

T H E E X A M I N E R

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In This Issue

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From the Executive Director.....	1-2
LSBN Welcomes our New Board Members.....	3-4
LSBN New Directors.....	4-5
New Employees.....	5
Chiefs Corner.....	6-7
APRN Corner.....	8-11
The National Forum of State Nursing Workforce Centers Nursing Work- force and Policy Development.....	11-12
Effects of Nurses Working Overtime.....	12-13
Impressions of the Investigations Department.....	13
NCLEX-RN®: Implications of Pass Rates for Louisiana and the Nursing Education Program.....	14-16
Major Motions and Other Actions Taken at the December 14, 2017 Board Meeting.....	16-17
Disciplinary Matters.....	18
2018 State Holiday Schedule.....	18
Future Board Meeting Dates.....	18



Board Members

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Jennifer Couvillon, PhD, RN-BC, CNE, Member

Tracey P. Moffatt, MHA, BSN, RN, Member

Denise Bottcher, Consumer Member

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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



The first quarter of 2018 has been incredibly busy for the Louisiana State Board of Nursing (LSBN) beginning with the appointment of four (4) new Board members. You will read more about these incredible individuals later in this edition but we are pleased to welcome Dr. Jennifer Couvillon, Dr. Jennifer Manning, Ms. Tracey Moffatt

and Ms. Denise Bottcher. LSBN is the first state agency under the umbrella of the Department of Health to add a public, consumer member to our Board with the appointment of Ms. Bottcher. We look forward to working with these accomplished women to realize our mission of safeguarding 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.

LSBN has collaborated with the Louisiana State Nurses Association (LSNA) and other professional nursing organizations to initiate the Health Policy Consortium to identify issues facing the nursing profession and on which we can speak with one voice to our internal and external stakeholders. LSNA has taken the lead on organizing the meetings, inviting interested parties, leading the discussions and preparing minutes. At the first meeting, hosted by LSBN on February 7, 2018, representatives from LSBN, LSNA, Louisiana Association of Nurse Practitioners, Louisiana Association of Nurse Anesthetists, Louisiana Council of Administrators of Nursing Education, Louisiana Organization of Nurse Executives, Louisiana Hospital Association, Louisiana Emergency Nurses Association, and Louisiana Psychiatric Nurses Association gathered together to address issues facing their members. Specific issues discussed included removal of barriers to practice for APRNs, work safety especially in the emergency room, nursing shortages, nursing faculty shortages, enactment of the enhanced Nurse Licensure Compact, CRNA issues related to use of anesthesia assistants, inability of CRNAs to engage in interventional pain management for chronic pain and the exclusion of CRNAs in the recent federal VA legislation allowing APRNs to practice to their full scope. The two (2) priority concerns agreed on by the majority of participants was enacting the enhanced Nurse Licensure Compact and addressing nursing faculty shortages. The second meeting of the Consortium was held

on March 12, 2018 and any interested nursing organization is invited to future meetings. For more information on dates, times and locations of meetings, please contact Dr. John Wyble at executivedirector@lsna.org or Georgia Johnson at president@lsna.org.

The 2018 Regular Session of the Louisiana Legislature convened on March 12, 2018 and it is shaping up to be both an active and contentious session. The first bill to be introduced with specific and comprehensive implications for LSBN is Senate Bill 202 by Senator Barrow Peacock for enactment of the enhanced Nurse Licensure Compact. With excellent testimony from Colonel Ty Neuman, Commander of the 2nd Bomb Wing, Barksdale Air Force Base, and his RN wife, Shellie Neuman, the bill was reported favorably from Senate Health and Welfare. It is proceeding through Senate procedural steps and was passed to 3rd reading on March 22, 2018. We need to monitor this action closely and continue to have all our nursing colleagues and organizations present as the bill moves through the legislative process.

Other bills that LSBN is monitoring include the following: SB300 relative to direct service workers; to provide for an exception to the nurse practice act; to provide for authorization to perform medical tasks; to provide authority to direct patient care; and to provide for related matters. LSBN has had preliminary meetings with the Louisiana Department of Health to express our concerns related to this bill.

HB562 relative to creating the "Occupational Licensure Review Act"; to provide with respect to occupational regulations; to establish state policy for the regulation of occupations; to provide for definitions; to establish state policy for the regulation of occupations; to provide for definitions; to specify certain criteria for government regulations; to create a process to review criminal history to reduce an offender's disqualification from state recognition; to establish canons of statutory interpretation; to provide an effective date; and to provide for related matters.

HB483 relative to advanced practice registered nursing; to provide relative to collaborative practice agreements between advanced practice registered nurses and physicians or dentists; to create a limited exception to requirements relative





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to such agreements; and to provide for related matters.

SB435 to amend and reenact the introductory paragraph of R.S. 37:913 and to enact R.S. 37:913(B), relative to advanced practice registered nursing; to provide for exceptions to the collaborative practice agreement requirement; to provide for technical corrections; and to provide for related matters.

SB40 relative to the health profession licensing boards created within the Louisiana Department of Health; to provide for consumer membership on each of the boards; to provide for consumer member qualifications; to provide for the rights of the consumer member; to provide for board member nominations; to provide for notice by the boards to their licensees; to provide for technical corrections; and to provide for related matters. LSBN already has two (2) consumer boards as part of the 2016 amendments to the NPA but other aspects of the bill would affect us.

Dr. Laura Bonanno, President of the Board, and I attended NCSBN's 2018 Midyear Conference in Chicago March 5-7, 2018. The first day was dedicated to "**Getting Legislation Passed**" and speakers presented useful tips on the legislative process, preparation for introducing a bill, the art of testifying and strategies for overcoming roadblocks. The day included team exercises and group activities that gave attendees an opportunity to apply strategies. The second day included operations updates from President Kathy Thomas, Keynote Address by Dr. Akiko Maeda on *Transforming Health Workforce Skills for Integrated and Person-centered Care*, NCSSBN Committee and Legislative Updates and Area meetings. The final day's sessions included *Real World Simulation from a Wider Perspective* presented by Annette Imprescia, Associate Clinical Director of SIMPeds CICU Nursing Programs at Boston Children's Hospital, an update on Monitoring Programs from Kent Gowan of NCSBN, *Causes and Consequences of Occupational Licensing* by Dr. Beth Redbird from Northwestern University and an endnote presentation by Dr. David Benton, NCSBN CEO, on *Past, Present, Future*.

Finally, LSBN is in full implementation mode for the initiation of all aspects of our new database, Optimal Regulatory Board System (ORBS). We have been using the system for renewal of licenses for the last three (3) years and we will initiate the full system with all credentialing and education applications for licensure, discipline modules and communications scheduled to launch in mid-August. The NCSBN ORBS team traveled to Baton Rouge to work

with Chiefs, Directors and Managers from March 19th to 23rd on finalizing the configurations for various applications, templates for investigations, hearings, monitoring and settlement modules, design of checklist items, review of eligibility questions and various other configuration issues.

As you can see from these issues, LSBN is challenged by a rapidly changing environment but the one constant that remains to guide our work is public safety, translated in the world of nursing as insuring that RNs and APRNs who practice in our state are professional, well-educated, expert practitioners. Our singular regulatory goal is to design practices that are innovative and informed by best evidence. This is a challenging and exciting time in our profession and LSBN is prepared to engage with our colleagues to initiate, maintain and transform processes and structures to improve nursing practice.

For the Public Trust,

A handwritten signature in black ink that reads "Karen C. Lyon".

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





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LSBN Welcomes our New Board Members

Denise Bottcher is the first consumer member to our Board. Ms. Bottcher is the State Director of AARP Louisiana and is responsible for advancing the organization's social mission on behalf of Louisianans 50-plus and their families. With nearly 500,000 members and 22 volunteer leaders across the state, Ms. Bottcher leads the six-member team in Baton Rouge and New Orleans to help all generations live their best lives in their own homes and communities through advocacy, education and service.



Through her strategic guidance and leadership, Ms. Bottcher and her team have driven social change

at the state and local level by working with policy makers, collaborative organizations, and dynamic volunteers. Family caregiving, health care, financial resilience, and livable communities are the top priorities of the Louisiana State Office.

Ms. Bottcher joined AARP in 2010 as Associate State Director of Communications, overseeing the media and communications strategy for advocacy, community outreach and member communications.

Ms. Bottcher's career spans over 25 years in the private sector, government and non-profit arena. She has an extensive background in crisis communications, targeted communication and advocacy strategies for businesses, politicians and government agencies. Among her varied experience, she served as the press secretary and official spokesperson for Governor Kathleen Blanco during Hurricanes Katrina and Rita.

Dr. Jennifer S. Couvillon is the president of Chamberlain University's New Orleans, Louisiana campus. Dr. Couvillon has more than 25 years of experience in the clinical nursing and education realms. Prior to joining Chamberlain, Dr. Couvillon served as assistant vice president of system nursing professional development at Ochsner Health System and was an assistant professor of clinical nursing at Louisiana State University School of Nursing. She is a critical care nurse and started her career in the cardiac intensive care unit at Georgetown University Hospital. Dr. Couvillon made a global impact as she recruited



nursing students for study abroad programs in England and Ireland. Her perspective on universal healthcare was born when she cared for patients at Guys and St. Thomas hospital in London, England. Dr. Couvillon was recognized for her international service through the Sigma Theta Tau International Honor Society Nurse Chiron mentor program. In 2016, Dr. Couvillon was named a New Orleans City Business Healthcare Hero; in 2012, a City Business Women of the Year; and in 2003, a New Orleans Great 100 Nurse.

Dr. Couvillon has served as president of the Sigma Theta Tau International, Epsilon Nu Chapter and as president of the American Nurses Association New Orleans District Nursing Association. She is a member of the Association for Nursing Professional Development and Louisiana Chapter for the National League for Nursing. She is a National League for Nursing ambassador and on-site evaluator for the Commission on Collegiate Nursing Education. Dr. Couvillon earned a Doctor of Philosophy (PhD) degree in nursing education from Duquesne University, a Master of Science in Nursing (MSN) degree with a family nurse practitioner specialty from Georgetown University, and a Bachelor of Science in Nursing (BSN) degree from Georgetown University.

Dr. Jennifer M. Manning is the Associate Dean for Undergraduate Programs at Louisiana State University Health Sciences Center (LSUHSC) School of Nursing. She is a Certified Nurse Educator and a Board Certified Clinical Nurse Specialist. Dr. Manning teaches in the undergraduate and graduate nursing programs at LSUHSC School of Nursing. Her areas of research include nursing education and simulation. Dr. Manning is a member of the National Association for Clinical Nurse Specialists research committee, the American Association of Colleges of Nursing communications committee, and she serves on the American Nurses Association Professional Issues Panel. At the state level, Dr. Manning is a member of the Louisiana Council of Administrators of Nursing Education, the Epsilon Nu Chapter of Sigma Theta Tau International, the East Jefferson General Hospital Research Committee, and the Louisiana State Nurses Association. Dr. Manning was recognized as the 2017-2018 State Ambassador for the National League for Nursing Center of Excellence.



Dr. Manning received her Bachelors of Science degree in Nursing, Master's degree in Nursing,





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and Doctorate of Nursing Science degree from LSUHSC School of Nursing. In her free time she enjoys spending time with her husband, three children, large extended family, and close friends.

Tracey Moffatt, MHA, BSN is the System Chief Nursing Officer (CNO) and Vice President for Quality at Ochsner Health System (OHS), southeast Louisiana's largest non-profit, academic, multispecialty healthcare delivery system, which owns, manages or is affiliated with 25 hospitals and more than 50 health centers.



As the System CNO, Ms. Moffatt provides guidance to nursing leaders across the system to advance quality, nursing professional practice, safety and initiatives to make care affordable.

She collaborates with OHS leaders in designing, providing and evaluating patient care and services; develops and manages the nursing and clinical operations' portion of the budget; and exercises final approval and authority over all system nursing policies, procedures and standards of care. As the System Vice President for Quality, in partnership with the Chief Quality Officer, Ms. Moffatt leads the quality initiatives including setting the vision and strategy for clinical care services and system-wide quality outcomes, performance improvement and accreditation functions.

Ms. Moffatt has more than 25 years of progressive healthcare leadership experience in nursing, operations and quality. Ms. Moffatt holds a Master's degree in Healthcare Administration from Trinity University in San Antonio, Texas and a Bachelor of Science in Nursing from Louisiana State University Medical Center. She is a member of Sigma Theta Tau and was recognized as the Missouri Hospital Association Distinguished Quality Professional. She received the Dr. Ted Sparling Award of Academic Excellence, and has numerous publications in the areas of disease management and telemedicine. In 2015 Ms. Moffatt was selected as one of the 2015 Great 100 Nurses of Louisiana and in 2017 she was recognized as one of New Orleans's City Business Healthcare Heroes. Ms. Moffatt currently serves as the New Orleans District representative on the Louisiana Organization of Nurse Executives Board of Directors and is a member of the Women's Healthcare Executive Network, Inc.

LSBN New Directors

January 16, 2018, William E. Little assumed the position of Director of Investigations with the Louisiana State Board of Nursing (LSBN). As Director of Investigations, Mr. Little will supervise investigative staff, including RN Compliance Officers, Compliance Investigators, and Licensing Analysts, in the investigation of complaints made against Louisiana registered nurses and advanced practice registered nurses.



Prior to joining the LSBN, Mr. Little was employed as an Attorney with the Louisiana Department of Revenue (LDR), Policy Services Division and was responsible for policy formulation, regulatory drafting, and legislative analysis of corporate income and franchise matters, as well as individual income tax matters. Mr. Little also worked in the Litigation Division with the LDR, handling similar matters, as well as officer liability, cease and desist, and bankruptcy disputes. Prior to working with the LDR, Mr. Little was employed as a State Budget Management Analyst with the Louisiana Division of Administration (DOA), Office of Planning and Budget.

Mr. Little obtained his Bachelor of Arts Degree, with majors in Political Science and Criminal Justice from Indiana University, his Juris Doctor Degree from Oklahoma City University, and his Master of Public Administration Degree from Louisiana State University.

Mr. Little is active in his church, serving as Head Elder at Good Shepherd Lutheran Church. In addition, Mr. Little has held various leadership positions in animal rescue organizations throughout the southern Louisiana area.

We are proud to announce that **Monique Calmes** has been promoted and is now the new Director of the Advanced Practice Department. She initially joined LSBN in the Advanced



Practice Department as the APRN Compliance Officer. She comes to LSBN with extensive experience as an RN and a board certified FNP. She is a highly responsible professional that will oversee eligibility for APRN licensure and credentialing, manage advanced practice inquiries, provide professional consultation with other departments, and collaborate with other organizations

to promote regulatory excellence. She will provide consultative services to APRNs and utilize sound judgment to interpret and apply policies,





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regulations and procedures. She will also consult with investigators on APRN practice and prescribing issues.

Mrs. Calmes' background as an FNP includes managing all aspects of patient care in primary care settings including rural health clinics where she also provided patient care as well as supervision, management, and leadership to ancillary staff. She graduated with her Bachelor's degree from Southeastern Louisiana University in Hammond in 1993 and from Southern University in Baton Rouge with her Master's in Nursing in 2012. She has completed the National Certified Investigation and Inspector Training (NCIT) through the Council on Licensure, Enforcement & Regulation.

She continues to communicate with APRNs and stakeholders to promote the safe and competent practice of licensees as well as growth of the profession on a state and national level. Congratulations to Mrs. Calmes and welcome to the team!

The Louisiana State Board of Nursing's Division of Administration would like to welcome their three Managers to LSBN's leadership team. The division consists of seven (7) administrative units that include budgeting and accounting,



human resources, information technology (IT), facility management, front desk operations, records management and risk management. Our new Manager of accounting, facility management, front desk operations, and records management is **Gajinder S. Dhaliwal**. Mr. Dhaliwal received a Bachelors in Accounting from Wayne State University in 2007. He comes to LSBN from the Cosmetology Board where he ran their accounting and budgeting departments.

Our Human Resources Manager, **LaQueda Ricks**, has been with LSBN for a few years running the Human Resources Department. **Carl D. Nagin, Jr.** is our IT Manager and brings with him over 2 decades of experience working in IT here at LSBN. Mr. Nagin received a Bachelor of Science in Computer Science from the University of New Orleans in 1997. We look forward to continuing our LSBN journey with all of you and wish you the best of luck in your managerial positions!

New Employees

Samantha Acosta, BSN, RN, has joined the Investigations Department as a RN Compliance Officer. Prior to coming to work at LSBN, Samantha worked at Our Lady of the Lake Regional Medical Center and Mobile Infirmiry Medical Center. Samantha has been a Registered Nurse for approximately 7 years, with work experience in the emergency room, trauma, and med/surg. Samantha is a proud alumna of Georgia State University with a Bachelor's Degree in Business Administration. After working many years in the private sector,



Samantha went back to school to pursue a nursing degree. Samantha graduated from Faulkner State Community College with an Associate of Nursing degree and received her Baccalaureate degree in nursing from the University of Alabama.

Ms. Jelesia Sellers has joined the Investigations Department as a RN Compliance Officer. Prior to joining LSBN, Ms. Sellers worked for General Health Systems as a Clinical Informatics Analyst and was responsible for maintaining and developing the electronic medical records system and gathering evidence during the investigation of patient safety matters. Prior to working as a Clinical Informatics Analyst, Ms. Sellers worked at Baton Rouge General Medical Center as a staff nurse in the emergency room. She has approximately six years of nursing experience. Ms. Sellers received an Associate of Science in Nursing degree from Our Lady of the Lake College, a Bachelor of Science in Nursing degree from LSU Health Sciences Center in New Orleans, and a Master of Health Administration from LSU Shreveport.



Ms. Sellers received an Associate of Science in Nursing degree from Our Lady of the Lake College, a Bachelor of Science in Nursing degree from LSU Health Sciences Center in New Orleans, and a Master of Health Administration from LSU Shreveport.





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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 remain busy and active serving the agency, stakeholders, and the profession.

For this quarter, several board members and staff including Dr. Dufrene and Ms. Calmes represented Louisiana by attending and participating in the annual midyear meeting in Chicago with the National Council of State Boards of Nursing. Members gather to discuss current and future initiatives regarding licensure, regulation and issues facing nursing. Ms. Calmes also attended the APRN Roundtable in Chicago where stakeholders gather to discuss common issues/concerns regarding APRNs. This year's topics surrounded diagnosing by APRNs.

Dr. York concluded the agency's renewal season and the first season of biennial renewals. This immense task resulted in a total of 62,182 RNs and 5,808 APRNs successfully renewing their licenses. Dr. York is also committed to the state's nursing students and presented to Southern University's students in February.

Dr. Bienemy was inducted into the Louisiana Nurses Hall of Fame for her lifetime of achievements. As the co-lead for the Louisiana Action Coalition (LAC), she recently led an extremely successful and inspiring 2018 Culture of Health Summit, "Health Disparities and Health Equity in Louisiana-Coming Together for Action", which was held April 5th. See her articles regarding the Louisiana Center for Nursing in each edition of The Examiner.

Thank you all for your dedication and service to the state and the profession!

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



Since 1985, Public Service Recognition Week has been celebrated the first Sunday through Saturday in May. Public Service Recognition Week is a time set aside to honor the men and women who serve our nation as government employees.

I would like to take this opportunity to thank each and every staff member at the Louisiana State Board of Nursing. Not just for providing quality services to the public and our nurses, but for what they do to go above and beyond their call of duty for the betterment of our community.

Throughout the year LSBN employees literally give of their blood, sweat, and tears to support and raise awareness for many great causes that coincide with our agency's mission. Our staff host annual blood drives to help save the lives of people in need like cancer patients, accident victims, premature babies and more. We also work together annually to support the Baton Rouge Chapter of The American Heart Association, the Geaux Teal





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Ovarian Cancer Walk and the Susan G. Komen Foundation. However, not all of our efforts are focused on health-related support. This past year our employees pooled their resources and provided two bullet proof vests to local law enforcement!

Your professional and personal service to the community is appreciated. Thank you for all that you do!

Division of Regulation
Wanda Woods-Matthews
Chief Regulatory Officer

The Louisiana State Board of Nursing (LSBN) Regulatory Division is charged with the responsibility of investigating complaints of alleged violations of the Nurse Practice Act (NPA); managing the disciplinary process; monitoring individuals who enter into Agreements or receive Final Orders; and monitoring individuals who participate in the Recovering Nurse Program. Because the words "investigation", "disciplinary", and "monitoring" have negative connotations, the perception of the Regulatory Division is often viewed as negative for individuals who experience the functions of the Regulatory Division and to the general public.

The Regulatory Division is committed to the continuous improvement of our processes to change the perception of the division by increasing productivity and continuously improving the quality of our work product. To accomplish this initiative, the division has implemented the following objectives: ensure that policies and procedures are reviewed and updated as needed; complaints are reviewed by a panel to eliminate bias; the priority system is reviewed and updated as needed to assure public safety; sentencing guidelines are reviewed and updated to reflect changes in the NPA and LSBN's rules and regulations; and the disciplinary process is fair and equitable.

The Regulatory Division's goal is to ensure that individuals who violate the NPA are treated with respect and dignity throughout the investigation, disciplinary, and monitoring process.





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APRN Corner

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

Changes in Submitting Prescriptive Authority Applications and Collaborative Practice Agreements

On February 19, 2018, rules were finalized and published in the *Louisiana Register* regarding the Louisiana State Board of Nursing's (LSBN) requirements for submission of prescriptive authority applications and management of collaborative practice agreements (CPAs) including provisions for identifying alternative collaborating physicians.

The following are highlights of the revisions that are now in effect relative to prescriptive authority:

- APRNs submitting prescriptive authority applications are required to submit an **Attestation of APRN Collaborative Practice** to the board;
- APRNs are still **required to obtain and retain a collaborative practice agreement** per current statutes though they **no longer submit the collaborative practice agreement to the board**. The collaborative practice agreement must be maintained on site;
- APRNs must complete and utilize the collaborative practice agreement form provided by the board. Customized forms and collaborative practice agreements are not acceptable and are not in compliance with current rules;
- Collaborating physicians must be engaged in clinical practice within the state of Louisiana in the same or a practice comparable in scope, specialty or expertise to that of the APRN;
- Dentists may be given consideration to serve as a collaborating professional within a collaborative practice agreement only with CRNAs for services relative to anesthesia care;
- Retired physicians are not eligible to serve as a collaborating physician;
- No more than 2 collaborating physicians will be approved by the board per practice site;
- A practice site refers to a location at which an APRN exercises prescriptive authority or otherwise engages in advanced practice registered nursing. A site which has more than one physical location shall be considered a single site when the organizational policies and provisions provided by the managing entity are applicable to all affected locations;
- In the event all collaborating physicians for a practice site previously submitted to and approved by the board are unavailable, the approved collaborating physician for the practice site may designate an "alternative collaborating physician" to be available for consultation and collaboration provided certain conditions are met which are delineated in Chapter 45 of LSBN's rules;
- There must be a formal, documented, approved, and enforceable organizational policy that allows and provides for designation of an alternative collaborating physician. The alternative collaborating physician must meet all conditions as required of the approved collaborating physician.

The provisions allow for collaborating professionals and organizations to manage their processes more independently and expeditiously. APRNs are responsible for understanding and complying with all laws and regulations relative to their licensure and practice. Meeting the provisions of the new rules including development of





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policies that provide for alternative collaborating physicians is crucial.

Since the forms, instructions, and LSBN website have changed to integrate these new processes, read and follow the rules as well as all instructions very carefully in order to remain in compliance with current regulations. View the entirety of Chapter 45, which includes additional details regarding the highlights in this article, by selecting "Rules and Regulations" at <https://www.lsbn.state.la.us/NursingPractice/Laws,Rules.aspx>. Submitting forms and documents that are correct and complete greatly assists in prompt processing and approval of applications. Beginning May 14, 2018, we will no longer accept the previous forms, applications, or CPAs. We will require, accept, and process the new prescriptive authority form, which includes the attestation, that is available on LSBN's website.

LSBN continues to work closely with the National Council of State Boards of Nursing as a nationwide program and database are developed that is intended to continue to enhance and streamline application processes for nurses within and among licensing agencies throughout the country. More enhancements to LSBN's processes are on the way!

Authority and Scope of Practice of Acute Care and Primary Care Nurse Practitioners

This agency receives and responds to inquiries regarding the role and scope of practice of nurse practitioners (NPs) who provide services to patients in acute care settings or to acutely or critically ill patients. The most common questions received in this agency relate to whether or not and to what extent a family nurse practitioner, FNP, (and other NPs who are not licensed as acute care nurse practitioners) can provide and manage such care, especially in facilities or units that primarily provide or are otherwise focused upon providing acute and critical care or complex health services. The utmost priority is ensuring that persons with acute and critical health conditions receive care and 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 NP in Louisiana may provide relative to the provision of acute and primary health care.

In alignment with an article published in the Louisiana State Board of Nursing's (LSBN's) quarterly publication, *The Examiner*, in October of 2017 ("APRNs Assessing, Diagnosing, and Treating Psychiatric Mental Health Conditions", <http://www.lsbn.state.la.us/Portals/1/Documents/Examiners/ExaminerNo42017.pdf>), 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. NP education and certification is further delineated by an acute or primary care role in the pediatric, adult, and adult-gerontological populations.

Both acute and primary care NPs may treat patients with similar conditions, however, the acuity/severity and instability of symptoms helps to define the needed provider. Though there may be an overlap in some services provided by acute and primary care NPs, the emphasis of primary care NPs is in delivery of comprehensive, chronic, continuous care often characterized by an ongoing or long term relationship between the patient and the primary care NP. FNP's are primary care providers that are educated to provide a wide and full range of primary care services to individuals across the life span which includes management of the range of acute and chronic conditions associated with such typically seen in a primary care setting. If primary care NPs provide acute care services that are not consistent with their educational preparation, then they are practicing outside of their scope of practice.

Acute care NPs provide services in which patient care requirements include complex monitoring and therapies, high-intensity nursing intervention, or continuous nursing vigilance within the range of high-acuity care. Services are in the management of the complex acute, critical, and chronically-ill patient for urgent and emergent conditions.

Per the aforementioned article in *The Examiner*, when formal education, certification, and licensure is currently available for NPs in a particular role and population, including in an acute vs primary care focus, it is not judicious, advisable, or permissible for NPs to expand their scope of practice solely through on-the-job training,





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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. Educational programs do not prepare acute care NPs to provide the full range of primary care services and vice versa, meaning primary care NPs are not fully educationally prepared or certified to provide the full range of acute care services. Primary care NPs must seek formal post-graduate NP education if they wish to expand beyond their primary care population to that of an acute care NP, and acute care NPs must seek formal post-graduate NP education if they wish to expand beyond their acute care preparation to that of a primary care NP.

This is also supported in the article regarding Emergency Nurse Practitioner (ENP) certification in the spring, 2017 issue of *The Examiner* (<https://www.lsbns.state.la.us/Portals/1/Documents/Examiners/ExaminerNo32017.pdf>). Successful achievement of the ENP certification does not expand the scope of practice of a licensed primary care NP to the scope and authorized practice of a licensed acute care NP. Conversely, successful achievement of the ENP certification does not expand the scope of practice of a licensed acute care NP to the scope and authorized practice of a licensed primary care NP.

Employers, credentialing managers, physicians, APRNs, and others sometimes refer to roles and titles of NPs using terms such as “hospitalist”, “internal medicine NP”, “intensivist”, etc. NPs must utilize the title and credentials associated with their licensure as an APRN issued by LSBN. The credentials and titles utilized must be appropriate, authorized, and accurately reflect the role and population focus within which they are licensed (<https://www.lsbns.state.la.us/Portals/1/Documents/Examiners/ExaminerNo12015.pdf>).

Questions also arise when NPs are practicing in specific settings such as in an emergency department or urgent care setting. In these settings, NPs who are licensed in Louisiana in primary care are educated and nationally certified to address “urgent” types of patient conditions that are commensurate with patient conditions typically evaluated and treated by primary health care providers in non-hospital settings. These NPs are not formally educated nor authorized as an APRN to fully evaluate or treat patients who present with critical, traumatic, and/or unstable conditions commonly associated with acute care. Examples of critical and/or unstable conditions include but are not limited to patients experiencing acute myocardial infarction, pulmonary edema, acute respiratory failure, severe traumas, etc.

However, alternatively, a primary care NP could evaluate and manage patients in an emergency department’s fast track area in which patients who typically present (or are triaged and directed to be seen with less acute and critical problems) with otherwise commonly seen stable issues in primary care settings (e.g., otitis media, minor injuries, sprains).

Additionally, practice or certification as an RN does not expand the scope of practice of the APRN. For example, an RN who practiced in critical care and then completes an advanced practice educational program as a primary care NP, is not educated, authorized, or certified to practice as an acute care NP.

Further, not only does the agency receive inquiries related to the scope of practice of acute vs primary care providers, but the agency also reviews in-state and out-of-state APRN educational programs for acute and primary care NP programs that wish to offer clinical experiences in Louisiana. Some educational programs offer dual track options for NPs that include both acute and primary care content; some wish to offer content directed at integrating experiences in the ENP role and population. Students and graduates are responsible for ensuring a clear understanding of the licensure and scope of practice allowed in the state within which they wish to be licensed and provide services.

Ultimately, APRNs are responsible for understanding their scope and authorized practice as well as the use and application of appropriate and clear credentials and terminology. They are educated and certified at the advanced level and must recognize if they have the expertise and proper depth of knowledge to fully and appropriately evaluate and treat the patient. APRNs are expected to practice within established standards and are accountable for the quality of advanced nursing care rendered, for recognizing limits of knowledge and experience, planning for the management of situations beyond one’s expertise; and for consulting with or referring patients to other health





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care providers as appropriate.

The information provided in this article is the result of review by staff and board members of information primarily but not exclusively from the Criteria for Evaluation of NP Programs, The Consensus Model, certifying bodies, NP Core Competencies and Curriculum Content, previous statements/opinions/articles of LSBN, Louisiana's Nurse Practice Act and LSBN's subsequent rules.

The National Forum of State Nursing Workforce Centers
Nursing Workforce and Policy Development
by Cynthia Bienemy, PhD, RN
Director, Louisiana Center for Nursing

The Louisiana Center for Nursing has been a member of the National Forum of State Nursing Workforce Centers (NFSNWC) since 2009. The NFSNWC's membership is made up of thirty-eight nursing workforce centers from across the country. The mission of NFSNWC is to lead a national network to ensure a robust and well-prepared nursing workforce. As a member of this organization, the Louisiana Center for Nursing has had the opportunity to network with leaders in nursing and healthcare workforce from across the country. I am very proud to say that I am the current President of NFSNWC and I have had the opportunity to represent both Louisiana and the NFSNWC at state and national meetings. In this article, I will share with you NFSNWC's statement on state workforce policy development which was adopted in August, 2017.

State Nursing Workforce Centers are key to workforce development at the state and local levels. Examples of local entities include counties, cities, parishes, towns, and other political subdivisions of a state.

Collection of nursing workforce data by an individual state using The Forum of State Nursing Workforce Centers' Minimum Data Sets for Nurse Supply, Demand, and Education is crucial to advocates for workforce planning, disaster preparedness, access to care, meeting regional needs of healthcare professionals and more. For example, funding for nursing programs and health policy such as Medicaid benefits are determined by each state legislature.

Collecting, analyzing, and reporting of state level data by Workforce Centers helps to drive policy at the state level. Examples include:

- providing expertise on quality data collection and analysis based on the different methods and resources available. For example, a center may recommend a census or sampling method depending on resources available, and clearly explain the pros and cons of each method.
- providing information on the unique demographics of the state such as trends in age and ethnicity.
- developing working relationships with local persons and organizations that influence state policy. For example, labor market agencies, labor unions, major employers, state agencies, and others.
- shaping workforce development programs such as diversity in nursing and academic progression.
- reporting on trends in the nursing workforce that result from state policy. For example, the impact of additional dollars to scholarship funds for nursing education enrollment.
- utilizing nursing workforce forecasting models to predict nurse supply and demand at the state and regional levels.

In addition, nursing workforce centers contribute to national efforts to build a robust nursing workforce to address the health needs of our communities. However, there are differences in state and national workforce data collection and analysis:

- Sample sizes collected across states in national efforts may not be representative of individual states. National data, because it is a compilation of small samples from individual states, cannot provide an accurate reflection of the nursing population of an individual state. State workforce centers strive to use larger sample sizes to





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ensure accurate representation of LPN, RN, and APRN populations. Workforce centers can provide the expertise to determine the level of sampling needed to accurately capture workforce trends at the local level (e.g. within counties of a state). State level data is often collected in collaboration with the state board of nursing or state agency responsible for collecting licensure renewal information. This form of collaboration is both cost effective and results in larger sample sizes.

- National data provides “big picture” context but does not seek to explain regional or local workforce trends. It can contribute to national workforce efforts, such as providing support for federal funding initiatives. Informing state policy requires analysis appropriate to the data collection provided by the state in conjunction with the state’s socioeconomic and political trends.

For more information on state nursing workforce centers, please visit the National Forum of State Nursing Workforce Centers website at www.nursingworkforcecenters.org

Effects of Nurses Working Overtime by Cynthia York, DNP, RN, CGRN, FRE Director, Practice/Credentialing Department

Nurses working overtime often find themselves experiencing fatigue and neurobehavioral deficits such as decreased reaction time and decreased ability to make crucial decisions. Recent studies suggest working long hours have been linked to an increase in needle sticks, medication errors and increased mortality in the hospitals where the RN worked (Bae, 2013).

In 2011, The Joint Commission released a Sentinel Event Alert (SEA) that brought attention to the relationship between working extended hours and the occurrence of adverse events which may affect the safety and well-being of patients and/or the nurses caring for them. The SEA provided a list of contributing factors to fatigue, including:

- lapses in attention and inability to stay focused
- compromised problem solving
- confusion
- irritability
- memory lapses
- impaired communication

The SEA also offered nine evidence based practice recommendations to decrease worker fatigue, including the involvement of staff in the creation of the work schedule (Stimpfel, Sloane, & Aiken, 2012, p. 2506). To read the full SEA, please click here http://www.jointcommission.org/assets/1/18/SEA_48.pdf.

In 2017, the board issued a Declaratory Statement on Patient Safety, RN and APRNs Working Extended Hours that included the following position statements:

1. That in accordance with the Nurse Practice Act, it is the RN’s and APRN’s professional responsibility to refuse to accept an assignment for which he/she does not feel safe to practice. The RN’s and APRN’s decision to refuse an assignment should be based, in part, on his/her level of fatigue which may or may not be related to working shifts beyond their regular week schedule.
2. That specific institutional Continuous Quality Improvement (CQI) processes should be designed and implemented to systematically:
 - a. evaluate the adequacy of nurse staffing;
 - b. evaluate the effects and risks of nurses working extended work days/consecutive shift work;





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- c. address patient safety issues such as medication errors, patient falls, patient care concerns and complaints, etc. for trends related to fatigue and hours worked.
3. That institutions should have an evidence-based plan for the management of nursing fatigue that involves educating staff about the effects of fatigue on patient safety, the importance of rest and meal breaks, and maintaining a work environment which fosters a culture that allows staff to freely express concerns about fatigue.

Nurses must accept the responsibility for their personal health, safety and well-being. Nurses should be involved in changing the current culture of practice regarding extended work hours and fatigue. By working in collaboration with their respective management, RNs and APRNs can assist in establishing a healthy work environment; however, they must: (a) speak up when fatigue becomes a concern for their safety and well-being, as well as that of their patients and co-workers; (b) establish and maintain open lines of communication with nursing administration regarding these concerns and possible solutions; (c) ensure their ethical responsibility to practice their profession safely; (d) work with nursing administration to develop solutions to these matters such as creative scheduling mechanisms, establishing policies to facilitate manageable work hours to contribute to a healthier workforce, and to establish support groups to cope with these situations.

In consideration of safe patient care, it is recommended that health care organizations not promote nor require nursing personnel to have direct care patient assignments in excess of 12 hours in a 24 hour period or 60 hours in a 7 day period. This recommendation provides safeguards to promote patient safety and to protect nursing personnel. It is reasonable to consider that nursing personnel in direct patient care environments may be needed to work overtime due to: (a) unforeseeable emergency circumstances; (b) prescheduled on-call time; (c) documented reasonable efforts to obtain staffing; and (d) required overtime to complete a patient-care procedure in progress, where it would be detrimental to the patient if the employee left. It is incumbent upon health care facilities to adopt reasonable safeguards to prohibit excessive overtime to protect both the patient and the nurse and to maintain appropriate patient care.

You may read the full Declaratory Statement at <http://www.lsbn.state.la.us/Portals/1/Documents/DeclaratoryStatements/Declarat24.pdf>.

Sources

- Bae, S. (2013). Presence of nurse mandatory overtime regulations and nurse and patient outcomes. *Nursing Economics*, 31(2).
- Stimpfel, A., Sloane, D., Aiken, L. (2012). The longer the shifts for hospital nurses, the higher the levels of burnout and patient dissatisfaction. *Health Affairs*, 31(11).

Impressions of the Investigations Department by William E. Little, JD, MPA Director of Investigations

As of the publishing of this edition of the Examiner, I will have been Director of the Investigations Department for approximately three months. As the new director, I am becoming familiar with the procedures of the Investigations Department in particular and the Louisiana State Board of Nursing (LSBN) in general. I am also becoming familiar with various nursing procedures and terminology. I have met with each staff member (RN Compliance Officers, Compliance Investigators, and Licensing Analysts) to solicit quality improvement suggestions to improve the operations of the department. While all of this is new to me, I find it to be highly interesting and invigorating.

One of my primary initial tasks is the formulation and implementation of policies and procedures for the department. The department will work as a team to review current policies and procedures and revise and/or create new policies and procedures as needed to improve efficiencies and streamline processes. Through the implementation of such policies and procedures, the Investigations Department will continue to safeguard the life and health of the citizens of Louisiana, while at the same time protect the due process rights of individuals under investigation. Even though this is a new experience for me, I look forward to being a part of the team, as the Investigations Department looks to the future.





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NCLEX-RN®: Implications of Pass Rates for Louisiana and the Nursing Education Program
by Patricia Dufrene, PhD, RN
Director, Education and Licensure

A nursing education program is a program whose purpose is to prepare graduates eligible to write the licensing examination and practice as competent and efficient entry-level registered nurses. Boards of Nursing approve pre-licensure nursing educational programs, which meet their educational standards and assure protection of the public through evaluation and enforcement of those standards. In accordance with LAC46:XLVII.3535.B, the Louisiana State Board of Nursing (LSBN) has legal authority over the programs and statutory authority to close programs that are not meeting the standards, which include 80% first time pass rate annually on the National Council Licensure Examination for Registered Nurses (NCLEX-RN®). Nursing education programs in the state of Louisiana are reviewed annually at the February Board meeting for compliance with the Rules and Regulations related to preparation of registered nurses and advanced practice registered nurses.

The approved pre-licensure undergraduate programs in the state of Louisiana are listed below in Figure 1. Fifty percent (14) of the pre-licensure registered nurse education programs in Louisiana lead to a baccalaureate degree, forty-six percent (13) lead to an associate degree in nursing and four percent (1) is a Diploma program (Figure 1). Programs leading to an associate or bachelor's degree in nursing are conducted by an educational unit, department, division, college or school that is an integral part of a college or university. A program leading to a diploma in nursing is conducted by an educational unit that is an integral part of a hospital.

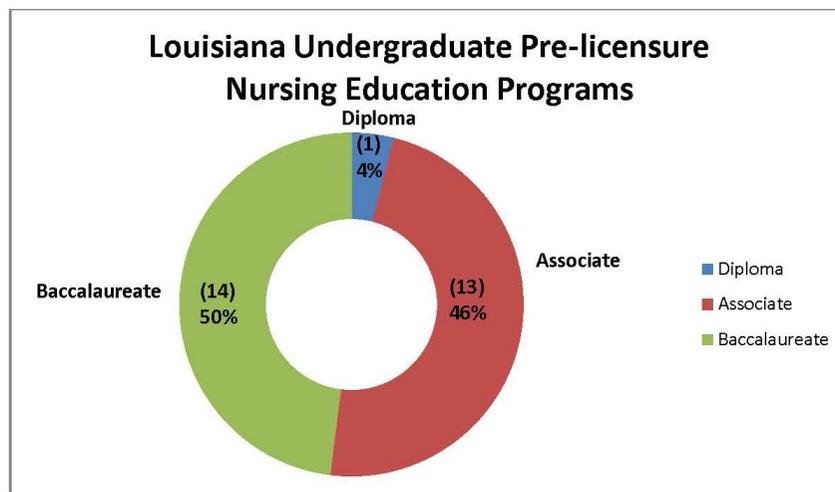


Figure 1- Breakdown by percentage and number of the 28 pre-licensure nursing education program approved in Louisiana

Approval status is based on performance of each program and compliance with the standards identified in the Rules and Regulations. There are three levels of approval of nursing education programs in Louisiana identified as:

1. Initial Approval: Programs receiving approval to initiate a program are placed on initial approval. They may petition for approval after the first cohort of students graduate and take the NCLEX-RN®.
2. Full approval: The program meets all the education standards set forth by the Board in the Rules and Regulations.
3. Probation: A program has failed to meet one or more educational standards set forth by the Board in the Rules and Regulations.

One standard measured in regulation of undergraduate nursing education programs leading to licensure is the passage rate of the first time testers on the National Council of State Boards of Nursing (NCSBN) NCLEX-RN®. The NCLEX-RN® has been administered as a computerized adaptive test (CAT) since April 1994. CAT makes the test challenging for everyone by providing varying difficulty level and length based on the individual tester. The NCLEX-RN® is designed to test knowledge skills and abilities reflecting entry-level practice. The focus is on the delivery of safe





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competent care by the generalist registered nurse. Every three years, NCSBN conducts a practice analysis for entry-level registered nurses. The analysis results are utilized to establish the passing standard and make necessary changes to the test blueprint. On April 1, 2016 the most recent test plan was enacted and the passing standard was unchanged. The passing standard for NCLEX-RN® reflects the minimum ability required to safely and effectively practice nursing at the entry-level.

The pass rate measured from January to December of the previous year is reviewed for compliance with the standard. Programs achieving less than an 80% pass rate are not in compliance with the standard and are placed on conditional approval. Correction of the deficiency must be demonstrated for the entire year to have restoration of full approval.

NCSBN reports the national pass rate for January to December 2017 as 87.12%. Louisiana exceeded this with a pass rate of 92.83% for first time test takers. The pass rates for the Louisiana schools of nursing are as follows:

Performance of First Time Candidates of Nursing Education Programs in Louisiana on NCLEX-RN, regardless of where taking examination, January 1 - December 31, 2017.

Nursing Programs	Number of Candidates	Number Passing	Percent Passing
Associate Degree			
Baton Rouge CC	25	24	96.00
Bossier Parish CC	57	53	92.98
Delgado CC	221	191	86.43
Fletcher Technical CC	11	9	81.82
Louisiana Delta CC	44	40	90.91
LSU Alexandria	74	70	94.59
LSU Eunice	37	32	86.49
Louisiana Tech University	47	47	100.00
McNeese State University	18	14	77.78
Northwestern State University	79	77	97.47
South Louisiana CC	31	29	93.55
Southern University at Shreveport	40	29	72.50
SOWELA Technical CC	0	NA	NA
Total	684	615	89.91
Diploma			
Baton Rouge General	32	27	84.38
Total	32	27	84.38
Baccalaureate			
Chamberlain University	0	NA	NA
Dillard University	13	9	69.23
Grambling State University	1	0	0.00
Louisiana College	33	27	81.82
LSU Health Science Center	205	199	97.07
McNeese State University	88	83	94.32
Nicholls State University	107	99	92.52
Northwestern State University	138	132	95.65
Franciscan Missionaries of Our Lady	124	123	99.19
Southeastern Louisiana University	132	130	98.48
Southern University Baton Rouge	131	116	88.55
University of Holy Cross	36	36	100.00
University of LA Lafayette	110	105	95.45
University of LA Monroe	63	60	95.24
Total	1,181	1,119	94.75
GRAND TOTAL	1,897	1,761	92.83

Table 1: 2017 NCLEX-RN® Pass rates for Louisiana Educational Programs





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The following Louisiana pre-licensure registered nurse education programs are on probation for 2018 secondary to pass rates lower than 80% from January 1 - December 31, 2017:

- Dillard University, New Orleans
- Southern University Shreveport

References and Additional Resources

Louisiana State Board of Nursing:

Title 46, professional and occupational standards, part XLVII. <http://www.lsnb.state.la.us>

RN Students <http://www.lsnb.state.la.us/FAQS/EducationandExaminationFAQ.aspx>

Schools of Nursing <http://www.lsnb.state.la.us/Education/SchoolsofNursing.aspx>

National Council of State Boards of Nursing:

National Council State Board of Nursing <http://www.ncsbn.org>

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

Motion to approve the November 14, 2017 minutes
Motion Carried

NEW BUSINESS

Motion to approve the Consent Agenda Motions

1. Consent Agenda Motions
 1. Education Consent Agenda Motions
 1. NCLEX Report
 2. Accreditation Reports
 2. Approved Program Reports
 1. Franciscan Missionaries of Our Lady University - ACEN Correspondence
 2. Southern University at Shreveport - Site Visit
 3. LSU Eunice - Focused Site Visit
 3. Education Announcements

Motion Carried

EDUCATION

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

Motion Carried

Motion to accept the Board 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 the probationary status of the Associate of Science in Nursing education degree program.

Motion Carried

Motion to approve the major/substantive change request from the University of Louisiana at Monroe to add the following role:

Family Nurse Practitioner (FNP, MSN)

Motion Carried (Tim Cotita abstained)

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

Pediatric Nurse Practitioner Acute Care (BSN-DNP)
Pediatric Nurse Practitioner Primary Care (BSN-DNP)

Motion Carried (Dr. Bonanno was recused.)

Motion to approve the major/substantive change from Franciscan Missionaries of Our Lady University to revise the program and course outcomes, curriculum sequence, course credit hour, and total clinical hours in the current and following approved graduate education degree program:

Family Nurse Practitioner (FNP)

Motion Carried

Motion to accept the letter of intent and feasibility study from William Carey University and approve Step I to establish a baccalaureate of science in nursing education degree program.

Motion Carried





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Motion to approve Step II from Grambling State University to establish a baccalaureate of science in nursing education degree program and grant initial approval.

Motion Carried

Motion to accept and approve the request to restructure the baccalaureate of science in nursing education degree program at Dillard University.

Motion Carried

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

MSN, PMC, DNP:

Certified Nurse-Midwife (CNM)

Women's Health Nurse Practitioner (WHNP)

Family Nurse Practitioner (FNP) MSN, PMC

Psychiatric Mental Health Nurse Practitioner (PMHNP)

Motion Carried

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

Certified Registered Nurse Anesthetist (DNPNA)

Motion Carried

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

Certified Registered Nurse Anesthetist (MSNA)

Motion Carried

Motion to defer the request of Louisiana State University Health Sciences Center to initiate an Early Admission Registered Nurse (EARN) program through a concurrent enrollment articulation agreement with Delgado Community College/Charity School of Nursing pending clarification of the financial impact on enrolled students who are unsuccessful on NCLEX-RN and of the availability for a part-time plan of study.

Motion Carried (Dr. Bonanno was recused.)

Motion to defer the matter related to Excelsior College's on-line Associate of Science in Nursing education degree program in Louisiana until the February 22, 2018 Board meeting.

Motion Carried

RN CREDENTIALING/PRACTICE

Motion to approve the Declaratory Statement on the Registered Nurse Delegating Medication Administration to

Trained, Unlicensed School Employees in Life Threatening Situations as presented herein; and authorize the retraction of all previously rendered practice opinions and declaratory statements related to Registered Nurse (RN) delegation of medication administration to trained, unlicensed school employees in life threatening situations.

Motion Carried

Motion to approve LSBN's process for credentialing Internationally Educated Nurses (IENs), including but not limited to, the:

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;

Utilization of the highest level of national standards for determining English proficiency.

Motion Carried

OPERATIONS

To accept the Amended FY 2018 and the FY 2019 Annual Budget.

Motion Carried

OFFICE OF THE EXECUTIVE DIRECTOR

Motion to approve underwriting the cost of renting the Pennington Biomedical Research Center for the Louisiana Action Coalition's 2018 Culture of Health Summit at a cost of \$2,000.

Motion Carried

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

Motion Carried





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Disciplinary Matters

The LSBN took a total of 22 actions at the December 13, 2017 hearing panel. For a complete listing click the link below:

[December 13, 2017](#)

The LSBN took a total of 51 actions at the January 24, 2018 hearing panel. For a complete listing click the link below:

[January 24, 2018](#)

The LSBN took a total of 1 action at the January 30, 2018 hearing panel. For a complete listing click the link below:

[January 30, 2018](#)

The LSBN took a total of 46 actions at the February 21, 2018 hearing panel. For a complete listing click the link below:

[February 21, 2018](#)

2018 State Holiday Schedule

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

- June 14, 2018
- August 9, 2018
- October 11, 2018
- December 13, 2018

