Merle Kearns interview for the Miami Valley College of Nursing and Health Oral History Project

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KIM KIRBY: All right. What is the earliest memories of Wright State College of Nursing and Health?

MERLE KEARNS: Earliest memories before I got involved with this?

KK: Uh-huh.

MK: One of my earliest memories of Wright State is before it was here. This was nothing but farm field. There was a little old dirt road and a service station and a yellow house, a yellow farmhouse. That's where Wright State started, although it started really as a branch of Miami and then grew into this. So I guess I've known it since it began.

KK: Tell me a little bit of your personal background in terms of how you're affiliated with Wright State University College of Nursing and Health.

MK: Well my undergraduate degree is from the Ohio State University in Early Childhood and I was a community volunteer in my community of Springfield from the time I moved there until now. And as part of that community work I eventually became interested in running for office, ran for county commissioner and got elected. Was doing that quite nicely so I thought I'd always do that. And now Senator Mike DeWine and now *Congressman Dave Hobson came and asked me to help them move and change jobs. Mr. Hobson wanted to take over the congressional seat and Mr. DeWine decided he wanted to run for governor. And so they told me if I would help them they
would help me get to be a senator which I never ever thought about doing in my entire life but anyhow I helped those gentlemen on their campaigns and Mike DeWine did end up running for lieutenant governor with George Voinovich and then he was elected, Dave Hobson ran for the congressional seat and won that and helped me get appointed to fill the remainder of his Senate term. So instead of having to run for the senate, which would have been very hard to do and expensive, I got appointed to it in the end of 1990 and I took office in January of '91. And that's how I got started going to Columbus to serve in the legislature. And how I became involved with Wright State is a whole other story but that's how I got involved in the state legislature.

KK: So how did you become involved with Wright State?

MK: Well, shortly after I was inaugurated, sworn in, I get this phone call from Dean Jane Swart of blessed memory, a wonderful woman, and Dr. Margaret Clark Graham and they wanted me to come down and learn about the Kellogg Grant. And I said, I'd be happy to do that and made arrangements for me to come down on a Friday or a Monday which were my days in the district. I came down to hear about this grant from the cereal company. Not even having a clue what it was about and so they took me out to a meeting somewhere. I can't remember, I think they might have taken me out to one of the clinics, the clinic I guess at that time. And then they explained how they had written this grant to expand their practice of the underserved people and there was always a match involved in the grant and the match in this one would be met, was their expectation, by the Medicaid payments to the advance practice nurses. Only after getting the grant and trying to get it set up they realized that Ohio did not recognize advance practice nurses in statute and therefore they had no method that they could get paid and hence they had to come talk to their legislators. (Laughs) And so my life changed.

KK: Can you tell me a little bit more about that? The process with the Kellogg grant?

MK: Well with Kellogg grant they couldn't operate it. They couldn't use it to function
because they didn't have the matching piece. So the first thing we tried to do is find an immediate fix which was hard to do because the legislature had just, like 1988, gone through this hard fought battle on the Nurse Practice Act. They tried to really separate nurses from the doctors et cetera and have some clearly defined territory and then they had enough political problems doing that. And so here comes this project now to change the statute even more and to allow and recognize advance practice nurses with all the skills and training et cetera and the ability to practice independently in some areas and here comes these nurses now they want to be doctors and want legislation et cetera, et cetera. Nobody was terribly supportive. Some of the women legislatures certainly were. Some of the men in the house who had helped them in the past battles understood what the issue was. We weren't getting anywhere trying to start a bill and so we had this fellow in the senate now Congressman Bobby Ney. And Bobby Ney says well you know what, there's probably a way we can do this in my insurance bill. He had a big bill on insurance and it was over in the House. So he thought if we got some language amended into that Senate bill over in the House then it would come back to the Senate ready to be approved and he would just be able to say "That's all right with me I'm the sponsor and I helped them put that language in and so alright the rest of you Senators accept whatever we just did. It's going to be fine." And what we figured out, and I think Carol Roe was part of this. She was going back and forth between Board of Nursing and ONA, the Nurse's Association for years. So she was with one or the other and she was their lobbyist and she was the strategist and trying to figure out how we could get something started so we could get some reimbursements and keep this Kellogg grant in the state of Ohio. And we did make a big deal about getting this Kellogg grant, how important it was. And so we set up a pilot program that would cover Wright State and Frances Payne Bolton School of Nursing up at Case Western, the two schools. And the nurses involved in this, advanced practice nurses, would be recognized by Medicaid and would be reimbursed so the dollars could be matched and also they would have
limited prescriptive authority for the purposes of the pilots. And that line was put into the bill and it made it through and ever after. (Laughs) It was a big surprise to the Medical Board when they found out about this although I was in meetings when Medical Board people were there, when we were trying to get this done and they did know some of it. I believe the prescriptive part was the real jolt for them. Soon after the legislation passed and we began to try and implement things we ran into the first problems which were the formulary committee to determine the prescriptions, the extent of the prescriptive authority and how it all would operate and I'm sure that Margaret* gave you every bloody day of that battle. The first part being that several of the appointed groups to be on that board refused to name their member so that they couldn't have a meeting because they couldn't get a quorum. So if they couldn't get a quorum, they didn't have to do this to allow those nurses to get prescriptive authority and the ability to do the prescriptions. But Margaret with her gentile, southern way sweet talked most of those people and certainly with her ability and her understanding of all the issues and her knowledge of their authority was able to make a very good show of how many people in nursing already know all these things and you can't just stop us because you don't like the idea. It's in the statutes and we need to see about getting this done. And she even won over one of the toughest persons around, a representative from the pharmacy board who hardly would speak to her in the beginning and he became one of her best champions. So you have that on tape. You have that too. (Laughs) You should probably get some of these guys too.

DMC: Do you remember his name?

MK: No I don't but Margaret would.

DMC: It's probably part of public record so we could find it.

MK: Yeah, it should be. So we started out with the pilot program and then the very next general assembly we were back to trying to do the language to recognize advance practice nurses and it took us three separate general assemblies before we got it passed.
DMC: Wow that's a long time.

MK: Yes.

KK: Actually what my next question was; tell me about what you remember about your early years with the Wright State Nursing Program, but I think you've kind of already answered that. And the next question is, what were the challenges you faced in fulfilling your assistance with this type of program?

MK: Well our first challenge was finding a vehicle that would work and it was thanks to now congressman Bob Ney, a former Senator, who was willing to work with his insurance bill and add an amendment to it that recognized these pilots and got our foot in the door. That was the important thing and being a brand new legislator, I was not that knowledgeable about putting things on in the other house and bringing them back and saying to your colleagues it's already a done deal. It's a good done deal et cetera, things like that. So I learned a lot just in the mechanics of getting things done plus he was a very knowledgeable guy, Bob Ney. He also was vice-chair finance in the Senate so he was a powerful person. The next general assembly he became chairman of finance. So most people didn't try to undo things he did because he had lots of weapons at his disposal too if you messed around with something. So it was a good learning experience and he was very helpful. We would never have been able to do it without him. I believe that Margaret might have said the same thing and certainly Carol Roe who was a very skilled lobbyist and knew that this is the chance to get it done by taking this bill over here and moving it back over here and it's done and it passes and you don't have to fight the battle in two houses because when you do that surely at one place the whole scenario unravels. Somebody figures out what you're really trying to do.

KK: The next one was what are you trying to accomplish when you were working with this program but you've already answered that.

MK: Well that's our beginning. This was our beginning. We wanted to get recognition for
the nurses already working out in the underserved areas under this grant. So if they could get reimbursed so we could keep the grant because you had to have your match. What was our next step? Our next step was to get any advance practice nurse in the state of Ohio recognized and able to be licensed and given the authority to do advance practice kind of work and the reimbursements that came with it and then also the prescriptive authority piece. So we had an evolution towards that process and it took us six years to get the advance practice nurse bill done and it took us three and half more years before we got the prescriptive authority piece done and it's still pretty puny. So we're still trying to improve on that. We haven't even really talked about introducing anything this general assembly and we probably should. We get language changes every year to try to make things easier. It's a very burdensome way to operate and a limited scope. But in the very beginning after Case Western and Wright State were up and moving, Cincinnati thought it was such a good idea that they got an amendment to the budget bill the next time around and they got involved in the pilot program. So then all of the sudden we had Cincinnati, right here and up in Cleveland doing these things and then Wright State did a branch somewhere down Southeastern Ohio, somewhere near Athens maybe? I can't remember exactly where but we began to branch out. We had a hundred and some nurses, advance practice nurses, working on this pilot program. All of them had this limited prescriptive authority and pretty soon the medical board was getting really hyper. At the same time of course we were now doing a full-fledged bill. On its own, introduced, sole purpose was to allow advanced practice nurses to be recognized in the state of Ohio. First general assembly we did that. It was introduced in the house by one of the men who had been a big supporter, Representative Vern Sykes. He's no longer there but his wife is there. She's now the representative with all this wonderful turmoil and a good representative. So Vern Sykes introduces this bill and gets thousands of people in the same room trying to negotiate and work this bill through and never gets it done. I mean everybody who didn't want it used stalling tactics. So that didn't work.
The next general assembly I started it in the Senate and I got it out of the Senate and over to the House and then the House couldn't get it out, couldn't finish it. So the third time that we started it I did it in the Senate again, Joan Lawrence, a nurse and a representative, carried it in the House and we finally got it finished. In fact it passed in the Senate on February the fourteenth of 1996 which was the day that our granddaughter was born in Japan because I was in my office getting ready to give my floor speech, running around and the phone rang and it was our son calling from Japan to tell us that Maggie had been born. So by the time I got to the floor I was so excited anyhow so I had to announce that to begin with and I think our vote was like thirty-two or thirty-three to nothing to pass the bill. But we spent forever doing it because it was very contentious, it was contentious every time we modified a lot of the opposition and got people calmed down many times and we gave up a lot. We had prescriptive authority in every time and every time we had to take it out. You're only allowed to use the pilots. I think the people, the nurses who were already in the pilots, were grandfathered to continue to do that limited prescriptive authority they had. So we did all that work and finally I got that passed and Joan got it passed by spring, late spring and then Governor Voinovich signed it in the summer. And he was very supportive. He was very helpful and he sent his head of his Department of Health who wasn't very supportive. He sent him to be supportive (Laughs) it was hysterical because the guy really didn't want to do this because he was a doctor.

And then at this time Governor Voinovich's lieutenant governor was Nancy Hollister who is now a member of the House of Representatives. So the next general assembly, let's see that would have been nineteen, twenty, twenty-one the hundred and twenty-second I think. We started all over again with just a piece all it was going to be was prescriptive authority and we didn't get anywhere with that. So the next general assembly Nancy Hollister was a brand new rep. and I went and asked her to carry the bill in the House because I couldn't get it out of the House. So I asked her to carry that bill just to recognize prescriptive authority for the nurses, a standard formulary the whole bit, with
training, education, CEU's, everything you had to do. It was a very well put together bill and Speaker Davidson called me in and was very angry because I had asked a freshman legislator to carry such a controversial piece of legislation. And I said to her but I asked her because I knew that her part of the state needs these nurses, and these nurses need this kind of power to serve those people and I worked with her when she was lieutenant governor and she helped to get the other bill through. So she was the logical person to do it. "Well you shouldn't endanger a freshman legislator". I said she's a big girl. (Laughs) People should have sense if they think this is damaging and I said honestly Joanne, our speaker, I said honestly speaker, "I don't think it's a problem for her in her part of the state. They need it. They need this kind of legislation down there and we will be fine". But she was really tough. I think I probably violated some protocol too because I probably should have gone to the speaker and asked permission to ask her but you know what, I already knew her and I knew what she needed; this was an important bill so I just talked to her.

DMC: Were you still Senator then?

MK: Yes. I have not done any advanced practice nurse legislation as a representative. I've done amendments. I've done things like that but I haven't done any of the language because we haven't done anything. I've done little pieces like changing dispensing and even that little word, trying to change that little word dispensing. You'd think it was the end of the world. So, Nancy carried the bill and I had a companion bill in the Senate that means we both introduced identical pieces of legislation at the same time, you hold the joint press conference and then you try to have your hearings and keep both bills moving. Protocol is whichever chamber passes a bill first, that becomes the vehicle. Nancy was able to get her prescriptive authority piece out of the House before I could get mine out of the Senate. So hers then came over to the Senate, with the changes the House had made and then we worked on the bill for not quite a whole year over in the Senate. We finally got it passed which expanded prescriptive authority far beyond the pilots. It phased out the pilots
over a period of time but just the other day I was talking to Sue Milne from the Board of Nursing. We were reminiscing and I said, "Well, how're we doing?" She said "You know what? It's very interesting. It's been going very slowly but very steadily." And I think we have over three thousand people now who are licensed in this state as advanced practice nurses and about fifteen hundred who have prescriptive authority. So it isn't overwhelming and it isn't all the things the Medical Board predicted and feared. It's people who have gotten their advanced practice, gotten their time in, gotten their relationship with a doc, gotten their extra work done on a formulary and all the things you have to learn to prescribe. We're slowly moving forward. So it's coming along and there's much less opposition now. There are many doctors who are clamoring to have an advance practice nurse in their office. My own gynecologist has a wonderful nurse midwife in his office and she does everything now. And she's just great and of course I've know her forever through this bill. You might know her, Anne Ericson? Do you know Anne? Oh gosh. She's just a gem. My doctor's so excited that we achieved the prescriptive authority as he was one of the few docs that supported me the whole time. I got a lot of grief from the Medical Board in Springfield. Helping those women want to be doctors they ought to go to medical school? That kind of story. Anyhow that's the long and short of it.

KK: What a life.

DMC: We're all wrapped up in this story now.

MK: There's some videotapes of me doing this in Jane Hutchenson's class. We did an interactive video with the nurses in another location one time.

DMC: Oh, for the distance class.

MK: Uh-huh, the distance class I spent some time with them.

DMC: We'll have to check on if she has them. Unfortunately sometimes people have done these tapes and then- -
MK: They disappear?

DMC: They disappear.

MK: I've done it for Virginia Nehring. I do Virginia every summer in fact I said to her one time I wish you'd just take all those tapes and just put together you know like this progression of me over the years. (Laughs) She probably says the same thing. But Virginia should have some tapes too if you want some back pieces.

DMC: I'll go in her closet.

KK: I'm in her class right now.

MK: Are you? Well I'm teaching you sometime this summer.

KK: Oh, you are?

MK: Yeah. Uh-huh. Are you the nighttime class?

KK: Yeah.

MK: Yeah. Six o'clock or something. Yeah I'm coming down at six o'clock.

KK: Oh, cool.

MK: Yeah.

KK: The next one is describe your interactions with the administrators and colleagues and students at Wright State University in the College of Nursing.

MK: Oh, in the College of Nursing well Dean Swart was a very active participant in the advance practice nurse bill. And a couple of the docs, well of course at that time President Goldenberg was the Dean in the Medical School and he was very helpful and then there was another doctor who was *Claussen. He was very helpful, very helpful. People in this community over here understood the need for advance practice nurses, even the Medical School, but there was a small group lead by a bunch of senior medical students and they came over and spoke against the bill. Who was president then, Paige Mulhollan was president. Paige was president and then Harley
Flack came and then Kim during the whole time I was working on this. I had good relationships with the presidents. Whoever was president then, I think it was Paige, I called his office and I raised hell. What are you doing to me? Here I am trying to help your university with something you need done as do all the other nurses, but in particular this university and I turned around and out in the audience ready to testify against me and this bill are your medical students. I know it's called freedom of speech but I am not a very happy camper. (Laughs) They have the right to say whatever they want to say but boy oh boy I'm not happy they're coming from Wright State and I do believe they were all talked to. Everybody said you have the right to go over there but you should not have been over there as Wright State students because you were not representing this university.

DMC: Good point.

KK: Describe your interactions with the wider Wright State University campus community. Besides the School of Nursing are you affiliated with anything else around Wright State?

MK: Well I've been invited to talk to the political science classes over the years and I always have Wright State students in my office. Now this summer I don't but I had a very nice senior student, Angel, Angela, I can't remember her last name but the over the years I've had some really great help from people who come from Dr. Adam's classes and another one that starts with an F?

DMC: From poli-sci?

MK: Yeah, from political-sci. But whatever. I just always call and always ask for somebody, they'd send them. They try to send them two days a week. Do you know Shane Regoli. He heads the college Republicans over here at Wright State. He was in my office for a quarter and he really took up what I always bragged about. I either have to have the kids two days a week or two quarters in a row because you just begin to figure it out, how to do the case
work, how to work on a bill, how to cover a committee and you're finished. And so this year I'm getting students two days a week and it's wonderful because if they have a case and they're working on it and somebody calls, if they call you on Tuesday and you call back on Wednesday and they come in again on Thursday they can call you back and you can get things done. It's working much, much better. So we've had a good relationship because people have always been willing in that department to listen and try to make it work for the kids as well as for the legislator they're helping. And then, I'm trying to think who else have I worked with? Oh, there was a political science guy whose last name began with an A. Dave Albright who had been in the Celeste administration and he used to bring his class over and spend the whole day in Columbus as well as being able to get students from that class. So we always had a good exchange from that particular class too. Got along well with the president as I said and I've worked with them with lots of other issues. I've done a lot of work with the College of Engineering the kind of cooperative things that go on with Wright State. The DAGSY [sic] program, Dayton Area Graduate Studies, which was Harley Flack's brainchild. First one of its kind in the nation with a public university here, private UD and government, AFIT, Air Force Institute Technology piece all put together. As soon as Columbus, Ohio State and Cincinnati heard about it, they wanted to join in and so now it's all interactive. Distance learning, people can get masters and PhDs without leaving here, which is what we need. With the people who work at Wright Patt we don't want them to leave. We want them to stay right here and keep working and not move away, keep that brain power here. So I work on those kinds of things. Worked with the business community and the Raj Soin College of Business. Talked to classes over there a lot of times. So, but mostly I come only to talk to the nurses and the poli-sci people.

KK: How do you feel that your experiences with this Wright State nursing program, has it affected your career in any way?
MK: Oh, I have all these volunteers you can't believe you nurses come and help my campaigns and I've had some real tough races. They send money. They do fund raisers for me. I get letters constantly. You're the first Republican I've ever voted for. (Laughs) That's pretty funny. You know they say, "you know I never thought I'd ever vote for a Republican" which is hilarious I think.

DMC: Margaret said that.

MK: Oh, she's not the only one, many of them. They come down in carloads on the weekends to knock on doors for me. It's been very heartening you know because you need help when you have tough races. You really do need help and you don't just say, I'm won't do this for you unless you're going to help me. I mean I did it because it needed to be done but then people kept saying we need you to stay. Well I said if you want me to stay you'll have to help me run. That's about how it works. So I have lots of great help from nurses all over the state. It's been very exciting.

DMC: When do you come up for re-election?

MK: Next year.

DMC: So you have one short period of peace?

MK: I was going to run for the House but I didn't so here I am.

DMC: That's not enough turn around time.

MK: It's terrible you spend all your time raising money. How we doing?

DMC: Great.

KK: There's just one more. Is there anything that I didn't ask you that you want to talk about?

MK: I don't think so because we really talked about the roadblocks that we had from the establishment which was the Medical Board really was the biggest block and the Medical Board and
the Ohio State Medical Association. They're the biggest ones. I guess I didn't talk about the breakthrough in the medical community that helped and that was in the third time we were doing the bill. By that time the family practice doctors had become overwhelmed. The obstetricians have stopped working and practicing in Southeastern Ohio, which is Nancy Hollister's area, because of the liability, and it was becoming very imperative for those folks to get some help. They were working horrendous hours. They had no relief. They needed advance practice nurses and they began to figure that out. And the Family Practice Doctor's Association broke away from the Ohio State Medical Association and took an independent stand on their own, and voted in their delegation, in their conference, to support the advanced practice nurse bill. That's probably one of the biggest breaks we got other than just being persistent. But that was an official break from a group that had opposed us and then we began to say there are doctors who do support this, who want this kind of help, who need this kind of help and they were standing at the doors to hire fokes [sic] when this became law. So that was a big help and it's important to note that too because they took a lot of grief from the big OSMA. Now for the most part OSMA doesn't complain about stuff because so many of their docs are using advanced practice nurses and the ones that aren't, that's fine. No one says you have to use them and there aren't enough to go around. So I think they are concerned that the women, the nurses may well come back clamoring to have independent practice. But that's evolutionary. It's happened in other states and if people are doing fine in other states it will happen here. It will probably happen later but it will come. There are some good nurse practitioners out there too.

DMC: So, in summary what would you think was, what do you feel like were the reasons behind the medical community putting such a big to do about the change to begin with? What do you think was their- -?

MK: Well it was several reasons. First of all they have an older board of people with
specialized practices that probably wouldn't have lent themselves well to having advance practice nurses there either, unless they were also from a highly specialized area. Resentment, power because when we started this it was going to be supervision, supervision, supervision and we said absolutely not, absolutely not, absolutely not. You're going to collaborate. You're going to have written agreement that you are not going to supervise. A big fight from the people down in Southeast Ohio I don't have any doctors down there how are you even going to collaborate with them. You're going to have to have some kind of a written protocol and you're going to have to be available by fax or phone and we're going to have to have some kind of relationship, how far away you can be if you have to drive there. But you know there aren't enough of you docs down here and you need the health care. Now how are you going to get it? Help us figure out this collaboration piece because that's the only way. You can't go down and physically supervise these nurses and you have to do that why do we bother having the nurses in this level. So quit going in circles and let's figure it out. And we did. But we fought over that collaboration piece and in the prescriptive authority piece there's also a collaboration piece but there's also some direct supervision for the first year. That was a bitter pill but it was a compromise.

DMC: You had to compromise on that.

MK: Yeah, I had to take it to get it and the hours we were required and so forth. As the years go on and people prove that they are able to learn and use we'll be able to modify things.

DMC: Good.

MK: Done?

DMC: Thank you so much.

MK: You're welcome. You're welcome. I'm glad we worked it out

END OF INTERVIEW
*Corrections made by Merle Kearns on 1-18-08