

**Kansas State Board of Nursing
Landon State Office Building, Room 106
APRN Committee Agenda
March 27, 2012**

Time: 1:30 p.m. – 2:30 p.m.

Committee Members: Jane Symmonds, RN, MS NP-C, APRN, Chair
Serena Stutzman, MSN, RN, APRN-BC, Vice Chair
Mary Carol Pomatto, RN, APRN, EdD
Doris Kimbrell, RN, MSN, APRN-CNS
Ronda Eagleson, MN, RN, FNP, BC
Donna Nyght, CRNA, DNP

Absent: Terrah Stroda, CNM, MSN, APRN – Notified Board in Advance

Staff: William Anderson, JD, RN, Program Specialist
Sheila Rice, Administrative Specialist

Call to order: The APRN Committee meeting was called to order in room 106 of the Landon State Office Building at 1:36 p.m. by J. Conroy, Chair.

Add/Rev. Agenda: Walden University – in CNE onsite, P. 28-50
Under approval of out of state schools, University of Texas-El Paso, NMW, should be Texas Tech operating through the University of Texas-El Paso, NMW

Minutes: The minutes for the December 13, 2011 meeting were reviewed. It was moved to approve the December 13, 2011 minutes as written. Motion #1 Stutzman/Nyght – UYVV

Unfinished Business:
APRN Regulation Change: 1. Comments from regulatory meeting – main comment from testimony for this committee was they would like the CNE amount changed to 30 minutes or more instead of 1 hour or more. This will be taken to the Board for consideration tomorrow.

CNE: 1. CME conversation guidelines: CME to CNE – J. Conroy explained 60 minutes equals 1 CME AMA category 1 credit for physicians; whereas 1 CNE is equivalent to 50 minutes. Currently a nurse has to submit an IOA for credit of CME that is not designated as approved for nursing, (ANCC). If you're not a physician you don't get CME credit; however you do get a certificate of attendance for whatever length of time the class was for and the nurse can submit the certificate along with an IOA to KSBN for approval.

2. CNE Certificate of completion language – W. Anderson asked, how does an APRN know if a course is good for an APRN to submit as CNE, and how do they prove it if all they have is a certificate of attendance. W. Anderson requested directive from the committee regarding what is needed to show the CNEs submitted by an APRN complies with the advance practice role – can KSBN request the provider designate in their brochure which courses are for APRNs? Committee does not believe KSBN can require out of state providers to note if course is targeted at APRNs and the committee does not want providers to post courses as APRN CNE if the course really does not meet the APRN CNE requirements.

Several CNE providers have asked if they need to reapply to offer APRN CNEs. The providers were advised by the Board they just need to create the offering and note in their brochure which CNE offering meets the APRN CNE requirement.

The committee asked if the CNE committee has looked at this? Yes, the committee recently had a provider that offered a class for APRN CNE and KSBN asked they include information that a class was designated for APRN learning not basic – but an RN could still take the course. Another provider modified their statement to say the course they offered was for RN's only. The CNE committee did not have a problem with this because some classes are just for more advanced learning. Some advanced courses may benefit a RN depending on their role in the workplace (i.e. specialty offices, psych or ob/gyn).

Several concerns were voiced regarding the APRN CNS licensees and how to determine if CNEs would meet their requirements. Also, there is a great concern about their specialty area and those who are in administration or not currently practicing in the field. The committee was reminded of the definition of CNEs is a “learning experience that builds upon education and experiential bases of registered professional and license practice nurse for the enhancement of practice, education, administration, research or theory development to end of improving the health of the public”.

APRN committee believes IOA submissions for APRN licensees should not be denied without going to the committee for a while. The committee/board needs to provide some type of guidance for the APRNs regarding their CNEs without it becoming a hindrance. The committee tabled topic until June 2011 meeting. Everyone on the committee is to look at this topic and put together some language to review. W. Anderson to research the APRN CNE issued as to what other states are doing and how they are defining APRN CNEs and offering, then mail the information he finds to the committee members ASAP. A decision has to be made at the

June 2012 meeting. Once information is gotten together schedule a work group to move the process along regarding APRN CNE guidelines.

A public attendee requested blanket approval from CME category 1 to CNE. The committee advised that it probably will not be done due to constitutional issues, the public could ask for a formal AG opinion. Can still do an IOA and more providers that offer CMEs now note CNE (ANCC approval) on them as well.

Approval of out of state schools:

It was moved to approve the following out of state schools and their below noted courses:

1. Felician College, FNP, Adult NP
2. University of N. Colorado, Adult Chronic CNS, FNP
3. Academy Health Sciences (Army), RNA
4. Gooding Institute of Health Sciences, RNA
5. University of Pennsylvania, Peds Critical Care CNS
6. Texas Tech-University of Texas - El Paso, NMW
7. Tennessee State University, FNP
8. UNLV, FNP
9. University of Arkansas, Medical Services, Acute Care NP, FNP, Adult/Gerontological Acute Care NP, Family Psych-Mental Health NP, Pediatric Acute Care NP and Pediatric NP
10. University of Alabama Huntsville, Acute Care NP
11. Walden University, FNP, Adult/Gerontological NP

Motion #2 Stutzman/Pomatto UYVV

New Business:

Consideration of APRN Controlled substance database:

W. Anderson explained, he had spoke with an individual from the Missouri Board of Nursing and they had mentioned public verification of control substance authority for an APRN, W. Anderson asked if the individual could email him a copy of what's available for viewing in the Missouri Board of Nursing verification database. The Missouri Board of Nursing verification states "certification type" as RX authority for controlled substance. There was discussion regarding what is required on the controlled substance form; how often the Board should be updated with changing information; does the form need signed by the contracting physician or does the practitioner need to just enter/write the physicians name; how much work would this take to add/request the additional information for online renewals as well. If the Board is going to have accurate and usable data, K.S.A. 65-1130(d) 1 & 2, explains the Advance Practice RN shall register

with Federal Drug Administration and notify the board of the name and address of the responsible physician or physicians”; however it states nothing about requiring the physician’s signature. The committee tabled discussion until the June 2012 meeting.

Licensure – CNS vs. NP:

When licenses were mailed to APRNs the board started receiving phone calls that individuals had received the wrong license(s). These same individual(s) stated they were and had been practicing as nurse practitioners (NP) even though review of the licensure files, initial applications, transcripts reflected these individuals were educated and licensed as clinic nurse specialists (CNS). The board also reviewed the statutes from the year in which these individuals were licensed as CNS and it does not read any different then now. There were several minutes of discussion that resulted in the committee’s decision being if they went to school to be a CNS and applied as a CNS that they would have to practice as a CNS. If these individuals want to call themselves NPs or practice as a NP in Kansas they must return to school for the additional education requirements to become a NP.

There was additional discussion regarding some of these individuals being nationally certified as NPs, due to the ANCC allowing them to set for the NP certification. The committee stated the board could not do anything about ANCC allowing these CNS to get national certification, as a NP instead of as a CNS, however they would not be permitted to call themselves a NP nor could they practice as a NP in the state of Kansas without being licensed as a NP by the board.

Agenda for June 2012
Committee Meeting:

Controlled Substance Form/Reporting
Define Advanced Practice CNEs

Adjourn:

It was moved to adjourn at 2:50.

Jane Conroy, RN, MS NP-C, APRN, Chair

Date