# STATE OF CALIFORNIA DEPARTMENT OF CONSUMER AFFAIRS **BOARD OF REGISTERED NURSING NURSING PRACTICE** COMMITTEE MEETING MINUTES

**Date:** January 26, 2023

Start Time: 9:01 am

**Location: NOTE**: Pursuant to the provisions of Government Code section

11133 a physical meeting location was not provided.

The Nursing Practice Committee of the Board of Registered Nursing

held a public meeting via a teleconference platform.

# Thursday, January 26, 2023 – 9:01 am – 11:13 am Committee Meeting

9:01 am 7.0 Call to Order/Roll Call/Establishment of a Quorum

> Elizabeth Woods, Chairperson, called the meeting to order at 9:01 am. All members present, except Mary Fagan. Quorum established at

9:02 am.

**Nursing Practice** 

Committee Members:

Elizabeth (Betty) A. Woods, RN, FNP, MSN, Chairperson

Dr. Mary Fagan, Ph.D., R.N., NEA-BC (absent)

Vicki Granowitz Dolores Trujillo, RN

Jovita Dominguez, BSN, RN

BRN Staff

Loretta Melby, RN, BSN, MSN, Executive Officer (EO)

Representatives: Reza Pejuhesh, DCA Legal Affairs, Attorney

9:03 am 7.1 Public Comment for Items Not on the Agenda; Items for Future

Agendas

**Note:** The Committee may not discuss or take action on any matter raised during the Public Comment section that is not included on this agenda, except to decide whether to place the matter on the agenda of a future meeting. (Gov. Code, §§ 11125 & 11125.7, subd. (a).)

Public Comment Millie Marty: Asked the committee for guidance regarding

for Agenda Item documenting the radiation dose as nurses are not allowed to operate **7.1:** the radiation equipment such as CAT scans. She said there are no real protocols since technicians and physicians are responsible for this. Loretta Melby explained documentation isn't an issue that would normally be discussed at a nursing practice committee meeting. She

recommended looking at the facility policy and procedures or

contacting the California Department of Public Health (CDPH). She also gave her email address for any other questions.

9:09 am

### Review and Vote on Whether to Approve Previous Meeting **Minutes**

7.2.1 > October 26, 2022

7.2

**Committee** Elizabeth Woods opened the agenda item and explained that she **Discussion:** was not at the last meeting.

**Dolores Trujillo**: Stated she could present and make a motion for

this agenda item.

Motion: Dolores Trujillo: Motioned to accept the October 26, 2022, meeting

minutes.

Second: Vicki Granowitz

for Agenda Item

Public Comment No public comments.

7.2.1:

Vote:

Vote	EW		DT	MF	VG	JD	
	Α		Y	AB	Y	Y	
Key: Yes: Y   No: N   Abstain: A   Absent for Vote: AB							

## **Motion Passed**

9:13 am

### 7.3 Information only: Update to the United States Pharmacopeia (USP) chapters 795 and 797 regarding compounding standards

**Committee** Loretta Melby opened the agenda item and provided an explanation **Discussion:** of the USP compounding standards.

> **Elizabeth Woods:** Asked if the explanation for this agenda item is on the Board of Registered Nursing's (BRN) website.

Loretta Melby: Explained that it is not but is on the Pharmacy and the USP websites. She said she could put a statement on the BRN's website.

Elizabeth Woods: Requested the information be added to the BRN website.

Vicki Granowitz: Thanked Loretta Melby for her explanation.

7.3:

**Public Comment** Rochelle Okimoto: Explained that she joined the meeting a few for Agenda Item minutes late and asked if the RNs role could be explained again in compounding. Loretta Melby explained that RNs and APRNs generally cannot compound but there is a clause that it can be done for immediate use.

> Khadija Hamisi: Asked a question about a 103 nurse practitioner (NP). She said she did not see the Acute Care Psych Mental Health nurse practitioner but applied anyways. Loretta Melby explained that the agenda item for this issue is 7.5 and she can comment at that time.

### 9:29 am

7.4

Advisory committee updates - informational only

- **Nurse Practitioner Advisory Committee (NPAC)**
- **Nurse-Midwifery Advisory Committee (NMAC)**
- **Nursing Education and Workforce Advisory Committee** (NEWAC)

**Committee** Loretta Melby opened the agenda item and provided updates on the **Discussion:** various activities of the advisory committees.

> **Elizabeth Woods:** Asked if Loretta could provide the meeting time and date for the joint meeting to the members if they want to attend.

Loretta Melby: Explained that the information is on the Board's website but can share it with the members.

Public Comment Carmen Comsti, California Nurses Association (CNA) and for Agenda Item NEWAC member: Encourages the public to attend their meetings for **7.4:** increased public engagement in the important issues they are working on.

### 9:39 am

7.5 Information only: Update on the implementation of Assembly Bill 890 (Reg. Sess. 2019- 2020)

**Committee** Loretta Melby opened the agenda item and provided updates on the **Discussion:** implementation of AB 890.

> Elizabeth Woods: Explained that she's been a NP for 45 years and a physician does not have to be present for a NP to practice, which was not changed by AB 890.

Loretta Melby: Said standardized procedures guide NP practice and establishes supervision requirements. She further discussed the 103 NP as that is the only one in effect at this time. She said there is

currently no pathway for legacy certifications to seek independent practice. If there is no current national certification then any NP will have to complete a second transition to practice to be able to apply for independent practice. The law states approval is guided by education, knowledge, and current national certification.

Elizabeth Woods: Stated that transition to practice on the BRN's website but asked what is managing a panel of patients.

**Loretta Melby:** Read business and professions code (BPC) section (2837.101(c)). Transition to practice allows a NP to serve under physician supervision and standardized procedures (SP) while completing this transition to practice. Practice is collaborative with the physician and nurse relationship using SPs. Once the transition to practice is completed the NP can apply and provide the national certification showing they meet all requirements for independent practice.

Elizabeth Woods: Explained that if a NP has not managed a panel of patients in a complex health care setting, then they are not going to be able to become an independent practitioner.

**Loretta Melby:** Stated they would not meet the requirements. NPs would need to seek out those experiences under standardized procedures with a physician and surgeon.

**Elizabeth Woods:** Explained that she thinks a lot of NPs will apply but may not meet all the qualifications.

Loretta Melby: Agreed with Elizabeth Woods and said she's working with stakeholders to clear up some of the misinformation that is out there and has been shared through either misinterpretation or through other organizations.

**Elizabeth Woods:** Stated that a person would have to work full time to meet the time requirements.

Loretta Melby: Said a person would need to work 30-40 hours a week to meet the requirement.

Public Comment Khadija Hamisi: Thanked the members for the information but now for Agenda Item wants to cry because she has so much experience working in crisis **7.5:** centers and emergency rooms working every week for three years to get experience to become competent. She was begging psychiatrists to make sure she had the clinical hours. She is asking the board to change the law.

Mahnoor Khan, California Primary Care Association: Super excited about AB 890 and positive this will combat the provider shortage in California. She wants to know if there will be additional information posted about the patient notification and organization policies and procedures to implement the changes.

Carmen Comsti, CNA: Thanked the Board for all the work done on AB 890 implementation and getting information out. She said hospitals are making inaccurate claims about what is required under AB 890. Hospitals are saying additional population focus certifications are needed. CNA is doing a lot of outreach with employers to explain the requirements. Loretta Melby explained that there is no new requirement for a national certification for existing NPs based on AB 890. This is an option for NPs to choose to move towards independent practice as a 103 or 104 NP. Additional population focus certification is needed for independent practice only (103 and 104). A NP can continue to work under standardized procedures as is written in existing law. She has been doing a lot of outreach with health systems and unions but can continue to do so to provide clarification. Staff is working to create FAQs that will be posted to the website.

Elizabeth Woods: Said hospitals are not hiring any RNs unless they have a BSN, and this is another issue for nurses. Loretta Melby explained that legacy certifications are legitimate. The fact that legacy certifications are not able to be renewed does not change the NPs ability to continue to practice under existing NP requirements. Current population focus certification requirements are part of the 103 and 104 NP not any NP who does not want to practice independently pursuant to the 103 and 104 requirements. She said Centers for Medicare and Medicaid Services (CMS) billing requires a national certification.

**Megan Tracey:** Requested a point of clarification whether AB 890 established an expanded scope of practice for NPs. Loretta Melby clarified that there is no expanded scope of practice but independent practice. She went over BPC section 2837.103. NP scope of practice is competency based along with the national certification. If a person becomes a 103 or 104 NP, then scope of practice is limited by the national certification. They cannot practice outside the national certification education and training. The standard NP can practice based on their national certification, if they have one, but is based on standardized procedures which means they can practice outside a national certification.

Oluwayemisi Daramola: Explained that she has two national certifications and asks if she needs to apply twice. Loretta Melby explained that she would have to apply for each of the national certifications. Ms. Daramola asked if she would have to have separate transitions to practice for different physicians. Loretta Melby further explained that you can use multiple physicians to gain the necessary transition to practice hours.

Julie Portola, California Medical Association: Asked for the exact attestation language that physicians will be asked to sign as part of the 103 and 104 applications. She also asked about practice settings for 103 and 104 being the exact same. Loretta Melby provided an explanation and tried to provide a screenshot of information from the website with the language for attestation. She said the transition to practice language is taken directly from AB 890 and the approved BRN regulatory language. Julie Portola asked a follow up guestion on how a physician would know whether the NP completed the national certification and is in good standing. Loretta Melby said national certification is not required but for those who have one it is posted on the BRN website license lookup. The NP must have a current certification to practice, and it will not be posted until the board has primary source verification to prove it. The physician should ask the NP to provide the necessary information before signing the attestation.

Khadija Hamisi: Appreciates the information and thinks all her questions have been answered. She will share this information with her students, so they know what to expect when they graduate.

### 7.6 10:44 am Discussion and possible action: Regarding the appointment of committee member to the NMAC

**Committee** Dolores Trujillo opened the agenda item and explained that they **Discussion:** looked at all the applications and the group was looking to balance north and south membership. She further explained that the candidate, Dr. Kenneth James, has a good resume and has worked with a lot of NPs and CNMs.

> **Elizabeth Woods:** Asked what setting the physician worked with the NP.

**Dolores Trujillo:** Explained that the physician was trained by nurse midwives and worked with a nurse midwives' group.

**Loretta Melby:** Provided additional information from the physician's application that he is in direct practice and education. She also listed additional experience mentioned in his application package.

Public Comment Paris Maloof-Bury: Asked if Dr. Kenneth James' Curriculum Vitae for Agenda Item (CV) is available on the Board website and asked if it could be shared **7.6:** publicly. Loretta Melby said it is not publicly available. Reza Pejuhesh explained that the CV would not be considered public information because it includes personal information it is not posted publicly. Paris asked if the information would be provided if he is approved as a member. Loretta Melby looked to see if the doctor was an attendee at today's meeting and could speak but he was not. She suggested Paris Google the physician for information. If Dr. James is approved and attends the February board meeting, he can be asked if this information can be shared. Reza set expectations for the nominee at the board meeting for the public participants. He will not be subject to grilling or questioning at the meeting.

**Motion:** Dolores Trujillo: Motioned to approve the appointment of Kenneth

James to serve on NMAC.

Second: Vicki Granowitz

Vote:

Vote	EW		DT	MF	VG	JD	
	Y		Y	AB	Y	Y	
Key: Yes: Y   No: N   Abstain: A   Absent for Vote: AB							

**Motion Passed** 

11:00 am

7.7 Discussion and possible action: Regarding review and approval of the charters and the appointment process for the Clinical **Nurse Specialist Advisory Committee and the Certified Registered Nurse Anesthetist Advisory Committee** 

**Committee** Loretta Melby opened the agenda item and provided history on the **Discussion:** need for the new advisory committees.

> Elizabeth Woods: Asked if these committees would be reporting back to the Board.

Loretta Melby: Explained that these committees would report to Nursing Practice committee as does all other advance practice advisory committees.

Public Comment Melanie Rowe, Practice Director for the California Association of for Agenda Item Nurse Anesthetists: Requested that like the candidate location be 7.7: considered as well as practice specialty when choosing committee members.

> Patty Higgins, Communications Director for the California Association of Clinical Nurse Specialists: Stated that CACNS has submitted draft regulations to the Board for CNSs and looks forward to advancing them in the process.

**Elissa Brown:** Thanked everyone for moving this forward. Echoes the same comments of the CRNA public comment regarding geographical and practice consideration when selecting committee members.

Motion: Vicki Granowitz: Motioned to approve the charters and the appointment process for the Clinical Nurse Specialist Advisory Committee and the Certified Registered Nurse Anesthetist Advisory Committee.

Second: Dolores Trujillo

Vote:

Vote	EW	DT	MF	VG	JD		
	Υ	Y	AB	Y	Υ		
Key: Yes: Y   No: N   Abstain: A   Absent for Vote: AB							

**Motion Passed** 

11:13 am

7.8 **Adjournment** 

Elizabeth Woods, adjourned the meeting at 11:13 am.

Submitted by:

Loretta Melby, RN, BSN, MSN

Lorata Melly

**Executive Officer** 

**Nursing Practice Committee** 

California Board of Registered Nursing

Accepted by:

Chairperson

Nursing Practice Committee California

Elizabeth Woode

Board of Registered Nursing