A regular meeting of the State Board of Nursing for South Carolina was held on January 24–25, 2002 in Room 108 of the Kingstree Building, 110 Centerview Drive, Columbia, S.C. Public notice of this meeting was properly posted at the Board of Nursing Offices, Kingstree Building, in the Lobby and provided to all requesting persons, organizations, and news media in compliance with Section 30-4-80 of the South Carolina Freedom of Information Act. A quorum was present at all times.

Dr. Rose Kearney-Nunnery, Board President, called the meeting to order at 9:05 a.m. on Thursday, January 24, and at 9:00 a.m. on Friday, January 25, 2002.

The January 24-25, 2002 Regular Board of Nursing Meeting Agenda was presented for review and approval.

A motion was made to approve the agenda as presented. The motion received a second. The motion carried.

The following items were presented on the January 24-25, 2002 Regular Board of Nursing Meeting consent agenda for review and approval.

2.1 Licensure Update
5.1 Summary Statistics on Advanced Practice (Removed)
5.2 Minutes of Dec. 13, 2001 Nursing Practice and Standards Committee Meeting
5.3 Recommendations: Nursing Practice & Standards Committee Membership - 2002-2003 Terms, Barbara Lee-Learned - Reappointment to represent RN Education
5.4 Approval of AANA Approved CRNA Refresher Course for Reinstatement of RN License in SC–Marino Garcia
5.5 Reconsideration of Patient Abandonment Notice requested by Amy Edwards – Recommendation of Nursing Practice and Standards Committee

6.1 Approval of Dec. 6, 2001 Disciplinary Review Committee (DRC) Minutes
6.2 Approval of Nov. 20, 2001 Investigative Review Committee (IRC) Minutes (Removed)
6.3 Unlicensed Practice

8.1 Licensure Recommendations

A motion was made to adopt the Consent Agenda with the removal of 5.1 - Summary Statistics on Advanced Practice and 6.2 - Approval of Nov. 20, 2001 Investigative Review Committee (IRC) Minutes. The motion received a second. The motion carried.

The November 29-30, 2001 Regular Board of Nursing Meeting minutes were presented to the Board for review and approval. A motion was made to approve the November 29-30, 2001 Board Meeting minutes with editorial changes. The motion received a second. The motion carried.

A motion was made to defer approval of the December 17, 2001 Conference Call Meeting Minutes to the March 28-29, 2002 meeting. The motion received a second. The motion carried.

**ADMINISTRATOR’S REPORT**

Martha S. Bursinger, Board Administrator, reported that as of 8:00 a.m. on January 24, 2002 approximately 4,658 RNs were left to renew and 2,134 LPNs were left to renew their licenses. Board Member Kathleen Crispin commended the Board staff for all of their hard work on renewals.

**Licensure Update**

Practitioner Remediation and Enhancement Partnership (PREP)

The Practitioner Remediation and Enhancement Partnership (PREP) will be discussed at the National Council of State Boards of Nursing Mid Year Meeting. The Board has not yet received any signed Memoranda of Understanding (MOU). Providence Hospital has declined to participate in the program citing too many other projects at this time. The legal staff of the S.C. Department of Corrections has reviewed the MOU and sees no problems participating. We expect to hear from them shortly. The S.C. Department of Mental Health has agreed to participate in the program. These State agencies have multiple facilities that would be participating. We are still waiting to hear from Self Memorial.

Unlicensed Assistive Personnel (UAP)

The Board discussed potential financial difficulties associated with the proposed regulation of Unlicensed Assistive Personnel (UAP). The cost of discipline could be very expensive. Licensing and renewal fees may not be enough to cover all expenses. The S.C. Department of Health and Human Services (SC DHHS) would be willing to continue maintaining the registry of UAP Level I should the Board choose a two tiered system similar to North Carolina’s current system. The UAP Level I registry is funded by Medicaid, which does not allow renewal fees to be charged to them. SC DHHS will be maintaining the abuse registry for long-term care settings. The Board of Nursing would approve training for Level II. There are
approximately 23,700 unlicensed assistive personnel reported to be working in state agencies, hospitals, long-term care, etc. This total does not include the Department of Health and Environmental Control or the Department of Corrections. There are 1,089 public schools in South Carolina but there are no records as to how many unlicensed assistive personnel are working in the schools. Another 5,000 must be considered for the UAPs in physician’s offices and other areas not included in the above estimates. Ms. Bursinger will work with LLR staff to develop an estimated budget.

Mid Year Meeting
The National Council of State Boards of Nursing Mid-Year Meeting will be held March 4-6, 2002 in Chicago, IL. Topics of discussion will include: Practitioner Remediation and Enhancement Partnership (PREP); Model Practice Act and Rules; NCLEX; Area Meetings; Foreign Nurse Issues; Nursing Shortage; National League for Nursing Accrediting Commission; Commission on Collegiate Nursing Education and will provide opportunities for networking with other boards of nursing on current issues. Dr. Kearney-Nunnery will dialogue with other boards about ethics, continued competency, and unlicensed assistive personnel (UAP) in their states.

Ms. Bursinger provided Board members with a copy of the new LLR logo as information.

Ms. Bursinger provided Board members with a copy of American Nurses Association’s (ANA) Code of Ethics for Nurses. A copy of the ANA’s Code of Ethics for Nurses with Interpretive Statements had been sent to the Board members previously. The Board office receives a number of calls each week asking if a certain practice is ethical and suggests that the Board adopt the ANA Code of Ethics for Nurses with Interpretive Statements. Drs. Crispin and Oldaker felt that several of the items were standards rather than ethics. The interpretive statements further explain the provisions. Penelope Chase of South Carolina worked with the ANA on this revision. Ms. McClain explained that ethics should be listed in the regulations. Basing discipline on ethics requires those ethics to be a part of the regulations to show specifically what constitutes a violation. Another licensing board lost a legal case because the ethics were not a part their regulations. A committee was formed to review the code of ethics. Dr. Kearney-Nunnery, Mr. Rogers, Dr. Crispin, Ms. McClain and Mr. Hayden will make up this committee. Penelope Chase will also be invited. The committee will meet by conference call.

In an effort to reduce the amount of paper used for board meetings, a program has been written to have the Board Meeting notebooks provided on a compact disk (CD). Board members would use this CD on laptop computers during the Board meetings. Items could also be shown on a screen for guests to view. The Board viewed a blank template of the program and made a few minor suggestions for changes.

At their January 15, 2002 meeting, the Board’s Advisory Committee on Nursing (ACON) voted to change their meetings to be held on the third Tuesday during even months when the Board is not meeting beginning in February 19, 2002. The ACON respectfully requests Board approval to make this change. This would allow the Advisory Committee on Nursing to complete tasks assigned by the Board for presentation at their next meeting.

A motion was made to approve the Advisory Committee on Nursing’s request to hold meetings
Senate Bill 140-AHEC Needs Assessment Of All Health Professionals To Examine The Problems Of The Recruitment And Retention Of Nurses And Nurses Aides
A concurrent resolution requesting the South Carolina Area Health Education Consortium in conducting its statewide needs assessment of all Health Professionals to examine the problems of the recruitment and retention of nurses and nurses aides in South Carolina nursing homes and hospitals and to report its findings and recommendations to the General Assembly before January 1, 2002.

Ms. Bursinger reported that this bill has been in the legislature for the past two sessions. The South Carolina Colleagues in Caring project (SC CIC) has collected data over the past few years and is publishing a paper addressing the shortage, recruitment and retention of nurses in South Carolina. This document will be presented to the Governor and legislature. The Board feels this information should be used by AHEC in their study to prevent a duplication of efforts.

A motion was made to support the study of recruitment and retention for CNAs and remain neutral on the study of nurses since the S.C. Colleagues in Caring project has published a document on recruitment and retention of nurses. The motion received a second. The motion carried.

House Bill 3145 –Criminal Record Checks
A bill to amend Chapter 7, Title 44, Code of Laws of South Carolina, 1976, relating to hospitals, tuberculosis camps, and health services districts, by adding Article 23 so as to require state and federal criminal record checks of direct caregivers employed by nursing homes and home health agencies, to provide for transfer of information among facilities and agencies, to provide for penalties, and to provide that state checks are not required for direct caregivers employed on July 1, 2001, unless they subsequently are unemployed for one year or longer.

Senator Thompson amended the bill to require nurses to have a criminal records check (fingerprint review conducted by the State Law Enforcement Division (SLED) or the Federal Bureau of Investigation) at the time of licensure. The cost of this check would be born by the applicant. The cost of the SLED check is $25 and a fingerprint check is approximately $50. SLED normally completes their records check within a day or so. Fingerprint checks can take up to six weeks or more. The Board is concerned that NCLEX fees recently went up and this would be another cost to the examination applicant just beginning practice. The positive side to this bill is that we would know the criminal background on everyone not just those who answer yes to the conviction question on their application. The negative side is the additional fees and possible licensure delays to our nurses.

A motion was made to oppose H3145 requiring criminal records check because it singles out nurses and it is not required of all healthcare professionals, would require additional expenses to be borne by applicants, and would delay the licensure process although we have a nursing shortage. The motion received a second. The motion carried unanimously.

House Bill 3899 - School Health Nurse
A bill to amend the Code of Laws of South Carolina, 1976, by adding Section 59-1-460 so as to provide that beginning with school year 2002-2003, a school district shall employ at least one full-time school nurse for each seven hundred fifty students enrolled in district schools, to provide that these nurses must be assigned to district schools in a manner that maximizes their efficient use, and to provide for the manner in which funding for this requirement is provided.

This bill would require a 1 nurse to 750 students ratio in all public schools. Ms. Bursinger spoke with Kendall Quinton of the House Ways and Means Committee to determine any movement on House Bill 3899. Mr. Quinton explained that this bill has a fiscal impact of approximately $6 million and due to $300-$500 million budget shortfall he did not see this bill moving forward this year. The cost would be born by agencies that have suffered cuts and would not be able to fund without cutting other programs.

A motion was made for the Board of Nursing to strongly support House Bill 3899 requiring a minimum of a nurse in every school in South Carolina. The motion received a second. The motion carried unanimously.

H4512 Feeding & Hydration Services
A bill to amend the Code of Laws of South Carolina, 1976, by adding Section 44-7-65 so as to authorize a patient assistant to provide feeding and hydration services to patients in nursing homes under the onsite supervision of a licensed healthcare professional if the assistant has successfully completed a training program and competency evaluation conducted by the nursing home.

Ms. Bursinger reported that Department of Health and Environmental Control (DHEC) staff has told facilities that staff that was not certified could not feed patients but then other DHEC staff said that they could because untrained family is allowed to feed patients. The bill is not clear that gastrointestinal and other tubes would not be included in this bill. The Board feels that only oral feeding should be allowed and this language should be included in the bill.

A motion was made to support oral feeding, not intravenous or through a gastrostomy tube, only by trained patient assistants under the supervision of a licensed healthcare professional if the assistant has successfully completed a training program and competency. The motion received a second. The motion carried unanimously.

Senate 323 and House 3552Direct Endorsement Canadian Nurses
To amend the Code of Laws of South Carolina, 1976, by adding Section 40-33-565 so as to establish requirements for licensure without examination for a nurse educated and licensed in Canada.

Ms. Bursinger reported that the S.C. Hospital Association has published their intent ask the legislature to require that South Carolina join the Multi-State Nurse Licensure Compact. If South Carolina were a member of the Multi-State Nurse Licensure Compact, nurses licensed in any other compact member state would be able to practice in South Carolina without applying for licensure here by endorsement. Canadian nurses licensed in any other member state would be allowed to practice in South Carolina based on the requirements of their original state of licensure in the United States.

A motion was made to strongly oppose Senate 323 and House 3552 regarding direct
endorsement without taking the NCLEX. The motion received a second. The motion carried unanimously.

**PRESIDENT’S REPORT**

The Board reviewed a response letter from C. Earl Hunter, Commissioner of the South Carolina Department of Health and Environmental Control (SC DHEC). In his letter, Mr. Hunter thanked the Board for the opportunity to collaborate on assignment of nursing tasks to unlicensed school employees. SC DHEC is currently revising their Guidelines for Medication Administration in the School Health Program Manual and would like input from the Board of Nursing during this process. Ann Lee, State Director of Public Health Nursing is the contact person.

A motion was made to copy the Chief Nurse Administrator of the Department of Health and Environmental Control on correspondence. The motion received a second. The motion carried unanimously.

The Collaboration Committee is made up by Roger Ray, MD, President, Board of Medical Examiners; Ralph N. Riley, MD, President, SC Academy of Family Physicians; Paquita Turner, Executive Vice-President, SC Academy of Family Physicians; Aaron Kozloski, General Counsel, S.C. Medical Association; Tom Wilcox, Administrator, Board of Pharmacy; Lee Ann Bundrick, Board of Pharmacy; James Bracewell, Executive Director, SC Pharmacy Association; Judy Thompson, Executive Director, SC Nurses Association; Rose Kearney-Nunnery, President, Board of Nursing; Keith A. Torgersen, Member, Board of Nursing; Martha S. Bursinger, Administrator, Board of Nursing; and Richard P. Wilson, LLR-Deputy General Counsel. The first Collaboration Committee meeting was very productive. Many questions were asked and answered for in attendance. Discussion included approval of medical acts by both the Board of Nursing and Board of Medical Examiners; a clearer definition of “collaboration;” and schedules for prescriptive authority. According to the present schedule, revised practice acts for the Boards of Nursing and Medical Examiners will be submitted during the same legislative session. The Committee is working to have each practice act support the other with parallel language, where appropriate.

The Committee will meet again via a conference call on February 22, 2002.

The Advisory Committee on Nursing (ACON) needs more information for review and study before submitting a recommendation to the Board on Senate Bill 391 - Registered Nurse First Assistant (RNFA) currently pending in the legislature. A scheduled speaker on this subject was not able to attend the January 15, 2002 meeting.

**REPORTS/UPDATES**

Mr. Wilson reported that the Practice Act Revision Task Force would be meeting on February 8, 2002 in Columbia. Mr. Wilson has prepared a draft of the nurse practice act, designed to meet the statutory organizational framework of Chapter 1, Title 40 also known as the “Engine Act.” This draft will be provided to all committee members prior to their meeting. Mr. Wilson will be provided with copies of the delegation and definition pieces previously approved by the
Board and with information on title protection.

Stephanie Burgess appeared before the Board of Pharmacy to answer questions on prescriptive authority for advanced practice registered nurses (APRN). Board of Pharmacy members will discuss the information presented and contact Ms. Burgess. She has not received comments as of this date. Ms. Burgess will appear before the Board of Medical Examiners and SC Medical Association.

Jack M. White, Jr. Program Director, Recovering Professionals Program (RPP) appeared before the Board as requested. Mr. White reported that the training programs in hospitals went well. Mr. White reported that changes have been put into policy and practice to correct previous problems with documentation of Board order compliance. Nance Weldon is reviewing each file for completeness before it goes to the Disciplinary Review Committee (DRC). The RPP staff is holding bi monthly reviews to assure all monitoring is current. Administrative personnel have been moved to the clinical section of the RPP to relieve them of some of the clerical work. Mr. White believes these changes will correct the problems. Ms. Weldon stated that when someone is coming up for DRC the RPP staff reviews the Board order, matching the Board order requirements with data in the file. Ms. Weldon reported that some nurses join the RPP while they are still under investigation and asked to receive a copy of the Stipulation and Petition when it goes out the individual so they would be able to help the nurse understand the requirements in the order as they receive it. Board members were concerned about RPP staff interpreting portions of the stipulation and petition other than RPP requirements. Currently, a copy of the stipulation and petition is sent to RPP when all parties have signed the agreement and it becomes official. Mr. Hayden is concerned about sending an unsigned document to any agencies. Ms. Weldon said that they understand that the stipulation and petition is not official until the Board approves it. Dr. Crispin would like more communication with the nurses regarding the stipulation and petition. Licensees will be called before a stipulation and petition is sent to them. Mr. Hayden suggested that his staff call licensees about the stipulation and petition they will be receiving and have more communication with licensees.

A motion was made to support the Regulatory Compliance Section in their communication with licensees prior to stipulations and petitions being sent. The motion received a second. The motion carried.

Mr. White reported that he had faxed information on revised measures dated December 10, 2001 which outlined changes made to correct previous problems with documentation of board order compliance. This letter was not received and new copy was faxed to the board this morning. The Board reviewed this letter and felt that it addressed their concerns.

### PROGRAM NURSE CONSULTANT – PRACTICE

Mr. Torgersen asked that more detailed official recognition reports be developed in the computer licensure system and asked for a comparison of this year and last year’s renewal.

Jennifer C. Walker, RN, MSN, CNS of Greenville Technical College appeared before the Board to present their proposed “Medication Review for Healthcare Professionals” course. Greenville Technical College is seeking Board approval for this course and for the Board to

January 24-25, 2002 Board Meeting
refer licensees to this course when required for disciplinary purposes. The on-line course is 20 contact hours without a laboratory component. The Board asked if a laboratory component could be added. The board also requested that Ms. Walker investigate various locations throughout the state where this lab could be offered to increase access to nurses. Ms. Walker agreed to add this component, investigate an additional location for the lab, and to differentiate between the practice of a registered nurse and a licensed practical nurse.

A motion was made to approve Greenville Technical College’s “Medication Review for Healthcare Professionals” course with the inclusion of a laboratory component. The motion received a second. The motion carried unanimously.

Johnny J. Hudson appeared before the Board to request a sixty to ninety day extension of the requirement in Regulation 91-6.c.3 of the Nurse Practice Act that requires evidence of certification be provided to the Board within one year of program completion. Mr. Hudson graduated with his Masters of Science in Nursing degree from the University of Mobile, Alabama on January 24, 2001. He has taken but not successfully passed the family nurse practitioner certification examination from the American Association of Nurse Practitioners (AANP) and the American Nurse Credentialing Center (ANCC). He has attended a review course in Atlanta, Georgia and will attend another review course before he tests again for family nurse practitioner certification in Mid-February and in the acute and adult certification in March 2002.

A motion was made to allow a one-time ninety-day extension (until April 24, 2002) to take the family nurse practitioner certification examination. The motion received a second. The motion carried unanimously.

Mr. Barnwell presented the following draft advisory opinions from the Nursing Practice and Standards Committee for review and approval of the Board.

Draft #41: "Is it within the role and scope of responsibilities of the registered nurse (RN) to perform needle decompression for tension pneumothorax?"

The Nursing Practice and Standards Committee received several requests for practice advise on responsibilities of a registered nurse performing needle decompression for tension pneumothorax. The Committee heard from nurses in several transport units and reviewed literature.

A motion was made to approve draft Advisory Opinion #41 - "Is it within the role and scope of responsibilities of the registered nurse (RN) to perform needle decompression for tension pneumothorax?" as an advisory opinion of the Board of Nursing. The motion received a second. The motion carried unanimously.

Draft #42: "Is it within the role and scope of responsibilities of the licensed nurse to perform certain cosmetic procedures?"

The Committee and a special task force conducted a literature review, surveyed other boards of nursing practice advisories, reviewed position statements of the American Society for Dermatologic Surgery and the American Society for Laser Medicine and Surgery and heard from a nurse practicing in a dermatologic practice. The Board of Medical Examiners also requested a Board of Nursing opinion on laser treatments in light of its advisory that all laser...
procedures be performed under the on-site supervision of a licensed physician. The Committee voted to combine cosmetic procedures for registered nurses and licensed practical nurses in one advisory opinion.

A motion was made to approve draft Advisory Opinion #42 - “Is it within the role and scope of responsibilities of the licensed nurse to perform certain cosmetic procedures?” as an advisory opinion of the Board of Nursing. The motion received a second. The motion carried unanimously.

Mr. Barnwell reported that Board staff is regularly asked about the scope of practice and age parameters of practice for advanced practice registered nurses. (APRN). The Advanced Practice Subcommittee and the Nursing Practice and Standards Committee found that current language related to adolescence and precocious puberty was out of date and unacceptable in current practice. New and clearer language is recommended related to the Adult, including the Acute Care NP and Women’s Health/OB/GYN Practitioners. Their review also recommended that the age parameters for the pediatric nurse practitioner (PNP) be changed from “up to 24 years of age” to “birth through 21 years of age” in order to be consistent with the American Nurses Credentialing Center (ANCC) Certification Manual.

A motion was made that the age parameters of American Nurses Credentialing Center (ANCC) be adopted for advanced practice for age parameters for South Carolina. The motion did not receive a second. The motion died.

A motion was made to send the Recommended Position Statement On APRN Age Parameters back to the Nursing Practice and Standards Committee to work out age parameters as they relate to the certifying groups for areas of practice. The motion received a second. The motion carried unanimously.

In response to several questions related to prescriptive authority practices and policies, the Advanced Practice Subcommittee of the Nursing Practice and Standards Committee (Committee) and its Prescriptive Authority Task Force studied the current regulations and Board of Pharmacy Policy #066. The Subcommittee recommended a new Position Statement regarding telephonic and electronic prescriptions to the Committee. The Committee voted without dissent to recommend its adoption. The major practices that would be changed should the new statement be adopted are: 1) Allowing an Advanced Practice Registered Nurse (APRN) to use a licensed nurse as an agent to call in a prescription. Currently, APRNs must call in their own prescriptions while physicians and physician assistants have a variety of unlicensed assistive personnel (UAP) calling in prescriptions. APRNs wish to use licensed nurses instead of UAPs to call in prescriptions, 2) Require the telephonic or electronic prescription be completely documented in the medical record without requiring that an additional copy be retained. Documentation in the medical record will still provide an audit trail as required in Regulation 91.6.k.5, and 3) Electronically produced signatures would be allowed on legend non-controlled prescriptions as allowed by Board of Pharmacy Policy #066.

A motion was made to approve the new Telephone and Electronic Prescriptions Position Statement as presented. The motion received a second. The motion carried with one nay vote.

REGULATORY COMPLIANCE MANAGER
The Board reviewed the November 20, 2001 Investigative Review Committee (IRC) Minutes regarding when a case is reviewed by the Disciplinary Review Committee (DRC) and recommendations submitted to the Board.

A motion was made that the Investigative Review Committee (IRC) minutes reflect when a proviso is included for an earlier appearance before the Disciplinary Review Committee (DRC). The motion received a second. The motion carried unanimously.

A motion was made to approve the Minutes of the November 20, 2001 Investigative Review Committee (IRC) Meeting with changes noted. The motion received a second. The motion carried unanimously.

It was announced that Dr. Crispin received a letter from Governor Hodges thanking her for her years of service on the Board of Nursing and that he was appointing someone to fill her position representing Congressional District 4. This was her last meeting on the Board. The Board thanked Dr. Crispin for her years of dedicated service to the Board, nurses and the citizens of South Carolina.

A motion was made to allow Kathleen M. Crispin, RN, EdD to continue to serve on the Disciplinary Review Committee (DRC). The motion received a second. The motion carried unanimously.

The Board reviewed a case and recommendation from the hearing panel. The Respondent appeared before the Board.

6.4 A – Respondent Appeared Pro Se
A motion was made to accept the Hearing Panel’s findings of fact, conclusions of law and recommendation as amended. The motion received a second. The motion carried.

Applicants appeared before the Board requesting reinstatement of their lapsed licenses and review of arrests and convictions that have occurred since the license lapsed.

6.5a Applicant Appeared Pro Se and was sworn in. Respondent’s license lapsed on 01/31/99. A motion was made to uphold the denial of re-licensure for Applicant with the understanding that by law, the Applicant may re-apply for re-licensure in the future. The motion received a second. The motion carried. Five aye votes and two nay votes.

6.5b Applicant did not appear. No action taken.

6.5c Applicant appeared with RPP Representative and was sworn in. A motion was made to overturn the administrative denial of re-licensure, and to reinstate the licensed practice nurse license of Applicant with a one-year suspension with an immediate stay, Applicant must remain in Recovering Professionals Program, submit quarterly employer reports, work in a Board approved setting, not work in home health, must have on-site/on-shift registered nurse supervision. The motion received a second. The motion carried with five aye votes and two nay votes.
NURSE CONSULTANT – EDUCATION

Gayle Heller, Wanda Clark, and Lydia Dunaway of Greenville Technical College appeared before the Board to present a proposal plan to increase enrollment in the Associate Degree Program due to growth of facilities and a great need for nurses in their area. They are requesting approval of faculty to facilitate an increase of 45 associate degree nursing students at the Brashier campus in Summer 2002. Specifically, Greenville Technical College-Department of Nursing is requesting approval to hire four bachelors prepared nursing faculty with a contingency of employment that they complete a master’s degree in nursing within four years and maintain employment at the school. Clemson University School of Nursing has revised their master’s degree options for the education and administration tracts. These courses will be offered at the University Center in Greenville in Fall 2002 at a time convenient for the Greenville Technical College faculty. The Greenville Hospital System and St. Francis Bon Secours have pledged $400,000 and $200,000 respectively to pay faculty salaries, pay tuition and provide for equipment in support of this proposal. The hospital system would also add employees to this cohort which will help increase the number of masters prepared nurses entering the clinical arena or pursuing a career in nursing education.

A motion was made to approve the proposal to allow Greenville Technical College to hire four bachelors prepared nursing faculty with a contingency of employment that they complete a master’s degree in nursing within four years and maintain employment at the school. The motion received a second. The motion carried unanimously.

Ms. Martin recused herself from discussion and voting due to her participation on the Advisory Committee for York Technical College.

Mary Ann Laney, Program Manager and Carolyn G. Stewart, Dean, Health and Human Services, of York Technical College appeared before the Board to present proposed changes to the York Technical College / University of South Carolina-Lancaster (YTC / USCL) associate degree nursing curriculum plan to include an exit point for the practical nursing (PN) licensure examination and a part-time evening curriculum. Following the November 2001 Board Meeting, YTC/USCL was approved to give the diploma in Health Science at the PN exit option. Florence-Darlington Technical College (FDTC) has an ADN with PN exit option. FCTC has 42 credits for the PN option with 22 credits in nursing and 20 in general education. YTC/USCL plans 41 credits for the PN option with 23 credits in nursing and 18 in general education.

A motion was made to approve the curriculum from York Technical College. The motion received a second. The motion carried unanimously.

Dr. Kearney-Nunnery recused herself and turned the chair over to Vice-President Sylvia Whiting for this discussion.

Patricia Slachta, PhD, RN, CS, CWOCN, Chair, Division of Health Services, Technical College of the Lowcountry appeared before the Board to present a proposed revised curriculum. The new program offers multiple entry and exit options. The proposed curriculum includes a 16 credit nursing assistant certificate, 42 credit practical nursing program, and 68 credit associate degree nursing (ADN) program. The new curriculum includes articulation for licensed practical nurses into the ADN program. The new program reflects multiple entry, multiple exit
options that are consistent with educational opportunities encouraged by S.C. Colleagues in Caring.

A motion was made to approve the revised curriculum as presented. The motion received a second. The motion carried unanimously.

Ms. Purvis presented the results of her survey on the use of preceptors in our state. Twenty-two registered nursing educational programs were surveyed. A copy of the survey results is attached to these minutes as information.

The Board ask that this survey information be provided to the Deans and Directors group for review and request input for changes to the practice act.

Data collection instruments for nursing program surveys designed by Dr. Whiting were presented to the Board for review. The Board asked that evaluations from administration, faculty and students of educational programs be added to the documents. Corrections will be made and presented at the March Meeting.

Carolyn Barnett, Practical Nursing Program Coordinator at Aiken Technical College has made an emergency request for a waiver of Regulation 91-30 C.2.a.2 to use a diploma educated nurse to teach in the fundamental clinical area. Ms. Ruth Hall is an experienced practical nursing instructor who is prepared as a diploma nurse and holds a Masters of Arts degree in Vocational Education. Aiken Technical College has an instructor on crutches with a non-weight bearing cast and a part-time clinical instructor who is scheduled to have surgery in February. The College has advertised in local area newspapers, interviewed three qualified bachelors prepared nurse for the clinical position for this semester. Each candidate turned down the position due to the salary offered.

A motion was made to approve Ruth Hall, RN, BA, MA to function as a part-time faculty member in the clinical area for fundamentals and Medical/Surgical I. The motion received a second. The motion carried unanimously.

Ms. Murphy requested that the recommendation on Item c of Section 6-Endorsement Applicants Exceeding Three-Year Testing Limitations of the Licensure Recommendations be amended to reflect that licensure verification has now been received and is no longer a condition of approval in the recommendation.

A motion was made to approve Licensure Recommendations with changes to the recommendation on Item 6 c reflecting that licensure verification has now been received and is no longer a condition of approval in the recommendation. The motion received a second. The motion carried unanimously.

Ms. Murphy presented an amended policy regarding denial of licensure. The Policy on Licensing of Persons with Certain Criminal Convictions has been amended and re-titled Policy for Administrative Denial of Licensure. The amended policy includes pending convictions and disciplinary actions of other boards. The policy also provides that if the Board upholds a
denial, the applicant may reapply for licensure consideration at the end of a twelve month period from the date of the Board’s action.

A motion to approve the policy as amended for immediate implementation. The motion received a second. The motion carried unanimously.

Ms. Murphy reported that there are an increasing number of examination and endorsement applicants who do not wish to sign their Board orders after their appearance before the Board. These applicants are then asking that the Board reconsider the order. Reconsiderations will be accepted for new evidence only. Written requests for reconsideration will be submitted to the Office of General Counsel for review and determination if the evidence is new. Letters requesting the applicant to appear before the Board will note that the appearance before the Board is the opportunity to present all relevant evidence.

**Friday, January 25, 2002**

Examination candidates and endorsement applicants with convictions and/or prior disciplinary action appeared before the Board requesting approval of their applications.

9.1 Endorsement Applicant from Georgia appeared Pro Se and was sworn in. Licensure had been administratively denied and the Applicant requested an appearance for reconsideration by the Board.

A motion was made to approve the application for endorsement. The motion received a second the motion carried.

9.2 Endorsement Applicant from Florida appeared Pro Se and was sworn in.

A motion was made to approve the application for endorsement. The motion received a second the motion carried.

9.3 Endorsement Applicant from Florida – Did not appear. No action was taken.

9.4 Endorsement Applicant from North Carolina appeared Pro Se and was sworn in.

A motion was made to approve the application for endorsement with one-year probation, submit quarterly employer reports, work in a Board approved setting with on-site/on-shift registered nurse supervision. The motion received a second. The motion carried with five aye votes and one nay vote.

9.5 Examination Candidate – A Dec. 2001 ADN Graduate, appeared Pro Se and was sworn in.

A motion was made to approve the application for examination. The motion received a second the motion carried.

9.6 Examination Candidate – A Dec. 2000 PN Graduate, appeared Pro Se and was sworn in.

A motion was made to approve the application for examination. The motion received a second the motion carried.
9.7 Examination Candidate – A Dec. 2001 BSN Graduate, appeared Pro Se and was sworn in.

A motion was made to approve the application for examination. The motion received a second the motion carried.  

With no further business, the meeting adjourned at 10:20 a.m. on January 25, 2002.

Respectfully Submitted, Dottie Buchanan, Administrative Assistant