



**BOARD OF REGISTERED NURSING
NURSING PRACTICE COMMITTEE MINUTES**

March 8, 2017

Board of Registered Nursing
1747 North Market Blvd.
Sacramento, CA 95834
Hearing Room
(916) 574-7600

MEMBERS PRESENT

Michael Jackson, MSN, BSN, RN, CEN, MICN
Barbara Yaroslavsky
Elizabeth Woods, RN
Donna Gerber

MEMBER(S) NOT PRESENT

Trande Phillips, RN
Cindy Klein, RN

STAFF PRESENT: Janette Wackerly, MBA, BSN, RN, SNEC, Staff Liaison

March 8, 2017

Meeting called to order by Michael Jackson, RN Chair at 12:45 PM

Member introductions: Michael Jackson RN, Elizabeth Woods, RN, Barbara Yaroslavsky, Donna Gerber

10.0 Review and Vote on Whether to Approve Previous Meeting Minutes January 11, 2016

Motion: Elizabeth Woods			
Second: Michael Jackson			
DG:	BY:	MJ: Yes	EW: Yes

10.1 Update on Rulemaking for Article 8 Standards for Nurse Practitioners; Vote on Recommendation to Continue the Regulatory Process

Motion: Elizabeth Woods	
Adopt Staff Response to the Proposed Response Reject Comment	
Second: Donna Gerber	

DG: Yes	BY: Yes	MJ: Yes	EW: Yes
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The following are letters from respondents are attached

University of California, Irvine – Alison Holman, Ph.D., RN, FNP Interim Director, UC Irvine Program in Nursing Science

California Action Coalition- Garrett Chan, Ph.D., NP, CNS, ACNP-C, CNS-BC, Susanne Phillips, DNP, NP, FNP_BC

California Nursing Students Association- Patricia McFarland, MS, RN, FAAN, CEO

American Nurses Association California- Marketa Houskova, RN, MAIA, BA Interim State Government Affairs Director, Director Senior Policy Analyst

California Association of Nurse Anesthetists, Inc. - Marciel Reighard, DNAP, CRNA CANA President
 Association of California Nurse Leaders- Patricia McFarland, MS, RN, FAAN, CEO

California Association of Clinical Nurse Specialist- Lianna Z. Ansryan, RN-BC, CNS, MSN President

Western University of Health Sciences- Diana Lithgow, Ph.D., FNP, RN-BC Professor of Nursing, Director FNP Program, Director Ambulatory Care Program, Assistant Dean of Distance Operations

California Association of Colleges of Nursing- Philip A. Greiner, DNSc, RN President

California Association for Nurse Practitioners- Theresa Ullrich, MSN, FNP-C President

California Nurse-Midwives Association- Kim Q. Dau, CNM Chair, Health Policy Committee

10.2 Information Only: Epinephrine Auto Injectors: “Authorized Entity”

Authorized entity” means any for profit, nonprofit, or governmental entity or organization that employs at least one person or utilizes at least one volunteer or agent that has voluntarily completed training course to administer epinephrine auto-injector.

“Authorized entity,” trained individual may use an epinephrine auto-injector to render emergency care to another person in accordance with these provisions. The law would also authorize a pharmacy to furnish epinephrine auto-injectors to an authorized entity, The law would require an authorized entity to create and maintain a specified operations plan relating to its use of epinephrine auto-injectors, and would require those entities to submit a report to the Emergency Medical Services Authority of each incident that involves the administration of an epinephrine auto-injector, not more than 30 days after each use. The law would also require the authority to publish an annual report summarizing the reports submitted to the authority pursuant to the law provisions.

Motion: No Motion Required			
Second:			
DG:	BY:	MJ: yes	EW: yes

10.3 Information Only: Pupil Health: Naloxone Hydrochloride, and other Opioid Antagonist
 This bill would authorize a school district, county office of education, or charter school to provide emergency naloxone hydrochloride or another opioid antagonist to school nurses and trained personnel who have volunteered, as specified, and authorizes school nurses and trained personnel to use naloxone hydrochloride or another opioid antagonist to provide emergency medical aid to persons suffering, or reasonably believed to be suffering, from an opioid overdose. The bill would expressly authorize each public and private elementary and secondary school in the state to voluntarily determine whether or not to make emergency naloxone hydrochloride or another opioid antagonist and trained personnel available at its school and to designate one or more school personnel to receive prescribed training regarding naloxone hydrochloride or another opioid antagonist from individuals in specified positions.

Motion: No Motion Required: Move to Board Agenda			
Second:			
DG:	BY:	MJ:	EW:

10.4 Discussion and Possible Recommendation for the Board to Create Advanced Practice committee
 The purpose of the advanced practice committee is to provide recommendations to the Board on issues involving nursing advanced practice. The advanced practice registered nurses are nurse practitioner, nurse anesthetist, nurse-midwives and clinical nurse specialists.

- The goals of the advanced practice committee:
1. Clarify and articulate sufficiency of the four advanced practice roles and recommend changes to the Nursing Practice Act and rules
 2. Develop recommendations for joint statements related to scope of practice and advanced practice nurse functions
 3. Review national trends in the regulation of advance practice nurses and make recommendations to the board.
 4. Collaborate with other Board committees on matters of mutual interest

Suggestion for committee members to include 2 board members as ex-official members, 1 BRN staff, 1 NEC, 4 NPs, 2 CRNA, 2 CNS, and 2 CNM and public member. The committee members are requested to have diverse and rich backgrounds and committee members suggested stakeholders, licensees and employers. Members include nurses from various areas of nursing

agencies and health care setting throughout the state. Each member may serve a maximum of two consecutive terms.

Suggestion for committee meetings to be held semi-annually in Sacramento in person and by WebEx

The Senate Committee on Business, Professions and Economic Development and the Assembly Business and Professions Committee recommends the BRN should establish an Advanced Practice Committee, separate from the Nursing Practice Committee, whose goal is to survey existing laws and regulations and determine what is lacking for regulation of APRNs. The BRN should seek legislation, promulgate regulations, and develop advisories to ensure APRNs have sufficient guidance in all practice settings.

General discuss by Practice Committee members that APRN advisory group report to board's practice committee. The APRN advisory committee would forward agenda items to the board for consideration. The APRN advisory committee be a representation of stakeholders from different APRN groups and mindfulness of cost effective meeting management. Suggested two meeting to develop agenda for the APRN advisory group

Motion: Donna Gerber			
Establish APRN Advisory Committee to report to the Practice Committee Comprised representatives APRN Groups			
Second: BY			
DG: Yes	BY: Yes	MJ: Yes	EW: Yes

Amy Ziegler MSN, ACNP, BC Director Advance Practice Nursing and Allied Health Professions:
NorthBay.Org

10.5 Public Comment for Items Not on the Agenda

No Public Comment

10.6 Adjournment at 1:10 pm

Submitted by:



Janette Wackerly, MBA, BSN, RN, SNEC
Supervising Nursing Education Consultant
NP Liaison

Accepted by:



Michael Jackson, MSN, BSN, RN, CEN, MICN