

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 4, 2021

Time: 8:30 a.m.

Place: Virtual: ZOOM link: <https://dcca-hawaii-gov.zoom.us/j/95220263932>
ZOOM Phone Number: (669) 900-6833
Meeting ID: 952 2026 3932

Members Present: Carrie Oliveira, Chair
Karen Boyer, RN, MS, FNP
Katharyn Daub, MNEd, EdD, RN
Jomel Duldulao, Public Member
Judy Kodama, MSN, MBA, RN, CNML
Tammie Napoleon, DNP, APRN, PPCNP-BC
Benjamin Ramos, RN
Amy Stone Murai, APRN

Members Excused: Olivia Kim, BSN, BS, RN, LPN, NHA, Vice Chair

Staff Present: Lee Ann Teshima, Executive Officer (“EO”)
Shari Wong, Deputy Attorney General (“DAG”)
Faith Nishimura, Secretary
Rochelle Araki, Secretary
Jenny Yam, Secretary
Alan Taniguchi, Executive Officer
Kerrie Shahan, Executive Officer
Christine Dela Cruz, Office Assistant
Stephanie Karger, Office Assistant

Guests: Linda Beechinor, Hawaii American Nurses Association
Kristina Cummings, Bayada
Grace Sugano, Bayada
Rhobertha Haley, Chaminade
Pamela Smith, Chaminade
Don Oliva, CE Broker
Dominek Campos
Joyce Della
386-237-4744
808-779-3001
808-348-9123

Virtual Meeting Instructions: The Chair provided information on internet and phone access for today’s virtual meeting and a short video regarding virtual meetings was played for attendees.

For purposes of this virtual meeting, the Chair will take roll call of the Board members to establish quorum and for motions that require a vote of the Board members.

Call to Order:

The Chair took roll call to establish quorum and excused the Vice Chair from today's meeting.

Quorum was established and the Chair called the meeting to order at 8:41 a.m.

Chair's Report:

Announcements

The Chair announced that the EO received the advocate award from the AANP and also thanked the staff for their work.

Approval of the Minutes of the November 5, 2020 Meeting

The Chair stated that the Board already approved the November 5, 2020 minutes at their January 7, 2021 meeting and due to a typo, approval of minutes of the January 7, 2021 meeting will be discussed at the March 4, 2021 meeting.

The Chair announced that the next agenda item is a short presentation by CE Broker and asked if Mr. Oliva was attending to raise his hand.

Staff reported that Mr. Oliva raised his hand. Mr. Oliva was promoted to a panelist and allowed to address the Board.

Presentation by CE Broker – Mr. Oliva

Mr. Oliva did a short presentation on the CE Broker and how they track and report CE activity for individual nurses at no cost to the nurse. He stated that nurses can "upgrade" for a fee. As for providers of CE, they submit their information for approval and CE Broker will compare provider/course information for specific Boards.

CE Broker also offers reports for BONs such as an audit dashboard that can create a random audit list.

Mr. Duldulao asked if CE Broker has a contract with NCSBN.

Mr. Oliva replied no.

The Chair referred to the audit reports and stated that unless 100% of the nurses took CE as their learning activity, then the audit report would not apply to Hawaii.

She also asked if a course is not offered through CE Broker, can the nurse provide the information on the course?

Mr. Oliva said yes, nurses can upload information on CE courses and providers and that the providers do not have to be registered with CE Broker.

The EO asked how many other BONs use CE Broker.

Mr. Oliva stated that there is approximately nine other BONs.

The EO asked what else is required by CE Broker besides the agreement.

Mr. Oliva stated that they would want a meeting with the Board staff to understand the State's laws and rules and would need a list of the licensees, license number and data transfer between CE Broker and the Board's data base.

There being no further discussion, the Chair asked if there was anyone attending who wanted to address the Board.

Staff reported that no one raised their hand.

The EO informed Mr. Oliva that she will set-up a meeting between the Chair, herself and Mr. Oliva to work out the details.

The Chair announced that the next agenda item was a report from the Education Committee's January 7, 2021 meeting and asked if there was anyone attending wishing to address the Board on this agenda item.

Staff reported that no one raised their hand.

At 9:07, Ms. Stone Murai joined the meeting after experiencing technical difficulties.

Education Committee:

Report and Recommendations of the January 7, 2021 Meeting

Ms. Daub reported on the following recommendations from the Education Committee's January 7, 2021 meeting:

Hawaii Nursing Programs- Annual Report

Recommendations from the Committee on the following nursing programs:

- Hawaii Community College – approval of the annual report
- Hawaii Pacific University – approval of the annual report
- Kapiolani Community College –approval of an updated annual report
- University of Hawaii – Hilo - approval of the updated annual report

Refresher/Remedial Course(s)

Florida Board of Nursing Remedial Courses – Temporary Authorization of Simulation Due to COVID-19

Continue to accept remedial courses approved by the Florida Board of Nursing

Applications

- Catherine E. Makeu - The Committee approved subject to receipt of transcripts received directly from the nursing program that indicates completion of nursing courses.
- Paula Flores Portillo – The Committee deferred the application as the information provided did not meet the requirements in HAR 16-89-10(1).
- Elucienne Charles – The Committee accepted the credentials evaluation indicating nursing education from Haiti was equivalent of graduation from a three-year program for RNs at an accredited hospital nursing school in the U.S.

The Chair asked if there was any discussion by the Board.

Seeing none, she asked for a motion to approve the recommendations from the Education Committee.

Upon a motion by Ms. Stone Murai, seconded by Ms. Kodama, it was voted on and unanimously carried to accept the recommendations from the Education Committee's January 7, 2021 meeting.

The Chair announced the next agenda item is new business.

New Business:

Correspondence

The Chair announced there was no correspondence and announced that the next agenda item under new business is the 2021 Legislature and asked if there was anyone attending wishing to testify or address the Board on this agenda item.

Staff reported that no one raised their hand.

2021 Legislature

The EO reported that there are quite a number of bills introduced for this 2021 session, especially regarding APRN practice and/or to recognize APRNs to perform psychiatric mental health assessments, aspiration abortions and medical aid in dying.

She stated that Ms. Stone Murai has been assisting in these bills and if anyone else was interested to do research, to let her know.

Scope of Practice Inquiries

APRNs – X-ray and Ultrasound

The Chair reported that the Board received the following email inquiry:

“Can APRNs take plain X-ray films in an outpatient setting (films are sent to radiologists for interpretation)? If additional training is required, what would this entail? Additionally, how might this be billed?”

Along these same lines, what training is required for an APRN to perform point of care ultrasound in the outpatient setting?”

Ms. Kodama stated that a radiologist must read the x-ray.

The Chair stated that reading the x-ray would require an assessment and interpretation and wasn't sure if this fell within an APRNs scope of practice.

Ms. Boyer stated that APRNs could probably do a “basic” interpretation but would need a radiologist to read and interpret the x-ray.

Ms. Stone Murai stated that through her research, HRS 466J-4 establishes the requirements for licensure of person practicing radiography and HAR 11-14-2 defines radiography as:

“Practice of radiography” means the imaging of anatomical structures, produced by the combined application of x-rays to the human body and the application of knowledge in the fields of anatomy, radiographic positioning, and radiographic technique, for the purpose of medical diagnosis, with strict adherence to principles of radiation protection. The practice of radiography also includes the modalities of mammography, computed tomograph, interventional technology, cardiac interventional technology, and bone densitometry.”

She also stated that HRS 466J lists persons exempt from radiography licensure and that Pas are included, but nurses are not.

Ms. Stone Murai also stated that while nurses and APRNs might acquire skills in x-ray interpretation, only the reading by a licensed radiologist is diagnostic and final and that she found no equivalent specifications/limitations in the nursing laws or rules regarding ultrasound and that APRNs would need to be trained and competent to perform ultrasounds. Women's health NPs and Midwives likely receive training on obstetrical ultrasound.

The Chair asked if there was anyone attending who wanted to address the Board or to add to this discussion.

Staff reported that no one raised their hand.

Consequently, it was the consensus of the Board that an APRN is not trained to "take" an x-ray, but may do a "preliminary" review but the final read of the x-ray must be performed by a radiologist and that an APRN could perform ultrasound provided the APRN has received the appropriate education and training.

The DAG commented that the Board should respond to the inquiry only.

Home Health Agency – LPNs PICC Dressing Changes and Blood Draws

The Chair reported that the second agenda item under Scope of Practice is from a home health agency that provides nursing services at the patient's home and often have PICC line IV (Central Line) that require dressing changes and blood draws and dressing changes are weekly and asking for clarification if this falls under the LPN scope of practice for home health care under "all aspect of care"?

The Chair reported that they also submitted their policies and procedures and asked if there was anyone attending who wanted to address the Board.

Staff reported that Grace Sugano raised her hand and asked if Ms. Sugano could be promoted to a panelist.

The Chair said yes.

Ms. Sugano stated that she is the clinical manager for Bayada and that they employ LPNs to provide home health services including PICC line dressing and that in order to perform this activity, the LPN must demonstrate competency in this area and follow the RN's plan of care.

The Chair stated that although the LPNs competency is observed by the RN's during the competency demonstration, there is no supervision at the patient's home.

Ms. Kodama stated that caregivers, including family members may do PICC line dressing of flush the line.

Ms. Stone Murai asked if the LPNs perform blood draws, how is competency determined.

Ms. Suguna explained that they have an annual competency skills lab.

Ms. Boyer stated that maybe a dressing change is okay but had concerns with blood draws.

Ms. Sugano stated that the LPNs are supervised by RNs.

The EO asked if an LPN was having “issues” with a blood draw, would they immediately contact the RN and how would the RN respond, via telephone or on-site visit?

Ms. Sugano stated that if the LPN encountered issues they would try to contact the nurse.

Ms. Kodama expressed concerns with an LPN and the central line.

Ms. Boyer stated that there are greater risk for flushing and access to the central line.

Staff reported that Ms. Linda Beechinor raised her hand and asked if she can be promoted to a panelist.

The Chair agreed.

Ms. Beechinor stated that as the Executive Director for the Hawaii American Nurses Association, their concern would be for the RN as a case manager who would be ultimately responsible.

The EO asked Ms. Sugano if she had utilized the Decision Making Framework to determine if an LPN could perform these activities and also if she was familiar with the definition of LPN scope of practice.

Ms. Sugano said yes.

The Chair reiterated that what she is hearing is that LPNs may do dressing changes, but had concerns with LPNs performing blood draws.

Mr. Duldulao stated that they are training the caregivers to do the flushing.

Ms. Boyer stated but there is no liability for the caregiver who is a family member.

Mr. Ramos stated that he had concerns with dressing changes, flushing and blood draws as they may require some kind of “assessment” which is not under the LPN's scope of practice.

After further discussion, it was the Board's informal interpretation that dressing changes were okay to be performed by an LPN, however, blood draws for PICC line may require some kind of “assessment” as an integral part of the procedure and for which does not under the scope of practice of an LPN.

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.

The Chair announced the next item under Scope of Practice and asked if there was anyone attending wishing to address the Board.

Staff report that no one raised their hand.

RN Compounding IV and Administering to Patient Pursuant to a Physician's Order/Prescription

The Chair reported that the Board received an email inquiry from an RN who is interested in opening an IV vitamin and hydration therapy mobile business on Kauai as an RN with an ordering physician's collaboration. It will consist of me mixing my own IV bag with vitamins, etc. and had a few questions:

1. Is it required to have a hood to mix ingredients into the IV bags?
2. Can I, as a registered nurse, mix these ingredients?
3. Is there a limit on how many I can mix before a hood is required?
4. Do I need a license? Would there need to be an inspection?
5. I will start as a mobile company until I can find office space; therefore, I would be mixing them in my home before my appointments.
6. Is there a certification class you would recommend?

The RN emailed that it is her initial take on this, that this is not a basic nursing task and may also involve compounding that may require a pharmacist/pharmacy but also emailed that she "would be mixing the vitamins to the fluids, technically that is not "compounding". And that "Nurses actually add medications to IV bags all of the time. So, I guess the question is up to how many could they do before a hood would be required."

She also asked if she receives "prescribed medical orders, are there any supervision requirements for the physician to be on-site?"

Also, when asked, "So will you be "compounding" the IV solutions pursuant to a medical practitioner's (i.e. MD, APRN) prescription or order?" She responded, "Yes, that's right".

The EO stated that she has emailed the FDA for more information and clarification if this is considered "compounding" because in October 2012, there was a serious outbreak associated with contaminated compounded drugs. A pharmacy in Massachusetts shipped compounded drugs that were contaminated with a fungus throughout the country, and these drugs were injected into patients' spines and joints. More than 750 people in 20 states developed fungal infections, and more than 60 people died. Approximately 14,000 patients received injections from the lots of contaminated drug product.

The EO wants to make sure that the Board has sufficient information to discuss this inquiry.

It was the consensus of the Board to defer this agenda item until more information/clarification is received from the FDA.

The Chair stated that the last item under Scope of Practice was asking if an APRN can start an IV business and asked if there was anyone attending who wants to address the Board.

Staff reported that no one raised their hand.

APRN IV Hydration Business

The Chair reported that the Board received an email inquiry from an APRN who wants to start an IV hydration business and that since this is similar to the previous inquiry, that this agenda item also be deferred until more information is received from the FDA.

The Chair announced that the next agenda item the Board will be review of the applications for nurse license by exam/endorsement and asked if anyone in attendance wanted to provide testimony or address the Board on any of the applications.

Staff stated that no one raised their hand.

The Chair asked for a motion to move into executive session.

Executive Session:

At 10:32 a.m., upon a motion by Ms. Boyer, seconded by Ms. Stone Murai, 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 10:50 a.m. upon a motion by Dr. Napoleon, seconded by Ms. Stone Murai, it was voted on and unanimously carried to move out of executive session.

Applications:

Ratification Lists

Upon a motion by the Chair, seconded by Dr. Napoleon, it was voted on and unanimously carried to approve the following ratification lists:

LPNs, license numbers 20023 – 20051 (28);
RNs, license numbers 99653 – 99962 (309); and
APRNs and APRNs with prescriptive authority

Registered Nurses

Applications for RN License

Upon a motion by Dr. Napoleon, seconded by Ms. Stone Murai, it was voted on with the Chair, Dr. Napoleon, Ms. Stone Murai, Ms. Daub, Mr. Duldulao, Ms. Kodama and Mr. Ramos voting yes and Ms. Boyer abstaining. The motion carried to approve the following application:

Meaghan H. Nagaji

Upon a motion by Dr. Napoleon, seconded by Ms. Boyer, it was voted on and unanimously carried to approve the following application:

Samra Ann Broderick

Upon a motion by Dr. Napoleon, seconded by Ms. Daub, it was voted on and unanimously carried to approve the following application:

John Gipson

The Board deferred the following application for additional information:

Cindy L. Stone

Request to Remove Conditions

Upon a motion by Dr. Napoleon, seconded by Ms. Stone Murai, it was voted on and unanimously carried to remove the monitoring/reporting requirements for the following application:

Daniel Greathouse

There being no further agenda items, the Chair announced the next meeting and asked if everyone was able to attend.

No one stated that they would not be able to attend.

Next Meeting: Thursday, March 4, 2021
9:00 a.m.
Virtual

Adjournment: With no further business to discuss, the Chair adjourned the meeting at 10:57 a.m.

Taken by:

/s/ Lee Ann Teshima
Lee Ann Teshima
Executive Officer

LAT

2/25/21

Minutes approved as is.

Minutes approved with changes; see minutes of _____