

American Medical Association Attacks on Scope of Practice: Oncology Nurses Beware

Recent announcements about nurses' scope of practice by the American Medical Association (AMA), American Academy of Ophthalmology, American Academy of Otolaryngology-Head and Neck Surgery, American Academy of Orthopedic Surgeons, American Psychiatric Association, American Society of Anesthesiology, and American Society of Plastic Surgeons remind oncology nurses and the Oncology Nursing Society (ONS) why they must continue to be engaged in advocacy to protect and promote oncology nursing. We are increasingly concerned about a series of steps taken by AMA and other physician organizations that indicate their intent to seek legislative action at state and federal levels to reduce nurses' scope of practice. We urge all ONS members to become educated about these efforts and take action to protect oncology nursing.

ONS maintains advocacy as a core value; the Society advocates "on behalf of people with cancer . . . [and] on behalf of the nursing profession and the oncology specialty to ensure respect and recognition, access to education, safe working environments, and fair reimbursement" (ONS, n.d.). *Scope of practice* generally is used to capture or define the healthcare services and/or activities that healthcare professionals are permitted to perform as authorized by licensing, registration, or certification processes.

The Scope of Practice Partnership (SOPP)—a coalition of state medical societies and specialty organizations—exists to respond to "various and troubling encroachments on physician practice"

**With the active
involvement of the entire
ONS membership
in health policy advocacy,
we can achieve positive
public policy change.**

(Devitt, 2006). SOPP was founded by six state medical societies (from California, Colorado, Maine, Massachusetts, New Mexico, and Texas) and six specialty organizations (the American Academy of Ophthalmology, American Academy of Otolaryngology-Head and Neck Surgery, American Academy of Orthopedic Surgeons, American Psychiatric Association, American Society of Anesthesiology, and American Society of Plastic Surgeons). SOPP members are contributing significant resources to "fund research that helps refute the key arguments allied health professionals use to advance their measures in state legislatures," "help medical specialty societies and state medical associations fight expansions in nonmedical scope of practice," and support "campaigns to stop scope-of-practice legislation in states where such bills appear likely to advance" (Devitt). ONS opposes the efforts of

SOPP and believes that the partnership's existence and activities pose serious threats to all nurses, particularly those in advanced practice.

In November 2005, AMA adopted Resolution 814 titled "Limited Licensure Health Care Provider Training and Certification Standards," which states that AMA "along with the Scope of Practice Partnership and interested Federation partners, study the qualifications, education, academic requirements, licensure, certification, independent governance, ethical standards, disciplinary processes, and peer review of the limited licensure health care providers and limited independent practitioners, as identified by the Scope of Practice Partnership, and report back at the 2006 Annual Meeting" (Devitt, 2006). At the same meeting, the AMA allocated more than \$170,000 to support the study and its publication. Michael Maves, MD, AMA's executive vice president and chief executive officer, explained that "while nonphysician providers have been, and will continue to be, important elements in the provision of health care, it is important that our patients know and receive the care that only physicians are uniquely qualified to provide" (Devitt). He explained that SOPP was created "to ensure quality care for patients" (Devitt).

Building on these egregious actions, the AMA House of Delegates passed Resolution 902 at its November 2006

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