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Official Nursing Sunset Bill Passes Both Houses, Merger Unravels

The House Public Health Committee heard testimony regarding HB 2180 on Tuesday, April 6, 1993. HB 2180, nursing's official sunset bill, had proposed the merger between the Board of Nurse Examiners and the Board of Vocational Nurse Examiners. The bill had also recommended the composition of the newly created board to consist of four RNs, four LVNs, and four public members.

Public testimony for and against the bill was heard by the eleven member committee headed by Chairman Hugo Berlanga and Vice-Chairwoman Dianne Delisi. Representing the Board of Nurse Examiners and offering testimony were board president, Morris Parrish, PhD, and treasurer, Pettey Ross, MS, RN. A coalition of 21 specialty organizations of professional nurses expressed general agreement with the philosophy and intent of HB 2180, but also noted significant practical and political problems that needed to be addressed.

Opposition to the bill was voiced primarily by licensed vocational nurses. Their main concerns centered around maintaining their titling act, fear of

losing control over their practice, and the potential diminishment of the LVN role.

After the conclusion of public testimony, committee chairman Hugo Berlanga instructed Sunset staff to redraft the bill, leaving the RN and LVN

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New Rules in Effect

Revised Standards, Unprofessional Conduct and Delegation Rules became effective on December 16, 1992.

The Standards of Professional Nursing were updated to reflect what the Board currently believes to be minimal acceptable levels of nursing practice. The Standards are set out to guide the RN in his/her decision making process regardless of the practice setting.

The Unprofessional Conduct rules clearly identify those behaviors which the Board feels are likely to deceive, defraud or injure clients or the public and, therefore, result in disciplinary action.

The Board encourages all RNs to become familiar with these rules. The Standards and Unprofessional Conduct Depository

Callas Public Library

boards intact. This action, according to Berlanga, facilitated the resolution of political differences, while still maintaining the original intent of the bill.

Subsequently, substitutes were laid out in both the House and Senate designating HB 2180 as professional nursing's sunset bill, and SB 839 as vocational nursing's sunset bill. Both bills, having passed the House and the Senate, become effective September 1, 1993.

The Nurse Practice Act, including this session's proposed changes, should be available by September 1, 1993. (As in the past, RNs can request a single copy simply be sending a business size, self-addressed, stamped envelope with 75 cents postage to the board, attention Licensing and Support Services.) If you have any questions, or would like additional information regarding nursing legislation, please contact Eric M. Gutierrez, Information Specialist, at (512) 835-8674.

rules are reprinted on page 10 of this newsletter. For a copy of the Delegation Rules, please send a written request and a self-addressed, stamped envelope to the Board of Nurse Examiners, Box 140466, Austin, 78714, Attn: Kathy Vrazel.

At their March 23, 1993 meeting, the Board adopted new rules regarding the supervision of new graduates. The new rules resulted from the Board's concerns about the lack of supervision provided to inexperienced graduates and the practice errors being made.

The guidelines were developed to assist employers in defining appropriate policies for the utilization of new graduates in the work place. The rules and guidelines are reprinted on page 11 of this newsletter. Should you have questions regarding the rules, contact Cady Crismon at the Board's office.

Nursing Legislative Update

After considering approximately 2,858 House bills and 1,397 Senate bills, the 73rd Session of the Legislature was gaveled to a close. This session proved more than the perennial political battleground with many healthcare issues emerging to the forefront. The following summation outlines significant bills related to professional nursing that survived the legislative process:

HB 756 by McDonald (D-El Paso) "An act relating to the regulation of the practice of professional nursing."

This bill will strengthen the Nurse Practice Act (NPA) and promote more effective regulation of professional nursing. Some of the provisions included in the bill are:

- Authorizes the BNE to adopt rules to minimize unnecessary duplicative reporting and the reporting of minor incidents.
- Requires Peer Review committees to report RNs to the Board who engage in reportable conduct.
- Authorizes the BNE to enter into memorandum of understanding with other state agencies who license or survey facilities in order to ensure compliance with peer review requirements of NPA.
- Authorizes the BNE to issue temporary permits so RNs can fulfill refresher courses or other requirements as a condition of reissuing a revoked or suspended license. Also provides for retiree licenses.
- Revises Article 4525 (b) authorizing a preliminary investigation into a nurse's identity before notifying the nurse of a complaint. Also authorizes settlement conferences with

full range of sanctions prior to filing charges.

Members President: Morris H. Parrish, PhD

Vice President: Sara J. Keele, MS, RN

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Lynn C. Besselman, PhD Rose M. Caballero, BSN, RN Pat Y. Crowe Mary V. Fenton, DrPH, RN Eileen M. Piwetz, EdD, RN A. Joanna Seamans, MSN, RN

Executive Director Louise Waddill, PhD, RN Authorizes the BNE to charge a fee to produce and disseminate to its licensees informational materials of significantly related items, including, but not limited to, a periodic newsletter.

 Expands the definition of "professional nursing" to include the requesting, receiving, and signing for professional samples for distribution to patients at sites serving medically underserved populations. HB 756 eventually passed both the House and the Senate. On May 26, 1993, the House concurred with Senate amendments to the bill, setting the stage for the bill's enactment into law.

HB 1551 by Craddick (R-Midland) "An act relating to home care and community support services."

This bill will require the BNE to enter into a memorandum of understanding (MOU) with the Texas Department of Health (TDH), that clearly defines the scope of nurse practice as it relates to unlicensed personnel. Adoption of the MOU is required by January 30, 1994. It also requires TDH to enter into their own MOU with other state agencies who meet the same regulatory standards.

The intent of HB 1551 and HB 1592 (relating to the regulation of hospices) were enrolled into a single bill, after representatives from hospice decided to remain regulated by TDH and not home care. HB 1551 passed both houses of the Legislature with the House concurring with Senate amendments on May 27, 1993.

SB 674 by Moncrief (D-Fort Worth) "An act relating to the creation of the Health Professions Council, continuation of the Midwifery Board and the Board of Examiners of Dietitians and abolition of the Board of Licensure for Nursing Home Administrators."

This bill creates the Health Professions Council (HPC) whose initial charge is to centralize the complaint processing system for health regulatory boards. The HPC will also create and perform feasibility studies regarding the centralization of the health regulatory boards' investigatory functions. SB 674 passed both houses of the Legislature and was referred to conference committee. On May 26, 1993, both the House and the Senate adopted the conference report.

RN Update will continue to bring you more information as to how these bills will affect regulatory issues for RNs. For more information, please call Eric Gutierrez, Information Specialist, at (512) 835-8674.

Recent Board Actions

At their March 23, 1993 meeting, the Board proposed the repeal of §§217.3, Handicapped Candidate, proposed a new §§217.3, Candidate with a Disability and proposed an amendment to §§217.1, Definitions. These changes address rules regarding the testing of persons who are disabled and bring the rules more into alignment with Americans with Disabilities Act guidelines. These proposed changes were considered at the May Board meeting and will be reported in the next issue of *RN Update*.

Board to Deny Relicensure to Nurses In Default on Student Loans

The Board of Nurse Examiners is required by law to deny relicensure to registered nurses who are in default on their student loans from the Texas Guaranteed Student Loan Corporation (TGSLC). The BNE will begin enforcing the law in August 1993, with those nurses whose licenses expire in September 1993, and thereafter.

There are currently more than 500 nurses who will not be able to renew their licenses under this provision. The BNE has no discretionary power to interpret this law, or to grant exceptions or extensions. The nurse in default will be denied relicensure until he/she reaches a repayment agreement with the TGSLC and a copy of the agreement from TGSLC is received by the Board. Letters from a third party or a collection agency will not be accepted.

Nurses who are in default and are denied relicensure will

not be able to work as registered nurses until the Board receives a copy of the repayment agreement. In addition, default on a TGSLC loan is considered unprofessional conduct by the BNE (Rule 217.13), and disciplinary action will be taken against any nurse for violation of this rule.

Two notices have been mailed from the Board of Nurse Examiners to those nurses currently in the default status with the TGSLC. If you have received a notice from the Board of Nurse Examiners, or if you have not received a notice and believe you have an outstanding loan, you need to contact TGSLC (1-800-222-6297 or in Austin 512-837-9865, ext. 3535) to enter into a repayment agreement or pay the loan in full. Once this is done, mail a copy of the letter or repayment agreement to the Board of Nurse Examiners, Attn: Licensing Department/TGSLC--Glenn Parker.

Attention: Advanced Nurse Practitioners

The Board's mission is to protect and promote the welfare of the people of Texas. To that end, the Board adopted rules in **1980** to provide assurance to the public that those who hold themselves out to be Advanced Nurse Practitioners meet certain educational standards.

"Advanced Nurse Practitioner" (ANP) is a generic term for advanced practitioner of nursing which includes the categories of Nurse Anesthetist, Nurse Midwife, Nurse Practitioner and Clinical Nurse Specialist. Requirements for educational preparation vary but, in general, Nurse Anesthetists, Nurse Midwives and Nurse Practitioners have attended either post-basic certification programs or nursing graduate level programs to prepare them to practice in advanced roles. Clinical Nurse Specialists have earned a master's degree in nursing with a minimum of nine semester hours in a specific clinical focus area.

In order to hold yourself out to be an ANP or use a title that implies you are an ANP in Texas, your credentials must be approved by the Board of Nurse Examiners. If you are practicing as an ANP and using a title that implies that you are an ANP and have not been approved by the BNE, you are violating the Board's rules and regulations. Failure to

comply with the requirements of Rule 221 may result in disciplinary action by the Board against your RN license.

According to the Board's rules, ANPs "are...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" (§§221.1). The Board's rules further require that the program of study be at least one academic year in length and that the program be accredited by an accrediting body recognized by the Board.

Certification by a national organization is not required; however, certification may waive the need to review transcripts and course descriptions in the application process.

Currently there are more than 4,800 ANPs approved by the Board. Certain statistical reports on ANPs are available upon request. Please direct inquiries to Tawnya Caster, (512) 873-6552.

If you wish to be approved as an ANP, you may request an application by contacting the BNE at Box 140466, Austin 78714, (512) 835-8661. Please mark all correspondence "ANP" so that it may be routed expeditiously.--*Kathy Thomas*

ANP Scope of Practice

The Board has recently received a number of inquiries concerning the scope of practice of Advanced Nurse Practitioners (ANPs). Specifically the questions involve whether an individual with Board recognition in one Nurse Practitioner (NP) practice area may practice in another NP role.

For example, can a Women's Health Care Nurse Practitioner (WHCNP) function in a rural clinic as the sole health care provider delivering primary health care to children, adults and elderly clients? The answer is "no"; the full scope of the Family Nurse Practitioner role is beyond the scope of the WHCNP's practice. In order to function as a Pediatric Nurse Practitioner (PNP), Adult Nurse Practitioner, or Gerontological Nurse Practitioner, one must hold the necessary educational credentials and be recognized by the Board in the appropriate practice area. The Board has determined that the full scope of any ANP practice requires specific formal education that meets certain criteria. In requiring that this education be obtained through a formal post-basic educational program, the Board is emphasizing that informal, "on the job training" is not sufficient.

There are certain procedures/examinations/assessments which may be outside the scope of women's health care but which do not include the full scope of another primary care focus area. The question may then become, can this WHCNP assume a partial scope of PNP practice? The answer depends on what functions of advanced pediatric

nursing the WHCNP assumes. The Standards of Nursing Practice require that the Registered Nurse "accept only those nursing assignments that are commensurate with one's own educational preparation, experience, knowledge and ability" [Rule 217.11 (17)]. This RN may be a community health nurse and have additional education in pediatric assessment and Early Periodic Screening Diagnostic Testing (EPSDT) examinations. EPSDT exams require knowledge of growth and development and normal and abnormal physical findings in children. Therefore, in order to perform these aspects of nursing care, the WHCNP would be expected to obtain additional education which prepares the ANP to carry out these functions safely and efficaciously.

In the event a complaint was filed against the ANP with the Board concerning alleged violations of the Nurse Practice Act or the Board's rules, it would be incumbent upon the ANP to prove to the Board that he/she had sufficient education, experience, knowledge and ability to deliver the nursing care in question.

The ANP rules were promulgated to assure the public that ANPs have the requisite education to function in the advanced nursing practice roles. The Board believes that an RN needs formal advanced educational preparation in the advanced practice role. Therefore, an ANP cannot assume another ANP role without obtaining further education and Board approval.—*Kathy Thomas*

CE Auditing to Begin in September

Effective September 1, 1993, all registered nurses with an active RN license in the state of Texas will be required to have 20 hours of continuing education for relicensure. Beginning with the September license renewals, you will notice two new questions on the renewal form. One question will ask if this is your first license renewal in the state of Texas. Licensees renewing for the first time are not required to have continuing education hours to renew. If you indicate that this is not your first license renewal, you will be asked if you completed 20 hours of continuing education as required by the Board. If you completed the hours, answer "Yes" to this question and sign the renewal

form. That is all you need to do at this time regarding continuing education. Please <u>do not</u> send CE certificates with the license renewal.

A random sample of each month's renewals will be selected for audit. Audited licensees will be notified in writing. The notification will include instructions and a form for reporting CE hours. The audit form and CE documentation must be returned to the Board within 30 days. Licensees are responsible for keeping their own records of CE hours earned. These records should be kept for two renewal periods (four years).—*Kathy Vrazel*

CE QUESTIONS AND ANSWERS



In an effort to assist registered nurses to understand and comply with the mandatory continuing education requirements which became effective September 1, 1991, here are some of the most commonly asked CE questions.

Q: Last year, I subscribed to a magazine called *DFW Nursing*. The publication advertised seminars and home study programs which would qualify for continuing education credit required for relicensure. The subscription was supposed to be for two years, but I have not received a magazine in several months and have not been able to reach this company by telephone. Do you know anything about this publication and how do I know that organizations advertising CE hours are legitimate?

A: NurseCorps Publishing Inc., publisher of *DFW Nursing* and *Houston Nursing* notified the Board's office in March of the company's closing and impending bankruptcy. The CE hours which you earned through this publication will be accepted if you have the certificates of completion. We regret that this situation occurred. However, the Board does not approve programs and providers of CE. The Board encourages nurses to be informed consumers and to look for providers that have a proven "track record" in the CE field. If you have a question about a particular program or provider you may call the credentialing organization to verify approval.

Q: If a program is approved by a nursing organization in another state, will Texas accept these credit hours?

A: If the program is approved by a Board of Nursing in another state and meets the criteria in the rules, it is accepted for Type II credit. If a program is approved by another state nursing association, i.e. Arizona Nurses Association, New York State Nurses Association, that is accredited as an approver of continuing education by the American Nurses Association, the program is accepted for Type I credit.

Q: I moved to Texas last year and my Texas license expires in May 1994. Will I need the 20 hours of CE for this renewal?

A: No, the CE hours will be required for your license renewal in 1996. According to the rules, a new RN (licensed by examination or by endorsement) is not required to have continuing education hours to receive the first license or for the immediate period following licensure. This period varies from 6 to 29 months depending upon the licensee's birth date. You then have two years, until the subsequent renewal, to obtain the 20 hours of CE.

Q: I work for a group of physicians and sometimes have the opportunity to attend programs that are approved for CME credit for physicians. Will these programs be accepted for nursing CE?

A: If the program is approved for physician CE credit and meets the BNE criteria, the program will be accepted for Type II nursing CE credit.

Q: My RN license expires on the last day of May of this year. There is a CE program scheduled on May 27 that I would like to attend. Would this course give me credit toward my '95 license renewal?

A: Yes, the CE hours must be earned within the two-year period immediately preceding the license renewal beginning with the first day of the renewal month until the last day of the subsequent renewal. In your case, the two-year period would be May 1, 1993 to May 31, 1995.

Q: May I obtain all 20 hours of CE credit through articles in nursing journals?

A: Yes. All 20 hours may be earned through Type I home study programs. A Type I program is one which has been approved by one of the Board's five credentialing organizations or their state chapters or associations. The credentialing organizations are: American Nurses Association/American Nurses Credentialing Center, 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.

Q: What happens if I don't complete the CE hours?

A: The CE rules state that a licensee found to be non-compliant will be referred to the Board's Practice and Compliance Department for investigation and possible disciplinary action.

NEAC Manpower Report Presented to Board

The Manpower Subcommittee of the Nursing Education Advisory Committee (NEAC), chaired by Phyllis Waters, MS, RN, completed its charge and submitted its report and recommendations to the Board at its March 1993 meeting. The report identified several issues within the health care professions, education, and society which impact nursing and nursing manpower. A number of trends emerged which have importance in long range strategic planning of the Board of Nurse Examiners. An Ad Hoc committee of the Board and staff was appointed to examine the trends and issues and identify specific areas for the Board to address.

The final report of the Education Subcommittee on essential nursing competencies for graduates of basic nursing programs in Texas has been distributed to the deans and directors of all nursing programs. Each program has been asked to complete and return a questionnaire regarding the appropriateness of the competencies identified by NEAC. Programs were also invited to participate in a pilot process to evaluate implementation of the competencies prior to development of rules.

These two reports and executive summaries are being prepared for distribution. The publication of the Nursing Education Advisory Committee's reports represents the culmination of over two years of intensive and committed effort by the members of NEAC.

Members of NEAC included representatives from each of the basic nursing education programs--LVN, Diploma, ADN, and BSN--as well as representatives from nursing practice, administration and several nursing organizations within the state. The Committee was ably co-chaired by Joanna Seamans, MSN, RN of the Board of Nurse Examiners and Sandra Knight, LVN of the Board of Vocational Nurse Examiners. The activities of the NEAC sub-committees were coordinated by Mary Jane Ashe, MAN, RN. The Board of Nurse Examiners would like to take this opportunity to acknowledge and express its appreciation to the members of NEAC and its Subcommittees who unstintingly contributed to the successful completion of the charges assigned them.

Members of the Nursing Education Advisory Committee (for all or part of the committee's life) include:

Name Rella Adams, PhD, RN, CNAA Marie Bayard, MSN, RN,

Dee Bednar Melissa Brannon, MSN, RN Tina Briones, MSN, RN Maxine Cadena, MSN, RN

Edna Faye Campbell, BA, RN Darlene Nebel Cantu, MSN, RN

Art Cates Marcia Collins Veronica Conners, MSN, RN Anne Daub, BSN, RN

Jean Dols, MS, RN Roberta Eacott, MSHP, BSN, RN

Elizabeth Ellis, MEd, MSN, RN Jane Ezell, MSN, RN Patty Hawken, PhD, RN, FAAN

Carol Hodgson, MSN, RN, CS Cora Johnson, LVN Joan Jones, MS, RN Lucelia Jones, MS, RN

David Kelly
Karlene Kerfoot, PhD, RN, FAAN
Jana Kidd, MSN, RN
Suzanne Kier, PhD, RN
Chandler Lindsley
Linda Linville, MS, RN
Kenneth Lowrance, MS, RN, CNAA
Mary Ann Lubno, PhD, RN
Marianne Malague, MA, RN
Beth Mancini, MSN, RN
Marilyn Morris, MEd, RN
Carrie Nelson, PhD, MT, ASCP
Yvonne Newman
Elizabeth Oliver, MSN, RN

Karen Paterno, MSN, RN Marcia Poole, EdD, RN Lee Poyner, PhD Anna Pearl Rains, MSN, RN Boyd (Chip) Rhea Beverlyanne Robinson, PhD, RN Shirley St. John, MSN, RN Olivia Sandoval, ME, MSN, RN

Nancy Schoenrock, PhD, RN

Britta Willeford-Strickland, RN Mary Beth Thomas, MSN, RN Delight Tillotson, MSN, RN Melinda Tinkle, PhD, RN Bill Tucker, LVN Phyllis Turner, PhD, RN, CS Yvonne Van Dyke, MSN, RN Phyllis Walk, MSN, RN Mary Jolene Walsh, EdD, RNC Phyllis Waters, MS, RN Lois White, PhD, RN T.R. Williams, PhD Margarette Youngblood, LVN

Sponsoring Organization Valley Baptist Medical Center Kingwood College, Kingwood (North Harris/Montgomery County Community College District) Texas Higher Education Coordinating Board Texas League for Nursing Valley Baptist Medical Center Baptist Memorial Hospital School of Vocational Nursing Texas Department of Human Services Baptist Memorial Hospital School of Professional Nursing Texas Department of Health Texas Department of Health Texas Nurses Association Texas Department of Mental Health Mental Retardation Lyndon B. Johnson Hospital Texas Department of Mental Health/ Mental Retardation Methodist Hospital School of Nursing Texas Nurses Association The University of Texas Health Science Center School of Nursing at San Antonio Texarkana College Texas League of Vocational Nurses St. Luke's Episcopal Hospital Texas Association of Vocational Nurse Educators Texas Higher Education Coordinating Board St. Luke's Episcopal Hospital West Texas State University Texas Woman's University Consumer Texas Department of Health Goodall-Witcher Hospital Foundation Texas Tech University Health Science Center North Harris County College Parkland Memorial Hospital Victoria College Texas Higher Education Coordinating Board Texas Higher Education Coordinating Board Texas Organization for Associate Degree Nursing Odessa College Texas Organization of Nurse Executives Texas Higher Education Coordinating Board The University of Texas Medical Branch Texas Education Agency Stephen F. Austin State University Methodist Hospital School of Nursing Baptist Memorial Hospital School of Professional Nursing Mary Hardin Baylor University School of

of Texas

NCLEX-RN CAT Update

Board staff are preparing for the July 7-8 1993, NCLEX-RN exam. The Beta Test will take place between June 26 and July 8, 1993. Directors of nursing programs and accustomation course instructors have been extremely helpful in recruiting volunteers to participate in the Beta Test. Over 500 students have volunteered for 400 slots.

The processing and statistical analysis of the Beta Test will be extensive. Therefore, the exam results for all candidates, including Beta candidates, for the July 1993, NCLEX-RN will be distributed in late September 1993. Temporary permits for Graduate Nurses will be valid until the results of the exam have been released.

A seminar entitled, "Computerized Adaptive Testing for Nursing Licensure in Texas", was held on April 23, 1993, in Austin. The seminar provided over 90 deans/directors and instructors of nursing programs and Board approved accustomation courses in attendance the most current information regarding implementation of CAT in Texas. Barbara Halsey, MBA, the CAT project manager from the National Council of State Boards of Nursing, Inc., was the featured speaker. Participants were provided information about the key elements of the NCSBN's CAT project, the importance of the Beta Test process, and implications of CAT for candidates, employers, and nurse educators.—Mary Anne Hanley

Houston Community College Associate Degree Nursing Program Placed On Conditional Accreditation

At its May 25, 1993, meeting, the Board of Nurse Examiners changed the accreditation status of the Houston Community College Associate Degree Nursing Program. The program, previously on full accreditation with warning status, is now on conditional accreditation.

The Board provided the program a list of recommendations and requirements to be met in order to retain board approval. Failure to correct the identified deficiencies by May, 1994, will result in withdrawal of board accreditation, and the ineligibility of Houston College ADN Program students to take the National Council Licensure Examination for Registered Nurses.

EDUCATION REPORT

The following actions were taken by the Board at its March 23, 1993 meeting:

 Continued full accreditation of the following nursing programs that received survey visits during the Fall semester 1992:

> The University of Texas Health Science Center School of Nursing, BSN, San Antonio Laredo Junior College, ADN San Jacinto College, ADN, Pasadena

 Continued full accreditation of the following nursing programs based upon Annual Reports submitted to the Board in October 1992:

> Angelina College, ADN, Lufkin Angelo State University, RN-BSN, San Angelo Austin Community College, ADN Central Texas College, ADN, Killeen College of the Mainland, ADN, Texas City Cooke County College, ADN, Gainesville Incarnate Word College, BSN, San Antonio Lee College, ADN, Baytown McLennan Community College, ADN, Waco Midland College, ADN Northeast Texas Community College, ADN, Mt. Pleasant Paris Junior College, ADN South Plains College, ADN, Levelland Stephen F. Austin State University, BSN, Nacogdoches Tarleton State University, ADN, Stephenville Tyler Junior College, ADN The University of Texas at Houston, BSN

- Major curriculum changes were approved for implementation by Paris Junior College, ADN.
- Rescinded warning status of Howard College, ADN, reinstated full accreditation status.
- · Faculty waivers were granted to:

Cooke County College, ADN Galveston College, ADN Houston Baptist University, BSN Lamar University-Orange, ADN Odessa College, ADN

PRACTICE RELATED QUESTIONS AND ANSWERS

The Board receives numerous calls and letters regarding practice issues. In this column, Cady Crismon, MSN, RN, CNS responds to frequently asked questions.

Q: I have read the new Delegation Rules which were adopted in December 1992 and published in the last newsletter. I really didn't see changes that affected the acute care setting. Did I miss something?

A: No, the changes in the rules were primarily made to address requests from the disability community to allow RNs broader delegatory authority to assist those individuals living in the community and wishing to assist in the direction of their own care. No changes were made which would affect delegation in the acute care setting.

Q: I'm fairly new to the Director's position and would like to know what information the Board may need if an incident occurs in my facility and I file a complaint against one of my staff.

A: It is extremely important that you keep documentation containing the patient's identification whenever an incident occurs. This is necessary so patient records can be retrieved. Also, the date and time of the incident are important as well as information on whether witnesses were present.

Q: If I terminate a nurse for a practice problem and make a report to the Board, does Peer Review have to be done since the individual is no longer employed?

A: Yes, the statute states that any time a nurse is terminated for a reportable cause Peer Review must be done. The Board will request the Peer Review report when the investigation is conducted if it has not already been sent to the Board.

Q: I am a school nurse and I receive a private publication called, "School Health Alert." In the April 1993 issue the publisher commented that the BNE delegation rules state that "a registered nurse may delegate to a licensed health care provider--Licensed Vocational/Practical Nurses, but not to health aides, bus drivers, or classroom aides." I am very concerned about the effect this will have on the schools and was wondering if this is correct information.

A: The comment in the "School Health Alert" is incorrect. The BNE rules are entitled "Delegation of Selected Nursing Tasks by Registered Professional Nurses to <u>Unlicensed</u> Personnel." Our rules are specifically written to guide RNs in making decisions regarding delegation to unlicensed individuals such as health aides, classroom aides and other personnel. A copy of the rules mentioned above may be obtained by sending a self-addressed, stamped envelope to

the Board's office, Attn: Kathy Vrazel.

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

Texas RNs Serve on NCLEX Panels

Four Texas RNs recently served as items writers for the National Council Licensure Examination: Julieta Castaneda, El Paso; Kathy Lynn Rodgers, Sour Lake; Jennifer Goodman, Missouri City; and Sharon Bea Cannon, Lubbock.

Item writers and reviewers are responsible for developing questions used on the national licensure exams for registered nurses and licensed practical (vocational) nurses. If you are interested in participating in this important task, please contact the National Council of State Boards of Nursing, Inc., 676 North St. Clair Street, Suite 550, Chicago, IL 60611-2921 for an application and information. RNs with a Master's degree or higher who have knowledge and experience with entry level nurses are eligible to be item writers.

Texas Tops National Average on NCLEX-RN

A total of 2,317 candidates took the NCLEX-RN at three different sites in Texas on February 2-3, 1993. Once again, Texas graduates exceeded the national average with a 93.4% pass rate for first time candidates. The national pass rate for first time candidates was 91.2%. In addition, first time foreign candidates in Texas who passed a Board approved accustomation course had an 82% pass rate, compared to only 50% of foreign first time candidates who passed nationally.

The next NCLEX-RN is scheduled for July 7-8, 1993 in Austin, Galveston and Fort Worth.

Survey Reveals Variety of Factors for RN Endorsement

In order to better assess the recent upswing in licensure by endorsement, the Board of Nurse Examiners surveyed recent endorsees to determine the motivating factors that bring RNs to Texas.

Of the 2,742 RNs receiving endorsement between March 1992 and August 1992, 1,560 (58%) responded to the survey. The top three reasons for endorsement cited by survey respondents were (1) spouse transferred, 460 (19%); (2) career opportunities, 431 (17%); (3) temporary assignment, 291 (11%). Another 12% indicated "other" reasons which included problems with the Canadian healthcare system, traveling nurse, family matters, attending graduate school and better economic climate and living conditions. In response to the question regarding the type of move they anticipated, 581 (46%) indicated that the move was temporary, while 668 (54%) indicated it was a permanent one.

Another significant statistic, not acquired directly by the survey but kept by the BNE, is the endorsee's state of origin. Canada is included in this listing. The following are

the top five locations of origin by frequency: (1) Canada, (2) New York, (3) California, (4) Florida, (5) Louisiana.

In interpreting the survey results, the fairly generous spread of answers, with no overwhelming indicator, suggests that respondents had a variety of reasons for seeking endorsement in Texas. Perhaps the most telling figure is the relatively low showing corresponding to "better salary and benefits" (7%), as opposed to the higher ranking "spouse transferred". Although 17% indicated that endorsement was prompted by "career opportunities", it is difficult to say if this response coincided with higher salary. Ironically, Texas "climate" scored higher (9%) than "better salary and benefits".

In conclusion, future statistics, most likely influenced more by the upswing in the economy and the national emphasis on healthcare reform than economic woes in Canada, will be more conclusive and, hopefully, more revealing. -- Eric Gutierrez

INSUFFICIENT FUNDS

As of April 15, 1993, 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 the Board's office.

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	PERMIT
Asble, Alex Walter	564983	
Bablitz, Nancy Elizabeth	553715	
Barr, Lori Anne	537652	
Buol, Kolleen Kay	516233	
Clark, Victoria		50398
Conti, Angela Rose	552231	
Craft, Betty Jane	546665	
Dennis, Patricia Ann	503975	
Falkner, Barbara	587013	
Farra, Diane Rae	560781	
Felkins, Bettye Lisa	557452	
Filler, Marcia Ann	553220	
Fryer, Renee Marie	578735	
Gazey, Patricia	069539	
Glisson, James M.	239549	

Handlin, Kathy L.	512842	
Hart, Janet		070678
Howell, Sharon	459387	
Jenkins, Victor I.	517158	
Jones, Cherie Lyne	241063	
Jones, Gwendolyn		063362
Kahn, Beatrice Margarete	558897	
Kishbaugh, Shari Elizabeth	575583	
Kuntz, Eileen Marie	514331	
Lechtenberg, Annette Marie	585557	
Masters, Mary Jane	550218	
Mitchell, Sandra	565160	
Nims, Teresa Masadie	565233	
Olivier, Marie Claudia	514361	
Owusu, Augustina E.	457100	
Pangilinan, Julie	445792	
Payne, Traci	569734	
Robinson, Lynn A.	518008	
Rosko, Lisa Marie	538707	
Sanderson, Brenda Mary	538111	
Sloane, Gail Theresa	550406	
Strouhal, Susan Kay	557026	
Taylor, Maxine	555844	
Tucker, Sherri		058040
Vasquez, Emerald J.D.	207588	
Watts, Claudia Jean	586885	
Zutell, Jean		057374

REVISED STANDARDS OF PRACTICE AND UNPROFESSIONAL CONDUCT RULES

- §217.11. Standards of Professional Nursing Practice. The responsibility of the Texas Board of Nurse Examiners (board) is to regulate the practice of professional nursing within the State of Texas. The purpose of defining standards of practice is to identify roles and responsibilities of the registered professional nurse (RN) in any health care setting. The standards for professional nursing practice shall establish a minimum acceptable level of professional nursing practice. The RN shall:
- (1) know and conform to the Texas Nurse 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;
- (2) provide, without discrimination, nursing services regardless of the age, disability, economic status, gender, national origin, race, religion, or health problems of the client served;
- (3) use a systematic approach to provide individualized, goal-directed nursing care by:
 - (A) performing nursing assessments regarding the health status of the client:
 - (B) making nursing diagnoses which serve as the basis for the strategy of care;
 - (C) developing a plan of care based on assessment and nursing diagnosis;
 - (D) implementing nursing care; and
 - (E) evaluating the client's responses to nursing interventions;
- (4) institute appropriate nursing intervention which might be required to stabilize a client's condition and/or prevent complications;
- (5) 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;
- (6) know the rationale for and the effects of medications and treatments and shall correctly administer the same;
- (7) accurately report and document the client's symptoms, responses, and status:
- (8) implement measures to promote a safe environment for clients and others;
- (9) implement measures to prevent exposure to infectious pathogens and communicable conditions;
- (10) respect the client's right to privacy by protecting confidential information unless obligated or allowed by law to disclose the information;
- (11) promote and participate in client education and counseling based on health needs:
- (12) collaborate with the client, members of the health care team and, when appropriate, the client's significant other(s) in the interest of the client's health care;
- (13) consult with, utilize and make referrals to appropriate community agencies and health care resources to provide continuity of care;
- (14) when acting in the role of nurse administrator, assure that adequate strategies are in place to verify the current Texas licensure and credentials of personnel for whom he/she is responsible;
- (15) make assignments to others that take into consideration client safety and which are commensurate with the educational preparation, experience, knowledge and ability of the persons to whom the assignments are made:
- (16) supervise nursing care provided by others for whom the RN is administratively or professionally responsible;

- (17) accept only those nursing assignments that are commensurate with one's own educational preparation, experience, knowledge and ability;
- (18) obtain instruction and supervision as necessary when implementing nursing procedures or practices;
- (19) be responsible for one's own continuing competence in nursing practice and individual professional growth;
- (20) report unsafe nursing practice by an RN which a nurse has reasonable cause to suspect has exposed or is likely to expose a client unnecessarily to risk of harm as a result of failing to provide client care that conforms to the minimum standards of acceptable and prevailing professional practice. The RN should report unsafe practice conditions or other practitioners to the appropriate authority or licensing board. (Adopted 12/92)
- §217.13. Unprofessional Conduct. The unprofessional conduct rules are intended to protect clients and the public from incompetent, unethical, or illegal conduct of licensees. The purpose of these rules is to identify unprofessional or dishonorable behaviors of the registered professional nurse (RN) which the board believes are likely to deceive, defraud or injure clients or the public. These behaviors include but are not limited to:
 - failing to know and conform to the Texas Nurse 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;
 - (2) failing to assess and evaluate a client's status or failing to institute nursing interventions which might be required to stabilize a client's condition or prevent complications;
 - (3) failing to administer medications or treatments or both in a responsible manner;
 - (4) failing to accurately or intelligibly report and/or document a client's status including signs, symptoms, or responses and the nursing care delivered:
 - (5) failing to make entries, destroying entries, and/or making false entries in records pertaining to care of clients;
 - (6) causing or permitting physical, emotional or verbal abuse or injury to the client or the public, or failing to report same to the employer, appropriate legal authority and/or licensing board;
 - (7) disclosing confidential information or knowledge concerning the client except where required or allowed by law;
 - (8) when acting in the role of nurse administrator, failing to assure that strategies are in place to verify the current Texas licensure/credentials of personnel for whom he/she is administratively responsible;
 - (9) delegating nursing care functions to a person who lacks the educational preparation, experience, knowledge or ability to perform these functions:
 - (10) making assignments of nursing care to a person who lacks the ability or knowledge to perform such assignments, or failing to supervise the delivery of nursing care for which the RN is responsible;
 - (11) accepting an assignment when one's physical or emotional condition prevents the safe and effective delivery of care or accepting an assignment for which one lacks the educational preparation, experience, knowledge or ability;
 - (12) failing to obtain instruction or supervision when implementing nursing procedures or practices for which one lacks the educational preparation, ability, knowledge and/or experience;

- (13) leaving a nursing assignment without notifying one's immediate supervisor;
- (14) failing to follow the policy and procedure for the wastage of medications at the facility where the RN was employed or working at the time of the incident;
- (15) misappropriating, in connection with the practice of nursing, medications, supplies, equipment or personal items of the client, employer, or any other person or entity or failing to take precautions to prevent such misappropriation;
- (16) passing, or attempting to pass forged, altered, falsified or unauthorized prescription(s) by electronic, telephonic, written communication or any other means;
- (17) providing information which was false, deceptive, or misleading in connection with the practice of professional nursing or failing to answer specific questions that would have affected the decision to license, employ, certify or otherwise utilize an RN;

- (18) offering, giving, soliciting, or receiving or agreeing to receive, directly or indirectly, any fee or other consideration to or from a third party for the referral of a client in connection with the performance of professional services;
- (19) physically, emotionally or financially exploiting the client or the client's significant other(s);
- (20) failing to report to the board or to a board approved peer assistance program, if applicable, within a reasonable time of the occurrence, any violation or attempted violation of the Nurse Practice Act or duly promulgated rules, regulations or orders;
- (21) failing to report the unauthorized practice of professional nursing;
- (22) failing to repay a guaranteed student loan, as provided in Section 57.491 of the Texas Education Code. (Adopted 12/92)

Revised Rules on GN Supervision

The following rule changes were adopted March 23, 1993 and became effective April 21, 1993:

- 217.1 Direct supervision Requires a registered professional nurse to be working on the same unit and readily available to provide consultation and assistance.
- 217.6(a)(4) A candidate holding a temporary permit to practice professional nursing as a graduate (GN) must work under the direct supervision of a registered professional nurse who is working on the same unit and is readily available to the GN for consultation and assistance. The GN shall not be placed in a charge position or work in independent settings.

GUIDELINES FOR EMPLOYERS OF GRADUATE NURSES

The Board of Nurse Examiners is authorized by Article 4523 of the Nurse Practice Act to issue temporary permits to graduate nurses. The temporary permit is issued for the purpose of allowing the new graduate a period of transition between graduation and licensure. This time should be viewed by employers and new graduates as a continuation of the educational process and transition to the professional practice role. Since the new graduate has not yet proven competency through passage of the licensure examination, the graduate nurse (GN) must practice under the direct supervision of a registered nurse.

Obtaining a Temporary Permit

The board may issue a permit to practice professional nursing under the direct supervision of a Registered Nurse to graduates of approved educational programs pending the results of the licensing examination (Article 4523(b)). Graduates of Associate Degree, Diploma and Baccalaureate Degree Programs may be issued temporary permits to practice in Texas if the following conditions are met:

- (1) The graduate has never taken the National Council Licensure Examination for Registered Nurses (NCLEX-RN).
- (2) The graduate is scheduled for the first licensure examination following graduation; and
- (3) The graduate has submitted the appropriate application form.

Employer Guideline

- (1) Graduate nurses working under a temporary permit must have the direct supervision of a registered nurse. Direct supervision implies availability, access and close proximity. Direct supervision means a RN is working on the same unit and is readily available to the graduate nurse for consultation and assistance.
- (2) Graduate nurses are permitted to perform any function that falls within the scope of nursing practice for which they have received educational preparation and training.
- (3) Graduate nurses may not act as charge nurses nor practice without the direct supervision of a RN.
- (4) On units where graduate nurses are employed, staff RNs should be willing to supervise and mentor the GNs.

Implementation

To insure compliance with the board's rules and a positive professional learning experience for the new graduate, facility RNs and the employer, the board suggests employers:

- (1) Establish policies and procedures for incorporating the GN into the caregiving role and unit staffing pattern.
- (2) Develop preceptors who are willing to assume the direct supervision of a new graduate.
- (3) Assign each new graduate to a consistent preceptor who is willing to supervise and offer ongoing constructive evaluation of skill, judgment and knowledge of the graduate. Graduates should be encouraged to discuss their strengths and weaknesses with the preceptor who can help develop a plan to improve the areas of weakness.
- (4) Evaluate each new graduate at the end of the permit period to assist in furthering their own professional growth.

Employing a graduate nurse places a great deal of responsibility on the employer and the graduate. The board provides these guidelines to assist employers in safely integrating graduates into professional practice.

DISCIPLINARY ACTIONS

March 1993

NAME I	ICENSE#	VIOLATION	DATE
Revoke			
Janice L. Armstrong	245319	4525(a)(9)	3/23/93
Margery Austin Harp*	253032	4525(a)(8)	3/23/93
Traci Lee Payne	569734	4525(a)(7)	3/23/93
Maria Esther Sarduy	439762	4525(a)(7)	3/23/93
Steve Richard Smith	529464	4525(a)(7)	3/23/93
Majernell Ann Stelly*	559419	4525(a)(8)	3/23/93
Kenneth George Thomas		4525(a)(9)	3/23/93
Shelia Lynn Warford	449875	4525(a)(7)	3/23/93
Georgia Lynne Woodruf		525(a)(7)	3/23/93
Candy Jo Zimmerman	541973	525(a)(7)	3/23/93
Reprimand with Stipu	lations		
Margie Faye Brandon**	228077	4525(a)(9)&(12)	3/23/93
Michael Richard Brant	561239	4525(a)(8)	3/23/93
Beth Augustine**	570924	4525(a)(9)	3/23/93
Doris Louise Chismar**	565492	4525(a)(9)	3/23/93
Kristy Steeves Crawford*	* 562220	4525(a)(9)	3/23/93
Carla Denise Dipalma**	251455	4525(a)(9)	3/23/93
Jennifer Lea Dishongh**	529965	4525(a)(8)(9)(11)	3/23/93
Susan Carroll Hall**	547469	4525(a)(9)	3/23/93
Gwendolyn G. Hardin**	538357	4525(a)(12)	3/23/93
Kathryn Ann Hughes	240343	4525(a)(9)	3/23/93
Mary G. King**	540715	4525(a)(9)	3/23/93
Avelina Boado Lapastora*	* 547818	4525(a)(9)	3/23/93
Thomas Maciel**	526038	4525(a)(9)	3/23/93
Sharon Ann Marnitz*	443644	4525(a)(7)	3/23/93
Margaret Michalski**	463450	4525(a)(9)	3/23/93
Joyce F. Miller**	541016	4525(a)(9)	3/23/93
Stella Louise Myatt**	572996	4525(a)(9)	3/23/93
William Eugene Pomajzl*	* 431933	4525(a)(12)	3/23/93
Thomas Gerald Snow*	228335	4525(a)(9)	3/23/93
Rosina M. Sutter**	456579	4525(a)(9)	3/23/93
Harold Joseph Vallot, Jr.	579065	4525(a)(8)	3/23/93
Guy Jackson Wiley**	574166	4525(a)(8)&(9)	3/23/93
Patricia Ann Williams**	568048	4525(a)(9)	3/23/93
Laura Kathleen Woodard*	564790	4525(a)(9)	3/23/93
Ellen Margaret Young*	552869	4525(a)(8)	3/23/93
Warning			
Alta J. Davis*	501703	4525(a)(9)	3/23/93
Anna Gay Ceniceros*	551119	4525(a)(9)	3/23/93
Jo Lynn Barton Holt**	560613	4525(a)(9)	3/23/93
Sherry Lynne Hopkins**	547650	4525(a)(8)&(11)	3/23/93
Mildred J.W. Johnson**	232365	4525(a)(9)	3/23/93
Betty Anne Lawrence**	455808	4525(a)(12	3/23/93
Retha Dodson Plummer**	234973	4525(a)(12)	3/23/93
Dora Helena Ponder**	212872	4525(a)(12)	3/23/93
Julia Ann Schulenburg**	565683	4525(a)(12)	3/23/93
Revoke based on Voluntary Surrender			
Dorothy Wood Andrew	432738		
Beverly Briggs	504186		

432738	3/23/93
504186	3/23/93
251701	3/23/93
244602	3/23/93
	504186 251701

Mary Anne Hayden	458405	3/23/93
Joan Theresa Rutkowski	455206	3/23/93
Murlen E. Sayles Schlegel	421295	3/23/93
Martha J. Krudwig	540748	3/23/93
Veronica L. Spencer	558035	3/23/93
Alton Whittaker	251110	3/23/93
Jenny Ruth Wood	560691	3/23/93

Reinstated with Stipulations

Mary Elizabeth Davis 225584

Delinquent License

The registered nursing license of the following persons were issued a **Warning** for practicing with a delinquent license. Deborah R. Chandler** 524767

Victoria A. Stones** 434217

* Agreed orders ** Consent orders

FAILURE TO RETURN LICENSE

As of April 9, 1993, the following individuals whose licenses have been Revoked have failed to return their licenses to the Board.

Malee Charoendee	557667
Martin Ross Flannery	227405
Nancy Helen Gable	569378
Jerry Kovaly	560771
Daisy Mae Mills	232532
Susan Bruno Moser	235678
Kuncheria C. Pothacherry	439825
Helen S. Monroe Sauget	221570
Janice Lee Teague	231877
David Benjamin Zogg	565071

IMPOSTOR

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

Eliner Anderson Caldwell

Eliner Anderson Caldwell completed a health statement/TB test form, signed her name followed by the initials SRN and submitted the form to an agency with an application for employment. The form was to be signed by a physician or a Licensed Nurse Practitioner. The employer was aware that Ms. Caldwell was an LVN and reported the information to the Board of Nurse Examiners. Ms. Caldwell is not licensed to practice professional nursing in the state of Texas.

Licensure Verification

Each year the Board of Nurse Examiners (BNE) receives numerous verbal and written requests to verify licensure status of registered nurses. The steady increase over the last three years has prompted the BNE to implement a policy on the number of operator assisted verifications given by telephone.

Currently, the BNE has four lines dedicated to licensure verification through a voice information processing system (VIPS). This system can be accessed 24 hours a day, seven days a week. Once accessed, the caller may verify as many licenses as necessary. However, when calling during regular working hours, there is the possibility that all four lines may be busy. When this occurs, the operators are authorized to verify up to five licenses. If you have more than five, we ask that you attempt to access VIPS at a later time or send a written request to the attention of the Licensing Department. If you forward a request in writing, please include the RN's full name and license or social security number. We will give you the status and expiration date of each registered nurse within three working days after receipt of the request.

We understand the responsibility of each employer to ensure that every registered nurse has a current license and the BNE is committed to expedite each request as quickly as possible. If you have any comments on this procedure, we encourage you to send your thoughts to the Director of Licensing and Support Services.—*Mark Majek*

RN's License Revoked for Financial Exploitation of Elderly Client

On March 23, 1993, the Board revoked the registered nurse (RN) license of Janice L. Armstrong, Dallas, on the grounds that she had engaged in unprofessional and dishonorable conduct by financially exploiting an elderly client assigned to her by a home health agency.

The client was a 72-year-old childless widow suffering from emphysema, arthritis, and congestive heart failure. After establishing herself as the client's nurse, Armstrong became a signatory on her checking account, passbook savings accounts, certificates of deposit, and safe deposit box. Armstrong was also given general power of attorney including the authority to make health decisions for the client. According to testimony, Armstrong also improperly accepted money from the client and coerced her into naming Armstrong beneficiary and executrix of her estate.

In making the ruling, the Board found that Armstrong violated Unprofessional Conduct Rules by engaging in behavior which, in the opinion of the Board, was likely to deceive, defraud or injure patients or the public.

The BNE at Work

Following are statistics from fiscal year 1992:	
RN's currently licensed	15
Licenses renewed56,6	05
New individuals licensed	41
Nursing schools accredited by the Board	
New nursing schools accredited	
Individuals taking	
Percentage of new Texas graduates passing NCLEX-RN93	
Complaints received	
Complaints resolved	
Licenses revoked or suspended1	
Licenses reprimanded	
Warnings	
*includes complaints received prior to FY 1992	

BNE STAFF UPDATE

Richard (Rick) Castillo joined the staff on March 1, 1993 as an Investigator II. Mr. Castillo comes to the BNE after 15 years with the Temple Police Department. He has a bachelor's degree in Criminal Justice and a master's degree in Public Administration from Southwest Texas State University.

Rosie De La Cruz-Healy also joined the staff on March 1 as the Board receptionist. She is a former flight attendant and has lived in Panama, Bolivia and, most recently, San Antonio. She enjoys spending her off-time with her husband and son and practicing the bass guitar.

Nelda Rios is the new Clerk III in the Education and Examination Department. Ms. Rios will be responsible for handling the NCLEX applications for Texas repeat and out-of-state candidates in addition to other duties in the department. She and her husband enjoy the outdoors and music.

Darlene Stancik, RN has been hired as an Investigator III. She has a bachelor's degree in Nursing from The University of Texas at Austin and is currently enrolled in Criminal Justice Courses at Austin Community College. Her clinical areas of expertise are gynecology and medical/surgical nursing.

Martha Balderas resigned her position as a Clerk in the Licensing Department on May 7 to accept a position with the Attorney General's Office. Good luck, Martha.

Louise Waddill, PhD, RN, BNE Executive Director, presented the keynote address at Angelo State University's Department of Nursing 1993 Pinning Ceremony. Her address, entitled "Twenty Steps for Successful Practice", laid out the standards of professional nursing conduct as guiding principles for the graduate nurse.

Board Meeting Dates/Open Forum

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

July 20-21, 1993, Austin September 21-22, El Paso

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.

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 during 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.

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.

Following is a list of helpful numbers:

GENERAL INFORMATION/LICENSING & SUPPORT SERVICES(512) 835-4880

(License verification, endorsement/reciprocity information, prescriptive authority information, ANP approval status, general information)

EDUCATION/EXAMINATION.......(512) 835-8650 (RN nursing programs, extended campuses, NCLEX-RN applications, graduate nurse permits, Nurse Practice Act [NPA] questions and practice issues, Board Rules and Regulations inquiries and declaratory orders)

PRACTICE AND COMPLIANCE512) 835-8686 (NPA and Rules and Regulation violations, complaint and disciplinary action inquiries, monitoring of disciplined RNs, interpretation of NPA and board's rules regarding disciplinary proceedings, advanced nurse practitioners)

ACCOUNTING(512) 873-6555 (Returned checks, refunds, debits)

(Information on the state's requirements for mandatory continuing education for registered nurses)

SALES OF LISTS(512) 873-6554 (Computerized lists of RNs on floppy diskettes, magnetic tape, hard copy and/or mailing labels)

Office Hours and Location

The office of the Board of Nurse Examiners is located at 9101 Burnet Road, Suite 104, at the Intersection of Highway 183 and Burnet Road in Austin, Texas. The mailing address is Box 140466, Austin, Texas 78714.

Office hours are 8:00 am to 5:00 pm Monday through Friday, except for designated holidays.

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.

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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.



Did You Know...

When a licensed registered nurse is on duty providing direct care to patients, she/he must wear an insignia identifying the nurse as a registered nurse. It's the law.

Share This Newsletter

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. If reproduced, we would appreciate a copy of the article as well as credit for any materials used.

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