NORTH CAROLINA BOARD OF NURSING
REGULAR BOARD MEETING
May 25, 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 May 25, 2018. Meeting convened at 9:00 a.m.

Presiding
Pat Campbell, Public Member

Members Present
Frank DeMarco, RN
Martha Ann Harrell, Public Member
Pam Edwards, RN
Mary Jones, LPN
Lisa Hallman, RN
Lori Lewis, LPN
Jodi Capps, LPN
Glenda Parker, RN
Yolanda VanRiel, RN
Peggy Walters, RN
Becky Ezell, RN
Ashley Stinson, Public Member
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.
Walters/Passed.

Consent Agenda
The following items were accepted/approved by the adoption of the Consent Agenda:
- Minutes of January 19, 2018 (Board Meeting)
- Minutes of February 22, 2018 (Administrative Hearings)
- Minutes of March 22, 2019 (Called Board Meeting)
- Board Governance Committee
  (a) Summary of Activities
(b) Board Assessment Action Plan 2018 (FYI)
(c) BOES Update (FYI)
(d) Results of Semi-Annual Debriefing (FYI)

- Chief Executive Officer
  (a) NC Department of health and Human Services Prescription Drug Abuse Advisory Committee

- Education and Practice Committee
  (a) Education Program Activity (Attachment A)
  (b) Ratification of Determination of Program Approval Status:
      - Campbell University, Buies Creek – BSN
      - Chamberlain University, Charlotte – BSN
      - Mars Hill University, Mars Hill – BSN
      - Mayland Community College, Spruce Pine – LPN
      - Northeastern University, Charlotte - BSN
  (c) Ratification to Full Approval Status:
      - Barton College, Wilson – BSN
      - Brunswick Community College, Bolivia – ADN
      - Cabarrus College of Health Sciences, Charlotte – ADN
      - Carolinas College of Health Sciences, Charlotte – ADN
      - ECPI University, Greensboro – LPN
      - Lenoir Rhyne University, Hickory – BSN
      - Pfeiffer University, Misenheimer – BSN
      - Richmond Community College, Hamlet – ADN and LPN
      - Sandhills Community College, Pinehurst – ADN
  Ratification to Approve the Following Expansions in Enrollment
  - Johnston Community College, Smithfield – ADN, increase enrollment by 20 for a total of 125 Students beginning Fall 2018
  - Rowan-Cabarrus Community College, Kannapolis – ADN, increase enrollment by 40 for a total of 180 students beginning Spring 2019
  Ratification of NDCOs or other legal proceedings against programs for any reason:
  - Halifax Community College, Weldon – LPN
  - Methodist University, Fayetteville – BSN
  - Edgecombe Community College – LPN
  Ratification of Approval of NAII Courses:
  - Guilford Technical Community College, Jamestown
  - Pitt Community College, Greenville
  - Rowan-Cabarrus Community College, Kannapolis
  Notification of Alternate Scheduling Options:
  - Robeson Community College, Lumberton – LPN to RN Option
  - Rowan-Cabarrus Community College, Salisbury – LPN to ADN Option
  Notification of Program Closing:
  - Carolinas College of Health Sciences, Charlotte – NAII – March 2018
  - Cone Health, Greensboro, NAII March 2018
  - South College, Asheville – ADN – March 2018
FYI Accreditation Decisions by CNEA (Initial or Continuing Approval – Next Visit):
- Forsyth Technical Community College, Winston-Salem – ADN and LPN – Pre-Accreditation Status Granted – February 2020
- Pitt Community College, Winterville – ADN – Pre-Accreditation Status Granted – February 2020
- Stanley Community College, Albemarle – ADN – Pre-Accreditation Status Granted – June 2020

FYI Accreditation Decisions by CCNE (Initial or Continuing Approval – Next Visit):
- Lees-McRae College, Banner Elk – BSN – Continuing Approval – Spring 2027

(d) NCLEX Quarterly Pass Rates
(e) Research Committee Updates

- 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
- Meetings/Conferences/Liaison Activities

Meeting Agenda

The Meeting Agenda be adopted as presented.

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

Open Comment

No requests to address the Board.

Finance Committee

- Received and reviewed Summary of Activities to include 3rd Quarter Financials and review of investments as presented by Jessica Christie and Wes Thomas with Wells Fargo Advisors.

MOTION: That the Board approve the proposed budget for the fiscal year July 1, 2018 through June 30, 2019.
Committee Recommendation/Passed

- Received and reviewed proposed revisions to Policy F5 Investments
MOTION: That the Board approve a revision to the Fiscal Policy F5 to provide more diversity in portfolio allocation.
Chief Executive Officer

Received updates as follows:
- Provided an update on the International Nurse Regulator Collaboration (INRC) and the World Health Organization Initiatives.
- Provided an update on the Movement of Nursing Now. This initiative started in February and is currently in 60 countries.
- Provided updates on Candidates in the 2018 Election of Nurse Members.
- Provided updates on the Board Education Session scheduled for July
- Provided updates on House Bill 974 – Financial Reporting for OLB
- Staff provided update on the Performance Measures Scorecard
- Staff provided update on Facebook activity

Strategic Plan 2018

Received and reviewed the 2018 Strategic Plan (Attachment E)

Education & Practice

- Received and reviewed Summary of Activities from the Education and Practice Committee to include review of Position Statements/Standards of Telehealth/Telenursing from national organizations and agencies, APRN Position Statements/Standards of Telehealth/Telenursing, Detailed Literature Review and NCSBN Survey and individual state comparison charts.
- Received and reviewed proposed revisions to Position Statement concerning Cosmetic/Aesthetic Dermatological Procedures Issue Statement
  
  **MOTION:** That the Board approve the revised Position Statement Cosmetic/Aesthetic Dermatological Procedures. (Attachment F)
  Committee Recommendation/Passed

- Received and reviewed proposed new Position Statement on Unlicensed New Graduate Nurse Role Issue Statement. (Attachment G)
  
  **MOTION:** That the Board approve the new Unlicensed New Graduate Nurse-Role Position Statement
  Committee Recommendation/Passed

NCAC Chapter 36 - Rules

Received and reviewed Update/Proposed Rule Amendments to NCAC Chapter 36. (Attachment H)

  **MOTION:** That the Board approve the proposed rules re-adoption packet and direct staff to proceed with the rulemaking process.
  VanRiel/Passed

Ad Hoc Committee for Discipline Review

Received and reviewed Summary of Activities from the Ad Hoc Committee for Discipline Review.
- Received and reviewed the Drug Protocol.
  
  **MOTION:** That the Board accept the amended Drug Protocol
  Committee Recommendation/Passed

- Received and reviewed the Neglect Protocol.
  
  **MOTION:** That the Board accept the amended Neglect Protocol.
  Committee Recommendation/Passed

- Received and reviewed the Documentation Protocol
  
  **MOTION:** That the Board accept the amended Documentation Protocol.
  Committee Recommendation/Passed
Missellaneous

Conducted election for Nominating Committee (Attachment I)

**MOTION:** That the following Board Members be elected to the Nominating Committee: Becky Ezell, RN; Jodi Capps, LPN; Ashley Stinson, Public Member.

Jones/Passed

Legal Matters

No Legal Matters for discussion.

Adjournment

**MOTION:** 12:10 pm Meeting be adjourned.

Jones/Passed.

Minutes respectfully submitted by:

May 25, 2018  
Date Submitted  
Chandra Graves
Executive Assistant

October 19, 2018  
Date Approved  
Julia L. George, RN, MSN, FRE
Chief Executive Officer
ATTACHMENT A

Education Program Activity

Ratification of Determination of Program Approval Status:
- Campbell University, Buies Creek – BSN
- Chamberlain University, Charlotte – BSN
- Mars Hill University, Mars Hill – BSN
- Mayland Community College, Spruce Pine – LPN
- Northeastern University, Charlotte – BSN

Ratification of Full Approval Status:
- Barton College, Wilson – BSN
- Brunswick Community College, Bolivia – ADN
- Cabarrus College of Health Sciences, Concord - ADN
- Carolinas College of Health Sciences, Charlotte – ADN
- ECPI University, Greensboro – PN
- Lenoir Rhyne University, Hickory – BSN
- Pfeiffer University, Misenheimer – BSN
- Richmond Community College, Hamlet – ADN and LPN
- Sandhills Community College, Pinehurst – ADN

Ratification to Approve the Following Enrollment Expansions:
- Johnston Community College, Smithfield – ADN, increase enrollment by 20 for a total of 125 students beginning Fall 2018
- Rowan Cabarrus Community College, Kannapolis – ADN, increase enrollment by 40 for a total of 180 students beginning Spring 2019

Ratification of NDCO’s or other legal proceedings against programs for any reason
- Halifax Community College, Weldon – LPN
- Methodist University, Fayetteville – BSN
- Edgecombe Community College – LPN (Attachment A)

Ratification of NA II Programs Newly Approved
- Pitt Community College, Greenville
- Rowan-Cabarrus Community College, Kannapolis

Notification of Alternate Scheduling Options:
- Robeson Community College, Lumberton – LPN to RN Option
- Rowan-Cabarrus Community College, Salisbury – LPN to ADN Option

Notification of Program Closing:
- Carolinas College of Health Sciences, Charlotte – NA II – March 2018
- Cone Health, Greensboro – NA II March 2018
- South College, Asheville – ADN – March 2018

FYI Accreditation Decisions by CNEA (Initial or Continuing Approval – Next Visit):
- Forsyth Technical Community College, Winston-Salem – ADN and LPN – Pre-Accreditation Status Granted – February 2020
- Pitt Community College, Winterville – ADN – Pre-Accreditation Status Granted – February 2020
- Stanly Community College, Albemarle – ADN – Pre-Accreditation Status Granted – June 2020

FYI Accreditation Decisions by CCNE (Initial or Continuing Approval – Next Visit):
- Lees-McRae College, Banner Elk – BSN – Continuing Approval – Spring 2027

Ratification of Full Approval Status, NA II Program:
- Guilford Technical Community College, Jamestown
- Pitt Community College, Greenville
- Rowan-Cabarrus Community College, Kannapolis
ATTACHMENT A

ISSUE: The Edgecombe Community College Practical Nursing (LPN) Program was found to be in non-compliance with NCBON Education Program regulations. Specifically, the program was found to be in violation of program curriculum nursing education rules [(21 NCAC 36 .0321(a)(j)(k)].

BACKGROUND: On June 5, 2017, the NCBON received a public complaint alleging that the Edgecombe Community College (ECC) LPN program inserted a pilot continuing education course as a program completion alternative. This alternative option was outside of NCBON approved curriculum for the ECC LPN program.

NCBON investigation revealed two (2) senior level LPN students did not successfully meet the NUR 103 course requirements to graduate from the program in August 2016. ECC LPN nursing program representatives requested permission from the North Carolina Community College System office (NCCCS) to utilize a modified version of NUR 3320, an existing continuing education course, as a pilot remedial course for the two (2) students. This pilot remedial course was not previously required by or explicated in the NUR 103 course syllabus and the LPN program did not notify or request approval from the NCBON for the change in curriculum prior to submission to NCCCS.

The LPN program permitted the two (2) students to participate in the pilot remedial course resulting in a grade change for their NUR 103 course. The completion of said course by the two students revised the defined level of performance required to pass NUR 103 in the curriculum. The LPN program did not request or obtain approval from the NCBON permitting the use of a continuing education course to remediate or supplement learning activities in the nursing program curriculum nor for the revision of the defined level of performance required to pass NUR 103 in the curriculum for nursing students enrolled in the program.

A consent order was executed on April 20, 2018 and is not published on the NCBON website; however, it is a public record under N.C. Gen. Stat. §132, the Public Records Act, and was placed in the Program’s file with the NCBON. Continued compliance with nursing education program rules shall be monitored through program submission of quarterly reports on any student appeal with accompany evidence of resolution of those appeals; student dismissals or failure; and class data, including the current number of first year nursing students anticipated to graduate for each quarter. Information will be submitted for a period of 24 months beginning May 2018.

RECOMMENDATION: The Board ratify the consent order executed between Edgecombe Community College LPN program and the NCBON.
ATTACHMENT B

The Licensure Review Panel met and submits the following report regarding actions taken:

Reviewed 13 candidates for reinstatement

- Chanita Felton, LPN 60893
  May Petition LRP for reinstatement after successful completion of Refresher Program
- Patricia Schane, RN 213237
  Reinstated
- Kristi Hutchens, RN 146391
  Reinstated with CDDP, Refresher Course Required
- Joyce Lewis, RN 146391
  Reinstated with CDDP, Refresher Course Required
- Ann Joyner, RN 184433
  Reinstated with probationary conditions for twenty-four (24) months
  Drug screening required
- Chancellar Davis, LPN 81236
  Reinstated with probationary conditions for twelve (12) months
- Cynthia Cook, RN 234210
  Reinstated
- Dana Powell, LPN 79510
  Reinstated with probationary conditions for twelve (12) months
- Janna Martin, RN 94672
  Shall enter CDDP
  May petition for reinstatement after successful completion of Refresher Course
- Meredith Andrews, RN 227236
  Reinstatement Denied
  May petition for reinstatement after sixty (60) months
- Tiffany Guardado, RN 246314
  Reinstated with CDDP
- Cynthia Clough, LPN 83017
  Reinstated with probationary conditions for twelve (12) months
- Kevin Keller, RN 219262
  Reinstated with probationary conditions for twelve (12) months

Reviewed three (3) candidates for extension of time to satisfy probationary conditions

- Kelly Hill, RN 162527
  Extend probationary conditions for twelve (12) months
  Final Extension – Suspend if unsuccessful
- Joy Kunath, RN 111028
  Extend probationary conditions for twelve (12) months
  May successfully terminate probation on or after 12/31/2018 with (5) years of clean drug screens
- Rebekah Murray, RN 232466
  Extend probationary condition for twelve (12) months

Reviewed two (2) candidates for Licensure by Endorsement

- Jacquelynn Fleming, RN Applicant
  Shall enter AP
  May petition for reinstatement after successful completion of Refresher Course
- Amanda Cronis, RN Applicant
Shall enter CDDP
Complete two (2) months of clean drug screens prior to licensure

Reviewed three (3) candidates for initial licensure

- Elizabeth Grant, RN Applicant
  Issue single state RN license
- Sheree McWhorter, LPN Applicant
  Issue LPN license with probationary condition for twelve (12) months
- Koffi Aboagye, RN Applicant
  Issue RN license with probationary conditions for eighteen (18) months
ATTACHMENT C

The following licensees accepted sanctions offered pursuant to their appearance before the Settlement Committee:

<table>
<thead>
<tr>
<th>Licensee</th>
<th>Sanctions</th>
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<tbody>
<tr>
<td>Robert Jones</td>
<td>Participation in Alternative Program with modified conditions</td>
</tr>
<tr>
<td>RN 211952</td>
<td></td>
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<tr>
<td>CRNA 2752</td>
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<tr>
<td>Jacqueline Campbell</td>
<td>Suspension for three (3) months follow by probationary conditions for twelve (12) months</td>
</tr>
<tr>
<td>LPN 781461</td>
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<tr>
<td>Jean Wilson</td>
<td>Reprimand on NP Approval to Practice</td>
</tr>
<tr>
<td>Maryland RN</td>
<td>Shall submit written synopsis with personal reflection after review of Board’s position statement on telehealth practice, NCSBN;s position on telehealth nursing practice, and two (2) accompanying videos</td>
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<tr>
<td>RN 127999</td>
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<tr>
<td>NP 5005315</td>
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<tr>
<td>Leah Overton</td>
<td>Suspension for three (3) months followed by probationary conditions for twelve (12) months</td>
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<tr>
<td>LPN 61473</td>
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<tr>
<td>Gerri Morrison</td>
<td>Suspension of RN license and NP approval to practice for a minimum of twelve (12) months</td>
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<tr>
<td>RN 116931</td>
<td>Shall successfully complete CPEP course prior to petitioning for reinstatement</td>
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<tr>
<td>NP 5002924</td>
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<tr>
<td>Dana Sain</td>
<td>Suspension of RN license and NP approval to practice for a minimum of twelve (12) months</td>
</tr>
<tr>
<td>RN 201654</td>
<td>Shall successfully complete CPEP course prior to petitioning for reinstatement</td>
</tr>
<tr>
<td>NP 500263</td>
<td></td>
</tr>
</tbody>
</table>
Took the following actions regarding Non-Hearing activities by the adoption of the Consent Agenda

**Ratified Probation:**
Michael Mizner, LPN 86546 – Sleep on Duty

**Ratified Probation with Drug Screen:**
Cheryl Thomas, RN 171919 – Impaired on Duty, Drug Use Interfering with Practice
Cindi Hardison, RN 171919 – Documentation Errors, Falsification of Medical Records, Exceed Scope
Shannon Craft, RN 257966 – Neglect, Positive Drug Screen

**Ratified Reprimand:**
Kimberly Griggs, RN 232914 – Deceive/Defraud/Harm Public, Misappropriate Employer Property
Christine Griffin, RN 167558 – Falsification of Application
Marria McGowan, LPN 83676 – Falsification of Records, Deceive/Defraud/Harm Public

**Ratified Reprimand with Conditions:**
Sandra Matthews, RN 203570 – Breach of Patient Confidentiality
Sara Raxter, RN 255736 – Neglect, Failure to Maintain Accurate Records, Failure to Implement Nursing Interventions
Martha Calloway, RN 143828 – Withhold Crucial Healthcare Information, Failure to Implement Nursing Interventions
Gregory Harduk, Virginia RN 0001256068 – Documentation Errors, Failure to Maintain Accurate Records
Lynn Deaton, RN 224832 – Falsification of Records
Danielle Copeland, RN 241805 – Falsification of Records, Deceive/Defraud/Harm Public
Annette Pearce, RN 232475 – Neglect, Falsification of Documentation, Endanger Public Health, Deceive/Defraud/Harm Public
Jessica Herring, RN 231609 – Practice with Expired License
Caitlyn Moseley, RN 263740 – Falsification of Records, Deceive/Defraud/Harm Public
Stephanie Burford, RN 140182 – Breach of Patient Confidentiality
Donna Hayes, LPN 69898 – Breach of Patient Confidentiality
Tamara Brito, RN 94074 – Inappropriate Physical Interaction with Patient

**Ratified Suspension:**
Tiffany Benson, RN 284317 – Violation of Conditions Imposed by Board
Sabrina Hammonds, RN 226277 – Violation of Conditions Imposed by Board
Carrie Martin, RN 290530 – Action in Another Jurisdiction
Charles Benton, IL, RN 183474 – Request to Withdraw from Alternative Program
Roy Black, LPN 29434 – Violation of Conditions Imposed by Board
Susan Lane, RN 147583 – Diversion of Drugs, Deceive/Defraud/Harm Public, Drug Abuse, Illegally Obtain Drugs for Personal Use, Misappropriate Patient Property
Maureen Hambrick, LPN 82925 – Diversion of Drugs, Deceive/Defraud/Harm Public, Impaired on Duty, Falsification of Records
Jason Grady, RN 181220 – Violation of Conditions Imposed by Board
Christina Rappleye, LPN 73199 – Violation of Conditions Imposed by Board
Morgan Moore, RN 257773 – Violation of Conditions Imposed by Board
Nathan Penny, RN 219536 – Violation of Conditions Imposed by Board
Pamela Lasseter, LPN 54843 – Violation of Conditions Imposed by Board
Carla Cook, RN 76319 – Impaired on Duty, Positive Drug Screen, Drug Abuse, Endanger Public Health
Donna Kulp, LPN 64924 – Violation of Conditions Imposed by Board
Amber Shellman, RN 259020 – Violation of Conditions Imposed by Board
Karina Randall, RN 290314 – Request to Withdraw from CDDP
Amy Althiser, RN 291578 – Violation of Conditions Imposed by Board
Elva Silvers, RN 215131 – Endanger Public Health, Deceive/Defraud/Harm Public, Failure to Maintain Accurate Records
Tuyet Franks, RN 227728 – Violation of Conditions Imposed by Board
Andre Bruyaka, RN 205773 – Violation of Conditions Imposed by Board
Robin Donovan, RN 151850 – Violation of Conditions Imposed by Board
Slade Saunders, RN 281371 – Violation of Conditions Imposed by Board
Elizabeth Bollinger, RN 218828 – Medication Errors, Falsification of Documentation, Withhold Crucial Healthcare Information
Arthea Arrington-Boyd, RN 256332 – Violation of Conditions Imposed by Board
Billie Jo Hodges, RN 183554 – Violation of Conditions Imposed by Board
Saundra Meares, RN 82311 – Violation of Conditions Imposed by Board
Francis Walters, RN 190781 – Violation of Conditions Imposed by Board
Jerry Helms, RN 154287 – Violation of Conditions Imposed by Board
Kristy Phillips, RN 194612 – Violation of Conditions Imposed by Board
Sonya Fleming, RN 204743 – Violation of Conditions Imposed by Board
Takeysha James, RN 209555 – Action in Another Jurisdiction
Tammi Wynn, RN 225050, NP 5005477 – Violation of Conditions Imposed by Board
Elena Morgan, RN 207114 – Violation of Conditions Imposed by Board
Sherry Burris, RN 141778 – Violation of Conditions Imposed by Board
Joylynn Jones, LPN 77442 – Violation of Conditions Imposed by Board
Lester Brigman, Jr., RN 135222, NP 5003979 – Impaired on Duty, Endanger Public Health, Failure to Maintain Accurate Records, Drug Abuse, Breach of Patient Confidentiality
Sherita Mosley, RN 204632 – Violation of Conditions Imposed by Board
Penny Holt, RN 206518 – Falsification of Records, Deceive/Defraud/Harm Public, Neglect
Angela Edwards, RN 100692 – Request to Withdraw from Probationary Consent Order
Derek Beckett, RN 277970 – Violation of Conditions Imposed by Board
Christina Dehn, RN 237759 – Violation of Conditions Imposed by Board
Lauren Almassy, RN 292771 – Violation of Conditions Imposed by Board
Kimberley Roberts, RN 145426 – Request to Withdraw from Probationary Consent Order with Drug Screening Conditions
Tiffany Perry, RN 246404 – Request to Withdraw from AP
Jewell Irick, RN 245302 – Violation of Conditions Imposed by Board
William Fusilier, RN 215822, CRNA 4061 – Violation of Conditions Imposed by Board

**Ratified Suspension with Conditions:**
Gail Robertson, RN 164255 – Withhold Crucial Healthcare Information, Failure to File Report Required by Law, Endanger Public Health, Unfit to Practice, Deceive/Defraud/Harm Public, Neglect, Failure to Supervise

**Ratified Chemical Dependency Discipline Program (CDDP):**
Stephanie Mayer, RN 245927 – Prior AP Participant
Bonnie Shackelford, RN 159155 – Prior CDDP Participant
Holly Sizemore, RN 247386 – Diversion of Drugs, Positive Drug Screen, Impaired on Duty, Deceive/Defraud/Harm Public
Robert Fleming, RN 224846 – Prior AP Participant
Andrea Beigay, RN 183315 – Prescription Forgery, Deceive/Defraud/Harm Public, Illegally Obtain/Possess Drugs for Personal Use
Patricia Lohr, RN 72687 – Alcohol Abuse
Crystal Williamson, RN 271518 – Positive Drug Screen, Diversion of Drugs, Exceed Scope, Deceive/Defraud/Harm Public, Failure to Maintain Accurate Records, Failure to Document Disposal of Controlled Substances
Successful Completion

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<thead>
<tr>
<th>Alternative Program for Chemical Dependency</th>
<th>No. Successfully Completed</th>
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<td>December 2017</td>
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<td>January 2018</td>
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<td>March 2018</td>
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<th>Intervention Program</th>
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<td>February 2018</td>
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<tr>
<td>March 2018</td>
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<tr>
<th>Non-Disciplinary Consent Orders</th>
<th>No. Successfully Completed</th>
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<tbody>
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<td>December 2017</td>
<td>5</td>
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<tr>
<td>January 2018</td>
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<td>February 2018</td>
<td>3</td>
</tr>
<tr>
<td>March 2018</td>
<td>5</td>
</tr>
</tbody>
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Ratified Probation Completed:
Melanie Slate, RN 171153 – 12/5/2017
Tanya Dixon Little, RN 197198 – 12/8/2017
Timothy Allen Ramsey, Jr., RN 259225 – 3/5/2018
LeRae Parker Lewis, RN 147710 – 3/7/2018
Victoria Liane Freeman, LPN 74388 – 3/14/2018

Ratified Probation with Drug Screen Completed:
Jessica Lynn Nagem, RN 280900 – 12/6/2017
Nadean Elena Burgos, RN 272651 – 1/16/2018
Phoebe Oldham Eberhardt, RN 111736 – 1/26/2018
Kara R. Pugh, RN 263516 – 2/6/2018
Jackie Elaine Roberson, RN 232490 – 3/5/2018
Da’Nilda Hernandez, LPN 85502 – 3/7/2018
Amanda Frances Moore, LPN 77237 – 3/27/2018

Ratified Chemical Dependency Discipline Program (CDDP) Completed:
Melissa Koen Goley, RN 190040 – 12/7/2017
Tara Anne Cypher, RN 180002 – 1/3/2018
Jason Griffin, RN 148537 – 1/9/2018
Ellen Marie Dibble, RN 194542 – 1/16/2018
Kevin Michael Cameron, RN 173986 – 2/2/2018
Amanda Hudson Rogers, RN 216546 – 2/14/2018
Keisha McCrary, RN 121747 – 2/15/2018
Georgina Ann Adkins, RN 210630 – 2/20/2018
Angela Ray Bunton, RN 133581 – 3/5/2018

Ratified Reprimand with Conditions Completed:
Teresa Brooks McClure, RN 264024 – 12/1/2017
Linda Smith Lennon, RN 216365 – 12/4/2017
Ratified Actions of Non-Disciplinary Consent Orders:

<table>
<thead>
<tr>
<th>Administrative Actions</th>
<th>Number of Actions</th>
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<tbody>
<tr>
<td>Abandonment</td>
<td>1</td>
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<tr>
<td>Accept and Perform Professional Responsibility - Not Competent to Perform</td>
<td>1</td>
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<tr>
<td>Breach of patient Confidentiality</td>
<td>3</td>
</tr>
<tr>
<td>Deceive/Defraud/Harm Public</td>
<td>2</td>
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<tr>
<td>Exceed Scope</td>
<td>4</td>
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<tr>
<td>Failure to Assess/Evaluate</td>
<td>2</td>
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<tr>
<td>Failure to Document in Timely Manner</td>
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</tr>
<tr>
<td>Failure to Maintain Accurate Record</td>
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<td>Failure to Maintain Minimum Standards</td>
<td>2</td>
</tr>
<tr>
<td>Failure to Verify Proper Administration/Disposal of Controlled Substances</td>
<td>2</td>
</tr>
<tr>
<td>Falsification of Records</td>
<td>4</td>
</tr>
<tr>
<td>Inappropriate Interaction with Patient</td>
<td>2</td>
</tr>
<tr>
<td>Neglect</td>
<td>4</td>
</tr>
<tr>
<td>Practice with Expired License</td>
<td>5</td>
</tr>
<tr>
<td>Sleep on duty</td>
<td>2</td>
</tr>
<tr>
<td>Withhold Crucial Healthcare Information</td>
<td>1</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Administrative Action</th>
<th>Number of Actions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alcohol Abuse</td>
<td>2</td>
</tr>
<tr>
<td>Conduct Endangering Public Health</td>
<td>4</td>
</tr>
<tr>
<td>Deceive/Defraud/Harm Public</td>
<td>9</td>
</tr>
<tr>
<td>Diversion of Controlled Substances</td>
<td>1</td>
</tr>
<tr>
<td>DWI Conviction</td>
<td>5</td>
</tr>
<tr>
<td>Drug Abuse</td>
<td>5</td>
</tr>
<tr>
<td>Drug Use Interfering with Fitness to Practice</td>
<td>3</td>
</tr>
<tr>
<td>Falsification of Application</td>
<td>1</td>
</tr>
<tr>
<td>Falsification of Records</td>
<td>6</td>
</tr>
<tr>
<td>Illegally Obtain Drugs for Personal Use</td>
<td>10</td>
</tr>
<tr>
<td>Impaired on Duty</td>
<td>7</td>
</tr>
<tr>
<td>Misappropriate Client/Employer Property</td>
<td>7</td>
</tr>
<tr>
<td>Positive Drug Screen</td>
<td>8</td>
</tr>
<tr>
<td>Withhold Information to Obtain Licensure</td>
<td>1</td>
</tr>
</tbody>
</table>
Ratified Actions of Non-Disciplinary Consent Orders – Intervention Program (IP)

<table>
<thead>
<tr>
<th>Administrative Action</th>
<th>Number of Actions</th>
</tr>
</thead>
<tbody>
<tr>
<td>DWI Conviction</td>
<td>1</td>
</tr>
<tr>
<td>Illegally Obtain Drugs for Personal Use</td>
<td>3</td>
</tr>
<tr>
<td>Positive Drug Screen</td>
<td>4</td>
</tr>
</tbody>
</table>
Mission: Protect the public by regulating the practice of nursing.
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## Strategic Initiative #1
Enhance public protection through the Board’s proactive leadership

<table>
<thead>
<tr>
<th>Objective</th>
<th>Target</th>
<th>Target Date</th>
<th>Measured By</th>
<th>Progress</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. Ensuring equitable, efficient, and effective regulatory processes.</td>
<td>1. Continue review and revision of protocols with continued priority focus on standard of care. <em>(AGF; AM)</em></td>
<td>1. Ongoing</td>
<td>1. Completion of review and implementation of designated protocol(s)</td>
<td>Breach of Confidentiality and Boundary Violation Protocols were approved at the January Board Meeting. At the February Ad Hoc Discipline Meeting, Documentation, Drug and Neglect Protocols were recommended for approval to the May Board Meeting. Staff working now on Theft, Fraud and Exceeding Scope Protocols for the May Ad Hoc Discipline Meeting <em>(AF)</em></td>
</tr>
<tr>
<td></td>
<td>2. Review and revise regulatory policies with Ad hoc Discipline Committee. <em>(AGF; AM)</em></td>
<td>2. Ongoing</td>
<td>2. Review/revision and implementation of designated policies.</td>
<td>In September, the Ad Hoc Discipline Committee tasked staff with revisions to the Practice Without a License policy after discussions with Legal on discontinuing the practice of granting Absolutions. The November Ad Hoc Discipline Meeting recommended approval of the policy to the January Board Meeting. The policy was</td>
</tr>
</tbody>
</table>
### 2018 – 2021 Strategic Plan

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

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---

#### Strategic Initiative #1

**Enhance public protection through the Board’s proactive leadership**

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</tr>
</thead>
<tbody>
<tr>
<td>3. Complete periodic rule review and revise rules as needed for re-adoption. <em>(AE; AGF)</em></td>
<td>3. 2018</td>
<td>3. *Completion of periodic rule review (sunset review) process within timeline assigned by Rules Review Commission; <em>Completion of rule re-adoption December 2018.</em></td>
<td>Re-adoption packet reviewed with full Board on 3/21. Staff working with OAH attorneys on pre-review. Board to vote on re-adoption packet on 5/25 to begin the rulemaking process.</td>
<td></td>
</tr>
<tr>
<td>4. Perform positively compared to benchmarks for cycle time in licensure and investigations. <em>(TG; AGF; AM)</em></td>
<td>4. Ongoing</td>
<td>4. *Positive performance compared to benchmarks for licensure: cycle time for licensure by exam, licensure by endorsement, licensure renewal; *Positive performance compared to benchmarks for investigation cycle time, case closure time.</td>
<td>Investigation cycle time for the month of March was 89.9 days. 176 cases were closed for the date range 1/1/18 - 3/31/18. Average time to resolution: 88.6 Days Quickest Resolution: 3.36 hours Longest Resolution: 236 Days(AGF)</td>
<td></td>
</tr>
</tbody>
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## Strategic Initiative #1
Enhance public protection through the Board’s proactive leadership

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<tbody>
<tr>
<td>B. Achieve legislative change that advances the mission/vision.</td>
<td>1. Build relationships with stakeholders to support modernization of the Nursing Practice Act. <em>(JG; DK)</em></td>
<td>1. 2018</td>
<td>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.</td>
<td>Ongoing</td>
</tr>
<tr>
<td>C. Ensuring adequate resources to fund programs, services and operations through maintaining a strong financial position.</td>
<td>1. Perform positively compared to benchmarks for net position, net revenue, liquidity, investment performance, liability/assets, revenue/expenses, and operating revenue. <em>(GB; JG)</em></td>
<td>1. FY 2017-2018</td>
<td>1. Positive performance compared to benchmarks for Net Position, Net Revenue, Liquidity, Investment Performance, Liability/Assets and Revenue/Expenses.</td>
<td>As of 3rd quarter of FY2017-2018 net position increased by approximately $559,000. Budget for FY2018-2019 will be presented to Finance Committee on April 19, 2018. Long range forecast shows positive net results over the next 5 years.</td>
</tr>
<tr>
<td>D. Increase the visibility and impact of the organization.</td>
<td>1. Proactively engage identified stakeholders to ensure NCBON is represented in discussions/issues related to nursing regulation. <em>(All Administrative Council)</em></td>
<td>1. Ongoing</td>
<td>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;</td>
<td>JW presented at the first LPN Annual Conference sponsored by AHEC. BL presented at legislature. LB attended ECU Advisory Council Meeting. TP &amp; BG are attending &amp; TP is presenting at NCSBN’s May 2018 IT/OPS Conference.</td>
</tr>
</tbody>
</table>
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<tbody>
<tr>
<td>*2019 Implement strategies; *2020 Evaluate effectiveness of new strategies and determine next steps.</td>
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<td></td>
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</tr>
</tbody>
</table>
## Strategic Initiative #2
### Advance best practices in nursing regulation

<table>
<thead>
<tr>
<th>Objective</th>
<th>Target</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>2. Disseminate research outcomes. (LB, JR)</td>
<td>2. Ongoing</td>
<td>2. At least one publication, poster, or conference presentation each year 2018 - 2021.</td>
<td>Research Committee members currently collaborating on 2 manuscripts for submission for publication by September 2018.</td>
</tr>
<tr>
<td>B. Facilitate innovations in education and practice.</td>
<td>1. Enhance data collection for academic progression pathways with SHEPS. (TP, JR, CT)</td>
<td>1. Ongoing</td>
<td>1. *2018 Identify data collection requirements; *2019 implement data collection; *2020 evaluate effectiveness and any needed revisions.</td>
<td>Collaborating with SHEPS to determine data collection needs.</td>
</tr>
</tbody>
</table>
### Strategic Initiative #2
Advance best practices in nursing regulation

<table>
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<tbody>
<tr>
<td>C. Ensure current and evolving roles and responsibilities of nursing align with regulation.</td>
<td>1. Determine need for Review/analysis of LPN scope. (LB, JR, CT)</td>
<td>1. 2019</td>
<td>1. Comparison summary of LPN scope of practice from current sources presented at Education/Practice Committee meeting with next steps to be determined at that time.</td>
<td>2019 Initiative</td>
</tr>
<tr>
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<tr>
<td></td>
<td>2. Examine roles of direct care givers, including NAs. (LB; JR)</td>
<td>2. 8/2018-12/2019</td>
<td>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.</td>
<td>3rd Quarter 2018/2019 Initiative</td>
</tr>
</tbody>
</table>
## 2018 – 2021 Strategic Plan

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### Strategic Initiative #2

**Advance best practices in nursing regulation**

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<tbody>
<tr>
<td>D. Identify and address issues regarding the opioid crisis.</td>
<td>1. Educate nurses regarding the issues surrounding substance use disorder among nurses. (JR, KP, CT, BL, AM, KP)</td>
<td>1. Ongoing</td>
<td>1. *January – June 2018 identify issues requiring additional education for nurses; *June- December 2018 create educational materials and determine best methods for providing access/use of materials; *2019 implement educational materials; *2020-2021 evaluate effectiveness and revise as necessary.</td>
<td>Information posted on NCBON website. Article published in Bulletin by KP &amp; BL.</td>
</tr>
</tbody>
</table>
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Advance best practices in nursing regulation

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<tbody>
<tr>
<td>2. Collaborate with stakeholders to implement prevention strategies to improve safe prescribing practices. <em>(JR, CT, BL)</em></td>
<td>2. Ongoing</td>
<td>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 Committee, Prevention and Public Awareness Workgroup, etc.); <em>Create/disseminate educational materials/advisory statements to NCBON constituents.</em></td>
<td>BL serves on committees; OPDAAC meets regularly; Information posted on NCBON website</td>
<td></td>
</tr>
</tbody>
</table>
### Strategic Initiative #3
Foster mobility and facilitate access to safe nursing care

<table>
<thead>
<tr>
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<th>Progress</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. Implement the enhanced Nurse Licensure Compact (eNLC).</td>
<td>1. Align policies and procedures with eNLC. (TG, AGF, MM)</td>
<td>1. 2018</td>
<td>1. Operational policies and procedures aligned with eNLC URL procedures January 2018; Implementation of eNLC Quarter 1, 2018.</td>
<td>The eNLC Transition Team continues to review and develop procedures to align with the eNLC. Formal development of revisions to policies following Board approval of Periodic Rules Review.</td>
</tr>
<tr>
<td></td>
<td>2. Transition from ENS to eNotify. (TP)</td>
<td>2. Quarter 1, 2018</td>
<td>2. Transition to eNotify complete by end of Quarter 2, 2018.</td>
<td>APRN Nursys upload test data sent 5/4-11/18. Working with NCSBN to finalize transition action items and timeline. Completion could be delayed 1 more month due to new APRN data collection requirements (e.g., VA, SHEPS, NCSBN).</td>
</tr>
<tr>
<td></td>
<td>3. Assess readiness for APRN compact. (DK; JG; BL)</td>
<td>3. Ongoing</td>
<td>3. *Identify support and opposition; *Identify possible ways to mitigate opposition; *Identify possible legislative sponsor(s).</td>
<td>Ongoing</td>
</tr>
</tbody>
</table>
## Mission:
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### Strategic Initiative #3
Foster mobility and facilitate access to safe nursing care

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</thead>
<tbody>
<tr>
<td>B. Facilitate the safe and effective practice of nurses using telehealth and emerging technologies.</td>
<td>1. Establish baseline data related to nursing regulation issues in the use of telehealth and emerging technologies. (JR, TP, TG, AF, DK)</td>
<td>1. Ongoing</td>
<td>1. 2018 Education/Practice Committee Review and/or revision of 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.</td>
<td>Education/Practice Committee examining telehealth position statement. Revisions to be considered at next meeting August 1.</td>
</tr>
<tr>
<td>C. Conduct and disseminate a supply and demand workforce study.</td>
<td>1. Design and implement a supply/demand workforce study for RNs and LPNs. (BL, LB)</td>
<td>1. Design and conduct study 2018; *Analyze and disseminate data 2019.</td>
<td>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.</td>
<td>Collaborating with SHEPS to design workforce study.</td>
</tr>
</tbody>
</table>
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<tbody>
<tr>
<td>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)</td>
<td>2. Initial revision 2018 and then ongoing review and revision as necessary.</td>
<td>2. Implementation of revised applications for initial and renewal license application by December 2018.</td>
<td>Evaluating new MDS (File Layout 5.3) provided by NCSBN to identify RN/LPN/APRN application changes. Will collaborate with SHEPS to determine new MDS data collection needs.</td>
<td></td>
</tr>
</tbody>
</table>
ATTACHMENT F

ISSUE: Review and approval of the revised NCBON Position Statement Cosmetic/Aesthetic Dermatological Procedures.

BACKGROUND: Board staff receive inquiries from licensees, employers and attorneys seeking clarification on the role and responsibilities of licensed nurses performing cosmetic/aesthetic procedures as it relates to the independent establishment and ownership of a business by a registered nurse to provide cosmetic/aesthetic dermatological procedures; the licensed nurse’s ability to perform cosmetic/aesthetic dermatological procedures without the on-site presence of a medical provider; and the licensed nurse’s ability to perform cosmetic/aesthetic dermatological procedures without an evaluation and/or prescription/order from a medical provider.

Changes in the revised position statement (Attachment A) are designed to identify, clarify and assist RNs and LPNs in understanding their roles and responsibilities when performing cosmetic/aesthetic dermatological procedures and to provide information to RNs seeking to establish an independent professional business providing nursing services that may include cosmetic/aesthetic dermatological procedures.

RECOMMENDATION: The Board approve the revised Position Statement Cosmetic/Aesthetic Dermatological Procedures.
Unlicensed New Graduate Nurse - Role

POSITION STATEMENT for RN and LPN Practice

A Position Statement is not a regulation of the NC Board of Nursing and does not carry the force and effect of law and rules. A Position Statement is not an interpretation, clarification, or other delineation of the scope of practice of the Board. A Position Statement is adopted by the Board as a means of providing direction to licensees who seek to engage in safe nursing practice. Board Position Statements address issues of concern to the Board relevant to protection of the public and are reviewed regularly for relevance and accuracy to current practice, the Nursing Practice Act, and Board Administrative Code Rules.

Issue:
Nursing law and rules require that only persons that are currently licensed as a registered nurse or licensed practical nurse may practice, offer to practice, and portray themselves as a registered nurse or licensed practical nurse. New graduate nurses that are not licensed as a registered nurse or licensed practical nurse are considered unlicensed assistive personnel (UAP) and may not work, practice, function, or portray himself/herself in the capacity as a licensed nurse until he/she has successfully passed NCLEX and issued a North Carolina single state nursing license or multi-state enhanced Nurse Licensure Compact (eNLC) license.

Unlicensed New Graduate Nurse (UAP) Role:
Unlicensed new graduate nurses seeking and obtaining employment with health care agencies prior to obtaining a nursing license may do so in the capacity of UAP such as Nurse Aide I (NAI), Nurse Aide II (NAII), etc. If working as an NAI, the Division of Health Services Regulation (DHSR) requires the individual to be listed on the Nurse Aide I Registry. If working as an NAII, the individual is required to be listed on both the DHSR Nurse Aide I Registry and the Board of Nursing Nurse Aide II Registry.

Employers seeking to employ unlicensed new graduate nurses may do so for positions and responsibilities of UAP. The unlicensed new graduate nurse may begin employment orientation prior to the issuance of a nursing license. The employment orientation must be confined to nonclinical settings. Observation or work performed in the actual clinical area by the unlicensed new graduate nurse must be done as an unlicensed employee, not as a licensed nurse. Upon issuance of a license by the Board of Nursing and verification of licensure by the employer, the newly licensed nurse may work in the capacity of a licensed nurse.

References
Nursing Practice Act, G.S. 90-171.43
Nursing Practice Act, G.S. 90-171.43A
21 NCAC 36.0211 (f) - Licensure by Examination
21 NCAC 36.0224 – Component of Nursing Practice for the Registered Nurse
21 NCAC 36.0225 – Components of Nursing Practice for the Licensed Practice Nurse
21 NCAC 36.0221 – License Required
NCBON Position Statement - Title "Nurse" is Protected
ISSUE: Periodic Review Update/Proposed Rule Amendments to NCAC Chapter 36

BACKGROUND: On April 20, 2017, the Rules Review Commission (RRC) approved the Board of Nursing’s request to re-schedule its periodic review and expiration of existing rules from May 2018 to November 2017.

In accordance with G.S. 150B-21.3A(c) Periodic Review and expiration of existing rules, the Board of Nursing “shall conduct a review of the agency’s existing rules at least once every 10 years”. Step 1 of this process was to “conduct an analysis of each existing rule and make an initial determination as to whether the rule is (i) necessary with substantive public interest, (ii) necessary without substantive public interest, or (iii) unnecessary”.

Staff reviewed each Rule utilizing the following definitions:

**Necessary with Substantive Public Interest:**
- public cares
- comment past 2 years
- affects property interest of regulated public
- agency knows or suspects objection to Rule

**Necessary without Substantive Public interest:**
- what agency must do as directed by General Assembly
- no comment within past 2 years
- merely identifies info that is readily available to public such as address or phone number

**Unnecessary:**
- agency deems obsolete, redundant or otherwise not needed

On May 12, 2017, the Board approved the Periodic Review Report reflecting the assigned categories above. The report was posted for public comment on the Board’s website from May 31st through end of business on July 31st and comments were received from the public. On September 22, 2017, Board members received and reviewed all comments received and voted to approve the final Periodic Review Report directing staff to proceed with the re-adoption process.

On November 16, 2017, the Periodic Review Report was approved by the Rules Review Commission and forwarded to the Joint Legislative Administrative Procedures Oversight Committee (APO) for final review.

**UPDATE:** The APO met on January 9, 2018 and approved the Board’s Periodic Review Report. On January 25, 2018, the Rules Review Commission approved a deadline of December 31, 2018 for re-adoption of the Board’s Rules.

As part of the periodic review process, staff conducted an extensive review of the Administrative Code, Board policies and staff process/procedures and presented the initial draft of the proposed amendments at the March 22nd called Board meeting. Staff will present any further amendments
for Board consideration at the September Board meeting in accordance with the rulemaking process.

The chart below reflects the status of the Board's Rules:

<table>
<thead>
<tr>
<th>Repealed in Accordance with eNLC Implementation</th>
</tr>
</thead>
<tbody>
<tr>
<td>.0701 Definitions of Terms in the Compact</td>
</tr>
<tr>
<td>.0702 Issuance of a License by a Compact Party State</td>
</tr>
<tr>
<td>.0703 Limitations on Multistate Licensure Privilege</td>
</tr>
<tr>
<td>.0704 Information System</td>
</tr>
<tr>
<td>.0705 Party State Licensure Requirements</td>
</tr>
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</table>

<table>
<thead>
<tr>
<th>Classified Unnecessary</th>
</tr>
</thead>
<tbody>
<tr>
<td>Removed from Code</td>
</tr>
<tr>
<td>.0110 Open Meetings</td>
</tr>
<tr>
<td>.0209 Duplicate Certificate</td>
</tr>
<tr>
<td>.0216 Census of Nursing Personnel</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Classified Necessary Without Substantive Public Interest/No amendments proposed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Remains in Code as written</td>
</tr>
<tr>
<td>.0119 Suspension of Authority to Expend Funds</td>
</tr>
<tr>
<td>.0231 Exceptions to Health Care Practitioners Identification Requirements</td>
</tr>
<tr>
<td>.0501 Purpose and Definitions</td>
</tr>
</tbody>
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<tr>
<td>Re-adopt to Remain in Code</td>
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<tr>
<td>.0801 Definitions</td>
</tr>
<tr>
<td>.0802 Scope of Practice</td>
</tr>
<tr>
<td>.0803 Nurse Practitioner Registration</td>
</tr>
<tr>
<td>.0804 Process for Approval to Practice</td>
</tr>
<tr>
<td>.0805 Education and Certification Requirements for Registration as a Nurse Practitioner</td>
</tr>
<tr>
<td>.0806 Annual Renewal</td>
</tr>
<tr>
<td>.0807 Continuing Education (CE)</td>
</tr>
<tr>
<td>.0808 Inactive Status</td>
</tr>
<tr>
<td>.0809 Prescribing Authority</td>
</tr>
<tr>
<td>.0810 Quality Assurance Standards for a Collaborative Practice Agreement</td>
</tr>
<tr>
<td>.0811 Method of Identification</td>
</tr>
<tr>
<td>.0812 Disciplinary Action</td>
</tr>
<tr>
<td>.0813 Fees</td>
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<tr>
<td>.0814 Practicing During a Disaster</td>
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<thead>
<tr>
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</thead>
<tbody>
<tr>
<td>Re-adopt to Remain in Code (continued)</td>
</tr>
<tr>
<td>.0815 Reporting Criteria (effective May 1, 2018)</td>
</tr>
<tr>
<td>.0816 Definition of Consultation for Prescribing Targeted Controlled Substances (effective May 1, 2018)</td>
</tr>
</tbody>
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<tr>
<th>Classified Necessary With and Without Substantive Public Interest/Amendments proposed</th>
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<td>Re-adopt to Remain in Code</td>
</tr>
<tr>
<td>.0109 Selection and Qualifications of Nurse Members (with)</td>
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<td>.0112 Determination of Vacancy (with)</td>
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<td>.0113 Determination of Qualifications (with)</td>
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<td>.0120 Definitions (without)</td>
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<td>.0201 Regular Renewal (without)</td>
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<td>.0202 Inactive and Retired Status (with)</td>
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<td>.0203 Reinstatement of Lapsed License (with)</td>
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<td>.0207 Verification to Another State (without)</td>
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<td>.0208 Change of Name (without)</td>
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<td>.0211 Licensure by Examination (with)</td>
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<td>.0213 Reexamination (with)</td>
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<tr>
<td>.0217 Investigations; Disciplinary Hearings (without)</td>
</tr>
</tbody>
</table>
.0218 Licensure Without Examination (By Endorsement) (with)
.0219 Temporary License (with)
.0220 Refresher Course (with)
.0221 License Required (with)
.0223 Continuing Education Programs (with)
.0224 Components of Nursing Practice for the Registered Nurse (with)
.0225 Components of Nursing Practice for the Licensed Practical Nurse (with)
.0226 Nurse Anesthesia Practice (with)
.0228 Clinical Nurse Specialist Practice (with)
.0232 Continuing Competence (with)
.0233 Out of State Students (with)
.0302 Establishment of a Nursing Program – Initial Approval (with)
.0303 Existing Nursing Program (with)
.0309 Process for Program Closure (with)
.0317 Administration (with)
.0318 Faculty (with)
.0320 Students (with)
.0321 Curriculum (with)
.0322 Facilities (with)
.0323 Records and Reports (with)
.0401 Roles of Unlicensed Personnel (without)
.0402 Coordination with Division of Health Service Regulation (DHSR) (without)
.0403 Qualifications (with)
.0404 Listing and Renewal (with)
.0405 Approval of Nurse Aide Education Programs (with)
.0406 Medication Aide Training Requirements (with)
.0502 Name of Professional Corporation (without)
.0503 Prerequisites for Incorporation (without)
.0601 Name of Limited Liability Company (without)
.0602 Prerequisites for Organization (without)
.0603 Certificate of Registration (without)
.0604 General and Administrative Provisions (without)
.0605 Fees (without)

**RECOMMENDATION:** That the Board approve the proposed rules re-adoption packet shaded in grey above and direct staff to proceed with the rulemaking process.
ATTACHMENT I

ISSUE: Drug Protocol

BACKGROUND: The Drug Protocol was amended in an ongoing effort to review and revise regulatory protocols in line with the strategic plan. Voluntary Surrender of the license for a minimum of one (1) year was added as an option for resolution.

RECOMMENDATION: That the Board accept the amended Drug Protocol
ISSUE: Neglect Protocol

BACKGROUND: The Neglect Protocol was amended in an ongoing effort to review and revise regulatory protocols in line with the strategic plan.

RECOMMENDATION: That the Board accept the amended Neglect Protocol
ISSUE: Documentation Protocol

BACKGROUND: The Documentation Protocol was amended in an ongoing effort to review and revise regulatory protocols in line with the strategic plan.

RECOMMENDATION: That the Board accept the amended Documentation Protocol