

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

**January 19, 2018
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 January 19, 2018. Meeting convened at 11:00 a.m.
Presiding	Pat Campbell, Public Member
Members Present	Martha Ann Harrell, Public Member Pam Edwards, RN Frank DeMarco, RN Mary Jones, LPN (arrived 11:14 am) Lisa Hallman, RN Lori Lewis, LPN Carol Wilson, LPN Glenda Parker, RN Yolanda VanRiel, RN Peggy Walters, RN Becky Ezell, RN Ashley Stinson, Public Member
Members Absent	Sharon Moore, RN
Staff Present	Julia George, RN, Chief Executive Officer Anna Choi, General Counsel Gayle Bellamy, Chief Financial Officer Angela Ellis, Chief Administrative Officer Crystal Tillman, Director, Education and Practice Amy Fitzhugh, Chief Legal Officer Chandra Graves, Executive Assistant
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. DeMarco/Passed.
Consent Agenda	The following items were accepted/approved by the adoption of the Consent Agenda: <ul style="list-style-type: none">• Minutes of September 22, 2017 (Board Meeting)• Minutes of September 21, 2017 (Administrative Hearings)• Minutes of November 30, 2017 (Administrative Hearings)• Board Governance Committee

- (a) Summary of Activities
- (b) Board Assessment Action Plan Final Report 2017 (FYI)
- (c) BOES Update (FYI)
- Chief Executive Officer
 - (a) Ratification of Mail Referendum for 21 NCAC 36 .0815 Reporting Criteria and .0816 Definition of Consultation for Prescribing Controlled Substances
- Education and Practice Committee
 - (a) Education Program Activity (Attachment A)
 - (b) Ratification of Full Approval Status:
 - College of Albemarle, Elizabeth City – ADN
 - Sampson Community College, Clinton – ADN and LPN
 - (c) Ratification to Approve the Following Expansions in Enrollment:
 - Bladen Community College, Duplin – ADN, increase in 75 for a total of 250 students beginning Fall 2018
 - (d) Notification of Alternate Scheduling Options:
 - Bladen Community College – EMTP to ADN Option
 - Lenoir Community College – EMTP to ADN Option
 - Surry Community College – LPN to BSN and ADN to BSN
 - RIBN Options
 - Winston-Salem State University – LPN to BSN Option
 - (e) FYI Accreditation Decisions by CNEA (Initial or Continuing Approval – Next Visit):
 - Pitt Community College, Greenville – ADN
 - (f) South University
 - (g) Research Committee Update
- Licensure Review Panels
 - (a) Licensure Review Panel Report (Attachment B)
- Settlement Committee
 - (a) Summary of Activities (Attachment C)
- Report on Non-Hearing Discipline, Investigation/Monitoring, Practice Matters (Attachment D)
 - (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
- Joint Sub Committee
 - (a) NP Compliance Review
- Meetings/Conferences/Liaison Activities

Meeting Agenda

The Meeting Agenda be adopted as presented.

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

Open Comment Period

No requests to address the Board.

Finance Committee	Received and reviewed Summary of Activities to include 1 st Quarter Financials and review of investments as presented by Jessica Christie and Joe Bryan with Wells Fargo Advisors.
Auditor's Report	Received and reviewed Auditors Report as presented by Sandy Newall of Bernard Robinson MOTION: That the Board accept the Auditor's Report as presented. Committee Recommendation/Passed
Board Governance	Received and reviewed proposed Board Assessment Action Plan for 2018. (Attachment E) MOTION: That the Board approve the Board Assessment Action Plan for 2018 as presented. Committee Recommendation/Passed
Chief Executive Officer	Received updates as follows: <ul style="list-style-type: none">• Enhanced Nurse Licensure Compact (eNLC) implementation date is, January 19, 2018.• Provided an update on Regionally Increasing Baccalaureate Nurses (RIBN).• Provided an update on the 2017 Strategic Plan Road year-end report.• Provided an update on the 2014-2017 Strategic Plan Final Report• Recognized Board Member Dr. Peggy Walters who received the NCNA Nurse Educator of the Year.
Proposed Strategic Plan 2018-2021	Received and reviewed the 2018-2021 proposed Strategic Plan (Attachment F) MOTION: That the Board approve the 2018-2021 proposed Strategic Plan as presented. Hallman/Passed
Education & Practice	<ul style="list-style-type: none">• Received and reviewed Summary of Activities from the Education and Practice Committee to include proposed amendments to 21 NCAC 36.0220 Refresher Course. Proposed amendments will be included in the Periodic Review Re-adoption packet and presented to the full Board for approval at the May 2018 Board Meeting.• Received and reviewed proposed Charge to review Position Statement concerning Telehealth/Telenursing. MOTION: That the Board charge the Education and Practice Committee to review the Position Statement Telehealth/Telenursing and recommend changes to the Board. Committee Recommendation/Passed• Received and reviewed the 2017 End of Year NCLEX Pass Rates. (Attachment G)• Received and reviewed report of Approval Status Changes related to Annual NCLEX Results. (Attachment H) MOTION: That the Board approve the Status Changes related to Annual NCLEX Results as presented.

Walters/Passed

- Received an update on Nursing Faculty to include faculty shortages and its contributing factors. (FYI)
- Received and reviewed Notification of Program Closing: Carteret Community College, Morehead City – LPN, Fall 2017 no students

NCAC Chapter 36 - Rules Received and reviewed NCAC Chapter 36 Sunset Review.

Ad Hoc Committee for Discipline Review

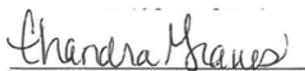
- Received and reviewed Summary of Activities from the Ad Hoc Committee for Discipline Review.
- Received and reviewed the Breach of Confidentiality Protocol.
MOTION: That the Board approve the Breach of Confidentiality Protocol
 - Committee Recommendation/Passed
 - Received and reviewed the Misconduct and Boundary Violations Protocol.
MOTION: That the Board approve the Misconduct and Boundary Violations Protocol.
Committee Recommendation/Passed
 - Received and reviewed the Practice Without a License Protocol
MOTION: That the Board approve the Practice Without a License Protocol.
Committee Recommendation/Passed

Legal Matters No Legal Matters for discussion.

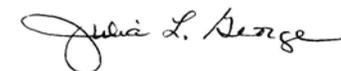
Adjournment **MOTION:** 12:10 pm Meeting be adjourned.
Jones/Passed.

Minutes respectfully submitted by:

January 25, 2018
Date Submitted


Chandra Graves
Executive Assistant

May 25, 2018
Date Approved


Julia L. George, RN, MSN, FRE
Chief Executive Officer

ATTACHMENT A

EDUCATION PROGRAM ACTIVITY

Ratification of Full Approval Status:

- College of Albemarle, Elizabeth City - ADN
- Sampson Community College, Clinton – ADN and LPN

Ratification to Approve the Following Expansions in Enrollment:

- Bladen Community College, Duplin - ADN, increase in 20 for a total of 70 students beginning in Spring 2018.
- Cabarrus College of Health Sciences, Concord – ADN, increase in 75 for a total of 250 students beginning in Fall 2018.

Notification of Alternate Scheduling Options:

- Bladen Community College – EMTP to ADN Option
- Lenoir Community College – EMTP to ADN Option
- Surry Community College – LPN to BSN and ADN to BSN RIBN Options
- Winston-Salem State University – LPN to BSN Option

FYI Accreditation Decisions by CNEA (Initial or Continuing Approval – Next Visit):

- Pitt Community College, Greenville - ADN
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ATTACHMENT B

The Licensure Review Panel met on August 10, 2017 and submits the following report regarding actions taken:

- Reviewed one (1) candidates for reinstatement
 - April Hyatt Prince, RN #203327
Decline to reinstate. May petition LRP after successful completion of Refresher Course.

- Reviewed one (1) candidate for endorsement
 - Mary Evelyn McGehee, RN Applicant
Issue license w/CDDP (ACCEPTED)

- Reviewed one (1) candidate for extension of time to satisfy probationary conditions
 - Tiffany Cartner Hunt, RN #189088
Extension granted for 12 months (ACCEPTED)

- Reviewed two (2) candidates for initial licensure
 - Kimberly Anne Ricks, RN Applicant
Issue single state license upon completion of application process
 - Mildred Akachukwu, RN Applicant
Decline to issue license. May petition LRP upon completion of DHSR investigation

The Licensure Review Panel met on September 14, 2017 and submits the following report regarding actions taken:

- Reviewed two (2) candidates for reinstatement
 - Catherine Capps Stowe, RN #121423
Reinstate with probationary conditions for 12 months with drug screening (ACCEPTED)
 - Christina Marie Correll, LPN #62545
Reinstate with CDDP (ACCEPTED)

 - Reviewed one (1) candidate for endorsement
 - Thomas Matthew Rodgers, RN applicant
Issue license with CDDP (ACCEPTED)

 - Reviewed three (3) candidates for initial licensure
 - Brenda Marlene Harris, RN Applicant
Issue license
 - KaSaundra Reed, RN Applicant
Issue license with probationary conditions for 12 months (ACCEPTED)
 - Dwight C. Whynot, RN Applicant
Issue license with probationary conditions for 12 months. Applicant shall successfully complete Refresher Course (ACCEPTED)
-

The Licensure Review Panel met on October 12, 2017 and submits the following report regarding actions taken:

Reviewed five (5) candidates for reinstatement

- Nicholas Howard Alexander, RN #24287
Reinstate with CDDP (ACCEPTED)
- Paula Ann Henry, RN #234999
Reinstate with CDDP (ACCEPTED)
- Lacresha A. Hunter, LPN #79627
Reinstate with CDDP (ACCEPTED)
- Anastasia Heath, RN #159790
Reinstate with CDDP (ACCEPTED)
- Melissa Ann Bellow, RN #267035
Reinstate with probationary conditions for 12 months (ACCEPTED)

Reviewed one (1) candidate for extension of time to satisfy probationary conditions

- Teresa Ann Alford Tart, LPN #26717
Extension granted for 12 months (ACCEPTED)
-

ATTACHMENT C

The Settlement Panel met on July 13, 2017 and submits the following report regarding actions taken:

- Shenequa Walker
LPN #80448
 - Suspension of license for minimum of six (6) months. Prior to petitioning LRP, must obtain evaluation by Board-approved psychiatrist and share report with Board. (DECLINED – ADMINISTRATIVE HEARINGS)
- Kesha Jones
RN #214610
 - Probationary license for twelve (12) months (ACCEPTED)
- Rhonda Ragans
VA RN
#0001190884
 - Suspension of privilege to practice for minimum of (6) months (ACCEPTED)
- Quyen Vo
RN #254692
 - Probationary license for twenty-four (24 months) (ACCEPTED)
- Corina Herring
RN #199370
CRNA #1980
 - Non-Disciplinary Consent Order (OFFER RETRACTED PENDING INVESTIGATION OF ADDITIONAL COMPLAINT)

The Settlement Panel met on August 30, 2017 and submits the following report regarding actions taken:

- Queontaiu Watford
LPN #82059
 - Probationary license for twelve (12) months (DECLINED – ADMINISTRATIVE HEARING)
- Tina Kujawski
RN #150749
NP #900134
 - Suspension for minimum of twelve (12) months & Ethical-Legal Decision-Making course prior to petitioning LRP (ACCEPTED)
- Morgan Moore
RN 257773
 - Alternative Program (ACCEPTED)

The Settlement Panel met on September 20, 2017 and submits the following report regarding actions taken:

- Lindsay McKeelan
RN #237740
 - Suspension for minimum of twelve (12) months (ACCEPTED)
 - Raymond Burr
SC RN #227061
 - Suspension of privilege to practice for minimum of twelve (12) months (ACCEPTED)
 - Gayna Anderson
LPN #49918
 - Shall obtain Addictionologist evaluation. If diagnosed with substance use disorder, enter CDDP. If not diagnosed with substance use disorder, probationary conditions for twelve (12) months. (DECLINED – ADMINISTRATIVE HEARING)
-

The Settlement Panel met on October 25, 2017 and submits the following report regarding actions taken:

Teresa McClure
RN #264024

- Reprimand with course requirement
(ACCEPTED)

Moriam Kaka
RN #191779

- Reprimand with course requirements
(DECLINED – ADMINISTRATIVE HEARING)

Bonnie Delong
LPN #77227

- Suspension for minimum of twelve (12) months
(DECLINED – ADMINISTRATIVE HEARING)
-

ATTACHMENT D

TOOK THE FOLLOWING ACTIONS REGARDING NON-HEARING ACTIVITIES BY THE ADOPTION OF THE CONSENT AGENDA

Ratified Reprimand and Probation with Drug Screen:

Therese Williams Dumas, RN 289212 – Action in another jurisdiction

Ratified Probation with Drug Screen:

Amanda Leigh Jones, RN 225064 – Diversion of Drugs

Jonna Larson, RN 282476 – Diversion of Drugs

Derek Andrew Beckett, RN 277970 – Impaired on Duty

Renyatta Gray, RN 215146 – Positive Drug Screen

Elena Nicole Morgan, RN 207114 – Positive Drug Screen

Christina Gayle Dehn, RN 237759 – Impaired on Duty

Joylynn Rejean Jones, LPN 77442 – Impaired on Duty

Ratified Reprimand:

Frank Delbert Wenner, RN 265200 – Criminal Conviction

Sandra Nicks Kelly, RN 137258 – Criminal Conviction

Shannon Hilton, RN 281398 – Action in Another Jurisdiction

Ratified Reprimand with Conditions

Dora Nall Cockerham, LPN 146147 – Practice with Expired License

Nikita Lozette Womack, LPN 75211 – Theft of Patient Property

Shannon Marie Smith, LPN 71540 – Practice with Expired License

Chastity McMillian, VA LPN 0002074211 – Diversion of Drugs

Mikle K. Demaskey, TN RN 197233 – Neglect, Failure to Assess/Evaluate

Vincent Lynn Sisti, LPN 67929 – Neglect, Documentation Errors

Ashley Brooke Norris, RN 273541 – Action in Another Jurisdiction

Tracy Jo Peck, RN 140979 – Practice with Expired License

Donna Dorsett Kretschmer, RN 58650 – Action in Another Jurisdiction

Jeffrey Ryan Motes, RN 278029 – Inappropriate Interaction with Client

Teresa Brooks McClure, RN 264024 – Neglect, Failure to Report Suspected Violations

Caryn Forehand Langwell, RN 248836 – Neglect, Documentation Errors

Linda Smith Lennon, RN 216365 – Action in Another Jurisdiction

Ratified Suspension:

Cynthia Dawn Messer, RN 227360 – Diversion of Drugs

Laura E Merlino, RN 214789 – Action in Another Jurisdiction

Mary Alice Williams, RN 132947 – Neglect, Failure to Assess/Evaluate

Julia Ann Boss, RN 206688 – Diversion of Drugs

Renee Kennedy Hunter, RN 246501 – Diversion of Drugs

Alice Bradshaw, Temp. RN 106036 – Impaired on Duty

Julia Louise McConnell, RN 155581 – Impaired on Duty

Jeanne Kathryn Gauthier, RN 256866 – Diversion of Drugs

Leslie Anne Turley, RN 206078 – Impaired on Duty

Candace Camille Vangile, RN 117673 – Diversion of Drugs

Jessica Elizabeth Jochum, RN 262207 – Neglect, Failure Maintain Accurate Medical Record
Pattie Barnes Robinson, LPN 37565 – Action in Another Jurisdiction
Kristine Renae Baker, NP 5003929 – Forgery of Prescription, Diversion of Drugs
Marcus Corder, KY LPN 2038381 – Neglect, Failure Administer Prescribed Medications
Tela Franklin, VA RN 0001256517 – Impaired on Duty
Rebecca Jane Burleson, RN 269854 – Diversion of Drugs
Jessica Rose Neel, LPN 78721 – Failed to Complete Required Course
Natalie Paige Wolfanger, RN 2589947 – Diversion of Drugs, Positive Drug Screen
Bridget Keenan Black, RN 254477 – Diversion of Drugs
Jennifer Greer Galloway, RN 165032 – Diversion of Drugs
Felicia Cottrell, RN 294569 – Impaired on Duty
Crystal Davis Swift, RN 164459 – Violating Conditions Imposed by the Board
Brittany Wibly, RN 294057 – Diversion of Drugs, Positive Drug Screen
Leanna Dunn Rouse, RN 171643 – Forgery of Prescription
Christine Hicks Thomas, RN 72928 – Criminal Convection

Ratified Suspension with Conditions

Henry Muthini Kimeu, RN 220649 – Inappropriate Interaction with Client
Cynthia Marie Cook, RN 234210 – Diversion of Drugs, Sexual Misconduct, Breach of Patient Confidentiality
Theresa A Jomo, LPN 65199 – Documentation Errors, Falsification of Medical Records

Ratified Chemical Dependency Discipline Program (CDDP)

Jamie Macfie, RN 214388 – Impaired on Duty
Rhonda Willis McCracken, RN 76318 – Diversion of Drugs, Positive Drug Screen
David Lawrence Strauch, RN 160503 – Positive Drug Screen
Billeena Michele Floyd, RN 262277 – Prior CDDP Participant
Tonya Adkins McElveen, LPN 49449 – Diversion of Drugs
Wendy Ramsey Burkhouse, RN 159507 – Impaired on Duty
Mark Russell Coleman, RN 202607 – Prior CDDP Participant
Ellen Ashby Minier, RN 245944 – Criminal Conviction (DWI/DUI), Falsification of Application
Eliza S Grady, RN 195170 – Prior AP Participant
Sandra Samira Alabbas, RN 263591 – Prior AP Participant
Karina Randall, RN 290314 – Impaired on Duty, Positive Drug Screen

Ratified Probation

Renee Williams Flake, RN 209333 – Requested to withdraw
Deresa Oliver hall, RN 162389 – Failure to complete probationary conditions
Brandy Jean Powers, LPN 81485 – Failure to complete required course
Tracy Warren-Morra, RN 255974 – Requested to withdraw

Ratified Probation with Drug Screen

Luchrisa Donnella Bowden, LPN 72728 – Failed, positive drug screen
Lora Farley Grimmett, LPN 66134 – Failed to report court charges as required
Virginia Rose Kennedy, RN 210986 – Requested to withdraw
Jonna Larson, RN 282476 – Failed to register for drug screening as required

Ratified Chemical Dependency Discipline Program (CDDP)

Nina Edison, RN 135371 – Requested to withdraw

Nathan Earl Giles, LPN 68357 – Requested to withdraw
 Jamie Macfie, RN 214388 – Requested to withdraw
 Rhonda McCracken, RN 76318 – Requested to withdraw

Ratified Alternative Program for Chemical Dependency

Pamela Davis Alexander, RN 134017 – Failed to obtain required assessment and attend treatment
 Erin Harris Allison, RN 278723 – Requested to withdraw
 Virginia Shelton Cochran, RN 122632 – Failed, positive drug screen
 Marcia Elizabeth Cannon, RN 252596 – Failed to comply with drug screening and treatment requirements
 Korin Marie Hardy, RN 220143 – Requested to withdraw
 Wanda Williams Joyner, RN 208792 – Requested to withdraw
 Michael Childress Love, LPN 81491 – Failed, positive drug screen
 Brooke Leverette Thomas, RN 217787 – Submitted adulterated urine specimen
 Audra Lynn Webb, RN 225542 – Requested to withdraw
 Leland Jacobs Worley, RN 266360 – Requested to withdraw

Ratified Intervention Program:

Scott Christopher Bonner, LPN 79316 – Failed to register for drug screening as required
 Thomas Howell, Jr., RN 148454 – Failed, positive drug screen

Successful Completion

Alternative Program for Chemical Dependency	No. Successfully Completed
August 29, 2017 – September 30, 2017	7
October 2017	5
November 2017	0

Intervention Program	No. Successfully Completed
August 29, 2017 – September 30, 2017	0
October 2017	1
November 2017	2

Non-Disciplinary Consent Orders - Other	No. Successfully Completed
August 29, 2017 – September 30, 2017	0
October 2017	0
November 2017	0

Ratified Probation with Drug Screening Completed

Jennifer Brooke Floyd, RN 291156 – 10/30/2017

Ratified Chemical Dependency Discipline Program (CDDP) Completed

John Francis Curry, RN 215140 – 8/30/2017
 Lisa Bowen Mason, RN 116673 – 8/30/2017
 Rebecca Swan, RN 156100 – 11/13/2017
 Charlene Divens Wallace, RN 134517 – 8/30/2017

Ratified Reprimand with Conditions Completed

Dora Nall Cockerham, LPN 14647 – 9/19/2017

Chasity McMillian, Virginia LPN 0002074211 – 10/5/2017

Jeffrey Ryan Motes, RN 278029 – 11/20/2017

Ashley Brook Norris, RN 273541 – 10/31/2017

Tracy Jo Peck, RN 140979 – 11/8/2017

Elva Denise Silvers, RN 215131 – 10/10/2017

Shannon Smith, LPN 71540 – 10/5/2017

Ratified Actions of Non-Disciplinary Consent Orders:

Administrative Action	Number of Actions
Abandonment	
Exceed Scope	2
Fail to Assess	1
Failure to Maintain Accurate Record	7
Falsification of Medical Records	2
Harass, Abuse or Intimidate Client	
Inappropriate Delegation	1
Neglect	7
Sleep on Duty	2
Withhold Crucial Healthcare Information	6

Ratified Actions of Non-Disciplinary Consent Orders – Alternative Program (AP)

Administrative Action	Number of Actions
Diversion of Drugs	3
Diversion of Drugs, Overlapping Prescriptions	1
Impaired on Duty	1
Impaired on Duty, Positive Drug Screen	3
Multiple DWI Convictions	1

Ratified Actions of Non-Disciplinary Consent Orders – Intervention Program (IP)

Administrative Action	Number of Actions
Attempted to adulterate specimen, Positive Drug Screen	1
Positive Drug Screen	6



Attachment E

CALENDAR YEAR 2018

Note: items highlighted in blue are complete.

Objective	Action Taken	Status/ Completion Date
1. Discuss process for policy review	Schedule education session	
2. Provide training on Ethics law and SEI policies	Schedule education session	
3. Review process for determining compensation of CEO	Schedule education session	

COMMITTEE RECOMMENDATION: That the Board approved the proposed Board Assessment Action Plan for 2018 as presented.

NCBON Strategic Plan

FRAMEWORK

Fiscal Years 2018 – 2021

Direction

Vision

Exemplary nursing care for all.

Board

Strategic Initiative

A goal, a statement of direction, purpose or intent. A broad statement of what the organization expects to achieve at some point in the future

Strategic Objective

A specific focus; defining what will achieve the strategic initiative

Staff

Target

Describe how to achieve the strategic objective

Measurement

The number or types of changes in outcomes generated after a target has been completed.

Foundation

Core Values

Professionalism, Accountability, Commitment, Equity

Mission

Protect the public by regulating the practice of nursing.

ATTACHMENT F
NCBON Strategic Plan

Fiscal Years 2018 – 2021

Direction

Vision

Exemplary nursing care for all.

Strategic Initiative

Strategic Objectives

1. Enhance public protection through the Board's proactive leadership

A. Ensure equitable, efficient, and effective regulatory processes.

B. Achieve legislative change that advances the mission and vision.

C. Ensure adequate resources to fund programs, services and operations through maintaining a strong financial position.

D. Increase the visibility and impact of the organization.

Foundation

Core Values

Professionalism, Accountability, Commitment, Equity

Mission

Protect the public by regulating the practice of Nursing.

ATTACHMENT F
NCBON Strategic Plan

Fiscal Years 2018 – 2021

Direction

Vision

Exemplary nursing care for all.

Strategic Initiative

Strategic Objectives

2. Advance best practices in nursing regulation

A. Conduct and utilize research that expands evidence for regulation.

B. Facilitate innovations in education and practice.

C. Ensure current and evolving roles and responsibilities of nursing align with regulation.

D. Identify and address issues regarding the opioid crisis.

Foundation

Core Values

Professionalism, Accountability, Commitment, Equity

Mission

Protect the public by regulating the practice of Nursing.

ATTACHMENT F
NCBON Strategic Plan

Fiscal Years 2018 – 2021

Direction

Vision

Exemplary nursing care for all.

Strategic Initiative

Strategic Objectives

3. Foster mobility and facilitate access to safe nursing care

A. Implement the enhanced nurse licensure compact.

B. Facilitate the safe and effective practice of nurses using telehealth and emerging technologies.

C. Conduct and disseminate a supply and demand workforce study.

Foundation

Core Values

Professionalism, Accountability, Commitment, Equity

Mission

Protect the public by regulating the practice of nursing.

2018 – 2021 Strategic Plan



Mission: Protect the public by regulating the practice of nursing.
Vision: Exemplary nursing care for all.
Values: Professionalism, Accountability, Commitment, Equity

Strategic Initiative #1 Enhance public protection through the Board’s proactive leadership

Objective	Target	Target Date	Measured By	Progress
<p>A. Ensuring equitable, efficient, and effective regulatory processes.</p>	<ol style="list-style-type: none"> 1. Continue review and revision of protocols with continued priority focus on standard of care. (AGF; AM) 2. Review and revise regulatory policies with Ad hoc Discipline Committee. (AGF; AM) 3. Complete periodic rule review and revise rules as needed for re-adoption. (AE; AGF) 4. Perform positively compared to benchmarks for cycle time in licensure and investigations. (TG; AGF; AM) 	<ol style="list-style-type: none"> 1. Ongoing 2. Ongoing 3. 2018 4. Ongoing 	<ol style="list-style-type: none"> 1. Completion of review and implementation of designated protocol(s). 2. Review/revision and implementation of designated policies. 3. *Completion of periodic rule review (sunset review) process within timeline assigned by Rules Review Commission; *Completion of rule re-adoption December 2018. 4. *Positive performance compared to benchmarks for licensure: cycle time for licensure by exam, licensure by 	

2018 – 2021 Strategic Plan



Mission: Protect the public by regulating the practice of nursing.
Vision: Exemplary nursing care for all.
Values: Professionalism, Accountability, Commitment, Equity

Strategic Initiative #1 Enhance public protection through the Board’s proactive leadership

Objective	Target	Target Date	Measured By	Progress
			endorsement, licensure renewal; *Positive performance compared to benchmarks for investigation cycle time, case closure time.	
B. Achieve legislative change that advances the mission/vision.	1. Build relationships with stakeholders to support modernization of the Nursing Practice Act. (JG; DK)	1. 2018	1. *Identification of key stakeholders by Quarter 4, 2018; *List and assign primary contact person to contacts to encourage support of the NPA modernization; *Monitor ongoing contact needs with identified stakeholders/ sponsors.	
C. Ensuring adequate resources to fund programs, services and operations through maintaining a strong financial position.	1. Perform positively compared to benchmarks for net position, net revenue, liquidity, investment performance, liability/assets, revenue/expenses, and operating revenue. (GB; JG)	1. FY 2017-2018	1. Positive performance compared to benchmarks for Net Position, Net Revenue, Liquidity, Investment Performance,	

2018 – 2021 Strategic Plan



Mission: Protect the public by regulating the practice of nursing.
Vision: Exemplary nursing care for all.
Values: Professionalism, Accountability, Commitment, Equity

Strategic Initiative #1 Enhance public protection through the Board’s proactive leadership

Objective	Target	Target Date	Measured By	Progress
D. Increase the visibility and impact of the organization.	1. Proactively engage identified stakeholders to ensure NCBON is represented in discussions/issues related to nursing regulation. (All Administrative Council)	1. Ongoing	Liability/Assets and Revenue/Expenses. 1. *By August 2018: evaluate current visibility and impact in relevant arenas, and determine additional opportunities. *By December 2018 design strategies for increasing visibility and impact; *2019 Implement strategies; *2020 Evaluate effectiveness of new strategies and determine next steps.	

2018 – 2021 Strategic Plan



Mission: Protect the public by regulating the practice of nursing.

Vision: Exemplary nursing care for all.

Values: Professionalism, Accountability, Commitment, Equity

Strategic Initiative #2 Advance best practices in nursing regulation

Objective	Target	Target Date	Measured By	Progress
A. Conduct and utilize research that expands evidence for regulation.	<ol style="list-style-type: none"> Active participation in NCSBN IRE Program. (LB; JR) Disseminate research outcomes. (LB, JR) 	<ol style="list-style-type: none"> 2019-2021 Ongoing 	<ol style="list-style-type: none"> Enroll one new participant in IRE cohort in 2019, 2020, and 2021. At least one publication, poster, or conference presentation each year 2018 - 2021. 	
B. Facilitate innovations in education and practice.	<ol style="list-style-type: none"> Enhance data collection for academic progression pathways with SHEPS. ((TP, JR, CT) 	<ol style="list-style-type: none"> Ongoing 	<ol style="list-style-type: none"> *2018 Identify data collection requirements; *2019 implement data collection; *2020 evaluate effectiveness and any needed revisions. 	
C. Ensure current and evolving roles and responsibilities of nursing align with regulation.	<ol style="list-style-type: none"> Determine need for Review/analysis of LPN scope. (LB, JR, CT) 	<ol style="list-style-type: none"> 2019 	<ol style="list-style-type: none"> Comparison summary of LPN scope of practice from current sources presented at Education/Practice 	

2018 – 2021 Strategic Plan



Mission: Protect the public by regulating the practice of nursing.
Vision: Exemplary nursing care for all.
Values: Professionalism, Accountability, Commitment, Equity

Strategic Initiative #2 Advance best practices in nursing regulation

Objective	Target	Target Date	Measured By	Progress
	2. Examine roles of direct care givers, including NAs. (LB; JR)	2. 8/2018-12/2019	Committee meeting with next steps to be determined at that time. 2. *August 2018: Identify collaborative partners to examine this issue; *September – December 2018 determine data gathering strategies; *2019 gather, analyze data with report to Board at January 2020 meeting.	
D. Identify and address issues regarding the opioid crisis.	1. Educate nurses regarding the issues surrounding substance use disorder among nurses. (JR, KP, CT, BL, AM, KP)	1. Ongoing	1. *January – June 2018 identify issues requiring additional education for nurses; *June- December 2018 create	

2018 – 2021 Strategic Plan



Mission: Protect the public by regulating the practice of nursing.
Vision: Exemplary nursing care for all.
Values: Professionalism, Accountability, Commitment, Equity

Strategic Initiative #2 Advance best practices in nursing regulation

Objective	Target	Target Date	Measured By	Progress
	2. Collaborate with stakeholders to implement prevention strategies to improve safe prescribing practices. (JR, CT, BL)	2. Ongoing	educational materials and determine best methods for providing access/use of materials; *2019 implement educational materials; *2020-2021 evaluate effectiveness and revise as necessary. 2. *Continue collaboration efforts with stakeholders (e.g. SBI, DEA, FDA, NCCSRS, DHSR, other health professions and boards; *Serve on committees dealing with the opioid crisis (Opioid Prescription Drug Abuse Advisory	

2018 – 2021 Strategic Plan



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Strategic Initiative #2
 Advance best practices in nursing regulation

Objective	Target	Target Date	Measured By	Progress
			Committee, Prevention and Public Awareness Workgroup, etc.); *Create/disseminate educational materials/advisory statements to NCBON constituents.	

2018 – 2021 Strategic Plan



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Strategic Initiative #3 Foster mobility and facilitate access to safe nursing care

Objective	Target	Target Date	Measured By	Progress
A. Implement the enhanced Nurse Licensure Compact (eNLC).	1. Align policies and procedures with eNLC. (TG, AGF, MM)	1. 2018	1. Operational policies and procedures aligned with eNLC URL procedures January 2018; Implementation of eNLC Quarter 1, 2018.	
	2. Transition from ENS to eNotify. (TP)	2. Quarter 1, 2018	2. Transition to eNotify complete by end of Quarter 2, 2018.	
	3. Assess readiness for APRN compact. (DK; JG; BL)	3. Ongoing	3. *Identify support and opposition; *Identify possible ways to mitigate opposition; *Identify possible legislative sponsor(s).	
B. Facilitate the safe and effective practice of nurses using telehealth and emerging technologies.	1. Establish baseline data related to nursing regulation issues in the use of telehealth and emerging technologies. (JR, TP, TG, AF, DK)	1. Ongoing	1. 2018 Education/Practice Committee Review and/or revision of	

2018 – 2021 Strategic Plan



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Strategic Initiative #3

Foster mobility and facilitate access to safe nursing care

Objective	Target	Target Date	Measured By	Progress
			telehealth position statement; *July-December 2019 research committee create and analyze survey of nurses regarding issues related to use of technology; *Report results to Board at January 2020 meeting.	
C. Conduct and disseminate a supply and demand workforce study.	1. Design and implement a supply/demand workforce study for RNs and LPNs. (BL, LB)	1. Design and conduct study 2018; *Analyze and disseminate data 2019.	1. *Completion of study design by September 2018; *Completion of data gathering by December 2018; *Completion of data analysis by August 2019; *Dissemination of study results by December 2019.	

2018 – 2021 Strategic Plan



Mission: Protect the public by regulating the practice of nursing.
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Strategic Initiative #3 Foster mobility and facilitate access to safe nursing care

Objective	Target	Target Date	Measured By	Progress
	2. Collect a minimum data set (MDS) established by NCSBN, SHEPs, and National Forum of State Workforce Centers on licensure and renewal applications. (TP, TG, RB)	2. Initial revision 2018 and then ongoing review and revision as necessary.	2. Implementation of revised applications for initial and renewal license application by December 2018.	



**Agenda M16 and M17
2017 End of Year NCLEX Pass Rates
January 2018
Meeting**

APPROVAL OF STATUS CHANGES RELATED TO ANNUAL NCLEX RESULTS

ISSUE: Non-compliance with National Council Licensure Examination (NCLEX) pass rates as required by APPROVAL OF NURSING PROGRAMS – STUDENTS 21 NCAC 36 .0320 (e). *The nursing program shall maintain a three-year average at or above 95 percent of the national pass rate for licensure level pass rate on first writing of the licensure examination for calendar years ending December 31.*

BACKGROUND:

For 2015-2017, the three-year average Registered Nurse (RN) national pass rate is 86%; 95% standard for NC is 82%.

For 2014-2016, the three-year average Practical Nurse (PN) national pass rate is 83%; 95% standard for NC is 79%.

The three-year average pass rate is calculated by dividing the total number of 1st time test passers (during the three-year period January 1, 2015 through December 31, 2017) by the total number of 1st time test takers.

Nursing education programs not in compliance with APPROVAL OF NURSING PROGRAMS – STUDENTS 21 NCAC 36 .0320 (e) as quoted above are subject to the provisions of EP-17 NCLEX Pass Rate Below Standard.

Provision 1: When the NCLEX pass rate is below the **three-year average** Standard for the **first year** an improvement plan for the next calendar year is required.

The following programs will be required to submit an improvement plan report to the NCBON by March 1, 2018.

First Year Below Standard: Improvement Plan

Program Current Year Pass Rate	2015	2016	2017	Three-Year Average 2015-2017
Lees-McRae College (BSN)	**	**	60	60
South University (BSN)	**	**	50	50
Beaufort CC (AD)	83	80	70	78
Central Carolina CC (AD)	91	78	44	71
Durham Tech CC (AD)	86	76	76	79
Edgecombe CC (AD)	83	83	78	81
Piedmont CC (AD)	93	81	65	80
Wilkes CC (AD)	90	90	63	81
Asheville-Buncombe Tech CC (LPN)	84	94	50	76



Agenda M16 and M17
2017 End of Year NCLEX Pass Rates
January 2018
Meeting

Below three-year average

**New Program

CC=Community College

Provision 2: When the NCLEX pass rate is below the **three-year average** Standard for **two consecutive years**, a Non-Disciplinary Consent Order (NDCO) will be issued. The NDCO will require submission of an improvement plan to demonstrate compliance. Board Staff will also provide consultation to the program.

The following programs will be issued a NDCO and be notified of the deadline for the improvement report submission to the NCBON.

Second Year Below Standard: NDCO and Improvement Plan

Program Current Year Pass Rate	2015	2016	2017	Three-Year Average 2015-2017
Methodist University (BSN)	90	55	75	73
Halifax CC (LPN)	92	60	80	77

Provision 3: When the NCLEX pass rate is below the **three-year average** Standard for **three consecutive years**, the program status is changed to a Public Warning and the program's improvement plan will be posted with the **Public Warning**.

Third Year Below Standard: Warning Status - Onsite Survey, Improvement Plan, and Public Warning Status

Program Current Year Pass Rate	2015	2016	2017	Three-Year Average 2015-2017
NC Central University (BSN)	68	6/8	82	73
Roanoke-Chowan CC (AD)	92	64	78	78

Fourth Year Below Standard: Warning Status - Onsite Survey, Improvement Plan, and Public Warning Status

Program Current Year Pass Rate	2015	2016	2017	Three-Year Average 2015-2017
South College (AD)	69	64	80	71

Below three-year average



**Agenda M16 and M17
2017 End of Year NCLEX Pass Rates
January 2018
Meeting**

NURSING EDUCATION PROGRAM IMPROVEMENTS

Provision 4: When a nursing education program on an NDCO or Warning Status demonstrates significant progress in meeting the NCLEX Standard, it is returned to or maintained on Full Approval status. Significant progress is demonstrated by achievement of one of the following:

- a. A 3-year average pass rate that is at or within 5% of the Standard (that is, at 90% of National 3-year pass rate average), or
- b. The current year pass rate meets or exceeds 95% of the current year national pass rate

Resolution of Non-Disciplinary Consent Order for 2017 End of Year NCLEX Pass Rates

Program Current Year Pass Rate	2015	2016	2017	Three-Year Average 2015-2017
Barton College (BSN)	73	72	95	80

Warning Status to Full Approval for 2017 End of Year NCLEX Pass Rates

Program Current Year Pass Rate	2015	2016	2017	Three-Year Average
No Programs				

Provision 5: Any nursing education program that demonstrates a pattern of non-compliance; that demonstrates inconsistent or fluctuating NCLEX pass rates; or that fails to comply with a specific Board requirement, in meeting the Standard average pass rates is placed on the Board Meeting agenda for discussion/action.

Pattern of Non-Compliance

Program Pass Rate	2013	2014	2015	2016	2017	Three-Year Average 2015-2017
Nash CC (AD)	76	84	67	86	88	80
Program started in 2013	Improvement Plan	NDCO	First Year Warning	Removed from Warning		

Below three-year average

Meets or above three-year average, or single year pass rate, if currently on a NDCO or Warning

ATTACHMENT G & H

**North Carolina Board of Nursing
NCLEX PN 1st Time Testing Pass Rate
3-YEAR AVERAGE 2015-2017**

Practical Nurse (PN)	Type	2015	2016	2017	3-Year Average 2015-2017
National Pass Rate Current Year	PN-All	82	84	84	83
NC Pass Rate (95% of National Standard)	PN-All	78	80	80	79
Program-Diploma (Dip-PN)					
<i>NC Diploma-PN Pass Rate Averages</i>	PN-All	93	91	94	93
Practical Nurse (PN)	Type	2015	2016	2017	3-Year Average 2015-2017
Asheville-Buncombe Tech CC	Dip-PN	84	94	50	76
Beaufort County CC	Dip-PN	89	90	95	91
Bladen CC	Dip-PN	93	79	96	89
Brunswick CC	Dip-PN	100	100	100	100
Cape Fear CC	Dip-PN	100	100	100	100
Carteret CC	Dip-PN	100	89	100	96
Central Carolina CC	Dip-PN	89	90	90	90
Cleveland CC	Dip-PN	100	93	100	98
Coastal Carolina CC	Dip-PN	94	89	88	90
College of the Albemarle	Dip-PN	100	96	100	99
Craven CC	Dip-PN	89	100	100	96
Davidson County CC	Dip-PN	94	88	92	91
Durham Tech CC	Dip-PN	94	100	97	97
ECPI-Charlotte	Dip-PN	96	82	98	92
ECPI-Greensboro	Dip-PN	82	84	78	81
ECPI-Raleigh	Dip-PN	74	76	95	82
Edgecombe CC	Dip-PN	100	100	100	100
Fayetteville Tech CC	Dip-PN	86	95	95	92
Forsyth Tech CC	Dip-PN	97	95	92	95
Gaston College	Dip-PN	100	98	100	95
Guilford Tech CC	Dip-PN	76	82	86	81
Halifax CC	Dip-PN	92	60	80	77
Isothermal CC	Dip-PN	81	80	100	87
James Sprunt CC	Dip-PN	100	100	100	100
Lenoir CC	Dip-PN	100	100	100	100
McDowell Tech CC	Dip-PN	97	97	91	95
Montgomery CC	Dip-PN	95	80	98	91
Nash CC	Dip-PN	89	71	82	81
Richmond CC	Dip-PN	69	90	100	86
Robeson CC	Dip-PN	88	100	100	96
Rockingham CC	Dip-PN	88	88	92	89
Rowan-Cabarrus CC	Dip-PN	100	100	100	100
Sampson CC	Dip-PN	100	100	100	100

ATTACHMENT G & H

North Carolina Board of Nursing
NCLEX PN 1st Time Testing Pass Rate
3-YEAR AVERAGE 2015-2017

Practical Nurse (PN)	Type	2015	2016	2017	3-Year Average 2015-2017
South Piedmont CC	Dip-PN	100	92	93	95
Southeastern CC	Dip-PN	88	100	100	96
Surry CC	Dip-PN	100	100	100	100
Vance-Granville CC	Dip-PN	100	70	88	86
Wayne CC	Dip-PN	100	93	100	98
Wilson CC	Dip-PN	100	100	100	100

CC = Community College

** = New Program

Below three-year average

Meets or above three-year average, or single year pass rate, if currently on a NDCO or Warning

ATTACHMENT G & H

**North Carolina Board of Nursing
NCLEX RN 1st Time Testing Pass Rate
3-YEAR AVERAGE 2015-2017**

Registered Nurse (RN)	Type	2015	2016	2017	3-Year Average 2015-2017
National Pass Rate Current Year	RN-All	85	85	87	86
NC Pass Rate (95% of National Standard)	RN-All	81	81	83	82
Program-Bachelor of Science in Nursing (BSN)					
Registered Nurse (RN)	Type	2015	2016	2017	3-Year Average 2015-2017
<i>National BSN Pass Rate</i>		87	88	90	88
<i>NC BSN Pass Rate Averages</i>		89	90	89	89
Appalachian University	BSN	95	97	91	94
Barton College	BSN	73	72	95	80
Duke University	BSN	99	95	98	97
East Carolina University	BSN	98	96	96	97
Fayetteville State University	BSN	94	95	93	94
Gardner-Webb University	BSN	100	100	100	100
Lees-McRae College	BSN	**	**	60	60
Lenoir-Rhyne College	BSN	90	93	97	93
Methodist University	BSN	90	55	75	73
NC A&T State University	BSN	77	92	90	86
NC Central University	BSN	68	68	82	73
Pfeiffer University	BSN	88	94	88	90
Queens University of Charlotte	BSN	95	96	96	96
South University	BSN	**	**	50	50
UNC-Chapel Hill	BSN	95	96	97	96
UNC-Charlotte	BSN	92	92	92	92
UNC-Greensboro	BSN	89	88	97	91
UNC-Pembroke	BSN	93	87	81	87
UNC-Wilmington	BSN	98	95	97	97
Western Carolina University	BSN	100	99	96	98
Wingate University	BSN	55	100	100	85
Winston-Salem State University	BSN	90	94	89	91
National Diploma Pass Rate					
<i>National Diploma Pass Rate</i>		86	85	90	87
<i>NC Diploma Pass Rate Averages</i>		98	100	97	98
Watts School of Nursing	DIP-RN	98	100	97	98
National Associate Degree Pass Rate					
<i>National Associate Degree Pass Rate</i>		82	82	84	83
<i>NC Associate Degree Pass Rate Averages</i>		90	90	90	90
Alamance CC	AD	86	88	79	84

ATTACHMENT G & H

**North Carolina Board of Nursing
NCLEX RN 1st Time Testing Pass Rate
3-YEAR AVERAGE 2015-2017**

Registered Nurse (RN)	Type	2015	2016	2017	3-Year Average 2015-2017
Asheville-Buncombe Tech CC	AD	96	93	96	95
Beaufort County CC	AD	83	80	70	78
Bladen CC	AD	92	90	84	89
Blue Ridge CC	AD	89	89	90	89
Brunswick CC	AD	100	100	95	98
Cabarrus College of Health Science	AD	92	86	94	91
Caldwell CC	AD	94	86	100	93
Cape Fear CC	AD	100	100	97	98
Carolinas College of Health Science	AD	95	93	98	95
Carteret CC	AD	90	92	94	92
Catawba Valley CC	AD	92	96	97	95
Central Carolina CC	AD	91	78	44	71
Central Piedmont CC	AD	97	96	94	96
Coastal Carolina CC	AD	90	89	96	92
College of the Albemarle	AD	100	97	100	99
Craven CC	AD	94	93	92	93
Davidson County CC	AD	89	96	98	94
Durham Tech CC	AD	86	76	76	79
ECPI University-Charlotte	AD	90	100	89	93
Edgecombe CC	AD	83	83	78	81
Fayetteville Tech CC	AD	95	91	100	95
Foothills Nursing Consortium	AD	86	98	89	91
Forsyth Tech CC	AD	96	95	95	95
Gardner-Webb University	AD	98	79	93	90
Gaston College	AD	93	100	98	97
Guilford Tech CC	AD	87	94	85	89
Halifax CC	AD	68	86	100	85
James Sprunt CC	AD	63	93	94	83
Johnston CC	AD	100	100	98	99
Lenoir CC	AD	96	100	95	97
Mayland CC	AD	93	82	94	90
Mitchell CC	AD	97	97	100	98
Nash CC	AD	67	86	88	80
Piedmont CC	AD	93	81	65	80
Pitt CC	AD	90	90	92	91
Randolph CC	AD	92	79	93	98
Region A Nsg Consortium	AD	78	83	88	83
Richmond CC	AD	86	90	100	92
Roanoke-Chowan CC	AD	92	64	78	78
Robeson CC	AD	100	100	100	100
Rockingham CC	AD	100	100	88	96

ATTACHMENT G & H

**North Carolina Board of Nursing
NCLEX RN 1st Time Testing Pass Rate
3-YEAR AVERAGE 2015-2017**

Registered Nurse (RN)	Type	2015	2016	2017	3-Year Average 2015-2017
Rowan-Cabarrus CC	AD	84	96	88	89
Sampson CC	AD	92	94	83	90
Sandhills CC	AD	92	100	92	95
South College	AD	69	64	80	71
South Piedmont CC	AD	95	96	89	93
Southeastern CC	AD	100	75	83	86
Southwestern CC	AD	88	96	82	89
Stanly CC	AD	94	90	88	91
Surry CC	AD	98	96	95	96
Vance-Granville CC	AD	85	90	88	88
Wake Tech CC	AD	98	97	98	98
Wayne CC	AD	93	100	93	95
Western Piedmont CC	AD	96	93	100	96
Wilkes CC	AD	90	90	63	81
Wilson CC	AD	84	89	97	90

CC = Community College

** = New Program

Below three-year average

Meets or above three-year average, or single year pass rate, if currently on a NDCO or Warning



**Agenda M21
Summary of Activities
Ad Hoc Committee for Discipline Review
January 2018
Meeting**

**AD HOC COMMITTEE FOR DISCIPLINE REVIEW SUMMARY OF ACTIVITIES
NOVEMBER 29, 2017**

1. Protocol Revision

The Committee received a verbal report and reviewed three (3) disciplinary protocols. Protocol revisions are ongoing and the next to be presented to the Ad Hoc Committee for Discipline Review by Board staff are Documentation and Neglect.

2. Next Meeting

Scheduled for Wednesday, February 21, 2018



**Agenda M22
Breach of Confidentiality Protocol
January 2018
Meeting**

ISSUE: Breach of Confidentiality Protocol

BACKGROUND: The Breach of Confidentiality protocol (Attachment A) was amended to be consistent with the new rules adopted. The increase in social media use was considered when amending the protocol including new language to address social media and text messaging. Aggravating factors were removed as staff will consider the aggravator and mitigator list for each case.

RECOMMENDATION: That the Board accept the amended Breach of Confidentiality Protocol

Sanctioning Guidelines: BREACH OF CONFIDENTIALITY

Criteria	Sanctions to Consider
<ul style="list-style-type: none"> Insufficient evidence to substantiate allegation Unintentional breach/access to information 	No Further Action
<ul style="list-style-type: none"> Findings inconclusive: however, suggests cause for concern Unauthorized access No evidence that information was shared Isolated incident 	Letter of Concern
Not Eligible	Not Eligible for PREP
<ul style="list-style-type: none"> Obtaining or accessing healthcare information from a client record or other source, except as required by professional duties or authorized by law Inappropriately discussed information with no personal gain or intent to embarrass 1st complaint of accessing information without a need to know 	Non-Disciplinary Consent Order *Courses- see below
<ul style="list-style-type: none"> Pattern of accessing confidential client information not needed to carryout job related responsibilities Revealed confidential client information to others 	Published Consent Order <ul style="list-style-type: none"> Reprimand with Course(s)- no aggravating factors
<ul style="list-style-type: none"> Revealed confidential client information to others for personal gain/recognition Revealed confidential information with malicious intent to cause embarrassment of client 	<ul style="list-style-type: none"> 3 month suspension- with aggravating factors <ul style="list-style-type: none"> May consider PL at reinstatement following suspension No NAI, NAII or Med Aide
Course Suggestions: Ethical Legal Decision Making Professional Boundaries, HIPAA and Social Media Category	

Criteria not all inclusive and limited to above, there may be actions not specifically listed above. Mitigating and aggravating factors are taken into consideration which may lead to a lesser or greater sanction.



Agenda M23
Misconduct and Boundary Violations Protocol
January 2018
Meeting

ISSUE: Misconduct and Boundary Violations Protocol

BACKGROUND: The Misconduct and Boundary Violations protocol (Attachment A) was amended to be consistent with the new rules adopted. Staff will consider the aggravator and mitigator list for each case. Misconduct and Boundary violations will be considered separately from all other boundary violations when considering sanction.

RECOMMENDATION: That the Board accept the amended Misconduct and Boundary Violations Protocol

Sanctioning Guidelines: **MISCONDUCT/BOUNDARY VIOLATIONS**

Criteria		Sanctions to Consider
	<ul style="list-style-type: none"> Unable to substantiate allegation 	No Further Action
	<ul style="list-style-type: none"> Isolated boundary crossing with client/family/caregiver (non-sexual) 	Letter of Concern
		Not Eligible for PREP
	<ul style="list-style-type: none"> More than one incident of sending messages or photos to client/family/caregiver unrelated to professional duties (non-sexual) More than one incident of contact unrelated to professional duties with client/family/caregiver (non-sexual) 	Non-Disciplinary Consent Order with Course(s)
	<ul style="list-style-type: none"> Physical contact outside the scope for treatment or examination Solicitation/receipt of money, gifts, or favors Financial exploitation of client/family/caregiver Engaged in conduct for the purpose of sexual gratification with or in the presence of client/family/caregiver Solicitation of client/family/caregiver for the purposes of a sexual relationship during the course of the professional relationship Sending messages or photos of a sexual nature to client/family/caregiver Sexual contact involving force/intimidation 	<p style="text-align: center;">Published Consent Order</p> <ul style="list-style-type: none"> Reprimand with Course(s)- Reprimand appropriate for acts of solicitation only where significant mitigators apply 2 year suspension <ul style="list-style-type: none"> No NAI, NAII or Med Aide Required sexual offender specific examination by forensic psychologist prior to appearance before LRP 5 year suspension for use of force/intimidation
Course Suggestions:	Ethical Legal Decision Making Professional Boundaries, HIPAA and Social Media Category Ethics and Professional Category	

Criteria not all inclusive and limited to above, there may be actions not specifically listed above. Mitigating and aggravating factors are taken into consideration which may lead to a lesser or greater sanction.



**Agenda M24
Practice Without a License Protocol
January 2018
Meeting**

ISSUE: Practice Without a License Protocol

BACKGROUND: The Practice Without a License protocol (Attachment A) was amended. As the Board does not have the authority in its law to grant absolution, the protocol was amended to allow for a non-disciplinary sanction. Progressive disciplinary action will be considered for repeated violations.

RECOMMENDATION: That the Board accept the amended Practice Without a License Protocol



Practicing Without a Valid License

- A. Licenses that have lapsed two months past the birth month renewal will be reinstated with all associated costs. When the license is reinstated, a Notice of Reinstatement signed by the Executive Director will be issued by the Licensure department to the licensee who documents employment on the renewal application during the time the license was lapsed.
- B. Licenses that have lapsed greater than 2 months but less than 6 months past the birth month renewal will be reinstated with all associated costs. When the license is reinstated, a Notice of Concern signed by the Executive Director will be issued by the Licensure department to the licensee who documents employment on the renewal application during the time the license was lapsed.
- C. Licenses that have lapsed equal to or greater than 6 months but less than one renewal cycle past the birth month will be reinstated with all associated costs. When the license is reinstated, the Licensure department will refer all licensees who documents employment on the Supplemental form to the Investigation and Monitoring (I&M) Department. A Consent Agreement with an offer of a Reprimand and the National Council State Boards of Nursing on-line course on the North Carolina Practice Act to be completed within 45 days will be issued by the I&M Department. If licensee is non-complaint, the license will be suspended until completed.
- D. Licenses that have lapsed greater than one (1) renewal cycle (two years), the license will not be reinstated by the Licensure department if the licensee has documented employment on the Supplemental form. The licensee will be referred to Discipline Proceedings department for an offer to appear before the Licensure Review Panel prior to reinstatement.
- E. Licenses that have lapsed with a second consecutive violation of practicing without a valid license and who have documented employment on the application regardless of the number of days practicing without a license, will be referred to the Discipline Proceedings department for issuance of a Letter of Charges with offer of Reprimand and the Ethical/Legal course to be completed in 3 months. If licensee is non-complaint, license will be suspended until course is completed.
- F. For a non-consecutive violation of practicing without a valid license, refer to A above of this section for processing.
- G. In all above instances, if the license has been surrendered/suspended/ lapsed/inactive for six (6) months or more, the licensee must submit to a criminal background check (CBC) prior to reinstatement of the license. The CBC must be obtained within three (3) months of the reinstatement. (Contact the Board for materials needed to obtain the CBC.)



Sanctioning Guidelines for Practicing Without a License

Length of Time Licensee Practiced Since License Expired	Recommended Sanction
up to 6 months	<ul style="list-style-type: none"> • Letter of Concern will be issued by Licensure Department • Licensure Department will reinstate the multistate state license, if Licensee had a multistate license, with payment of reinstatement fee. • Licensee will be required to submit CBC within 30 days if retention of multistate license is desired by Licensee in accordance with the Enhanced Nurse Licensure Compact. If Licensee does not provide the CBC within 30 days, the license will be changed to a single state license.
6 months to 12 months	<ul style="list-style-type: none"> • Licensure Department will reinstate the single state license with payment of reinstatement fee and refer matter to Legal Department. • Non-Disciplinary Consent Order w/ course requirement will be issued to Licensee. • Licensee will be required to submit to CBC.
12 months to 24 months	<ul style="list-style-type: none"> • Licensure Department will reinstate the single state license with payment of reinstatement fee and refer matter to Legal Department. • Reprimand w/ course requirement will be issued to Licensee. • Licensee will be required to submit to CBC.
greater than 24 months	<ul style="list-style-type: none"> • Licensure Department will not reinstate the license but refer to Legal Department. • Reprimand with course requirement and reinstatement of the single state license will be issued. • Licensee will be required to submit to CBC.

*Progressive disciplinary action to be considered for repeat violations.