

**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, February 1, 2018
- Time: 8:30 a.m.
- Place: Queen Liliuokalani Conference Room  
King Kalakaua Building  
335 Merchant Street, 1st Floor  
Honolulu, Hawaii 96813
- Members Present: Glenda Tali, PhD., MS, APRN, Chair  
Karen Boyer, RN, MS, FNP  
Katharyn Daub, MS, RN, EdD  
Jomel Duldulao, Public Member  
Olivia Kim, LPN, RN, BSN  
Judy Kodama, MS, RN, MBA, CNML.  
Tammie, Napoleon, DNP, APRN
- Members Excused: Thomas Joslyn, MS, CRNA, Vice Chair
- Staff Present: Lee Ann Teshima, Executive Officer ("EO")  
Shari Wong, Deputy Attorney General ("DAG")  
Nohelani Jackson, Secretary
- Guests: Lei Fukumura, Special Deputy Attorney General  
Dean Yamamoto, Dept. of Public Safety, Narcotics Enforcement Division  
Carrie Oliveira, Hawaii State Center for Nursing  
Liane Muraoka, Hawaii State Center for Nursing  
John Winnicki, Attorney, Deely King Pang & Van Etten  
Sue Tedford, National Council of State Boards of Nursing, Nurse License Compact  
Jim Puente, National Council of State Boards of Nursing, Nurse License Compact
- Call to Order: The Chair called the meeting to order at 8:36 a.m. at which time quorum was established.

Chair's Report:

**Announcements/Introductions**

The Chair asked the audience to introduce themselves.

**Approval of the Previous Minutes – January 4, 2018**

The Chair called for a motion in regard to the minutes of the January 4, 2018 meeting.

There being no discussion or amendments, upon a motion by Ms. Boyer, seconded by Ms. Daub, it was voted on and unanimously carried to approve the minutes of the January 4, 2018 meeting as circulated.

Chapter 91, HRS  
Adjudicatory Matters:

At 8:39 a.m. the Chair called for a recess to the meeting to discuss and deliberate on the following adjudicatory matter:

In the Matter of the License to Practice Nursing of **Miki Villaverde, RNS-LIC-2017-001**, Hearings Officer's Findings of Fact, Conclusions of Law, and Recommended Order, Notice of Opportunity to Present Oral Arguments, Petitioner's Exceptions to Hearings Officer's Findings of Fact, Conclusions of Law, and Recommended Order; Exhibits "1" – "2"; Certificate of Service, Respondent's Statement in Support of the Hearings Officer's Findings of Fact, Conclusions of Law, and Recommended Order; Certificate of Service; Transmittal Memorandum indicating Request for Oral Argument and Board's Final Order

After hearing from Mr. Winnicki, attorney for respondent, Ms. Villaverde, via conference call, and Ms. Fukumura, Special Deputy Attorney General, upon a motion by Ms. Boyer, seconded by Ms. Kodama, it was voted on and unanimously carried to approve the Board's Final Order.

In the Matter of the License to Practice Nursing of **Shaina K. Kaku, RNS 2017-62-L**, Settlement Agreement Prior to Filing of Petition for Disciplinary Action and Board's Final Order; Exhibits "A" and "B"

Upon a motion by Dr. Napoleon, seconded by Ms. Kodama, it was voted on and unanimously carried to approve the Board's Final Order.

In the Matter of the License to Practice Nursing of **Tina E. McIntosh, R.N., RNS 2017-59-L**, Settlement Agreement Prior to Filing of Petition for Disciplinary Action and Board's Final Order; Exhibits "1" through "3"

Upon a motion by Dr. Napoleon, seconded by Ms. Boyer, it was voted on and unanimously carried to approve the Board's Final Order.

In the Matter of the License to Practice Nursing of **Cheese B. Dela Cruz, RNS 2013-34-L**, Proposed Board's Final Order

Upon a motion by Ms. Karen, seconded by Ms. Kodama, it was voted on and unanimously carried to approve the Board's Final Order.

In the Matter of the License to Practice Nursing of **Mergeline A. Berueda, RNS 2015-27-L** – Compliance with Board’s Final Order Approved by the Board on November 2, 2017

It was the consensus of the Board to approve Patricia Mosher as the monitor for case RNS 2015-27-L.

In the Matter of the License to Practice Nursing of **Lorilyn F. Wandasan, RNS 2015-28-L** – Compliance with Board’s Final Order Approved by the Board on November 2, 2017

It was the consensus of the Board to approve Patricia Mosher as the monitor for case RNS 2015-27-L.

Following the Board’s review, deliberation, and decision in these matters, pursuant to Chapter 91, HRS, the Chair announced that the Board was reconvening its scheduled meeting at 10:14 a.m.

Executive Session:

At 10:14 a.m., upon a motion by Dr. Napoleon, seconded by Ms. Kodama, 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 10:23 a.m. upon a motion by the Chair, seconded by Dr. Napoleon, it was voted on and unanimously carried to move out of executive session.

Applications:

**Licensed Practical Nurses**

Ratification List

Upon a motion by the Chair, seconded by Ms. Kodama, it was voted on and unanimously carried to ratify the attached list of LPNs – 19062 - 19088

**Registered Nurses**

Ratification List

Upon a motion by the Chair, seconded by Ms. Kodama, it was voted on and unanimously carried to ratify the attached list of RNs – 88371 - 88429.

RN Applicants

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

Joseph F. Hee  
Ashly Mayhon

Upon a motion by the Chair, seconded by Ms. Kodama, it was voted on and unanimously carried to deny the following applications pursuant to HRS 457-7(b)(2):

Mark D. Sorenson

**Advanced Practice Registered Nurse (APRN)**

Ratification List

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

Vice Chair's Report:

No report.

Executive Officer's Report:

**Conferences/Seminars/Meetings**

2018 NCSBN Annual Institute of Regulatory Excellence Conference, January 23-25, 2018, San Francisco, CA

The Chair and Ms. Daub reported on their attendance. The Chair reported that there were four fellow presentations. Ms. Daub reported that there were panel discussions on "hot" topics such as faculty shortage, clinical scarcity and the next generation NCLEX to name a few.

2018 NCSBN Midyear Meeting, March 5-6, 2018, Chicago, Illinois

The Chair, Mr. Duldulao and Ms. Kodama will be attending.

2018 NCSBN APRN Roundtable, April 10, 2018, Rosemont, Illinois

Ms. Napoleon attending.

2018 NCSBN IT/Operations Conference, May 15-16, 2018, Albuquerque, New Mexico

Board staff will be attending.

2018 NCSBN Discipline Case Management Conference, June 7-8, 2018, Denver, Colorado

Mr. Nakamura, RICO Staff Attorney will be attending.

2018 NCSBN Annual Meeting, August 15-17, Minneapolis, Minnesota

The Vice Chair, Ms. Kim and Ms. Boyer will be attending. Ms. Napoleon said she will check if she is available to attend.

2018 NCSBN NCLEX Conference, September 24, 2018, Charlotte, North Carolina

Ms. Boyer said she will check if she can attend.

2018 NCSBN Scientific Symposium, October 24, 2018, Chicago, Illinois

EO attending.

### **2018 Legislature**

HB 1967/SB 2298 Relating to Healthcare Preceptor Tax Credits

This bill allows advanced practice registered nurses, physicians, dentists, psychologists, pharmacists, and social workers to receive tax credits for acting as preceptors in volunteer-based supervised clinical training rotations provided to eligible students that enable the students to obtain an eligible healthcare professional degree or certificate. Establishes the Preceptor Credit Assurance Committee to issue certificates to volunteer preceptors upon verifying that the volunteer preceptors meet the requirements of the tax credit.

The EO stated that the Board discussed a draft of this bill at their January meeting.

After some discussion, it was the consensus of the Board to support this measure.

SB 2727 Relating to Medical Aid in Dying

This bill establishes a medical aid in dying act that establishes a regulatory process under which an adult resident of the State with a medically confirmed terminal disease may obtain a prescription for medication to be self-administered to end the patient's life.

The EO stated that she is tracking this bill for now.

HB 2347/SB 2774 Relating to Insurance

This bill amends various portions of the Hawaii Insurance Code under Hawaii Revised Statutes title 24 to update and improve existing Insurance Code provisions.

The EO stated that this bill amends the insurance code by deleting specific language pertaining to APRNs and creating a new definition for health care provider that would include APRNs and other health care practitioners to be reimbursed for practicing within their scope of practice.

It was the consensus of the Board to support this bill.

HB 1906/SB 2491 Relating to Healthcare Workers

This bill makes intentionally or knowingly causing bodily injury to certain health care workers a class C felony.

After some discussion, it was the consensus of the Board to support this measure.

SB 2718 Relating to Cannabis for Medical Use

Amends the reciprocity program, subject to certain safeguards, reporting and transparency requirements, and payment of a visiting patient certifying fee. Extends the maximum period of validity of a qualifying patient's written certification of a debilitating medical condition. Allows a bona fide physician-patient or advanced practice registered nurse-patient relationship to be established via telehealth. Adds certain devices that provide safe pulmonary administration to the list of medical cannabis products that may be manufactured and distributed. Increases the tetrahydrocannabinol limit per pack or container of certain manufactured cannabis products. Exempts from the background check requirement employees of a dispensary or subcontracted production center or retail dispensing location without direct access, contact, or exposure to any cannabis or manufactured cannabis product. Conditions the department of health's mandatory disclosure of information and documents of dispensaries and production centers, for purposes of verifying qualifying patient information, only upon receipt of a legally authorized subpoena.

The EO stated that she is tracking this bill for now.

HB 2375 & SB 2802 Relating to Temporary Disability Insurance

Permits advanced practice registered nurses to certify an employee's disability. Increases the penalty an employer is assessed for failing to submit timely wage and employment information. Permits filing of an appeal of a decision related to temporary disability insurance at the various offices of the Department of Labor and Industrial Relations throughout the State. Allows the department to send notices of hearing electronically or by first-class mail. Clarifies that when the notice of hearing cannot be delivered to a party in the appeal, the notice may be given by online posting on the department's webpage. Allows the parties to a hearing to appear in person, via telephone, or by other communication devices.

After some discussion, it was the consensus of the Board to support sections of the bill pertaining to the recognition of APRN's scope of practice.

SB 2275 Relating to Mandatory Reporting Requirements

Requires certain health care professionals, health care employees, social workers, and law enforcement employees or officers to report suspected cases of labor trafficking or sex trafficking.

The EO stated that she is tracking this bill for now.

The EO stated that she is tracking the following bills:

- SB 2211 Relating to Concussions
- HB 2218 Relating to Voluntary Assisted Dying
- SB 2407 Relating to Medical Cannabis
- SB 2718 Relating to Cannabis for Medical Use
- SB 2294 Relating to the Licensure of Midwives

### **Amendments to Title 16, Chapter 89 – Status Report**

The EO reported that she is working on the memo to the Governor and also working for Licensing Branch to ensure a streamline process for the additional NPDB requirement.

### **Nursys – Status Report**

The EO reported earlier that the Department’s IT personnel are working on how to get our information to Nursys.

### **Continuing Competency**

#### 2019 Continuing competency requirements and retired nurses

The Board discussed the following email:

I am a retired nurse who worked many years in the ICU. I am now 73 and will be 75 in 2019 and would like to continue working in the present part time job I have but do not want to pay the money to get CEU's that will not benefit myself in my present job. I am an NAE for Prometric and do evaluations to certify Nurse Aides. The present requirement will put a hardship on me and will not help me in anyway to improve myself in my present situation. Is there some way that the older retired nurses can work and contribute to our profession without the present required CEU's?

During the discussion, the Board reviewed the Continuing Competency booklet.

After further discussion, it was the consensus of the Board to refer the nurse to the Continuing Competency booklet for information on possible exemptions and other learning activity options. The Board also recommend that the nurse search for “free” continuing education courses online that would meet the continuing education requirement.

#### Correspondence:

#### **NCSBN**

#### Legislative Updates

The EO reported on the following:  
Legislative Updates

- 1/12/18 – Bills sent to the Governor: NJ – makes changes to prescribing requirements for opioids, including the use of prescription monitoring information. The bill also allows certain APRNs to dispense narcotic drugs for maintenance or detoxification treatment if their collaborative agreement includes the physician's approval for them to do so.

Bills introduced:

**Compacts**

- CO S 27, NJ A 1583, and A 1597 adopt the eNLC.
- WV H 2521 adopts the APRN Compact.
- GA S 325 and IN H 1153 adopt the Interstate Medical Licensure Compact.
- NE L 894, SC H 4486, and SC S 762 adopt the EMS Licensure Compact (REPLICA).
- NJ A 1598 enters New Jersey into the Physical Therapy Licensure Compact.
- CO H 1017 adopts the Psychology Interjurisdictional

**APRNs**

- AL H 102 extends the state income tax credit for rural physicians to CNPs who live and practice in rural communities.
- AL S 46 grants CNPs, CNMs, and PAs signature authority similar to that of a physician.
- FL H 1337 and S 1594 make changes to a variety of statutes related to APRNs, including title, APRN licensure instead of certification, and certain licensure requirements. The bills also require CNSs to be regulated as APRNs.
- FL H 973 and S 708 grant PAs and APRNs signature authority similar to that of a physician. APRNs must be practicing within a collaborative agreement and under supervision.
- IN S 410 changes title from APN to APRN and changes APRN licensure requirements, including certification, education, and RN licensure.
- NE L 979 authorizes APRNs and PAs to render expert opinions on matters within their scope of practice.
- NJ A 854 authorizes APRNs with 24 months or 2,400 practice hours to prescribe outside of a collaborative agreement.
- SC H 4487 authorizes CNMs and CNSs to prescribe controlled substances. The bill also expands the list of controlled substances that PAs and CNPs can prescribe.
- SC H 4529 authorizes APRNs to perform delegated medical tasks via telemedicine.
- TN S 1515 changes references to the professional relationship between APRNs and physicians from supervisory to collaborative.
- WA H 2264 and S 6067 allow the granting of and set requirements for hospital privileges for APRNs and PAs.

**Education**

- NY S 7320 and A 8952 allow an exemption from the BSN in 10 law for licensees who are unable to complete a BSN program due to lack of access to educational programs. The bill also requires a commission to study the impact of the BSN requirement.



- o NJ A 859 requires newly licensed professional nurses to obtain a BSN within 10 years of initial licensure.
- o NJ A 853 creates a process for county colleges to offer BSN programs.
- o MS H 436 requires the Community College Board to establish an online nursing education program to allow LPNs to obtain an associate degree in nursing.
- o MS H 721 transfer the authority of establishing accreditation standards for LPN schools from the Community College Board to the Board of Nursing.

#### **Medical Marijuana**

- o MS S 2261 authorizes the medical use of marijuana by patients with debilitating medical conditions under a physician's supervision.
- o NY A 8915 expands the definition of "practitioner" for the prescribing of medical marijuana.
- o KY H 166 and VA H 974 allow health care practitioners or physicians to recommend the use of medical marijuana to qualifying patients.

#### **Criminal Histories**

- o NE L 924 requires criminal background checks for applicants for initial nurse licensure, multistate licensure, or licensure by endorsement.
- o FL H 1041 authorizes individuals to seek a declaratory statement from an agency concerning the effect of their criminal background on their eligibility for occupational licensure. The bill also makes changes to the convictions that can restrict certification of CNAs.
- o IN H 1146 creates a certificate of employability for individuals convicted of misdemeanors and certain felonies to assist with employment opportunities and occupational licensing.
- o MS H 775 and WY S 42 make changes to the consideration by a licensing board of an applicant's prior convictions.

#### **Board of Nursing**

- o AL H 65 and S 97 immunize the Board of Nursing and its members from liability under state and federal antitrust laws for the adoption of certain potentially anticompetitive rules.
- o AL H 64 and S 96 would allow Board of Nursing investigators who meet certain standards to exercise the power of law enforcement officers when investigating alleged violations of the nurse practice act. This power excludes the power to make arrests.
- o SD H 1020 removes Board of Nursing authority over the regulation of medical assistants. Medical assistants will now be regulated solely by the Board of Medicine.

#### **Prescribing**

- o FL H 21, S 8, and S 458 provide that boards must require continuing education on the prescribing of controlled substances for licensure and/or licensure renewal. The bills also make changes to various prescribing and dispensing requirements, including the use of prescription monitoring information.
- o WA H 2325 and S 6028 require prescribers to check prescription monitoring information prior to issuing a prescription for an opioid of benzodiazepine.

- o NJ AR 25 urges licensing boards, including the Board of Nursing, to implement continuing education requirements related to opioids.

**Other Notable Bills**

- o AZ S 1031 prohibits the punishment of a health professional in the event a patient declines certain treatment procedures or recommendations.
- o GA H 653 and VA H 456 remove the requirement that occupational licenses must be suspended for nonpayment of default on a loan repayment.
- o FL H 1083, FL S 638, NJ A 1470, and WV H 2085 require a staffing plan with specific nurse-to-patient ratios for health care facility units.
- o FL S 742 reclassifies assault and battery offenses committed on health care providers.
- o FL H 81, FL S 628, IA H 2010, VA H 157, and WA H 2257 prohibit the requirement of certain continuing education or maintenance of certification as a condition for licensure or license renewal for physicians.
- o NJ S 391 and A 879 prohibit the use of the title “nurse” by an unlicensed individual.
- o NJ A 2013 requires health care facilities to report to the appropriate licensing board certain information about the conduct and/or disciplining of their health care staff.
- o NJ A 480 shortens the statute of limitations for malpractice actions to two years for certain licensees, including nurses and physicians.
- o NJ A 373 waives licensing fees for veterans and veterans’ spouses if the applicant holds a current license in a state with equivalent standards.
- o VA H 533 requires the Department of Veterans Affairs to promote awareness among veterans of the acceptance of military training and education by regulatory boards.

**eNLC**

Article on eNLC to be implemented Jan. 19, 2018

eNLC infographics

NLC – Implementation Checklist

There was a brief presentation by Jim Puentes the Director of the Nurse Licensure Compact of NCSBN and Sue Tedford, Chair of the Compact Commission on the eNLC.

The Chair welcomed Mr. Puentes and Ms. Tedford.

Mr. Puente reported that:

- o In the original compact, there were 25 states participating and was at a stalemate, however since converting over the enhanced compact, they have 29 states participating with 9 additional pending states.
- o A current map of participating states can be found on the [nursecompact.com](http://nursecompact.com) website. In addition, this is the site nurses and stakeholders may go to submit letters advocating for the compact to their state.

- The ultimate goal is to have all 50 states in the compact so that every nurse would have a multi-state license who meets the requirements and therefore practice would be regulated by some state and the nurse would have met uniform licensure requirements. Thus, what it takes to get a license in one state is the same in another compact state.
- Some of the stakeholders that benefit from the enhanced compact include but are not limited to nurses who participate in telehealth, nurse educators who are required in some states to be licensed in the state they teach, and military spouses.
- For Nursing State Boards, the compact's statutory language which gives the Board the authority to share investigated disciplinary information about licensees with other compact states from the point of complaint forward. Therefore, you get a heads up from other State Board's when someone is under investigation through the NURSUS system. Therefore, NURSUS is a mandatory item in the legislation, that a state joining the compact must also be a full participant in NURSUS.
- In comparison to the original compact the Enhances Compact ("eNLC") requires criminal background checks and uniform licensure requirements.
- NURSUS serves as a communication vehicle. When someone is a participant in an alternative to discipline program, their multi-state license changes to a single state license (if still allowed to practice). Therefore, they are restricted to practice in their home state during the dependency on the alternate to discipline program which may be substance abuse or mental abuse related.
- The 11 uniform requirements to obtain a multi-state license are:
  1. The applicant must meet your State requirements for licensure.
  2. Graduating from a qualifying education program.
  3. Passing the NCLEX.
  4. Applicant cannot have active discipline.
  5. Submit to a state and federal criminal background check (fingerprint based).
  6. You cannot be a participant in an alternate to discipline program. (The application now asks this question)
  7. You need a valid social security number.
  8. You cannot have any misdemeanors related to the practice of nursing, however this is not an absolute bar and dealt with by a case to case basis by the Board of Nursing.
  9. Passing an English proficiency exam if the applicant is a foreign graduate.
  10. Having no prior felony convictions. They can still obtain a single state, just not multi-state license.

### **Self Help Articles**

#### 4 Stupidly Simple Habit Changes to Lower Your Work Stress This Year

The EO reported this article included recommendations on 4 things you can do to lower one's stress, one is deleting an app you use at least once daily, an app, especially a game app can suck your time without adding value; another recommendation was to set a "get ready for bed" alarm...loss of sleep is a huge drain on productivity and a big cause of work-related stress; the third recommendation was to keep water nearby...upping your water intake can improve how you function at work; and the fourth recommendation was to sit less at work...self-explanatory, but may not apply to pharmacists who maybe on their feet all day.

#### November 2017 Working Solutions

Articles in the November 2017 issue included "Don't be a bystander to workplace harassment"; "Workplace safety: just don't fall"; "4 A's of stress management (avoid, alter, adapt and accept)"; "Dignify differences in others"; "Take steps to overcome worry, fear, and chronic stress"; "To do list"; and "Breast cancer awareness".

#### Chocolate is on track to go extinct in 40 years

The EO reported that she came across this article and wanted to share with the Board members.

**2017 Gallup Poll** – Nurses ranked #1 for honesty and ethical standards in a profession for 16<sup>th</sup> consecutive year

### **Justice Department Issues Memo on Marijuana Enforcement**

The DOJ issued a memo on federal marijuana enforcement policy announcing a return to the rule of law and the rescission of previous guidance documents. Since the passage of the Controlled Substances Act in 1970, Congress has generally prohibited the cultivation, distribution, and possession of marijuana. Attorney General Jeff Sessions directs all U.S. Attorneys to enforce the laws enacted by Congress and to follow well-established principles when pursuing prosecutions related to marijuana activities. This return to the rule of law is also a return of trust and local control to federal prosecutors who know where and how to deploy Justice Department resources most effectively to reduce violent crime, stem the tide of drug crisis and dismantle criminal gangs.

### **Scope of Practice**

APRN and Cosmetic procedures, i.e. administration of neurotoxins such as Botox and Dysport administration of hyaluronic acid application of topical dermatologic treatments collagen induction therapy procedures aka micro needling

The Board discussed the following email inquiry:

I wanted to inquire about the scope of APRNs in Hawaii regarding cosmetic procedures. I have seen previous inquiries regarding RN scope but wanted to know if there were any limitations to procedures that would be considered “cosmetic”. Specifically, in regard to the following: administration of neurotoxins such as Botox and Dysport administration of hyaluronic acid application of topical dermatologic treatments collagen induction therapy procedures (aka micro needling)

After some discussion, it was the consensus of the Board that although administering drugs fall within the scope of practice of an APRN, the procedures may require an additional license, i.e. esthetician and also refers the APRN to HRS §457-2.7 that states:

**§457-2.7 Advanced practice registered nurse.** (a) Practice as an advanced practice registered nurse means the scope of nursing in a category approved by the board, regardless of compensation or personal profit, and includes the registered nurse scope of practice. The scope of an advanced practice registered nurse includes but is not limited to advanced assessment and the diagnosis, prescription, selection, and administration of therapeutic measures including over the counter drugs, legend drugs, and controlled substances within the advanced practice registered nurse's role and specialty-appropriate education and certification.

(b) The advanced practice registered nurse's scope of practice supersedes the registered nurse's scope of practice. Advanced practice registered nurses shall practice within standards established or recognized by the board and be guided by the scope of practice authorized by this chapter, the rules of the board, and nursing standards established or recognized by the board including but not limited to:

- (1) The National Council of State Boards of Nursing Model Nursing Practice Act, Article II, Scope of Nursing Practice, Section 4; and
- (2) The National Council of State Boards of Nursing Model Nursing Administrative Rules, Chapter Two, Standards of Nursing Practice, Section 2.4.1;

provided that NCSBN shall have no legal authority over the board and shall have no legal authority or powers of oversight of the board in the exercise of its powers and duties authorized by law.

(c) An advanced practice registered nurse shall comply with the requirements of this chapter; recognized limits of the advanced practice registered nurse's knowledge and experience and planning for the management of situations that exceed the scope of authorized practice; and consult with or refer clients to other health care providers, as appropriate.

#### RN and Transport Restraints

Board discussed the following email:

I work for the State of Hawaii, under the Department of Health, at the Hawaii State Hospital, accredited by the Joint Commission under national standards of care.

I provide psychiatric and medical care for a mental rehabilitation unit, under my Registered Nurse license.

I have legal concerns regarding changes on procedures recently implemented at my work place, and how that may affect my patients, and ultimately, my nursing license.

Since the hospital had an elopement event that became National news, nurses have been told that the governor Ige determined that all patients to be confined to their units. The treatment mall where we offer classes have been shut down until the hospital grounds get completely fenced (which can take 6 months minimum).

The Administration, directed by Mr. May and Psychiatrist Doctor Richards, stated that "all patients are considered high elopement risk" and sent a directive that all patients must be restrained if going anywhere out of the units. For on grounds appointments such as medical clinics and labs on grounds to use waist wrist restrains and for of grounds to use ankle restraints.

Doctors refuse to write these orders for transport restraints justifying that is not a clinical restraint order. Doctors do not want the responsibility. Since then, the Administrator Mr. may sent an directive that all patients to be restrained for transport DO NOT NEED A DOCTOR ORDER. Nurses have been now obligated to do that.

I am concerned about the legality of the Administration directives given to RNs demanding to restraint ALL patients for transport on and off grounds under the justification "all patients are considered high elopement risk", despite patients' individual psychosocial risk assessment report that may state "low risk for elopement".

The Doctors are refusing to write the orders for transport restraints, and ADM sent another directive and an unclear "P&P" stating that doctor orders are not necessary for transport restraints on and off grounds.

We are told many things verbally only, including that "ADM has been consulting with attorneys and consultants" regarding to this matter, and has been justifying their decision on the base of the word right to "detain" patients per court order. It seems that argument is legally debatable as we are accredited as a hospital, under Department of Health, not under Department of Public Safety (AKA Detention)

The administration brought staff from the Oahu Correctional Detention center to observe and advise how we conduct our duties at Hawaii State Hospital. Again, that does not make sense as we are under different accreditation. We operate under Department of health and Joint Commission, not under Department of safety.

I asked my superiors what the Joint Commission position is on this, and the verbal answer was that "the Joint commission is only for funding of Medicare and Medicaid". I asked who accredited our hospital and I was told "The state". This sounds very inaccurate. RNs have not seemed any document from the Joint Commission clearing this transport restraint practice legally.

Bottom line, RNs are receiving blank directives from ADM to restraint all patients, without a proper risk assessment for elopement, and without Doctors orders, forced to delegate "assessment" of restraints to transporter/pmas (who can be away from RNs for hours).

ADM justifies their decision saying that the Governor and Director of DOH originated these directives, and ADM has consulted attorneys to protect themselves. My concern adds up to the fact these documents are not presented to the RNs, and if something goes wrong ADM may not hesitate to blame and punish floor staff and even put our RN licenses in jeopardy.

Below are some of emails exchange expressing my concerns to my superiors and their responses.

Of course, all of these emails are to be considered confidential between Director Lee Ann Toshiba and me and the Union representatives included on this email. I apologize if I repeated myself through this email, but I want to make sure it is as clear as possible.

Please clarify the legality of these procedures and possible liability spilling over RNs and risks for our license. Please advise what to do.”

The EO reported that she received an email confirmation from the nurse to share her email with the Board and stated that she spoke with the nurse and informed her that if the facility is issuing the mandate the following section may apply:

**§457-1.5 Practice of nursing.** (a) Nursing is a scientific process founded on a body of professional knowledge. It is learned profession based on an understanding of the human condition across the lifespan of a client and the relationship of a client with others and within the environment. It is also an art dedicated to caring for others. The practice of nursing means assisting clients in attaining or maintaining optimal health, implementing a strategy of care to accomplish defined goals within the context of a client-centered health care plan, and evaluating responses to nursing care and treatment. Nursing is a dynamic discipline that is continually evolving to include more sophisticated knowledge, technologies, and client care activities. Nursing applies evidence-based practice to promote optimal client outcomes.

**(b) The scope of nursing practices established in this chapter and by the rules of the board shall serve as general guidelines and are not intended to address the appropriateness of the use of specific procedures in any particular work setting or to grant permission to implement specific procedures in any particular work setting.**

The Board determined that although restraints may be necessary under certain circumstances, the nurse practice act does not prohibit or address the use of restraints on a patient.

Consequently, it was the Board’s informal interpretation that HRS §457-1.5(b) may be applicable to this situation.

In accordance with HAR § 16-201-90, the above interpretation is for informational and explanatory purposes only and based solely on the information provided. It is not an official opinion or decision and therefore not binding on the Board.

Hawaii State

Center for Nursing:

Ms. Oliveira reported that the Center for Nursing provided testimony in support of the Preceptor Tax bill, so they will be monitoring it. Also, the Center of Nursing will be doing their Education Compacity Survey and will expect to have a report about 12 weeks from today to see what their productions is for academic programs.

Next Meeting:

Thursday, March 1, 2018  
8:30 a.m.  
Queen Liliuokalani Conference Room  
King Kalakaua Building, 1st Floor  
335 Merchant Street  
Honolulu, Hawaii 96813

The Chair announced the next scheduled Board meeting and asked if everyone was available to attend.

Everyone acknowledged they could attend.

Adjournment:

There being no further business to discuss, the meeting was adjourned at 12:04 p.m.

Reviewed and approved by:

          /s/ Lee Ann Teshima          

Lee Ann Teshima,  
Executive Officer

Taken by:

          /s/ Nohelani Jackson          

Nohelani Jackson, Secretary

LAT/nj

2/9/18

[ X ] Minutes approved as is.

[ ] Minutes approved with changes; see minutes of \_\_\_\_\_.



**ADVANCED PRACTICE REGISTERED NURSES**

**RATIFICATION LIST**

**February 1, 2018**

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APRN ONLY

**Current Requirements:**

Maryann L. Kaiwi-Salvador, Family NP  
Jana L. Sanders, Family NP  
Kristiana K. Lazarova, Family NP  
Rachael Misitano, Family NP  
Courtney Covert, Family NP  
Jeong J. Kim, Family NP  
Mark A. Mendoza, Family NP  
Carolyn Howard Ellison, Family NP  
Carly Correa, Family NP  
Kimberly Kuklis, Family NP

APRN W/ PRESCRIPTIVE AUTHORITY

Maryann L. Kaiwi-Salvador, Family NP  
Jana L. Sanders, Family NP  
Kristiana K. Lazarova, Family NP  
Rachael Misitano, Family NP  
Kelley M. Maguire, Adult NP  
Courtney Covert, Family NP  
Jeong J. Kim, Family NP  
Mark A. Mendoza, Family NP  
Carolyn Howard Ellison, Family NP  
Carly Correa, Family NP  
Kimberly Kuklis, Family NP

### LPN RAT List for 02/01/18

LPN 19062 SORTO KATHERINE L  
LPN 19063 RONDARES MARIFE L  
LPN 19064 BECERRA DANIELLE  
LPN 19065 LEANO DAN REBB  
LPN 19066 PEREZ MYRA M  
LPN 19067 TORRES SAMUEL JAMES  
LPN 19068 MARAJH KARAN E  
LPN 19069 PELEN SHANISE ANN B  
LPN 19070 SAJUS MAGDALA  
LPN 19071 SAVOY ALISHA  
LPN 19072 BALDORIA LIEZEL ANN  
LPN 19073 COCHRAN KATHRINE N  
LPN 19074 ASHLEY ROBERT B  
LPN 19075 NELSON ANN E  
LPN 19076 VALLENTE RUBELYN M  
LPN 19077 CINEUS MICHAEL  
LPN 19078 KRULL MELISSA A  
LPN 19079 JOSEPH DOMINIQUE F  
LPN 19080 HERNANDO RAENETTE M  
LPN 19081 AIONA CHE-UNG JULIAN  
LPN 19082 CARTY SONIA  
LPN 19083 CARMINE SHELENA K  
LPN 19084 GREEN SANDRA E  
LPN 19085 YOUNG ROSE  
LPN 19086 GRAHAM TIA G  
LPN 19087 RENE ROSE D F PLATEL  
LPN 19088 PHANORD ALIANE

## RN RAT List for 2/1/18

RN 88371 WILLIFORD JANETTE S  
RN 88372 VERGARA ALMIRA B  
RN 88373 WARD YOLANDA M  
RN 88374 RAMOS MARY KIM A V  
RN 88375 CRECELIUS JASON  
RN 88376 SMITH SHELBY L  
RN 88377 PARDO SHERENE S  
RN 88378 ZANO DIANA  
RN 88379 PIERRE JEAN R  
RN 88380 RUALIZO KATHLEEN MAE  
RN 88381 MARQUES JANINE E  
RN 88382 MITCHELL LAURA E  
RN 88383 ELLEBY KATHRYN K  
RN 88384 KAMENAR ELLEN N  
RN 88385 STOKES ANGELA M  
RN 88386 SCHMIDT STEPHANIE D  
RN 88387 STANLEY MARY B  
RN 88388 ROLLE TALERIA L  
RN 88389 NAKAGAWA KRISTEN R  
RN 88391 PROPHETE CHANTALE  
RN 88392 TARPY JULIA K  
RN 88393 BRATTRUD ANNIEBELLE  
RN 88394 KOIDE JODIE K T  
RN 88395 SHODIYA OYEYEMI A  
RN 88396 GARCIA PRISCILLA V  
RN 88397 FERNANDEZ EMILY K  
RN 88398 JOHNSON THERESA P  
RN 88399 GENDRON LESLIE D  
RN 88400 OROSCO MELITO M  
RN 88401 KRUGER PATRICIA  
RN 88402 WRZESZCZ TAYLOR L  
RN 88404 PALACIOS LUZ M  
RN 88405 GENOVIA MANAIAOKALAN  
RN 88406 GALLARDO MICHAEL G  
RN 88407 DURASSAINT REYNETH  
RN 88408 BRASWELL JOHN H  
RN 88409 ACSAY VIOLA A B  
RN 88410 AREGBESOLA JESSICA  
RN 88411 MURRAY JOHN P  
RN 88412 CANEPA NICOLE C  
RN 88413 HARPER BRETT T  
RN 88414 DUNN BETHANY L  
RN 88415 NOCON REANNA S  
RN 88416 WAKJIRA THOMAS G  
RN 88417 MOSELEY DEBORAH M

RN 88418 TOSSAS NANCY  
RN 88419 MARYMOL JOHNCY  
RN 88420 MILLO RHODORA M  
RN 88421 PIERRE LOVANY  
RN 88422 SEID JEMAL A  
RN 88423 TERESIAS ROCHEMY  
RN 88424 VASQUEZ LORNA G  
RN 88425 MADRAZO ANNA GRACE F  
RN 88426 NERA BANUAR T  
RN 88427 SAWAI BROOKE YAEKO  
RN 88428 LAGUNDI IRISH MAE C  
RN 88429 MERCADO JOHN M