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THE NATIONAL ASSOCIATION OF LONG TERM CARE ADMINISTRATOR BOARDS AND THE AMERICAN COLLEGE OF HEALTH CARE ADMINISTRATORS OPPOSE MOVEMENT TO ELIMINATE STATE LICENSING BOARDS FOR SENIOR LIVING AND HEALTH SERVICES ADMINISTRATORS.

The ability of licensure boards to act as independent decision-making authorities as state agents is paramount for public safety.

WASHINGTON D.C.--There is a growing movement among State governments to eliminate the boards of licensure of senior living and health services administrators (nursing home, assisted living and home and community-based services) and to move the responsibility for licensure under the domain of the State Department of Public Health or similar authority. This may result in the unintended consequence of shifting non-appropriated costs that result in agency growth and increased cost to the state. Most independent boards are non-appropriated.

The American College of Health Care Administrators (ACHCA) and The National Association of Board of Long-Term Care Administrator Boards (NAB) strongly oppose this trend.

We strongly urge State authorities to recognize the value of professionals and practitioners within the profession of senior living and health services Administration. With respect to licensure and regulation of senior living and health services administrators, most states have recognized the inherent benefit of licensed professionals who engage in a collective effort to provide care and services for the good of the public. The usual function and purpose supporting the work of a board of licensure for given health professions is to protect the safety and health of the constituents of the governed body.

The importance of a licensure board with independent decision-making authority acting as a state agent cannot be overstated. To ensure the appropriate licensure standards, standards of ethical behavior and conduct, and – ultimately – the assurance to the public at large that qualified, competent, ethical professionals engage in the practice of senior living and health services administration is paramount for public safety.

This is especially true for the constituencies of senior care settings, where older and vulnerable adults are served in a fashion that safely and appropriately meets their health care needs.

To have the licensure board for individual practitioners subsumed under the same agency that regulates and surveys care facilities is an inappropriate measure to ensure the competency of current and future practicing senior living and health services administrators.

Of additional concern are the investigative committees contemplated by some states which may not contain equal representation of senior living and health services administrators, and who then would investigate a complaint or allegation against a practicing administrator. This gives rise to concerns that those not licensed in a certain profession would be investigating and potentially disciplining a practitioner of that profession. The current practice in most states does not follow this proposed approach, and we strongly discourage it.

If a model to enhance administrative efficiency is sought by the various states, we recommend a thoughtful evaluation of the structures and approaches of other licensure boards utilized by many other states, where multiple licensure boards are consolidated under administrative leadership that is independent from other executive branch authorities. This allows for experienced individuals within a particular profession to ensure appropriate initial licensure standards, education and training, examination of competency, and ongoing continuing education and adherence to professional practice standards. Such a structure and practice will ultimately serve the public good by ensuring competent, ethical practitioners authorized to care for our elderly and other vulnerable individuals.

About NAB: NAB is the nation's authority on licensing executives in long term care to deliver quality care, convenes 52 state regulatory boards and agencies, former state regulatory board members, academics, continuing education sponsors, and affiliated associations. For more information visit nabweb.org.

About ACHCA: Founded in 1962, ACHCA is a nonprofit professional membership association that provides superior educational programming, networking, and career development opportunities for its members. Guided by the vision that dynamic leadership fosters long-term health care services that are meaningful, successful, and efficient, ACHCA identifies, recognizes, and supports post-acute and aging services leaders, advocating for their mission and promoting excellence in their profession. Visit the ACHCA website for more information.

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