



**Government of the District of Columbia
Department of Health**



**DISTRICT OF COLUMBIA BOARD OF NURSING
WEDNESDAY, APRIL 1, 2015**

“The mission of the Board of Nursing is to safeguard the public’s health and well-being by assuring safe quality care in the District of Columbia. This is achieved through the regulation of nursing practice and education programs; and by the licensure, registration and continuing education of nursing personnel.”

BOARD OF NURSING MEMBERS	MEMBERS PRESENT
Chair: Cathy Borris-Hale, RN	
Vice Chair: Sukhjit “Simmy” Randhawa, RN	
Toni Eason, RN	
Margaret Green, LPN	
Mary Ivey, Consumer	
Vera Mayer, Consumer	
Missy Moore, LPN	
Chioma Nwachukwu, RN	
Mamie Preston, RN	
Winslow Woodland, RN	
RN Member Vacant	

STAFF PRESENT	STAFF PRESENT
Executive Director	Deputy Director
Karen Scipio-Skinner	
Attorney	Investigator
Van Brathwaite	
Nurse Consultants	
Bonita Jenkins	Board of Nursing Support Staff
Felicia Stokes	Angela Braxton
Concheeta Wright	Diane Moorer

**BOARD OF NURSING MEETING
WEDNESDAY, APRIL 1, 2015
8:30 – 9:30**

8:45 CALL TO ORDER
Cathy Borris-Hale

Executive Session:

Executive Session (non-public) to Discuss Ongoing, Confidential Preliminary Investigations pursuant to D.C. Official Code § 2-575(b)(14), to deliberate on a decision in which the Ethics Board will exercise quasi-judicial functions pursuant to D.C. Official Code § 2-575(b)(13), and Personnel matters pursuant to D.C. Official Code § 2-575(b)(10).

8:50 DISCIPLINE REFERRAL

ISSUE: Follow up from Settlement Conference.

ISSUE: Recommendations from the Discipline Committee regarding upcoming hearings/settlement conferences. (Information will be provided at meeting)

9:05 Home Health Aide Regulation amendments

ISSUE: DC Health Care Finance asked that we amend the HHA regulations to clarify the role of the PCA.
Karen Scipio-Skinner, Bonita Jenkins, Van Brathwaite

PROPOSED HOME HEALTH AIDE REGULATION AMENDMENTS

Subsections 9300.1 is amended to read as follows:

9300.1 This chapter applies to applicants for, and holders of, a certification to practice as a home health aide (HHA) and personal care aide (PCA) in the District of Columbia.

Subsection 9304.1 is amended to read as follows:

9304.1 Except as otherwise provided in this chapter, a person applying for certification as a home health aide shall:

- (a) Be at least eighteen (18) years of age;
- (b) Either:

- (i) Be licensed as a registered nurse or practical nurse; or
- (ii) Submit evidence of having successfully completed an approved home health aide program and a Board approved certification examination;
- (c) Complete a CBC; and
- (d) Submit an application and application fee.

Subsection 9304.2 is repealed.

Subsection 9305.1 is amended to read as follows:

9305.1 To qualify for certification by examination, an applicant shall provide proof of one (1) of the following:

- (a) Successful completion of a home health aide program or bridge to home health aide program, within the past twenty-four (24) months, approved by the Board or by a nursing board in the United States with standards determined by the Board to be substantially equivalent to the standards in the District;
- (b) Completion of a practical nursing or registered nursing “Fundamentals of Nursing” course with a clinical component in the United States within the last thirty-six (36) months from the date of an application for certification; or
- (c) A Commission on Graduates of Foreign Nursing Schools certificate, received within the last thirty-six (36) months from the date of an application for certification, indicating education as a registered nurse (RN) or licensed practical nurse (LPN) outside the United States.

Subsection 9305.2 is repealed.

Subsection 9305.3 is amended to read as follows:

9305.3 If an applicant has not taken or passed the home health aide certification exam for more than twenty four (24) months after the date the applicant becomes eligible to apply to take the examination, the applicant shall comply with requirements set forth in § 9305.1 (a)

Subsection 9306.1 is amended to read as follows:

9306.1 An applicant for endorsement as an HHA shall provide proof of the following:

- (a) Current registration or certification as an HHA or similar title and duties in another jurisdiction;

- (b) A letter from current employee certifying the applicant's ability to perform skills listed in § 9315.1; and
- (c) That the applicant has worked as an HHA for at least five hundred (500) hours.

Subsection 9307.1 is amended to read as follows:

9307.1 An applicant for renewal shall have:

- (a) Completed at least twenty-four (24) hours of continuing education or in-service training in the area of health or nursing needs of an assigned patient population during the certification period;
- (b) Complete a minimum of two (2) hours of in-service or continuing education on **HIV/AIDS or any Board mandated topics**;
- (c) Provided evidence of the performance **of a minimum of eight (8) hours nursing** related services for compensation during the prior twenty four (24) months; and
- (d) Completed a CBC as required.

9308 REPEALED

Subsection 9309.2 is amended to read as follows:

9309.2 If an HHA does not hold a certification in another jurisdiction and fails to apply for reinstatement within five (5) years after his or her certification expires, the applicant shall meet the requirements for certification pursuant to § 9304.

9310 REPEALED

9311 REPEALED

The section heading for 9315 is amended to read as follows:

9315 HOME HEALTH AIDE AND PERSONAL CARE AIDE TASKS

Add a new subsection 9315.1 to read as follows:

9315.1 Under the supervision of a licensed nurse or health professional **when employed as a PCA persons** may perform the following tasks:

- ~~(a)~~ Provide personal care including assistance with activities of daily living such as bathing, personal hygiene, toileting, transferring from the wheelchair, and instrumental activities such as meal preparation, ~~laundry, grocery shopping,~~ and telephone use; ~~and money management;~~

- (b) **Provide cueing or necessary hands-on assistance with the activities of daily living to patients who are unable to perform one or more activities of daily living**
- (c) Assist the patient with transfer, ambulation, and exercise as prescribed;
- (b) Assist the patient with self-administration of medication;
- (c) Read and record temperature, pulse, and respiration
- (d) **Measure and record blood pressure;**
- (e) Measure and record height and weight;
- (f) Observe, record, and report the patient's physical condition, behavior, or appearance;
- (g) Prepares meals in accordance with dietary guidelines, and assistance with eating;
- (h) Implement universal precautions to ensure infection control;
- (i) Assists with tasks related to keeping the patient's living area in a condition that promotes the patient's health and comfort;
- (j) Accompany the patient to medical and medically-related appointments, to the patient's place of employment, and to approved recreational activities; and
- (k) Assist the patient at his or her place of employment;

9315.2 In addition to the tasks specified in § 9315.1 under the supervision of a licensed nurse or health professional when employed as a HHA persons may perform the following tasks:

- (a) Change simple dressings that do not require the skills of a licensed nurse;
- ~~(b) Measure and record blood pressure;~~
- (c) Assist the patient with activities that are directly supportive of skilled therapy services;
- (d) Assist with routine care of prosthetic and orthotic devices;
- (e) Empty and change colostomy bags and perform care of the stoma;
- (f) Clean around a g-tube site;
- (g) Administer an enema;
- (h) Administer oxygen therapy; and
- (i) Administer medications, provided that the HHA is certified as a medication aide.

Subsection 9324.1 is amended to read as follows:

9324.1 Each institution applying for approval to provide HHA training shall do the following:

- (a) Submit to the Board a statement of intent to establish an HHA training program;

- (b) Submit to the Board a proposal to establish an HHA training program which shall contain the following information:
 - (1) A statement of purpose;
 - (2) A statement of need for the training program in the District of Columbia;
 - (3) A description of the proposed program's potential effect on existing home health aide training programs in the area;
 - (4) The organizational structure of the institution showing the relationship of the proposed training program within the organization;
 - (5) Evidence of adequate financial resources for planning, implementation, and continuation of the program;
 - (6) Licensure status of the proposed training facility;
 - (7) The background and qualifications of the proposed instructors;
 - (8) The number of full time equivalent (FTE) budgeted instructor positions;
 - (9) Evidence of the availability of adequate clinical facilities;
 - (10) A description of the anticipated trainee population, including admission criteria along with the title of the standardized admissions exam;
 - (11) A tentative time schedule for planning and initiating the program; and
 - (12) Fee schedules
- (c) Submit the application fee.

Subsection 9324.2 is amended to read as follows:

9324.2 Schools currently non-compliant with the Board's regulatory requirements for existing programs are not eligible to submit an application to establish an additional program.

Subsection 9324.3 is amended to read as follows:

9324.3 After reviewing the application, based on the applicant's compliance with § 9327, a decision shall be made to:

- (a) Approve the program;
- (b) Defer approval if additional information is needed; or
- (c) Deny approval of the program.

Subsection 9324.4 is amended to read as follows:

9324.4 If an application approval has been granted, a site visit shall be conducted.

Subsection 9324.5 is amended to read as follows:

9324.5 After reviewing the site visit report and an applicant's compliance with § 9332, the Board shall vote to approve, deny, or defer program approval for resource, facility, or service concerns.

Add a new subsection 9324.6 to read as follows:

9324.6 A training program shall not admit trainees to the program before the program has been approved by the Board.

Add a new subsection 9324.7 to read as follows:

9324.7 If the application is denied, the applicant may not resubmit an application until one year has passed from the last submission.

Subsection 9325.1 is amended to read as follows:

9325.1 Programs approved by the Board to train HHAs shall submit to the Board an annual report and fee in accordance with procedures set out by the Board.

Subsection 9325.5 is amended to read as follows:

9325.5 The program shall meet the seventy-five percent (75%) passing rate on the District's competency evaluation each year.

Subsection 9325.6 is amended to read as follows:

9325.6 The training program deficiencies sufficient to warrant withdrawal of approval shall include, but not be limited to the following:

- (a) Failure to effectively utilize the District's approved curriculum for the training program;
- (b) Failure to maintain an adequate number of instructors with required qualifications;
- (c) Failure to meet the seventy five percent (75%) passing rate on the District's approved competency evaluation for a period of two (2) consecutive years;
- (d) Failure of trainees to demonstrate minimal competencies upon employment;
- (e) Failure to adhere to training program's stated objectives and policies;

- (f) Failure to maintain adequate resources, facilities, and services required to meet training objectives; and
- (g) Failure to correct other deficiencies outlined by the Board.

Subsection 9325.7 is amended to read as follows:

- 9325.7 If the training program does not meet the requirements for continued approval:
- (a) The Board may grant conditional approval not to exceed one (1) year, pending correction of the deficiencies; and
 - (b) The Board may restrict admissions of trainees to programs in conditional status.

Subsection 9325.8 is amended to read as follows:

- 9325.8 The Board shall withdraw approval of a training program if:
- (a) It determines that the program is not in compliance with the regulatory requirements set forth in this chapter;
 - (b) The education institution loses its licensure; or
 - (c) The program fails to correct the deficiencies within timeframe specified by the Board.

Subsection 9325.9 is amended to read as follows:

- 9325.9 The Board may consider reinstatement or approval of a training program upon submission of satisfactory evidence that the program meets the standards set forth in this chapter.

Add a new subsection 9325.10 is added to read as follows:

- 9326.10 The Board may investigate complaints made against a program and may conduct hearings in connection with such complaints.

Add a new subsection 9325.11 is added to read as follows:

- 9325.11 Any Board action for suspension or withdrawal of a training program's approval shall take place only upon notice to the program and the opportunity for a hearing in accordance with D.C. Official Code § 3-1205.14 (2012 Supp.).

9326 RESERVED

The section heading for 9327 is amended to read as follows:

9327 HOME HEALTH AIDE TRAINING PROGRAM REQUIREMENTS

Subsection 9327.1 is amended to read as follows:

9327.1 Training programs shall use Board approved home health aide model curriculum.

Subsections 9327.2 through 9327.4 are repealed.

Subsection 9327.5 is amended to read as follows:

9327.5 Each training program shall have a sufficient number of qualified instructors to meet the purposes and objectives of the program.

Subsection 9327.6 is amended to read as follows:

9327.6 The training program shall be coordinated by a registered nurse:

- (a) Who has a current, unencumbered license issued by the District of Columbia;
- (b) With two (2) years of fulltime or fulltime equivalent experience as a licensed nurse with at least one (1) year of clinical experience in a home setting; and
- (a) Who has not been disciplined by the Board pursuant to D.C. Official Code § 3-1205.14 (2001 Supp.).

Subsection 9327.7 is amended to read as follows:

9327.7 The program coordinator's supervision and responsibilities for the training of home health aides shall include, but not be limited to:

- (a) Ensuring that the curriculum is coordinated and implemented in accordance with this chapter;
- (b) Establishing the responsibilities of the instructors;
- (c) Ensuring that each instructor meets the qualifications specified in this chapter;
- (d) Ensuring that each student is properly supervised during the student's clinical experience; and
- (e) Ensuring that each clinical preceptor evaluates the student's performance and provides the evaluation results to the clinical instructor.

Subsection 9327.8 is amended to read as follows:

9327.8 The clinical preceptor shall have the following minimum qualifications:

- (a) Be currently licensed or registered in good standing in jurisdiction

- in which he or she is providing the preceptorship; and
- (b) Have a minimum of two (2) years of experience as a licensed nurse or HHA providing direct patient care, during the five (5) years immediately preceding the date of the written agreement.

Subsection 9327.9 is amended to read as follows:

- 9327.9 The ratio of clinical instructors to trainees in clinical areas involving direct care of patients shall:
- (a) Be based upon the patient acuity level, skill level of the trainee, and the clinical setting; and
 - (b) Not exceed one (1) instructor or preceptor to two (2) HHAs.

Subsection 9327.10 is amended to read as follows:

- 9327.10 Each instructor shall have the following minimum qualifications:
- (a) Be licensed or certified in his or her profession in the District of Columbia;
 - (b) Licensed as a practical nurse in the District of Columbia and has a minimum of three (3) years of current clinical experience in the home or residential settings; and
 - (c) Have completed a course in teaching adults or have experience in teaching adults and supervising home health aides.

Subsection 9327.11 is amended to read as follows:

- 9327.11 The ratio of instructor to trainees in a clinical facility setting shall not exceed one (1) instructor to eight (8) trainees.

Subsections 9327.12 through 9327.19 are repealed.

Subsection 9328.1 is amended to read as follows:

- 9328.1 Each trainee shall be required to take a Board-approved pre-admission examination to assess reading, writing, and math skills prior to enrollment in a training program.

Subsection 9328.2 is amended to read as follows:

- 9328.2 Each trainee shall be required to provide evidence of vaccinations or immunity to communicable diseases prior to admission.

Subsection 9328.3 is amended to read as follows:

9328.3 Each trainee shall attest in writing to receiving information on:

- (a) The policies governing admission, retention, dismissal, and the course requirements of the training program, in writing; and
- (b) Certification requirements including CBC and examination.

Subsection 9330.1 is amended to read as follows:

9330.1 Each HHA program that voluntarily closes shall:

- (a) As early as reasonably possible, notify the Board, in writing, of the intended closing, stating the reason(s) for and planned date of the intended closing;
- (b) Continue the training program until the committed class scheduled for currently enrolled trainees is completed; and
- (c) Notify the Board of the final closing date at least thirty (30) days before the final closing.

Subsection 9330.2 is amended to read as follows:

9330.2 Before the Board may withdraw approval of a program, the Board shall:

- (a) Issue a notice of intended action to the program notifying the program that:
 - (i) The Board intends to withdraw approval of the program and the reasons for the action; and
 - (ii) The program has a right to a hearing.
- (b) Send notice to the Education Licensure Commission of the Board's intention to withdraw program approval.

Subsection 9330.3 is amended to read as follows:

9330.3 If the Board denies or withdraws approval of a training program, the institution shall:

- (a) Close the program on the date provided by the Board; and
- (b) Comply with the requirements of all applicable rules and notify the Board that the requirements have been fulfilled.

Subsections 9331.3, 9331.4 and 9331.5 are amended to read as follows:

9331.3 A record for each trainee shall be maintained by the facility and shall include the trainee's evaluation and health information, and items stipulated in § 9328.

9331.4 Each instructor’s personnel records shall be maintained by the facility and shall include application data, qualifications, and position description.

9331.5 All records shall be maintained by the HHA training program for a minimum of five (5) years.

Subsection 9332.2 is amended to read as follows:

9332.2 Each classroom, conference room, laboratory, and office shall be adequate to meet the needs of the training program.

Subsection 9332.3 is amended to read as follows:

9332.3 Each cooperative agreement between a training program and a healthcare facility shall be in writing. The training program shall maintain a copy of the agreement in its records.

Subsection 9399.1 is amended by adding the following definition:

9399.1 As used in this chapter, the following terms shall have the meanings ascribed:

Healthcare facility – means an assisted living residence (ALR), homes for persons with physical or intellectual disabilities, skilled home care agencies, and those that provide long-term and acute care health services.

9:40 Meeting with UDC leadership
ISSUE: Feedback
Karen Scipio-Skinner, Bonita Jenkins

9:45 Education/Practice Sub-Committee referral
ISSUE: Review/Approve Proposed Agenda
Toni Eason, Bonita Jenkins

DRAFT AGENDA

Leadership Symposium on Safe Nursing Practice

Leadership Symposium on Safe Nursing Practice Agenda

Invite directors of all groups – acute care, long-term care, community agencies
Outline of program:

Introductions

Keynote Speaker – Just Culture, safe practice vs unsafe practice,

Cathy Borris-Hale – Building and Fostering Relationships with the Board
Breakout Sessions – Grouped by type of HC facility/agency, facilitator
representative of the specific group and a Board member representative of the
group:

How Just Culture can be or is implemented in your agency?
How is best practice promoted within your agency?
Failures of Processes vs Failure of the nurse
How can the HC facilities/agencies and the Board work together to
facilitate safe nursing practice?
Wrap-up – Groups report

10:00 Presentation: Understanding Bedbugs
Gerard Brown, Program Manager
Bureau of Community Hygiene, Rodent and Vector Control Division

BON Sub-Committee Membership

Education/Practice

Toni Eason, Chairperson
Simmy Randhawa
Mary Ivey
Mamie Preston
SUPPORT STAFF: Bonita Jenkins

Regulation

Winslow Woodland, Chairperson
Cathy Borris-Hale
Margaret Green
Chioma Nwachukwu
Vera Mayer
SUPPORT STAFF: Karen Scipio-Skinner

Nursing Assistive Personnel Advisory Committee

Ottamissiah Moore, Chairperson
Vanetta Cox Bonner, RN/NAP Supervisor Member
Patrick Anthony Elliott, Dialysis Tech Member
Nicole Maria Fletcher, HHA Member
Vicky Haynes, TME Member
Tippi Hampton, RN/NAP Supervisor
Gay Monatgue, RN/NAP Educator Member
SUPPORT STAFF: Concheeta Wright

1:00 HEARING: Fatmata Jalloh