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RN UPDAT

A Quarterly Publication of the Board of Nurse Examiners For the State of Texas Pents

Accreditation

Licensure

Practice MAY Compliance

December 1995

Volume 26, No. 4

Board Adopts Decision Making Model

Model To Help RNs Determine Scope of **Practice**

The Board of Nurse Examiners For the State of Texas (BNE) receives a large amount of calls focusing on the determination of scope of nursing practice. In many cases, practice decisions can be made by professional nurses without consultation with the BNE staff.

The BNE recognizes that nursing practice is a dynamic profession. RNs must be responsive to new technologies, research findings, emerging trends and issues in health care, and most of all, evolving societal needs. In an effort to provide a systematic method for RNs to make appropriate decisions in determining their scope of practice, the BNE has developed this decision making model (to be published in future copies of the Nursing Practice Act):

Introduction To A Six-Step Decision Making Model For Determining RN Scope of Practice

The BNE receives in excess of 1,100 practice calls per month. The majority inquire if an issue is within the scope of nursing practice. The BNE has developed a decision making model to empower each registered nurse to take the tools available to them and to make decisions in appropriately determining the scope of practice. The BNE recognizes that professional nursing practice is a dynamic, ever-changing process that must be responsive to societal needs, new technology, research findings and new and emerging trends and issues in health care.

Most practice decisions can be made by professional nurses without consultation with the BNE staff. In fact, the process outlined in this model is the one BNE staff use to assist RNs in their decision making. This model is offered to RNs to enable independent decision making.

(continued on page 9)

Board Moves To New Location BNE Now In Hobby Building With Majority of Health Licensing Agencies

The BNE moved its offices from North Austin to Downtown Austin on November 20, 1995. The Board's office is now located on the fourth floor of the Hobby Building at 333 Guadalupe Street. The fourth floor will also house the offices of the Board of Licensed Vocational Nurse Examiners. The Board's main telephone line is now (512) 305-7400. (A listing of all the Board's new telephone numbers can be found on page 19.)

The 74th Texas Legislature mandated the relocation of a number of regulatory boards, including the Board of Medical Examiners, the Pharmacy Board, the Dental Board, the Health Professions Council, and others. The BNE accomplished the move in two days.

Glenn Parker, Director of Finance and Administrative Services, coordinated the move so as to minimize the time the Board's office would be closed to the public: "We did our best to keep most services up and running during the move and hope it wasn't too much of an incovenience for anyone."

Visitor's parking is provided in a six-story covered garage, one block west of the Hobby Building. Future board meetings are scheduled to be held in the boardroom of the Health Professions Council, which has also relocated to the Hobby Building.

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Executive Director of the BNE



Kathy Thomas, MN, RN

At the November 1995 board meeting, the Board announced its decision to hire as its Executive Director, (ED) Kathy Thomas, MN, RN. Ms. Thomas, BNE Interim ED since the August retirement of former ED, Louise Waddill, PhD, RN, previously had been the Director of Nursing Practice.

Ms. Thomas, a Certified Pediatric Nurse Practitioner since 1978, holds a Bachelor's Degree in Nursing from

the University of Virginia and a Master's Degree in Nursing from the University of Kansas. She received her education as a pediatric nurse practitioner from Fitzsimons Army Medical Center in Denver, Colorado. Ms. Thomas has been with the Board since 1989 and has served in several positions, including Interim Director of Education, Director of Practice and Compliance, and most recently, Director of Practice.

Nursing Practice Advisory Committee Seeks Participants

by Rose Caballero, BSN, RN

This is an invitation to practicing registered nurses to be on the Advisory Committee for Nursing Practice (NPAC). This committee was established by the Board of Nurse Examiners (BNE) in November 1993. The purpose of the committee is to identify, study, and analyze those major issues that significantly impact, or will impact, the practice of nursing for which the regulation of nursing practice should be addressed. The committee serves in an advisory capacity to the Board and provides reports and recommendations to the Board as indicated.

The charges to the committee are the following:

- -- Identify the major practice issues that significantly impact the regulation of nursing practice.
- -- Provide periodic reports to the Board. Such reports are to address the committee's analysis of the major practice issues and include recommendation for regulatory actions the Board might take.
- -- Respond to questions from the Board regarding specific scope of practice inquiries. (continued on page 18)

BOARD MEMBERS 1995 - 1996

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Kathy Thomas, MN, RN

Licensing Update

Rule 217.7, Failure To Renew License by Mark Majek, MA, PHR

Article 4526 of the Nursing Practice Act requires the Board to establish a time limit beyond which an expired license cannot be renewed without re-examination. The Board has amended Rule 217.7 to require those licensees who have let their Texas RN license lapse into delinquent status for four years or more, to sit for reexamination. This is in addition to the current requirements of completing a refresher course, extensive orientation, or an academic course that meets the Board's requirements.

The exception to this rule is if the licensee has a current license from another state and has been practicing as a registered nurse two years preceding their application for relicensure. This is a major policy change for Texas RN licensees. The Board recommends to RNs considering discontinuing their practice or are moving to another state, to make sure they either keep their license current by paying the appropriate fee and completing twenty hours of acceptable continuing education or by placing their license on inactive status.

BNE Advisory Committees

Nursing Practice Advisory Committee

At its meeting on November 7, 1995, the Nursing Practice Advisory Committee (NPAC) approved Revised Guidelines for Employment of New Graduates Practicing Under a Temporary Permit or Initial Licensure and made final recommendations for changes to the draft Guidelines for Employment of RNs Whose Work Assignment is Changed or Who Have Had a Break in Continuity of Practice. Both documents will be presented to the Board at the January meeting. The NPAC's next meeting is scheduled for February 2, 1996, in Austin. Included on the agenda for this meeting will be a discussion of issues and priorities for the coming year. For more information, contact Kathy Burshnick at the Board's office, (512) 305-6843.

Advanced Nursing Practice Advisory Committee

The Advanced Nursing Practice Advisory Committee (ANPAC) met on October 26, 1995. ANPAC initiated discussions regarding requirements for CNSs who seek prescriptive authority. The committee will make recommendations to the Board at the January 1996 board meeting.

Advisory Committee on Education

The Advisory Committee on Education (ACE) met at the Board's office on October 13, 1995. Members continued their discussions on issues and concerns regarding professional nursing education in the state. Members also discussed student peer assistance and mandatory reporting. The next meeting will be Friday, January 19, 1996. For more information contact Cheryl K. Rosipal at (512) 305-6816.

Memorandum of Understanding (MOU) With TDH Advisory Committee

On August 15, 1995, the MOU Committee and representatives from the Texas Department of Health (TDH) met to review the original MOU implemented in 1994, which identified tasks not considered the professional act of nursing. The MOU Committee recommended to the BNE to also include the administration of feedings and medications through permanently placed gastronomy tubes in both personal assistant and respite services.

Continuing Education Questions and Answers



The Board receives numerous questions regarding the Continuing Education requirements. In an effort to assist nurses in understanding and complying with the rules, Kathy Burshnick, Office of Continuing Education, answers some recently asked questions:

Q: I just received my license in May 1995. It will be renewed in July 1996. When will the CE hours be due and how many will be needed?

A: The requirements begin with your first complete license renewal (in your case July 1, 1996). As a new licensee, you are exempt from the CE requirements for the first licensure period. The initial licensure period varies according to the licensee's birth date. Twenty hours are required for the subsequent renewal in two years. On your license renewal you will be asked if this is your first renewal in the state of Texas following licensure by examination or by endorsement from another state. Be sure to indicate "Yes" to this question.

Q: My RN license will be renewed in January 1996. There is a CE program on the 25th of January that I would like to attend. I already have my 20 hours for this renewal. Would this course give me credit toward my '98 license renewal?

A: Yes, you may apply the hours toward the 1998 renewal. The time period for earning CE hours is the first day of the renewal month until the last day of the subsequent renewal. The hours that you earn during your birth month may be applied to either the 1996 or the 1998 renewal, but not to both.

Q: Are ACLS, PALS and other certification courses acceptable for CE credit?

A: Yes, these courses are accepted for Type I or Type II credit, depending if the provider has had the course approved by one of the credentialing organizations for CE. Recertfication courses are considered refresher courses and are excluded.

Q: I heard there are new CE requirements for Advanced Practice Nurses. Can you elaborate on these changes?

A: Yes, according to the Board's new Rule 221, a licensee who is authorized by the Board to practice as an Advanced Practice Nurse (APN) is required to obtain 20 contact hours of continuing education in the advanced specialty area and role recognized by the Board. This requirement becomes effective with the licensee's first complete license renewal after January 1, 1996. Advanced Practice Nurses with prescriptive authority are required to complete five additional contact hours of continuing education in pharmacotherapeutics within the preceding biennium. The Board approves four categories of Advanced Practice Nurses including Clinical Nurse Specialist, Nurse Midwife, Nurse Anesthetist and Nurse Practitioner.

REMEMBER

You are only required to submit documentation to the Board if you are audited or if you are delinquent, reactivating your license from inactive status or petitioning the Board for reinstatment of a revoked license.

Please write for our brochure, "The 1-2-3-'s of CE." Include a self-addressed, stamped envelope and mail to the Board's office, Attn: CE.

Practice Related Questions and Answers



The Board receives numerous calls and letters regarding practice issues. In this column, Sally Glaze, EdD, RN, CNS, responds to frequently asked questions:

This column usually takes its cue from the questions and letters sent to us by its readers. For this issue, we have been asked to respond to a subject that came to the attention of the Nursing Practice Advisory Committee and which was decided by the Board to have relevance to nurses in all settings. The subject is the adequate management of pain. Indeed, the Board has received complaints which allege that some RNs may be reluctant to adequately treat pain.

Earlier this year, the Texas State Board of Medical Examiners published new rules concerning the authority of physicians to prescribe for the treatment of pain. Its purpose was to provide guidelines for the proper treatment of pain and related record keeping, as well as to improve the quality of medical care. The rules recognize that pain and other related symptoms are subjective complaints and that the appropriateness and adequacy of a specified drug and dose will vary with the individual. These rules specifically address situations of intractable pain and/or terminal or long-term conditions, situations in which nurses are also frequently involved.

Professional nursing, as defined by the Texas Nursing Practice Act, includes "...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." The RN makes decisions regarding implementation of the physician's orders for pain control based upon the results of the nursing assessment. The assessment and proper management of pain includes many factors: knowledge of the disease process, the patient's personality and coping style, and cultural and spiritual beliefs. Symptom control of pain, therefore, will vary based upon these factors, and the RN should not hesitate to use an effective level of pain medication based upon the unique variables of each individual patient and the physician's orders. When adequate pain management cannot be accomplished within the current orders, there should be no hesitation in reporting the patient's response and condition to his/her physician.

There are multiple references in the nursing and medical literature on the management of pain Pain management is also addressed under topics related to Conscious Sedation. The following is a limited list of sources of available publications and is provided as a supplemental resource and not as an exhaustive search of the literature.

*Department of Health and Human Services, 2101 E. Jefferson St., Ste. 501, Rockville, Maryland.

- 1) Acute Pain Management: Operative or Medical Procedures and Trauma. (AHCPR 92-0032),
- 2) Acute Pain Management in Infants, Children, and Adolescents: Operative and Medical Procedures. (AHCPR 92-0020).
- * National Technical Information Service, 5285 Port Royal Road, Springfield, VA, 22161.
 - Acute Pain Management, Guideline Technical Report, Number 1 (NTIS no. PB95-167391CEB). Page 6 has description of companion documents for clinicians and consumers.
- * American Association of Nurse Anesthetists, 222 S. Prospect Ave., Park Ridge, IL, 60068.
 - Position Statement: Provision of Pain Relief by Medication Administered via Continuous Epidural, Intrathecal, Intrapleural, Peripheral Nerve Catheters, or Other Pain Relief Devices.
 - 2) Position Statement on the Role of the Registered Nurse in the Management of Patients Receiving IV Conscious Sedation for Short Term Diagnostic or Surgical Procedures.
 - 3) Guidelines for Registered Nurses in the Administration of Conscious Sedation.
 - 4) Position Statement on Qualified Providers of Conscious Sedation.

- *American Nurses Association, 600 Maryland Ave., S.W., Ste. 100, Washington, D.C., 20024.
 - 1) Position Statement on Promotion of Comfort and Relief of Pain in Dying Patients.
 - 2) Position Statement on the Role of the Registered Nurse in the Management of Patients Receiving IV Conscious Sedation for Short-Term Therapeutic, Diagnostic, or Surgical Procedures.
 - Position Statement on the Role of the Registered Nurse in Management of Analgesia by Catheter Techniques. (Epidural, Intrathecal, Intrapleural, Peripheral Nerve Catheters).
- *Maryland Board of Nursing, 4140 Patterson Ave., Baltimore, Maryland, 21215.
 - Role of the Registered Nurse in the Management of Analgesia by Catheter Techniques (Epidural, Intrathecal, Interpleural, or Peripheral Nerve Catheters).
- *Montana State Board of Nursing, 111 N. Jackson, Helena, MT, 59620.
 - Administration of IV conscious Sedation Medications by Non-anesthetist registered nurses. Declaratory Ruling.
- *Connecticut Board of Examiners For Nursing, 150 Washington Street, Hartford, CT, 06106.
 - Suggested Guidelines for Registered Nurses in the Management of Analzisia by Catheter.

Roselyn Holloway, MSN, RN Re-Elected To NCSBN Board of Directors



Roselyn Holloway, MSN, RN

The 1995 Delegate Assembly of the National Council of State Boards of Nursing (NCSBN), reelected Roselyn Holloway, MSN, RN, to its nine member Board of Directors. Ms. Holloway, the Lead Instructor in Patient Care Management at Methodist Hospital School of Nursing (Lubbock) and a member of the Board of Nurse Examiners, will serve on the NCSBN Board of Directors as its Director-At-Large.

The National Council of State Boards of Nursing, Inc., is the organization through which boards of nursing act and counsel together on matters of common interest and concern affecting the public health, safety and welfare, including the development of licensure examinations for nursing.

The Delegate Assembly of the National Council is the voting membership which represents each state board of nursing throughout the United States as well as Washington, D.C., the Virgin Islands, American Samoa, Guam, Puerto Rico and the Northern Mariana Islands.

Education Report by Mary Anne Hanley, MA, RN

The following actions were taken by the Board at the September 1995 and November 1995 board meetings:

September 1995

Continued full accreditation of Baptist Memorial Hospital, Diploma Nursing Program in San Antonio.

November 1995

Granted full accreditation to Temple Junior College, Associate Degree Nursing Program in Temple.

Based on the 1995 exam year pass rate and annual report, continued warning status of Laredo Community College, Associate Degree Nursing Program in Laredo.

Based on the 1995 exam year pass rate and annual report, changed accreditation status of the University of Texas at Pan American, Associate Degree Nursing Program in Edinburg from warning to conditional accreditation and limited number of students to be admitted in the Fall 1996 Semester.

Based on the 1995 exam year pass rate and annual report, changed accreditation status of the University of Texas at Pan American, Baccalaureate Degree Nursing Program in Edinburg from warning to full accreditation. Further, faculty and administration were commended for improvements made in the program demonstrated by pass rate exceeding the national pass rate.

EDUCATION REPORT

(continued from previous page)

Editorial Clarification

The Board received a comment regarding the format of the accreditation status of Texas Tech Health Science Center School of Nursing, Lubbock, and its extended campus in Odessa as it appeared in the September 1995 issue of *RN Update*. The Board continued the full accreditation status of this program at its July 1995 meeting. We regret any confusion resulting from the typesetting of the September 1995 issue of *RN Update*.

Readers Needed For Test Centers

Sylvan Technology Centers is developing a pool of examination readers to help candidates with disabilities who need reading assistance. Readers will serve on an "as needed" basis and should have a health care background and familiarity with medical terminology. They will be paid by Sylvan Technology Centers. Those who may be interested in becoming a reader, including retired RNs, graduate nursing students, members of professional nursing organizations or members of other health care professions, please contact Cheryl K. Rosipal at 512/305-6816 at the Board's office.

BNE Workshops 1995 Successful

by Karen Baicy, MSN, RN

The Board conducted workshops on "Nursing Practice: Current Issues and Challenge" in eight Texas cities this past summer and fall. This statewide speaking tour was aimed at informing RNs about selected practice issues. The need for these workshops was identified by RNs from across the state, practicing in a variety of settings.

The list of cities and the total number of attendees are as follows: Denton (134), Tyler (234), Lubbock (133), Canyon/Amarillo (132), Brownsville (167), Midland (112), Beaumont (261) and Galveston (198). A total of 1,371 nurses attended this series of workshops. In the planning stages are the 1996 BNE workshops targeting major Texas cities such as Houston, Dallas, Ft. Worth, San Antonio, and Austin.

MOU Advisory Committee (continued from page 3)

At the November board meeting, the Board accepted an amendment to limit the expansion of gastronomy administration to respite services only. The agreement by the Board was conditional on two counts. The first condition was that the MOU Advisory Committee meet to develop and recommend curricular guidelines for training of the unlicensed personnel who would be performing this function. The second condition was that a statewide study be conducted to gather data on outcomes of nursing services being provided through various authorized personnel in licensed services. This study is felt to be essential to future determination of what services can be safely and prudently delivered to patients in the community with or without nurse delegation.

More information on the progress of this study and the related activities of the Board and the MOU Advisory Committee will be reported in subsequent issues of *RN Update*.

Legal Issues

Penny Burt, JD, RN, General Counsel for the Board of Nurse Examiners, answers your questions regarding the Nursing Practice Act, board rules and regulations, and other legal issues relating to nursing.

In the last issue of *RN Update*, I used this space to redirect many of our frequent callers to appropriate sources of information. Since that issue, staff has received calls asking:

- 1. Whether an RN's name tag should be worn on the right side or the left side;
- 2. Whether a nurse should question a particular combination of drugs ordered for a specific patient;
- 3. Whether it would be unprofessional conduct for a nurse administrator to assign a preceptor to a new graduate who had made a medication error instead of reporting directly to the Board of Nurse Examiners;
- 4. Whether a conviction for (delivery of meprobamate, hot checks, Medicare fraud, or cruelty to animals) would be a problem at license renewal time; and,
- 5. Whether an RN (not certified as an advanced practice nurse) can provide outpatient primary care and emergency services in a satellite clinic owned by a physician in the next county.

When Board staff receives questions such as these, we ask if the caller has consulted the Nursing Practice Act, Board Rules, Position Statements or the *RN Update*. With alarming frequency, the answer is "No." Staff will then point the caller to the appropriate resources. At this juncture, most callers have everything they need to proceed with their own decision making. A few will persist in asking for "the answer" and become frustrated when staff either declines or gives a narrowly qualified statement. In the practice of nursing, very few questions have concrete, unchanging, absolute answers. Most often, the answer to a practice question is "it depends..." Figuring out the "it depends part" is the essence of being a professional. The role of a licensed professional is to acquire and keep current the knowledge, skill and information necessary for decision making; to apply education, experience and judgment to particular facts; and, to be accountable for the outcome. The role of the professional licensing board is to set minimum standards for education, licensure and practice and to provide information to practicing nurses. The licensing board cannot and should not exercise judgment or solve problems for its licensees.

Board staff cannot and should not do the thinking for registered nurses. What we can and should do is provide information and tools to assist nurses in successfully analyzing their problems and formulating solutions that are safe and effective. On page 9 of this issue, you will find a Decision Model for Determining Scope of Practice that was adopted by the Board at its November 1995 meeting. In conjunction with the Board of Nurse Examiners' workshops, we have provided a similar decision tree for delegation and demonstrated its use.

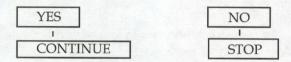
If you contact the Board of Nurse Examiners for assistance, you should expect a response intended to help you work through your problem. You should not expect an instant solution to any specific practice dilemma. We strongly encourage you to utilize the decision model. However, if after utilizing the model, you cannot determine whether an act is permissible, you may write the Board for an opinion. The process of articulating the problem often reveals the solution. If it does not, your written inquiry can receive the considered attention of the Board's consultants and a more comprehensive reply than is possible by phone.

DECISION MAKING MODEL (continued from page 1)

The mission of the BNE is to protect and promote the welfare of the people of Texas by ensuring that each person holding a license as a professional registered nurse in the State of Texas is competent to practice safely. The BNE is committed to proactive regulation by educating registered nurses to make decisions which support safe nursing practice.

SIX-STEP DECISION MAKING MODEL FOR DETERMINING THE RN SCOPE OF PRACTICE

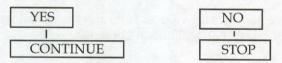
1. Is the activity consistent with the Nursing Practice Act, Rules & Regulations, and Board Position Statements?



2. Is the activity appropriately authorized by valid order/protocol and in accordance with established policies and procedures?



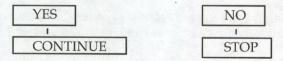
3. Is the act supported by either research reported in nursing and health-related literature or in scope of practice statements by national nursing organizations?



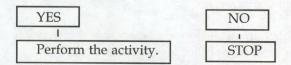
4. Do you possess the required knowledge and have you demonstrated the competency required to carry out this activity safely?



5. Would a reasonable and prudent nurse perform this activity in this setting?



6. Are you prepared to assume accountability for the provision of safe care and the outcome of the care rendered?



DECISION MAKING MODEL (continued from page 9)

If you have a question about nursing practice, use this model by following each step. If you are unable to answer your question after going through each step, you may send a written request to the BNE for an opinion. Please include appropriate documentation of issues addressed in each step of the model.

- 1. Is the act consistent with the Texas Nursing Practice Act? Do the Board's rules or position statements address this specific act? (This may be all the information you need to make your decision. If not, continue to the next step.) Resource documents you might need are listed below:
 - a. Nursing Practice Act: Article 4518, Sec. 5
 - b. Standards of Professional Nursing: Rule 217.11
 - c. Unprofessional Conduct: Rule 217.13
 - d. Delegation of Selected Tasks by Professional Nurses to Unlicensed Personnel: Rule 218
 - e. BNE Position Statements Available upon request.

If NO, the act is NOT within your scope of practice without the above. If YES, continue to the next step.

2. Is the activity appropriately authorized by a valid order when necessary, and in accordance with appropriately established policies and procedures? Clarification of the order(s) should be sought as needed. Rule 217.11(5) states the RN must: "clarify any order or treatment regimen that the nurse has reason to believe is inaccurate, non-efficacious or contraindicated by consulting with the appropriate licensed practitioner and notifying the ordering practitioner when the RN makes the decision not to administer the medication or treatment."

If NO, the act is NOT within your scope of practice without the above. If YES, continue to the next step.

3. Is the act supported by positive and conclusive data from nursing literature, nursing research, and/or research from a health related field? Has a national nursing organization issued a position statement on this practice?

If NO, the act is NOT within your scope of practice without the above. If YES, continue to the next step.

4. Do you personally possess current clinical competence to perform safely from knowledge acquired in a basic nursing education program, post-basic program, or continuing education program? Documentation to validate competency should be maintained in accordance with agency/facility policy and procedure.

If NO, the act is NOT within your scope of practice without the above. If YES, maintain documented evidence and continue.

5. Is the performance of the act within the accepted "standard of care" which would be provided in similar circumstances by reasonable and prudent nurses who have similar training and experience? Rule 217.11(1) states the RN shall:

"...know and conform to the Texas Nursing Practice Act and the board's rules and regulations as well as all federal, state, or local laws, rules or regulations affecting the RN's current area of nursing practice."

The RN should consider the available human and material resources that may vary in practice settings such as in Long Term Care as compared to Hospice or other acute care settings.

If NO, the act is NOT within your scope of practice. Performance of the act may place both nurse and patient at risk. If YES, continue. (continued on next page)

Insufficient Funds Items

As of November 1, 1995, 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 in your employ or seek employment with your agency/institution, please contact the Board's office. If any of these nurses are practicing in Texas as a registered nurse, they are in violation of the Nursing Practice Act and would be subject to disciplinary action by the Board.

NAME	LICENSE # OR	PERMIT #	NAME	LICENSE # OR	PERMIT #
Asble, Alex Walter	564983	License	Kuntz, Eileen Marie	514331	License
Bablitz, Nancy Elizabeth	553715	License	Kurylo, Kim Diane	580995	License
Bargas, Virginia	257121	License	Lee, Linda Karen	53762	Temporary
Barr, Lori Anne	537652	License			License
Buol, Kolleen Kay	516233	License	Levingston, Lynnell	73626	Permit
Butler, Norma Powell	57324	Temporary	Masters, Mary Jane	550218	License
		License	Mealor, Helen	50375	Temporary
Clark, Victoria	50398	Permit			License
Conti, Angela Rose	552231	License	Mitchell, Sandra	565160	License
Dennis, Patricia Ann	503975	License	Morganti, Dominick J	530514	License
Falkner, Barbara Marie	587013	License	Nims, Teresa Masadie	565233	License
Farra, Diane Rae	560781	License	Njeri, Malene	218553	License
Felkins, Bettye Lisa	557452	License	Olivier, Marie Claudia	514361	License
Filler, Marcia Ann	553220	License	Pangilinan, Julie	445792	License
Fryer, Renee Marie	578735	License	Payne, Traci Lee	569734	License
Garza, Christine Marie	621403	License	Pierce-Berkil, Kristie	071891	Permit
Gazey, Patricia Mary	69539	Permit	Rae, Lisbeth Sue	538984	License
Glisson, James M	239549	License	Raffaele, Mark	74257	Permit
Guthrie, Kelly R.	547982	License	Rosko, Lisa Marie	538707	License
Handlin, Kathy L	512842	License	Sanderson, Brenda Mar	v 538111	License
Hart, Janet	070678	Permit	Sharaf, Charmaine Mari	THE RESERVE OF THE PROPERTY OF THE PARTY OF	License
Howell, Sharon	459387	License	Sloane, Gail Theresa	550406	License
Jenkins, Victor I	517158	License	Strouhal, Susan Kay	557026	License
Jones, Gwendolyn	063362	Permit	Vasquez, Emerald J D	207588	License
Kirk, Sandra Andrews	521416	License	Wilson, Allison Jean	538146	License
Kishbaugh, Shari Elizab	eth 575583	License	and a second resident feath	000140	Diccipe

DECISION MAKING MODEL (continued from page 10)

6. Are you prepared to accept the consequences of your actions?

If NO, the act is NOT within your scope of practice. If YES, then:

- a. Perform the act based upon valid order when necessary, and in accordance with appropriately established policies and procedures.
- b. Assume accountability for provision of safe care.

ACKNOWLEDGEMENTS

Kentucky State Board of Nursing Florida State Board of Nursing North Carolina State Board of Nursing The National Council of State Boards of Nursing Ohio Board of Nursing Newsletter, 11/94
The Pennsylvania State Board of Nursing - March 18, 1992
American Nurses Association, Professional Standards of Practice
Nevada State Board of Nursing: "Determining Your Scope of Practice," 12/94
Paper prepared by Barbara Quick, BSN, RN, Masters Student, University of Texas at Austin, Fall 1994

Notice of Disciplinary Action

The following registered nurses had disciplinary action taken against their licenses. If you would like to receive additional information regarding the disciplinary action which has been imposed, please send your request to the Board of Nurse Examiners, Investigations Department, P.O. Box 140466, Austin, Texas, 78714.

NAME	LICENSE #	DISCIPLINE	DATE OF ACTION
Arlene C. Abastillas	603242	Warning with Remedial Education	11/08/95
Ingrid Yvonne Ashley	576988	Remedial Education	11/08/95
Vadie Machelle Bell	600451	Remedial Education	10/12/95
Elvira Benavides	553790	Revoked	8/15/95
Michelle Diane Berlin	600459	Warning	10/12/95
Valerie Best	536756	Suspended	10/12/95
Jo Ann Brown	608578	Reprimand	10/12/95
Juanita DelaCerna Caballero	581726	Warning	10/12/95
Rhonda J. Carroll	508840	Revoked	8/15/95
Tommie Leonard Carter	237858	Revoked	8/15/95
Ledda G. Casile	524970	Warning with Remedial Education	10/12/95
Emelda Castle-Lee	242810	Warning	10/12/95
Starla Renea Cherryhones	539918	Reprimand with Stipulations	8/15/95
Barbara Ann Dauber	600066	Reprimand with Remedial Education	10/12/95
Dollie Francine Davis	520131	Warning with Stipulations	10/12/95
Joanne Jane Dawson	462828	Reprimand with Stipulations	8/15/95
Noreen DelToro	586469	Reprimand	10/12/95
Kathleen M. Hoff Donovan	211226	Warning	8/15/95
Karen A. Elliott	502066	Warning	8/15/95
Patricia Enriquez	257260	Remedial Education	10/12/95
Ma Cecille Balay Escalona	588855	Warning with Stipulations	9/13/95
Linda Kaye L. Ewton (Baxter)	434794	Revoked	8/15/95
Marilyn A. Fergot	540208	Suspend/Probate	9/13/95
Carol A. Shreve Fogle	229439	Suspend/Probate	10/12/95
Deborah J. Freeman	533275	Reprimand	10/12/95
Frances Haree Galloway	551297	Revoked	8/15/95
Gumersindo Oscar Gomez	621874	Reprimand	8/15/95
Celinda Gonzalez	516825	Suspend/Probate	10/12/95
Dianna Lynn Goodman	547444	Remedial Education	10/12/95
Cheryl Ann Gray	542530	Remedial Education	10/12/95
Leticia Genoveva Gutierrez	589028	Suspend/Probate	8/15/95
Sharon Yvonne Hagewood	589034	Warning with Stipulations	10/12/95
Lavetta L. Harbin	432518	Remedial Education	11/08/95
Linda K.D. Harris	219866	Warning	11/08/95
Nora D. Hernandez	540504	Remedial Education	10/12/95
Gillian Amanda Herring	549476	Remedial Education	10/12/95
Young Hee Hur	543020	Remedial Education with Stipulations	8/15/95
Paula Marie Jackson-Williams	595285	Remedial Education	10/12/95
Wesley Jean James	549653	Warning	8/15/95
Shirlee J. Kastner	503209	Warning	10/12/95
Irene Rose Kenning	576771	Reprimand with Stipulations	10/12/95
Deborah Ann Major	601488	Reprimand	11/08/95
Ellen J. Mitchell	250171	Warning	8/15/95
Zenda Diane Montoya	536625	Remedial Education	10/12/95

NAME	LICENSE #	DISCIPLINE	DATE OF ACTION
		DISCIPLINE Description	DATE OF ACTION
Shelley Jo Napper	578060	Remedial Education	8/15/95
Margaret Ngundu	513884	Reprimand with Stipulations	10/12/95
Sandra Venice Nordquist	596182	Warning with Remedial Education	9/13/95
Victoria Chinwe Okonkwo	589649	Warning with Stipulations	10/12/95
Barbara M. Peoples	506061	Warning with Remedial Education	8/8/95
Rae Lea Richter	251736	Warning with Stipulations	10/12/95
Matthew Sebastian Rogers	568455	Reprimand with Stipulations	11/08/95
Robert B. Seward	513947	Remedial Education	8/15/95
Harma Flojuan Shankles	243076	Remedial Education	10/12/95
Kay Ann Snider	596972	Reprimand with Fine	8/15/95
Sherri Sue Sonntag	249053	Suspend/Probate	10/12/95
Gail Carmen Szott	592970	Warning with Stipulations	8/15/95
Belinda M. Torres	544943	Reprimand with Stipulations	11/08/95
Mary Kay Townsend-Stephens	254634	Warning	10/12/95
Renee J. Vinson	534988	Remedial Education	10/12/95
Sharon Rose Walker	578594	Warning	11/08/95
Carol Lynn Walters	256188	Warning	8/15/95
Mary M. Wiggins	239179	Reprimand with Stipulations	11/08/95
Genevieve Williams	501031	Warning with Remedial Education	10/12/95
Lori Carla Zimbeck	623190	Remedial Education	10/12/95

The following individuals have voluntarily surrendered their licenses to practice professional nursing in the State of Texas:

NAME	LICENSE #	DATE OF SURRENDER
Debra Lee Blasczienski	597737	September, 1995
Deborah D. Chance	554029	October, 1995
Dewey Allen Clanton	609982	August, 1995
Richard Henry Dyer	587272	September, 1995
Mary Elizabeth Davis	225584	October, 1995
Meredith Leigh Fresquez	593066	October, 1995
David H. Hale	516915	August, 1995
Susan Gordon Herrington	510585	August, 1995
Sandra Louise Isaacks	554390	October, 1995
Leigh Ann Kilgore	581865	August, 1995
Frances Sarah LaFortune	603013	September, 1995
Julie Ann Larson	516510	October, 1995
Laura Walker Loeffler	520934	September, 1995
Daniel J. Lowe	255200	October, 1995
Beatrice Marie McDonnell	561250	October, 1995
Jean Kathryn Mead	595927	September, 1995
Samuel Abel Mendez	595946	August, 1995
Judy L. Pickett	254849	September, 1995
Martha M. Davis Salem	219475	September, 1995
Laura Jean Sargent	451446	September, 1995
Dolores Scarlett	580781	September, 1995
Margaret Ann Scott	575333	October, 1995
Renee J. Sellers	257101	October, 1995
Cathy Lee Sevier	573581	October, 1995
Ronald E. Souter	500719	October, 1995
Jacqueline Teves	563472	October, 1995
Melissa L. White	242766	August, 1995

NAME	LICENSE #	DATE OF SURRENDER	
William H. Whitt	243001	October, 1995	

The following individuals were reinstated to practice professional nursing in the State of Texas with stipulations:

NAME	LICENSE #	DATE OF ACTION
Suzanne Franks	575632	August 15, 1995
Marta Garcia	448989	August 15, 1995
Margery Austin Harp	253032	November 8, 1995
Angela Marie Houston	582918	August 15, 1995
Susan Elizabeth Kulina	455093	August 15, 1995
Betty Herndon Mifflin	563566	August 15, 1995

As of August 23, 1995, 2 registered nurses have paid a fine for continuing to practice on a delinquent license.

As of November 17, 1995, 5 registered nurses have paid a fine for failure to comply with Board's Continuing Education requirements.

On November 8, 1995, a motion for rehearing was granted to Sandra Kay Rongers, license number 256111. The charges filed against her were dismissed and her license to practice professional nursing in Texas was reinstated.

Making A Case

How To Properly Make A Complaint To The BNE by Noemi Leal, Senior Investigator

The Nursing Practice Act, Article 4525a, requires registered nurses, professional nursing peer review committees, employers of nurses, as well as other entities, to report to the Board of Nurse Examiners (BNE) any RN who has exposed or is likely to expose a patient or other person unnecessarily to a risk of harm as a result of:

- 1.) unprofessional conduct,
- 2.) failure to care adequately for a patient,
- 3.) failure to conform to the minimum standards of professional nursing practice, or
- 4.) impaired status.

Reporting forms are available through the BNE, although it is not necessary to have a form in order to report. In those situations involving suspected chemical impairment or mental illness, the matter may be immediately reported to the Texas Peer Assistance Program for Nurses (TPAPN) in lieu of reporting to the Board.

The Board has developed the following guidelines for use when violations occur:

- 1.) Establish the identity of the registered nurse involved and the unlawful act or practice involved.
- 2.) Report suspected problems immediately to the supervisor, or the person in authority.
- 3.) Limit the number of people who are investigating the problem. Do not discuss suspicions with others.

- 4.) Verify the problem through official records, where possible. Copies of same should be secured. Be careful to maintain patient confidentiality, using medical record numbers.
- 5.) Document information in writing. Sharply distinguish between first-hand observations based upon personal knowledge and hearsay statements obtained from others. Where possible, signed statements should be obtained from individuals having direct, first-hand knowledge of the activity.
- 6.) Submit a signed, written complaint to:

Board of Nurse Examiners
Department of Practice and Compliance
Attn: Supervising Investigator
P.O. Box 140466
Austin, Texas 78714
(512) 305-6838

Complaints can also be made by contacting the Health Professions Council Complaint line at 1-800-821-3205. We will provide the caller with a complaint form to complete and return to our office. The written complaint should include the following:

- a.) The RN's license number or social security number.
- b.) The correct spelling of the RN's name.
- c.) The date(s) of the incident(s).
- d.) A brief, factual description of the incident(s), including the patient medical number.
- e.) Whether any witnesses were present. (YES or NO only, no names.)
- f.) A copy of the Peer Review Committee Report (if you are an employer of 10 or more nurses and the Peer Review process has been completed.)

Board Adopts New Rule On Limited Prescriptive Authority For Advanced Practice Nurses

Administrative Update by Kathy Thomas, MN, RN

Nurse Practitioners, Nurse Midwives, Nurse Anesthetists and Clinical Nurse Specialists are recognized by the BNE as Advanced Practice Nurses (APNs) (formerly known as Advanced Nurse Practitioners). Since 1989, APNs practicing at sites serving medically underserved populations have had limited prescriptive authority using presigned prescriptions under protocols or other physician orders. This limited prescriptive authority applied to dangerous drugs only (no controlled substances).

In 1995, prescriptive authority was broadened by Senate Bill 673 which amended the Nursing Practice Act and the Medical Practice Act. Under this law, prescriptive authority continues to be based on collaborative practice with physicians. SB 673 gave the BNE authority to determine the education and continuing education requirements for prescriptive authority. It also expanded sites where limited prescriptive authority could be practiced; in addition to medically underserved sites, it added physicians's primary practice sites or facility based practices where a medical director or other physician was delegating to the APN. Other changes include elimination of the need to have prescriptions presigned by the delegating physician and redefining protocols to clarify that they need not be a "cookbook" but can take into consideration the APN's education and experience. The law now explicitly limits prescriptive authority to dangerous drugs.

Due to the need to make extensive changes to Rule 222, the Board repealed the existing rule and adopted a new emergency Rule 222 in September 1995. These rules were developed over the summer with input from the Board's Advisory Committee on Advanced Nursing Practice and key advanced practice organizations. During the comment period, the Board received only one comment from the Texas Nurses Association, which addressed only minor editorial changes. At the November board meeting, the Board accepted these suggestions and adopted the rule with the minor changes. The rule is expected to be a permanent rule in late December.

To receive an application for limited prescriptive authority, please submit a written request with your name and current address. You must have a current Texas RN License or Temporary License and be recognized as an Advanced Practice Nurse prior to seeking prescriptive authority.

Advanced Practice Nurses Limited Prescriptive Authority

222.1. Definitions. The following words and terms when used in this chapter shall have the following meanings unless the context clearly indicates otherwise:

"Advanced practice nurse (APN)" formerly known as "Advanced Nurse Practitioner (ANP)" - A registered professional nurse, currently licensed in the State of Texas, who is prepared for advanced nursing practice by virtue of knowledge and skills obtained through a post-basic or advanced educational program of study acceptable to the board. The advanced practice nurse is prepared to practice in an expanded role to provide health care to individuals, families, and/or groups in a variety of settings including but not limited to homes, hospitals, institutions, offices, industry, schools, community agencies, public and private clinics, and private practice. The advanced practice nurse acts independently and/or in collaboration with other health care professionals in the delivery of health care services. APNs include Nurse Practitioners, Nurse Midwives, Nurse Anesthetists and Clinical Nurse Specialists.

"Eligible sites" - Sites serving medically underserved populations; a physician's primary practice site; or facility based practices at a licensed long term care facility or hospital.

"Board" - The Board of Nurse Examiners for the State of Texas.

"Carrying out or signing a prescription drug order" - Completion of a prescription drug order presigned by the delegating physician, or the signing of a prescription by an APN after the APN has been designated with the Board of Medical Examiners by the delegating physician(s) as a person delegated to sign prescriptions.

"Dangerous drug" - A device or a drug that is unsafe for self medication and that is not included in schedules I-V or penalty groups I-IV of chapter 481 Texas Health and Safety Code (Texas Controlled Substances Act). The term includes a device or a drug that bears or is required to bear the legend: "Caution: federal law prohibits dispensing without prescription."

"Facility-based practice" - An APN's practice which is based at a licensed hospital or licensed long term care facility.

"Health Professional Shortage Area (HPSA)" - An area, population group, or facility designated by the United States Department of Health and Human Services (USDHHS) as having a shortage of primary care physicians.

"Medically Underserved Area (MUA)" - An area or population group designated by the USDHHS as having a shortage of personal health services; or an area defined by rule adopted by TDH that is based on demographics specific to this State, geographic factors that affect access to health care, and environmental health factors.

"Pharmacotherapeutics" - A course that offers content in pharmacokinetics and pharmacodynamics, pharmacology of current/commonly used medications, and the application of drug therapy to the treatment of disease and/or the promotion of health.

"Physician's primary practice site" - Any one of the following:

(A) the practice location where the physician spends the majority of his/her time;

(B) a licensed hospital, a licensed long-term care facility or a licensed adult care center where both the physician and the APN are authorized to practice, or an established patient residence; or

(C) where the physician is physically present with the APN.

"Protocols/or other orders" - Written authorization to initiate medical aspects of patient care which are agreed upon and signed by the APN and the physician, reviewed and signed at least annually, and maintained in the practice setting of the APN. Protocols/or other orders shall be defined to promote the exercise of professional judgement by the APN commensurate with his/her education and experience. Such protocols/or other orders need not describe the exact steps that the APN must take with respect to each specific condition, disease, or symptom and may state types or categories of drugs which may be prescribed rather than list specific drugs.

"Rural health clinic" - A clinic designated as a rural health clinic under the Rural Health Clinic Services Act of 1977 (Public Law No. 95-210); the designation is made by the Health Care Financing Administration (HCFA) of the USDHHS.

"Shall" and "must" - Mandatory requirements.

"Should" - A recommendation.

(continued on next page)

"Sites serving medically underserved populations" - A medically underserved area, a health professional shortage area, a rural health clinic, a public health clinic or family planning clinic under contract with the Texas Department of Health (TDH) or Texas Department of Human Services (TDHS) or other site approved by the TDH.

222.2 Application for Approval.

- (a) To be approved by the board to carry out or sign prescription drug orders and issued a prescription authorization number, a Registered Nurse (RN) shall satisfactorily complete the following requirements:
- the following requirements:

 (1) the RN shall be approved by the board as an APN; and

 (2) the APN shall submit to the board the application for Limited Prescriptive Authority and the appropriate documentation of the necessary education, training, and current skills, to include pharmacotherapeutics, as determined by the board to carry out or sign prescription drug orders.

 (b) The APN shall renew the privilege to carry out or sign prescription drug orders in conjunction with the RN license renewal application.

222.3. Renewal of Limited Prescriptive Authority.

- (a) The APN seeking to maintain prescriptive authority shall attest, on forms provided by the board, to completing at least five contact hours of continuing education in pharmacotherapeutics within the preceding biennium.
- (b) The continuing education requirement in subsection (a) of this section, shall be in addition to continuing education required under rule 217.15 of this title (relating to Continuing Education).

222.4 Functions

- (a) The APN with a valid prescription authorization number may carry out or sign prescription drug orders under the following conditions:

 - (1) The APN carries out or signs prescription drug orders in an eligible site.

 (2) The prescription drug order is carried out or signed in accordance with protocols, standing delegation orders, standing medical orders, practice guidelines or other physician orders for medical aspects of patient care including prescription drug orders.

 (3) The APN carries out or signs prescription drug orders under physician supervision which consists of the following and the additional supervision require ments set out in Board of Medical Examiners (BME) Rule 193.8 (relating to Delegation of the Carrying Out or Signing of Prescription Drug Orders to Physician Assistants and Advanced Practice Nurses):

 - (A) at a site serving medically underserved populations, the physician visits the site at least once a week; the physician receives daily reports from the APN regarding complications encountered; and the physician is available for consultation by direct telecommunications;
 (B) at a physician's primary practice site, the physician is limited to delegation to three full time equivalent APNs; the physician may delegate the carrying out or signing of a prescription drug order for patients with whom the physician has established or will establish a physician-patient relationship but no time period to establish this relationship is required;
 - (C) at a facility-based practice, where the delegating physician is the medical director, chief of staff, credentialing committee chair, department chair or physician who consents to a request by the medical director or chief of staff; protocols or other orders must be developed in accordance with policies approved by the medical staff; the APN writing prescriptions for patients of physicians, other than the delegating physician, must have the approval of the patient's physician; delegation in long term care facilities is limited to three full time equivalent APNs; and the physician must have the approval of the BME to delegate at more than one licensed hospital or more than two long term care facilities.
- (4) The APN maintains appropriate documentation of physician supervi sion, patient records, and protocols which should comply with rules adopted by the BME.

 (b) The APN with a valid prescription authorization number may carry out or sign prescription drug orders by providing the following information on the prescription:
- - (1) the patient's name and address;

 - (2) the drug to be dispensed;
 (3) directions to the patient in regard to the taking and the dosage;
 (4) the intended use of the drug, if appropriate;

 - (5) the name, address, and telephone number of the physician;
 - (6) the name, address, telephone, and identification number of the APN completing or signing the prescription drug order;
 - the date; and
 - (8) the number of refills permitted.
- (c) The format and essential elements of the prescription shall comply with the requirements of the rules of the Board of Pharmacy.
- (d) The medications which can be carried out or signed by the APN through prescription drug orders shall be those drugs classified as dangerous drugs and shall be limited to those categories of drugs identified in protocol or other order.
- (e) The APN with a valid prescription authorization number may request, receive, possess and distribute prescription drug samples provided:
 - (1) protocols or other physician orders authorize the APN to sign the prescription drug orders; (2) all requirements for the APN to sign prescription drug orders are met;

 - (4) a record of the sample is maintained and samples are labeled as specified in the Dangerous Drug Act (Health and Safety Code, Chapter 483).
- 222.5. Nurse Midwives Administering or Providing Controlled Substances. A nurse midwife recognized by the board may administer or provide one or more unit doses of a controlled substance during intra-partum or immediate post-partum care subject to the following conditions:

 - physician delegation must be made through protocols or other physician orders;
 delegation is limited to three full-time equivalent nurse midwives at the designated facility where the nurse midwife practices; and
 - (3) providing is limited to the immediate needs of the patient not to exceed 48 hours.
- 222.6. Nurse Anesthetist Authorization to Select, Obtain, Order, Administer and/or Utilize Drugs, Devices and Anesthesia Techniques in the Provision of Anesthesia and
- (a) In a licensed hospital or ambulatory surgical center, consistent with facility policy or medical staff bylaws, a nurse anesthetist may select, obtain and administer drugs, including determination of appropriate dosages, techniques and medical devices for their administration and in maintaining the patient in sound physiologic status pursuant to a physician's order for anesthesia or an anesthesia-related service. This order need not be drug-specific, dosage specific, or administration-technique specific.
- (b) Pursuant to a physician's order for anesthesia or an anesthesia-related service, the nurse anesthetist may order anesthesia-related medications during perianesthesia periods in the preparation for or recovery from anesthesia. Another RN may carry out these orders
- (c) In providing anesthesia or anesthesia-related service, the nurse anesthe tist shall select, order, obtain and administer drugs which fall within categories of drugs generally utilized for anesthesia or anesthesia-related services and provide the concomitant care required to maintain the patient in sound physiologic status during those experiences.

222.7. Enforcement

- (a) Any nurse who violates these rules shall be subject to removal of the authority to prescribe under this rule and disciplinary action by the board under Article 4525, Texas Civil Statutes.
- (b) The practice of the APN approved by the board to carry out or sign prescription drug orders is subject to monitoring by the board on a periodic basis.

Health Professions Council Installs Toll Free Complaint Line

The Health Professions Council (HPC) has installed its toll free complaint line in order to receive complaints from the public regarding licensed health professionals in Texas. The HPC's number is 1-800-821-3205. The public can call the HPC Complaint Line with complaints regarding any licensee of the following boards:

Texas Board of Chiropractic Examiners
Texas State Board of Dental Examiners
Texas Optometry Board
Texas State Board of Pharmacy
Texas State Board of Podiatry Examiners
Texas State Board of Veterinary Medical Examiners
Texas State Board of Medical Examiners
Board of Nurse Examiners For the State of Texas
Texas State Board of Examiners of Psychologists
Texas Board of Vocational Nurse Examiners
Texas State Board of Occupational Therapy and Physical Therapy

Calls will be attended by a voice message system which will give the caller a list of professions to choose from. Complainants will then be sent a complaint form within 3 working days. All complaints are confidential. The Board of Nurse Examiners For the State of Texas has been a member of the HPC since its inception in 1994. Former Executive Director, Louise Waddill, PhD, RN, was the HPC's first presiding officer.

NPAC SEEKS APPLICANTS (continued from page 2)

-- Perform other functions as directed by the Board.

The advisory committee is to include representatives of nursing practice, education, nursing organizations, state agencies and consumer groups. This committee has identified various nursing practice issues. As a result of this committee's work, the BNE has adopted the position statements on *The Role of the Registered Nurse in the Restructured Health Care Delivery System*, as well as the rules on *Minimum Procedural Standards During Peer Review*. The committee is currently drafting *Guidelines for Employment of New Graduates*, as well as guidelines for nurses who experience a change in practice area or are re-entering the workforce after a period of four or more years.

The Board is seeking nominees from nurses engaged in practice to serve on this committee. The BNE, however, is prohibited from reimbursing committee members. The current committee members are reimbursed either by their employer or organization, or pay their own expenses. If you are interested in being considered to participate on the NPAC, please submit your request for an application, which must be returned by December 28, 1995.

The following are criteria for members:

- 1.) knowledge of current issues and trends in nursing practice;
- 2.) currently engaged in nursing practice; and
- 3.) consideration is given to representation from various practice settings, geographical areas of the state, and representatives of nursing organizations, state agencies, and consumer groups.

BNE INFORMATION PAGE

Who To Call For Assistance

Last year the Board's office received over 220,000 telephone calls. In an ongoing effort to assist callers by answering questions about the Board's policies, the telephone system now includes more direct numbers, recorded information messages and voice mail. Voice mail and information features are available during and after regular office hours and on weekends and holidays. The following is a list of helpful numbers:

HELPFUL NUMBERS

LICENSING......(512) 305-6809

- * License Verification
- * Endorsement/Reciprocity
- * General information

NURSING PRACTICE.....(512) 305-6844

- * Nursing Practice Issues
- * Advanced Practice Nurses approval status
- * Prescriptive Authority

NURSING EDUCATION AND EXAMINATION......(512) 305-6818

- * RN Nursing Programs
- * Extended Campuses
- * NCLEX-RN Applications
- * Graduate Nurse Permits
- * Declaratory Orders

INVESTIGATIONS.....(512) 305-8638

- * NPA/Rules and Regulations Violations
- * Complaint and Disciplinary Action Inquiries
- * Monitoring of Disciplined RNs

ADMINISTRATIVE SUPPORT SERVICES......(512) 305-6853

- * Returned Checks
- * Refunds
- * Debits

SALES OF LISTS.....(512) 305-6848

* Computerized lists of RNs on floppy diskettes, magnetic tape, hard copy and/or mailing labels

CONTINUING EDUCATION.....(512) 305-6844

* Information on the State's requirements for mandatory continuing education for RNs

LEGISLATIVE INFORMATION.....(512) 305-6842

* Recent legislative amendments affecting NPA

Office Hours and Location

The office of the Board of Nurse Examiners is located in The Hobby Building, 333 Guadalupe, Suite 3-460, in Austin, Texas. The mailing address is Box 140466, Austin, Texas 78714. Office hours are 8:00 a.m. to 5:00 p.m., Monday through Friday, except for designated holidays. The Board's office will be closed on the following days:

December 25 - 26, 1995 (Christmas Holidays) January 1, 1996 (New Year's Day) January 15, 1996 (Martin Luther King) February 19, 1996 (George Washington's Birthday)

The Board of Nurse Examiners is an equal opportunity/affirmative action employer and does not discriminate on the basis of race, color, religion, sex, national origin, age, or disability in employment or in the provision of services, programs or activities.

Board Meeting Dates/Open Forum

Regular meetings of the Board of Nurse Examiners For the State of Texas are scheduled on the following dates:

> January 10, 1996 (Austin) March 13, 1996 (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) 305-6811 at least four weeks prior to the board meeting to verify availability of space, the date and location.

All contested cases (formal disciplinary hearings) are heard by an Administrative Law Judge in the State Office of Administrative Hearings. These hearings are open to the public. If interested, call the State Office of Administrative Hearings at (512) 475-4993.

Individuals or representatives have an opportunity to communicate directly with the Board during the Open Forum which is held at each meeting. Interested persons are requested to notify Erlene Fisher prior to the scheduled board meeting so that the request to address the Board is assured and to confirm the date, time, and location of the Open Forum.



ACKNOWLEDGEMENTS

Editor Eric M. Gutierrez

Newsletter Committee Karen Baicy, Bob Bradfield, Kathy Burshnick, Noemi Leal, Glenn Parker, Kathy Thomas

Contributors Kathy Burshnick, Penny Burt, Sally Glaze, Mark Majek, Lori Walker RN Update is published quarterly by the Board of Nurse Examiners For the State of Texas. In compliance with the Americans With Disabilities Act, this document may be requested in alternate formats by contacting Bob Bradfield at the Board's office, (512) 305-6848 (Voice), (512) 305-7401, (FAX), or by visiting The Hobby Building, 333 Guadalupe, Suite 3-460, Austin, TX.

Proposed and Adopted Rules by Erlene Fisher

The following amendments were considered by the Board during its November meeting. Staff was authorized to submit the amendments as adopted, pending no negative comments during the 30 day comment period: 1.) Amendments to Rule 217.20 regarding Minimum Procedural Standards During Peer Review added vocational nurses, in accordance with the peer review provisions of Article 4525b, Tex. Rev. Civ. Stat. Ann. The amendment will be submitted to the *Texas Register* for publication. (See amended Rule 222, Limited Prescriptive Authority inside.)

TPAPN Educational Offerings

The Texas Peer Assistance Program For Nurses is providing the following educational offerings:

EMPLOYER WORKSHOPS -- "How Peer Assistance For Nurses Works" Includes TPAPN's principles of operation, overview of chemical dependency and mental illness, identification and referral process, and return to work and monitoring. (Approved for 7.2 Type I Contact Hours.) Registration fee is \$35.00.

HOUSTON/January 19, 1996 BEAUMONT/February 9, 1996 SAN ANTONIO/March 1, 1996 ABILENE/April 19, 1996 AUSTIN/May 10, 1996

<u>ADVOCATE WORKSHOP</u> -- Formal training for RNs who have been approved to serve as volunteer advocates. Application as an advocate must first be approved by TPAPN. No registration fee. Travel and partial lodging is reimbursed.

AUSTIN/March 29 and 30, 1996

FACULTY LIAISON WORKSHOP

AUSTIN/May 23, 1996 (Evening); May 24, 1996 (All day)

For more information, contact TPAPN at 1-800-288-5528.

BNE BULLETIN BOARD NEW NUMBER (512) 305-6864

Board of Nurse Examiners For the State of Texas Box 140466 Austin, TX 78714

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