

**BOARD MEETING**  
**February 16-18, 2021**  
**MINUTES**

**CALL TO ORDER**

Board President Kathleen (Kat) Chinn, called the regular meeting of the Oregon State Board of Nursing to order. The Board meeting was held at the Oregon State Board of Nursing in Portland, Oregon. To comply with COVID-19 gathering restrictions, the Board meeting was held using electronic media.

**PUBLIC MEETING NOTICE**

A notice of the meeting was published on the Board of Nursing's website and sent out to the interested parties list by Executive Director, Ruby Jason, in accordance with the Open Meeting Law. The Board met in Executive Session during portions of the meeting as authorized by ORS 192.345, 192.355 and ORS 192.660.

**ROLL CALL — Present/Absent**

**—Board Members**

Bianchi, Present  
Caddy, Present  
Chau, Present  
Chinn, Present  
Green, Present  
Horn, Present  
Woodruff, Present  
Wynter-Lightfoot, Present

**QUORUM**

There being a quorum present, the Board President declared the Board eligible to conduct its business.

Introductions: staff and Board members

**—Staff Members Present at Various Times**

Blomquist	Lamont
Bowman	Messina
Buck	Montalvo
Burns	Moser
Gamble	Parish
Hennig	Poole
Holtry	Steele
Jason	Taube
Johnson	Traynor
Ju	Wade
Kilborn	West
Koch	
	Lightfoot
	Noel
	Rauch, Legal Counsel

**TUESDAY, FEBRUARY 16, 2021**  
**PUBLIC SESSION – 6:30 p.m.**

**H1. Administrative Rule Hearing – OAR 851-006**

The proposed rule revisions related to OAR 851-006, regarding *Standard Definitions* were included in the Board meeting materials.

The hearing opened at 6:34 p.m.

There was verbal testimony given regarding the proposed the amendments to OAR 851-006.

- Kim Dupree Jones, Dean & Professor, Linfield University School of Nursing provided verbal testimony in opposition to the proposed definitions:
  - #92-Nursing Clinical Practicum Experience
  - #123-Simulation
  - #124-Skills Laboratory.
- Casey Shillam, Dean & Professor, University of Portland School of Nursing provided verbal testimony in opposition to the proposed definitions:
  - #28-Clinical Experience
  - #92-Nursing Clinical Practicum Experience
  - #123-Simulation
  - #124-Skills Laboratory
- Lucy Krull, Dean, Walla Walla University School of Nursing provided verbal testimony in opposition to the proposed definitions:
  - #28-Clinical Experience
  - #92-Nursing Clinical Practicum Experience
  - #123-Simulation
  - #124-Skills Laboratory

The hearing closed at 6:45 p.m.

**H2. Administrative Rule Hearing – OAR 851-031**

The proposed rule revisions related to OAR 851-031 regarding *Standards or Licensure of Registered Nurses and Licensed Practical Nurses*

The hearing opened at 6:45 p.m.

There was no verbal or written testimony given in favor of, nor in opposition to, the adoption of OAR 851-031.

The hearing closed at 6:45 p.m.

**H3. Administrative Rule Hearing – OAR 851-051**

The proposed rule revisions related to OAR 851-051 regarding *Standards for Approval of Education Programs for the Advanced Practice Registered Nurse: Nurse Practitioners, Clinical Nurse Specialists, and Certified Registered Nurse Anesthetists*

The hearing opened at 6:45 p.m.

There was verbal and written testimony given regarding the proposed the amendments to OAR 851-051.

- Casey Shillam, Dean & Professor, University of Portland School of Nursing, provided verbal testimony in opposition to the proposed rules:
  - Concern regarding not being included in the Rule Advisory Committee

- Adding unencumbered license to the requirement for students; requirement for administrator over the program or track to be nationally certified in the same specialty as the course population focus
- Requirement for 2,080 hours of experience for preceptors.
- Lisa Osborne-Smith, Program Director, OHSU Nurse Anesthesia Program provided written testimony in opposition to the proposed rules:
  - Language that CRNA students should only be supervised by other CRNAs or anesthesiologists.
- Julie Weis, Legal Counsel, Oregon Association of Nurse Anesthetists (ORANA) provided written testimony.
  - Recommended language to accommodate the specific education of CRNAs, removing the requirement of 2,080 hours of clinical experience requirement for preceptors, and removal of APRN preceptor at 51% for CRNAs, since most CRNA preceptors are anesthesiologists.

The hearing closed at 6:53 p.m.

#### **H4. Administrative Rule Hearing – OAR 851-053**

The proposed rule revisions related to OAR 851-053 regarding *Standards for Licensure of Advanced Practice Registered Nurses (APRN)*

The hearing opened at 6:53 p.m.

There was verbal and written testimony given regarding the proposed the amendments to OAR 851-053.

- Casey Shillam, Dean & Professor, University of Portland School of Nursing, provided verbal testimony in opposition to the proposed rules:
  - Suggested clarification in OAR 851-053-0005(2)(b) – “is within two years of graduation”-indicating that applicants can apply prior to graduation.
  - Language unclear regarding renewal of prescription privileges.
  - Language unclear regarding the number of required continuing education hours.
- Julie Weis, Legal Counsel, Oregon Association of Nurse Anesthetists (ORANA) provided written testimony in opposition to the proposed rules:
  - Request that the work “nursing” be deleted, since not all CRNA program are housed in school nursing programs.

The hearing closed at 6:57 p.m.

#### **H5. Administrative Rule Hearing – OAR 851-055**

The proposed rule revisions related to OAR 851-055 regarding *Scope and Standards of Practice for the Advanced Practice Registered Nurse (APRN)*

The hearing opened at 6:57 p.m.

There was verbal and written testimony given regarding the proposed the amendments to OAR 851-055.

- Lena Crandell, RN, WHCNP, provided verbal testimony in opposition to the proposed rules:
  - Limitations of scope of practice described in rule for WHCNP; the scope would prevent transgender care, male partners of non-patients, impact the ability of Planned Parenthood NPs to perform the functions they encounter daily.
- Casey Shillam, Dean & Professor, University of Portland School of Nursing, provided verbal testimony in opposition to the proposed rules:
  - Concern regarding the requirements of the risk counseling being applicable to hospice; no exceptions for APRNs working in hospice.
- Julie Weis, Legal Counsel, Oregon Association of Nurse Anesthetists (ORANA) provided written testimony.

- Requests “other medical services” added to OAR 851-055-0030(1): *Scope of practice for the licensed certified registered nurse anesthetist (CRNA) includes advanced assessment related to the relative risks associated with an anesthesia plan and administration of anesthesia care and “other medical services” including but not limited to...*

The hearing closed at 7:03 p.m.

**H6. Administrative Rule Hearing – OAR 851-062**

The proposed rule revisions related to OAR 851-062 regarding *Standards for Certification of the Nursing Assistant and Medication Aide*

The hearing opened at 7:03 p.m.

There was no verbal or written testimony given in favor of, nor in opposition to, the adoption of OAR 851-062.

The hearing closed at 7:03 p.m.

The meeting adjourned at the 7:04 p.m.

**WEDNESDAY, FEBRUARY 17, 2021**  
**EXECUTIVE SESSION**

Ella Rauch, Board Legal Counsel, presented a lunch presentation on the topic of Contested Cases, Public Meetings and Public Records to the Board Members at 12:00 PM. A power point presentation was provided.
<b>Consent Agenda</b>
MSC Chau, Wynter-Lightfoot, 6 Ayes, 1 Recusal - Horn, 1 Absent - Green
Based on the procedural record and evidence presented, the Consent Agenda was accepted as modified.
Cases moved to Full Agenda:
20-01249
21-00409
19-01302
21-00317
21-00495
Final Orders of Denial by Default
Sheila Acosta, LPN

Talisha Bigelow, CNA
Janine James, RN
Final Orders of Suspension by Default
Andrea Cassa Brewster, LPN
Alicia Hills, RN
Final Order of Revocation by Default:
Carolyn Schoenfelder, RN
Cortney Stoner, CNA
Ratify Interim Order By Consent
Jacqueline Frankel, CNA
Peter Tomter, RN
Case Status Reports reviewed:
21-00086
Cases approved for Dismissal:
21-00359
19-01235
21-00309
21-00248
21-00444
20-01114
21-00351
21-00085
21-00479
21-00496
20-00623
21-00007
21-00124
20-00483
20-00819

19-00840
21-00142
19-00952
21-00065
21-00472
21-00610
20-01113
21-00460
19-00186
20-00983
21-00277
18-01100
The Board accepted Staff recommendations to dismiss all no NPA Violation and Application and Renewal cases presented on the Consent Agenda
<b>Full Agenda</b>
MSC Wynter-Lightfoot, Chau
That based on the evidence presented in case numbers:
20-01249
21-00409
19-01302
21-00317
Be dismissed.
6 Ayes, 1 Recusal - Horn, 1 Abstention - Green
MSC Chau, Wynter-Lightfoot
That based on the evidence presented, the Stipulation for Application Withdrawn, signed by:
Erica Barr, CNA
Alan Igel, LPN
Connie Lynch, RN
Be adopted.
7 Ayes, 1 Recusal - Horn

MSC Chau, Wynter-Lightfoot
That based on the evidence presented in the following:
Delia Anderson, CNA
Be issued a Notice of Proposed Revocation.
7 Ayes, 1 Recusal - Horn
MSC Chau, Wynter-Lightfoot
That based on the evidence presented, the Stipulation for Voluntary Surrender, signed by:
Jonathan Anderson, LPN
Dana Block, RN
Angela Kelly, LPN
Joshua Keyes, RN
Larry Wilt, RN
Be adopted.
7 Ayes, 1 Recusal - Horn
MSC Chau, Wynter-Lightfoot
That based on the evidence presented, the Stipulation for Reprimand, signed by:
Kayla Bush, LPN
Cora Hardin, CNA
Kahlei Howard, RN
Arend Voots, CMA
Be adopted.
7 Ayes, 1 Recusal-Horn
MSC Chau, Wynter-Lightfoot
That based on the evidence presented, the Stipulation for Probation, signed by:
Deana Calver, CNA
Fallon King, CNA
Teresa Martinolich, RN
Susan Messner, RN
Rita Shearer, RN
Kristofer Sickles, CNA
Be adopted.

7 Ayes, 1 Recusal - Horn
MSC Chau, Wynter-Lightfoot
That based on the evidence presented in the following:
Stacy Belvin, RN
Sommer Hughes, CNA
Be issued Notices of Proposed Denial.
7 Ayes, 1 Recusal - Horn
MSC Chau, Wynter-Lightfoot
That based on the evidence presented in the following:
David Gizara, RN
Micaela Horning, LPN
Patricia Paulus, RN
Andrea Prendergast, CNA
Jessica Stoica, CNA
Be issued Notices of Proposed Revocation.
7 Ayes, 1 Recusal - Horn
MSC Chau, Wynter-Lightfoot
That based on the evidence presented in the following:
20-01131
Be ordered to obtain a mental health and substance use disorder evaluation by a Board approved evaluator.
7 Ayes, 1 Recusal - Horn
MSC Chau, Wynter-Lightfoot
That based on the evidence presented in case numbers:
18-01575
20-01136
21-00003
21-00354
21-00355
Be dismissed.
6 Ayes, 2 Recusals - Horn, Woodruff



MSC Chau, Wynter-Lightfoot
That based on the evidence presented in the following:
Jueth Atigbi Hansen, NP
Be issued a Notice of Proposed Revocation.
6 Ayes, 2 Recusal – Horn, Woodruff
MSC Chau, Wynter-Lightfoot
That based on the evidence presented, the Stipulation for Voluntary Surrender of Nurse Practitioner Certificate and Probation of Registered Nurse License, signed by:
Nancy Erb, NP
Be adopted.
6 Ayes, 2 Recusals - Horn, Woodruff
MSC Chau, Wynter-Lightfoot
That based on the evidence presented in the following:
Scott Everson, RN
Be issued a Notice of Proposed 30 Day Suspension.
6 Ayes, 2 Recusal's - Horn, Woodruff
MSC Chau, Wynter-Lightfoot
That based on the evidence presented, the Stipulation for Voluntary Surrender, signed by:
Cayla Larkin, CNA
Be adopted.
6 Ayes, 2 Recusal's - Horn, Woodruff
MSC Chau, Wynter-Lightfoot
That based on the evidence presented in the following:
Anthony Pabst, NP
Be issued a Notice of Proposed Denial.
6 Ayes, 2 Recusal's - Horn, Woodruff
MSC Chau, Wynter-Lightfoot
That based on the evidence presented in the following:
Blair Steinfeld, RN

Be issued a Notice of Proposed 120 Day Suspension.
6 Ayes, 2 Recusal's Horn, Woodruff
MSC Chau, Wynter-Lightfoot
That based on the evidence presented in case number:
21-00607
Be dismissed with a Last Chance Letter.
6 Ayes, 2 Recusal's - Horn, Woodruff
MSC Chau, Wynter-Lightfoot
That based on the evidence presented in the following:
21-00323
20-00865
21-00503
20-01021
Licensee/Certificate Holder allowed entry into HPSP, Case to be dismissed after enrollment.
6 Ayes, 2 Recusals - Horn, Woodruff
MSC Chau, Wynter-Lightfoot
That based on the evidence presented in the following:
19-00940
The case be closed as an inactive investigation and a hold be placed on the contact record.
6 Ayes, 2 Recusal's - Horn, Woodruff
MSC Chau, Wynter-Lightfoot
That based on the procedural record, The ALJ Proposed Order be accepted and a Final Order of Revocation in the following:
Hiwot Alemu, CNA
Be issued.
6 Ayes, 2 Recusal's - Horn, Woodruff
MSC Chau, Wynter-Lightfoot
That based on the evidence presented in the following:
20-00772

Be ordered to obtain a chemical dependency evaluation and a mental health disorder evaluation by a Board approved evaluator.
6 Ayes, 2 Recusal's - Horn, Woodruff
MSC Chau, Wynter-Lightfoot
That based on the evidence presented in case numbers:
20-00585
20-00914
Be dismissed.
6 Ayes, 2 Recusal's - Horn, Woodruff
<b>Addendum</b>
MSC Chau, Wynter-Lightfoot
That based on the procedural record, the following:
Ryan Herinckx, RN
Be issued Final Order of Revocation by Default, revoking the license as set forth in the Notice.
6 Ayes, 2 Recusal's - Horn, Woodruff
MSC Chau, Wynter-Lightfoot
That based on the evidence presented in case numbers:
18-01230
21-00518
Be dismissed.
6 Ayes, 2 Recusal's - Horn, Woodruff
MSC Chau, Wynter-Lightfoot
That based on the evidence presented, the Stipulation for Voluntary Surrender, signed by:
Luevenia Radford, CNA
Be adopted.
6 Ayes, 2 Recusal's - Horn, Woodruff
MSC Chau, Wynter-Lightfoot
That based on the evidence presented, the Stipulation for Probation, signed by:
Simon Patfield, CNA

Be adopted.
6 Ayes, 2 Recusal's - Horn, Woodruff
MSC Chau, Wynter-Lightfoot
That based on the evidence presented, the Stipulation for Probation with \$2000.00 Civil Penalty, signed by:
Kristie Andreas, RN, NP
Be adopted.
6 Ayes, 2 Recusal's - Horn, Woodruff
MSC Chau, Wynter-Lightfoot
That based on the evidence presented in the following:
Anglee Davis, CNA
Be issued a Notice of Proposed Revocation.
6 Ayes, 2 Recusal's - Horn, Woodruff
MSC Chau, Wynter-Lightfoot
That based on the evidence presented in the following:
Monica Evangelisti, RN
The Petition for Reconsideration be Granted and the Default Final Order of Suspension and Notice of Proposed Suspension be Withdrawn.
6 Ayes, 2 Recusal's - Horn, Woodruff
MSC Chau, Wynter-Lightfoot
That based on the evidence presented in the following:
19-00659
The case be closed as an inactive investigation and a hold be placed on the contact record.
6 Ayes, 2 Recusal's - Horn, Woodruff
Adjourned at 3:14 PM.

**THURSDAY, FEBRUARY 18, 2021**

Board Kathleen (Kat) Chinn called the meeting to order at 8:30 a.m. A quorum was present.

Introductions: staff and Board members

**EXECUTIVE SESSION**

Thursday, February 18, 2021 9:00 AM
MSC Chau, Wynter-Lightfoot
That based on the evidence presented, the Notice of Proposed Revocation be Withdrawn and the Stipulation for Probation, signed by:
Anne Moore, NP
Be adopted.
7 Ayes, 1 Recusal - Horn

**PUBLIC SESSION**  
**REVIEW OF MEETING AGENDA**

**ADDITIONS, MODIFICATIONS, REORDERING OF AGENDA**

There were no requests for additions or modifications to the agenda.

**FINANCIAL REVIEW**

This item was removed from the agenda. The fiscal status of the agency is included in the Fiscal Status Report in the Consent Agenda.

**APPROVAL OF BOARD MEETING MINUTES**

- C-M1 Approval of Minutes from the November 17-19, 2020, Board Meeting
- C-M2 Approval of Minutes from the December 9, 2020, Board Meeting
- C-M3 Approval of Minutes from the December 30, 2020, Special Board Meeting
- C-M4 Approval of Minutes from the January 13, 2021, Board Meeting

M.S.C. Chau, Wynter-Lightfoot  
that the Board Meeting Minutes be approved as presented  
Ayes 8

**APPROVAL OF CONSENT AGENDA**

- C-A1 Fiscal Status Report
- C-A2 Communications and IT Report
- C-A3 Discipline by License Type
- C-A4 Discipline by NPDB by License Type
- C-L1 Ratification of NA/MA Training Program Approvals and Withdrawals
- C-L2 2019-2020 Annual NA Education Program Survey Results
- C-L3 Test Advisory Panel Recommendations
- C-L4 NA Level One Curriculum
- C-L5 NA Level Two Curriculum
- C-L6 CNA/CMA Advisory Group 2020-2021 Goals and Strategies –  
Year End Report 2020
- C-L7 Licensing Report
- C-E1 Linn-Benton Community College Nursing Program Survey  
Extension Request
- C-E2 Klamath Community College Nursing Program  
Curriculum Change Proposal
- C-AP1 Approved Oregon Clinical Placements for Advanced Practice Students  
Enrolled in Programs Out-of-State
- C-AP2 Approved Oregon Clinical Placements for Pre-licensure Students  
Enrolled in Programs Out-of-State

M.S.C. Chau, Wynter-Lightfoot  
that the Consent Agenda items be approved as presented  
Ayes 8

## **ADMINISTRATIVE RULES**

### H1. Amendments to OAR 851-006 Regarding *Standard Definitions*

The administrative rule hearing for revisions to OAR 851-006 was held on February 16, 2021. Verbal testimony was presented during the hearing regarding the proposed rule revisions. Board President Chinn reminded the Board and the public that OAR 851-006 is periodically reviewed to align with language in other divisions. There was Board deliberation regarding the proposed amendments and testimony submitted, and a suggestion from a Board member that based on the testimony received, definitions #28, #92, #123 and #124, be removed, and direction to Board staff to work on language revisions to those definitions to align with the revisions in OAR 851-021.

M.S.C. Chau, Wynter-Lightfoot  
that the proposed amendments to OAR 851-006 be adopted as modified  
Ayes 8

### H2. Amendments to OAR 851-031 Regarding *Standards for Licensure of Registered Nurses and Licensed Practical Nurses*

The Administrative Rule Hearing was held on February 16, 2021. There was no verbal or written testimony presented during the administrative rule hearing regarding the proposed amendments to OAR 851-031; there was no Board deliberation regarding the proposed amendments.

M.S.C. Chau, Wynter-Lightfoot

that the proposed amendments to OAR 851-031-0001, 851-031-0006, 851-031-0007, 851-031-0010, 851-031-0015, 851-031-0021, 851-031-0026, 851-031-0027, 851-031-0030, 851-031-0032, 851-031-0035, 851-031-0039, 851-031-0040, 851-031-0045, 851-031-0048, 851-031-0051, 851-031-0055, 851-031-0060, 851-031-0061, 851-031-0065, 851-031-0070, 851-031-0075, 851-031-0080, 851-031-0085, 851-031-0086, 851-031-0087, 851-031-0088, 851-031-0090 be adopted as presented  
Ayes 8

H3. Amendments to OAR 851-051 regarding *Standards for Approval of Education Programs for the Advanced Practice Registered Nurse: Nurse Practitioners, Clinical Nurse Specialists, and Certified Registered Nurse Anesthetists*

The administrative rule hearing for revisions to OAR 851-051 was held on February 16, 2021. Verbal testimony was presented during the hearing regarding the proposed rule revisions. There was Board deliberation regarding the proposed amendments. Based on the verbal and written testimony, Board direction to Board staff to revise language and present draft revisions to the Board at the March 17, 2021 Board meeting.

H4. Amendments to OAR 851-053 regarding *Standards for Licensure of Advanced Practice Registered Nurses (APRN)*

The administrative rule hearing for revisions to OAR 851-053 was held on February 16, 2021. Verbal testimony was presented during the hearing regarding the proposed rule revisions. There was Board deliberation regarding the proposed amendments. Based on the verbal and written testimony, Board direction to Board staff to revise language and present draft revisions to the Board at the March 17, 2021 Board meeting.

H5. Amendments to OAR 851-055 regarding *Standards of Practice for the Advanced Practice Registered Nurse (APRN)*

The administrative rule hearing for revisions to OAR 851-055 was held on February 16, 2021. Verbal testimony was presented during the hearing regarding the proposed rule revisions. There was Board deliberation regarding the proposed amendments. Based on the verbal and written testimony, Board direction to Board staff to revise language and present draft revisions to the Board at the March 17, 2021 Board meeting.

H6. Amendments to OAR 851-062 regarding *Standards for Certification of the Nursing Assistant and Medication Aide*

The Administrative Rule Hearing was held on February 16, 2021. There was no verbal or written testimony presented during the administrative rule hearing regarding the proposed amendments to OAR 851-062; there was no Board deliberation regarding the proposed amendments. Board member Caddy questioned existing language in OAR 851-062-0050(4)(b). Ms. Jason stated that she would direct the licensing manager to clarify the existing language.

M.S.C. Chau, Wynter-Lightfoot

that the proposed amendments to OAR 851-062-0050, 851-062-0070, 851-062-0071, 851-062-0072, and 851-062-0075 be adopted as presented

Ayes 8

## **ADMINISTRATION**

### A1. Director's Report

Executive Director Ruby Jason provided a report pertaining to the status of the agency. At the December 30, 2020, Board meeting, Board staff was give direction from the Board to schedule a meeting of the Acute Care and long term health care facilities to discuss onboarding new graduates that, due to the COVID pandemic, have been limited in their clinical practicums. The meeting occurred on February 4, 2021, via Zoom. Present were representatives from most of the major healthcare facilities, a few rural facilities, the Governor's office, and some long-term care representation. The consensus was that there was recognition that these graduates may need to have some evaluation regarding skills prior to placement with preceptors. Response from larger facilities stated they were already revamping their onboarding to accommodate this. However, smaller hospitals stated that they were unable to extend orientation or revamp onboarding due to staffing needs and budgetary constraints. Board direction to Board staff that graduates will be allowed, regardless of clinical practicum hours, to sit for the NCLEX and, if qualified, be licensed. The conversation around that was because the Board's primary mission in licensing new graduates is to determine that they are duly qualified applicants for entry-level practice.

Ms. Jason provide an update on the current legislative session. Board staff gave testimony to the Senate Healthcare Committee regarding SB 39 and SB 40, which are the Board's legislative bills for the 2021-2023 legislative session. The committee asked a clarifying question regarding SB 40, which requires an out-of-state program to have a clinical component for their graduates in order to be eligible for licensure. If an individual is already licensed in another state, will Oregon allow individuals to be licensed if they attended a program that did not have a clinical component? Board staff provided clarification that this would be spelled out in rule. A few years ago, the Board was provided with a presentation regarding the criteria that other states use to determine when a graduate from a non-clinical nursing education program could be licensed. If SB 40 is approved and passes both houses, then this information could be used by the Board to set forth criteria in rule.

The agency budget, which through the legislative process resulted in HB 522, is scheduled for testimony from the Ways and Means Subcommittee during the first week of March, mainly focused on expenses rather than revenue. Budget bills are written to capture the maximum expenditure limitation allowed for the agency. Although the Board receives no state funding, because it is part of the Executive Branch of state government, the agency must abide by the same budget rules as those agencies receiving operating funds from the taxpayers. In this biennium, for the first time, the expenditures will exceed 20 million dollars for the biennium, \$20,320,598, to be spent over the next two years, beginning July 1, 2021, and ending June 30, 2023. Of note, the Board revenue is about \$900,000 below the expense limit. However, there is a healthy fund balance, between five and seven million dollars, that can easily absorb that. There are personnel and other expenses, such as the Board's legal counsel expenses that are driving the agency over budget for this biennium. Board staff will be looking at ways to decrease those expenses without impacting the ability to do due process for licensees. One outstanding unresolved budgetary issue is that the online payment service has begun charging \$1 for every transaction done online. Several of the other health care licensing Boards have chosen to pass the cost on to the applicant for all license types. For the current biennium, the OSBN is absorbing the cost, and



has requested an additional \$100,000 expense limitation increase so that OSBN can continue to absorb this cost over the next biennium rather than charge this to license applicants.

HB 2335, regarding Oregon joining both the Medical and Nursing Licensure Compact, has been assigned to the House Healthcare Committee. As of February 16, the bill has not been scheduled for a public hearing. The Board, in consultation with the Governor's office, will remain neutral on this bill.

The most recent communication from the Governor's office indicates that the COVID emergency declaration will remain in full force and until at least the first week of March. Therefore, until further notice, the offices of the OSBN will remain closed to the public. The licensing department continues to issue emergency authorizations to out-of-state licensees, forgoing several of the safety checks usually employed by the Board to determine license qualification. Licensing staff does check the NURSIS database to determine that the applicant has a valid license in another state, or in the case of Certified Nursing Assistants, checks each individual state registry. So far, there have been over 300 applicants that have applied for emergency authorization, with a large number providing telehealth services from their home state rather than coming into Oregon.

The online application program has experienced a few recent setbacks. This has led to concerns from licensee applicants and stakeholders regarding license applications. The IT department continues to work on the issues and reprogramming requirements; it is hoped that the system will soon be running as planned. Ms. Jason commended the Licensing and IT departments for the extra work required to address the concerns of the applicants.

Due to the virtual nature of the Board meetings, the Board has not determined its strategic goals for the upcoming biennium. It is hoped that an in-person meeting may be possible before the year is out to establish the Board's priorities for the next biennium. In the meantime, the agency will continue with the strategic plan from 2019-2021, to provide the public with trusted information regarding the practice act and Board processes. The agency was successful in some areas, but continues to review and improve information relayed from the Board to the licensees and the public. The strategic plan for the agency will be carried over to the 2021-2023 biennium.

There were questions and concerns from the Board members, including hospitals onboarding new graduates with simulation without clinical opportunities from most of the programs. It is the decision of the Board as to whether to qualify graduates for licensure if the program qualifies for graduation without clinical practicum as required under the current rules, OAR 851-021. The Board can make exceptions to OAR 851-021, to allow some flexibility, and to assure the mission of the Board that qualified applicants are entry level practitioners. There was discussion regarding if the director of the nursing programs could attest to the new graduate safety and practice ability during COVID. It would be the decision of the Board to make exceptions to rule during a declared emergency; having program directors attest that they have done the curriculum to the best of their ability during COVID, and that the new graduates have the ability to be safe nurses. Board member Caddy stated that currently programs attest that they have completed the curriculum and met all program requirements. Ms. Jason reminded the Board that past Board direction to Board staff was to report outcomes and that the Board would need to give direction to Board staff to maintain communication and during the COVID pandemic. Discussion and impact of new graduates and education programs will be included as an agenda item for future Board meetings until the COVID emergency declaration is lifted. There was a suggestion from a Board member to request a brief one-page statement from nursing programs as to their nursing experience during winter term, and what is expected during spring term. Ms. Jason suggested that the requirement also be applicable to the CNA programs. Board direction to Board staff to obtain information from training programs as to their experience, and prepare a draft to the programs, to be presented to the Board at the April Board meeting. Ms. Jason reminded the Board that there is a waiver for programs

that have clinical practicum to continue with that requirement; if they do not have access to clinical site, to use other modalities to attempt to simulate what students would learn in clinical practicum.

#### A2. Health Professionals Services Program (HPSP) – Updates

Lori Govar, Dr. Robbie Bahl, and Kate Manelis from IBH Monitoring Program gave a presentation. Highlights includes:

- Mission of the HPSP Program: “Protecting public safety while assisting participants with mental health and substance use disorder problems to continue in their professional careers.
- Overview of substance use and alternative to discipline programs in the healthcare profession.
- HPSP history.
- HPSP key components.
- HPSP outcomes.
- Program costs.
- Looking ahead/trends

Request from a Board member for statistics on NPs in HPSP. Ms. Govar stated that she would provide that information to Board staff to pass on to the Board.

#### A3. Update – Proposed Revisions to OAR 851-001 – *Rules of Practice and Procedure*

Ms. Jason reminded the Board that Board direction to Board staff was given to convene a rules advisory committee (RAC) to look at the possible need for revisions to OAR 851-001. The RAC included Board staff and Board legal counsel, due to the fact that OAR 851-001 relates to internal legal procedures mandated by statute. Request from Board staff for Board direction regarding continued revisions or move forward to a public administrative rule hearing. Ms. Jason referred to the draft administrative rule revisions included in the Board meeting materials, pointing out that the proposed draft included revisions to contested cases, agency representation at hearings, and the requirement of social security numbers or other identifiers for licensee applicants. The most significant proposed revisions pertained to criminal background checks. There were suggestions for minor language revisions to OAR 851-001-0009 and 0015.

M.S.C. Chau, Wynter-Lightfoot  
that revisions to OAR 851-001 move forward for Administrative Rule Hearing as modified  
Ayes 8

#### A4. Update – Proposed Revisions to OAR 851-070 – *Fitness for Practice Related to Behavioral Health (Substance Use and/or Mental Disorders) and Cognitive or Physical Impairment*

Ms. Jason reminded the Board that at the June 2020 Board meeting, the Board approved Board staff to move forward to convene a rule advisory committee (RAC) for revisions to OAR 851-070. A RAC was convened consisting of Board staff and licensees who expressed an interest in membership in the RAC. Members of the RAC included Scott McBeth and Lori Govar, Integrated Behavioral Health (IBH), the Board’s current alternative to discipline vendor. In addition to the presented proposed revisions, Board staff and the RAC requested Board direction regarding continued participation in HPSP and impaired Certified Registered Nurse Anesthetists (CRNAs. Ms. Jason explained that the RAC discussed the current OSBN participation in HPSP, noting the number of current participants and cost of the program, and a reminder that the program is open to RNs and LPNs, not CNAs, and explained the

difference between alternative to discipline and probation. Ms. Jason explained that if the Board decides to withdraw from HPSP due to budget development, that the transition would not occur until the next biennium, 2023-2025. If OSBN withdrew from HPSP, the other three Boards that participate in HPSP would need to determine if they could cover the cost without OSBN. If OSBN withdrew from HPSP, it would be only one of five states not offering an alternative to discipline program. Board member suggestions received included that if the Board withdrew from the program, that the Board submit a legislative bill to allow funds previously allotted for HPSP be used for grants to rural hospitals, long-term-care facilities for nursing onboarding, or nursing continuing education. There was Board discussion regarding the program and options for the OSBN to withdraw from the program, as well as cost amounts and statistics of HPSP and probation success rates. Direction from the Board to Board staff for the Compliance Department staff to give a presentation to the Board at the April Board meeting regarding the agency probation program.

## **LUNCH BREAK**

### **NURSING ASSISTANT (NA) EDUCATION AND ASSESSMENT**

#### CNA1. Environmental Scan

Nursing Assistant Education and Assessment Policy Analyst Debra Buck thanked the Board for approving the Level One and Level Two Curriculums and the Test Advisory Panel Recommendations, both of which were included in the Consent Agenda. She thanked all individuals who contributed over the last two years in that work. Implementation is scheduled for August 1, 2021 to align with implementation of the adopted rule revisions to OAR 851-063.

At the Board's direction, Board staff continues to explore the use of simulation to replace in-facility hands-on clinical hours in Nursing Assistant education. Ms. Buck stated that she continues to hear that faculty education on simulation should be a priority. However, there was limited participation at the OCN's (Oregon Center for Nursing) Nursing Assistant Simulation Advisory Group meeting on January 12, 2021. Another meeting is scheduled to work on what can or should be done to advance simulation activities to NA education; she will continue to work with program faculty on ensuring that students are prepared, looking forward to direction in the future as it relates to possible changes to OAR 851-061 to address simulation. Ms. Buck reported on the continued challenges for securing clinical placements for NA education, even though clinical sites are opening up. The clinical portion of the state competency exam is probably more relatable to the lab experience than to the actual clinical experience. It is also no surprise that the CNA workforce continues to be a challenge during the pandemic; the pandemic has impacted the supply and demand for CNAs. In the 2019 calendar year, there were 3,505 graduates from the Level One programs. In the 2020 calendar year, there were only 2,608 graduates from the Level One programs. This has impacted both acute care and long term care. For example, in Southern Oregon in January, nursing home residents were unable to return to their long term care facilities due to the shortage of staff, which contributed to a shortage of acute care beds for other patients. As mentioned in previous meetings, in an effort to help long term care facilities meet the staffing needs, Oregon Department of Human Services and Centers for Medicare and Medicaid Services (CMS) are allowing the use of temporary care assistants. These individuals have very limited online education. Ms. Buck stated that she is currently trying to determine how many of these we are using in Oregon; at some point, these individuals will need to take the training program in order to stay employed. Arizona Board of Nursing reported that as of January 26, 2021, 576 temporary Nurse Aides were being utilized; they are working on a plan to get these individuals certified before the emergency is over. The South Dakota Department of Health reported that while they do not have an exact number of how many of

these individuals are being used in their state, they are aware that most of their long term care facilities are using these individuals, and are also working on a plan as to how to get them certified. The Oregon Department of Human Services is not currently tracking the number of these individuals. Ms. Buck stated that after some research, she found that in spite of the need for staffing in long term care facilities, Oregon is not utilizing these individuals to the extent that other states are. Another long term care corporation in Oregon reported that they have one temporary care assistant in one facility, and they have that individual scheduled to attend the program in April of 2021. The one Oregon long term care corporation that is using the most of these individuals is also working on getting them into their NA program.

HeadMaster, the NA/MA certification testing vendor, conducted a virtual item writing workshop in January for the Medication Aide exam. There were several Medication Aide faculty members who participated in the workshop. The test items created will not be subject to further psychometric analysis before presented to a test advisory panel later for inclusion in the test bank.

On January 29<sup>th</sup>, HeadMaster also provided a virtual testing workshop for 50 Oregon NA and MA faculty members. The 2020 in-person workshops last spring were cancelled due to the pandemic; as a make-up for those, HeadMaster recorded a presentation and faculty were referred to view the presentation, which did not prove to be effective. There was a new approach this year; while the faculty prefer the in-person workshop, they did appreciate the virtual presentation this year over the recorded presentation last year.

Ms. Buck reported that she has been participating on the In Home Rule Advisory Committee in response to SB 669; this was the bill that required the Oregon Health Authority to adopt training requirements that include a minimum number of hours of orientation and assessment competencies for non-licensed individuals working in in-home care agencies, home health agencies, and hospitals. OSBN representation has been to assist in aligning their administrative rule language with the OSBN administrative rule language. There has been ongoing discussion regarding the violation section and the number of orientation and training hours.

Since January 1, 2021, she has been utilizing the new training program assessment rubric for re-approval of site visits.

## **ADVANCED PRACTICE**

### **AP1. Environmental Scan**

Ms. Jason reported that there are two main issues to report related to advance practice; one is telehealth. Currently, there are no less than thirteen bills related to telehealth going through the legislative session, most of which are related to broadband access to lower income areas requiring certain insurance companies and providers to provide broadband access. Three of the bills are related to reimbursement, particularly if the provider has never seen the patient face-to-face, and the ability for the patient to request that the provider sees them face-to-face as opposed to telehealth. There are two bills that apply to the OSBN licensees, that may have implications, not only to APRNs, but also for RNs, and LPNs. SB 423 allows patients located in Oregon to receive health care services to tele-medicine from specified out-of-state health care providers, a departure from the jurisdiction from the Board. Another bill directs the Oregon Health Authority to award grant monies to eligible school-based health center pilot projects to expand access to health care services and improve health and education. Board staff will monitor the legislative session to ensure that the Board is kept up-to-date on these proposed bills.

The second issued related to advanced practice is that COVID has had an impact on advance practice registered nurses, particularly FNPs. The Board has been receiving more concerns from FNPs that are being asked to practice as a psychiatric mental health nurse practitioner by their health care organization. Oregon is one of the few states that licenses advanced practice nurse practitioners based upon their specific patient population focus of education and their national certification. In the past, family nurse practitioners were able to prescribe medications for mental health and psychiatric issues if the therapist was not prescribing. The other issue facing advanced practice nurses is that if an individual is symptomatic and enters a clinic, there are some clinics who require a COVID test, then send the client home pending the results, then ask the advanced practice nurse to sign off on the chart, without the nurse ever seeing the client. Board staff will keep the Board informed of these issues.

### **PRACTICE AND EVALUATION**

PR1. Update – Proposed Revisions to OAR 851-049 – *Standards for Licensed Nurse Protocol Development and Utilization, Communicating Prescriber’s Re-authorization of a Prescription and RN Dispensing*

Practice and Evaluation Policy Analyst Gretchen Koch referred to the draft interpretive statement included in the Board meeting materials. The draft rules describe and identify an acceptable level of safe nursing practice at the RN and LPN level, for practice authorities that are related to accepting and executing medical orders.

M.S.C. Chau, Horn

that based on information presented, Board staff move forward to Administrative Rule Hearing for OAR 851-049-0000 and OAR 851-049-0025 as presented  
Ayes 8

PR2. Update on Jurisprudence Study Guide

Ms. Koch reminded the Board that in June 2020, the Board gave direction to Board staff to proceed with the development of a jurisprudence examination of the laws and rules of the Nurse Practice Act. The exam would be a requirement for licensure and certification. The Board packet materials included the RN/LPN study guide to draft; Ms. Koch stated she will continue to work on the study guide, with an anticipated with draft attestation questions, as well as an update on the mechanics of getting the examination online and administered at the April Board meeting. Suggestion from Board to add a section to the study guide regarding OAR 851-047 and OAR 851-049.

PR3. Update – Proposed Revisions to OAR 851-047 – *Standards for Registered Nurse Delegation Process*

Ms. Koch referred to the Board meeting materials, as defined by OAR 851-006, “a delegation process utilized by the registered nurse to authorize an unregulated assisted person (UAP) to perform a nursing procedure for a client for which the RN attains accountability of the outcome.” This is an RN level practice privilege that occurs in the community-based settings. The rules have not had a legal counsel review, soliciting feedback on rule language. The two pieces to focus on is OAR 851-047-0030(6) – “the RN’s transfer of care of the client and all responsibilities related to a UAP’s authorization to perform the client’s nursing procedure to another RN who accepts the assignment”; and OAR 851-047-0030(7) –

“The RN’s acceptance of an assignment of client care and all responsibilities related to a UAP’s authorization to perform and client’s nursing procedure.” There was a suggestion from a Board member to include delegation and assignment definitions in OAR 851-047. An update to the proposed draft revisions to OAR 851-047 will be presented to the Board at the April Board meeting.

PR4. Draft Interpretive Statement – *The RN Who Ends Their Nursing Services for a Client in a Community-Based Setting*

Ms. Koch referred to the draft interpretive statement included in the Board meeting materials, which defines language in OAR 851-045, specific to delegation transfer; a care transition between two nurses. There was Board direction that the interpretive statement be implemented simultaneously with the adoption of OAR 851-047.

PR5. Draft Interpretive Statement – *The RN Who Accepts a Client Care Assignment that Includes Delegation Process Responsibilities for a Specific UAP*

Ms. Koch referred to the draft interpretive statement, included in the Board meeting materials. There was no discussion or questions. The draft interpretive statement will be brought back before the Board at the April Board meeting, along with OAR 851-047.

PR6. Environmental Scan

Ms. Koch reported on the January 2021 OCN brief, the purpose of which was to determine if the nurse mal-distribution across the state impacts social determinates of health at the local level. There was a study, designed with two objectives; the first was to replicate findings of previous studies that show that there was significant association between nursing workforce size and measurements of community health, and to show if this relationship held for Oregon. The second was to explore the role of practice setting between health rankings of the nurse work force. For the first question, there was definite correlation between having double workforce increases as to the health outcomes. One of the findings was that nurses practicing in ambulatory and long term-care were more associated with good health outcomes than nursing workforce practicing in other settings, such as hospitals.

Governor of Michigan Gretchen Whitmer signed SB 1021 in December 2020, which allows reciprocity for Canadian health care providers to practice in the state of Michigan. This was something that was done previously, in 2002, due to health care shortages, and is again back on the table.

An update on HR 133, the Consolidated Appropriations Act, enacted in December 2020, directs the Secretary of State to develop a strategy to carry out certain policies with the law, including prioritizing an expanding educational exchange programs with Mexico. The goal is to encourage more academic exchanges between the two countries; secondary, post-secondary, and graduate levels of education, and to include examining the feasibility of fostering partnerships between universities within the United States and Mexico, with ultimate goal of allowing those graduating from medical school and nursing programs to participate in the NCLEX exam.

There are multiple states who have active pending legislation related to the Nurse Licensure Compact: Washington, Alaska, Nevada, California, Michigan, Ohio, Illinois, Vermont, Rhode Island, Maine, and Guam.

## **EDUCATION**

### **E1. Walla Walla University Nursing Program Survey Report**

Dr. Sarah Wickenhagen, DNP, APRN, FNP-C, Nursing Education Consultant for the Board, reported that she conducted a virtual site survey of the Walla Walla University Nursing Program in October of 2020. The survey was in conjunction with the Washington Nursing Care Quality Assurance Commission, and Collegiate Nursing Education (CCNE) accreditors. As far as meeting all of the standards in OAR 851-021, all survey elements applicable to the program were determined to have been met. Of note were commendations included in the report including a commendation to Dr. Lucy Krull for leadership and her commitment to the faculty and students. Dr. Krull answered questions from the Board including what the current experience is for clinical site placement, and what is anticipated for spring quarter as far as having clinical placements. Dr. Krull explained that they have the vast majority of placements with the exception of Legacy Health.

M.S.C. Chau, Wynter-Lightfoot

that the Walla Walla University Nursing Program be approved for up to ten (10) years, in conjunction with their CCNE accreditation to November, 2030

Ayes 8

### **E2. Health Education Consultants Re-Entry Program Survey Report**

Ms. Jason explained that the Health Education Consultants (HEC) Re-Entry Program is the only official re-entry program in Oregon, for nurses who have been out of practice and do not meet the competency requirement in OAR 851-021. The survey is evaluated under the requirements outlined in rule, every five years. Dr. Wickenhagen explained that she conducted the survey in November 2021; the program was in a transition at that time, to Brandy Stoffel, who is also a graduate of the program. Than standards in OAR 851-031 were used to measure the program. Commendations included in the report were to Nancy Zavacki for her steadfast support of nursing education in Oregon and providing a pathway for nurses to return to the workforce, and to Chelsey Dyer for her commitment to finding clinical opportunities for re-entry nurses. All survey requirements were met. Brandy Stoffel answered questions from the Board, including how many students are in the program; there are about 50 students per year, currently there are 97 enrolled, partly due to clinical backlogs. Students have up to two years to complete the program.

M.S.C. Chau, Wynter-Lightfoot

that the Health Education Consultant Re-Entry Program be approved for up to five (5) years, November 2025

Ayes 8

### **E5. Clinical Placement for Re-Entry**

Board President Chinn explained that the Board requested that the program provide a process as to how they determine re-entry candidates that are exempt from clinical practice during the COVID emergency declaration. Ms. Stoffel explained that she looked into the resources of KeithRN. Ms. Stoffel submitted a rubric, which was included in the Board meeting materials. Ms. Stoffel asked if when the emergency declaration is over, that the students currently in the program be grandfathered to this exemption to finish out the process. The Board agreed unanimously.

M.S.C. Chau, Wynter-Lightfoot

that the Health Education Consultants are authorized to utilize the presented process to determine which re-entry candidates may be exempted from clinical practicum during the COVID emergency declaration.

Ayes 8

### E3. Bushnell University Nursing Program Development Application

Ms. Jason referred to an Application for Initial Approval of an Accelerated Baccalaureate program from Bushnell University, submitted to Board staff in January 2021, and included in the Board meeting materials. Dr. Linda Veltri, Associate Dean of Nursing, was present to answer questions. Per OAR 851-021, the application progression for program approval is first a letter of intent, which was submitted, an application for developmental approval, also submitted, and the application for initial approval, included in the Board meeting materials. The final approval will be required after graduation of the first cohort. During the November 2020 Board meeting, Bushnell University was granted developmental approval. They began their approval process under OAR 851-021, dated August 1, 2019, and will finish the process under those rules rather than any newly adopted rules. Comparing the requirements for initial approval as per OAR 851-021-0010(3), and the contents of Bushnell's application, it has been determined by Board staff that Bushnell University has met the criteria as described in administrative rule.

OAR 851-021-0010(3)(c) offers the Board an opportunity to perform a site visit at this stage of the application process. A survey of the program is not required until Bushnell University is prepared to apply for final approval. Board direction to Board staff to not conduct a site survey during the initial approval phase, and to conduct the survey at the final approval stage of the application process.

M.S.C. Chau, Wynter-Lightfoot

that the Bushnell University Accelerated Baccalaureate application for initial approval be approved and that Bushnell move to the final approval stage after the first cohort is graduated

Ayes 8

### E4. Update – Proposed Revisions to OAR 851-021 – *Standards for the Approval of Education Programs in Nursing Preparing Candidates for Licensure as Practical or Registered Nurses*

Ms. Jason reminded the Board that at a previous Board meeting, the Board gave direction to Board staff to reconvene the Advisory Committee for Educational Standards (ACES) to review Division 21 for non-substantive language realignment. When the committee met, it was determined that this scope was not possible; the language alignment recommended by the ACES would result in substantive language changes, which would necessitate another administrative rule hearing. The meeting was cut short, with the agreement that a request be forwarded from the ACES group to the Board to re-open OAR 851-021 for substantive changes. The ACES group was reminded about the length of time that OAR 851-021 had been under revision, and the ACES group consensus was that they would commit to a fast turn-around even if it meant meeting weekly. It is to be noted that because of the length of the original process of rule writing, two separate policy analysts worked on this document, and there was turnover of ACES membership. A synopsis of the comments are as follows:

- **Inconsistency in the rule, and in some cases repetitive and contradictory definitions.** The language throughout the document is inconsistent, making it challenging to read and implement. It is also not consistent with the definitions of OAR 851-006, adding more confusion and creates



risk for programs, not to be compliant accidentally. A wide variety of terminology is used throughout the document.

- **Not supported by current evidence.** For example, the section on simulation is using the terms low, mid, and high fidelity; these terms refer to the environment. National standards focus on how you use simulation and the debriefing process together. So even if a low-fidelity simulation could be robust, and stimulate incredible learning. We are being short-sided by focusing on the terminology.
- **Very prescriptive.** The language goes into great detail about organizational decisions and even how committee minutes should be formatted, that will be problematic to implement and at times are not feasible.
- **Philosophical rather than a focus on rule.** For example, there is a section in OAR 851-021-0055 that describes what patient care experiences must focus on that is very philosophical would be very hard to evaluate in a survey visit.

Board staff requested direction from the Board. Board President Chinn recommended that OAR 851-021 be reopened under the guidance of Joy Ingwerson, to work as a contracted consultant, working with ACES to meet regularly and frequently to complete the work.

M.S.C. Chau, Green

that Board staff proceed with substantive change language to OAR 851-021 and provide the Board new language no later than the April 2021 Board meeting

Ayes 8

#### E6. Environmental Scan

Ms. Jason stated that there was nothing to report.

Board member Caddy suggested that the Board discuss that, due to students currently admitted under the exceptions of the emergency declaration, be allowed to complete their programs when the declaration is declared to be over. Status of the emergency declaration will be added to the March meeting, to include a public session prior to the disciplinary session.

### **NEXT BOARD MEETING**

The next scheduled Board Meeting will be March 17, 2021, to begin at 3:30 p.m., and will include both a public session and executive session.

### **ADJOURNMENT**

Adjourned at 2:13 p.m.