

Principles for Licensing Health Care Workers

The health care industry is facing one of the worst workforce shortages in recent memory with the shortages predicted to continue and peak in 2010. The shortage has had a dramatic impact on Ohio hospitals, which employ over 230,000 people in more than 200 types of health care positions.

Hospitals have a duty to ensure the competency of their staffs, including licensed and unlicensed personnel, in order to protect patients from harm. Most hospital workers are licensed under one of Ohio's 15 health care licensure boards. OHA supports appropriate educational and competency assessments for those who provide patient care services to Ohio's citizens. However, OHA has traditionally opposed licensure of new categories of health care providers on the basis that excessive health care licensing regulations pose roadblocks for allowing health care organizations to develop plans to place the right person in the right job. Many times, they do nothing to enhance patient safety but do lead to increased health care costs.

The Ohio Hospital Association's (OHA) vision is that licensing of health care occupations should assure public safety while preserving flexibility for hospitals and designing satisfying work experiences for employees. In an effort to assure a competent workforce for the provision of health services, OHA supports licensing using the following principles:

- 1) There is a demonstration that the licensure requirements are needed to protect the public from preventable harm.
- 2) Employer oversight and accountability are the most effective means to protect the public.
- 3) Only categories for which new licensure is shown to be effective in protecting the public from unqualified health care providers shall be licensed.
- 4) Licensure regulations should be at the least restrictive level necessary to protect the public.
- 5) If licensure is needed to protect the public, the licensure program should exist within one of the current regulatory boards.
- 6) The licensure process should not unnecessarily impede career or geographic mobility of credentialed professionals or set up artificial barriers to the entry into, or the practice of, the health professions.
- 7) If there are redundant licensure programs, they should be eliminated from state regulations.
- 8) Barriers in current licensure requirements that are not necessary to maintain the safety of the public should be eliminated to promote flexibility for delivery of health care services.
- 9) All licensing boards should strive to achieve a balance between assuring the qualifications and competence of credentialed professionals, and assuring that the public has access to needed and desired services and information.
- 10) Development of licensing requirements must reflect unique needs of health care in both rural and urban settings.