BOARD OF NURSING

Professional and Vocational Licensing Division Department of Commerce and Consumer Affairs State of Hawaii

MINUTES OF MEETING

The agenda for this meeting was filed with the Office of the Lieutenant Governor

as required by Section 92-7(b), Hawaii Revised Statutes ("HRS").

Date: Thursday, September 1, 2016

Time: 8:30 a.m.

Place: Queen Liliuokalani Conference Room

King Kalakaua Building

335 Merchant Street, 1st Floor Honolulu, Hawaii 96813

Members Present: Loraine Fleming, DNP, APRN, Chair

Glenda Tali, MS, APRN, Vice Chair

Thomas Joslyn, MS, CRNA

Judy Kodama, MS, RN, MBA, CNML. Tammie, Napoleon, DNP, APRN

Members Excused: Katharyn Daub, MS, RN, EdD

Olivia Kim, LPN

Staff Present: Lee Ann Teshima, Executive Officer ("EO")

Shari Wong, Deputy Attorney General ("DAG")

Lisa Kalani, Secretary

Guests: Laura Reichhardt, Hawaii State Center for Nursing

Julia Doherty, RN applicant Joanna Smith, Student

Call to Order: The Chair called the meeting to order at 8:30 a.m. at which time quorum was

established.

Chair's Report: Announcements/Introductions

The Chair asked the audience to introduce themselves.

Additions to the Agenda/Additional Distribution:

The Chair announced the following agenda item had additional distribution:

Additional Distribution

- 6. Applications
 - b. Registered Nurses
 - 3) RN Applicants Requests for Reconsideration
 - i. Julia Doherty

Approval of the Previous Minutes - August 4, 2016

The Chair called for a motion in regards to the minutes of the August 4, 2016 meeting.

There being no discussion, upon a motion by Mr. Joslyn, seconded by Ms. Napoleon, it was voted on and unanimously carried to approve the minutes of the August 4, 2016 meeting as circulated.

Executive Officer's Report:

Conferences/Seminars/Meetings

<u>2016 NCSBN Annual Meeting, August 17-19, 2016, Chicago, Illinois – Report on Attendance from the Chair, Ms. Kodama and the EO</u>

The EO provided the Board with a written report of the meeting. The following were some of the highlights and topics from the meeting:

- ✓ New Decision Making Tree for Scope of Practice;
- ✓ Risk Based Regulation;
- ✓ Why join the eNLC?;
- ✓ Regulatory Aspects of Prescription Drug Abuse;
- ✓ What's on Your Mind About Nursing Regulation Today?: and
- ✓ Turning Crisis into Opportunity.

Mr. Joslyn asked if there was any information about joining the NLC and loss of revenues?

The EO stated a list of LPNs and RNs has been sent to NCSBN and they will be doing a fiscal impact study.

The Chair stated in many respects joining the NLC would be a good thing because when travelers come in it would shorten the time period to allow them to start working. However regarding public safety, the one thing discussed is lack of notification to the state. You could have people practicing in your state and you don't even know that they are there. How do you guarantee public safety when you don't know who is working in your state?

The EO stated they keep comparing it to a driver's license, but I think it is very different from a driver's license when you're talking about patient safety.

The DAG stated along those lines, when it comes time to renew your driver license, there is no indefinite time to hold a home state license, so when that home state license comes up for renewal you have to get a Hawaii license.

The EO stated you can't place any requirements on these multi-state privilege licenses. You can't even make them file an application just to notify you they are in your state.

The Chair stated that is part of the problem. Before we agree to join, if we agree to join, that is something we would really need to clarify. The Chair stated to her the most striking thing from the meeting was that all of sudden it was the first time they talked about international regulation and international scope of the NCSBN, it is no longer a U.S. organization. There are a lot of new associate members from other areas of the world and they are now focusing on a much more global membership.

The EO asked if nursing standards are different in other countries?

Ms. Kodama stated yes, very different.

The Chair stated the one thing that would make it more palatable is if the NCSBN really did promulgate training and education standards for nurses.

Ms. Kodama stated this was her first meeting so she did not know what to expect but she was quite surprised by how broad in nature it was.

Board Member Orientation, August 30, 2016. 8:30 a.m. – 12:30 p.m., State Capital Auditorium

The EO reported that Ms. Napoleon attended the Board Member Orientation this past Tuesday.

Ms. Napoleon stated it was very cold in the auditorium, but she did learn a lot about RICO and also the role of the DAG. She learned about the sunshine law and ethics and why the Board does what they do at meetings. Senator Baker also stopped by to thank the Board members for their service.

NLC Cohort Meeting, September 22, 2016, Rosemont, Illinois – EO

The EO reported she will be attending. If there are any concerns the Board would like her to address at the meeting, email her the specific questions and/or concerns.

Regulation 2030 Meeting, October 2-3, 2016, Chicago, Illinois The EO reported the Chair will be attending.

International Nurse Regulator Collaborative Symposium, October 4-5, 2016, Chicago, Illinois

The EO reported that Ms. Napoleon will be attending.

<u>2016 NCSBN Scientific Symposium, October 6, 2016, Chicago, Illinois</u> The EO reported that Ms. Napoleon will be attending.

2017 Legislature

The EO stated she is unaware of any legislation at this time.

Amendments to Title 16, Chapter 89 – Status Report

The EO reported she is still working on the draft.

Continuing Competency Program

<u>Learning Activity – Continuing Education</u>

NCSBN Learning Extension Courses

The Board received an email asking if they would accept NCSBN Learning Extension courses for continuing competency.

The EO stated for the national certifying bodies, the Board was not going to list them all, you were going to list criteria. Previously it was discussed that as long as the certification required that you meet education requirements, there was an exam for certification, and that there were CE's for maintenance, it would be accepted. I do not know if these national certifying bodies are approved or recognized by some higher governing body, or if that is the only criteria the Board is going with.

The Chair stated we should not have to approve individual courses, but the Board should be involved in looking at the organization and who is certifying them. So say we accept NCSBN. If different organizations or programs are approved or accepted by NCSBN, we wouldn't have to look at all those organizations individually, as long as they have approval by NCSBN. I'm suggesting that the Board look at the organization that provides the over-sight and say ok to them.

The EO stated she is not aware of any organizations that oversee.

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The Chair stated there are many, they will task it to the Education and Practice Committee's to come up with a list.

The EO stated she would like the list by the next meeting so she can start disseminating it to the employers.

Mr. Joslyn stated regarding the emailed question, are they asking if this course would be acceptable in general for any nurse? How do we determine what they are doing will assist this nurse in their practice.

The Chair stated her understanding is they are not looking at specific courses, they are looking at the body that is presenting it and saying "yes", this is a nationally recognized organization. The individual nurse determines the learning activities that are relevant to them, and we must trust that what they are choosing is appropriate for them.

After further discussion, it was the consensus of the Board to accept the NCSBN Learning Extension Courses towards the continuing education learning activity for continuing competency.

Hawaii State Center for Nursing:

Ms. Reichhardt stated she is continuing to work on a 2017 legislative package. One issue is related to APRN practice, and the other is related to increasing the response rate to the Nursing Workforce Survey without mandating it for license renewal. The HSCFN Advisory Board likes the EO's idea of linking it to continued competency so they will be trying to brainstorm how that would work.

The Chair stated the NCSBN is also doing their surveys, is any of that data helpful to the HSCFN?

Ms. Reichhardt stated she has a lot of conversations regarding that in the past. NCSBN has done two activities in the last couple of years, one is they have collaborated with the National Forum of Nursing Workforce Centers to do a sample survey. It is a sample survey so it is much smaller than what the HSCFN does and it is a national survey, so you can't surmise what's going on in Hawaii based on what is going on in the nation. That sample survey is a strong partnership but will not replace the HSCFN's survey.

The Chair asked have we been able to quantify the benefits of the results of our own survey in Hawaii?

Ms. Reichhardt stated in some states NCSBN has gone to the boards of nursing about doing a state survey. From the perspective of the HSCFN, we created the minimum data set, which is the set they are proposing to use, so our position is we have that expertise because we developed it. NCSBN has provided guidance but it has all been maintained and updated by the National Forum of Nursing

Workforce Centers. In terms of the impact of our nursing workforce research, I don't believe we have hard fast facts, but we do know in 2007, which is the first year we did the nursing workforce survey in Hawaii, we knew that there was an upcoming shortage and it resulted in expanding nurse faculty and funding for the schools of nursing in the state. It has also been used to develop programs and initiatives in the state that have been instrumental in ensuring the pipeline and professional development of nurses. It helped inform the efforts related to continuing competency. Using our data, employers came back to the HSCFN and asked that we then support the development of nurse residency programs, and the Evans based practice program was developed directly from responses to the workforce survey. We are now looking at it to try and understand how APRNs are working in this state and what resources can be introduced for them. The HSCFN is involved, but this is coming from employers, and the workforce. So absolutely there is direct impact from this nursing workforce research and we have been able to quantify the benefits.

The Chair stated if you could demonstrate the value of this to the nurse, it would really promote their participation to do the survey.

Ms. Reichhardt stated the HSCFN struggles with that. It has been an initiative for years. We've had many conversations to figure out what nurses want to hear. What do they feel is important to them. We know it is important to the legislature, schools of nursing, employers, but sometimes that connection to the nurses is lost.

Mr. Joslyn asked what was the last percentage of successful responses?

Ms. Reichhardt stated it was about 39% this year, which actually across the nation is one of the higher percentages. On some level we would like a mandatory survey, because we don't want to give "gray" answers anymore. We don't want to say, "Well this is what we presume is going on in our workforce based off of a third of our responses", we want to say, "We know exactly what is going on in our workforce because we have heard back from all the nurses in our state".

The Chair stated in the past as a Board have not supported a mandatory survey.

Ms. Reichhardt stated my understanding is because it would be tied to licensing.

Mr. Joslyn stated a mandatory survey is impossible, it is never going to happen.

Ms. Reichhardt asked what is problem with it?

The Chair stated many of the questions on it are of a personal nature that no one has the right to mandate I answer.

Mr. Joslyn asked have you ever thought about getting a sponsor? So you say, if you take this survey I'm gonna give you something, some kind of incentive.

Ms. Reichhardt stated she does not know of the HSCFN doing that in her career with them, but research shows that incentives work the first time and then the response rates will drop for any subsequent intervention, and since we do this every 2 years, we may get great results in 2017, and then bottom out in 2019.

The EO stated the Board has not seen the workforce survey results yet.

Ms. Reichhardt stated they used a contractor to analyze the data this year so it is taking longer, but should be available in November.

The EO stated based on the Chair's comments, in the past the Board was able to review the questions and I know there were additions to it. Have the survey questions changed?

Ms. Reichhardt stated the minimum data set is small, it's fourteen questions. They have about sixty-five questions, and not every nurse answer's all sixty-five. There is skip logic, for example it asks what license type you hold, and depending on how you answer, it will skip to the questions pertaining to that specific license type (ie, LPN, RN, APRN).

The EO asked on average how long does it take to complete the survey?

Ms. Reichhardt stated they had people time it this year, and it took them less than 5 minutes.

The EO stated her only concern is the HSCFN putting in legislation, which the Board may fight you at the table, and she does not want that to happen. She is hoping that your Board of Directors will understand the Board's position that they will not support a mandatory survey.

Ms. Reichhardt stated based on the conversation they had last month, she was under the impression that we may be able to have more dialog. That the survey would not be mandatory for licensure but if there is another way to address improving the rates without tying it to licensure we could come to an understanding.

The Chair suggested looking at the impact of coercion on the validity of responses.

Ms. Reichhardt stated she will look into that. She also mentioned that she will be on maternity leave soon, so Sandra LaVaser will be taking over in terms of any conversations. Ms. Reichhardt expects to return in December.

<u>Correspondence</u>; LPN Performing Telephone Follow-up with Patients

The Board reviewed and discussed the following email inquiry from Stephanie Jenkins, LPN at Schofield Barracks Health Clinic:

"Where can I find documentation guidelines for LPNs making follow up phone calls to patients? Can an LPN contact a patient and ask clinical questions for outcome measures/performance improvement project? This information would be useful to write a clinic standard operating procedure and protect our licensure."

Ms. Kodama stated as long as it does not involve assessments.

The Board reviewed the definition of "The practice of nursing as a licensed practical nurse":

"The practice of nursing as a licensed practical nurse" means the performance of those acts commensurate with the required educational preparation and demonstrated competency of the individual, whereby the individual shall be accountable and responsible to the consumer for the quality of nursing care rendered. The foregoing may include, but shall not be limited to: implementation of basic nursing procedures in the plan of care; observing and caring for individuals at all levels of the health spectrum, giving counsel and acting to safeguard life and health and functioning as a part of the health care team, under the direction of a dentist, physician, osteopathic physician, registered nurse, osteopath, or podiatrist licensed in accordance with chapter 448, 453, 457, 460, or 463E, or under the orders of a physician assistant licensed pursuant to chapter 453, practicing with physician supervision as required by chapter 453, and acting as the agent of the supervising physician; administration of treatment and medication as prescribed; promotion of health maintenance of individuals, families, or groups; or teaching and supervision of auxiliary personnel."

After careful consideration, it was the Board's informal interpretation that as long as the LPN is under the direction of one of the health care providers mentioned above and the activity does not include any kind of "assessment", an LPN may ask predetermined questions.

In accordance with Hawaii Administrative Rules §16-201-90, the above interpretation is for informational and explanatory purposes only. It is not an official opinion or decision and is thus, not binding on the Board.

Department of Veterans Affairs ("VA") Proposed Rule - Amending its Medical Regulations to Permit Full Practice Authority of all VA Advanced Practice Registered Nurses

The Board reviewed correspondence from <u>regulations.gov</u> regarding AP44-Proposed Rule – Advanced Practice Registered Nurses. The summary in part states, "The Department of Veterans Affairs (VA) is proposing to amend its medical regulations to permit full practice authority of all VA advanced practice registered nurses (APRNs) when they are acting within the scope of their VA employment. This rulemaking would increase veterans' access to VA health care by expanding the pool of qualified health care professionals who are authorized to provide primary health care and other related health care services to the full extent of their education, training, and certification, without the clinical supervision of physicians."

Mr. Joslyn commented this is a very big deal.

Sorry? 6 Steps for a Successful Apology

The Board reviewed correspondence from CBS News titled "Sorry? 6 Steps for a Successful Apology". It provides information on how to offer an effective apology. Results show that the best apologies included all six of the following elements:

- 1. Expression of regret:
- 2. Explanation of what went wrong;
- 3. Acknowledgement of responsibility:
- 4. Declaration of repentance;
- 5. Offer of repair; and
- 6. Request for forgiveness.

Applications:

The Board moved into Executive Session.

Executive Session:

At 9:38 a.m. upon a motion by Mr. Joslyn, seconded by the Vice Chair, it was voted on and unanimously carried to move into Executive Session in accordance with HRS, 92-5(a) (1) and (4), "To consider and evaluate personal information relating to individuals applying for nurse licensure;" and "To consult with the board's attorney on questions and issues pertaining to the board's powers, duties, privileges, immunities, and liabilities".

At 10:21 a.m. upon a motion by Mr. Joslyn, seconded by the Vice Chair, it was voted on and unanimously carried to move out of executive session.

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<u>Chapter 91, HRS</u> <u>Adjudicatory Matters</u>:

The Chair called for a recess from the meeting at 10:21 a.m., to discuss and deliberate on the following adjudicatory matter pursuant to Chapter 91, HRS:

In the Matter of the License to Practice Nursing of Louis D. Casorla, RNS 2011-39-L, Final Monitor's Report for Period Covering June-July 2016.

Upon a motion by Ms. Napoleon, seconded by Mr. Joslyn, it was voted on and unanimously carried to accept the final monitor's report and documents substantiating Mr. Casorla's compliance with the above mentioned Board's Final Order for the period covering June-July 2016.

In the Matter of the Licensing to Practice Nursing of **Nanette H. Guira**; **RNS 2015-18-L**, Settlement Agreement Prior to Filing of Petition for Disciplinary Action and Board's Final Order.

Upon a motion by the Vice Chair, seconded by Mr. Joslyn, it was voted on and unanimously carried to accept the Board's Final Order.

Following the Board's review, deliberation, and decisions in these matters, pursuant to Chapter 91, HRS, the Chair announced that the Board was reconvening its scheduled meeting at 10:28 a.m.

Applications:

Licensed Practical Nurses

Ratification List

Upon a motion by the Chair, seconded by Mr. Joslyn, it was voted on and unanimously carried to ratify the attached list of LPNs – 18622 to 18658 .

LPN Applicants with Conditional License

Upon a motion by the Chair, seconded by Mr. Joslyn, it was voted on and unanimously carried to accept Ms. Deborah Sitbon, LCSW as Ms. Smith's substance abuse counselor and the proposed monitoring schedule.

Kellen Smith

Registered Nurses

Ratification List

Upon a motion by the Chair, seconded by Mr. Joslyn, it was voted on and unanimously carried to ratify the attached list of RNs – 84009 to 84332.

RN Applicants with prior convictions and/or disciplinary action

Upon a motion by the Vice Chair, seconded by Ms. Kodama, it was voted on and unanimously carried to approve the following applications:

Tina King Angela Strohl

RN Applicants – Request for Reconsideration

Upon a motion by the Vice Chair, seconded by Mr. Joslyn, it was voted on and unanimously carried to approve Ms. Doherty's request for reconsideration.

After careful consideration, the Board determined that although there were concerns with basis for the Oregon disciplinary action in which professional misconduct on the job exposed the public to significant risk, upon a motion by the Vice Chair, seconded by Mr. Joslyn, it was voted on and unanimously carried to approve a conditional license for Ms. Doherty pursuant to HRS §436B-19(7), (13) and HRS §457-12(6) & (8).

Julia Doherty

The conditions are as follows:

- That you will continue attending weekly AA meetings, of which you are already attending pursuant to your oral testimony, and that you shall submit your attendance records on a quarterly basis beginning with the first quarter September 1, 2016 through the end of November 2016, for which your first quarterly report is due no later than December 26, 2016 for the Board's consideration at their January 5, 2017 meeting;
- 2. That you shall notify all current and future nursing employers, directors of nursing and immediate supervisors of your conditional Hawaii nurse license, present to all employers, directors of nursing and immediate supervisors, current and future, with a copy of the Board's issued conditional letter and to ensure that your employer acknowledges the terms of your conditional license, the director of nursing and/or immediate supervisor, who is a nurse, shall sign and return the attached acknowledgment to the Board's office within ten (10) days of signing;
- That you shall provide written notice and documentation within thirty (30)
 days to the Board of any conviction or any judgment, award, disciplinary
 sanctions, order, or other determination, which adjudges or finds that you
 are civilly, criminally or otherwise liable for any personal injury, property
 damage or loss caused by your conduct in the practice of nursing;

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- 4. That these conditions shall take effective immediately and continue for at least two (2) years; and
- 5. That you understand that failure to comply with any of the conditions may result in disciplinary action against your Hawaii RN license.

Advanced Practice Registered Nurse (APRN)

Ratification List

Upon a motion by the Vice Chair, seconded by Mr. Joslyn, it was voted on and unanimously carried to ratify the attached list of APRNs and APRN-Rx.

Next Meeting:

The Chair announced the next scheduled Board meeting as follows:

Thursday, October 13, 2016 – Tentatively

8:30 a.m.

Queen Liliuokalani Conference Room King Kalakaua Building, 1st Floor

335 Merchant Street Honolulu, Hawaii 96813

Adjournment:

There being no further business to discuss, the meeting was adjourned at 10:34

a.m.

Reviewed and approved by:		Taken by:	
Lee An	e Ann Teshima nn Teshima, ive Officer	_ <u>Lisa Kalani</u> Lisa Kalani, Secretary	
LAT/lk			
9/22/16	3		
[X]	Minutes approved as is. Minutes approved with changes; see minutes of		

APRN APPLICATIONS – RATIFICATION LIST 9/1/16 BON MEETING

PRE OCTOBER 1, 2009 REQUIREMENTS - Masters Degree in Nursing or National Certification

CURRENT REQUIREMENTS - Masters Degree in Nursing **and** National Certification

Scott Naputi, Adult-Gerontology Primary Care NP
Deborah Vance, Adult CNS
Jackson Huang, Family NP
Stacey Prusky, Family NP
Sandy Wilson, Family NP
Melissa Nip, Family NP
Ivy Hibbitt, Family NP
Jonne Wilmore, Family NP & Pediatric NP
Patricia Bhama, Family NP
Lisa Harada, Pediatric NP

APRNS FOR PRESCRIPTIVE AUTHORITY

Scott Naputi, Adult-Gerontology Primary Care NP Jonne Wilmore, Family NP & Pediatric NP Jackson Huang, Family NP Breanna L. Chamoff, Pediatric NP Stacey Prusky, Family Np Melissa Nip, Family NP Patricia Bhama, Family NP

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