



### **BOARD OF NURSING**

### **Open Session Agenda**

July 5, 2023 9:00 a.m.

#### VIRTUAL MEETING NOTICE

Due to the COVID-19 pandemic, a hybrid fashion of board meetings will occur. Today's meeting is on ground in Room 216 at DOH, 899 North Capitol Street NE Washington DC 20002

Information on how to access the public portion of the meeting is listed below:

Join by Web: (recording purposes only)

https://dcnet.webex.com/dcnet/j.php?MTID=mcc28cf799c8f6eccc4f690b77e9e8b4b

Join by Phone:

1-650-479-3208 (US/Canada)

**Access Code:** 

172 969 3891

This meeting is governed by the Open Meetings Act. Please address any questions or complaints arising under this meeting to the Office of Open Government at <a href="mailto:opengovoffice@dc.gov">opengovoffice@dc.gov</a>





#### **Board of Nursing Mission Statement:**

"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."

The Open Session Agenda continues on the next page with the 'Board Meeting Participants'.





#### **BOARD MEETING PARTICIPANTS:**

BOARD MEMBERS:	
Meedie Bardonille, RN (MB)	
Laverne Plater, RN (LP)	
Rick Garcia, RN, PhD (RG)	
Margaret Green, LPN (MG)	
Michelle Clausen, RN (MC)	
Patricia Howard, RN (PW)	
Kami Cooper, RN (KC)	
Tiffany Simmons, RN (TS)	
BOARD STAFF:	
Teresa Walsh, RN, PhD, NE-C, Executive Director	
Cathy Borris-Hale MHA, RN	
Concheeta Wright BSN, RN	
Mark Donatelli, Investigator	
Matteo Lieb, Office of Government Relations Specialist	
Melondy Franklin, Supervisory Health Licensing Specialist	
DaNeka Bigelow, Health Licensing Specialist	
LEGAL STAFF:	
Panravee Vongjaroenrat, Assistant General Counsel	

The Open Session Agenda continues the next page with 'Call to Order'.





#### **AGFNDA**

AGENDA			
CALL TO ORDER, APPROVAL OF AGENDA, MINUTES, AND STAFF REPORTS			
OS-23-07-01	CALL TO ORDER		
OS-23-07-02	ROLL CALL OF BOARD MEMBERS AND STAFF		
OS-23-07-03	AGENDA APPROVAL		Decision
	Board Action:		
	Consideration of the Open Session Agenda for today's meeting,		
	July 5, 2023.		
OS-23-07-04	MEETING MINUTES APPROVAL		Decision
	Board Action:		
	Consideration of the Open Session	minutes from the May 3,	
	2023.		
OS-23-07-05	REPORTS		
	A. Board Chair Report -Meedie	Bardonille	(A) Informatio
	B. Executive Director Report –		nal
	1	Check grid – consent agenda	• •
	item – Attachment I		subsection
	b. Delegation Authority		(a) Consent
	c. Census / LPN renewa		agenda
	LICENSE TYPE	# OF ACTIVE LICENSEES	` '
	C 1.C.   DI DA:   .C	(6/26/2023)	(c)
	Certified Nurse Midwife	154	Informational
	Clinical Nurse Specialist	37	
	Home Health Aide	8,207	
	Licensed Practical Nurse	1,957	
	Nurse Practitioner	3,484	
	Registered Nurse	33,370	
	Certified Registered Nurse	162	
	Anesthetist	1.454	
	Trained Medication Employee	1,454	
	CNA	5,009	
	Total 53,834		
	C. Board Attorney Report-Panravee Vongjaroenrat		(C)
	D. Legislative Report – Office of Gov. Relations Matteo		Informational
	Lieb  E. Education Subcommittee Report		(D)
		•	Informational
	a. <b>Board action</b> -Consent agenda items for the below; Decision by the Educational committee on June 29,		(E) Decision
	2023 as follows (of note, all 1st time pass rates for		
	NCLEX); Year in review 2022:		
	b. Catholic University Conway School of Nursing		
	a. Cambridge Controlley Con	,	



Administration



**BSN** NCLEX pass rate 93.5%; Graduation rate; 84.00%; increasing enrollment. Provisional approval of the BSN program pending a report from program leadership regarding how the program plans to accommodate increased undergraduate enrollment, due within 30 days from request. **APRN** – Graduation rate – 88.5%. Provisional approval of the APRN program pending a report from program leadership regarding the rate of certification of APRN program graduates in 2022, due within 30 days from request.

- (c) George Washington (GW) APRN 67 %
  Graduation rate. Provisional approval of the APRN program with the Subcommittee requesting an evaluative report and performance improvement plan regarding APRN student progress, due within 30 days from request.
- (d) **Georgetown University BSN** -94% NCLEX pass rates; 93% Graduation rate. Full Approval. **CNL** 93% NCLEX pass rates; 95% Graduation rate. Full Approval. **APRN** 8% Graduation rate. Provisional approval of the APRN program pending a report from program leadership regarding the rate of certification of APRN program graduates in 2022, due within 30 days from request.
- (e) University of the District of Columbia (UDC) BSN -58% NCLEX pass rates; 50% Graduation rate. Sustain conditional approval for the program, with a review again by the BON in November 2023; Program leadership is required to provide to the Board 1) a review the previous corrective action plan (CAP) provided to the Board, 2) a crosswalk of the previous CAP 3) a report on the outcome of the prior year's CAP referencing ongoing program issues (4) program leadership will provide to the Board measurable outcomes regarding targets for improvement by the end of the first quarter of 2024 (5) program leadership will retain a nurse education consultant to conduct a systematic review of the UDC nursing program to validate the CAP, as well as identify additional tactics to correct the trend of student performance on the NCLEX.
- **(f) Trinity University BSN** -79% NCLEX Pass rate; 43% Graduation rate. Full approval of the program, with



Administration



the requirement of a performance improvement plan from program leadership regarding student performance on the NCLEX, due within 30 days of request.

(g) Howard University – BSN - 89% NCLEX pass rates, 83% Graduation rate. Full approval. APRN – 50% Graduation rate. Provisional approval of the APRN program pending a report from program leadership regarding the rate of certification of APRN program graduates in 2022, due within 30 days from request.

Other Board of Nursing Educational Program updates regarding 2022 decisions are deferred.

F. Discipline Subcommittee Report -Cathy Borris-Hale

(F) Report

The Open Session Agenda continues the next page with 'Misc. Items for Discussion'.





	FOR DISCUSSION	
OS-23-07-07	OPEN FORUM/PUBLIC COMMENTS	Informational
	If time permits, the Board Chair will open floor to the public to allow comments, questions, and/or concerns.	

The Open Session Agenda continues the next page with 'Motion to Close'.





OS-23-07-08	MOTION TO CLOSE	Decision
	Board Action:	
	To go into closed session to discuss confidential matters as	
	permitted in DC Official Code § 2-575(b)	
	Background:	
	Pursuant to DC Official Code § 2-575(b), the Board will move	
	into the Closed Executive Session portion of the meeting to	
	discuss the following:	
	1. To consult with an attorney to obtain legal advice and	
	to preserve the attorney-client privilege between an	
	attorney and a public body, or to approve settlement	
	agreements pursuant to § 2-575(b)(4)(a);	
	2. Preparation, administration, or grading of scholastic,	
	licensing, or qualifying examinations pursuant to	
	section § 2-575(b)(6);	
	3. To discuss disciplinary matters pursuant to section § 2-	
	575(b)(9);	
	To plan, discuss, or hear reports concerning ongoing or	
	planned investigation of alleged criminal or civil misconduct	
	or violations of law or regulations, if disclosure to the public	
	would harm the investigation pursuant to section § 2-575(b)	
	(14).	
OS-23-07-08	MOTION TO ADJOURN	Decision
	Board Action:	
	To adjourn the meeting.	
	Background:	
	At the end of every meeting a motion to adjourn must be made	
	in open session to close out the business of the Board.	

This ends the Open Session Agenda.





# **BOARD OF NURSING**Open Session Minutes

May 3, 2023 9:00 a.m.

#### VIRTUAL MEETING NOTICE

Due to the COVID-19 pandemic, a hybrid fashion of board meetings will occur. Today's meeting is Virtual.

Information on how to access the public portion of the meeting is listed below:

Join by Web:

https://dcnet.webex.com/dcnet/j.php?MTID=mcc28cf799c8f6eccc4f690b77e9e8b4b

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#### **Board of Nursing Mission Statement:**

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The Open Session Agenda continues on the next page with the 'Board Meeting Participants'.





#### **BOARD MEETING PARTICIPANTS:**

BOARD MEMBERS:	
Meedie Bardonille, RN (MB)	Present
Laverne Plater, RN (LP)	Present
Rick Garcia, RN, PhD (RG)	Present
Margaret Green, LPN (MG)	Present
Michelle Clausen, RN (MC)	Present
Patricia Howard-Chittams, RN (PW)	Present
Kami Cooper, RN (KC)	Present
Tiffany Simmons, RN (TS)	Present
BOARD STAFF:	
Teresa Walsh, RN, PhD, NE-C, Executive Director	Present
Teresa Walsh, RN, PhD, NE-C, Executive Director  Cathy Borris-Hale MHA, RN	Present
Cathy Borris-Hale MHA, RN	Present
Cathy Borris-Hale MHA, RN  Concheeta Wright BSN, RN	Present Present
Cathy Borris-Hale MHA, RN  Concheeta Wright BSN, RN  Mark Donatelli, Investigator	Present  Present  Present
Cathy Borris-Hale MHA, RN  Concheeta Wright BSN, RN  Mark Donatelli, Investigator  Matteo Lieb, Office of Government Relations Specialist	Present  Present  Present  Present  Present

The Open Session Agenda continues the next page with 'Call to Order'.





#### **AGENDA**

CALL TO ORDER, APPROVAL OF AGENDA, MINUTES, AND STAFF REPORTS			
OS-23-05-01			9:03 am
OS-23-05-02	ROLL CALL OF BOARD MEMBERS AND STAFF		
OS-23-05-03	AGENDA APPROVAL		Decision
03-23-03-03	Board Action:		Decision
	Consideration of the Open Session Agenda for today's meeting,		
	May 3, 2023.	0	
	Motion to approve - Motion to appro	•	
	Plater, seconded by Rick Garcia; app	roved by a unanimous vote.	
OS-23-05-04	MEETING MINUTES APPROVAL		Decision
	Board Action:		
	Consideration of the Open Session m	ninutes from the March 1,	
	2023.		
	Motion to approve- Motion to appro	ove minute by Rick Garcia	
	seconded by Margaret Green; appro	•	
OS-23-05-05	REPORTS	ved by a anaminous vote.	Informational
03 23 03 03	A. Board Chair Report -Meedie B	Bardonille	miormational
	B. Executive Director Report – T		
	a. Census / LPN renewal		
	LICENSE TYPE	# OF ACTIVE LICENSEES	
	LICENSE THE	(4/26/2023)	
	Certified Nurse Midwife	151	
	Clinical Nurse Specialist	37	
	Home Health Aide	8,061	
	Licensed Practical Nurse	1,907	
	Nurse Practitioner	3,346	
	Registered Nurse	31,019	
	Certified Registered Nurse	157	
	Anesthetist		
	Trained Medication Employee	1,425	
	CNA	4,984	
	Total	51,087	
	C. Board Attorney Report-Panravee Vongjaroenrat		Report
	D. Legislative Report – Office of Gov. Relations Matteo		Report
	Lieb		
	Prior Authorization Legislation:		
	■ The Prior Authorization Reform Amendment Act of 2023		
	( <u>B25-0124</u> ) was introduced on February 7 <sup>th</sup> by Councilmember Pinto and 7 other Councilmembers.		
	Councilinember Finto and 7	other Councilliellibers.	<u> </u>



Administration



- This legislation makes adjustments to the prior authorization process for insurers in the District.
   Notably, it would prohibit insurers from denying a treatment based on cost.
- A similar version was introduced in the previous Council Period (<u>B24-0655</u>). This bill is scheduled for a hearing on May 24, 2023.

#### **Telehealth Legislation:**

- Chairman Mendelson, at the request of the Uniform Law Commission, introduced the *Uniform Telehealth Act of* 2023 (<u>B25-0125</u>).
  - This legislation "provides a framework to facilitate the delivery of telehealth services consistent with the applicable standards of care and to open state borders for practitioners to assist patients in a more convenient and cost-effective manner."
- This legislation is in the Committee on Health and has not been scheduled for a hearing.

#### FY 2024 Budget:

- The Mayor released the proposed FY 2024 budget on March 22<sup>nd</sup> and hosted a presentation about it that same day to the Council.
- On March 24<sup>th</sup>, the Committee of the Whole held a hearing on the FY 2024 budget during which Councilmembers asked the Mayor and her team detailed questions about the proposed budget.
- DC Health's had its Budget Oversight hearing on April 10<sup>th</sup> (public witnesses) and then April 12<sup>th</sup> (DC Health representatives). During the hearing there were many topics raised including professional licensing, animal services, and school nursing.
- The Committee on Health held its budget mark-up for DC Health on April 26<sup>th</sup> at 11:30am. In that mark-up, changes include:
  - Funding dementia training for direct care workers
  - Allocating over \$1.4 million for the high-need healthcare scholarship program
  - Providing an additional 2.25 licensing professionals within the Office of Health Professional Licensing Boards
  - Enhancing funding for food access programs at DC Health
- The Council will have its first reading on the FY 2024 budget on May 16<sup>th</sup> with the second reading scheduled for May 30<sup>th</sup>.

**Health Occupations Revision Act (HORA) Update:** 



Administration



- DC Health is working on a significant revision of the HORA.
   This would be the first significant revision in seventeen years.
- The revised HORA has gone through one round of revisions and will receive a final review soon before submission to the Executive Office of the Mayor (EOM).

#### FGM/C Legislation:

- Councilmember Pinto has reintroduced the Female Genital Mutilation Prohibition Act of 2023 (B25-0247) along with Councilmembers Frumin, Nadeau, Henderson, Gray, and Allen
  - This legislation prohibits the practice of female genital mutilation or cutting. It also requires the development of educational materials for mandated reporters and other members of the community by DC Health.
- This bill has been referred to the Committee on Judiciary and Public Safety. Last Council Period, a similar version of this bill (<u>B24-0516</u>) received a hearing during which many organizations testified in support.

#### **Federal Spouse Licensure:**

- Congress has recently passed legislation to reduce barriers for military spouses to gaining licensure in new jurisdictions. This legislation, the *Veterans Auto and Education Improvement Act of 2022* (H.R. 7939), went into effect on January 5th, 2023.
  - This new law intends to ensure that military spouses with professional licensure in good standing in other states can practice in new states where their spouses are relocated.
- The Office of Health Professional Licensing Boards and the Office of the General Counsel (OGC) are working to establish a process by which military spouses could attain privileges to practice in the District.
- E. Education Subcommittee Report Dr. Garcia
  - a. LPN (application) program waiver request; refer to notation below at **OS-05-06**



	F. Discipline Subcommittee Report -Cathy Borris-Hale	Report
23-05-06	Regulatory Revision to Chapter 56	Decision
	Board action: Decide whether to amend the regulation to	
	remove the requirement for a nursing education program to be	
	part of a college or university.	
	Background: At the Board's meeting on 3/1/2023, a presentation	
	was made to the Board for a new LPN education program. It was	
	pointed out that the current regulatory requirement for a	
	nursing education program to be part of a college or university	
	(17 DCMR § 5601.1(b)(4)) is a barrier and a request was made	
	that the requirement be waived. The Board voted to delegate	
	the review of the issue to the Education Committee. The	
	committee met on April 5, 2023, and placed the following	
	motion on the floor for voting.	
	Motion (from Education Committee): The regulation should not	
	be revised, and no waiver should be granted.	
	Motion: Agreement with Education Committee to not grant	
	waiver with roll call vote motioned by Rick Garcia, seconded by	
	Patricia Howard-Chittams; approved by the votes of all the	
	members except Kami Cooper (abstention) and Meedie	
	Bardonille (recused).	
23-05-07	NCSBN Decision-making Framework	Decision
	Board Action: Decide whether to adopt the Framework.	
	Background: Based on the recent inquiry to the Board regarding	
	the use of ketamine, the Board is asked to formally adopt the	
	Framework, which provides guidance for such inquiries. Of note	
	the Board may have adopted this Framework in 2016 but due	
	to the length of time since then and the lack of easy-referenced	
	record, the Board is requested to review and adopt the	
	Framework today. See Attachment I	
	<b>Motion:</b> To approve framework previously outlined; approved by	,
	a unanimous vote.	
23-05-08	Criminal Background Check (CBC) Chart	Decision
	<b>Board Action</b> : To review and consider whether to adopt or revise	
	the CBC Chart	
	Background: This chart has been adopted by all the other boards	S
	to give staff guidance on how to review and dispose of CBC	
	issues without bringing all CBC-related matters to the Board for a	
	decision. The chart will assist in facilitating the review and	
	approval of license applications and inform staff of the types of	



Health Regulation  Administration	on & Licensing MURIEL BOWSER, MAYOR	
	CBC issues that the Board will review. See Attachment II	
	<b>Decision:</b> Refer to the Discipline Committee by a unanimous vote	
23-05-09	Chapter 55 Licensed Practical Nursing	Decision
	<b>Board Action</b> : To review and consider whether to approve the	
	revised regulation.	
	<b>Background</b> : The revisions to chapter 55 are generally similar to	
	the revisions to Chapter 54 (Registered Nursing), which the	
	Board already approved. There are a few noteworthy sections	
	specific to LPN practice, which the Regulation Committee	
	discussed and reviewed during its meeting in March 2023.	
	Attachment IV	
	Motion: To approve the revised regulation(s); approved by a	
	unanimous vote.	
23-05-10	Chapter 57 Certified Nurse Anesthetists	Decision
	<b>Board Action</b> : To review and consider whether to approve the	
	revised regulation.	
	Background: The revisions to chapter 57 were reviewed,	
	suggested, and endorsed by a subcommittee of APRN's who are	
	in fact BON members. Their recommendations were previously	
	provided to all of the members by email for review. Attachment	
	iii d	
	<b>Motion:</b> To approve the revised regulation(s); approved by a	
	unanimous vote.	
23-05-11	Chapter 58 Certified Nurse Midwife	Decision
	<b>Board Action</b> : To review and consider whether to approve the	
	revised regulation.	
	Background: The revisions to chapter 58 were reviewed,	
	suggested, and endorsed by a subcommittee of APRN's who are	
	in fact BON members. Their recommendations were previously	
	provided to all of the members by email for review. Attachment	
	III b	
	Motion: To approve the revised regulation(s); approved by a	
	unanimous vote	
23-05-12	Chapter 59 Nurse Practitioners	Decision
	<b>Board Action</b> : To review and consider whether to approve the	
	revised regulation.	
	Background: The revisions to chapter 59 were reviewed,	
	suggested, and endorsed by a subcommittee of APRN's who are	
	in fact BON members. Their recommendations were previously	
	provided to all of the members by email for review. Attachment	





Administration	MORIEL BOWSER, MATOR	
	III c	
	Motion: To approve the revised regulation with verbal	
	addendum; approved by a unanimous vote	
25-05-13	Chapter 60 Clinical Nurse Specialist	Decision
	<b>Board Action</b> : To review and consider whether to approve the revised regulation.	
	Background: The revisions to chapter 60 were reviewed, suggested, and endorsed by a subcommittee of APRN's who are in fact are BON members. Their recommendations were previously provided to all of the members by email for review. Attachment III d	
	<b>Motion:</b> To approve the revised regulation(s); approved by a unanimous vote	

The Open Session Agenda continues the next page with 'Misc. Items for Discussion'.





MISC. ITEMS FOR DISCUSSION		
OS-23-05-14	OPEN FORUM/PUBLIC COMMENTS	Informational
	If time permits, the Board Chair will open floor to the public to allow comments, questions, and/or concerns.	

The Open Session Agenda continues the next page with 'Motion to Close'.





OS-23-05-15	MOTION TO CLOSE Board Action:	Decision
	To go into closed session to discuss confidential matters as	
	permitted in DC Official Code § 2-575(b)	
	Background:	
	Pursuant to DC Official Code § 2-575(b), the Board will move	
	into the Closed Executive Session portion of the meeting to	
	discuss the following:	
	<ol> <li>To consult with an attorney to obtain legal advice and to preserve the attorney-client privilege between an attorney and a public body, or to approve settlement agreements pursuant to § 2-575(b)(4)(a);</li> </ol>	
	<ol> <li>Preparation, administration, or grading of scholastic, licensing, or qualifying examinations pursuant to section § 2-575(b)(6);</li> </ol>	
	<ol> <li>To discuss disciplinary matters pursuant to section § 2- 575(b)(9);</li> </ol>	
	To plan, discuss, or hear reports concerning ongoing or planned investigation of alleged criminal or civil misconduct or violations of law or regulations, if disclosure to the public would harm the investigation pursuant to section § 2-575(b) (14).	
	<b>Motion:</b> To close open session and move into executive session made by Margaret Green, seconded by Kami Cooper.	
OS-23-05-16	MOTION TO ADJOURN	Decision
	Board Action:	
	To adjourn the meeting.	
	Background:	
	At the end of every meeting a motion to adjourn must be made	
	in open session to close out the business of the Board.	

This ends the Open Session Agenda.



#### CBC CATEGORIES Board of Nursing (BON)

CATEGORIES OF CBC REVIEW	ACTION
CATEGORY I – ALWAYS REQUIRING	Requiring case-by-case review
BOARD'S ATTENTION	and measure
Significant issues such as	
Child molestation/abuse	
Serious drug charges	
<ul> <li>Felony assault and battery</li> </ul>	
• Crime of moral turpitude (e.g. theft, forgery)	
CATEGORY II – PATTERN	Requiring monitoring (with
Multiple arrests for the same or similar types of	case-by-case exception)
crimes –maybe minor or relatively minor – but	,
possibly indicating a penchant for such acts	
CATEGORY III – RECENTNESS	Requiring case-by-case review
Criminal charges occurring within the past 7 years.	Possible monitoring
Requiring case-by-case determination as to whether	
the issues raise any practice/professional concerns	
CATEGORY IV - INVOLVES SPECIFIC	Requiring case-by-case review
PROFESSIONAL ISSUES OR CREATING	Possible referral to COIN
CONCERNS OVER PROFESSIONAL	
CHARACTER	
(e.g. drug dependence)	
CATEGORY V - ("MAY BE OK") Potentially	Cleared and approved
serious and may be of some concern, but applicant	
provides statement sufficient to reassure Board of	
rehabilitation.	
CATEGORY VI – OLD	Cleared and approved
More than 7 years ago and the record is clear since	
then – pointing to a temporary lapse of judgment	
and not indicating propensity for crime.	
CATEGORY VII – CLEAR	Cleared and approved
Very minor and isolated charges such as	
misdemeanor assaults	

1985 RULE: Arrests, charges, or convictions – other than in Category I – will be cleared and not considered in reviewing the answer to the crime question. (NOTE: This cut-off date is rolling; accordingly, in 2014, the 1985 Rule became 1986 Rule.)

Revised 4-26-2023/ TMW





# **Board of Nursing Delegated Authorities** for Executive Director and Board Staff

#### BACKGROUND FOR DELEGATION

Board of Nursing (Board) regulates more than 40,000 nurses and nursing assistive personnel. To facilitate the work of the Board, several basic functions are delegated to the following entities to carry out the Board's work during the interim periods between the Board's meetings:

- 1) Board Committees, made up of 3-4 Board members:
  - a. Discipline Committee meeting every other month in between Board meetings
  - b. Education Committee meeting every other month in between Board meetings
  - c. Law and Regulation Committee convened and meeting as needed
- 2) Executive Director of the Board. The authority delegated to the Executive Director may be supported by staff of the Board such as the Health Licensing Specialists, Nurse Specialist for Education, and Nurse Specialist for Discipline. The Executive Director is also supported by the "Complaint Review Committee" (CRC), made up of staff, i.e. Executive Director, Nurse Specialist for Discipline, Board Investigator, and Board Attorney, and may be supplemented by Compliance Officer or other board staff generally involved with disciplinary matters (including reviews of criminal background check). The CRC generally meets monthly at the Executive Director's convenience and schedule.

The authority delegated to the Executive Director (and staff) involves **simple**, **routine actions and decisions** that involve no controversy or are based on clear guidelines given by the Board. The actions and decisions made in this manner should be placed on the Board's agenda as Consent Agenda to ensure that the Board is informed of actions and decisions taken on its behalf.

The authority delegated to the Committees involves **discretionary actions** and **decisions** that are more complicated and may involve the weighing of multiple factors. Some of the delegated authority is final – meaning the decision of the Committee may be immediately implemented; whereas some delegated authority permit the Committee to consider the full





matter and make a recommendation for final decision or action to the Board. The latter will be an agenda item for Board action, while the former will be on the agenda as Consent Agenda.

#### **DELEGATED AUTHORITIES**

#### **Authorities Delegated to the Committees of the Board**

#### The Board of Nursing delegates to the **DISCIPLINE COMMITTEE** the authority to:

- Review complaints<sup>1</sup> related to a nursing licensee or nursing assistive personnel to determine the best response and direct the staff to implement the response.
   Responses may include any of the following:
  - Closing the complaint for lack of violation
  - Issuing an Order to Answer (OTA)<sup>2</sup>
  - Requesting that the Department of Health (DC Health) issue a summary suspension
  - Requesting an investigation, including obtaining documents
  - Determining and entering into a private or public resolution of a complaint this
    means determining the best NSA<sup>3</sup> or Consent Order<sup>4</sup> that best fits the matter at
    hand.
  - o Determining that a formal disciplinary action is required<sup>5</sup>

<sup>&</sup>lt;sup>1</sup> "Complaints" is used generally to include any information received or obtained from any source that indicates a possible violation of the laws or regulations related to the practice of nursing and practice by nursing assistive personnel.

OTA requires applicant/licensee to respond to the complaint in writing. The regulation requires that applicant/licensee respond within 10 days. Failure to do so is a violation of the HORA and may be ground for disciplinary action.
NSA is a "negotiated settlement agreement." This is a private settlement agreement with an applicant or licensee based on terms that are determined to best address the matter at hand. For example, the Discipline Committee may decide that an applicant with more than 2 DUIs should be first evaluated by COIN (or practitioner approved by COIN) before the final decision on whether a license should be issued and if so under what terms.
A Consent Order is a public agreement with an applicant for licensee. It is similar to an NSA in that it is a mutual agreement to resolve an issue at hand. But a Consent Order must be made public and reported to the National Practitioner DataBank (NPDB). This is used when an NSA is not appropriate because there is need to inform the public – usually since health and safety of patients, clients, or the public is involved.

<sup>&</sup>lt;sup>5</sup> A formal disciplinary action is an action taken where a settlement is not possible or not desirable. Frequently, this happens after a settlement (either public or private) is proposed and offered to an applicant/licensee, who declines it and so to pursue the final outcome of a complaint, the Board must initiate a formal disciplinary action. This is initiated by the issuance of a Notice of Intent to Take Disciplinary Action (NOI) (An NOI is drafted by the Office of the Attorney General (OAG), signed by the Board Chair, and "served" on the applicant/licensee who is





- Conduct a settlement conference with an applicant/licensee as the Committee deems appropriate
- Any other decision or action that has been delegated to the Executive Director and staff

#### The Board of Nursing delegates to the EDUCATION COMMITTEE the authority to:

- Review annual reports from nursing education programs, with staff recommendation, and make recommendation to the Board for approval or other actions
- Review NAP Program applications, with staff recommendation, and make recommendation to the Board for approval or non-approval
- Review requests from education programs and make recommendation to the Board
- Consult with staff on education program-related issues and make recommendation to the Board

## The Board of Nursing delegates to the <u>Executive Director</u>, with support of the Nurse <u>Specialist for Education and other relevant staff</u>, the authority to:

- Approve curriculum changes in nursing education programs
- Accept annual reports from nursing education programs and request additions or clarifications as needed and compile the reports and present to the Education Committee with staff recommendation
- Evaluate NAP Program applications and make recommendations to the Board or Education Committee
- Approve content of action plans and to request additional information for clarification if needed
- Determine education equivalency for foreign educated nurses and applicants for licensure by examination from educational institutions external to District of Columbia
- Review and approve continuing education for District of Columbia licensed nurses.

The Board of Nursing delegates to <u>the Executive Director</u>, <u>with the support of the Nurse Specialist for Discipline</u>, <u>the CRC</u>, <u>and any other relevant staff</u>, the authority to:

Legally entitled to request a hearing. A hearing may be conducted by the Board or referred to the Office of Administrative Hearing (OAH). If a hearing is referred to the OAH, the OAH judge hearing the case can only issue a recommended decision, which comes to the Board for consideration. The Board may adopt the recommended decision in full or issue its decision (based on the record that was developed by the OAH judge) which may be similar or entirely different from the OAH's recommended decision.





- Review complaint and determine the appropriate action (ranging from closing for no violation to the specific actions listed below)
- Issue Order to Answer
- Request investigations
- Offer private NSA to applicant/licensee in compliance with the Board's Disciplinary Priorities and in the following circumstances:
  - Discipline cases for all occupations regulated by the Board of Nursing for sanctions consistent with the approved D.C. Board of Nursing Disciplinary Action Priorities and as delegated in this document.
  - Licensee who does not reveal prior criminal conviction (Board of Nursing is aware of conviction on another application, or learns of conviction from another source), offer NSA to fine and approve for licensure.
  - Action taken by another state board of nursing, staff is authorized to offer a NSA with reciprocal action or refer licensee to the Sanctions Review Committee (SRC).
  - Practicing on expired license/certificate
  - Single medication error with no patient harm
  - Continuing Education Violations
  - Single incident of exceeding scope of practice accepting assignment or agreeing to do a task without adequate training obtained or competency maintained and no patient harm
  - Inappropriate verbal response that does not rise to the level of verbal abuse
  - Failing to reveal a criminal conviction on a prior application for licensure/ certification/registration
  - During any type of case investigated, licensee indicates to the investigator the
    desire to surrender, or individual mails in license during course of the
    investigation; offer Affidavit and Letter of Voluntary Surrender for indefinite
    suspension.

Authority to modify probation, extending time for compliance (such as payment of fines or assessments, or completion of remedial education)





Authority to take the following actions on initial and reinstatement applicants:

- NSA with sanction or terms consistent with another state
- NSA to fine, for failing to reveal a criminal conviction on a prior application for licensure/certification/registration
- Request withdrawal of application if disciplined in another jurisdiction

#### Close cases in the following circumstances:

 Insufficient evidence of a violation of law or regulation, or not rising to the level of disciplinary action by the Board

### The Board of Nursing delegates to the Executive Director, professional discipline and COIN staff the authority to do the following.

#### Initiate the following COIN referrals:

- Individual referred to the Board for impairment issues, offer NSA for referral to COIN.
- Cases resulting from mandatory/self-reports of admission to hospital for mental health issues where there are no practice issues
- Cases involving a positive urine drug screen on duty for a substance not prescribed to the licensee.
- Pre-employment positive drug screen without evidence it has affected practice
- Possible impairment without evidence that it has affected practice

#### Issue NSA to:

- Reinstate and comply with COIN when a lapsed licensee was under prior order to be in alternative to discipline program
- Refer for COIN participation for individuals with impairment issues
- Reinstate and comply with COIN when a lapsed licensee was under prior order to be in alternative to discipline program
- To refer for COIN participation for individuals with impairment issues