

Date of Hearing: April 16, 2013

ASSEMBLY COMMITTEE ON VETERANS AFFAIRS
Al Muratsuchi, Chair
AB 705 (Blumenfield) – As Amended: April 3, 2013

SUBJECT: Combat to Care Act.

SUMMARY: Requires the Board of Registered Nursing (BRN) to promulgate regulations that identify the military education, training, and experience that is equivalent or transferable to coursework required for licensure as a registered nurse (RN) and, upon receipt of an applicant's record of education, training, and experience completed in the Armed Forces, provide the applicant with a list of coursework, if any, that the applicant must complete for license eligibility. Specifically, this bill:

- 1) Requires BRN, by January 1, 2015, to promulgate regulations identifying Armed Forces education, training, and experience that is equivalent or transferable to coursework required for RN licensure.
- 2) Requires BRN to provide a veteran applicant qualified as a "medical service technician – independent duty" or the equivalent with a list of coursework, if any, that the applicant must complete to be eligible for RN licensure.
- 3) Makes Legislative findings and declarations.
- 4) Makes other technical and clarifying amendments.

EXISTING LAW:

- 1) Establishes BRN to license and regulate the practice of nursing. (Business and Professions Code (BPC) Section 2701)
- 2) Requires all boards regulated under the BPC to provide for methods of evaluating education, training, and experience obtained in the armed services, if applicable to the requirements of the business, occupation, or profession regulated. (BPC 35)
- 3) Requires the rules and regulations of the Department of Consumer Affairs healing arts boards to provide for methods of evaluating education, training, and experience obtained in military service if such training is applicable to the requirements of the particular profession or vocation regulated by the board. (BPC 710)
- 4) Requires, by July 1, 2015, the Chancellor of the California Community Colleges, using common course descriptors and pertinent standards of the American Council on Education, to determine for which courses credit should be awarded for prior military experience. (Education Code Section 66025.7)
- 5) Requires BRN to evaluate for RN licensure the training record submitted by any person who has served on active duty in the medical corps of any of the Armed Forces and completed the course of instruction required to qualify him or her for rating as a medical service technician-

-independent duty, or other equivalent rating in his particular branch, and whose service in the armed forces has been under honorable conditions. (BPC 2736.5)

- 6) Permits a person who has served on active duty in the medical corps of any of the armed forces, in which no less than an aggregate of 12 months was spent in rendering bedside patient care, and who has completed the basic course of instruction in nursing required by his or her particular branch of the armed forces, and whose service in the armed forces has been under honorable conditions to sit for an licensed vocational nurse (LVN) license exam. (BPC 2873.5)

FISCAL EFFECT: Unknown at this time.

COMMENTS:

According to the author:

In California, the Board of Vocational Nursing and Psychiatric Technicians (BVNPT) recognize military training and experience so that an applicant can submit documentation of that training and experience for credit towards becoming a Licensed Vocational Nurse (LVN). BVNPT will determine whether the applicant is deficient in coursework, which the applicant must satisfy before being issued a license. However, if this same applicant were to apply with the Board of Registered Nursing to become an RN, none of the applicant's training and experience would apply. This applicant would be required to re-take courses in which they have already gained expertise. AB 705 would correct this inconsistency for applicants who wish to be nurses in California, and respect the training and experience of our veterans.

According to the Committee on Business and Professions:

Several laws already in effect require BRN to develop regulations that establish criteria for evaluating military experience and training towards RN licensure. The statute that this bill amends explicitly directs BRN to evaluate the records of military personnel who are designated as a "medical service technician-independent duty," or the equivalent thereof, for RN licensure. A "medical service technician-independent duty" translates most directly to a LVN or physician assistant (PA) civilian license, although there is coursework that is applicable toward licensure as an RN...

Until 2000, there were parallel training requirements in the military and civilian worlds to qualify for the RN license examination. BRN adopted regulations in 1976 and 1985 that specifically identified military titles and supplemental experience that would be exhaustive of BRN requirements. In 2000, BRN determined that the military coursework had changed and was no longer directly transferrable. BRN then updated the regulations for evaluating military training to be broadly descriptive, which made identifying any specific relevant military coursework difficult. BRN has not evaluated military coursework since, although the board reports they were told by military representatives in 2010 that the military does not have a directly comparable RN training program.

...BRN directs applicants to the Board of Vocational Nurses and Psychiatric Technicians (BVNPT). BVNPT has identified a direct pathway to licensure as a vocational nurse from

military service. If a military applicant is lacking coursework, BVNPT identifies which courses they need to be eligible to sit for the licensing exam. BRN noted that after gaining LVN licensure – credited in part to their military training – the military applicant could take a LVN to RN "bridge" program, which supplements the applicant's LVN training to be eligible for the RN exam.

...BRN does, however, provide assistance to non-military applicants. Upon receipt of an inadequate application from an out-of-state or international applicant for licensure, BRN reports that it notifies the applicants of his or her transcript deficiencies and recommends supplemental coursework. ...

Existing law directs BRN to consider military applicants' experience and training. It is unclear why *none* of the military coursework or experience is applicable to RN licensure or RN programs at schools. At a minimum, courses in anatomy, physiology, microbiology, English composition, nutrition, and psychology, for example, appear from a quick review online of several RN programs to be the kind of coursework that is foundational for all/almost all nursing program levels. The foundational nature of these courses seems to be recognized in that military applicants are directed to an LVN program which credits their military training and experience; the LVN program can then serve as a bridge to becoming an RN. So military experience and training is credited toward becoming an LVN, and becoming an LVN is credited toward becoming an RN.

The National Council of State Boards of Nursing (NCSBN) published, "*A Comparison of Selected Military Health Care Occupation Curricula with a Standard Licensed Practical/Vocational Nurse Curriculum.*" This report is of course in the context of LPN/LVN programs. That report concluded in pertinent part:

For veterans with training and experience as health care specialists (medics), corpsmen and airmen, civilian BON-approved LPN/VN programs should develop bridge programs that are based on individual assessments of each veteran and geared towards helping these individuals acquire the knowledge, skills and abilities needed to practice as an LPN/VN safely without repeating previously acquired content.

Each veteran will be leaving the military with varying levels of experience. Some have inserted chest tubes and performed other small surgical procedures, while others have little, if any, experience doing these procedures and instead had other types of responsibilities (nonhealth care related) during their military service. Therefore, it is recommended that the knowledge, skills and abilities of all veterans entering an LPN/VN program should be formally evaluated/ assessed prior to beginning a program. If proficiency is demonstrated, this should be accounted for in the LPN/VN program to assist in accelerating the education process.

This measure pertains to RN programs and licensure applicants, not LPN/LVN programs/applicants. However, the bill in essence implements these same kind of recommendations from the NCSBN at the RN level. It seeks to have schools and the BRN conduct a formal individualized assessment or at least consider what training and experience military applicants have.

Policy Questions for Members:

Can BRN use a parallel procedure to what it offers to out of state or international applicants when considering the applications of former servicemembers for RN licensure?

Related Legislation: AB 555 (Salas) directs the Legislature, via intent language, to enact legislation that would streamline the licensure process of various professions and vocations for veterans and members of the military separating from service. That bill is in the Assembly Business, Professions and Consumer Protection Committee.

AB 704 (Blumenfield) would require the Emergency Medical Services Authority to develop and adopt regulations to accept military education, training, and practical experience toward the qualifications and requirements for EMT-I certification, EMT-II certification, or EMT-P licensure, as specified. That bill is in the Assembly Business, Professions and Consumer Protection Committee.

AB 851 (Logue) would require the Dental Board of California (DBC) to accept education, training, and practical experience completed by an applicant in military service toward the qualifications and requirements to receive a license or certificate if that education, training, or experience is equivalent to the standards of the board. If DBC accredits or otherwise approves schools offering educational course credit for meeting licensing and certification qualifications and requirements, the bill would, not later than July 1, 2014, require those schools seeking accreditation or approval to have procedures in place to evaluate an applicant's military education, training, and practical experience toward the completion of an educational program that would qualify a person to apply for licensure or certification, as specified. That bill is in the Assembly Business, Professions and Consumer Protection Committee.

AB 859 (Gomez) would state the intent of the Legislature to enact legislation that would promote and pursue programmatic changes to nursing and paramedic licensure requirements for California's military medical personnel in order to recognize the talent, skills, and training of these military medical personnel. That bill is in the Assembly Rules Committee.

AB 1057 (Medina) would require each BPC board to inquire in every application for licensure if the applicant is serving in, or has previously served in, the military. That bill is in the Assembly Business, Professions and Consumer Protection Committee.

Previous Legislation: AB 1976 (Logue) of 2012 would have required healing arts boards within DCA, as well as professional licensure programs within the Department of Public Health (DPH), to accept military training towards licensure requirements, as applicable, and would have required boards that accredit schools to ensure schools have procedures in place to accept military training. That bill was held in the Assembly Appropriations Committee.

AB 1932 (Cook) of 2012 would have required DCA healing arts boards to issue a written report to the California Department of Veterans Affairs by Jan. 1, 2014 detailing the methods for evaluating the education, training, and experience obtained by applicants in military service and whether that education, training, and experience is applicable to the boards' requirements for licensure. That bill was held in the Senate Rules Committee.

AB 2659 (Blumenfield) Chapter 406, Statutes of 2012 permits the Department of Motor Vehicles (DMV) to waive the driving skills test required to obtain a commercial driver's license (CDL) for a person with a U.S. Armed Forces military driver's license in compliance with federal regulations.

SB 289 (Ed Hernandez) Chapter 352, Statutes of 2012, clarifies that DPH has the authority to approve certain clinical laboratory scientist training programs owned and operated by the United States military that are at least 52 weeks long.

REGISTERED SUPPORT / OPPOSITION:

Support

California Association of County Veterans Service Officers
Vietnam Veterans of America – California State Council

Opposition

American Nurses Association- California
California Nurses Association

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