



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



DISTRICT OF COLUMBIA BOARD
MINUTES
September 2, 2015

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

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

**DISTRICT OF COLUMBIA BOARD of NURSING
OPEN SESSION MINUTES
September 15, 2015**

CALL TO ORDER

Cathy Borris-Hale, Chairperson 8:55 a.m.

ROLL CALL OF BOARD MEMBERS AND STAFF

CONSENT MINUTES

ISSUE: July 2015 minutes

ACTION: Approved

REPORTS

REPORT FROM EXECUTIVE DIRECTOR

2015 Fall Member Board Review of NCLEX Items

ISSUE: The fall review will take place from Monday, November 2 – Friday, November 20, 2015. This review will allow member boards the opportunity to review NCLEX-RN and NCLEX-PN items through simulated computerized adaptive examinations.

DISCUSSION: Names and dates needed of members interested in participating
Missy Moore, Mamie Preston, Chioma Nwachukwu
Persons will be available November 5th, 12th, 19th

October Board of Nursing Minutes:

Hearings and settlement conferences will be held.

CHAIRPERSON/BOARD MEMBER REPORTS

NCSBN Annual Meeting

ISSUE: Feedback from attendees

Karen Scipio-Skinner elected as NCSBN at large Board of Director member

Ethics training available for persons

NCSBN held a “Shark Tank” regulatory program. Of the many presenting Felicia Stoke’s proposal to have a verification app was one of two proposal selected.

Future program: Focus on medical marijuana

Board Member Ethics Training

Not completing training: Cathy Borris-Hale, Chioma Nwachukwu, Margaret Green

Completed training: Mamie Preston, Missy Moore, Vera Mayer and Winslow

Staff to follow-up on use of assigned emails

Board Member Training

ISSUE: Training will be held September 28, 2015

ATTORNEY ADVISOR

See NAP Regulations update below

COMMENTS FROM THE PUBLIC

Ivan Lanier, AARP

Age Friendly DC

Spoke in support of approval of NAP regulations

COMMITTEE REPORTS

NAP COMMITTEE

ISSUE: Vacancy, Tippi Hampton has accepted another position which removes her from the role of NAP supervisor

DISCUSSION: Persons will be asked to apply for vacant positions

NAP Committee Positions:

Certified Nursing Assistant (1):	Currently working in a DC LTC facility (Not filled)
Dialysis Technician (1):	Currently working in a DC dialysis center
Home Health Aide (1):	Currently working with a beneficiary in DC
Medication Aide (1):	Currently administering medications in a DC facility (N/A)
Patient Care Technician (1):	Currently working a DC acute care facility (Not filled)
RN or LPN educator (1):	Currently teaching or administering a NAP Program
RN or LPN (2):	Currently supervising the practice of NAPs (1 vacancy)

EDUCATION/PRACTICE SUBCOMMITTEE

Practice Questions and Responses

Question #1: A school nurse has been asked to deliver marijuana cookies prepared by the student's mother to a minor student who is autistic and has severe seizure disorder. While the nurse is not the designated caregiver under the statute or physician order so this may not be an issue for her it raises questions on how do the BONs in states with medical marijuana statutes address the issue of nurses being asked to administer or deliver the medicinal marijuana to clients. We see this increasing in schools and in home care with hospice. Do your laws or regulations allow nurses to do this? Are their clauses in the regulations or statutes that allow nurses to refuse to administer marijuana if they are uncomfortable? How do you handle the fact that Marijuana is a Class 1 narcotic?

Response

1. Marijuana is still a Class 1 Narcotic
2. The nurse should not be responsible for the chain of custody of the marijuana cookie.
3. The responsibility for administering the medication is being delegated from the parent to the nurse.
4. The school is currently a "drug free zone".
5. Recommend that OSSE review the regulations regarding "drug free zone", so that parents may come to administer the drugs legally to their children.

6. Final conclusion: Because of the four statements above, the Board of Nursing does not recommend revising the nurse practice act to allow the nurse to give Class 1 narcotics in the schools.

Question #2: I am a registered nurse working in a DC hospital in the pre-surgical testing unit. We instruct the patients what meds to quit taking and what meds to continue taking including day of surgery drugs. We instruct them to ask their physicians regarding what to do with blood thinners.

One of our instructions, per the anesthesia department, is to not take certain blood pressure meds the day of surgery.

Is this considered prescribing? Is this within our scope of practice? If it is within our scope of practice, does the hospital have to have a policy in place regarding this?

Further request for clarification after an initial response:

I am still trying to clarify the legality of staff nurses instructing pre-op patients what meds to stop and take that is not written up as a hospital policy. Also, we are to tell patients to use Hibiclens wash pre-op, again without a hospital policy. We have been told by our peri-op manager that these are "nurse driven protocols" so it is legal for us to do this but I never received a confirmation from the hospital Director of Risk Management who uses CPHRM, Esq. after her name so I assume she is a lawyer.

Is it true that this is legal and within our scope of practice if it is written up as a nurse driven protocol but not signed off by physicians or anesthesiologists and is not written up as a hospital policy?

Response:

It is within the scope of practice for nurses to provide guidance for pre-op patients. Specific medication administration information should have orders (standing or patient specific). We recommend that you work with the Anesthesia and Surgery departments to draft orders, protocol or policies to reflect the current practice in your area.

REGULATION COMMITTEE

NAP Side by Side (Available at meeting)

ISSUE: Review recommended revisions

10:00 a.m.

APRN FORUM

Nurse Practitioners, Clinical Nurse Specialists, Nurse Midwives, and Nurse Anesthetists will provide comments regarding the Board's proposed amendments to the advanced practice registered nurse regulations.

(Side by Side APRN Regulations attached)

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 Session which is closed to the public.

**DISTRICT OF COLUMBIA BOARD OF NURSING
EXECUTIVE SESSION MINUTES
September 15, 2015**

FYI ITEMS

BOARD OF NURSING REGULATION STATUS

REGULATION	STATUS	NOTES
Registered Nurse	Draft	Complete side by side
Licensed Practical Nurse	Draft	Complete side by side
Nursing Education Programs	EOM (Executive Office of the Mayor) Signed by Mayor	To be published Friday, Sept. 4, 2015
Certified Nurse Practitioner	Draft	Roundtable 9/2/2015
Clinical Nurse Specialist	Draft	Roundtable 9/2/2015
Certified Registered Nurse Anesthetist	Draft	Roundtable 9/2/2015
Certified Nurse Midwife	Draft	Roundtable 9/2/2015
HHA regulation amendments	Draft	Review by board 9/2/2015
NAP Omnibus (MAC, DT, PCT, CNA)	Draft	Review by board 9/2/2015
NAP Fees	Final Rulemaking to EOM	