A meeting of the South Carolina Board of Nursing was held on May 20, 2004 in Room 108 of 110 Centerview Drive, Columbia, South Carolina. A public meeting notice was posted in the Kingstree Building and provided to requesting persons, and organizations in compliance with the South Carolina Freedom of Information Act. A quorum was present at all times.

Sylvia Whiting, Board President, called the meeting to order at 8:30 a.m. on May 20, 2004. The Board mission 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.

Sylvia Whiting, RN, President - Congressional District 1 ................................................ Present
Suzanne K. White, RN, Vice-President – Congressional District 4 ................................. Present
Brenda Y. Martin, RNC, Secretary - Congressional District 5 ................................. Excused Absence
Carrie Houser James, RN - Congressional District 6 ......................................................... Present
Mattie Smalls Jenkins, LPN - Region I, Congressional District 1 ................................. Present
Rose Kearney-Nunnery, RN - Congressional District 2 (Excused at 3:45 p.m.) ......... Present
C. Lynn Lewis, RN - Congressional District 3 ................................................................. Present
Debra J. Newton, LPN - Region II, Congressional District 4 ......................................... Present
James Rogers, Esq. - Public Member ............................................................................. Present

The regular May 20, 2004 Board Meeting agenda the was presented to the Board for their review and approval.

A motion was made to approve the May 20, 2004 Board Meeting agenda as presented. The motion received a second. The motion carried.

The following items were adopted on the consent agenda:

1.1b Other Legislation Affecting Nursing
1.2 Executive Officer Leadership Seminar Report
1.3 For Information: Advisory Committee on Nursing Minutes
1.4 For Information: Commission on Graduates of Foreign Nursing Schools International Info.
2.4 For Information: 2005 Hearing Dates
A motion was made to adopt the Consent Agenda as presented. The motion received a second. The motion carried unanimously.

The minutes of the regular meeting of the South Carolina Board of Nursing held on March 24, 2004 were presented to the Board for their review and approval.

A motion was made to approve the March 25, 2004 Board of Nursing Meeting Minutes as presented. The motion received a second. The motion carried.

ADMINISTRATOR’S REPORT

Nurse Practice Act (S898)

The revised Nurse Practice Act was introduced in the South Carolina Senate as Bill 898 on February 3, 2004. Senator J. Verne Smith was the primary sponsor with Senators Fair, Knotts, Thomas, Martin, Land, Moore and Alexander signing as cosponsors. The bill passed the Senate on March 3, 2004 and was sent to the House of Representatives. It was passed in the House on April 28, 2004 and was ratified on May 6, 2004, which was the beginning of National Nurses’ Week, May 6-12, 2004. Governor Sanford signed the bill on May 11, 2004. Regulations that were integrated into the Nurse Practice Act will be repealed. Board Members asked about a timetable to change the regulations. Some regulations such as those regulating nursing education programs remain in effect and will be revised at a later date.

Ms. Bursinger thanked staff, Board members, Rick Wilson, Stephanie Burgess and everyone who worked so diligently on the revision of the Practice Act. She noted that there was great collaboration among all of the stakeholders including other licensing boards as well as various healthcare associations.

Plans for implementation will be published in the SC Nurse as well as on the Board’s website. Mr. Wilson stated that the Board has some administrative discretion in the implementation dates for
portions of the new Nurse Practice Act. A presentation will be developed for groups who would like for board staff to discuss the changes in the Nurse Practice Act at their meetings.

**Other Legislation**

The Diabetes School Care Act Bill (H3154) received a tie vote in the House Medical, Military, Public and Municipal Affairs (3M) subcommittee. Staff will continue to track this bill.

Elizabeth Powers of the South Carolina Hospital Association reported to Ms. Bursinger that the Compact Bill (H4291) would probably not move out of the Senate Medical Affairs committee this legislative year. This is the second year of the two year legislative session. The bill will be re-introduced next year.

Ms. Bursinger asked for competency to be added to the Senate Bill S604 requiring school districts to adopt a policy authorizing students to self-administer asthma medications. This bill will probably be reintroduced next year at which time we will have the opportunity to ask for amendments.

**PRESIDENT’S REPORT**

The annual National Council of State Boards of Nursing (NCSBN) 2004 Delegate Assembly will be held on August 3-6, 2004 in Kansas City, MO. Dr. Kearney-Nunnery reported that there would be a report on nursing education accreditation presented at this meeting. The Board asked that a request for Drs. Whiting and Lewis from the Board as well as for Ms. Bursinger, Ms. Johnson and Mr. Christian from Board Staff be submitted to attend this meeting. The travel request should be accompanied by a justification of the important meetings for each person to attend as well as the Delegate Assembly where each state is requested to have two delegates and alternate delegates.

Dr. Whiting gave the following report from the Strategic Planning Retreat held on May 19, 2004.

Assistant Deputy Director for the Health & Medically Related Professions Division Ruby Brice McClain reported on changes occurring at the Department of Labor, Licensing and Regulation (LLR). Investigators from the Professional and Occupational Licensing (POL) will come together into one section. She also reported that the LLR Leadership Team has developed an employee recognition program that will be implemented in the next month. The agency is working on a succession plan as a large number of management and other employees are or will be eligible to retire within the next five years based on their age or years of state service. LLR is also working on their strategic plan and goals for the future.

The Board discussed other methods of disseminating important information to licensees and other interested parties. The new magazine style newsletter is still in the development stages with the publisher. The publisher has asked the Board to send out letters to solicit advertisers, which was not explained during the initial presentation.

The Board discussed the possibility of a web cast or other electronic means of disseminating important information. They also suggested presentations at various professional conventions and meetings regarding the new Nurse Practice Act. Legislative committees also asked that information on the new Practice Act be shared across the state. Ms. Bursinger reported that staff has already been asked by several groups to speak on the Nurse Practice Act and anticipate more meetings being scheduled over the next few months. Currently, Board staff has an email distribution list that includes individuals and groups who have requested to receive updates in accordance with the Freedom of Information Act. The Board suggested groups such as S.C. Organization of Nurse
Executives, nurse educators, medical facilities, etc. be included in an email distribution list. The Board would like to partner with stakeholders and feels better communication with assist in building this type of relationship.

A motion was made to explore electronic means of sharing information with various stakeholders and organizations. The motion received a second. The motion carried unanimously.

The Board will develop a strategic plan after receiving the LLR agency plan, which is currently in the development and revision stages. The agency is also developing a board member orientation manual for all of the licensing boards. It was reported that other boards of nursing include orientation on their nurse practice act and other duties of board members.

A motion was made that the S.C. Department of Labor, Licensing and Regulation explore the employment of a research and special projects nurse. The motion received a second. The motion carried unanimously.

The following proposed dates were presented for 2005 Board of Nursing Meetings: January 27 - 28, 2005, March 17 - 18, 2005, May 26 - 27, 2005, July 28 - 29, 2005, September 29 - 30, 2005 and November 17 - 18, 2005 for Board review and approval. The National Council of State Boards of Nursing Mid-Year Meeting will be held on March 21 - 23, 2005 in San Diego, California. The annual National Council of State Boards of Nursing Delegate Assembly will be held August 2 - 5, 2005 in Washington, DC.

A motion was made to approve the proposed 2005 Board of Nursing Meeting Dates as presented. The motion received a second. The motion carried unanimously.

The bylaws and functions of the Advisory Committee on Nursing (ACON) were provided to the Board for their review and discussion. Dr. Lewis reported that ACON meeting attendance is low and that members seem interact more with the audience than with one another. Ms. Murphy reported that several nursing education site survey teams would be needed before the end of this year. According to ACON bylaws, site survey teams are selected from ACON membership. Board members suggested that ACON begin looking at the regulation of unlicensed assistive personnel as a project and that nursing trends also be added as a regular agenda item. ACON will be asked to discuss issues and bring those issues before the Board rather than waiting for the Board to ask for input.

At the June 2004 ACON meeting, Dr. Lewis, Ex-Officio ACON member representing the Board, will suggest these projects for the committee to consider and discuss the Board’s expectations for the committee. The Office of Research and Statistics will be invited to present their annual statistical report to ACON.

At their April 20, 2004 meeting, the Advisory Committee on Nursing (ACON) voted to submit the nomination of Kimberly K. Holmes, RN, BSN, MSM to the Board for consideration and approval to serve as the Nursing Service Administration - Long Term Care Representative on ACON. Ms. Holmes’ nomination form, resume, and recommendation letter were provided to the Board for review and approval.

A motion was made to appoint Kimberly K. Holmes, RN, BSN, MSM to serve as the Nursing Service Administration-Long Term Care Representative on the Advisory Committee on Nursing. The motion received a second. The motion carried unanimously.
REPORTS/UPDATES

Jack M. White, Director, Paulette B. Bentley, RN, CARN, Recovery Specialist, and Kathy G. Pearson, RN, Advisory Board Member of the Recovering Professionals Program appeared before the Board to present their budget, participant fee information, January 1 – March 31, 2004 quarterly report and to respond to questions from the Board.

Budget
Mr. White presented the Recovering Professionals Program (RPP) budget as approved by the RPP Advisory Board. Dr. Whiting represents the Board of Nursing on RPP Advisory Board. He reported that there were no changes in funding from licensure fees and no increases in staff. The RPP staff has been reorganized for better efficiency. There will be a salary increase based on the state budget plan as passed by the legislature for all state employees. There were decreases in the allocations in the areas of travel/training, supplies and rent. The RPP will contract with the Budget and Control Board to conduct a salary evaluation to make certain RPP staff is paid equitably with other state employees in similar positions. Any increases in salary based on this evaluation will be covered by the reductions made in other areas. If the evaluation shows no salary increases are needed, these funds will be return to the areas from where they were removed.

Participant Fee
The RPP Advisory Board reviewed and approved a revised participant fee schedule for fiscal year 2004-2005. When reviewing the fiscal year 2003-2004 RPP budget, the Board of Nursing asked that the RPP adjust the participant fee to represent greater economic equity between higher and lower paid participants.

A motion was made to approve the Recovering Professionals Program (RPP) budget as presented and increase in the participant fee. The motion received a second. The motion carried unanimously.

Mr. White reported that no one has or will be penalized for inability to pay participant fees. The Recovering Professionals Foundation has received funding to assist participants financially unable to pay fees.

RPP Compliance
The Board asked what types of cases were included in the Non-Compliance category on the RPP quarterly reports. RPP staff explained that the Non-Compliance category includes positive drug screens, failures to obtain requested evaluation or treatment, etc. RPP staff notifies Board staff if a participant is noncompliant. If the nurse is a risk to the public the Board may issue an order of temporary suspension.

Board members asked if employers could be notified when one of their employees who is a RPP participant is non-compliance or relapses. It was reported that the Health Insurance Portability and Accountability Act (HIPPA) would require that a participant sign a release allowing RPP to report this type of information to their employer. Mr. White stated that his staff will look into reporting to employers and that RPP processes are continually reviewed for modifications to make it a better program.

Voluntary vs. Involuntary vs. Inappropriate Categories
The Board asked for clarification on what is included in the Voluntary, Involuntary and Inappropriate categories on RPP quarterly reports. Mr. White explained that participants who enter the RPP as ordered by the board or who are referred by an employer are considered involuntary. Participants who enter the program on their own are considered voluntary. The RPP does not send the Board a list of voluntary participants but will confirm to Board staff whether a licensee has
voluntarily entered the RPP should an investigation arise. The Inappropriate category includes those who have not been diagnosed as having being drug or alcohol dependent. The Board suggested that the Non-Compliant category be broken down to show the reasons for non-compliance. Mr. White stated that the RPP new reports would include this information.

**PRACTICE**

A revised *Position Statement on Pharmacotherapeutics Education Required for Prescriptive Authority Application* was presented to the Board for review and approval. The revised position statement incorporates the new requirements for expanded prescriptive authority as granted in the revised Nurse Practice Act signed by Governor Sanford on May 11, 2004. The Board also reviewed a fact sheet about the US Department of Drug Enforcement Agency (DEA) number.

A motion was made to remove the word “interactive” in all instances in item #1 and that “non-active” and “self-study” be removed in item #2 of the Position Statement on Pharmacotherapeutics Education Required for Prescriptive Authority Application. The motion received a second. The motion carried unanimously.

Board Staff has received an interpretation of how Department of Health and Environmental Control (DHEC)- Bureau of Drug Control has incorporated the revisions to the Nurse Practice Act into the Controlled Substance Act. They will begin issuing controlled substances registrations. During the revision of the Nurse Practice Act, the Board was lead to believe that all prescribers would soon be required to apply for a DEA number. Upon further research with the DHEC Bureau of Drug Control and the DEA, it was found that this information is incorrect. This will be corrected in the Nurse Practice Act as other corrections are made.

Dixie Roberts of the S.C. Department of Health and Environmental Control (DHEC) Division of Acute Disease, Epidemiology appeared before the Board to discuss the CDC Public Health Preparedness and Response to Bioterrorism Cooperative Agreement. Ms. Roberts explained that DHEC is responsible for managing the Cooperative Agreement for Critical Benchmarks and Enhanced Capacities. This includes partnering with other agencies and associations and dispersing funds. DHEC proposes that before the end of June the S.C. Department of Labor, Licensing and Regulation (LLR) agree to enter into an agreement to work on this plan. The agreement must be contracted by the end of August for the grant. Nursing is the largest workforce in healthcare. DHEC will approach other groups in the future. They propose that the Board hire an employee to coordinate the determination of needs and what skills to be taught for nurses to respond in the event of a bioterrorism emergency. Board staff will gather information and research to present to the Board at the July 2004 meeting.

**REGULATORY COMPLIANCE**

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

(C) Final Order Hearing rescheduled to July 2004.

(D) Respondent was properly notified and appeared with Attorney Thomas Bailey Smith to respond to questions from the Board. In their Findings of Fact and Conclusions of Law, the Hearing Panel found that Respondent was in violation of Regulation 91-19(c)(2). The Hearing Panel recommended that Respondent be issued a Public Reprimand and pay a $500 civil penalty within
sixty days of the Board’s Final Order.

A motion was made to accept the Hearing Panel’s Findings of Fact and Conclusions of Law, and Recommendation that Respondent be issued a Public Reprimand and pay a $500 civil penalty within sixty days of the Board’s Final Order. The motion received a second. The motion carried unanimously.

(E) Respondent was properly notified and appeared without counsel to respond to questions from the Board. A Memorandum of Agreement and Stipulations was presented wherein Respondent admits to violating §40-33-935(g) and Regulations 91-19(c)(2) and 91-19(c)(3)(b).

A motion was made to remand the case back for a full evidentiary hearing. The motion received a second. The motion carried unanimously.

(F) Final Order Hearing rescheduled to July 2004.

(G) Final Order Hearing rescheduled to July 2004.

(H) Final Order Hearing rescheduled to July 2004.

(I) Respondent was properly notified but did not appear and was not represented by counsel. In their Findings of Fact and Conclusions of Law, the Hearing Panel found that the State did not prove by preponderance of the evidence that the Respondent violated the Nurse Practice Act. The Hearing Panel recommended dismissal of the complaint.

A motion was made to accept the Hearing Panel’s Findings of Fact and Conclusions of Law, and Recommendation that the case be dismissed. The motion received a second. The motion carried unanimously.

EDUCATION

Dr. Bridget Nettleton, Dean, School of Nursing of Excelsior College appeared before the Board to respond to questions regarding their program. In March 2004, the Board sent a letter to Excelsior College School of Nursing expressing their concerns regarding clinical competency testing of students who graduate from the Excelsior College.

Dr. Nettleton gave a brief history of Excelsior College and provided information on their various accreditations including approval by New York and the National League for Nursing Accrediting Commission (NLNAC). She explained that Excelsior College not affiliated with any other organizations such as Rue or the College Network. Dr. Nettleton encouraged Board staff to refer any questions regarding their program directly to Excelsior College to avoid any confusion with any other programs or organizations.

Dr. Nettleton explained that the average nursing student at Excelsior College is 41 years old. Associate degree nursing (ADN) students are generally licensed practical nurses (LPN) with approximately ten years of healthcare experience. Bachelor degree students are generally registered nurses (RN) with associate degrees and ten years of healthcare experience. Requirements for students in the ADN program include: a general education component, computer delivered examinations in nursing theory and a clinical performance nursing examination. Dr. Nettleton explained that the clinical performance examination is given in portions in four regions of the United States. If a student fails one portion of this examination they must retake all portions. They
cannot carryover a passing section to the next testing. Clinical examiners are masters or doctoral nurses must have been in teaching for at least three years.

Admission requirements for Excelsior College changed in 1994 and more changes are being made. Admission is open to RNs, LPNs, paramedics, military service corpsmen, foreign educated physicians, and individuals who hold degrees in clinically oriented healthcare fields. Foreign educated physicians whose medical education does not meet requirements for licensure as physicians in the United States sometimes go to nursing school to gain knowledge and experience in our healthcare system. In 2003, Excelsior College restricted emergency medical technician (EMT) admissions to those EMTs in basics or intermediate categories. In fall 2004, Excelsior College will begin accepting surgical technicians and certified medical assistants. The catalog provided has not yet been updated.

Approximately 61.4% of the students in the ADN program are licensed practical nurses or those who have completed at least 50% of a registered nurse program. The remaining 38.6% of the ADN students are EMTs, paramedics, foreign educated physicians (4%), respiratory care technicians, military corpsmen and less than 2% falling into the “other” category. More than 60% of the students enrolled from South Carolina are LPNs or students who have completed at least 50% of an RN program the remaining percentages are paramedics, EMTs, military corpsmen with less than 3% falling in the “other” category.

The National Council Licensure Examination (NCLEX) pass rate for Excelsior College is above national average. Excelsior College follows up with graduates six months after graduation. Graduates have reported that they were well prepared for the registered nursing positions. Three years after graduation, Excelsior College contacts supervisors of their graduates. Supervisors report that Excelsior College graduates are as well prepared as traditional schools.

Dr. Nettleton invited board members and staff to attend a clinical testing weekend if they would like to observe the examination. Dr. Kearney-Nunnery stated that she might be able to attend an examination weekend in July. The Board thanked Dr. Nettleton for the information provided.

ADN Program Enrollment Increase Request
Dr. Lex Waters and Rebecca King of Piedmont Technical College appeared before the Board to request approval to increase enrollment in their associate degree nursing program by adding a third class of 35 students beginning in January 2005, which would change their enrollment from 70 to 105 total. Self Regional Healthcare has proposed a partnership with the college to finance an additional class and the salaries of two to three masters degree prepared faculty. The new class would adhere to the same curriculum and guidelines.

A motion was made to approve Piedmont Technical College’s to increase enrollment in their associate degree nursing program by adding a third class of 35 students beginning in January 2005, which would change their enrollment from 70 to 105 total. The motion received a second. The motion carried with one abstention by Ms. James.

Curriculum Change Request
Dr. Whiting and Ms. James recused themselves for this portion of the agenda. Dr. Barbara Westphal, Professor and Chair of the South Carolina State University Department of Nursing submitted a curriculum change for review and approval of the Board. This change would increase the total number of credit hours from 128 to 130-131. Changes proposed include substitution in the anatomy and physiology courses, adding a general zoology course, reducing the number of free elective courses, and increasing the number of pharmacology credits from one to two. The articulation guidelines show a total of 128 credit hours. Dr. Westphal stated that removing the
Math Modeling course would bring them down to 128 credit hours and in compliance with the articulation model.

A motion was made to approve South Carolina State University Department of Nursing’s curriculum change contingent upon changing the total credit hours to 128 to meet articulation model guidelines. The motion received a second. The motion carried unanimously.

Faculty Approval
Spartanburg Technical College submitted a request for approval of five faculty members presently pursuing their master’s degrees in nursing. The associate degree nursing program proposal includes a plan for sixteen full-time master’s degree prepared nursing faculty members to include the department head. There are currently seven full-time faculty members teaching in the practical nursing program, which will close in July 2004. The department head and one faculty member are currently master’s degree prepared with five faculty member pursing their master’s degrees. Nine additional masters prepared faculty are needed. The college plans to hire one additional faculty member by Spring 2004, four in Summer 2004, and four to be hired by Spring 2005. The board is concerned about not utilizing master’s prepared nursing faculty.

A motion was made to approve five bachelor’s degree prepared faculty members currently pursing their masters degrees with these degrees being conferred before or by Spring 2005. The motion received a second. The motion carried with one abstention.

New Program Site Survey Report
The Board of Nursing Site Survey Team visited Spartanburg Technical College on March 2, 2004 and April 7, 2004. The Advisory Committee on Nursing appointed B.J. Roof, RN, MN, Director, Nursing Support Services, Palmetto Baptist; Alice Adkins, RN, MS, CPN, Assistant Dean for Office of Student Services, College of nursing, University of South Carolina; and Janet Ancone, RN, MSN, Department Chair of Nursing, Midlands Technical College.

A motion was made to grant initial approval of the new program at Spartanburg Technical College. The motion received a second. The motion carried with one abstention.

Clarification of Math Admission Criteria
Spartanburg Technical College submitted a request for Board approval of their MAT Compass score requirement change from 66 to 46.

A motion was made to approve changing the MAT Compass score requirement change from 66 to 46. The motion received a second. The motion carried with one abstention.

Dr. Lewis, as TriCounty Technical College Division Chairperson of Health and Sciences, recused herself for this portion of the agenda.

Clarification ADN Program Enrollment
Janet S. Fuller, RN, MSN, CCRN, Department Head, Associate Degree Nursing (ADN) program at TriCounty Technical College submitted a request for clarification on enrollment approved for their program. TriCounty Technical College will admit 80 students this summer and an additional 80 in the fall for a total of 160 students. The college currently has 10 full time faculty and various adjunct faculty members. Ms. Fuller has elected to teach a half-load.

A motion was made to approve clarification of the ADN program enrollment total of 160 students. The motion received a second. The motion carried with one abstention.
Curriculum Change
Janet S. Fuller, RN, MSN, Department Head, ADN Program, TriCounty Technical College submitted a request for approval of a curriculum change. The change meets South Carolina Technical College System and National League for Nursing Accrediting Commission requirements. Courses were deleted and added to allow for an increased emphasis on pharmacology, eliminate duplication, increase computer skills, and to allow students to choose a nursing elective.

A motion was made to approve TriCounty Technical College’s Associate Degree Nursing curriculum change as presented. The motion received a second. The motion passed with one abstention.

The National Council of State Boards of Nursing (NCSBN) administers the National Council Licensure Examination (NCLEX) utilized by boards of nursing. By policy, NCSBN reviews both the NCLEX-RN and NCLEX-PN every three years. At the August 5-8, 2003 NCSBN Delegate Assembly, member boards adopted changes to the NCLEX plan for registered nurses. The revisions to the test plan became effective in April 2004. The NCSBN Examination Committee recommended making these changes after reviewing the Report of Findings from the 2002 RN Practice Analysis: Linking the NCLEX®-RN Examination to Practice (Smith & Crawford, 2003). The 10 subcategories of the 2001 NCLEX-RN were condensed into eight categories or subcategories. The psychiatric/mental health content was integrated into other categories of the test plan based on practice analysis. Dr. Whiting stated that we must be careful that psychiatric/mental health is not lost in the examination as items are integrated.

Section 40-33-40 of the new Nurse Practice Act allows for options for demonstrating continued competency. Board staff presented a draft Continued Competency Requirement Criteria for Board review and approval. Ms. Murphy explained that the organizations listed for continuing education contact hours are those generally accepted by other state boards of nursing. The Board suggested that continuing education for nurse executives and nursing education be added to the list as well as the three refresher courses currently approved by the Board and that a disclaimer be added that it is not an all-inclusive list. Licensees requesting approval of courses offered by providers not listed would need to provide documentation for Board review and approval.

A motion as made to implement the continuing competency requirements on August 1, 2004. The motion received a second. The motion carried unanimously.

Licensing
Board staff has received inquiries from students currently enrolled in registered nursing education programs who have completed a portion of their registered nurse (RN) studies and would like to take the National Council Licensure Examination (NCLEX) - Practical Nurse (PN). The National Council of State Boards of Nursing (NCSBN) reports in their Profiles of Member Boards 2002, that five member boards deem students in a RN educational program as eligible to sit for the NCLEX-PN following completion of a portion of their courses and if they pass the NCLEX-PN are eligible for licensure as an LPN/VN in their states. Presently, some South Carolina associate degree nursing (ADN) programs are offering PN exit points. Some students in South Carolina ADN programs with PN exit points elect not to take the NCLEX-PN at that point due to the examination cost while other students elect to take the NCLEX-PN at the exit point to gain work experience and for other economic reasons. Currently, candidates in South Carolina who are unsuccessful in their attempt of the NCLEX-RN may opt to take the NCLEX-PN and upon successful completion be licensed as an LPN in South Carolina. This new policy would permit students who have completed a certain portion of an RN education program to take the NCLEX-PN and upon successful completion be
licensed as an LPN. A draft LPN by Equivalency Policy was presented for Board review and approval at the January 2004 meeting. At that time, the Board asked Ms. Murphy to have the Advisory Committee on Nursing, Deans and Directors Council and the Practical Nurse Educators review the policy and provide their input to the Board.

It was suggested that applicants qualifying under this new policy be provided with a copy of the Board’s Mission Statement and pertinent sections of the Nurse Practice Act regarding scope of practice and delegation. The Nurse Practice Act and Advisory Opinions are available to all licensees and the public on the Board’s website.

A motion was made to approve the Policy for Practical Nurse Education Equivalency as presented. The motion received a second. The motion carried unanimously.

A motion was made to adjourn the meeting at 4:45 p.m. on May 20, 2004. The motion received a second. The motion carried unanimously.

Respectfully Submitted,
Dottie Buchanan, Administrative Assistant

MOTION

ADJOURNMENT