

**Louisiana State Board of Nursing**  
**APRN Task Force Meeting Minutes**  
**April 29, 2011**

**Call to Order**

The meeting of the Louisiana State Board of Nursing Task Force to establish a position paper on the NCSBN Consensus Model for APRN regulation, and revision of Chapter 45 of L.A.C. 46:XLVII, was called to order by Dr. Lucie Agosta, Co-chair at 10:02 am in Salon A of the Louisiana State Board of Nursing, 17373 Perkins Road, Baton Rouge, Louisiana 70810.

**Roll Call**

**Task Force Members Present**

Co-chair: Demetrius Porche, DNS, APRN, PhD

Co-chair: Lucie Agosta, PhD, APRN

AARP Louisiana representative:

- Denise Bottcher, Communications Director

LANA representative (Louisiana Association of Nurse Anesthetists):

- Rusty Smith, APRN, CRNA, MS

LANP representative (Louisiana Association of Nurse Practitioners):

- Sophia Thomas, APRN, FNP

LA CANE private sector representative (Louisiana Council of Administrators of Nursing Education):

- Ann Cary, RN, PhD, Loyola University

LSNA representative (Louisiana State Nurses Association):

- Denise Danna, RN, DNS

CNM representative (Certified Nurse Midwife):

- Gretchen Deeves, MSN, APRN

**Task Force Member Excused**

CNS representative (Clinical Nurse Specialist):

- Florencetta Gibson, APRN, PhD

LA CANE public sector representatives:

- Sandra Brown, APRN, PhD, Southern University
- Valarie Waldmeier, APRN, PhD, McNeese University

LONE representative (Louisiana Organization of Nurse Executives):

- Deborah Ford, MSN, RN

**Task Force Member Absent**

Robert Bass, M.D., LSBN Ex-Officio Board member

**Staff Present**

Barbara L. Morvant, MN, RN, Executive Director

Cynthia York, RN, MSN, CGRN, Director of Credentialing and Practice

Blaine Sharp, APRN, FNP, APRN Credentialing Manager - Credentialing and Practice Dept.

Patricia Dufrene, MSN, RN, Director of Education/Exam Licensure

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Patrick Cantin, IT Analyst  
Brenda Kelt, Licensing Analyst, Recorder  
Laura Guillory, Licensing Analyst, Back-up Recorder

### Guests Present

Larry J. Haley, MSN, APRN, CRNA  
Laura Bonanno, DNP, CRNA

**Review of Minutes** The committee reviewed and approved the minutes of the February 25, 2011 meeting.

**Motion** by R. Smith, seconded, that the Committee approve the minutes of the February 25, 2011 APRN Task Force minutes.

**Vote** Agosta – yes, Bottcher – yes, Cary – yes, Danna – yes, Deeves – yes, Porche – yes, Smith – yes, Thomas – yes. Motion carried.

### Old Business

#### Chapter 45 Revisions

Discussion ensued regarding April 11, 2011 draft of Chapter 45 revisions prepared by Board staff. The following suggestions for revisions were suggested by the committee:

#### **General Suggestions:**

Change the use of '*nursing specialty*' to '*nursing role*' to be in alignment with the terms used in the national consensus document. Examples: §4503 – Titles: A and B.3 – Clinical Nurse Specialist, and §4505 – Definitions: Advanced Practice Registered Nurse Specialty

Change use of the term '*group*' to '*population*'. Example: §4503 – Titles: B.4 - Nurse Practitioner

Differentiate '*specialty*' from '*population foci*' and refrain from using a combination term such as '*specialty/population*'. Examples: §4503 – Titles: F.1c; F.1d

Suggestion to add definitions for the following:

- *Advanced Practice Population (Foci)*
- *Advanced Practice Role*
- *Advanced Practice Specialty*
- *Ancillary Services* (for CRNA role)
- *Nursing Standards*
- *Perianesthesia Care*

Defining anesthesia care in regards including prescriptive authority for pre and post-op care per AANA scope of practice guidelines which would better identify where CRNA anesthesia care begins and ends.

Suggestion made that committee revise Chapter 45 to be broad and align with the NCSBN consensus document. Task or practice specific issues would then be left for the employers and facilities to incorporate within their policies and procedures.

#### **§4503 – Titles**

Provide titling of APRNs with DNP. Suggested wording:

*‘Titling is commensurate with academic track/degree and credential.’*

#### **§4505 – Definitions**

**Authorized prescriber** – add ‘*advanced practice registered nurse*’ to list of prescribers.

**Clinical Practice Guidelines:** New proposed section in grey too restrictive. Suggest a more broad statement such as:

*Clinical practice guidelines must encompass the APRNs full scope of practice as defined by the national certifying body for the AP role, and be commensurate with the nurse’s knowledge, skills and abilities.*

**Collaborative Physician** - remove ‘*and a signed collaborative practice agreement*’ and replace with ‘*a collaborative practice relationship*’. Board staff reminded committee that Statue §913.9 might need to be changed. It currently specifies a ‘*formal written statement*’ for collaborative practice agreements.

**Contact Hours:** change ‘*a unit of measurement that describes 50 minutes*’ to ‘*60 minutes*’

**Curriculum:** suggestion to include outcome.

**Distribute, Distribution or Distributed** – delete ‘*supplied by drug manufacturers*’ since not all gratuitous medications are provided to the facility directly from the manufacturer.

**Faculty - # 1 Nurse Faculty:** Clarification whether the doctoral or masters degree for a Nurse Faculty position must be in ‘nursing’. Board staff will review and advise regarding recent changes made to Chapter 35 that can be copies here.

**Functional Role:** Change from ‘*master’s in nursing program*’ to ‘*graduate nursing program*’. Suggestion to drop ‘*Functional*’ and use only ‘*Advanced Practice Role*’

**Goals** – suggest use ‘*expected outcome*’ instead of ‘*expected competencies*’. Rethink use of the word ‘*program*’.

**Major Change in Curriculum** – unclear on what ‘*departure from current educational practices or methods*’ means in regards to APRN studies/education.

**Under the Guidance of an Approved Preceptor** - Clarify the ‘*or person approved by the board*’. Suggested it state that the individual must be a licensed APRN, Physician, or Dentist in the State of Louisiana - or other healthcare professional that has been approved by the board. Take out ‘*specialty or functional role*’.

**§4507 – Licensure and Certification** (currently entitled *Licensure as Advanced Practice Registered Nurse* in Chapter 45)

**D. Renewal - # 1.a** – remove the word ‘*online*’

**D. Renewal - # 2.e** - draft reads:

*Faculty can use hours of direct clinical supervision of students for compliance with LAC 46:XLVII. 4507.E.2.a above. Direct clinical supervision must be in APRN specialty. Advanced practice faculty must have direct supervision of advanced practice nursing students.*

Discussion ensued regarding the above rule may prevent a Nurse Faculty member currently holding an active APRN license, but who does not hold national certification, from qualifying from renewing their AP role if they only teach undergraduate nursing studies.

Board staff explained that the intent was to insure that APRNs who do not hold a national certification in an advanced practice role qualify for license renewal by fulfilling commensurate requirements of certified APRNs. The current Chapter 45 rules do not meet that standard. Some APRNs licensed under the original grandfathered allowance now have national certification available in their role, but chose not to obtain it. A rule change would correct this.

Committee suggested that further research be obtained regarding national certification requirements, particularly for CNS, as this proposed rule change would affect some CNS nurse faculty who do not hold national certification.

**§4507 – Licensure and Certification**

**F. Reinstatement of an APRN License**

Discussion ensued regarding developing a method of qualifying APRNs trying to reinstate once they have been out of practice for several years. Suggestion made to spell out minimum requirements for an APRN Refresher Course.

### **§4513 – Prescriptive Authority Privileges**

Committee suggested that to meet current Revised Statute §913.9 that requires ‘*a formal written statement addressing the parameters of the collaborative practice*’ but attempt to speed the ability of an APRN to change practice sites/groups, that one method would be for the board to develop a standardized Collaborative Practice Agreement (CPA) for each APRN role that specified the clinical practice guidelines specific to that AP scope of practice. The APRN could be held accountable to that document when issued prescriptive authority with initial licensure. The requirement for submitting a signed CPA needing board staff approval could then be limited to cases where an APRN is requesting approval for practice and/or prescriptive authority that falls outside the standardized CPA.

Committee would like to eliminate the requirement for a formal (signed) written collaborative practice agreement to be submitted and approved by board staff for every group the APRN works or collaborates. Committee asked board staff to investigate the possibility of an electronic method where the APRN could input information regarding their current physician collaboration online so it can be viewed and updated quickly as an APRN practice group/site changes.

#### **Other suggestions for section §4513:**

§4513.1 - Remove word ‘*modify*’ the application.

§4513.5.b.iii – Discussion ensued whether this section is needed. It was suggested that the information on the Expedited Partner Therapy guidelines from DHH be noted in a FAQ list available at the board website instead incorporating it in rules. If kept, the following change in wording was recommended:

*‘Prescribing, dispensing, or distributing to an individual who is not the APRN’s client is not within the scope of practice, unless otherwise authorized by law (such as Expedited Partner Therapy)’.*

§4513.5.b.iv – Discussion ensued regarding ‘*prescribing, dispensing, or distributing drugs for personal use*’.

§4513.5.b.x – take out, board does not have authority to grant dispensing privileges.

### **§4517 – Authorized Practice** (currently numbered §4513 in Chapter 45)

#### **C. Authorized Standards of Practice, # 6** in draft currently reads:

6. *an APRN shall demonstrate knowledge of and apply current nursing research findings relevant to the advanced nursing specialty and functional role;*

Suggested this be broadened that include ‘*evidence based practice*’.

**§4519 – Prescriptive and Distributing Authority** (currently numbered §4513.D in Chapter 45)

General comments suggested wording modifications in this section. For example, use ‘*appropriate assessment*’ instead of ‘*physical examination*’ or ‘*good faith examination*’.

§4519.D – Prohibitions. Suggested rewording. Some wording is too vague or open ended (# 1), but mentioning specific drugs (# 3) will become dated.

§4519.E.1.a – new section in grey, add ‘*dentist*’ with MD to be consistent.

§4519.E.2.a.i (a) and (b) regarding maintenance of patient records. The items described below ‘*objective*’ and ‘*subjective*’ need resorting in the proper heading.

At the end of §4519, remove ‘*e. Handling of controlled substances samples?*’ shown in grey.

**§4521 – Prescriptions and Prescription Drug Orders** (currently numbered §4513.D in Chapter 45)

Suggestion in B - All Prescription Orders, 3 – Medication to add a letter ‘*e*’ regarding needing to write ‘*diagnosis*’ on the prescription.

Discussion ensued regarding whether all portions of I – Prohibitions were necessary in rules.

Consider expanding ‘*8. Limitation: c. exclusion*’ regarding CRNA practice to include ancillary anesthesia care (perianesthesia care) for pre and post op services.

Suggestion made to give prescriptive authority to CRNAs with initial licensure based on AANA definition of scope of practice, without the requirement for board approved collaboration.

### **Changes in Louisiana Revised Statues (Nurse Practice Act)**

Discussion ensued regarding potential changes in LA Revised Statues (Nurse Practice Act) to fit better with the national consensus document vision which would affect Chapter 45 rules, such as:

- Eliminate the need for formal collaborative practice agreements (§913.8 and §913.9);
- Clarify ‘*ancillary services*’ for CRNA and include ‘*perianesthesia care*’ (§913.1.b and §930);

- Add new statute in §913.1 (*Advanced Practice Registered Nurse* section) to authorize prescriptive authority to be issued with initial licensure for all advanced practice roles where the individual has demonstrated having met the three P's during licensure processing, with a proviso that prescriptive authority privileges would be limited to the APRN scope of practice as defined by the national certifying organization.
- Revise definitions for each APRN role in §913 to clarify scope of practice and specify it must align and follow the national certifying body(ies) requirements for the AP role and population foci in which the individual has been licensed.

**Other issues raised for further discussion and consideration:**

- Out-of-state schools. Require that faculty and preceptors that come to Louisiana for site visits and clinicals be required to hold an active Louisiana license to ensure they know and are accountable to the Louisiana statutes and rules.
- Develop a rule for Chapter 45 to address out-of-state APRNs coming to work during a 'Declared Emergency' or 'Disaster' that allows them to practice without board approved collaboration for a certain period of time.
- Develop a continued competency evaluation process for APRNs, such as establishing a 'peer review' system.

Committee took a break at 12:07 pm

Committee resumed at 12:15 pm

**§4521 – Prescriptions and Prescription Drug Orders.** Discussion returned to this section after break.

Suggestion made to specify in rules that APRNs must adhere and follow all State and Federal laws and requirements without actually quoting them. That way if the other agency changes one of their rules affecting APRN practice, Chapter 45 would not be out-of-date.

Committee members supported the idea of board staff including resource information and details for APRNs regarding other State (Board of Pharmacy) and Federal (DEA) agency rules at the LSBN website in a FAQ (Frequently Asked Question) list format.

**§4535 – Unprofessional Contact** (new proposed section)

Review of definitions of *Sexual Misconduct* and *Disruptive Behavior*. After further discussion, the committee supported the proposed wording.

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§4535.A.4.b – Discussion ensued regarding the use of the word ‘*abandon*’ in this section. Question posed: *What happens to the patient if the collaborative physician leaves the practice or dies?*

**§4537 – Educational Requirements** (currently numbered §4509 in Chapter 45)

§4537.D.b – Types of Approval / Initial. Suggest review wording in the educational section to allow for nursing programs that run 3 to 4 years. Current proposed wording states:

*‘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.’*

§4537.G – Faculty and Faculty Organization. Discussion ensued regarding out-of-state nurse faculty who are teaching online courses to Louisiana students. Committee clarified that an active Louisiana license is required if the faculty member is teaching a clinical course or providing clinical supervision to Louisiana students, or who come to Louisiana to perform clinical site evaluations. Board staff advised that clinical preceptors must also hold an active Louisiana license. Additional research with the Board of Regents may be needed to review possible changes of licensure requirements for faculty and support teaching staff as more nursing programs become available online.

Adoption of the consensus document format would shift much of the educational requirements as defined by the accrediting bodies. However, at this time the certifying bodies are not ready to take this on fully. Current Chapter 45 rule changes would need to provide rules in the meantime.

**Delegation of medication administration by APRNs**

Board staff suggested that the committee consider in upcoming revisions to the Revised Statutes (Nurse Practice Act) the topic of delegation of medication administration from APRNs to ‘*Medical Assistants*’

**Next Meeting**

The next Task Force meeting is scheduled for Thursday, June 2, 2011 with a start time of 10:00 am. If unable to attend, committee members are asked to see if an alternate representative from their organization can come in their place and email co-chairs and Board staff with the name and contact information of the individual.

**Adjournment**

The meeting adjourned at 1:28 pm



**Submitted by:**

Cynthia York, RN, MSN, CGRN  
Director, Practice and Credentialing

Approved: 6/02/2011