



Nurse Practitioner Advisory Committee Meeting

SUPPLEMENTAL MATERIALS

Nurse Practitioner Advisory Committee (NPAC) Meeting | March 7, 2023

Table of Contents

<u>2.0 General instructions for the format of a teleconference meeting</u>	3
<u>4.0 Review and vote on whether to approve previous meeting's minutes</u>	5
<u>5.0 Information only: Report from the Board of Registered Nursing's Executive Officer regarding the implementation of Assembly Bill 890 (Reg. Sess. 2019-2020)</u>	17
<u>6.0 Discussion and possible action: Regarding the procedures for NPAC to provide recommendations or guidance on care when the Board is considering action against a nurse practitioner (NP)</u>	19
<u>7.0 Discussion and possible action: Regarding recognition of legacy certifications and specialty certifications for NPs to practice under Business and Professions Code section 2837.103</u>	21



Agenda Item 2.0

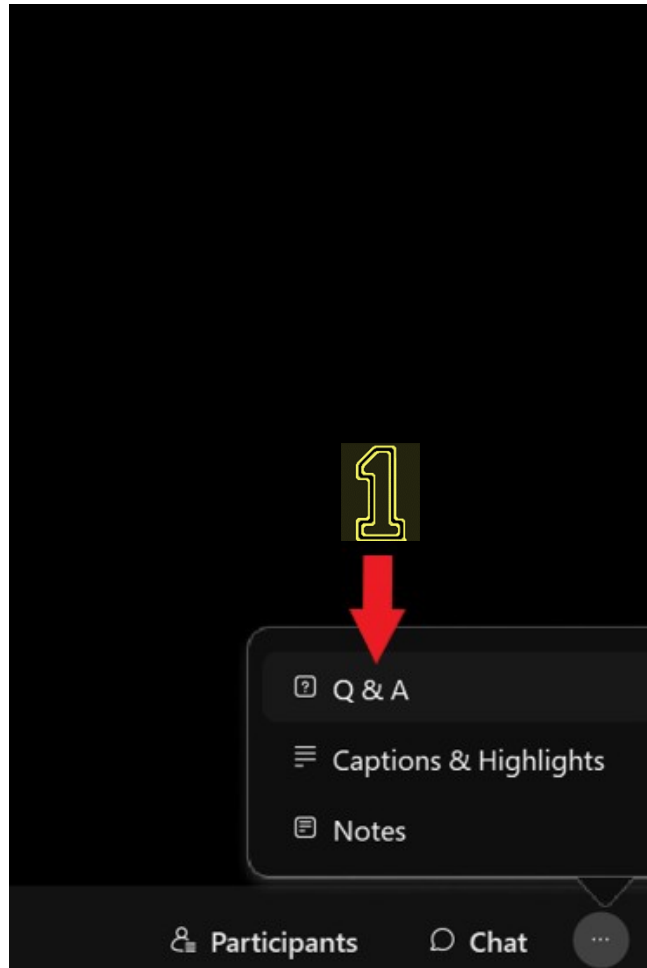
General instructions for the format of a teleconference meeting

Nurse Practitioner Advisory Committee (NPAC) Meeting | March 7, 2023

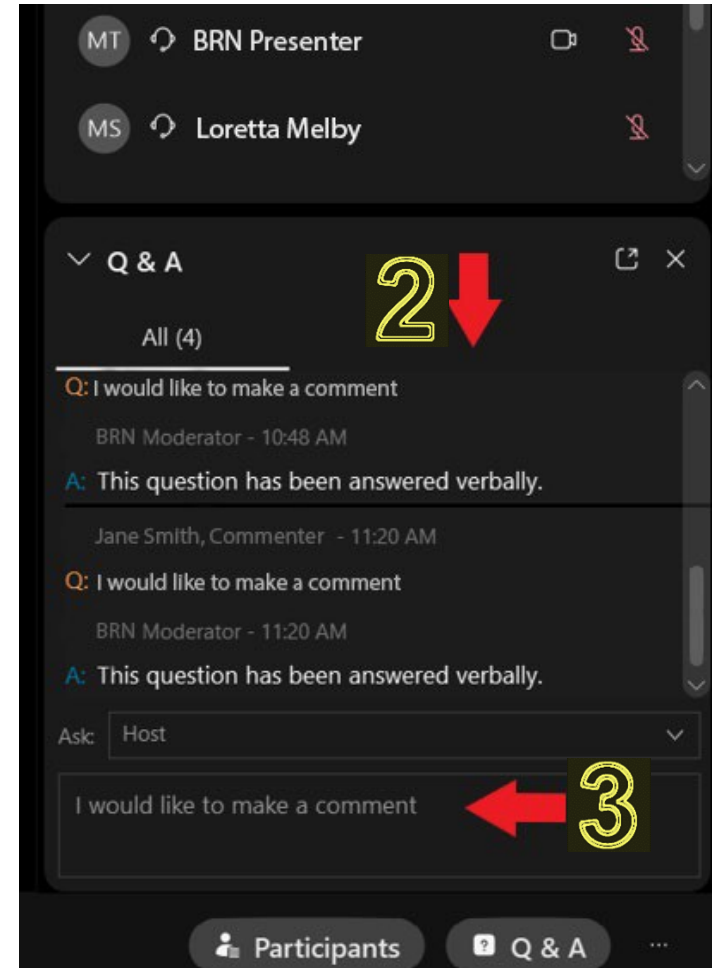
Participating During a Public Comment Period

If you would like to make a public comment:

1. Click on the 'Q & A' button at the lower right of your WebEx session (you may need to click the three dots (...) to find this option).



2. The 'Q & A' panel will appear.



3. In the 'Q & A' panel, type "I would like to make a comment". You will be identified by the name or moniker you used to join the WebEx session, your line will be opened (click the 'Unmute me' button), and you will have two (2) minutes to provide comment. Every effort is made to take comments in the order which they are requested.

NOTE: Please submit a new request for each agenda item on which you would like to comment.



Agenda Item 4.0

Review and vote on whether to approve previous meeting's minutes

Nurse Practitioner Advisory Committee (NPAC) Meeting | March 7, 2023

**CALIFORNIA BOARD OF REGISTERED NURSING
NURSE PRACTITIONER ADVISORY COMMITTEE
MEETING MINUTES**

DRAFT

DATE: November 1, 2022

START TIME: 1:00 pm

LOCATION: **NOTE:** A physical meeting location was not provided pursuant to the provisions of Government Code section 11133 (added by Assembly Bill No. 361 (Rivas), Reg. Sess. 2021-2022).

1:00 pm

1.0

Call to Order/Roll Call/Establishment of a Quorum

Samantha Gambles Farr – Chair, called the meeting to order at 1:00 pm. Quorum established at 1:01 pm.

**Nurse Practitioner
Advisory
Committee
Members:**

Samantha Gambles Farr, RN, MSN, FNP-C, CCRN,
RNFA – Chair
Edward Ray, MD, FACS - Vice Chair
Andrea Espinosa, MD
Jan Johnson Griffin - MSN, APRN
Kevin Maxwell, PhD, DNP, FNP-BC, RN
Sally Pham, MSN, RN, FNP-BC
Betha Schnelle, MBA, MPH (arrived around 1:09 pm)

**BRN Staff
Representatives:**

Loretta Melby, RN, MSN, Executive Officer
Reza Pejuhesh, DCA Legal Affairs Division, Attorney

1:02 pm

3.0

Public comment for items not on the agenda; items for future agendas.

**Public Comment for
Agenda Item 3.0:**

No public comments.

1:05 pm

4.0

Review and vote on whether to approve previous meetings' minutes

4.1 August 9, 2022

Discussion:

Samantha Gambles Farr opened the agenda item and requested any corrections or comments.

Kevin Maxwell: Stated that he was present for all agenda items at the meeting and voted in the affirmative.

Motion:

Samantha Gambles Farr: Motioned to approve August 9, 2022, meeting minutes with corrections from Kevin Maxwell.

Second:

Edward Ray

Public Comment for Agenda Item 4.0: **Sharon Vogan:** Corrected the spelling of her last name from Vogel to Vogan.

Amended Motion: **Samantha Gambles Farr:** Amended her motion to approve August 9, 2022, meeting minutes with corrections from Kevin Maxwell and public comment.

Second: **Edward Ray**

Vote:

	SG	ER	AE	JJG	KM	SP	BS
Vote	Y	Y	Y	Y	Y	Y	Y

Key: Yes: Y | No: N | Abstain: A | Absent for Vote: AB

Motion Passed

1:09 pm

5.0

Information only: Report from the Board of Registered Nursing's Executive Officer

Discussion: Samantha Gambles Farr opened the agenda item and turned the discussion over to Loretta Melby to provide her EO report.

Samantha Gambles Farr: Asked about the fees.

Loretta Melby: Explained that the fee floor was removed and about the fee setting process.

Public Comment for Agenda Item 5.0: No public comments.

1:21 pm

6.0

Discussion and possible action: Regarding election of Chair and Vice Chair positions.

Discussion: **Andrea Espinosa:** Nominates Samantha Gambles Farr to continue as Chair.

Kevin Maxwell: Seconds the nomination.

Andrea Espinosa: Nominates Edward Ray to continue as Vice Chair.

Sally Pham: Seconds the nomination.

Loretta Melby asked Samantha Gambles Farr and Edward Ray if they accept the nomination and they both agreed.

Motion: **Betha Schnelle:** Motioned to nominate Samantha Gambles Farr as Chair and Edward Ray as Vice Chair

Second: **Sally Pham**

Public Comment for Agenda Item 6.0: No public comments.

Vote:

	SG	ER	AE	JJG	KM	SP	BS
Vote	Y	Y	Y	Y	Y	Y	Y
Key: Yes: Y No: N Abstain: A Absent for Vote: AB							

Motion Passed

1:26 pm

7.0

Discussion and possible action: Regarding the report from the Department of Consumer Affairs, Office of Professional Examination Services (OPES), regarding occupational analysis mandated under Business and Professions Code section 2837.105.

Discussion:

Samantha Gambles Farr opened the agenda item and turned the discussion over to Loretta Melby who introduced Tracy Montez and Heidi Lincer with OPES.

Edward Ray: Thanked OPES for the presentation and explained that his takeaway is that transition to practice requirements need to fill the gap where testing cannot.

Kevin Maxwell: Asked if the feedback obtained for the third recommendation came only from physicians.

Heidi Lincer: Explained that the subject matter expert NPs were not asked to comment on transition to practice. OPES looked at all information obtained during analysis then conducted interviews with physicians.

Betha Schnelle: Asked if there are any models or standards that were considered appropriate for the third recommendation.

Heidi Lincer: Explained there are limitations to the examination process because it is multiple choice. The more experience a person has the more exposure there is to different situations and patient presentations. NPs do not have the same training and experience as physicians do.

Loretta Melby: Asked if the OPES review was only of the national certification exams and not specific education requirements within NP programs.

Tracy Montez: Confirmed that is correct and explained that if they did so, then they would be going outside the scope of the focus of the study. They have identified what's critical, but the attestation can help standardize assessing the soft skills and decision making.

Loretta Melby: Explained the NP education requirements and competencies mentioned in California Code of Regulations, title 16, section 1484 to help facilitate the discussion.

Edward Ray: Explained that he does not question that professionalism and competencies are not in the educational curriculum but that if it cannot be tested then it needs to be demonstrated. He wants to make sure to include that he doesn't think people should opt out of a mentorship requirement in terms of the number of hours because that is an important component that cannot be tested; and for somebody who has not been in independent practice, their number of years of experience does not equate with competency to practice independently in that area.

Loretta Melby: Stated this agenda item is discussion and possible action and does not mean a motion is needed before going to public comment.

Andrea Espinosa: Said she has supported transition to practice with training experiences and mentorship. She said the committee needs to figure out how to do this not only for new graduates but also for established NPs who have been practicing for several years. This requires a lot of thought and could be part of the formula committee.

Samantha Gambles Farr: Asked about limiting the number of comments for this agenda item due to time limitations. She asked the committee if they're okay with limiting the total time to approximately 20 minutes.

Betha Schnelle: Agreed with the recommendation and added to the comment by Andrea Espinosa regarding convening a separate committee to discuss proctoring and mentorship requirements.

Sally Pham: Stated that there are 32 states with full practice authority that have already done this. She does not understand physicians' concerns when there is no data or research supporting the comments and does not think this is the way to go.

Samantha Gambles Farr: Said there are a lot of states that have independent practice without transition to practice. She thinks this is another barrier to moving forward and being able to provide Californians with healthcare providers they so desperately need.

Loretta Melby: Clarified that the contract for OPES was to look at the certification exams.

Samantha Gambles Farr: Stated public comments should go until 2:35 pm.

Loretta Melby: Asked public commenters to say that they agree with a previous comment, if appropriate, to save time and ensure most commenters can speak. Commenters can also send responses via email. A Board meeting will be held in two weeks.

Public comments were taken prior to motion. After the motion further discussion occurred.

Loretta Melby: Explained that NPAC can make a recommendation to the Board, but the Board will consider the regulatory language in the current package and if the Board does not address changes now, they can be addressed in the future. She also said that Betha Schnelle's recommendation for a subcommittee to be formed at a future meeting can be accommodated.

Betha Schnelle: Clarified that the recommendation for a subcommittee was Andrea Espinosa's recommendation.

Reza Pejuhesh: Asked for clarification on the motion to accept the OPES report about no supplemental exam and asked about the transition to practice part.

Discussion ensued about the motion and what happens with this report.

Samantha Gambles Farr: Made a motion to accept the recommendations of no additional supplemental exam and increase CEUs to 45 and to continue the regulatory language as is.

Loretta Melby: Requested clarification of the motion.

Andrea Espinosa: Asked if there could be three motions.

Loretta Melby: Stated there needs to be a motion and second and asked Samantha Gambles Farr if the motion is that she supports the recommendation in the report about the supplemental exam.

Samantha Gambles Farr: Said she supports the supplemental exam recommendation and the 45 CEUs.

Loretta Melby: Asked if regulatory language should also be drafted.

Reza Pejuhesh: Explained that no action can be taken based on OPES's report because the report is going to the Board. NPAC can make a recommendation on all or any parts of the recommendations. If the committee wants to accept the 45 CEU

recommendation, then regulations would need to be drafted now or in the future. Any changes to the current regulatory package would significantly slow the implementation process for AB 890.

Loretta Melby: Explained that a recommendation could be made for a future NPAC agenda item to address some of these issues.

Samantha Gambles Farr: Withdrew her motion to accept recommendations for no supplemental exam and additional 45 CEU's without accepting the transition to practice mentorship to think about it.

Andrea Espinosa: Stated she wants people to get credit for the five years of experience and does not wish to add mentorship but to address it in the attestation.

Loretta Melby: Explained the NPAC previously approved the attestation language that is completing its rulemaking hearing on this day. She said any changes to the proposed attestation language would need to go through an additional regulation process. She also explained what the proposed NP transition to practice period is in the attestation language. She asked if the committee could stay at the meeting longer to complete agenda item 8.0.

Motion: **Sally Pham:** Motioned to accept the OPES recommendation of no additional exam.

Second: **Samantha Gambles Farr**

Public Comment for Agenda Item 7.0: **Catrina Reyes, California Association of Family Physicians:** Stated the analysis should not have compared current NP practice in California with content of the NP certification exams and should have compared NP certified exams with ability to perform functions specified in Business and Professions Code section 2837.103(c) without physician supervision. The analysis should have been to determine whether the exams can test the NP's ability to perform functions in the law independently.

Sharon Vogan, NP: AB 890 was constructed to assess whether a supplemental exam was needed based on education and practice, not transition to practice. NPs have at least a RN and NP license and sometimes many more certifications. Nurses are well versed to know the laws and regulation for their practice. She said NP independent practice has been done before by many other states and countries. She asks for the data. (Time ran out)

Dr. Cynthia Jovanov, President of CANP – Thanks OPES for the thorough analysis. Supports conclusion that supplemental exam is not necessary. Education prepares NPs to practice independently, and additional supervised clinical experience and

mentoring as part of the transition to practice is biased, and they do not support that recommendation. Asks board to review technical edits submitted for NPAC finalization to move forward to final vote.

Margaret Parsons, MD: Follows this issue very closely and cares about Californians' access to care and appreciates NPs as part of the healthcare team. She would prefer to see a supplemental exam but respects the report. She explained the physician education and training process. She thinks the mentorship and extra training with the structure helps build towards the independent level and is critical to managing an independent panel of patients which is similar to the training physicians go through interning during med school and residency. (Time ran out)

Ron Ordon, NP: Commends the recommendation that there is no need for a supplemental examination because the National Board exams are congruent with the scope of practice delineated in AB 890. He also seconds NP Sally Pham's comments regarding 32 states implementing independent NP practice. He is concerned about the evaluation of transition to practice and feels the BRN is the only authorized state agency to define and interpret the practice of nursing pursuant to the Business and Professions Code. Any look at transition to practice should include the entire country.

Nancy Trego, Geriatric NP: Thanked EO for clarification of setting defined for 103 NPs who work in a group practice surrounded by colleagues and physicians with a constant peer review process. Does not believe additional mentorship is needed. She was a Subject Matter Expert (SME) in the OPES analysis which was a tedious process. She was never asked about the transition to practice and should have been if that was part of their process.

Jamie Hilbert, NP: Practices in Los Angeles but was a NP in Washington state for three years. She thanks OPES for the recommendation that NPs do not need a supplemental examination. She wants to highlight that a NP earns an advanced degree that goes above and beyond nursing. She feels use of physicians to help determine NP practice is a conflict of interest. Would like consideration of nurses (NPs) who are coming from other states.

Jennifer Pugh: She doesn't want to take anyone else's time.

Charlotte Tsui, California Medical Association: Seconds the comments made by Catrina Reyes and Dr. Parsons. They have concerns with recommendations for 103 and 104 regarding sufficient administrative oversight due to the corporate bar and

AB 890 NPs can open their own offices without oversight. Concern about process that physicians were not included in the SME process.

Eileen Kelleher, NP: Would like clarification in the future regarding those with retired exams such as the adult NP or the acute care NP and thanks the board for their expedient implementation of AB 890.

Christi Delemos, NP: Appreciates structured clinical practice and mentorship for newly graduated NPs and specialty providers but there is duplication because many organizations offer comprehensive onboarding programs including supervision in a group setting. She has practiced over 16 years and is already a trusted partner in healthcare practice.

McKenna, NP: Has over a decade of experience as a NP and wants to know what data supports the length of transition to practice.

Vote:

	SG	ER	AE	JJG	KM	SP	BS
Vote	Y	Y	Y	Y	Y	Y	Y
<u>Key:</u> Yes: Y No: N Abstain: A Absent for Vote: AB							

Motion Passed

2:53 pm

8.0

Discussion and possible action: Consideration of issues raised in public comments on pending rulemaking entitled Categories and Scope of Practice of Nurse Practitioners (AB 890) (16 CCR 1480, 1481, 1482.3, 1482.4, and 1487), and possible recommendations to the Board

Discussion:

Samantha Gambles Farr opened the agenda item and explained that there was one issue to translate into Spanish that was written into AB 890 as well.

Loretta Melby: Agreed that is part of the law.

Public comment opened at 2:57 pm and ended at 3:13 pm. The discussion ensued after the public comments.

Samantha Gambles Farr: Asked committee members if they have any comments on the regulation package.

Loretta Melby: Provided clarification about what the law says about what a NP can legally do. She also said AB 890 says verbal notification must be given to patients that care is being provided by a NP and not a physician. The Board cannot create new law with a regulation. She also discussed the statutory

language requirements for certified nurse-midwives about verbal and written disclosures.

Samantha Gambles Farr: Asked if the committee members have any other comments or questions. She thanked all the public commenters and told them that they have been heard by the committee members and taken into consideration.

Loretta Melby: Said a motion is not necessary.

Samantha Gambles Farr: Stated she does not have a motion to put forward and asked if any other members had a motion. No members made any comments. She advised the public to provide any additional public comments to the NPAC's email address.

Reza Pejuhesh: Advised members and public that the public comment period for this regulatory package closes today at 5:00 pm.

Loretta Melby: Said the notice has a specific email address for comments to be sent to – marissa.clark@dca.ca.gov. Most comments provided during this meeting have already been submitted through the official regulation public comment channel.

Motion: No motion made.

**Public Comment for
Agenda Item 8.0:**

Catrina Reyes, CAFP: The OPES recommendation is that a mentorship should be incorporated into the transition to practice instead of a supplemental exam. The new categories of NPs will be practicing independently but the BRN has not exercised the authority granted by the legislature to specify additional requirements for transition to practice, leaving the current regulatory proposal vague. This is not in keeping with the BRN's mission to protect California's healthcare consumers.

Charlotte Tsui, CMA: Echoed Catrina Reyes's comments. Concerned that the transition to practice echoes the statute and is vague and misses the essential components of patient safety. The regulatory language should closely mirror the language in the OPES recommendation. Does not believe language conforms to Administrative Procedure Act requirements that calls for additional clinical experience and mentorship. Appreciates that the mentorship experience must be recent. She thanks the committee for the notice to consumers and request that all notices be in writing. Language should be added about what NPs cannot do.

Margaret Parsons, MD: Healthcare practitioners deal with a wide variety of patients who speak different languages. Notice to consumers should delineate what the NP can do so consumers

can understand the difference in education and level of care, so patients have the ability to request a physician provide care.

Tim Madden, California Society of Plastic Surgeons: Echoed CMA and Dr. Parson's comments. He strongly encourages committee to recommend to the board the regulations clarify that NPs not be allowed to do elective cosmetic services.

Eileen Kelleher, NP: She asks for clarification regarding what constitutes a peer review process regarding the 805 regulation.

Ron Ordon, NP: Urges NPAC and BRN to adopt the regulations to implement AB 890. Patients need more access to care.

Alejandro Soliz, Los Amigos de la Comunidad: Submitted written comments regarding notice to patient, including language that they have a right to see a physician and that a NP is not a physician; additional specific language was included in the comment. Patients should have the right to receive this notice without having to request it. Does not feel the BRN has heard the concerns of their communities.

Marco Lizaraga: Primarily serves farm workers throughout California. They participated throughout the legislative process for AB 890, submitted letters since the beginning of the process, and do not feel their concerns have been heard. They continue to request patients be provided a written disclosure that they are not seeing a physician.

Natalie Diaz, California Primary Care Association: Supported AB 890 and appreciates the hard work being done to implement the law. Supports the regulations to extend access to care and looks forward to ongoing collaborations.

Surani Hayre-Kwan, NP, Russian River Health Clinic: Serves farm workers in the Sonoma County area. She speaks Spanish but uses a rolling translator from Medi-Cal services to assist speaking with patients. Her patients know she is not a MD. Patients are always asked if they want to see a NP or MD. Requests the NPAC and BRN move forward with the regulations to increase patient access.

3:18 pm

9.0

Adjournment: Samantha Gambles Farr, RN, MSN, FNP-C, CCRN, RNFA - Chair, adjourned the meeting at 3:21 pm.

Submitted by:

Approved by:

McCaulie Feusahrens

Chief of Licensing
Licensing Division
California Board of Registered Nursing

**Samantha Gambles Farr, RN, MSN,
FNP-C, CCRN, RNFA**

Chair
Nurse Practitioner Advisory Committee

Loretta Melby, MSN, RN

Executive Officer
California Board of Registered Nursing



Agenda Item 5.0

Information only: Report from the Board of Registered Nursing's Executive Officer regarding the implementation of Assembly Bill 890 (Reg. Sess. 2019-2020)

Nurse Practitioner Advisory Committee (NPAC) Meeting | March 7, 2023

BOARD OF REGISTERED NURSING
Nurse Practitioner Advisory Committee Meeting
Agenda Item Summary

AGENDA ITEM: 5.0
DATE: March 7, 2023

ACTION REQUESTED: **Information only:** Report from the Board of Registered Nursing's Executive Officer regarding the implementation of Assembly Bill (AB) 890 (Reg. Sess. 2019-2020)

REQUESTED BY: Loretta Melby, RN, MSN
Executive Officer

BACKGROUND:

Loretta Melby, Executive Officer for the Board of Registered Nursing, will provide updates on Board activities regarding the implementation of AB 890 to NPAC members.

RESOURCES:

NEXT STEPS:

FISCAL IMPACT, IF ANY: None

PERSON(S) TO CONTACT: McCaulie Feusahrens
Chief of the Licensing Division
California Board of Registered Nursing
mccaulie.feusahrens@dca.ca.gov



Agenda Item 6.0

Discussion and possible action: Regarding the procedures for NPAC to provide recommendations or guidance on care when the Board is considering action against a nurse practitioner (NP)

Nurse Practitioner Advisory Committee (NPAC) Meeting | March 7, 2023

BOARD OF REGISTERED NURSING
Nurse Practitioner Advisory Committee Meeting
Agenda Item Summary

AGENDA ITEM: 6.0
DATE: March 7, 2023

ACTION REQUESTED: **Discussion and possible action:** Regarding the procedures for NPAC to provide recommendations or guidance on care when the Board is considering action against a nurse practitioner (NP)

REQUESTED BY: Samantha Gambles Farr, RN, MSN, FNP-C, CCRN, RNFA
NPAC Chair

BACKGROUND:

The NPAC members will review the BRN discipline process including the BRN Disciplinary Guidelines and the content from the Joint NMAC and NPAC meeting on January 31, 2023, and discuss the procedures for NPAC to provide recommendations or guidance on care when the Board is considering disciplinary action against a NP.

RESOURCES:

BRN Disciplinary Guidelines: <https://www.rn.ca.gov/pdfs/enforcement/discguide.pdf>

Nursing Practice Act - Business and Professions Code (BPC), Division 2, Chapter 6:
https://leginfo.legislature.ca.gov/faces/codes_displayexpandedbranch.xhtml?tocCode=BPC&division=2.&title=&part=&chapter=&article=&nodetreepath=4

https://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?lawCode=BPC§ionNum=2837.102.

BPC 2837.102(a):

(a) The board shall establish a Nurse Practitioner Advisory Committee to advise and make recommendations to the board on all matters relating to nurse practitioners, including, but not limited to, education, appropriate standard of care, and other matters specified by the board. The committee shall provide recommendations or guidance to the board when the board is considering disciplinary action against a nurse practitioner.

NEXT STEPS:

FISCAL IMPACT, IF ANY: None

PERSON(S) TO CONTACT: McCaulie Feusahrens
Chief of the Licensing Division
California Board of Registered Nursing
mccaulie.feusahrens@dca.ca.gov



Agenda Item 7.0

Discussion and possible action: Regarding recognition of legacy certifications and specialty certifications for NPs to practice under Business and Professions Code section 2837.103

Nurse Practitioner Advisory Committee (NPAC) Meeting | March 7, 2023

BOARD OF REGISTERED NURSING
Nurse Practitioner Advisory Committee Meeting
Agenda Item Summary

AGENDA ITEM: 7.0
DATE: March 7, 2023

ACTION REQUESTED: **Discussion and possible action:** Regarding recognition of legacy certifications and specialty certifications for NPs to practice under Business and Professions Code section 2837.103

REQUESTED BY: Samantha Gambles Farr, RN, MSN, FNP-C, CCRN, RNFA
NPAC Chair

BACKGROUND:

The NPAC members will discuss the recognition of legacy certifications and specialty certifications for 103 NPs.

Legacy/retired national certifications for NPs are certifications that can only be renewed and not newly obtained. These legacy certifications are currently recognized only for endorsement or licensure renewal. NPs with these certifications cannot become newly licensed but can maintain their practice consistent with their education and certification based on the legacy examinations.

Current population focuses/categories of nurse practitioners are listed in the California Code of Regulations, title 16, section [1481\(a\)\(1-6\)](#), as follows:

- (1) Family/individual across the lifespan;
- (2) Adult-gerontology, primary care or acute care;
- (3) Neonatal;
- (4) Pediatrics, primary care or acute care;
- (5) Women's health/gender-related;
- (6) Psychiatric-Mental Health across the lifespan.

Legacy/retired nurse practitioner population focuses/categories include:

- Adult
- Acute Care
- Adult Acute Care
- Gerontology
- Adult Psychiatric Mental Health

NPs may specialize but they cannot be licensed solely within a specialty area. Education and assessment strategies for specialty areas are developed by the nursing organizations and special interest groups and can be assessed in a variety of ways through professional credentialing mechanisms (e.g., portfolios, examinations, etc.). Preparation in a specialty area of practice is optional and does not expand one's scope of practice beyond the role or population focus. Education for a specialty can occur concurrently with NP education that is required for licensure or through post-graduate education. Competence at the specialty level is not assessed or regulated by boards of nursing but rather by the professional organizations.

These specialties emerge based on the health needs of the population and evolve out of the population focus, and indicate that additional knowledge and expertise have been obtained. Some examples of specialty patient populations are oncology, palliative care, substance abuse, and nephrology. In practice this can be seen as an adult-gerontology primary care NP that has a specialty certification in nephrology.

RESOURCES:

[Bill Text - AB-890 Nurse practitioners: scope of practice: practice without standardized procedures. \(ca.gov\)](#)

BPC 2837.103

(a) (1) Notwithstanding any other law, a nurse practitioner may perform the functions specified in subdivision (c) pursuant to that subdivision, in a setting or organization specified in paragraph (2) pursuant to that paragraph, if the nurse practitioner has successfully satisfied the following requirements:

(A) Passed a national nurse practitioner board certification examination and, if applicable, any supplemental examination developed pursuant to paragraph (4) of subdivision (a) of Section 2837.105.

(B) Holds a certification as a nurse practitioner from a national certifying body accredited by the National Commission for Certifying Agencies or the American Board of Nursing Specialties and recognized by the board.

BPC 2837.104(c)(1)

(c) A nurse practitioner authorized to practice pursuant to this section shall comply with all of the following:

(1) The nurse practitioner, consistent with applicable standards of care, shall not practice beyond the scope of their clinical and professional education and training, including specific areas of concentration and shall only practice within the limits of their knowledge and experience and national certification.

BPC 2837.105

(a) (1) The board shall request the department's Office of Professional Examination Services, or an equivalent organization, to perform an occupational analysis of nurse practitioners performing the functions specified in subdivision (c) of Section 2837.103 pursuant to that subdivision.

(2) The board, together with the Office of Professional Examination Services, shall assess the alignment of the competencies tested in the national nurse practitioner certification examination required by subparagraph (A) of paragraph (1) of subdivision (a) of Section 2837.103 with the occupational analysis performed according to paragraph (1).

(3) The occupational analysis shall be completed by January 1, 2023.

(4) If the assessment performed according to paragraph (2) identifies additional competencies necessary to perform the functions specified in subdivision (c) of Section 2837.103 pursuant to that subdivision that are not sufficiently validated by the national nurse practitioner board certification examination required by subparagraph (A) of paragraph (1) of subdivision (a) of Section 2837.103, the board shall identify and develop a supplemental exam that properly validates identified competencies.

(b) The examination process shall be regularly reviewed pursuant to Section 139.

[Consensus Model for APRN Regulation: Licensure, Accreditation, Certification & Education July 7, 2008.](#) Page 12 of this document specifically states:

An APRN specialty

- preparation cannot replace educational preparation in the role or one of the six population foci;
- preparation can not expand one's scope of practice beyond the role or population focus
- addresses a subset of the population-focus;
- title may not be used in lieu of the licensing title, which includes the role or role/population; and
- is developed, recognized, and monitored by the profession.

NEXT STEPS:

FISCAL IMPACT, IF ANY:

None

PERSON(S) TO CONTACT:

McCaulie Feusahrens
Chief of the Licensing Division
California Board of Registered Nursing
mccaulie.feusahrens@dca.ca.gov