



Janet Napolitano
Governor

Joey Ridenour
Executive Director

Arizona State Board of Nursing

EDUCATION ADVISORY COMMITTEE MINUTES April 18, 2008

MEMBERS PRESENT:

Constance Woulard, Co-Chair, RN, MSN
Judi Crume, PhD, RN
Sally Doshier, EdD, RN, CNE
Terry Duffy, RN, MN, CDE
Rita Jury, MSN, CPHQ, RN
Ela-Joy Lehrman PhD, RN
Carol Mangold, RN MSN
Marty Mayhew RN, MSN
Linda Riesdorff RN, MS, DON
M. Kitty Rogers, MS, RN
Margaret Souders, MS, RNC, CNS
Brian Stewart, MSN, BSN, BFA, RN
Sandra Truelove, BS, MA, MBA
Jane Werth, MS, RN
Marilyn Whinton, RN, MSN (telephonic)

MEMBERS ABSENT:

Kathy Malloch, Co-Chair, PhD, RN, MBA
Sherrie Beardsley RN, MBA/HCM
Mary Killeen, PhD, RN
Jo A. Podjaski, MSN, OCN, RN
Cheryl Roat RN, MSN

GUESTS PRESENT

Sharon Caves, Pima Medical Institute
Mary Rhona Francouer, Arizona Western College
Star Jermyn, Cochise College
Jennifer Lakosil, Cochise College
Cathy Lucius, MCDNP
Paul Williamson, Pima Medical Institute
Don Isham, Pima Medical Institute

BOARD STAFF ATTENDING:

Pamela Randolph, Associate Director, Education
Karen Grady, Education Consultant

1. CALL TO ORDER/OPENING REMARKS/INTRODUCTIONS

The Education Advisory Committee meeting was called to order by Constance Woulard at 9:30 a.m.

2. APPROVAL OF MINUTES – FEBRUARY 15, 2008

Mangold moved and Doshier seconded to approve the February 15, 2008 minutes without correction. Motion carried unanimously.

3. INFORMATION/POLICY

A. Clinical Placement Issues

Randolph addressed the committee regarding the clinical placement solutions list. The list was reorganized and provided to the committee members for review. All the ideas are still on the table. Items were eliminated that failed to offer a solution. Randolph provided a summary on clinical facilities utilization by nursing programs and information provided by clinical coordinators regarding factors that impact clinical placement. The committee was

also provided information regarding the March 2007 Town Hall Meeting held at Rio Salado on the subject of clinical placement and a literature search. Randolph stated that as far as innovation and clinical placement, the Maricopa district has been used a computerized system for several years. Among the information provided, the most innovative clinical placement ideas from the faculty shortage conference sponsored by National Council of State Boards of Nursing are: concept based clinical learning experience, care based experiences, case based experiences, skill based experiences, and integrative experiences all from the Oregon model.

Randolph spoke with Kathy Malloch who suggested the committee break into small groups and propose what each group thinks would be a feasible pilot. The committee created groups based on rural programs, Tucson area programs, and Phoenix area programs. Faculty representatives joined Tucson and Phoenix group discussions.

Phoenix area programs offered the following:

“New Eyes for the Faculty” or “Immersed Learner in Meaningful Service to the Patient”

Werth stated that one of the research studies in the packet discussed long-term care being a valuable experience for the student. Werth noted that the biggest problem with the use of long-term care as clinical placement is that the vision of the faculty may be limited for what can be done in long-term care and the quality of the placement. Norlin offered that Mayo hopes to conduct a summer experience for faculty that would be an immersion in acute care. The group stated that faculty immersion would be valuable for long-term care, and recommended faculty immersion in all patient care experiences. The group noted the value in getting faculty placed in the ‘right places’ before the students are ready to be placed. Truelove offered that hospice could provide a great clinical experience but cannot take 10 students. Hospice facilities may be able to take 2 students which may provide for a thorough experience.

Rural programs reported the following:

Riesdorff stated that this group concentrated on creative solutions 5-15 and discussed simulation as well. Arizona Western College and Northern Arizona University have experienced crowding in Yuma. Both institutions are planning for the future and hope to get students thinking early. The group was in favor of ideas involving collaboration with students or alternative assignments so that the clinical instructor has time to spend with those providing care. The group suggested that 12 hour shifts are not always in the best interest for early levels. The group suggested the collaboration starting early in the program. As things progress from simple to complex the student will still need to have challenges and learn time management. Doshier offered that in the 1st semester students would be divided into pairs caring for 5 patients with specific guidelines for each pair, collaborating during the day and presenting a concept map at the end of the day in conference. The clinical instructor would be following 5 patients rather than 10. The group did discuss how to progress in this fashion stating that by semester 4 students should be able to function independently through patient assignments.

Tucson area programs reported the following:

Stewart stated that this group looked at splitting loads on floors, increased simulation use, and dividing hospitals. The major challenge is that the area does not have a lot of resources. There are not a lot of hospitals to divide between programs except possibly in med-surg. The floors are very restricted, and the clinical coordinators are mandated to fill and if programs try to relieve loads on RNs, the slots get filled immediately. The group suggested a return to students and faculty to ascertain the actual experience. Stewart stated that understanding how faculty and students are dealing with changes may help to stimulate ideas. Mangold stated that faculty expects to continue to utilize the same sites and may benefit from exploring ideas about different types of clinical experiences and learning.

Committee Discussion:

The committee action plan would be to expand the concept of immersion by getting faculty to be immersed into any type of alternative clinical experience so they could see what is available and conceptualize something different. The committee will develop faculty immersion plans and look at alternatives. A document will be prepared regarding this discussion for the next meeting. Members will return with more on the faculty immersion concept.

Members suggested this as a topic for the Statewide Educators Meeting.

B. NCSBN Letter to Dr. Benner Regarding Carnegie Study

Randolph addressed the committee stating that this was provided for information. The committee has only had access to the précis of the chapters, as the book is not available at this time. National Council wanted to respond to some of the elements in the report, particularly in relation to the NCLEX exam.

C. Grant Application for Competency Testing Using High-Tech Simulation Update

Randolph informed the committee that the grant committee was not awarded the grant. The grant committee received feedback regarding resubmission, and will be meeting next week to discuss revisions and formulate an action plan.

D. Legislative Update

Randolph stated that the Private Post Secondary Board issue regarding jurisdiction over CNA programs passed through both committees. The Board consolidation bills do not seem to be going forward at this time. Bill 2269 was introduced by Representative Bob Stump. Representative Stump had information that the Board had a pending case regarding a nurse practitioner who was performing abortions. The Board has not made a decision on that case. Subsequently, Representative Stump introduced a bill prohibiting any nurse from performing an abortion. The bill originally sought to amend the Nurse Practice Act but was revised under Title 36, Public Safety. The bill has passed the house health committee and has gone to the committee on public safety. Testimony on the matter was heard. Randolph was available for questions only as the Board has not taken an official position on the matter. Two nurse practitioners testified against the bill. The Arizona Nurses Association remained neutral, however, did maintain that they did not want other groups amending scope of practice in the Nurse Practice Act. Testimony was received from Dr. Michael Urig, Chief of Staff OB/GYN, Banner Good Samaritan. Urig maintained that the procedure was not in within the scope of practice for a nurse practitioner. Committee members could view testimony on the legislative website. The Nurse Practice Act Steering Committee is working on revisions to be introduced in 2009. A draft document will come to the Education Advisory Committee for review.

E. Advisory Opinion “Supervision of Unlicensed Nurse Externs by Registered Nurses”

Randolph addressed the committee stating that Advisory Opinions are periodically reviewed by the Scope of Practice Committee. The Scope of Practice Committee asked for Education Advisory Committee input.

Committee members recommended sentence 2, paragraph 2 be changed to state the following: “The unlicensed nurse extern must show proof of having completed didactic

instruction with clinical validation in fundamental nursing skills and satisfactory completion of at least one clinical semester in the nursing program.”

Committee members discussed externs doing venipuncture, blood draws, central lines, IV medication, parenteral fluids and blood products and requested that the advisory opinion provide more clarity and prohibit the extern from blood draws and venipuncture since they could not complete the process of inserting an IV which would require fluid administration. They stated that they would actually prefer that the Board allow delegation of medication administration, but barring that, it would be confusing for externs and preceptors to allow the extern to perform part of the process and not the whole process. Grady will draft a statement to reflect the committee discussion.

Members also discussed the definition of nurse extern. Grady will revise sentence 1, paragraph 1 for clarity. Members also discussed who defines a qualified preceptor. Randolph will change sentence 2, paragraph 4 to read as follows: All skills must be validated and documented in accordance with the institution’s policies.

F. Refresher Course Survey Results 2007

Randolph provided the report to the committee for information. Numbers remain small. The Board now has two years of trended data. There are no ongoing projects to trend employment data. Schools do not have trending data at this time as post graduation survey responses remain very low.

G. North Dakota CNE Refresher Program Changes

Randolph addressed the committee stating that the CNE Net Refresher Course Program has made changes to their LPN refresher course including: increased program hours, case studies as part of required coursework, and clearer policies. This matter was provided as information and does not need committee approval. CNE Net also has a new director. Committee members appreciated that CNE requires students to identify a preceptor early in the program.

H. Committee Membership Renewal/Call for New Members/Committee Evaluation

Randolph addressed the committee stating that the Education Advisory Committee is one of the committees where members can serve multiple terms. Randolph asked that members consider applying for an additional term. Those wishing to serve an additional term should complete the service renewal application. All committee members are requested to complete the evaluation form, and return the forms to Karen Grady or Karen Gilliland.

I. Preceptorships in Nurse Practitioner Programs

Randolph stated that a Board member received a plea from a student on a nurse practitioner website for a preceptorship. The Board member expressed concern noting that these pleas are becoming more frequent. The Board member also expressed concern that there may not be enough oversight on the part of schools. Randolph asked the committee to consider how to insure programs address the issue, and to advise as to whether or not the matter should be addressed in rule.

Committee members noted that some students do not always follow protocols for finding a preceptor, some students may select a facility that the program does not have an agreement with, and that institutions provide information and guidelines that students don’t always

understand. Program directors on the committee noted that finding quality preceptors was a problem across the board in nursing education.

4. Applications for Program Change

A. MCCDNP Nursing Program

Maricopa Community College District Nursing Program Representative Present: Ms. Cathy Lucius, Administrator

Note: Education Advisory Committee Members Dr. Judi Crume, Ms. Margaret Souders, and Ms. Jane Werth recused themselves from this portion of the agenda.

Committee members requested information and clarity regarding the rationale for making microbiology a co-requisite; elimination of the PN exit; curriculum; providing support services and tutoring services; waiting list; and the timeframe for completion of prerequisites.

Lucius addressed the committee stating that the application for program change was submitted on behalf of the faculty to change the mission and philosophy of the program and the length of the program. Lucius stated that prior to changes being made the length of time for students to complete prerequisites for the nursing program was approximately three years or more which is not consistent with an associate degree two year education. Faculty serving on the MCCDNP curriculum committee reviewed curricula from model programs across the country. Moving the microbiology to be required in the first two semesters makes it a prerequisite to Block 3. Average students could meet the prerequisite within one semester making the program length 2 ½ years.

Motion: Recommend Board approve proposed change for the Maricopa District Nursing Program.

Moved: Ms. Linda Riesdorph

Seconded: Mr. Brian Stewart

Discussion: None

Vote: Motion carried unanimously.

5. APPLICATION FOR PROPOSAL APPROVAL

A. Pima Medical Institute - Tucson

Pima Medical Institute Representatives Present: Mr. Paul Williamson, Mr. Don Isham Campus Director, Ms. Sharon Caves

Education Committee Member M. Kitty Rogers recused herself from this portion of the agenda.

Committee members requested information and clarity on planned frequency for admissions and overlapping students; transferability of credits; clinical hours stated on the Healthcare Availability Form as it suggests all hours will be evenings, nights and weekends; responsibility of curriculum; faculty role in curriculum development; faculty openings;

faculty involvement in retention; faculty job description with regard to “personal counseling” of students; and boundaries of faculty and students. Members suggested the program modify their report to reflect that one person cannot veto curriculum decisions; eliminate ‘personal counseling’ and keep academic counseling in faculty expectations; redraft organizational charts to be less confusing; and make sure faculty review proposed curriculum prior to implementation. Members also wanted to be certain that administrative support staff would be able to provide faculty support in light of the job description requirement of certification in library science and department budget responsibilities.

Mr. Williamson addressed the committee stating that there is autonomy on the campus level based on individual campus/community needs. Pima Medical Institute has established an articulation agreement with Grand Canyon University. Ms. Caves offered that the Pima Medical Institute national program maintains open book fiscal management and requires all administrative professionals to obtain certification or continuing education in library science. Williamson will revise documents to show that the program does not intend to conduct clinical rotations after 11pm, that the program will not be doing nights, that the program will be doing evening and weekends with Carondelet, and that Northwest Medical Center has offered days. Williamson will visit proposed clinical sites.

Motion: Recommend Board approve the proposal, but prior to submission of a provisional application Pima Medical Institute in Tucson shall meet with all local Tucson nursing programs to determine the true clinical availability and reflect these in the provisional application.

Moved: Dr. Sally Doshier

Seconded: Ms. Sandi Truelove

Discussion: Members discussed the approval process and the requirements for proposal approval and provisional approval. Clinical availability forms, while not required at the proposal approval stage, indicate progress toward obtaining clinical placements have been made.

Vote: Motion carried unanimously.

6. APPLICATION FOR PROVISIONAL APPROVAL

A. None.

7. REPORT OF SITE VISITS/CONTINUING APPROVAL

A. Cochise College

Cochise College representatives Jennifer Lakosil, Director of Nursing and Allied Health, Star Jermyn, Assistant Director for Nursing

Grady addressed the committee stating that the Cochise College additional response was e-mailed to members prior to the meeting. The information submitted was in response to potential deficiencies identified in the site-visit report. Committee members informed Grady that they received and reviewed the document. Members requested information regarding the impetus for the move from the Douglas campus to the Sierra Vista campus.

Ms. Lakosil offered that documentation has shown that the student demographics over the past 10 years have been shifting. Students primarily come from Sierra Vista with approximately 10% of students from Douglas. The former director of nursing proposed the move six years ago but was denied. The College Board hired a consultant to review the matter who will meet with the board today to recommend the program be based out of Sierra Vista. Demographic data provides support and rationale for the move to Sierra Vista. Labs will be maintained in Douglas, Benson, Nogales and Sierra Vista.

Motion: Recommend Board continue approval with a report to the Board in six (6) months on remedying all of the potential deficiencies. For any deficiencies not remedied within six (6) months, return to the Board.

Moved: Ms. Jane Werth

Seconded: Ms. Marty Mayhew

Discussion: None

Vote: Motion carried unanimously.

B. Arizona Western College

Arizona Western College representative present: Mary Rhona Francouer, Director of Nursing

Education Committee member Marilyn Whittenton recused herself from this portion of the agenda.

Francouer addressed the committee stating that the school is implementing recommendations provided by Grady during the site-visit. The college is expanding into three new buildings which will increase classroom availability. One of the buildings will be a student services building which would include the testing center and accommodate more students. A proposal is being written with regard to full-time administrative support. Francouer has revised clinical contracts recently approved by legal counsel which will be sent to all facilities.

Motion: Recommend Board continue approval with report to the Board in six (6) months on the remedy of all potential deficiencies. For any deficiencies not remedied within the six (6) months return to the Board.

Moved: Ms. Rita Jury

Seconded: Ms. Marty Mayhew

Discussion: None

Vote: Motion carried unanimously.

8. NCLEX

A. None.

9. BOARD AND MEMBER UPDATES

Dr. Crume announced a meeting on April 25, 2008 beginning at 9:30 a.m. at GateWay community College regarding the establishment of a chapter of the National Organization of Associate Degree Nursing in Arizona.

10. DEBRIEFING ON TODAY'S MEETING

Members expressed concern with the facility availability form specifically with regard to consistency in how the form is filled out and who is responsible for signing it. Members stated that they find the form difficult to evaluate and requested applying programs state clearly on the form when students are in different rotations and what the applying program's expectations are in terms of program growth. Committee members noted that the group work was productive and found the discussion on clinicals helpful. Members also noted what appears to be a paradigm shift in the ongoing clinical placement discussion from discussing actual placement to discussing faculty role. Members felt that every proposal applicant should be required to meet with regional programs, and suggested that the Healthcare Availability Forms be reviewed at the proposal level.

11. CALL TO THE PUBLIC

There were no members of the public in attendance.

12. FUTURE MEETING TOPICS/DATES

Next Meeting: Friday, June 6, 2008, 9:30 a.m.
Friday, August 1, 2008, 9:30 a.m.

13. ADJOURNMENT

There being no further business Woulard adjourned the meeting at 2:19 p.m.

MINUTES APPROVED BY:



Signature

:kgb