

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

BOARD MEETING MINUTES – MARCH 28-29, 2002

A regular meeting of the Board of Nursing was held on March 28-29, 2002 in Room 108, Kingstree Building, 110 Centerview Dr., Columbia, SC. Meeting notice was properly posted at the Board Offices, Kingstree Building lobby and provided to all requesting persons, organizations, and news media in compliance with the SC Freedom of Information Act. A quorum was present at all times.

**PLACE OF
MEETING
AND FOIA
COMPLIANCE**

Rose Kearney-Nunnery, Board President, called the meeting to order at 9:00 a.m. on Thursday, March 28, 2002, and at 9:05 a.m. on Friday, March 29, 2002. The mission of the Board was announced as follows: 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.

**CALL TO ORDER
AND BOARD
MISSION**

Rose Kearney Nunnery, RN, PhD, President
Sylvia Whiting, RN, PhD, CS, Vice-President
Debra J. Newton, LPN, Secretary
Mattie Smalls Jenkins, LPN
Brenda Y. Martin, RNC, MN (*Excused for Friday*)
Syble M. Oldaker, RN, PhD, RNCS
James P. Rogers, Esquire, Public Member
Keith A. Torgersen, RN, MSN, CRNA
Suzanne Kanipe White, RN, MN, FAAN, FCCM, CNAA

**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
Dottie Buchanan, Administrative Assistant
Richard P. Wilson, Deputy General Counsel

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

The Board welcomed Mattie Smalls Jenkins, LPN and Suzanne Kanipe White, RN, MN, FAAN, FCCM, CNAA. The Governor appointed Ms. Smalls on February 5, 2002 as Region I-LPN Representative. Her term expires December 2006. Ms. White was appointed on February 7, 2002 representing Congressional District 4. Her term expires December 31, 2005.

**WELCOME NEW
BOARD MEMBERS**

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**

- 2.1 *Licensure Update - a. Renewal Comparison –2001 vs. 2002*
- 2.4 *Advisory Committee on Nursing*
- 3.1 *Board Meeting Attendance – By Laws – Page 3*
- 3.3 *Appointment of New Board Members –
Mattie Smalls Jenkins, LPN*

Suzanne Kanipe White, RN, MN, FAAN, FCCM, CNAA

- 3.3 *Response from DHEC – School Nurses*
- 4.7 *Update: Recovering Professionals Program (RPP) Jack White, Director*
- 4.8 *Report: Colleagues in Caring - Renatta Loquist*
- 5.1 *Summary Statistics on Advanced Practice*
- 5.2 *Minutes of February 21, 2002 Nursing Practice and Standards Committee Meeting*
- 5.3 *Recommended Nursing Practice & Standards Committee Membership*
 - Alda G. (Glyne) Jordan Sommer, to represent Critical Care Nursing*
 - Rebecca W. Faile, to represent Psychiatric/Mental Health Nursing*
- 6.1 ~~*Approval of February 7, 2002 Disciplinary Review Committee (DRC) Minutes*~~-Removed
- 6.2 *Approval of January 31, 2002 Investigative Review Committee (IRC) Minutes*
- 6.3 *Unlicensed Practice*
- 7.5 *Northwestern Technical College – Intent to Establish ADN Program*
- 7.6 ~~*USC–Beaufort– Intent to Establish a Generic BSN Program*~~-Removed
- 8.1 *License Recommendations*

A motion was made to adopt the Consent Agenda with the removal of *Approval of February 7, 2002 Disciplinary Review Committee (DRC) Minutes, Approval of February 7, 2002 Disciplinary Review Committee (DRC) Minutes* and *USC–Beaufort– Intent to Establish a Generic BSN Program*. The motion received a second. The motion carried unanimously. **MOTION**

Minutes for the December 2001 Conference Call, January 24-25, 2002 Regular Board Meeting and February 2, 2002 Conference Call were presented for review and approval. **APPROVAL OF MINUTES**

A motion was made to approve the minutes of the December 2001 Conference Call as presented. The motion received a second. The motion carried unanimously. **MOTION**

A motion was made to approve the minutes of the January 24-25, 2002 Regular Board Meeting as presented. The motion received a second. The motion carried unanimously. **MOTION**

A motion was made to approve the minutes of the February 5, 2002 Conference Call as presented. The motion received a second. The motion carried unanimously. **MOTION**

ADMINISTRATOR’S REPORT

Ms. Bursinger introduced the newest Board staff members: Myra Hawn, Judy Moore, Janet Scheper, and Kathryn Spires to the Board Members. **STAFF INTRODUCTIONS**

RPP Early Release from Board Order - For the benefit of new members, Mr. Wilson explained that the Board of Nursing was a catalyst for putting together Recovering Professional Program (RPP) for monitoring program across boards. The RPP is for substance abuse only, not mental health. The Board’s final orders have included one-year probation with a statement that the licensee’s probation may be stayed with recommendation from RPP and approval of the Board. Other boards in the past have asked that licensees be put back into safe practice as quickly as possible as long as they stay with the program and there is a reasonable assurance that they are getting help. RPP is looking at everything the Board requires in the order including employer reports. Board members asked that we also look at how the employer is informed during this entire process. Mr. Wilson will provide the Board with policy and procedure for review and approval to authorize immediate stays of suspension. **LICENSURE UPDATE**

Multi-State Compact - Jim Walker, Vice-President of the South Carolina Hospital Association (SCHA) appeared before the Board to discuss the National Council of State Boards of Nursing (NCSBN) Interstate Nurse Licensure Compact (Compact). Mr. Walker stated that hospitals are suffering from a shortage in healthcare professionals with 8-24% shortage in nursing alone. The SCHA wants to work with all parties involved in the shortage including the licensing boards, educators, etc. SCHA legal counsel has reviewed the Compact and sees no constitutional problems. Mr. Walker asks that the Board to support Compact legislation for South Carolina. Mr. Torgersen expressed continued concerns that discipline has not been as well defined, as the Board would like and that discipline is administered differently from Board to Board. Mr. Walker stated that the SCHA is interested in anything that addresses the shortage and quality of nursing. Dr. Whiting also noted that the Compact would also affect the number of South Carolina nurses leaving our state. Mr. Walker stated that trends that more than half of our new nurses come through endorsement from out of state. Dr. Kearney-Nunnery stated that at the NCSBN Mid-Year Meeting, it was reported that seventeen states have passed the Compact in their states but not all have not fully implemented. Colorado, New Hampshire, Louisiana and Illinois have said no to the Compact. Georgia has Compact legislation proposed for the registered nurse but not the licensed practical nurse. The Florida Board of Nursing is studying the Compact. New Jersey has reported that reporting of discipline is now faster. Ms. Bursinger reported that it had been easier for the “free-standing” boards of nursing to join. Many boards of nursing are part of an “umbrella” agency like the South Carolina Board of Nursing. Mr. Wilson provided the Board with a legal opinion on the constitutionality of the Interstate Nurse Licensure Compact. The South Carolina Constitution does not allow the government of this state to discharge its duties to any other entity or state. The Compact would delegate to other states’ legislature the right to determine the qualifications for the practice of nursing in this state by non-residents. Through statute, the Legislature sets requirements for licensure in South Carolina and not all states have the same requirement for nurse licensure. The Compact allows other states to set minimum standards for nurse licensure and would require us to allow nurses licensed under the lowest standards of states in the Compact. Currently, as nurses endorse into South Carolina their license records are checked to assure they have met the minimum requirements for licensing in our state. It was asked how the Compact might assist in time of disaster when nurses are needed to cross state lines. Mr. Wilson said that emergency response issues are addressed in the current law and allows licensed professionals to come to South Carolina to offer assistance. National and State Preparedness will also address emergency medical services. Ms. White said that as the vice-president of nursing in a large hospital system, that in addition to South Carolina they also recruit from North Carolina, Georgia, and Tennessee, which she said operate much like South Carolina. She asked how we could prepare for the future and make the Compact work. She feels the Board must think “outside the box.” She asked how, if all Board concerns were addressed and they deemed this appropriate, could this be implemented. Constitutional changes would have to be made to enact the Compact, which would affect a great deal more than just nurse licensure. The current format of the Compact makes it difficult for us to enact. Ms. Purvis asked about score requirements for those who took the State Board Test Pool Examination (SBTPE) to obtain their licenses. Some states required lower scores than others. A subcommittee of the Practice Act Revision Committee was appointed to include Board Members: James P. Rogers, Suzanne K. White and Board Staff: Martha Bursinger, Administrator and Richard P. Wilson, Board Counsel. This subcommittee will work with Mr. Walker of SCHA. Information and research will be presented in July so that any approved changes can be included the re-write of the nurse practice act

Continued Competence

Practice hours on record were not printed on the renewal applications by decision of prior administration. This has caused problems for nurses keeping up with their hours. Practice hours are counted from October 1 – September 30 each year. Many nurses this year did not have enough

hours to renew. The Board discussed other ways to measure continued competency. Continued competence will be discussed in more detail at the Board's Planning Meeting on May 29, 2002.

S238- Criminal Records Checks-A bill to amend Chapter 7, Title 44, Code of Laws of South Carolina, 1976, Relating to health facilities, by adding Article 27 so as to prohibit nursing homes and home health agencies from employing a person who has a criminal Record, to require criminal background checks on applicants, and to provide immunity from liability for information released or termination from employment; And to amend section 43-35-25 relating to persons required to report adult abuse, neglect, and exploitation, so as to require the agencies receiving such reports to also report this information to the attorney general.

LEGISLATION

There is discussion about whether this will be just a SLED records check at \$25 for an individual or through a state agency at \$8. There is also concern about the mobility of some health care workers.

S391 – Registered Nurse First Assistants-A bill to amend Title 40, Chapter 33, Code of Laws of South Carolina, 1976, relating to nurses, by adding Article 15 so as to enact the Registered Nurse First Assistants Act which requires health care facilities to establish procedures for the appointment of Registered Nurse First Assistants (RNFA) and for granting these assistants clinical privileges; and to provide that when health insurance policies, health care services plans, and other contracts pay for surgical first assisting services, they must pay for a RNFA who performs such services.

This bill has passed favorably from committee. The Board has been assured that this bill will not exclude APRNs currently working in this role.

A motion was made to send a letter to the Senate Committee stating we are in support of Bill S391-Registered Nurse First Assistants with the addition of language to adding standard language to not exclude APRNs currently working in this role based on their extended education. The motion received a second. The motion carried unanimously.

MOTION

S977 – Attendant Care Assistants-A bill to amend Section 40-33-10, Code of Laws of South Carolina, 1976, relating to definitions used in the licensure and regulation of nurses, so as to define "Attendant Care Services" and "Individual In Need Of In-Home Care"; and to amend Section 40-33-50, relating to circumstances to which the Chapter does not apply, so as to provide that the Chapter may not be construed to prohibit a person not licensed under this Chapter from providing attendant care services which enable a person to remain at home rather than in an institution and which includes homemaker and companion services and certain health maintenance activities. It was discussed that language in proposed §40-33-50(7) amended by S977 should be changed to read "lay midwives" as it is in current statute. Midwives are regulated by the Department of Health and Environmental Control.

It was suggested that "nothing herein shall be construed as to authorize the unlicensed practice of nursing" to the end of proposed §40-33-50(10). Aaron Kozloski, General Counsel, S.C. Medical Association, said that proponents are pushing "freedom of choice," but there are professional skills that are need to perform certain tasks.

A motion was made to make a recommendation to amend #7 to make language consistent with language in current laws. The motion received a second. The motion carried.

MOTION

H3968 – Diabetes School Care Act-A bill to amend Chapter 39, Title 44, Code of Laws of South Carolina, 1976, Relating to the "Diabetes Initiative Of South Carolina Act", by adding Article 2, so

as to enact the "Diabetes School Care Act", to require the principal at each public school to designate three employees to be diabetes care providers, to also authorize as employees of the Department of Health And Environmental Control assigned to a school and subcontractors to be diabetes care providers, to provide for the training of these care providers, to establish the responsibilities and the scope of authority for a diabetes care provider, to allow a student with diabetes to perform glucose tests, administer insulin, and to attend to the care and management of his or her diabetes and to possess necessary supplies and equipment to conduct these functions, to require the Department of Health And Environmental Control to make information and training materials available to private schools, and to provide that a diabetes care provider acting in accordance with this article is immune from civil and criminal liability and is not practicing nursing and is exempt from all applicable statutory and regulatory provisions that restrict what activities may be delegated to a person who is not a licensed medical professional; and to designate Sections 44-39-10 through 44-39-50 as Article 1, Chapter 39, Title 44 entitled "Diabetes Initiative Of South Carolina" and to rename chapter 39, Title 44 as "Diabetes".

A letter was presented to the Board for review and approval to be sent to Senator Harvey Peeler, Chairman of the Senate Medical Affairs Committee explaining the Board's opposition to this bill due to training of unlicensed assistive personnel to perform nursing duties, which is in direct violation of our nurse practice act. Some of the medications that would be administered can have serious side effects. Statistics on other chronic health conditions of students in South Carolina will also be shared. For example of children under the age of 17: 73,000 children have asthma; 18,163 children have heart disease; 7,300 children under the age of 18 have diabetes; 5,766 children have orthopedic impairments and 1,248 have seizure disorders.

A motion was made to approve the letter to Senator Peeler presented and send copies to committee members. The motion received a second. The motion carried. **MOTION**

The bill requiring a minimum of one school nurse per 750 students has died in the legislature for this year due to funding.

National Council Of State Boards Of Nursing (NCSBN) Mid-Year Meeting

Dr. Kearney-Nunnery and Ms. Bursinger attended the National Council of State Boards of Nursing (NCSBN) Mid-Year Meeting March 4-6, 2002 in Chicago, IL. Information on the Interstate Compact has been presented earlier in this meeting. Further highlights follow.

**NATIONAL
COUNCIL OF
STATE BOARDS
OF NURSING
(NCSBN)**

Delegate Assembly

Vice President Sylvia Whiting and Ms. Bursinger will attend the Delegate Assembly in Long Beach in August 2002.

Practitioner Remediation and Enhancement Partnership (PREP) -David Swankin of Citizens' Advocacy Center (CAC) spoke at the NCSBN Mid-Year Meeting. He invited all participating states attend the CAC meeting on November 12-15, 2002 in San Francisco, California. Mr. Swankin is interested in adding long-term care to PREP in the states not already doing so. North Carolina is adding long-term care to their program and has handled twelve cases so far in participating hospitals. We currently have a signed Memorandum of Understanding (MOU) from the Department of Mental Health. We are still dialoguing with Self Memorial and the S.C. Department of Corrections.

Taxonomy of Error, Root Cause Analysis, and Practice Responsibility- TERCAP -Vickie Sheets, Director of Practice and Regulation, NCSBN, gave an update on TERCAP. This project focuses on learning from mistakes to identify areas for prevention and to create data files. This data will be

used to develop strategies for sharing this information regarding prevention of nursing errors for schools of nursing and agency/institution mandates as well as to inform discipline decision-making groups. Ms. Bursinger completed an application for South Carolina to participate in this program based on previous discussion with Mr. Hayden about his work with the NBSBN Investigator’s Summit. This is an outgrowth from the second Institute of Medicine report, “To Err is Human.”

Practice, Education, and Regulation Congruence Task Force (PERC)-The purpose of the PERC project is to explore the ways regulators, educators, nurses and nurse executives involved in current practice, education, or regulation work together, communicate and identify areas of mutual concern to assure a nursing workforce able to provide safe and effective care. The task force is now in Phase II and will begin development of an action plan to address information identified in Phase I. They will meet again in April 2002.

Mr. Wilson presented a draft *Policy On The Issuance Of Stay Orders Under The Terms Of Final Orders When Recommended By The Recovering Professionals Program*. The Board asked that language requiring documentation of compliance to be sent to Board staff be added to this policy.

**STAYS OF
SUSPENSION
RECOMMENDED
BY RPP**

In the past, there have been problems with receipt of documentation of compliance with a Board order.

A motion was made to approve the *Policy On The Issuance Of Stay Orders Under The Terms Of Final Orders When Recommended By The Recovering Professionals Program* adding “with cases of documented compliance” after “stay of suspension” in the paragraph title Policy; adding “documented evidence of compliance and” after “Staff Receives” in #1 under Procedure and deleting “if requested by the Board President or designee.” The motion received a second. The motion carried unanimously.

MOTION

PRESIDENT’S REPORT

The following committee/task force appointments were approved by the Board of Nursing:

**COMMITTEES &
TASK FORCES**

<u>Committee/Task Force</u>	<u>Board Member</u>	<u>Staff Member</u>
Advisory Committee on Nursing (ACON)	Sylvia Whiting	Martha Bursinger
Disciplinary Review Committee (DRC)	Suzanne White Mattie S. Jenkins	Donald Hayden
Investigative Review Committee (IRC)	Brenda Martin Sylvia Whiting	Donald Hayden
Legislative Committee	James Rogers	Martha Bursinger
Practice Act Revision Task Force	Brenda Martin James Rogers Keith Torgersen	Richard Wilson
Nursing Practice and Standards Committee	Keith Torgersen	Robert Barnwell
RPP Advisory Committee	Suzanne White Sylvia Whiting	Donald Hayden
School Health Task Force	Debra Newton Sylvia Whiting	Robert Barnwell
UAP Task Force	Brenda Martin Debra Newton Keith Torgersen	Martha Bursinger Robert Barnwell
Collaboration Committee	Rose Kearney-Nunnery Sylvia Whiting	Martha Bursinger Stephanie Burgess (ACON)

Board of Pharmacy – APRN and Prescriptive Authority

CORRESPON-
DENCE

Davis Hook, Vice-Chairman and James R. “Bobby” Bradham, Member of the Board of Pharmacy appeared before the Board of Nursing. The Board was concerned and took offense about a motion made at the January 2002 Board of Pharmacy regarding advanced practice registered nurses (APRN) with prescriptive authority and the “propensity of problems” cited in the motion with no documentation being offered. Pharmacy Board members stated that no offense was intended. They shared that the mobility of APRNs at various clinics makes it very difficult for pharmacists to verify the validity of prescriptions. Past problems noted with APRNs include calling pharmacists about new medications being considered. The pharmacist should not be the primary education source. Pharmacists are concerned about the expansion of prescriptive authority to controlled substances for practitioners they do not know. US Drug Enforcement numbers are needed for reimbursement.

Both the Board of Nursing and Board of Pharmacy are committed to better communication between their boards and staffs.

SC Medical Association –Proposed Emergency Regulation to Delete Regulation 91-1.A.1.A(7) - Aaron J. Kozloski, General Counsel for the South Carolina Medical Association (SCMA) appeared before the Board to request amendment to Nursing Board Regulation 91-1 by deleting subsection 1.A.7 which reads *Subject to the rights of licensed physicians and dentists under their respective medical and dental practice acts, the administration of medications is recognized as the responsibility of a registered nurse or licensed practical nurse as prescribed by the licensed physician or dentist. After June 30, 1985 unlicensed nursing personnel shall not administer medications.* Mr. Kozloski cited Section 40-47-60. Practice of Medicine or Osteopathy Restricted, which allows a licensed physician to delegate tasks to unlicensed personnel in his employ on his premises with certain requirements. It was noted that §40-47-60.5(a) states, “*the task is of a routine nature involving neither the special skill of a licensed person nor significant risk to the patient if improperly done.*” The Board feels that simply deleting subsection 1.A.7 of Regulation 91-1.A is too broad. Mr. Kozloski will meet with the Board of Medical Examiners to work on more specific language regarding medication administration and bring it back before the Board of Nursing. John Volmer, Administrator of the Board of Medical Examiners is also concerned with problems this might cause and would like a cooperative effort between the boards to make the provisions parallel and not conflicting.

REPORTS/UPDATES

As previously requested by the Board, Mr. Wilson presented a draft *Policy On Expungement Of Public Records*. This policy states that a licensee who has been issued a public reprimand for a first offense may petition the Board for expungement after a period of not less than one year on the public record, if no additional charges or findings of misconduct have been filed.

EXPUNGEMENT
POLICY

A motion was made to approve the *Policy On Expungement Of Public Records* as presented. The motion received a second. The motion carried unanimously.

MOTION

Mr. Wilson reported that the Nurse Practice Act Revision Group continues to meet and work on changes. The next meeting will be held on April 29, 2002. The Nurse Practice Act and advanced practice registered nurse issues are being kept separate at this time.

NURSE PRACTICE
ACT REVISION
GROUP

Stephanie Burgess, Chair of the Advisory Committee on Nursing's (ACON) Advanced Practice Subcommittee reported that she has received numerous emails regarding the restriction of advanced practice registered nurses (APRN) and certified registered nurse anesthetists (CRNA) practice. The S.C. Medical Association does not support the changes made and is not interested in negotiating. Judy Thompson, SC Nurses' Association, said that it is important to recognize that the APRN community is very upset and urges the Board to move forward. Dr. Kearney-Nunnery stated that certified registered nurse anesthetists (CRNA), midwives and other APRNs need to be added to the Committee. The next Collaboration Committee meeting will be held on April 12, 2002. At this meeting, Mr. Torgersen and Ms. White will represent the Board and Ms. Burgess will represent the Advisory Committee on Nursing's (ACON) Advanced Practice Subcommittee.

Ms. Martin reported that the Emergency Contraception Committee met in February 2002. The Committee discussed the risks and liabilities of nurse practitioners practicing over the Internet. They are concerned about how the practitioner/patient relationship could be established without an actual meeting. Ms. Martin will report as future meetings are held.

**EMERGENCY
CONTRACEP-
TION
COMMITTEE**

Dr. Whiting reported that the Task Force met on March 25, 2002. Several guests were in attendance and were very helpful. There will be legislative hearing regarding school nurses on May 8, 2002. Dr. Whiting and Ms. Bursinger will attend.

**SCHOOL HEALTH
TASK FORCE**

Currently, the law protects the titles registered nurse (RN) and licensed practical nurse (LPN); however, a person may hold himself/herself out to be a nurse without being either an RN or LPN. Mr. Barnwell proposed language modeled after the North Carolina Nursing Practice Act.

**TITLE
PROTECTION –
REVISED
PRACTICE ACT**

A motion was made to include title protection in the revised practice act. The motion received a second. The motion carried.

PROGRAM NURSE CONSULTANT – PRACTICE

Michelle Peterson, Hollings Cancer Center and Deborah Williamson, MSN, CNM, Director of Faculty Practice, College of Nursing, Medical University of South Carolina appeared before the Board to request a waiver of the 45-mile. The MUSC mobile van for cancer screenings, hypertension, diabetes and other chronic diseases needs to travel approximately 75 miles from the cancer center to provide care under serviced rural areas. A physician is always available to the APRN on the van. Alternate physicians must be recorded in Board records. The request is on the agenda for the May 8, 2002 Board of Medical Examiners Meeting.

**REQUEST FOR
WAIVER OF 45
MILE
REQUIREMENT**

A motion was made to approve Hollings Cancer Center's request for a waiver of Regulation 91-2.f. their APRN to 75 miles from the physician with the understanding that the Board of Medical Examiners must also approve this request. The motion received a second. The motion carried unanimously.

MOTION

Sheryl Russell, RN, PhD, ANP, a member of the Advanced Practice Subcommittee of the Nursing Practice and Standards Committee appeared before the Board. Regulation 91-6(k)6 allowing Advanced Practice Registered Nurses (APRN) to request, receive, and sign for professional samples, except for Ms. Russell reported that some pharmaceutical companies are requiring a one time authorization signed by the APRNs physician.

**DIFFICULTIES
WITH USE OF
SAMPLES BY
APRN**

A motion was made for the Board President write a letter notifying pharmaceutical representatives of Regulation 91-6(k)6. The motion did not receive a second. The motion died.

MOTION

A motion was made for the Board President to send the letter to pharmaceutical representatives and interested parties regarding Regulation 91-6(k)6 endorsing verification of licensure and prescriptive authority through direct contact with the advanced practice registered nurse, as presented deleting the last sentence of paragraph #3 stating other providers may not have current information. The motion received a second. The motion carried unanimously.

MOTION

Mr. Barnwell presented a *Position Statement of the Age Parameters For Nurse Practitioner Practice*. This position statement was originally presented to the Board at their January 2002 meeting. The Board asked the Nursing Practice and Standards Committee and Advanced Practice Subcommittee to review the statement for Psychiatric/Mental Health CNS practice and for Pediatric Nurse Practitioners. The wording of Advanced Practice in the title was changed to Nurse Practitioner. Both committees recommended not setting age parameters for the two levels of psychiatric/mental health CNS practice due to family therapy settings characteristic of this specialty. They also recommend that the pediatric nurse practitioner age parameters be consistent with the ANCC certification examination, which is birth through 21 years of age. Exceptions to these parameters may be requested.

**POSITION
STATEMENT ON
AGE
PARAMETERS
FOR ADVANCED
PRACTICE**

A motion was made to approve the *Position Statement of the Age Parameters For Nurse Practitioner Practice* as presented. The motion received a second. The motion carried unanimously.

MOTION

REGULATORY COMPLIANCE MANAGER

The Board reviewed the February 7, 2002 Disciplinary Review Committee (DRC) Minutes. Staff answered questions regarding

**APPROVAL OF
FEB. 7, 2002 (DRC)
MINUTES**

A motion was made to approve the minutes of the February 7, 2002 Disciplinary Review Committee (DRC) meeting. The motion received a second. The motion carried unanimously.

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

**CERTIFIED
PANEL REPORTS**

6.4a Although properly notified Respondent did not appear. Respondent was also notified of the Panel hearing and did not appear. In their Conclusions of Law, the Hearing Panel find that the Respondent violated §§40-33-935(b), (e) and (g). The Hearing Panel Recommended that the license be indefinitely suspended.

A motion was made to accept the Hearing Panel's findings of fact and recommendations in this matter. The motion received a second. The motion carried unanimously.

MOTION

6.4b Although properly notified Respondent did not appear. Respondent signed for notification of this hearing. Respondent did not appear for the Panel Hearing. The Respondent's S.C. RN license has lapsed. In their Conclusions of Law, the Hearing Panel found that the Respondent violated §§40-33-935(b), (e) and (g). The Hearing Panel Recommended that Respondent's license be suspended for a period of one year; however, the suspension may be stayed upon the payment of a civil penalty of five hundred dollars.

A motion was made to executive session to receive legal counsel on a disciplinary matter. The motion received a second. The motion carried with one nay vote.

MOTION

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

A motion was made to accept findings of fact, conclusions of law, and to amend the recommendation to include drug dependency evaluation for drug dependency prior to reinstatement. The motion received a second. The motion carried **MOTION** unanimously.

6.4c Although properly notified Respondent did not appear. Mr. Torgersen recused himself from discussion and voting on this case. This case was heard after several continuances. Respondent did not appear. In their Conclusions of Law, the Hearing Panel found that the Respondent violated §§40-33-935(b), (g), and (h) as well as Regulation 91-19(c)(3)(d). The Hearing Panel recommended that Respondent be evaluated through the Recovering Professionals Program (RPP), on- year license suspension with opportunity for a stay after three months of active suspension and written recommendation from the RPP.

A motion was made to executive session to receive legal counsel on a disciplinary matter. The motion received a second. The motion carried **MOTION** unanimously.

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

A motion was made to accept the findings of fact, conclusions of law, but to amend to 2 years suspension, stayed after three months with RPP recommendation, and 2 years probation. The motion received a second. The motion carried **MOTION** unanimously.

6.4d Respondent was properly notified and appeared before the Board without counsel. Respondent also appeared without counsel at the Panel hearing. Respondent reported that an agreement has been signed with the Recovering Professionals Program with evaluation scheduled for April 2002. In their Conclusions of Law, the Hearing Panel found that the Respondent violated §§40-33-395(b), (c), and (g) as well as Regulation 91-19(c)(2), (c)(3)(g) and (j). The Hearing Panel recommended that Respondent's license be suspended for a period of not less than one year; however, the Board could consider staying the suspension based on the RPP evaluation and if a stay is granted the following conditions be placed on Respondent's license: (1) employed in a Board approved setting with quarterly employer reports, (2) no home health employment, (3) random drug screenings, (4) RPP evaluation, (5) attend a Legal Aspects of Nursing Workshop within six months of final order and (6) completion of a Domestic Violence Abuse Workshop.

A motion was made to executive session to receive legal counsel on a disciplinary matter. The motion received a second. The motion carried with one nay vote by Mr. Torgersen. **MOTION**

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

A motion was made to accept the Panel's findings of fact, conclusions of law, and recommendation with the addition of a mental health evaluation. The motion received a second. The motion carried **MOTION** unanimously.

6.4e Although properly notified neither Respondent nor legal counsel appeared for this hearing. Respondent is represented by counsel; however, neither appeared at the panel hearing after proper notification. Respondent's counsel is in court but agrees with and supports the Panel's

recommendations. In their Conclusions of Law, the Hearing Panel found that the Respondent violated §40-33-395(b) and Regulation 91-19(c)(1), (c)(3)(c) and (f). The Hearing Panel recommended that Respondent's license be suspended for a period of one year with an immediate stay and be required to undergo an RPP evaluation.

A motion was made to accept the Panel's findings of fact, conclusions of law, and recommendation. The motion received a second. The motion carried with one nay vote by Mr. Rogers. **MOTION**

6.4f Respondent was properly notified and appeared without legal counsel. Respondent did not appear at the Panel Hearing. Respondent last practiced in May 2001. In their Conclusions of Law, the Hearing Panel found that the Respondent violated §40-33-395(g). The Panel recommended that Respondent's license be suspended for a period of one-year and that prior to reinstatement Respondent present proof of full compliance with the provisions of the Final Order dated June 18, 2001.

A motion was made to accept the Panel's findings of fact, conclusions of law, and recommendation. The motion received a second. The motion carried with one nay vote by Mr. Torgersen. **MOTION**

6.4g Although properly notified Respondent did not appear. Neither Respondent nor counsel appeared at the Panel Hearing. Respondent's license lapsed at the end of January 2002. In their Conclusions of Law, the Hearing Panel found that the Respondent was taking Methadone prescribed by a physician and that there is no evidence that Respondent violated the Laws Governing Nursing in South Carolina. The Panel recommended the case be dismissed but that should the Respondent request to reinstate the license Respondent be required to undergo an RPP evaluation.

A motion was made to accept the Panel's findings of fact, conclusions of law, and recommendation. The motion received a second. The motion carried unanimously. **MOTION**

6.4h Although properly notified Respondent did not appear. Neither Respondent nor counsel appeared at the Panel Hearing. In their Conclusions of Law, the Hearing Panel found that the Respondent violated §§40-33-935(b) and (g) as well as Regulation 91-19(c)(3)(c), (f) and (j). The Panel recommends that Respondent's license be suspended for 2 years, after service of one year suspension may be stayed upon Board approval.

A motion was a made to A motion was made to accept the Panel's findings of fact, conclusions of law, and recommendation. The motion received a second. Motion failed. **MOTION**

A motion was a made to A motion was made to accept the Panel's findings of fact, conclusions of law, and recommendation with the addition of a \$500 fine. The motion received a second. The motion carried unanimously. **MOTION**

Applicant appeared before the Board requesting reinstatement of her lapsed licenses and review of arrests and conviction that have occurred since the license lapsed. **LAPSED LICENSE REINSTATEMENT**

6.5a Respondent appeared without counsel. Respondent has not practiced since August 1992 and the license lapsed in 1993. Respondent's reinstatement application was administratively denied due to a 1997 felony conviction for obtaining property under false pretenses and forgery. Respondent appeals to the Board to overturn the denial.

A motion was made to go into executive session to receive legal counsel on a disciplinary matter. **MOTION**
The motion received a second. The motion carried unanimously.

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

A motion was made to uphold the administrative decision to deny reinstatement of Respondent's **MOTION**
lapsed license. The motion received a second. The motion carried with two nay votes by Ms.
Martin and Mr. Rogers.

NURSE CONSULTANT – EDUCATION

Ms. Purvis presented the 2001 National Council Licensure Examination (NCLEX) summary **RATIFICATION**
statistics for registered nurses and practical nurses. South Carolina's passing average for practical **OF 2001 NCLEX**
nurses was 90.70% and 88.28% for registered nurses. **EXAMINATIONS**

A motion was made to ratify the National Council Licensure Examination (NCLEX) for 2001. The **MOTION**
motion received a second. The motion carried.

Ms. Purvis reported that four practical nursing education program and five registered nurse **SCHOOLS WITH**
programs had deficient NCLEX pass rates in 2001. Programs with passing rates that are more than **DEFICIENT**
5% below the national average pass rate are cited. The national pass for 2001 for NCLEX-PN was **NCLEX**
86.46% and 90.70% in South Carolina. A deficiency would be cited for a passing rate less than **PERFORMANCE**
81.46% passing. The national pass rate for 2001 for NCLEX-RN was 86.46% and 90.70% for **FOR 2001**
South Carolina. A deficiency would be cited for a passing rate less than 81.46% passing.

A motion was made to send schools with deficient NCLEX pass rates for 2001 notices requesting **MOTION**
improvement plans with a full self study and site survey of South Carolina State University by the
Nurse Consultant for Education and the Board Administrator. The motion received a second. The
motion carried.

The site survey of South Carolina State University is based on a deficient pass rate over several
years and their provisional approval status.

Bob Jones University – BSN Program

Ms. White recused herself due to participation in the site survey.

SURVEY VISIT **REPORTS**

The Board reviewed the survey report and program nurse consultant recommendations for Bob
Jones University – BSN Program Nursing program conducted on October 25, 2001.

A motion was made to accept the program nurse consultant's recommendation to continue full
approval for 5 years for Bob Jones University – BSN Program Nursing program. The motion
received a second. The motion carried.

Conway School of Practical Nursing – PN Program

The Board reviewed the survey report and program nurse consultant recommendations for Conway
School of Practical Nursing – PN Program conducted on October 9, 2001.

A motion was made to accept the program nurse consultant's recommendation to continue full

approval for 5 years for Conway School of Practical Nursing – PN Program. The motion received a second. The motion carried.

Piedmont Technical College - ADN Program

The Board reviewed the survey report and program nurse consultant recommendations for Piedmont Technical College Associate Degree Nursing program conducted on July 10, 2001.

A motion was made to continue full approval for Piedmont Technical College Associate Degree Nursing program until a site survey visit in March 2003. The motion received a second. The motion carried.

Tri-County Technical College – PN Program

The Board reviewed the survey report and program nurse consultant recommendations for Tri-County Technical College – PN Program conducted on September 20, 2001.

A motion was made to accept the program nurse consultant’s recommendation to continue full approval for five years for Tri-County Technical College – PN Program. The motion received a second. The motion carried.

The National Counsel of State Boards of Nursing (NCSBN) held a teleconference on preceptorship/mentorship projects on February 21, 2002. Ms. Purvis provided a summary of this teleconference. The South Carolina Use of Preceptor Survey Results were shared with the Deans and Directors of Registered Nursing Programs with a request for their input and suggested changes to the educational criteria.

MENTORSHIP & PRECEPTORSHIP

Ms. Purvis presented a letter of intent to establish a generic bachelor of science nursing degree (BSN) program from Jane Upshaw, PhD, Dean, at the University of South Carolina-Beaufort (USC-Beaufort). Dr. Kearney-Nunnery recused herself from discussion and any voting based upon familiarity with area and request. USC-Beaufort is currently conducting a feasibility study to collect and analyze data on this proposed program. She states that their preliminary data suggests a strong need and support for establishing such a degree program at their school. More information will be provided to the Board at a later date.

USC – BEAUFORT INTENT TO ESTABLISH GENERIC BSN PROGRAM

Friday, March 29, 2002

NURSE CONSULTANT – LICENSING

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

SPECIAL APPEARANCES

9.1 NCLEX-RN Candidate appeared before the Board with spouse. Respondent answered questions from the Board.

A motion was made to allow Candidate to take NCLEX-RN and upon successful completion be licensed as a registered nurse. The motion received a second. The motion carried unanimously.

MOTION

9.2 NCLEX-PN Candidate appeared before the Board without counsel. Respondent answered questions from the Board.

A motion was made to allow Candidate to take NCLEX-PN and upon successful completion be

MOTION

licensed as a licensed practical nurse. The motion received a second. The motion carried unanimously.

9.3 NCLEX-RN Candidate appeared before the Board without counsel. Respondent answered questions from the Board.

A motion was made to allow Candidate to take NCLEX-RN and upon successful completion be licensed as a registered nurse. The motion received a second. The motion carried unanimously. **MOTION**

9.4 NCLEX-RN Candidate appeared before the Board with mother. Respondent answered questions from the Board.

A motion was made to allow Candidate to take NCLEX-RN and upon successful completion be licensed as a registered nurse. The motion received a second. The motion carried unanimously. **MOTION**

9.5 RN Endorsement Applicant appeared before the Board without counsel. Respondent answered questions from the Board.

A motion was made to approve application for endorsement. The motion received a second. The motion carried unanimously. **MOTION**

9.6 NCLEX-RN Candidate appeared before the Board with mother. Ms. White recused herself from discussion and voting because Respondent works in her hospital system. Respondent answered questions from the Board.

A motion was made to allow Candidate to take NCLEX-RN and upon successful completion be licensed as a registered nurse. The motion received a second. The motion carried unanimously. **MOTION**

9.7 NCLEX-PN Candidate appeared before the Board without counsel. Respondent answered questions from the Board.

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

9.8 NCLEX-PN Candidate appeared before the Board without counsel. Respondent answered questions from the Board.

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

9.9 Registered Nurse Endorsement Applicant appeared before the Board without counsel. Respondent answered questions from the Board.

A motion was made to approve application for endorsement contingent upon Recovering Professionals Program evaluation and follow up to include follow up with PAP in New York, probation through August 2003, in a board approved setting with on-site, on-shift registered nurse supervision with no home health, and quarterly employer reports. The motion received a second. The motion carried unanimously. **MOTION**

9.10 Although properly notified, this Licensed Practical Nurse Endorsement Applicant did not appear before the Board. No action was taken.

9.11 Licensed Practical Nurse Endorsement Applicant appeared before the Board without counsel. Respondent answered questions from the Board.

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

MOTION

9.12 NCLEX-RN Candidate appeared before the Board with spouse. Respondent answered questions from the Board.

A motion was made to approve Candidate's application to take the NCLEX-RN upon graduation and upon successful completion of the examination be issued a license. The motion received a second. The motion carried unanimous.

MOTION

9.13 NCLEX-PN Candidate appeared before the Board with a friend. Respondent originally appeared before the Board in November 2001. Board issued Order denying application to take examination. Respondent answered questions from the Board.

A motion was made to allow Candidate to take the NCLEX-PN examination and upon successful complete be licensed as licensed practical nurse with 1 year probation, in a board approved setting with on-site, on-shift registered nurse supervision with no home health, and quarterly employer reports. The motion received a second. The motion carried unanimous.

MOTION

REGULATORY COMPLIANCE MANAGER

The Recovering Professionals Program (RPP) has recommended stays of suspension in the following cases.

RPP
RECOMMENDED
STAYS OF
SUSPENSION

6.6a. Respondent appeared before the Board without counsel. Nance Weldon, RPP Clinical Director spoke on Respondent's behalf.

A motion was made to approve the stay of suspension on March 29, 2002 with continuation of RPP monitoring and S&P conditions. The motion received a second. The motion carried unanimously.

MOTION

6.6b. Respondent appeared before the Board without counsel. Paulette Bentley, RPP Recovery Specialist spoke on Respondent's behalf.

A motion was made to approve the stay of suspension on March 29, 2002 with continuation of RPP monitoring and S&P conditions. The motion received a second. The motion unanimously.

MOTION

With no further business, the meeting adjourned at 1:00 p.m. on Friday, March 29, 2002.

ADJOURNMENT

Respectfully Submitted, Dottie Buchanan, Administrative Assistant