Tuesday, November 7, 2017

1.0 8:00 am Open Session: Staff Presentation to Public

1.1 Overview of the Board’s licensure process and process related to applicants reporting convictions.

1.2 Questions and Answers.

Schools Present: California Baptist University, Loma Linda University, College of the Desert, DeAnza College, East Los Angeles City College, Loma Linda University, Saddleback College, San Bernardino Valley College, San Joaquin Valley, San Marcos

2.0 Call to Order, Roll Call, and Establishment of a Quorum

Trande Phillips, President, called the meeting to order at 9:13 a.m. and established a quorum.
PRESENT: Trande Phillips, RN, President
       Donna Gerber, Vice President
       Elizabeth A. Woods, MSN, FNP, RN
       Pilar De La Cruz-Reyes, MSN, RN
       Michael D. Jackson, MSN, RN
       Barbara Yaroslavsky

NOT PRESENT: Cynthia Klein, RN
              Imelda Ceja Butkiewicz

Executive Officer: Dr. Joseph Morris, PhD, MSN, RN

3.0 Public Comment for Items Not on the Agenda

Sheri Monsene - UCLA Health

4.0 Disciplinary Matters. Hearings on Petitions for:

Theresa M. Brehl, Administrative Law Judge
Lauro Paredes, Deputy Attorney General
Molly Selway, Deputy Attorney General

Early Termination of Probation:  Reinstatement

• Tiana Dowty
• Brenda Sandoval
• Kellie Walker
• Wilma Walker
• Deborah Wolff-Baker
• Lauri Berney
• Vanessa Cadwallader
• Shannon Rynearson

Meeting adjourned to closed session at 12:55 pm.

5.0 Closed Session

Disciplinary Matters

The Board convened in closed session pursuant to Government Code Section 11126(c)(3) to deliberate on the above matters and other disciplinary matters including stipulations and proposed decisions.

Pending Litigation

The Board convened in closed session pursuant to Government Code section 11126(e)(1) to confer with and receive advice from legal counsel regarding Nora McNeill v. Office of Administrative Hearings, Board of Registered Nursing and Deputy Attorney General Brian Turner, Sacramento Superior Court, Case No. 34-2016-80002470-CU-WM-GDS.

Trande Phillips, President, called the closed session meeting to order at 12:57 pm. The closed session adjourned at 4:11 pm.

6.0 Reconvene in Open Session – Recess until November 8, 2017, at 8:00 a.m.
Trande Phillips, President, reopened the meeting at 4:11 pm.
No public comment.

Meeting adjourned at 4:13 pm.

Wednesday, November 8, 2017

1.0 8:00 am Open Session: Staff Presentation to Public

1.1 Overview of the Board’s licensure process and process related to applicants reporting convictions.

1.2 Questions and Answers.

Schools in attendance: California Baptist University, Charles Drew University, Loma Linda University, El Camino College/Compton Community Education Center, Riverside College, Stanbridge College, Mira Costa College.

2.0 Call to Order, Roll Call, and Establishment of a Quorum

Trande Phillips, President called the meeting to order at 9:19 am, had the members introduce themselves and established a quorum.

PRESENT: Trande Phillips, RN, President
Donna Gerber, Vice President
Elizabeth A. Woods, MSN, FNP, RN
Pilar De La Cruz-Reyes, MSN, RN
Michael D. Jackson, MSN, RN
Barbara Yaroslavsky
Imelda Ceja-Butkiewicz

NOT PRESENT: Cynthia Klein, RN

Executive Officer: Dr. Joseph Morris, PhD, MSN, RN

3.0 Public Comment for Items Not on the Agenda

No public comment.

4.0 Disciplinary Matters. Hearings on Petitions For:

Reinstatement

- Goli Alai
- Rebecca Allred-Hatfield
- Jacqueline Straka
- Diana Curtis
- Kupambazua Furaha
- Kathy Nesmon
- Kate Omosun-Fadal

Open Session Meeting adjourned to closed session at 2:05 pm.
5.0 Closed Session

Disciplinary Matters

The Board convened in closed session pursuant to Government Code Section 11126(c)(3) to deliberate on the petitions and other disciplinary matters including stipulations and proposed decisions.

Trande Phillips, President, called the closed session meeting to order at 2:10 pm. The closed session adjourned at 2:54 pm.

6.0 Reconvene in Open Session

Trande Phillips, President, reconvened the meeting in open session at 3:40 pm, had the members introduce themselves and established a quorum.

PRESENT: Trande Phillips, RN, President
        Donna Gerber, Vice President
        Elizabeth A. Woods, MSN, FNP, RN
        Pilar De La Cruz-Reyes, MSN, RN
        Michael D. Jackson, MSN, RN
        Barbara Yaroslavsky
        Imelda Ceja-Butkiewicz

NOT PRESENT: Cynthia Klein, RN

No public comment.

7.0 Report of the Administrative Committee

Trande Phillips, President, Chairperson

7.1 Discuss and Possible Vote on Exploring Legislation Regarding Registered Nursing Student “Clinical Displacement”

BACKGROUND: The board members discussed and considered public comments surrounding “Clinical Displacement” in order to possibly vote to explore legislation.

Public Comments:

Diane Restelli, Golden West College       Diane Pestolesi, Saddleback
Rebecca Miller, Santa Ana College        Darlene Fisherman, Cypress College
Sandy Baker, Riverside Community College

Motion: Donna Gerber – Authorize the administrative committee of the Board to explore legislation regarding Registered Nursing Student “Clinical Displacement” and provide Board with potential legislative solutions.

Second: Pilar De La Cruz Reyes

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<thead>
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<th>Votes</th>
<th>MJ</th>
<th>EW</th>
<th>BY</th>
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7.2 Discuss and Possible Vote to Change Regulatory Proposal to Modify California Code of Regulations, Article 2, Section 1419 (Renewal of License) from an Emergency to a Regular Rulemaking

BACKGROUND: Board staff proposed an emergency regulation change at the January 2017 board meeting to require successful completion of the fingerprint process of all registered nurses who have not previously been fingerprinted by the Board or for whom a record of the submission of fingerprints no longer exists.

The Board approved the proposed changes to the California Code of Regulation Section 1419, board staff submitted the emergency regulation package for review and approval to all the various approving offices within the Department of Consumer Affairs and Business, Consumer Services, and Housing Agency.

Since submitting the emergency regulation package through the various approving offices within DCA and BCSH, board staff have been notifying affected licensees to submit fingerprints to the Board. As a result, the numbers of licensees needing to submit fingerprints to the board has been reduced by approximately 79%.

Board staff is requesting to cancel the emergency rulemaking package and continue the regular rulemaking process.

Public Comments:

Saskia Kim, California Nurses Association

Motion: Trande Phillips Table to February 2018 Board Meeting.

7.3 As a Result of the Rejection by the Office of Administrative Law (OAL) of the Board’s Regulatory Proposal to Modify California Code of Regulations, Article 3, Sections 1418, 1423.1, 1423.2, 1424, 1426, and 1430 Pursuant to Senate Bill 466 (Chapter 489, Statutes of 2015 - Credit for Military Education/Experience), the Board Will Discuss and Possibly Vote on Whether to Resubmit the Modified Package to OAL Based on Having Addressed the Issues in the Rejection

BACKGROUND: The regulatory proposal amending Title 16, CCR sections 1418, 1423.1, 1423.2, 1424, 1426, and 1430, for implementation of SB 466 expanded requirements of registered nursing education programs, was the subject of a 45-Day Notice comment period culminating on July 11, 2016 when a public hearing was held. There was no public testimony at the hearing. During the comment period two organizations submitted comments. The comments were responded to by staff after approved at the September 2016 board meeting. Staff submitted the regulatory package to DCA for review and approval prior to sending package to the Office of Administrative Law to complete the regulatory process.

Upon additional review by DCA Legal counsels, it was suggested the BRN remove the language in California Code of Regulations section 1423.2(a)(3), (a)(4) and (c) regarding “close the program” as this language is not included in any other statute or regulation. The revised language was sent out for a 15-day comment period and the package continued the rulemaking process.
On August 29, 2017, board staff was notified that the OAL was preparing to reject the Board’s regulatory proposal. Board staff has been in communication with OAL staff and DCA legal to revise the regulatory language in concert with OAL’s concerns.

The revised language is submitted to the board for consideration and discussion as to whether the modified rulemaking package will be resubmitted to OAL for completion of the rulemaking process.

**No Public Comments**

**Motion:** Trande Phillips – Motion to resubmit the modified package to OAL based on having addressed the issues in the rejection.

**Second:** Barbara Yaroslavsky

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<tr>
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**7.4 Review and Possible Vote on Whether to Adopt the Draft 2017-2020 Strategic Plan – error on agenda (correct years to reflect 2018-2021 Strategic Plan)**

**BACKGROUND:** At the September 6, 2017, board meeting the board members and executive staff met and worked with SOLID staff to discuss and make recommendations for the 2017-2020 Draft Strategic Plan.

SOLID Training Solutions compiled all the Board’s recommendations and the draft plan is submitted to the Board for consideration and a possible vote to approve.

**Public Comments:**

Saskia Kim, California Nurses Association:

**Motion:** Barbara Yaroslavsky Table to February 2018 Board Meeting.

**Second:** Imelda Ceja-Butkiewicz

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**8.0 Recess until November 9, 2017, at 9:00 a.m.**

Meeting adjourned at 4:37 pm

**Thursday, November 9, 2017 – 9:00 am**

**1.0 Call to Order/ Roll Call and Establishment of a Quorum**

Trande Phillips, President called the meeting to order at 9:05 am, had the members introduce themselves and established a quorum.
Members:  Trande Phillips, RN, President
          Donna Gerber, Vice President
          Elizabeth A. Woods, MSN, FNP, RN
          Pilar De La Cruz-Reyes, MSN, RN
          Michael D. Jackson, MSN, RN
          Imelda Ceja-Butkiewicz
          Barbara Yaroslavsky

NOT PRESENT:  Cynthia Klein, RN

Executive Officer:  Dr. Joseph Morris, PhD, MSN, RN

Staff Present:  Chris Castrillo, Deputy Director Board & Bureau Services, DCA
                Badrieh Caraway, NEC
                Janette Wackerly, Supervising NEC
                Carol Velas, NEC
                Wayne Boye, NEC
                Katie Daugherty, NEC
                Laura Shainian, NEC
                Shannon Silberling, Chief, Discipline, Probation and Intervention
                Linda Sperling, NEC
                Kay Weinkam, NEC
                Lorraine Clarke, Legislative Analyst
                Joe Pacheco, Chief, Complaint Intake and Investigations

2.0 Public Comment for Items Not on the Agenda

Public Comments:

Chris Castrillo, Deputy Director Board & Bureau Services, DCA: Introduction and updates on new staff in the Executive Office.

Sherry Moncense, UCLA Health

3.0 Review and Vote on Whether to Approve Minutes:  Table to January Board meeting.

3.1 Review and Vote on Whether to Approve Board Meeting Minutes:  Table to January Board meeting.

3.2 Review and Vote on Whether to Approve Board Meeting Minutes:  Table to January Board meeting.

4.0 Report on Board Members’ Activities

➢  Pilar De La Cruz-Reyes Board update to Nursing Leadership Coalition, Central Valley.

5.0 Board and Department Activities

5.1 Executive Officer Report

➢  Organizational Update
      Internal Business Process
The Board continues to review and update (as necessary) its internal business processes. We are currently anticipating the restructure of the call center cubical space in order to accommodate more staff. The anticipated date of completion is April 2018 given the necessary code clearances and delivery of furniture and equipment.

➢ **BRN Project Green Initiative**
  In early August 2017, the Board launched its Project Green initiative. Project Green is the California Board of Registered Nursing (BRN) efforts to streamline and update one of its many processes by eliminating the paper renewal notification and plastic pocket RN cards. If you haven’t noticed already, please visit the BRN website and click on the “Hello Green, Goodbye Paper” button. The link will route you to the webpage which explains the upcoming changes related to Project Green.

➢ **2016 California Survey of Registered Nurses (RNs) and Forecasts**
  The 2016 California Survey of Registered Nurses report as well as the 2017 RN Workforce Forecast report is now available on the BRN website. The RN Survey includes a new infographic brochure that makes it easy to review the data and summarizes key points of the survey. A link has also been added to our home page under the What’s New heading. In addition, an email blast has gone out to the BRN ListServ subscribers.

➢ **Consumer Satisfaction Survey**
  The Board once again has made the Consumer Satisfaction Survey available on the BRN website. E-mail notices were recently sent to licensees, applicants, nursing programs and stakeholders. All are encouraged to take a few minutes to complete the Survey and let us know how well the Board is performing and areas of improvement.

➢ **Annual School Survey**
  The 2016-2017 Annual School Survey is currently open for nursing programs to complete until November 15. If you are a nursing program dean or director of a California BRN approved program and have not received an e-mail with a link to complete your program’s survey, please contact Lisel Blash at the University of California, San Francisco (UCSF) at lisel.blash@ucsf.edu. On October 9, 2017, the BRN in collaboration with UCSF, hosted a Webinar to provide information to assist nursing program Deans, Directors, faculty and staff with completing the 2016-2017 Annual School Survey. The webinar was recorded and is available for viewing. A link to the recorded webinar was sent to all nursing programs deans and directors and other nursing program staff. The data collected from this survey will be beneficial to the nursing community and to stakeholders of nursing education. The survey will help the BRN capture an accurate picture of nursing education in California.

➢ **Clinical Displacement Experiences**
  In addition to the Annual School Survey this year, the BRN is conducting another survey for the nursing programs deans and directors to complete. The survey is focused on recent clinical displacement experiences reported by several schools throughout the state. The purpose of the survey is to gain a more in-depth understanding regarding this issue with a hope of offering solution focused outcomes. The data collected will be analyzed and shared with the Deans, Directors, and key stakeholders. This survey is available on Survey Monkey until November 15.

➢ **Fall 2017 Edition of the BRN Report (Newsletter)**
  The fall 2017 edition of the BRN Report (Newsletter) is now available on the BRN website.
The newsletter has a new look and layout. It contains interactive links and media that is more user-friendly to tablets and mobile devices. The newsletter includes: BRN updates, information about recent legislative changes, overviews of BRN activities, updates on NCLEX and much more. For more information about the newsletter please visit the BRN website and click on Consumers: Forms/Publications tab.

- **Career Opportunities**
  Also, recently added to the BRN website are employment opportunities and DCA job announcements. Again, more information regarding career opportunities can be found on the BRN website.

- **Health Professions Education Foundation ADN and BSN Scholarship and Loan Repayment Program**
  The Health Professions Education Foundation (HPEF) housed within the Office of Statewide Health Planning and Development (OSHPD) is a non-profit foundation statutorily created to encourage people from underrepresented communities to become health professionals and increase access to health providers in medically underserved areas and the public mental health system. The foundation encourages people to work in these areas by providing scholarships and loan repayments. These programs for Registered Nurses are partially funded by a $10 surcharge placed on the biennial RN renewal fee. Applications are accepted once a year and are completed and submitted through an online system CalREACH.

  HPEF’s 2017-2018 Annual Application Cycle Information:
  1. The Bachelor of Science Nursing Loan Repayment Program (BSNLRP) is August 1 through October 16, 2017, **now closed**!
  2. The Associate Degree Nursing (ADN) and Bachelor of Science Nursing (BSN) Scholarship Programs are open from January 3 through February 28, 2018.

  Additional information regarding requirements, how to complete an application and much more can be found at:
  1. Foundation: www.healthprofessions.ca.gov
  2. Facebook: www.facebook.com/CalHealthWorkforce
  3. Twitter: www.twitter.com/HealthProfCAgov

  **No Public Comment**

5.2 **Public Record Requests**
The BRN continues to comply with public record requests and responds within the required timeframes that are set in Government Code Section 6250. For the period of June 6, 2017 through, August 28, 2017 the BRN received and processed 23 public record requests.

5.3 **Technology Update**
**Fingerprint Requirement**
BRN staff continues to work to notify licensees that are missing fingerprints (FBI and/or DOJ) in the BreEZe system. Notification of missing fingerprints is triggered upon renewal of a license. A fingerprint deficiency statement is now printed on RN renewal notices that are sent out 90 days in advance of expiration of the RN license. The same deficiency statement is also indicated on the online BreEZe system. Additionally, fingerprint notification letters continue to be mailed out to licensee’s who have missing fingerprint results in the DCA BreEZe system. Licensees are given 60 days to comply by submitting fingerprints to DOJ and proof of
fingerprint submission to the Board. A second reminder letter is mailed 30 days after the initial letter to nurses that have not followed-up with regards to the initial letter. Nurses are given a total of 60 days from receipt of the initial letter to respond before possible disciplinary actions are taken.

Electronic Transcripts
The Board continues to implement the CloudDrive and the acceptance of electronic transcripts from California Schools. The Board has initiated a pilot program accepting electronic transcripts from Out-of-State applicants through third party vendors. More information on this project will be discussed during the licensing report.

No Public Comment

5.4 Budget Update
➢ Budget Change Proposal (BCP)
The Board is participating in the Budget Change Proposal process to seek additional staff necessary to complete workload to meet regulatory time frames.

➢ Fund Condition
See page 6 for current figures of the BRN’s Analysis of Fund Condition.

5.5 Staffing Update

Over the past 2 months, the Board has hired 13 new employees, 5 promotions, and 3 separations, and 2 retirements. There are currently,

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<td>Andrea Tillman</td>
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<td>Paul Johnsen</td>
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<td>Amiroop Singh</td>
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<td>Jaswinder Sheemar</td>
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### SEPARATIONS

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### VACANCIES

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<td>Staff Services Manager I</td>
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Supervising Program Technician I  
Supervising Program Technician II (New BCP)  
Licensing - Support  
Call Center

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<tr>
<td>Alcidia Valim</td>
<td>Staff Services Manager I</td>
<td>Administration</td>
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</table>

Alcidia Valim retired from state service on October 3, 2017 after serving the State of California for 22 years. Alcidia began her state service career at the Board of Registered Nursing as an Office Assistant in September 1995 and held many positions throughout the Board until she retired as a Staff Services Manager I in the Administration Unit. The Board of Registered Nursing congratulates Alcidia on her retirement, thanks her for her dedication to the Board, for her compassion, humor, impeccable style and commend her outstanding record of service and extend our best wishes on her future endeavors.

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<td>Marci White</td>
<td>Staff Services Manager I</td>
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Complaint Intake Manager Marci White’s last working day with the Board was October 31, 2017. Marci will officially retire from state service on December 31, 2017 after serving the State of California for 23 -1/2 years, all with the BRN. Marci began her state service career at the Board of Registered Nursing as an Office Assistant in the Diversion Program on June 24, 1994 and held many positions throughout the BRN Enforcement Division until she retires as a Staff Services Manager I in the Complaint Intake Unit. The Board of Registered Nursing congratulates Marci on her retirement, thanks her for her dedicated service to the Board, and extends our best wishes on her future endeavors.

> Fund Condition

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REVENUES, TRANSFERS, AND OTHER ADJUSTMENTS

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<td>35,325</td>
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<tr>
<td>4129200 Other Regulatory Fees</td>
<td>1,581</td>
<td>1,552</td>
<td>1,582</td>
</tr>
<tr>
<td>4129400 Other Regulatory Licenses and Permits</td>
<td>6,326</td>
<td>5,996</td>
<td>15,673</td>
</tr>
<tr>
<td>4143500 Miscellaneous Services to the Public</td>
<td>57</td>
<td>28</td>
<td>28</td>
</tr>
<tr>
<td>4150500 Interest Income - Interfund Loans</td>
<td>121</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>4163000 Investment Income - Surplus Money Investments</td>
<td>56</td>
<td>15</td>
<td>15</td>
</tr>
<tr>
<td>4171400 Escheat - Unclaimed Checks, Warrants, Bonds, and Coupons</td>
<td>9</td>
<td>-</td>
<td>-</td>
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<tr>
<td>4171500 Escheat - Unclaimed Property</td>
<td>1</td>
<td>-</td>
<td>-</td>
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<tr>
<td>4172500 Miscellaneous Revenue</td>
<td>6</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>4173400 Settlements and Judgments - Anti-Trust Actions (Attorney General)</td>
<td>-</td>
<td>-</td>
<td>-</td>
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</table>

Transfers and Other Adjustments:

| Loan repayment from the General Fund (0001) to the Board of Registered Nursing Fund, Professions and Vocations Fund, per Item 1110-011-0761, Budget Act of 2011 | 3,300 | - | - |
| Loan repayment from the General Fund (0001) to the Board of Registered Nursing Fund, Professions and Vocations Fund, per Item 1110-011-0761, Budget Act of 2011 | 5,000 | - | - |

Total Revenues, Transfers, and Other Adjustments:

| $44,955 | $40,492 | $53,236 |

Total Resources:

| $52,243 | $50,266 | $58,473 |

EXPENDITURE AND EXPENDITURE ADJUSTMENTS

Expenditures:

| 1110 Department of Consumer Affairs Regulatory Boards (State Operations) | 42,403 | - | - |
| 1111 Department of Consumer Affairs Bureaus, Programs, Divisions (State Operations) | - | 42,824 | 39,558 |
| 8880 Financial Information System for California (State Operations) | 66 | 53 | 54 |
| 9900 Statewide General Administrative Expenditures (Pro Rata) (State Operations) | - | 2,152 | 2,989 |

Total Expenditures and Expenditure Adjustments:

| $49,469 | $45,029 | $42,601 |

FUND BALANCE

| $9,774 | $5,237 | $15,872 |

Reserve for economic uncertainties

| 9,744 | 5,237 | 15,872 |
No Public Comment

6.0 Registered Nurse Response Network (RNRN) Presentation on Registered Nurse Volunteers, Including Most Recent Disaster Activity in Puerto Rico

Public Comments:

Saskia Kim, Presenter, California Nurses Association
Alice Grub, Registered Nurse

7.0 Report of the Education/Licensing Committee
Michael Jackson, MSN, RN, Chairperson

7.1 Vote on Whether to Ratify Minor Curriculum Revision

BACKGROUND: According to Board policy, Nursing Education Consultants may approve minor curriculum changes that do not significantly alter philosophy, objectives, or content. Approvals must be reported to the Education/Licensing Committee and the Board.

Minor Curriculum revisions include the following categories:

- Curriculum changes
- Work Study programs
- Preceptor programs
- Public Health Nurse (PHN) certificate programs
- Progress reports that are not related to continuing approval
- Approved Nurse Practitioner program adding a category of specialization

The following programs have submitted minor curriculum revisions that have been approved by the NECs:

7.1.1 Azusa Pacific University Entry Level Master’s Degree Nursing Program
7.1.2 University of California, Irvine Master’s Entry Program in Nursing (MEPN) and Baccalaureate Degree Nursing Program
7.1.3 Azusa Pacific University Baccalaureate Degree Nursing Program
7.1.4 California State University, Northridge Accelerated Baccalaureate Degree Nursing Program
7.1.5 California State University, San Bernardino Baccalaureate Degree Nursing Program
7.1.6 San Francisco State University Baccalaureate Degree Program
7.1.7 Western Governors University Baccalaureate Degree Nursing Program
7.1.8 American Career College Associate Degree Nursing Program
7.1.9 City College of San Francisco Associate Degree Nursing Program
7.1.10 CNI College Associate Degree Nursing Program
7.1.11 College of the Redwoods Associate Degree Nursing Program
7.1.12 Los Angeles Southwest College Associate Degree Nursing Program
7.1.13 Los Angeles Valley College Associate Degree Nursing Program
7.1.14 Moorpark College Associate Degree Nursing Program

Acknowledge Receipt of Program Progress Report:

7.1.15 Charles R. Drew University of Medicine and Science, Mervyn M. Dymally School of Nursing Entry Level Master’s Degree Nursing Program
7.1.16 East Los Angeles College Associate Degree Nursing Program
No Public Comment

Motion: Michael Jackson made a motion to Ratify Minor Curriculum Revisions.
Second: Trande Phillips

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<td>Absent</td>
<td>Y</td>
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<td>Y</td>
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7.2 Vote on Whether to Approve Education/Licensing Committee Recommendations

BACKGROUND: The Education/Licensing Committee met on January 11, 2018 and makes the following recommendations:

7.2.1 Continue Approval of Prelicensure Nursing Program
- San Francisco State University Baccalaureate and Entry Level Master’s Degree in Nursing Programs
- City College of San Francisco Associate Degree Nursing Program
- Los Medanos College Associate Degree Nursing Program

7.2.2 Defer Action to Continue Approval of Prelicensure Nursing Program
- Unitek College Associate Degree Nursing Program
- San Joaquin Valley College Associate Degree Nursing Program

7.2.3 Continue Approval of Advanced Practice Nursing Program
- University of Phoenix Nurse Practitioner Program (Costa Mesa, Pasadena, Ontario)

7.2.4 Change Warning Status with Intent to Close Program to Continue Approval of Prelicensure Nursing Program
- Charles R. Drew University of Medicine and Science, Mervyn M. Dymally School of Nursing Entry Level Master’s Degree Nursing Program
- Napa Valley College Associate Degree Nursing Program

7.2.5 Approve Major Curriculum Revision
- Loma Linda University Baccalaureate Degree Nursing Program
- Saddleback College Associate Degree Nursing Program
- San Joaquin Valley College Associate Degree Nursing Program
- Holy Names University Baccalaureate Degree Nursing Program
- Sacramento City College Associate Degree Nursing Program
- San Joaquin Delta College Associate Degree Nursing Program

7.2.6 Defer Granting Initial Approval of Prelicensure Nursing Program
- Brandman University Baccalaureate Degree Nursing Program

No Public Comment

Motion: Michael Jackson made a motion to Approve Education/Licensing Committee Recommendations.
Second: Barbara Yaroslavsky
7.3 Vote on Whether to Change Warning Status with Intent to Close Program to Continue Approval of Prelicensure Nursing Program for Shepherd University Associate Degree Nursing Program

Shepherd University (SU) is a non-profit school, founded in 1999 by Dr. Richard Cornel S. Lee, with faculty of scholars and professionals envisioning the education of Korean immigrants primarily in Theology, Music, Information Technology, Nursing and English Language programs.

The Board granted initial approval to SU on May 19, 2010. The program reorganized as the School of Nursing in January 2012 and relocated to the current location in October 2012. The campus is on a large lot covering over five acres, and the 83,600-sq. ft. building provides ample space for student learning.

At the time of the last continuing approval visit February 2014, the program was found to be in non-compliance in three areas: Sec 1424(h) Insufficient FT faculty; Sec 1426(a) Approved Curriculum; Sec 1431 NCLEX pass rate standard.

The program administration and faculty worked diligently to bring the program into full compliance with BRN rules and regulation. Compliance with 1431 NCLEX pass rates was not achieved and the program was on Warning Status with Intent to Close. The program submitted multiple progress reports as directed by the Board. The report submitted for the October 4, 2017 ELC Meeting verified that the program was now in compliance and had a NCLEX pass rate of 90.91% for the 2016-2017 academic year. The recommendation was to grant continuing approval to SU.

The program is now determined to be in non-compliance with CCR 1432(a)(2) Notify the Board within ten working days of (A) Change in fiscal condition that will or may potentially adversely affect applicants or students enrolled in the nursing program and (B) Substantive change in the organizational structure, administrative responsibility, or accountability in the nursing program, the institution of higher education in which the nursing program is located or with which it is affiliated that will affect the nursing program. The issues involving SU were learned via a complaint lodged by an anonymous student that was received September 11, 2017 and alleged that SU has been experiencing serious financial challenges during the past several months, due to mismanagement of the past leadership. The complainant made the following allegations:

1. Faculty and staff told students that SU has failed to pay staff and faculty for the past six months.
2. SU has filed for bankruptcy protection and the University’s title IV is denied permanently by the USDE.
3. SU has serious financial problems, board issues, and integrity issues therefore WASC did not and will not grant accreditation.
4. Student tuition is insufficient to sustain the program.
5. SU has no plan to transfer out students or teach out and is concerned credit earned at the University will not be honored at other institutions.

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<td>Y</td>
<td>Y</td>
<td>Absent</td>
<td>Y</td>
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</tbody>
</table>
The Program Director was notified and instructed to submit documentation by University Administration of the validity of the allegations and if true, methods to resolve them. A response to the allegations was received September 17, 2017 from Dr. Kim Shalom, University President.

The letter received stated the University had experienced financial challenges that resulted in a complete and radical change in the leadership and management positions (including Board, President, Vice Presidents, Deans, CFO, Admissions and Recruitment Personnel, and others). Some positions remain unfilled and recruitment continues. The University was advised by experts and legal counsel, to file for Chapter 11 Protection Petition which was filed on August 14, 2017. This allows the University to restructure and reorganize itself, its revenue, income and financial operations, and take care of the financial responsibilities within a longer time versus Chapter 7 which is a plan for liquidation and closure. Based on the Chapter 11 filing, SU lost its eligibility for Title IV funding. SU is developing a plan to compensate that loss by providing the students with additional scholarships and loans. The letter admitted to delays in faculty salaries being paid and only a few for six months.

SU is approved by BPPE and is seeking WASC accreditation. The WASC visiting team will return to SU in Spring 2018. While the University has no plans to close, other schools in the area had been surveyed for possible transfer of students and acceptance of credit earned.

The University President, Chair of the Board, and other top administrators would be attending a meeting October 18, 2017 at the WSCUC headquarters in Alameda, CA to discuss the needs and receive guidance and assistance.

On October 4, 2017, the nursing administrators verbalized they were fearful the university was going to be evicted from its current building. This information resulted in a site visit, October 12, 2017 by Wayne Boyer, NEC. The meeting was with the Nursing Program Director, Assistant Director, and University President Dr. Michael Pickett who replaced Dr. Shalom and had been in this role for three weeks. Dr. Pickett stated that the building has been purchased and escrow has been opened. The new owners are Gold Coast Productions, a production company that is interested in further developing the physical building, music, and digital arts programs. Assurance was given the nursing programs would not suffer reduction in space or support. He also stated the University has secured a benefactor who has promised $300,000 per month in funding for continued operation of the University to include faculty salaries. Legal avenues are being researched for possible charges of fraud and/or misappropriation of funds against members of the previous administration. The nursing faculty continue to be student centered and have continued to teach their courses without financial reimbursement. He reiterated that the University has no plans to close its doors, but he has developed a Teach Out Plan if closure becomes necessary. Dr. Pickett was requested to provide written responses to the student allegations identified above, in light of the continued financial uncertainty. His reply was received October 17, 2017. Dr. Pickett and administrators attended the WSCUC on October 18, 2017. A correspondence from him attested that SU has maintained its WASC candidacy status. A copy of his responses, the Teach Out Plan, SU Organizational Chart, and communication with WASC are attached to this report.

Currently the four semester Nursing Program has 43 students enrolled, nine students in semester one, seven students in semester two, 15 students in semester three, and 12 students in semester four. The program has no plans to close. The program was informed of EDP-I-10, Guidelines for Closure and/or Re-Opening of a Board-Approved Nursing Program.

No Public Comment
**Motion:** Michael Jackson made a motion to Change Warning Status with Intent to Close the Program to withdraw Approval of Shepherd University Associate Degree Nursing Program with a teach out plan.

**Second:** Donna Gerber

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</table>

7.4 **Vote on Whether to Continue Warning Status with Intent to Close East Los Angeles College Associate Degree Nursing Program ELAC**

**BACKGROUND:** The program is being presented for progress report subsequent to the Board’s decision to continue Warning Status at the April 5, 2017 meeting, and to return to the October ELC meeting. The Warning Status was originally issued on February 6, 2014 as a result of continued non-compliance for substandard NCLEX pass rate at the program’s October 7-8, 2013 continuing approval visit.

NCLEX results reported at the March ELC meeting for the first two quarters of 2016-2017 reporting period were 77.27% (July-Sept 2016) and 76.19% (Oct-Dec 2016). Since that time, the last two quarters of NCLEX results have been received for the program: 50.00% (Jan-Mar 2017) and 73.19% (Apr-Jun 2-17) yielding an **Annual Pass Rate of 73.47% for 2016-17** (see Table 1).

**Table 1. Annual NCLEX Pass Rates**

<table>
<thead>
<tr>
<th>Year</th>
<th>Taken</th>
<th>Passed</th>
<th>Annual Pass Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>2011-12</td>
<td>124</td>
<td>102</td>
<td>82.26%</td>
</tr>
<tr>
<td>2012-13</td>
<td>114</td>
<td>71</td>
<td>62.28%</td>
</tr>
<tr>
<td>2013-14 (Oct CAV)</td>
<td>91</td>
<td>45</td>
<td>49.45%</td>
</tr>
<tr>
<td>2014-15</td>
<td>120</td>
<td>74</td>
<td>61.67%</td>
</tr>
<tr>
<td>2015-16</td>
<td>102</td>
<td>66</td>
<td>64.71%</td>
</tr>
<tr>
<td>2016-17</td>
<td>98</td>
<td>72</td>
<td><strong>73.47% (Two quarters)</strong></td>
</tr>
</tbody>
</table>

Although the 73.47% Annual Pass Rate is slightly below the passing standard of 75%, it is a marked improvement for which the program and college administration remain fully committed to ensuring success of ELAC graduates. The program’s data for graduates testing within three months over the past academic year is 42.85%, and 38.75% for testing within three-six months (see Table 2). An analysis of factors contributing to students being unsuccessful on the NCLEX revealed:

1) Delay in testing due to a hold in Admissions & Records  
2) Lack of follow-through by students to complete graduation check  
3) Family responsibilities  
4) Issues with documentation  
5) Working

**Table 2. Quarterly NCLEX Testing-times Post Graduation**

<table>
<thead>
<tr>
<th>2016-2017</th>
<th>Taken</th>
<th>Passed</th>
<th>1-3 months</th>
<th>3-6 months</th>
<th>1-2 years</th>
</tr>
</thead>
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<tr>
<td>July-Sep 2016</td>
<td>44</td>
<td>34</td>
<td>37</td>
<td>1</td>
<td>6</td>
</tr>
<tr>
<td>Oct-Dec 2016</td>
<td>21</td>
<td>16</td>
<td>1</td>
<td>16</td>
<td>4</td>
</tr>
<tr>
<td>Jan-Mar 2017</td>
<td>10</td>
<td>5</td>
<td>4</td>
<td>1</td>
<td>5</td>
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<td>-------------</td>
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</tr>
<tr>
<td>Apr-June 2017</td>
<td>23</td>
<td>17</td>
<td>0</td>
<td>20</td>
<td>3</td>
</tr>
<tr>
<td>Total</td>
<td>98 taken</td>
<td>72 passed</td>
<td>42/98 = 42.85</td>
<td>38/98 = 38.75</td>
<td>18/98 = 18.36%</td>
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</table>

Program follow-up over the past year has included:
- Implementation of Kaplan standardized testing in each course (5% of grade) and a comprehensive NCLEX predictor exam in the final semester.
- Structured remediation (includes independent study, meeting weekly with the course faculty and Remediation Specialist, and completing assignments on a timeline.)
- Requirement to sit-out and remediate 1 semester for course withdrawal or failure before reentering program
- Maintaining current attrition at 5%
- Review of course examinations by Content Experts; revision of test questions by faculty; and validation of curriculum content using NCLEX-RN test plan.
- LIVE NCLEX review post-graduation – plans to offer more frequently year-round.

There are currently 133 students in the program.
52 admitted June 2015 Cohort (graduated June 2017 – testing now)
57 admitted Jan 2016 Cohort (graduate December 2017)
52 admitted June 2016 Cohort (graduate June 2018)
20 admitted Jan 2017 Cohort (Program approved to admit one-time Cohort of 20 students)
29 admitted June 2017 (Program approved to admit one-time Cohort of 30)

Faculty remain stable at 10 FT and 10 PT. The program recently hired a part-time Student Success Specialist, and is reviewing candidates to fill a fulltime Skills Lab Assistant position.

An Interim Visit was conducted by the NEC on August 28, 2017. Program feedback during student meetings was shared with faculty as well as with the program director. NEC recommendations included the need to follow-up with implementation of the Total Program Evaluation plan as a quality improvement tool. Areas identified as needing data analysis and action plan were: program/graduate survey, graduate performance, and course evaluations.

The program reports continued strong community support, and consistent hiring of graduates. Reimbursement of NCLEX fees/related costs via “The Vicky Chang and Family Nursing Scholarship” is available to graduates. Ms. Chang attended the December 2016 & June 2017 pinning ceremonies, and stressed the importance of testing within 3 months of graduation.

**Public Comment:** No public comments

**Motion:** Michael Jackson made a motion to Continue Warning Status with Intent to Close the Program. Allow program to admit another cohort of 30 students. Continue to provide the NEC with quarterly progress reports and return to the Education and Licensing Committee in March 2018 for a progress report.

**Second:** Donna Gerber
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<td>Y</td>
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<td>Absent</td>
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7.5 Vote on Whether to Continue Approval of California Career College Associate Degree Nursing

**BACKGROUND:** Ms. Susan Naimi is the Owner, President and Assistant Director of California Career College. The program was initially approved September 2016.

A first year continuing approval visit was scheduled and conducted on August 18, 2017 by Dr. Linda Sperling and Dr. Susan Engle, NECs. The program does not currently have a Director. Ms. Naimi is serving the role of Acting Director until another Director can be hired.

The California Career College was approved to admit 24 students, three times a year. The college admitted their first cohort of students October 27, 2016, with their second cohort, April 13, 2017 and their third cohort on July 27, 2017. They are expecting to start their fourth cohort in March 2018.

The program provides instruction on a 15-week semester system which includes a total of 70 semester units for graduation, 40 nursing units (21 theory, 19 clinical), 6 units of communication, 21 units of science and 3 units of other degree requirements for graduation.

The areas of non-compliance were given which relate to sections 1424 (d) (e) (g) (h) Administration and Organization of the program, 1425, 1425.1 (a) (d) Faculty Qualifications and Changes, 1426 (a) (f) Curriculum, 1427 (a) Clinical Facilities, 1428 Student Participation and 1430 Previous Education Credit. The listed areas of non-compliance are in compliance with the Boards rules and regulations.

The program has had two directors since its inception. Both directors have since resigned. The first director reported last day worked was in October 2016, one month after program approval. A letter of Non-Compliance was sent December 2016 upon notification from the first Director of her resignation. An EDP-P-02 form was not provided until January 19, 2017, three months after her resignation, one day before second Director was hired on January 19, 2017. Second Director notified BRN by email of her resignation effective July 28, 2017. An EDP-P-02 form has not been provided by the program. Both Directors reported in an email that they were in name only and were not permitted to assume the role of director. Ms. Naimi is the College President, Owner, Acting Director, Assistant Director, Faculty and clinical evaluator. It has not been determined how much time Ms. Naimi spends administering the nursing program.

Students report having three different faculty to teach current med-surg course, previous director, Assistant Director and a new instructor to start the day after the visit. This instructor was not approved by the BRN. Program is using faculty not approved by the BRN. One faculty approved to teach OB, was teaching Med-surg, one faculty only approved to teach in their LVN program teaching Med-surg clinical. During the course of the visit NECs met with students, and administration, NECs toured the classroom, offices and skills lab. It was found that there was no strategic plan in place to hire a new Director for the program. We were not able to speak with faculty as they were not made available for our visit. It was also found that there were inadequate and outdated equipment and supplies for students to practice in the skills lab. The library does not
have support staff to assist students; resource books in library are dated as far back as 2007. Students do not have access to electronic resources for use on or off the campus.

At the time of the visit it was found that the OB course is scheduled to start October 4, 2017 and there were no approved instructor to teach the course. This has recently been resolved with the approval of an OB instructor and assistant instructor. Cohort two and cohort three are scheduled to begin different medical surgical courses with three Med Surg instructors and two assistant instructors for approximately 48 students. At this time faculty are attending two groups of clinical per day, one in the morning and one in the evening. Courses are being taught out of sequence with one group of students taking a NSG 200 Foundations course in the first semester, when it is scheduled, according to EDP-P-05, to be taken in semester two. Ms. Naimi attends the clinical sites to evaluate students even though faculty is at the clinical site with the students.

The Students are currently in Canyon Oaks clinical site without approval. Clinical site contract is dated 2012 and was implemented for the program’s LVN program. Current students, second semester are in NSG 220 Basic Client care. Syllabus includes content related to caring for patients with disorders of the Cardiac Conduction System and Hemodynamic while student clinical is in a Long Term Facility. The program uses one clinical evaluation tool for each course to evaluate student’s academic progress, performance, and clinical learning experiences and is not related to the course objectives, or stated in measurable terms. Students report they are not provided an opportunity to attend faculty meetings or have a governing body in place. Program does not have a process in place for SB466, providing education credit for the Military Student located on the program’s website.

No Public Comment

Motion: Barbara Yaroslavsky made a motion to Place California Career College on Warning Status with Intent to Close Program with quarterly progress reports and return to ELC in October 2018.
Second: Michael Jackson

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<td>Absent</td>
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7.6 Vote on Whether to Grant Initial Approval of Prelicensure Nursing Program to Gurnick Academy of Medical Arts Associate Degree Nursing Program

BACKGROUND: Samantha Manlosa Sanchez RN, BSN, MSN/ED is the designated Program Director and Jennifer Adams RN, MSN is the designated Assistant Director.

The program director was hired on 11/28/16 and the Assistant Director scheduled for onboarding on 09/16/17. The program intends to hire 5 full-time faculty for lead faculty/content experts Medical- Surgical, Geriatric, Obstetric, Pediatric and Psych-Mental Health. Twenty-five (25) part-time faculty positions will be hired and as needed as students advance in the program. The program plans to enroll twenty-eight (28) students four (4) times/yr. for 112 students/yr. The clinical placement availability is provided and facilities visited verified available sites to accommodate the admission pattern. No displacements of existing nursing programs clinicals is anticipated with this request for approval of Gurnick Academy of Medical Arts.
An initial program approval at Gurnick Academy of Medical Arts Associate Degree Nursing Program in Fresno, CA was conducted on May 04, 2017 by Janette Wackerly, SNEC and Susan Engle NEC. The feasibility study for the program had been accepted by the Board in November 2015. This August 2017 Gurnick Academy of Medical Art Samantha Manlosa Sanchez RN has submitted a Self-Study Report for Initial Program Approval that is in full compliance with all BRN rules and regulations. When the Gurnick Academy has approval from the board, the generic nursing student will begin the program. The program would like to admit their first cohort of LVN advanced placement in December 2017.

The first submitted Self Study Report for Initial Program Approval Review was discussed in detail with nursing leadership at Gurnick Academy of Medical Arts on May 04, 2017 by the nursing education consultants. The nursing education consultant determined the Self Study Report could not be accepted as it did not meet all the BRNs rules and regulations. The Self Study Report Initial Program Approval was based on an educational plan for an LVN to RN program and not on requirements for a generic RN Associate Degree Nursing Program. Following consideration by nursing leadership at Gurnick Academy of Medical Arts Samantha Manlosa Sanchez RN, BSN, MSN/ED determined that she would provide the nursing education leadership to produce the Self Study Report for Initial Program Approval for a generic RN Associate Degree Nursing Program and provide a curriculum tract for advanced placement LVNs within the Associate Degree Nursing program. Samantha Manlosa Sanchez had provided the necessary evidence in meeting the initial school approval requirements, laws and regulation, for compliance at Gurnick Academy of Medical Arts Associates Degree Nursing Program. Gurnick Academy of Medical Arts was originally established in 2004 in San Mateo Campus. Gurnick Academy of Medical Arts is a private post-secondary institution and holds national institutional accreditation by the Accrediting Bureau of Health Education Schools (ABHES). Gurnick Academy is approved to operate by the California Bureau of Private Postsecondary Education. The college offers diploma, associate, and bachelor degree programs in 12 specialized allied health programs, vocational nursing, associates in vocational nursing and RN to BSN online program. Continuing approval and accreditation for the programs is maintained in good standing. Gurnick Academy VN-NCLEX pass rates have stayed consistently above the BVNPT regulation.

Gurnick Academy of Medical Arts nursing program is located at 7335 North Palm Bluffs Avenue Fresno, CA 93711. The campus consists of 15,814 square feet of space dedicated to the Registered Nurse and Vocational nursing programs. The campus houses 7 classrooms, skills lab and simulation lab, computer lab, library, faculty offices, and dedicated break rooms for staff and students. Spacious classrooms are available and capable of accommodating up to 51 students. The Associate Degree Nursing Program has four (4) dedicated classrooms for lecture. The nursing faculty office is 560 square feet, equipped with desk, office chair, cabinet, book shelves, telephone and ring central cloud-based communication for phone calls and meetings, printer and scanner. There is space designated for faculty to conduct and individual meeting with students. The faculty and students will be able to discuss grades, remediation, advising, conflict resolution with utmost confidentiality.

The library is 402 square feet and is equipped with twelve (12) computers, and two (2) printers to for students in education and research projects. Online Portal Internet is available to students for idea sharing, communication between faculty and students, quizzes and research exchange, email communications and grades and attendance verification and review. In addition to on-campus library Gurnick Academy provides its student’s an academic resource electronic library. Gurnick Academy is affiliated with the Library Information Resources Network (LIRN) to provide “professionally curated digital library”. Gurnick Academy LIRN offers librarian support and
consultation to its users. Students have access to a database of scholarly journals, magazines, newspapers, trade publications, and books. The databases include CINAHL, ERIC, EBSCO, GALE Cengage, PUBMED, ProQuest and is staffed by a research librarian. The computer lab has 38 laptops, 38 desks, 38 chairs, printer, instructor working station and computer, whiteboard, and projector screen.

The Nursing Skills Lab has 5 beds with static, high fidelity manikins, hospital equipment to simulate settings for adult, obstetric & newborn, and pediatric patient care. The laboratory is equipped with supplies necessary for nursing skills practice and for skills check-off performance.

The college plans to separate the simulation lab from the skills lab. The simulation lab has 691 square feet space which will include 3 patient care areas, and space dedicated for the control room. The new simulation lab will be open and available to use on December 01, 2017. The new simulation lab will house the high-fidelity manikins (METIman, Noelle, Hal-Newborn, Hal-Pediatric). The college purchased a new Hal-Adult, Hal-Pediatric, Simple Simon, Simple Susie, supplies and equipment for the simulation lab to be delivered on October 06, 2017. A simulation lab coordinator will be managing the clinical learning lab and simulated learning experiences. The simulation lab coordinator is scheduled to attend the Gaumard Scientific Training on September 19-21, 2017 in Miami, Florida. The training will include an introduction to tether less simulation, virtual monitors, communications, basic troubleshooting, scenario review, Noelle and Labor, automatic mode, live Simulation, HAL 3201, and Victoria 2200. In addition, the college has plans for collaborating with a doctorial prepared nurse educator to assist faculty implementing simulation. The simulation coordinator will have training on how to conduct the simulation. Simulation training for faculty is critical to the success of implementing an effective simulation learning experience.

The recruitment and hiring of science course faculty were already in place as the college offers general education courses.

Student support services at the college include student services department, admissions department, financial aid, and career services.

The generic ADN program is intended to be completed in 2 years. The curriculum includes the content required for licensure and is designed to offer an Associate Degree in Nursing upon completion. The curriculum is conducted in a 15-week semester system. The program is completed in six semesters. The semester has 9-17 units of instruction. Clinical nursing component begins in the 3rd semester with Introduction/Beginning and continues in each successive semester until completion of the program. The total units for required licensure is 80 semester units.

The ADN nursing curriculum was developed in collaboration with Elsevier. Elsevier staff assisted Gurnick Academy in the re-structure and placement of curriculum content. The curriculum was mapped out to implement the 4 semester nursing courses. The syllabi were revised to organized the integration of Sherpath and Hesi into weekly outlines of topics

The total curriculum plan includes four levels of competencies: Level I – Introduction/Beginning, Level II - Intermediate, Level III – Advanced, and Level IV – Complex. The curriculum’s unifying theme and conceptual foundation is based upon Maslow’s Hierarchy, QSEN, Knowledge, Skills, and Attitudes (KSA) Nursing Process and Standards of Competent Performance. The curriculum integrates simulation in the clinical component of instruction.
The program has 20 clinical sites that signed the Facility Verification Forms (EDP-P-01a). and clinical affiliation agreements for the ADN Program. These clinical opportunities will allow access to the following nursing areas for clinical practice: Medical-Surgical (Acute) 9, Obstetrics 6, Pediatrics 9, Mental Health 6, Geriatrics 6. Setting sites include acute care and skilled nursing, psychiatric and ambulatory (clinics, urgent care, and physician practices). Majority of sites where visited during multiple sites visits June and July 2017 in Fresno and surrounding hospitals locations.

No Public Comment

Motion: Trande Phillips made a motion to Table the vote until the February 2018 Board meeting.

7.7 Progress Report on Transition Phase for Separation of Compton College Associate Degree Nursing Program from El Camino College Associate Degree Nursing Program

Badrie Caraway, NEC, presented this report.

BACKGROUND: In August 2006, due to a change in the Compton College accreditation status, a Memorandum of Understanding (MOU) was approved by the El Camino Community College District Board of Trustees to provide educational support services to the Compton Community College District residents. Through the agreement, El Camino College - Compton Education Center (CEC) was formed. The CEC adopted the ECC Nursing Program curriculum, as well as the ECC Nursing Program policies and procedures. The Nursing Program at the ECC is a part of Health Sciences and Athletics Division, and the CEC is part of Division 1- Health, Natural Sciences and Human Services. Wanda Morris, RN, CNS, MN, EdD, has been Director of Nursing for the Associate Degree Nursing (ADN) Program at both campuses since January 6, 2015.

On July 7, 2017, NEC received an e-mail from Dr. Wanda Morris, PD, informing Nursing Education Consultant (NEC) that on Wednesday, June 7, 2017 the Accrediting Commission for Community and Junior Colleges (ACCJC) granted initial accreditation status to Compton College; this action established Compton College as an accredited college. In addition, on June 27, 2017, Governor Brown signed the 2017-2018 California State Budget, which includes $11,300,000 for Compton Community College District (CCCD) to support the Compton College transition to an accredited institution under the authority of the Compton District Board of Trustees. As the CCCD enters into the next phase of the partnership planning, a retreat has been planned to determine what is required to discuss the transition of the various programs from El Camino College to the CCCD. The Nursing program would be one of the programs discussed.

In response to Dr. Morris e-mail request, a site visit was conducted by NEC on 08-11-2017, as the initial transition meeting toward the process of separation of Compton College Nursing Program from the El Camino College Nursing Program. Meetings were held with Compton College Administrative team members from both Compton Education Center and El Camino College, (Mrs. Barbara Perez, Vice President, Mr. Abiodum Osaninpju, Dean of student Learning Division 1, and Mrs. Shankweiler, VP of Academic Affairs from El Camino College), and faculty from both El Camino and Compton Colleges, and the following areas of concern have been discussed:

1. Administration & Organization of Nursing Program-Future plan should include the recruitment of the Program Director (PD) for the stand-alone Compton College Nursing Program.

2. Major Curriculum Revision and faculty roles and responsibilities were discussed. Currently faculty from both campuses are conducting joint meetings to revise the current curriculum. The revised curriculum will be submitted for BRN approval, and the approved curriculum will be used for both campuses.
3. NCLEX pass rate- Compton College NCLEX Pass rate is currently 71% (below 75%). Per
Board rules & regulations, Compton College should demonstrate the NCLEX pass rate of 75% or
above for one year (July 1, 2017 to June 30, 2018), to be eligible for presentation to the ELC as a
standalone program.

The program has submitted a detailed progress report on September 14, 2017, addressing the above
areas of concern, as summarized in the attached documents. Additionally, the program Director will
be submitting quarterly reports, and the NEC will write the progress reports informing Education
and Licensing Committee (ELC) of the Compton College transition status.

No Public Comment

7.8 Information Only: NCLEX Pass Rates Update
Katie Daugherty, NEC, presented this report.

BACKGROUND: The Board of Registered Nursing receives quarterly reports from the National
Council of State Boards of Nursing (NCSBN) about the NCLEX-RN test results by quarter and with
an annual perspective. The following tables show this information for the last 12 months and by each
quarter.

NCLEX RESULTS FIRST TIME CANDIDATES
October 1, 2016-September 30, 2017*/**

<table>
<thead>
<tr>
<th>JURISDICTION</th>
<th>TOTAL TAKING TEST</th>
<th>PERCENT PASSED %</th>
</tr>
</thead>
<tbody>
<tr>
<td>California*/**</td>
<td>11,840</td>
<td>90.06</td>
</tr>
<tr>
<td>United States and Territories</td>
<td>157,042</td>
<td>86.94</td>
</tr>
</tbody>
</table>

CALIFORNIA NCLEX RESULTS–FIRST TIME CANDIDATES
By Quarters and Year October 1, 2016-September 30, 2017*/**

<table>
<thead>
<tr>
<th>10/01/16-12/31/16</th>
<th>1/01/17-3/31/17</th>
<th>4/01/17-6/30/17</th>
<th>7/01/17-9/30/17</th>
<th>10/1/16-9/30/17</th>
</tr>
</thead>
<tbody>
<tr>
<td># cand. % pass</td>
<td># cand. % pass</td>
<td># cand. % pass</td>
<td># cand. % pass</td>
<td># cand. % pass</td>
</tr>
<tr>
<td>1,762 86.78</td>
<td>3,254 90.72</td>
<td>2,209 87.51</td>
<td>4,615 92.07</td>
<td>11,840 90.06</td>
</tr>
</tbody>
</table>

*Includes (0), (0), (1) and (3) “re-entry” candidates

**2016 NCLEX-RN Test Plan and Passing Standard: The detailed versions (Candidate and Educator) of the 2016 NCLEX-RN Test Plan are now available on the NCSBN website at www.ncsbn.org. The 2016 NCLEX-RN Test Plan is effective April 1, 2016 through March 31, 2019. The NCLEX-RN Passing Standard will remain at the current level of 0.00 logit that was instituted April 1, 2013. This passing standard will remain effective through 3.31. 2019. A logit is a unit of measurement to report relative differences between candidate ability estimates and exam item difficulties.

Nursing Education Consultants (NECs) monitor the NCLEX results of their assigned programs.
When a program’s annual first time candidate pass rate is below 75% for the academic year (July 1-June 30), the NEC sends the program written notice of non-compliance (per CCR 1431). The program submits a detailed written assessment of the factors contributing to the annual substandard pass rate along with a corrective action plan to improve the annual rate. The NEC summarizes the program’s NCLEX assessment and improvement action plans in the ELC/Board meeting materials per the 3/16 revision of the Licensing Examination Passing Standard EDP-I-29 document. If a second consecutive year of annual substandard performance occurs, a continuing
approval visit will be scheduled within six months, and the NEC’s continuing approval visit findings reported to ELC with program representatives in attendance per EDP-I-29 as included in the Program Directors’ Handbook Section 8.

**No Public Comment**

### 7.9 Licensing Program Update

Christina Sprigg, Chief- presented this report.

**PROGRAM UPDATE**

**LICENSING:**

The Licensing Program evaluators are currently processing the initial review of exam and endorsement applications received in September. The Licensing Chief and Assistant Executive Officer continue to present an overview regarding the application and eligibility process to California students at every Board petitioner hearing day. This month they will be conducting two presentations on both petitioner hearing days.

The Board continues to utilize the CloudDrive to receive electronic transcripts from California programs and we are prepared to begin receiving electronic transcripts for the Fall graduating classes. We have taken feedback from past seasons and have made efforts to streamline business processes and are confident we will see the continued success of the BRN’s CloudDrive initiative. The Board is currently in the process of initiating a pilot program for accepting electronic transcripts from third party vendors for out of state applicants. A designated email address has been created to solely accept electronic transcripts from out of state school and transcript vendors via a secured method. We expect full implementation once we have refined our internal business processes to ensure a smooth and accurate procedure.

I attended the annual California Organization of Associate Degree Nursing Program Directors conference on October 18, 2017 and gave a presentation regarding the licensure process. The presentation outlined the updates that were made to the 2017 Director’s Handbook, the process of submitting electronic transcripts, the process on how to apply online for the examination application, the new deficiency statements viewable on BreEZe, the NCLEX registration process and our processing timeframes. Stacie Berumen provided an overview on the reporting of prior convictions and discipline. The presentation was well received by the nursing program deans and directors. Stacie and I responded to questions and provide clarifications during the questions session. The feedback since the presentation has been positive regarding the processing of California applications. All were happy with the electronic transcript submission process and how quickly applications are processed after receipt of those transcripts. I will be following up and providing the deans and directors with a copy of the presentation, additional information on the BreEZe deficiency statements and a screen by screen tutorial on the online Exam application.

The DCAs SOLID Occupational Change Management (OCM) unit has completed a draft of the business process maps for the Licensing Support, US Evaluations, and Advanced Practice units and is in the process of completing the maps for the International Evaluations unit. Once the process is completed the Board will consider all recommendations made for potential changes that could assist in streamlining and reducing processing timeframes.
**The Green Project:**
The Board launched The Green Project in September and has been making progress with the implementation of several of the enhancements.

Green Project enhancements:
- **Electronic Transcripts from Out of State schools**
  - The licensing management is currently piloting this item and will be implementing fully over the next 3 months.
- **Implementation of online only initial applications by exam and endorsements**
  - This project is still slated for implementation in early 2018 and is pending implementation to of changes to BreEZe online applications.
- **Deficiency notification statements to applicants via their personal online BreEZe accounts**
  - Has been implemented for all application types. BRN licensing staff have been trained on adding deficiency information to the BreEZe application and applicants are now able to view this information by logging into their BreEZe accounts.
- **Improved license lookup/verification in BreEZe**
  - This month DCA launched the improved license look up and verification system in BreEZe.

Future Green Project enhancements for back office (BRN staff) BreEZe will include:
- **Implementation of work Queues for all application types**
  - Slated for implementation late 2017/early 2018
  - Work queues will allow supervisory staff to assign work directly to staff and monitor incoming workloads to ensure the Board is within statutory processing times.
- **Elimination of creating paper file folders for incoming applications**
  - Slated for implementation late 2017/2018
  - With the implementation of online only exam and endorsement applications and internal BRN BreEZe work queues the need for actual file folders will no longer be necessary to monitor incoming applications.

The initial launch of the Green Project included the elimination of the 6-page paper renewal notification for the RN and each certification. The new renewal notification is 1-page and includes notification for the RN and any certifications held by the licensee. The new renewal notification directs the licensee to renew online and no longer provides a return renewal coupon or return envelope. This change took effect with the mailing of the September renewals notices and will specifically effect the December renewal licensees.

**Staffing Updates:**
Currently the Licensing, Administration, Call Center and Renewals units has thirteen (13) permanent vacancies. Several of these vacancies are part of the recently approved BCP that became effective July 1, 2016. Others are due to staff movement and promotions. Below is a chart outlining the status of each unit’s vacancies:

<table>
<thead>
<tr>
<th>Vacant Positions – Licensing, Call Center &amp; Renewals Units</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Vacancy</strong></td>
</tr>
<tr>
<td>Licensing – Advance Practice &amp; U.S. Evaluations:</td>
</tr>
<tr>
<td>1 Program Technician II - US Evaluations</td>
</tr>
</tbody>
</table>
**NEW HIRES**

<table>
<thead>
<tr>
<th>Name</th>
<th>Classification</th>
<th>Program</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Licensing – Advance Practice &amp; U.S. Evaluations:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Brandon Tagawa</td>
<td>Associate Program Governmental Analyst</td>
<td>Licensing – US Evaluations &amp; Advance Practice</td>
</tr>
<tr>
<td>Paul Row</td>
<td>Program Technician II</td>
<td>Licensing - US Evaluations</td>
</tr>
<tr>
<td>Jagindar Sheemar</td>
<td>Program Technician II</td>
<td>Licensing – US Evaluations</td>
</tr>
<tr>
<td>Amiroop Singh</td>
<td>Program Technician II</td>
<td>Licensing – US Evaluations</td>
</tr>
<tr>
<td>Jaswinder Sheemar</td>
<td>Program Technician II</td>
<td>Licensing – US Evaluations</td>
</tr>
<tr>
<td>Paul Johnson</td>
<td>Program Technician II</td>
<td>Licensing – US Evaluations</td>
</tr>
<tr>
<td>Santiago Bupara</td>
<td>Supervising Program Technician II</td>
<td>Licensing - US Evaluations</td>
</tr>
<tr>
<td><strong>Licensing – International Evaluations &amp; Technical Support:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sylvia Doolittle</td>
<td>Program Technician I</td>
<td>Licensing Support</td>
</tr>
<tr>
<td>Syreeta Hunt</td>
<td>Program Technician I</td>
<td>Licensing Support</td>
</tr>
<tr>
<td>Pricilla Sazo</td>
<td>Program Technician I</td>
<td>Licensing Support</td>
</tr>
<tr>
<td>Joshua Pina</td>
<td>Program Technician I</td>
<td>Licensing Support</td>
</tr>
<tr>
<td><strong>Administration:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dean Fairbanks</td>
<td>Associate Governmental Program Analyst</td>
<td>Administration-Budget desk</td>
</tr>
<tr>
<td>Eloisa Zinzun</td>
<td>Staff Services Analyst</td>
<td>Administration-Admin Assistant</td>
</tr>
<tr>
<td>Brett Ryan</td>
<td>Office Technician</td>
<td>Administration- HR</td>
</tr>
</tbody>
</table>

**Call Center/Renewals Units**

<table>
<thead>
<tr>
<th>Program Technician II</th>
<th>Interviews Scheduled</th>
<th>Positions expected to be filled by end of November</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program Technician II</td>
<td>Position to be vacated November, Pending posting</td>
<td>Positions expected to be filled by end of December</td>
</tr>
<tr>
<td>Office Technician</td>
<td>Applications currently under review</td>
<td>Interviews to be scheduled in early November</td>
</tr>
<tr>
<td>Program Technician</td>
<td>Pending approval of potential candidates.</td>
<td>Positions expected filled by mid-November</td>
</tr>
</tbody>
</table>

**Licensing – International Evaluations & Technical Support:**

<table>
<thead>
<tr>
<th>Program Technician I</th>
<th>Pending review by HR</th>
<th>Position expected to be filled by end of December</th>
</tr>
</thead>
<tbody>
<tr>
<td>Supervising Program Technician I – Technical Support</td>
<td>Position posted</td>
<td>Position expected to be filled by end of December</td>
</tr>
<tr>
<td>Staff Services Analysts</td>
<td>Advertisements pending HR review</td>
<td>Positions expected to be filled by January</td>
</tr>
</tbody>
</table>
STATISTICS:

The Board is currently using Quality Business Interactive Report Tool (QBIRT) and can create and run various reports upon request. DCA currently offers a basic introductory class to the QBIRT reporting tool, but is also in the process of developing a more in-depth training that will instruct staff on how to develop and run more complex, customized reports. The Board will be able to utilize custom reports to find areas of improvement in our processes, as well as better predict workflow fluctuations. Below is the total number of applications the Board has received by fiscal year:

<table>
<thead>
<tr>
<th>Application Type</th>
<th>Fiscal Year 2013-2014</th>
<th>Fiscal Year 2014-2015</th>
<th>Fiscal Year 2015-2016</th>
<th>Fiscal Year 2016-2017</th>
<th>Fiscal Year 2017-Current</th>
</tr>
</thead>
<tbody>
<tr>
<td>Exams</td>
<td>14,284</td>
<td>15,777</td>
<td>16,059</td>
<td>16,879</td>
<td>2,901</td>
</tr>
<tr>
<td>Endorsement</td>
<td>9,679</td>
<td>13,534</td>
<td>15,713</td>
<td>20,040</td>
<td>5,951</td>
</tr>
<tr>
<td>Repeat/Reapply</td>
<td>5,716</td>
<td>7,734</td>
<td>6,879</td>
<td>7,043</td>
<td>1,674</td>
</tr>
<tr>
<td>Advanced Practice</td>
<td>6,921</td>
<td>8,084</td>
<td>6,701</td>
<td>9,774</td>
<td>3,090</td>
</tr>
<tr>
<td>Total</td>
<td>36,600</td>
<td>45,129</td>
<td>45,352</td>
<td>53,736</td>
<td>13,616</td>
</tr>
</tbody>
</table>

Public Comments:
Judy Corless

8.0 Report of the Legislative Committee
Donna Gerber, Chairperson

Kay Weinkam, NEC
Lorraine Clarke, Legislative Analyst

Discussed Bills of Interest to the Board of Registered Nursing (Board) and Recommended that the Board Adopt or Modify Positions on the Bills Introduced During the 2017-2018 Legislative Session

Legislative bills impacting registered nursing education or practice

<table>
<thead>
<tr>
<th>BILL #</th>
<th>AUTHOR/ BILL SPONSOR</th>
<th>SUBJECT</th>
<th>COMM POSITION (date)</th>
<th>BOARD POSITION (date)</th>
<th>BILL STATUS as of October 27, 2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>AB 40</td>
<td>Santiago/ California ACEP</td>
<td>CURES database: health information technology system</td>
<td>Watch (8/9/17)</td>
<td>Watch (9/7/17)</td>
<td>Chapter 607, Statutes of 2017</td>
</tr>
<tr>
<td>Bill No.</td>
<td>Sponsor</td>
<td>Description</td>
<td>Vote 1</td>
<td>Vote 2</td>
<td>Chapter or Act</td>
</tr>
<tr>
<td>---------</td>
<td>---------</td>
<td>------------------------------------------------------------------------------</td>
<td>----------</td>
<td>----------</td>
<td>-----------------------------------------</td>
</tr>
<tr>
<td>HR 6</td>
<td>Burke</td>
<td>Relative to women’s reproductive health</td>
<td></td>
<td></td>
<td>Adopted January 30, 2017</td>
</tr>
<tr>
<td>AB 334</td>
<td>Cooper/ California Clinical Forensic Medical Training Center</td>
<td>Sexual assault</td>
<td>Watch (8/9/17)</td>
<td>Watch (9/7/17)</td>
<td>Senate Pub Safety</td>
</tr>
<tr>
<td>AB 391</td>
<td>Chiu/ California Pan Ethnic Health Network &amp; others</td>
<td>Medi-Cal: asthma preventive services</td>
<td>Oppose (8/9/17)</td>
<td>Oppose (9/7/17)</td>
<td>Vetoed</td>
</tr>
<tr>
<td>AB 422</td>
<td>Arambula/ California State University</td>
<td>California State University: Doctor of Nursing Practice Degree Program</td>
<td>Watch (3/8/17)</td>
<td>Watch (4/5/17)</td>
<td>Chapter 702, Statutes of 2017</td>
</tr>
<tr>
<td>AB 882</td>
<td>Arambula/ California School Nurses Organization</td>
<td>Pupil health care services: School Nursing and Pupil Health Care Services Task Force</td>
<td>Watch (5/10/17)</td>
<td>Watch (4/5/17)</td>
<td>Assembly APPR</td>
</tr>
<tr>
<td>AB 1048</td>
<td>Arambula/ California Medical Association</td>
<td>Health care: pain management and Schedule II drug prescriptions</td>
<td>Watch (8/9/17)</td>
<td>Watch (9/7/17)</td>
<td>Chapter 615, Statutes of 2017</td>
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<tr>
<td>Bill Number</td>
<td>Sponsor</td>
<td>Description</td>
<td>Support</td>
<td>Watch</td>
<td>Status</td>
</tr>
<tr>
<td>-------------</td>
<td>---------</td>
<td>-------------</td>
<td>---------</td>
<td>-------</td>
<td>--------</td>
</tr>
<tr>
<td>SB 349</td>
<td>Lara/UNAC/UHCP SEIU California</td>
<td>Chronic dialysis clinics: staffing requirements</td>
<td>Watch (8/9/17)</td>
<td>Watch (9/7/17)</td>
<td>Assembly Inactive File</td>
</tr>
<tr>
<td>SB 419</td>
<td>Portantino</td>
<td>Medical practice: pain management</td>
<td>Watch (5/10/17)</td>
<td>Watch (4/5/17)</td>
<td>Senate BP&amp;ED</td>
</tr>
<tr>
<td>SB 562</td>
<td>Lara/ CNA-National Nurses United</td>
<td>The Healthy California Act</td>
<td>Support (8/9/17)</td>
<td>Support (9/7/17)</td>
<td>Assembly Desk</td>
</tr>
</tbody>
</table>

**Legislative bills impacting BRN jurisdiction**

<table>
<thead>
<tr>
<th>Bill #</th>
<th>Author (Sponsor)</th>
<th>Subject</th>
<th>Committee Position</th>
<th>Board Position</th>
<th>Bill Status*</th>
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<tr>
<td><strong>Assembly Bills</strong></td>
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<td>AB 12</td>
<td>Cooley</td>
<td>State government: administrative regulations: review</td>
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<td>Watch 2/8/17</td>
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<td>AB 77</td>
<td>Fong</td>
<td>Regulations: effective dates and legislative review</td>
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<td>Watch 2/8/17</td>
<td>Assembly APPR</td>
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<tr>
<td><strong>AB 208</strong></td>
<td>Eggman (American Civil Liberties Union, Coalition for Humane Immigrant Rights, Drug Policy Alliance, Immigrant Legal Resource Center, Mexican American Legal Defense and Education Fund)</td>
<td>Deferred entry of judgment: pretrial diversion</td>
<td>Oppose 3/8/17</td>
<td>Watch 9/7/17</td>
<td>Chapter 778, Statutes of 2017</td>
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<td>AB 241</td>
<td>Dababneh</td>
<td>Personal Information: privacy: state and local agency breach</td>
<td>Watch 5/10/17</td>
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<td>Assembly APPR</td>
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<tr>
<td>AB 703</td>
<td>Flora</td>
<td>Professions and vocations: licenses: fee waivers</td>
<td>Support 5/10/17</td>
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<td>Assembly B&amp;P</td>
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<tr>
<td>AB 710</td>
<td>Wood</td>
<td>Department of Consumer Affairs: boards: meetings</td>
<td>Support 5/10/17</td>
<td>Support 6/8/17</td>
<td>Senate BP&amp;ED</td>
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<tr>
<td>AB 827</td>
<td>Rubio (Coalition for Humane Immigrant Rights)</td>
<td>Department of Consumer Affairs: task force: foreign-trained professionals.</td>
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<td>4/5/17 Watch</td>
<td>Senate APPR</td>
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<td>Bill #</td>
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<td>Subject</td>
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<tr>
<td>AB 1005</td>
<td>Calderon</td>
<td>Professions and vocations: fines: relief</td>
<td>--</td>
<td>4/5/17 Watch</td>
<td>No longer applicable</td>
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</tbody>
</table>

**Senate Bills**

| SB 27 | Morrell | Professions and vocations: licenses: military service | -- | Watch 2/8/17 | Senate APPR |
| SB 181 | Berryhill | Administrative Procedure Act: repeal of regulations | -- | -- | Senate GO (failed) |
| SB 247 | Moorlach | Professions and vocations: license requirement: business: surety bond requirement | Watch 3/8/17 | -- | No longer applicable |
| SB 259 | Wilk | Reports | -- | -- | Senate GO (failed) |
| SB 359 | Galgiani | Professions and vocations: military medical personnel | -- | Watch 4/5/17 | Senate Rules |
| SB 496 | Canella | Indemnity: design professionals | Watch 3/8/2017 | Watch 4/5/17 | No longer applicable |
| SB 547 | Hill | Professions and vocations: weights and measures | Support 8/9/17 | Support 9/7/17 | Chapter 429, Statutes of 2017 |
| SB 555 | Morrell | Regulations: 5-year Review and Report | -- | Watch 4/5/17 | Senate GO (failed) |
| SB 572 | Stone | Healing Arts Licensees: Violations: Grace Period | -- | Watch 4/5/17 | Senate BP&ED |
| SB 641 | Lara (CMA) | Controlled Substance Utilization Review and Evaluation System: Privacy | Watch 5/10/17 | Watch 4/5/17 | Assembly PUB SAFE |
| SB 715 | Newman | Department of Consumer Affairs: regulatory boards: removal of board members | -- | Watch 6/8/17 | Assembly inactive file |
| SB 762 | Hernandez | Healing arts licensee: license activation fee: waiver | Watch 5/10/2017 | Watch 6/8/17 | Assembly B&P |
| SB 796 | Hill | Uniform Standards: Naturopathic Doctors Act: Respiratory Care Practice Act | Watch 8/9/2017 | Watch 9/7/17 | Chapter 600, Statutes of 2017 |
| SB 799 | Hill | Nursing | Support bill as introduced 5/10/17 | Support bill as introduced 6/8/17 | Chapter 520, Statutes of 2017 |
9.0 Report of the Intervention/Discipline Committee
   Barbara Yaroslavsky, Chairperson

9.1 Complaint Intake and Investigations Update
   Joe Pacheco, Chief, Complaint Intake and Investigations

   Staffing

   Both the North and South Investigation Units are fully staffed. The Complaint Intake Unit recently filled the vacant Expert Practice Coordinator position, and an open Office Technician position should be filled in November.

   BRN Enforcement Audit Update

   As the Board is aware, in 2016 the BRN Enforcement Division underwent a review by the State Auditor. The remainder of my report will focus on issues occurring prior to the Audit, and the Complaint Intake and Investigation Units’ actions in response to the December 2016 audit report.

   Improvement in Data Availability

   Although the BRN transitioned to the new BreEZe computer system in October 2013, the data reporting capability of the system, at first, was under-developed. Prior to April 2015, BreEZe was not capable of reporting the volume of complaints received by BRN, nor was it able to report our overall disciplinary timelines.

   DCA’s published BRN Enforcement Performance Reports from December 2014, March 2015, Sept 2016, and Jun 2017 are attached to this report for comparison purposes.

   Prior to and during the Audit of 2016, our Enforcement Division had already begun taking steps to improve workflow, make efficiencies in our business processes, and address Complaint Intake and Investigation case processing timeframes.

   After the release of the December 2016 Audit Report, a large number of previously submitted BRN requests for system improvements to the BreEZe system were “fast-tracked” by the DCA Office of Information Services (OIS). Through a renewed partnership with the DCA-OIS, BRN gained much needed data collection and business process improvements in the BreEZe system. BRN Staff & Management was also given access to, and training for newly enhanced features allowing us to run customized reports as needed.

   By March 2017, DCA-OIS, in partnership with BRN staff, developed more than 30 standardized management information reports which tracked over 50 individual enforcement case processing milestones. Summaries of these data have been provided to the Board and Committee in recent meetings.

   BRN Actions in Response to the Audit

   The audit report contained 26 business process improvement recommendations. The BRN Enforcement Division has taken significant and decisive action on every single recommendation in the audit report. In addition to the data improvements previously mentioned, BRN Audit Response actions have included the following:
• Complaint Intake and Investigation managers have revised or re-written all unit policies and procedures manuals.
• Timeframe guidelines have been established for all critical case processing milestones.
• Management Monitoring Plans have been established for managers to follow. Additionally, these guidelines instruct managers how and when to conduct workload reviews/audits of the workloads under their supervision, and provide instructions in the evaluation and use of the various data reports.
• With leadership from the Office of the Attorney General, in partnership with DCA, DOI and BRN, a formal training curriculum was created for all sworn and non-sworn staff investigating BRN cases. Training was provided to all Sworn and Non-Sworn investigators responsible for investigating BRN cases. A training manual was also developed and distributed to all BRN and DOI investigators.
• A successful print, mail, and social media recruitment campaign was developed to hire needed Expert Practice Consultants for the enforcement workload. Our Expert Database has been updated to capture recruitment data. This data will be utilized to evaluate the most effective recruitment methods for future use.
• The backlog of unassigned investigations has been eliminated. All cases are assigned within 10-days of referral to the investigation unit. This was accomplished by increasing each investigator’s average caseload by 25%.
• BRN and DOI management meet on a regular basis to discuss mutual case issues. Together, we have agreed upon investigation timeline goals of 240 days. Data reports show significant progress toward meeting those goals.

Results of Process Improvements

As mentioned earlier, the BRN Enforcement Division was working on a multitude of process improvements prior to the State Audit. From March 2015 (the earliest Breeze reports available) to September 2016 (mid-way through audit):

• Average monthly complaint volume increased by 26% (561 vs. 707 per month respectively),
• At the same time, Intake Cycle time, the average time from complaint receipt to investigations, decreased by 79% (23 days vs. 4 days).
• Formal Discipline Cycle Time decreased by 156 days (857* vs 701 days)

*-Data entry parameters were not established as BreEZ reports were still being developed.

From September 2016 to June 2017 (post-Audit):
• Average monthly complaint volume increased very slightly (701 vs 727 per month)
• Average Intake Cycle Time also increased very slightly (4 vs. 5 days)
• Formal Discipline Cycle time decreased by another 89 days (701 vs 612 days). Since BreEZ began reporting this performance measure in early 2015, BRN disciplinary cycle time has decreased by a total of 245 days.

To increase our efficiency and productivity, the Complaint Intake Unit has taken on additional assignments, staff are working overtime, and coming in on multiple weekends throughout the year. Management has engaged staff, listened to their collective ideas, and have implemented many of the staff recommendations. We have also tasked the Complaint Intake and Investigation Units with
a multitude of timeframe improvement goals. Individual investigator’s workloads were increased dramatically. Their current pending workload represents nine months of unit productivity.

Our dedicated staff have taken on a plethora of new procedures and workflow changes. Our investigation and complaint processing timeframes have improved dramatically while maintaining the same staffing levels for the past three years. It is our dedicated staff who are responsible for these successes, and I believe they deserve a very public commendation.

Management continues to evaluate our data and business processes, and there are always opportunities for minor improvements. However, to maintain current levels of productivity, with a goal to continue our improvement in investigation and complaint processing timeframes, we need more people. With the rise in the number of licensees, and a sustained increase in complaint volume, with our current staffing it is my belief the workloads within the Complaint Intake and Investigations units are not sustainable long term.

*No public Comment*

**9.2 Discipline and Probation Program Update**

Shannon Silberling, Chief, Discipline, Probation and Intervention

**PROBATION UNIT**

There are no vacancies in the probation unit as all positions are now filled. The probation unit is working on redirecting a position from the discipline unit to add another probation monitor with the intent to decrease the cases per probation monitor. The unit is comprised of 3 SSA’s and 8 AGPA’s, making the case load per monitor approximately 139 cases which includes tolled probationers. If approved to add the additional position the unit could potentially decrease the cases per monitor to 127 cases per monitor.

The average case load determined by DCA many years ago was 75 cases per monitor.

Uniform Standards, once approved, will require a more multifaceted monitoring for anyone that is deemed to meet the criteria for being chemically dependent. An analyst that is monitoring these cases, should have a reduced caseload due to the complexity of these cases.

Since the Board has not been successful in obtaining the additional positions, we have had to reassess our business processes and implement changes to not only reduce our caseloads but streamline the probation process. Some of these new business processes include the following:

- *Forms are now available online for probationers to easily access.*

- *Petitioners can now stipulate to early termination of probation allowing the Board to electronically vote. This new process allows for a compliant probationer to be released from probation expeditiously and removes the backlog of cases waiting to be heard by the board.*

- *We have begun sending out orientation packets for new probationers via e-mail. This allows the probationer to receive all materials needed within a couple days of becoming effective and giving them time to review the materials prior to their initial meeting with their probation monitor, as well as giving additional time to get employment approved.*
We are teaming with SOLID to instruct the Probation Monitoring Module of DCA’s SOLID Enforcement Academy.

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<tbody>
<tr>
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<td># of Chemical Dependency Probationers</td>
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<td>Pending Cases at AGO for further discipline of licensure</td>
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<td>91</td>
<td>130</td>
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<td>Total Probationers</td>
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**CITE AND FINE**

We are currently fully staffed with 1 AGPA, 1 SSA and 1 OT.

We began issuing citations for the licensees that have been non-compliant with fingerprints. We have issued anticipate this to be completed by the end of this calendar year. As of 10/16/2017 we have issued 77 fingerprint citations. Of those, we have received full payment on 5 and held 15 appeal conferences.

We currently have only 1 citation case at the Attorney General’s Office for a Formal Appeal Hearing.

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<th>FY 2015/16</th>
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<td>Amount Received</td>
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<td>$ 202,614</td>
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**DISCIPLINE UNIT**

We currently have one Office Technician position vacant. We expect to fill the vacancy on or before November 1, 2017. This will give us a total of 5.5 AGPA’s and 5 SSA’s and 3 OT’s.

We have been transmitting FastTrack (Out of State Discipline and Convictions) and Petition cases as of July 20, 2017, to the Attorney General’s Office, via the Cloud. We will be providing updates on case aging as well as when a full roll out can be expected.

We are currently running case aging reports on a weekly basis to ensure that all cases are being processed accordingly. As of 10/16/2017 we had referred 341 licensees to the AG. This is approximately a 5% increase from the same time last year. If we continue to submit cases at this rate, we will submit over 1,250 cases by end of this fiscal year.
<table>
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<tr>
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<td>EO Signed Surrenders</td>
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<td>Withdrawals of SOI</td>
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<td>Decisions Adopted</td>
<td>1,641</td>
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No public Comment

9.3 Intervention Program Update
Shannon Silberling, Chief Discipline, Probation and Intervention

INTERVENTION PROGRAM UPDATE

Staffing
We are pleased to report that the unit is fully staffed.

Program Update

On August 17th, 2017, the Intervention program hosted the third in a series of approximately four Mental Health Ad Hoc Committee meetings. The committee members worked effectively to review all current practices and discussed different approaches and potential changes. The purpose of this committee is to develop best practice strategies to meet the unique needs of nurses with mental illness and to develop a model rehabilitation plan for use by all the Intervention Evaluation Committees.

On August 23, 2017, Intervention program staff and Virginia Matthews, MAXIMUS Project Manager provided an Intervention Program presentation to the Citrus Valley Health Partners. Topics that were presented included information about Substance Use Disorder in Nursing and the Intervention Program. Two back to back presentations were conducted, one for new RN staff and the other for RN managers. Attendees communicated that they appreciated the information, specifically how to recognize the signs and symptoms of SUD and learning that there is help and hope for RNs in the form of the Intervention Program.

The Board of Registered Nursing’s Intervention program was present at this year’s California State Capitol on September 6, 2017, for the annual Recovery Happens rally. Recovery Happens is a statewide campaign for everyone to celebrate the lives of people who are recovering from alcohol and/or drug addiction. Recovery Happens provides the perfect platform to inform Californians about the positive effects that recovery and treatment have on our communities. The rally brought over 5,000 people together for a day to celebrate recovery.

The Intervention program hosted the annual Intervention Liaison Committee meeting on September 19, 2017, at the San Diego Hilton Garden Inn. Board member and Intervention Discipline Committee Chairperson, Barbara Yaroslavsky, Assistant Executive Officer, Stacie Berumen, Enforcement Chief, Shannon Silberling, the Intervention Program Manager, Don Henry Walker, Intervention Program staff, the Maximus Project Director, Virginia Matthews and case managers, along with representatives from the Intervention Evaluation Committees, two Public Members and one Nurse Support Group Facilitator were in attendance. The Intervention Liaison Committee meeting is held annually to maintain the continuity and integrity of the program in addition to
providing a forum to vote on pertinent policy proposals that support the enhancement of the Intervention Program.

On September 20, 2017, Intervention program staff and Virginia Matthews, MAXIMUS Project Manager presented an educational outreach presentation to the Hospital Association of Southern California. There were approximately 33 attendees consisting of Nurse Managers, HR personnel, Pharmacists and a Psychologist. Topics that were presented included What is Substance Use Disorder, Signs and Symptoms, the impact of Substance Abuse in the Workplace and what is the Intervention Program? In addition, we were fortunate to have two former Intervention Program participants on the panel who spoke about their addictions and participation in the program.

On September 28, 2017 Intervention Program staff member Gina Skinner and MAXIMUS Program Manager, Virginia Matthews spoke to approximately 20 senior nursing directors, managers, advanced practice nurses, pharmacists, and radiologists at Scripps Mercy Hospital, San Diego. The topics covered were, what is the Intervention Program, what is Substance Use Disorder (SUD), Signs, Symptoms, and the Impact of SUD in the workplace.

A staff nurse who is a graduate of the Intervention Program and who currently co-facilitates a NSG, spoke about her SUD and her experience in the program. Staff found the presentation to be informative and helpful as they move forward in creating and communicating a “trusted colleague” network.

Intervention Program staff member Gina Skinner and MAXIMUS Clinical Case Manager Stephanie Trumm provided a presentation to Mercy Mt. Shasta on October 4, 2017. The audience was made up of HR staff, senior nurse managers, and nursing staff. The topics covered were Substance Use Disorder in the workplace, and what is the Intervention Program. Staff found the presentation to be informative and helpful.

**Intervention Evaluation Committees (IEC)**

There are currently two physician member vacancies, one in Oakland (IEC 13) and one in San Jose (IEC 7).

**Statistics – Intervention**

The Statistical Summary Report is attached. As of September 30, 2017, there have been 2,222 successful completions.

**No public Comment**

**9.3.1 Request Additional Mental Health Ad-Hoc Committee meeting**

The establishment of the Mental Health Ad Hoc Committee was approved by the Board on November 5, 2015, to develop best practice strategies to meet the unique needs of nurses with mental illness and to develop a model rehabilitation plan for use by all the Intervention Evaluation Committees. It was initially reported that there would be a total of four meetings. Three meetings have been conducted and we respectfully ask approval for an additional meeting in order to complete the business of the committee.
No public Comment

Motion: Barbara Yaroslavsky-Approve Request for Additional Mental Health Ad-Hoc Committee meeting
Second: Trande Phillips

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10.0 Report of the Nursing Practice Committee
Elizabeth Woods, RN, Chairperson

10.1 Information and Possible Action Regarding: Comprehensive Addiction and Recovery Act (CARA), Public Law 114-198, Required Training of Nurse Practitioners and Physicians Assistants and Adding Section 2836.4 to Business and Professions Code

Janette Wackerly, Supervising NEC

Legislation enacted during 2017 session, Senate Bill 554 (Stone) Chapter 242, signed by the Governor on September 11, 2017 becoming effective January 1, 2018 and is an act to add Section 2836.4 NP Nurse Practitioner and 3502.1.5 Physician Assistant. Buprenorphine ordering or furnishing by a nurse practitioner when done in compliance with the provisions of the Comprehensive Addition Recovery Act (Public Law 114-198) enacted July 22, 2016

CARA Act
On July 22, 2016, President Obama signed the Comprehensive Addiction and Recovery Act (CARA) into law as Public Law 114-198. One of CARA’s important provisions expands access to substance use treatment services and overdose reversal medications—including the full spectrum of services from prevention to medication-assisted treatment (MAT) and recovery support—by extending the privilege of prescribing buprenorphine in office-based settings to qualifying nurse practitioners (NPs) and physician assistants (PAs) until Oct. 1, 2021.

Proposed Learning Objectives
CARA requires that NPs and PAs complete 24 hours of training to be eligible for a prescribing waiver. SAMHSA has created a list of recommended learning objectives for the trainings. While we cannot require that the organizations listed in the CARA Act use these learning objectives, we are sharing them with the stakeholders. Access the Proposed Learning Objectives for the NP and PA Waiver Training – 2017 (PDF | 196 KB).

Sign Up for Courses
NPs and PAs are required to obtain no fewer than 24 hours of initial training addressing each of the topics in 21 USC 823(g)(2)(G)(ii)(IV) provided by one of the following organizations: The American Society of Addiction Medicine, American Academy of Addiction Psychiatry, American Medical Association, American Osteopathic Association, American Nurses Credentialing Center, American Psychiatric Association, American Association of Nurse Practitioners, American Academy of Physician Assistants, or any other organization that the Secretary of Health and Human Services determines is appropriate.

NPs and PAs may take the eight-hour DATA-waiver course for treatment of opioid use disorder, designed by national experts, that physicians currently take. The course is offered for free by SAMHSA through the Providers’ Clinical Support System for Medication Assisted Treatment (PCSS-MAT) (link is external).
For the additional 16 hours, SAMHSA will also offer the training for free through the PCSS-MAT once it has been developed. NPs and PAs who have completed the required training and seek to become DATA-waiver for up to 30 patients will be able to apply to do so beginning in early 2017. For more information on the upcoming launch of the application and SAMHSA-sponsored training opportunities, [sign up](link is external) for the Buprenorphine Waiver Management email list.

**Completing the Waiver NOI Form**

NPs and PAs who have completed the 24 hours of required training may seek to obtain a DATA 2000 waiver for up to 30 patients by completing the [Waiver Notification Form](#). **Effective February 27, 2017,** SAMHSA will only accept electronic submissions of the NOI. NPs and PAs may send copies of their training certificates to [infobuprenorphine@samhsa.hhs.gov](mailto:infobuprenorphine@samhsa.hhs.gov) or faxed them to 301-576-5237. These waiver applications are forwarded to the Drug Enforcement Administration (DEA), which will assign the NP or PA a special identification number. DEA regulations require this number to be included on all buprenorphine prescriptions for opioid dependency treatment, along with the NP’s or PA’s regular DEA registration number. SAMHSA shall review waiver applications within 45 days of receipt. If approved, NPs and PAs will receive a letter via email that confirms their waiver and includes their prescribing identification number.

**No public Comment**

**Motion:** Elizabeth Woods – made a motion to add Comprehensive Addiction and Recovery Act (CARA) to BRN website.

**Second:** Trande Phillips

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10.2 **Information and Possible Action Regarding: Medical Board of California’s Draft Guidelines for the Recommendation of Cannabis for Medical Purposes.**

Janette Wackerly, Supervising NEC

Medical Board voting at next Board meeting

SB 643 (McGuire) Chaptered 719 Medical Marijuana approved by the Governor October 09,2015. SB 643 contains the provisions related to physicians recommending medical cannabis.

The bill creates a new section in law related to recommending medical cannabis, which states physician recommending cannabis to a patient for medical purpose without an appropriate prior medical examination and a medical indication, constitutes unprofessional conduct. This bill prohibits a physician from recommending cannabis to a patient unless that physician is the patient’s attending physician, as defined by subdivision (a) of Section 11362.7 of the Health and Safety Code (HSC). The HSC defines an “attending physician” as an who possesses a license in good standing to practice medicine or osteopathy issued by the Board or Board of Osteopathic Medical Board of California and who has taken responsibility for an aspect of the
medical care, treatment, diagnoses, counseling, or referral of a patient. The physician also must have conducted a medical examination of that patient before recording in the patient’s medical record the physician’s assessment of whether the patient has a serious medical condition and whether the medical use of marijuana is appropriate.

The above information is taken from the following attached:
Medical Board of California, Legislative Analysis (Medical Board of California meeting February 8, 2017 Agenda Item 4)

California Legislative Information SB643 Medical Marijuana (2015-2016) Legislative Counsel’s Digest

Marijuana for Medical Purposes (statement adopted by full Medical Board on May 7, 2004 and amended in October 2014 (Medical Board of California meeting February 8, 2017 Agenda Item 3)

**No public Comment**

**Motion:** Michael Jackson- made a motion to add Information and Possible Action Regarding Medical Board of California’s Draft Guidelines for the Recommendation of Cannabis for Medical Purposes to BRN website.

**Second:** Barbara Yaroslawsky

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10.3 Information and Possible Action Regarding the Appointments to the Advanced Practice Registered Nurse Committee

Janette Wackerly, Supervising NEC, presented this report.

Update on call for applicants.

American Nurses Association of California
Association of California Nurse Leaders
California Action Coalition/Health Impact
California Association Clinical Nurse Specialist
California Association Nurse Anesthetist
California Association Nurse Practitioners
California Hospital Association
California Nurse Midwives Association
California Nurses Association
SEIU Nurse Alliance of California

The Board has received 32 APRN applications that include Certified Midwives, Certified Clinical Nurse Specialist, Certified Nurse Anesthetists and Certified Nurse Practitioners. All applications were received by October 11, 2017 deadline.
Advance practice applicants will be brought to the January 11, 2018 Practice Committee for review and consideration of appointment.

No public Comment

10.4 Information only: 2017 BRN survey of California Nurse Practitioners and Certified Nurse-Midwives

Joanne Spetz, PhD, presented this report.

The BRN commissioned the University of California San Francisco (UCSF), Center for the Health Professions to complete a survey of California Nurse Practitioners and Certified Nurse-Midwives. The purpose of the survey was to learn information about demographics, education, employment, practice and standardized procedure use from these advanced practice nurses in California. The survey is similar to one used in 2010, so trend data can begin to be collected.

A report is being drafted and Dr. Joanne Spetz from UCSF will be in attendance to provide a presentation of some of the highlights of the data.

Public Comments:
Charlotte Gullet-Moore-CMP Coach Policy Practice Committee
Percentage on diversity increased diversity to billing actions.

10.5 Information and Possible Action: Core Competencies for Basic Midwifery Practice and Standards of Practice for Nurse Midwifery

Janette Wackerly, Supervising NEC and BJ Snell, presented this report

BJ Snell PhD, Certified Nurse Midwife and chair of the Nurse Midwifery Advisory Committee provides information on the Core Competencies for Basic Nurse Midwifery Practice and Standards for Nurse Midwifery.

BJ Snell PhD, CNM, RN providing information on nurse-midwifery history of practice in CA, with statute 2746.5(c) physician supervision and CCR 1463 (c) Obtaining physician assistance and consultation when needed, and workforce challenges. Information on Certified Professional Midwife licensed by the Medical Board of California

No Public Comments

11.0 Adjournment
The meeting adjourned at 2:04 pm.

[Signatures]
Joseph Morris, PhD, MSN, RN
Executive Officer

Trande Phillips, RN
President