

Note: Upload completed document to the Electronic Rule Filing System.

Hearing Date: 11/2/2023

Today's Date: 11/3/2023

Agency: Ohio Board of Nursing

Rule Number(s): 4723-1-03; 4723-4-01, 4723-4-02, 4723-4-03, 4723-4-04, 4723-4-05, 4723-4-06, 4723-4-07, 4723-4-08, 4723-4-09; 4723-5-04, 4723-5-20; 4723-6-01, 4723-6-02, 4723-6-03, 4723-6-04, 4723-6-05, 4723-6-06; 4723-7-06, 4723-7-07, 4723-7-08; 4723-11-03; 4723-14-01, 4723-14-12, 4723-14-17; 4723-17-01, 4723-17-03, 4723-17-04, 4723-17-05, 4723-17-06, 4723-17-07; 4723-18-01, 4723-18-02, 4723-18-03, 4723-18-04, 4723-18-05, 4723-18-06, 4723-18-07, 4723-18-08, 4723-18-09, 4723-18-10; 4723-20-01, 4723-20-02, 4723-20-03, 4723-20-04, 4723-20-05, 4723-20-06, 4723-20-07; 4723-23-01, 4723-23-02, 4723-23-03, 4723-23-04, 4723-23-09; 4723-26-03; 4723-27-04, 4723-27-06, 4723-27-11

If no comments at the hearing, please check the box. ☐

List organizations or individuals giving or submitting testimony before, during or after the public hearing and indicate the rule number(s) in question.

1. Sherri Gunasekera, LNHA, MSN, RN-BC, LNC, Nursing Training Center, LLC/owner, 2416 Esquire Drive, Suite C, Beavercreek, OH, 45431, contactus@nursingtrainingcenter.com, ducksoft30@aol.com. RULE 4723-27-11, Certified Medication Aide Certification by Endorsement.
2. Paul Martin Dohse, STNA, MA-C, LPN, 58 West Harbine Ave. Xenia, Ohio. Nursing Training Center, LLC/instructor. pmd@inbox.com. RULE 4723-27-11, Certified Medication Aide Certification by Endorsement.
3. Deb Ault, dault@aim-m.com. RULE 4723-11-03.
4. Larika L. Mann, larikalmann@gmail, 6787903235. No rule was specified.
5. Click here to enter text.
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Consolidated Summary of Comments Received

Please review all comments received and complete a consolidated summary paragraph of the comments and indicate the rule number(s).

RULE 4723-27-11. Sherri Gunasekera, by email on 10/29/23 and by in person testimony provided at the public hearing on 11/2/23, opposed adoption of Rule 4723-27-11, Certified Medication Aide Certification by Endorsement, and proposed postponing the changes for 5 more years for reasons including that “medication aide training, settings in which they can work, required supervision, and scope of practice are not standardized” among all states. Email of 10/29/23, attached.

RULE 4723-27-11. Paul Martin Dohse, by in person and written testimony provided at the public hearing on 11/2/23, opposed adoption of Rule 4723-27-11, Certified Medication Aide Certification by Endorsement, for reasons including that granting certifications by reciprocity per SB 131 will not remedy staffing shortages since there are shortages in all states; that MA-Cs are not used for their intended purpose but are used to replace rather than to aid nurses; reciprocity will eliminate hiring from within; and lack of uniformity from state to state regarding MA-C regulation. The written testimony provided 11/2/23 is attached.

RULE 4723-11-03. Deb Ault, by email 10/4/23, asked what authority OBN has over employers. Board staff responded that the rule amplifies Section 4723.114, ORC, Employer obligations regarding nurses holding multistate licenses. The email is attached.

RULE: No rule specified. Larika L. Mann, by email dated 10/30/23, stated she wanted to appear and present written testimony at the public hearing regarding restrictions on her license. Ms. Mann was provided the location and time of the meeting but advised there would not be an opportunity at the public hearing to make a request for relief from disciplinary restrictions placed on an individual license. Ms. Mann attended the public hearing, was informed she was welcome to present oral testimony or written testimony or to email comments following the hearing, but then did not testify or provide comments. The 10/30/23 email is attached.

Incorporated Comments into Rule(s)

Indicate how comments received during the hearing process were incorporated into the rule(s).
If no comments were incorporated, explain why not.

RE: RULE 4723-27-11: Though appreciated, the comments received regarding Rule 4723-27-11, were not incorporated into the Rule. Rule 4723-27-11 is proposed by the Board in order to comply with legislation, SB 131 (134th General Assembly), and Section 4796, Ohio Revised Code (effective 12/29/23), that require establishment of endorsement processes for certifications offered by boards and agencies, and Section 4723.651(C), ORC (effective 12/29/23). Though individuals seeking certification through the endorsement process will be impacted by requirements to comply with and meet application processes and standards, as authorized by Section 4796, ORC, Section 4796 and Rule 4723-27-11 provide new paths to becoming a certificate holder that may lessen the previous regulatory impact on those individuals. It may also potentially lessen the regulatory impact on the business community/employers of certificate holders and create a greater pool of certificate holders to employ.

In addition, the limitations on medication administration by a certified medication aide, found in Chapter 4723-27, OAC, are significant. The limitations include that a certified medication aide "shall administer prescription medications only at the delegation of a nurse according to Section 4723.67 of the Revised Code, Chapter 4723-13 of the Administrative Code [Delegation of Nursing Tasks], and this chapter, to residents of nursing home and residential care facilities." Rule 4723-27-02, OAC.

RE: RULE 4723-11-03: Though appreciated, the question received regarding Rule 4723-11-03, did not result in any revision incorporated into the Rule. As stated in the responsive email, attached, this rule is proposed to amplify Section 4723.114, ORC, "Employer obligations regarding nurses holding multistate licenses."



Ohio Board of Nursing

Mike DeWine, Governor
Jon Husted, Lt. Governor

Marlene Anielski, Executive Director

Public Hearing on Rules – Witness Form

Monday, November 2, 2023, 2:00 pm
Vern Riffe Center for Government and the Arts
77 S. High Street, Columbus, Ohio 43215
Room 1918 -19th floor

Name: Sherri Gunasekera

Address: 574 2416 Esquire Dr, Suite C Beavercreek, OH 45431

Licensure (if applicable): _____

Organization Representing (if applicable): Nursing Training Center, LLC

Title(optional): owner

Email: Contact us @ nursingtrainingcenter.com

RULE(s): 4723- 27-11

Support _____

Oppose ☒ safety concerns for residents and nurses.

Comments: oppose until more education provided to nursing
programs, nursing homes,
state testing for out-of-state medication Aides or

Testimony: ☒ Written. ☒ Oral. _____ Both. mandatory national

Are you are registered lobbyist? Yes. _____ No. ☒ examination for
all medication Aid

Testimony provided at this hearing or to Rules@nursing.ohio.gov is a public record.

Subject: Re: Subject: Opposition to the Proposed changes to Medication Aide rules Chapter 4723-27-11
Date: Monday, October 30, 2023 at 10:47:51 AM Eastern Daylight Time
From: OBN Rules
To: ducksoft30@aol.com
Attachments: image001.png

Ms. Gunasekera,

This email is sent to acknowledge that your comments have been received. They will be included in the November 2, 2023, hearing, and provided to the Joint Committee on Agency Rule Review (JCARR) in the required Hearing Summary Report.

Sincerely,

Anita A. DiPasquale, JD
Advisory Attorney
Education, Practice, & Licensure
Ohio Board of Nursing
17 S. High Street, Suite 660
Columbus, Ohio 43215
rules@nursing.ohio.gov
www.nursing.ohio.gov
Customer Service: 614-466-3947
How was your experience with the Ohio Board of Nursing?
[Customer Service Survey](#)

Check [here](#) for the latest updates on COVID-19. For additional information call the Ohio Department of Health hotline at 1-833-4-ASK-ODH.

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From: OBN Rules <rules@nursing.ohio.gov>
Date: Monday, October 30, 2023 at 7:12 AM
To: Dipasquale, Anita <ADiPasquale@nursing.ohio.gov>
Subject: FW: Subject: Opposition to the Proposed changes to Medication Aide rules Chapter 4723-27-11

From: "ducksoft30@aol.com" <ducksoft30@aol.com>
Date: Sunday, October 29, 2023 at 4:12 PM

To: OBN Rules <rules@nursing.ohio.gov>

Subject: Subject: Opposition to the Proposed changes to Medication Aide rules Chapter 4723-27-11

Please present this as written testimony at the Nov. 2nd, 2023 public hearing.

Nursing Training Center, LLC

Sherri Gunasekera

2416 Esquire Drive, Suite C

Beavercreek, OH 45431.

Subject: Opposition to the proposed changes to Chapter 4723-27-11

My name is Sherri Gunasekera and I started the first Medication Aide certification program in Southwest Ohio. The purpose is to provide consistency of care by retaining LTC nurses and upward mobility for Ohio nurse aides. I am requesting these written comments be considered before approving any changes for reciprocity of medication aides from other states.

In the United States, every nursing school graduate must take the NCLEX (National Council Licensure Examination). This is a standardized test to determine if the individual is qualified to safely practice nursing and to protect the public. Regardless of which state a nurse works they should have the same entry level knowledge for that licensure. The changes proposed to the Medication Aide regulations state the medication aides from other states knowledge should be "substantially similar," which is a very subjective statement. What measures are we going to take to determine the similarities between the 120 hours of training required in Ohio and the incoming medication aide with no required state exam and some with 40 hours of training?

Ohio is one of the 23 states listed on the NCSBN 2023 directory of Medication aide states taking the Medication Aide Certification Exam. Kentucky is not on the list and I can foresee many of the medication aides crossing state lines to work here. Medication aide training, settings in which they can work, required supervision, and scope of practice are not standardized.

Resident safety requires nursing oversight. Nurses must be informed on Medication aide specific rules and scope of practice. Currently, delegation to medication aides is not part of Ohio nursing school's curriculum. Nurses and nursing facilities fear the unknown. LTC and AL facilities are hesitant to train their own staff. Human Resource managers do not know the different types of medication aides (DODD vs MA-C), where to check for certification or if they need to, qualifications, etc. Medication aides from other states are expected to practice Ohio regulations. If you ask most medication aides, they don't know their own states regulations so how can we expect them to know ours? How will the nurse know appropriate delegation?

I propose we postpone changes to the Ohio Administrative Code for 5 more years. We need to include medication aide delegation as a mandatory continuing education credit for nurses and mandate national standardized medication aide testing to protect everyone.

Thank you,

Sherri Gunasekera, LNHA, MSN, RN-BC, LNC

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Ohio Board of Nursing

Mike DeWine, Governor
Jon Husted, Lt. Governor

Marlene Anielski, Executive Director

Public Hearing on Rules – Witness Form

Monday, November 2, 2023, 2:00 pm
Vern Riffe Center for Government and the Arts
77 S. High Street, Columbus, Ohio 43215
Room, 1918 -19th floor

Name: PAUL MARTIN DOHSE

Address: 58 WEST HARBINE AVE. Xenia Ohio

Licensure (if applicable): LPN

Organization Representing (if applicable): NURSE TRAINING CENTER

Title(optional): INSTRUCTOR

Email: pmd@inbox.com

RULE(s): 4723-27-11

Support

Oppose ✓

Comments: USE A, TO REPLACE NURSES, WILL INCREASE

STAFF SHORTAGES. USE B, TO AID ~~EXISTING~~ EXISTING NURSES WILL INCREASE STAFFING.

Testimony: Y Written. X Oral. X Both.

Are you are registered lobbyist? Yes. No. X

Testimony provided at this hearing or to Rules@nursing.ohio.gov is a public record.

IN ADDITION - CONFUSION
REARS REGARDING
OHIO MA-C, MED. AIDS
FROM OTHER STATES WILL
ONLY ADD
TO CONFUSION
AND PUT RESIDENT
AT RISK.

yes did have written and provided it @ hearing

To: Ohio Board of Nursing

From: Paul M. Dohse, STNA, MA-C, LPN

Subject: MA-C Reciprocity

Greetings,

I am writing to you regarding the proposal to add 4723-27-11 to the Ohio Administration Code. This letter will state my concerns for the following reasons: MA-C reciprocity will increase staff shortages, medication errors, and will exacerbate the core problem that reciprocity seeks to address. Therefore, this letter will also include suggestions or ideas that could yield positive outcomes for the new rules. My perspective will include experience working as a MA-C for two years, and then recently becoming a fulltime LPN in a long-term care facility.

A primary concern for the OBN is that nurses operate within their scope of practice. However, the other side of the coin follows: quality of care depends on the ability of nurses to function according to their full scope of practice. It is understood that a limited scope of intended practice will lead to neglect of care. Furthermore, though the nursing scope of practice is dominated by medication administration, inevitable attempts to achieve the full scope will lead to undue stress, job burnout, excessive hours worked, and medication errors caused by distractions and mental fatigue.

This is where a conflict exists between the purpose of a MA-C, and the purpose for the proposal. It is fairly evident that the discipline of Medication Aide Certified, as implied by the title, is intended to prevent nursing practice from being dominated by medication administration, and thereby severely limiting the intended scope of nursing practice. This limited scope of practice stands alone as the central cause for the severe nursing shortage in Ohio long-term care facilities.

The new proposal prompted by the Ohio Common Sense Initiative¹ and SB 131² seeks to eliminate the obstacle of obtaining another license or certification to practice in another state other than the state where licensure or certification was obtained. Especially in healthcare, you do not want to create obstacles for those who relocate to another state. At the very least, this would delay their ability to practice after relocation, and would, at least temporarily, remove those people from healthcare staffing. With that said, there is a healthcare staffing shortage in all states; therefore, reciprocity only rearranges the overall shortage to varying degrees and does not address the core problem. Nevertheless, discussion surrounding the proposal offers a possibility to begin substantive changes that will improve staffing shortages and quality of care as opposed to making those situations worse.

It would seem that the nursing community refuses to learn from the past. Nurse reciprocity has done nothing to solve staffing problems, so it begs the question, why would MA-C reciprocity yield a different result? Somehow, it is thought that exchanging nurses and medication aides between 50 failed state systems will solve a common problem. In Indiana, where medication aides

are thriving and have been used since 1977³, a substantial nurse shortage exists.⁴ Why then, would medication aides coming from Indiana to Ohio solve a nursing shortage in Ohio?

Also, from its conception in 2009⁵, Ohio nurses have utterly rejected the MA-C program and the concept in general. Only recently, in 2021, have MA-Cs been used on any significant level. Why is this? It is because MA-Cs are not used according to their intended purpose. This is nothing new. In a similar way, Ohio state-tested nurse aides are not used according to their full scope of practice resulting in a failure to give nurses some measure of relief. In Ohio, the working relationship between nurses and STNAs is abysmal leading to staff shortages in both disciplines. STNAs are only expected to perform a fraction of their training resulting in stripping the position of its dignity, while robbing nurses of needed assistance.

Regarding MA-Cs, instead of using them to aid nurses, they are used as an ill-advised attempt to solve staffing shortages by replacing nurses. In addition, this is also seen as a way to reduce cost, which few would object to. Regarding the first use of MA-Cs, this will increase the workload of remaining nurses, leading to compounded stress, staff turnover, and an even deeper resentment of the MA-C discipline by licensed Ohio nurses.

By way of example, let us look at a LTC facility with two units. First, we will examine the approach that replaces one nurse. In this example, we have a nurse on one unit and a MA-C on the other unit. This scenario greatly increases the workload of the one nurse. The nurse, in addition to passing her/his schedule 2 drugs, must pass those drugs on the other unit, administer the insulin for both units, and do all nurse charting for both units as well as processing new orders. Nurse pushback against the MA-C discipline in Ohio is not a result of fear in being replaced, but more about how MA-Cs are being utilized. If one reads the Ohio Common Sense Initiative and SB 131, the new proposal to make boards and agencies compliant boils down to replacing missing nurses with medication aides, which as illustrated above, compounds the very reasons that nurses are leaving the nursing profession in the first place. In addition, the replacement approach will place undue stress on the medication aides as well, leading away from an undivided focus that prevents medication errors.

There is a use of medication aides that will solve the problem. That is, as the nomenclature itself states, using medication aides to aid nurses rather than replace them. In the same example of two facility units, we have two medication aides, one on each unit, and one nurse overseeing all aides, administering schedule 2 drugs, insulin, treatments, charting, taking calls from family members, and processing orders. In other words, performing the full scope of practice needed for the delivery of quality care. This will lead to an increase in nurses due to the ability to perform what they love to do. The cost might be slightly more than two nurses but will result in an increased census due to the quality of care, and the elimination of agency nurses to replace staffing shortfalls. Invariably, MA-C reciprocity will lead to the vast majority of medication aides in Ohio being employed by agencies, and thereby increasing cost, while resulting in an increased shortage of nurses. Indeed, agencies are advertising the aforementioned benefits⁶, but experience teaches us that the selling points are pretense and at a much greater financial cost. This is why medication aide programs in all other states have not made any measurable difference in nurse staffing shortages; namely, a misguided application of the discipline.

Unfortunately, the present shortage of nurses in Ohio is a completely unnecessary problem defined by a lack of education and vision concerning the aide concept and its relationship to nurses, whether nurse aides or medication aides. Though much could be said about nurse aides and their proper relationship to nurses, which is woefully inept in Ohio, and has all but destroyed the spectrum of best practice, the MA-C program does offer a contribution to nurse aides in the form of upward mobility.⁷ This also speaks to the very important concept of hiring within, which is essential to retaining staff and reducing turnover. But, reciprocity will also remove this necessary element from the process of curing staff shortages and subsequent lack of care. It all begins with neglecting nurses via lack of vision concerning nurse aides, and the misappropriation of medication aides to replace nurses rather than aide them in practicing what they are trained to do and love to do. It all begins there, and results in a vicious downward spiral primarily affecting those awaiting the care they are rightfully due.

Confusion concerning regulation of medication aides from state to state could be added here⁸ along with many other arguments concerning MA-C reciprocity, but it is understood that reciprocity is now a matter of compliance to Ohio law. With that said, there is ample opportunity to mend the misguided law with rules that will invoke substantive education and proper application. Reciprocity will solve nothing and only make the problem worse, but the opportunity to invoke new rules will improve the problem and set examples for other states. For example, there is a rule concerning Ohio MA-C that follows: a MA-C cannot accept two assignments as an aide and medication aide. Presumably, this rule is to prevent distractions while passing medications. Like rules could be instituted that address the concerns of this letter.

In conclusion, the new rules must foster aid to nurses, not the replacement of those missing. There are no substitutions for nurses that will result in best practice.

Respectfully,

Paul M. Dohse Sr., STNA, MA-C, LPN

¹ Ohio Commonsense Initiative. (n.d.). Register of Ohio.

<https://www.registrofiohio.state.oh.us/servlet/RooBusinessPDF?ruleActionId=591488&docTypeId=14>

² SB 131. (n.d.). [https://search-](https://search-prod.lis.state.oh.us/solarapi/v1/general_assembly_134/bills/sb131/EN/05/sb131_05_EN?format=pdf)

[prod.lis.state.oh.us/solarapi/v1/general_assembly_134/bills/sb131/EN/05/sb131_05_EN?format=pdf](https://search-prod.lis.state.oh.us/solarapi/v1/general_assembly_134/bills/sb131/EN/05/sb131_05_EN?format=pdf)

³ <https://www.nursingworld.org/~4af4e6/globalassets/docs/ana/ethics/state-chart-medication-aide-status-09-15.pdf>

⁴ <https://www.indystar.com/story/opinion/2022/10/27/nurse-indiana-nursing-shortage-fixing-issues-salary-education-mental-health/69589885007/>

⁵ Ohio Nurse. (n.d.). Medication Aides—What the Laws and Rules Say. https://media.healthcareers.com/wp-content/uploads/2022/07/27174714/OH9_10.pdf

⁶ Admin, L. (2018, 4). Ohio medication aide certification program. LeaderStat: Healthcare Recruiters & Consultants. <https://www.leaderstat.com/knowledge-base/ohio-medication-aide-certification-program>

⁷ Grebbin, S. (2023, April-19). 'Creative staffing': Nursing homes push to allow CNAs to administer medication citing labor benefits, savings. Skilled Nursing News. <https://skillednursingnews.com/2023/04/creative-staffing-nursing-homes-push-to-allow-cn-as-to-administer-medication-citing-labor-benefits-savings/>

⁸ Ohio Nurse page 5. https://media.healthcareers.com/wp-content/uploads/2022/07/27174714/OH9_10.pdf

Subject: Re: question (decrypt)
Date: Tuesday, October 10, 2023 at 3:44:33 PM Eastern Daylight Time
From: OBN Rules
To: dault@aim-m.com
Attachments: image001.png

Thank you for your email. The Ohio General Assembly enacted the Nurse Licensure Compact (NLC), including Section 4723.114, Ohio Revised Code (ORC), "*Employer obligations regarding nurses holding multistate licenses.*" That law, in short, requires employers to report to OBN the number of nurses they employed who held non-Ohio-issued MSLs, and, to provide each nurse board-developed information concerning laws and rules specific to nursing practice in Ohio. Section 4723.114(D), ORC, authorizes the Board to adopt administrative rules to implement Section 4723.114, ORC. Full text: <https://codes.ohio.gov/ohio-revised-code/section-4723.114> Rule 4723-11-03, Ohio Administrative Code, is being proposed to provide a mechanism for employers to comply with Section 4723.114, ORC.

Thank you,
Anita A. DiPasquale, JD
Advisory Attorney
Education, Practice, & Licensure
Ohio Board of Nursing
17 S. High Street, Suite 660
Columbus, Ohio 43215
rules@nursing.ohio.gov
www.nursing.ohio.gov
Customer Service: 614-466-3947
How was your experience with the Ohio Board of Nursing?
[Customer Service Survey](#)

Check [here](#) for the latest updates on [COVID-19](#). For additional information call the Ohio Department of Health hotline at 1-833-4-ASK-ODH.

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From: OBN Rules <rules@nursing.ohio.gov>
Date: Wednesday, October 4, 2023 at 2:04 PM
To:
Subject: FW: question (decrypt)

From: Deb Ault <dault@aim-m.com>
Date: Wednesday, October 4, 2023 at 12:52 PM
To: OBN Rules <rules@nursing.ohio.gov>
Subject: question (decrypt)

Could you please provide me with information regarding 4723-11-03? My question is: What authority over EMPLOYERS does the Ohio Board of Nursing have?

Thank you.

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Subject: Re: Public Hearing on November 2, 2023

Date: Monday, October 30, 2023 at 3:04:18 PM Eastern Daylight Time

From: Dipasquale, Anita

To: larikalmann@gmail.com

Thank you for your email. The meeting will be held for the purpose of comments on the proposed rule changes, on **November 2, 2023, beginning at 2:00 pm**, Vern Riffe Center for Government and the Arts, 77 S. High Street, Columbus, Ohio 43215, Room 1918 -19th floor. As stated in the notice, should you not wish to appear in person, written comments can be sent directly to this email. Please include your name, mailing address, and telephone number.

Please be advised there will not be an opportunity at this Rules hearing to make a request for relief from disciplinary restrictions placed on an individual license.

Thank you,
Anita A. DiPasquale, JD
Advisory Attorney
Education, Practice, & Licensure
Ohio Board of Nursing
17 S. High Street, Suite 660
Columbus, Ohio 43215
rules@nursing.ohio.gov
www.nursing.ohio.gov
Customer Service: 614-466-3947
How was your experience with the Ohio Board of Nursing?
[Customer Service Survey](#)

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From: OBN Rules <rules@nursing.ohio.gov>

Date: Monday, October 30, 2023 at 1:29 PM

To: Dipasquale, Anita <ADiPasquale@nursing.ohio.gov>

Subject: FW: Public Hearing on November 2, 2023

From: "Larika L. Mann" <larikalmann@gmail.com>

Date: Monday, October 30, 2023 at 1:28 PM
To: OBN Rules <rules@nursing.ohio.gov>
Subject: Public Hearing on November 2, 2023

Dear Sir Or Ma'am:

I am sending this email to inform those at the Board of Nursing of my intent to appear at the following Board public hearing on 11/2/2023. I will provide written testimony at this hearing. My hopes are that the rules placed on my licence, could be considered for review.

If there are any questions or concerns please do not hesitate to contact me.

Sincerely,
Larika L. Mann
6787903235
larikalmann@gmail.com

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