

T H E E X A M I N E R

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Board Members

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The Mission of the Louisiana State Board of Nursing is to safeguard the life and health of the citizens of Louisiana by assuring persons practicing as Registered Nurses and Advanced Practice Registered Nurses are competent and safe.

FROM THE EXECUTIVE DIRECTOR



Welcome to 2018 and the start of what we, at LSBN, hope will be a productive and successful new year for all our constituents. Like most people, I always begin a new year with at least several resolutions designed to help me be a healthier professional, a better parent, a more caring and concerned spouse or any number of other “better

me’s.” I’m sure you also engage in this annual exercise in self-improvement. I started my journey toward improvement in 2018 by reading a wonderful article in the December 30, 2017 Saturday edition of **The Wall Street Journal** entitled *How to Be Healthier, Happier and More Productive: It’s All in the Timing* by Daniel H. Pink. Mr. Pink argues that the reason most of us are unsuccessful in keeping our New Year’s Resolutions is because we approach them with “intuitive and haphazard”¹ timing. He then goes on to demonstrate, through science, that researchers in many disciplines have demonstrated that timing shapes “productivity, health and well-being in powerful but often invisible ways.”¹

The three great conclusions demonstrated through the research are first, mental acuity does not remain static throughout the day; second, the changes in our mental functioning can be extreme, often as significant as drinking the legal limit of alcohol; and finally, how we perform depends on what we are doing and when we are doing it. There is a peak, a trough and a rebound to the timing of our day that impacts productivity. For most of us, we follow the typical day pattern of peak, from late morning to around noon, trough, early to mid-afternoon, and rebound, later afternoon to early evening. During the peak cycle, our focus is sharpest and we should concentrate on activities that require alert, vigilant analysis. Mr. Park calls the afternoon trough “the Bermuda Triangle of our days—the place where effectiveness and good intentions disappear”.¹ He advocates doing our mindless work at this time of day, those tasks which require little cognitive attention such as answering emails, filing, completing forms, etc. Finally, our creative juices flow in the late afternoon and early evening. During our rebound phase, we are more alert and open to creative pursuits such as brainstorming, designing projects and creative, as opposed to analytic, writing.

Mr. Park is also a great proponent of breaks, which he posits

help us to maintain our effort and revitalize our commitment. The best breaks are short, involve movement and include socialization. So my recommendations for a happy, healthy 2018 are get up, get out and get moving. Join your friends in walking groups at and after work. Enjoy nature and forget the daily grind. Believe me, work will still be there when you return, but you’ll be happier and able to tackle those ever-present stressors with vigor and a renewed sense of purpose.

[Update on LSBN Task Force work](#)

[Internationally Educated Nurses \(IENs\) Task Force](#)

This Task Force is under the staff direction of Dr. Cindi York, Director of RN Practice and Credentialing. At the December 14, 2017 Board meeting, she presented her review of LSBN’s credentialing process for IENs including incorporation of the NCSBN recommendations for uniform licensure requirements; utilization of a credentialing evaluation service that provides written analysis of IENs’ education and licensure in terms of US comparability; and utilization of the highest level of national standards for determining English proficiency. The report had been presented earlier to the Task Force and had its unanimous support. The Board unanimously approved the motion approving LSBN’s current credentialing process for IENs as meeting or exceeding current national standards.

[Solu-Cortef Administration Task Force](#)

This Task Force was established in response to requests from nurses to be able to delegate administration of medication, specifically solu-cortef, by unlicensed personnel to children in school settings experiencing an adrenal crisis. Dr. York is also coordinating LSBN staff response to this request. The Task Force transitioned from one looking only at solu-cortef administration to the delegation of emergency medications administration to unlicensed school employees in life threatening situations including such medications as epinephrine, glucagon, solu-cortef and diastat (list not exhaustive). A **Declaratory Statement on the Registered Nurse Delegating Medication Administration to Trained, Unlicensed School Employees in Life Threatening Situations** was presented to the Board as a major motion and the motion passed. Additionally, as part of the motion, all previously rendered practice opinions





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and declaratory statements related to Registered Nurse (RN) delegation of medication administration to trained, unlicensed school employees in life threatening situations were retracted. **A concluding statement within the Declaratory Statement reminds all RNs that it is their responsibility to determine when a life threatening situation exists and when medication administration may be delegated to trained, unlicensed school employees.**

In closing and as a celebration of 2018, I would like to quote Marie Curie, the first woman to win a Nobel Prize and the first person and only woman to win twice:

"You cannot hope to build a better world without improving the individuals. To that end each of us must work for her own improvement, and at the same time share a general responsibility for all humanity, our particular duty being to aid those to whom we think we can be most useful."

For the Public Trust,

Karen C. Lyon, PhD, APRN, ACNS_{BC}, NEA_{BC}

References

- 1. Pink, Daniel H. How to Be Healthier, Happier and More Productive: It's All in the Timing. **Wall Street Journal**, December 29, 2017. *Appeared in the December 30, 2017, print edition as 'The Timely Science of Successful Resolutions.'*

Introduction of LSBN Board Members

The Louisiana State Board of Nursing (LSBN), both by virtue of its legal status and its professional character, is dedicated to the belief that its purpose is to serve the people of Louisiana and to protect their health and welfare. The board members believe that: 1) their major responsibility is to see, in so far as possible, that those persons who practice nursing are competent and safe; 2) sound nursing education is a prerequisite for the attainment of high standards of nursing practice; and each member is obligated to demonstrate personal integrity, impartial judgment, wisdom and dedication to a high standard of service in board activities (Title 46 – Professional and Occupational Standards; Part XLVII, Subpart 2. Registered Nurses).

The board is composed of eight registered nurses appointed by the governor from a list of names submitted by the Louisiana State Nurses Association, one certified registered nurse anesthetist appointed by the governor from a list of names

submitted by the Louisiana Association of Nurse Anesthetists, Ltd., and two representatives of the consumers of Louisiana from the state at-large appointed by the governor, neither of whom shall be a nurse. Each board member shall possess all of the applicable qualifications provided in R.S. 37:916 (Louisiana Nurse Practice Act).

The LSBN Board Members possess a vast array of expertise and experiences which will be highlighted in 2018 in The Examiner beginning with the Board Officers in the January issue.

Dr. Laura S. Bonanno, DNP, PhD, CRNA, is the current President of the Louisiana State Board of Nursing (LSBN). She completed a four-year term as a board member of LSBN in 2016 and was re-appointed to a second four-year term. Dr. Bonanno is the director of the nurse anesthesia program at Louisiana State University Health New Orleans School of Nursing, and an Associate Professor of Clinical Nursing. Dr. Bonanno has been a practicing Certified Registered Nurse Anesthetist (CRNA) for 22 years. She is a part-time staff CRNA and clinical instructor at University Medical Center in New Orleans, Louisiana. Dr. Bonanno has participated in an annual surgical mission trip to Antigua, Guatemala for over 10 years.



Dr. Bonanno received a Bachelor of Science in Nursing from Southeastern Louisiana University, a Master of Science from Charity Hospital/Xavier University School of Nursing Anesthesiology, and a Doctor of Nursing Practice from the University of Tennessee Health Sciences Center in Memphis. She is currently a PhD candidate in Higher Education Administration at the University of New Orleans.

Dr. Bonanno serves as Vice-President of the Council on Accreditation for Nurse Anesthesia Educational Programs (COA). She is a member of the American Association of Nurse Anesthetists (AANA), the Louisiana Association of Nurse Anesthetists (LANA), the American Nurses Association (ANA) and the Louisiana State Nurses Association (LSNA). She has served two-terms as President of LANA (1998 & 2001) and has held numerous positions on the LANA Board of Directors. Dr. Bonanno has previously served four years on the AANA's Practice Committee and five years as an on-site reviewer for the COA.

Dr. Bonanno has been awarded millions of dollars in grant support by the Health Resources & Ser-





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Dr. Bonanno received the Louisiana Nurses Foundation Nightingale Advanced Practice Nurse of the Year award and in 2008 was named one of the Great 100 Nurses of Louisiana.

Dr. Bonanno has been married to Gary Bonanno for 16 years and they have an 11-year-old son named Christopher Thomas.

Ms. Teresita E. McNabb, RN, MSHSA, FACHE, NE-A, CLNC, serves as President Elect of LSBN. Ms. McNabb was appointed to the Board in March 2015 in one of the two positions delegated to nursing service administrators. Ms. McNabb is Vice-President of Nursing Services at Terrebonne General Medical Center in Houma, Louisiana. As Vice-President of Nursing Services, Ms. McNabb is responsible to the President and CEO for developing and implementing the hospital's strategic plan for the provision of healthcare and evaluating human and financial resources required for the delivery of care to patients in multiple settings. She oversees all of Nursing Services and receives direct reports from Anesthesia Services, Cardiac Catheterization Lab, Laboratory and Pathology, Inpatient Dialysis, Employee Health, Infection Control, Patient Placement, Outpatient Diabetes Center, Wound Care, and Infusion Therapy. Simultaneously, she is involved in a hospital-wide initiative to consistently improve patient health outcomes and ensure quality patient care in a financially constrained environment.

Ms. McNabb graduated from Louisiana State University Health New Orleans School of Nursing in 1985. She worked as a Critical Care Nurse for the first 16 years of her career before becoming a nurse administrator at Terrebonne General Medical Center. Ms. McNabb believes that the experience of working closely with her staff in a clinical environment where direct patient care is delivered, as well as having an administrative role in the provision of healthcare, gives her real time, real situation experiences to draw from when performing her duties as a member of the Board.

Ms. McNabb currently serves as the President-Elect of the Louisiana Organization of Nurse Executives. She is a mem-



ber of the American Organization of Nurse Executives, the American Nurses Association, and the American College of Healthcare Executives. Ms. McNabb also serves as the secretary of the Downtown Rotary Club of Houma.

Ms. McNabb is married to Timothy McNabb and they reside in Houma, LA. They have three children, Nikolas and Felicia Melancon, and Raven McNabb.

Mr. Tim Cotita, RN, BSN, MSHCE, holds the position of Alternate Officer of LSBN. Mr. Cotita was appointed to serve on the Louisiana State Board of Nursing in 2014 and represents other areas of nursing. Mr. Cotita has been a registered nurse for nearly 38 years and holds nursing degrees from Louisiana Tech School of Nursing, the University of Louisiana at Monroe, and a Master's Degree in Healthcare Ethics from Creighton University. He currently works as a nurse bioethicist for the Franciscan Missionaries of Our Lady Health System.



Mr. Cotita considers serving on the Board of Nursing "a great honor." Recognizing that many nurses may hold a negative view of the board, he emphasizes "as Board members, we too are nurses working to assure the safety of the public as well as promoting the safe and ethical practice of nursing."

Mr. Cotita's nursing career spans many clinical areas including pediatrics, neonatal intensive care, adult intensive care, surgery, hemo-dialysis, home health, and diabetes education. During his career Mr. Cotita has held specialty certifications in oncology, pain management, and diabetes education.

Mr. Cotita actively supports his professional organizations and is a member of the American Nurses Association (ANA), Sigma Theta Tau, and The American Society of Bioethics and Humanities. He participated in the 2015 revision to the American Nurses Association's Code of Ethics for Nurses and most recently was on the steering committee of The ANA Professional Issues Panel on Moral Resilience which produced the recent document: Call to Action: Exploring Moral Resilience Toward a Culture of Ethical Practice.

Mr. Cotita and his wife Missy have 6 children and 18 grandchildren. They enjoy photography, playing the drums, and fly-fishing.





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Chiefs Corner

Division of Nursing
Jennifer Wright, DNP, APRN, FNP, BC
Chief Nursing Officer

The Division of Nursing within the Louisiana State Board of Nursing includes the Louisiana Center for Nursing directed by Dr. Cynthia Bienemy as well as the Advanced Practice, Education/Licensure, and RN Practice/Credentialing departments which are directed by Monique Calmes, Dr. Patricia Dufrene, and Dr. Cynthia York respectively. The departments and directors are actively involved year round serving the agency and profession in a myriad of local, state, and national activities coupled with day-to-day operations.

For this quarter, we'll share a snapshot of these activities by highlighting the agency's involvement in the state's Safe Haven Consortium. Dr. Dufrene has shared her expertise as Louisiana's laws are refined which provide safe places for parents to legally and safely relinquish infants. Such laws assist parents in crisis to safely relinquish their babies to designated locations where the babies are protected and provided with care.

Dr. York spearheads the agency's renewal season which is rapidly coming to a close. Over 85% of those currently licensed in Louisiana have renewed. **If you wish to maintain an active license in Louisiana, renew before midnight (CST) January 31, 2018.**

Stay tuned to our corner for further highlights and snapshots!

Division of Administration
Isonel M. Brown, MS, MBA
Chief Administrative Officer

After years of planning, the Louisiana State Board of Nursing is happy to announce the completion of its building construction and remodeling project. The Grand Re-Opening of the new facility was held on December 14, 2017. This included a ribbon cutting ceremony, remarks and a reception.



Representative Dustin Miller, APRN, FNP, was the featured speaker who gave words of inspiration and encouragement about LSBN and the nursing community. He emphasized on how important it is to work with passion and show compassion to those in need. He also commented on the remarkably diverse workforce of LSBN's leaders and staff.

Remarks were also made by the LSBN Board President, Laura Bonanno and LSBN's Executive Director, Dr. Karen Lyon. Those in attendance included past and present LSBN Board Members, LSBN leaders and staff, and numerous nursing leaders from the community.

Following the ribbon cutting ceremony, LSBN staff gave visitors tours of the new facility and a reception was held in the new lobby.

LSBN is excited to continue its mission with a New Look for the New Year! And we thank our customers and staff for their patience throughout the construction process.





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Division of Regulation
Wanda Woods-Matthews
Chief Regulatory Officer

The Louisiana State Board of Nursing (LSBN) is regulated by the Nurse Practice Act and is charged with oversight of Registered Nurses (RNs) and Advanced Practice Registered Nurses (APRNs) and RN and APRN students (students). The Regulatory Division has 3 departments: Investigations, Hearings and RNP/Monitoring. In this edition of *The Examiner*, we will focus on the responsibilities of the Investigation Department. Investigations is responsible for investigating complaints against RNs, APRNs and students who allegedly act in violation of the Nurse Practice Act. When the board receives information alleging that a nurse or student has acted in violation of the Nurse Practice Act, the information is investigated by board staff to determine if there is sufficient evidence to warrant disciplinary proceedings.

LSBN's strategic initiatives for 2018 include improving the organization's effectiveness and efficiency by ensuring ongoing quality improvements. The Investigations Department's goal to achieve LSBN's initiative is to evaluate and revise the investigation process to ensure that investigations are closed timely to protect the public while ensuring that RNs, APRNs and students, who violate the Nurse Practice Act, are afforded the right to due process.

The Investigations Department is committed to LSBN's mission of protecting the public and will continue to evaluate our processes to ensure continuous quality improvement. The Investigations Department is also supportive of the nursing profession and is committed to improving customer service thereby improving the investigation experience.

As a final note, we are pleased to welcome our new Director of Investigations, William "Mac" Little, JD. Mac obtained a Bachelors of Arts Degree from Indiana University, a Masters of Public Administration from LSU, and a juris doctorate from Oklahoma University.





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RNP Corner

by Barbara H. McGill, MSN, RN
Director, RNP/Monitoring

As we begin 2018, I am reminded of famous musicians who have suffered from chemical dependency/substance use disorders and the ones we lost too early to this disease. For my generation, we think of Janis Joplin, Jimi Hendrix, Jim Morrison, and Elvis. The younger generations may think of Michael Jackson, Prince, and Amy Winehouse, just to name a few. Unfortunately, the list is almost endless. We will never know what music we missed out on, because they left us before their time. I also think of the musicians who are in recovery. Sir Elton John is open about his recovery of more than 25 years. We wouldn't have the award winning music from "The Lion King" if Elton John had died 25 years ago. Eric Clapton is in long term recovery of more than 30 years and he has helped so many overcome this disease, not only through his personal example, but through the treatment center he built. Keith Urban and Tim McGraw live a life of sobriety now. What if we had 20 or 30 more years from the stars that died? And these are just musicians. There is also a long list of other celebrities who died from their drug use. The sad news is they did not have to die. There is this wonderful gift out there for anyone to claim, it is called 'Recovery'.

The graduates of the Recovering Nurse Program (RNP) may not be rich and famous, but their sobriety has had a huge impact, not only on their own families, but on all the patients that they have served. There have been over 2000 graduates from the RNP program. Our graduates serve in a variety of nursing roles: staff nurses, nurse managers, directors of nursing, school nurses, professors, nurse practitioners, CRNA's, occupational health nurses, and in treatment centers helping others overcome the disease of addiction.

The RNP program is very successful. In 2017, the relapse rate for the RNP was 2%. Over the last four years, the relapse rate has been between 3 and 6 %. The success of our program stems from a combination of factors. First of all our program requires that a nurse go to a recognized treatment facility that meets our standard requirements and have specialized programs for healthcare providers. After treatment, nurses must participate in facilitated nurse support groups and attend AA or NA meetings. A program of recovery goes beyond abstinence. Robert Dupont (2014) writes in *The New Paradigm for Recovery: Making Recovery—Not Relapse—the Expected Outcome of Addiction Treatment*, "recovery also includes healthy living, wellness, and productive engagement." Dr. Dupont indicates that among physician health programs, there is a 70-96% recovery rate at five years.

Long term abstinence is best exemplified by the system of care management used for the past four decades to treat addicted physicians, commercial pilots and lawyers. This model of long-term, active care management for substance use disorders, termed the *New Paradigm*, is comparable to the way treatments for other chronic conditions today are managed in medicine. The RNP is among the leaders of helping nurses get into recovery and stay there.

Many of the nurses who enter the RNP are struggling financially. Some have lost their jobs and subsequently their medical insurance, so that paying for treatment seems impossible. I have worked with the Louisiana Nurses Foundation to set up a fund to help nurses pay for treatment. The *Sr. Lucie Leonard Recovering Nurses Program Fund* is set up to help nurses in the Recovering Nurse Program. The Fund is now set up to accept donations. You may access the donations site on the LSNA website, or contact LSNA. Have a wonderful and safe 2018.

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APRN Corner

by Jennifer Wright, DNP, APRN, FNP, BC
Chief Nursing Officer

APRNs Prescribing Controlled Substances

The 2017 legislative session in Louisiana included bills that have become laws that are now in effect and that impact APRNs who have the authority and are prescribing controlled substances. APRNs' scope of practice can be affected and defined not only by the Louisiana State Board of Nursing's (LSBN) Nurse Practice Act but also by other state and national statutes. The following provides a brief overview of two of these laws with excerpts to the language within the legislation.

Senate bill 55 (Act 76) was approved by the legislature and signed by Louisiana's governor. This statute provides for prescribers, including APRNs, to automatically be enrolled in the Louisiana Board of Pharmacy's (LBP) Prescription Monitoring Program (PMP) upon application for or renewal of the controlled dangerous substance (CDS) license issued by that regulatory agency. The statute requires that a patient's PMP be reviewed prior to prescribing of any opioid and at least every 90 days if the course of treatment expands beyond this period. Exceptions to this provision are detailed in the bill: <https://www.legis.la.gov/legis/BillInfo.aspx?i=231607>.

Furthermore, Act 76 mandates that prescribers of controlled substances in Louisiana obtain three credit hours of continuing education (CE) as a prerequisite of license renewal. Content of the CE must include drug diversion training, best practices for the prescribing of controlled substances, appropriate treatment for addiction, and any other content deemed appropriate by the regulatory agency. This is a one-time requirement under Act 76. LSBN is in the process of developing further guidelines, instructions, and rules regarding the CE requirements, so keep your email and address up to date in order to remain informed and in compliance with the mandates of Louisiana's statutes. Stay tuned to your emails and LSBN's website for further information regarding these matters.

House bill 192 (Act 82) was approved by the legislature and signed by Louisiana's governor. This statute specifically prohibits prescribers in Louisiana, including APRNs, from prescribing more than a seven-day supply when issuing a first-time opioid prescription for outpatient use to an adult patient with an *acute* condition. Per Act 82 prescribers in Louisiana are also prohibited from issuing a prescription for more than a seven-day supply of an opioid to a minor at any time and requires that the prescriber discuss with a parent, tutor, or guardian of the minor the risks associated with opioid use and the reasons why the prescription is necessary. Exemptions are delineated in the law: <http://www.legis.la.gov/legis/BillInfo.aspx?s=17RS&b=HB192&sbi=y>.

Furthermore, prior to prescribing an opioid, the statute requires a prescriber to consult with the patient regarding the quantity of the opioid and the patient's option to fill the prescription in a lesser quantity and to inform the patient of the risks associated with the opioid prescribed.

APRNs in Louisiana are prohibited by current regulations from prescribing controlled substances for non-cancer-related chronic pain in any setting or situation (referenced in LAC 46XLVII:4513D.2.b.i.a. and LAC 46XLV:6515-6923). Nothing within the two statutes discussed in this article provides for exceptions to this prohibition for treatment of chronic pain with controlled substances.

Prescription Monitoring Program

Don't wait to enroll in and utilize the PMP program. The LBP recently sent letters to prescribers who currently have a CDS license and who have not yet enrolled in the PMP. If you received such a letter, follow the instructions and enroll today or contact the LBP for further instructions. The LSBN fully supports and encourages use





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of the PMP.

Per a previous article in a 2013 edition of *The Examiner*, the LBP developed and operates a state-of-the-art electronic system, the PMP, that monitors controlled substances and other drugs of concern dispensed in the state or to an address within the state and now has expanded its technology to include access to data regarding dispensing from other participating states. The goal is to inhibit and identify the abuse and diversion of such drugs. This program assists APRNs and other prescribers with controlled substance privileges to utilize their prescriptive authority in a prudent and responsible manner.

Some of the specific benefits to enrolling in the PMP include:

- Prescribers can verify details regarding the controlled substance prescriptions that have been provided to specific patients;
- Compliance with pain management contracts can be verified;
- Prescribers can verify the controlled substance prescriptions that are being filled that are affiliated with their DEA registration numbers to clarify patterns, identify potential fraud, and correct discrepancies;
- Prescribers have an opportunity to identify and assist patients with addiction and substance abuse disorders;
- Patterns of “doctor shopping” can be identified. A definition of “doctor shopper” is defined in LA R.S.40:971.B(1)(i) and is considered unlawful.

The program is available to APRNs to be used as an extremely valuable tool in serving and protecting the health care needs and welfare of the citizens of Louisiana. The PMP also assists in maintaining the integrity of prescribing practices. Contact the LBP and visit their website for more information.





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Can States Rely on National Nursing Workforce Supply and Demand Forecasts to Determine If There is a Nursing Shortage in Their State?

by Cynthia Bienemy, PhD, RN
Director, Louisiana Center for Nursing

When national presentations are given about nursing workforce projections, the presenters usually end by saying that additional research needs to be done and that the numbers may not reflect all states, especially those states that have good state level nurse supply, demand, and education capacity data. I tend to question some of the assumptions on which national forecast models are built because they begin with a small sample size which they feel is representative of the state and go on to make additional assumptions about the state level nursing workforce that may or may not be accurate. For example, the Health Resources and Services Administration's (HRSA) 2014 and 2017 nurse supply and demand projections were based on the assumption that RN demand in 2012 and 2014 was equal to RN supply. The 2012-2025 HRSA projections (2014) predicted that there will be a surplus of 18,200 RNs in Louisiana by 2025 and the 2014-2030 HRSA projections (2017) predicted a surplus of 2,300 RNs by 2030. Although both sets of projections indicated a surplus of RNs, which is in contradiction to our state level projections, I have to ask what happened in two years for the HRSA projections to go from a surplus of 18,200 RNs in 2025 in Louisiana to a surplus of 2,300 RNs in 2030. According to Louisiana's Multi-Regional Statewide Nursing Workforce Forecast Model (2013), in 2012 the RN nursing supply in Louisiana was 39,016 full-time equivalents (FTEs) and nurse demand was 42,995 FTEs which represents an unfilled gap of 3,979 RNs (2013). In 2014, RN Supply was 41,393 FTEs and RN Demand was 45,982 FTEs which is equivalent to an unfilled gap of 4,589 RNs (Louisiana Center for Nursing, 2014). Based on quantitative state level data collected through licensure renewal, from employers of nurses, and schools of nursing, and qualitative data obtained from chief nursing officers and healthcare administrators, these numbers appear to be very reasonable.

The HRSA (2014, 2017) models are also based on the assumption that RNs will continue to train at the current levels. Between 2012 and 2016, the number of students admitted to Louisiana's pre-RN programs decreased by 15% and the number enrolled in clinical nursing courses decreased by 12% (Louisiana Center for Nursing – Nursing Education Capacity in Louisiana, 2016). In the same time period, there was a 10% decrease in the number of graduates from Louisiana's pre-RN programs. There is also a growing concern about faculty attrition related to retirement and the lack of qualified candidates available and willing to fill vacant faculty positions. In 2016, 55% of the faculty teaching in Louisiana's pre-RN programs were 51+ years, and 22% were 61+ years. Yet there were only 41 students enrolled in Louisiana's graduate nursing programs with a focus on nursing education in 2016 compared to 1,247 students enrolled in Louisiana's APRN programs.

Similarly, there is a growing concern that we may be facing massive retirement among RNs both at the national and state level. In 2014, 16% (8,653) of the licensed RNs residing in Louisiana were 60+ years. These nurses will be retiring soon. Will we have the nursing workforce prepared to take their place?

In addition to the ongoing changes that are taking place within the nursing workforce, the complexity of our ever-changing healthcare system also has a tremendous impact on nursing workforce supply and demand. For example, in 2015 and 2016 respectively, two major hospitals built new facilities in New Orleans post-Katrina and re-opened their doors: University Medical Center of New Orleans (2015), and the Southeast Louisiana Veterans Medical Center (2016). The re-opening of these major healthcare facilities has the potential to shift nursing supply and demand in Louisiana tremendously both at the state and regional levels.

The question becomes, are we willing to base important policy decisions about Louisiana's nursing workforce on national forecasts? The purpose of this article was to illustrate how important it is to use state level data when forecasting the supply and demand for nurses at the state and regional level. Louisiana is very fortunate in that we do have excellent nursing workforce data, but there are many states that are not as fortunate, and in those instances, national data is a viable alternative. Yet, even those states should treat forecasts based on national models somewhat cautiously and use them as guides to policy rather than seeing them as definitive future outcomes.





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Major Motions and Other Actions
Taken at the August 10, 2017 Board Meeting

1. Consent Agenda Motions:

1. LSBN Staff Program Status Reports
 1. NCLEX Report
 2. Accreditation Reports
2. Approved Program Reports
 1. McNeese State University - CCNE Correspondence
 2. Bossier Parish Community College - ACEN Correspondence
 3. Herzing University - CCNE Correspondence
 4. Southern University - SACSCOC Warning
3. Request for Continuing Education Providership
 1. Women’s and Children’s Hospital
4. Education Announcements

Motion to approve the Consent Agenda

Motion carried

EDUCATION

Motion to accept Baton Rouge General Medical Center’s report and action plan regarding the probationary status of the Diploma program.

Motion carried

Motion to accept Dillard University’s report and action plan regarding the probationary status of the Baccalaureate of Science in Nursing education degree program.

Motion carried

Motion to accept the Franciscan Missionaries of Our Lady University’s report and action plan regarding the probationary status of the Baccalaureate of Science in Nursing education degree program.

Motion carried

Motion to accept Louisiana College’s report and action plan regarding the probationary status of the Baccalaureate of Science in Nursing education degree program.

Motion carried

Motion to accept Southern University at Shreveport’s report and action plan regarding probationary status of the Associate of Science in Nursing education degree program.
Motion carried

Motion to approve the major/substantive change request from Herzing University to add a Post Master’s Certificate Family Nurse Practitioner to the current approval to offer clinical experiences for the role/population of FNP (MSN).
Motion carried

Motion to approve the request of Bradley University to offer graduate clinical experiences in Louisiana until August 10, 2020 for the following roles/populations:
Family Nurse Practitioner (FNP) – Master’s, Post Master’s (PMC).
Motion carried

Motion to approve the request of Simmons College to offer graduate clinical experiences in Louisiana for the role and population of Family Nurse Practitioner (BSN-MSN, RN-MSN).
Motion carried

RN CREDENTIALING/ PRACTICE

Motion to approve a change to the Declaratory Statement on the Registered Nurse Transporting Critically Ill Neonates so that Position Statement 4 on page 3 reads:

“4) That as of January 1, 2020, any neonatal RN who participates on the critically ill neonate transport team, should have obtained at least a BSN degree. Any neonatal RN that has functioned on the critically ill neonate transport team prior to January 1, 2020 and has demonstrated necessary knowledge, skills and abilities, may continue to practice at their existing level of education”.

Motion carried

ADVANCED PRACTICE

Motion to approve the following rule change: “ii. any APRN authorized by the Board to prescribe controlled substances shall comply with provisions in 21 U.S.C. §821-831 including but not limited





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to obtaining and possessing an active Louisiana controlled dangerous substance license and Drug Enforcement Administration registration number prior to prescribing or distributing controlled substances;”

Motion carried

OPERATIONS

Motion to accept and approve the following LSBN Board Resolution:

On the 10th day of August 2017 at a meeting of the Board of Directors of the Louisiana State Board of Nursing, with a quorum of the directors present, the following business was conducted:

“It was duly moved and seconded that the following resolution be adopted:

“BE IT RESOLVED that the Board of Directors of the Louisiana State Board of Nursing hereby accepted and approved the Louisiana Compliance Questionnaire for the period ending June 30, 2017 as a component of LSBN financial audit.

“I certify that the above and foregoing constitutes a true and correct copy of a part of the minutes of a meeting of the Board of Directors of the Louisiana State Board of Nursing. “

Motion carried

OFFICE OF THE GENERAL COUNSEL

Motion to accept the proposed revision of Chapter 33, Section 3331 of the Louisiana Administrative Code, Professional and Occupational Standards Title 46 XLVII. Nurses: Practical Nurses and Registered Nurses, Subpart 2. Registered Nurses.

Motion carried

OFFICE OF THE EXECUTIVE DIRECTOR

Motion to approve the Contract for Prospective Payment Supplement to the Executive Director as revised and to adopt the following Resolution:

“WHEREAS, at the February 16, 2017, meeting of the Board Members of the Louisiana State Board of Nursing, the Board approved a Prospective Payment Supplement to Karen C. Lyon, Ph.D., APRN, NEA (“Dr. Lyon”), Executive Director of the Louisiana State Board of Nursing;

“WHEREAS, as discussed at the August 10, 2017, meeting of the Board Members of the Louisiana State Board of Nursing, it was necessary to revise the Contract for Prospective Payment Supplement to amend the description and anticipated completion dates of the projects for which the prospective payment supplement was approved;

“WHEREAS, at the August 10, 2017, meeting of the Board Members of the Louisiana State Board of Nursing, the Board was presented with a revised draft of the Contract for Prospective Payment Supplement;

“WHEREAS, at the August 10, 2017, meeting of the Board Members of the Louisiana State Board of Nursing, the Board approved the Contract for Prospective Payment Supplement as revised;

“BE IT RESOLVED, that the Board hereby authorizes and empowers **Laura S. Bonanno, DNP, CRNA**, President, Louisiana State Board of Nursing, to execute the Contract for Prospective Payment Supplement with Dr. Lyon.”

Motion carried

Motion to accept the 2018 Meeting Schedule

Motion carried

Motion to accept the August 2017 Executive Director, President and Vice President’s reports

Motion carried

Major Motions and Other Actions
Taken at the November 14, 2017 Board Meeting

READING OF THE MINUTES

Motion to approve the Minutes of the August 20, 2017 Board Meeting.

Motion carried

EDUCATION

Motion to accept the Consent Agenda Motions

1. Consent Agenda Motions:

1. LSBN Staff Program Status Reports
 1. NCLEX Report
 2. Accreditation Reports
2. Approved Program Reports
 1. Dillard University - Site Visit
 2. Delgado Community College - ACEN Correspondence
 3. South Louisiana Community College - ACEN Correspondence
3. Education Announcements. Board Discussion of SLCC Announcement of LPN - RN Program at Opelousas.

Motion carried

Motion to accept Baton Rouge General Medical Center’s report and action plan regarding the probationary status of the Diploma program.

Motion carried





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Motion to accept Dillard University’s report and action plan regarding the probationary status of the Baccalaureate of Science in Nursing education degree program.

Motion carried

Motion to accept the Franciscan Missionaries of Our Lady University’s report and action plan regarding the probationary status of the Baccalaureate of Science in Nursing education degree program.

Motion carried

Motion to accept Louisiana College’s report and action plan regarding the probationary status of the Baccalaureate in Science in Nursing education degree program.

Motion carried

Motion to accept Southern University at Shreveport’s report and action plan regarding probationary status of the Associate of Science in Nursing education degree program.

Motion carried

Motion to approve the request of Samford University for a major curriculum/substantive change to add the following role and populations to their current approval to offer Advanced Practice Registered Nurse (APRN) clinical experiences in Louisiana:

Family Nurse Practitioner (FNP) BSN-DNP

Motion carried

Motion to defer action on the request of Samford University for a major curriculum/substantive change to add the following role and population to their current approval to offer Advanced Practice Registered Nurse clinical experiences in Louisiana until a task force is formed to further study the ability to approve the dual role:

Family Nurse Practitioner/Emergency Nurse Practitioner (Dual Role-FNP/ENP)

Motion carried

Motion to re-approve the request of Alcorn State University to offer graduate clinical experiences in Louisiana until October 19, 2020 for the following roles/populations:

MSN, PMC
Family Nurse Practitioner (FNP)

Motion carried

Motion to re-approve the request of Georgetown University to offer graduate clinical experiences in Louisiana until December 14, 2020 for the following roles/populations:

MSN
Family Nurse Practitioner (FNP)
Certified Nurse Midwife/Women’s Health Nurse Practitioner (Dual CNM/WHNP)
Adult Gerontology Acute Care Nurse Practitioner (AGACNP)
Women’s Health Nurse Practitioner (WHNP)

Motion carried

Motion to re-approve the request of Graceland University to offer graduate clinical experiences in Louisiana until December 14, 2020 for the following role/population:

MSN
Family Nurse Practitioner (FNP)

Motion carried

Motion to re-approve the request of the University of Alabama at Birmingham to offer graduate clinical experiences in Louisiana until December 14, 2020 for the following roles/populations:

MSN
Adult- Gerontology Primary Care Nurse Practitioner (AGNP) with Women’s Health Nurse Practitioner (WHNP) Dual

Pediatric Primary Care/ Pediatric Acute Care Nurse Practitioner (PNP/ PNP-Acute Care)

MSN, Post BSN-DNP
Family Nurse Practitioner (FNP)

Adult- Gerontology Acute Care Nurse Practitioner (AGACNP)

Adult- Gerontology Primary Care Nurse Practitioner (AGNP)

Women’s Health Nurse Practitioner (WHNP)
Psychiatric/ Mental Health Nurse Practitioner (PMHNP)

Pediatric Primary Care Nurse Practitioner (PNP)

Neonatal Nurse Practitioner (NNP)

Motion carried

Motion to re-approve the request of Vanderbilt University to offer graduate clinical experiences in Louisiana until December 14, 2020 for the following roles/populations:





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- MSN, PMC
Adult Gerontology Acute Care
Nurse Practitioner - AGACNP
- Adult Gerontology Primary Care Nurse Practitioner
- AGPCNP
- Family Nurse Practitioner - FNP
- Neonatal Nurse Practitioner –NNP
- Nurse-Midwifery-NMW
- Nurse-Midwifery/Family Nurse Practitioner Dual
Specialty -NMW/FNP
- Pediatric Nurse Practitioner - Acute Care PNP
- Pediatric Nurse Practitioner - Primary Care PNP
- Psychiatric Mental Health Nurse Practitioner—PM
HNP (Lifespan)
- Women’s Health Nurse Practitioner-WHNP
- Adult Gerontology Primary Care Nurse Practitioner/
Women’s Health Nurse Practitioner (AGNP/WHNP
Dual)

34, Sections 3405(A) and .3415, relative to suspensions and revocations of registered nurse and advanced practice registered nurse licenses and for reinstatement of suspended or revoked registered nurse and advanced practiced registered nurse licenses.

Motion carried

Motion to accept the report of the President, Vice President and the Executive Director.

Motion carried

Disciplinary Matters

The LSBN took a total of 32 actions at the September 20, 2017 hearing panel. For a complete listing click the link below:

[September 20, 2017](#)

The LSBN took a total of 17 actions at the October 18, 2017 hearing panel. For a complete listing click the link below:

[October 18, 2017](#)

The LSBN took a total of 26 actions at the November 15, 2017 hearing panel. For a complete listing click the link below:

[November 15, 2017](#)

Motion carried

Motion to approve Step II of the request of Chamberlain University’s College of Nursing to establish a Bachelor of Science in Nursing degree program and grant initial approval.

Motion carried

Motion to accept Baton Rouge General Medical Center’s School of Nursing termination plan for the diploma registered nurse program.

Motion carried

OPERATIONS

Motion to accept and approve the FY 2017 Financial and compliance audit report.

Motion carried

OFFICE OF GENERAL COUNSEL

Motion to approve as amended the proposed rules (see attached) in accordance with the Louisiana Administrative Procedure Act (La. R.S. 49:951-968) and La. R.S. 37:918(6)(7)(12) of the Louisiana Nurse Practice Act, providing for revisions to Title 46, Part XLVII, Subpart 2, Chapter

2018 State Holiday Schedule

Mardi Gras.....	February 13
Good Friday.....	March 30
Memorial Day.....	May 28
Independence Day.....	July 4
Labor Day.....	September 3
Veterans Day.....	November 12
Thanksgiving Day.....	November 22
Christmas Day.....	December 25

Future Board Meeting Dates

- February 22, 2018
- April 12, 2018
- June 14, 2018
- August 9, 2018
- October 11, 2018
- December 13, 2018

