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").

<u>Date</u>: Thursday, December 7, 2023

<u>Time</u>: 9:00 a.m.

In-Person Queen Liliuokalani Conference Room, First Floor

Meeting HRH King Kalakaua Building

<u>Location:</u> 335 Merchant Street

Honolulu, Hawaii 96813

Virtual: Virtual Videoconference Meeting – Zoom Webinar (use link below)

https://dcca-hawaii-gov.zoom.us/j/88166196505

Zoom Phone Number: (669) 900 6833 Meeting ID: 881 6619 6505

Zoom Recording Link: https://youtu.be/A21lxpJUqU4

Agenda: The agenda was posted on the State electronic calendar as required by HRS section 92-

7(b).

Members Present: Carrie Oliveira, Chair

Diana Jill Riggs, RN, MSN, Vice Chair

Karen Boyer, RN, MS, FNP Sheri Shields-Hanson, MSN, RN

Bradley Kuo, DNP, APRN, FNP-BC, CARN-AP

Terrence Aratani, Public Member

Member Excused: Luzviminda Miguel, DNP, MSN Ed., RN

Member Resignation: Benjamin Ramos, RN

Staff Present: Chelsea Fukunaga, EO ("EO Fukunaga")

Lee Ann Teshima, Executive Officer ("EO Teshima") Shari Wong, Deputy Attorney General ("DAG Wong")

Marc Yoshimura, Secretary Robyn Alameida, Secretary

Guests: Lianne Hussey, Hawai'i State Center for Nursing

BJ Bartleson, Hawai'i American Nurses Association

Demetrius Kirk

Delingcy Gladys T

Shem Kenyanya

Hanna

Jen Pastiglione Emily Krump Rhoberta Haley

Debra

Travis Oliphant

John G Nola

Shanna Rogness

For purposes of this hybrid 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.

Virtual Meeting Instructions:

A short video regarding virtual meetings was played for attendees.

The Chair provided information on internet and phone access for today's virtual meeting and announced that today's meeting was being recorded and that the recording will be posted on the Board's web page.

Call to Order:

The Chair took roll call of the Board members.

In accordance with Act 220, SLH 2021, all Board members attending virtually confirmed that they were alone in their nonpublic location.

After taking roll, quorum was established, and the meeting was called to order at 9:10a.m.

Chair's Report:

Announcements

No announcement from the Chair.

Approval of the Minutes of the Open Session and Executive Session Minutes of the November 2, 2023 Meeting

The Chair asked if there were any corrections or discussion of the open and executive session minutes of the November 2, 2023 meetings.

There were no corrections or further discussion.

Upon a motion by the Mr. Aratani, seconded by Mr. Kuo, it was voted on and unanimously carried to approve the open and executive session minutes of the November 2, 2023, meeting.

The Chair announced the Education Committee reports will be provided by Ms. Boyer.

Education Committee Report/Recommendations for November 2, 2023 Meeting

Ms. Boyer reported on the following recommendations from the Education Committee's November 2, 2023 meeting:

Annual Reports – Recommend the approval/acceptance of the annual reports for the

following nursing programs:

- ✓ University of Hawaii at Hilo
- ✓ Kauai Community College

Recommended deferral of approval of the following Hawaii nursing programs' annual report

- ✓ University of Hawaii- Maui College
- ✓ University of Hawaii at Manoa/GEPN
- ✓ Hawaii Pacific University
- ✓ Chaminade University
- ✓ Hawaii Community College
- ✓ Kapiolani Community College

Hawaii Nursing Programs

Faculty Applications – Recommended approval of the following faculty applications:

✓ NAWSON Kate K. Takahashi

Qu Zhi

Angela Leonardo Yasmeen LaTorre

✓ Hawaii CC Rhonda Sipp

<u>Faculty Applications – Recommended deferrals for additional information for the following faculty applications:</u>

✓ NAWSON Chloe Hasegawa

✓ Kauai CC Tracy Stogner

Recognition/Approval of New Program – Recommended approvals for the following programs:

✓ NAWSON Master of Science in Nursing Education & Leadership Program

Psychiatric-Mental Health Doctor in Nursing Program

✓ Hawaii Pacific Post-Graduate APRN Certificate University

Request from SpanTran for Board Approval as a Credentials Evaluator of Foreign Education Nurses – Deferred for additional information.

Upon a motion by Mr. Kuo, seconded by Mr. Aratani, it was voted on and unanimously carried to accept the report and recommendations for the Education Committee's November 2, 2023 meeting.

Executive Officer's Report:

Emergency Proclamation Relating to Wildfires – 8th Emergency Proclamation

EO Fukunaga reported that the 8th Emergency Proclamation – Relating to Wildfires, was issued on November 6th, 2023 and will expire on January 5, 2024, unless superseded by another proclamation. The EP suspends licensure under certain circumstances to allow

nurses to practice in the State. Any individuals practicing without a license will not be able to do so if the proclamation is not extended.

Follow-up from November 2, 2023 Meeting by EOs on CGFNS Presentation – CGFNS Certification Program (CP) vs. Credentials Evaluation Services: Professional Report (CES)

EO Teshima reported that the Hawaii application currently lists both the CGFNS Certification Program (CP) vs. Credentials Evaluations Services Report (CES) as acceptable credential evaluations. EO Teshima learned from CGFNS that if the Board accepts the CP program or certificate, the Board will only receive the certificate. Whereas the CES Report has a "Comparable to" statement which lists: the curriculum hours, the courses that they took, the school's name, etc. The CP certificate will not have that information. EO Teshima added that the CP requires an additional exam and asked the Board if they remember what the purpose of the exam was for.

The Chair replied that the exams are: a qualifying exam and an English proficiency exam.

EO Teshima clarified that the exams test for baseline knowledge nursing and English proficiency. A previous Board determined that unless the course is taught in English, then it would require an English proficiency exam. EO Teshima noted that the CES report does indicate whether the courses were taught in English or not. EO Teshima directed the Board to review HRS §457-7(f)(2), which requires that applicants educated in a foreign jurisdiction have their transcripts evaluated by professional evaluators designated by the Board to determine whether the education is comparable to someone who graduated in the United States from an accredited program. EO Teshima reported that the CP certificate will still be accepted, provided that CGFNS will provide documents similar to their CES report. EO Teshima stated that she will reach out to CGFNS to inform them that the Board still requires the breakdown of courses taken in addition to the "Comparable to" statement to ensure that the information received is consistent.

Amendments to Hawaii Administrative Rules ("HAR") Chapter 89, Relating to Nurses - Proposed Amendments to HAR §16-89-22, Pertaining to Temporary Permits – Status Report

EO Teshima reported that she will be attending the Small Business Regulatory Review Board meeting to address the impact on small business and ask to move forward with a public hearing this morning at 10:00 a.m. She understands that the Healthcare Associations Hawaii ("HAH") has submitted written testimony, expressing concerns. EO Teshima stated that she is prepared to address their concerns and has also submitted testimony. EO Teshima explained that HAH is requesting to add a ten-day processing deadline for the temporary permits being addressed in the rule amendments. HAH has also requested to tie the temporary permits to an endorsement application for the purposes of speeding up the process for regular or permanent licensure. EO Teshima noted that the current draft, as written, does not prohibit temporary permit applicants from applying for a permanent license. If someone wants to apply for permanent license with the temp, they can do so. If they only want to have a temp, they are also free to pursue that route to practice.

Random Audit - Status Report

EO Fukunaga reported that audit letters were sent to 2% of the nurses that renewed during the 2023 renewal. A total of 629 letters were sent out to: 46 APRNs, 32 LPNs and 551 RNs. EO Fukunaga stated that she did not have the number of people who have responded to the letters.

EO Fukunaga noted that the same letter was mailed to all APRNs whether they had prescriptive authority or not. If an APRN receives the audit letter and does not have the prescriptive authority privilege, they should submit proof of their current national certification pursuant to:

"HAR §16-89-87 Renewal of APRN license. (a) All licensees for advanced practice registered nurses shall expire on June 30 of every odd-numbered year and shall be renewed biennially. In each odd-numbered year, the board shall make available to all licensees an application for renewal of license to be submitted to the board by the deadline set forth by the board. Applicants shall be currently licensed as registered nurses in this State and shall submit:

(1) Evidence of current national certification if the advanced practiced registered nurse does not hold a graduate-level degree in clinical nursing or nursing science in a board recognized practice specialty;"

However, if the APRN was licensed as an APRN pursuant to the following section:

"HRS §457-8.5 Advanced practice registered nurse; qualifications, licensure; endorsement; fees; eligibility (b) Any person licensed as an advanced practice registered nurse prior to October 1, 2009, whose license was granted based on a master's degree in nursing or a current certification for specialized and advanced nursing practice from a national certifying body recognized by the board shall be eligible to renew that license; provided that all nurse licenses and prescriptive authorities or similar designations held by the person in any jurisdiction are unencumbered."

EO Fukunaga stated that a question was posed by EO Teshima, "What would an APRN with prescriptive authority and who was licensed by way of a masters degree in nursing ONLY, have to submit when audited?"

The Chair reminded the Board that an APRN licensed prior to 2009 could be eligible for licensure with either a graduation degree or a certification in a specialty area. The Chair asked EO Teshima whether the question being asked is, if one of these nurses who is licensed without a certification, but only has a graduate degree, what do they submit in order to comply with the continuing competency requirement?

EO Teshima confirmed that her question pertained to the APRN renewal requirement. If an APRN, licensed prior to 2009, received an audit letter and does not have a national certification, what can they submit to comply?

EO Teshima also inquired, "Will proof of compliance with the continuing competency requirement for RN license suffice and does the Board have the authority to require proof of compliance with the continuing competency requirement for their RN license as the RN license is required in order to maintain their APRN license?" For example, an APRN, who

does not hold a national certification and receives an APRN audit letter will not be able to comply with the continuing competency requirements as they do not have a national certification or prescriptive authority and no CE's can be sent. EO Teshima asked whether the Board has the authority to require that the APRN in this case, submit proof of continuing competency requirement for their RN license, or are they not required to submit anything, as it was their APRN license that was audited.

The Chair replied that according to:

"HRS §457-9.2, the continuing competency requirements; exemptions; extensions; records retention; audit. (a) Beginning July 1, 2017, with the renewal of the licensing biennium, and every biennial renewal thereafter, each registered nurse and practical nurse licensed shall have completed one of the learning activity options recognized by the board within the two-year period preceding the renewal date, in addition to requirements of section 457-9."

The Chair asked DAG Wong, whether the Board can apply the continuing competency requirements for RN licensure when an individual's APRN license has been audited and not their RN license. Otherwise, the APRN would be exempt from the rule as they don't have the certification.

EO Teshima questioned whether the APRN would be exempt.

The Chair replied that under normal circumstances, an APRN would submit proof of a national certification, as the certification exempts them the continuing competency. In the absence of that, EO Teshima is right, there is nothing that could be requested from APRNs who don't hold a national certification as the laws and rules are currently written.

DAG Wong asked where is the part that if they were before 2009, they only required the masters?

EO Teshima replied HRS §457-8.5(b).

DAG Wong asked if individual being discussed for audit falls in this category?

EO Teshima replied that the individual does.

DAG Wong stated, she's not sure if the 2009 provision in HRS §457-8.5(b), is as critical as the fact that you need to renew your RN license in order to renew your APRN license. DAG Wong asked whether her understanding was correct.

EO Teshima clarified that the licenses are renewed separately but confirmed that an RN license is needed to maintain an APRN license.

DAG Wong asked for confirmation that the RN license for this individual was not flagged for random audit, but the APRN license was? And the APRN license is dependent upon having an RN license?

EO Teshima confirmed that DAG Wong's statement was correct.

DAG Wong replied that she believes that it is the basis for HRS §457-9.2.

EO Teshima asked whether DAG Wong meant that pursuant to HRS §457-9.2, in order for this individual to meet the audit requirement, the Board could request that the licensee submit proof of their continuing competency for their RN license instead, because the individual: was licensed by a Master's degree or graduate level degree in nursing and does not hold a current national certification (pursuant to HAR §16-89-97)?

The Chair commented that DAG Wong's suggestion makes sense. The Chair stated that although the audit lists are pulled from specific license types, the audit is really auditing the person. She added that it missed the point of the continuing competency requirement to nitpick over whether we are auditing the individual's APRN license versus their RN license. In reality, the Board is really looking at whether the individual is able to show that they have complied with their ongoing continuing education and ability to stay current with their practice, whatever that practice happens to be.

Ms. Boyer stated that she thought that with APRNs if they had done the CE or the continuing certification, which requires the CE, that CE would suffice for their RN license. Because it's at a higher level.

EO Teshima added that if an APRN holds a national certification, they are exempted from the continuing competency requirements. Thus, the CE is not an issue.

The Chair clarified that the nurse in question does not have a certification.

Ms. Boyer asked whether the individual has to complete CE in order to maintain their APRN license.

The Chair replied that that's the question the Board is trying to answer.

EO Teshima asked, in the sections that were just cited, where does it say that APRNs have to complete CE? That particular provision only applies if the individual has prescriptive authority; specifically, 30 hours of CE, of which eight (8) must be in Pharmacology. Renewal requirements for just an APRN license require evidence of current national certification, which this individual does not have.

The Chair replied that based on DAG Wong's comment and the fact that you have to maintain a current valid RN license (which does require continuing competency unto itself) in order to hold an APRN license, it seems that this individual would need to show proof of completion of the continuing competency for their RN license.

EO Teshima exited the meeting.

Ms. Shields-Hanson stated that it seems fair to ask the individual to provide proof of completion of the continuing competency requirement for their RN license, especially in light of the fact that the individual cannot claim the national certification exemption for their APRN license. Ms. Shields-Hanson stated that she would vote in favor of asking for proof of completion of continuing competency for this individual 's RN license.

The Chair then asked, is there anyone on the Board that would disagree with Ms. Shields-

Hanson's statement.

Mr. Kuo responded that he does not disagree.

Ms. Riggs stated that she agrees with Ms. Shields-Hanson's statement.

Ms. Boyer inquired as to the reason the Board is unable to request for proof of completed CE for the applicant's APRN license. Is it because, the CE isn't required for the APRN renewal?

The Chair replied that Ms. Boyer was correct. The question posed is whether the Board has the statutory or rule authority to request for proof of completion of CE for this particular situation. The way the continuing competency guidance is written, it presumes that an APRN has a national certification, so there isn't a specification that we would look at anything other than their national certification for their continuing competency compliance. That is the reason the Board is having this conversation. The Chair commented that she felt that the question of whether the CE requirement can be applied to the APRN license or the RN license is irrelevant. The Chair reiterated that the purpose of the audit is to check on the competency of an individual and not their specific license. If the individual meets the requirements of renewal, it is splitting hairs on whether we are applying the requirement to the RN license as opposed to their APRN license. The Chair stated that at the end of the day, the Board is auditing the same person. However, the way the laws and rules are written, the Board may ask for proof of continuing competency for an RN license but does not specify what can be asked for individuals who hold an APRN license prior to 2009. This is because the language of the renewal section presumes that the individual has a national certification; effectively, this is a regulatory black hole.

Ms. Shields-Hanson agreed with the Chair.

The Chair commented that HRS §457-9.2 refers to an "individual". The language refers to the auditing of a licensee, which is a person, not a license. The Chair added that she does not see what the issue would be if an individual is requested to provide proof of compliance with the continuing competency requirements for their RN license. At the end of the day, the individual would need to be in compliance with the renewal requirements for both licenses in order to renew.

Ms. Boyer agreed with the Chair. She clarified that if the individual completed the CE requirements specific to the APRN license, it will cover compliance for their RN license.

Mr. Aratani stated that he agrees.

The Chair stated that it seems that the Board has indicated that they are fine with accepting proof of compliance with the continuing competency requirements for an RN license, for individuals who have an APRN license but do not hold a national certification.

DAG Wong noted that this decision is in the furtherance of the Board's statutory mission and responsibility to ensure consumer protection. Although this individual's APRN license was audited, their APRN license is dependent on holding an RN license, which would make them subject to the requirements of HRS §457-9.2.

Upon a motion by Mr. Kuo, seconded by Mr. Aratani, it was voted on and unanimously carried to accept the consensus of the Board that an APRN who is qualified for licensure by graduate degree, but not a national certification, whose APRN license was pulled for audit for compliance with the continuing competency requirement, that meeting the continuing competency requirement for the RN license shall apply to meet the continuing competency requirement for the APRN license. This meets the Board's mission of public safety and ensures that an individual licensee is pursuing continuing education and lifelong learning for the benefit of the patient population.

2024 Legislation Session

<u>Draft of Report to the Legislature from the Nurse Licensure Compact Working</u> Group Pursuant to SCR 112 Including Board of Nursing's Position Statement

EO Fukunaga reported that the draft of the Nurse Licensure Compact Working Group Report, pursuant to SCR 112 has been updated to include position statements from various industry stakeholders. EO Fukunaga noted that a position statement was submitted on behalf of the Board. Because the draft of the report is almost 200 pages, a link was provided to the Board for their review.

The Chair thanked both EO Fukunaga and EO Teshima for their participation in the working group.

EO Fukunaga thanked Laura Reichhardt for her objective and impartial leadership of the working group.

Medical Xpress Article "Addition of dedicated nursing team to help with catheter insertions can help reduce bloodstream infections in hospitals."

EO Fukunaga reported that the article was placed on the agenda for the Board's awareness.

What's New: OIP's Six New Opinions

EO Fukunaga reported that the Office of Information Practices regularly publishes a newsletter which provides highlights of recent opinions and determinations from their office. The newsletter provided to the Board has a brief overview of the New Sunshine Law Requirements.

EO Fukunaga read the following excerpts for the Board:

"F24-03
Posted on Nov 3, 2023 in Formal Opinions
Opinion Ltr. No. F24-03
November 3, 2023
Sunshine Law Requirements for Notice, Testimony,
Executive Sessions, and Voting, and Potential Remedies
An anonymous Requester asked OIP to decide whether the Agribusiness
Development Corporation Board of Directors (Board) violated the Sunshine Law

during its selection of a new executive director (ED). This opinion discusses several requirements of the Sunshine Law.

Notice: Sections 92-7 and 92-3.7(a), HRS, require that a notice be filed six days before a meeting; that it include the location of the meeting; and for remote meetings, the notice must list at least one physical location open to the public. The notice for the Board's meeting on August 8, 2023, clearly stated it was a remote meeting under section 92-3.7, HRS. The notice did not state that the executive session would be in person only, but during the meeting, the members were required to attend the executive session in person. OIP concluded that the meeting notice did not give proper notice that the "location" of the executive session would be only the listed in-person meeting location and Board members could not participate via remote link. This resulted in little, if any, harm to the public, as the public is not entitled to attend executive sessions. However, the Sunshine Law's protections apply to board members as well as the public, and a meeting notice also serves as notice to the members of a board. Because members were prevented from participating remotely in the executive session, OIP found that the improper notice of the in-person only executive session deprived Board members of the ability to attend and participate in the executive session in violation of section 92-3, HRS.

<u>Testimony</u>: The Sunshine Law requires that boards accept oral and written testimony on any agenda item, and it does not exclude executive session agenda items from that requirement. Prior to taking a vote to enter executive session during the public portions of the Board's meetings on August 8, September 21, and October 3, 2023, the Board allowed public testimony only on the decision to go into executive session, and not on the executive session agenda items themselves. OIP found that the Board denied the public's right to testify on the agenda items the Board discussed in executive session, and OIP concluded that the Board's denial violated section 92-3, HRS.

Executive Session Discussion and Votes on an Employee Hire: Section 92-5(a)(2), HRS, allows a board to enter an executive session to consider the hire of an officer or employee where consideration of matters affecting privacy will be involved. The Board relied on this executive session purpose when it met in executive session to interview the top two candidates for the ED position, to set the next ED's salary, to select a candidate to make an employment offer to, and to decide how to inform the public of its hiring decision. OIP found the Board met the Sunshine Law requirements to vote to enter an executive session in accordance with section 92-4(a), HRS, and that it had a valid reason to enter an executive session under section 92-5(a)(2), HRS, to interview candidates and then to discuss the selection and salary of the new ED. OIP found it could be reasonably anticipated that the executive session discussion of the candidates. including the salary discussion, involved consideration of matters affecting privacy. OIP therefore concluded the Board was properly in executive session for these discussions. However, the discussion on how to inform the public of the successful candidate's selection did not implicate any privacy interests and should have been in the public portion of the meeting.

OIP further concluded the Board was permitted by the Sunshine Law to vote in executive session on selection of the ED to avoid revealing the candidates' identities as both had privacy interests to be protected, and to protect the privacy interests of the selected candidate until such time as she accepted the employment offer. Holding this vote in a public meeting would have revealed the candidates' identities, which, at that time, carried privacy interests that allowed the Board to hold the executive session. However, the Board should have voted in the public portion of the meeting on selection of the new ED's salary because the salary discussion focused primarily on budgetary considerations and not on qualifications of either candidate such that a privacy interest would have been implicated. Any vote on how to inform the public of the ED's selection also would not have implicated any privacy interest and should be taken during the public portion of a meeting."

EO Fukunaga commented that the newsletter provides important context for both the Board and members of the public regarding the purpose, processes, and procedures for executive session.

"Street Medicine" Providers Who Care for Homeless Will Get Federal Dollars Under New Rules

EO Fukunaga reported that the Centers for Medicare and Medicaid began to allow public and private insurers to pay "street medicine" providers for medical services delivered, anyplace homeless people may be staying. Previously, these providers were not getting paid by most Medicaid programs because services were not delivered in traditional medical facilities. This is a fundamental shift in how and where health care is delivered. Currently, there are 150 street medicine programs across the country. Proponents hope that this billing change will help to interrupt the cycle of homelessness and reduce costly ambulance rides, hospitalizations and repeated trips to the emergency room. This is especially important for Hawaii, where the rate of homelessness is rising.

Continuing Competency- Continuing Education Courses, i.e. BLS, ACLS, PALS, NALS

EO Fukunaga stated the following appears in the Frequently Asked Questions section of the Board of Nursing's Continuing Competency Booklet:

"Can courses such as BLS, ACLS, PALS, NALS or instructor certifications in the aforementioned learning activities be applied toward my continuing competency education credits?

No. These types of certifications are a requirement for some practice areas and do not necessarily lead to the enhancement of your practice or improve workforce development."

EO Fukunaga asked whether this was still the Board's position.

Mr. Kuo stated that the Board's previous position makes sense.

The Vice-Chair agreed as well.

Ms. Boyer stated that she advocated in the past to allow these certifications because they are oftentimes required for work. Ms. Boyer added that she is okay if the majority of the Board disagrees.

Ms. Shields-Hanson also agreed that the certifications should be counted as CEUs. She added that she believes that the certifications enhance an individual's nursing ability. Ms. Shields-Hanson stated that she believes that the certifications should be counted towards an individual's CEUs even though they are required for certain practice areas.

The Chair added that the continuing competency guidebook itself, or the continuing competency regulation as in HRS §457-9.2 does not actually preclude the counting of those classes for the continuing competency requirement. It was however, indicated in additional guidance in FAQ's that were provided in conjunction with the regulation. To be clear, there is nothing in the actual regulation that would preclude the counting of those courses. The Chair clarified that if the Board were to opine that we could count these certifications, the Board would not be in violation of any laws.

There being no consensus, the Chair summarized Ms. Shields-Hansons' point that if you receive continuing education credits for these certifications, they literally meet the definition of "continuing education". The Chair inquired whether Ms. Boyer's argument was similar.

Ms. Boyer responded, yes, but conceded that she has not done an ACLS certification recently but believes that there was a lot of information in there about evidence-based practice and why certain procedures are better now. Ms. Boyer assumes that the same would hold with PALS and NALS. Ms. Boyer stated the BLS certification is technical based on skill and practice, although there is judgment and evidence to guide practice. For these reasons and those that Ms. Shields-Hanson stated, Ms. Boyer believes that these certifications should be allowed to count toward CEU credit.

The Chair asked, how often does a person need to recertify their PALS, etc.?

Ms. Boyer responded every two years.

Ms. Shields-Hanson added that the certifications are updated to reflect best practices and that it is important for nurses to be aware of these changes.

Mr. Kuo stated he was on the fence in light of the ongoing discussion.

Ms. Boyer asked whether the Board could defer making a determination. Ms. Boyer stated that she was curious as to what other Boards accept for their CEs. She volunteered to do the research and provide information to the Board at its next meeting in January.

EO Fukunaga replied that Dental board accepts BLS and PALS.

The Chair stated that she liked Ms. Boyer's suggestion and commented that the Board would benefit from additional information on how PALS, BLS and similar certifications and how they are considered for continuing competency by other Boards. The Chair thanked

Ms. Boyer for volunteering to do research for the Board. This agenda item was deferred for a future agenda.

The Vice Chair commented that she the CE credits gained from these certifications are not always commensurate with the time spent completing the certification. For example, the Vice Chair stated that although she has both her BLS and ACLS certifications, she also participates in a program called Resuscitation Quality Improvement program. The Vice Chair stated that participants don't spend many hours on certifications because they know the material. The Vice Chair stated that although an individual from this program may earn 6.5 CEs for an ACLS certification, they most likely did not spend 6.5 hours because they do the training so often in other settings.

Mr. Kuo agreed and added that his issue with accepting something like this is that it does not expand a nurse's knowledge about a specific population and care for specific population. It is very much a work-related function/certification and is expected as part of doing your job. Whereas CEs are meant to, in his opinion, expand a nurse's education and knowledge related to different populations, such as: homelessness, women, and the elderly. Mr. Kuo added that he also has an issue with the CEU credit being so high.

Ms. Boyer commented that she is not sure if she got a CE for CPR certification.

Vice Chair replied that she has never received CE's for CPR certification.

Mr. Kuo stated that he believes that CE's are offered for CPR certification.

The Vice Chair clarified CEs are accepted through the course. However, because it's a requirement of the job, she agrees with Mr. Kuo. She also stated that these types of certifications could be enhancing if you're in the dental field. If something were to go wrong with dental anesthesia, the dentist should know CPR; adding that any healthcare provider should know CPR. The Vice Chair stated that she does not think it should be an added CE course and count.

Ms. Shields-Hanson replied that a lot of people take ACLS to expand their ability and knowledge. She added that the Board could go back and forth all day regarding CEU classes and the time it takes to complete the CEUs vs. the credit given for completion. Ms. Shields-Hanson conceded that the other Board members' comments made sense, however, she asked the Board to consider that not all nurses who take these courses are required to by their employer. There are nurses who take these types of course to expand their knowledge base and enhance their skills.

The Chair requested that Ms. Boyer include in her investigation whether CEUs are offered for courses such as PAS, BLS, ACLS and NALS and what the average number of CEUs are being offered.

Mr. Kuo stated that believes his most recent BLS certification with the American Heart Association did offer a CE certificate for paying an extra fee.

Ms. Shields-Hanson asked Mr. Kuo how many hours were offered.

Mr. Kuo replied, he's not sure as he did not pay extra to get the CE.

> The Chair stated that it is apparent that there are some informational gaps which warrants further investigation. The Chair announced that the Board is going to adhere to its previous decision to defer this agenda item until additional information could be presented by Ms. Boyer.

The Chair asked EO Fukunaga whether the Board's previous opinion regarding these types of certifications will apply to individuals who are submitting PALS, BLS or whatever else they are submitting for continuing competency education for this audit cycle.

EO Fukunaga replied yes.

The Chair asked if there is any further discussion for that topic.

There was no further questions or discussion.

Hawaii State Center for Nursing - Liane Hussey Reports:

Ms. Hussey reporting on the following:

- In 2024, the Center for Nursing will be focusing on several professional events
 - In December, Laura Reichhardt will be holding a nursing and policy learning series as a "Lunch and Learn", with three 1-hour webinars.
 - The first one will be held on December 19th and will discuss the nurse licensure compact findings from her report
 - In February, she will discuss topics regarding the Hawaii State
 - In May, she will do a conclusion of the legislative session
 - Another webinar will be held in January, in partnership with CGFNS, discussing the ethical consideration of nursing recruitment and retention in the U.S.
 - The Nurse Residency Program will be holding a Transition to Practice Conference on April 25, 2024
 - The Center will be holding a Nursing Scientific Symposium that will be statewide and open to all academic and clinical research, EBP, and QI projects across the state on April 26, 2024
- The Center is expanding their Residency In-Practice Program, in partnership with the UH Community College Good Jobs Grant, offering acute care and long-term care residencies, preceptor training, and specialty training in 25 specialty roles across the State. They are partnering with nursing employers to enroll their nurses in these training programs. The Center's goal is to have 685 nurses trained by the end of the grant period in September 2024
- The Center has continued to partner with DOH on the Opioid and Substance Abuse Disorder and Treatment Training into Nurse Residency Programs. This partnership was started in 2020 and has over 704 preceptors and 927 new grads who have already received training. A total of 1,631 nurses have had additional opioid and substance abuse disorder and treatment training in their residency program.
- The 2021-2022 Education Capacity Report is live at: https://www.hawaiicenterfornursing.org/wp-content/uploads/2023/12/2021-2022-Education-Capacity-Statewide-Report-v.Final-1.pdf
- The Nurse Licensure Compact report is currently being routed through the

University of Hawaii and will be submitted to the legislature before the end of the year. Ms. Reichhardt would like to thank the DCCA, PVL, the Board of Nursing, and RICO for their engagement in the 200-page report.

Hawaii American Nurses Association - BJ Bartleson

Ms. BJ Bartleson reported on the following:

- Hawaii ANA celebrated their 4th Annual Conference in October.
 - Keynoted with the President of the American Nurses Association, Dr. Jennifer Mensic Kennedy
 - Centerpiece was advocacy. There was a big discussion about the NLC amongst many things occurring in Nursing, particularly with staffing and got the latest and greatest from the American Nurses Association. They had over 100 attendees and about 30 students.
- Upcoming conferences:
 - In January, HANA will be having a webinar with the Centers for Medicaid and Medicare Services regarding their latest activities related to national funding
 - In June, HANA will be working Sigma Theta Tao International in a big conference
- Planning the official launch of HANA's Advocacy Academy to strengthen the knowledge and skills and abilities of Hawaii nurses to be active advocates in health policy across the State with their representative and legislators
- Actively involved with the Nurse Licensure Compact Group
 - Kudos to all involved, but particularly Laura and the Hawaii State Center for Nursing.
- HANA supports temporary licensure regulator changes and will be here for the Board.

The Chair asked Ms. Bartleson whether the webinar with the Centers for Medicaid and Medicare Services is open to all nurses or just ANA members?

Ms. Bartleson replied that it is open to anybody. Ms. Bartleson invited everyone to come join them January 16th, a lunch and learn, 12pm-1pm, adding that the information on how to register is on Hawaii ANA's website.

Hawaii Association of Professional Nurses

No representative was in attendance. No report was provided.

The Chair stated that this is the portion of the meeting that the Board will review applications and to discuss confidential information. The Chair explained that the Board will go into Executive session and asked if there was anyone present that who would like to address the Board.

Mr. Aratani confirmed that there are 3 or 4 hands raised.

The Chair announced that the Board will give applicants the opportunity to testify on behalf of their application and requested that the Board's staff note who raised their hand. She explained to the public that the Board will go into Executive session and will consider the applications in order in which they appear on the agenda. The Board will call the applicants in, using the number they provided on their application. The Chair requested

that the applicants have their notifications turned on, as that is how they will be contacted. When the Board is ready to discuss an applicant's application, the applicant will be called into the Board's Executive Session. The Chair requested for everyone's patience, as some discussion may be long.

Staff reported that attendee "Nola's iPhone" raised their hand.

"Nola's iPhone" was requested to rename themselves on Zoom using their full name.

EO Fukunaga inquired whether the Board is willing to let "Nola's iPhone" speak.

The Board allowed "Nola's iPhone" to address the Board.

"Nola's iPhone" identified herself as Nola Mentor.

The Chair asked what agenda item they were there to testify on.

Ms. Mentor explained that she was there for her application.

EO Fukunaga stated that Ms. Mentor was not on this meeting's agenda and asked that she email the board and a staff member would contact her after the meeting.

Executive Session:

At 10:09 a.m., upon a motion by the Chair, seconded by Mr. Kuo, it was voted on and unanimously carried to move into executive session in accordance with HRS §92-4 and §92-5 "To consider and evaluate personal information relating to individuals applying for professional or vocational licensed cited in section 26-9 or both," and "To consult with the Board's attorney on questions and issues pertaining to the Board's powers, duties, privileges, immunities, and liabilities," and that the Board will vote on the application after coming out of executive session.

At 11:51 a.m., upon a motion by the Chair, seconded by Mr. Aratani, it was voted on to move out of executive session.

Applications:

Ratification Lists

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

LPNs, license numbers 20851-20874 RNs, license numbers 115265-115842; and APRNs and APRNs with prescriptive authority

Applications

Licensed Practical Nurses:

Upon a motion by Ms. Shields-Hanson, it was seconded by Ms. Boyer, it was voted on and unanimously carried to deny the following applications pursuant to HRS §457-12(a)(1) and (6) and HAR §16-89-60(1):

Adhanet A. Tewoldemedhin Vanessa Leconte Claudia Monjoie

Registered Nurses:

The Chair announced that the following RN application has been deferred for additional information:

Delingcy Guillaume

Upon a motion by Ms. Shields-Hanson, seconded by Ms. Boyer, it was voted on and unanimously carried to approve the following applications:

Maureen Murphy
Travis Oliphant
Candace Harris-Gonzalez
Andrea Navratilova
Mawrean Patterson
Justin Penwell
Shanna Rogness
Janet Somlyay

Upon a motion by Ms. Shields-Hanson, seconded by the Chair, it was voted on and unanimously carried to deny the following applications for licensure, pursuant to HRS §457-12(a)(1) and (6) and HAR §16-89-60(1):

Paul Jacob Fils Cevalet Celestin Ludnie Mede Nadege Dupera Michel Manoucheka Joseph Adebola Ogundana Nerline Joseph Cherylann Rosemary Antoine Phadia Fleurimond Ernsely Esterly

Upon a motion by Ms. Shields-Hanson, seconded by Mr. Aratani, it was voted on with Mr. Kuo, Ms. Boyer, Mr. Aratani and the Chair voting no and the Vice-Chair and Ms. Shields-Hanson voting yes to approve the following applicant:

Shem Kenyanya

There was no quorum and the motion does not carry.

The Chair inquired with DAG Wong what the procedure is in cases where the result would be the same if an opposite motion is made.

DAG Wong replied that people may change their mind and suggested that a Board member make another motion. DAG Wong added that if the motion does not pass the

second time, the decision on the application will then carry over to the next meeting.

Upon a motion by the Chair, seconded by Mr. Kuo, it was voted on with Mr. Kuo, Ms. Boyer, Mr. Aratani, Ms. Shields-Hanson, and the Chair voting yes, and the Vice-Chair voting no to deny the following applicant, pursuant to HRS §457-12(a)(8):

Shem Kenyanya

Reactivation Application:

Upon a motion by Ms. Shields-Hanson, seconded by Mr Kuo, it was voted on a unanimously carried to approve the following application for reactivation with the condition that the licensee complete a Board-approved refresher course or retake and successfully pass the NCLEX, pursuant to HAR §16-89-132(b)(2) and (3):

Joanna Asuncion

Advanced Practice Registered Nurse:

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

Janet Somlyay

Next Meeting:	Date: Time: In-Person:	Thursday, February 1, 2024 9:00 a.m. PVL Examination Room 330 King Kalakaua Building, 3rd Floor 335 Merchant Street Honolulu, Hawaii 96813	
	Virtual:	Zoom Webinar	
Adjournment:	With no further business to discuss, the Chair adjourned the meeting at 12:01 p.m.		
Taken by:		Reviewed by:	
/s/ Chelsea Fukunaga		/s/ Marc Yoshimura	
Chelsea Fukunaga Executive Officer		Marc Yoshimura Secretary	
12/29/23			
[X] Minutes approv	ed as is.		
[] Minutes approv	Minutes approved with changes; see minutes of		