



**Janice K. Brewer**  
Governor

**Joey Ridenour**  
Executive Director

## Arizona State Board of Nursing

### ADVANCED PRACTICE COMMITTEE MEETING MINUTES February 11, 2011

AGENDA ITEM	TOPIC	DISCUSSION	ACTION	FOLLOW-UP
1	Greeting	The meeting was called to order by Denise Link at 10:05 a.m. Link welcomed the audience. Committee members and Board staff introduced themselves.		
2	Approval of Minutes 07/30/10		Gilbert moved and Keuth seconded to approve the July 30, 2010 minutes without correction. Motion carried unanimously.	
3	NCSBN APRN Consensus Model Summit January 2011	<p>A summit was held in January to address questions regarding the NCSBN consensus model and to provide guidance with adoption by states.</p> <p>The gaps between the model and statutes/rules include the following:</p> <ul style="list-style-type: none"> <li>• physician collaboration clause;</li> <li>• the Board does not recognize APRN in title;</li> <li>• CNS scope of practice is not consistent with other states. There is a current movement to obtain sunrise legislation for prescriptive privileges and educational requirements;</li> </ul>		<p>In preparation of the next legislative session, Board staff will draft a document comparing the model and statute/rule by June 2011. Language addressing gaps identified will be drafted by late summer or early fall.</p> <p>Open forums will be conducted for everyone to have an opportunity to comment on the</p>

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		<ul style="list-style-type: none"> <li>• CRNAs are able to practice in the state; however, the presence of physician is needed, and prescribing privileges are not the same;</li> <li>• Do not do licensure for nurse practitioners; Arizona issues certificates;</li> <li>• Have board review process for APRN programs.</li> </ul> <p>Moffett recommended the adoption of a distinct definition of CRNA and the consensus model definitions which establish the differences between prescribing, administering, ordering, and dispensing, noting that such definitions are vague in the Nurse Practice Act.</p> <p>Committee members discussed - the need for clarification of protected title; prescriptive authority, and adopting DEA definitions.</p>		<p>recommendations being made.</p> <p>Committee members will forward questions to Board staff for Busby to take back.</p>
4	Review of Revised Decision Tree	<p>The Decision Tree was revised to reflect recommendations made at the previous Advanced Practice Committee meeting.</p> <p>Prescribing language was discussed under Agenda Item 3.</p> <p>“Prescribing” on the Decision Tree refers to RN scope of practice, setting forth a course of action regarding nursing interventions.</p>		
5	Medical Marijuana	A review of the medical marijuana legislation revealed that nurse practitioners do not have certifying or prescribing rights. Committee	<b>Motion:</b> Send a letter to the appropriate professional nursing organization(s)	Board staff will draft letter on behalf of committee.

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		<p>members expressed concern with legislation limiting scope, noting that nurse practitioners work with all conditions medical marijuana is approved for; and discussed public misunderstanding, the impact on communities, and the need for APRN to be included in the language of the law. As it is not the committee's charge to make such recommendations, it was the consensus of the committee that advocacy and recommendations should come from professional organization(s).</p>	<p>stating the Advanced Practice Committee concern that APRN was not included in the definition(s) of the medical marijuana legislation. Co-committee chairs, Denise Link and Kathryn Busby will sign the letter.</p> <p><b>Moved:</b> Judy Hileman  <b>Seconded:</b> Marianne McCarthy</p> <p><b>Discussion:</b> None.</p> <p><b>Vote:</b> 15 yea; 1 abstention  Motion carried.</p>	
6	Health Care Reform and Impact on APN Practice	<p>Committee members discussed the need to make sure that language is congruent in the concept of patient centered medical homes; risk in area of NP led medical homes; making sure that NPs are recognized; being watchful with insurance exchanges to be certain NPs are included; advocacy from the provider community; new opportunities with the recognition of nurse practitioner led medical homes by the National Council of Quality Assurance. NCQA has model rules, and nurse practitioner organizations are providing representation on committees.</p>		

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7	5 Year Rule Report Article 5	<p>The Board is required to review agency administrative rules every 5 years to determine if they are still effective and enforced and submit the review to the Governor’s Regulatory Review Council (GRRC) for approval. Due to the short time frame for submitting the review, Board staff was unable to seek consultation with stakeholders and submitted the review of Article 5 (Advanced and Extended Nursing Practice) without expiring any rules. GRRC took exception to retaining R4-19-510 (Use of Title). This rule is replaced and trumped by ARS §32-1636. During formal review on 2/1/2011 at the GRRC meeting GRRC voted to return the 5 year rule report to the Board and asked that the Board either allow the rule to expire or shorten the time-frame for amending Article 5.</p>	<p><b>Motion:</b> Amend the five-year rule report to allow R4-19-510 to expire under the provisions of ARS § 41-1056 (E).</p> <p><b>Moved:</b> Busby <b>Seconded:</b> Martinez</p> <p><b>Discussion:</b> None</p> <p><b>Vote:</b> 15 yea; 1 abstention; Motion carried.</p>	<p>This rule change and an explanation will be included in regulatory journal.</p>
8	Committee Membership	<p>Dahn discussed committee membership terms and requested current members notify her should they wish to continue to serve on the Advanced Practice Committee. Areas of representation will include: FNP, ANP, CNM, PEDS, Neonatal NP; CNS, CRNA, WHNP, Psych MH; Academia; and Acute Care. It was the consensus of the members that the committee meet quarterly. Dahn will survey members to determine meeting dates.</p>		<p>Dahn will send out a survey for future meeting dates.</p>
9	Items for Agenda for Future Meetings	<p>A meeting will be held in April to address the consensus model.</p>		<p>Dahn will send out request for dates of availability in</p>

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		Link asked members to email her or Board staff with recommendations for future topics.		April.
10	Call to the Public	Audience members did not share any comments.		
11	Adjournment		There being no further business Busby moved and Bohenkamp seconded to adjourn the meeting at 11:41 a.m.	

**February 11, 2011 Advanced Practice Committee Meeting Attendance**

<b>Members Present</b>	<b>Members Absent</b>	<b>Board Staff</b>	<b>Guests</b>
Denise G. Link, RNP, PhD, CNE, FNAP, Chair Kathryn Busby, JD, Co-chair Susan K. Bohnenkamp, RN, MS, CCM, APRN-BC Janice L. Bovee, CNM Jennifer Brodie, MS, CPNP Martha Carey-Lee, MS, FNP-C Nancy Denke, MSN, FNP Marci Farquhar-Snow, MN RN BC CCRN CMC CCNS ACNP Elizabeth Gilbert, RNC, MS, FNP Carol Harrigan, MSN, NNP Judy Hileman, Psych/MHNP, MS, FNP Jacqueline A. Keuth, RN MS CCNS CCRN Anita Martinez, RN MS CNM Marianne McCarthy, PhD, RN James Mitchell, MS, MBA, Psych/MHNP Rodney Moffett, CRNA MS Sally Reel, PhD, FNP (telephonic)	Carol E. Feingold, MS APRN PMHNP BC Julia Griffin, RN MS AOCNS Agnes Oblas, MSN, ANP	Janeen Dahn, Advanced Practice Consultant Pamela Randolph, Associate Director Education Joey Ridenour, Executive Director Karen Gilliland, Board Staff	Deborah Kohm, MSN, RN, ACNS-BC