CALIFORNIA BOARD OF REGISTERED NURSING
NURSE PRACTITIONER ADVISORY COMMITTEE
MEETING MINUTES

DATE: February 8, 2022

START TIME: 1:03 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).

1:03 pm **1.0** **Call to Order/Roll Call/Establishment of a Quorum**
Samantha Gambles Farr – Chair, called the meeting to order at 1:03 pm. Quorum established at 1:05 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 2:57 pm, elevated 3:01 pm)

BRN Staff Representatives:
Loretta Melby, RN, MSN, Executive Officer
Reza Pejuhesh, DCA Legal Attorney
Evon Lenerd Tapps, BRN Assistant Executive Officer
McCaulie Feusahrens, Licensing Division Chief

1:07 pm **3.0** **Review and vote on whether to approve previous meetings' minutes**
3.1 November 16, 2021

Discussion: Samantha Gambles Farr introduced the agenda item and opened for Advisory Committee discussion.

Andrea Espinosa: Provided a correction on the bottom of page 6 with Catrina Reyes saying it should be the California Academy of Family Physicians. On page 9 she said she made a motion to have a "minimum of one year of transition to practice," not "one year of transition to practice."

Motion: **Edward Ray:** Motioned to adopt the minutes as corrected.

Second: **Andrea Espinosa**

Public Comment for Agenda Item 3.0: **Mary Adorno**: Explained that the meeting agenda and phone number that are not applicable to this meeting. When she tried to call it said it is not valid. Asked if staff can post in the chat box the correct number it would be appreciated.

Reza Pejuhesh: Explained that the phone number is correct on the agenda but there is a different access code. Stated that the Phone number is (415) 655-0001 and the Access Code is 2483 965 9341.

Loretta Melby: Explained that the updated information will be posted to BRN website, social media, email to ListServ.

To post this information, NPAC took a brief break at 1:19 pm and returning at 1:30 pm. At that time, the participant list went up by two and it was decided to wait until 1:40 to give more people time to join, via phone.

Reopened meeting at 1:43 pm with a roll call to establish quorum. Quorum established at 1:44 pm.

Vote:

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

1:45 pm **4.0** **Public comment for items not on the agenda; items for future agendas.**

Public Comment for Agenda Item 4.0: No public comment.

1:46 pm **5.0** **Discussion and Possible Action: Establishment of meeting dates for 2022.**

Discussion: Samantha Gambles Farr introduced the agenda item and provided the proposed meeting dates from the meeting materials. She opened the floor to member comments.

Kevin Maxwell: Explained that he is happy with the Tuesday meeting dates.

Sally Pham: Asked if the meeting times will remain the same.

Samantha Gambles Farr: Stated that the start times will be 12:00 pm or 1:00 pm.

Motion: **Kevin Maxwell:** Motioned to accept the proposed meeting dates as stated in the agenda.

Second: **Sally Pham**

Public Comment for Agenda Item 5.0: **Marco Lizarraga:** Requested to comment on agenda item 6 and was told by the moderator to request comment at that time.

Sonia Reyes: Asked if any of the committee members were primary care NPs who work in public health,

Reza Pejuhesh: Explained that the members can answer the questions but are not required to do so.

Vote:

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

1:52 pm **6.0** **Discussion and Possible Action: Regarding naming conventions for Nurse Practitioners (NP) practicing pursuant to standardized procedures and pursuant to Business and Professions Code (BPC) sections 2837.103 and 2837.104.**

Discussion:

Samantha Gambles Farr introduced the agenda item and explained that it is to help the public understand the various NP types. She then opened for committee discussion.

Loretta Melby: Explained that there was a social medial campaign and solicitation was done with DCA, legal, and others to come up with a naming convention that would be clear to the public.

Edward Ray: Proposed the consideration of NP followed by a roman numeral (i.e. NP-I, NP-II, NP-III, NP). Explained that more letters can get confusing, and the roman numeral is simple.

Andrea Espinosa: Explained that the public brought this up because they are confused as to who they are seeing (MD or NP). Explained that if she way a ley person advanced makes sense and disagrees with the “independent” part because the ley person does not know what that means. The public would understand “without supervision” rather than “independent”. She thinks the roman numbers make it more like medical school training and MD Post Graduate training – which these NPs are not in training. She recommends Advanced NP 103, Advanced NP 104.

Jan Johnson Griffin: Shared Edward Rays concern for simplicity but thinks there would be confusion since health care facilities designate practitioners by I, II, III. She thinks it should be simpler than suggested though.

Samantha Gambles Farr: Stated that this is a technical process that NPAC is trying to simplify. Explained that NPs are already referred to as Advanced Practice Providers and adding Advanced may not help and may hurt NPs. Further stated that she understands the need to try to simplify this.

Edward Ray: Explained that adding an A (Advanced) in front of NP can mean adult/gerontology, or advanced practice.

Kevin Maxwell: Asked if the additional naming convention is necessary.

Samantha Gambles Farr: Explained that the Board asked for clarity and if there is no additional name then the public may not understand there are differences between NPs.

Reza Pejuhesh: Explained that the naming convention can be included in the regulations to differentiate the NPs.

Kevin Maxwell: Stated that this also adds to the alphabet soup of acronyms that the public may not understand.

Loretta Melby: Explained that there needs to be some type of identification because it will be added to BreEZe so employers/insurance companies can use the DCA license search page to verify/lookup a license. There is nothing in statute that requires a different naming convention.

Andrea Espinosa: Suggested adding Independent along with specialty but the code section can be included in the Breeze lookup.

Samantha Gambles Farr opened the agenda item for public comment.

Samantha Gambles Farr opened for further Board discussion after the public comments and stated that there was a lot of good public comment regarding the need for additional naming conventions.

Kevin Maxwell: Explained that he would like the different names only in BreEZe.

Edward Ray: Stated that he respectfully disagrees. Explained that the public doesn't understand the different levels of NP that 2837 provides.

Samantha Gambles Farr: Explained that she does not think adding any additional letters or numbers will help the public understand the difference between NPs.

Andrea Espinosa: Stated that the bill specifies that there are different NPs and something is needed and provided the prior examples.

Edward Ray: Provided an example about marketing from a NP who does not have the 103 or 104 designation. Explained that the

BRN and MBC will not be able to police everyone who advertises inappropriately. Further explained that without the additional designation it doesn't stop a non 103, 104 NP from advertising inappropriately.

Samantha Gambles Farr: Explained that she can see some of the points made by Edward Ray but questioned what is there to stop someone from advertising inappropriately currently.

Loretta Melby: Requested the Board moderator to elevate Betha Schnelle to the panel.

Andrea Espinosa: Reiterated that there needs to be some different type of designation.

Kevin Maxwell: Explained that he thinks it should be 103 or 104.

Jan Johnson Griffin: Explained that it should still be simple and she agrees with Andrea Espinosa to add Independent to include 103 or 104, if necessary.

Betha Schnelle: Explained that she doesn't see how adding a different title will add distinction and cost and time to the patient interaction.

Sally Pham: Agrees that simplicity is the best way.

Betha Schnelle: Expressed that she doesn't think adding more than what the bill already provides is necessary or provide additional public protection.

Edward Ray: Explained that if we add the "Independent" designation it should only be added to the 104 NP. If he votes no, it's because of that concern.

Public Comment for Agenda Item 6.0:

Alejandro Solis: Stated that he is representing a few different Spanish communities. Explained that "Enferma Especializada" is the language that is supposed to be used for Spanish speaking patients and requests that the names selected be in line with this language so Spanish speaking patients will understand. Further explained they have sent letters to BRN with no response.

Michelle: Explained that there is patient confusion with who is a MD and NP and the naming convention should be kept simple.

Michelle Pereira, FNP: Expressed that whatever naming convention is selected can be translated into different languages. Further expressed that she would like whatever method is used to provide feedback is visible and easily accessible as she teaches NPs and would like them to be able to provide their feedback.

Loretta Melby: Provided the social media platforms to request feedback and said public can use the contact us section on the BRN website.

Allie Johnston: Explained that she is a FNP in northern California and says that the general public does not know the differences in NPs and areas of practice and thinks this should be kept as simple as possible. Further explained that licensure online should say 103 or 104 if someone wants to look this information up. No independent or advanced and only include the 103 or 104 designation.

Marco Lizarraga: Stated that he represents Spanish communities and read the statutory language regarding NPs providing this information to patients in different languages, specifically “Enferma Especializada” to match the Spanish language version in law. Further stated that the community leaders have been sending letters for the last six months and have not received any response.

Andrea Espinosa: Asked if there is a Spanish phrase for Nurse Practitioner.

Marco Lizarraga: Stated that there is no phrase in Mexico.

Scott, RN: Explained that there is a fascination with nominating credentials and thinks that maybe only in BreEZe is best. Asked for a male version of the Spanish statement either in the regulation or a possible cleanup bill.

Cynthia Jovanov, NP: Agreed with Scott and thinks the proposed acronyms are confusing. Suggested that including a link to certain specifications might be helpful. Explained that she is a Latina and speaks Spanish and thinks the language in the statute is feminine and would request the language be removed.

Andrea Espinosa: Asked what terminology she uses with Spanish speaking patients.

Cynthia Jovanov, NP: Explained that she uses her first name and tells patients she is not a medical doctor even though she has a doctorate and can be called doctor. Further explained that she establishes the relationship using her first name without use of doctor and she also uses a language line for patients who do not speak English.

Patty Gurney, pediatric NP: Explained that her maiden name is Anaya and she speaks Spanish and has many Spanish speaking patients. She explained that she identifies herself as Patricia along with “enferma especializada” but would like the statute cleaned up since there are many non-English patients. Further explained that there is nothing in the bill that requires any special

naming convention and what they are called should be defined by the other language used by the patient. Stated that there is a process to educate patients and qwants this to be as simple as possible.

Sonia Reyes, NP for San Francisco Department of Public Health: Stated that she has 20 years of experience and suggested the naming convention be as simple as possible. Specificities can be made on the website. Explained that she uses Spanish terminology when addressing her patients.

Susanne Phillips: Agreed with many speakers ahead of her in the simplicity. List it on the Breeze website similar to the controlled substance designation. APRN is already defined in regulation. Reza said the APRN that exists in regulation also includes CNM, CNS, NP and NA and is broader. Suzie said the regulation language makes it conform to the national model (LACE). She will send a link to Reza.

1st Motion: **Andrea Espinosa:** Motioned to designate the new NPs as "Independent" NPs for both 103 and 104 NPs

1st Second: **Jan Johnson Griffin**

Vote:

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

2nd Motion: **Edward Ray:** Motioned to adopt the designation of "Independent" NP for 104 NPs only.

2nd Second: **Kevin Maxwell**

Vote:

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

3:13 p.m. **7.0** **Discussion and Possible Action: Regarding the procedures for NPAC to provide recommendations or guidance on care when the Board is considering disciplinary action against a NP, pursuant to BPC section 2837.102, subdivision (a).**

Discussion: Samantha Gambles Farr introduced the agenda item and explained that there was a previous discussion regarding providing input on discipline. She then opened for committee discussion.

Edward Ray: Questioned whether or not the Board wants the

committee's feedback regarding discipline, and, if so, if they want it on all the discipline cases.

Loretta Melby: Explained that the committee previously agreed to the disciplinary guidelines being updated with input from NPAC. She spoke about cases that go to closed session and others that go for mail vote. All cases are sent to the board members for mail vote and if the board decides they want to discuss then a case can be held for closed session. Further explained that the chief of enforcement, Shannon Johnson, can provide another presentation on the disciplinary guideline process to NPAC, if needed.

Reza Pejuhesh: Provided information regarding limited time for the board to render a decision.

Edward Ray: Questioned how many cases there are.

Reza Pejuhesh: Explained that he does not see all the cases, so he does not know the answer.

Samantha Gambles Farr: Explained that she would like the data once NPs start practicing as 103 and 104 and how that affects discipline and whether or not any additional input from the committee is needed.

Shannon Johnson: Joined the meeting and explained that the BRN disciplines less than one percent of the licensees. A lot of cases are conviction cases not standard of practice cases. The committee should review the guidelines to help them understand. The guidelines are focused on RN and not advanced practice. The guidelines may need additional specifics for advanced practice. She does not have the data regarding discipline for NPs at this time. She used to report out the data, but the numbers are so small she hasn't done it in a while.

Andrea Espinosa: Explained that she would like to review standard of care cases that fall out of the guidelines. She thought maybe Loretta could pick out cases for the committee to review.

Shannon Johnson: Explained that this could lengthen the timeframes for discipline.

Edward Ray: Provided more information and said the committee could review practice cases and provide something similar to an amicus brief with their recommendations regarding the case.

Sally Pham: Asked about the confidentiality of the case if the committee reviews the information would the information become public if the committee reviews it?

Reza Pejuhesh: Provided more information about the

complaint/investigation process. A case comes before the Board once an administrative law judge has heard it and renders a proposed decision. Explained that NPAC could meet in closed session to review a case to eliminate the confidentiality issue.

Shannon Johnson: Provided information regarding expert consultant review of each practice case.

Reza Pejuhesh: Explained that NPAC already approved use of the disciplinary guidelines for discipline and that NPAC will provide input regarding the language update in the disciplinary guidelines.

Samantha Gambles Farr: Asked for the enforcement case timeframes so NPAC knows how they might have an effect if they review cases.

Loretta Melby: Explained that Shannon will be providing a presentation at the Board meeting next week about the complaint investigation to accusation filed timeframes.

Shannon Johnson: Explained that she will be providing a lot of statistics in the agenda item summary that might be helpful to NPAC.

Motion: No motion or action taken.

Public Comment for Agenda Item 7.0:

Catrina Reyes, California Academy of Family Physicians: Suggests that with the new 103 and 104 NPs that this committee should be considered the experts and participate in all NP discipline case recommendations.

Yvonne Chung, CMA: Explained that with the new categories of NP that experts may be difficult to find with the experience initially to review cases. CMA recommends all 103 and 104 cases be reviewed by NPAC until a sufficient amount of time has passed for experts to be able to review cases and determine whether the regulations are sufficient.

Don Chinsky, Dermatology Association: Concurs with the CMA comments.

8.0 **Discussion and Possible Action: Regarding fee analysis to determine value of initial application fee pursuant to BPC section 2837.104, subdivision (b)(2), and possible amendment of California Code of Regulations (CCR), title 16, section 1417, and amendment of proposed draft regulatory language of CCR, title 16, section 1482.4.**

Discussion: This agenda item was tabled until next NPAC meeting.

3:51 pm **9.0** **Information Only: Update from the Department of Consumer**

Affairs, Office of Professional Examination Services (OPES), regarding occupational analysis mandated under BPC section 2837.105.

Discussion:

Loretta Melby: Opened the agenda item and requested Tracy Montez, Chief of the Division of Programs and Policy Review, to be elevated to present this agenda item.

Tracy Montez: Explained that the occupational analysis of the national certification review pursuant to SB 890 is in process. The public sessions are complete, and the report is being written at this time. They have signed non-disclosure agreements with four of the five associations. The test specialists are reviewing the information from the four associations (eleven exams). They are hoping to wrap up the project in the spring. They will share the information with NPAC as allowed in the non-disclosure agreements.

Sally Pham: Asked about the timeframe for completion.

Tracy Montez: Explained there are several steps to complete for this review and there is still one association that has not signed the non-disclosure agreement. They are negotiating with their legal department.

Andrea Espinosa: Asked if any of the associations were physicians.

Tracy Montez: Provided the list of associations that does not include physicians and explained they will be in contact with physicians regarding any questions that need to be answered.

Andrea Espinosa: Asked whether larger physician associations will be interviewed as well as about the practice of medicine by NPs and why there wouldn’t be more contact with the physician credentialing agencies.

Tracy Montez: Explained they do not deal with the larger groups as they are not credentialing physicians. Further explained that they are creating a baseline of competent practice with the various certification exams that provide the credentials. After some time has passed then they will need to go back to ensure the baseline is correct or whether it needs to be updated. Explained the numerous steps in the process to develop the occupational analysis, keeping in mind that this is for an advance practice profession where they normally do this occupational analysis for entry level licensure.

Sally Pham: Asked about the association that has not agreed to participate and whether NPs certified by that association might not be able to be approved to practice as 103 or 104.

Tracy Montez: Explained that would be up to the Board, but it would be very rare if that would happen.

Andrea Espinosa: Asked if the physicians review the NP certification exams.

Tracy Montez: Explained that they are not looking at the exams but rather what is required and supports the evidence to take the exams.

Andrea Espinosa: Asked if California is not looking at the exam then how is it determined a 103 or 104 candidate is qualified to practice independently.

Tracy Montez: Explained that there is a piece missing (the transition to practice) but they will provide as much information as possible so the committee can make decisions.

	Public Comment for Agenda Item 9.0:	No public comment.
	10.0	**Information Only: Regarding updates on regulatory package to implement Assembly Bill 10.0 (AB) 890 (Reg. Sess. 2019-2020).**
	Discussion:	This agenda item was tabled until next NPAC meeting.
		Andrea Espinosa: Asked if there is a possibility to have a meeting sooner than May to get an update on the regulations.
		Loretta Melby: Explained that the regulation update will be given at the Board meeting next week.
4:24 pm	**11.0**	**Adjournment:** Samantha Gambles Farr, RN, MSN, FNP-C, CCRN, RNFA - Chair, adjourned the meeting at 4:24 pm.

Submitted by:

McCaulie Feusahrens

Chief of Licensing
Licensing Division
California Board of Registered Nursing

Approved by:

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