

LOUISIANA STATE BOARD OF NURSING  
17373 PERKINS ROAD  
BATON ROUGE, LA 70810

**CLINICAL AVAILABILITY AND CAPACITY TASK FORCE**  
**MINUTES OF JULY 7, 2017**

Presiding: Dr. Laura Bonanno, LSBN Board President

Participants: Dr. Karen Lyon, LSBN Executive Director  
Dr. Cynthia Bienemy, Director, Louisiana Center for Nursing  
Dr. Patricia Dufrene, LSBN Director of Education/Licensure  
Christin Accardo, RN Compliance Officer, LSBN Dept. of Education/Licensure  
Tarneisha Scott, Administrative Assistant to LSBN Director of Education/Licensure

Guests: Paul Salles, President, Louisiana Hospital Association  
Dr. Dana Clawson, Chair, LACANE

Absent: Teresita McNabb, Task Force Chair and LSBN Board Vice President

**Start Time: 9:00 AM**  
**End Time: 10:38 AM**

<b>Agenda Item</b>	<b>Discussion/Recommendations</b>	<b>Follow-up/Attachments</b>
<b>1. Call to Order</b>	The meeting of the Clinical Availability and Capacity Task Force was called to order by Dr. Laura Bonanno, who presided as Chairman of the Task Force in Teresita McNabb's absence, on July 7, 2017 at the Louisiana State Board of Nursing located at 17373 Perkins Road, Baton Rouge, LA 70810.	
<b>2. Introduction and Welcome Guests</b>	Task Force members and guests were introduced.	
<b>3. Approval of Minutes</b>	A motion to approve the minutes from the May 24, 2017 task force meeting was made, seconded and approved by task force members.	

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<p><b>4. Review Taskforce development and charge</b></p>	<p>P. Dufrene provided a history of Task Force and noted that the charge from the Board was that a Task Force be formed to address issues with clinical availability and capacity in the state of Louisiana.</p> <p>She also highlighted the key points from the first Task Force meeting as follows:</p> <ul style="list-style-type: none"> <li>• The charge from the Board</li> <li>• Review of documentation presented by C. Bienemy regarding nursing supply and demand</li> <li>• Review of documentation presented by P. Dufrene regarding concerns of clinical availability</li> <li>• LACANE meeting recap with P. Salles</li> </ul> <p>Discussion ensued.</p>	
<p><b>7. Open Discussion Brainstorm of Assessment and Needs and Key Participants</b></p> <p><b>6. Report from LACANE Subcommittee Meeting with LHA President and CEO, Paul Salles</b></p>	<p>Dr. Bonanno noted that the charge and concerns were clear. However, she stated that the Louisiana State Board of Nursing’s role in the matter was not clear.</p> <p>K. Lyon expressed the following concerns:</p> <p><i>The 1<sup>st</sup> concern:</i> LSBN has to be cognizant of the possibility of future legal action against the Board in the Anti-trust area. It is not the Board’s mission to tell schools of nursing that meet criteria for approval and can accommodate their students in the clinical area that the Board has the ability to deny them.</p> <p><i>The 2<sup>nd</sup> concern:</i> In-state schools expansions vs. out-of-state schools coming into the state of Louisiana and a possible anti-trust issue on a federal level with the differentiated treatments of out-of-state programs from in-state programs. However, LSBN acts, we must be consistent and treat both in-state and out-of-state schools the same.</p> <p>She ended by stating that LSBN’s approach to managing these issues may open the Board up to liability.</p>	

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	<p>L. Bonanno stated that her concern was the <i>Impact</i> form, which is sent to Schools of Nursing to respond. However, the Board receives the response and no action is taken to restrict nursing schools entering the Louisiana market solely based on the responses on the <i>Impact</i> forms.</p> <p>Discussion ensued regarding the <i>Impact</i> form and incoming programs.</p> <p>D. Clawson suggested that there be evaluation criteria for those schools of nursing entering into the state. She also suggested that the schools of nursing who object to new nursing programs be required to show evidence of lack of space for clinical placements.</p> <p>C. Bienemy commented regarding “qualified students.” She noted that on the annual report, the question is asked how many qualified students were not admitted into the program. The follow-up question to that question asks the program to rank in order the reasons those students could not be admitted. The top 3 reasons in the 2016 annual report were the following:</p> <ul style="list-style-type: none"> <li>• Budgeted Faculty Positions Not Available</li> <li>• Faculty Salary Not Competitive</li> <li>• Qualified Faculty Not Available</li> </ul> <p>Lack of clinical space ranked 5<sup>th</sup> as the reason for not being able to admit qualified students.</p> <p>D. Clawson admitted that lack of qualified faculty and faculty that a program can afford is a main reason for not admitting qualified students.</p> <p>C. Bienemy also noted that she discovered in the last annual report that lack of clinical preceptors was another reason schools might not</p>	

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	<p>be able to admit otherwise qualified students. She gave the example of a program that did a major curriculum change because of the lack of available preceptors.</p> <p>K. Lyon added that preceptors grow tired of precepting as well.</p> <p>Discussion ensued regarding preceptors and board approval process.</p> <p>P. Salles recalled the discussion from his meeting with LACANE in January 2017. He noted the following from his encounter:</p> <ul style="list-style-type: none"> <li>• The problems with lack of clinical availability are regionalized. It is not an issue in every part of our state.</li> <li>• There is no regionalized coordinated effort for managing clinical assignments between hospitals and schools of nursing.</li> </ul> <p>P. Salles also noted that he thinks that the hospitals would be willing to have a discussion with schools of nursing and coordinate clinical site availability. He believes that there is a general desire to train nurses.</p> <p>Discussion ensued regarding coordination of clinical sites.</p> <p>D. Clawson expressed the concern that hospital-based nursing programs are increasing and “taking over” nursing.</p> <p>P. Salles assured D. Clawson that hospitals are supportive of nursing programs.</p>	
<p><b>5. Review of Confluence WIKI documents</b></p>	<p>P. Dufrene made the Task Force aware of the request in the last Task Force meeting to place documentation related to the discussion of clinical availability and capacity in the state of Louisiana placed on Confluence Wiki for all Task Force members to review and reference.</p>	

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<p><b>7. Open Discussion Brainstorm of Assessment and Needs and Key Participants (continued)</b></p>	<p>L. Bonanno and D. Clawson asked P. Dufrene if there were a tally of “specific” programs who are noting that there is limited clinical availability.</p> <p>P. Dufrene noted that there is only a tally of the individual <i>Impact</i> forms that comes to the Board.</p> <p>Discussion ensued.</p> <p>L. Bonanno suggested that the <i>Impact</i> form be revised to be more “meaningful.”</p> <p>P. Dufrene gave history of <i>Impact</i> form and why the form was created by the Board of Nursing. The form was developed on the request of the deans and directors, who would rather check that the program had an impact on their program than write a letter declaring the impact.</p> <p>P. Dufrene noted that the result of deans and directors responding to the <i>Impact</i> form has now pressured the Board of Nursing to weigh their concerns when program approval is brought forth.</p> <p>P. Salles probed the meaning of “impact.”</p> <p>He noted that because a program states that there is a negative impact, it does not mean that the program could not find clinical availability someplace else.</p> <p>K. Lyon noted that “impact” could be positive or negative. She also stated that there is no evidence that schools have decreased enrollment because of a lack of clinical sites for their students.</p> <p>L. Bonanno noted that when the Board receives the <i>Impact</i> form that it implies that the information should be used in the decision making of approval of a program.</p>	

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	Discussion ensued.	
<p><b>8. Wrap-Up and Next Steps</b></p>	<p>L. Bonanno summed up the meeting by confirming the following:</p> <ol style="list-style-type: none"> <li>1. Make clear to the Schools of Nursing the role of the Board of Nursing: <ul style="list-style-type: none"> <li>• The BON cannot deny schools if they meet the criteria</li> <li>• Ask David or Carrie to compose a statement regarding the Board of Nursing’s legal standpoint</li> </ul> </li> <li>2. Modify the Impact Form</li> <li>3. Orchestrate a meeting with the schools of nursing and hospital executives. Set up regional meetings (3 at the most) where both parties can communicate each other’s needs.</li> </ol> <p>L. Bonanno noted that this will be an initial meeting and a follow-up meeting would be established if a large part of a region could not attend.</p> <p><i>K. Lyon stated that the Board’s role would be to support and bring each party together.</i></p>	<p>Dr. Lyon will follow up with David Bolton to get a legal opinion written in regards to what action we can take as a BON when SONs object to establishment or expansion of a nursing program only related to impact on finding clinical placements.</p> <p>P. Salles agreed to collaborate with chairperson of LACANE (D. Clawson) and chairperson of Louisiana Organization for Nurse Executives (LONE) (Anna Cazes) to develop the agenda for the meeting.</p>
<p><b>9. Next Meeting</b></p>		<p>Task Force set a meeting date for the collaboration meeting between schools of nursing and hospital executives. LSBN will host; LHA will be the back-up meeting place if LSBN could not host.</p>

Agenda Item	Discussion/Recommendations	Follow-up/Attachments
		Date: Friday, September 29, 2017 Time: TBA Place: Louisiana State Board of Nursing, 17373 Perkins Road, Baton Rouge, Louisiana 70816
<b>10. Adjourn</b>	Meeting adjourned at 10:38 am.	

Notes Transcribed by: Tarneisha Scott

Date: July 10, 2017

Approved by: \_\_\_\_\_

Date: \_\_\_\_\_