



Government of the District of Columbia
Department of Health
Health Regulation and Licensing Administration



**DISTRICT OF COLUMBIA BOARD
WEDNESDAY, MARCH 2, 2016
AGENDA**

BOARD MEMBERS	
Chair: Cathy Borris-Hale, RN	P
Vice Chair: Chioma Nwachukwu, RN	E
Toni Eason, RN	E
Margaret Green, LPN	P
Mary Ivey, Consumer	P
Vera Mayer, Consumer	P
Missy Moore, LPN	P
Mamie Preston, RN	E
Winslow Woodland, RN	E
VACANCY, RN	
VACANCY, RN	

STAFF PRESENT	STAFF PRESENT
Senior Deputy Director, HRLA	Investigator
Sharon Lewis, Interim	Mark Donatelli
Executive Director	
Karen Scipio-Skinner	Compliance Specialist
Attorney	Joanne Drozdoski
Van Brathwaite	
Nurse Consultants	Board of Nursing Support Staff
Bonita Jenkins	Tanee Atwell
Felicia Stokes	Diane Moorer

**DISTRICT OF COLUMBIA BOARD of NURSING
WEDNESDAY, MARCH 2, 2016
OPEN SESSION AGENDA**

CALL TO ORDER:
9:20 A.M.

ROLL CALL OF BOARD MEMBERS AND STAFF

CONSENT AGENDA

ISSUE: January 6, 2016 minutes

VOTE: Approved

COMMENTS FROM THE PUBLIC

Betty HolMan and Walakewon (Wala) Blegay, DCNA

ISSUE: Use of nurses as "Sitters"

DECISION: Board staff directed to send a response to the DCNA representatives indication that in the opinion of the board it is within the scope of practice of a RN to function as a "Sitter".

REPORTS

Chairperson

Chioma Nwachukwu, RN, has voted vice-chairperson

NCSBN Midyear Conference: March 14 - 16, 2016. Baltimore, MD

Attending: Chioma Nwachukwu, RN; Missy Moore; Margaret Green and Karen Scipio-Skinner

Cathy Borris-Hale testified on behalf of the Board before the Committee on Health at its 2016 Health Professional Boards Oversight Hearing

Executive Director

Proposal from Pearson VUE to develop a HHA Examination has been received. Staff is working with PV to revise both the skills and written examinations

Nursing Assistive Personnel Omnibus Regulations were sent back to the board to consider comments regarding role of the Dialysis Technician.
(See below)

Regulation approval process was reviewed

Education/Practice Committee

ISSUE: Captec not licensed by ELC

DECISION: Request NOI to withdraw approval due to non-licensure

ISSUE: NAP Training Program Fee recommendation

DECISION: \$1000 for initial application; \$500 for annual report (per program)

ISSUE: NAP Program approval status

DECISION: The board voted to issue the following approval statuses:

1. The following HHA programs will receive Conditional Approval:
 - a. Healthwrite Training Center
 - b. Innovative Institute (formerly Total Healthcare Innovations)
 - c. Intellect Health Institute
 - d. Opportunities Industrialization Center
 - e. VMT Educational Center
2. The following HHA program will receive Approval”
 - a. Allied Health Institute
3. The following CNA programs will receive Conditional Approval:
 - a. Carlos Rosario
 - b. Innovative Institute
 - c. VMT Education Center
4. The following CNA programs will receive Approval:
 - a. Allied Health Institute
 - b. Healthwrite
 - c. University of District of Columbia

Attorney Advisor Report

ISSUE: Regulation revision allowing LPNs to administer hypnotics

UPDATE: Revised regulation will be made final this month

ISSUE: Jared Kline, RN

UPDATE: Jared Kline was acquitted in Maryland. His trial is still pending in DC.

REGULATION

DRAFT-- DIAYLSIS TECHICIAN REGULATION

The board is being asked to reconsider the following:

9415 DIALYSIS TECHNICIAN TASKS

9415.1 Under the supervision of a **licensed nurse**, nurse practitioner, or physician, a dialysis technician may provide the following services:

- (a) Preparing and cannulating peripheral access sites (arterial-venous fistulas and arterial-venous grafts);

- (b) Initiating, delivering or discontinuing dialysis care;
- (c) Measuring and recording temperature, pulse, respiration, and blood pressure when initiating, delivering, or discontinuing dialysis client care;
- (d) Administering the following drugs only:
 - (1) Anticoagulants either to prime the extracorporeal system in preparation for initiation of treatment, or for administration throughout the treatment, in an amount prescribed by a licensed provider;
 - (2) Normal saline via the extracorporeal system to correct dialysis induced hypotension based on the facility's medical protocol, provided that amounts beyond that established in the facility's medical protocol shall not be administered without the direction from a registered nurse, nurse practitioner, physician, or physician assistant; and
 - (3) Intradermal anesthetics in an amount prescribed by a physician, physician's assistant, or nurse practitioner.
- (e) Assisting the registered nurse in data collection;
- (f) Obtaining a blood specimen via the extracorporeal system;
- (g) Responding to complications that arise in conjunction with dialysis care;
- (i) Initiating and discontinuing treatment via arterio-venous access; and
- (j) **Maintenance of a central venous catheter.**
- (h) Performing other acts, as delegated by the registered nurse, for which the dialysis technician is qualified;

LICENSED NURSE

ISSUE: Licensed nurse, when used, includes RNs and LPNs. The term as used in the dialysis tech regulations would allow LPNs to supervised DTs. This is inconsistent with proposed facilities regulations which do not allow LPNs to supervise DTs.

DECISION: Amend licensed nurse to read RN.

Caring for a central venous catheter is not clear.

DECISION: Revise to read "Maintenance of a central venous catheter."

DRAFT REGISTERED NURSE REGULATION

The board began work on the RN regulation revisions

ADJOURNMENT

This concludes the Public Open Session of the meeting, and pursuant to D.C. Official Code Section 2-575(b), and the purposes set forth therein, the Board will now move into the Executive Section which is closed to the public.

FYI

STATUS OF BON REGULATIONS

REGULATION	STATUS	NOTES
Registered Nurse	Draft	Complete side by side In progress
Licensed Practical Nurse	Draft	Complete side by side In progress
Certified Nurse Practitioner	Referred for legal sufficiency review	
Clinical Nurse Specialist	Referred for legal sufficiency review	
Certified Registered Nurse Anesthetist	Referred for legal sufficiency review	
Certified Nurse Midwife	Referred for legal sufficiency review	
HHA regulation amendments	Referred for legal sufficiency review	
NAP Omnibus (MAC, DT, PCT, CNA)	Referred for legal sufficiency review	Returned to board for review
Revision of LPN Hypnotics regulatory requirement	Final	