Tuesday, July 21, 2020

8:30 A.M. – Agency Subordinate Recommendation Consideration – Board Room 4

Joint Board Members ONLY:
- Marie Gerardo, MS, RN, ANP-BC; Board of Nursing Member; Chair
- A Tucker Gleason, PhD; Board of Nursing Member
- Louise Hershkowitz, CRNA, MSHA; Board of Nursing Member
- Kenneth J. Walker, MD; Board of Medicine Member
- Nathaniel Ray Tuck, Jr., DC; Board of Medicine Member
  ➢ Diane Lee Burns, LNP

9:00 A.M. - Business Meeting of the Board of Nursing – Quorum of the Board - Conference Center Suite 201 – Board room 2

CALL TO ORDER: Marie Gerardo, MS, RN, ANP-BC; First Vice President

ESTABLISHMENT OF A QUORUM.

REVIEW OF SOCIAL DISTANCING GUIDELINES

ANNOUNCEMENT
  - Recognition of Service of Louise Hershkowitz as President of the Virginia Board of Nursing
  - Ann Tiller, Board of Nursing Compliance Manager, was appointed to the Nurse Licensure Compact (NLC) Technology Task Force
  - Jodi P. Power, RN, JD, Senior Deputy Executive Director for the Virginia Board of Nursing, retired effective April 1, 2020
  - Claire Morris, RN, LNHA, started the Deputy Executive Director position on March 25, 2020 (replacing Jodi Power)
  - Terri Clinger, DNP, RN, CPNP-PC, Deputy Executive Director for Advanced Practice, resigned effective April 24, 2020
  - Robin Hills, RN, DNP, WHNP, transferred to the Deputy Executive Director for Advanced Practice position effective June 1, 2020 (replacing Terri Clinger)
  - Marian McLean, RN, CCM, started the Nursing Probable Cause Reviewer position on June 22, 2020
• Francesca Iyengar, MSN, RN, accepted the Discipline Case Manager position and started on July 10, 2020 (replacing Claire Morris)

• Jay P. Douglas, RN, MSM, CSAC, FRE, Executive Director for the Board of Nursing, is on the Slate of Candidates for NCSBN as President-elect

A. UPCOMING MEETINGS:

• NCSBN Nurse Licensure Compact (NLC) Commission Annual Meeting is scheduled virtually for August 11, 2020 in Chicago, IL – Ms. Douglas will attend as Commissioner for the NLC.

• NCSBN Annual Meeting is scheduled virtually for August 12, 2020 in Chicago, IL – Board Members and Staff may participate as registration allows

• The Committee of the Joint Boards of Nursing and Medicine meeting is scheduled for Wednesday, October 21, 2020 at 9:00 am in Board Room 2

REVIEW OF THE AGENDA:

• Additions, Modifications
• Adoption of a Consent Agenda

CONSENT AGENDA

B1 January 27, 2020 Board of Nursing Officer Meeting*
B2 January 27, 2020 Formal Hearings*
B3 January 28, 2020 Board of Nursing Business Meeting*
B4 January 29, 2020 Formal Hearings – Panel A*
B5 January 29, 2020 Formal Hearings – Panel B*
B6 January 30, 2020 Formal Hearings*
B7 March 18, 2020 Telephone Conference Call*
B8 April 21, 2020 Telephone Conference Call*
B9 May 7, 2020 Telephone Conference Call*
B10 June 17, 2020 Telephone Conference Call*
B11 June 29, 2020 Telephone Conference Call**

C1 Agency Subordinate Tracking Log*
C2 Financial Report as of May 31, 2020*
C3 Board of Nursing Monthly Tracking Log*
C4 HPMP Quarterly Report as of June 30, 2020**
C5 Criminal Background Check (CBC) Unit Annual Report*
C6 Board of Nursing January 1 – December 31, 2019 Licensure & Discipline Statistic*
C7 The Committee of the Joint Boards of Nursing and Medicine February 12, 2020 DRAFT Business Meeting and Informal Conference minutes*
C8 Board of Health Professions February 27, 2020 Meeting DRAFT Minutes*
C9 Informal Conference Schedule from August through December 2020*
C10 Board of Nursing 2021 Business meeting and formal hearing dates*
C11 Executive Director Report
  ❖ February 12, 2020 Letter from Julia George, MSN, RN, FRE, NCSBN President**
  ❖ July 1, 2020 Notification from Committee of the Joint Boards of Nursing and Medicine regarding Certified Register Nurse Anesthetists (CRNAs) with Prescriptive Authority**
E1 Memorandum – 2019 NCLEX Pass Rates**
E2 Memorandum – Nursing Education Programs Closed in 2019**
E3 Memorandum – Nursing Education Program Application Update**
E4 Education Special Informal Conference Schedule**
E5 Nursing Education and Nurse Aide Education Programs Update**
E6 Education Special Conference Committee July 8, 2020 Minutes and Recommendations

F1 Status of Regulatory Actions*
F2 Report of the 2020 General Assembly*

10:00 A.M. – PUBLIC COMMENT

B. LEGISLATION/REGULATIONS – Ms. Yeatts
F3 Adoption of Final Regulations – Exempt Action to Regulations for the Licensure of Massage Therapy (18VAC90-50-40)*
F4 Proposed Amendments to Regulations for use of Simulation in Nursing Education by a Fast-Track Action*
F5 Proposed Amendments to Regulations for Waiver of Electronic Prescribing for Nurse Practitioners*
F6 Adoption of Final Regulations for Clinical Nurse Specialist Registration*

C. CONSENT ORDERS: (Closed Session)
G1 Erica Crenshaw Lawal, RN*
G2 Michele K. Lucht, RN**
G3 Hye Kyung Lee, LMT
G4 Tiffany Cheyenne Thompson, RN

10:15 A.M. - ADJOURNMENT

(* mailed 6/30) (** mailed 7/8)

Our mission is to assure safe and competent practice of nursing to protect the health, safety and welfare of the citizens of the Commonwealth.
Virginia Board of Nursing

Officer Meeting

January 27, 2020 Minutes

Time and Place: The meeting of the Board of Nursing Officer meeting was convened at 8:00 A.M. on January 27, 2020 in Board Room 3, Department of Health Professions, 9960 Mayland Drive, Suite 201, Henrico, Virginia.

Board Members Present: Louise Hershkowitz, CRNA, MSHA, President, Chairperson
Jennifer Phelps, BS, LPN, QMHPA, First Vice President
Marie Gerardo, MS, RN, ANP-BC, Second Vice President

Staff Members Present: Jay P. Douglas, RN, MSM, CSAC, FRE

1. Review of Election of Officers Process

   The process of election of officers that will be held at the Business meeting were reviewed as outlined in the BON Bylaws

2. Assignment of Board Member Mentors

   Officers discussed the various mentoring needs of new Board Members and special conference committee composition. Minimal changes will occur with Ms. Shah being assigned as mentor to Brandon Jones. Ms. Hershkowitz will discuss this with Ms. Shah. Ms. Swineford is to move to Special Conference Committee A to replace Ms. Shah.

3. Discussion regarding Committee Assignments and change of the Committees: Discipline, Education and Medication Aide Curriculum

   Officers discussed potential participants for Medication Aide Curriculum Committee. Proposed members include Ms. Smith, Ms. Friedenburg and Ms. McElfresh.

   Decisions were not made regarding the Discipline Committee members although it was noted that for continuity and identifying an experienced chair Ms. Gerardo should remain as chair.

   The Education Committee was generally discussed with an acknowledgment the Board now has several members with nursing education related experience who should be fully trained and assigned education related work as is comes up. Those members included Ms. Swineford, Dr. McQueen-Gibson, Ms. Smith, Dr. Dorsey and Mr. Monson. This committee would be in addition to the Special Conference Committee that meets prior to Board Meetings and is comprised of rotating members.
4. Use of Board Member Behavioral Expectations Document (retired GD)

The Officers agreed that this document which is a retired GD should be used on an ongoing basis for a variety of purposes to include new Board Member orientation, intentional conversations with current Board members, and Board Member training. Ms. Douglas was asked to redistribute to the Officers the final draft that was previously considered by the Board.

5. Discussion of possible topics for 2020 Board Member training sessions

Possible topics for future training include Board member Behavioral Expectations, Education Program Approval Process, Massage Therapy case related issues (application fraud, victim response to trauma, Forensic nursing, FSMTB materials, Human Trafficking and collaboration with Law Enforcement). Ms. Phelps and Ms. Douglas will discuss the plan for the Massage Therapy training topics which may have to be spread over several sessions.

Ms. Mitchell, Board Counsel has also offered to conduct training in March related to Board Member role during hearings

The meeting was adjourned at 9:00 A.M.
TIME AND PLACE: The meeting of the Virginia Board of Nursing was called to order at 10:03 A.M., on January 27, 2020 in Board Room 2, Department of Health Professions, 9960 Mayland Drive, Suite 201, Henrico, Virginia.

BOARD MEMBERS PRESENT: Jennifer Phelps, BS, LPN, QMHP-A, CSAC, First Vice President Marie Gerardo, MS, RN, ANP-BC, Second Vice President Margaret Friedenberg, Citizen Member Tucker Gleason, PhD, Citizen Member Mark Monson, Citizen Member Felisa Smith, RN, MSA, MSN/Ed, CNE

STAFF PRESENT: Terri Clinger, DNP, MSN, CPNP-BC, Deputy Executive Director for Advance Practice Charlette Ridout, RN, MS, CNE, Deputy Executive Director Darlene Graham, Senior Discipline Specialist

OTHERS PRESENT: Charis Mitchell, Assistant Attorney General, Board Counsel

ESTABLISHMENT OF A PANEL: With six members of the Board present, a panel was established.

FORMAL HEARINGS: Jennifer Renae Perry Battani, RN Reinstatement 0001-200920

Ms. Battani appeared.

Anne Joseph, Deputy Director, Administrative Proceedings Division, represented the Commonwealth. Ms. Mitchell was legal counsel for the Board. Colleen Good, court reporter with Commonwealth Court Reporters, Inc, recorded the proceedings.

CLOSED MEETING: Dr. Gleason moved that the Board of Nursing convene a closed meeting pursuant to §2.2-3711(A)(27) of the Code of Virginia at 10:25 A.M., for the purpose of deliberation to reach a decision in the matter of Ms. Battani. Additionally, Dr. Gleason moved that Dr. Clinger, Ms. Ridout, Ms. Graham, and Ms. Mitchell attend the closed meeting because their presence in the closed meeting is deemed necessary and their presence will aid the Board in its deliberations. The motion was seconded and carried unanimously.

RECONVENTION: The Board reconvened in open session at 10:33 A.M.
Dr. Gleason moved that the Board of Nursing certify that it heard, discussed or considered only public business matters lawfully exempted from open meeting requirements under the Virginia Freedom of Information Act and only such public business matters as were identified in the motion by which the closed meeting was convened. The motion was seconded and carried unanimously.

ACTION:

Mr. Monson moved that the Board of Nursing approve the application of Jennifer Renae Perry Battani for reinstatement of her license to practice professional nursing in the Commonwealth of Virginia. The motion was seconded and carried unanimously.

This decision shall be effective upon entry by the Board of a written Order stating the findings, conclusion, and decision of this formal hearing panel.

ADJOURNMENT: The Board adjourned at 10:40 A.M.

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Terri Clinger, DNP, MSN, CPNP-BC
Deputy Executive Director for Advance Practice
TIME AND PLACE: The meeting of the Board of Nursing was called to order at 9:02 A.M. on January 28, 2020, in Board Room 2, Department of Health Professions, 9960 Mayland Drive, Suite 201, Henrico, Virginia.

PRESIDING: Louise Hershkowitz, CRNA, MSHA; President

BOARD MEMBERS PRESENT:
Jennifer Phelps, BS, LPN, QMHP-A, CSAC; First Vice President
Marie Gerardo, MS, RN, ANP-BC; Second Vice President
Yvette L. Dorsey, DNP, RN
Margaret J. Friedenberg, Citizen Member
Ann Tucker Gleason, PhD, Citizen Member
James L. Hermansen-Parker, MSN, RN, PCCN-K
Brandon A. Jones, MSN, RN, CEN, NEA-BC
Dixie L. McElfresh, LPN
Ethlyn McQueen-Gibson, DNP, MSN, RN, BC
Mark D. Monson, Citizen Member
Felisa A. Smith, RN, MSA, MSN/Ed, CNE
Cynthia M. Swineford, RN, MSN, CNE

MEMBERS ABSENT: Meenakshi Shah, BA, RN

STAFF PRESENT: Jay P. Douglas, MSM, RN, CSAC, FRE; Executive Director
Jodi P. Power, RN, JD; Senior Deputy Executive Director
Terri Clinger, DNP, RN, CPNP-PC; Deputy Executive Director for Advance Practice
Charlette Ridout, RN, MS, CNE; Deputy Executive Director
Robin L. Hills, DNP, RN, WHNP; Deputy Executive Director for Education
Stephanie Willinger; Deputy Executive Director for Licensing
Jacquelyn Wilmoth, RN, MSN; Nursing Education Program Manager
Claire Morris, RN, LNHA; Discipline Case Manager
Patricia L. Dewey, RN, BSN; Discipline Case Manager
Ann Tiller, Compliance Manager
Huong Vu, Executive Assistant

OTHERS PRESENT: Charis Mitchell, Assistant Attorney General, Board Counsel
Barbara Allison-Bryan, MD, Department of Health Professions Chief Deputy
– joined the meeting at 10:43 A.M.
Elaine Yeatts, Senior Policy Analyst, Department of Health Professions –
joined the meeting at 9:15 A.M.

IN THE AUDIENCE: Guia Caliwagan, Philippine Nurses Association of Virginia (PNAVA)
Perry Francisco, PNAVA
Isabelita Paler, PNAVA
Bella Nocon, PNAVA
Zenaida D. Laxa, PNAVA
Virlita R. Delima, PNAVA  
Janet Wall, CEO for Virginia Nurses Association (VNA)/Virginia Nurses  
Foundation (VNF)  
Annette Graham, Board of Nursing Staff

ESTABLISHMENT OF A QUORUM:  
Ms. Hershkowitz asked Board Members and Staff to introduce themselves.  
With 13 members present, a quorum was established.

Ms. Hershkowitz welcomed Mr. Jones as a new Board Member. Mr. Jones  
provided background information about himself.

ANNOUNCEMENTS: Ms. Hershkowitz highlighted the announcements on the agenda.  
• World Health Organization 2020 International Year of the Nurse and the  
Midwife  
• REMINDER – Financial Disclosure Statement is due on Monday,  
February 3, 2020  
• New Staff  
  o Latoya Bagley has accepted the wage Licensing Specialist by  
Examination. She started on November 25, 2019  
  o Trula Minton, MS, RN, former Board Member, has accepted the P-  
14 Agency Subordinate/Probable Cause Reviewer position. She  
started on November 25, 2019  
  o Florence Smith has accepted the P-14 Discipline Specialist. She  
started on January 6, 2020

UPCOMING MEETINGS: The upcoming meetings listed on the agenda:

• NCSBN Board of Directors meeting is scheduled for February 10-11, 2020 in  
Chicago – Ms. Douglas will attend as a member of the NCSBN Board of  
Directors for Area III  
• The Committee of the Joint Boards of Nursing and Medicine meeting is  
scheduled for Wednesday, February 12, 2020 at 9:00 am in Board Room 2  
• The NLC Commission Meeting is scheduled for March 2, 2020 in Boston,  
MA – Ms. Douglas will attend as Commissioner for NLC.  
• NCSBN Midyear Meeting is scheduled for March 4-5, 2020 in Boston, MA –  
Ms. Phelps, Dr. Dorsey, Ms. Ridout and Ms. Morris will attend. Ms.  
Douglas will attend as a member of the NCSBN Board of Directors for Area  
III.  
• NCSBN APRN Roundtable is scheduled for April 7, 2020 om Rosemont, IL  
– Attendance to be determined pending Agenda

Note - all NCSBN meetings are funded by NCSBN
ORDERING OF AGENDA: Ms. Hershkowitz asked staff to provide updates on the Agenda.

Ms. Douglas provided the following:

**Staff Update:**
- *Sharon Zook, DNP, RN, FNP-BC* has accepted the Education Program Inspector P-14 position. Her start date is February 3, 2020
- *Sally Ragsdale* has accepted the Discipline Administrative & Office Specialist position for CNA Discipline. Her start date is February 10, 2020
- *Jodi Power, RN, JD, Senior Deputy Executive Director,* will retire as of April 1, 2020 following 27 years of services at DHP

- C7 Executive Director Report has been removed to Reports from Consent Agenda Items
- Revised Motions and Informal Conference Scripts have been added to Other Matters
- Two additional Consent Orders have been added for consideration
- Possible Summary Suspension Consideration is scheduled for 1 pm prior to Board Member Training
- The formal hearing of Teresa Emerson, RN and LNP Reinstatement Applicant scheduled for Wednesday, 1/29/2020, on Panel A has been continued
- The formal hearing of Capri Williams, LPN Reinstatement Applicant scheduled for Thursday, 1/30/2020, has been continued

CONSENT AGENDA: The Board did not remove any items from the consent agenda.

Mr. Monson moved to accept the consent agenda as presented. The motion was seconded and carried unanimously.

**Consent Agenda**

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<tr>
<th>Code</th>
<th>Date</th>
<th>Description</th>
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<tbody>
<tr>
<td>B1</td>
<td>November 19, 2019</td>
<td>Board of Nursing Business Meeting</td>
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<td>B2</td>
<td>November 20, 2019</td>
<td>Formal Hearing - Panel A</td>
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<td>B3</td>
<td>November 20, 2019</td>
<td>Formal Hearing Panel B</td>
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<td>November 21, 2019</td>
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<td>December 5, 2019</td>
<td>Telephone Conference Call</td>
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<td>Board of Nursing Monthly Tracking Log</td>
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<td>HPMP Quarterly Report</td>
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<td>The Committee of the Joint Boards of Nursing and Medicine December 4, 2019 DRAFT Formal Hearing minutes</td>
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Ms. Douglas noted that Dr. Brown is not available today due to General Assembly and Dr. Allison-Bryan will join the meeting after returning from the General Assembly.

DISPOSITION OF MINUTES: None

REPORTS:

**C8 Board of Health Professions (BHP) December 2, 2019 Meeting DRAFT Minutes:**
Ms. Hershkowitz stated it was the first meeting she attended as the new appointee. Ms. Hershkowitz provided the Roles of BHP as follow:

- Studies whether emerging professions should be regulated, with the latest being music therapist
- Reviews Practitioner Self-Referral request
- Houses Healthcare Workforce Data Center (HWDC)

OTHER MATTERS:

**Board Counsel Update:**
Ms. Mitchell reported that the Court of Appeals affirmed the Board’s decision regarding the Highland appeal case in which the Board denied the application for licensure. Ms. Highland’s attorney filed a written appeal with the Virginia Supreme Court and no decision has been made regarding the appeal.

Ms. Yeatts joined the meeting at 9:15 A.M.

Ms. Mitchell reported that CNA Fashakin filed an appeal in the Richmond Circuit Court after the Board denied her reinstatement application. Ms. Mitchell has filed a motion to dismiss base upon the appeal filing being late with a hearing scheduled the end of March 2020.

REPORTS (cont.):

**C7 Executive Director Report:**
Ms. Douglas highlighted the following from her written report:

Regulations for Elimination of Separate License for Prescriptive Authority (PA) - will be effective on March 4, 2020. Nurse Practitioners (NPs), who currently have the PA, will receive the new NP licenses with the PA designation. Those, who do not have the PA, can apply with the $35 fee. New applicants will have one application incorporating both eligibility criteria. Communication has been sent to practitioners already. Ms. Willinger has worked closely with IT on this project. Ms. Douglas added that this will reduce fees and the administrative burden for licensees.

Mr. Monson inquired about how many states total are in the NLC with Alabama joining the Nurse Licensure Compact (NLC). Ms. Douglas replied 34. Mr. Monson asked how many additional states are in the process of
joining the NLC. Ms. Douglas replied about six additional states are expected to join the coming year.

**Licensure for Nurses from Puerto Rico (PC)** - NLC is reviewing the licensure requirements for Nurses from Puerto Rico who did not take the NCLEX exam, which can cause issues for endorsement in Virginia.

**Paperless Licensing Initiative at DHP** – the Board has implemented with massage therapy, practical nurse licenses will be the next group to be implemented. Licensees will no longer receive hard copy paper license after renewal. License Lookup will be primary source of verification. All Boards at DHP have started this process incrementally which will decrease costs, administrative burden and reduce the risk for fraud.

**OTHER MATTERS**

(cont.):

**D1  Revision of Guidance Document 90-57 (Virginia Board of Nursing By Laws)**

Ms. Hershkowitz reviewed the proposed revisions to the Bylaws by the Nominating Committee to allow for changes in timing for Nominating Committee to meet and election to occur with the officer terms to start in January 1 of each year.

Ms. Hershkowitz added additional change:

- Page 6 – A: adding “its” in front of “annual meeting”

Dr. Gleason suggested adding “has delegated authority” to the last sentence in Article XII right after “The Board of Nursing staff”

Ms. Douglas thanked Ms. Mitchell for her suggestions.

Mr. Monson motioned to adopt the proposed revisions and additional amendments to GD 90-57. The motion was seconded and carried unanimously.

**Presentation of Slate of Candidates and Election of Officers**

**D2a** November 19, 2019  Nominating Committee Meeting DRAFT Minutes

**D2b** December 6, 2019 Slate of Candidates for 2020 Officers Memo

Ms. Friedenberg presented the Slate of Candidates for Officers for 2020 by the Nominating Committee:

**President**: Jennifer Phelps, LPN Board Member  
(2nd term expires 2021)
Ms. Hershkowitz asked for nominations from the floor for the office of President, First Vice President and Second Vice President; none was received.

Ms. Hershkowitz called for a vote for Ms. Phelps for the office of President. Mr. Monson motioned to elect Ms. Phelps by acclamation. Ms. Phelps was elected as President.

Ms. Hershkowitz called for a vote for Ms. Gerardo for the office of First Vice President. Mr. Hermansen-Parker motioned to elect Ms. Gerardo by acclamation. Ms. Gerardo was elected as First Vice President.

Ms. Hershkowitz called for a vote for Mr. Monson for the office of Second Vice President. Dr. McQueen-Gibson motioned to elect Mr. Monson by acclamation. Mr. Monson was elected as Second Vice President.

Ms. Hershkowitz stated that the elected Officers will take office starting March 1, 2020.

**D3  NCSBN Raises Passing Standard for NCLEX-PN Examination Message**

Ms. Douglas provided background information and process of NCSBN related to changing the passing standard for NCLEX-PN examination, which will be effective on April 1, 2020.

Ms. Douglas answered questions regarding “logits” and its impact for test takers. Ms. Douglas indicated the change in passing standard is not expected to drastically change pass rates.

**July 2020 Board Week Amendment**

Ms. Hershkowitz noted that in July 2019 the Board did not conduct a Business meeting and instead had two days of formal hearings only. Ms. Hershkowitz asked if the Board wishes to have two days of hearings in July 2020 and no business meeting. There was no objection to the same approach for July 2020.
Appointment of Members for Medication Aide Curriculum
Ms. Hershkowitz indicated that Ms. Friedenberg, Ms. McElfesh and Ms. Smith have volunteered to serve on the Medication Aide Curriculum Committee. Ms. Hershkowitz noted that meetings will be scheduled right after Business meetings on Tuesday to avoid extra time/commitments. Ms. Hershkowitz added that the composition of the Committee will include stakeholders.

Revised Motions and Scripts
Ms. Power reviewed the revised motion sheets and informal conference script handouts and asked Board Members to turn in the old versions.

RECESS: The Board recessed at 9:50 A.M.
RECONVENTION: The Board reconvened at 10:03 A.M.
PUBLIC HEARING: Proposed Regulations for Clinical Nurse Specialist
Ms. Hershkowitz explained the process of the public hearing. There was no one present to provide comment.

Ms. Hershkowitz noted that written comments should be submitted to Ms. Yeatts or to Townhall and the comment period ends on March 20, 2020.

PUBLIC COMMENT: Janet Wall, Chief Executive Officer (CEO) of the Virginia Nurses Association (VNA)/ Virginia Nurses Foundation (VNF), provided the following:
- Today is the first Lobby Day at the General Assembly with about 200 practicing/student nurses signed up. There are four days total.
- Public Policy Platform shared to have one voice – title protection for nurse, financial incentive for APRN preceptors, and The Year of The Nurse
- VNT will be provided electronically only after May 2020
- Spring Conference theme is Cultivating a Happy Work Environment
- Fall Conference theme is Incivility and Bullying
- Quarterly Board of Nursing and workforce updates for CNOs and CNEs via webcast will be launched and it is a joint effort of VNA and Board of Nursing.

LEGISLATION/REGULATION: F1 Status of Regulatory Action:
Ms. Yeatts reviewed the chart of regulatory actions provided in the agenda with updates that the regulations for Elimination of Separate License for Prescriptive Authority will be effective on March 4, 2020 and the regulations for Handling Fee for Returned Checks will be effective March 5, 2020.
F2 Regulatory – Adoption of Final Regulations for Autonomous Practice for Nurse Practitioners:
Ms. Yeatts reviewed the final regulations, which are identical to emergency regulations currently in effect.

Mr. Monson moved to adopt the final regulations identical to proposed emergency regulations as presented. The motion was seconded and carried unanimously.

F3 Respond to Petition for Rulemaking regarding Licensure Applicants from Other Countries (18VAC90-19-130)
Ms. Yeatts stated that comments received were all in favor of the petition. Ms. Yeatts said that the Board has three options:

- Reject the petition’s request and state its reasons
- Adopt and initiates rulemaking by publication of a Notice of Intended Regulatory Action (NOIRA)
- Adopt via Fast Track Action

Ms. Douglas provided history of how this regulation and terminology was put in place initially.

Mr. Monson move to amend 18VAC90-19-130 by Fast Track Action. The motion was seconded and carried unanimously.

Ms. Hershkowitz and Ms. Douglas acknowledged representatives from the Phillipine Nurses Association of Virginia in the audience including those former Board of Nursing Members, one of whom was former Board President.

General Assembly 2020 Update
Ms. Yeatts reviewed the 2020 General Assembly update provided in the handout noting that DHP has 50% more bills assigned to DHP this year than in the past.

Dr. Allison-Bryan joined the meeting at 10:43 A.M.

POLICY FORUM:
Dr. Elizabeth Carter and Dr. Yetty Shobo presented on the Board of Nursing survey reports. Dr. Carter stated that the Virginia Department of Health Professions’ Healthcare Workforce Data Center (HWDC), who administer the survey during the license renewal process, which takes place during a two-year renewal cycle on the birth month of each respondent.
Dr. Shobo provided a summary of the key findings of 2019 reports which will be posted on the DHP website upon approval:
- Virginia’s Certified Nurse Aide Workforce: 2019
- Virginia’s Licensed Practical Nurse Workforce: 2019
- Virginia’s Registered Nurse Workforce: 2019

RECESS: The Board recessed at 11:36 A.M.

RECONVENTION: The Board reconvened at 11:48 A.M.

DIALOGUE WITH DHP DIRECTOR:
In addition to written summary, Dr. Allison-Bryan reported the following:
- Required Immunizations (HB1090) – the immunization of School Children shall be consistent with the Immunization Schedule developed and published by the Centers for Disease Control and Prevention, the Advisory Committee on Immunization Practices, the American Academy of Pediatrics, and the American Academy of Family Physicians.
- Naturopathic Doctors Licensure (HB1040) – most likely will be referred to Board of Health Professions for study
- CRNA Prescriptive Authority Bill (HB1059) was passed by the House Committee
- Massage Therapy Bill (HB1121), which requires English proficiency, was sent to Court of Justice for review.

EDUCATION:

E1 Education Informal Conference Committee January 15, 2020 Minutes and Recommendations:
Ms. Swineford presented written minutes for Board consideration.

Mr. Monson moved to accept the January 15, 2020 minutes and recommendation as presented. The motion was seconded and carried unanimously.

Chesapeake Career Center Practical Nursing Program Recommendations:
Mr. Monson moved to accept the recommendations of the Education Special Conference Committee to place Chesapeake Career Center Practical Nursing Program on conditional approval with terms to operate a practical nursing education programs.

Education Staff Report:
Dr. Hills reported the following:
- NCSBN is reviewing the nurse aide exam and looking for volunteers from Virginia by the end of February 2020.
- Nurse Aide Education Program Regulations
Education Program Survey – Possible Modification
Ms. Wilmoth advised that the 2019 Nursing Education Program Survey is now closed and a report is being prepared by HWDC staff with the intent to present at the March meeting.

Ms. Hershkowitz indicated that the Board has the opportunity to propose additional questions for the 2020 annual survey. Following discussion, the Board suggested the following question topics:

• Identify program type (i.e., proprietary, high school, community college, baccalaureate)
• Barriers to obtaining clinical placement sites
• Differentiate between the number of precepted vs faculty-led clinical hours

Ms. Hershkowitz suggested that Board Members send any additional questions to Dr. Hills.

CONSIDERATION OF CONSENT ORDERS:

G1 Terisha G. Vaughan, RN 0001-125110
Ms. Gerardo moved to accept the consent order to reprimand Terisha G. Vaughan, deny her petition for release from the terms of her probation, and indefinitely suspend her license to practice professional nursing in the Commonwealth of Virginia. The motion was seconded and carried unanimously.

G2 Patricia Jean Andes, RN 0001-155484
Ms. Gerardo moved to accept the consent order to indefinitely suspend the license of Patricia Jean Andes to practice professional nursing in the Commonwealth of Virginia. The suspension is stayed upon proof of Ms. Andes’ entry into a Contract with the Virginia Health Practitioners’ Monitoring Program (HPMP) and compliance with all terms and conditions of the HPMP for the period specified by the HPMP. The motion was seconded and carried unanimously.

G3 Jessica Samson, RN Privilege to Practice Texas License 932156 with Multistate Privilege
Ms. Gerardo moved to accept the consent order to indefinitely suspend the privilege of Jessica Samson to practice professional nursing in the Commonwealth of Virginia for a period of not less than two years from the date of entry of the Order. The motion was seconded and carried unanimously.
G4 Kimberly Wright Burandt, RN 0001-172861
Ms. Gerardo moved to accept the consent order of voluntary surrender for indefinite suspension of Kimberly Wright Burandt’s license to practice professional nursing in the Commonwealth of Virginia. The motion was seconded and carried unanimously.

Ms. Hershkowitz thanked the Board for the privilege and honor of serving as President, noting the commitment of its members and staff.

Dr. Allison-Bryan and Ms. Yeatts left the meeting at 12:15 P.M.

RECESS: The Board recessed at 12:20 P.M.

RECONVENTION: The Board reconvened at 1:10 P.M.

Julia K. Bennett, Assistant Attorney General, and Anne G. Joseph, JD, MPA, Deputy Director of the Administrative Proceedings Division, joined the meeting at 1:10 P.M.

POSSIBLE SUMMARY SUSPENSION CONSIDERATION MEETING
Julia K. Bennett, Assistant Attorney General, presented evidence that the continued practice of nursing by Megan Sutton Hardesty, RN (0001-241143) may present a substantial danger to the health and safety of the public.

Ms. Gerardo moved to summarily suspend the registered nurse license of Megan Sutton Hardesty pending a formal administrative hearing and to offer a consent order for indefinite suspension of her license in lieu of a formal hearing. The motion was seconded and carried unanimously.

Ms. Bennett and Ms. Joseph left the meeting 1:31 P.M.

Ms. Douglas shared that for the March Board week there are 10 Board Members indicating available on Monday, March 16, and only 4 Board Members on Thursday, March 19. Ms. Douglas requested at least two Board Members reconsider availability and offer to switch to Thursday in order for the Board to have a panel to conduct formal hearings.

RECESS: The Board recessed at 1:34 P.M.

RECONVENTION: The Board reconvened at 1:41 P.M.
BOARD MEMBER TRAINING:

**Occupational Licensure Discussion**

- NCSBN July 2019 Journal Nursing Regulation (JNR) Supplement was provided and reviewed by Board Members

Ms. Douglas noted the following:

- National conversation in the US with focus of “unnecessary barriers” to practice versus public protection
- International discussions regarding access to care
- Time of “license reform” driven by many factors and is Multi-dimensional
- Risk based approach to regulation
- Nursing is in better place with the NLC than other professions
- Highlighting the 14 subthemes

**C6 Citizen Advocacy Center (CAC) December 10-11, 2019 Annual Meeting Report**

Mr. Monson recommended that Board Members to read the NCSBN July 2019 Journal Nursing Regulation (JNR) Supplement.

Mr. Monson thanked the Board for the opportunity to attend the CAC Annual meeting titled *Halt care Regulation and Credentialing in an Anti-Regulatory Environment* and highlighted the following:

- Currently 22% of all US employees are licensed, both occupational and healthcare, up from 5% in the 1950s
- There is no peer-reviewed literature which demonstrates positive effects and higher quality services resulting from licensure requirements
- Two models toward requiring licensure – Public Choice, in which regulation is requested and protected by the members of the profession, and Public Protection, in which the regulation is requested and protected by the Public
- Effort in place to decrease barriers such as foreign-trained practitioners, military/spouse, an ex-offenders

Mr. Monson noted that there are many bills presented currently in the General Assembly that may appear to serve to protect the occupations.

Ms. Douglas commented that regulatory board needs to be able to articulate what regulation does.

Ms. Herhskowtiz stated that Virginia Commonwealth University (VCU) study looked at the level of education and any correlation between Board disciplinary actions. The result was that it is not the level of education but the number of years of practicing that seems to affect disciplinary.
The Board raised the following points during the general discussion:
- Regulatory boards should not lower standard to meet the need of a profession.
- What can be expanded on for advanced practice nursing?
- Need to be able to articulate what regulation does
- Without the Board’s regulations, who will keep the public safe

MEETING DEBRIEF:

The following were well received by Board Members:
- Interactive dialogue regarding regulation
- HWDC reports are helpful
- General Assembly updates are appreciative
- Handling of the Agenda was well managed

The following needs improvement per Board Members:
- Manage time better to allow time for input from staff

The Board suggested NURSYS Report overview for the next training.

Ms. Mitchell stated that she will provide training at the next meeting and asked Board Members to send questions/topics that they want to know to Board staff.

ADJOURNMENT: The Board adjourned at 3:20 P.M.
The meeting of the Virginia Board of Nursing was called to order at 9:03 A.M. on January 29, 2020 in Board Room 2, Department of Health Professions, 9960 Mayland Drive, Suite 201, Henrico, Virginia.

BOARD MEMBERS PRESENT:
Louise Hershkowitz, CRNA, MSHA, President
Marie Gerardo, MS, RN, ANP-BC, Second Vice President
Margaret J. Friedenberg, Citizen Member
Ann Tucker Gleason, PhD, Citizen Member
James Hermansen-Parker, MSN, RN, PCCN-K
Brandon A. Jones, MSN, RN, CEN, NEA-BC
Dixie McElfresh, LPN

STAFF PRESENT:  
Jodi P. Power, RN, JD, Senior Deputy Executive Director
Charlette N. Ridout, R.N., M.S., C.N.E., Deputy Executive Director
Sylvia Tamayo-Suijk, Discipline Team Coordinator

OTHERS PRESENT: Charis Mitchell, Assistant Attorney General, Board Counsel

ESTABLISHMENT OF A PANEL:
With seven members of the Board present, a panel was established.

CONSIDERATION OF AGENCY SUBORDINATE RECOMMENDATIONS:

#1 – Sheryl Melissa Falls, LPN  0002-094741
Ms. Falls did not appear.

Mr. Hermansen-Parker moved that the Board of Nursing accept the recommended decision of the agency subordinate to indefinitely suspend the license of Sheryl Melissa Falls to practice practical nursing in the Commonwealth of Virginia, said suspension applies to any multistate privilege to practice practical nursing. The motion was seconded and carried unanimously.

#5 – Sonya D. Fleming, CNA  1401-056221
Ms. Fleming did not appear.

Mr. Hermansen-Parker moved that the Board of Nursing accept the recommended decision of the agency subordinate to revoke the certificate of Sonya D. Fleming to practice as a nurse aide in the Commonwealth of
Virginia and enter a Finding of Abuse against her in the Virginia Nurse Aide Registry. The motion was seconded and carried unanimously.

#7 – Vernon Divers, CNA 1401-158552

Mr. Divers did not appear.

Mr. Hermansen-Parker moved that the Board of Nursing accept the recommended decision of the agency subordinate to reprimand Vernon Divers and indefinitely suspend his certificate to practice as a nurse aide in the Commonwealth of Virginia. The motion was seconded and carried unanimously.

#9 – Crystal D. Bell, LPN 0002-068111

Ms. Bell did not appear.

Mr. Hermansen-Parker moved that the Board of Nursing accept the recommended decision of the agency subordinate to indefinitely suspend the license of Crystal D. Bell to practice practical nursing in the Commonwealth of Virginia, said suspension applies to any multistate privilege to practice practical nursing. The motion was seconded and carried unanimously.

#11 – Valencia Denise Thomas, RMA 0031-001009

Ms. Thomas did not appear.

Mr. Hermansen-Parker moved that the Board of Nursing accept the recommended decision of the agency subordinate to reprimand Valencia Denise Thomas. The motion was seconded and carried unanimously.

#13 – Carolyn Lewis Dean Burns, LPN 0002-038535

Ms. Burns did not appear.

Mr. Hermansen-Parker moved that the Board of Nursing accept the recommended decision of the agency subordinate to reprimand Carolyn Lewis Dean Burns and indefinitely suspend the right to renew her license to practice practical nursing in the Commonwealth of Virginia, said suspension applies to any multistate privilege to practice practical nursing. The motion was seconded and carried unanimously.

#15 – Stephon Kyle Wade, RN 0001-263103

Mr. Wade did not appear.

Mr. Hermansen-Parker moved that the Board of Nursing accept the recommended decision of the agency subordinate to indefinitely suspend the license of Stephon Kyle Wade to practice professional nursing in the
Commonwealth of Virginia, said suspension applies to any multistate privilege to practice professional nursing. The motion was seconded and carried unanimously.

**#17 – Jennifer Elaine Keller, RN 0001-199918**

Ms. Keller did not appear.

Mr. Hermansen-Parker moved that the Board of Nursing accept the recommended decision of the agency subordinate to indefinitely suspend the right of Jennifer Elaine Keller to renew her license to practice professional nursing in the Commonwealth of Virginia, said suspension applies to any multistate privilege to practice professional. The motion was seconded and carried unanimously.

**#19 Candace Marie Heinen, LPN 0002-093542**

Ms. Heinen did not appear.

Mr. Hermansen-Parker moved that the Board of Nursing accept the recommended decision of the agency subordinate to indefinitely suspend the license of Candace Marie Heinen to practice practical nursing in the Commonwealth of Virginia, said suspension applies to any multistate privilege to practice practical nursing. The motion was seconded and carried unanimously.

**Patricia Bridgeman Underdue, CNA 1401-171756**

Ms. Underdue did not appear.

Mr. Hermansen-Parker moved that the Board of Nursing accept the recommended decision of the agency subordinate to revoke the certificate of Patricia Bridgeman Underdue to practice as a nurse aide in the Commonwealth of Virginia and enter a Finding of Abuse against her in the Virginia Nurse Aide Registry. The motion was seconded and carried unanimously.

**ADJOURNMENT:**

The Board adjourned at 9:07 A.M.

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Jodi P. Power, RN, JD  
Senior Deputy Executive Director
TIME AND PLACE: The meeting of the Virginia Board of Nursing was called to order at 11:02 A.M. on January 30, 2020 in Board Room 2, Department of Health Professions, 9960 Mayland Drive, Suite 201, Henrico, Virginia.

BOARD MEMBERS PRESENT:
Louise Hershkowitz, CRNA, MSHA, President
Marie Gerardo, MS, RN, ANP-BC, Second Vice President
Margaret J. Friedenberg, Citizen Member
Ann Tucker Gleason, PhD, Citizen Member
James Hermansen-Parker, MSN, RN, PCCN-K
Brandon A. Jones, MSN, RN, CEN, NEA-BC
Dixie McElfresh, LPN

STAFF PRESENT: Jodi P. Power, RN, JD, Senior Deputy Executive Director
Charlette N. Ridout, R.N., M.S., C.N.E., Deputy Executive Director
Sylvia Tamayo-Suijk, Discipline Team Coordinator

OTHERS PRESENT: Charis Mitchell, Assistant Attorney General, Board Council
Nursing students and faculty from Longwood University and Rappahanock Community College
Nurse Aide students and faculty from Southside Virginia Community College

ESTABLISHMENT OF A PANEL:
With seven members of the Board present, a panel was established.

FORMAL HEARINGS:
Ashley Hansford, LPN 0002-087154
Ms. Hansford appeared at 11:18 A.M. after hearing had begun.

Tammie Jones, Adjudication Specialist for the Department of Health Professions, represented the Commonwealth. Ms. Mitchell was legal counsel for the Board. Andrea Pegram, court reporter with Andrea Pegram Court Reporting, recorded the proceeding.

Richard Strother, Operations Manager, Maxim Healthcare Services, Diana Eady, Clinical Director, Maxim Healthcare Services, and Sharon Fowlkes, LPN, were present and testified.

CLOSED MEETING: Mr. Hermansen-Parker moved that the Board of Nursing convene a closed meeting pursuant to §2.2-3711(A)(27) of the Code of Virginia at 12:26 P.M., for the purpose of deliberation to reach a decision in the matter of Ashley Hansford. Additionally, Mr. Hermansen-Parker moved that Ms. Power, Ms. Ridout, Ms. Tamayo-Suijk, and Ms. Mitchell, Board counsel, attend the closed meeting because their presence in the closed meeting is deemed
necessary and their presence will aid the Board in its deliberations. The motion was seconded and carried unanimously.

RECONVENTION:  The Board reconvened in open session at 1:17 P.M.

Mr. Hermansen-Parker moved that the Board of Nursing certify that it heard, discussed or considered only public business matters lawfully exempted from open meeting requirements under the Virginia Freedom of Information Act and only such public business matters as were identified in the motion by which the closed meeting was convened. The motion was seconded and carried unanimously.

ACTION: Ms. Gerardo moved that the Board of Nursing reprimand Ashley Hansford, LPN and require she enter the Virginia Health Practitioners’ Monitoring Program (HPMP) within 60 days of entry of the Order and remain in compliance thereafter. The basis for this decision will be set forth in a final Board Order which will be sent to Ms. Hansford at her address of record. The motion was seconded and carried unanimously.

This decision shall be effective upon the entry by the Board of a written Order stating the findings, conclusions, and decision of this formal hearing panel.

RECESS: The Board recessed at 1:20 P.M.

RECONVENTION: The Board reconvened at 2:00 P.M.

FORMAL HEARINGS: Helen Casey, CNA 1401-133530

Ms. Casey appeared, accompanied by her sons, Timothy Casey and Trevis Shane Casey.

Cynthia Gaines, Adjudication Specialist for the Department of Health Professions, represented the Commonwealth. Ms. Mitchell was legal counsel for the Board. Andrea Pegram, court reporter with Andrea Pegram Court Reporting, recorded the proceeding.

Lisa Elgin, Senior Investigator, Department of Health Professions, was present and testified. Angela Sykes, RN, PCA Supervisor for Appalachian Agency for Senior Citizens was also present and testified.

CLOSED MEETING: Mr. Hermansen-Parker moved that the Board of Nursing convene a closed meeting pursuant to §2.2-3711(A)(27) of the Code of Virginia at 3:32 P.M., for the purpose of deliberation to reach a decision in the matter of Helen Casey. Additionally, Mr. Hermansen-Parker moved that Ms. Power, Ms. Ridout, Ms. Tamayo-Suijk, and Ms. Mitchell, Board counsel, attend the closed meeting because their presence in the closed meeting is deemed
necessary and their presence will aid the Board in its deliberations. The motion was seconded and carried unanimously.

RECONVENTION: The Board reconvened in open session at 4:29 P.M.

Mr. Hermansen-Parker moved that the Board of Nursing certify that it heard, discussed or considered only public business matters lawfully exempted from open meeting requirements under the Virginia Freedom of Information Act and only such public business matters as were identified in the motion by which the closed meeting was convened. The motion was seconded and carried unanimously.

ACTION: Ms. Gerardo moved that the Board of Nursing indefinitely suspend the right of Helen Casey to renew her certificate to practice as a nurse aide in the Commonwealth of Virginia for a period of not less than one year. The basis for this decision will be set forth in a final Board Order which will be sent to Ms. Casey at her address of record. The motion was seconded and carried unanimously.

This decision shall be effective upon the entry by the Board of a written Order stating the findings, conclusions, and decision of this formal hearing panel.

RECESS: The Board recessed at 4:30 P.M.

RECONVENTION: The Board reconvened in open session at 4:50 P.M.

FORMAL HEARINGS: Derleen Marie Alexander, CNA 1401-149685

Ms. Alexander did not appear.

Cynthia Gaines, Adjudication Specialist for the Department of Health Professions, represented the Commonwealth. Ms. Mitchell was legal counsel for the Board. Andrea Pegram, court reporter with Andrea Pegram Court Reporting, recorded the proceeding.

Jessica Wilkerson, Senior Investigator, Department of Health Professions, was present and testified.

CLOSED MEETING: Mr. Hermansen-Parker moved that the Board of Nursing convene a closed meeting pursuant to §2.2-3711(A)(27) of the Code of Virginia at 5:00 P.M., for the purpose of deliberation to reach a decision in the matter of Derleen Marie Alexander. Additionally, Mr. Hermansen-Parker moved that Ms. Power, Ms. Ridout, Ms. Tamayo-Suijk, and Ms. Mitchell, Board counsel, attend the closed meeting because their presence in the closed meeting is deemed necessary and their presence will aid the Board in its deliberations. The motion was seconded and carried unanimously.
RECONVENTION: The Board reconvened in open session at 5:19 P.M.

Mr. Hermansen-Parker moved that the Board of Nursing certify that it heard, discussed or considered only public business matters lawfully exempted from open meeting requirements under the Virginia Freedom of Information Act and only such public business matters as were identified in the motion by which the closed meeting was convened. The motion was seconded and carried unanimously.

ACTION: Ms. McElfresh moved that the Board of Nursing revoke the certificate of Derleen Marie Alexander to practice as a nurse aide in the Commonwealth of Virginia, with a Finding of Abuse to be entered in the Virginia Nurse Aide Registry. The basis for this decision will be set forth in a final Board Order which will be sent to Ms. Alexander at her address of record. The motion was seconded and carried unanimously.

This decision shall be effective upon the entry by the Board of a written Order stating the findings, conclusions, and decision of this formal hearing panel.

ADJOURNMENT: The Board adjourned at 5:20 P.M.

Jodi P. Power, RN, JD
Senior Deputy Executive Director
TIME AND PLACE: The meeting of the Virginia Board of Nursing was called to order at 9:07 A.M. on January 29, 2020 in Board Room 3, Department of Health Professions, 9960 Mayland Drive, Suite 201, Henrico, Virginia.

BOARD MEMBERS PRESENT:
Jennifer Phelps, BS, LPN, QMHP-A, CSAC Vice President
Yvette L. Dorsey, DNP, RN
Ethlyn McQueen-Gibson, DNP, MSN, RN, BC
Mark D. Monson, Citizen Member
Felisa Smith, RN, MSA, MSN/Ed, CNE
Cynthia Swineford, RN, MSN, CNE

STAFF PRESENT:
Robin Hills, RN, DNP, WHNP, Deputy Executive Director
Terri Clinger, DNP, RN, CPNP-PC., Deputy Executive Director for Advance Practice
Darlene Graham, Senior Discipline Specialist

OTHERS PRESENT:
Erin Barrett, Assistant Attorney General, Board Counsel

ESTABLISHMENT OF A PANEL:
With six members of the Board present, a panel was established.

CONSIDERATION OF AGENCY SUBORDINATE RECOMMENDATIONS:

CLOSED MEETING:
Mr. Monson moved that the Board of Nursing convene a closed meeting pursuant to §2.2-3711(A)(27) of the Code of Virginia at 9:13 A.M., for the purpose of consideration of the agency subordinate recommendations. Additionally, Mr. Monson moved that Dr. Hills, Dr. Clinger, Ms. Graham, and Ms. Barrett, Board counsel, attend the closed meeting because their presence in the closed meeting is deemed necessary and their presence will aid the Board in its deliberations. The motion was seconded and carried unanimously.

RECONVENTION:
The Board reconvened in open session at 9:42 A.M.

Mr. Monson moved that the Board of Nursing certify that it heard, discussed or considered only public business matters lawfully exempted from open meeting requirements under the Virginia Freedom of Information Act and only such public business matters as were identified in the motion by which the closed meeting was convened. The motion was seconded and carried unanimously.
#2 – Ashley N. Webb, RN    0001-251467  
Ms. Webb did not appear.  

Mr. Monson moved that the Board of Nursing reject the recommended decision of the agency subordinate and to refer to a formal hearing. The motion was seconded and carried unanimously.

#4 – Oliva Mae Parker, RMA    0031-001893  
Ms. Parker did not appear.  

Mr. Monson moved that the Board of Nursing accept the recommended decision of the agency subordinate to revoke the right of Oliva Mae Parker to renew her registration to practice as a medication aide in the Commonwealth of Virginia. The motion was seconded and carried unanimously.

#6 – April Nicole Hostetter Higgins, CNA    1401-150965  
Ms. Higgins did not appear.  

Mr. Monson moved that the Board of Nursing accept the recommended decision of the agency subordinate to indefinitely suspend the certificate of April Nicole Hostetter Higgins to practice as a nurse aide in the Commonwealth of Virginia. The motion was seconded and carried unanimously.

#8 – Susan Mayberry Crews, LPN    0002-048164  
Ms. Crews did not appear.  

Dr. McQueen-Gibson moved that the Board of Nursing accept the recommended decision of the agency subordinate to indefinitely suspend the license of Susan Mayberry Crews to practice practical nursing in the Commonwealth of Virginia with suspension stayed upon proof of Ms. Crews’ entry into a Contract with the Virginia Health Practitioners’ Monitoring Program (HPMP) and compliance with all terms and conditions of the HPMP for the period specified by the HPMP. The motion was seconded and carried with five votes in favor of the motion. Mr. Monson opposed the motion.

#10 – Jasmine Rae Peddrew, RMA    0031-010871  
Mr. Peddrew did not appear.  

Mr. Monson moved that the Board of Nursing accept the recommended decision of the agency subordinate to reprimand Jasmine Rae Peddrew. The motion was seconded and carried unanimously.
#12 – Diacell Winston, RMA 0031-008400
Ms. Winston did not appear but submitted a written response.

Mr. Monson moved that the Board of Nursing accept the recommended decision of the agency subordinate to indefinitely suspend the registration of Diacell Winston to practice as a medication aide in the Commonwealth of Virginia. The motion was seconded and carried unanimously.

#14 – Michelle Lopez, RN 0001-190866
Mr. Lopez did not appear.

Mr. Monson moved that the Board of Nursing accept the recommended decision of the agency subordinate to indefinitely suspend the right of Michelle Lopez to renew her license to practice professional nursing in the Commonwealth of Virginia with suspension stayed upon proof of Ms. Lopez’s entry into a Contract with the Virginia Health Practitioners’ Monitoring Program (HPMP) and compliance with all terms and conditions of the HPMP for the period specified by the HPMP. The motion was seconded and carried unanimously.

#16 – Mary Katherine Franchok Haulton, RN 0001-137917
Ms. Haulton did not appear.

Ms. Phelps moved that the Board of Nursing reject the recommended decision of the agency subordinate and to refer to a formal hearing. The motion was seconded and carried unanimously.

#18 – Linda Carol Rich Joyce, RN 0001-220798
Ms. Joyce did not appear.

Mr. Monson moved that the Board of Nursing accept the recommended decision of the agency subordinate to indefinitely suspend the license of Linda Carol Rich Joyce to practice professional nursing in the Commonwealth of Virginia. The motion was seconded and carried unanimously.

#20 – Jashae Bradley, CNA 1401-180668
Ms. Bradley did not appear.

Mr. Monson moved that the Board of Nursing accept the recommended decision of the agency subordinate to revoke the certificate of Jashae Bradley to practice as a nurse aide in the Commonwealth of Virginia and enter a Finding of Neglect against her in the Virginia Nurse Aide Registry. The motion was seconded and carried unanimously.
#22 – Amanda Mae Sheffer, CNA  1401-123971
Ms. Sheffer did not appear.

Mr. Monson moved that the Board of Nursing accept the recommended decision of the agency subordinate to revoke the certificate of Amanda Mae Sheffer to practice as a nurse aide in the Commonwealth of Virginia and enter a Finding of Misappropriation of Patient Property against her in the Virginia Nurse Aide Registry. The motion was seconded and carried unanimously.

ADJOURNMENT: The Board adjourned at 9:46 A.M.

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Robin Hills, RN, DNP, WHNP
Deputy Executive Director
TIME AND PLACE: The meeting of the Virginia Board of Nursing was called to order at 11:02 A.M. on January 29, 2020 in Board Room 3, Department of Health Professions, 9960 Mayland Drive, Suite 201, Henrico, Virginia.

BOARD MEMBERS PRESENT:
Jennifer Phelps, BS, LPN, QMHP-A, CSAC Vice President
Yvette L. Dorsey, DNP, RN
Ethlyn McQueen-Gibson, DNP, MSN, RN, BC
Mark D. Monson, Citizen Member
Felisa Smith, RN, MSA, MSN/Ed, CNE
Cynthia Swineford, RN, MSN, CNE

STAFF PRESENT: Robin Hills, RN, DNP, WHNP, Deputy Executive Director
Terri Clinger, DNP, RN, CPNP-PC, Deputy Executive Director for Advance Practice
Darlene Graham, Senior Discipline Specialist

OTHERS PRESENT: Erin Barrett, Assistant Attorney General, Board Counsel

ESTABLISHMENT OF A PANEL: With six members of the Board present, a panel was established.

FORMAL HEARINGS: Wesley Bryan Killen, RN 0001-160525
Mr. Killen did not appear

Anne Joseph, Deputy Director, Administrative Proceedings Division for the Department of Health Professions, represented the Commonwealth. Ms. Barrett was legal counsel for the Board. Cynthia Ferrell, court reporter with Farnsworth & Taylor Reporting LLC, recorded the proceeding.

Amy Tanner, Senior Investigator, Department of Health Professions, testified via telephone.

CLOSED MEETING: Ms. Swineford moved that the Board of Nursing convene a closed meeting pursuant to §2.2-3711(A)(27) of the Code of Virginia at 11:21 A.M., for the purpose of deliberation to reach a decision in the matter of Wesley Bryan Killen. Additionally, Ms. Swineford moved that Dr. Hills, Dr. Clinger, Ms. Graham, and Ms. Barrett, Board counsel, attend the closed meeting because their presence in the closed meeting is deemed necessary and their presence will aid the Board in its deliberations. The motion was seconded and carried unanimously.
RECONVENTION: The Board reconvened in open session at 11:25 A.M.

Ms. Swineford moved that the Board of Nursing certify that it heard, discussed or considered only public business matters lawfully exempted from open meeting requirements under the Virginia Freedom of Information Act and only such public business matters as were identified in the motion by which the closed meeting was convened. The motion was seconded and carried unanimously.

ACTION: Ms. Smith moved that the Board of Nursing indefinitely suspend the license of Wesley Bryan Killen to practice professional nursing in the Commonwealth of Virginia for a period of not less than two years. The basis for this decision will be set forth in a final Board Order which will be sent to Ms. Killen at his address of record. The motion was seconded and carried unanimously.

This decision shall be effective upon entry by the Board of a written Order stating the findings, conclusions, and decision of this formal hearing panel.

RECESS: The Board recessed at 11:27 A.M.

RECONVENTION: The Board reconvened in open session at 1:00 P.M.

FORMAL HEARINGS: Peggy Sue Jeffers, RN 0001-251445
Ms. Jeffers appeared and was accompanied by Margaret Hardy, her lawyer, and Sabrina Nesbitt, Director at Sola, Inc.

Holly Walker, Adjudication Specialist for the Department of Health Professions, represented the Commonwealth. Ms. Barrett was legal counsel for the Board. Cindy Ferrell, court reporter with Farnsworth & Taylor Reporting LLC, recorded the proceeding.

Tonya James, Board of Nursing Compliance Case Manager, Department of Health Professions, and Sabrina Nesbitt, Director at Sola Inc., were present and testified.

CLOSED MEETING: Ms. Swineford moved that the Board of Nursing convene a closed meeting pursuant to §2.2-3711(A)(27) of the Code of Virginia at 2:11 P.M., for the purpose of deliberation to reach a decision in the matter of Peggy Sue Jeffers. Additionally, Ms. Swineford moved that Dr. Hills, Ms. Graham, and Ms. Barrett, Board counsel, attend the closed meeting because their presence in the closed meeting is deemed necessary and their presence will aid the Board in its deliberations. The motion was seconded and carried unanimously.

RECONVENTION: The Board reconvened in open session at 2:45 P.M.
Ms. Swineford moved that the Board of Nursing certify that it heard, discussed or considered only public business matters lawfully exempted from open meeting requirements under the Virginia Freedom of Information Act and only such public business matters as were identified in the motion by which the closed meeting was convened. The motion was seconded and carried unanimously.

**ACTION:**

Dr. Dorsey moved that the Board of Nursing place Peggy Sue Jeffers on probation for a period of not less than two years with terms and conditions. The basis for this decision will be set forth in a final Board Order which will be sent to Ms. Jeffers at her address of record. The motion was seconded and carried unanimously.

This decision shall be effective upon entry by the Board of a written Order stating the findings, conclusions, and decision of this formal hearing panel.

**FORMAL HEARINGS:**

**Penny Summers Carter, LPN**

0002-046300

Ms. Carter did not appear.

Holly Walker, Adjudication Specialist for the Department of Health Professions, represented the Commonwealth. Ms. Barrett was legal counsel for the Board. Cindy Ferrell, court reporter with Farnsworth & Taylor Reporting LLC, recorded the proceeding.

Maria Joson, Senior Investigator, Department of Health Professions, and Alyssa Smith, Client A’s Mother, were present and testified.

**CLOSED MEETING:**

Ms. Swineford moved that the Board of Nursing convene a closed meeting pursuant to §2.2-3711(A)(27) of the *Code of Virginia* at 3:18 P.M., for the purpose of deliberation to reach a decision in the matter of Penny Summers Carter. Additionally, Ms. Swineford moved that Dr. Hills, Dr. Clinger, Ms. Graham, and Ms. Barrett, Board counsel, attend the closed meeting because their presence in the closed meeting is deemed necessary and their presence will aid the Board in its deliberations. The motion was seconded and carried unanimously.

**RECONVENTION:**

The Board reconvened in open session at 3:28 P.M.

Ms. Swineford moved that the Board of Nursing certify that it heard, discussed or considered only public business matters lawfully exempted from open meeting requirements under the Virginia Freedom of Information Act and only such public business matters as were identified in the motion by which the closed meeting was convened. The motion was seconded and carried unanimously.
ACTION: Mr. Monson moved that the Board of Nursing revoke the license of Penny Summers Carter to practice practical nursing in the Commonwealth of Virginia. The basis for this decision will be set forth in a final Board Order which will be sent to Ms. Carter at her address of record. The motion was seconded and carried unanimously.

This decision shall be effective upon the entry by the Board of a written Order stating the findings, conclusions, and decision of this formal hearing panel.

ADJOURNMENT: The Board adjourned at 3:30 P.M.
VIRGINIA BOARD OF NURSING
FORMAL HEARINGS
January 30, 2020

TIME AND PLACE: The meeting of the Virginia Board of Nursing was called to order at 9:50 A.M. on January 30, 2020 in Board Room 2, Department of Health Professions, 9960 Mayland Drive, Suite 201, Henrico, Virginia.

BOARD MEMBERS PRESENT:
Louise Hershkowitz, CRNA, MSHA, President
Yvette L. Dorsey, DNP, RN
James Hermansen-Parker, MSN, RN, PCCN-K
Brandon A. Jones, MSN, RN, CEN, NEA-BC
Dixie McElfresh, LPN
Cynthia M. Swineford, RN, MSN, CNE
Kristina Page, LMT – for LMT cases only

STAFF PRESENT: Jay P. Douglas, MSM, RN, CSAC, FRE, Executive Director - joined at 10:50 A.M.
Charlette Ridout, RN, MSN, CNE, Deputy Executive Director
Robin L. Hills, DNP, RN, WHNP, Deputy Executive Director - joined at 1:06 P.M.
Lelia Claire Morris, RN, LNHA, Discipline Case Manager
Darlene Graham, Senior Discipline Specialist
Sylvia Tamayo-Suijk, Discipline Team Coordinator – joined at 1:06 P.M.

OTHERS PRESENT: Charis Mitchell, Assistant Attorney General, Board Counsel
Nurse Aide students from Northern Neck Technical Center
Practical Nursing Students from Randolph Macon College

ESTABLISHMENT OF A PANEL:
With six members of the Board present, a panel was established.

FORMAL HEARINGS: Nina Macklin Morrison, RN 0001-120558
Ms. Morrison appeared and was accompanied by James Wilson, her attorney.

David Kazzie, Adjudication Specialist for the Department of Health Professions, represented the Commonwealth. Ms. Mitchell was legal counsel for the Board. Colleen Good, court reporter with Commonwealth Court Reporters, Inc., recorded the proceedings.

Mr. Wilson requested a continuance.

Ms. Hershkowitz granted the request for a continuance.

Ms. Douglas joined the meeting at 10:15 A.M.
FORMAL HEARINGS: Amanda Laughman, RN Reinstatement 0001-286157
Ms. Laughman appeared.

David Kazzie, Adjudication Specialist for the Department of Health Professions, represented the Commonwealth. Ms. Mitchell was legal counsel for the Board. Colleen Good, court reporter with Commonwealth Court Reporters, Inc., recorded the proceedings.

Sarah Rogers, Senior Investigator, Department of Health Professions was present and testified.

CLOSED MEETING: Mr. Jones moved that the Board of Nursing convene a closed meeting pursuant to §2.2-3711(A)(27) of the Code of Virginia at 10:58 A.M., for the purpose of deliberation to reach a decision in the matter of Amanda Laughman. Additionally, Mr. Jones moved that Ms. Douglas, Ms. Ridout, Ms. Morris, Ms. Graham and Ms. Mitchell, Board counsel, attend the closed meeting because their presence in the closed meeting is deemed necessary and their presence will aid the Board in its deliberations. The motion was seconded and carried unanimously.

RECONVENTION: The Board reconvened in open session at 11:42 A.M.

Mr. Jones moved that the Board of Nursing certify that it heard, discussed or considered only public business matters lawfully exempted from open meeting requirements under the Virginia Freedom of Information Act and only such public business matters as were identified in the motion by which the closed meeting was convened. The motion was seconded and carried unanimously.

ACTION: Dr. Dorsey moved that the Board of Nursing deny the application of Amanda Laughman for reinstatement of her license to practice as a registered nurse in the Commonwealth of Virginia and continue her license on indefinite suspension. The basis for this decision will be set forth in a final Board Order which will be sent to Ms. Laughman at her address of record. The motion was seconded and carried with five votes in favor of the motion. Ms. McElfresh opposed the motion.

This decision shall be effective upon the entry by the Board of a written Order stating the findings, conclusions, and decision of this formal hearing panel.

Ms. Ridout, Ms. Morris and Ms. Graham left the meeting at 11:43 A.M.

RECESS: The Board recessed at 11:43 A.M.

RECONVENTION: The Board reconvened at 1:06 P.M.
Ms. Page, Dr. Hills and Ms. Tamayo-Suijk joined the meeting at 1:06 P.M.

**FORMAL HEARINGS:**

**XiaoYing Wang, LMT** 0019-013139

Ms. Wang appeared and was accompanied by David A. Powers, III, her attorney, and Yanyi (Eliza) Connor, her translator.

Holly Walker, Adjudication Specialist for the Department of Health Professions, represented the Commonwealth. Ms. Mitchell was legal counsel for the Board. Colleen Good, court reporter with Commonwealth Court Reporters, Inc., recorded the proceedings.

Anna Badgley, Senior Investigator, Department of Health Professions, Detective Christopher Harris, Colonial Heights, Sergeant Alan T. Richardson, Henrico County Police Department, and Cathy Hanchey, Board of Nursing LMT Licensing Specialist, were present and testified.

**RECESS:**

The Board recessed at 2:07 P.M.

**RECONVENTION:**

The Board reconvened at 2:28 P.M.

Nurse Aide students from Northern Neck Technical Center and Practical Nursing Students from Randolph Macon College left the meeting at 3:03 P.M.

**CLOSED MEETING:**

Mr. Jones moved that the Board of Nursing convene a closed meeting pursuant to §2.2-3711(A)(27) of the *Code of Virginia* at 3:21 P.M., for the purpose of deliberation to reach a decision in the matter of XiaoYing Wang. Additionally, Mr. Jones moved that Ms. Douglas, Dr. Hills, Ms. Tamayo-Suijk and Ms. Mitchell, Board counsel, attend the closed meeting because their presence in the closed meeting is deemed necessary and their presence will aid the Board in its deliberations. The motion was seconded and carried unanimously.

**RECONVENTION:**

The Board reconvened in open session at 3:58 P.M.

Mr. Jones moved that the Board of Nursing certify that it heard, discussed or considered only public business matters lawfully exempted from open meeting requirements under the Virginia Freedom of Information Act and only such public business matters as were identified in the motion by which the closed meeting was convened. The motion was seconded and carried unanimously.

**ACTION:**

Mr. Hermansen-Parker moved that the Board of Nursing indefinitely suspend the license of XiaoYing Wang to practice as a message therapist in the Commonwealth of Virginia for a period of not less than two years from entry.
of the Order. The basis for this decision will be set forth in a final Board Order which will be sent to Ms. Wang at her address of record. The motion was seconded and carried unanimously.

This decision shall be effective upon the entry by the Board of a written Order stating the findings, conclusions, and decision of this formal hearing panel.

FORMAL HEARINGS: Robert Jenneal Williams, III, LMT  0019-014650

Mr. Williams did not appear

David Kazzie, Adjudication Specialist for the Department of Health Professions, represented the Commonwealth. Ms. Mitchell was legal counsel for the Board. Colleen Good, court reporter with Commonwealth Court Reporters, Inc., recorded the proceedings.

Christopher Moore, Senior Investigator, Department of Health Professions, Client A and Client B were present and testified.

CLOSED MEETING: Mr. Jones moved that the Board of Nursing convene a closed meeting pursuant to §2.2-3711(A)(27) of the Code of Virginia at 4:43 P.M., for the purpose of deliberation to reach a decision in the matter of Robert Jenneal Williams, II. Additionally, Mr. Jones moved that Ms. Douglas, Dr. Hills, Ms. Tamayo-Suijk and Ms. Mitchell, Board counsel, attend the closed meeting because their presence in the closed meeting is deemed necessary and their presence will aid the Board in its deliberations. The motion was seconded and carried unanimously.

RECONVENTION: The Board reconvened in open session at 4:53 P.M.

Mr. Jones moved that the Board of Nursing certify that it heard, discussed or considered only public business matters lawfully exempted from open meeting requirements under the Virginia Freedom of Information Act and only such public business matters as were identified in the motion by which the closed meeting was convened. The motion was seconded and carried unanimously.

ACTION: Ms. McElfresh moved that the Board of Nursing revoke the right of Robert Jenneal Williams, III to renew his license to practice as a massage therapist in the Commonwealth of Virginia. The basis for this decision will be set forth in a final Board Order which will be sent to Mr. Williams at his address of record. The motion was seconded and carried unanimously.
This decision shall be effective upon the entry by the Board of a written Order stating the findings, conclusions, and decision of this formal hearing panel.

FORMAL HEARINGS: **Tara Michelle McCullough, LMT** 0019-012847
Ms. McCullough did not appear.

Cynthia Gaines, Adjudication Specialist for the Department of Health Professions, represented the Commonwealth. Ms. Mitchell was legal counsel for the Board. Colleen Good, court reporter with Commonwealth Court Reporters, Inc., recorded the proceedings.

CLOSED MEETING: Mr. Jones moved that the Board of Nursing convene a closed meeting pursuant to §2.2-3711(A)(27) of the *Code of Virginia* at 5:04 P.M., for the purpose of deliberation to reach a decision in the matter of Tara Michelle McCullough. Additionally, Mr. Jones moved that Ms. Douglas, Dr. Hills, Ms. Tamayo-Suijk and Ms. Mitchell, Board counsel, attend the closed meeting because their presence in the closed meeting is deemed necessary and their presence will aid the Board in its deliberations. The motion was seconded and carried unanimously.

RECONVENTION: The Board reconvened in open session at 5:12 P.M.

Mr. Jones moved that the Board of Nursing certify that it heard, discussed or considered only public business matters lawfully exempted from open meeting requirements under the Virginia Freedom of Information Act and only such public business matters as were identified in the motion by which the closed meeting was convened. The motion was seconded and carried unanimously.

ACTION: Dr. Dorsey moved that the Board of Nursing indefinitely suspend the license of Tara Michelle McCullough to practice as a massage therapist in the Commonwealth of Virginia until such time that she can come before the Board and proof that she is safe and competent to practice massage therapy. The basis for this decision will be set forth in a final Board Order which will be sent to Ms. McCullough at her address of record. The motion was seconded and carried unanimously.

This decision shall be effective upon the entry by the Board of a written Order stating the findings, conclusions, and decision of this formal hearing panel.
Virginia Board of Nursing
Formal Hearings
January 30, 2020

ADJOURNMENT: The Board adjourned at 5:13 P.M.

Robin L. Hills, DNP, RN, WHNP
Deputy Executive Director
A possible summary suspension telephone conference call of the Virginia Board of Nursing was held March 18, 2020 at 10:06 A.M.

The Board of Nursing members participating in the meeting were:

Jennifer Phelps, BS, LPN, QMHP-A, CSAC; Chair
Yvette L. Dorsey, DNP, RN
Margaret Friedenberg, Citizen Member
Marie Gerardo, MS, RN, ANP-BC
A Tucker Gleason, PhD, Citizen Member
James Hermansen-Parker, MSN, RN, PCCN-K
Louise Hershkowitz, CRNA, MSHA
Brandon Jones, MSN, RN, CEN, NEA-BC
Dixie L. McElfresh, LPN
Mark Monson, Citizen Member
Meenakshi Shah, BA, RN
Felisa Smith, RN, MSA, MSN/Ed, CNE
Cynthia Swineford, RN, MSN, CNE

Others participating in the meeting were:

Charis Mitchell, Assistant Attorney General, Board Counsel
Wayne Halbleib, Senior Assistant Attorney General/Chief
Sean Murphy, Assistant Attorney General
David Kazzie, Adjudication Specialist, Administrative Proceedings Division
Tammie Ridout, RN, MS, CNE; Deputy Executive Director
Charlette Ridout, RN, MS, CNE; Deputy Executive Director
Robin Hills, DNP, RN, WHNP; Deputy Executive Director for Education
Terri Clinger, DNP, RN, CPNP-PC; Deputy Executive Director for Advanced Practice
Patricia L. Dewey, RN, BSN; Discipline Case Manager
Jacquelyn Wilmoth, RN, MSN; Nursing Education Program Manager
Huong Vu, Executive Assistant

The meeting was called to order by Ms. Phelps. With 13 members of the Board of Nursing participating, a quorum was established. A good faith effort to convene a meeting at the Board of Nursing offices within the week failed.

Sean Murphy, Assistant Attorney General, presented evidence that the continued practice of nursing by Jacob Rodd Owens, LMT (0019-012484) may present a substantial danger to the health and safety of the public.

Ms. Hershkowitz moved to summarily suspend the massage therapy license of Jacob Rodd Owens pending a formal administrative hearing and to offer a consent order for revocation of his license in lieu of a formal hearing. The motion was seconded and carried unanimously.

Wayne Halbleib, Senior Assistant Attorney General/Chief, presented evidence that the continued practice of nursing by Crysta Ray Cozelos, RN (0028-000347) may present a substantial danger to the health and safety of the public.
Mr. Monson moved to summarily suspend the multi-state privilege of Crysta Ray Cozelos pending a formal administrative hearing and to offer a consent order for indefinite suspension of her multi-state privilege. The motion was seconded and carried unanimously.

The meeting was adjourned at 10:42 A.M.

Charlette N. Ridout, RN, MS, CNE
Deputy Executive Director
A possible summary suspension telephone conference call of the Virginia Board of Nursing was held April 21, 2020 at 4:31 P.M.

**The Board of Nursing members participating in the meeting were:**

Marie Gerardo, MS, RN, ANP-BC; Chair
Yvette L. Dorsey, DNP, RN
Margaret Friedenberg, Citizen Member
A Tucker Gleason, PhD, Citizen Member
James Hermansen-Parker, MSN, RN, PCCN-K
Louise Hershkowitz, CRNA, MSHA
Ethlyn McQueen-Gibson, DNP, MSN, RN, BC

Brandon Jones, MSN, RN, CEN, NEA-BC
Dixie L. McElfresh, LPN
Mark Monson, Citizen Member
Meenakshi Shah, BA, RN
Felisa Smith, RN, MSA, MSN/Ed, CNE
Cynthia Swineford, RN, MSN, CNE

**Others participating in the meeting were:**

Charis Mitchell, Assistant Attorney General, Board Counsel
Wayne Halbleib, Senior Assistant Attorney General/Chief
Sean Murphy, Assistant Attorney General
Anne Joseph, Deputy Director, Administrative Proceedings Division
Cynthia Gaines, Adjudication Specialist, Administrative Proceedings Division
Jay P. Douglas, MSM, RN, CSAC, FRE; Executive Director
Charlette Ridout, RN, MS, CNE; Deputy Executive Director
Robin L. Hills, DNP, RN, WHNP; Deputy Executive Director
Terri Clinger, DNP, RN, CPNP-PC; Deputy Executive Director for Advanced Practice
Claire Morris, RN, LNHA; Deputy Executive Director for Discipline
Patricia L. Dewey, RN, BSN; Discipline Case Manager
Huong Vu, Executive Assistant

The meeting was called to order by Ms. Gerardo. With 13 members of the Board of Nursing participating, a quorum was established. A good faith effort to convene a meeting at the Board of Nursing offices within the week failed.

Sean Murphy, Assistant Attorney General, presented evidence that the continued practice of nursing by Ashley Starr Cooper, RN (0001-209942) may present a substantial danger to the health and safety of the public.

Mr. Monson moved to summarily suspend the registered nursing license of Ashley Starr Cooper pending a formal administrative hearing and to offer a consent order for indefinite suspension of her license in lieu of a formal hearing. The motion was seconded and carried unanimously.

Mr. Murphy and Ms. Gaines left the meeting at 4:49 P.M.
Wayne Halbleib, Senior Assistant Attorney General/Chief, presented evidence that the continued practice of nursing by Britany Nicole Whitaker, LPN (0002-095279) may present a substantial danger to the health and safety of the public.

Ms. Hershkowitz moved to summarily suspend the practical nursing license of Britany Nicole Whitaker pending a formal administrative hearing and to offer a consent order for indefinite suspension of her license in lieu of a formal hearing. The motion was seconded and carried unanimously.

The meeting was adjourned at 5:06 P.M.

Robin L. Hills, DNP, RN, WHNP
Deputy Executive Director
A possible summary suspension telephone conference call of the Virginia Board of Nursing was held May 7, 2020 at 4:31 P.M.

The Board of Nursing members participating in the meeting were:

- Jennifer Phelps, BS, LPN, QMHP-A, CSAC; Chair
- Margaret Friedenberg, Citizen Member
- Marie Gerardo, MS, RN, ANP-BC
- A Tucker Gleason, PhD, Citizen Member
- James Hermansen-Parker, MSN, RN, PCCN-K
- Louise Hershkowitz, CRNA, MSHA
- Ethlyn McQueen-Gibson, DNP, MSN, RN, BC
- Dixie L. McElfresh, LPN
- Mark Monson, Citizen Member
- Meenakshi Shah, BA, RN
- Cynthia Swineford, RN, MSN, CNE

Others participating in the meeting were:

- Charis Mitchell, Assistant Attorney General, Board Counsel
- Wayne Halbleib, Senior Assistant Attorney General/Chief
- Tammie Jones, Adjudication Specialist, Administrative Proceedings Division
- Jay P. Douglas, MSM, RN, CSAC, FRE; Executive Director
- Claire Morris, RN, LNHA; Deputy Executive Director
- Patricia L. Dewey, RN, BSN; Discipline Case Manager
- Huong Vu, Executive Assistant

The meeting was called to order by Ms. Phelps. With 11 members of the Board of Nursing participating, a quorum was established. A good faith effort to convene a meeting at the Board of Nursing offices within the week failed.

Wayne Halbleib, Senior Assistant Attorney General/Chief, presented evidence that the continued practice of nursing by Breanne Marie Walls, RN (0001-220238) may present a substantial danger to the health and safety of the public.

Ms. Hershkowitz moved to summarily suspend the registered nursing license of Breanne Marie Walls pending a formal administrative hearing and to offer a consent order for indefinite suspension of her license in lieu of a formal hearing with suspension stayed contingent upon Ms. Walls’ entry into a Contract with Virginia Health Practitioners’ Monitoring Program. The motion was seconded and carried unanimously.

The meeting was adjourned at 4:58 P.M.
A possible summary suspension telephone conference call of the Virginia Board of Nursing was held June 17, 2020 at 4:30 P.M.

The Board of Nursing members participating in the meeting were:

Marie Gerardo, MS, RN, ANP-BC; Chair
Yvette L. Dorsey, DNP, RN
Margaret Friedenberg, Citizen Member
A Tucker Gleason, PhD, Citizen Member
James Hermansen-Parker, MSN, RN, PCCN-K
Louise Hershkowitz, CRNA, MSHA

Brandon Jones, MSN, RN, CEN, NEA-BC
Dixie L. McElfresh, LPN
Mark Monson, Citizen Member
Felisa Smith, RN, MSA, MSN/Ed, CNE
Cynthia Swineford, RN, MSN, CNE

Others participating in the meeting were:

Charis Mitchell, Assistant Attorney General, Board Counsel
Julia Bennett, Assistant Attorney General
David Kazzie, Adjudication Specialist, Administrative Proceedings Division
Jay P. Douglas, RN, MSM, CSAC, FRE; Executive Director
Charlette Ridout, RN, MS, CNE; Deputy Executive Director
Robin Hills, DNP, RN, WHNP; Deputy Executive Director for Advanced Practice
Claire Morris, RN, LNHA; Deputy Executive Director
Patricia L. Dewey, RN, BSN; Discipline Case Manager
Huong Vu, Executive Assistant

The meeting was called to order by Ms. Gerardo. With 11 members of the Board of Nursing participating, a quorum was established. A good faith effort to convene a meeting at the Board of Nursing offices within the week failed.

Julia Bennett, Assistant Attorney General, presented evidence that the continued practice of nursing by Harold V. Olmos, LMT (0019-014929) may present a substantial danger to the health and safety of the public.

Mr. Monson moved to summarily suspend the massage therapy license of Harold V. Olmos pending a formal administrative hearing and to offer a consent order for revocation of his license in lieu of a formal hearing. The motion was seconded and carried unanimously.

The meeting was adjourned at 4:44 P.M.
A possible summary suspension telephone conference call of the Virginia Board of Nursing was held June 29, 2020 at 4:30 P.M.

**The Board of Nursing members participating in the meeting were:**

Mark Monson, Citizen Member; Second Vice-President, Chair

Yvette L. Dorsey, DNP, RN  Brandon Jones, MSN, RN, CEN, NEA-BC
Margaret Friedenberg, Citizen Member  Dixie L. McElfresh, LPN
A Tucker Gleason, PhD, Citizen Member  Meenakshi Shah, BA, RN
James Hermansen-Parker, MSN, RN, PCCN-K  Felisa Smith, RN, MSA, MSN/Ed, CNE
Louise Hershkowitz, CRNA, MSHA

**Others participating in the meeting were:**

Charis Mitchell, Assistant Attorney General, Board Counsel
James Schliessmann, Assistant Attorney General
Cynthia Gaines, Adjudication Specialist, Administrative Proceedings Division
Jay P. Douglas, RN, MSM, CSAC, FRE; Executive Director
Charlette Ridout, RN, MS, CNE; Deputy Executive Director
Robin Hills, DNP, RN, WHNP; Deputy Executive Director for Advanced Practice
Claire Morris, RN, LNHA; Deputy Executive Director
Patricia L. Dewey, RN, BSN; Discipline Case Manager
Huong Vu, Executive Assistant

The meeting was called to order by Mr. Monson. With 10 members of the Board of Nursing participating, a quorum was established. A good faith effort to convene a meeting at the Board of Nursing offices within the week failed.

James Schliessmann, Assistant Attorney General, presented evidence that the continued practice of nurse aide by **Diana V. McCauley, CNA (0014-098310)** may present a substantial danger to the health and safety of the public.

Dr. Gleason moved to summarily suspend the nurse aide certificate of **Diana V. McCauley** pending a formal administrative hearing and to offer a consent order for revocation of her certificate with the Finding of Abuse in lieu of a formal hearing. The motion was seconded and carried unanimously.

The meeting was adjourned at 4:43 P.M.
<table>
<thead>
<tr>
<th>Considered</th>
<th>Accepted</th>
<th>Modified*</th>
<th>Rejected</th>
<th>Final Outcome: Difference from Recommendation</th>
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<tr>
<td>Date</td>
<td>Total</td>
<td>Total %</td>
<td>Total %</td>
<td># present</td>
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<td>2806 88.5%</td>
<td>268 8.5%</td>
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<td>21</td>
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<td>May-20</td>
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<td>19 90.5%</td>
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<tr>
<td>Annual Totals:</td>
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<tr>
<td>Total 2019</td>
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<td>129 90.2%</td>
<td>12 9.1%</td>
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<td>Total 2018</td>
<td>201</td>
<td>172 85.6%</td>
<td>25 12.4%</td>
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<td>230</td>
<td>220 95.7%</td>
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<td>Total 2010</td>
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<td>166 85.6%</td>
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* Modified = Sanction changed in some way (does not include editorial changes to Findings of Fact or Conclusions of Law. ↑ = additional terms or more severe sanction. ↓ = lesser sanction or impose no sanction.

** Final Outcome Difference = Final Board action/sanction after FH compared to original Agency Subordinate Recommendation that was modified (then appealed by respondent to FH) or was Rejected by Board (or referred to FH).
Virginia Department of Health Professions  
Cash Balance  
As of May 31, 2020  

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
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<tbody>
<tr>
<td>Board Cash Balance as June 30, 2019</td>
<td>8,978,952</td>
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<tr>
<td>YTD FY20 Revenue</td>
<td>12,888,596</td>
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<tr>
<td>Less: YTD FY20 Direct and Allocated Expenditures</td>
<td>12,922,295</td>
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<tr>
<td>Board Cash Balance as May 31, 2020</td>
<td>8,945,254</td>
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<tr>
<td>Account Number</td>
<td>Account Description</td>
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<tr>
<td>----------------</td>
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<tr>
<td>4002400 Fee Revenue</td>
<td>Application Fee</td>
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<tr>
<td>4002400 Fee Revenue</td>
<td>License &amp; Renewal Fee</td>
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<tr>
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<td>4002408 Board Endorsement - In</td>
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<tr>
<td>4002409 Board Endorsement - Out</td>
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<tr>
<td>4002421 Monetary Penalty &amp; Late Fees</td>
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<td>4002432 Misc. Fee (Bad Check Fee)</td>
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<td><strong>Total Fee Revenue</strong></td>
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<tr>
<td>4003000 Sales of Prop. &amp; Commodities</td>
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<tr>
<td>4003020 Misc. Sales-Dishonored Payments</td>
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<td><strong>Total Sales of Prop. &amp; Commodities</strong></td>
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<td>4009000 Other Revenue</td>
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<td><strong>Total Revenue</strong></td>
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<td>5011110 Employer Retirement Contrib.</td>
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<td>5011120 Fed Old-Age Ins- Sal St Emp</td>
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<td>5011140 Group Insurance</td>
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<td>5011160 Retiree Medical/Hospitalization</td>
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<td>5011170 Long term Disability ins</td>
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<td>5011190 Employer Retirement Contrib</td>
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<td><strong>Total Employee Benefits</strong></td>
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<tr>
<td>5011220 Salaries</td>
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<td>5011230 Salaries, Classified</td>
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<tr>
<td>5011250 Salaries, Overtime</td>
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<td><strong>Total Salaries</strong></td>
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<td>5011300 Special Payments</td>
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<td>5011310 Bonuses and Incentives</td>
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<td><strong>Total Special Payments</strong></td>
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<tr>
<td>5011400 Wages</td>
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<td>5011410 Wages, General</td>
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<td><strong>Total Wages</strong></td>
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<td><strong>Total Disability Benefits</strong></td>
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<td>Turnover/Vacancy Benefits</td>
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**Allocated Expenditures**

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<td>% of Budget</td>
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<tr>
<td>Account Number</td>
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<td>Amount</td>
<td>Budget</td>
<td>Budget Under/Over</td>
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<td>Monetary Penalty &amp; Late Fees</td>
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<td>815.00</td>
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<tr>
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<td>Sales of Prop. &amp; Commodities</td>
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<td>Total Sales of Prop. &amp; Commodities</td>
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<tr>
<td>5011310</td>
<td>Bonuses and Incentives</td>
<td>1,864.38</td>
<td>-</td>
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<td>Deferred Compnent Match Pmts</td>
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<td>960.00</td>
<td>960.00</td>
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<td>1,864.38</td>
<td>960.00</td>
<td>(904.38)</td>
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<td>125,040.19</td>
<td>121,525.00</td>
<td>(3,515.19)</td>
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<td>121,525.00</td>
<td>(3,515.19)</td>
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<td>5011840</td>
<td>Salaries, Cmp Leave Balances</td>
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<td>-</td>
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<td>Defined Contribution Match - Hy</td>
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<td>-</td>
<td>(713.19)</td>
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<td>842.34</td>
<td>-</td>
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<td>Turnover/Vacancy Benefits</td>
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<td>5012100</td>
<td>Communication Services</td>
<td></td>
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<tr>
<td>5012140</td>
<td>Postal Services</td>
<td>46,522.72</td>
<td>32,117.00</td>
<td>(14,405.72)</td>
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<td>Printing Services</td>
<td>88.98</td>
<td>276.00</td>
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<td>5012160</td>
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<td>Account Number</td>
<td>Account Description</td>
<td>Amount</td>
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<td>Amount Under/(Over) Budget</td>
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<tr>
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<td>------------------------------------------</td>
<td>--------</td>
<td>---------</td>
<td>----------------------------</td>
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<tr>
<td>5012100</td>
<td>Inbound Freight Services</td>
<td>3.34</td>
<td>-</td>
<td>(3.34)</td>
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<td>34,893.00</td>
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<td>126.00</td>
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<td>Total Health Services</td>
<td>-</td>
<td>126.00</td>
<td>126.00</td>
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<tr>
<td>5012600</td>
<td>Mgmt and Informational Svcs</td>
<td>-</td>
<td>23,754.21</td>
<td>25,460.00</td>
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<td>5012700</td>
<td>Total Mgmt and Informational Svcs</td>
<td>-</td>
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<td>25,460.00</td>
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<tr>
<td>5012800</td>
<td>Repair and Maintenance Svcs</td>
<td>-</td>
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<td>1,705.78</td>
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<td>-</td>
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<td>1,705.78</td>
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<tr>
<td>5013000</td>
<td>Support Services</td>
<td>-</td>
<td>41.85%</td>
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<td>5013010</td>
<td>Manual Labor Services</td>
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<td>59.39%</td>
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<tr>
<td>5013020</td>
<td>Technical Services</td>
<td>-</td>
<td>83.41%</td>
<td></td>
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<tr>
<td>5013030</td>
<td>Total Support Services</td>
<td>-</td>
<td>41.85%</td>
<td></td>
</tr>
<tr>
<td>5013040</td>
<td>Transportation Services</td>
<td>-</td>
<td>81.48%</td>
<td></td>
</tr>
<tr>
<td>5013050</td>
<td>Total Transportation Services</td>
<td>-</td>
<td>81.48%</td>
<td></td>
</tr>
<tr>
<td>5013100</td>
<td>Supplies And Materials</td>
<td>-</td>
<td>83.00%</td>
<td></td>
</tr>
<tr>
<td>5013110</td>
<td>Administrative Supplies</td>
<td>-</td>
<td>257.37%</td>
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<tr>
<td>5013120</td>
<td>Office Supplies</td>
<td>-</td>
<td>25.31%</td>
<td></td>
</tr>
<tr>
<td>5013130</td>
<td>Total Administrative Supplies</td>
<td>-</td>
<td>135.73%</td>
<td></td>
</tr>
<tr>
<td>5013200</td>
<td>Energy Supplies</td>
<td>-</td>
<td>0.00%</td>
<td></td>
</tr>
<tr>
<td>5013300</td>
<td>Gasoline</td>
<td>-</td>
<td>0.00%</td>
<td></td>
</tr>
<tr>
<td>5013310</td>
<td>Total Energy Supplies</td>
<td>-</td>
<td>0.00%</td>
<td></td>
</tr>
<tr>
<td>5013320</td>
<td>Manufacturing and Merch Supplies</td>
<td>-</td>
<td>0.00%</td>
<td></td>
</tr>
<tr>
<td>5013330</td>
<td>Packaging &amp; Shipping Supplies</td>
<td>-</td>
<td>0.00%</td>
<td></td>
</tr>
<tr>
<td>5013400</td>
<td>Total Manufacturing and Merch Supplies</td>
<td>-</td>
<td>0.00%</td>
<td></td>
</tr>
<tr>
<td>5013410</td>
<td>Medical and Dental Supplies</td>
<td>-</td>
<td>0.00%</td>
<td></td>
</tr>
<tr>
<td>5013420</td>
<td>Total Medical and Dental Supplies</td>
<td>-</td>
<td>0.00%</td>
<td></td>
</tr>
</tbody>
</table>
Virginia Department of Health Professions
Revenue and Expenditures Summary
Department 11200 - Certified Nurse Aides
For the Period Beginning July 1, 2019 and Ending May 31, 2020

<table>
<thead>
<tr>
<th>Account Number</th>
<th>Account Description</th>
<th>Amount</th>
<th>Budget</th>
<th>Under/(Over) Budget</th>
<th>% of Budget</th>
</tr>
</thead>
<tbody>
<tr>
<td>5013500</td>
<td>Repair and Maint. Supplies</td>
<td>12.78</td>
<td>-</td>
<td>(12.78)</td>
<td>0.00%</td>
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<tr>
<td>5013520</td>
<td>Custodial Repair &amp; Maint Matri</td>
<td>69.15</td>
<td>-</td>
<td>(69.15)</td>
<td>0.00%</td>
</tr>
<tr>
<td>5013530</td>
<td>Electrical Repair &amp; Maint Matri</td>
<td>3.30</td>
<td>-</td>
<td>(3.30)</td>
<td>0.00%</td>
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<tr>
<td></td>
<td>Total Repair and Maint. Supplies</td>
<td>72.45</td>
<td>-</td>
<td>(72.45)</td>
<td>0.00%</td>
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<tr>
<td>5013600</td>
<td>Residential Supplies</td>
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<td></td>
<td></td>
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<tr>
<td>5013620</td>
<td>Food and Dietary Supplies</td>
<td>-</td>
<td>80.00</td>
<td>80.00</td>
<td>0.00%</td>
</tr>
<tr>
<td>5013630</td>
<td>Food Service Supplies</td>
<td>-</td>
<td>226.00</td>
<td>226.00</td>
<td>0.00%</td>
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<tr>
<td>5013640</td>
<td>Laundry and Linen Supplies</td>
<td>2.40</td>
<td>-</td>
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</tr>
<tr>
<td>5013650</td>
<td>Personal Care Supplies</td>
<td>64.11</td>
<td>-</td>
<td>(64.11)</td>
<td>0.00%</td>
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<td></td>
<td>Total Residential Supplies</td>
<td>86.51</td>
<td>306.00</td>
<td>239.49</td>
<td>21.74%</td>
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<td>Total Supplies And Materials</td>
<td>3,284.17</td>
<td>2,021.00</td>
<td>(863.17)</td>
<td>125.30%</td>
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5015000 Continuous Charges
5015100 Insurance-Fixed Assets

<table>
<thead>
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<th>Account Number</th>
<th>Account Description</th>
<th>Amount</th>
<th>Budget</th>
<th>Under/(Over) Budget</th>
<th>% of Budget</th>
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</thead>
<tbody>
<tr>
<td>5015160</td>
<td>Property Insurance</td>
<td>105.98</td>
<td>106.00</td>
<td>0.02</td>
<td>96.98%</td>
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<td>Total Insurance-Fixed Assets</td>
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<td>106.00</td>
<td>0.02</td>
<td>96.98%</td>
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<td>Operating Lease Payments</td>
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<td>5015340</td>
<td>Equipment Rentals</td>
<td>20.87</td>
<td>-</td>
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<td>5015360</td>
<td>Building Rentals</td>
<td>62.40</td>
<td>-</td>
<td>(62.40)</td>
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<td>5015360</td>
<td>Land Rentals</td>
<td>-</td>
<td>50.00</td>
<td>50.00</td>
<td>0.00%</td>
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<tr>
<td>5015390</td>
<td>Building Rentals - Non State</td>
<td>28,238.27</td>
<td>33,707.00</td>
<td>5,468.73</td>
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<td>Total Operating Lease Payments</td>
<td>28,321.64</td>
<td>33,757.00</td>
<td>5,435.36</td>
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<td>Service Charges</td>
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<td>5015470</td>
<td>Private Vendor Service Charges:</td>
<td>6.24</td>
<td>-</td>
<td>(6.24)</td>
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<td>-</td>
<td>(6.24)</td>
<td>0.00%</td>
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<td>Insurance-Operations</td>
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<td>5015510</td>
<td>General Liability Insurance</td>
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<td>399.00</td>
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<td>Surety Bonds</td>
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5022000 Equipment
5022100 Computer Hardware & Software

<table>
<thead>
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<th>Account Description</th>
<th>Amount</th>
<th>Budget</th>
<th>Under/(Over) Budget</th>
<th>% of Budget</th>
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</thead>
<tbody>
<tr>
<td>5022170</td>
<td>Other Computer Equipment</td>
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<td>Total Computer Hardware &amp; Software</td>
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<td>-</td>
<td>(25.05)</td>
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<td>Educational &amp; Cultural Equip</td>
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<td></td>
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<td>5022240</td>
<td>Reference Equipment</td>
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<td>162.00</td>
<td>162.00</td>
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<td>Total Educational &amp; Cultural Equip</td>
<td>-</td>
<td>162.00</td>
<td>162.00</td>
<td>0.00%</td>
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<td>5022800</td>
<td>Office Equipment</td>
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</tr>
<tr>
<td>5022880</td>
<td>Office Equipment Improvements</td>
<td>-</td>
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<td>4.00</td>
<td>0.00%</td>
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<tr>
<td></td>
<td>Total Office Equipment</td>
<td>-</td>
<td>4.00</td>
<td>4.00</td>
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</tr>
<tr>
<td>5022700</td>
<td>Specific Use Equipment</td>
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</tr>
<tr>
<td>5022710</td>
<td>Household Equipment</td>
<td>15.19</td>
<td>-</td>
<td>(15.19)</td>
<td>0.00%</td>
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</table>
# Virginia Department of Health Professions
## Revenue and Expenditures Summary
### Department 11200 - Certified Nurse Aides

For the Period Beginning July 1, 2019 and Ending May 31, 2020

<table>
<thead>
<tr>
<th>Account Number</th>
<th>Account Description</th>
<th>Amount</th>
<th>Budget</th>
<th>Amount Under/(Over) Budget</th>
<th>% of Budget</th>
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</thead>
<tbody>
<tr>
<td>15.19</td>
<td>Total Specific Use Equipment</td>
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<td>(15.19)</td>
<td>0.00%</td>
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<tr>
<td>40.24</td>
<td>Total Equipment</td>
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<td>166.00</td>
<td>125.76</td>
<td>24.24%</td>
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<td>344.849.87</td>
<td>Total Expenditures</td>
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<td>404.836.00</td>
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## Allocated Expenditures

<table>
<thead>
<tr>
<th>Account Number</th>
<th>Account Description</th>
<th>Amount</th>
<th>Budget</th>
<th>Amount Under/(Over) Budget</th>
<th>% of Budget</th>
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</thead>
<tbody>
<tr>
<td>20400</td>
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<td>40,938.89</td>
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<td>30100</td>
<td>Data Center</td>
<td>142,269.28</td>
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<td>30300</td>
<td>Finance</td>
<td>173,858.10</td>
<td>193,802.50</td>
<td>19,944.40</td>
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<td>654,642.04</td>
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<td>Impaired Practitioners</td>
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<td>Board of Health Professions</td>
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## Net Revenue in Excess (Shortfall) of Expenditures

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<td>(Shortfall) of Expenditures</td>
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Virginia Department of Health Professors  
Revenue and Expenditures Summary  
Department 20400 - Nursing / Nurse Aide  
For the Period Beginning July 1, 2019 and Ending May 31, 2020

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<th>Account Number</th>
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<th>Under/(Over)</th>
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Page 1 of 5
# 2020 Monthly Tracking Log

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| All Cases Received       | 1,005 | 0      | 0      | 0      | 0      |        |        |        |        |        |        |        |</p>
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TOTALS: 22 8 3 10 0 0 11 0 3 0 0

Admissions$^1$: Req=Required (Board Referred, Board Ordered, Investigation); Vol=Voluntary (No known DHP involvement at time of intake)

Stays$^2$: Stays of Disciplinary Action Granted

Comp$^3$: Successful Completions

Vacated Stays$^4$: Vac Only=Vacated Stay Only; Vac & Dism=Vacated Stay & Dismissal

Dismissals$^5$: N/C=Dismissed Non-Compliant; Incl=Dismissed Ineligible; Dism Resig=Dismissed due to Resignation; Resig=Resignation
## CY 2019 Criminal Background Check BON Statistics

### 2019 RN Applicants

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<th>RN-EXAM</th>
<th>RN-REINSTATEMENT</th>
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### 2019 LPN Applicants

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### 2019 LMT Applicants

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**CONVICTION TOTALS**

- CBC Record Not Disclosed
- Self Disclosed
- Total convictions
# VA Board of Nursing

## Licensure Discipline Statistics

**January 1 - December 31, 2019**

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<th>Issued Count</th>
<th>Is/Ap</th>
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<td><strong>13,626</strong></td>
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¹: *Includes all applications received, but not necessarily completed or withdrawn in CY2019*  
²: *Includes reinstatement after discipline*

### LNP Autonomous Practice - Approved CY2019

<p>| Autonomous - Adult/Geriatric Acute | 57 |
| Autonomous - Adult/Geriatric Primary | 76 |
| Autonomous - Family               | 399 |
| Autonomous - Neonatal             | 3  |
| Autonomous - Pediatric Acute      | 4  |
| Autonomous - Pediatric Primary    | 30 |
| Autonomous - Psychiatric/Mental    | 72 |
| Autonomous - Women's Health       | 8  |
| <strong>Total</strong>                          | 649 |</p>
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- 82% closure rate
- 28% of closures

Licensure Discipline Statistics

January 1 - December 31, 2019
TIME AND PLACE: The meeting of the Committee of the Joint Boards of Nursing and Medicine was convened at 9:01 A.M., October 16, 2019 in Board Room 2, Department of Health Professions, Perimeter Center, 9960 Mayland Drive, Suite 201, Henrico, Virginia.

MEMBERS PRESENT: Marie Gerardo, MS, RN, ANP-BC; Chair
Louise Hershkowitz, CRNA, MSHA
Ann Tucker Gleason, PhD
Kenneth Walker, MD
L. Blanton Marchese, Board of Medicine Citizen Member

MEMBERS ABSENT: Karen A. Ransone, MD
Nathaniel Ray Tuck, Jr., DC

ADVISORY COMMITTEE MEMBERS PRESENT: Kevin E. Bringle, RN, NP
Mark Coles, RN, BA, MSN, NP-C
Wendy Dotson, CNM, MSN
David Alan Ellington, MD
Sarah E. Hobgood, MD
Janet L. Setnor, CRNA

STAFF PRESENT: Jay P. Douglas, MSM, RN, CSAC, FRE; Executive Director; Board of Nursing
Terri Clinger, DNP, RN, CPNP-PC; Deputy Executive Director for Advanced Practice; Board of Nursing
Robin L. Hills, DNP, RN, WHNP; Deputy Executive Director for Education; Board of Nursing
Stephanie Willinger; Deputy Executive Director for Licensing; Board of Nursing
Huong Vu, Executive Assistant; Board of Nursing

OTHERS PRESENT: Charis Mitchell, Assistant Attorney General; Board Counsel
David E. Brown, DO; Department of Health Professions Director
Barbara Allison-Bryan, MD, Department of Health Professions Chief Deputy
William L. Harp, MD, Executive Director; Board of Medicine

IN THE AUDIENCE: Kathy Martin, Hancock , Daniel & Johnson
Marie Molner, Board of Nursing Staff
Joseph Corley, Board of Nursing Staff

INTRODUCTIONS: Committee members, Advisory Committee members and staff members introduced themselves.
Virginia Board of Nursing
Committee of the Joint Boards of Nursing and Medicine – Business Meeting
February 12, 2020

Dr. Harp informed the Committee that Mr. Marchese has been appointed to the Committee of the Joint Boards of Nursing and Medicine for the day.

ESTABLISHMENT OF A QUORUM:
Ms. Gerardo called the meeting to order and established that a quorum was present.

Ms. Gerardo noted that there is a potential new Advisory Committee Member consideration has been added to Agenda under New Business section.

ANNOUNCEMENT:
Ms. Gerardo noted the announcement as presented in the Agenda: New Committee of the Joint Boards Members – Karen A. Ransone, MD and Nathaniel Ray Tuck, Jr., MD.

NCSBN APRN Roundtable Meeting is scheduled for April 7, 2020 in Rosemont, IL – Ms. Douglas will attend as NCSBN Board of Directors for Area III. Ms. Douglas noted that the focus of the meeting will be education preparation of nurse practitioners.

REVIEW OF MINUTES:
The minutes of the October 16, 2019 Business Meeting were reviewed. Ms. Hershkowitz moved to accept the minutes as presented. The motion was seconded and passed unanimously.

PUBLIC COMMENT:
No public comments were received.

DIALOGUE WITH AGENCY DIRECTOR:
Dr. Brown reported the following:
Changes at General Assembly (GA) – longer lines to access buildings due to changes in security in place
Medical Marijuana – the bill is to remove THC cap on oil and to decriminalize possession of marijuana. The bill was not passed and will be presented again in 2021. The Secretary of Health Task Force is to review the use of marijuana and make recommendations.
Healthcare Workforce – appears to be interested in allowing practitioners, such as nurse practitioners, to broaden the categories of clinical procedures they perform.

LEGISLATION/REGULATIONS:
2020 General Assembly (GA) Report:
Dr. Allison-Bryan reviewed the 2020 GA report handout noting that Crossover was on February 11, 2020 and Bills are now in opposite house. Dr. Allison-Bryan added once the bills are passed then the Boards will have regulatory work to begin.
Ms. Setnor stated that the CRNAs are happy with the result regarding HB1059, which allows CRNAs to have prescriptive authority. Ms. Setnor added that although this bill was not exactly what CRNA’s wanted, it allowed them to continue to do what they do. Ms. Douglas complimented Virginia Association of Nurse Anesthetists (VANA) for working with the Medical Society and the Anesthetists in preparation for the bill.

**B1 Regulatory Update:**
Dr. Clinger reviewed the chart of regulatory actions as of February 11, 2020 on behalf of Ms. Yeatts noting that the Board of Nursing staff is working on the waiver form for the electronic prescribing.

**POLICY FORUM:**
Dr. Elizabeth Carter and Dr. Yetty Shobo presented on the Board of Nursing survey reports. Dr. Carter stated that the Virginia Department of Health Professions’ Healthcare Workforce Data Center (HWDC), who administer the survey during the license renewal process, which takes place during a two-year renewal cycle on the birth month of each respondent.

Dr. Shobo provided a summary 2019 reports which will be posted on the DHP website upon approval:
- Virginia’s Licensed Nurse Practitioner Workforce: 2019
- Virginia’s Licensed Nurse Practitioner Workforce: Comparison by Specialty

Dr. Ellington asked what is the outcome of these reports. Ms. Douglas said the educators and employers use them for planning purpose.

**NEW BUSINESS:**

*Appointment of Joint Boards Advisory Committee Member, Kathleen J. Bailey, RN, CNM, MA, MS:*
Ms. Gerardo stated that Ms. Bailey’s CV is presented for the Committee consideration and action for the nurse midwife position on the Advisory Committee to replace Ms. Dotson.

Ms. Douglas noted that the recommendation for Kathleen Bailey was from Katie Page, CNM, FACNM, President of Virginia Affiliate of the ACNM. Ms. Douglas thanked Ms. Dotson for her service on the Advisory Committee.

Dr. Walker moved to accept the appointment of Ms. Bailey for the nurse midwife position on the Advisory Committee. The motion was seconded and passed.

**Board of Nursing Executive Director Report:**
- **Paperless Licensing** – the Board has implemented paperless licensing beginning with massage therapy, practical nurse and nurse practitioner licenses will be the next groups to be
implemented. Licensees will no longer receive hard copy paper licenses after renewal. License Lookup will be primary source of verification. All Boards at DHP have started this process incrementally which will decrease costs administrative burden and reduce the risk for fraud.

Dr. Brown left the meeting at 10:45 A.M.

- **Electronic Prescribing Notification** – Dr. Clinger reviewed under Legislation/Regulations.
- **Prescriptive Authority Licensure Regulatory Change Process** – Ms. Douglas said that Regulations for Elimination of Separate License for Prescriptive Authority (PA) will be effective on March 4, 2020. Nurse Practitioners (NPs), who currently have the PA, will receive the new NP licenses with the PA designation. Those, who do not have the PA, can apply with the $35 fee. New applicants will have one application incorporating both eligibility criteria. Communication has been sent to practitioners already. Ms. Douglas added that this will reduce fees and the administrative burden for licensees. Ms. Douglas added that separate communication will be sent to CRNAs following General Assembly action.
- **NCSBN Board Directors February 10-11, 2020 meeting** – Ms. Douglas said the proposed revisions draft language of the APRN Compact was discussed and will be presented at the NCSBN Midyear Meeting in March 2020.

**HB793 – Workforce Data Collection Planning Discussion:**
Ms. Douglas said that HB793 requires DHP to submit a report to the General Assembly on the process by which nurse practitioners with autonomous practice licenses may be included in the online Practitioner Profile maintained by DHP by November 1, 2020.

Ms. Douglas added that among other things, the enactment clause of HB793 also requires the Boards of Medicine and Nursing to report the number of NPs who have autonomous practice licenses accompanied by the geographic and specialty areas in which these NPs are practicing to the Chairmen of the House Committee on Health, Welfare and Institutions and the Senate Committee on Education and Health and the Chairman of the Joint Commission on Health Care by November 1, 2021.

Ms. Douglas noted that the Committee of the Joint Boards will review the work plan at its April 15, 2020 meeting.

**Autonomous Practice Update:**
Ms. Willinger reported that as of yesterday, the Board received 744
Virginia Board of Nursing  
Committee of the Joint Boards of Nursing and Medicine – Business Meeting  
February 12, 2020

applications and 704 licenses were issued.

Ms. Willinger noted that there have been no application denials to date. Ms. Douglas stated that a denial is considered by the Committee of the Joint Boards. Ms. Douglas introduced Joseph Corley as Board Staff who processes Autonomous Practice applications.

Ms. Douglas added that the majority of the categories are of NP’s with the autonomous designate family and psychiatric NP’s.

C1 – Consider Revision of the Guidance Document (GD) 90-11: Continuing Competency Violations for Nurse Practitioners:
Ms. Douglas stated the proposed revision of the GD 90-11 is presented for the Committee consideration.

Dr. Ellington suggested adding “Licensure Renewal Requirements” after the “Continued Competency” in the title.

Mr. Marchese moved to adopt the revised GD 90-11 as presented with additional amendment. The motion was seconded and carried unanimously.

C2 2020 Meeting Dates:
Ms. Gerardo stated that this is provided for information only.

RECESS:  
The Committee recessed at 10:44 A.M.

The Member of the Advisory Committee, Dr. Gleason, and Dr. Allison-Bryan left the meeting at 10:44 A.M.

RECONVENTION:  
The Committee reconvened at 10:57 A.M.

AGENCY SUBORDINATE RECOMMENDATION CONSIDERATION

David Valentine Strider, Jr., LNP  
Prescriptive Authority 0017-001538

Mr. Strider provided written response.

CLOSED MEETING:
Ms. Hershkowitz moved that the Committee of the Joint Boards of Nursing and Medicine convene a closed meeting pursuant to §2.2-3711(A)(27) of the Code of Virginia at 10:57 A.M., for the purpose of consideration of the agency subordinate recommendations. Additionally, Ms. Hershkowitz moved that Ms. Douglas, Ms. Willinger, Ms. Vu and Ms. Mitchell, Board counsel, attend the closed meeting because their presence in the closed meeting is deemed necessary and their presence
will aid the Board in its deliberations. The motion was seconded and carried unanimously.

RECONVENTION: The Board reconvened in open session at 11:16 A.M.

Ms. Hershkowitz moved that the Committee of the Joint Boards of Nursing and Medicine certify that it heard, discussed or considered only public business matters lawfully exempted from open meeting requirements under the Virginia Freedom of Information Act and only such public business matters as were identified in the motion by which the closed meeting was convened. The motion was seconded and carried unanimously.

Ms. Hershkowitz moved that the Committee of the Joint Boards of Nursing and Medicine accept the recommended decision of the agency subordinate to reprimand David Valentine Strider, Jr. and to suspend his prescriptive authority in the Commonwealth of Virginia for a period of one year from the date of entry of the Order. The motion was seconded and carried unanimously.

ADJOURNMENT: As there was no additional business, the meeting was adjourned at 11:17 A.M.

Jay P. Douglas, MSM, RN, CSAC, FRE
Executive Director
VIRGINIA COMMITTEE OF THE JOINT BOARDS OF NURSING AND MEDICINE
SPECIAL CONFERENCE COMMITTEE MINUTES
February 12, 2020

TIME AND PLACE:       The meeting of the Special Conference Committee of the Joint Boards of Nursing and Medicine was convened at 11:36 A.M., in Board Room 2, Department of Health Professions, Perimeter Center, 9960 Mayland Drive, Suite 201, Henrico, Virginia.

MEMBERS PRESENT:      Marie Gerado, MS, RN, ANP-BC, Chairperson
                        Louise Hershkowitz, CRNA, MSHA
                        Kenneth Walker, MD

STAFF PRESENT:         Jay Douglas, RN, MSM, CSAC, FRE, Executive Director, Board of Nursing
                        Terri Clinger, DNP, RN, CPNP-PC, Deputy Executive Director for Advance Practice
                        Stephanie Willinger, Deputy Executive Director for Licensing
                        David Kazzie, Adjudication Specialist, Administrative Proceedings Division

CONFERENCES SCHEDULED: Rachel Marie Brown Barish, LNP Applicant for Autonomous Practice

Ms. Barish appeared.

CLOSED MEETING:       Ms. Hershkowitz moved that the Special Conference Committee of the Joint Boards of Nursing and Medicine convene a closed meeting pursuant to Section 2.2-3711(A)(27) of the Code of Virginia at 11:48 A.M. for the purpose of deliberation to reach a decision in the matter of Ms. Barish. Additionally, Ms. Hershkowitz moved that Ms. Douglas, Dr. Clinger, Ms. Willinger and Mr. Kazzie attend the closed meeting because their presence in the closed meeting is deemed necessary, and their presence will aid the Committee in its deliberations. The motion was seconded and carried unanimously.

RECONVENTION:        The Committee reconvened in open session at 12:13 P.M.

Ms. Hershkowitz moved that the Special Conference Committee of the Joint Boards of Nursing and Medicine certifies that it heard, discussed or considered only public business matters lawfully exempted from open meeting requirements under the Virginia Freedom of Information Act and only such public business matters as were identified in the motion by which the closed meeting was convened. The motion was seconded and carried unanimously.

ACTION: Ms. Hershkowitz moved to approve the application of Rachel Marie Brown Barish for authorization to practice as an autonomous nurse practitioner in the Commonwealth of Virginia. The motion was seconded and carried unanimously.
An Order will be entered. As provided by law, this decision shall become a Final Order thirty days after service of such order on Ms. Barish, unless a written request to the Board for a formal hearing on the allegations made against her is received from Ms. Barish within such time. If service of the order is made by mail, three additional days shall be added to that period. Upon such timely request for a formal hearing, the Order shall be vacated.

ADJOURNMENT: The meeting was adjourned at 12:14 P.M.

Terri Clinger, DNP, RN, CPNP-PC
Deputy Executive Director for Advance Practice
In Attendance

Sheila E. Battle, MHS, Citizen Member
Helene Clayton-Jeter, OD, Board of Optometry
Kevin Doyle, EdD, LPC, LSATP, Board of Counseling
Louise Hershkowitz, CRNA, MSHA, Board of Nursing
Allen Jones, Jr., DPT, PT, Board of Physical Therapy
Louis Jones, FSL, Board of Funeral Directors and Embalmers
Steve Karras, DVM, Board of Veterinary Medicine
Derrick Kendall, NHA, Board of Long-Term Care Administrators
Alison King, PhD, CCC-SLP, Board of Audiology & Speech-Language Pathology
Ryan Logan, RPh, Board of Pharmacy
Kevin O'Connor, MD, Board of Medicine
John Salay, MSW, LCSW, Board of Social Work
Herb Stewart, PhD, Board of Psychology
James Watkins, DDS, Board of Dentistry
James Wells, RPh, Citizen Member

Absent

Sahil Chaudhary, Citizen Member
Martha Rackets, PhD, Citizen Member
Maribel Ramos, Citizen Member

DHP Staff

Barbara Allison-Bryan, MD, Deputy Director DHP
David Brown, DC, Director DHP
Elizabeth A. Carter, PhD, Executive Director BHP
Jaime Hoyle, JD, Executive Director Boards of Counseling, Psychology and Social Work
Laura Jackson, MSHSA, Operations Manager BHP
Charls Mitchell, Assistant Attorney General
Rajana Silva, MBA, Research Analyst BHP
Yetty Shobo, PhD, Deputy Executive Director BHP
Corie E. Tillman-Wolf, JD, Executive Director Boards of Funeral Directors and Embalmers, Long-Term Care Administrators and Physical Therapy
Elaine Yeatts, Senior Policy Analyst DHP

Speakers

No speakers signed-in

Observers

Rebekah Allen, VDH

Emergency Egress

Dr. Carter
Call to Order
Dr. Stewart, Board Vice Chair, filled-in for Dr. Jones, Jr. who was delayed by traffic.
Time: 10:04 a.m.
Quorum: Established

Public Comment
No public comment was provided.

Board Member Introduction
With two newly appointed board members, Dr. Stewart asked each board member to introduce themselves.

Approval of Minutes
Dr. Stewart

Motion
A clarification was made by Ms. Hershkowitz to the Board of Nursing report that a second additional license for NP prescriptive authority has been eliminated. With this change, a motion to accept the edited meeting minutes from the December 2, 2019 Full Board meeting was made and properly seconded. All members were in favor, none opposed.

Directors Report
Dr. Brown shared that this years General Assembly has been exceedingly busy, with a lot of interest in health care. He provided an overview of CBD oils, hemp and medical marijuana, who is permitted to prescribe and the progress being made by the Board of Pharmacy in licensing dispensaries.

Legislative and Regulatory Report
Ms. Yeatts stated that there are 65 actions, in different stages, that relate to DHP. She reviewed the bills associated with DHP and provided additional Information for specific professions. The Art Therapy study was approved requiring licensure for art therapists, placing this new profession under the Board of Counseling; and the Music Therapy study was also approved requiring licensure of music therapists, placing this new profession under the Board of Social Work. The Board of Health Professions has been tasked with studying Diagnostic Medical Sonography and Naturopathic Doctors. Board staff will be assisting as needed with the SJ 49 study request into the Need for additional micro-level, mezzo-level, and macro-level social workers and increased compensation.

Board Chair Report
Dr. Jones, Jr. introduced newly appointed Board of Health Professions board members Sheila Battle, Citizen Member and Steve Karras with the Board of Veterinary Medicine.

Executive Director’s Report
Dr. Carter reviewed the Board’s budget and provided insight into the agency’s statistics and performance. The Board’s mission statement needs to be revised and board members were tasked with providing input on changes for the May 27, 2020 meeting. The 2020 Board work plan was also reviewed.

Dr. O’Connor will be providing detailed information to the Director’s Office regarding a study on Certified Anesthesiology Assistants. The last study on this profession was completed in October 2017 with the Board’s unanimous conclusion that the criteria for regulation by Virginia had not been met.
Executive Director's Report-Continued

Extending the current one year term to a two year term for the positions of Board Chair and Vice Chair was discussed. It was determined that the Board would follow a similar structure to that of the Board of Nursing which has three seats: President, First Vice President and Second Vice President. The matter will need to be addressed following Guidance Document amendment procedures.

Healthcare Workforce Data Center

Dr. Carter and Dr. Shobo provided an update on the Center’s workforce reports and data requests.

Lunch

11:49 a.m.

Individual Board Reports

Board of Counseling - Dr. Doyle (Attachment 1)

Board of Pharmacy - Mr. Logan stated that the board voted unanimously to adopt the Regulation Committee’s recommendation to send a recommendation to the Health Commissioner that he also consider taking a more immediate action to prohibit CBD or THC-A formulations Intended to be vaped or Inhaled from containing Vitamin E acetate. Mr. Logan also discussed Immunization administration recordkeeping to be used by hospital pharmacists.

Board of Funeral Directors & Embalmers - Mr. Jones (Attachment 2)

Board of Long-Term Care Administrators - Mr. Kendall (Attachment 3)

Board of Social Work - Mr. Salay (Attachment 4)

Board of Dentistry - Dr. Watkins (Attachment 5)

Board of Psychology - Dr. Stewart (Attachment 6)

Board of Physical Therapy - Dr. Jones, Jr. (Attachment 7)

Board of Optometry- Dr. Clayton-Jeter (Attachment 8)

Board of Veterinary Medicine - Dr. Karras (Attachment 9)

Board of Audiology & Speech-Language Pathology - Dr. King (Attachment 10)

Board of Medicine - Dr. O’Connor stated that the board met last week and that meeting is was determined that an ad-hoc committee would be formed to discuss stem-cells. FSMBs 2020 meeting will be held in San Diego and five (5) Board of Medicine members will be attending. Half of the current board member terms will be expiring June 30, 2030.

Board of Nursing - Ms. Hershkowitz (Attachment 11)
New Business
There was discussion on the steps being taken by the Commonwealth in regards to the coronavirus. Dr. Allison-Bryan advised that she would be sharing a letter that she received from the Virginia Department of Health on this subject matter.

Next Full Board Meeting
Dr. Jones, Jr. advised the Board that the next meeting is scheduled for May 27, 2020 at 10:00 a.m.

Adjourned
1:12 p.m.

Chair
Allen Jones, Jr., DPT, PT

Signature

Board Executive Director
Elizabeth A. Carter, PhD

Signature
### Virginia Board of Nursing -- Informal Conference Schedule

**July – Dec 2020**

*Chairperson*

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<td>Ethlyn McQueen-Gibson, DNP, MSN, RN, BC*</td>
<td>Marie Gerardo, MS, RN, ANP-BC *</td>
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<td>Margaret Friedenberg, Citizen Member</td>
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<td>Dixie McElfresh, LPN</td>
<td>Yvette Dorsey, DNP, RN</td>
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| Meenakshi Shah, BA, RN* |  |
| Brandon Jones, MSN, RN, CEN, NEA-BC |  |

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**BON AGENCY SUBs**
- TM – Trula Minton
- EJE – Jane Elliott
- KM - Kelly McDonough
- PS – Patricia Selig

**BON STAFF**
- JD – Jay Douglas
- RH – Robin Hills
- CM – Claire Morris
- PD – Pat Dewey
- CR – Charlette Ridout
- JW – Jacquelyn Wilmoth

**BON SUPPORT STAFF**
- LG – Lakisha Goode
- MB – Melvina Baylor
- CH – Cathy Hanchey
- HV – Huong Vu
- BY – Beth Yates
- DG – Darlene Graham
- SR – Sally Ragsdale
- STS – Sylvia Tamayo-Suik

**APD STAFF**
- AJ – Anne Joseph
- GS – Grace Stewart
- CG – Cynthia Gaines
- DK – David Kazzie
- TJ – Tammy Jones

**OTHERS – MT Adv Bd**
- KP – Kristina Page
- DH – Dawn Hogue
- EO- Erin Osiol
- SP- Shawnte Peterson

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Final: June 4, 2020
Memo

To: Board Members
From: Jay P. Douglas, MSM, RN, CSAC, FRE
Date: June 18, 2020
Re: Dates for 2021 Board Meetings and Formal Hearings

The following dates are for the 2021 Board Meetings and Formal Hearings:

January 25 – 28, 2021
March 22 – 25, 2021
May 17 – 20, 2021
July 19 – 22, 2021
September 13 – 16, 2021
November 15 – 18, 2021
Virginia Board of Nursing

Executive Director Report

July 21, 2020

Dear Board Members, as you all know much has changed in the world since we last had a face-to-face meeting. I am including in my report highlights of activities that have occurred since the Board last met in January. I am very proud of the Board of Nursing staff at all levels who have demonstrated commitment, flexibility and innovation to ensure that the core functions of the Board continue. The majority of the staff have not teleworked on a regular basis nor had the equipment to do so however overnight this had to occur. Every process in place had to be evaluated and some new processes developed. Efforts made in the last two years to streamline licensing processes and increase electronic communications has certainly paid off.

The primary focus has been to ensure the licensing /registration and certification of the Board of Nursing professions so that we could do our part to ensure an adequate workforce to respond to the effects of the pandemic. Staff has continued to respond to the many public inquiries we receive from individuals and education programs who are challenged in delivery of education.

Based on the Governor’s Executive Order giving authority to Dr Brown to waive certain regulations, staff examined and reexamined regulations in an effort to make recommendations that would temporarily reduce workforce and education barriers while at the same time protecting the public.

Complaints have increased so the review and processing of cases has continued, as has the consideration of cases for possible summary suspensions.

We have missed the physical presence of Board Members and look forward to the time when we are back to some sense of normalcy although I am not sure we will ever do business the same again. In the meantime, while restrictions are still necessary I will continue to discuss with Board Officers the options for convening to carry on the work of the Board. Certain meetings and hearings may lend themselves to a “virtual “presence and the Department has put in place procedures for that to occur in some circumstances.

Meetings/Speaking Engagements

- Jay P. Douglas, Executive Director, attended the NCSBN Board of Directors meeting on February 10-11, 2020. Focus of the meeting included:
  - **Environmental Scan** – regulatory reform initiatives and APRN full practice authority are the two predominant issues mentioned as legislative bodies have reconvened in many jurisdictions.
  - **Report on the Nurse Licensure Compact (NLC)** – there are now 34 states that have implemented the compact; two states are awaiting implementation; and at least eight additional jurisdictions are with pending legislation this year.
 **APRN Compact** – the proposed revisions draft language was discussed and will be presented at the NCSBN Midyear Meeting in March 2020.

 **Next Generation NCLEX (NGN)** – Phil Dickinson, COO, provided an update noting progress is going extremely well and it is expected a launch of NGN in Spring 2023

- Robin L. Hills, Deputy Executive Director for Education, attended the Collaboration Summit of the Virginia Association of Colleges of Nursing (VACN), the Virginia Organization of Nurse Executives and Leaders (VONEL), and the Virginia Nurses Association (VNA) on February 11, 2020. Reports from the following work groups were provided followed by the development of goals, strategies, and metrics by each work group:
  - Community & Psych Mental Health Needs and Roles
  - Standardized Competencies from Academe to Practice
  - Infrastructure Design and Implementation
  - VNA Nurse Staffing and Workforce

- On February 12, 2020, Jacquelyn Wilmoth, Board of Nursing Education Program Manager, hosted an Orientation to establish a Nursing Education Program, there were five in attendance; additionally the Board of Nursing hosted a Review of Education Regulations and site visit prep program, there were nine in attendance.

- Jay P. Douglas, Board of Nursing Executive Director, attended the Nurse Licensure Compact (NLC) Commission meeting on March 2, 2020 in Boston, MA. The topics discussed were plans for additional rule making, self-audit compliance tool, MS licensure issues and committee reports. All Commissioners participated in a four-hour governance-training workshop.

- Jay P. Douglas, Board of Nursing Executive Director, and Jennifer Phelps, Board of Nursing President, attended the NCSBN Executive Officer and President Leadership Forum on March 3, 2020 in Boston, MA. The topics discussed were nursing regulation and scope of practice issues. Ms. Douglas presented information regarding Sanction Reference Point Program.

- Jay P. Douglas, Board of Nursing Executive Director, Jennifer Phelps, Board of Nursing President, Yvette Dorsey, Board of Nursing Member, Charlette Ridout, Board of Nursing Deputy Executive Director, and Claire Morris, Board of Nursing Discipline Case Manager, attended the NCSBN Midyear meeting on March 4-5, 2020 in Boston, MA. The topics discussed were Risk-based Approaches and Alternative to Discipline Guidelines.

- On March 5, 2020, Robin Hills, Board of Nursing Deputy Executive Director for Education, and Terri Clinger, Board of Nursing Deputy Executive Director for Advance Practice, presented on “The State of APRNs” at the Virginia Council of Nurse Practitioners Annual Conference in Norfolk. The presentation was well received.

- Jay P. Douglas, Board of Nursing Executive Director, participated in the Virginia Healthcare Workforce Advisory Council meeting via telephone conference call on March 9, 2020. Topics of
discussion were Future Workforce Trends - Physicians, Virginia Health Professional Training Trends, and Future Workforce Trends – RN and Nurse Practitioners.

• Jay P. Douglas, Board of Nursing Executive Director, participated in an internal DHP meeting with Dr. Brown and Boards who regulate prescribers on March 9, 2020. A process and a form are being developed to approve and track these requests for a one time electronic prescribing waiver.

• Pursuant to Governor's Executive Order 51, effective until June 10, 2020, and current COVID-19 implications, the following changes went into effect at Board of Nursing:
  ➢ Meetings and Hearings scheduled from March 16 through March 19, 2020 were cancelled
  ➢ The Committee of the Joint Boards of Nursing and Medicine scheduled for June 10 was cancelled
  ➢ Meetings and Hearings scheduled May Board, May 18-21, 202 week were cancelled.
  ➢ 17 days of informal conferences were cancelled. Typically there are 8 cases scheduled for a day of information conferences, so there are 136 cases total that were cancelled

• On March 26, 2020, Jay P. Douglas, Executive Director for the Board of Nursing, participated in the NCSBN meeting of all Executive Officers. Experiences and best practices shared related to COVID-19, as well as NCLEX testing update. These meetings have continued on a weekly basis.

• On March 26, 2020, Jay P. Douglas, Executive Director, and Charlette Ridout, Deputy Executive Director, for the Board of Nursing, participated in the Virginia Chief Nursing Officers COVID-19 Operational Issues Forum via telephone conference call, hosted by Virginia Hospital & Healthcare Association. Discussion included:
  ➢ Board of Nursing waivers of regulations, specifically authorization to test/practice letters for new graduates. Positive feedback received regarding waivers
  ➢ Hospital shared their experiences preparing for an increase and managing COVID-19 patients. The main issues discussed:
    ❖ Securing adequate supplies
    ❖ Innovative care delivery models to minimize healthcare providers’ risk
    ❖ Segregating COVID-19 patients

• On March 30, 2020, BON staff participated in DHP meeting via telephone conference call related to Waiver Temporary COVID-19 Reinstatement Licenses BON & BOM.

• Alternative Care Facility (ACF) Steering Group – Virginia Department of Emergency Management (VDEM) is the lead on these efforts and the group meets daily, BON represented by Patricia Dewey. Additional ACF sites are being identified with each VDEM region moving forward at a different pace.
• On April 2, 2020, Jay P. Douglas, Executive Director, and Charlette Ridout, Deputy Executive Director, for the Board of Nursing, met via telephone conference call with April Payne from VHCA & Scott Johnson. Topic for discussion and clarification was the Federal Waiver related to the “120 day rule” that nurse aides must be certified to be employed in Long Term Care facilities. Clarification provided that the VA BON regulation 18VAC90-25-71 addresses the testing time frame (two years). Taking into consideration the Federal waiver of the “120 day rule,” testing closures and this regulation, the Boards understanding is that at the facility level, alternate training could occur. Additionally it is our understanding that the state does not have a role in approving the alternate training thus addressing the workforce issues and opening up alternate roles and training opportunities for assistive personnel in Long Term Care facilities. The above information and clarification was also provided to Dana Parson at Leading Age.

• Jay Douglas, Executive Director for the Board of Nursing, participated in the NCSBN Board of Directors (BOD) via telephone conference on April 24, 2020. Agenda items discussed were:
  ➢ Plan for expansion of NCLEX testing
  ➢ WHO global path for reopening
  ➢ Board of Nursing’s experiences with remote business meeting and hearings
  ➢ Implications of new support worker education programs on quality of future nurse aide applicants
  ➢ NCSBN BOD’s May 4-5, 2020 is scheduled to meet via telephone conference

• Jay Douglas, Executive Director, and Robin Hills, Deputy Executive, for the Board of Nursing participated in the meeting on April 27, 2020 via telephone conference with Department of Medical Assistance Services (DMAS) regarding the possibility of reimbursement for nurse practitioners/CRNAs. DMAS has not made a decision regarding this request.

• Jay Douglas, Executive Director, Robin Hills, Deputy Executive Director for Education, and Charlette Ridout, Deputy Executive Director, for the Board of Nursing participated in the meeting on April 29, 2020 via telephone conference with Corie Tilman Wolf, Executive Director of Boards of funeral Directors and Embalmers, Physical Therapy, and Long-Term Care Administrators. The purpose of this meeting was to discuss current LTC issues related to COVID-19 that may affect both Boards.

• Jay Douglas, Executive Director for the Board of Nursing, participated in the Virginia Nurses Association (VNA) Board of Director (BOD) meeting via telephone conference on April 30, 2020. Agenda items discussed were:
  ➢ Virtual support/assessments for nurses. VNA is learning of multiple instances of nurses with MH effects because of COVID-19 and therefore are establishing support networks. Additionally VNA reported they have been in touch with Peggy Wood at HPMP regarding HPMP services.
  ➢ Board of Nursing update and review of waivers provided by Jay Douglas
  ➢ Student nurse access to clinical sites was discussed as it relates to Summer and Fall semesters. VNA/VNF will work with BON staff to convene a focus group of CNO’s to assist in determining barriers to nursing education and the possible need for future nursing education program waivers.
• On March 17, 2020, Jay P. Douglas, Board of Nursing Executive Director, met with Board of Nursing Deputies to discuss Pearson VUE, who administers the NCLEX, NNAAP, and MACE examinations, temporarily closing all PCC test locations within the US and Canada effective evening of March 16, 2020. See Education report regarding status and progression to full capacity.

• Board of Nursing was notified of PSI closure for registered medication aide exam on March 19, 2020. Limited testing was available May 15 and now testing is at full capacity.

Education Program Updates:

Please note the Education Report (E5). Frequent email communications have been sent to all Nursing and Nurse Aide Programs informing programs of updated information.

Staff Updates:

Please note staff changes under Board announcements on the agenda. There is currently a hiring freeze however we have been successful with Dr Brown’s support in obtaining exceptions to the hiring freeze for a couple of key positions as vacancies occurred.

Committee of Joint Boards of Nursing and Medicine Updates

Certified Registered Nurse Anesthetists

Effective July 1, 2020 Certified Registered Nurse Anesthetists (CRNAs) have the authority to prescribe. Essentially, by operation of law, CRNAs will be granted prescriptive authority automatically. Unlike other categories of nurse practitioners, CRNAs will not have to apply for nor will they receive a separate Rx Authority designation. Therefore, after July 1, 2020, when obtaining license verifications through the Department of Health Professions License Lookup system, a separate ‘Rx Authority’ designation for those nurse practitioners licensed in the category of CRNA will not be listed. Verification of an NP license number that begins with 0024 combined with the CRNA specialty category indicates that the CRNA is eligible to apply for a DEA number.

Prescriptive Authority includes Schedule II through VI

CRNAs are not required to have a practice agreement
Prescriptive Authority for Nurse Practitioners (categories other than CRNAs)

Effective 3/4/2020 Nurse Practitioners do not have separate NP and Prescriptive Authority licenses

The Committee of the Joint Boards of Nursing and Medicine promulgated regulation changes that resulted in the elimination of the requirement for nurse practitioners to obtain/maintain a separate prescriptive authority license (#0017). These changes went into effect on March 4, 2020 so no renewal notices will be sent and renewal of prescriptive authority licenses (#0017) is unnecessary after March 4, 2020. Regulation changes are posted at www.dhp.virginia.gov.

Paperless Licensing:

The Department of Health Professions has moved to a ‘paperless’ licensing system. Licensees were advised of this process change prior to implementation. All new and renewed licenses will contain only the license type and the license number. Upon renewal, the licensee will receive a final hard copy. All details for a license type (i.e. any ‘specializations’ such as Autonomous Practice, Rx Authority, etc.) may be viewed on License Lookup.

COVID-19 Waivers:

Due to COVID-19 temporary regulatory waivers are in place and can be found at http://www.dhp.virginia.gov/Boards/Nursing/AbouttheBoard/News/COVID19/Content-330940-en.html
Feb. 12, 2020

Dear Colleagues,

I hope this letter finds you well and that you are having a great start to 2020. As always, I would like to provide an update on our most recent NCSBN Board of Directors (BOD) meeting.

The BOD met on Feb. 10–11 and began with an informal environmental scan of our respective states. No new topics were mentioned, but regulatory reform initiatives and APRN full practice authority are the two predominant issues mentioned as legislative bodies have reconvened in many jurisdictions. We received the Government Affairs update from our Washington, D.C. office. Elliott Vice and staff continue to build collaborative relationships on the Hill, which is very beneficial to NCSBN.

Interest for the Nurse Licensure Compact (NLC) continues to be strong throughout the country. We now have 32 states that have implemented the compact and two states awaiting implementation. We know of at least eight additional jurisdictions with pending legislation this year.

The BOD reviewed the financial statements for the first quarter of fiscal year 2020. We continue to be in a strong financial position, which enables NCSBN to continue to fund our many valuable programs and services for members. We approved a grant request from the New Jersey Board of Nursing for implementation of the NLC.

We also reviewed the strategic outcomes report and heard about the most recent NCSBN research on recidivism of nurses with criminal convictions. You will hear more about this at the Midyear Meeting. Speaking of the Midyear Meeting, I am both pleased and excited about the agenda NCSBN staff have prepared. The BOD approved the final agenda and will be actively soliciting feedback from our members about matters coming to the Delegate Assembly in August.

We will have presentations from the Model Act and Rules Committee (with recommendations) and will revisit proposed revisions to the APRN Compact Draft language. Following the presentations, you will have opportunity to comment in the general session and also in the Area Meetings. The BOD sincerely wants to hear from you, the membership, about these issues prior to our final preparation for Delegate Assembly.

Phil Dickison, COO, provided an update on Next Generation NCLEX® (NGN). Progress is going extremely well and we can expect a launch of NGN in Spring 2023—very exciting news!

I look forward to seeing you at the Midyear Meeting in Boston. If you have any questions or concerns, please feel free to reach out to me. I value your input.

All my Best,

**Julia George, MSN, RN, FRE**

President

919.782.3211 ext. 250

Julie@ncbon.com
Committee of Joint Boards of Joint Boards of Nursing and Medicine Updates

From: Jay P Douglas Executive Director, Virginia Board of Nursing

Certified Registered Nurse Anesthetists

Effective July 1, 2020 Certified Registered Nurse Anesthetists (CRNAs) have the authority to prescribe. Essentially, by operation of law, CRNAs will be granted prescriptive authority automatically. Unlike other categories of nurse practitioners, CRNAs will not have to apply for nor will they receive a separate Rx Authority designation. Therefore, after July 1, 2020, when obtaining license verifications through the Department of Health Professions License Lookup system, a separate ‘Rx Authority’ designation for those nurse practitioners licensed in the category of CRNA will not be listed. Verification of an NP license number that begins with 0024 combined with the CRNA specialty category indicates that the CRNA is eligible to apply for a DEA number.

Prescriptive Authority includes Schedule II through VI
CRNAs are not required to have a practice agreement

In order to monitor and promote safe prescribing practices, Virginia established the Prescription Monitoring Program (PMP) that tracks prescriptions for controlled substances. The law requires prescribers of Schedule II-V medications to register with the PMP
http://www.dhp.virginia.gov/PractitionerResources/PrescriptionMonitoringProgram/

Prescribers must consult the PMP for other Schedule II-V controlled substances currently prescribed to a patient when initiating a new course of treatment that includes prescribing of opioids for more than seven days. Prescribers are not required to request information from the PMP when an opioid is prescribed to a patient during an inpatient hospital admission or discharge.

For your convenience, here is the new law below, please note changes to various sections of the code and specifically the addition of section H:

Bill Tracking - 2020 session > Legislation - SB1059/SB264

A. In accordance with the provisions of this section and pursuant to the requirements of Chapter 33 (§ 54.1-3300 et seq.), a licensed nurse practitioner, other than a certified registered nurse anesthetist, shall have the authority to prescribe Schedule II through Schedule VI controlled substances and devices as set forth in Chapter 34 (§ 54.1-3400 et seq.).

B. A nurse practitioner who does not meet the requirements for practice without a written or electronic practice agreement set forth in subsection I of § 54.1-2957 shall prescribe controlled substances or devices only if such prescribing is authorized by a written or electronic practice agreement entered into by the nurse practitioner and a patient care team physician. Such nurse practitioner shall provide to the Boards of Medicine and Nursing such evidence as the Boards
may jointly require that the nurse practitioner has entered into and is, at the time of writing a prescription, a party to a written or electronic practice agreement with a patient care team physician that clearly states the prescriptive practices of the nurse practitioner. Such written or electronic practice agreements shall include the controlled substances the nurse practitioner is or is not authorized to prescribe and may restrict such prescriptive authority as described in the practice agreement. Evidence of a practice agreement shall be maintained by a nurse practitioner pursuant to § 54.1-2957. Practice agreements authorizing a nurse practitioner to prescribe controlled substances or devices pursuant to this section either shall be signed by the patient care team physician or shall clearly state the name of the patient care team physician who has entered into the practice agreement with the nurse practitioner.

It shall be unlawful for a nurse practitioner to prescribe controlled substances or devices pursuant to this section unless (i) such prescription is authorized by the written or electronic practice agreement or (ii) the nurse practitioner is authorized to practice without a written or electronic practice agreement pursuant to subsection I of § 54.1-2957.

C. The Boards of Medicine and Nursing shall promulgate regulations governing the prescriptive authority of nurse practitioners as are deemed reasonable and necessary to ensure an appropriate standard of care for patients. Such regulations shall include requirements as may be necessary to ensure continued nurse practitioner competency, which may include continuing education, testing, or any other requirement, and shall address the need to promote ethical practice, an appropriate standard of care, patient safety, the use of new pharmaceuticals, and appropriate communication with patients.

D. This section shall not limit the functions and procedures of certified registered nurse anesthetists or of any nurse practitioners, which are otherwise authorized by law or regulation.

E. The following restrictions shall apply to any nurse practitioner authorized to prescribe drugs and devices pursuant to this section:

1. The nurse practitioner shall disclose to the patient at the initial encounter that he is a licensed nurse practitioner. Any party to a practice agreement shall disclose, upon request of a patient or his legal representative, the name of the patient care team physician and information regarding how to contact the patient care team physician.

2. Physicians shall not serve as a patient care team physician on a patient care team at any one time to more than six nurse practitioners.

F. This section shall not prohibit a licensed nurse practitioner from administering controlled substances in compliance with the definition of "administer" in § 54.1-3401 or from receiving and dispensing manufacturers' professional samples of controlled substances in compliance with the provisions of this section.

G. Notwithstanding any provision of law or regulation to the contrary, a nurse practitioner licensed by the Boards of Medicine and Nursing in the category of certified nurse midwife and holding a license for prescriptive authority may prescribe (i) Schedules II through V controlled...
substances in accordance with any prescriptive authority included in a practice agreement with a licensed physician pursuant to subsection H of § 54.1-2957 and (ii) Schedule VI controlled substances without the requirement for inclusion of such prescriptive authority in a practice agreement.

H. Notwithstanding any provision of law or regulation to the contrary, a nurse practitioner licensed by the Boards of Medicine and Nursing as a certified registered nurse anesthetist shall have the authority to prescribe Schedule II through Schedule VI controlled substances and devices in accordance with the requirements for practice set forth in subsection C of § 54.1-2957 to a patient requiring anesthesia, as part of the periprocedural care of such patient. As used in this subsection, “periprocedural” means the period beginning prior to a procedure and ending at the time the patient is discharged.

18VAC90-40-20. Authority and Administration of Regulations.

A. The statutory authority for this chapter is found in §§ 54.1-2957.01, 54.1-3303, 54.1-3401, and 54.1-3408 of the Code of Virginia.

Prescriptive Authority for Nurse Practitioners (categories other than CRNAs)

Effective 3/4/2020 Nurse Practitioners do not have separate NP and Prescriptive Authority licenses

The Committee of the Joint Boards of Nursing and Medicine promulgated regulation changes that resulted in the elimination of the requirement for nurse practitioners to obtain/maintain a separate prescriptive authority license (#0017). These changes went into effect on March 4, 2020 so no renewal notices will be sent and renewal of prescriptive authority licenses (#0017) is unnecessary after March 4, 2020. Regulation changes are posted at www.dhp.virginia.gov.

Key points:

- You are required to renew your current Nurse Practitioner license (#0024) and your prerequisite Registered Nurse (RN) license (*Note: you must renew your RN license first before proceeding with renewing your Nurse Practitioner license).
- Your license is clearly designated with Rx Authority which may be viewable through License Lookup.
- You are still required to comply with the continued competency requirements if you have prescriptive authority as indicated in 18 VAC 90-40-55.
- If you do not currently have a prescriptive authority license (#0017), a paper application ($35 application fee) will be posted on the Board of Nursing webpage to add this to your existing Nurse Practitioner license.
Paperless Licensing:

The Department of Health Professions has moved to a ‘paperless’ licensing system. Licensees were advised of this process change prior to implementation. All new and renewed licenses will contain only the license type and the license number. Upon renewal, the licensee will receive a final hard copy. All details for a license type (i.e. any ‘specializations’ such as Autonomous Practice, Rx Authority, etc.) may be viewed on License Lookup.

COVID -19 Waivers:

Due to COVID -19 temporary regulatory waivers are in place and can be found at http://www.dhp.virginia.gov/Boards/Nursing/AbouttheBoard/News/COVIDI19/Content-330940-en.html

See the Board of Nursing staff listing for information on where to go for licensure application or other assistance

7/1/2020  JPD
Virginia Board of Nursing
Jay P. Douglas, MSM, RN, CSAC, FRE
Executive Director

Board of Nursing (804) 367-4515
Nurse Aide Registry (804) 367-4569
FAX (804) 527-4455

MEMORANDUM

To: Education Informal Conference Committee

From: Jacquelyn Wilmoth, RN, MSN
Nursing Education Program Manager

Date: February 5, 2020

Subject: 2019 NCLEX Pass Rates

Practical Nursing Summary:

- There are eight (8) active practical nursing programs with NCLEX-PN pass rates less than 80% for one year.

- There is one (1) active practical nursing program with NCLEX-PN pass rates less than 80% for two years.

- Virginia’s NCLEX-PN pass rates continue to trend lower than the national average.

Registered Nursing Summary:

- There are seven (7) active registered nursing programs with NCLEX-RN pass rates less than 80% for one year.

- There is one (1) active registered nursing program with NCLEX-RN pass rates less than 80% for three years.

- Virginia’s NCLEX-RN pass rates continue to trend higher than the national average.
Nursing Programs one year of NCLEX
First-time test taker pass rates below 80% (2019)

Practical Nursing Programs:

<table>
<thead>
<tr>
<th>Program Name</th>
<th>Program code</th>
<th>NCLEX Pass rate %</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>High School or Technical Center</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Loudon County</td>
<td>US28104600</td>
<td>70 (7/10)</td>
</tr>
<tr>
<td><strong>Private/Proprietary Program</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Standard College</td>
<td>US28108100</td>
<td>78.77 (141/179)</td>
</tr>
<tr>
<td>Chester Career College</td>
<td>US28103000</td>
<td>75 (15/20)</td>
</tr>
<tr>
<td>Fortis Richmond</td>
<td>US28202700</td>
<td>66.67 (6/9)</td>
</tr>
<tr>
<td>Riverside College</td>
<td>US28108300</td>
<td>72.73 (24/33)</td>
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<tr>
<td><strong>Community College</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dabney S Lancaster CC</td>
<td>US28107600</td>
<td>78.95 (15/19)</td>
</tr>
<tr>
<td>Patrick Henry CC</td>
<td>US28200000</td>
<td>71.43 (15/21)</td>
</tr>
<tr>
<td>Southwest Virginia CC</td>
<td>US28103100</td>
<td>72.73 (8/11)</td>
</tr>
<tr>
<td><strong>Closed Programs</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Centura College-Norfolk</td>
<td>Closed 07-31-2019 US28103800</td>
<td>57.14 (4/7)</td>
</tr>
<tr>
<td>Healing Hands</td>
<td>Closed 01-31-2019 US28110400</td>
<td>62.5 (5/8)</td>
</tr>
<tr>
<td>National SON &amp; Allied Health</td>
<td>Closed 06-30-2013 US28206500</td>
<td>12.2 (5/41)</td>
</tr>
<tr>
<td>Northern Virginia Comm. College</td>
<td>Closed 05-2017 US28103900</td>
<td>0 (0/1)</td>
</tr>
<tr>
<td>Star College</td>
<td>Approval Withdrawn 09-2015 US28205500</td>
<td>0 (0/3)</td>
</tr>
<tr>
<td>Washington County H.S.</td>
<td>Closed 07-2019 US28100600</td>
<td>63.64 (7/11)</td>
</tr>
</tbody>
</table>

Registered Nursing Programs:

<table>
<thead>
<tr>
<th>Program Name</th>
<th>Program Code</th>
<th>NCLEX Pass rate %</th>
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</thead>
<tbody>
<tr>
<td><strong>Associate Degree</strong></td>
<td></td>
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<tr>
<td><strong>Private/Proprietary Program</strong></td>
<td></td>
<td></td>
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<tr>
<td>Bryant &amp; Stratton College — VA Beach</td>
<td>US28409700</td>
<td>68.2 (15/22)</td>
</tr>
<tr>
<td>ECPI Richmond</td>
<td>US28401500</td>
<td>66.13 (41/62)</td>
</tr>
<tr>
<td>ECPI Roanoke</td>
<td>US28409300</td>
<td>58.97 (23/39)</td>
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<tr>
<td>ECPI VA Beach</td>
<td>US28400600</td>
<td>74.68 (115/154)</td>
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<tr>
<td><strong>Community College</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Patrick Henry CC</td>
<td>US28406900</td>
<td>71.11 (32/45)</td>
</tr>
<tr>
<td>J. Sargeant Reynolds CC (LPN-RN)—no longer enrolling students</td>
<td>US28401100</td>
<td>75 (3/4)</td>
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<tr>
<td><strong>Baccalaureate</strong></td>
<td></td>
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<tr>
<td>Stratford University-Woodbridge</td>
<td>US28502000</td>
<td>78.05 (32/41)</td>
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<tr>
<td><strong>Closed Programs</strong></td>
<td></td>
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<tr>
<td>Global Health</td>
<td>Closed December 31, 2018 US28102900</td>
<td>73.9 (17/23)</td>
</tr>
</tbody>
</table>

Letters were sent to the program directors requesting the submission of a plan of correction as required in 18VAC90-27-210(B). All programs have submitted their plans and they are located in the program files.
Nursing Programs with two years of NCLEX
First-time test taker pass rates below 80% (2018 and 2019)

Practical Nursing Programs:

<table>
<thead>
<tr>
<th>Program Name</th>
<th>Program Code</th>
<th>NCLEX Pass Rate 2018</th>
<th>NCLEX Pass Rate 2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Petersburg Public Schools</td>
<td>US28109400</td>
<td>75% (3/4)</td>
<td>50% (3/6)</td>
</tr>
</tbody>
</table>

Pursuant to 18 VAC 90-27-210(B), Petersburg Public Schools PN Program will be:

1. Placed on conditional approval with terms and conditions;
2. Requested to submit an updated NCLEX plan of correction;
3. Scheduled for an NCLEX Focused Site Visit to include required documents; and
4. Required to submit the fees for the site visit.
Nursing Programs with **three or more years of NCLEX**
First-time test taker pass rates below 80% (2017, 2018 and 2019)

Registered Nursing Program:

<table>
<thead>
<tr>
<th>Program Name</th>
<th>Program Code</th>
<th>NCLEX Pass Rate 2017</th>
<th>NCLEX Pass Rate 2018</th>
<th>NCLEX Pass Rate 2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Proprietary</td>
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<td></td>
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<td></td>
</tr>
<tr>
<td>Fortis College – Richmond (ADN)</td>
<td>US28408900</td>
<td>50% (1/2)</td>
<td>68.42% (13/19)</td>
<td>72.22% (13/18)</td>
</tr>
</tbody>
</table>

Pursuant to 18VAC90-27-210 (B), the board may withdraw program approval.

Initial survey visit of Fortis Richmond was conducted on March 8, 2020 pursuant to 18VAC90-27-150 (A)(3). During the survey visit 24 regulations were unable to be verified. The program has until July 7, 2020 to submit evidence demonstrating compliance with the previously unverified regulations.
## Five year NCLEX Pass Rates
### 2015-2019

### NCLEX-PN Pass Rates for 2015-2019

<table>
<thead>
<tr>
<th>Year</th>
<th>Virginia</th>
<th>National</th>
</tr>
</thead>
<tbody>
<tr>
<td>2019</td>
<td>84.28%</td>
<td>85.63%</td>
</tr>
<tr>
<td>2018</td>
<td>84.15%</td>
<td>85.93%</td>
</tr>
<tr>
<td>2017</td>
<td>80.50%</td>
<td>83.84%</td>
</tr>
<tr>
<td>2016</td>
<td>78.76%</td>
<td>83.73%</td>
</tr>
<tr>
<td>2015</td>
<td>79.25%</td>
<td>81.88%</td>
</tr>
</tbody>
</table>

*Source: NCSBN NCLEX Year End Report*

### NCLEX-RN Pass Rates for 2015-2019

#### (All Types of RN Programs Combined)

<table>
<thead>
<tr>
<th>Year</th>
<th>Virginia</th>
<th>National</th>
</tr>
</thead>
<tbody>
<tr>
<td>2019</td>
<td>89.47%</td>
<td>83.51%</td>
</tr>
<tr>
<td>2018</td>
<td>91.37%</td>
<td>88.30%</td>
</tr>
<tr>
<td>2017</td>
<td>89.16%</td>
<td>87.11%</td>
</tr>
<tr>
<td>2016</td>
<td>86.87%</td>
<td>84.57%</td>
</tr>
<tr>
<td>2015</td>
<td>87%</td>
<td>84.53%</td>
</tr>
</tbody>
</table>

*Source: NCSBN NCLEX Year End Report*

### NCLEX-RN Pass Rates for 2015-2019

#### (by program type)

<table>
<thead>
<tr>
<th>Year</th>
<th>Diploma</th>
<th>National</th>
<th>Associates</th>
<th>National</th>
<th>Bachelors</th>
<th>National</th>
</tr>
</thead>
<tbody>
<tr>
<td>2019</td>
<td>N/A</td>
<td>N/A</td>
<td>Tested 2358 Passed 2031</td>
<td>86.17%</td>
<td>Tested 2265 Passed 2132</td>
<td>92.22%</td>
</tr>
<tr>
<td>2018</td>
<td>N/A</td>
<td>N/A</td>
<td>Tested 2130 Passed 1911</td>
<td>86.14%</td>
<td>Tested 2065 Passed 1923</td>
<td>91.58%</td>
</tr>
<tr>
<td>2017</td>
<td>Tested 21 Passed 18</td>
<td></td>
<td>Tested 1818 Passed 1575</td>
<td>84.24%</td>
<td>Tested 2055 Passed 1879</td>
<td>90.04%</td>
</tr>
<tr>
<td>2016</td>
<td>Tested 51 Passed 45</td>
<td></td>
<td>Tested 1864 Passed 1592</td>
<td>81.68%</td>
<td>Tested 1963 Passed 1732</td>
<td>87.8%</td>
</tr>
<tr>
<td>2015</td>
<td>Tested 76 Passed 72</td>
<td></td>
<td>Tested 2011 Passed 1708</td>
<td>82%</td>
<td>Tested 1884 Passed 1675</td>
<td>88.9%</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>87.49%</td>
</tr>
</tbody>
</table>

*Source: NCSBN NCLEX Year End Report*
MEMORANDUM

To: Education Informal Conference Committee

From: Jacquelyn Wilmoth, RN, MSN
Nursing Education Program Manager

Date: February 5, 2020

Subject: 2019 Closed Nursing Programs

<table>
<thead>
<tr>
<th>Registered Nursing Programs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stratford University-Newport News</td>
</tr>
<tr>
<td>Jefferson College of Health Sciences-Traditional BSN</td>
</tr>
<tr>
<td>Jefferson College of Health Sciences-Accelerated BSN</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Practical Nursing Programs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Healing Hands Practical Nursing</td>
</tr>
<tr>
<td>Washington County School of Practical Nursing</td>
</tr>
<tr>
<td>Centura - Norfolk Practical Nursing</td>
</tr>
</tbody>
</table>
MEMORANDUM

To: Education Informal Conference Committee

From: Jacquelyn Wilmoth, RN, MSN
      Nursing Education Program Manager

Date: June 2, 2020

Subject: Applications to Establish a Nursing Education Program

The Board of Nursing received applications to establish a nursing education program as follows:

**Practice Nursing Program:**

1. American National University, Salem
2. Clarys Advanced Nursing, Sterling
3. Salvation Academy, Alexandria
4. Thomas Nelson Community College, Hampton

**Registered Nursing Program:**

1. ECPI, baccalaureate degree, Norfolk—Initial approval granted
2. Ferrum College, baccalaureate degree, Ferrum
3. Averett University, baccalaureate degree, Danville
4. Bluefield College, baccalaureate degree, Bluefield
5. Emory & Henry College, baccalaureate degree, Emory
MEMORANDUM

To: Board of Nursing

From: Robin L. Hills, RN, DNP, WHNP
Deputy Executive Director

Date: March 3, 2020

Subject: 2020 Education IFC Assignments

<table>
<thead>
<tr>
<th>Education IFC</th>
<th>Chair</th>
<th>2nd Seat</th>
<th>Possible Alternate(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tues., May 12, 2020</td>
<td>Cynthia Swineford</td>
<td>Felisa Smith</td>
<td>James Hermansen-Parker, Mark Monson</td>
</tr>
<tr>
<td>Wed., July 8, 2020</td>
<td>Ethlyn McQueen-Gibson</td>
<td>James Hermansen-Parker</td>
<td>Felisa Smith</td>
</tr>
<tr>
<td>Wed., Sept. 2, 2020</td>
<td>Ethlyn McQueen-Gibson</td>
<td>James Hermansen-Parker</td>
<td>Mark Monson</td>
</tr>
<tr>
<td>Wed., Nov. 4, 2020</td>
<td>Cynthia Swineford</td>
<td>Yvette Dorsey</td>
<td>James Hermansen-Parker, Mark Monson</td>
</tr>
</tbody>
</table>
MEMORANDUM

To: Board of Nursing
From: Robin L. Hills, DNP, RN, WHNP
      Deputy Executive Director
      Jacquelyn Wimoth, RN, MSN
      Nursing Education Program Manager
Date: June 30, 2020
Subject: Nursing Education and Nurse Aide Education Programs Update

With the outbreak of the COVID-19 pandemic came unprecedented challenges for both nursing and nurse aide education programs. Therefore, the main focus of the Board of Nursing initially was to identify the regulatory barriers needed to increase the healthcare workforce across Virginia. Once the regulatory barriers were identified, waivers were put into place.

Due to physical distancing guidelines and executive orders by Governor Northam, both nursing and nurse aide education programs moved their didactic courses to an online environment. The nursing education program regulation waivers gave nursing programs additional flexibility as they planned clinical instruction while remaining compliant with regulation. As uncertainty regarding nursing student progression increased due to a lack of clinical placements, the Board of Nursing emailed an anonymous survey to all nursing programs (both LPN and RN programs) in order to collect data regarding Summer and Fall 2020 nursing student clinical placements. The survey had an overall response rate of 78% (106/136) with 85% of programs reporting having experienced barriers to clinical placements for Summer 2020 semester. Although some programs reported not yet having attempted to secure Fall 2020 clinical placements, 73% of programs reported having already experienced barriers to Fall semester clinical placements. Programs reported PPE shortage, non-specific COVID-19 concerns, and furloughed program faculty and facility staff as the primary barriers to securing clinical placements. In response to the survey results, simulation waivers were extended and additional waivers were implemented permitting flexibility in site and survey visits.

Regarding nurse aide education programs, changes in federal CMS regulations directly impacted the decisions made regarding waiver recommendations at the state level.

The remainder of this report summarizes the recent developments surrounding nursing and nurse aide education programs during the COVID-19 pandemic.
### NURSING EDUCATION PROGRAMS UPDATE

**Nursing Education Waivers**

**Effective March 19, 2020-June 10, 2020**

<table>
<thead>
<tr>
<th>Section</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>18VAC90-27-100(A)</td>
<td>Minimum hours of direct client care. A nursing education program preparing a student for licensure as a registered nurse shall provide a minimum of 500 hours of direct client care supervised by qualified faculty. A nursing education program preparing a student for licensure as a practical nurse shall provide a minimum of 400 hours of direct client care supervised by qualified faculty. Direct client care hours shall include experiences and settings as set forth in 18VAC90-27-90 B 1. The minimum of 500 hours of direct client care for nursing education program preparing a student for licensure as a registered nurse AND the minimum of 400 hours of direct client care for nursing education program preparing a student for licensure as a practical nurse shall be waived for all students who are on schedule to meet the requirements for program completion/graduation during the effective period of Executive Order No. 51.</td>
</tr>
</tbody>
</table>

**Effective March 19, 2020-December 31, 2020**

<table>
<thead>
<tr>
<th>Section</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>18VAC90-27-100(D)(2)</td>
<td>Simulation for clinical hours in a single course. No more than 50% of the total clinical hours for any course may be used as simulation. Waived for those students who are enrolled in nursing clinical courses from March 19, 2020 through December 31, 2020.</td>
</tr>
<tr>
<td>18VAC90-27-100(D)(1)</td>
<td>Simulation for total clinical hours. No more than 25% of direct client contact hours may be simulation. For prelicensure registered nursing programs, the total of simulated client care hours cannot exceed 125 hours (25% of the required 500 hours). For prelicensure practical nursing programs, the total of simulated client care hours cannot exceed 100 hours (25% of the required 400 hours). Waived for those students who are enrolled in nursing clinical courses from March 19, 2020 through December 31, 2020.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Section</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>18VAC90-27-10 Definitions.</td>
<td>&quot;Site visit&quot; means a focused onsite review of the nursing program by board staff, usually completed within one day for the purpose of evaluating program components such as the physical location (skills lab, classrooms, learning resources) for obtaining initial program approval, in response to a complaint, compliance with NCLEX plan of correction, change of location, or verification of noncompliance with this chapter. The requirement of 18 VAC 90-27-10 in the definitions of &quot;site visit&quot; and &quot;survey visit&quot; for onsite reviews is suspended for the duration of the state of emergency as declared by Executive Order 51 and for 30 days after the state of emergency expires or is rescinded. &quot;Survey visit&quot; means a comprehensive onsite review of the nursing program by board staff, usually completed within two days (depending on the number of programs or campuses being reviewed) for the purpose of obtaining and maintaining full program approval. The survey visit includes the program's completion of a self-evaluation report prior to the visit, as well as a board staff review of all program resources, including skills lab, classrooms, learning resources, and clinical facilities, and other components to ensure compliance with this chapter. Meetings with faculty, administration, students, and clinical facility staff will occur.</td>
</tr>
</tbody>
</table>
18VAC90-27-220 (B) & (C) Maintaining an approved nursing education program.
B. Prior to February 7, 2021, each registered nursing education program shall be reevaluated as follows:

1. Every registered nursing education program that has not achieved accreditation as defined in 18VAC90-27-10 shall be reevaluated at least every five years by submission of a comprehensive self-evaluation report based on Parts II (18VAC90-27-30 et seq.) and III (18VAC90-27-150 et seq.) of this chapter and a survey visit by a representative or representatives of the board on dates mutually acceptable to the institution and the board.

2. A registered nursing education program that has maintained accreditation as defined in 18VAC90-27-10 shall be reevaluated at least every 10 years by submission of a comprehensive self-evaluation report as provided by the board. As evidence of compliance with specific requirements of this chapter, the board may accept the most recent study report, site visit report, and final decision letter from the accrediting body. The board may require additional information or a site visit to ensure compliance with requirements of this chapter. If accreditation has been withdrawn or a program has been placed on probation by the accrediting body, the board may require a survey visit. If a program fails to submit the documentation required in this subdivision, the requirements of subdivision 1 of this subsection shall apply.

After February 7, 2021, each registered nursing education program shall have accreditation or candidacy status and shall be reevaluated at least every 10 years by submission of a comprehensive self-evaluation report as provided by the board. As evidence of compliance with specific requirements of this chapter, the board may accept the most recent study report, site visit report, and final decision letter from the accrediting body. The board may require additional information or a site visit to ensure compliance with requirements of this chapter. If a program has been placed on probation by the accrediting body, the board may require a survey visit. If a program fails to submit the documentation required in this subdivision, the requirements of subdivision 1 of this subsection shall apply.

C. Each practical nursing education program shall be reevaluated as follows:

1. Every practical nursing education program that has not achieved accreditation as defined in 18VAC90-27-10 shall be reevaluated at least every five years by submission of a comprehensive self-evaluation report based on Parts II (18VAC90-27-30 et seq.) and III (18VAC90-27-150 et seq.).

Waived for those programs whose reevaluations are due within the period of the state of emergency, the time period to complete the reevaluation shall be suspended and extended to 30 days after the state of emergency as declared by Executive Order 51 expires or is rescinded.
of this chapter and a survey visit by a representative or representatives of the board on dates mutually acceptable to
the institution and the board.

2. A practical nursing education program that has maintained
accreditation as defined in 18VAC90-27-10 shall be
reevaluated at least every 10 years by submission of a
comprehensive self-evaluation report as provided by the
board. As evidence of compliance with specific requirements
of this chapter, the board may accept the most recent study
report, site visit report, and final decision letter from the
accrediting body. The board may require additional
information or a site visit to ensure compliance with
requirements of this chapter. If accreditation has been
withdrawn or a program has been placed on probation by the
accrediting body, the board may require a survey visit. If a
program fails to submit the documentation required in this
subdivision, the requirements of subdivision 1 of this
subsection shall apply.

<table>
<thead>
<tr>
<th>Nursing Education Program Site Visits to be Rescheduled</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program Name</td>
</tr>
<tr>
<td>ECPI VA Beach</td>
</tr>
<tr>
<td>ECPI VA Beach</td>
</tr>
<tr>
<td>Fortis Norfolk</td>
</tr>
<tr>
<td>Bryant &amp; Stratton Richmond</td>
</tr>
<tr>
<td>Bryant &amp; Stratton Richmond</td>
</tr>
<tr>
<td>Petersburg High School</td>
</tr>
</tbody>
</table>

NCLEX Testing Summary

NCLEX testing sites around the US and Canada were closed on March 17, 2020 in response to the
COVID-19 pandemic. On March 25, 2020, a limited number of testing sites reopened. On May 1, 2020
all testing centers across the US and Canada reopened. To ensure social distancing measures are in effect,
as well as increase the number of candidates that can test daily, the NCLEX-RN and NCLEX-PN,
effective March 25, 2020 until Sept. 30, 2020, will be administered as follows:

- Computerized Adaptive Testing (CAT) will still be used
- The minimum number of test items will be 60
- The maximum number of test items will be 130
- The maximum testing time will be 4 hours
- The difficulty level and passing standard has not changed
- The Next Generation NCLEX Special Research Section will NOT be included

On June 25, 2020, the Governor’s office approved for testing sites to resume to normal capacity for
testing. NCSBN was notified of the approval.

Education staff are in the process of developing a questionnaire for all programs to complete related to
COVID-19 and related curricular changes.
Emails to all Nursing Programs

<table>
<thead>
<tr>
<th>Date of Email</th>
<th>Subject of Email</th>
</tr>
</thead>
<tbody>
<tr>
<td>March 17, 2020</td>
<td>Important NCLEX and NNAAP information as a result of COVID-19</td>
</tr>
<tr>
<td>March 17, 2020</td>
<td>Letters of Attestation</td>
</tr>
<tr>
<td>March 20, 2020</td>
<td>Waiver of Certain Board of Nursing Regulations</td>
</tr>
<tr>
<td>March 30, 2020</td>
<td>Policy Brief: Academic-Practice Partnerships</td>
</tr>
<tr>
<td>April 2, 2020</td>
<td>Spring 2020 Next Generation NCLEX Newsletter</td>
</tr>
<tr>
<td>April 2, 2020</td>
<td>Licensure Information: COVID-19 (expedited licensure application processing)</td>
</tr>
<tr>
<td>April 9, 2020</td>
<td>COVID-19 Nursing Education Program Update</td>
</tr>
<tr>
<td>April 13, 2020</td>
<td>NCSBN Webinars and NCLEX Prep Courses</td>
</tr>
<tr>
<td>April 15, 2020</td>
<td>VDH Medical Reserve Corps Recruitment Underway</td>
</tr>
<tr>
<td>May 4, 2020</td>
<td>Professional Development Seminars this spring by Mountain Measurement</td>
</tr>
<tr>
<td>May 18, 2020</td>
<td>NCSBN Extends Modified NCLEX Through September 30, 2020</td>
</tr>
<tr>
<td>June 10, 2020</td>
<td>NCLEX Scheduling and Candidate Resources</td>
</tr>
<tr>
<td>June 18, 2020</td>
<td>Important Education Waiver and Licensing Information</td>
</tr>
<tr>
<td>June 29, 2020</td>
<td>Students Considered “Staff” in VDH’s Nursing Home Guidance for Phased Reopening</td>
</tr>
<tr>
<td>June 30, 2020</td>
<td>New US Department of Education Requirement</td>
</tr>
</tbody>
</table>

Additional information on each email noted above is available upon request.

NURSE AIDE EDUCATION PROGRAMS

BON Nurse Aide Education Program Waivers

Effective March 19, 2020-June 10, 2020

<table>
<thead>
<tr>
<th>Rule 18VAC-90-26-30(C) Other Instructional Personnel</th>
<th>Waive the requirement that other instructional personnel who assist the primary instructor in providing classroom supervision shall be registered nurses or licensed practical nurses.</th>
</tr>
</thead>
<tbody>
<tr>
<td>C. Other instructional personnel.</td>
<td>Waive the requirement that other instructional personnel shall demonstrate competence to teach adults by one of the following:</td>
</tr>
<tr>
<td>1. Instructional personnel who assist the primary instructor in providing classroom or clinical supervision shall be registered nurses or licensed practical nurses.</td>
<td>1. Satisfactory completion of a course in teaching adults that includes:</td>
</tr>
<tr>
<td></td>
<td>a. Basic principles of adult learning;</td>
</tr>
<tr>
<td></td>
<td>b. Teaching methods and tools for adult learners; and</td>
</tr>
<tr>
<td></td>
<td>c. Evaluation strategies and measurement tools for assessing the learning outcomes; or</td>
</tr>
<tr>
<td></td>
<td>2. Have experience in teaching adults or high school students.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Rule 18VAC90-26-30(D) Qualifications of Nurse Aide Instructors</th>
<th>Waive the requirement that all instructional personnel must demonstrate competence to teach adults.</th>
</tr>
</thead>
</table>
Federal CMS Waivers affecting Nurse Aide Education Programs

Posted April 3, 2020 - Effective Retroactively to March 1, 2020

Training and Certification of Nurse Aides. The requirement that a SNF and NF may not employ anyone for longer than four months unless they met the training and certification requirements under § 483.35(d) is waived through the end of the federal emergency declaration. CMS is waiving these requirements to assist in potential staffing shortages seen with the COVID-19 pandemic. We further note that we are not waiving § 483.35(c), which requires facilities to ensure that nurse aides are able to demonstrate competency in skills and techniques necessary to care for residents’ needs, as identified through resident assessments, and described in the plan of care.

Waived the requirements at 42 CFR 483.35(d) (with the exception of 42 CFR 483.35(d)(1)(i))

Note: This waiver allows nursing centers to temporarily employ individuals who have completed alternative training paths, as long as they are competent to provide relevant nursing and nursing related services. The BON does not have a role in approving this alternative training.

VDH

Posted June 18, 2020

VDH Nursing Home Guidance for Phased Reopening

"Definition of Staff - Guidance in this document that refers to “staff” include, but are not limited to, nurses, nursing assistants, physicians, technicians, therapists, phlebotomists, pharmacists, students and trainees, emergency medical service personnel, contractual staff not employed by the facility, and persons not directly involved in patient care, but who could be exposed to infectious agents that can be transmitted in the healthcare setting (e.g., clerical, dietary, environmental services, laundry, security, engineering and facilities management, administrative, billing, and volunteer personnel)."


Nurse Aide Education Program Survey Visits - 1st Six months 2020

N=73 assignments

<table>
<thead>
<tr>
<th>Program Type</th>
<th>Conducted Pre-COVID</th>
<th>Postponed to Fall</th>
<th>Conducted Remotely</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community College</td>
<td>2</td>
<td>4</td>
<td>7</td>
</tr>
<tr>
<td>High School</td>
<td>1</td>
<td>10</td>
<td>25</td>
</tr>
<tr>
<td>Nursing Home</td>
<td>1</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td>Other</td>
<td>1</td>
<td>9</td>
<td>3</td>
</tr>
<tr>
<td>Total</td>
<td>5</td>
<td>28</td>
<td>40</td>
</tr>
</tbody>
</table>
Status of Nurse Aide Education Program Applications (as of June 30, 2020)
10 approved in 2020; 4 incomplete applications pending

NNAAP Testing Summary

Minimal restrictions on NNAAP testing began on March 11, 2020. On March 16th, Pearson Vue decided to immediately suspend CNA testing for at least 30 days. During this time, NCSBN considered offering only the written portion by remote proctor. On April 6th, Board of Nursing staff had a conference call with Pearson Vue staff to explore the remote proctoring option for the written portion of the NNAAP exam. The skills portion continues to be unavailable due to stay-in-place order. Pearson Vue outlined the benefits and limitations to aid Virginia BON with decision whether or not to move forward. The primary benefit would be to provide evidence of competence to nursing facilities while graduates await complete testing. This option was put on hold pending further notice.

Pearson Vue staff informed the BON on April 16, 2020 that they will extend the suspension of CNA testing until May 16, 2020, or whenever conditions are deemed safe to re-open. Because of this, NCSBN Examinations staff, as directed by the NCSBN Board of Directors (BOD), sought to explore a computer-based solution that was secure, had appropriate levels of test validity and candidate ability estimate, and was cost effective for applicants. A number of solutions were proposed to the NCSBN BOD for their review. After consideration of the options presented, the BOD voted to suspend further work on this development at this time. This decision was based on fact that the options offered placed undue burdens on the boards of nursing and were not readily accessible or cost effective for applicants.

Pearson Vue again extended the suspension of nurse aide testing until June 16, 2020, or whenever conditions are deemed safe to re-open. During this time, Pearson Vue provided a map of NNAAP testing locations in Virginia. This map, along with any contract adjustment information, was reviewed to determine next steps regarding whether or not Virginia will move to computer-based testing for the written/oral portions of the NNAAP exam. It was decided that Pearson Vue would move forward with computer-based testing as soon as all processes can be put into place later in the fall. In the meantime, Pearson Vue was advised on May 20th to proceed with the reopening plan to resume NNAAP testing sites on July 13, 2020.

<table>
<thead>
<tr>
<th>Date of Email</th>
<th>Subject of Email</th>
</tr>
</thead>
<tbody>
<tr>
<td>March 12, 2020</td>
<td>Board of Nursing – COVID-19 Communication: VDH and CDC Guidelines, Consider Retaining Documents Showing How Your Program Met Clinical Requirements</td>
</tr>
<tr>
<td>March 18, 2020</td>
<td>COVID – 19 Update: Regulation waivers</td>
</tr>
<tr>
<td>April 8, 2020</td>
<td>COVID – 19 Update: student Communication advisement</td>
</tr>
<tr>
<td>June 29, 2020</td>
<td>Students Considered “Staff” in VDH’s Nursing Home Guidance for Phased Reopening</td>
</tr>
</tbody>
</table>

Additional information on each email noted above is available upon request.
TIME AND PLACE: The meeting of the Education Special Conference Committee was convened at 9:11 a.m. in Suite 201, Department of Health Professions, 9960 Mayland Drive, Second Floor, Board Room 4, Henrico, Virginia.

MEMBERS PRESENT: Ethlyn McQueen-Gibson, DNP, MSN, RN, BC, Chair
James L. Hermansen-Parker, MSN, RN, PCCN-K

STAFF PRESENT: Robin Hills, DNP, RN, WHNP, Deputy Executive Director
Jacquelyn Wilmoth, RN, MSN, Nursing Education Program Manager
Beth Yates, Nursing and Nurse Aide Education Coordinator

PUBLIC COMMENT: There was no public comment.

CONFERENCES SCHEDULED: The George Washington University, BSN Program, US28501500
There were no program representatives present.

The Committee considered the Program’s request for three continued faculty exceptions.

RECOMMENDATION: Mr. Hermansen-Parker moved to recommend that the Board approve the requests for continued faculty exceptions for S. Moreno, L. Jeans and D. Foggo-Adams. The motion was seconded and carried unanimously.

This recommendation will be presented to the full Board on July 21, 2020.

Liberty University, BSN Program, US28500000
There were no program representatives present.

The Committee considered the Program’s request for twenty-six faculty exceptions.


This recommendation will be presented to the full Board on July 21, 2020.
Southwest Virginia Community College, PN Program, US28103100
There were no program representatives present.

The Committee considered the Program’s request for one faculty exception.

RECOMMENDATION: Mr. Hermansen-Parker moved to recommend that the Board approve the request for the continued faculty exception for L. Trent. The motion was seconded and carried unanimously.

This recommendation will be presented to the full Board on July 21, 2020.

Eastern Mennonite University, BSN Program – US28509700
There were no program representatives present.

The Committee considered the Program’s request for two continued faculty exceptions.

RECOMMENDATION: Mr. Hermansen-Parker moved to recommend that the Board approve the request for the continued faculty exceptions for G. Hummel and N. Woodard. The motion was seconded and carried unanimously.

This recommendation will be presented to the full Board on July 21, 2020.

Stratford University – Falls Church, BSN Program, US28502100
There were no program representatives present.

The Committee considered the Program’s request for one continued faculty exception.

At 9:34 a.m., Mr. Hermansen-Parker moved that the Education Informal Conference Committee convene a closed meeting pursuant to §2.2-3711(A)(27) of the Code of Virginia for the purpose of deliberation to reach a decision in the matter of Stratford University-Falls Church registered nursing education program. Additionally, he moved that Dr. Hills, Ms. Wilmoth, and Ms. Yates attend the closed meeting because their presence in the closed meeting was deemed necessary and their presence will aid the Committee in its deliberations.

The motion was seconded and carried unanimously. The Committee reconvened in open session at 9:43 a.m.

Mr. Hermansen-Parker moved that the Education Informal Conference Committee of the Board of Nursing certify that it heard, discussed or considered only public business matters lawfully exempted from open meeting requirements under the Virginia Freedom of Information Act and
only such public business matters as were identified in the motion by which the closed meeting was convened.

RECOMMENDATION: Mr. Hermansen-Parker moved to recommend that the Board deny the request for continued faculty exception for V. Berrios. Ms. Berrios was granted an initial exception in 2019. To date, she has not met the requirements for continued exception for this academic year pursuant to 18VAC90-27-60(A)(4)(b) and 18VAC90-27-170(2)(c). The motion was seconded and carried unanimously.

This recommendation will be presented to the full Board on July 21, 2020.

Stratford University – Woodbridge, BSN Program, US28502000
There were no program representatives present.

The Committee considered the Program’s request for two continued faculty exceptions.

At 9:50 a.m. Mr. Hermansen-Parker moved that the Education Informal Conference Committee convene a closed meeting pursuant to §2.2-3711(A)(27) of the Code of Virginia for the purpose of deliberation to reach a decision in the matter of Stratford University- Woodbridge registered nursing education program. Additionally, he moved that, Dr. Hills, Ms. Wilmoth, and Ms. Yates attend the closed meeting because their presence in the closed meeting was deemed necessary and their presence will aid the Committee in its deliberations.

The motion was seconded and carried unanimously. The Committee reconvened in open session at 9:56 a.m.

Mr. Hermansen-Parker moved that the Education Informal Conference Committee of the Board of Nursing certify that it heard, discussed or considered only public business matters lawfully exempted from open meeting requirements under the Virginia Freedom of Information Act and only such public business matters as were identified in the motion by which the closed meeting was convened.

RECOMMENDATION: Mr. Hermansen-Parker moved to recommend that the Board deny the request for continued faculty exception for A. Moore. Ms. Moore was granted an initial exception in 2019. To date, she has not met the requirements for continued exception for this academic year pursuant to 18VAC90-27-60(A)(4)(b) and 18VAC90-27-170(2)(c).

RECOMMENDATION: Mr. Hermansen Parker moved to recommend that the Board approve the request for continued faculty exception for H. Edge. The motion was seconded and carried unanimously.

This recommendation will be presented to the full Board on July 21, 2020.
South University – Richmond, BSN Program, US28500700
There were no program representatives present.

The Committee considered the Program’s request for one faculty exception.

RECOMMENDATION: Mr. Hermansen-Parker moved to recommend that the Board approve the request for the continued faculty exception for L. Jaquez. The motion was seconded and carried unanimously.

This recommendation will be presented to the full Board on July 21, 2020.

The Committee recessed at 10:00 a.m.

The Committee reconvened at 10:20 a.m.

DISCUSSION ITEMS:
Ms. Wilmoth presented the following reports to the Committee:

2019 NCLEX Results Memo
2019 Closed Nursing Programs Memo
2019 Program Application Memo

A discussion ensued regarding the proposed changes to the 2020 Annual Nursing Education Program Survey.

RECOMMENDATION: Mr. Hermansen-Parker moved to recommend that the Board accept the changes to the 2020 Annual Nursing Education Program Survey. The motion was seconded and carried unanimously.

This recommendation will be presented to the full Board on July 21, 2020.

Ms. Wilmoth presented an interactive map of Virginia that will be posted on the Board’s website. The map can be used to identify the name, location, degree type, Board approval status, level of accreditation status, previous year NCLEX pass rates, physical and web address for each Board-approved registered and practical nursing education program in the Commonwealth.

NURSING UPDATES:
Ms. Wilmoth advised the Committee that six consent orders had been issued in 2020.

Ms. Wilmoth advised the Committee that the regulatory waivers for simulation (18VAC90-27-100(D)(1) & (2)) implemented March 19, 2020 were extended through December 31, 2020. In addition, waivers for 18VAC90-27-10 and 18VAC90-27-220 (B) & (C) were approved for 1) removing the “onsite” requirement from the definition of site and survey visit and 2) permitting flexibility in the scheduling of site and survey visits due during the state of emergency and extending 30 days after the state of emergency is rescinded.
Dr. Hills stated that a full report on nursing and nurse aide education programs will be provided to the Board as an information item at its meeting on July 21, 2020.

Ms. Douglas joined the meeting at 11:22 a.m. and advised that NCSBN is working with state governments to ensure testing center access that meets the demand for NCLEX testing.

Dr. Hills advised the Committee that testing centers for the NNAAP for nurse aide certification will reopen July 13, 2020 offering pencil and paper testing for the written portion and modified skills testing per COVID-19 guidelines. Policies and procedures are currently in development to move the written portion of the NNAAP from pencil and paper to computerized testing.

Meeting adjourned at 11:30 a.m.

Robin Hills, RN, DNP, WHNP
Deputy Executive Director
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| [18 VAC 90 - 19] Regulations Governing the Practice of Nursing | Unprofessional conduct - conversion therapy [Action 5430]  
NOIRA - At Governor’s Office [Stage 8826] |
| [18 VAC 90 - 19] Regulations Governing the Practice of Nursing | Registration of clinical nurse specialists [Action 5308]  
Proposed - Register Date: 1/20/20 [Stage 8765]  
Board to adopt final regulations on July 21 |
| [18 VAC 90 - 19] Regulations Governing the Practice of Nursing | Name tag requirement for foreign graduates [Action 5479]  
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| [16 VAC 90 - 26] Regulations for Nurse Aide Education Programs | Implementing Result of Periodic Review [Action 5157]  
Proposed - At Governor’s Office [Stage 8837] |
| [18 VAC 90 - 27] Regulations Governing Nursing Education Programs | Use of simulation [Action 5402]  
NOIRA - Register Date: 2/3/20 [Stage 8783]  
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| [16 VAC 90 - 30] Regulations Governing the Licensure of Nurse Practitioners | Unprofessional conduct/conversion therapy [Action 5441]  
NOIRA - At Governor’s Office [Stage 8838] |
Final - Register Date: 5/22/20 [Stage 8907] |
| [18 VAC 90 - 40] Regulations for Prescriptive Authority for Nurse Practitioners | Waiver for electronic prescribing [Action 5413]  
Emergency/NOIRA - Register Date: 1/5/20 [Stage 8798]  
Board to adopt proposed regulations on July 21 |
Agenda Item: Report of the 2020 General Assembly

Enclosed in your package:

A summary of legislation pertaining to nursing

A chart of regulatory and policy actions required post-GA

Staff note:

The summary is provided for information only; no action is required.

In the interest of Board member time, the legislation will not be discussed but Board members may contact Ms. Yeatts with any questions about bills or policy actions at Elaine.yeatts@dhp.virginia.gov
HB 42 Prenatal and postnatal depression, etc.; importance of screening patients.

*Chief patron:* Samirah

*Summary as passed:*

**Health care providers; screening of patients for prenatal and postpartum depression; training.** Directs the Board of Medicine to annually issue a communication to every practitioner licensed by the Board who provides primary, maternity, obstetrical, or gynecological health care services reiterating the standard of care pertaining to prenatal or postnatal depression or other depression and encouraging practitioners to screen every patient who is pregnant or who has been pregnant within the previous five years for prenatal or postnatal depression or other depression, as clinically appropriate. The bill requires the Board to include in such communication information about the factors that may increase susceptibility of certain patients to prenatal or postnatal depression or other depression, including racial and economic disparities, and to encourage providers to remain cognizant of the increased risk of depression for such patients.

HB 299 Fluoride varnish; possession and administration by an authorized agent.

*Chief patron:* Sickles

*Summary as passed House:*

**Medical assistants; administration of fluoride varnish.** Allows an authorized agent of a doctor of medicine, osteopathic medicine, or dentistry to possess and administer topical fluoride varnish pursuant to an oral or written order or a standing protocol issued by a doctor of medicine, osteopathic medicine, or dentistry. This bill is identical to SB 239.

HB 386 Conversion therapy; prohibited by certain health care providers.

*Chief patron:* Hope

*Summary as passed House:*
Department of Health Professions; conversion therapy prohibited. Prohibits any health care provider or person who performs counseling as part of his training for any profession licensed by a regulatory board of the Department of Health Professions from engaging in conversion therapy, as defined in the bill, with any person under 18 years of age and provides that such counseling constitutes unprofessional conduct and is grounds for disciplinary action. The bill provides that no state funds shall be expended for the purpose of conducting conversion therapy with a person under 18 years of age, referring a person under 18 years of age for conversion therapy, or extending health benefits coverage for conversion therapy with a person under 18 years of age. This bill is identical to SB 245.

HB 648 Prescription Monitoring Program; information disclosed to Emergency Department Care Coord. Program.

Chief patron: Hurst

Summary as passed:

Prescription Monitoring Program; information disclosed to the Emergency Department Care Coordination Program; redisclosure. Provides for the mutual exchange of information between the Prescription Monitoring Program and the Emergency Department Care Coordination Program and clarifies that nothing shall prohibit the redisclosure of confidential information from the Prescription Monitoring Program or any data or reports produced by the Prescription Monitoring Program disclosed to the Emergency Department Care Coordination Program to a prescriber in an electronic report generated by the Emergency Department Care Coordination Program so long as the electronic report complies with relevant federal law and regulations governing privacy of health information. This bill is identical to SB 575.

HB 869 Inhaled asthma medications; school nurse, etc., may administer to a student.

Chief patron: Bell

Summary as passed:

Professional use by practitioners; administration of albuterol inhalers or nebulized albuterol. Provides that, pursuant to an order or standing protocol issued by the prescriber within the course of his professional practice, any school nurse, school board employee, employee of a local governing body, employee of a local health department, employee of a school for students with disabilities, or employee of an accredited private school who is authorized by a prescriber and trained in the administration of albuterol inhalers or nebulized albuterol may possess or
administer an albuterol inhaler or nebulized albuterol to a student diagnosed with a condition requiring an albuterol inhaler or nebulized albuterol when the student is believed to be experiencing or about to experience an asthmatic crisis. The bill also provides that a school nurse, employee of a school board, employee of a local governing body, or employee of a local health department who is authorized by a prescriber and trained in the administration of albuterol inhalers or nebulized albuterol who provides, administers, or assists in the administration of an albuterol inhaler or nebulized albuterol for a student believed in good faith to be in need of such medication, or is the prescriber of such medication, is not liable for civil damages for ordinary negligence in acts or omissions resulting from the rendering of such treatment. This bill is identical to HB 1174.

HB 908 Naloxone; possession and administration by employee or person acting on behalf of a public place.

Chief patron: Hayes

Summary as passed House:

Naloxone; possession and administration; employee or person acting on behalf of a public place. Authorizes an employee or other person acting on behalf of a public place, as defined in the bill, who has completed a training program on the administration of naloxone or other opioid antagonist to possess and administer naloxone or other opioid antagonist, other than naloxone in an injectable formulation with a hypodermic needle or syringe, in accordance with protocols developed by the Board of Pharmacy in consultation with the Board of Medicine and the Department of Health. The bill also provides that a person who is not otherwise authorized to administer naloxone or other opioid antagonist used for overdose reversal may administer naloxone or other opioid antagonist used for overdose reversal to a person who is believed to be experiencing or about to experience a life-threatening opioid overdose. The bill provides immunity from civil liability for a person who, in good faith, administers naloxone or other opioid antagonist used for overdose reversal to a person who is believed to be experiencing or about to experience a life-threatening opioid overdose, unless such act or omission was the result of gross negligence or willful and wanton misconduct. This bill incorporates HB 650, HB 1465, and HB 1466.

HB 967 Military service members and veterans; expediting issuance of credentials to spouses, application.

Chief patron: Willett

Summary as passed House:
Professions and occupations; expediting the issuance of credentials to spouses of military service members. Provides for the expedited issuance of credentials to the spouses of military service members who are (i) ordered to federal active duty under Title 10 of the United States Code or (ii) veterans who have left active duty service within one year of the submission of an application to a board if the spouse accompanies the service member to the Commonwealth or an adjoining state or the District of Columbia. Under current law, the expedited review is provided more generally for active duty members of the military who are the subject of a military transfer to the Commonwealth. The bill also authorizes a regulatory board within the Department of Professional and Occupational Regulation or the Department of Health Professions or any other board in Title 54.1 (Professions and Occupations) to waive any requirement relating to experience if the board determines that the documentation provided by the applicant supports such waiver. This bill incorporates HB 930 and is identical to SB 981.

HB 1059 Certified registered nurse anesthetists; prescriptive authority.

Chief patron: Adams, D.M.

Summary as passed House:

Certified registered nurse anesthetists; prescriptive authority. Authorizes certified registered nurse anesthetists to prescribe Schedule II through Schedule VI controlled substances and devices to a patient requiring anesthesia as part of the periprocedural care of the patient, provided that such prescribing is in accordance with requirements for practice by certified registered nurse anesthetists and is done under the supervision of a doctor of medicine, osteopathy, podiatry, or dentistry. This bill is identical to SB 264.

HB 1084 Surgical assistants; definition, licensure.

Chief patron: Hayes

Summary as enacted with Governor's Recommendations:

Surgical assistants; licensure. Defines "surgical assistant" and "practice of surgical assisting" and directs the Board of Medicine to establish criteria for the licensure of surgical assistants. Currently, the Board may issue a registration as a surgical assistant to eligible individuals. The bill clarifies that requiring the licensure of surgical assistants shall not be construed as prohibiting any professional licensed, certified, or registered by a health regulatory board from acting within the scope of his practice. The bill also establishes the Advisory Board on Surgical Assisting to assist
the Board of Medicine regarding the establishment of qualifications for and regulation of licensed surgical assistants.

HB 1121 Massage therapists; qualifications, license.

Chief patron: Robinson

Summary as passed House:

Massage therapists; qualifications; license. Provides that an applicant who completed a massage therapy educational program in a foreign country may apply for licensure as a massage therapist upon submission of evidence that the applicant (i) is at least 18 years old, (ii) has successfully completed a massage therapy educational program that is comparable to a massage therapy educational program required for licensure by the Board, (iii) has passed a Board-approved English language proficiency examination, and (iv) has not committed any acts or omissions that would be grounds for disciplinary action or denial of licensure. The Board of Nursing shall issue a license to an applicant who completed his massage therapy educational program in a foreign country upon submission of evidence of completion of the English-language version of the Licensing Examination of the Federation of State Massage Therapy Boards or a comparable examination.

HB 1147 Epinephrine; every public place may make available for administration.

Chief patron: Keam

Summary as passed:

Epinephrine permitted in certain public places. Allows public places to make epinephrine available for administration. The bill allows employees of such public places who are authorized by a prescriber and trained in the administration of epinephrine to possess and administer epinephrine to a person present in such public place believed in good faith to be having an anaphylactic reaction. The bill also provides that an employee of such public place who is authorized by a prescriber and trained in the administration of epinephrine and who administers or assists in the administration of epinephrine to a person present in the public place believed in good faith to be having an anaphylactic reaction, or is the prescriber of the epinephrine, shall not be liable for any civil damages for ordinary negligence in acts or omissions resulting from the rendering of such treatment. The bill directs the Department of Health, in conjunction with the Department of Health Professions, to develop policies and guidelines for the recognition and treatment of anaphylaxis in public places. Such policies and guidelines shall be provided to the Commissioner of Health no later than July 1, 2021.
HB 1506 Pharmacists; initiating treatment with and dispensing and administering of controlled substances.

Chief patron: Sickles

Summary as passed:

Pharmacists; prescribing, dispensing, and administration of controlled substances. Allows a pharmacist to initiate treatment with and dispense and administer certain drugs and devices to persons 18 years of age or older in accordance with a statewide protocol developed by the Board of Pharmacy in collaboration with the Board of Medicine and the Department of Health. The bill directs the Board of Pharmacy to establish such protocols by November 1, 2020, to promulgate emergency regulations to implement the provisions of the bill, and to convene a work group to provide recommendations regarding the development of protocols for the initiating of treatment with and dispensing and administering of additional drugs and devices for persons 18 years of age and older. The bill also clarifies that an accident and sickness insurance policy that provides reimbursement for a service that may be legally performed by a licensed pharmacist shall provide reimbursement for the initiating of treatment with and dispensing and administration of controlled substances by a pharmacist when such initiating of treatment with or dispensing or administration is in accordance with regulations of the Board of Pharmacy.

HB 1562 Music therapy; definition of music therapist, licensure.

Chief patron: Head

Summary as passed House:

Music therapy; licensure. Requires the Board of Social Work to adopt regulations establishing a regulatory structure to license music therapists in the Commonwealth and establishes an advisory board to assist the Board in this process. Under the bill, no person shall engage in the practice of music therapy or hold himself out or otherwise represent himself as a music therapist unless he is licensed by the Board. This bill is identical to SB 633.

HB 1654 Schedule VI controlled substances and hypodermic syringes and needles; limited-use license.

Chief patron: Helmer

Summary as passed:
Schedule VI controlled substances; hypodermic syringes and needles; limited-use license. Allows the Board of Pharmacy to issue a limited-use license for the purpose of dispensing Schedule VI controlled substances, excluding the combination of misoprostol and methotrexate, and hypodermic syringes and needles for the administration of prescribed controlled substances to a doctor of medicine, osteopathic medicine, or podiatry, a nurse practitioner, or a physician assistant, provided that such limited-use licensee is practicing at a nonprofit facility. The bill requires such nonprofit facilities to obtain a limited-use permit from the Board and comply with regulations for such a permit. This bill directs the Board of Pharmacy to adopt emergency regulations to implement the provisions of the bill. This bill is identical to SB 1074.

HB 1683 Diagnostic medical sonography; definition, certification.

Chief patron: Hope

Summary as introduced:
Diagnostic medical sonography; certification. Defines the practice of "diagnostic medical sonography" as the use of specialized equipment to direct high-frequency sound waves into an area of the human body to generate an image. The bill provides that only a certified and registered sonographer may hold himself out as qualified to perform diagnostic medical sonography. The bill requires any person who fails to maintain current certification and registration or is subject to revocation or suspension of a certification and registration by a sonography certification organization to notify his employer and cease using ultrasound equipment or performing a diagnostic medical sonography or related procedure.

SB 264 Certified registered nurse anesthetists; prescriptive authority.

Chief patron: Bell

Summary as passed Senate:

Certified registered nurse anesthetists; prescriptive authority. Authorizes certified registered nurse anesthetists to prescribe Schedule II through Schedule VI controlled substances and devices to a patient requiring anesthesia, as part of the periprocedural care of the patient, provided that such prescribing is in accordance with requirements for practice by certified registered nurse anesthetists and is done under the supervision of a doctor of medicine, osteopathy, podiatry, or dentistry. This bill is identical to HB 1059.

SB 530 Epinephrine; possession and administration by a restaurant employee.
Chief patron: Edwards

Summary as passed:

Possession and administration of epinephrine; restaurant employee. Authorizes any employee of a licensed restaurant to possess and administer epinephrine on the premises of the restaurant at which the employee is employed, provided that such employee is authorized by a prescriber and trained in the administration of epinephrine. The bill also requires the Department of Health, in conjunction with the Department of Health Professions, to develop policies and guidelines for the recognition and treatment of anaphylaxis in restaurants.

SB 540 Health professionals; unprofessional conduct, reporting.

Chief patron: Vogel

Summary as passed Senate:

Health professionals; unprofessional conduct; reporting. Requires the chief executive officer and the chief of staff of every hospital or other health care institution in the Commonwealth, the director of every licensed home health or hospice organization, the director of every accredited home health organization exempt from licensure, the administrator of every licensed assisted living facility, and the administrator of every provider licensed by the Department of Behavioral Health and Developmental Services in the Commonwealth to report to the Department of Health Professions any information of which he may become aware in his professional capacity that indicates a reasonable belief that a health care provider is in need of treatment or has been admitted as a patient for treatment of substance abuse or psychiatric illness that may render the health professional a danger to himself, the public, or his patients, or that he determines, following review and any necessary investigation or consultation with the appropriate internal boards or committees authorized to impose disciplinary action on a health professional, indicates that there is a reasonable probability that such health professional may have engaged in unethical, fraudulent, or unprofessional conduct. Current law requires information to be reported if the information indicates, after reasonable investigation and consultation with the appropriate internal boards or committees authorized to impose disciplinary action on a health professional, a reasonable probability that such health professional may have engaged in unethical, fraudulent, or unprofessional conduct. This bill is identical to HB 471.

SB 713 Art therapists and art therapy associates; definitions, licensure.

Chief patron: McClellan
Summary as passed Senate:

Board of Counseling; licensure of art therapists and art therapist associates. Requires the Board of Counseling to adopt regulations establishing a regulatory structure to license art therapists and art therapist associates, as those terms are defined in the bill, in the Commonwealth and establishes an advisory board to assist the Board in this process. Under the bill, no person shall engage in the practice of art therapy or hold himself out or otherwise represent himself as an art therapist or art therapist associate unless he is licensed by the Board.

SB 757 Medical Excellence Zone Program; VDH to determine feasibility of establishment.

Chief patron: Favola

Summary as passed Senate:

Department of Health; Department of Health Professions Medical Excellence Zone Program; telemedicine; reciprocal agreements. Directs the Department of Health to determine the feasibility of establishing a Medical Excellence Zone Program to allow citizens of the Commonwealth living in rural underserved areas to receive medical treatment via telemedicine services from providers licensed or registered in a state that is contiguous with the Commonwealth and directs the Department of Health Professions to pursue reciprocal agreements with such states for licensure for certain primary care practitioners licensed by the Board of Medicine. The bill requires the Department of Health to set out the criteria that would be required for a locality or group of localities in the Commonwealth to be eligible for the designation as a medical excellence zone and report its findings to the Senate Committee on Education and Health and the House Committee on Health, Welfare and Institutions by November 1, 2020.

The bill states that reciprocal agreements with states that are contiguous with the Commonwealth for the licensure of doctors of medicine, doctors of osteopathic medicine, physician assistants, and nurse practitioners shall only require that a person hold a current, unrestricted license in the other jurisdiction and that no grounds exist for denial based on the acts of unprofessional conduct. The Department of Health Professions is required to report on its progress in establishing such agreements to the Senate Committee on Education and Health and the House Committee on Health, Welfare and Institutions by November 1, 2020. The bill requires the Board of Medicine to prioritize applications for licensure by endorsement as a doctor of medicine or osteopathic medicine, a physician assistant, or a nurse practitioner from such states through a streamlined process with a final determination regarding qualification to be made within 20 days of the receipt of a completed application. This bill is identical to HB 1701.
Department of Health Professions
Regulatory/Policy Actions – 2020 General Assembly

EXEMPT REGULATORY ACTIONS

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<td>Qualifications for massage therapists from foreign country</td>
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NON-REGULATORY ACTIONS

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<td>Letter from Committee Chair</td>
<td>Health Professions</td>
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<td>Letter from Committee Chair</td>
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<td>HB967/SB981</td>
<td>All boards</td>
<td>1) Collection of data on applicant who is the spouse of a veteran; 2) Decision on waiver of experience requirements</td>
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Future Policy Actions:

HB2793 (2018) - Boards of Medicine and Nursing to report data on the implementation of this act, including the number of nurse practitioners who have been authorized to practice without a practice agreement, the geographic and specialty areas in which nurse practitioners are practicing without a practice agreement, and any complaints or disciplinary actions taken against such nurse practitioners, along with any recommended modifications to the requirements of this act including any modifications to the clinical experience requirements for practicing without a practice agreement to the Chairmen of the House Committee on Health, Welfare and Institutions and the Senate Committee on Education and Health and the Chairman of the Joint Commission on Health Care by November 1, 2021.
Exempt action – required by passage of legislation in 2020

Included in agenda package:

Copy of HB1121 – Educational programs and qualifications of foreign-trained massage therapists.

Amendments to 18VAC90-50-40 (Regulations for the Licensure of Massage Therapists)

Staff Note:

Action is exempt from the provisions of the Administrative Process Act in accordance with § 2.2-4006 because it is conforming regulation to changes in the statute.

Board action:

Adoption of final regulation
CHAPTER 727

An Act to amend and reenact § 54.1-3029 of the Code of Virginia, relating to massage therapists; qualifications; license.

Approved April 6, 2020

[H 1121]

Be it enacted by the General Assembly of Virginia:
1. That § 54.1-3029 of the Code of Virginia is amended and reenacted as follows:

§ 54.1-3029. Qualifications for a licensed massage therapist.
A. In order to be licensed as a massage therapist, the applicant shall furnish evidence satisfactory to the Board that the applicant:
    1. Is at least 18 years old;
    2. Has successfully completed a minimum of 500 hours of training from a massage therapy educational program that required a minimum of 500 hours of training. The massage therapy educational program shall be certified or approved by the State Council of Higher Education for Virginia or an agency in another state, the District of Columbia, or a United States territory that approves educational programs, notwithstanding the provisions of § 23.1-226;
    3. Has passed the Licensing Examination of the Federation of State Massage Therapy Boards or an examination deemed acceptable to the Board of Nursing; and
    4. Has not committed any acts or omissions that would be grounds for disciplinary action or denial of licensure as set forth in this chapter.
B. The Board may issue a provisional license to an applicant prior to passing the Licensing Examination of the Federation of State Massage Therapy Boards for such time and in such manner as prescribed by the Board. No more than one provisional license shall be issued to any applicant.
C. The Board may license without examination any applicant who is licensed as a massage therapist in another state, the District of Columbia, a United States possession or territory, or another country, and, in the opinion of the Board, meets the requirements for licensed massage therapists in the Commonwealth.
D. An applicant who completed a massage therapy educational program in a foreign country may apply for licensure as a massage therapist upon submission of evidence, satisfactory to the Board, that the applicant:
    1. Is at least 18 years old;
    2. Has successfully completed a massage therapy educational program in a foreign country that is comparable to a massage therapy educational program required for licensure by the Board as demonstrated by submission of evidence of comparability and equivalency provided by an agency that evaluates credentials for persons who have studied outside the United States;
    3. Has passed a Board-approved English language proficiency examination; and
    4. Has not committed any acts or omissions that would be grounds for disciplinary action or denial of licensure as set forth in this chapter.

The Board shall issue a license to an applicant who meets the requirements in this subsection upon submission by the applicant of evidence satisfactory to the Board that the applicant has completed an English version of the Licensing Examination of the Federation of State Massage Therapy Boards or a comparable examination deemed acceptable to the Board.
Part II
Requirements for Licensure

18VAC90-50-40. Initial licensure.

A. An applicant seeking initial licensure shall submit a completed application and required fee and verification of meeting the requirements of § 54.1-3029 A of the Code of Virginia as follows:

1. Is at least 18 years old;

2. Has successfully completed a minimum of 500 hours of training from a massage therapy program that required a minimum of 500 hours of training. The massage therapy educational program shall be certified or approved by the State Council of Higher Education for Virginia or an agency in another state, the District of Columbia, or a United States territory that approves educational programs, notwithstanding the provisions of § 23.1-226 of the Code of Virginia;

3. Has passed the Licensing Examination of the Federation of State Massage Therapy Boards, or an exam deemed acceptable to the board;

4. Has not committed any acts or omissions that would be grounds for disciplinary action or denial of certification as set forth in § 54.1-3007 of the Code of Virginia and 18VAC90-50-90; and

5. Has completed a criminal history background check as required by § 54.1-3005.1 of the Code of Virginia.

B. An applicant shall attest that he has read and will comply with laws and regulations and the professional code of ethics relating to massage therapy.

C. An applicant who has been licensed or certified in another country and who provides certification of equivalency to the educational requirements in Virginia from a credentialing body acceptable to the board shall take and pass an examination as
required in subsection A of this section in order to become licensed. An applicant who completed a massage therapy educational program in a foreign country may apply for licensure as a massage therapist upon submission of evidence satisfactory to the board, that the applicant:

1. Is at least 18 years old;
2. Has successfully completed a massage therapy educational program in a foreign country that is comparable to a massage therapy educational program required for licensure by the board as demonstrated by submission of evidence of comparability and equivalency provided by an agency that evaluates credentials for persons who have studied outside the United States;
3. Has passed a board-approved English language proficiency examination; and
4. Has not committed any acts or omissions that would be grounds for disciplinary action or denial of licensure as set forth in this chapter.

The board shall issue a license to an applicant who meets the requirements in this subsection upon submission by the applicant of evidence satisfactory to the board that the applicant has completed an English version of the Licensing Examination of the Federation of State Massage Therapy Boards or a comparable examination deemed acceptable to the Board.

Statutory Authority


Historical Notes

Agenda Item: Regulatory Action – Proposed rules for use of Simulation in Nursing Education

Included in your package:

- Copy of NOIRA announcement on Townhall
- Copy of draft regulations posted with the NOIRA
- There were no public comments

Board Action:

Motion to adopt amendments by a fast-track action.
**Department of Health Professions**
**Board of Nursing**
**Chapter** Regulations Governing Nursing Education Programs [18 VAC 90 - 27]

**Action:** Use of simulation

### Notice of Intended Regulatory Action (NOIRA)

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**Status**

- **Public Hearing:** Will be held at the proposed stage
- **Exempt from APA:** No, this stage/action is subject to article 2 of the Administrative Process Act and the standard executive branch review process.
- **DPB Review:** Submitted on 10/9/2019
  - Policy Analyst: Jerry Gentile
  - Review Completed: 10/22/2019
  - DPB’s policy memo is “Governor’s Confidential Working Papers”
- **Secretary Review:** Secretary of Health and Human Resources Review Completed: 12/28/2019
- **Governor’s Review:** Review Completed: 1/7/2020
  - Result: Approved

- **Virginia Registrar:** Submitted on 1/7/2020
  - *The Virginia Register of Regulations*
  - Publication Date: 2/3/2020
  - Volume: 36 Issue: 12

- **Comment Period:** Ended 3/4/2020
  - 0 comments

**Contact Information**

<table>
<thead>
<tr>
<th>Name / Title</th>
<th>Jay P. Douglas, R.N. / Executive Director</th>
</tr>
</thead>
</table>
| Address      | 9960 Maryland Drive
              | Suite 300
              | Richmond, VA 23233 |

BOARD OF NURSING

Use of simulation

Part I
General Provisions


In addition to words and terms defined in § 54.1-3000 of the Code of Virginia, the following words and terms when used in this chapter shall have the following meanings unless the context clearly indicates otherwise:

"Accreditation" means having been accredited by an agency recognized by the U.S. Department of Education to include the Accreditation Commission for Education in Nursing, the Commission on Collegiate Nursing Education, the Commission for Nursing Education Accreditation, or a national nursing accrediting organization recognized by the board.

"Advisory committee" means a group of persons from a nursing education program and the health care community who meets regularly to advise the nursing education program on the quality of its graduates and the needs of the community.

"Approval" means the process by which the board or a governmental agency in another state or foreign country evaluates and grants official recognition to nursing education programs that meet established standards not inconsistent with Virginia law.

"Associate degree nursing program" means a nursing education program preparing for registered nurse licensure, offered by a Virginia college or other institution and designed to lead to an associate degree in nursing, provided that the institution is authorized to confer such degree by SCHEV.

"Baccalaureate degree nursing program" or "prelicensure graduate degree program" means a nursing education program preparing for registered nurse licensure, offered by a Virginia college or university and designed to lead to a baccalaureate or a graduate degree with a major in nursing, provided that the institution is authorized to confer such degree by SCHEV.
"Board" means the Board of Nursing.

"Clinical setting" means any location in which the clinical practice of nursing occurs as specified in an agreement between the cooperating agency and the school of nursing.

"Conditional approval" means a time-limited status that results when an approved nursing education program has failed to maintain requirements as set forth in this chapter.

"Cooperating agency" means an agency or institution that enters into a written agreement to provide clinical or observational experiences for a nursing education program.

"Diploma nursing program" means a nursing education program preparing for registered nurse licensure, offered by a hospital and designed to lead to a diploma in nursing, provided the hospital is licensed in this state.

"Direct client care" means nursing care provided to patients/clients in a clinical setting supervised by qualified faculty or a designated preceptor.

"Initial approval" means the status granted to a nursing education program that allows the admission of students.

"National certifying organization" means an organization that has as one of its purposes the certification of a specialty in nursing based on an examination attesting to the knowledge of the nurse for practice in the specialty area.

"NCLEX" means the National Council Licensure Examination.

"NCSBN" means the National Council of State Boards of Nursing.

"Nursing education program" means an entity offering a basic course of study preparing persons for licensure as registered nurses or as licensed practical nurses. A basic course of study shall include all courses required for the degree, diploma, or certificate.

"Nursing faculty" means registered nurses who teach the practice of nursing in nursing education programs.

"Practical nursing program" means a nursing education program preparing for practical nurse licensure that leads to a diploma or certificate in practical nursing, provided the school is authorized
by the Virginia Department of Education or by an accrediting agency recognized by the U.S. Department of Education.

"Preceptor" means a licensed nurse who is employed in the clinical setting, serves as a resource person and role model, and is present with the nursing student in that setting, providing clinical supervision.

"Program director" means a registered nurse who holds a current, unrestricted license in Virginia or a multistate licensure privilege and who has been designated by the controlling authority to administer the nursing education program.

"Recommendation" means a guide to actions that will assist an institution to improve and develop its nursing education program.

"Requirement" means a mandatory condition that a nursing education program must meet to be approved or maintain approval.

"SCHEV" means the State Council of Higher Education for Virginia.

"Simulation" means an evidence-based teaching methodology utilizing an activity in which students are immersed into a realistic clinical environment or situation and in which students are required to learn and use critical thinking and decision-making skills.

"Site visit" means a focused onsite review of the nursing program by board staff, usually completed within one day for the purpose of evaluating program components such as the physical location (skills lab, classrooms, learning resources) for obtaining initial program approval, in response to a complaint, compliance with NCLEX plan of correction, change of location, or verification of noncompliance with this chapter.

"Survey visit" means a comprehensive onsite review of the nursing program by board staff, usually completed within two days (depending on the number of programs or campuses being reviewed) for the purpose of obtaining and maintaining full program approval. The survey visit includes the program's completion of a self-evaluation report prior to the visit, as well as a board staff review of all program resources, including skills lab, classrooms, learning resources, and clinical facilities, and other components to ensure compliance with this chapter. Meetings with faculty, administration, students, and clinical facility staff will occur.
18VAC90-27-60. Faculty.

A. Qualifications for all faculty.

1. Every member of the nursing faculty, including the program director, shall (i) hold a current license or a multistate licensure privilege to practice nursing in Virginia as a registered nurse without any disciplinary action that currently restricts practice and (ii) have had at least two years of direct client care experience as a registered nurse prior to employment by the program. Persons providing instruction in topics other than nursing shall not be required to hold a license as a registered nurse.

2. Every member of a nursing faculty supervising the clinical practice of students including simulation in lieu of direct client care shall meet the licensure requirements of the jurisdiction in which that practice occurs. Faculty and shall provide evidence of education or experience in the specialty area in which they supervise student clinical experience for quality and safety. Prior to supervision of students, the faculty providing supervision shall have completed a clinical orientation to the site in which supervision is being provided. Faculty members who supervise clinical practice by simulation shall also demonstrate simulation knowledge and skills in that methodology and shall engage in ongoing professional development in the use of simulation.

3. The program director and each member of the nursing faculty shall maintain documentation of professional competence through such activities as nursing practice, continuing education programs, conferences, workshops, seminars, academic courses, research projects, and professional writing. Documentation of annual professional development shall be maintained in employee files for the director and each faculty member until the next survey visit and shall be available for board review.

4. For baccalaureate degree and prelicensure graduate degree programs:

   a. The program director shall hold a doctoral degree with a graduate degree in nursing.

   b. Every member of the nursing faculty shall hold a graduate degree; the majority of the faculty shall have a graduate degree in nursing. Faculty members with a graduate degree with a major other than in nursing shall have a baccalaureate degree with a major in nursing.
5. For associate degree and diploma programs:
   a. The program director shall hold a graduate degree with a major in nursing.
   b. The majority of the members of the nursing faculty shall hold a graduate degree, preferably with a major in nursing.
   c. All members of the nursing faculty shall hold a baccalaureate or graduate degree with a major in nursing.

6. For practical nursing programs:
   a. The program director shall hold a baccalaureate degree with a major in nursing.
   b. The majority of the members of the nursing faculty shall hold a baccalaureate degree, preferably with a major in nursing.

B. Number of faculty.
   1. The number of faculty shall be sufficient to prepare the students to achieve the objectives of the educational program and to ensure safety for clients to whom students provide care.
   2. When students are giving direct care to clients, the ratio of students to faculty shall not exceed 10 students to one faculty member, and the faculty shall be on site solely to supervise students.
   3. When preceptors are utilized for specified learning experiences in clinical settings, the faculty member may supervise up to 15 students.

C. Functions. The principal functions of the faculty shall be to:
   1. Develop, implement, and evaluate the philosophy and objectives of the nursing education program;
   2. Design, implement, teach, evaluate, and revise the curriculum. Faculty shall provide evidence of education and experience necessary to indicate that they are competent to teach a given course;
   3. Develop and evaluate student admission, progression, retention, and graduation policies within the framework of the controlling institution;
4. Participate in academic advisement and counseling of students in accordance with requirements of the Financial Educational Rights and Privacy Act (20 USC § 1232g);

5. Provide opportunities for and evidence of student and graduate evaluation of curriculum and teaching and program effectiveness; and

6. Document actions taken in faculty and committee meetings using a systematic plan of evaluation for total program review.

18VAC90-27-100. Curriculum for direct client care.

A. A nursing education program preparing a student for licensure as a registered nurse shall provide a minimum of 500 hours of direct client care supervised by qualified faculty. A nursing education program preparing a student for licensure as a practical nurse shall provide a minimum of 400 hours of direct client care supervised by qualified faculty. Direct client care hours shall include experiences and settings as set forth in 18VAC90-27-90 B 1.

B. Licensed practical nurses transitioning into prelicensure registered nursing programs may be awarded no more than 150 clinical hours of the 400 clinical hours received in a practical nursing program. In a practical nursing to registered nursing transitional program, the remainder of the clinical hours shall include registered nursing clinical experience across the life cycle in adult medical/surgical nursing, maternal/infant (obstetrics, gynecology, neonatal) nursing, mental health/psychiatric nursing, and pediatric nursing.

C. Any observational experiences shall be planned in cooperation with the agency involved to meet stated course objectives. Observational experiences shall not be accepted toward the 400 or 500 minimum clinical hours required. Observational objectives shall be available to students, the clinical unit, and the board.

D. Simulation for direct client clinical hours.

1. No more than 25% of direct client contact hours may be simulation. For prelicensure registered nursing programs, the total of simulated client care hours cannot exceed 125 hours (25% of the required 500 hours). For prelicensure practical nursing programs, the total of simulated client care hours cannot exceed 100 hours (25% of the required 400 hours).
2. No more than 50% of the total clinical hours for any course may be used as simulation. If courses are integrated simulation shall not be used for more than 50% of the total clinical hours in different clinical specialities and population groups across the life span.

3. Skills acquisition and task training alone, as in the traditional use of a skills laboratory, do not qualify as simulated client care and therefore do not meet the requirements for direct client care hours.

4. Clinical simulation must be led by faculty who meet the qualifications specified in 18VAC90-27-60. Faculty with education and expertise in simulation and in the applicable subject area must be present during the simulation experience.

5. Documentation of the following shall be available for all simulated experiences:

   a. Course description and objectives;

   b. Type of simulation and location of simulated experience;

   c. Number of simulated hours;

   d. Faculty qualifications; and

   e. Methods of pre-briefing and debriefing;

   f. Evaluation of simulated experience; and

   g. Method to communicate student performance to clinical faculty.
Agenda Item: Regulatory Action – Waiver of requirement for electronic prescribing

Staff note:

This action is to replace emergency regulations currently in effect with permanent regulations. A Notice of Intended Regulatory Action was published on 1/6/20; there was no comment on the NOIRA.

Included in agenda package:

Copy of Notice on Regulatory Townhall

Copy of proposed amendments (Note: there is one difference between the proposed regulation and the emergency regulation. In subsection A, there is an added reference to the exemptions from electronic prescribing in the Code.)

Board action:

To adopt the proposed amendments
(Board of Medicine will adopt amendments at its August meeting)
Emergency/NOIRA Stage

Action: Waiver for electronic prescribing

Documents

- Emergency Text 1/3/2020 8:23 am
- Agency Background Document 10/23/2019 (modified 10/30/2019)
- Attorney General Certification 11/13/2019
- Governor’s Review Memo 12/23/2019
- Registrar Transmittal 12/23/2019

Status:

- Public Hearing: Will be held at the proposed stage
- Emergency Authority: 2.2-4011
- Exempt from APA: No, this stage/action is subject to article 2 of the Administrative Process Act and the standard executive branch review process.
- Attorney General Review: Submitted to OAG: 10/23/2019
  - Review Completed: 11/13/2019
  - Result: Certified
- DPB Review: Submitted on 11/13/2019
  - Policy Analyst: Jeannine Rose
  - Review Completed: 11/26/2019
  - DPB’s policy memo is “Governor’s Confidential Working Papers”
- Secretary Review: Secretary of Health and Human Resources Review Completed: 12/23/2019
- Governor’s Review: Review Completed: 12/23/2019
  - Result: Approved
- Virginia Registrar: Submitted on 12/23/2019
  - The Virginia Register of Regulations
  - Publication Date: 1/6/2020
  - Volume: 36 Issue: 10
- Comment Period: Ended 2/5/2020
  - 0 comments
- Effective Date: 12/23/2019

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### Contact Information

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<tr>
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<td></td>
<td>Suite 300</td>
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<td>Richmond, VA 23233-1463</td>
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<td>Email Address</td>
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<td>(804)367-4520 FAX: (804)527-4455 TDD: ()-</td>
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This person is the primary contact for this chapter.
This stage was created by Elaine J. Yeatts on 10/23/2019

A. Beginning July 1, 2020, a prescription for a controlled substance that contains an opioid shall be issued as an electronic prescription consistent with § 54.1-3408.02 of the Code of Virginia, unless the prescription qualifies for an exemption as set forth in subsection B of that section.

B. Upon written request, the boards may grant a one-time waiver of the requirement of subsection A of this section, for a period not to exceed one year, due to demonstrated economic hardship, technological limitations that are not reasonably within the control of the prescriber, or other exceptional circumstances demonstrated by the prescriber.

Statutory Authority

§§ 54.1-2400 and 54.1-3408.02 of the Code of Virginia.

Historical Notes

Derived from Virginia Register Volume , Issue , eff. Month dd, yyyy.
Agenda Item: Adoption of final regulations for clinical nurse specialist registration

Enclosed is:

Copy of the Townhall notice and comments on proposed regulations

Copy of proposed regulations

Staff note:

This action is a response to a petition for rulemaking.

Board action:

To adopt the final amendments identical to the proposed regulations as presented in the agenda package (recommended action); or

To adopt final regulations with changes from proposed amendments
Action: Registration of clinical nurse specialists

Proposed Stage

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Status

Incorporation by Reference: No
Exempt from APA: No, this stage/action is subject to article 2 of the Administrative Process Act and the standard executive branch review process.

Attorney General Review: Submitted to OAG: 9/24/2019; Review Completed: 9/30/2019; Result: Certified

DPB Review: Submitted on 9/30/2019; Economist: Oscar Ozfian; Policy Analyst: Jeannine Rose; Review Completed: 11/14/2019; DPB’s policy memo is “Governor’s Confidential Working Papers”

Secretary Review: Secretary of Health and Human Resources Review Completed: 11/17/2019

Governor’s Review: Review Completed: 12/17/2019; Result: Approved

Virginia Registrar: Submitted on 12/18/2019; The Virginia Register of Regulations; Publication Date: 1/20/2020; Volume: 36 Issue: 11

Public Hearings: 01/28/2020 10:00 AM

Support for regulations change

Clinical nurse specialists are advanced practice registered nurses with advanced education and expertise in patient care. I fully support this proposed change to the regulations for registration of clinical nurse specialists.

Cindy Ward, DNP, RN-BC, CMSRN, ACNS-BC
President, Virginia Association of Clinical Nurse Specialists

Support CNS registration change

CNSs are APRNs with advanced education and expertise in patient care. I fully support the proposed change to the CNS nursing registration regulation in Virginia.

Support for proposed legislation HB-1057

As a clinical nurse specialist (CNS) and member of the VACNS, I fully support the amendment to PROPOSED LEGISLATION-HB 1057. This amendment would extend the current statute to include all CNSs who render any and all health care services, which aligns with the reimbursement practices of governmental payers. Current legislation recognizes mental health CNSs as providers by commercial payors in the commonwealth. If passed, all clinical nurse specialists would be able to bill for services that are entirely within their scope of practice as Clinical Nurse Specialist.
CNSs are recognized for Part B participation in Medicare, Title 18 and may independently bill for those services. They also are recognized as eligible for Medicare's Primary Care Incentive Program in the Patient Protection and Affordable Care Act.

**Commenter:** Catherine Smith, DNP, RN, CCNS, CCRN; VaCNS  
1/20/20 12:47 pm

**Support Regulation Revisions**

Clinical Nurse Specialists are APRNs with advanced training and education. I fully support the proposed revisions to the regulations.

**Commenter:** Kathleen Rea, DNP, RN, ACNS-BC, PCCN, CNL  
1/20/20 1:11 pm

**Support for APRN Registration**

**Commenter:** Phyllis Whitehead, PhD, CNS/APRN, ACHPN, RN-BC  
1/20/20 1:23 pm

**Support CNS Proposed Registration Changes**

Clinical Nurse Specialists are APRNs with advanced education and expertise in patient care and I fully support this proposed to the CNS registration regulations.

**Commenter:** Robin A McAlpin  
1/20/20 3:05 pm

**Registration of Clinical Nurse Specialist**

CNSs are APRNs with advanced education and expertise in patient care. I fully support this proposed change to the CNS nursing registration regulation to allow CNSs to provide the appropriate level of care in Virginia.

**Commenter:** Magdalys Ortiz MSN, RN AGCNS-BC  
1/20/20 4:18 pm

**In support of changes**

I support this proposed change to the regulations for registration of clinical nurse specialists.

**Commenter:** F. Key Butler, MSN RN AGCNS-BC CCRN ACM-RN, RN the Know, LLC  
1/20/20 5:01 pm

https://townhall.virginia.gov/L/ViewComments.cfm?stageid=8765
Proposed Change

Clinical Nurse Specialists (CNS) are Advanced Practice Registered Nurses (APRN) with advanced education and expertise in patient care and I fully support this proposed change to the CNS nursing registration regulation to provide this care in Virginia.

Commenter: Lily Zheng, RN, BSN, Sentara Healthcare 1/20/20 6:05 pm

Support for Legislation HB-1057

CNSs are APRNs with advanced education and expertise in patient care. They have the ability to improve patient outcomes on a systemic level. Our CNS is an invaluable member of our team and vital to delivering high quality nursing care. I fully support this proposed change to the CNS nursing registration regulation to provide this care in Virginia.

Commenter: Alysha Brown, BSN, RN, CCRN Sentara Healthcare 1/20/20 7:19 pm

Support for change

I support HB1057 to expand billing practices for all CNS’s.

Commenter: Shelby Wall MSN, NP-C 1/20/20 8:16 pm

Support for change

CNSs are APRNs with advanced education and expertise in patient care and I fully support this proposed change to the CNS nursing registration regulation to provide this care in Virginia. Without their valuable contributions, many changes in healthcare would not exist and patient care would suffer.

Commenter: Beth Quatrara 1/21/20 9:23 pm

Support for change

Clinical nurse specialists (CNSs) are advanced practice nurses with a Master’s degree or Doctoral degree. CNSs provide essential care to patients across the Commonwealth; emphasizing quality and cost effective care to produce optimal outcomes. I fully support the proposed change to the CNS registration regulation.

Commenter: Holly Tenaglia, BSN, RN, OCN 1/22/20 9:13 am

Support for HB 1057
CNSs are APRNs with advanced education and expertise in patient care and I fully support this proposed change to the CNS nursing registration regulation to provide this care in Virginia.

Commenter: Lisa Abrams, APN - MH ( BC) VACNS

Registration of Clinical Nurse Specialist

I support the proposed measure to register the Clinical Nurse Specialist in the state of Va. Clinical Nurse Specialist are Master Prepared Nurses and are considered APRN in most states. By allowing them to be registered it will assist in the quest to allow them to practice to the full practice authority and give more people access to quality care. I recently moved to the state and the current regulations have handicapped me in the way I can practice after moving from a more progressive state. My hope is that Virginia will eventually allow CNS will be allowed to practice to the full practice authority.

Commenter: Terri Crowder

Support for CNS registration regulation change

As a CNS in Virginia, I fully support the proposed change to the Clinical Nurse Specialist nursing registration regulation.
Project 6073 - Proposed

BOARD OF NURSING

Registration of clinical nurse specialists


A. Fees required by the board are:

1. Application for licensure by examination - RN $190
2. Application for licensure by endorsement - RN $190
3. Application for licensure by examination - LPN $170
4. Application for licensure by endorsement - LPN $170
5. Reapplication for licensure by examination $50
6. Biennial licensure renewal - RN $140
7. Biennial inactive licensure renewal - RN $70
8. Biennial licensure renewal - LPN $120
9. Biennial inactive licensure renewal - LPN $60
10. Late renewal - RN $50
11. Late renewal - RN inactive $25
12. Late renewal - LPN $40
13. Late renewal - LPN inactive $20
14. Reinstatement of lapsed license - RN $225
15. Reinstatement of lapsed license - LPN $200
16. Reinstatement of suspended or revoked license or registration $300
17. Duplicate license $15
18. Replacement wall certificate $25
19. Verification of license $35
20. Transcript of all or part of applicant or licensee records $35
21. Handling fee for returned check or dishonored credit card or debit card $50
22. Application for CNS registration $130
23. Biennial renewal of CNS registration $80
24. Reinstatement of lapsed CNS registration $125
25. Verification of CNS registration to another jurisdiction $35
26. Late renewal of CNS registration $35

B. For renewal of licensure or registration from July 1, 2017, through June 30, 2019, the following fees shall be in effect:

1. Biennial licensure renewal - RN $105
2. Biennial inactive licensure renewal - RN $52
3. Biennial licensure renewal - LPN $90
4. Biennial inactive licensure renewal - LPN $45
5. Biennial renewal of CNS registration $60

Part IV
Clinical Nurse Specialists


A. Initial registration. An applicant for initial registration as a clinical nurse specialist shall:

1. Be currently licensed as a registered nurse in Virginia or hold a current multistate licensure privilege as a registered nurse;

2. Submit evidence of current national clinical nurse specialist certification including core certification or a certification that has been retired as required by § 54.1-3018.1 of the Code of Virginia or have an exception available from March 1, 1990, to July 1, 1990; and

3. Submit the required application and fee.

B. Renewal of registration.

1. Registration as a clinical nurse specialist shall be renewed biennially at the same time the registered nurse license is renewed. If registered as a clinical nurse specialist with a multistate licensure privilege to practice in Virginia as a registered nurse, a licensee born in an even-numbered year shall renew his license by the last day of the birth month in even-numbered years and a licensee born in an odd-numbered year shall renew his license by the last day of the birth month in odd-numbered years.

2. The clinical nurse specialist shall complete the renewal form and submit it with the required fee. An attestation of current national certification as a clinical nurse specialist including core
certification or a certification that has been retired, is required unless registered in accordance with an exception.

3. Registration as a clinical nurse specialist shall lapse if the registered nurse license is not renewed or the multistate licensure privilege is lapsed or registration as a clinical nurse specialist is not renewed and may be reinstated within one renewal period upon:

   a. Reinstatement of RN license or multistate licensure privilege, if lapsed;
   
   b. Payment of reinstatement and current renewal fees and late renewal fees; and
   
   c. Submission of evidence of continued national certification as a clinical nurse specialist, including core certification or a certification that has been retired, unless registered in accordance with an exception.

C. Reinstatement of registration.

1. A clinical nurse specialist whose registration has lapsed for more than one renewal period may be reinstated by submission of:

   a. A reinstatement application and reinstatement fee;
   
   b. Evidence of a current RN license or multistate privilege; and
   
   c. Evidence of current national certification as a clinical nurse specialist, including core certification or a certification that has been retired, unless registered in accordance with an exception.

2. A clinical nurse specialist whose registration has been suspended or revoked by the board may apply for reinstatement by:

   a. Filing a reinstatement application;
   
   b. Fulfilling requirements specified in subdivision 1 c of this subsection; and
   
   c. Paying the fee for reinstatement after suspension or revocation.

The board may request additional evidence that the clinical nurse specialist is prepared to resume practice in a competent manner. A clinical nurse specialist whose registration has been revoked may not apply for reinstatement sooner than three years from entry of the order of revocation.