

T H E E X A M I N E R

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FROM THE EXECUTIVE DIRECTOR



2-YEAR BIENNIAL LICENSURE RENEWAL FOR YOUR 2018 RN/APRN LICENSE IS HERE.

By the time you read this newsletter, the 2018 licensure renewal cycle will have begun. The transition to a 2-year license became effective with LSBN's license renewal period that began October 1, 2017 for your

2018 active license. LSBN joins 45 other states which currently have biennial licensure. LSBN is using a graduated system to move all licensees to the new biennial system. As a reminder, licensees whose last name begins with the letters A-M will renew during the 2018 renewal season and will be renewing their licenses for a 2-year period. Such biennial licenses will be active from January 1, 2018 and expire on December 31, 2019. Licensees whose last name begins with the letters N-Z will renew during the 2018 renewal season and will be renewing each of their licenses for a 1-year period with renewed licenses active from January 1, 2018 and expiring December 31, 2018. Licensees whose last name begins with the letters N-Z will begin biennial renewal processes next year during the 2019 renewal season that begins in October 2018. Using this method, by renewal year 2019, we will be renewing half of our licensees each year for a 2-year cycle. Information and FAQs related to licensure renewal can be found at <http://www.lsbn.state.la.us/Licensure.Renewals/Renewals.ContinuingEducation.aspx>.

Update on Task Force work

Internationally Educated Nurses Task Force

This Task Force is under the staff direction of Dr. Cindi York, Director of RN Practice and Credentialing. Board members serving include Teresita McNabb and Tim Cotita. The group has met once to discuss issues facing LSBN in the licensing of foreign-educated nurses, most specifically English proficiency and changes in H1B visa eligibility and processing. Dr. York attended the CGFNS 9th International Distinguished Leadership Symposium in Philadelphia on September 18, 2017 and will be scheduling a follow-up meeting in the near future.

Task Force on Capacity and Clinical Availability

The Task Force on Capacity and Clinical Availability is under the Direction of Dr. Patricia Dufrene, Director of Education and Licensure. Board members serving on the TF include President, Dr. Laura Bonanno and Vice President, Teresita McNabb, who is chairing the committee. Community representatives include Dr. Dana Clawson, President of LACANE and Paul Salles, CEO of Louisiana Hospital Association (LHA). The last meeting was held on July 7, 2017 at LSBN offices. Issues discussed included the need to be proactive in coordinating clinical placements between hospitals, the Board's role in the clinical coordination process for pre-licensure programs and anti-trust concerns related to restriction of out-of-state nursing programs entering the Louisiana nursing education marketplace given their compliance with all other requirements of law and rules. The next meeting is scheduled for September 29, 2017 at the LHA offices.

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, to unlicensed personnel for administration to children in school settings. Dr. York is also coordinating LSBN staff response to this request. The first meeting is scheduled for October 10, 2017.

Chapter 33: §3331 Task Force

The Task Force assigned to reviewing and revising LAC 46: XLVII.Subpart 2. §3331. Denial or Delay of Licensure, Licensure by Endorsement, Reinstatement, or the Right to Practice Nursing as a Student Nurse completed its work and presented the final revisions to the LSBN Board at the August 10, 2017 meeting. Generally, language was changed to allow the Board to have greater discretion in applying discipline to applicants for nursing licenses or students applying for the right to practice as a student nurse who have pled guilty to, nolo contendere, or "best interest of" to, or the equivalent thereto in jurisdictions other than Louisiana or who have been convicted of committing, attempting to commit, or conspiring to commit certain violent crimes, crimes of misappropriation or offenses which relate directly to the practice of healthcare, nursing or the public's health, safety or welfare. The revisions were approved unanimously and





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will proceed through the normal rulemaking process.

Other Board Business

I attended the Tri-Regulator Symposium July 24-26, 2017 in Chicago. This symposium, which is held every two years, brings together medical, pharmacy, and nursing regulators that belong to the Federation of State Medical Boards, the National Council of State Boards of Nursing and the National Association of Boards of Pharmacy. The main topics were the opiate epidemic and immigration. The keynote speaker was Dr. Kahn who is the Executive Vice President of the Council of Medical Specialty Regulatory groups.

President Bonanno and I served as delegates to the National Council of State Boards of Nursing (NCSBN) Annual Meeting and Delegate Assembly August 15-18, 2017. Bylaws were amended to include a new category of member, the Exam User Member, which is a jurisdictional board of nursing that has an organizational mandate exclusively related to the regulation of the profession and protection of the public and uses the pre-licensure exam developed by NCSBN. Additionally, Article III, Section 2 revises qualifications of all current Member Boards in that they shall continue as a Member Board for five (5) years from the adoption of this amendment by which time all Member Boards must fully meet the requirements of full participation in Nursys® to remain a Member Board, otherwise they will be re-categorized as an Exam User Member. Finally, members of the Leadership Succession Committee shall be revised from an all-elected membership to elected members from the 4 Areas and appointed at-large members. This becomes effective in the 2018-2020 cycles.

In closing this quarter, I would like to quote Michelangelo, considered by many to be the greatest artist of all time and the quintessential Renaissance Man:

“The greatest danger for most of us is not that our aim is too high and we miss it, but that it is too low and we reach it.”

For the Public Trust,

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

Introduction of New LSBN Chiefs

LSBN has engaged in formal restructuring of its executive team including aligning all departments under 3 Divisions: Operations Division, Nursing Practice Division and Regulatory Division. Each Division is headed by a Chief and department directors and section managers report to that individual. Serving as Chief Administrative Officer responsible for accounting and finance, human resources, training and development, information technology, records management, facility management and security will be **Ms. Isonel Brown**. **Dr. Jennifer Wright** will serve as Chief Nursing Officer responsible for the departments of RN practice and credentialing, education and licensure, advanced practice and the Center for Nursing. **Ms. Wanda Woods-Matthews** will serve as Chief Regulatory Officer and will be responsible for investigations, hearings, monitoring and the Recovering Nurse Program. Please join me in congratulating these new members of the LSBN Executive Office.

Hired in May 2012, **Isonel M. Brown** has been promoted to Chief Administrative Officer. Isonel provides oversight and leadership to LSBN’s business operations including, but not limited to: Accounting/Finance, Human Resources, Training/development, Information Technology, Facility Management, Records Management, Risk Management and Security.



Isonel earned both a Master of Business Administration (2009) and a Master of Science in Vocational Education (1996) from Louisiana State University – Baton Rouge. She has earned a Professional Trainer Certification from the University of Southern

Mississippi. She was honored by the Baton Rouge Business Report as a “Top 40 under 40” and is an alumnus of the Council For Better Louisiana “Leadership Louisiana” class.

Firmly rooted in her commitment to service, Isonel is dedicated to public service and brings 20+ years of management and leadership experience from nonprofits and quasi-governmental agencies such as Girl Scouts, CASA, LANO, United Way and West Virginia Department of Health and Hospitals.

As Chief Administrative Officer and member of the executive leadership team, she will work to ensure operational effectiveness and organizational success.





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Dr. Jennifer Wright graduated with her Bachelor's degree in Nursing from Southeastern Louisiana University in Hammond, LA in May, 1991. She graduated from Northwestern State University in Shreveport, Louisiana with her Master's in Nursing in the Family Nurse Practitioner track in May, 1996 and completed the Doctor of Nursing Practice degree at Loyola University New Orleans in May, 2016 where she focused on executive leadership and policy making processes and was awarded the Nightingale Award for excellence in academics.



Dr. Wright's background as an RN and FNP in direct patient care includes over 25 years of experience in the areas of critical care and primary and urgent care settings in Louisiana, California, and New Mexico. She is experienced in credentialing and practice issues as well as consultation regarding education, practice, disciplinary actions, and investigations of complaints directly involving licensees. She brings skills in public presentations and development of continuing education programs as well as working in concert with stakeholders on matters of mutual interest.

Dr. Wright is actively involved with local and national organizations dedicated to initiatives for the Future of Nursing Campaign and organizations dedicated to regulatory excellence. As the Chief Nursing Officer she will utilize expertise to serve the Executive Director in carrying out the mission of the agency.

On September 11, 2017, **Wanda Matthews** assumed the position of Chief Regulatory Officer with the Louisiana State Board of Nursing (LSBN). Ms. Matthews previously served as Director of the Hearings Department. As Chief Regulatory Officer, Ms. Matthews will provide leadership, direction and administration of three departments involved in investigations, hearings, the Recovering Nurse Program and monitoring for the Registered Nurse/Advanced Practice Registered Nurse profession in the State of Louisiana.



Prior to joining LSBN, Ms. Matthews was employed with the Louisiana Workforce Commission (LWC) as a Program Advisor and was responsible for auditing and monitoring LWC's grantees. Ms. Matthews also worked in the banking industry in various positions, obtained her Series 7 & 66 licenses, and was last employed as an Investment Associate with

JPMorgan Securities responsible for advising clients with investment relations on asset allocation and portfolio construction. Prior to relocating to Louisiana, Ms. Matthews was employed with Texaco Gas Marketing Inc. in Houston, Texas, in various positions including, but not limited to, Contract Administrator, Quality Coordinator, and Marketing Representative.

Ms. Matthews obtained her Bachelor of Business Administration/Marketing Degree from Houston Baptist University and obtained her Master of Public Administration Degree from Louisiana State University.

Ms. Matthews has served as a community volunteer with Family Services of Greater Baton Rouge as Board President, Vice President and Treasurer. Ms. Matthews also volunteered as a Court Appointed Special Advocate (CASA) and served as a CASA Board Member.

Announcements

LSBN Staff and Board Serving on NCSBN Committees

- Ms. Teresita McNabb**, Vice President, LSBN, NCLEX Item Review Subcommittee
- Dr. Karen Lyon**, Executive Director, reappointed to the Finance Committee
- Dr. Cynthia Bienemy**, Director Louisiana Center for Nursing, reappointed to the Institute of Regulatory Excellence Committee
- Dr. Patricia Dufrene**, Director Education/Licensure, elected as Member at large on the Leadership Succession Committee
- Ms. Barbara H. McGill**, Director of Monitoring/RNP, Standards Development Committee
- Dr. Cynthia York**, Director of Practice/Credentialing, reappointed to the Awards Committee





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RNP Corner

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

National Recovery Month

Every September, the Substance Abuse and Mental Health Services Administration (SAMHSA) (<https://samhsa.gov>) within the U.S. Department of Health and Human Services (HHS) sponsors **National Recovery Month** to increase awareness of recovery and other behavioral health conditions. This observance promotes the belief that behavioral health is essential to overall health, prevention works, treatment is effective, and people can and do recover from mental and substance use disorders.

As Director of the Recovering Nurse Program (RNP), I have witnessed the positive reality of recovery. Nurses (and all individuals) who move from abstinence to embrace recovery, achieve improved mental and physical health and form stronger relationships with their neighbors, family members and peers. We need to make more people feel as though recovery is possible.

Mental and/or substance use disorders affect people of all ethnicities, ages, genders, geographic regions and socioeconomic levels. They all need to know that help is available. These individuals can get better, both physically and emotionally, with the support of a welcoming community. We can all find hope and spread the message that recovery works by celebrating our graduates and the annual National Recovery Month to honor individuals and families who are in long term recovery.

I would like to share some statistics with you about nurses in the RNP. The Louisiana State Board of Nursing's RNP program has been around for more than 30 years. More than 1,400 nurses have graduated from the RNP. Sound modest? Think about this, if each nurse practiced an average of 20 years after getting clean and sober (the average age for entry is about 35), we have provided more than 56,000,000 (yes, that is 56 million) hours of safe and sober nursing practice. And individually, the lives and careers that have been saved are priceless. Our recovery rate for the past three years has been between 94% to 97%, which is absolutely fantastic.

Here are a few testimonials of some of our graduates:

"Thanks for everything. Everything the RNP has asked me to do has helped me. I have a great sponsor and I'm working the steps. AA is great... I think the RNP is well structured and does facilitate my recovery. Best of all I'm very happy and my life is good."

"My time in the Recovering Nurse Program has been life-changing. I am grateful for the lessons learned and have every intention of continuing my life in recovery with the supports that have been built during these past years. I do not know that I would gotten the AA program without the Nursing Board having been a 'power greater than myself'. The life I have and love today would not exist without the Recovering Nurse Program, and I have a heartfelt appreciation to the program that has done so much for so many."

"My experience in the RNP was not only life changing for myself but for my family as well. When I entered the RNP, I was concerned that I would not be up to the challenge. The tools I learned in treatment and through the RNP were priceless. I learned to look at my alcoholism as a disease and not a matter of will-power. Treating it as a disease, practicing the 12 steps and working with my sponsor gave me an above average chance of being successful. Like any other disease, I must treat it daily for it to stay in remission. I learned how to not just stop drinking but to actually be sober. I found the staff of the RNP to be kind, compassionate and helpful from the very start. I was overwhelmed thinking about all the things I was going to have to do in order to be compliant. The RNP staff gave me direction and helped me to structure my life in order to be successful. There is no doubt in my mind that if I had not accepted this life changing opportunity I would not have survived much longer."





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“This fall I will celebrate 5 glorious years of the recovery process.”

“My relationships with my friends and loved ones have improved drastically. I now know my self-worth, understand the power in humility, and can live up to my true potential. I can now accept my addiction as a lifelong disease that requires daily work. I have been given the tools necessary to deal with the stressors that come with the life from my aftercare counselors, my sponsor and RNP facilitator. I have a healthy balanced life physically, mentally, emotionally and spiritually. I believe in the recovery process and know that it works if you work it. Above all, I am grateful.”

And there are so many more, we don't have room for but a few. In addition to written statements, we receive phone calls, such as the one I received from a 34 year old nurse the week after New Year's, she said: I just wanted to thank you. I spent this New Year's Eve and New Year's Day sober, for the first time in 17 years. Or the e-mail I received which simply said “Thank you for saving my life 22 years ago.”

I hope that you will all join me in celebrating all those in Recovery, especially our nurses.

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

APRNs Assessing, Diagnosing, and Treating Psychiatric Mental Health Conditions

This agency has received inquiries regarding the role and scope of practice of APRNs who provide services to patients with psychiatric mental health conditions. The most common questions received in this agency relate to whether or not and to what extent an FNP (and other NPs who are not licensed as psychiatric mental health nurse practitioners) can provide and manage such care, especially in facilities that primarily provide or are otherwise focused upon providing psychiatric and mental health services. The utmost priority is ensuring that persons with mental health conditions receive accurate diagnoses and are prescribed evidence-based treatments by competent providers who are providing services within their authorized scope of practice. The following is offered in order to clarify the services an APRN in Louisiana may provide relative to mental health care.

The scope of practice of an APRN is not influenced exclusively by the health care setting but is defined to a greater degree by the services provided which must be based on the patient's needs. Firstly, APRNs are licensed and authorized in Louisiana to provide services within a specific **role** (clinical nurse specialist-CNS; certified nurse midwife-CNM; certified registered nurse anesthetist-CRNA; or certified nurse practitioner-CNP) and **population** focus (i.e. family, pediatrics, psychiatry, etc.) that is consistent with their education and certification. CNP education and certification is further delineated by an acute or primary care role. Though all APRNs are educationally prepared to some degree to assess for mental health disorders, there is a difference in the breadth and depth of education, ability, and authorization to assess and treat such conditions.

APRNs who are educated, board certified, and licensed as psychiatric mental health nurse practitioners (PMHNPs) or psychiatric mental health clinical nurse specialists (PMHCNSs) have received education focused upon this specific population and are authorized to perform a full biopsychosocial assessment and provide a treatment plan for management of mental health care needs which is based on the assessment and diagnoses. An APRN who is board certified and licensed in a different population and who is not also formally educated, board certified, and licensed as a PMHNP or PMHCNS (i.e. an FNP, ANP, WHNP, Adult Health CNS, etc.) is generally educated to provide evaluation as well as management of common, stable, uncomplicated, non-complex mental health conditions (i.e. depression, anxiety, etc. in the absence of multiple comorbid mental health related conditions). The exceptions to this are APRNs who are licensed in acute care roles considering they are educated to identify and stabilize **acute**, complex psychiatric mental health conditions. Additional consideration is given to CNPs and CNSs who have the education, certification, and licensure as well as the knowledge, skill, and ability to manage gerontological primary care populations





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that may have associated complex mental health conditions (i.e. behavioral disturbances, dementia, neurodegenerative conditions, etc.) that are a standard component of managing the gerontological population.

Screening tools can assist in evaluating patients for psychiatric conditions. However, positive screening must be followed up with a diagnostic assessment by a licensed provider who is authorized to provide full biopsychosocial including psychiatric assessments. Screening tools may not be appropriate in certain situations such as for some patients who have previously been diagnosed with mental health issues. Additionally, an APRN who is not licensed as a PMHNP or PMHCNS (or in a role or population related to the exception and consideration discussed above) is not typically an appropriate provider to perform the initial evaluation of patients seeking care at a facility that primarily provides or is otherwise focused upon providing psychiatric and mental health assessments/services.

Current laws in Louisiana provide for circumstances under which CNPs may issue or otherwise execute an emergency certificate when, after examination, the CNP determines a person to be dangerous to self or others or to be gravely disabled (see applicable statutes i.e. L.A.R.S. 28:53). Such emergency certificates allow providers who possess the knowledge, skill, and ability to identify the presence of serious mental illness or substance abuse which requires immediate psychiatric treatment including civil commitment. Referral to and prompt follow up by appropriate, qualified, competent providers is imperative when and after issuing an emergency certificate and when patients demonstrate suicidal or homicidal ideation; acute psychosis, delusions, and/or hallucinations (that are not primarily due to a medical illness, substance, or other secondary cause); and other complex mental health conditions.

It is within the scope of practice of PMHNPs and PMHCNSs to manage the ongoing psychiatric care of patients in an inpatient, psychiatric setting, including the provision of acute psychiatric care. APRNs and CNSs previously described who have the education, certification, and licensure as well as the knowledge, skill, and ability to manage gerontological primary care populations may also manage associated complex mental health conditions related to the gerontological population in an inpatient, psychiatric setting. APRNs licensed in other primary roles or acute care roles may manage the medical issues of psychiatric patients that are otherwise within their scope of practice (i.e. diabetes, hypertension, upper respiratory illness, etc.).

When formal education, certification, and licensure is currently available for APRNs in a particular role and population, such as psychiatry, it is not judicious, advisable, or permissible for APRNs to expand their scope of practice solely through on-the-job training, continuing education activities, unaccredited certifications, mentoring, shadowing, facility credentialing, or other informal or unapproved means of training. Formal education refers to education in an accredited academic setting approved by LSBN that includes structured, supervised clinical experiences and leads to conferral of a graduate degree or post graduate award/certificate. APRNs who desire to provide a full range of psychiatric assessments and services must seek and obtain formal education, certification, and licensure as a PMHNP or PMHCNS.

People with mental health conditions are often considered a vulnerable population due to the presence of the psychiatric condition. Their vulnerability may be compounded by additional physical and social considerations. APRNs are accountable for the quality of care rendered in all patient encounters. They are also expected to: recognize the limits of their knowledge and experience, plan for the management of situations beyond their expertise, and consult with or refer patients to other health care providers when appropriate. The intent of this article is to provide clarification and support for the provision of appropriate healthcare by safe and competent providers to patients in Louisiana with psychiatric mental health conditions.





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What Are The Contributing Factors to the Nurse Faculty Shortage in Louisiana? by Cynthia Bienemy, PhD, RN Director, Louisiana Center for Nursing

Budget constraints, an aging faculty, and increasing job competition from clinical sites have contributed to the nursing faculty shortage across the country which has resulted in limiting student capacity at a time when the need for professional registered nurses continues to grow (American Association of Colleges of Nursing [AACN], 2017). According to the National League for Nursing (NLN, 2017), nursing programs across the country are rejecting qualified candidates because there is not a sufficient number of nurse faculty available to teach them. Thus, it is imperative that factors contributing to the looming nursing faculty shortage are identified and addressed to prevent the spiraling effect of a nursing shortage and its impact on the healthcare system statewide and globally (Nardi and Gyurko, 2013).

To gauge the ongoing level of demand for nurse faculty in Louisiana, the Louisiana Center for Nursing (LCN) reports on data obtained from Louisiana's Schools of Nursing Annual Reports submitted to the Louisiana State Board of Nursing (LSBN) by Deans and Directors of undergraduate nursing (pre-RN licensure) programs and advanced practice registered nurse (APRN) programs. Deans and Directors are asked to report the number of filled full and part-time faculty positions, vacant nurse faculty positions, retirements, resignations, and new appointments. These numbers are depicted by program type in the 2016 LSBN Annual Report (2017). The number of full and part-time faculty positions fluctuate from year to year depending on the number of budgeted faculty positions, the availability of qualified faculty, and the school's need to fill full-time positions with part-time faculty. Between 2012 and 2016 there was a 12% decrease in the number of budgeted full-time faculty positions, a 44% increase in the number of vacant faculty positions, and a 17% increase in the number of resignations reported by Louisiana's pre-RN nursing programs. The vacancy rate for nurse faculty teaching in pre-RN nursing programs in Louisiana has gone from 4.5% in 2012 to 7.5% in 2016 which is in line with the 7.9% nationwide vacancy rate for nurse faculty teaching in BSN and graduate nursing programs according to AACN (2017). The 2016 nurse faculty vacancy rate for Louisiana's graduate nursing programs was 9.4%, which exceeds the overall national nurse faculty vacancy rate.

In 2016, over 1,300 qualified applicants were not admitted to Louisiana's pre-RN nursing programs. A review of the last four LSBN annual reports (2014–2017) revealed that the top three reasons given by Deans and Directors of Louisiana's pre-RN programs as to why qualified applicants were not admitted were: budgeted faculty positions were not available; faculty salary was not competitive; and qualified faculty were not available.

In March 2014, Peter McMenam, an economist with the American Nurses Association stated that according to the U.S. Department of Labor Bureau of Labor Statistics (BLS) Employment Projections for 2012-2022, "there will need to be 35 percent more faculty members to meet the expected increase in demand. In addition, 10,200 current faculty members are expected to retire. Therefore 34,200 new nursing instructors will be needed by 2022. Since 2012 there has been a 63% increase in the number of retirements statewide for nurse faculty teaching in pre-RN nursing programs in Louisiana. In 2016, 22% of nursing faculty teaching in Louisiana's pre-RN nursing programs and 25% teaching in the graduate nursing programs were 61+ years of age.

Producing an adequate number of RNs, and graduate prepared nurses on an annual basis has a direct impact on Louisiana's ability to meet the health care demands of the citizens of the state. A nursing faculty shortage has a direct impact on the number of students that can be admitted to a nursing program, which in turn, has a direct impact on the number of nurses that can be produced. Since 2012, there has been a 12% decrease in the number of students enrolled in Louisiana's pre-RN nursing programs and a 10% decrease in the number of graduates from Louisiana's pre-RN programs. If the nursing faculty shortage is not addressed, Louisiana may find itself in the midst of a severe nursing shortage. The 2016 Nursing Supply and Demand Council's (NSDC) annual report identified the shortage of nurse faculty as a major concern.

In an effort to begin to address the looming nurse faculty shortage in Louisiana, the LCN submitted a proposal





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to the Louisiana Health Works Commission to conduct a statewide survey of nurse faculty teaching in Louisiana's nursing programs (licensed practical nursing [LPN] programs, pre-RN programs, and graduate nursing programs) to obtain quantitative data that would identify potential factors that may be contributing to a looming nurse faculty shortage in our state. The LCN is soliciting the support of all of Louisiana's nursing programs and nursing and nurse champion organizations such as the Louisiana Community and Technical College System, Louisiana Council of Administrators of Nursing Education, Louisiana Association of Independent Colleges and Universities, the Louisiana State Board of Practical Nurse Examiners, the Louisiana Action Coalition, the Louisiana Hospital Association and other interested stakeholders in getting the word out about the survey and encouraging nurse faculty to complete the survey. We are currently working with the Board of Regents on the logistics related to the funding and anticipate launching of the project in early October. We will be updating you on the project in future Examiners.

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Undergraduate and Graduate Nursing Education Degree Programs Leading to Licensure: Requirements for Louisiana State Board of Nursing Approval

by Patricia Dufrene, PhD, RN
Director, Education and Licensure

In accordance with La Revised Statutes 17:1808, an out-of-state institution of higher learning may not offer courses/clinical experiences in Louisiana unless registered with the Louisiana Board of Regents.

Further, La Revised Statues 37:918 authorized the Louisiana State Board of Nursing (LSBN) to approve nursing programs preparing graduates to seek licensure as a Registered Nurse (RN) or an Advanced Practice Registered Nurse (APRN).

Regardless of approval by National Council for State Authorization Reciprocity Agreement (NC-SARA) programs MUST seek approval from LSBN to establish programs and/or offer clinical experiences in Louisiana.

- If a school intends to initiate a RN or an APRN program in Louisiana, the school must seek approval for the program from the LSBN by submitting an application and appearing before the Board at a regularly scheduled meeting (LAC 46XLVII.3533).
- If a school whose administrative control is located in another state intends to initiate a RN or an APRN program in Louisiana, the school must seek approval for the program from the LSBN by submitting an application and appearing before the Board at a regularly scheduled meeting (LAC 46XLVII.3539.A).
- If a school whose administrative control is located in another state intends to enroll students in a program to become a RN or an APRN and engage in courses/clinical experiences in Louisiana, the school must seek approval for those course/clinical courses from the LSBN by submitting an application and appearing before the Board at a regularly scheduled meeting (LAC 46XLVII.3539.B).
- If a school whose administrative control is located in another state with current approval to engage





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in APRN courses/clinical experiences in Louisiana, intends to add or delete APRN clinical role/population, the school must seek approval for those roles and populations from the LSBN by submitting an application and appearing before the Board at a regularly scheduled meeting (LAC 46XLVII.3523.B.6).

- If a school with an approved RN or APRN program intends to develop a duplicate program in a separate location within the state, the school must seek approval for the program from the LSBN by submitting an application and appearing before the Board at a regularly scheduled meeting.

In addition to other requirements, the programs must provide current Board of Nursing (BON) approval from the state where administrative control is located, Louisiana Board of Regents license, Regional accreditation, National Nursing accreditation, compliance with faculty and preceptor qualifications and clinical affiliation clearance.

Approval

Requirements and Importance

Approval is a status indicating the undergraduate or graduate nursing education degree program has met the legal standards established by the Board.

The LSBN approves undergraduate and graduate nursing educational degree programs leading to licensure as a RN or an APRN which meet their educational standards and assure protection of the public through evaluation and enforcement of those standards. The Board has legal authority over the pre-licensure programs and statutory authority to close programs that are not meeting the standards (LSBN).

- Eligibility to sit for the National Council Licensure Examination for Registered Nurses (NCLEX-RN) requires graduation from a Board approved School of Nursing (NCSBN, 2012).
- Eligibility for Licensure in Louisiana by Examination or Endorsement requires completion of a nursing education program approved by the BON.
- The Louisiana Nursing Education Articulation Plan (2005, Revised 2014) requires transferred courses and prior degree used for articulation to be from an approved nursing education program.

Types of Approval in Louisiana (LAC 46XLVII.3509).

1. Initial Approval

Initial Approval is a term used to refer to approval granted to a new undergraduate and graduate education degree program.

Initial approval is granted to a new undergraduate and graduate education degree program which is determined by the Board to be eligible to admit students to the nursing education degree program upon application by the parent institution and after survey and board evaluation.

There are three steps a program must do to achieve initial approval. The program must present a letter of intent and feasibility study at a regularly scheduled Board meeting. If sanctioned, the program is granted permission to develop the program and request a LSBN staff site visit. Approval of the Board, following the LSBN staff site visit, is required prior to initial approval. Initial approval authorizes the program to advertise and admit students.

2. Full Approval

Full Approval is a term used to refer to approval granted to an undergraduate or graduate education degree program meeting all standards and requirements of the Board.





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After members of the first class of graduates receive the results of the licensure examination, an on-site survey shall be conducted to evaluate the program's compliance with standards. Following the Board's review of the on-site survey report, the Board may continue initial approval or grant full approval of the nursing program.

Initial approval shall not be continued for more than two consecutive one-year periods following the nursing program's eligibility to apply for full approval.

A program not accredited by a national nursing accrediting body within one year post approval may petition the Board for a one-year extension. Following the one-year extension, a program failing to achieve national nursing accreditation must cease admission of students and begin termination (refer to §3531).

3. Probation

An undergraduate or graduate nurse education degree program shall be placed on probation when the Board has determined that it fails to meet one or more of the established standards.

A program shall not be granted probation by the Board for more than three calendar years in any five year period. After three years on probation in a five year period, a program shall not admit any students into the nursing sequence and shall initiate phase out as outlined in §3531.

Accreditation

Accreditation is an external review process which assesses the quality, continuous quality improvement, and program effectiveness (Eaton, 2015). Many Boards of Nursing, including the LSBN, require accreditation to sit for the NCLEX-RN. Eaton (2015) identifies four primary roles of accreditation as: 1) assuring quality by identifying a program meets at least minimum standards; 2) requiring access to state and federal funds; 3) providing confidence to employers of applicant credentials, and 4) promoting smooth transfer of programs and courses among colleges and universities.

- Eligibility to offer a RN or APRN education program or clinical nursing experiences in Louisiana requires accreditation (LSBN).
- The Louisiana Nursing Education Articulation Plan 2005, Revised 2014, requires transferred courses and prior degree used for articulation to be from a regionally accredited institution and a nationally accredited nursing education program.

Four types of accrediting organizations include Regional, National faith-related, National career-related, and Programmatic (Eaton, 2015). Since not all accreditors are the same, assuring the accreditation is recognized by the Council for Higher Education Accreditation (CHEA) and the United States Department of Education (USDE), LSBN requires programs to hold Regional and National Nursing (Programmatic) Accreditation for nursing education program approval and licensure by examination.

Regional Accreditation

Advantages of Regional accreditation according to CHEA (2010) include:

1. Accredits public and private, mainly non-profit, two and four year degree-granting institutions.
2. Provides for assurance that school meets national standards by allowing regional bodies to focus on a particular region of the United States.
3. Assess quality and continuous quality improvement and program effectiveness of academically oriented programs in colleges and universities of the assigned region of the US.
4. Regional Accreditors have the ability to work with specific Boards of Nursing to meet the educational needs of a particular jurisdiction.
5. Validates quality of academically oriented programs in colleges and universities of the assigned region of the US.
6. Programs with regional accreditation are eligible for federal grants.





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7. Eligible for financial aid.
8. Provides for articulation and matriculation of credits.
9. Required for acceptance to most graduate nursing programs.
10. All are recognized by both USDE and CHEA.

National Programmatic (Nursing) Accreditation

There are three (3) national agencies that accredit nursing programs.

- Accrediting Commission for Education in Nursing (ACEN)
- Commission on Collegiate Nursing Education (CCNE)
- Commission for Nursing Education Accreditation (CNEA)

Advantages of National nursing accreditation according to ACEN (2017), CCNE (2013) and CNEA (2017) include:

1. Identifies the program as meeting or exceeding national standards and criteria for nursing educational quality.
2. Identifies programs that have been evaluated and periodically re-evaluated by a qualified, independent group of respected and competent peers who have found it to be meeting appropriate postsecondary and higher educational purposes in a satisfactory manner.
3. Tied closely to BON and state agency licensing rules and regulations.
4. Nursing Program accreditation serves to hold the programs accountable to the community of interest.
5. Allow for the evaluation of the successes of a nursing program to achieve its mission, goals and expected outcomes.
6. Provides for continued improvement and thus professional practice.
7. Assures professional development opportunity and validation for faculty.
8. Is a gateway to licensure, certification, and eligibility for entitlement programs.
9. Promotes professional and educational mobility of program graduates.
10. Promotes academic excellence in accredited programs.
11. Enables student eligibility for funding support from federal and state agencies, and foundations for those programs that do not have regional or national accreditation. (Example - Diploma Programs)

Failure to secure appropriate program approval:

- Schools of nursing allowing clinical experiences in Louisiana without approval will be required to cease and desist until approval is requested and granted.
- If you are a student enrolled in a program to become a RN or you are a RN enrolled in a program to become an APRN and engaged in clinical experiences or a clinical facility engaged in contracts with out-of-state programs, you need to verify that the program is approved. A current list of approved programs can be found at <http://www.lsbn.state.la.us/Documents/Forms/Schools.pdf>
- Individual students may be engaging in the unlawful practice of registered nursing or advanced practice registered nursing if engaging in clinical experiences in Louisiana while in a program not approved by the LSBN to do so.
- Students and RNs enrolling in clinical courses in Louisiana from a school that has not gone through the appropriate approval process by the LSBN could be subject to disciplinary action for violation of LAC 46:XLVII.3405.
- Graduates from an out-of-state school not approved for meeting the standards by the LSBN are subject to ineligibility from credentialing and licensure in Louisiana.

Additional information for RN and APRN students can be found at:

<http://www.lsbn.state.la.us/Education.aspx>

Additional information for Undergraduate and Graduate Nursing Education Programs can be found at: (Links to Rules and Regulations and Proposal Requirements)

<http://www.lsbn.state.la.us/Education/SchoolsofNursing.aspx>

Schools of Nursing holding current LSBN approval can be found at

<http://www.lsbn.state.la.us/Portals/1/Documents/Forms/Schools.pdf>





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Continuing Education Requirements for 2018 Registered Nurse License Renewals
 by Cynthia York, DNP, RN, CGRN, FRE
 Director, RN Practice and Credentialing Department

Registered Nurse (RN) license renewal season began on October 1, 2017.

What is my CE requirement to qualify for Louisiana RN license renewal for 2018?

All Louisiana licensed RNs except those issued a 1st time Louisiana license in the 2017 calendar year **must** be in compliance with LSBN rules regarding annual nursing CE requirements. All CEs must have been accredited by either the ANCC or a specific State BON.

Each year, following renewal season, a random CE audit is performed by board staff. A total of three percent of all active licensees are selected to demonstrate compliance with the nursing CE requirement. Failure to respond or successfully pass the CE audit may result in the inactivation of the nurse’s license and/or disciplinary action. Maintaining LSBN accepted nursing CE documentation for at least five (5) years is the responsibility of the individual nurse.

How many nursing CE contact hours do I need each year to renew my Louisiana RN license?

Nursing Practice Level for Year	ANCC/State BON accredited CEs Needed
Practiced nursing 1600 hours (or more) within the calendar year. The 1600 hours is equivalent to 10 consecutive months of nursing employment at 40 hours per week	Minimum of 5 contact hours of ANCC or State BON accredited nursing continuing education required annually for license renewal
Practiced nursing at least 160 hours, but less than 1600 hours. 160 hours is the equivalent of 4 weeks at 40 hours per week	Minimum of 10 contact hours of ANCC or State BON accredited nursing continuing education required annually for license renewal
Practiced nursing less than 160 hours during the calendar year. This level includes nurses who are retired from active practice, had unverified nursing employment, self-employed, and/or had not worked during the year – but still wish to renew their nursing license for next year.	Minimum of 15 contact hours of ANCC or State BON accredited nursing continuing education required annually for license renewal. NOTE - Nurses with 15 or more ANCC/BON accredited nursing contact hours do not need to provide proof of nursing practice hours verified by their employer if later selected for the CE audit.





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What documentation do I need to obtain and verify before I renew my RN license?

A certificate of completion for each nursing CE topic/course that includes all of the following information:

- a. name of the CE provider/source
- b. title of CE topic/training indicating it was nursing related
- c. your name
- d. number of contact hours awarded for completing the topic/training
- e. date the contact hours were awarded in 2017
- f. clear printed statement that the nursing CE was accredited by either the **ANCC** - *or* – by a specific **U.S. State BON**.

Click [here](#) to view sample CE certificates.

Does training obtained through my place of employment count?

Only those CE activities that have been accredited by the ANCC or a state BON. If you need to obtain additional ANCC/ State BON accredited CE this year, you may find resources on LSBN's website by clicking [here](#).

Are there other ways to meet the annual CE requirement for license renewal?

Yes – there are two (2) other methods by which you could qualify to renew your RN license:

1. If you attended school this year for a **post-secondary nursing degree** and were awarded academic credit in 2017 for coursework specific to nursing practice. To qualify for this option, the nurse must obtain an official paper transcripts obtained directly from the school *prior* to renewing and be able to supply it to LSBN upon request if notified later that you've been selected to be audited. Student summary print-outs, electronic and/or 3rd party transcripts are not acceptable verification. One (1) academic semester hour in a nursing course documented on an official paper transcript is equivalent to fifteen (15) contact hours of ANCC/BON accredited nursing continuing education for annual license renewal.
2. If you hold a certification in a nursing specialty from one of the national organizations recognized by LSBN for CEs **and** the certification was current for the full 2017 calendar year, you may utilize the certification toward your CE requirement for license renewal. If notified that you've been selected to be audited, you would submit the letter (or card) from the national organization that includes your name, certification number, nursing specialty, date certification was issued/renewed and expiration date. A list of the national nursing certifying organizations accepted is available at the LSBN website under **Education / Continuing Education / National Nursing Certification Recognized by LSBN for CEs** or click [here](#). Only the nursing certifications on this LSBN list may be utilized for license renewal in lieu of **ANCC** or **State BON** accredited contact hours.

I was previously selected for the CE audit. Can I be selected again?

Yes. Since all nurses must meet their annual mandatory CE requirements per LSBN rules prior to renewing, any nurse who has renewed his/her Louisiana license is eligible to be selected later by random audit. There is no limit to the number of times an individual can be audited for his/her CEs.

My email and/or mailing address changed since 2017 licensure/relicensure. Can I update this information online?

Once the 2018 renewal season officially opens in October, you will be able to update contact information during the on-line RN Renewal Application. If you have new contact information *prior* to the start of annual renewal, click [here](#) for the '**Address/Contact Change Form**'. Please complete the form and fax to LSBN for staff to update your contact information. Processing time is approximately 10 business days from receipt.





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APRN Licensure Renewal: Certification and CE Requirements
by Jennifer Wright, DNP, APRN, FNP, BC
Chief Nursing Officer

Renewal season began October 1st. Advanced Practice Registered Nurses (APRN) must renew both their Registered Nurse (RN) and APRN licenses. To renew as an APRN, the nurse must *either*:

A. Hold current national certification in each licensed advanced practice role and population focus, with *primary source* evidence on file with the Louisiana State Board of Nursing (LSBN). **APRNs whose certification will expire by December 31st during the renewal period, will be required to have their certifying body provide primary source verification of their recertification directly to LSBN prior to being eligible to renew their Louisiana nursing license(s) online.** If your certification is due to expire this calendar year, apply for recertification with your certifying body as soon as possible and indicate that proof of your recertification must be sent to LSBN by their office. Copies of recertification cards, emails and/or letters sent to the APRN from their organization will **not** be accepted by LSBN. Once proof of recertification has been received by LSBN directly from the APRN's certifying organization, the APRN will be authorized to complete the online licensure renewal.

----- OR -----

B. If national certification was not available in the advanced role and population focus (formerly referred to as 'specialty') when the APRN was originally licensed, the nurse must submit evidence to LSBN that commensurate requirements were met during the licensure period immediately preceding renewal in order to be eligible for license renewal. All practice hours and continuing education (CE) **must** be at the advanced practice level (*advanced assessment, diagnosis and management of conditions, pharmacology, etc.*) and directly related to the full scope of the advanced practice role and population focus for which the commensurate licensure had been granted. The VR-1 form is available on LSBN's website and must be completed, signed and mailed to the LSBN office together with sufficient advanced practice CE for Board staff review and approval **prior** to the APRN being authorized to complete the online licensure renewal. We encourage all APRNs holding a commensurate role to send their complete VR-1 packet to the LSBN office for review as soon as possible.

APRN's with Prescriptive Authority -

Each year an APRN with prescriptive authority must obtain six (6) contact/credit hours of continuing education (CE) in pharmacotherapeutics (pharmacology). The pharmacology CEs must be at the advanced practice level and related to the APRN's licensed role and population focus. APRN's will be requested to attest that they have completed/complied with this requirement during the on-line renewal. Advanced pharmacology CE documentation for APRN renewal must be accredited by an agency/organization recognized by LSBN for advanced practice.





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Major Motions and Other Actions
Taken at the June 8, 2017 Board Meeting

UNFINISHED BUSINESS

Motion to accept the By- Laws
Motion Carried

EDUCATION

Motion to accept the Consent Agenda Motions

1. Consent Agenda Motions:

1. LSBN Staff Program Status Reports
 - NCLEX Report
 1. Accreditation Reports
2. Approved Program Reports
 1. Louisiana Delta Community College - ACEN Board of Commissioners' Report
 2. McNeese State University - ACEN Confirmation of ASN Closure
 3. McNeese State University - Response to ASN NCLEX-RN Pass Rates
3. Request for Continuing Education Provider Re-approval
 1. American Association of Critical Care Nurses
 2. Dillard University
 3. Nicholls State University
4. Education Announcements

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

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 Fletcher Technical Community College (FTCC) related to student enrollment and completion rates.

Motion Carried

Motion to approve the major/substantive change request from Louisiana State University Health Sciences Center to add the following role and population to the current approved graduate education degree program:

Psychiatric Mental Health Nurse Practitioner (DNP)

Motion Carried

Motion to approve the major/substantive change request of Nicholls State University related to student enrollment

Motion Carried

Motion to accept the letter of intent and feasibility study from Grambling State University and approve Step I to re-establish a Baccalaureate of Science in nursing education degree program.

And further, that the Board instruct Grambling State University to provide LSBN staff with evidence of approval from the Louisiana Board of Regents prior to initiation of Step II to re-establish a Baccalaureate of Science in Nursing education degree program.

Motion Carried

Motion to re-approve the request of the University of South Alabama to offer graduate clinical experiences in Louisiana until October 15, 2020 for the following roles and populations:

RN-MSN, MSN, PGC, BSN-DNP, PM DNP, DNP

Family Nurse Practitioner (FNP)
Adult Gerontology Primary Care Nurse Practitioner (AGNP)
Adult Gerontology Acute Care Nurse Practitioner (AGACNP)





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Pediatric Primary Care Nurse Practitioner (PNP)
Pediatric Acute Care Nurse Practitioner (PNP-AC)
Woman’s Health Nurse Practitioner (WHNP)
Neonatal Nurse Practitioner (NNP)
Family Mental Health Nurse Practitioner (FMHNP)
FNP/AGACNP

LOUISIANA CENTER FOR NURSING UPDATES

Motion to accept the 2016 Nursing Education Capacity Report

Motion carried

CNS

ORBS

MSN - Adult Health Clinical Nurse Specialist (ACNS)
DNP and PMC – Adult Gerontology Clinical Nurse Specialist (AGCNS)

Motion to approve the plan to go to biennial registration on the October to December 2018 license renewal cycle. A communication plan to be developed.

Motion carried

Motion Carried

RN/PRACTICE/CREDENTIALING

To defer action regarding the petitioner’s request for a Declaratory Statement regarding the school registered nurse delegating to unlicensed school employees the administration of solu-cortef in certain emergency situations; and create and authorize an ad hoc committee consisting of select LSBN Board members and LSBN staff to discuss and develop the Declaratory Statement and to engage stakeholders as needed including the petitioner(s), representative(s) from the Louisiana School Nurses Association and a representative from the pharmacy community.

Motion Carried

Motion to approve that it is within the scope of practice for a registered nurse to delegate gastrostomy tube feedings to unlicensed personnel in intermediate care facilities for individuals with intellectual disabilities.

That the nurse practice opinion dated March 28, 1990 be retracted.

Motion Carried

OPERATIONS

Motion to approve the proposed Fiscal Year 2017 and 2018 Amended Annual Budgets.

Motion Carried

OFFICE OF THE EXECUTIVE DIRECTOR

Motion to accept the LSBN Annual Report

Motion carried

Disciplinary Matters

The LSBN took a total of 52 actions at the April 19, 2017 hearing panel. For a complete listing click the link below: [April 19, 2017](#)

The LSBN took a total of 37 actions at the June 7, 2017 hearing panel. For a complete listing click the link below: [June 7, 2017](#)

The LSBN took a total of 35 actions at the July 12, 2017 hearing panel. For a complete listing click the link below: [July 12, 2017](#)

The LSBN took a total of 32 actions at the August 9, 2017 hearing panel. For a complete listing click the link below: [August 9, 2017](#)

2017 State Holiday Schedule

Veterans Day.....	November 10
Thanksgiving Day.....	November 23
Christmas Day.....	December 25

Future Board Meeting Dates

October 19, 2017
December 14, 2017

