

**NORTH CAROLINA BOARD OF NURSING
REGULAR BOARD MEETING**

**September 26, 2014
MINUTES**

Time and Place of Meeting	A regular meeting of the North Carolina Board of Nursing was held at the North Carolina Board of Nursing office in Raleigh, North Carolina on September 26, 2014. Meeting convened at 9:00 a.m.
Presiding	Peggy Walters, RN
Members Present	Pat Campbell, Public Member Maggie Conklin, Public Member Cheryl Duke, RN Martha Ann Harrell, Public Member Jennifer Kaylor, RN Bobby Lowery, RN Sharon Moore, RN Bob Newsom, LPN Jackie Ring, RN Carol Wilson, LPN
Members Absent	Deborah Herring, RN
Staff Present	Julia George, RN, Executive Director Anna Choi, General Counsel Linda Burhans, Associate Executive Director – Education/Practice Brenda McDougal, Associate Executive Director - Operations Gayle Bellamy, Director of Finance Angela Ellis, Manager, Executive Office
Ethics Awareness and Conflict of Interest	Ethics Awareness and Conflict of Interest Statement was read. No conflicts were identified.
Consent Agenda	The Consent Agenda be approved as presented. MOTION: That the Consent Agenda be approved as presented. Lowery/Passed.
Consent Agenda	The following items were accepted/approved by the adoption of the Consent Agenda: <ul style="list-style-type: none">• Minutes of May 30, 2014 (Board Meeting)• Minutes of May 29, 2014 (Administrative Hearing)• Minutes of July 24, 2014 (Administrative Hearing)• Board Governance Committee<ul style="list-style-type: none">(a) Summary of Activities(b) 2014 Board Assessment Action Plan (FYI)• Executive Director

- (a) 2014 Election Report (FYI) (Attachment A)
- Education and Practice Committee
 - (a) Education Program Activity (Attachment B)
 - (b) 2014 2nd Quarter NCLEX Pass Rates
- Licensure Review Panels
 - (a) Licensure Review Panel Report (Attachment C)
- Hearing Committee
 - (a) Settlement Cases (Attachment D)
- Report on Non-Hearing Discipline, Investigation/Monitoring, Practice Matters (Attachment E)
 - (a) Administrative Actions on Non-Hearing Disciplinary Activities
 - (b) Administrative Actions on Non-Hearing Compliance Matters
 - (c) Administrative Actions on Non-Hearing Practice Matters
- Drug Monitoring Programs
 - (a) Program Statistics
- Meetings/Conferences/Liaison Activities:
 - (a) NCSBN Delegate Assembly
 - (b) NCSBN Discipline Case Management
 - (c) NCSBN State of Consensus Conference
 - (d) NCSBN/IT Operations Conference
 - (e) NC Emergency Medical Services Advisory Council

Meeting Agenda

The Meeting Agenda be adopted as presented.

MOTION: That the Meeting Agenda be adopted as presented.
Conklin/Passed.

Open Comment
Period

No requests to address the Board

Presentation of
Slate of Candidates
for Board Office

Bobby Lowery, RN, presented the slate of candidates for the Chair and Vice-Chair positions for 2015. Candidates for Chair: Martha Ann Harrell, RN and Bobby Lowery, RN. Candidates for Vice-Chair: Pat Campbell, Public Member and Jackie Ring, RN. No nominations were received from the floor.

MOTION: That the slate of candidates for Chair and Vice-Chair be accepted as presented from the Nominating Committee.
Committee Recommendation/Passed.

Board Governance

- Received and reviewed proposed revisions to Policy B7 Executive Director Performance Evaluation (Attachment F).
MOTION: That the Board approve proposed changes to Policy B7 ED Performance Evaluation as presented.
Committee Recommendation/Passed.
- Received and reviewed proposed revisions to the Ad Hoc Committee for Executive Director Performance Evaluation (Attachment G).
MOTION: That the Board approve proposed changes to the Ad Hoc Committee for Executive Director Performance Evaluation Committee Profile as presented.

Committee Recommendation/Passed.

- Finance Committee
- Received and reviewed Summary of Activities to include 4th Quarter Financials and review of investments as presented by Wes Thomas, CFP with Wells Fargo Advisors
 - Received and reviewed request for designation of funds for IT Operations and Fixed Asset Replacement (Building Reserve).
MOTION: That the Board designate \$250,000 of unrestricted net assets to support IT Operations and Fixed Asset Replacement (Building Reserve).
- Committee Recommendation/Passed

- Executive Director
- Received updates as follows:
- Recognized all of the NC IRE Fellows including Joyce Winstead and Crystal Harris who are current participants in the NCSBN Institute for Regulatory Excellence. The Board currently has six (6) IRE Fellows - more than any other Board of Nursing – and has submitted an additional IRE application for review.
 - Provided updates on the NCSBN Delegate Assembly related to proposed amendments to the Nurse Licensure Compact Agreement.
 - Provided updates related to Nursing Program Accreditation to include the following:
 - Creation of new division entitled Commission for Nursing Education Accreditation (C-NEA);
 - Staff changes National League for Nursing (NLN) and Accreditation Commission for Education in Nursing (ACEN).
 - Notification of withdrawal to seek ACEN candidacy from Southeastern Community College (SCC).
 - Notification of withdrawal from the ACEN substantive change request for proposed innovative curriculum from Watts School of Nursing.
 - Received and reviewed 2014 Strategic Plan Roadmap.
 - Received verbal update regarding the CAC Review of Discipline Programs Action Grid and activities of the Ad Hoc Committee for Discipline Review.

- Education & Practice
- Received and reviewed summary of activities from the Education and Practice Committee.
 - Received and reviewed proposed new Position Statement for Out-of-State Nurses Practicing in North Carolina for a Limited Period of Time (Attachment H).
MOTION: That the Board approve the new Position Statement for Out-of-State Nurses Practicing in North Carolina for a Limited Period of Time.
Moore/Passed.
 - Received and reviewed update regarding Isothermal Community College Practical Nursing (PN) Program non-compliance with NC BON Education Program regulations requiring that fifty percent or more of the nursing faculty must hold a master's degree (Attachment I). Debbie Wiltshire, RN, EdD, Program Director was present and responded to questions.

Presentation of Resolution and Plaque Julie George presented Resolutions and plaques to Peggy Walters and Martha Ann Harrell, recognizing their service in 2014 as Chair and Vice-Chair respectively.

Executive Session **MOTION:** 11:05 am Executive Session for discussion of legal and personnel matters. Conklin/Passed

Open Session **MOTION:** 12:55 pm Open Session Moore/Passed

Results of Election of Officers Peggy Walters announced the results of the Chair/Vice-Chair election for the year 2015 as follows:

Chair: Martha Ann Harrell, Public Member
Vice-Chair: Jackie Ring, RN

Public Hearing A Public Hearing was held to receive comments regarding proposed revisions to the following Rules:

- o 21 NCAC 36 .0317 Administration (Attachment J)
- o 21 NCAC 36 .0318 Faculty (Attachment K)
- o 21 NCAC 36 .0323 Records and Reports (Attachment L)

Executive Session **MOTION:** 1:05 am Executive Session for discussion of personnel matters. Lowery/Passed

Open Session **MOTION:** 1:30 pm Open Session Conklin/Passed

Adjournment **MOTION:** 1:30 pm Meeting be adjourned. Harrell/Passed.

Minutes respectfully submitted by:

10/3/14
Date Submitted



Angela Ellis, Manager, Executive Office

1/30/15
Date Approved



Julia L. George, RN, MSN, FRE
Executive Director

ATTACHMENT A

The Electronic Election System was available for voting from July 1, 2014 until August 15, 2014. Four (4) candidates ran for the position of RN ADN/Diploma Nurse Educator, Twelve (12) candidates ran for the position of RN Staff Nurse and Three (3) candidates ran for the position of Licensed Practical Nurse. The following nurses were elected/re-elected to the North Carolina Board of Nursing for the following terms:

Category	Elected Member	Term	Term of Office
RN ADN/Diploma Nurse Educator	Peggy Walters♦	4 years	Jan 1, 2015 – Dec 31, 2018
RN Staff Nurse	Christina Weaver	4 years	Jan 1, 2015 – Dec 31, 2018
Licensed Practical Nurse	Mary Jones	4 years	Jan 1, 2015 – Dec 31, 2018

♦ Re-elected for 2nd term

The charts below depict the number of votes cast for each candidate:

RN ADN/Diploma Nurse Educator	
Peggy Walters	1439
Elizabeth Turner	1210
Eva Meekins	819
Sarah Stamey	557
TOTAL VOTES	4025

RN Staff Nurse		Votes
Christina Weaver		542
Paul Perryman		534
Janice McRorie		510
Lisa Wells		463
Lea Davidson		435
Randy Hamm		424
Angel Pomerance		388
Meredith Beam		316
Christy McCain		274
Chelsea Armitage		160
Frances Cole		152
Barbara Chorney		136
TOTAL VOTES		4334

Licensed Practical Nurse		Votes
Mary Jones		127
Felicia Major		85
Ira "Glenn" Davis		47
TOTAL VOTES		259

The 2014 Election experienced an increase in voting both in the RN and LPN categories. Complete statistical analysis on file.

ATTACHMENT B

Education Program Activity

Ratification of Full Approval Status

- Queens University of Charlotte, Charlotte – BSN
- Western Carolina University, Cullowhee – BSN

Ratification to Approve the Following Expansions in Enrollment

- Pitt Community College, Greenville – ADN – Increase of 25 for a total of 225
- Montgomery Community College, Troy – PN – Increase of 15 for a total of 60

Notification of programs not admitting students

- Sandhills Community College, Pinehurst – PN – Fall 2014 – Summer 2016

Notification of School Closing

- Mayland Community College – PN (see next page)

FYI

- Randolph Community College, Asheboro – ADN – voluntarily withdrew from ACEN accreditation

ATTACHMENT C**The Licensure Review Panel met on May 8, 2014 and submits the following report regarding actions taken:**

- Reviewed three (3) candidates for reinstatement
- Julie Young Senter, LPN# 68287: License reinstated without conditions contingent upon receipt of satisfactory criminal background check (CBC). ACCEPTED
 - Theodore Louis Darr, RN# 204898: Contingent upon declaration of North Carolina as home state, licensee's RN license will be reinstated and must sign contract with the Chemical Dependency Discipline Program (CDDP). ACCEPTED
 - Staci Daughrity Vaughan, LPN# 62752: License reinstated with probationary conditions for twenty-four (24) months. ACCEPTED
- Reviewed one (1) for determination of length of suspension
- Denice Cheek Taylor, RN# 160302: License suspended for a period of two (2) years from date of suspension (3/7/2014) and until submission of One Year Sobriety Notebook. If Notebook is determined complete and sufficient, Board staff may approve re-entry into the Chemical Dependency Discipline Program (CDDP). ACCEPTED
- Reviewed two (2) candidates for extension of probationary conditions
- Cassandra Eubanks Williams, RN# 191020: Request granted for extension of probation for twelve (12) months. ACCEPTED
 - Angela Whittaker, RN# 211399: Request granted for extension of probation for twelve (12) months. ACCEPTED

The Licensure Review Panel met on June 12, 2014 and submits the following report regarding actions taken:

- Reviewed three (3) candidates for reinstatement
- Dwayne Bell, RN# 191169: Licensee must sign contract with the Chemical Dependency Discipline Program (CDDP) and comply with conditions of the program. ACCEPTED
 - Cynthia Gayle Pittman, RN# 148642: Licensee must sign contract with the Chemical Dependency Discipline Program (CDDP) and successfully complete a Board approved Refresher Course. ACCEPTED
 - Celeste Nichelle Dominguez, LPN# 62062: License reinstated with probationary conditions for twelve (12) months. ACCEPTED
- Reviewed two (2) for determination of length of suspension
- Anna "Beth" Hankins, LPN# 48182: License will not be reinstated at this time. Licensee eligible to request reinstatement of license on or after one (1) year from date of suspension (March 26, 2014) and after submission of the One Year Sobriety Notebook. If Notebook is determined to be complete and sufficient, Board staff may approve re-entry into the Chemical Dependency Discipline Program (CDDP); No NAI, NAII, or Medication Aide. ACCEPTED
 - Karen S. Bennett, RN# 127090: License will not be reinstated at this time. Licensee is eligible to request reinstatement of her license on or after one (1) year from date of suspension (March 7, 2014) and submission of the One Year Sobriety Notebook. If Notebook is determined to be complete and sufficient, Board staff may approve re-entry into the Chemical Dependency Discipline Program (CDDP); No NAI, NAII, or Medication Aide.

ACCEPTED

- Reviewed one (1) candidates for endorsement
- Stefanie Joy Gaytan, RN# GAYT-3BYXQ7: Licensee granted initial licensure with probationary conditions for twenty-four (24) months. ACCEPTED

The Licensure Review Panel met on July 10, 2014 and submits the following report regarding actions taken:

- Reviewed five (5) candidates for reinstatement
- Lori Renae Hudson, LPN# 76101: License will not be reinstated at this time; required to submit to a forensic psychological evaluation by a Board approved psychiatrist/psychologist. May not request to appear before LRP prior to three (3) months from the date of signed Order and until evaluation completed and recommendations followed. Must successfully complete Ethical Legal Decision Making Course prior to re-appearance before LRP. No NAI, NAII or Medication Aide. ACCEPTED
 - Deahanne Reece Woodring, LPN# 53772: Upon satisfactory completion of a Board approved Refresher Course, License will be issued with probationary conditions. If licensee completes academic requirements for ADN Program prior to completion of conditions, must appear before LRP to request modification. ACCEPTED
 - Anna Champion (Moore) Hardison, RN# 138530: License reinstated without conditions. ACCEPTED
 - Emily Erin Carpenter, LPN# 69025: Licensee must sign contract with Chemical Dependency Discipline Program (CDDP) and comply with program requirements. ACCEPTED
 - Chanda Best Major, LPN# 64275: Licensee must sign Chemical Dependency Discipline Program (CDDP) Contract I and II and comply with conditions. ACCEPTED
- Reviewed one (1) candidate for initial licensure
- Cameron Boyd, RN/NCLEX Candidate: Initial licensure denied at this time. Must submit a Board approved Addictionologist evaluation. ACCEPTED

The Licensure Review Panel met on August 7, 2014 and submits the following report regarding actions taken:

- Reviewed five (5) candidates for reinstatement
- Susan Harrington Milligan, RN# 142316: License will not be reinstated for six (6) months and until successfully completes the Ethical Legal Decision Making Course with an emphasis on boundary issues. After six (6) months and successful completion of the required courses, license will be reinstated without conditions. ACCEPTED
 - Tina Marie Williams, LPN# 61668: License will be reinstated with probationary conditions for twelve (12) months. ACCEPTED
 - Gayle Foster Robinette, RN# 179753: License will be reinstated with probationary conditions for six (6) months; successfully complete Ethical Legal Decision Making Course prior to termination of the probationary conditions. ACCEPTED
 - Sandra Thornton Ayes, RN# 145308: Licensee must successfully complete a Refresher Course. Upon successful completion of Refresher Course, reinstate with probationary conditions for six (6) months. ACCEPTED

- Maryjane Abana Okafor, RN# 169718: License will be reinstated with probationary conditions for six (6) months. ACCEPTED
- Reviewed two (2) candidates for initial licensure
- Amanda Hendren, NCLEX Applicant: License issued without conditions. ACCEPTED
 - Natasha Dionne Howell, NCLEX Applicant: License issued without conditions. ACCEPTED

ATTACHMENT D

The Hearing Committee met on June 19, 2014 and reviewed the following Settlement Cases:

- Reviewed 4 candidates
for Settlement
- Margaret Smith, RN, CRNA Case Dismissed. ACCEPTED
 - Alicia Finch, RN Licensee issued a Letter of Concern. ACCEPTED
 - Vicky Gibson, RN Licensee issued a probationary license for 12 months w/ remedial course. ACCEPTED
 - Qiana Abreu, LPN Licensee issued a probationary license for 12 months w/ remedial course. ACCEPTED

The Hearing Committee met on August 21, 2014 and reviewed the following Settlement Cases:

- Reviewed 4 candidates
for Settlement
- Lorrie Versola, RN Licensee issued a Letter of Concern. ACCEPTED
 - Jennifer Pettigrew, LPN Licensee issued a Letter of Concern. ACCEPTED
 - Mary F. Jocius, RN, CRNA Licensee issued a probationary license for 6 months w/ remedial course. ACCEPTED
 - Cory Schmidt, RN Licensee issued a Reprimand. ACCEPTED

ATTACHMENT E**TOOK THE FOLLOWING ACTIONS REGARDING NON-HEARING ACTIVITIES
BY THE ADOPTION OF THE CONSENT AGENDA**Ratified Absolutions as follows:

Leslie Bowlby, RN (Denton)
Dixie Cope, LPN (Marion)
Amy Mathis, RN (Wilmington)
Jennifer Pellegrino, RN (Wilmington)
Jennifer Reeves, RN (Charlotte)
Stephanie Spangler, RN (Hillsville, VA)
Jennifer Troxell, LPN (Fayetteville)

Ratified the Issuance of Reprimands as follows:

Niawna Noelle Barnes, RN (Rockingham) – theft; facility property
Angela Tompkins Burton, RN (Lincolnton) – fraud; falsification of application seeking licensure
Frances Hough Cresenzo-dishmon, RN (Reidsville) – exceeding scope; inappropriate prescribing
Jessica Jacobs Johnson, RN (Dunn) – documentation errors; falsification of medical records
Sally Teresa Starnes, RN (China Grove) – court conviction; criminal charges-convictions-Nolo Contendre
Plea

Ratified the Issue of Reprimand with Conditions as follows:

Starla Hughes Beane, RN (Asheboro) – documentation errors; failure to maintain an accurate medical record
Susan Margaret Day, RN (West End) – withholding crucial health care information
Whitney Lorraine Denton, LPN (Wilmington) – failure to maintain licensure; practicing without a license
Kirkland McKinney Dickey, RN (Winston-Salem) – documentation errors; failure to maintain an accurate medical record
Alexis Devonne Ferguson, LPN (Tarboro) – documentation errors; falsification of medical records
Tamika Renee Garry, LPN (Fayetteville) – fraud; falsification of medical records
Melinda Gould, LPN (Hubert) – failure to maintain licensure; practicing without a license
Michael Kevin Howell, LPN (Walkertown) – documentation errors; falsification of medical records
Jason Phillip Lackey, RN (Winston Salem) – inappropriate interaction with client (abuse); boundary issues – non-sexual
Robyn Michelle Mashburn, RN (Randleman) – neglect; sleeping on duty
Mary Linda Estep Ownbey, RN (Candler) – practicing without a license
David E. Painter, RN (Denver) – action in another jurisdiction
Jessica Neile Pickering, RN (Albemarle) – failure to maintain licensure
Alisia Nicole Walker, LPN (High Point) – documentation errors; falsification of medical records

Ratified Issuance of Probation with conditions as follows:

Linda Ann Barschfski, RN (High Point) – neglect; failure to assess/evaluate
Amy England Brown, RN (Gastonia) – unsafe practice; failure to maintain minimum standards
Catherine Nance Emory, RN (Gastonia) – exceeding scope
June Peninger Leonard, LPN (Lexington) – fraud; falsification of medical records
Gail Rodgers Lincoln, RN (Goldsboro) – neglect; failure to administer prescribed medications
Madison Rachel Parker, RN (High Point) – neglect; failure to assess/evaluate
Jennifer C. Pruitt, LPN (Grover) – neglect; failure to administer prescribed medications
Katherine Sparkman Smith, RN (Elizabeth City) – court conviction; criminal charges – convictions – Nolo Contendere Plea

Ratified Probation with Drug Screening:

Martha Mary Endicott, RN (Raleigh) – diversion of drugs; controlled substances
Steven Todd Lester, RN (Hayesville) – diversion of drugs; controlled substances

Marie Michelle Riley, RN (Charlotte) – impaired on duty; drugs
Mary Theresa Watson, RN (Rural Hall) – drugs; controlled substances

Ratified Suspension of Probationary License as follows:

CDDP:

Jason Douglas Griffin, RN (Mt. Holly) – positive drug screen
Karen H. Leonard, RN (Winston Salem) – failure to report Rxs for controlled substances
Laura Megan Wade, RN (Lagrange) – withdrew
Rahiem Tehron Wilson, LPN (Maryland) – withdrew, action on privilege

Illicit Drug and Alcohol/Intervention Program:

Diandria Janay Beam, LPN – failure to notify Board of employment termination/suspension while on Level 3 Warning

Probationary License – Drug Screening:

Catherine Capps Carter, RN (Gastonia) – drug screening account suspended for 6 days; failed to check in for drug screening
Myra Elaine Carter, RN (Charlotte) – positive drug screen
Vivian Patricia Cobb, LPN (Jacksonville) – positive drug screen
Carol Honeycutt Hill, LPN (Bessemer, AL) - withdrew

Ratified Probationary License – Staff Reinstatements as follows:

Jessica Royals Giles, RN (Fuquay Varina)
Joan C. Stafford, RN (High Point)

Ratified CDDP Reinstatements as follows:

Anissa Hathcock Aycok, LPN (Sapphire)
Dwayne Eddie Bell, RN (Holly Springs)
Tammy Lynn Bradley, RN (Lumberton)
Tami D. Campbell, RN (Boomer)
John Francis Curry, RN (Newton)
Theodore Louis Darr, RN (Denver)
Sandra Jane Davey, RN (Clayton)
Chanda Best Major, LPN (Goldsboro)
Brooke Holland Spencer, RN (Gastonia)
Rebecca Gwyn Swan, RN (Stony Point)
Adam Keith Tadlock, RN (Roxboro)
Charlene Divens Wallace, RN (Ahoskie)

Ratified Denial of Reinstatement as follows:

Teresa Ann Murray, LPN (Fayetteville) – impaired on duty; psychological

Accepted the Voluntary Surrender as follows:

Kimberly Hoots Bricolo, RN (King) – unsafe practice; failure to maintain an accurate medical record
Barbara Jewel Cannon, RN (Lakeview) – diversion of drugs; controlled substances
R.A. Carlson, RN (Oak Island) – positive drug screen
Donale Gene Carter, RN (Beulaville) – sexual misconduct
Keri Clour, RN (Shawboro) – diversion of drugs; controlled substances
Evongela Lee Daniels, LPN (Elm City) – impaired on duty
Helen Jean Davis, LPN (Siler City) – diversion of drugs; controlled substances
Daniel Lee Diggs, RN (Aberdeen) – impaired on duty; alcohol
Heather Hawks, RN (Burlington) – impaired on duty
Emily Catherine Kelly, RN (Monroe) – diversion of drugs; controlled substances
Susan Powell Little, RN (High Point) – diversion of drugs; controlled substances
Catherine J. Loftis, LPN (Asheville) – diversion of drugs; controlled substances
Nora Terese Dono Lozano, RN (Asheville) – positive drug screen
Chris Randall Manick, RN, FNP (Old Fort) – inappropriate prescribing

Crystal Ann Nogales, RN (Morganton) – diversion of drugs; failure to maintain an accurate medical record
Morgan Elizabeth Ostra, RN (Greenville) – impaired on duty
Tammi McGinnis Wright, LPN (Cliffside) – diversion of drugs; controlled substances

Ratified acceptance of Voluntary Surrender for failure to comply with Alternative Program as follows:

Morgan Kathleen Arnold, RN (Mooresville) – positive drug screen, acknowledged use
Ava Dawn Bailey, RN (Fairmont) – four positive drug screens, acknowledged use
Jamilyn Kelsh Burnett, RN (Tarboro) – positive drug screen, acknowledged use
Mark Russell Coleman, RN (Clayton) – positive drug screen, acknowledged use
Miriam Greene Hale, RN (Shelby) – requested to withdraw
Donna Henderson, LPN (Charlotte) – positive drug screen, acknowledged use
Lezli Jean Johnson, RN (Newland) – requested to withdraw
Alexis Ashley Lang, RN (Raleigh) – positive drug screen, acknowledged use
Sophia McAnulty Luther, RN (Thomasville) – positive drug screen, acknowledged use
Angela Kilpatrick McCracken, RN (Arden) – positive drug screen, failed to follow up with Medical Review Officer
Holly Lanning Milanese, RN (Hendersonville) – failure to comply with treatment and drug screening requirements
Allison Markey Murphy, RN (Raleigh) – diversion from employer, failure to provide UDS to employer
Alesia Adams Pennell, RN (Taylorsville) – positive drug screen
Delynn Dawn Plott, RN (Winston Salem) – failure to comply with drug screening requirements
Lisa Anne Rivera, RN (Fayetteville) – positive drug screen, acknowledged use, failure to maintain active drug screening account
Carlos Orlando Romero, LPN (Wilson) – positive drug screen, acknowledged use
Toni Murphey Spillane, RN (Roanoke Rapids) – two positive drug screens, acknowledged use
Kelly Weed Thomas, RN (Winston Salem) – positive drug screen, acknowledged use

Ratified Suspension as follows:

Erica Sherron Braswell, LPN (Charlotte) – violating conditions imposed by the Board
Kacey Reann Midgette, LPN (Pantego) – violating conditions imposed by the Board

Ratified Suspension with Stay & Conditions as follows:

Julia V. Benton, LPN (Wingate) – neglect; failure to administer prescribed medications
Benita Patrice Fenderson, LPN (Smithfield) – neglect; failure to administer prescribed medications
James Russell Fleischer, LPN (Rocky Mount) – neglect; failure to perform prescribed treatments

Ratified Completion of Probation as follows:

Jason Scott Alford, RN (Randleman)
Marie Aycock, RN (Carolina Beach)
Kimberly Bachman-Noblett, RN (Fletcher)
Lynne Lawson Carter, RN (Greenville)
Rebekah Butterworth Cline, RN (Holly Springs)
Mary Gaitor (Wells), LPN (Raleigh)
Gloria Goodin, RN (Warrenton)
Robin Godwin, RN (Durham)
Patricia Logan, RN (Carthage)
Christine McCambridge, RN (NP Only) (Mooresville)
Benjamin Mark McKee, RN (Winston Salem)
Mitchell Moehring, RN (Hillsborough)
Lorayne Tumapang Ramos, RN (Yonkers, NY)
Adam Singleton, RN (Black Mountain)
Sherri Roxanne Stutts, LPN (Charlotte)
Lori Coleman Taylor, RN (Clarkton)
Ashley Terrell, RN (Durham)

ATTACHMENT F

Policy Number	B7
Area	Board Governance
Authority	North Carolina Board of Nursing
Topic	Executive Director Performance Evaluation
Purpose	To outline the annual Executive Director Performance Evaluation Process and Timeline
Approved	May 15, 2003
Revised	May 20, 2011 <u>August 20, 2014</u>

POLICY STATEMENT/PROCEDURE:**Statement:**

The Ad Hoc Committee for the Performance Evaluation of the Executive Director shall facilitate the Board's completion of the Executive Director Performance Evaluation on an annual ~~calendar year~~ basis.

Procedure:**Evaluation Process:**

1. The Ad Hoc Committee for the Performance Evaluation of the Executive Director seeks input regarding the Executive Director's job performance from Board members and, as appropriate, key external stakeholders and Board staff to include direct reports of the Executive Director.
2. Executive Director submits to the Ad Hoc Committee:
 - a. major program goals containing a current progress report;
 - b. accomplishments for the current ~~calendar~~ year;
 - c. proposed program goals for the upcoming ~~calendar~~ year; and
 - d. self-evaluation.
3. Board Chair:
 - a. presides over the Ad Hoc Committee meeting(s);
 - b. ensures open dialogue, fairness and equity in all matters related to the performance evaluation of the Executive Director;
 - c. presents a summary of results of the Executive Director's annual performance evaluation to the full Board and recommends a level of merit incentive to the full Board for consideration and action.
 - d. conducts evaluation conference with Executive Director.
 - e. Executive Director may discuss the results of the annual evaluation with the full Board

Ad Hoc Committee Members:

1. Reviews the Executive Director's performance evaluation system, position description and evaluation criteria to ensure relevancy and alignment with the Board's mission, visions, values and strategic plan;
2. Develops the timeline for the annual ~~calendar year~~ performance evaluation of the Executive Director;
3. Identifies three (3) external stakeholders from whom to solicit input regarding the Executive Director's job performance.

ATTACHMENT G

Committee Title: Ad Hoc Committee for Executive Director Performance Evaluation

Authority: NC Board of Nursing Policy B2 Officers of the Board (3) (e); Policy B7 Executive Director Performance Evaluation

Committee Purpose: The Ad Hoc Committee for the Executive Director Performance Evaluation will facilitate the completion of the Executive Director Performance Evaluation on an annual basis ~~(calendar year)~~ as outlined by Board of Nursing policy.

Size/Composition/Appointment Frequency of Meetings: The Ad Hoc Committee for the Executive Director Performance Evaluation will consist of three (3) Board members to include the Board Chair, Vice-Chair and an appointed member from the Board Governance Committee. The Ad Hoc Committee will be appointed in January of each calendar year as part of the Committee appointment process.

The Ad Hoc Committee will meet a minimum of two (2) times. Additional meetings may occur as the Committee deems necessary.

Duties/Responsibilities: Presides over the Ad Hoc Committee meeting; facilitates open dialogue, fairness and equity in all matters related to the performance evaluation of the Executive Director; presents a summary of results of the Executive Director's annual performance evaluation to the full Board and recommends a level of merit incentive for approval; calls meetings, as necessary, in addition to the regularly scheduled meetings; conducts evaluation conference with Executive Director; and submits evaluation materials to Human Resources for Executive Director's personnel records.

Board Chair:

- Committee:**
1. Reviews, annually, the Executive Director's performance evaluation system, position description and evaluation criteria to ensure relevancy and alignment with the Board's mission, vision, values and strategic plan;
 2. Develops the timeline for the annual performance evaluation of the Executive Director;
 3. Identifies three (3) external stakeholders from whom to solicit input regarding the Executive Director's job performance;
 4. Ensures that the Executive Director provides in writing the following documents which are posted to the evaluation system and are accessible to all Board

members:

- a. major program goals containing a current progress report;
 - b. accomplishments for the current calendar year;
 - c. proposed program goals for the upcoming calendar year; and
 - d. a self evaluation.
5. Receives, reviews and compiles a summary of results of the Executive Director's performance evaluation.
 6. Recommends a level of merit incentive for the Executive Director to be presented to the full Board for consideration and action.
 7. Reviews, every three (3) years, the complete compensation package of the Executive Director to ensure competitiveness and makes recommendations to the full Board, as deemed appropriate.
 8. Maintains confidentiality of all sensitive personnel matters related to the Evaluation and Compensation of the Executive Director.

Committee Reporting Requirements:

Reporting requirements for the Ad Hoc Committee for the Executive Director Performance Evaluation are as follows:

1. Reports the Executive Director's Performance Evaluation results and all elements related to the compensation package directly to the Board;
2. Submits recommendations related to the Executive Director Performance Evaluation process or the Ad Hoc Committee Profile directly to the Board Governance Committee.

Board Support: Associate Executive Director of Operations

Duties/Responsibilities: Coordinates meeting dates and times with Board members for Ad Hoc Committee meetings; coordinates submission of Executive Director documentation in accordance with Policy B7 Executive Director Performance Evaluation; works with external vendor to manage the electronic performance evaluation system; orients Board members in the use of the Performance Evaluation System; gathers compensation data through the use of independent vendor(s), professional associations and related occupational licensing boards; and compiles Executive Director compensation information for review by the Ad Hoc Committee.

Staff Support: Associate Executive Director of Operations

ATTACHMENT H

Out-of-State Nurses Practicing in North Carolina for a Limited Period of Time

Issue: Registered Nurses (RN) and Licensed Practice Nurses (LPN) are required to hold a valid, current North Carolina nursing license or possess a valid, current multi-state license from a Nurse Licensure Compact state to practice nursing in North Carolina (NC). At times, however, nurses licensed in another jurisdiction (Compact or non-Compact) are assigned to provide on-going nursing care to an established client traveling to or through NC for a limited period of time. It is in the best interest of continuity of client care to facilitate nursing care delivery by eliminating potential licensure barriers in such situations.

Examples include, but are not limited to, licensed nurse requests to:

- 1) accompany a client vacationing in NC;
- 2) escort an assigned client to a NC facility from another jurisdiction; or,
- 3) in the case of a school nurse, provide care and/or delegate care, including medication administration and/or the operation/maintenance of medical equipment, to Unlicensed Assistive Personnel (UAP) under the school nurse's supervision and direction for students traveling to or through NC on a school sponsored activity.

Both RN and LPN Role: A nurse licensed in a non-Compact jurisdiction and accompanying an assigned client from their jurisdiction traveling to or through NC for 30 days or less may continue to practice in NC. A nurse licensed in a non-Compact jurisdiction may remotely delegate and supervise UAP, even if the nurse is not present in NC with the UAP (e.g. a school nurse from a non-Compact jurisdiction).

In contrast, the Nurse Licensure Compact requires that a nurse possessing a multi-state license from a Compact state must practice under the party state's (e.g., NC) nursing laws and rules.

LPN Role: An LPN licensed in a non-Compact jurisdiction may continue to practice when accompanying an assigned client from their jurisdiction traveling to or through NC for 30 days or less under their pre-existing clinical supervision requirements.

In contrast, an LPN possessing a multi-state license from a Compact state must, in such situations, practice under RN supervision as required by NC nursing laws and rules.

References:

G.S 90-171.83 Nurse Licensure Compact – General Provisions and Jurisdiction
21 NCAC 36 .0224 – Components of Nursing Practice for the Registered Nurse
21 NCAC 36 .0225 – Components of Nursing Practice for the Licensed Practical
Nurse

ATTACHMENT I**BEFORE THE BOARD OF NURSING
OF THE STATE OF NORTH CAROLINA****In the matter of:**)**Isothermal Community College**)**NON-DISCIPLINARY CONSENT ORDER****Practical Nursing Program**)

This matter is before the North Carolina Board of Nursing ("Board") on information regarding Isothermal Community College Practical Nursing Program ("Nursing Program"). The Nursing Program knowingly and voluntarily waives their right to a formal hearing before the Board and any judicial review of such hearing in the above-referenced matter. Both parties stipulate and agree to the findings of fact and conclusions of law recited herein and to the order imposed. By their consent, the Nursing Program also stipulates that they knowingly and voluntarily waive their right to appeal this **ORDER** or challenge in any way the sufficiency of the findings of this **ORDER**. The Nursing Program admits and the Board finds that:

FINDINGS OF FACT

1. The North Carolina Board of Nursing is a body duly organized under the laws of North Carolina and is the proper body for this proceeding under the authority granted it in Article 9A, Chapter 90 of the General Statutes of North Carolina, and the rules and regulations promulgated there under.
2. Isothermal Community College operates the Nursing Program.
3. The Nursing Program's 2013 Annual Education Report stated "in any given semester the ratio of full-time and part-time faculty with master's degree includes: 2 full-time faculty (33% master's degree) and 4 part-time faculty (67% bachelor's degree)".
4. The Nursing Program was directed by the Board to immediately achieve compliance with 21 NCAC 36 .0318(d) and to submit faculty credentials, numbers and percentages in the Spring 2014 semester and Fall 2014 semester. Spring 2014 faculty credentials, numbers and percentages were in compliance with the 50% masters' prepared requirement.
5. The Nursing Program does not offer summer semester courses. Therefore, summer faculty credentials, numbers and percentages were not required.
6. The Nursing Program reported on August 6, 2014 that they returned to non-compliance with 21 NCAC 36 .0318(d). The Nursing Program indicated only 2 full-time faculty (33% master's degree) and 4 part-time faculty (67% bachelor's degree) for the Fall 2014 semester.
7. The Nursing Program, through the undersigned, stipulates that such allegations, if proven, are legally sufficient to support the Nursing Program has violated The Nursing Practice Act in Article 9A, Chapter 90 of the General Statutes of North Carolina and the rules promulgated there under, as specified in the Findings of Fact and Conclusions of Law.

CONCLUSIONS OF LAW

8. This matter is properly before the Board and the Board has jurisdiction over the Nursing Program and the subject matter of this case.
9. The Nursing Program's conduct, as set out in the findings of fact above, constitutes grounds for action pursuant to 21 NCAC 36 .0318 (d) as follows:
 - (d) Fifty percent or more of the nursing faculty must hold a master's degree.
10. Grounds exist pursuant to N.C. Gen. Stat. §90-171.38, §90-171.39, §90-171.40, 21 NCAC 36 .0303 and 21 NCAC 36 .0309 for the Board to withdraw approval, constituting closure of nursing programs as it deems fit and proper.

ORDER

11. Based on the Findings of Fact and Conclusions of Law, without further notice of proceedings, the Board enters into the following **ORDER** with the Nursing Program:
 - a. The Nursing Program shall, in consultation with the Board's education consultant, submit a new or revised plan, focused on meeting and maintaining the requirement that fifty percent or more of the nursing faculty must hold a master's degree as required. The plan shall be submitted to the Board for approval within 10 days of this **ORDER** and shall be implemented within 30 days of this **ORDER**.
 - b. The Nursing Program shall submit to the Board a report of all faculty credentials, numbers, and percentages at least one week prior to the beginning of Spring 2015, Fall 2015, Spring 2016 and Fall 2016 semesters for the purpose of continued monitoring. The report shall include only faculty employed and actively teaching during the indicated semester.
12. If during the period of this **ORDER**, the staff of the Board receives evidence that the Nursing Program has violated any of the above conditions; or if the Board determines that such violations have occurred, the Board may, after appropriate notice, place the Nursing Program in Warning Status.
13. In the event the Board determines that the Nursing Program has violated any of the conditions of this **ORDER**, and the Nursing Program disputes that such a violation of the conditions has occurred, the Nursing Program must file such objection in writing with the Board **WITHIN TEN (10) BUSINESS DAYS** of the Board's written notice of Warning Status. The notice to the Board shall contain with specificity the violation(s) disputed. Failure to submit a timely notice of objection shall constitute a waiver of the Nursing Program's right to dispute the Board determination.
14. When proper notice of objection has been filed with the Board, the Nursing Program will be provided a Hearing within 30 business days from the date on which the request was received.
15. This **ORDER** is non-disciplinary however; it is a public record under N.C. Gen. Stat. §132, the Public Records Act and it will be placed in the Nursing Program's file at the Board.
16. The Nursing Program is listed as Full Approval with the Board.

17. Confidentiality of this **ORDER** is not assured. This document will not be disclosed unless disclosure is requested or otherwise necessary to protect the Health, Safety and Welfare of the public or as ordered by a court of competent jurisdiction.
18. This **ORDER** shall take effect immediately when returned to the Board office after proper execution by both the Nursing Program representatives and the Board.

THE REMAINDER OF THIS PAGE IS INTENTIONALLY LEFT BLANK

By order of the North Carolina Board of Nursing this the ____ day of _____, 2014.

Julia L. George, RN, MSN, FRE
Executive Director

Consented to this the ____ day of _____, 2014.

Walter Dalton, President
Isothermal Community College

State of _____

County of _____

I, _____, a Notary Public for the above named County and State, do hereby certify that _____ personally appeared before me this day and acknowledged the due execution of the foregoing instrument.

Witness my hand and official seal

This the ____ day of _____, 201__.

Notary Public

(Seal)

My commission expires: _____

Consented to this the ____ day of _____, 2014.

Deborah Wiltshire, EdN, RN Program Director
Isothermal Community College

State of _____

County of _____

I, _____, a Notary Public for the above named County and State, do hereby certify that _____ personally appeared before me this day and acknowledged the due execution of the foregoing instrument.

Witness my hand and official seal

This the ____ day of _____, 201__.

Notary Public

(Seal)

My commission expires: _____

ATTACHMENT J**21 NCAC 36 .0317 is proposed to be amended as follows:****21 NCAC 36 .0317 ADMINISTRATION**

(a) The controlling institution of a nursing program shall provide those human, physical, technical and financial resources and services essential to support program processes, outcomes and maintain compliance with Section .0300 of this Chapter.

(b) A full time registered nurse qualified pursuant to Paragraph (c) of this Rule shall have the authority for the direction of the nursing program. This authority must encompass responsibilities for maintaining compliance with rules and other legal requirements in all areas of the program. The program director shall have non-teaching time sufficient to allow for program organization, administration, continuous review, planning and development.

(c) Program director ~~qualifications~~ in a program preparing for initial nurse licensure shall ~~include~~:

- (1) ~~faculty qualifications as specified in 21 NCAC 36 .0318;~~ hold a current unrestricted license or multistate licensure privilege to practice as a registered nurse in North Carolina;
- (2) ~~have two years of full-time experience as a faculty member in an~~ a board approved nursing program. Beginning January 1, 2015 this experience is as a faculty with a master's degree;
- (3) ~~for a program preparing individuals for registered nurse practice, a master's degree;~~ and be experientially qualified to lead the program to accomplish the mission, goals, and expected program outcomes;
- (4) ~~for a program leading to a baccalaureate, a doctoral degree in nursing; or a master's degree in nursing and a doctoral degree in a health or education field.~~ hold either a baccalaureate in nursing or a graduate degree in nursing from an accredited institution. If newly employed on or after January 1, 2016, hold a graduate degree from an accredited institution. If newly employed on or after January 1, 2021, hold a graduate degree in nursing from an accredited institution;
- (5) ~~prior to or within the first three years of employment, have preparation in teaching and learning principles for adult education, including curriculum development,~~ implementation, and evaluation, appropriate to assignment. This preparation may be demonstrated by one of the following:

- (A) completion of 45 contact hours of continuing education courses;
- (B) completion of a certificate program in nursing education;
- (C) nine semester hours of graduate course work;
- (D) national certification in nursing education; or
- (E) documentation of successful completion of structured, individualized development activities of at least 45 contact hours approved by the Board. Criteria for approval include content in the faculty role within the curriculum implementation, objectives to be met and evaluated, review of strategies for identified student population and expectations of student and faculty performance;

(6) maintain competence in the areas of assigned responsibility; and

(7) have current knowledge of nursing practice for the registered nurse and the licensed practical nurse.

(d) The nursing education program shall implement, for quality improvement, a comprehensive program evaluation which shall include:

- (1) students' achievement of program outcomes;
- (2) evidence of program resources including fiscal, physical, human, clinical and technical learning resources; student support services, and the availability of clinical sites and the viability of those sites adequate to meet the objectives of the program;
- (3) measures of program outcomes for graduates;
- (4) evidence that accurate program information for consumers is readily available;
- (5) evidence that the head of the academic institution and the administration support program outcomes;
- (6) evidence that program director and program faculty meet board qualifications and are sufficient in number to achieve program outcomes;
- (7) evidence that the academic institution assures security of student information;
- (8) evidence that collected evaluative data is utilized in implementing quality improvement activities; and
- (9) evidence of student participation in program planning, implementation, evaluation and continuous improvement.

(e) The controlling institution and the nursing education program shall communicate information describing the nursing education program that is accurate, complete, consistent across mediums

and accessible by the public. At least the following must be made known to all applicants and students:

- (1) admission policies and practices;
- (2) policy on advanced placement, transfer of credits;
- (3) number of credits required for completion of the program;
- (4) tuition, fees and other program costs;
- (5) policies and procedures for withdrawal, including refund of tuition/fees;
- (6) grievance procedure;
- (7) criteria for successful progression in the program including graduation requirements;
and
- (8) policies for clinical performance.

History Note: Authority G.S. 90-171.23(b)(8); 90-171.38;

Eff. June 1, 1992;

Amended Eff. January 1, 2015; April 1, 2008; March 1, 2006.

ATTACHMENT K**21 NCAC 36 .0318 is proposed to be amended as follows:****21 NCAC 36 .0318 FACULTY**

- (a) Full-time and part-time faculty members are considered nursing program faculty. When part-time faculty members are utilized, they shall participate in curriculum implementation and evaluation.
- (b) Policies for nursing program faculty members shall be consistent with those for other faculty of the institution. Variations in these policies may be necessary due to the nature of the nursing curriculum.
- (c) ~~Nurse faculty members shall be academically qualified and sufficient in number to accomplish program outcomes.~~ Fifty percent or more of the nursing faculty must hold a graduate degree.
- (d) ~~Fifty percent or more of the nursing faculty must hold a master's degree.~~ As of January 1, 2021, at least eighty percent of the full time faculty must hold a graduate degree in nursing.
- (e) ~~Each nurse faculty member shall hold a current unrestricted license to practice as a registered nurse in North Carolina. The program director shall document current licensure to practice as a registered nurse in North Carolina.~~ As of January 1, 2021, at least fifty percent of the part time faculty must hold a graduate degree in nursing.
- (f) Hold a current unrestricted license or multistate licensure privilege to practice as a registered nurse in North Carolina.
- (f)(g) Nursing Nurse faculty who teach in a program leading to initial licensure as a nurse shall:
- (1) hold either a baccalaureate in nursing or a ~~master's~~ graduate degree in nursing from an accredited institution;
 - (2) ~~if employed after December 31, 1983,~~ have two calendar years or the equivalent of full time clinical experience as a registered nurse;
 - (3) if newly employed in a full time faculty position on or after January 1, 2016, hold a graduate degree from an accredited institution, or obtain a graduate degree in nursing from an accredited institution within five years of initial full time employment.
- ~~(3)~~(4) prior to or within the first three years of employment, have preparation in teaching and learning principles for adult education, including curriculum development, implementation, and evaluation, appropriate to assignment. This preparation may be demonstrated by one of the following:

- (A) completion of 45 contact hours of continuing education courses;
- (B) completion of a certificate program in nursing education;
- (C) nine semester hours of ~~education~~ graduate course work;
- (D) national certification in nursing education; or
- (E) documentation of successful completion of structured, individualized development activities of at least 45 contact hours approved by the Board. Criteria for approval include content in the faculty role within the curriculum implementation, objectives to be met and evaluated, review of strategies for identified student population and expectations of student and faculty performance;

~~(4) If employed prior to July 1, 2006, faculty shall meet the requirements in Subparagraph (f)(3) of this Rule by December 31, 2010. If employed on or after July 1, 2006 faculty members have three years from date of employment to meet the requirements in Subparagraph (f)(3) of this Rule.~~

- (5) maintain competence in the areas of assigned responsibility; and
- (6) have current knowledge of nursing practice for the registered nurse and the licensed practical nurse.

~~(g)~~(h) Interdisciplinary faculty who teach in nursing program courses shall have academic preparation in the content area they are teaching.

~~(h)~~(i) Clinical preceptors shall have competencies, assessed by the nursing program, related to the area of assigned clinical teaching responsibilities and serve as role models to the student. Clinical preceptors may be used to enhance faculty-directed clinical learning experiences after a student has received basic instruction for that specific learning experience. Clinical preceptors shall hold a current, unrestricted license to practice as a registered nurse in North Carolina.

~~(i)~~(j) Nurse faculty members shall have the authority and responsibility for:

- (1) student admission, progression, and graduation requirements; and
- (2) the development, implementation, and evaluation of the curriculum.

~~(j)~~(k) Nurse faculty members shall be academically qualified and sufficient in number to implement the curriculum as demanded by the course objectives, the levels of the students, ~~and~~ the nature of the learning environment, and ~~shall be sufficient~~ to provide for teaching, supervision and evaluation. ~~The faculty-student clinical ratio shall be 1:10 or less.~~

~~(k)~~(l) ~~There shall be a written evaluation of each nurse faculty member by the program director or a designee and a written evaluation of the program director according to the institutional policy.~~

The faculty-student ratio for faculty directed preceptor clinical experiences shall be 1:15 or less.

The faculty-student ratio for all other clinical experiences shall be 1:10 or less.

History Note: Authority G.S. 90-171.23(b)(8); 90-171.38; 90-171.83;

Eff. February 1, 1976;

Amended Eff. January 1, 2015; August 1, 2011; November 1, 2008; July 1, 2006;

July 1, 2000; January 1, 1996; June 1, 1992; January 1, 1989; January 1, 1984.

ATTACHMENT L**21 NCAC 36 .0323 is proposed to be amended as follows:****21 NCAC 36 .0323 RECORDS AND REPORTS**

- (a) The controlling institution's publications describing the nursing program shall be accurate.
- (b) There shall be a system for maintaining official records. Current and permanent student records shall be stored in a manner that prevents damage and unauthorized use.
- (c) Both permanent and current records shall be available for review by Board staff.
- (d) The official permanent record for each graduate shall include documentation of graduation from the program and a transcript of the individual's achievement in the program.
- (e) The record for each enrolled student shall contain up-to-date and complete information, including:
- (1) documentation of admission criteria met by the student;
 - (2) high school graduation, high school equivalent, or earned credits from post-secondary institution approved pursuant to G.S. 90-171.38(a); and
 - (3) transcript of credit hours achieved in the classroom, laboratory, and clinical instruction for each course that reflects progression consistent with program policies.
- (f) The nursing program shall file with the Board records, data, and reports in order to furnish information concerning operation of the program as prescribed in the rules in this Section including:
- (1) an Annual Report received by the Board by November 1 of each year;
 - (2) a Program Description Report for non-accredited programs received by the Board at least 30 days prior to a scheduled review; and
 - (3) notification by institution administration of any change of the registered nurse responsible for the nursing program. This notification must include a vitae for the new individual and must be submitted within 20 business days of the effective date of the change; and
 - (4) ~~a curriculum vitae for new faculty submitted by the program director within 20 business days from the time of employment.~~
- (g) All communications relevant to accreditation shall be submitted to the North Carolina Board of Nursing at the same time the communications are submitted to the accrediting body.

(h) The Board may require additional records and reports for review at any time to provide evidence and substantiate compliance with the rules in this Section by a program and its associated agencies.

(i) The part of the application for licensure by examination to be submitted by the nursing program shall include a statement verifying satisfactory completion of all requirements for graduation and the date of completion. The nursing program director shall submit the verification form to the Board within one month following completion of the program.

History Note: Authority G.S. 90-171.23(b)(8); 90-171.38;

Eff. February 1, 1976;

Amended Eff. January 1, 2015; December 1, 2005; January 1, 2004; June 1, 1992;

January 1, 1989; January 1, 1984.