

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, December 2, 2021

Time: 9:00 a.m.

Place: Virtual: ZOOM link: <https://dcca-hawaii-gov.zoom.us/j/94328057113>
ZOOM Phone Number: (669) 900 6833
Meeting ID: 943 2805 7113

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
Benjamin Ramos, RN
Amy Stone Murai, APRN

Members Excused: Olivia Kim, BSN, BS, RN, LPN, NHA, Vice Chair
Tammie Napoleon, DNP, APRN, PPCNP-BC

Staff Present: Lee Ann Teshima, Executive Officer (“EO Teshima”)
Chelsea Fukunaga, EO (“EO Fukunaga”)
Shari Wong, Deputy Attorney General (“DAG”)
Marc Yoshimura, Secretary

Guests: Bradley Kuo, Legislative Coordinator, Hawai’i Association of Professional Nurses
Diane Hale
Liane Hussey, Hawaii State Center for Nursing
Linda Beechinor, Hawai’i American Nurses Association
Pamela Smith
Rhobertha Haley
Louis

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 excused the Vice Chair and Dr. Napoleon. After taking roll, quorum was established and she called the meeting to order at 9:07 a.m.

Chair's Report: **Announcements**

The Chair had no announcements except to thank the Board members, Board staff and dedicated attendees for their commitment and work this past year and that she is looking forward to a new 2022 in hopes that we can all meet "in-person".

The Chair stated that the next agenda item is the approval of the minutes from the November meeting and asked the members if they had any corrections or discussion.

Approval of the Minutes of the November 4, 2021 Meeting

There being no corrections or discussion, Chair called for a motion in regard to the minutes of the November 4, 2021 meeting.

Upon a motion by Ms. Stone Murai, seconded by Ms. Daub, it was voted on and unanimously carried to approve the minutes of the November 4, 2021 meeting as circulated.

2022 Board of Nursing Meeting Schedule

The Chair reported that the 2022 Board meeting schedule has been disseminated to the members and that the meetings will be held, as always, on the first Thursday of everyone month starting at 9:00 a.m. and that Board members should let the Board staff know in advance if they are unable to make any meetings.

Education Committee Report of the November 8, 2021 Meeting

The Chair read the following recommendations from the November Education Committee meeting:

1. Hawaii Nursing Programs

Annual Reports

Recommend approval of the following Hawaii nursing program's annual report:

- Chaminade University
- Hawaii Community College
- Kapiolani Community College
- Kauai Community College
- UH Maui College
- University of Hawaii at Manoa

Recommend deferral of approval of the following Hawaii nursing program's annual report for additional information:

- Hawaii Pacific University
- University of Hawaii at Hilo

Approval of New Administrator

- Luzviminda Miguel, Hawaii Community College

Faculty

- University of Hawaii at Manoa - Kellen Sumida – Recommend approval

Annual Pass Rate

The Committee reviewed the annual pass rate for first-time test takers.

Revisions to Faculty Application

The Committee made slight revisions to the faculty application for clarification.

2. Applications
 - Eshetue K. Muluneh – Approved education for NCLEX-PN only.
 - Oluyomi A. Oyenuga – Deny request to accept remedial courses for pre-licensure nursing education.
3. Masters in Public Health Courses to Meet Continuing Competency Requirement - Recommend accept.
4. Refresher Course Approval Requests
 - Oklahoma Health Sciences Center Fran & Earl Ziegler College of Nursing – No, course only includes 40 hours of clinical
 - University of Delaware – Accept
 - South Dakota State University – Accept

The Chair called for a motion in regarding to the Education Committee's recommendations from their November meeting.

Upon a motion by Ms. Boyer, seconded by Ms. Kodama, it was voted on and unanimously carried to approve the Education Committee's recommendations from their November 2021 meeting.

The Chair announced that the next agenda item, the Board will be reviewing applications and informed any applicant or persons who wish to address the Board on any of the applications listed on the agenda, that a Board staff will call the applicant to join them in executive session to discuss the personal information contained in the application. She asked those attending to raise their hand to indicate they are present to address the Board.

EO Teshima reported that no one raised their hand and that she did not see any of the applicants in attendance.

The Chair asked for a motion to move into executive session in accordance with HRS §92-4 and §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;

Executive Session: At 9:12 a.m., upon a motion by Ms. Stone Murai, seconded by Ms. Kodama, it was voted on and unanimously carried to move into executive session.

The Board resumed the meeting at 10:39 a.m. after coming out of executive session.

Applications: **Ratification Lists**

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

LPNs, license numbers 20235 – 20248 (13);

RNs, license numbers 103137 – 103641 (504); and
APRNs and APRNs with prescriptive authority

**Applications for Licensed Practical Nurses, Registered Nurses and Advanced
Practice Registered Nurses**

The Chair called for a motion in regard to the applications.

Upon a motion by Mr. Duldulao, seconded by Ms. Kodama, it was voted on and
unanimously carried to defer the following application until the Board is able to re-review
with the applicant present:

Amanda Balliet Brooks

Upon a motion by Mr. Duldulao, seconded by Ms. Kodama, it was voted on and
unanimously carried to approve the following applications for RN license:

Kimberly Ann Hudnall

Upon a motion by Mr. Duldulao, seconded by Ms. Daub, it was voted on and unanimously
carried to request that the following applicant complete the online NCSBN Learning
Extension Course – Nursing CE Topics: Standards of Practice “Documentation: a Critical
Aspect of Client Care” and that upon completion and submittal of the completion
certificate within sixty (60) days to the Board’s office, conditional licenses may be issued
that would require the applicant to inform all employers of his prior disciplinary action by
the Arizona Board and that the employer will be required to submit a signed
acknowledgement that they are aware of the disciplinary action taken by the Arizona
Board:

Robert T. Alexander – RN and APRN

Upon a motion by Mr. Duldulao, seconded by Ms. Kodama, it was voted on and
unanimously carried to deny the request from the following applicant to extend his expired
Hawaii nurse license application by exam as there was no compelling reason presented
by the applicant as the applicant had ample time and opportunity, prior to the COVID-19
pandemic, to take the NCLEX and that the applicant may reapply to sit for the NCLEX and
meet the current requirements:

Louis P. S. Diego

The Chair announced that the Delegation agenda item is being deferred.

There being no further discussion on the applications, the Chair announced the next
agenda item as Chapter 91, HRS, Adjudicatory Matters

Chapter 91, HRS –
Adjudicatory Matters:

The Chair asked if there was any discussion by the Board members on any of the
adjudicatory matters.

Being none, upon a motion by Mr. Duldulao, seconded by Ms. Stone Murai, it was voted
on and unanimously carried to approve the following adjudicatory matters:

In the Matter of the Licensing to Practice Nursing of **Kathy M. Persell, RNS 2021-242-L**; Settlement Agreement Prior to Filing of Petition for Disciplinary Action and Board's Final Order; Exhibit "1";

In the Matter of the License to Practice Nursing of **Gina Elizabeth Cole, R.N., A.P.R.N.; RNS 2021-15-L**; Petition for Disciplinary Action Against License to Practice Nursing; Demand for Disclosure; Amended Petition for Disciplinary Action Against License to Practice Nursing; Demand for Disclosure; Settlement Agreement After Filing of Petition for Disciplinary Action and Board's Final Order;

In the Matter of the License to Practice Nursing of **Carol A. Davis; RNS 2021-385-L**; Settlement Agreement Prior to Filing of Petition for Disciplinary Action and Board's Final Order

The Chair announced that the following adjudicatory matter was deferred:

In the Matter of the License to Practice Nursing of **Ann M. Barrios; RNS 2021-377-L**; Petition for Disciplinary Action Against License to Practice Nursing; Demand for Disclosure Exhibits 1-3; Settlement Agreement After Filing of Petition for Disciplinary Action and Prior to Board's Final Order;

The Chair asked if anyone attending wanted to address the Board on any of the adjudicatory matters.

No one raised their hand.

The Chair announced the next agenda item is Scope of Practice Inquiries and asked if the person who submitted the inquiry was attending to raise their hand so we know you are present and we will allow you to address the Board when the time comes. She announced the first scope of practice inquiry was regarding the use of ulthera device by an APRN and asked if Yun Hong was in attendance to please raise your hand.

Staff reported that Ms. Hong was not in attendance and that no one else raised their hand.

Scope of Practice:

Use of Ulthera Device by APRN

Ms. Boyer stated that the inquiry from an APRN with prescriptive authority asking if the APRN requires a specific requirement in order to use an ulthera device, a high frequency device to treat patients. The inquirer did not specify what she is treating the patients for, but Ms. Boyer was concerned with the "health outcomes" as this device is associated with esthetics and may not fall under the Board. She stated that she struggles with nurses performing procedures that are not necessarily related to "health" issues and more esthetic.

The Chair stated that although the nurse maybe "trained" to use this device, it doesn't make it nursing practice.

Ms. Stone Murai also stated that the use of this device was for esthetic/cosmetic purposes and that in 2018, the Board issued an informal interpretation regarding LPNs and RNs performing "cosmetic" procedures that included the following:

- The nurse completed the appropriate education and training;
- That the act or procedure is not specifically prohibited in the NPA;

- The nurse has demonstrative competency in performing this act or procedure;
- That the nurse is accountable for the nursing care rendered;
- The nurse is carryout the orders of a licensed health care practitioner; and
- The nurse is in compliance with any other local, state or federal license or other requirements.

Mr. Ramos stated that the nurse can obtain a dermatology certificate.

Ms. Stone Murai asked if there is evidence-based practice out there to support nurses performing esthetic/cosmetic procedures.

Mr. Ramos stated that in his wound care training, it may not be “evidence-based practice” but it works and perhaps the research may not reflect that.

The Chair wanted to address another agenda item out-of-order that she thought would be similar to this inquiry and called on Ms. Daub to lead the discussion on the inquiry regarding LPNs, RNs and APRNs performing microneedling.

Microneedling by LPN, RN, and APRN

Ms. Daub reported that the Board’s office received an inquiry from an individual seeking guidance on who can perform microneedling in the state of Hawaii and asked if the board issued any guidance as to whether it is within the scope of practice of an NP, RN or LPN? Are there any supervision requirements?

Ms. Daub stated that the Board did previously discuss microneedling at several meetings and that the outcome was the same in that and LPN or RN may perform cosmetic medical procedures pursuant to the definitions of “The practice of nursing as a licensed practical nurse” and “The practice of nursing as a registered nurse” pursuant to HRS 457-2 and in accordance with the following, that the nurse:

- Received the appropriate or specialized education/training;
- Demonstrated competency in performing the procedure;
- Is accountable and responsible for the nursing care rendered;
- Is carryout the prescribed medical orders of a health care professional or acting as an agent for that health care professional;
- Complies with any other state, local or federal laws/regulations; and
- Is following and in compliance with the facility’s policies and procedures, if applicable.

The DAG added that it should not preclude any other legal requirements.

Mr. Kuo raised his hand and was elevated to panelist.

Mr. Kuo stated that he owns a med clinic and that as an FNP and Psychiatric-Mental Heath NP.

The Chair asked if Mr. Kuo’s could foresee if the inclusion of “medical”, within scope of practice, would be a problematic impediment.

Mr. Kuo stated that with prescriptive authority, his is responsible for ensuring staff has the appropriate training and the ordering/receiving the appropriate drugs/devices.

The Chair stated that the discussion regarding the scope of practice is not to restrict nurses from practicing or performing procedures which may or may not fall under their defined scope of practice but to ensure public protection.

After further discussion, it was voted on and unanimously carried that it is the consensus of the Board to restate the Board's previous informal interpretations regarding LPNs, RNs and APRNs perform cosmetic medical procedures provided all of the following have been met:

- Received the appropriate or specialized education/training;
- Demonstrated competency in performing the procedure;
- Is accountable and responsible for the nursing care rendered;
- Is carrying out the prescribed medical orders of a health care professional or acting as an agent for that health care professional;
- Complies with any other state, local or federal laws/regulations; and
- Is following and in compliance with the facility's policies and procedures, if applicable.

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 upon the Board.

The Chair announced the next scope of practice inquiry regarding RNs performing insertion/replacement of gastrostomy tubes and asked if Ms. Nakamoto was in attendance to please raise your hand.

Staff reported that no one raised their hand.

Perform Insertion/Replacement of a Gastrostomy Tube by RN

The Chair asked Mr. Ramos to lead the discussion on this inquiry.

Mr. Ramos stated that the Board's office received an inquiry asking if registered nurses are able to perform insertion/replacement of a gastrostomy tube with a medical doctor order in the state of Hawaii. He stated that this is a specialized procedure that requires and assessment and that although not a basic nursing procedure taught in nursing schools, it does require additional and specialized training.

Ms. Stone Murai stated that performing the initial "insertion" is considered a surgical procedure.

Mr. Ramos agreed and stated that once it is surgically in place, the RN who has the specialized education/training may perform the "reinsertion" or "replacement" of the tube.

After further discussion, it was voted on and unanimously carried that it is the consensus of the Board that an RN may reinsert or replace a gastrostomy tube if he/she has:

- Received the appropriate or specialized education/training;
- Demonstrated competency in performing the procedure;
- Is accountable and responsible for the nursing care rendered;
- Is carrying out the prescribed medical orders of a health care professional or acting as an agent for that health care professional.
- Complies with any other state, local or federal laws/regulations; and
- Is following and in compliance with the facility's policies and procedures, if applicable.

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 upon the Board.

The Chair announced the next scope of practice inquiry is asking if RN and APRN's scope of practice includes integrative or complementary modalities, i.e. homeopathy and asked if Ms. Robles was in attendance to please raise your hand.

Staff reported that no one raised their hand.

Practice Integrative or Complementary Modality (Homeopathy) by RN and APRN

The Chair asked Ms. Stone Murai to lead the discussion on this agenda item.

Ms. Stone Murai stated that the Board's office received an email inquiry from the Homeopathic Nurses Association as if an RN and APRN is able to practice integrative or complementary modalities, specifically homeopathy.

She stated that integrative or complementary modalities is a broad area and may depend on what they consider "integrative or complementary" since it is not defined in the nurse practice act and that these terms may be used interchangeably. She also stated that naturopathy is a regulated profession and that the Board does recognize holistic nursing practice so it appears that nurses may incorporate this into their practice.

The Chair stated that there should be evidence-based practice and research and based on the clinician's expertise and suitability of that practice for that patient.

Ms. Kodama and Ms. Boyer stated that the inquiry was not specific enough and too broad.

After further discussion, it was the consensus of the Board that nurses may incorporate integrative and complementary modalities into their practice as long as the RN or APRN:

- Received the appropriate or specialized education/training;
- Demonstrated competency in performing the procedure;
- Is accountable and responsible for the nursing care rendered;
- Is carrying out the prescribed medical orders of a health care professional or acting as an agent for that health care professional, as appropriate;
- Complies with any other state, local or federal laws/regulations; and
- Is following and in compliance with the facility's policies and procedures, if applicable.

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 upon the Board.

The Chair announced the next scope of practice inquiry regarding LPNs, RNs and APRNs performing microneedling was previously discussed and announced the next agenda item is the Renewal Audit Report and asked if anyone attending wanted to address the Board on this agenda item to please raise your hand.

Staff reported that no one raised their hand.

Renewal Audit Report: EO Teshima reported that the Board's office has received quite a few mailed in responses and some emailed but it is taking time to review but that she hopes to have an updated list posted on the Board's web page but it will not include all submissions. Also, if the list indicates a "D" for deficient, the plan is to review all submissions so those who have complied can be posted and their status updated but any deficient submissions will be sent out later.

The Chair asked if there were any questions from the Board members.

There being none, she asked if anyone attending had any questions on this agenda item. Staff reported that no one raised their hand.

The Chair announced the next agenda item for Continuing Competency was deferred from the November meeting for additional information. This was a request for recognition of the ELSO specialist certification and asked if Ms. Kilcommons was in attendance.

Staff reported that no one raised their hand.

Continuing Competency: **Learning Activity Options and Exemptions**

Request from Melody Kilcommons – ELSO Specialist Certification – Deferred from November 4, 2021 Meeting

At the November 4, 2021 meeting, the Board considered Ms. Kilcommons' request to recognize the ELSO Specialist Certification as an exemption to the continuing competency requirement, but requested additional information on the requirements to maintain the ELSO Specialist Certification.

CES-A™ Recertification

All **Adult Certified ECMO Specialist™** (CES-A™) must complete the recertification process every two years. Recertification is intended to declare to the public that the CES-A™ continues to meet standards of current knowledge in the field through continuing education and clinical activity. The Recertification Application for all current CES-A™ opens on **December 6, 2021** must be submitted by **February 18, 2022**. Moving forward, all CES-A™ will need to recertify every 2 years.

Recertification Application Process for the Adult Certified ECMO Specialist™ (CES-A™)

Step 1: Submit Application

The CES-A™ Recertification Application includes the following information:

1. Personal Information
2. Employer Information
3. Letter from supervisor, program director, or ECMO coordinators
4. \$150 Application Fee
5. Documentation of 10 Continuing Education Credits

**Every 25th application will be audited by the IBBM board.

Step 2: Submit Payment

All recertification applicants are required to submit the \$150 non-refundable recertification fee through the AmSECT website. Instructions for submitting the fee can be found below:

1. Go to: <http://www.amsect.org/p/pr/vi/prodid=49> to access our online store through the AmSECT website.
2. Click add to cart
3. Once the product is added to your cart, click checkout.
4. Make sure to fill out any required contact information
5. An invoice with payment information will appear on the screen
6. Pay your recertification fee.

Upon discussion, Ms. Boyer suggested for this agenda item to be deferred to the Education Committee to review requirements for certification that would qualify towards continuing competency requirement.

The Chair announced the next agenda item is the Executive Officer's Report.

Executive Officer's Report:

APRN Exclusionary Formulary – Status Report

EO Teshima reported that she is working on the justification for the proposed changes.

She asked if anyone attending wanted to address the Board on this agenda item.

No one raised their hand

RN Scope of Practice Decision Making Flowchart – Update

EO Teshima reported that she will try to get a final flow chart for the Board's final approval.

She asked if anyone attending wanted to address the Board on this agenda item.

No one raised their hand.

LPN and APRN Scope of Practice Decision Making Model – Update

EO Teshima reported that she is still doing research to see if other states have issued scope of practice for LPN.

She asked if anyone attending wanted to address the Board on this agenda item.

No one raised their hand.

2022 Legislative Session

EO Fukunaga asked the Board members and anyone attending if they had any proposed legislation to please email the Board as soon as possible.

NCSBN

EO Fukunaga announced that the following agenda item is for discussion purposes only and is not to be considered legal advice or the position of the Board.

Policy Brief: Dissemination of Non-scientific and Misleading COVID-19 Information by Nurses

The Board members were provided with a copy of the Policy Brief issued by the NCSBN and endorsed by the following organizations:

National Council of State Boards of Nursing
Accreditation Commission for Education in Nursing
NLN Commission for Nursing Education Accreditation
American Association of Colleges of Nursing
American Organization for Nursing Leadership
National Student Nurses' Association
Organization for Associate Degree Nursing
National League for Nursing
American Nurses Association

The Policy Brief included the following:

Purpose

To address the misinformation being disseminated about COVID-19 by nurses.

For the purposes of this statement, misinformation is defined as distorted facts, inaccurate or misleading information not grounded in the peer-reviewed scientific literature and counter to information being disseminated by the Centers for Disease Control and Prevention (CDC) and the Food and Drug Administration (FDA).

Statement

Nurses are expected to be “prepared to practice from an evidence base; promote safe, quality patient care; use clinical/critical reasoning to address simple to complex situations; assume accountability for one’s own and delegated nursing care” (AACN, 2021).

SARS-CoV-2 is a potentially deadly virus. Providing misinformation to the public regarding masking, vaccines, medications and/or COVID-19 threatens public health. Misinformation, which is not grounded in science and is not supported by the CDC and FDA, can lead to illness, possibly death, and may prolong the pandemic. It is an expectation of the U.S. boards of nursing, the profession, and the public that nurses uphold the truth, the principles of the Code of Ethics for Nurses (ANA, 2015) and highest scientific standards

when disseminating information about COVID-19 or any other health-related condition or situation.

When identifying themselves by their profession, nurses are professionally accountable for the information they provide to the public. Any nurse who violates their state nurse practice act or threatens the health and safety of the public through the dissemination of misleading or incorrect information pertaining to COVID-19, vaccines and associated treatment through verbal or written methods including social media may be disciplined by their board of nursing. Nurses are urged to recognize that dissemination of misinformation not only jeopardizes the health and well-being of the public, but may place their license and career in jeopardy as well.

EO Fukunaga also reported that the following White Paper from the Arizona Board of Nursing was also provided to the Board members as additional distribution with the disclaimer that the information contained in this paper is considered ethical guidance and discussion and is not considered legal advice or the position of the Board.

White Paper: Ethical & Professional Considerations When Nurses Are Involved in COVID-19 Misinformation and Disinformation – Additional distribution

EO Fukunaga stated that based on the White Paper, as one of the most trusted professionals, and based on the American Nurses Association Code of Ethics, which the Hawaii Board previously adopted, and the Arizona nurse practice act:

“There may be times when a registered nurse must make a choice based on moral grounds to maintain professional integrity. Health care organizations and providers need to understand employer and employee expectations during a pandemic.

Organizational support for the nurse is a necessity. Effective communication between the organization’s leadership and between regarding a nurse’s ability to provide care to patients is essential and should be valued. Nurses should not be retaliated against for raising concerns.

The registered nurse is responsible for adhering to the state laws under which they practice.

There is a balancing test between nurses and the organizations who employ them. On one side nurses must maintain professional integrity while advocating on behalf of themselves and the patients they care for. On the other side the organizations where nurses work should allow open communication and non-retaliation for nurse and/or patient advocacy. Additionally, nurses must remain professional by following the state laws in the state where they practice or be subject to patient complaints to the nursing board and potential allegations of unprofessional conduct which will be investigated by the board.”

Consequently, the Arizona Board of Nursing determined that due to the potential harm to the public:

“If a patient or any person (the public) makes a complaint to the Arizona State Board of Nursing (Board) against a nurse licensed in Arizona (even if the activity or conduct took place outside of Arizona) the nurse’s actions and conduct are investigated and evaluated under the law. Moreover, the nurse is held professionally responsible for that activity or conduct especially if it is harmful or dangerous to the health of the patient or the public or if the nurse commits acts which deceive or harm the public. It is important for nurses

licensed in Arizona to understand the breadth and depth of this law and potential unintended consequences of their actions, as will be discussed in more detail below.”

EO Fukunaga also referred to the recommendations for consideration contained in the White Paper:

1. Board evaluation of each complaint received to determine if the nurse gave misinformation or spread disinformation which could harm the public. And if the nurse’s activity or conduct rises to the level of unprofessional conduct and unethical nursing practice to take appropriate disciplinary action.
2. Encourage nurses to learn and disseminate accurate COVID-19 vaccination information.
3. Encourage nurses to follow their employers’ policies for COVID-19 vaccination or submit a request for a medical or religious accommodation.
4. Encourage nurses to seek peer-to-peer or professional support for stress and burnout related to COVID-19.
5. Consult with other Boards of Nursing to see how they are addressing nurses who are involved in spreading COVID-19 disinformation.

EO Fukunaga had a couple of announcements:

Governor Ige’s Emergency Proclamation Related to COVID-19:

Governor Ige issued another emergency proclamation related to COVID 19 on November 29, 2021 that includes the suspension of law(s) that would allow healthcare facilities/entities in this State to allow certain medical professions, including nurses to work in Hawaii without a professional license. However, included in this EP, which was not included in previous EPs are requirements for these health care entities to “register” these healthcare professionals by:

1. Submitting a “registration” form to DCCA, listing each medical professional working under this exemption;
2. Verifying that there are no disciplinary actions, insurance claims or pending lawsuits against the registered professional;
3. That the healthcare facility agrees to indemnify the State for actions or inactions of the registered medical professional;
4. The registration form shall be signed by an authorized representative of the health care facility and separate registrations forms shall be used for each profession and email to the appropriate Board, i.e. board of nursing for nurses.

The registration form and information sheet is posted on the Board’s web page.

EO Fukunaga asked the members if they had any questions.

There being none, she asked if there was anyone attending who had any questions.

Staff reported that no one raised their hand.

Reports:

Hawai’i State Center for Nursing – Laura Reichhardt, Executive Director

Ms. Hussey provided the following report on behalf of Ms. Reichhardt, Executive Director of the Hawaii State Center for Nursing:

1. Policy:

- HSCN confirmed that Representative Johanson and Senator Baker will be introducing the HSCN bill for increase of the fees from \$40 to \$60 and mandating the HSCN's workforce survey when renewing a Hawaii nurse license. She stated that they made an inquiry to the National Forum on how many states have require a mandatory workforce survey but have not yet received a response. She also reported that the non-punitive requirement is similar to the 7th grade physical examination that requires the DOE to inform the guardians of enrolled students of the 7th grade examinations.
 - Keith Ridley mentioned that the revisions to HAR Title 11, Chapter 97 regarding home health are currently being revised and anticipate approval sometime in the first calendar quarter of 2022.
2. Nurse Leaders:
 - Nurse leaders are voicing continued concern about recruiting nurses to fill current vacancies, ability to process travel nurses to fill gaps while recruitment efforts are underway, and the state of nurses' wellbeing.
 3. Research:
 - The Workforce Supply data tables and infographics are posted on our website under the "Workforce Reports" section, <https://www.hawaii-center-for-nursing.org/data-reports/>. The data tables are a comprehensive view of the responses and can be used and applied to projects, planning, as needed.
 4. EBP:
 - Center is working with the Ohio State University to facilitate a workshop for nurse educators from March 16-17, 2021 at the Hyatt Waikiki. The registration link will be emailed soon.
 5. Nurse Residency Programs:
 - Since 2012, 23% of new graduates have completed a nurse residency program. Our NPR program has expanded to all Counties, and we have seen a growth in NRPs by 351% as compared to 2020 and 128% as compared to 2019 (which is a better comparison). We are seeing more hiring of new graduates into our participating hospitals, and also more new grad support programs, overall.

Hawai'i American Nurses Association – Linda Beechinor, Executive Director

Ms. Beechinor reported they continue to work under their new Board members and on the continued efforts to form and work with coalitions and in order to provide a unified position on nursing issues, including but not limited to legislative initiatives for the 2022 Legislative session. She also reported that she is unsure if the Hawaii Nurses Association's initiative for limiting mandatory over-time for nurses will be addressed during the 2022 Legislative session.

Hawai'i Association of Professional Nurses – Bradley Kuo, Legislative Coordinator

Mr. Kuo reported that they continue to recruit members as well as individuals in their organization's leadership and award nominations. He also reported that they will continue their efforts for the 2022 Legislative session to promote the APRN's scope of practice, including but not limited to the Our Care, Our Choice bill and amendments to other statutes to recognize APRNs to determine an individual's medical/mental capacity. He also mentioned the new CMS rules that would "split share billing".

The Chair thanked everyone for their patience and staying until the end to provide their reports and asked the Board if they had any questions.

There being no discussion by the Board members, the Chair announced the next Board meeting to be held on January 6, 2022 and asked everyone to please confirm their attendance by emailing the Board as soon as possible.

She also wished everyone a very Happy Holidays.

Next Meeting: Thursday, January 6, 2022
9:00 a.m.
Virtual

Adjournment: With no further business to discuss, the Chair adjourned the meeting at 12:25 p.m.

Taken by:

Reviewed and Approved by:

/s/ Lee Ann Teshima
Lee Ann Teshima
Executive Officer

/s/ Chelsea Fukunaga
Chelsea L. Fukunaga
Executive Officer

LAT

01/03/21

[] Minutes approved as is.

[] Minutes approved with changes; see minutes of _____