President Lewis called the March 26 - 27, 2009 Board of Nursing meeting to order at 8:30 a.m. Public notice of this meeting was properly posted at the board offices and provided to all requesting persons, organizations, and news media in compliance with the South Carolina Freedom of Information Act. A quorum was present at all times. The Board’s mission was read.

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<th>CALL TO ORDER</th>
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<tr>
<td>PLACE OF MEETING</td>
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<td>&amp; FOIA COMPLIANCE</td>
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<th>BOARD MEMBERS</th>
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<td>PRESENT &amp; VOTING</td>
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<tr>
<th>C. Lynn Lewis, RN, EdD, MHS, President</th>
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<tr>
<td>Congressional District 3</td>
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<tr>
<th>Sylvia A. Whiting, PhD, APRN-BC, Vice-President</th>
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<td>Congressional District 1</td>
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<th>Trey Pennington, MBA, MS, Secretary</th>
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<td>Public Member</td>
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<tr>
<th>Carrie H. James, RN, MSN, CNA-BC, CCE</th>
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<tr>
<th>Rose Kearney-Nunnery, RN, PhD, CNE</th>
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<th>Brenda Y. Martin, RNC, MN, CNAA</th>
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<td>Congressional District 5</td>
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<tr>
<th>One Registered Nurse Vacancy- Congressional District 4</th>
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<td>Two Licensed Practical Nurse Vacancies- Regions I &amp; II</td>
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<td>One Public Member Vacancy</td>
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<th>STAFF MEMBERS</th>
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<tr>
<td>PRESENT &amp; PARTICIPATING IN CERTAIN AGENDA ITEMS</td>
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<tr>
<th>Joan Bainer, RN, MN, NE BC, Board Administrator</th>
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<tr>
<td>Nancy Murphy, RN, MS, BC, CPM, Program Nurse Consultant-Phyllis Raynor, RN, MSN, Program Nurse Consultant - Practice</td>
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<tr>
<td>Sheridan Spoon, Associate General Counsel</td>
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<td>Jocelyn Andino, Assistant General Counsel</td>
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<td>Dwight Hayes, Office of Licensure and Compliance</td>
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<td>Kathy Meadows, Office of Investigations and Enforcement</td>
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<td>Shirley Robinson, Hearing Counsel</td>
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<tr>
<th>The March 26-27, 2009 Board of Nursing meeting agenda was presented to the Board for review and approval.</th>
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<th>A motion was made by Sylvia Whiting to approve the March 26-27, 2009 meeting agenda changing Items Use of DBT in Recovery Programs and Reaching Out to Clients and their Families from action to discussion. Brenda Martin seconded the motion. The motion carried unanimously.</th>
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<th>APPROVAL OF AGENDA</th>
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| MOTION |

03/09 Board Meeting  Page 1 of 14
Approved by the Board on 05/14/09
The following informational items were presented on the Consent Agenda for Board for approval.

- NCLEX RN and PN Summary Statistics for 2008
- Schools with Deficient NCLEX Pass Rate for Test Year 2008
- H3499- Nursing Hours
- Board of Medical Examiners Letter to Dept. of Juvenile Justice – APRN Request to Exception to 45 Minute Rule

A motion was made by Rose Kearney-Nunnery to approve the Consent agenda with the removal of Schools with Deficient NCLEX Pass Rate for Test Year 2008. Sylvia Whiting seconded the motion. The motion carried unanimously.

The minutes for the November 20, 2008 and January 29, 2009 Board of Nursing meetings were presented for Board review and approval.

A motion was made by Rose Kearney-Nunnery to approve of the November 20, 2008 and January 29, 2009 Board of Nursing Meeting Minutes with corrections. Sylvia Whiting seconded the motion. The motion carried unanimously.

The Board welcomed Kathy Apple, MS, RN, CAE, Chief Executive Officer and Nancy Chornick, PhD, RN, CAE, Director, Practice and Nursing Regulation of the National Council of State Boards of Nursing (NCSBN).

Ms. Apple explained that NCSBN is composed of member boards of nursing and provides leadership to advance regulatory excellence for public protection. She gave a brief history of NCSBN which was established in 1978 with two important concepts 1) boards coming together to act and 2) counsel together and lessening the burdens of state government. She noted that South Carolina has been very active in NCSBN with Dr. Kearney-Nunnery serving on the Board of Directors as well as present and past staff members serving on various committees.

Ms. Apple spoke to the South Carolina State University students in attendance as part of a nurse leadership class about the importance of regulation and the NCLEX®. Ms. Apple and Dr. Chornick also spoke about the Nursys® license verification system which helps boards share information on licensure and discipline. Nursys® verification by employers and the public will now be free of charge for the participating states. Due to an increase in fraud, a new system called Falsified Information Tracking System (FITS) was recently developed and is free to all boards.

Leadership Succession
Dr. Chornick encouraged staff and board members to stay involved or to get involved on the NCSBN committees as well as on the board of directors and to encourage those who have not participated to become involved.

10 Year Transition Plan for ADN to BSN
This issue was taken up in response to research by Linda Aiken which concluded that more education equates to safer practice. The worldwide education standard is moving toward baccalaureate in science (BSN) degree for nursing. The question is how to move toward that standard. Currently, two thirds of the United States nurses are associate degree prepared (ADN) nurses. One option would require ADN prepared nurses obtain their BSN degree within ten years of licensure. The question arose as to what happens at the end of the ten years if the nurse has not obtained the BSN. Discussion included but was not limited to: raising general education courses in ADN programs to a level that would easily transfer to BSN, Colleagues in Caring articulation model, employer requirement for BSN nurses, employers giving incentives to obtain a higher level education, encouraging students entering into ADN programs to use it as a step toward their BSN, and counseling students in future education goals.

**NCLA Changes**

Currently, there are 23 states in the Compact including South Carolina. Missouri has legislation that is moving forward. Recent changes in the Compact Rules are now being implemented throughout the Compact states.

**Medication Assistant – Certified (MA-C)**

Dr. Chornick spoke about the Medication Assistant – Certified (MA-C). Currently, 28 states have medication assistants. Seven states are piloting the program and seven are proposing legislation. In 2005, NSCBN was asked to develop a model curriculum. The model curriculum includes five segments with 60 hours of didactic and 40 hours of clinical. One must first be a certified nursing assistant before beginning the MA-C program. Dr. Chornick shared model legislation with the Board administrator.

Dr. Lewis and Ms. Murphy attended the National Council of State Boards of Nursing (NCSBN) Mid-Year Meeting. Dr. Lewis found the exercises with the executive officers and presidents to be very informative. Effective and deliberate communication between executive officers and presidents was encouraged. Ms. Murphy shared her documentation and information from the Mid-Year meeting with the Board.

The Board discussed possible dates for its 2009 Strategic Planning Retreat. The 2009 Strategic Planning Retreat will be held on May 15, 2009, the second day of the May Board meeting. The Board considered possible agenda items which included but were not limited to baccalaureate nursing degree to doctoral degree, NCSBN Mission, Vision and Values, Chemical Dependency Committee Update, and Dialectical Behavioral Therapy (DBT) research.

**Minutes**

The Board reviewed the minutes of the October 2008 Advisory Committee on Nursing Meeting Minutes.

A motion was made by Rose Kearney-Nunnery to accept the October 2008 Advisory Committee on Nursing Meeting Minutes as presented. Sylvia Whiting seconded the motion. The motion carried unanimously.
The Board reviewed the minutes of the December 2008 Advisory Committee on Nursing Meeting Minutes. Rose Kearney-Nunnery recused herself due to employment with a school appearing at that meeting.

A motion was made by Sylvia Whiting to accept the December 2008 Advisory Committee on Nursing Meeting Minutes as presented. Carrie Houser James seconded the motion. The motion carried unanimously.

Sylvia Whiting provided the Board with a copy of a veterinarian’s advertisement from her area and explained a personal situation where veterinary staff referred to themselves as “nurses”. The advertisement states “Our technicians are the nurses of our profession.” Nurse is used in the Veterinary Practice Act. Dr. Whiting is opposed to the use of the title “nurse” in this setting and is concerned that two boards within the Department of Labor, Licensing and Regulation have conflict in their practice acts. Dr. Lewis explained that because of her position, she manages a veterinary technician program at her school. She explained that this came to the attention of the American Nurses Association in 2001. The American Veterinary Medical Association has distanced itself from the title. These concerns in no way are meant to devalue the important services of veterinary technicians.

Later in the meeting, Mr. Spoon acknowledged that the title “nurse” is protected in the Nurse Practice Act and that the use of this title in the Veterinarian’s Practice Act is a conflict. He does not feel that the Board of Veterinary Medical Examiners would disagree. They were probably not aware of the protection of this title. One option would be to statutorily change the Veterinarian’s Practice Act. This option comes with the usual problems of other changes being added to legislation when opening a practice act. The Veterinarian’s Practice Act was amended during the same legislative session the Nurse Practice Act.

A motion was made by Sylvia Whiting to recommend that the Board of Veterinary Medical Examiners look at their practice act language that is in conflict with the Nurse Practice Act. Rose Kearney-Nunnery seconded the motion. The motion carried unanimously.

Sylvia Whiting reported that at a recent Recovering Professional Program (RPP) Advisory Committee meeting representatives from another professional association with a program similar to the S.C. Nurses Association (SCNA) Peer Assistance Program in Nursing (PAPIN) expressed concern that they did not know that one of their professionals had been sanctioned and therefore were unable to contact them to offer support to them, their families and staffs. Dr. Whiting noted that due to the larger number of licensees, there are more nurses in the RPP than other licensees. Because of the larger numbers, the same expanded support cannot be given to nurses. The number of PAPIN groups has decreased over the years. Some nurses have difficulty in attending to PAPIN groups due to the distance. Dr. Whiting has been in contact with Judy Thompson, Executive Director, SCNA as well as Peggy Dulaney, Chair of the SCNA Psychiatric-Mental Health Chapter. Dr. Whiting hopes that the Psychiatric-Mental Health
Chapter could assist with this problem. Ms. Dulaney told Dr. Whiting that this issue will be discussed at an upcoming meeting. The SCNA Psychiatric-Mental Health Chapter Executive Committee will be contacting Kathy Pearson who represents SCNA on the RPP Advisory Committee. Judy Thompson expressed concern and noted that the PAPIN groups are run by volunteers which are hard to find. She anticipates a meeting at the end of April. Dr. Whiting hopes these Psychiatric-Mental Health Chapters can provide education. Ms. Bainer is currently serving on the NCSBN Chemical Dependency Committee. She noted that their research showed the importance of family in recovery.

The Board reviewed the Disciplinary Review Committee (DRC) Meeting Minutes from February 12, 2009.

A motion was made by Rose Kearney-Nunnery to approve the February 12, 2009 Disciplinary Review Committee (DRC) Meeting Minutes as presented. Carrie Houser James seconded the motion. The motion carried unanimously.

Ms. Bainer reported that she had spoken with the Department of Labor, Licensing and Regulation-Office of Communications and Governmental Affairs about possibility of developing a compact disk commemorating the Celebration of 100 Years of Nursing Regulation in South Carolina. Their department cannot take on a project of this size at this time. Their suggestion was to possibly utilize Education Television (ETV); however, the cost for the project is estimated at $10,000 which is not fiscally feasible at this time. Ms. Apple stated that the National Council of State Boards of Nursing (NCSBN) resource fund could provide some funding. Discussion included but was not limited to: possibility of a graduate student taking on as a project, working with the USC College of Communications, working with S.C. Nurses Association and nursing education programs to gather historical information, potential conflict in acceptance of outside funds, possible involvement of the museum, interviewing current and past board members, administrators and staff and formation of a Centennial Celebration Committee.

A motion was made by Rose Kearney-Nunnery to ask the Advisory Committee on Nursing (ACON) to form a Centennial Celebration Committee. Brenda Martin seconded the motion. The motion carried unanimously.

Minutes
The Board reviewed the November 2008 Advanced Practice Committee Meeting Minutes.

A motion was made by Sylvia Whiting to accept the November 2008 Advanced Practice Committee Meeting Minutes with changes. Rose Kearney-Nunnery seconded the motion. The motion carried unanimously.

Advisory Opinions
The Board reviewed new Advisory Opinion #54 “What is within the role and scope of responsibility of the registered nurse (RN) in the administration of an anesthetic regional block?” Discussion included but was not limited to:
changing "should have completed Advanced Cardiac Life Support" to "must have completed Advanced Cardiac Life Support," and changing terms such as "crash cart" to more technical names.

A motion was made by Rose Kearney-Nunnery to approve Advisory Opinion #54 "What is within the role and scope of responsibility of the registered nurse (RN) in the administration of an anesthetic regional block?" with editorial changes. Sylvia Whiting seconded the motion. The motion carried unanimously.

Recommendation Regarding Pharmacotherapeutics for APRNs
The Board reviewed changes to the Position Statement on Pharmacotherapeutics Education Required for Prescriptive Authority Application recommended by the Advanced Practice Committee. Due to the improvement in online education programs since adoption of this position statement in July 2004 and the limited number of “live” pharmacotherapeutic education programs, the Advanced Practice Committee recommends “2. A maximum of fifteen percent (15%) of the total required pharmacotherapeutics education may be obtained by approved correspondence, or audiotape or journal courses. For initial applications, this is a limit of 6.75 hours, and for renewal applications, a limit of three (3) contact hours.” be removed from the position statement.

A motion was made by Rose Kearney-Nunnery to remove “2. A maximum of fifteen percent (15%) of the total required pharmacotherapeutics education may be obtained by approved correspondence, or audiotape or journal courses. For initial applications, this is a limit of 6.75 hours, and for renewal applications, a limit of three (3) contact hours.” from the Position Statement on Pharmacotherapeutics Education Required for Prescriptive Authority Application. Sylvia Whiting seconded the motion. The motion carried unanimously.

Minutes
The Board reviewed December 2008 Nursing Practice and Standards Committee Meeting Minutes.

A motion was made by Sylvia Whiting to accept the December 2008 Nursing Practice and Standards Committee Meeting Minutes as presented. Rose Kearney-Nunnery seconded the motion. The motion carried unanimously.

Advisory Opinions
The Board also reviewed changes to Advisory Opinion 24 as well as the review with no changes to Advisory Opinion 9b.

A motion was made by Brenda Martin to approve revisions to Advisory Opinion #24 “Is it within the role and scope of responsibility of the registered nurse (RN) to insert the intraosseous infusion device, and administer fluids, blood and blood products and medications to the pediatric patient?” Rose Kearney-Nunnery seconded the motion. The motion carried unanimously.

A motion was made by Sylvia Whiting to accept the Nursing Practice and Standards Committee Meeting Minutes as presented. Rose Kearney-Nunnery seconded the motion. The motion carried unanimously.
Standards Committee review with no recommended changes to Advisory Opinion 9b - “What is the scope of responsibility of the LPN in the administration of peripheral and central intravenous therapies and procedures?” Carrie Houser James seconded the motion. The motion carried unanimously.

A motion was made by Sylvia Whiting to accept Advisory Opinion #46 – “Is it within the role and scope of responsibilities of the registered nurse (RN) and licensed practical nurse (LPN) to classify leg ulcers and/or stage pressure ulcers? Carrie Houser James seconded the motion. The motion carried unanimously.

It was noted that Board staff has received a number of nominations. Ms. Raynor has contacted nominees to find out if they would be interested in serving in a different position or on a different committee if that position had already been filled or someone else was selected for the position for which they were originally nominated. She has had great response.

Richard Wilson and Frank Sheheen of the Recovering Professional Program (RPP) appeared before the Board. They provided a follow up report from the last Board meeting. Discussion included but was not limited to problems with a particular center used for evaluations, RPP selecting providers, providers assessment process, approved and unapproved providers, due to budget constraints the approved provider booklet has not been reprinted, the most up to date list of approved providers is on the Web site, change of database for RPP which will be able to capture more of the data, 60% of clients are opiate addicted, and opiate addictions have one of the highest relapse rates.

Mr. Sheheen defined a “slip” as when a client has lapsed but is not using substances and is fully compliant with program. He explained that a first time slip can be therapeutic for the client. RPP does not report 1st time slips. Reports to the Board are 2nd time slips or slips with non-compliance. He clarified that when a client begins using again it is considered a relapse.

A motion was made by Brenda Martin to look closely at the next five cases from the center in question for completeness in evaluation of clients. Carrie Houser James seconded the motion. The motion carried with Sylvia Whiting abstaining from vote.

Ms. Bainer reviewed information from the meeting between RPP, Offices of Licensure and Compliance (OLC) and General Counsel as well as Board staff including but not limited to the honoring of consent agreements and quarterly reports, missing quarterly reports to RPP will be reported to OLC, RPP will develop a list of licensees that have delinquent quarterly reports, development of an education worksite approval fact sheet, revision of the worksite approval form, continued Board staff consultation to OLC and RPP, increased communication between OLC and RPP regarding Board appearances so that all documents can be provided by the appropriate deadlines, Board’s request for a minimum of three months of sobriety prior to Board appearance, and the DRC Chair’s request for the number of screens
**USE OF DBT IN RECOVERY PROGRAMS**

Frank Sheheen of the Recovering Professional Program (RPP) discussed information that was provided on Dialectical Behavior Therapy (DBT). He attended training in DBT but has only used it when he worked in inpatient treatment. DBT is used with clients with borderline personality disorders, borderline personality disorder tendencies and occasionally with anti-social or narcissistic disorders. Mr. Sheheen gave a brief history of the development of DBT. It is used with those who reach higher peaks of emotion and take a longer time to return to baseline. He further explained information on the therapy sessions and how these sessions help the client manage their emotions and not harm themselves. It has shown to reduce self-harm, crisis situations and improves their quality of life. Further discussion included but was not limited to the small number of nurses that are referred for DBT, 5% of population has a borderline personality disorder with 98% of that population being female, medications do not work with this problem, the current popularity of DBT, and the need for a specific diagnosis by a qualified evaluator other than the substance abuse counselor.

Mr. Spoon suggested that the Board keep in mind the difference in a diagnosis and a recommendation. Because a client may tend to question the therapy, he asked that the Board consider requiring a specific diagnosis by a qualified clinician with a specific recommendation for DBT by that clinician.

The Board asked RPP to provide research on DBT outcomes for the Board’s Retreat in May at which time it will also consider the requirement for a specific diagnosis by a qualified clinician with a specific recommendation.

David Christian, III, Assistant Deputy Director of the Office of Licensure and Compliance (OLC) explained that at the end of the last renewal period, using the resolution guidelines discussed at the retreat, the renewal process for nurses whose licenses had lapsed was automated. Typically, when renewals

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**MOTION**

A motion was made by Rose Kearney-Nunnery to require a minimum of three months from the last clean screen and compliance with Recovering Professional Program (RPP) including the clean screen. Sylvia Whiting seconded the motion. The motion carried unanimously.

Dr. Lewis, as Board President, expressed concern about signing interim orders of reinstatement without documentation showing the licensee is safe to return to practice.

Mr. Sheheen reported that drug testing is collected by the testing company. RPP requests that they pull at least 26 times per year. The maximum number during a three month period would be eight and a minimum of six.

A motion was made by Rose Kearney-Nunnery that the Recovering Professional Program (RPP) provide the Disciplinary Review Committee (DRC) with the number of drug screens and the number of quarterly reports. Carrie Houser James seconded the motion. The motion carried unanimously.

**MOTION**

Mr. Spoon suggested that the Board keep in mind the difference in a diagnosis and a recommendation. Because a client may tend to question the therapy, he asked that the Board consider requiring a specific diagnosis by a qualified clinician with a specific recommendation for DBT by that clinician.

The Board asked RPP to provide research on DBT outcomes for the Board’s Retreat in May at which time it will also consider the requirement for a specific diagnosis by a qualified clinician with a specific recommendation.
end, a large number of nurses forget to or do not renew their licenses for a variety of reasons and continue to practice. The list of licensees who did not renew is posted on the Board’s Web site as a service to employers and the public. Nurses were given the opportunity to reinstate their license online and pay the fine online to get their license. As with the paper reinstatement, it is on the honor system as to whether they worked or not. Ms. Bainer explained that in the past the licensee paid their fine based on a consent agreement. Mr. Christian explained that if it was a first offense and they chose not to pay the fine they would then go through the consent agreement process. Mr. Hayes stated that this process prevented drafting as many consent agreements. The process is different for second offenses per the policy. For future renewals, 5 business days after the final postmark date accepted, cease and desist letters signed by the administrator will be sent to the 4,000 – 5,000 nurses who typically do not renew. Pursuant to the Board’s policy, nurses who have a lapsed license but have not practiced as a nurse are not fined. Mr. Spoon explained that all practice acts prohibit practice without a license. In the past, unlicensed practice cases were sent to investigations that really did not need an investigation because the violation was admitted. Although most do sign consent agreements, licensees are not required to enter into an agreement and always have the right to appear before the Board. Discussion included but was not limited to the online process being the same as the paper application process, first offense allowed to pay fine, no statutory allowance for a renewal grace period, statutory grace period for physicians with penalties, communication with the Board of ministerial decisions in advance of implementation, timelines for renewals, delegation of decisions not discretion, need for written Board for Nursing guidelines, and non-board specific guidelines for OLC. Mr. Christian explained that the Board of Nursing will be going on the new licensure system. This new system will allow the President to electronically sign consent agreements of this nature as well as a number of other helpful enhancements.

A motion was made by Brenda Martin to reverse the ministerial decision based on statute until such time as the Office of Licensure and Compliance (OLC) can bring forward policies and procedures. Carrie Houser James seconded the motion. Motion failed with one abstention and a nay vote.

A motion was made by Carrie Houser James to add this issue to the May agenda with additional information to include a legal opinion. Rose Kearney-Nunnery seconded the motion. The motion carried with one abstention by Brenda Martin.

Board President Lewis and Mr. Christian had a discussion about the importance of a nurse’s signature on nursing licenses. Currently, per OLC policy, Mr. Christian’s signature is on all license pocket cards for all boards. His signature does not appear on wall certificates for any boards. He reported that different boards have different groups sign their wall certificates. During their discussion, a compromise was met for both Mr. Christian’s and the President’s signature to appear on the pocket card. Mr. Christian reported that with the upcoming renewal period, the Board of Nursing will be going to a paperless licensure system. Wall certificates will still be issued. He explained all board members signatures could be put on the wall certificates
A motion was made by Rose Kearney-Nunnery that until the next renewal period nursing pocket cards would include the signatures of the Board of Nursing President and the Assistant Deputy Director of the Office of Licensure and Compliance (OLC) and that wall certificates will include the signatures of all board members. A motion was amended to include the signature of the Board Administrator on the wall certificate. Carrie Houser James seconded the motion. The motion carried unanimously.

During the motion discussion, Mr. Christian reported that another administrator signs their wall certificates and that they could easily add Ms. Bainer’s signature.

Ms. Bainer explained that nurse licensure applications are approved in Office of Licensure and Compliance with Administrator consultation when needed. Due to the formation of the Office of Licensure and Compliance (OLC), Board Policy #I.E.10 regarding approval of licensure applications needs to be revised. Mr. Hayes reported most “yes” answers on applications submitted to OLC have fallen within the policy established by the Board and that he consults with Ms. Bainer on issues dealing with practice. Discussion included but was not limited to the standardization of licensure processes, the Board reiterated its stance on the importance of nurse involvement in licensure and practice issues as originally stated during the restructuring process, confidence in those currently involved in process but concern for future changes, issues in other boards of nursing resulting in legal actions, concern about erosion of administrator's role in licensure, and communication of changes in licensure processes.

Mr. Hayes further explained that new licensure system will have “real” time reporting, workflow, reporting will be electronically, and that the information will be available to appropriate personnel.

A motion was made by Rose Kearney-Nunnery to defer action on the revision of Policy #I.E.10 Guidelines for Administrator's Approval of Licensure Recommendations until the next meeting or until further information and clarification is received. Sylvia Whiting seconded the motion. The motion carried unanimously.

Ms. Bainer reported that the Compact rule changes must be in place by August 8, 2009. The Board directed Ms. Bainer and Mr. Boland to produce an application with these changes. The application has not been completed at this time but will be completed prior to the deadline.

A motion was made by Rose Kearney-Nunnery to defer action on application changes to comply with Compact rule changes until the May meeting. Carrie Houser James seconded the motion. The motion carried unanimously.

Public and private consent agreements were provided the Board with for their review and consideration. These consent agreements were signed by respondents in lieu of disciplinary hearings. The Board may accept, amend, or reject the agreements. Respondents may sign the consent agreement.
amended by the Board but still have the right to request a panel hearing in lieu of signing the amended agreement.

A motion was made by Rose Kearney-Nunnery to accept the Public Consent Agreements for Case #2008-567, Case #2008-9, Case #2008-521, Case #2008-575, Case #2008-532, Case #2007-363, Case #2008-559, Case #2007-314, Case #2008-511, Case #2008-431, Case #2008-531, Case #2006-159 (Voluntary Surrender), and Cases #2006-189/2007-332 as presented. Sylvia Whiting seconded the motion. The motion carried unanimously.

A motion was made by Rose Kearney-Nunnery to accept Public Consent Agreements two licensure applicants as presented. Sylvia Whiting seconded the motion. The motion carried unanimously.

A motion was made by Rose Kearney-Nunnery to accept a private consent agreement in a case of unlicensed practice. Sylvia Whiting seconded the motion. The motion carried unanimously.

The Board discussed the public consent agreement in Cases #2007-394 and #2008-136. Action on this agreement was deferred pending correction.

A motion was made by Rose Kearney-Nunnery to reject the public consent agreement in Case #2008-142. Sylvia Whiting seconded the motion. The motion carried unanimously.

A motion was made by Brenda Martin to reject the consent agreement in Case #2008-541. The motion did not receive a second. Motion failed

A motion was made by Rose Kearney-Nunnery to reject the public consent agreement in Case #2008-541 citing public safety. Brenda Martin seconded the motion. The motion carried unanimously.

A motion was made by Rose Kearney-Nunnery to reject the public consent agreement in Cases #2006-186/ #2007-332. Sylvia Whiting seconded the motion. The motion carried unanimously.

A motion was made by Rose Kearney-Nunnery to reject the private consent agreement in Cases #2005-233/ #2005-395. Sylvia Whiting seconded the motion. The motion carried unanimously.

The site survey team appointed by the Advisory Committee on Nursing (ACON) completed its survey for the Newberry College proposed baccalaureate degree nursing program on November 18, 2008. A copy of the survey report with the findings and recommendations was provided to the Board. At its February 17, 2009 meeting, ACON recommended that the Board grant initial program approval pending receipt of signed copies of the currently pending clinical agreements. The College provided response materials.

Betsy McDowell, RN, PhD, CCRN, CNE, Chair of the Department of Nursing and Chuck Wendt, Vice President of Institutional Advancement of Newberry
College appeared before the Board to respond to questions. Dr. McDowell reported on the agreements that have been signed to date and when they will be utilizing the clinical facilities later in the program.

A motion was made by Rose Kearney-Nunnery to grant initial approval of the Newberry College baccalaureate degree nursing program. Carrie James seconded the motion. The motion carried unanimously.

The Board was provided with the Resolutions Committee Report and Recommendations for cases reviewed since the January 2009 Board meeting utilizing the Board approved Disciplinary Sanctions Guidelines.

A motion was made by Rose Kearney-Nunnery to approve the Resolutions Committee Report and Recommendations for Consent Agreements. Carrie Houser James seconded the motion. The motion carried unanimously.

A motion was made by Sylvia. Whiting to approve the Resolutions Committee Recommendations for to Dismissals. Rose Kearney-Nunnery seconded the motion. The motion carried unanimously.

A motion was made by Rose Kearney-Nunnery to approve the Resolutions Committee Recommendations for to Dismissals with Letters of Concern. Brenda Martin seconded the motion. The motion carried unanimously.

A motion was made by Rose Kearney-Nunnery to approve the Resolutions Committee Recommendations for Formal Complaints. Brenda Martin seconded the motion. The motion carried unanimously.

The Board reviewed suggested changes to the Policy On Civil Penalties For Unauthorized Nursing Practice (Unlicensed Practice). Changes to the policy included separating advanced practice registered nurse licensure penalties from registered nurse and licensed practical nurse section, increasing the civil penalties for first and second unlicensed practice offenses for APRN and to change reprimand for failure to renew prescriptive authority from a private to a public reprimand.

A motion was made by Brenda Martin to approve the proposed changes to the Policy On Civil Penalties For Unauthorized Nursing Practice (Unlicensed Practice) and to add a sentence that either the Board President or Board Administrator sign the unlicensed practice consent agreements. Rose Kearney-Nunnery seconded the motion. The motion carried unanimously.

The Board reviewed Hearing Panels’ Reports, transcripts and exhibits to determine appropriate sanctions.

Memoranda of Agreement (MOA) regarding violation of the Nurse Practice Act, violation of previous Board orders or unlicensed practice were presented to the Board for review and determination of appropriate sanctions.

Respondents appeared before the Board to respond to questions regarding
their Panel Report or MOA. Respondents were aware of their right to legal counsel. Recovering Professional Program (RPP) representatives from were present to respond to questions in cases regarding their clients.

In Case #2005-347/2008-307, Respondent signed a Memorandum of Agreement, waived right to a panel hearing and right to an attorney. Respondent appeared before the Board without legal counsel.

A motion was made by Sylvia Whiting in Case #2005-347/2008-307 to require Respondent to continue in the Recovering Professional Program (RPP) other counseling, to place Respondent’s license on probation for one year, narcotics restriction, practice in a Board approved work setting under the on-site/on-shift registered nurse supervision, no home based care, agency or telenursing or telehealth, and quarterly employer reports. Rose Kearney-Nunnery made a friendly amendment to accept the RPP recommendation that upon graduation from Drug Court, that Respondent’s license be reinstated. Sylvia Whiting accepted the friendly amendment. Rose Kearney-Nunnery seconded the motion. The motion carried unanimously.

In Case #2008-275, Respondent signed a Memorandum of Agreement, waived right to a panel hearing and right to an attorney. Respondent appeared before the Board without legal counsel.

A motion was made by Rose Kearney-Nunnery to place Respondent’s license on one year probation, practice in a Board approved work setting under the on-site/on-shift registered nurse supervision, no home based care, agency or telenursing or telehealth, quarterly employer reports and to require completion of a Board-approved mediation error course with six months. Brenda Martin seconded the motion. The motion carried unanimously.

In Case #2007-351, Respondent signed a Memorandum of Agreement, waived right to a panel hearing and right to an attorney. Respondent did not appear before the Board and was not represented by legal counsel. Respondent submitted a written request that the hearing be held in Respondent’s absence.

A motion was made by Rose Kearney-Nunnery to go into executive session for the purpose of receiving legal counsel in Case #2007-351. Carrie Houser James seconded the motion. The motion carried unanimously.

A motion was made by Rose Kearney-Nunnery to return to the hearing in Case #2007-351. Carrie Houser James seconded the motion. The motion carried unanimously. No actions were taken during executive session.

A motion was made by Carrie Houser James for Respondent in Case #2007-351 to notify the Board of the resolution of legal actions, Respondent’s license be placed on one year probation, practice in a Board approved work setting under the on-site/on-shift registered nurse supervision, no home based care, agency or telenursing or telehealth, and quarterly employer reports. Rose Kearney-Nunnery seconded the motion. The motion carried unanimously.
Respondent signed a Memorandum of Agreement in regards to unlicensed practice from April 30, 2006 until February 2, 2009. Respondent waived right to a panel hearing and right to an attorney. Respondent appeared before the Board without legal counsel.

A motion was made by Rose Kearney-Nunnery to go into executive session for the purpose of receiving legal counsel. Carrie Houser James seconded the motion. The motion carried unanimously.

A motion was made by Rose Kearney-Nunnery to return to the hearing. Sylvia Whiting seconded the motion. The motion carried unanimously. No actions were taken during executive session.

A motion was made by Brenda Martin in a case of more than a year of unlicensed nursing practice to issue a private reprimand and a civil penalty of $2,500 payable within one year of the date order. Rose Kearney-Nunnery seconded the motion. The motion carried unanimously.

Action on the panel report for Cases #2007-339/2008-4 and a memorandum of agreement for a licensure case were continued.

A motion was made by Sylvia Whiting to adjourn the meeting at 11:30 a.m. on March 27, 2009. Rose Kearney-Nunnery seconded the motion. The motion carried unanimously.

Respectfully Submitted,
Dorothy M. Buchanan, APM
Assistant to the Administrator