



Board of Vocational Nursing and Psychiatric Technicians Legislative Analysis

BILL NUMBER:	Senate Bill 994
SUBJECT:	Vocational Nursing: Direction of Naturopathic Doctor
AMENDED DATE:	March 15, 2022
AUTHOR:	Senator Bill Jones
SPONSOR:	California Naturopathic Doctors Association

DESCRIPTION OF PROPOSED LEGISLATION:

This bill would authorize Licensed Vocational Nurses (LVNs) to work under the direction of Naturopathic Doctors (NDs).

STAFF POSITION/RECOMMENDATION:

NEUTRAL WITH CONCERNS

BACKGROUND:

California is one of 22 states that provide for licensure of naturopathic professionals. Naturopathic medicine is a system of primary health care that integrates the values and practices of traditional naturopathy with modern methods and modalities for the diagnosing, treating, and prevention of health conditions, injuries, and disease. Most Naturopathic Doctors (NDs) working in California provide family centered, primary care medicine through office-based private practice, and may often work in collaboration with physicians and surgeons, chiropractors and acupuncturists, some in integrative practices.

Generally, NDs are supported by Naturopathic Assistants (NAs), who may perform certain medical procedures and technical support services under the supervision of a licensed naturopathic doctor. NAs are unlicensed and solely trained by NDs, who must be physically present on-site while the NA performs services.

Naturopathic Assistants may perform the following procedures & services:

1. Administer medication by intradermal, subcutaneous, or intramuscular injections
2. Perform skin tests
3. Perform venipuncture or skin puncture to draw blood
4. Administer medications orally, sublingually, topically, vaginally, rectally, or by inhalation, as well as give medication to patients
5. Apply & remove bandages
6. Collect specimens for testing
7. Collect and record patient data including blood pressure and pulse
8. Perform simple lab and screening tests customarily performed in a medical office

Existing law, Business and Professions Code (BPC) section 2859, requires a Licensed Vocational Nurse (LVN) to serve under the direction and supervision of a licensed physician, surgeon, or a registered nurse. Under that direction, an LVN may administer medications via hypodermic injection, withdraw blood, start and superimpose intravenous fluids, and may perform skin tests. LVNs may not practice independently but they can perform specified procedures without the onsite physical presence of a supervising doctor or registered nurse.

This bill authorizes an ND to direct an LVN to perform the following functions, which are outside the existing NA's scope of practice and training:

1. Administer medications by hypodermic injection
2. Withdraw blood from a patient
3. Start and superimpose intravenous fluids if the LVN has completed prescribed course of instruction and if the procedure is performed in an organized health care system
4. Perform tuberculin, coccidioidin and histoplasmin skin tests within the course of a tuberculosis control program
5. Provide immunization services.

ANALYSIS:

SB 994's core concept is a positive one: it expands the type and number of potential employment and clinical placement opportunities for licensed VNs and VN students. This bill may provide California consumers with highly trained patient care professionals in a less traditional medical setting, potentially contributing to a more accessible and holistic health care system.

Nationwide, nurses at all levels are in short supply. The Board has heard reports that acute care facilities are investigating the possible use of LVNs where there is a critical need. While expanding possible opportunities is a positive objective, the more compelling state need is to strengthen the nursing workforce in areas of critical need.

The ability for VN students (and presumably Psychiatric Technician (PT) students) to have an additional avenue for clinical placements via this bill has potential value. ND practices are concentrated in high-density populations, where competition for clinical placements is the greatest. However, training these students would require a substantial investment of time and resources. In addition, this experience is not applicable to the national licensure examination, nor is it included in training requirements for career development and advancement (Registered Nursing programs).

It is not clear why the bill is silent on the possible employment of Psychiatric Technicians. Their initial education and training is similar to that of LVNs, and the need for mental health care professionals is no less urgent than the need for other nursing and allied health care professionals.

Similarly, although it would be a lengthier goal to achieve, it is not clear why the Naturopathic Doctor Committee (NDC) does not pursue legislation in its own practice act to develop the NA education and training to create a certification process.

Another question is whether the education and training gap of LVNs makes this counterproductive. The existing LVN and PT curriculum does not include the values and practices of traditional naturopathy and their methods and modalities for diagnosing, treating, and prevention of health



conditions, injuries, and disease. Perhaps the NDC should consider creating a post-licensure certification in naturopathy to provide the alternative to interested LVNs and other allied health care professionals.

Implementation of this legislation would require a significant investment in time and resources for the Board and raises policy concerns. Not only would the Board need to perform a detailed review and amendment of its regulations, more intensive than a simple search and replace, the general prelicensure training curriculum for both our licensees, LVNs and PTs, would need expert analysis by the Board's Nursing Education Consultants, and stakeholder outreach and input.

The Board's current priority of eliminating the program approval processing backlog must take precedence to the work involved in implementing SB 994 if it were chaptered. It is not feasible to accommodate this additional workload before 2024, and preferably not until 2025.

The Board's recommendation is to table this bill or amend it to charge the NDC with researching and formulating a mutually agreeable plan for implementation, rather than immediately amending the LVN's practice act.

FISCAL IMPACT

As written, SB 994 would require approximately half of a full-time Legislative and Regulations Specialist, at an approximate annual cost of \$50,000. In addition, approximately 100 total hours of Subject Matter Expert consultation from the Supervising Nursing Education Consultant and/or a Nursing Education Consultant would cost approximately \$8,000.

SUPPORT:

The California Naturopathic Doctors Association (sponsor)
A Voice for Choice Advocacy

OPPOSITION:

None on record