The association deeply regrets the chism within its membership regarding the issue, however, it must continue the struggle to professionalize the occupation of nursing by responding to any inappropriate and short sighted legislation.

Juanita K. Hunter,

Member Board of Directors
New York State Nurses Association

Buffalo
(716) 836-8782

JH/sk



THE ASSEMBLY
STATE OF NEW YORK
ALBANY

WILLIAM B. HOYT
Assemblyman 144th District

Please reply to:

- Room 741 Legislative Office Building
Albany, New York 12248
(518) 455-5991
- General Donovan State Office Building
125 Main Street
Buffalo, New York 14203
(716) 847-3100

CHAIRMAN
Assembly Office of
State/Federal Relations

CHAIRMAN
Sub-Committee
Water Resources and Management

COMMITTEES
Child Care
Corporations, Authorities & Commissions
Environmental Conservation
Housing
Ways and Means

August 9, 1982

Juanita K. Hunter, RN
127 Shirley Avenue
Buffalo, New York 14215

Dear Ms. Hunter:

During the legislative session, you wrote to me regarding Assembly bill 11922. I am writing to let you know of the status of the legislation at the end of the 1982 Regular Session.

As you are aware, the bill would provide additional legal authority for nurses - who have completed approved special training and who have executed a written agreement with a physician - to diagnose, treat and, with restriction, prescribe. In effect, the bill would serve to clarify the legal status of the nurse practitioner.

Proponents of the legislation, including the Coalition of Organized Nurse Practitioners of New York State, contend that this legislation would facilitate the work of nurse practitioners and benefit health care consumers.

The experiences in thirty-seven other states where such legislation has been enacted demonstrate its value to the public. Nurse practitioners are able to free doctors to concentrate on the most difficult and serious cases. Thus, nurses can provide the public with more basic medical care at a reduced cost.

During the recently adjourned session, a great deal of controversy surrounded this issue. The two major groups in direct opposition to the bill were the Medical Society of the State of New York and the New York State Nurses Association (NYSNA). Neither group was willing to compromise its view. On the one hand NYSNA found the legislation too restrictive; the Medical Society viewed it as not restrictive enough. These two forces, both effective in their lobbying efforts, succeeded in delaying action on the bill this year.

Assemblyman Mark Siegel, the sponsor of A.11922, has informed me that he intends to continue to negotiate with all parties in hopes of achieving a more widespread consensus. If re-elected, he intends to reintroduce the bill early in the 1982-83 Legislative Session.

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Correspondence
(Nurse Practitioner)

Juanita K. Hunter, RN
August 9, 1982

I am a co-sponsor of the bill and am strongly supportive of the measure. I view the lack of Assembly action on the bill this session as a temporary delay, not a defeat, for progressive legislation for nurse practitioners.

I appreciate receiving information on both sides of an issue. Thank you for sharing your views. If I may be of assistance to you in the future, please contact my office.

Sincerely,

Bill Hoyt
WILLIAM B. HOYT
MEMBER OF ASSEMBLY

WBH/lj

*It's too bad we didn't make it
this year - I'm hopeful for '83*



THE ASSEMBLY
STATE OF NEW YORK
ALBANY

WILLIAM B. HOYT
Assemblyman 144th District

PLEASE REPLY TO

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Child Abuse
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COMMITTEES
Children and Families
Corporations, Authorities & Commissions
Environmental Conservation
Ways and Means

August 18, 1983

Ms. Juanita Hunter
127 Shirley Avenue
Buffalo, New York 14215

Dear Juanita:

Thank you for your letter regarding Assembly Bill 7063 which would allow trained nurses to diagnose illnesses and handicaps and to prescribe appropriate medication and/or treatment.

I spent a great deal of time considering the ramifications of this proposal. Despite the efforts of its supporters, A. 7063 was sent to the Assembly's Ways and Means Committee where it remained for the entire session.

I added my support to this bill because it further clarifies the capabilities of the nurse who has received specialized training. Many charge that this proposal would restrict those nurses who have not received such instructions. Although this is true, the intent of this legislation is the provision of further definition for the nursing profession. Evidence suggests that we are wasting a valuable resource. Those trained in diagnosis and prescription should be allowed to function in this capacity.

As far as continued collaboration between doctors and nurses is concerned, I do not believe that this legislation prevents true professionals from seeking the advice of their peers and superiors in order to provide the best service possible.

I appreciate your interest in this controversial issue and welcome your views. If I can be of any assistance in other matters, please do not hesitate to contact me.

Sincerely,

WILLIAM B. HOYT
MEMBER OF ASSEMBLY

WBH:lj

#240
Correspondence
(Nurse Practitioners)

October 8, 1982

Bonnie Bullough, RNC, PhD, CNEP
Dean, School of Nursing
State University of New York at Buffalo
1010 Stockton Kimball Tower
Buffalo, NY 14214

Dear Bonnie:

I have received and given very careful thought to your September 21, 1982 letter. As you know, I have previously been aware that you do not share NYSNA's views and positions with respect to legislation that would affirm registered professional nurses' authority for primary health care services. As you must also know, the Association's position reflects and is consistent with the views and positions of individuals whose involvement and interest in this matter are similar to your own.

In the event you have not already received it, I enclose a copy of my September 3, 1982, communication to members of the NYSNA Primary Care Practitioner Functional Unit summarizing the Association's views and objectives on this issue and urging their participation in Convention deliberations dealing with the Association's legislative program. Obviously, I hope it will be possible for you to be present and participate in those deliberations. The right to participate in shaping the Association's legislative program is, of course, one very tangible benefit of renewing your Association membership.

As a general rule, I am disinclined to respond to groundless inflammatory comments, but in this instance I must categorically deny your assertions that: (1) Association representatives tell "Assemblymen and State Senators how much they hate those people with four months training who think they are something special" and (2) some NYSNA "board members would not be unhappy to see nurse practitioners vote on out of the state association." Both statements are false. I dignify them with response only because I would not wish you to construe my non-response as implicit validation of or agreement with them.

Finally, with respect to specialty organizations in nursing, your comments suggest you view their existence as evidence of divisiveness, fragmentation and unhealthy competition within nursing. I believe such organizations have arisen

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Correspondence
(Nurse Practitioner)

Donnie Bullough, RNC, PhD, CNP
October 8, 1982
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to meet specific legitimate needs of nurses in particular specialty areas. NYSNA has enjoyed productive collaborative relationships with these organizations and countless individual nurses have participated actively in both NYSNA and such organizations.

Again, I hope you will find it possible to attend our Convention.

Sincerely yours,

Susan J. Fraley, MS, RN
President

SJF:wab

cc: Cecilia F. Mulvey
Eunice Cole
Marcia Orsolita
Alice Chico
Janet Stallmayer

bcc: Juanita K. Hunter
N. Margaret Wineman
Janet P. Mance

State University of New York at Buffalo

OFFICE OF THE DEAN
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SEP 24 1982



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Associated Hospitals
Millard Fillmore
Roswell Park

September 21, 1982

Ms. Susan Fraley, President
New York State Nurses Association
2113 Western Avenue
Guilderland, New York 12084

Dear Susan:

Writing this check was very painful to me. I feel it is an irrational act for me to spend \$180 to help finance the coming year's fight against nurse practitioners. The nurse practitioner movement is very precious to me. I helped develop the specialty. I set up some of the early programs. I developed the curriculums. I do research in primary care and write textbooks in the field. I practice four hours a week in an H.M.O. I am Dean of a school that has three major federal grants to prepare nurse practitioners and in spite of all the rhetoric, the current nurse practice act does not cover the practice of our graduates.

According to the newsletter that just arrived NYSNA's major legislative accomplishment last year was to stop the nurse practitioner legislation. I would assume that will be its major accomplishment next year also since most of NYSNA's political activists will have little time to do any positive lobbying when they have to spend all of their time in Albany telling Assemblymen and State Senators how much they hate these people with "four months training who think they are something special."

So I ask myself "Why should I write this check?" I have the feeling that writing this check is about as reasonable as shooting myself in the foot. Yet I do not want nursing to be further fragmented. Moreover, if I do not pay dues to NYSNA I cannot be a member of the American Nurses' Association. I would lose my membership in the American Academy of Nursing and would not be eligible for the Board position I hold on the Council of Primary Care Nurse Practitioners. The check is enclosed.

However, I am not alone in inflicting damage on myself. NYSNA is also trying to harm itself in relationship to its nurse practitioner constituents. The actions of NYSNA in fighting the much needed nurse practitioner legislation is forcing the nurse practitioners to practice at a much reduced scope of function and to organize outside of NYSNA to try to achieve the law changes that are needed. I realize that some of your board members would not be unhappy to see nurse practitioners move on out of the state association. They would quietly watch them take the path taken by critical care nurses, operating room nurses, nurse midwives, and nurse anesthetists who have organized separately. This is, however, a

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Correspondence
(Nurse Practitioner)

grievous error for the profession. Forcing this group out further fragments nursing in the political arena. Thus I am not alone; NYSNA is also shooting at its own foot.

Sincerely,

Bonnie Bullough

Bonnie Bullough, R.N.C., Ph.D., CPNP
Dean

127 Shirley Avenue
Buffalo, New York 14215
June 15, 1982

BB:mjb

c.c. President Elect Cheryl Mulvaney, NYSNA
President Eunice Cole, ANA
President Marcia Orsolits, District I
Chairman Alice Chico, Primary Care
Interest Group, NYSNA
President Janet Stallmeyer, C.P.H.C.N.P.

Brian McBride, PhD, Executive Director
Health Systems Agency of Western New York
Suite 405/Ellicott Square Building
Buffalo, New York 14203

Dear Dr. McBride:

I have reviewed the AIP and am disturbed by the comment regarding the nurse practitioner and the subsequent short range objective AMB 1-1-1. The introductory remarks state that physician productivity can be increased by delegating certain tasks to a nurse practitioner. This statement ignores the fact that professional nurses have the right to define and regulate their practice. Primary health care services are now provided by many nurses and those services which require additional preparation and education by the nurse are usually determined collaboratively by physician and nurse. It is not simply a matter of physician delegation.

There is no documentation of data in the AIP for the statement that the expanded use of nurse practitioners is hindered by ambiguity regarding their legal scope and practice. Your statement that ambiguity exists, perhaps was based upon an insufficient data base about the current situation. At the very least, the words were ill chosen.

The current legal definition of nursing practice states that a nurse may diagnose and treat human responses to actual or potential health problems. The position of the New York State Nurses Association, which represents 28,000 professional nurses, is that the current nurse practice act clearly empowers the nurse practitioner to provide ambulatory services. Confusion and doubt regarding nurse practitioners have been created by the narrow interpretation of the current law by the State Education Department.

You have by now received additional materials from Dr. Cathryne Welch, Executive Director of the New York State Nurses Association, which clearly enunciates the association's position. Based upon that documentation, I believe that the short range objective, AMB 1-1-1

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Correspondence
(Nurse Practice)

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should be removed. HSA has involved itself in a professional and legal issue which is already under consideration by all appropriate bodies. I further believe that this objective does not reflect the position of the professional nursing association and was determined without that input. I intend to make a motion to that effect at the June 17 Board of Directors meeting.

Sincerely,

Juanita K. Hunter

Juanita K. Hunter

cc:
J. Wysong
C. Stull
C. Welch

May 28, 1982

Brian McBride, Ph.D.
Executive Director
Health Systems Agency of Western
New York, Inc.
Suite 405, Elliott Square Building
Buffalo, NY 14203

Dear Dr. McBride:

A copy of your Agency's 4/27/82 memorandum on the Agency's Draft Annual Implementation Plan and Amendment of the Health Systems Plan has been brought to the Association's attention. We note with considerable interest and concern Short Range Objective MR-1-1-1 regarding legislation pertaining to delivery of primary health care services by nursing practitioners. We write to inform you of the Association's position on this matter and to extend our willingness to communicate further with you should you deem such communication valuable in consideration of your plan.

The Association believes the current Nurse Practice Act fully authorizes provision of primary health care services by nursing practitioners. Senator Joseph Pisani, legislative sponsor of the current legal definition of nursing, and Governor Nelson A. Rockefeller, who approved current law, shared the Association's interpretation. Because of confusion generated by a restrictive interpretation of the law the Association cooperated in drafting the Governor's Program Bill SA.7721/S.6361. That bill is now in the Assembly Higher Education Committee and is strongly supported by the Association.

Multiple inappropriate legislative proposals on this matter have been submitted in recent years and have been vigorously opposed by the Association. One current proposal, A.11922, is now under consideration by the Association. The Association, countless members of the nursing community, the American Nurses' Association and other state nurse associations, other health practitioners and other professional associations vigorously oppose this bill because it would restrict public access to primary health care services and the practice of all nurses.

I enclose for your review and information copies of the above referenced legislative proposals, the Association's comments on these proposals, Association statements on this issue and comments of other groups issued in response.

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Correspondence
(Nurse Practitioners)

Brian McBride, Ph.D.
May 28, 1982
Page Two

to these proposals. I hope these materials will assist you in your analysis of current and proposed legislation. The Association appreciates the opportunity to bring its views to your attention and stands ready to provide any additional information you may desire.

Sincerely yours,

Cathryn A. Welch
Executive Director

C
O
P
Y

CAW:wab
Enclosures

cc: Jere Wyson, Ph.D., President, Health Systems Agency of Western New York
Sister Mary Balthasar
Juanita Hunter