

**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 – SEPTEMBER 25-26, 2003

A regular meeting of the State Board of Nursing for South Carolina was held on September 25 and 26, 2003 in Room 108 of the Kingstree Building, 110 Centerview Drive, Columbia, South Carolina, 29210. Public notice of this meeting was properly posted at the Board of Nursing offices in the lobby of the Kingstree Building, and provided to all requesting individuals, 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.

MEETING
PLACE
AND FOIA
COMPLIANCE

Rose Kearney-Nunnery, Board President, called the meeting to order at 8:34 a.m. on Thursday, September 25, 2003, and at 8:35 a.m. on Friday, September 26, 2003. 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

Rose Kearney-Nunnery, RN, PhD, President	Present
Sylvia Whiting, RN, PhD, CS, Vice-President	Present
Suzanne K. White, RN, MN, FAAN, FCCM, CNAA, Secretary	Present
Mattie Smalls Jenkins, LPN	Present
Brenda Y. Martin, RNC, MN, CNAA	Present
Debra J. Newton, LPN	Out 4:45 pm Thu. -Excused Fri. -Present
James P. Rogers, Esquire, Public Member	Present
Keith A. Torgersen, RN, MSN, CRNA	Present

BOARD
MEMBERS
PRESENT AND
VOTING

Martha Summer Bursinger, RN, MSN, Administrator
David Christian, III, Program Coordinator-Licensing
Janet H. Scheper, Program Assistant – Licensing
Nancy G. Murphy, RN, MSN, Program Nurse Consultant - Education
Sandra Bryant, Administrative Assistant – Advanced Practice
Donald W. Hayden, Regulatory Compliance Manager
Dottie Buchanan, Administrative Assistant
Richard P. Wilson, Deputy General Counsel
Ruby Brice McClain, Asst. Deputy Director, Health and Medically Related Professions

BOARD AND LLR
STAFF MEMBERS
PRESENT FOR
CERTAIN
AGENDA ITEMS

Thursday, September 25, 2003

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:
2.2b Practitioner Remediation and Enhancement Partnership (PREP)
2.4a Advisory Committee on Nursing Minutes
2.5a July NCLEX Fact Sheet

APPROVAL OF
CONSENT
AGENDA

- 2.5b NCLEX Results – 1st & 2nd Quarter 2003
- 2.5c For Information: NCLEX Deficiency Letters
- 2.5d For Information: NCEE Standards
- 2.5e Commission on Graduates of Foreign Nursing Schools (CGFNS) Update
- 4.1 Recovering Professionals Program-Written
- 5.1 Approval of August 7, Disciplinary Review Committee (DRC) Minutes
- 5.2 Approval of August 19, 2003 Investigative Review Committee (IRC) Minutes
- 5.3 Unlicensed Practice (Not Appearing)
- 5.4 Compliance Statistics
- 6.1 Licensure Statistics
- 6.2 For Ratification: Licensure Recommendations
- 6.3 For Information: Licensure Announcements
- 7.1 Summary Statistics on Advanced Practice
- 7.3 July 18, 2003 Advanced Practice Subcommittee Meeting Minutes

A motion was made to adopt the Consent Agenda with the removal of items 5.6- Approval of Panel Member - Robb, 7.2- August 21, 2003 Nursing Practice and Standards Committee Meeting Minutes and 7.4- SCNA Letter Temp Replacement on Nursing Practice and Standards Committee. The motion received a second. The motion carried unanimously.

MOTION

The minutes of the Regular Board Meetings held on May 29-30, 2003 and July 31, 2003 as well as the special Conference Call Board Meeting held on August 20, 2003 were presented to the Board for review and approval.

APPROVAL OF MINUTES

A motion was made to approve the May 29-30, 2003 Board Meeting minutes with editorial changes. The motion received a second. The motion carried unanimously.

MOTION

A motion was made to approve the July 31, 2003 Board Meeting minutes with editorial changes. The motion received a second. The motion carried unanimously.

MOTION

A motion was made to approve the August 20, 2003 Conference Call Board Meeting minutes with editorial changes. The motion received a second. The motion carried unanimously.

MOTION

ADMINISTRATOR’S REPORT

Ms. Bursinger introduced David Christian, III and Janet H. Scheper. Mr. Christian accepted the Program Coordinator for Licensing position replacing Nancy Murphy. Ms. Scheper was the Board’s office manager and accepted the position of Program Assistant in the Licensing Department working with Mr. Christian. Mr. Christian and Ms. Scheper are already reviewing processes and developing ways to increase efficiency and customer service.

STAFF UPDATE

Ms. Bursinger announced that since the Program Coordinator for Licensing position is now filled, Nancy G. Murphy, RN, MSN has now officially moved into the Program Nurse Consultant for Education position vacated by Cynthia (Pat) Purvis earlier this year. All questions regarding education should now be addressed to Ms. Murphy.

Ms. Bursinger announced that Maggie S. Johnson, RN, MSN has accepted the position of Program Nurse Consultant for Practice and will begin working in early October 2003. Ms.

Johnson is a former employee of the Board of Nursing and last worked with the South Carolina Department of Mental Health before returning to the Board of Nursing.

New South Carolina Department of Labor, Licensing and Regulation (LLR) General Counsel Lynne W. Rogers, Esquire was introduced. Ms. Rogers is a former prosecutor and last worked with the South Carolina Department of Education. Board staff had a very productive meeting with Assistant Deputy Director Ruby B. McClain and Ms. Rogers to discuss procedures and the relationship between investigators and General Counsel staff.

Ms. Bursinger said that she was pleased with all of the new additions to Board and LLR staff. A new office manager and investigator will begin in mid-October, which will fill all vacancies on Board staff.

Meeting With South Carolina Department of Education

Ms. Bursinger reported that she and Dr. Whiting met with Calvin W. Jackson, Deputy Superintendent of District and Community Services for the South Carolina Department of Education (DOE) and Cathy Young Jones, with the DOE and South Carolina Department of Health and Environmental Control (DHEC) to discuss school nurse issues. Mr. Jackson reported that the DOE is working on a memorandum of agreement with Medicaid to receive reimbursement for licensed practical nurse (LPN) and registered nurse (RN) services in the school districts. They also discussed nursing shortages.

SPECIAL PROJECTS

Meeting with Randy Lee

Ms. Bursinger met with Randy Lee of the South Carolina Health Care Association. Mr. Lee stated that their board had met and has money they would like to designate for nurses possibly in the form of scholarships. Ms. Bursinger explained the need for more nursing faculty and suggested that some money be designated for faculty scholarships. She also suggested that flexible work schedules, job sharing and benefit sharing be considered. Dr. Whiting said that there should to be more recruitment of men and minorities into nursing in South Carolina. Dr. Kearney-Nunnery reported that there is some federal funding for nursing faculty.

DELEGATE ASSEMBLY

Dr. Kearney-Nunnery, Ms. White and Ms. Bursinger attended the National Council of State Boards of Nursing - 25th Annual Delegate Assembly held August 3 - 5, 2003 in Alexandria, Virginia.

NATIONAL COUNCIL OF STATE BOARDS OF NURSING (NCSBN)

Commission on Graduates of Foreign Nursing Schools (CGFNS)

Ms. Bursinger and Dr. Kearney-Nunnery met with the Chief Executive Officer of the Commission on Graduates of Foreign Nursing Schools (CGFNS). Many recruiters who bring foreign educated nurses into the United States are not aware of licensure requirements. International Testing was discussed which may eliminate part of the CGFNS credentialing. There is concern about whether disciplinary history of a foreign nurse would be available to the U.S. It was also noted that there are medication errors by foreign educated nurses due to a lack of understanding of the English language and some of the acronyms and abbreviations commonly used in the United States. It was noted that when reviewed by CGFNS some foreign registered nurse education programs only meet United States practical nursing education requirements.

Testing

There was discussion about changing the waiting period for repeating the National Council Licensure Examination (NCLEX) every 91 days to every 45 days. This would allow nurses to take the NCLEX sooner and become licensed and practicing sooner. This change will benefit both the candidates and the states. This change will begin in January 2004. States must complete a form and submit it to the National Council of State Boards of Nursing (NCSBN).

Test Plan

The alternate item testing will begin in April 2004. During speeches at nursing education programs throughout the state, Ms. Bursinger has been explaining to students that these questions are on the National Council Licensure Examination (NCLEX) now but will not be counted until April 2004. She has also explained that there is no relationship between when the computer ends the questioning and whether a candidate passes or fails the examination.

NCLEX Candidates

Dr. Kearney-Nunnery attended a National League for Nurses meeting. During a presentation at this meeting, NSCBN noted that some NCLEX candidates are having problems recognizing “ / “ as the division symbol on the calculator instead of “ ÷ .“ Information will be sent to South Carolina nursing education programs so candidates can be alerted prior to sitting for the NCLEX.

Puerto Rico

At their request, the National Council of State Boards of Nursing (NCSBN) is working with the Commonwealth of Puerto Rico - Board of Nurse Examiners Puerto Rico on their licensure examination given in Spanish. The Puerto Rico Board of Nurse Examiners gives two different examinations. A different examination is given for associate degree candidates and bachelor degree prepared candidates. Puerto Rico does not report discipline to NCSBN nor to the national data bank. Guam also does not usually report discipline.

Currently Canadian nurses are required to have successfully completed the National Council Licensure Examination (NCLEX) or to have practiced at least three years in United States to endorse into South Carolina.

National Council of State Boards of Nursing (NCSBN) Mission Statement

The revised mission statement of the NSCBN was read as follows:

The National Council of State Boards of Nursing, composed of Member Boards, provides leadership to advance regulatory excellence for public protection.

Recommended Membership Appointments - Advisory Committee on Nursing

The Advisory Committee on Nursing submitted nominations for approval by the Board. Deborah L. Hopla, RN, FNP was nominated to represent Advanced Practice Registered Nursing (APRN) – Practice and Stephanie E. Burgess, RN, FNP to represent BSN/MSN Education.

ADVISORY
COMMITTEE ON
NURSING

A motion was made to approve Deborah L. Hopla, RN, FNP as Advanced Practice Registered Nurse Practice representative and Stephanie E. Burgess, RN, FNP as BSN/MSN Education

MOTION

representative on the Advisory Committee on Nursing. The motion received a second. The motion carried unanimously.

Emergency Preparedness Task Force

Ms. Bursinger reported that a new question for volunteering for bioterrorism disaster has been included on the renewal application this year and on the Board’s web site in addition to regular disaster volunteer question. We have only had four people volunteer for bioterrorism disasters from the web site at this time. Two of the four nurses who have volunteered are with the Red Cross. We may have more people volunteer on their renewal forms. SC Department of Health and Environmental Control (DHEC) nurses are not counted in this group. Department of Labor, Licensing and Regulation (LLR) has prepared a memorandum of understanding with DHEC to allow nurses licensed in other states to come into our state to assist during the event of an emergency. There will also be a memorandum of agreement with the Disaster Preparedness Agency to provide licensee information by county.

Dr. Kathleen Crispin, Chairman of the Bob Jones University Division of Nursing, submitted a request for approval of Gloria C. Eoute to serve as a teaching assistant to instruct sophomore students in the clinical area. Mrs. Eoute currently serves as a lab coordinator at Bob Jones University. Her undergraduate nursing degree is not a typical nursing degree. It is titled “Bachelor of Science Degree with a Major in Nursing.” Ms. Eoute has investigated her pursuit of a master’s degree in nursing but has not yet enrolled. She would not be a full time faculty member.

BOB JONES
UNIVERSITY
FACULTY
REQUEST

It was noted that the lab coordinator position has not been defined. Different preparation is required at different schools. It was reported that the National League for Nurses (NLN) would like master’s prepared nurses to teach in the clinical area. Bob Jones University is not accredited by NLN.

A motion was made to approve Gloria C. Eoute to serve as a teaching assistant to instruct sophomore students in the clinical area only with no didactic teaching. The motion received a second. The motion carried unanimously.

MOTION

PRESIDENT’S REPORT

Board President Dr. Rose Kearney-Nunnery appointed Board Members Keith A. Torgersen and Debra J. Newton to serve on the Nominating Committee. The Nominating Committee will present the slate of 2004 officers for Board Member consideration and vote at the November 20, 2003 Board Meeting.

APPOINTMENT
OF NOMINATING
COMMITTEE

REPORTS/UPDATES

The Board of Nursing reviewed changes made to the draft Nurse Practice Act bill section by section.

NURSE
PRACTICE
REVISION
UPDATE

Dr. Roger A. Ray, President of the Board of Medical Examiners, will place the revised Nurse Practice Act draft on the agenda for their November 2003 meeting for discussion. Dr. Ray asked about unlicensed assistive personnel in the physicians’ offices. It was explained that there would be no changes to that section of the Nurse Practice Act at this time. Dr. Ray noted

that in the proposed advanced practice extended prescriptive authority there is education about drugs in Schedules II-IV but that some new issues will occur when this change goes into effect. Dr. Ray suggested that the curriculum include a primer on federal laws, addiction, pseudo-addiction, duping, etc. Dr. Ray asked if the number of advanced practice registered nurses (APRN) that a physician could supervise was changing. The number will stay as it is currently in the Nurse Practice Act.

Dr. Ray congratulated everyone who has participated in this Nurse Practice Act re-write process. It could have been very problematic if it were not for individual's willingness to maintain tolerance if not consensus. Board Members agreed that there was a great deal of cooperation from all involved in this process.

Dr. Kearney-Nunnery thanked everyone who had worked on drafts over the past few years. She also thanked Stephanie Burgess for her work on the advanced practice registered nurse (APRN) in this draft and her work on future initiatives.

Dr. Whiting acknowledged that the Boards of Nursing and Medical Examiners worked together on this practice act re-write project. Dr. Ray stated that the mission of both boards is to protect the public and that the practice acts and boards should be aligned. He stated that he hoped that the open dialogue and visiting in meetings would be maintained in the future.

Ms. Bursinger is developing talking points to assist legislators in understanding the changes to the Nurse Practice Act.

Dr. Whiting reported that the Unlicensed Assistive Personnel (UAP) and School Nursing Committees, combined committees and work groups have met to discuss unlicensed assistive personnel. Draft 3 of language for a board position statement regarding medication administration and provision of medications by UAP was presented to the Board for review. The draft provides that in settings where the presence of a licensed nurse is *not* required by law, a licensed nurse may train UAP in the provision of medications provided that: 1) the nurse follows the agency's training outline and includes skills competency; 2) the nurse trains UAP for provision of regularly scheduled medications and prescribed emergency treatments under established protocol/order; 3) the nurse recommends the UAP be trained; 4) the agency provides continuing education and supervision of UAP while annually determining the continuing skill level and retaining liability of the UAP; and 5) the agency has written policies and procedures for the UAP recognizing that when a nurse is present the responsibility of medication administration continues to be a nursing responsibility and acknowledging that nurses may not delegate medication administration to UAP and that nurses cannot be mandated to supervise the provision of medications by UAP.

UAP/SCHOOL
NURSING
REPORT

It was acknowledged that in physicians' offices, the physician is responsible for the administration of medication and may delegate tasks that do not require the skill of a licensed professional to a UAP.

Ms. Bursinger shared that she receives a number of questions regarding delegation when she speaks to nursing education students throughout the state. A position statement would make requirements more clear.

This position statement will now be sent to the Advisory Committee on Nursing (ACON) for review at their next meeting. The ACON will report back to the Board.

REGULATORY COMPLIANCE

The Board reviewed cases and recommendations from the Hearing Panel. Respondents appeared before the Board to respond to questions.

CERTIFIED
PANEL REPORTS

5.5a The Respondent was properly notified and appeared but did not appear before the Board. Respondent requested that this case be continued to a later date. The request was granted.

5.5b Respondent was properly notified and appeared without counsel to respond to questions from the Board. Ms. White recused herself from this case. A quorum was present at all times. 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 go into executive session to obtain legal counsel. The motion received a second. The motion carried with two nay votes.

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 accept the Hearing Panel’s Findings of Fact, Conclusions of Law; however, rather than dismiss the case as recommended that a letter of concern be issued. The motion received a second. The motion carried unanimously.

MOTION

5.5c Respondent was properly notified but did not appear to respond to questions from the Board. Although properly notified, Respondent was not present at the Panel Hearing. In their Findings of Fact and Conclusions of Law, the Hearing Panel found that Respondent was in violation of Section 40-35-935(g) and Regulation 91-19(c)(3)(b) and (c). The Hearing Panel recommended that Respondent have an evaluation by the Recovering Professionals Program (RPP), with RPP recommendation and upon relicensure Respondent’s license will be placed on one-year probation requiring registered nurse on-site, on-shift supervision, in an approved employment setting with no home health or agency work, and quarterly employer reports.

A motion was made to accept the Hearing Panel’s Findings of Fact, Conclusions of Law and Recommendation that Respondent must have an evaluation by the Recovering Professionals Program (RPP), with RPP recommendation and upon relicensure Respondent’s license will be placed on one year probation requiring registered nurse on-site, on-shift supervision, in an approved employment setting with no home health or agency work, and quarterly employer reports. The motion received a second. The motion carried unanimously.

MOTION

5.5d Respondent was properly notified but did not appear to respond to questions from the Board. 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 Respondent violated the Nurse

Practice Act. The Hearing Panel recommended dismissal of the complaint.

A motion was made to go into executive session to obtain legal counsel. 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 accept the Hearing Panel’s Findings of Fact, Conclusions of Law; and Recommendation to dismiss the case; however, prior to reinstatement of lapsed license Respondent must appear before the Board. The motion received a second. The motion carried unanimously.

MOTION

The curriculum vitae for Elaine Robb, RN was presented for Board consideration and approval as a Panel Member for Full Evidentiary Hearings.

APPROVAL OF
PANEL MEMBER

A motion was made to approve Elaine Robb, RN for as a Panel Member. The motion received a second. The motion carried with one nay vote.

MOTION

LICENSING

National Council Licensure Examination (NCLEX) candidates and licensure endorsement applicants with convictions and/or prior disciplinary action appeared before the Board.

SPECIAL
APPEARANCES

6.4a NCLEX-RN Candidate. Candidate was properly notified and appeared without counsel to respond to questions from the Board.

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

MOTION

6.4b Licensed Practical Nurse Endorsement Applicant. Applicant received a practical nurse license by waiver without examination in 1968 in Ohio. South Carolina Board of Nursing Regulation 91-16 -Requirements for Licensure by Endorsement for a Licensed Practical Nurse states, “An applicant for a license as a licensed practical nurse without examination, who holds a license for practice in another jurisdiction in this country must show that requirements of the Board are met. Requirements for such license include: “. . . f. Graduate of a nursing education program for practical nursing approved by the accrediting authority of state in which located. General education and education for nursing is judged to be at a level required of graduates of nursing education programs for practical nursing who are candidates for licenses. Records submitted with the application are evaluated on a basis of requirements of the Board in effect at the time of the applicant’s licensure in the other jurisdiction, and on a basis of experiences of the applicant since that time as related to present day requirements.”

A motion was made to approve licensure by endorsement as a licensed practical nurse in South Carolina. The motion received a second. The motion carried unanimously.

MOTION

6.4c Registered Nurse Endorsement Applicant. Applicant was properly notified but did not appear to respond to questions from the Board. Case will be continued to a future meeting.

6.4d Registered Nurse Endorsement Applicant - Applicant was properly notified but did not appear to respond to questions from the Board. Applicant requested to be rescheduled. Case will be continued to a future meeting.

6.4e Registered Nurse Endorsement Applicant – Applicant was properly notified and appeared before the Board without counsel to respond to questions.

A motion was made to approve licensure by endorsement in South Carolina as a registered nurse with probation and monitoring for one year, on site, on shift, RN supervision, no agency and no home health work. The motion received a second. The motion failed receiving two aye and five nay votes.

MOTION

A motion was made to approve licensure by endorsement as a registered nurse in South Carolina. The motion received a second. The motion carried unanimously.

MOTION

6.4f Registered Nurse Endorsement Applicant. Applicant was properly notified but did not appear before the Board. Case will be continued to a future meeting.

6.4g Licensed Practical Nurse Endorsement Applicant. Applicant was properly notified and appeared without counsel to respond to questions from the Board.

A motion was made to approve licensure by endorsement as a licensed practical nurse in South Carolina. The motion received a second. The motion carried unanimously.

MOTION

6.4h NCLEX –PN Candidate. Candidate was properly notified and appeared without counsel to respond to questions from the Board.

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

MOTION

6.4i Registered Nurse Endorsement Applicant – Applicant was properly notified and appeared with Patrick L. Cont, Attorney at Law to respond to questions from the Board.

A motion was made to go into executive session to obtain legal counsel. 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 grant endorsement subject to written verification that the Guam clinic, in which the Applicant practiced, is based in the United States and that it complies with United States government reimbursement standards to satisfy the practice requirement for foreign trained nurses. A temporary permit may be issued for the usual time period of not more than

MOTION

eight weeks while waiting for the required information. The motion received a second. The motion carried unanimously.

6.4j Registered Nurse Endorsement Applicant – Applicant was properly notified and without counsel to respond to questions from the Board.

A motion was made to approve licensure by endorsement as a registered nurse in South Carolina. The motion received a second. The motion carried unanimously.

MOTION

Staff is receiving inquiries from recruiters regarding nurses educated and licensed in Puerto Rico. National Council of State Boards of Nursing (NCSBN) does not recognize all nursing education programs in Puerto Rico for eligibility to take National Council Licensure Examinations (NCLEX) for both registered nurse and practical nurse. South Carolina nursing regulations require that the NCLEX be passed within three years of first testing for foreign educated nurses or within three years of graduation for United States educated nurses.

LICENSURE
PROCESS FOR
PUERTO RICAN
APPLICANTS

A motion was made to allow endorsement if the Puerto Rican nursing education program is listed in the National Council of State Boards of Nursing National Council Licensure Examination (NCLEX) bulletin making them eligible to take the NCLEX; however if the Puerto Rican nursing education program is not listed in the NCLEX bulletin, the nurse may apply for the NCLEX as a foreign educated nurse and all applicants are strongly encouraged to take Test of English as a Foreign Language (TOEFL) prior to testing. The motion received a second. The motion carried unanimously.

MOTION

Friday, September 26, 2003

PRACTICE

The following new and revised advisory opinions were recommended by the Nursing Practice and Standards Committee:

NEW/REVISED
ADVISORY
OPINIONS

Revised Advisory Opinion # 5 – Peripheral nerve infusion was added to epidural and intrathecal spaces. Changes were made adding that the registered nurse (RN) may replace empty infusion syringes or bags with the same prepared solution with intrapartum patients. The Board asked that the committee review this advisory opinion.

Revised Advisory Opinion #10b – Changes were made to reflect that licensed practical nurses (LPN) may reconstitute medications using a “commercially prepared point of use medication delivery system (such as Mini-Bag Plus or Add-Vantage). The change is reflected on the Cardiovascular Invasive Devices Chart.

A motion was made to approve the changes made to Advisory Opinion #10b and corresponding changes made to the Cardiovascular Invasive Devices Chart. The motion received a second. The motion carried unanimously.

MOTION

New Advisory Opinion #49 – The question for this advisory opinion is “Is it within the role and scope of responsibilities of the licensed practical nurse (LPN) to evaluate and/or stage

vascular, diabetic or pressure ulcers?”

A motion was made to approve Advisory Opinion #49 changing paragraph two to read “It is recommended that agencies develop and implement polices and guidelines requiring assessment and frequent reassessment by the RN.” The motion received a second. The motion carried unanimously.

MOTION

The Board reviewed the Cardiovascular Invasive Devices Chart and asked that the Committee review and make cautionary references.

The following membership nominations were reviewed and recommended by the Nursing Practice and Standards Committee: Doris Gainey representing Practical Nurse Educators and Glenn Meadows representing the South Carolina Organization of Nurse Executives (SCONE). Glyne Sommer, Beverly Belser, Ann Rexrode and Rebecca Faile request approval to continue their committee membership for a second term.

RECOMMENDED
MEMBERSHIP
APPOINTMENTS

The Board requested that the Committee provide more information on Doris Gainey who was nominated to represent Practical Nurse Educators and Glenn Meadows nominated to represent the South Carolina Organization of Nurse Executives (SCONE). This information will be provided at the November 2003 Board Meeting.

A motion was made to approve continuing Nursing Practice and Standards Committee membership for Glyne Sommer, Beverly Belser, Ann Rexrode and Rebecca Faile for a second term. The motion received a second. The motion carried unanimously.

MOTION

Rodel V. Bobadilla, FNP, Chair of the Advanced Practice Subcommittee submitted an example curriculum for advanced practice registered nurses (APRN) applying for controlled substance prescriptive authority. Mr. Bobadilla reported that he had met with Dr. Roger A. Ray, President of the Board of Medical Examiners (BME) and John D. Volmer, Administrator for the BME to discuss this example and that they were in agreement. Information from the BME remedial course used for physicians who have been sanctioned by the BME for drug related offense was reviewed in preparing this example. On Thursday of this meeting, Dr. Ray explained that this draft focuses on one aspect of controlled substance prescribing only and suggested that it be enhanced and that it be more specific to Schedules II-IV and the issues specific to controlled substances.

EXAMPLE
CURRICULUM
PRESCRIPTIVE
AUTHORITY

Rodel V. Bobadilla, FNP, Chair of the Advanced Practice Subcommittee (APSC) submitted a request to the Board for the APSC of the Nursing Practice and Standards Committee (NPSC) to be full committee status. Currently the APSC reports to the NPSC who then reports to the Board. Mr. Bobadilla reported that advanced practice registered nurse (APRN) issues are increasing. If granted full committee status, the Advanced Practice Committee would meet every other month instead of quarterly as presently scheduled and report directly to the Board. Mr. Bobadilla reported that Patricia Godbold, Chair of the NPSC supports this proposal; however, it has not been discussed by the NPSC.

ADVANCED
PRACTICE
SUBCOMMITTEE
FULL STATUS
REQUEST

A motion was made to grant full committee status to the current Advanced Practice Subcommittee. The motion received a second. The motion carried unanimously.

MOTION

A motion was made to adjourn the meeting at 10:18 a.m. on September 26, 2003. The motion received a second. The motion carried. ADJOURNMENT

Respectfully Submitted,
Dottie Buchanan, Administrative Assistant