

**SC DEPARTMENT OF LABOR, LICENSING AND REGULATION
STATE BOARD OF NURSING
110 CENTERVIEW DRIVE, SUITE 202
COLUMBIA, SOUTH CAROLINA 29210**

BOARD MEETING MINUTES - JULY 25- 26, 2002

A regular meeting of the South Carolina Board of Nursing was held on July 25 - 26, 2002 in Rooms 108 and 111 of the Kingstree Building, 110 Centerview Drive, Columbia, South Carolina. Public meeting notice was properly posted at the Board of Nursing Offices, Kingstree Building 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.

**PLACE OF
MEETING
AND FOIA
COMPLIANCE**

Dr. Rose Kearney-Nunnery, Board President, called the meeting to order at 8:30 a.m. on Thursday, July 25, and at 8:35 a.m. on Friday, July 26, 2002.

**CALL TO ORDER
MISSION
STATEMENT**

The Board's Mission Statement was read.

The mission of the State Board of Nursing for South Carolina is the protection of public health, safety, and welfare by assuring safe and competent practice of nursing.

This mission is accomplished by assuring safe initial practice as well as continuing competency in the practice of nursing and by promoting nursing excellence in the areas of education and practice. The Board licenses qualified individuals as licensed practical nurses or registered nurses. Complaints against nurses are investigated and disciplinary action taken when necessary. Schools of nursing are surveyed and approved to ensure quality education for future nurses.

Rose Kearney Nunnery, RN, PhD, President
Sylvia Whiting, RN, PhD, CS, Vice-President [Excused for Friday, 07/26/02]
Debra J. Newton, LPN, Secretary
Mattie S. Jenkins, LPN
Brenda Y. Martin, RNC, MN, CNAA
James P. Rogers, Esquire, Public Member [arrived 11:40 am 07/25/02, Excused 07/26/02]
Keith A. Torgersen, RN, MSN, CRNA
Suzanne K. White, RN, MN, FAAN, FCCM, CNAA
RN Vacancy – Congressional District 3

**BOARD
MEMBERS
PRESENT AND
VOTING**

Martha Summer Bursinger, RN, MSN, Administrator
Robert Barnwell, RN, Program Nurse Consultant-Practice
Nancy Murphy, RN, MSN, Program Nurse Consultant-Licensing
Cynthia F. Purvis, R.N., M.N., Program Nurse Consultant-Education
Donald W. Hayden, Regulatory Compliance Manager
Richard P. Wilson, Deputy General Counsel
Dottie Buchanan, Administrative Assistant

**BOARD AND LLR
STAFF MEMBERS
PRESENT FOR
CERTAIN
AGENDA ITEMS**

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

**APPROVAL OF
AGENDA**

The following items were adopted on the consent agenda:

APPROVAL OF

**CONSENT
AGENDA**

- 2.1a *License Statistics*
- 3.2 *Correspondence: Syble M. Oldaker, PhD, RNCS - Resignation*
- 4.1 *Recovering Professionals Program Update*
- 4.2 *Colleagues in Caring*
- 4.3 *School Nurse Task Force Report*
- 5.1 *Summary Statistics on Advanced Practice*
- 5.3 *Minutes of May 17, 2002 Advanced Practice Subcommittee*
- 5.4 *Information: Letter-Admin of Heparin & Blood by Respiratory Care Practitioners During ECMO Procedures*
- 5.5 *Recommended Appointment to Nursing Practice & Standards Committee Membership*
- 6.1 *Approval of June 13, 2002 Disciplinary Review Committee (DRC) Minutes*
- 6.3 *Unlicensed Practice*
- 7.1 *For Information: Williamsburg Technical College - Intent to Establish a PN Program*
- 7.2 *For Information: Newberry Career Center - Closing*
- 7.3 *For Information: Piedmont Technical College PNP - Satellite Class in Newberry*
- 8.1 *License Recommendations*
- 8.2 *For Information: Appearance Process*

A motion was made to adopt the Consent Agenda with the removal of Item 5.2 - Minutes of Nursing Practice and Standards Committee Meeting. The motion received a second. The motion carried.

MOTION

Minutes of the March 30 - 31, 2002 Regular Board Meeting, April 23, 2002 Conference Call Board Meeting, May 29, 2002 Strategic Planning Retreat, May 30-31, 2002 Regular Board Meeting, June 7, 2002 Conference Call Compact Subcommittee Meeting, and June 26, 2002 Conference Call Board Meeting were presented to the Board for review and approval.

**APPROVAL OF
BOARD MEETING
MINUTES**

A motion was made to approve the March 30-31, 2002 Regular Board Meeting minutes with corrections. The motion received a second. The motion carried unanimously.

MOTION

A motion was made to approve the April 23, 2002 Conference Call Board Meeting minutes as presented. The motion received a second. The motion carried unanimously.

MOTION

A motion was made to defer approval the May 28-31, 2002 Strategic Planning and Regular Board Meeting minutes to Friday. The motion received a second. The motion carried unanimously.

MOTION

A motion was made to approve the June 7, 2002 Conference Call Compact Subcommittee Meeting minutes as presented. The motion received a second. The motion carried unanimously.

MOTION

A motion was made to approve the June 26, 2002 Conference Call Board Meeting minutes as presented. The motion received a second. The motion carried unanimously.

MOTION**ADMINISTRATOR'S REPORT**

Ms. Bursinger introduced Lisa Maseng, Department of Labor, Licensing and Regulations' (LLR) new Legislative Liaison. Ms. Maseng thanked Ms. Bursinger and Ms. Buchanan for their hard work during the last legislative session. She reported that Ms. Bursinger had represented the Board of Nursing very well at numerous legislative committee meetings. She said that Ms. Bursinger was well prepared and well spoken as she made presentations and answered questions.

**LICENSURE
UPDATE**

Ms. Maseng stressed the importance of prompt responses to Ms. Bursinger's requests for opinions on legislative issues. This information is needed quickly to respond at committee meetings and for the Legislative Liaison's office to know the Board of Nursing stance on legislation that may affect the practice of nursing. She reported that practice acts being introduced would be a priority for her office. Ms. Maseng described several databases that are being developed to better serve the boards and other areas of LLR.

Policy for Administrative Denial of Licensure – Nancy Murphy

Ms. Murphy presented a revised Policy for Administrative Denial of License for Board review and approval. She proposed revising the policy to better facilitate the licensing process for the Board, board staff, and applicants. The changes to the policy included adding "*occurring within five (5) years of the application date*" to #2 and changing #3 to read "*Crimes that involve Moral Turpitude (excluding fraudulent checks, shoplifting, petit larceny, and other crimes not deemed to raise a substantial question as to the qualifications and fitness of the applicant or lapsed licensee.)*" or change to read "*Crimes occurring within five (5) years of the application date that involve Moral Turpitude (excluding fraudulent checks, shoplifting, petit larceny and other crimes not deemed to raise a substantial question as to the qualifications and fitness of the applicant or lapsed licensee.)*" or deleting the current #3. There were no proposed changes to the procedure portion of the policy.

**POLICY FOR
ADMINISTRATIVE
DENIAL OF
LICENSURE**

A motion was made to approve changes to the Administrative Denial of License adding, "*occurring within five (5) years of the application date*" to #2 and to change #3 to read "*Crimes occurring within five (5) years of the application date that involve Moral Turpitude (excluding fraudulent checks, shoplifting petit larceny and other crimes not deemed to raise a substantial question as to the qualifications and fitness of the applicant or lapsed licensee.)*" in the policy section. The motion received a second. The motion carried unanimously.

MOTION

Guidelines for Administrator's Licensure Recommendations – Nancy Murphy

Ms. Murphy presented a revised Policy on Licensing of Persons with Certain Criminal Convictions for Board review. The proposed changes will allow the Board's administrator and program nurse consultant to issue licenses, recommend applicant licensure for Board ratification or refer an application to the full Board for consideration under the Board's approved guidelines. Parameters for convictions are listed more specifically in the revised policy.

**GUIDELINES FOR
ADMINISTRATOR
LICENSURE
RECOMMENDA-
TIONS**

A motion was made to approve changes to the Policy on Licensing of Persons with Certain Criminal Convictions. The motion received a second. The motion carried unanimously.

MOTION

960 Hours Requirement – Upcoming Renewal

Ms. Bursinger requested that the Board allow staff to count the hours of nursing practice worked between October through January toward the 960 hour requirement instead of ending the count on September 30th each year as we have in the past.

**960 HOURS
REQUIREMENT**

A motion was made to approve the request to count the hours of nursing practice worked between October through January toward the 960 hour requirement. The motion received a second. The motion carried unanimously.

MOTION

APRN Profiling – Donald Hayden

At the March 2001, the Board approved the concept of mandatory profiling for advanced practice nurses (APRN) and asked for further details. Mr. Hayden presented a draft profile for use in this concept for the web page. The profile accessed by the public would include a hyperlink to the disciplinary action section of the Board's homepage. It was suggested that the profile be revised

APRN PROFILING

to include “multi-lingual” and to amend items to read “hospital/practice” and “certification/specialty” and that “supervising physician” be deleted.

A motion was made to approve the profile with noted changes. The motion received a second. The motion carried unanimously.

MOTION

PRESIDENT’S REPORT

Board staff developed a draft position statement on Mutual Recognition via the Nurse Compact (Compact) at the Board’s request. The Nursing Practice and Standards Committee and Advisory Committee on Nursing reviewed this draft position statement at their June Meetings. With several abstentions, the Nursing Practice and Standards Committee voted 6-1 to oppose South Carolina’s entry into the Compact. The Advisory Committee on Nursing voted unanimously to oppose South Carolina’s entry into the Compact. A letter from Kenneth A. Shull, FACHE, Secretary of the South Carolina Hospital Association supporting the Compact was provided to the Board.

**MULTI-STATE
NURSE
LICENSURE
COMPACT
POSITION PAPER**

The Compact currently includes registered and licensed practical nurses only. The National Council of State Boards of Nursing (NCSBN) will discuss mutual recognition of advanced practice registered nurses (APRN) at their Delegate Assembly in August 2002.

Mr. Wilson reported that legislative staff would review the constitutionality of the Compact when legislation is presented. Ultimately, the courts will have the final say on constitutionality. During discussion, it was asked if South Carolina already accepts the lowest common denominator by accepting other state’s licensure requirements when a nurse endorses to South Carolina. Currently, nurses who endorse into South Carolina must still meet South Carolina requirements. For example, the North Carolina Board of Nursing directly endorses Canadian nurses. Even though the nurse is licensed in North Carolina they still must have successfully completed the NCLEX or have been licensed in the United States for three years as required by current South Carolina law. Some states accept the nursing education programs from all branches of the military. South Carolina accepts one Army practical nursing education program only. Some states allow students to take the NCLEX before completing their education program or use a combination of experience and education to take the NCLEX. Re-licensure requirements vary from state to state. Under the Compact, nurses must comply with the practice laws within the state they are working. Discipline is a major issue with the Compact. NURSIS is a major part of the Compact and allows states to review disciplinary information on Compact licensees quickly.

New and better ways must be considered to address the nursing shortage in our state and across the nation. The Compact may help with that task. It was asked if current Compact states have seen an increase in nurses working and a lessening of the nurse shortage in their states and will participation in the Compact allow for increased nursing manpower? The Compact allows employers to hire nurses with particular specialties quicker to meet their current staffing needs. Nurse salaries vary by region and have a great impact on where nurses choose to work. Not joining the Compact and continuing to require a licensing endorsement process may make South Carolina less desirable for nurses to come to in the future. The Compact may not decrease the shortage, as more new nurses need to be educated and come into the nursing profession; however, the Compact will increase the availability of nurses for employment in our state. It will especially assist traveling nurses filling needs across the country. During times of national or regional disasters, nurses from Compact states would be able to assist with more ease using their multi-state license. South Carolina should be a leader in solving the nursing shortage and not put up barriers. The Board agreed that the focus should be on patient safety and not on financial

concerns of the Board.

Mr. Jim Walker of the South Carolina Hospital Association (SCHA) thanked the Board and staff. He expressed SCHA's strong support of the Compact in South Carolina. Karen Carroll reported there are three military facilities in the Beaufort area and that many military nurses and their nurse spouses do not work in the public sector because they do want to go through the licensure process and are not sure how long they may be stationed here. If they were licensed in a Compact state they would be able to work for the time they are living in South Carolina. Pennie Peralta, Marilyn Shafter and Pat Johnson all expressed their support the Compact. Ms. Peralta stated that Joint Commission on Accreditation of Healthcare Organizations (JCAHO) holds facilities responsible for the competency of all nurses in their employment. They all spent a great deal of money on recruitment and that there are approximately 100 new graduates to fill 400-500 open positions. Terri Keels, President of the SC Organization of Nurse Executives, agreed with Ms. Peralta and stated that they, too, spend a large amount of money on recruitment and advertising. Ms. Keels said South Carolina is very attractive to people who are retiring and may bring experienced nurses who wish to continue in the profession. She feels the Compact can be a tool to obtain and keep nurses in our system. She also stated that she feels South Carolina would benefit from a continuing education requirement.

MOTION

A motion was made to approve the Nurse Licensure Compact for South Carolina. The motion received a second. The motion carried unanimously.

MOTION

A motion was made to request staff to develop an issues document, action plan, and timeline to move forward for the implementation Nurse Licensure Compact. The motion received a second. The motion carried unanimously.

Mr. Hayden suggested a caveat be added to any legislation allowing implementation of the Compact in approximately two years or more to allow ample time for computer updates, education of nurses and nursing employers and to set up systems

Ms. McClain suggested Dr. Kearney-Nunnery and Ms. Bursinger meet with Rita McKinney, Director of the Department of Labor, Licensing and Regulation as the next step regarding the Compact.

REPORTS/UPDATES

Practice Act Revision Task Force

Mr. Wilson reported for the Practice Act Revision Task Force (NPA Task Force). A great deal of time and effort has gone into bringing the practice act in conformity with the Engine Act. The paralegal who provided a great deal of assistance with this important project has recently left the LLR-Office of General Counsel and her position has not yet been filled.

**NURSE PRACTICE
ACT REVISION**

A motion was made for the Board to formally request that the South Carolina Department of Labor, Licensing and Regulation (LLR) provide the necessary support staff to the Board and the Office of General Counsel to accomplish board business including the revision of the nurse practice act and additional current business. The motion received a second. The motion carried unanimously.

MOTION

The Board discussed biennial renewal of licenses. We must be careful about funds from biennial renewal. Fees are collected in one year to cover operating costs for two years. This could cause a

problem if we experience across the board budget cuts. The Board asked for projections on renewing registered nurses one year and license practical nurses and advanced practice registered nurses (APRN) the following year. The NPA Task Force is working on wording that would allow flexibility in such matters as biennial renewal.

Issues like continued competency need to be decided by the Board and then added to the revised practice act. Exact requirements need to be in the statute to avoid problems similar to those we are currently experiencing with the 960-hours requirement. Ms. Bursinger will research and develop a list of options for the measurement of competency for presentation at the September 2002 Board Meeting.

In the revision of the practice act, the Board asked that the following areas be included: Acceptance of the American Nurses Association (ANA) Code of Ethics, legislation passed this year, advanced practice registered nurse (APRN) profiling, Recovering Professional Program, unlicensed assistive personnel, faculty requirements and clinical sites.

Practice Act Revision - APRN

Stephanie Burgess appeared before the Board to provide an update on the revisions to the advanced practice registered nurse (APRN) portion of the nurse practice act. Ms. Burgess is waiting for information from several APRN groups. All areas of the revision have not been negotiated. The main points of discussion are the word “collaborative” and the expansion prescriptive authority for APRNs. The group is still working together. Ms. Burgess apologized for the problems with the state-by-state analysis. In Draft 24, new certified registered nurse anesthetists (CRNA) applicants would be required to hold a master’s degree. Currently licensed CRNAs would be “grandfathered” when this requirement goes into effect. “Collaborative” needs to be clarified for clinical nurse specialists (CNS) with APRN licensure. Some CNSs do not have practice agreements with physicians.

Aaron J. Kozloski, General Counsel for the South Carolina Medical Association stated they agree with the concept of APRN licensure instead of official recognition. He said that the major areas of disagreement in the revisions to the nurse practice act are national guidelines instead of protocols, “collaboration” and expansion of prescriptive authority to Schedule II, although they are not sure about Schedules III and IV.

Dr. Stan Ulmer spoke for the South Carolina Society of Anesthesiologists (SCSA). They are concerned that Draft 24 gives APRNs independent practice by removing physician supervision. Collaboration is defined as joint care of patients, which is unacceptable as the physician must be responsible. The SCSA opposes full prescriptive authority for APRNs. Dr. Ulmer stated that national guidelines are unacceptable as liability and responsibility lie at the local level, so practice standards should also.

Ms. Burgess stated that she recognized that this would be a continuing process for everyone to work out an agreement on language. Mr. Wilson will assist with language to clarify these areas.

Definitions & Scope of Practice

Gayle Heller and Kathleen Crispin from the original Advisory Committee on Nursing (ACON) Definitions and Scope of Practice Task Force revised their document, which was approved by the ACON at their June 18, 2002 meeting. The Board reviewed each change.

A motion was made to remove “within the framework of the nursing process” from (c) on page one of the Definitions and Scope of Practice. The motion received a second. The motion carried

ADVANCED PRACTICE REGISTERED NURSE

DEFINITIONS & SCOPE OF PRACTICE

MOTION

unanimously.

A motion was made to make the following changes to the definition of practical nursing in the revised Definitions and Scope of Practice paper: remove “for persons with common well defined health problems with predictable outcomes. The acts,” and to keep the words “and” and “may”, which goes back to language in the original paper. The motion received a second. The motion carried unanimously.

MOTION

A motion was made to accept the Definition and Scope of Practice reserving the right to review the definition of “competence” at the September Board Meeting. The motion received a second. The motion carried unanimously.

MOTION

Ms. Martin reported that the Unlicensed Assistive Personnel (UAP) Task Force has not met since the last Board meeting.

UAP TASK FORCE REPORT

A motion was made to table discussion on UAP Draft Position Statement as the task force has not had the opportunity to review the proposal and the Task Force will meet immediately upon adjournment of the Board meeting on Friday.

MOTION

The Board reviewed the revised Delegation and Supervision of Unlicensed Assistive Personnel, which was originally accepted by the Board at their September 1998 Meeting. Don Guffey of the S.C. Department of Health and Environmental Control, who was the original task force chair as well as the Nursing Practice and Standards Committee on June 20, 2002, approved the revisions. The Board asked that the Five Rights of Delegation be incorporated into the paper.

DELEGATION & SUPERVISION OF UNLICENSED ASSISTIVE PERSONNEL

Further discussion on the Delegation and Supervision of Unlicensed Assistive Personnel paper was tabled for further review.

PROGRAM NURSE CONSULTANT – PRACTICE

The minutes of the June 20, 2002 Nursing Practice and Standards Committee meeting were removed from the Consent Agenda for discussion. Ms. White expressed concern about Item 2 in the minutes regarding the discussion of changes to Advisory Opinion 10b allowing a licensed practical nurse (LPN) to adjust rates and discontinue infusion in patient controlled analgesia (PCA). Currently LPNs are not allowed to begin, adjust the rate or discontinue PCA.

MINUTES OF NURSING PRACTICE & STANDARDS COMM. MEETING

A motion was made to approve the minutes with the recommendation that the Practice and Standards Committee readdress patient controlled analgesia administration in the role of LPNs. The motion received a second. The motion carried unanimously.

MOTION

Mr. Barnwell presented revised policies establishing the membership and functions of the Nursing Practice and Standards Committee and Advanced Practice Subcommittee as approved and recommended by the Committee. The policies now reflect the Board’s request to list all member positions currently authorized, and additional changes to the membership recommended by the Committee. A key addition to the policies is to set a membership attendance requirement. If approved, the Committee chair and Subcommittee chair may request that the Board President allow removal of members who do not meet the attendance requirements. The Committee recommended the removal of a representative of the S.C. Federation of Licensed Practical Nurses position (currently vacant) and the Wound/Ostomy/Continence position (inactive member). The S.C. Federation of Licensed Practical Nurses appears to have dissolved without a plan for

NURSE PRACTICE & STANDARDS COMMITTEE AND APRN SUBCOMMITTEE POLICY REVISIONS

reorganization. The Committee will call upon additional licensed practice nurse and wound/ostomy/continence practice specialists as needed.

The Board discussed the revisions and asked that the policy be reworded to say “Members *may* include: “ and that the positions be “bulleted” in the policy rather than numbered. There are several members who represent more than one practice area on the Committee.

Mr. Barnwell will make the recommended changes and present the revised policy at the Board meeting in September 2002.

Motion to approve the Policy on Advanced Practice Subcommittee to the Nursing Practice and Standards Committee as presented. The motion received a second. The motion carried unanimously.

MOTION

The Nursing Practice and Standards Committee completed its review of Advisory Opinion 27 after consideration of all communications received from various groups since the last revision in November 2001. The Committee found the advisory opinion continues to provide sound practice guidance to the nursing community and recommends only one change. Paragraph #1 allows anesthetic agents to be administered by a registered nurse (RN) for facilitation of intubation “if a qualified provider is immediately present and prepared to intubate the patient, if needed.” The phrase “if needed” has caused some confusion. The Committee recommends this phrase be deleted. The intent of this provision is to allow the RN to administer the anesthetic agent if a physician or CRNA is immediately present and prepared to intubate a patient who has already been assessed as needing intubation.

**RECOMMENDED
REVISION TO
ADVISORY
OPINION #27**

A motion was made to approve Advisory Opinion 27 with the deletion of “if needed” in the paragraph numbered 1 of the advisory. The motion received a second. The motion carried unanimously.

MOTION

Mr. Barnwell presented a draft of the Advanced Practice Registered Nurse (APRN) Audit Letter Template for the Board’s review.

**DRAFT APRN
AUDIT LETTER**

A motion was made to send the revised audit letter and checklist back to the Advanced Practice Subcommittee to review for clarity and completeness. The motion received a second. The motion carried unanimously.

MOTION

REGULATORY COMPLIANCE MANAGER

The Board reviewed cases and recommendations from the hearing panel. Respondents appeared before the Board to respond to questions.

**CERTIFIED
PANEL REPORTS**

6.4a Respondent appeared without counsel to respond to questions from the Board. Respondent was sworn in. The Hearing Panel found that Respondent was in violation of §40-33-935(e), (g) Regulations 91-19(c)(2)(c), (h), and (c)(2)(j). The Hearing Panel recommended that Respondent’s license to practice nursing be immediately suspended; the suspension be immediately stayed and Respondent’s license reinstated in a probationary status for a period of not less than two years, upon the following terms and conditions of probation: a) attend and successfully complete a Board approved Legal Aspects Course within a time frame specified by the Board and b) during the period of probation, Respondent’s practice be strictly limited to a specific setting and location approved in writing in advance by the Board and further Respondent not be approved to work in a

home health environment and practice be under the supervision of a registered nurse present on site at all times.

MOTION

A motion was made to go into executive session for the purpose of receiving legal counsel on a disciplinary matter. The motion received a second. The motion carried unanimously.

MOTION

A motion was made to return to public session. The motion received a second. The motion carried unanimously.

MOTION

A motion was made to suspend the Respondent's license for not less than one year, during that year must take a Legal Aspects, Medication and Ethics course after that year my request reinstatement of license. The motion received a second. The motion carried with one abstention.

6.4b Although properly notified, Respondent did not appear to respond to questions from the Board and was not represented by counsel. Respondent did not appear for the panel hearing and was not represented by counsel. The Hearing Panel found that Respondent was in violation of §40-33-935(g) and Regulations 91-19(c)(3)(c) and (c)(3)(f). The Hearing Panel recommended Respondent be issued a public reprimand, that prior to reinstatement of the Respondent's lapsed license, Respondent be required to undergo an evaluation through the Recovering Professionals Program, followed by a written report to the Board which should include a recommendation as to the Respondent's ability to safely practice nursing.

MOTION

A motion was made to accept the Hearing Panel's Findings of Fact, Conclusions of Law, and issue a public reprimand, \$500 civil penalty and require a Board appearance prior to reinstatement. The motion received a second. The motion carried unanimously.

6.4c Although properly notified, Respondent did not appear to respond to questions from the Board and was not represented by counsel. Respondent did not appear for the panel hearing and was not represented by counsel. The Hearing Panel found that Respondent was in violation of §40-33-935(g) and Regulations 91-19(c)(2), (c)(3)(b), and (c)(3)(j). The Hearing Panel recommended that Respondent's license be suspended; however, suspension may be stayed and Respondent's license reinstated in a probationary status for a period of not less than one year upon the following term and conditions of probation: a) prior to reinstatement Respondent be required to successfully complete a Board approved legal aspects workshop and b) during the period of probation, Respondent's practice be strictly limited to a specific setting and location approved in writing in advance by the Board and Respondent should not be approved to work in a home health environment, must be under the supervision of a registered nurse present on site at all times, and a \$500 civil penalty.

MOTION

A motion was made to accept the Findings of Fact, Conclusions of Law, and Recommendations with amendment that license be suspended for a period of not less than one year, upon the following terms and conditions of probation: a) prior to reinstatement must successfully complete a Legal Aspects Workshop and a Medication course, practice be restricted to a Board approved setting, on-site, on-shift registered nurse supervision, no home health, quarterly employer reports and a civil penalty of \$500. The motion received a second. The motion carried unanimously.

Respondent requested to make a personal appearance before the Board to regain her nursing license. Respondent was sworn in. Respondent voluntarily surrendered her license to practice as a registered nurse in South Carolina. Respondent was required to provide documentation to the Board that she was safe and competent to practice nursing prior to reinstatement.

**REINSTATEMENT
REQUEST**

A motion was made to go into executive session for the purpose of receiving legal counsel on a disciplinary matter. The motion received a second. The motion carried unanimously. **MOTION**

A motion was made to return to public session. The motion received a second. The motion carried unanimously. **MOTION**

A motion was made to continue the license suspension until medication administration course to be completed and \$500 civil penalty paid within three months and then may reapply to the Board for reinstatement. The motion received a second. The motion carried unanimously. **MOTION**

Respondent requested to appear before the Board regarding her nurse licensure in lieu of a Panel Hearing. **FULL BOARD HEARING**

Respondent appeared with Bill Gibson and Nance Weldon of the Recovering Professionals Program (RPP) and friend. Mr. Gibson and her friend spoke on her behalf. Ms. Weldon read a letter of support from her employer.

A motion was made to suspend license for one year with immediate stay, continue Recovering Professionals Program (RPP), quarterly employer reports, on-site, on-shift RN supervision. The motion received a second. The motion carried with five yeas and two abstentions. **MOTION**

Mr. Hayden submitted a request that the Board approve the revision of Section 40-33-230 of the nurse practice act to read, "Members of the Board, and persons authorized by the Board to serve on disciplinary panels, shall receive for their services a per diem, mileage, and subsistence as provided by law for State Boards. Such compensation shall be paid from Board funds. As appropriate, these funds will be recouped from the fines account as a case expense." Mr. Hayden stated that this would include Hearing Panel Members and the Disciplinary Review Committee member, who are considered part of the hearing panel. The Board also discussed per diem for the Nursing Practice and Standards and the Advanced Practice Subcommittee and will consider this in the draft of the revised nurse practice act. **COMPENSATION OF DESIGNATED INDIVIDUALS ON DISCIPLINARY PANELS**

A motion was made to approve "Members of the Board, and persons authorized by the Board to serve on disciplinary panels, shall receive for their services a per diem, mileage, and subsistence as provided by law for State Boards. Such compensation shall be paid from Board funds. As appropriate, these funds will be recouped from the fines account as a case expense." The motion received second. The motion carried unanimously. **MOTION**

Mr. Wilson will present language for other committees at a later meeting.

NURSE CONSULTANT – EDUCATION

Dr. Whiting represented South Carolina State University as the Interim Chair of the Nursing Department and recused herself from discussion and voting. Dr. Earline M. Simms, Associate Vice-President for Academic Affairs was also present to represent South Carolina State University (SCSU). Dr. Leola Adams, is currently in China and unable to attend this meeting. This matter was deferred from the May 2002 Meeting pending receipt of more details on South Carolina State University's exact plans for improvement and National Council Licensure Examination (NCLEX) results. Currently, 26 students have graduated and completed the review course. Sixteen of the students have tested with 10 successful (62.5%). This includes a student who tested in Georgia **SURVEY VISIT REPORTS – SOUTH CAROLINA STATE UNIVERSITY**

and one who tested in North Carolina. Two graduates have not yet registered for the NCLEX. Dr. Whiting stated that although some students do not pass on their first attempt, many are successful on their second attempt. Dr. Whiting reported that she could recall only one SCSU graduate coming before the Board on a disciplinary matter. That graduate received only a letter of concern.

The program has accepted 102 students for the fall semester – 27 seniors; 35 juniors; 40 sophomores. Classes begin on August 19, 2002. There is concern regarding the number of faculty available to students. Dr. Whiting is actively recruiting faculty and expects to meet the faculty/student ratio. SCSU cannot pursue NLN accreditation without full program approval by the Board. Their program is currently on conditional status until January 2003. SCSU is committed to their nursing program and has made it a top priority. The Board received letters from USC College of Nursing and USC School of Public Health committing to help SCSU succeed.

Several South Carolina State University nursing students appeared before the Board and spoke in support of the SCSU program.

MOTION

A motion was made to defer action on the Approval of the South Carolina State University BSN nursing program until the November 2002 Board Meeting when NCLEX results and master plan will be available. The motion received a second. The motion carried unanimously.

FRIDAY, MAY 26, 2002

Approval of the May 28-31, 2002 Strategic Planning and Regular Board Meeting was deferred from the Thursday portion of this meeting.

APPROVAL OF MINUTES

A motion was made to approve the minutes of the May 29, 2002 Strategic Planning Meeting with corrections. The motion received a second. The motion carried unanimously.

MOTION

A motion was made to approve the minutes of the May 30-31, 2002 Regular Board Meeting with changes. The motion received a second. The motion carried unanimously.

MOTION

NURSE CONSULTANT – LICENSING

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

SPECIAL APPEARANCES

9.1 NCLEX-PN Candidate. Candidate was properly notified and appeared before the Board without counsel to respond to questions from the Board.

A motion was made to allow Candidate to take the NCLEX-PN and upon successful completion be licensed as a licensed practical nurse in South Carolina. The motion received a second. The motion carried unanimously.

MOTION

9.2 NCLEX-RN Candidate. Candidate was properly notified. Candidate notified Board his/her wish to reschedule.

9.3 RN Endorsement Applicant. Applicant was properly notified and appeared before the

Board without counsel to respond to questions from the Board.

A motion was made to go into executive session for the purpose of receiving legal counsel on a disciplinary matter. The motion received a second. The motion carried unanimously. **MOTION**

A motion was made to return to public session. The motion received a second. The motion carried unanimously. **MOTION**

A motion was made to allow Applicant to endorse into South Carolina as registered nurse. The motion carried unanimously. **MOTION**

9.4 NCLEX-PN Candidate. Candidate was properly notified and appeared before the Board without counsel to respond to questions from the Board. Ms. Martin recused herself from discussion and voting.

A motion was made to allow Candidate to take the NCLEX-PN and upon successful completion be licensed as a licensed practical nurse in South Carolina. The motion received a second. The motion carried unanimously. **MOTION**

9.5 RN Endorsement. Applicant was properly notified and appeared before the Board with his/her spouse but without counsel to respond to questions from the Board.

A motion was made to allow Applicant to endorse into South Carolina as registered nurse. The motion carried unanimously. **MOTION**

With no further business, the meeting adjourned at 11:50 a.m. on July 26, 2002.

ADJOURNMENT

Respectfully Submitted,

Dottie Buchanan, Administrative Assistant