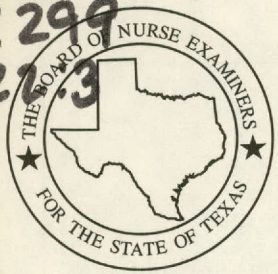


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RN UPDATE

Accreditation ★ Licensure ★ Practice ★ Compliance

October/November 1991

Vol. 22, No. 3

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NEWSLETTER HAS NEW LOOK

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With this issue, we are proud to introduce the new design and name for our quarterly newsletter, which now will be called *RN Update*. The design is the result of a BNE staff contest to rename the newsletter and was created by Laura Williford. Ms. Williford is an accountant for the BNE and serves on the newsletter committee.

She has been on the staff since 1985. In her time away from the office she enjoys art and painting.



Laura Williford, winner of the staff competition to rename the newsletter.

The newsletter committee and staff are committed to making this publication a major source of current information on key nursing issues and topics for registered nurses in

Texas. Your suggestions on issues or matters of particular concern to you are welcome. Address your comments to: Editor, *RN Update*, Board of Nurse Examiners, Box 140466, Austin 78714.

The newsletter is published four times each year. The Board recently decided to mail two issues each year to all registered nurses in the state. If you would like to receive the newsletter on a quarterly basis, the annual subscription fee is \$2.50, plus 8% sales tax. An order form is included on page 15 of this issue.

Please share the information in this newsletter with as many nurses as possible by posting the newsletter, duplicating portions or all of the newsletter, or using excerpts in your own newsletter. ♦

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PRESIDENT'S COLUMN

As the Board of Nurse Examiners begins a new fiscal year, we welcome a new appointee, Dr. Mary Fenton, RN, Dean of The University of Texas Medical Branch at Galveston, School of Nursing, who will represent BSN programs. Dr. Fenton replaces Dr. Teddy Langford, Dean of the Texas Tech Health Science Center School of Nursing, Lubbock, whose six-year term expired this year.



Delegates from Texas recently attended the National Council of State Boards of Nursing Annual Meeting in Chicago, where 58 of the 62 member boards were represented. The Council is comprised of all 50 state Boards of Nursing (RN and LVN/LPN) and several territories. Its mission is to promote public policy related to the safe and effective practice of nursing in the interest of public welfare. The group strives to accomplish its mission by acting in accordance with the decisions of its member boards of nursing on matters of common interest and concern affecting public health, safety, and welfare.

To accomplish its aims, the National Council provides services and guidance to member boards which regulate entry into nursing practice, continuing safe nursing practice, and nursing education programs. During the annual meeting, delegates decided that computerized adaptive testing (CAT) would be the future method of administering all National Council Licensure Examinations (NCLEX). This progressive testing method will include a transition period and, therefore, will not be implemented before November 1993. Additional information regarding implementation of CAT appears on page 7 of this issue. This form of evaluating minimal competencies of the new graduate is not to be confused with computerized clinical stimulation testing (CST) which is still being researched and developed.

The delegates also decided that the National Council would provide computer linkage which would allow all member boards access to the Disciplinary Data Bank. In addition, the delegates adopted two papers prepared by the Nursing Practice and Education Committee: "Conceptual Framework on Continued Competence" and "Nursing Care in the School Setting: Regulatory Implications". Networking within the National Council is critical in order for nursing to identify future directions and enhance our shared values and goals.

Eileen Piwetz, RN, EdD
President, Board of Nurse Examiners

BOARD PREPARES FOR SUNSET REVIEW

Board and staff have completed the self-evaluation phase of the Sunset Review process for the Board of Nurse Examiners. Sunset legislation mandates review of government agencies by establishing a life span, at the end of which the agency's legislation expires and must be recreated.

The Texas Sunset Act passed by the 65th Legislature requires that a review of the Board of Nurse Examiners and the Nurse Practice Act be conducted to determine the need to continue to regulate nursing practice in Texas; whether the Nurse Practice Act adequately protects the public's health, safety and welfare; whether statutory changes should be made to benefit the public; and if the Board of Nurse Examiners operates in the public's interest efficiently and appropriately.

The self-study report has been submitted to the Sunset Commission for review. This report provides evidence of the Board's effectiveness in regulating professional nursing and the rationale for the continued existence of the BNE. The Sunset Commission staff will evaluate the agency and prepare a report with recommendations for the Sunset Commission. The Board will have an opportunity to respond to the draft recommendations. Public hearings will be held regarding each agency under review after which a final report of the Sunset Commission will be sent to the Legislature along with a recommendation to abolish or continue the agency.

During the 73rd Legislature (January-May 1993) the BNE Sunset bill will be introduced. Unless the Legislature enacts a new Nurse Practice Act, the BNE would be "sunsetting" and would begin a one-year phase out. Please contact Wendy Francik, Research Assistant for the BNE (512/835-8674), if you wish more detailed information regarding the Sunset Review process. If you would like to be notified of the date and time of the hearings before the Sunset Commission, please let us know. ♦

BOARD MEETING DATES

The next regular meeting of the Board of Nurse Examiners for the State of Texas is scheduled on **January 28-30, 1992**, in Austin.

The Board meetings are open to the public. Any group or individual wishing to attend any portion of the Board meeting should contact Erlene Fisher at 512/ 835-8675 at least four weeks prior to the Board meeting to verify availability of space, the date and location. ♦

ROLES OF STATE BOARD AND PROFESSIONAL ASSOCIATION VITAL TO THE NURSING PROFESSION

All of us are aware of the many changes taking place in the health care system today. New legislation, new regulations, complex medical and ethical issues affect us both as providers and consumers of health care services. Who do you turn to for interpretation of new regulations and standards? How can the nurse have a voice in the legislation that affects his or her practice? How are we as consumers of health care services protected under the law?

Although the Board of Nurses Examiners and professional nursing associations are both involved in the arena of professional nursing, these organizations serve different purposes and provide different services to the profession and the public. The Board is a state agency charged with regulating the practice of professional nursing and establishing nursing education standards. A professional nurse association is a non-profit organization that is involved in representing its members in legislative, political and practice matters. It provides a central voice for its professional nurse membership.

On March 28, 1909, the Texas Legislature passed the original Texas Nurse Practice Act, thus formally recognizing professional nursing as a vital service to society. The act also provided for the establishment of a Board of Nurse Examiners empowered with the responsibility and legal authority for ensuring society competent practitioners of nursing.

The Nurse Practice Act provides that the privilege and responsibility of practicing professional nursing be entrusted only to those persons duly licensed, registered and practicing under the provisions of this act. The paramount outcome of this act is protecting the welfare of the people of Texas.

Accordingly, "the mission of the Board is to protect and promote the welfare of the people of Texas. This purpose supersedes the interests of any individual, the nursing profession, or any special interest group," as stated in the Board's *Rules and Regulations Relating to Professional Nurse Education, Licensure and Practice*. Employees of the Board are prohibited from lobbying the legislature. The Board fulfills its mission by carrying out the laws enacted by the Texas Legislature.

In the Texas government, policy making duties are divided between the legislature and the governor. The legislature writes the laws and appropriates the funds for state agency operations. The governor, the state's chief executive officer, has a major voice in setting the legislative agenda and vetoing bills. However, the legislature and the governor delegate to state agency boards, like the

Board of Nurse Examiners, the tasks of setting and administering the operating policy for their agencies within the framework of state law and appropriations.

The Board meets regularly to execute its responsibilities for administering the law governing professional nurse practice. The Board employs professional and support staff to carry out the provisions of the law along with the policies and regulations established by the Board. The Board pursues its mission by establishing minimum standards for educational programs in nursing, licensing qualified practitioners, educating practicing RNs regarding changes in the law, investigating violations of the act and imposing discipline on the licenses of those determined to be in violation of the Nurse Practice Act or the Board's rules.

A professional nursing organization can lobby the legislature and governor for the interests of its members and the profession of nursing. A professional nursing organization provides a united voice which may speak out on the issues important to the nursing profession.

In addition, a professional nursing organization provides leadership in other areas such as improving the quality of nursing care, working conditions and benefits for nurses. A nursing association also may lead the way in developing public health policies.

The Board and the professional association have separate but equally important roles to play for the RN. The professional nursing association represents its members while the Board serves the people of Texas. Both organizations are there to assist you both as nurses and as consumers of health care services. ♦

BOARD APPOINTMENT ANNOUNCED

The Governor's Office has announced the appointment of Mary V. Fenton, RN, DrPH, to the Board of Nurse Examiners. Dr. Fenton is Dean and Professor of the University of Texas Medical Branch at Galveston, School of Nursing. She received a Doctorate in Public Health from The University of Texas School of Public Health, Houston; a Master of Science in Medical-Surgical Nursing from the University of Michigan and a Baccalaureate in Nursing from the University of Texas, Galveston. She is also recognized as an Adult Nurse Practitioner by the Board of Nurse Examiners. Dr. Fenton will represent Baccalaureate degree nursing programs. She replaces Teddy L. Langford, RN, PhD, Texas Tech University Health Science Center, Lubbock whose term expired this year. Dr. Fenton's term will run until 1997. ♦



NATIONAL COUNCIL ELECTS BOARD OF DIRECTORS

The National Council of State Boards of Nursing has announced the election of the following persons to serve two-year terms on its Board of Directors: **Judie Ritter**, RN, MSN, Florida Board of Nursing, Secretary; **Carol Osman**, RN, PhD, North Carolina Board of Nursing, Treasurer; **Gail McGill**, RN, BSN, Alaska Board of Nursing, Area I Director; and **Marcella McKay**, RN, MSN, Mississippi Board of Nursing, Area III Director. Officer elections were held at the National Council's Annual Meeting, July 30-August 1, 1991, in Chicago.

These newly elected officers join continuing members of the Board: **Carolyn Hutcherson**, President; **Joan Bouchard**, Vice-President; **Shirley Brekken**, Area II Director; **Jean Caron**, Area IV Director; and **Susan Boots**, Director-at-Large.

As members of the Board of Directors, these women will help guide the National Council in meeting its mission and objectives. ♦

BOARD CONSIDERS GUIDELINES ON IV CONSCIOUS SEDATION

In response to numerous calls and written requests for information on RNs administering a variety of agents for the purpose of sedation during various types of surgical procedures, the Board, at its July meeting, reviewed the guidelines on Qualified Providers of Conscious Sedation established by the American Association of Nurse Anesthetists (AANA).

The AANA's position is that optimal anesthesia care is best provided by qualified anesthesiologists and CRNAs. However, they recognize that the demand in the practice setting necessitates non-CRNA RNs providing IV conscious sedation. The guidelines address the RN's knowledge, the availability of resuscitation equipment and drugs and the need for expert emergency support personnel. The Board recognized AANA's guidelines as being comprehensive and consistent with the Board's position. Therefore, if you are practicing in a setting which necessitates the use of conscious sedation or are developing policies related to this procedure, you may wish to review the AANA guidelines. For information, you may contact the American Association of Nurse Anesthetists, 216 Higgins Road, Park Ridge, IL 60068-5790.

The Board recognizes that other nursing specialty groups may also have acceptable standards of practice for the delivery of conscious sedation by RNs. ♦

IMPLEMENTATION OF MANDATORY CE BEGUN

On September 1, 1991, Texas joined 18 other states and two territories which require continuing education for registered nurses as a condition of re-licensure. The new rules are the result of legislation passed in 1989 and require RNs to have 20 contact hours, or two Continuing Education Units (CEUs), in the two-year period which coincides with the nurse's license renewal.

Although the rules became effective on September 1, they will be phased in over the next two years. Beginning in September 1991, nurses began receiving notice of the CE requirements with their license renewal. Everyone will have two years in which to complete the 20 continuing education hours. The CE hours must be completed within the two-year period following notification from the Board and the subsequent license renewal. Continuing education hours taken prior to that time are not retroactive.

There are a number of ways in which nurses can fulfill the CE requirements. At least 10 hours must be completed in Type I programs. These are programs which meet the criteria in the rules, have a nurse on the planning committee, include nurses in the target audience and have been reviewed and approved by a national nursing organization or one of its state associations or chapters recognized by the Board. The other 10 hours may be obtained in additional Type I programs or in Type II programs. Type II programs are those which meet the criteria in the rules, but have not undergone outside review by a nursing organization. Nurses also may obtain CE credit through college courses, home study, initial certification in a nursing specialty, authorship, and program development and presentation.

Board staff continues to receive numerous inquiries regarding the CE rules. Some of these questions are addressed in the Practice Related Questions and Answers on pages 10-11 of this issue.

We will continue to update you on the progress of CE implementation in future issues of the newsletter. ♦

FEE INCREASE FOR LICENSE RENEWAL

House Bill 1, the Appropriations bill for the 1992-1993 biennium funding the State budget, was passed during the Second Session of the 72nd Texas Legislature. A rider was attached to this bill by the Legislature requiring the RN license renewal fee to be increased to **\$30.00 effective September 1, 1991.**

HB 7 MANDATES USE OF UNIVERSAL PRECAUTIONS BY ALL HEALTH CARE WORKERS

House Bill 7, a health and human services reorganization bill passed during the first special session of the 72nd Texas Legislature, included stipulations regarding HIV and hepatitis B infected health care workers. This legislation mandates that all health care workers follow the universal precautions set by the Centers for Disease Control, that all institutions establish procedures to monitor compliance, and that professional educational programs provide training on the universal precautions.

According to this legislation, health care workers with exudative lesions or weeping dermatitis must avoid all direct patient care and the handling of patient care equipment used to conduct invasive procedures. A health care worker can return to direct patient care and the handling of patient care equipment when the worker's condition resolves.

If a health care worker is infected with HIV or hepatitis B virus and is HBeAG positive, the worker cannot perform exposure-prone procedures without advice from an expert review panel, which would determine under what circumstances the worker can continue performing these procedures. A health care worker who performs an exposure-prone procedure must notify a prospective patient of the health care worker's seropositive status and obtain the patient's consent before the patient undergoes the procedure, unless the patient is unable to consent. Professional health care associations and health facilities have been given the responsibility of setting guidelines for the expert review panels and identifying exposure-prone procedures.

The legislation specifically states that mandatory testing of health care workers is not required. An infected health care worker who follows the universal precautions is allowed to perform procedures that are not exposure-prone and to provide services in emergency situations. In addition, the legislation mandates that health care facilities provide infected workers the opportunities to continue patient care and receive job retraining and career counseling. If a health care worker fails to comply with the new requirements, disciplinary action by a licensing board is warranted. ♦

1992 EXAMINATION DATES

During 1992, the National Council Licensure Examination for Registered Nurses (NCLEX-RN) is scheduled in Austin, Galveston and Fort Worth on the following dates:

February 5-6 (W-Th) July 8-9 (W-Th).

APPOINTMENT OF DIRECTOR OF EDUCATION

Dr. Elizabeth Bole joined the Board of Nurse Examiners' staff on September 4, 1991 as Director of Education for the Education and Examination Department. She holds both a Bachelor of Science in Nursing and a Master of Science in Nursing from Texas Woman's University in Houston. Dr. Bole obtained a Doctorate in Education, Allied Health Administration and Education, from the University of Houston.

Dr. Bole has worked as Director of Health Services at the University of Houston and was Assistant Administrator of Patient Care Services at St. Anthony Center in Houston. She taught management, medical-surgical nursing and oncology at the University of St. Thomas, TWU-Houston, San Jacinto College, and at M.D. Anderson Hospital. She was a guest lecturer for the UT-Houston Nursing Administration graduate program. Her clinical experiences include medical-surgical staff nursing, intensive care and coronary care nursing.

As Director of Education and Examination, Dr. Bole will be responsible for all aspects of the Board's activities related to accreditation of professional nursing programs and administration of the licensure examination for registered nurses. ♦

1991 NURSE PRACTICE ACT AND RULES/REGS AVAILABLE

The 1991 Nurse Practice Act and excerpts from the Board of Nurse Examiners' *Rules and Regulations Relating to Professional Nurse Education, Licensure and Practice* have been revised to include amendments to these documents made since 1989. Single copies may be obtained by sending a self-addressed, \$.75 stamped envelope to the Board of Nurse Examiners, Box 140466, Austin, TX 78714, Attn: Publication Clerk. Additional copies are available for \$1.00 each, plus 8% sales tax.

The September 1991 revised edition of the complete *Rules and Regulations Relating to Professional Nurse Education, Licensure and Practice* is also available. The cost is \$3.50 per copy, plus 8% sales tax.

An order form for these and other Board publications is found on page 15 of this issue. ♦

TEXAS RN NUMBERS INCREASE BY 3,520 FOLLOWING JULY EXAM

The Board of Nurse Examiners congratulates the candidates who passed the July 1991 National Council Licensure Examination for Registered Nurses (NCLEX-RN) in Texas! Of the 3,371 first time Texas candidates writing the July 9-10, 1991 NCLEX-RN, 3,131 (93%) became registered nurses. The national pass rate for US first time candidates was 91.2%. A total of 4,082 candidates, including graduates of Texas, out-of-state and foreign nursing programs wrote the July 1991 NCLEX-RN in Texas and 3,520 (86%) passed the examination.

The following nursing programs had a 100% pass rate on the July, 1991 NCLEX-RN:

Associate Degree Programs

Central Texas College, Killeen*
Collin County Community College, McKinney
Houston Baptist University, Houston*
Lamar University, Orange*
Midland College, Midland
Navarro College, Corsicana
Northeast Texas Community College, Mt. Pleasant
South Plains College, Levelland*

Baccalaureate Degree Programs

Abilene Intercollegiate, Abilene
Stephen F. Austin State University, Nacogdoches*
Houston Baptist University, Houston
Midwestern State University, Wichita Falls
Prairie View A & M College, Houston*
University of Mary Hardin-Baylor, Belton
University of Texas at Arlington, Arlington*

The asterisk (*) indicates the nursing program also achieved a 100% pass rate on the February 1991 NCLEX-RN.

The following chart describes the overall performance of candidates by categories.

TYPE OF CANDIDATE	WRITING	PASSING/ REGISTERED	% PASSING
First Time Texas	3,371	3,131	93%
Texas Repeating	212	84	39%
Foreign First Time	109	65	60%
Foreign Repeating	210	76	36%
Out-of-State First Time	180	164	91%
Total of examinees	4,082	3,520	86%

NEAC ADOPTS COMPETENCY FORMAT

The Nursing Education Advisory Core Committee (NEAC) on August 15 unanimously approved use of the American Association of Colleges of Nursing format in chart form for essential competencies. This format should show levels of progression and would incorporate a

nursing interventions/clinical skills checklist for each level. The Board accepted the committee's recommendation and approved use of the AACN format at its September meeting. A format implementation team has been formed to develop recommendations for use of the competencies in the Board of Nurse Examiners' and Board of Vocational Nurse Examiners' accreditation processes and to suggest methods which encourage mobility and articulation among the

state's nursing programs. In formulating its recommendations, the team intends to study information on articulation plans and policies from the Texas Higher Education Coordinating Board and the National League for Nursing. Accreditation rules from the Southern Association of Colleges will also be reviewed. Examples of state articulation plans and Nurse Practice Acts that have incorporated competencies into their education rules will also be studied by the team members. ♦

NATIONAL COUNCIL ADOPTS COMPUTERIZED ADAPTIVE TESTING FOR ADMINISTRATION OF NCLEX

In a move that will change the face of testing for nursing licensure, the Delegate Assembly of the National Council of State Boards of Nursing at its Annual Meeting this summer voted to implement Computerized Adaptive Testing (CAT) as the future method for administering National Council Licensure Examinations (NCLEX).

Implementation of CAT will occur no sooner than November 1993 for NCLEX in all jurisdictions in the United States and its territories. The first step is to select a national vendor(s) for the administration of CAT, after which a time line for implementation will be established.

Computerized adaptive testing has been discussed by National Council member boards of nursing, its Board of Directors, staff and the test service since the early 1980s. CAT was studied in two phases: Phase I included initial start-up technology and pilot testing of software; Phase II included field testing CAT and conducting a detailed analysis and comparison of CAT to paper-and-pencil NCLEX. Phase II was completed with a final report to this year's Delegate Assembly.

From Phase II, it was determined that CAT and paper-and-pencil nurse licensure testing are psychometrically comparable and computer experience had no effect on candidate performance. Field testing also showed that CAT testing security could be maintained and that demographically diverse groups of candidates are not disadvantaged by taking an examination using CAT.

With CAT, each candidate's test is unique and is assembled interactively as the individual is being tested. As the candidate answers each question, the computer calculates a competence estimate based on all earlier answers, then scans the bank of test questions and selects the one determined to measure the candidate most precisely in the appropriate test plan area.

The accuracy of each individual's score can be enhanced by CAT because testing will continue for each individual until a desired level of precision has been reached. Efficiency in the test process as well as savings of testing time for both boards of nursing and candidates also will result from the use of CAT.

Use of CAT also provides the ability to schedule the exam throughout

the year and the ready availability of the pass/fail results.

Texas was one of eight states that participated in the CAT field test. Participants included 104 Texas candidates who were registered to take the paper-and-pencil NCLEX in February 1991.

For its participation and contribution to the successful implementation of the Computerized Adaptive Testing field test the Texas Board of Nursing was awarded the National Council's Certificate of Commendation. ♦

AMENDMENT TO DELEGATION RULES ADOPTED

At its July 1991 meeting, the Board adopted the rule change recommended by the Task Force on Home Health Medication Aides. The new section, §218.9(2), effective September 1, 1991, allows the registered professional nurse to delegate the administration of medications to unlicensed persons working in a home health setting and holding a valid home health medication aide permit issued by the Texas Department of Health (TDH). The rule requires that the RN supervising the home health medication aide be familiar with the TDH rules regarding the training and functions of the medication aide. The new section also requires the registered nurse to make supervisory visits at least weekly while the medication aide is in the client's residence or when any change in medication regime is ordered.

The Board reminds all RNs that the decisions about delegation rest with the individual nurse. As stated in the purpose of the delegation rules, §218.1, "The registered professional nurse is responsible for the nature and quality of all nursing care that a patient/client receives under his/her direction." Thus, it is the RN's responsibility to assess the patient's condition and the medications being administered to determine if delegation is reasonable and prudent.

RNs working in the home health setting may wish

to become familiar with the home health medication aide curriculum and permitting process. The Health Facility Licensure and Certification Division of TDH (telephone 512/458-7538) should be contacted for this information. ♦

C O R R E C T I O N

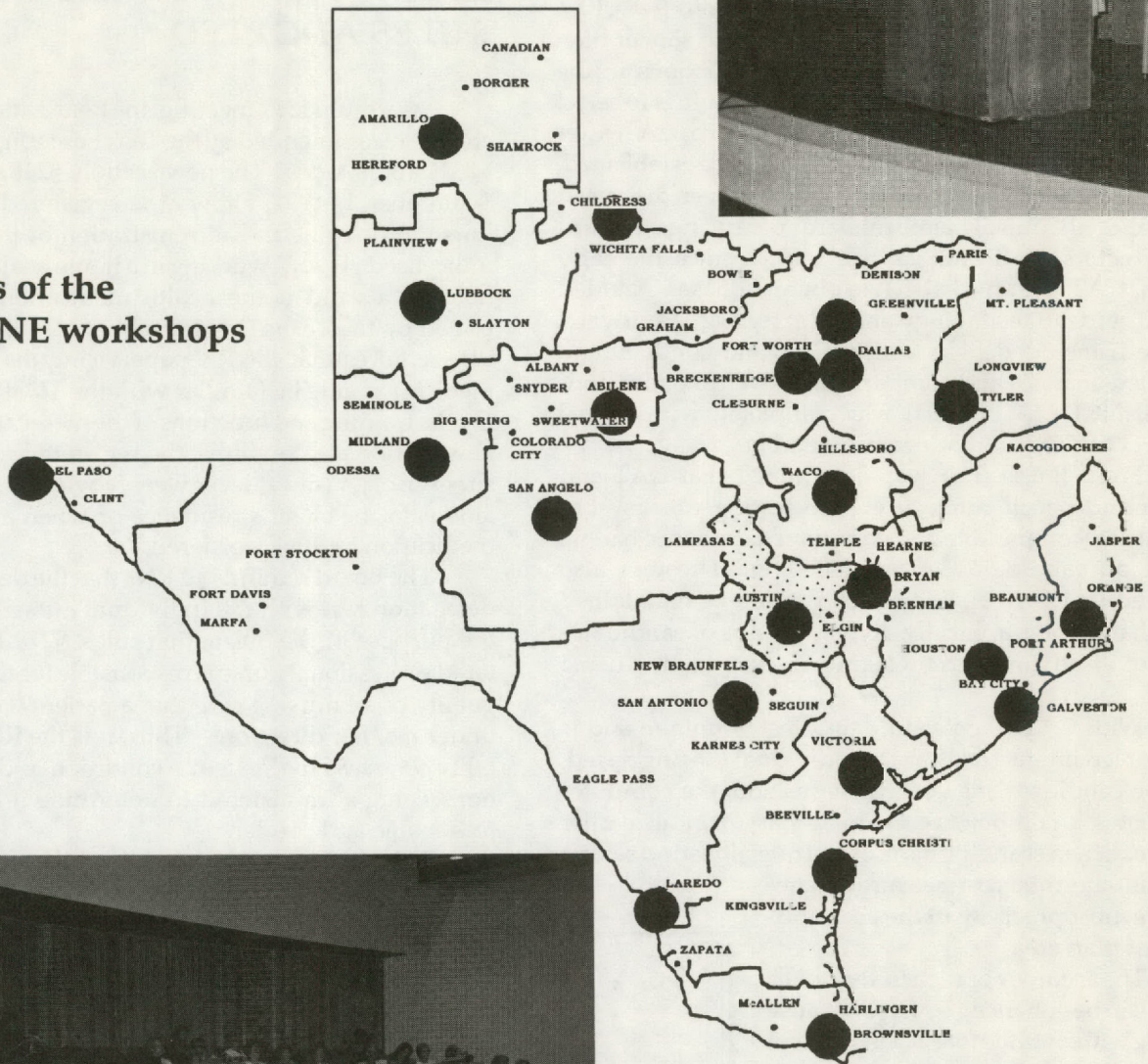
In the article entitled, "Nurses Slated to be Included in Practitioner Data Bank," which appeared in the July/August issue of the *Report from the Board of Nurse Examiners*, we incorrectly reported that the National Council of State Boards of Nursing receives copies of reports on malpractice payments made on behalf of a nurse. The article should have stated that copies of reports to the National Practitioner Data Bank are sent to the State of Board of Nursing.

BNE SPEAKING TOUR

Board member Joanna Seamans, RN, MSN, welcomes attendees to the workshop in Corpus Christi.



Sites of the 28 BNE workshops



More than 5,550 RNs attended the Board's workshops statewide. Participants here attended the workshop on September 11, 1991 in Corpus Christi.

BNE SPEAKING TOUR WINDS UP

The two-year BNE Speaking Tour of Texas concluded with the final workshop in College Station on October 30. More than 5,550 registered nurses attended the 28 workshops held across the state since the series began in October of 1989. Workshop attendees received an overview of the role and functions of the BNE, legislative update, and information on the Board's delegation rules, mandatory reporting and investigation process. Attendee evaluations were positive and indicated the need for the Board to continue offering educational programs in the future.

The Board would like to express its appreciation to the facilities who provided meeting rooms and assisted with arrangements for the workshops. Their support was instrumental to the success of the workshops: Harris Methodist-Fort Worth; The University of Texas at El Paso; The University of Texas at Austin; The University of Texas Medical Branch, Galveston; Tyler Junior College; Camp Mabry, Austin; Valley Baptist Medical Center, Harlingen; Tarrant County Junior College-South, Fort Worth; Hillcrest Baptist Medical Center, Waco; Midland College; Amarillo College; Midwestern State University, Wichita Falls; The Victoria College; Baylor University Medical Center, Dallas; Texas Woman's University, Denton; Laredo Junior College; Lamar University, Beaumont; Texarkana College, The University of Texas Health Science Center at San Antonio; Shannon Medical Center, San Angelo; Hendrick Medical Center, Abilene; Texas Tech University Health Science Center, Lubbock; M.D. Anderson Cancer Center, Houston; North Harris County College, Houston; Corpus Christi State University, and Humana Hospital-Brazos Valley, College Station.

Future educational programs are being planned by the Board. Information will be included in upcoming issues of the newsletter. ♦

DO YOU KNOW A NURSE WHO NEEDS HELP?

If you know of an RN or LVN who is depressed, drinking more than moderate amounts of alcohol, or is abusing drugs and is not practicing nursing in a manner that is in the public's best interest, give the Texas Peer Assistance Program for Nurses (TPAPN) an opportunity to help. All calls are kept strictly confidential. For information call 1-800-288-5528 or 512/467-7027. ♦

LOAN DEFAULT NOW GROUNDS FOR NON-RENEWAL OF LICENSE

Beginning September 1, 1991, all registered nurses who are in default on student loans guaranteed by the Texas Guaranteed Student Loan Corporation (TGSLC) will not be eligible for license renewal until they have entered into a repayment agreement with TGSLC.

The 71st Legislature amended the Texas Education Code to require all licensing agencies, including the Board of Nurse Examiners, to deny license renewal for licensees who are in default on a guaranteed student loan. A license may be renewed one time for a person in default, but not a subsequent time, unless that person has made satisfactory arrangements with TGSLC.

The bill requires TGSLC to:

- identify the RNs who are in default on loans guaranteed by TGSLC; and
- provide a written list of names of those persons to the Board of Nurse Examiners.

The bill requires the Board to:

- deny license renewal for a RN who has defaulted on a loan guaranteed by TGSLC, until TGSLC certifies that the licensee has entered into a repayment agreement with TGSLC, or is not in default of a loan.

If a registered nurse is denied renewal of her/his license because of default on a student loan guaranteed by TGSLC, the Board may not renew the license until the registered nurse presents a certificate issued by TGSLC to the Board which certifies that:

1. the licensee has entered into a repayment agreement on the defaulted loan; or
2. the licensee is not in default on a loan guaranteed by TGSLC.

To comply with the provisions of this bill, the Board has proposed rules which will appear in an October issue of the *Texas Register*. ♦

MICRO PIGMENT IMPLANTATION

Micro pigment implantation is a form of tattooing. Microscopic deposits of pigment are made into the dermis using a "micro" tattooing probe. The procedure also is known by the trade name DermouflageTM.

The Board considered this procedure at its September 1991 meeting. After discussion, the Board determined that micro pigment implantation is **not** within the scope of nursing practice as defined in the Nurse Practice Act. ♦

NCLEX-RN SHOWS UPWARD TRENDS

The area of research is an important focus of the Board of Nurse Examiners. The Board employs a full-time research assistant whose responsibilities include conducting surveys, analyzing survey data and preparing reports. The following data was compiled on the Texas NCLEX-RN over fiscal years 1981-1991.

During the past decade, the pass rate for all Texas NCLEX-RN candidates fluctuated between a low of 62% and a high of 84%. During this time, the total number of candidates writing the NCLEX-RN in Texas remained above 4,000 per year. The total number of candidates includes US first time and repeating candidates along with foreign first time and repeating candidates.

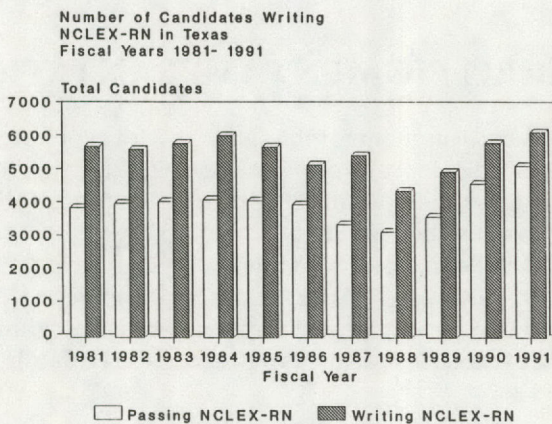
Of the 5,773 candidates writing the NCLEX-RN in 1981, 3,934 (68%) passed the exam. The number of candidates writing the NCLEX-RN gradually increased through 1984. Of the 6,100 candidates who wrote the NCLEX-RN in 1984, 4,179 (69%) passed the exam.

In 1986, 5,222 candidates wrote the NCLEX-RN. Of these candidates, 4,027 (77%) passed the exam. This pass rate was 8% higher than the 1984 pass rate. However, in 1987, the pass rate dropped below the 1986 pass rate by 15%. Of the 5,500 candidates writing the NCLEX-RN in 1987, 3,432 (62%) passed the exam.

After 1987, the NCLEX-RN pass rate began to steadily increase. Of the 5,014 candidates who wrote the NCLEX-RN in 1989, 3,665 (73%) passed.

During the past decade, the greatest number of candidates, 6,196, wrote the NCLEX-RN in 1991. The 5,189 candidates who passed the NCLEX-RN in 1991 also reflected the highest pass rate during the past decade.

During the four-year period of 1988-1991, the number of candidates writing the NCLEX-RN along with the pass rate both have exhibited upward trends. There were 1,750 (28%) more candidates writing the NCLEX-RN in 1991 than in 1988, when 4,446 candidates wrote the exam. In addition, the 1991 pass rate of 84% was 12% higher than the 1988 pass rate of 72%. ♦



PRACTICE RELATED QUESTIONS AND ANSWERS

The Board receives numerous calls and letters regarding practice issues and this column is designed to address some of the frequently-asked questions. In this issue, we will respond to questions we have received regarding the continuing education rules which became effective on September 1, 1991.

Q: I don't renew my license until January 1992, but I would like to become familiar with the CE rules. How may I obtain a copy?

A: The CE rules now may be found in the back of the new Nurse Practice Act as amended in 1991. You may obtain a copy of the Act and the continuing education questions and answers brochure by sending a stamped, \$.75, self-addressed, legal size envelope to the Board's office. Please address your request to the attention of the Publication Clerk.

Q: I will be renewing my license in November 1991. Will a program I attend on November 3, 1991 count even though I am not required to submit my renewal until the end of the month?

A: Yes, any activity that you participate in from the first day of the renewal month to the last day of the renewal month two years later will be accepted for that two-year renewal period. (Example: November 1, 1991 through November 30, 1993.)

Q: I am a nurse attorney and I am about to take a law review course which is approved by the State Bar. Can I use this course to meet my nursing CE requirements?

A: No, continuing education and academic courses used to meet the license renewal requirement must be applicable to nursing/health care. A course in nursing jurisprudence would be acceptable; however, a general law review course would not. Please remember that the purpose of these requirements is to assure that nurses participate in programs to increase their knowledge and skill in nursing.

Q: I have just been informed that the specialty organization I belong to and am certified by has chosen to no longer seek ANA recognition to approve CE programs. My organization plans to utilize the same criteria but will no longer be able to use the wording "recognized by ANA". Will programs reviewed and approved by my organization be recognized as Type I?

A: No, only those programs approved by the credentialing organizations recognized by the Board will be acceptable for Type I credit. The five organizations currently recognized include: American Nurses Association, American Association of Critical-Care Nurses,

American Association of Nurse Anesthetists, American College of Nurse Midwives, and the National Association of Pediatric Nurse Associates and Practitioners. The Board will review this list annually each July. Those organizations which have criteria and established standards and processes in place may submit their request for consideration.

If you have a practice related question that you would like to have answered through the Board's newsletter, send your question to:

Cady Crismon, MSN, RN, CNS
 Director, Department of Practice and Compliance
 Board of Nurse Examiners
 Box 140466
 Austin, Texas 78714 ♦

TASK FORCE EXPLORES WAYS TO ATTRACT AND RETAIN RNS IN NURSING FACILITY SETTINGS

Stimulated by new Federal regulations requiring more RN coverage in nursing facilities certified by Medicaid and Medicare, the Board of Nurse Examiners, in the fall of 1990, created the Task Force on Long Term Care to explore ways to attract and retain nurses in nursing facility (NF) settings.

To accomplish this goal, the task force identified two priorities: (1) to conduct a study on why RNs work in NF settings and why some RNs leave NF settings, and (2) to provide training to new RNs to help them succeed in NF settings.

A five-day seminar on working in a NF was held in June. Due to the success of this program, the task force has decided to present three-day seminars quarterly to orient both RNs and LVNs to NF nursing. The seminar, entitled "NF Nursing: Uncovering the Mysteries," is co-sponsored by the Texas Health Care Association (THCA), Austin, and the Texas Association of Homes for the Aging (TAHA), Austin, through the Educational Institute on Aging.

The first quarterly seminar is scheduled January 14-16, 1992, in Austin. Although attendance at all three days is recommended, registrants will be allowed the option of attending one or two days. Day one will cover regulatory perspectives and will include an update from the Texas Department of Health and the Texas Department of Human Services. Day two will focus on assessment, planning and documentation with in-depth discussions of the resident assessment instrument, health care plans and required documentation. The third day will encom-

pass administrative issues, such as supervision, management and documentation of critical incidents and other legal concerns.

The seminar will be repeated in April, July and October. Each day of the seminar will qualify for nine contact hours of Type I continuing education credit for RNs as mandated by the BNE. For additional information, please contact TAHA (512/477-6994) or THCA (512/458-1257). ♦

DEBITS

As of October 1, 1991, the following nurses appear on the records of the Board of Nurse Examiners as debits for failure to respond to notices of returned checks. Should any of these nurses be employed by or seek employment with your agency/institution, please contact Laura Williford at the Board's office, telephone 512/835-4880, ext. 25.

If any of these nurses are practicing in Texas as a Registered Nurse, they are in violation of the Nurse Practice Act and would be subject to disciplinary action by the Board of Nurse Examiners.

NAME	LICENSE # OR PERMIT #	
Asble, Alex Walter	564983	License
Blackburn, Brenda	065736	Permit
Buol, Kolleen Kay	516233	License
Clark, Victoria	50398	Permit
Conti, Angela Rose	552231	License
Craft, Betty Jane	546665	License
Denny, Patricia Ann	503975	License
Denny-Shaffer, Bridget Maureen	553409	License
Farra, Diane Rae	560781	License
Felkins, Bettye Lisa	557452	License
Filler, Marcia Ann	553220	License
Glisson, James M.	239549	License
Henry, Sheilda Sheridan	553573	License
Howell, Sharon	459387	License
Jenkins, Victor I.	517158	License
Jones, Cherie Lyne	241063	License
Jones, Gwendolyn	63362	Permit
Kuntz, Eileen Marie	514331	License
Masters, Mary Jane	550218	License
Nims, Teresa Masadie	565233	License
O'Connell, Anna	57239	Permit
Olivier, Marie Claudia	514361	License
Ourisu, Augustina E.	457100	License
Pangilanan, Julie	445792	License
Rosko, Lisa Marie	538707	License
Strouhal, Susan Kay	557026	License
Trainham, Nancy Hodgerson	521980	License
Tucker, Sherri	58040	Permit
Vasquez, Emerald J.D.	207588	License
Zutell, Jean	57374	Permit ♦

THE LEGAL EAGLE

In each issue of the Board's newsletter, Joan Stewart, General Counsel for the Board of Nurse Examiners, responds to questions regarding the Nurse Practice Act, the Board's rules and regulations, and other legal issues related to nursing.

If you have a question for the "Legal Eagle", send it to:

Joan Stewart, JD
General Counsel
Board of Nurse Examiners
Box 140466
Austin, TX 78714

Dear Legal Eagle,

Physician's assistants write orders, including medications, at the VA Hospital in my city. To date, RNs do not honor the orders until signed by a MD. What is the RN's responsibility about these orders? Personally, I would not mind taking orders from nurse practitioners or clinical specialists, but I hope never from physician's assistants.

Signed,
No Name and CERTAINLY no City!

Dear Certainly,

Certainly the physician's assistants are not generating these orders. Certainly they are just writing down the order that the physician actually has originated....right?

Article 4518, Section 5, of the Nurse Practice Act states that the practice of professional nursing shall be defined as "the performance for compensation of any nursing act...in the administration of medications or treatments as ordered by a licensed physician, including a podiatric physician licensed by the Texas State Board of Podiatry Examiners, or dentist." Pursuant to this statutory provision, the Board of Nurse Examiners has formulated a position statement which outlines the RN's responsibility when taking an order from a physician's assistant. This policy states that, "A registered nurse may carry out a physician's order for the administration of treatments or medications when that order originates with the physician and is merely relayed or communicated from the physician to the registered nurse through a physician's assistant provided the physician has given written notice to the facility that he/she is registered with the Board of Medical Examiners as the supervising physician for a designated physician's assistant; that the physician's assistant is authorized to relay orders from the physician; and that the physician's assistant is not authorized to withhold, delay or modify any physician order without first communicating with the physician.

"A registered nurse may not carry out a physician's order communicated by a physician's assistant for the administration of treatments or medications if the giving of the order requires the physician's assistant to interpret the patient's condition;

ascertain what treatment, medication or medication dosage is appropriate for the patient; or exercise in any other manner judgement or discretion about what care the patient is to receive."

Dear Legal Eagle,

Our local school district just hired four LVNs to work as school nurses. They were given the job description that was provided for the RNs. Our supervisor who is "non-medical" asked about the supervision of the LVNs by staff RNs. We all have full-time assignments, some of the RNs have from 1,300-2,200 students. What are our legal obligations to these LVNs and to the Nurse Practice Act? Are we expected to provide supervision in addition to our full-time assignments?

Signed,
When? In our spare time?

Dear Spare Time,

The answer to your question will involve your job description and the Nurse Practice Act. Does your job description indicate that you are administratively responsible for these LVNs? Is part of your performance evaluation based on any supervisory responsibilities that you have regarding the LVNs? Is there some sort of verbal agreement, or temporary arrangement between you and your management regarding the supervision of the LVNs? If the answer to these questions is "No", then the Nurse Practice Act does not impose any additional supervisory responsibilities between the RN and the LVN. However, if you are administratively responsible for the LVN staff, then the Nurse Practice Act, through the Board's rules, does have standards to which you must adhere in the supervision of your staff.

Rule 217.11(11) requires that the registered professional nurse "make assignments to other nursing personnel that take into consideration patient safety and that are commensurate with the personnel's educational preparation, experience and knowledge". Rule 217.11 (12) states that the registered professional nurse "shall supervise nursing care provided by nursing personnel for which he/she is administratively responsible." ♦

DISCIPLINARY ACTIONS JULY-SEPTEMBER 1991

NAME	LICENSE #	VIOLATION	DATE
REVOKE			
Sarah O'Dell Chapman	235738	4525(a)(1) & (9)	9/24/91
Wilford Paul Gillespie Jr.	234021	4525(a)(7)	9/25/91
Rebecca S. Keller	512887	4525(a)(9)	9/25/91
Sharon Lynn Perkins	552667	4525(a)(9) & (11)	9/24/91
Vicki Lynn Sisk	529573	4525(a)(8) & (9)	9/25/91
Stanley R. Zambriski	455006	4525(a)(7)	9/25/91
Kaye Sandine Dobecki	557167	4525(a)(1)	7/23/91
Martin Ross Flannery	227405	4525(a)(1) & (8)	7/23/91
Amy Lucille Fort	234150	4525(a)(1)	7/24/91
Judith A. Howard			
Honefenger	428734	4525(a)(7)	7/24/91
Susan Wertenberger	253140	4525(a)(9)	7/23/91
Suzanne Marie Mansfield++	242417	4525(b)	9/25/91
Bruce Lynn Bullard++	237072	4525(b)	9/25/91
Sandi Jean Salvesen++	548421	4525(b)	9/25/91
Norman Keith Hutton++	529327	4525(b)	9/25/91
Deborah Ann Harmon++	465014	4525(b)	7/24/91
Patsy L. Sheffield++	518164	4525(b)	7/24/91

SUSPEND AND PROBATE

Sandra K. Bulls*	544106	4525(a)(3)	9/25/91
Arlene M. Silveria*	242135	4525(a)(1)	9/25/91

REPRIMAND WITH STIPULATIONS

Linda Marie Lockwood**	554981	4525(a)(9)	9/25/91
Mary A Colvin*	525057	4525(a)(9) & (11)	9/25/91
Charles Maurice Bell*	443314	4525(a)(7) & (9)	9/25/91
Alice M. Canales*	532864	4525(a)(9)	9/25/91
Jack C. Radley	245522	4525(a)(1)	7/23/91
Theresa C. Ibarra**	514440	4525(a)(9)	7/24/91

WARNING

Christina Jane Venezia*	538704	4525(a)(9)	9/25/91
Julia Pola	500600	4525(a)(9)	9/25/91
Doris A. Nevius**	534265	4525(a)(9)	7/24/91

REINSTATEMENT

Anthony T. Brown	524862		7/24/91
Barbara J.K. dela Moriniere	216828		7/24/91
Maria M. Canas	532866		7/24/91
Rhonda Lee Quillin	238758		7/24/91
Kathryn Ann Hughes	240343		7/24/91
Dwayne Edward Stir	536280		7/24/91

REINSTATE WITH STIPULATIONS

Thomas William Cowart, Jr.	219823		9/25/91
Barbara A. Allen			
Carroll (Kelly)	218262		9/25/91
Patricia A. Pacheco	243817		9/25/91
Alvin Joseph Romero	224858		9/24/91
Richard Roy Van Kluyve	216797		9/25/91
Thomas Carey Collins	243802		9/25/91

DENIED ENDORSEMENT

Mary A. Ruyle Applicant 4525(a)(2) 9/25/91

The professional nursing license of the following persons were issued a warning for practicing with a delinquent license:

Kathryn J.B. McHugh	421737	7/24/91
Eugene Renger	229358	7/24/91
Iolene Venetta Williams	532030	7/24/91
Joy Janelle Clemons	545420	9/25/91
Susan E. Downes Colburn	229060	9/25/91
Mary Ann Dyer	253102	9/25/91
Alicia Maria Figueroa	569332	9/25/91
Kimberly Jean Poritz	507150	9/25/91
Roxana J.L. Skow	229256	9/25/91
Elizabeth Lynd N. Escamilla	523385	9/25/91

* Agreed Orders

** Consent Orders

++ Voluntary Surrender

WARNING

The following individual does not hold a valid license to practice professional nursing in the state of Texas.

**MARY FRANCES HERNANDEZ,
aka MARY FRANCES MORRIS**

Mary Frances Hernandez was employed as a registered nurse with a nursing home in Corpus Christi on September 12, 1990. Due to questions regarding her nursing abilities, the Board's office was contacted and the facility was informed that Ms. Hernandez was not licensed to practice professional nursing in the state of Texas. Ms. Hernandez was terminated from employment in October 1990. Ms. Hernandez also was employed as a registered nurse with a hospital in Corpus Christi on October 18, 1990. During a routine audit the hospital discovered that Ms. Hernandez' license had not been verified. The hospital contacted the Board's office to verify licensure and was informed that Ms. Hernandez was not licensed to practice professional nursing in the state of Texas. Ms. Hernandez was terminated from employment effective December 17, 1990. Legal action is being pursued by local law enforcement authorities. ♦



NEW AND PROPOSED RULE CHANGES

At their July 23-25, 1991 meeting, the Board of Nurse Examiners took action on the following rules:

- Withdrew previously proposed rule change to §211.5 under Bylaws regarding Quorum.
- Adopted a rule change to §218.9 regarding Administration of Medications under Delegation.
- Adopted a rule change to §217.10 regarding Change of Name and/or Address.
- Delayed a decision on proposed rule changes to §213.12 and §213.22 regarding Hearing Procedure and Hearings Examiner, respectively.

At their September 24-25, 1991 meeting, the Board of Nurse Examiners took the following action in relation to rules:

- Delayed a decision on proposed rule changes to §213.12 and §213.22 regarding Hearing Procedure and Hearings Examiner, respectively.
- Adopted on an emergency basis and proposed a rule change to §217.6(d) regarding Temporary Permits.
- Adopted on an emergency basis and proposed a rule change to §217.7 regarding Failure to Renew License.
- Adopted on an emergency basis and proposed a rule change to §217.8 regarding Reactivation from Inactive Status.
- Adopted on an emergency basis and proposed a rule change to §213.19 regarding Licensure of Persons with Criminal Convictions.
- Adopted on an emergency basis and proposed a rule change to §213.20 regarding Licensure of Persons who have been Hospitalized or Treated for Mental Illness, or are Chemically Dependent.
- Adopted on an emergency basis and proposed the repeal of §213.21, Representation. Adopted on an emergency basis and proposed a new rule §213.22 regarding Representation. (This change was numerical in nature; no wording was changed.)
- Adopted on an emergency basis and proposed new rule §213.21 regarding Declaratory Order of Eligibility for Licensure.
- Adopted on an emergency basis and proposed a rule change to §223.1, regarding Fees.
- Proposed a rule change to §217.13 (16) regarding Unprofessional Conduct. ♦

EDUCATION REPORTS

At the July 23-25, 1991 meeting of the Board of Nurse Examiners, the Board took the following action:

- Approved an extended campus of Incarnate Word College's Alternate Pathway of the Baccalaureate Degree Nursing program for RNs in Laredo.

At the September 24-25, 1991 meeting of the Board of Nurse Examiners, the Board took the following actions:

- Approved an extended campus of Paris Junior College Associate Degree Nursing program at Commerce.
- Approved Vernon Regional Junior College, Associate Degree Nursing Transition Program for LVNs. ♦

STAFF ON THE MOVE

The Board of Nurse Examiners welcomes the following new members to the staff:

Kelley Anderson joined the Board of Nurse Examiners on September 9, 1991 as an Investigator III. Ms. Anderson earned a Bachelor of Science in Nursing from the University of Virginia in Charlottesville and a Master of Science in Nursing from The University of Texas at Austin. Her areas of experience have involved critical care nursing in a variety of units, including medical, surgical, burn, trauma, and cardiac care.

Greg Caldwell joined the Board of Nurse Examiners on June 17, 1991, as an Investigator I. Mr. Caldwell earned a Bachelor of Science in Sociology from Lamar University in Beaumont. He is currently pursuing a teaching certificate in Secondary Education. He has worked as a Counselor with Gary Job Corps Center, as Provisioning Data Analyst for Tracor Aerospace, and as a Caseworker/Counselor with the Texas Youth Commission.

Donna Carlin joined the Board of Nurse Examiners on October 1, 1991 as a Nursing Consultant. Ms. Carlin earned a Bachelor of Science in Nursing and a Master of Science in Family-Centered Nursing from West Texas State University in Canyon. Most recently, she served as Director of the Nursing Continuing Education Program at West Texas State University. She also was an Instructor of Nursing at WTSU and a Skills Examiner for the Nurse Aide Skills Testing Program, Texas Nurses Foundation.

Mary Ann Hanley joined the Board of Nurse Examiners as a Nursing Consultant on August 19, 1991. Ms. Hanley earned a Bachelor of Science degree in Nursing from the University of Connecticut at Storrs and a Master of Arts in Nursing from New York University. She is currently a Doctoral Student at the University of Texas at Austin. Her areas of practice have included Psychiatric - Mental Health Nursing, Geriatrics and Home Care, along with teaching in ADN, BSN, and Master's level nursing programs in Connecticut and New York. She has additional experience in utilization management, quality management and implementation of organizational change through the Total Quality Management process.

Paula Irvin joined the Board of Nurse Examiners on May 10, 1991 as a Clerk III. Ms. Irvin is the License Renewal Clerk for the Board. She attended North Georgia College in Dahlonega, Georgia, and is planning to attend The University of Texas at Austin to complete a degree in Elementary Education. Ms. Irvin worked as a medical clerk at the Medical College of Georgia while she was a student.

Nicole Langevin joined the Board of Nurse Examiners on October 3, 1991 as a Clerk III in the Education and

Examination Department. She is originally from California and moved to Texas in September 1991. Ms. Langevin will be responsible for handling the NCLEX applications of Texas repeat candidates in addition to other clerical duties in the department.

Gary Walters joined the Board of Nurse Examiners on July 29, 1991 as an Investigator III. Mr. Walters earned a Bachelor of Science in Nursing, Master of Science in Education, and Bachelor of Science in Industrial Technology from Pittsburg State University in Pittsburg, Kansas. He worked in Law Enforcement for eight years, and was the Chief of Police of Fort Scott, Kansas. He also has extensive experience working in Intensive Care Units in the Central Texas area.

It is with regret that we announce the resignation of **Mary Jane Ashe, MAN, RN**, Nursing Consultant for the Board. Ms. Ashe resigned from the Board in August to accept a teaching position on the faculty of The University of Texas at Austin School of Nursing. She will continue to provide consulting services to the BNE on a part-time basis and is currently serving as liaison to the Nursing Education Advisory Committee. ♦

PUBLICATIONS ORDER FORM

The following publications are available from the Board of Nurse Examiners. Complete the information below and mail with your check or money order to: **Publication Clerk, Board of Nurse Examiners, Box 140466, Austin, TX 78714.**

	<i>Quantity</i>	<i>Unit price</i>	<i>With tax</i>
<i>Rules and Regulations Relating to Professional Nurse Education, Licensure and Practice</i> (A Nurse Practice Act is included with the purchase of the Rules and Regulations.)	_____	\$3.50	\$3.78
Excerpts from <i>Vernon's Civil Statutes for the State of Texas</i> (Nurse Practice Act)	_____	\$1.00	\$1.08
<i>RN Update</i> (quarterly newsletter of the Board of Nurse Examiners)	_____	\$2.50	\$2.70

Name _____ Sales Tax _____

Address _____ Total Amount _____

Tax Exempt Number _____ Date publication mailed _____

Include 8% sales tax for the total amount. Please supply number if tax exempt. Prepayment of all orders is required.

NOTE

It is now a Board rule that if a registered nurse/candidate for registration changes his/her name through marriage, divorce, religious order, or for any other reason, a request for a change of name should be sent to the Board's office **within 10 days of the change of name**. An affidavit will then be mailed to the petitioner.

A registered nurse also must notify the Board in writing **within 10 days of a change of address**.

With all correspondence include:

1. RN license number, date of birth, and social security number.
2. Complete name including maiden name.
3. Complete address with zip code.
4. County and zip code of place of employment.

Newsletter Committee: Kathy Vrazel, Editor; Committee members: Cady Crismon, Wendy Francik, Mary Ann Hanley, Noemi Leal, Laura Williford

Contributors to this issue: Mary Jane Ashe, Cady Crismon, Erlene Fisher, Wendy Francik, Mary Ann Hanley, Noemi Leal, Laura Williford, Eileen Piwetz, Joan Stewart, Kathy Thomas, Kathy Vrazel, Louise Waddill

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