



RN UPDATE

A Quarterly Publication of the Board of Nurse Examiners for the State of Texas



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Registered Nurses Report Concern Over Insurance Telemarketing

Within the last several weeks, concerned nurses have been calling our office asking whether the Board of Nurse Examiners is involved in the telemarketing of insurance benefits related to their professional license. The answer is "NO." The Board is not affiliated with, and does not endorse, any company offering insurance benefits. Any company or organization who attempts to represent that the Board of Nursing offers or endorses such insurance benefits would be engaging in false representations.

It has specifically been reported over the last several weeks that telemarketers are phoning licensed registered nurses identifying themselves as agents for American Income Life Insurance Company and offering "free" supplemental insurance benefits. Apparently, the nurses are informed that they are entitled to the free benefits by virtue of holding a nursing license in the State of Texas. In one instance, the caller stated that all nurses were "required" to have the insurance. The telemarketers have stated that if the nurse wishes to obtain the free insurance, a company representative must deliver the insurance card in person at the RN's home, rather than by mail or delivery while at work.

Additionally, many of the nurses have asked the telemarketers how they obtained their phone numbers. The nurses are apparently told the phone numbers have been provided to the caller by the Board of Nurse Examiners or from the RN's license renewal form. It is likely the callers have obtained the phone numbers from a source other than the Board of Nurse Examiners. The Board does not maintain phone numbers for registered nurses in its data banks, nor are phone numbers requested during license renewal. The name and reported mailing addresses of RNs in the State of Texas are public information and are available to the public or private requestors pursuant to the Public Information Act. The law does not grant the Board of Nurse Examiners the right to ask the requestor why they are requesting information or how they will use it once it is obtained. However, Social Security Numbers are not subject to disclosure and must be maintained as confidential by our agency.

The Board of Nurse Examiners does not have jurisdiction over the telemarketers, American Income Life Insurance Company, or other insurance companies. This is true even if the insurance is being offered to registered nurses. However, the Board has reported the nurse complaints it has received to the Texas Department of Insurance and the Texas Office of the Attorney General.

Ed Orell, a representative of American Income Life Insurance Company, responded to inquiries made by Board staff shortly after the Board began receiving calls from concerned nurses. Mr. Orell's e-mail stated that American Income Life Insurance

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A Word from the Executive Director



Kathy Thomas, MN, RN

Multistate Regulation

The State of Texas passed the Nurse Licensure Compact (Compact) into law in 1999. The Compact serves as an agreement among states to mutually recognize each others' licensees. It allows a RN license from one state to serve as a privilege to practice nursing in other states that have passed the Compact. This eliminates the need to obtain multiple licenses in the participating states. Practice across state lines, along borders, increasing demand for traveling nurses, and advances in telehealth services have made such a model both necessary and appealing.

The legislation was implemented in January 2000 and Texas now has two years of experience with the Compact. This agreement between states has passed in fifteen states: Arizona, Arkansas, Delaware, Idaho, Iowa, Maine, Maryland, Mississippi, Nebraska, North Carolina, North Dakota, South Dakota, Texas, Utah, and Wisconsin. Thus far, the 13 states that have implemented (as of July 1, 2001) are: Arkansas, Delaware, Idaho, Iowa, Maine, Maryland, Mississippi, Nebraska, North Carolina, South Dakota, Texas, Utah, and Wisconsin. Compact bills are pending in Georgia, Illinois, New Jersey, New Hampshire and Colorado.

When this model was initially contemplated, there were several concerns raised. How would the Compact affect Boards financially? How could Boards effectively discipline nurses with a multistate privilege? How would Boards communicate and work together to resolve disciplinary matters and make licensure decisions? Although the experience thus far is fairly limited, in a recent survey of participating states, Boards expressed agreement that the benefits of the Compact far outweigh the challenges. The unprecedented communication and cooperation among the states has been an enriching experience. We are learning from each other and beginning to see that in our role of public protection we have to broaden our thinking by recognizing that a party state's public includes the citizens of other party states. The disciplinary cases that we have shared have been resolved in a timely manner. It is too soon to appreciate the ultimate financial impact. Texas has not had to increase fees for purposes of the Compact, but we anticipate that eventually, as more states join and fewer nurses need to hold multiple licenses, there will be a small impact on fees.

The National Council of State Boards of Nursing is conducting a study on the outcomes and effectiveness of the Nurse Licensure Compact. I will report these findings here when they are available. For more information on the Nurse Licensure Compact, access our web site at www.bne.state.tx.us or the NCSBN website at <http://www.ncsbn.org> (click on Nursing Regulation and follow prompts.)



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Rule §221.4(b) Revised

At the October 2001 meeting, the Board of Nurse Examiners proposed a revision to Rule §221.4(b). The revision provides clarification that advanced practice nurses applying for full authorization to practice must become nationally certified in their advanced role and specialty within two years of their program completion date. Although this information is contained in a later subsection, the Board determined that it should also be included in §221.4(b). There has been no change in the requirements for authorization to practice or in the procedure for processing applications based on the additional language.

New Continuing Education Rule for Hepatitis C

Senate Bill 338, Section 2, passed by the 77th Legislative Session, amended Subchapter G, Chapter 301, Occupations Code by adding Section 301.304. This amendment requires all Registered Nurses renewing a license after 6/1/2002 in the state of Texas to complete a minimum of 2 hours of continuing education related to Hepatitis C in the biennium between 6/1/2002 and 6/1/2004. This is a one-time requirement. House Bill 2650 is the companion bill implementing the same requirement.

To implement this new requirement, the Board has proposed an amendment to Rule §216.3. The new section of the rule, §216.3(4), requires every license holder who renews a license to practice as a Registered Nurse in the State of Texas, for the biennium beginning 6/1/2002 and ending 6/1/2004, to complete at least two (2) hours of continuing education relating to hepatitis C. For both RNs and RNs with advanced practice (APN) recognition from the Board, this requirement may be met through completion of either Type I or Type II approved continuing education activities. The two hour requirement would be considered part of the minimum 20 hours of continuing education required of all RNs each biennium. If implemented, the complete text of the new sections in the Nursing Practice Act and Board Rules may be viewed on the website at www.bne.state.tx.us.

RNFA Rules Proposed

At the October 2001 meeting, the Board voted to propose an amendment to Rule 217 by adding Section 217.18 relating to registered nurse first assistants (RNFAs). HB 803, passed in the 77th Legislative Session, amends the Nursing Practice Act by adding Section 301.1525. The section defines a “nurse first assistant” as a registered nurse who is certified in perioperative nursing by an organization recognized by the Board and has completed a nurse first assistant program approved by an organization recognized by the Board. The new section grants the Board authority to develop rules relating to RNFAs.

The proposed section seeks to establish a regulatory definition of registered nurse first assistant consistent with Section 301.1525. As such it defines “nurse first assistant” as a registered nurse who is certified in perioperative nursing by an organization recognized by the Board and has completed a nurse first assistant program approved by an organization recognized by the Board. The language proposed in the rule is exactly as it appears in Section 301.1525 of the Nursing Practice Act. All RNFAs must hold national certification as a perioperative nurse (CNOR) from the Certification Board Perioperative Nursing (CBPN). Currently, the CBPN is the only organization directly involved in reviewing standards for RNFA education programs. CBPN reviews and accepts programs appropriate for preparing RNs for the first assisting role and for sitting for the CRNFA certification exam. CBPN has written program acceptance criteria and requires programs to demonstrate compliance through a written application process for initial acceptance. Prior to adoption of the proposed section, CBPN is expected to adopt a process for verifying ongoing compliance with acceptance criteria. Therefore, it is anticipated that those RNFAs who have completed a program accepted by CBPN have met the required completion of a “nurse first assistant program approved by an organization recognized by the Board.” The proposed section also recognizes that current certification by the Certification Board Perioperative Nursing as a registered nurse first assistant (CRNFA) may be accepted in lieu of completing a first assistant program approved by an organization recognized by the Board. Additionally, the proposed section creates a registry for those RNFAs who meet the criteria, reiterates the minimum standards required for all registered nurses practicing in the first assistant role, and recognizes AORN standards for first assisting.

Meet your new Board Members

Deborah H. Bell, CLU, ChFC

Deborah Bell works as a Financial Planner in Abilene. She was appointed to the Board of Nurse Examiners on July 6, 2001 by Governor Rick Perry. Ms. Bell brings a broad range of board experience to the BNE. Her experience working with state boards extends back to her first appointment to the Brazos River Authority in 1987 by Governor Bill Clements. She was reappointed to the Brazos Board again by Governor George Bush. Deborah served as Vice-President of the Brazos Board during her second term on the Board. Other boards and organizations she has provided leadership to include: the Abilene Chamber of Commerce, the Abilene Community Theatre Board and the Abilene Society of Financial Service Professionals. Ms. Bell received a Bachelor of Science in Business Administration from the University of Arkansas. She represents consumers for the BNE.



What was it that motivated you to pursue this position with the Board of Nurse Examiners?

I felt I could make a difference in the nursing profession and some of the issues that are facing the Board.

What do you think that you bring to the Board?

I have 12 years of experience working with a large board and my experience on the Brazos River Authority taught me to be focused on the issues and bring resolution to the problems facing the Board.

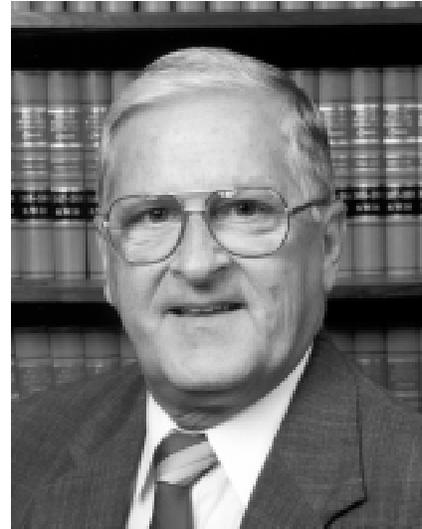
Is there anything specific you'd like to say to the readers of *RN Update*?

My door will always be open and I welcome any comments or concerns you may have.

Meet your new Board Members

Lawrence J. Canfield, MS Ed., CRNA

Lawrence Canfield works as a Staff CRNA in Temple. He was appointed to the Board of Nurse Examiners on July 6, 2001 by Governor Rick Perry. Lawrence received a Master of Science in Education from the University of Southern California. He received a Bachelor of Science in Nursing from the Medical College of Georgia. Mr. Canfield trained as a nurse anesthetist at the U.S. Army Anesthesiology for Nursing Training Program at Fitzsimons Army Regional Medical Center in Denver, Colorado. Lawrence served in the military for 23 years in the U.S. Navy and U.S. Army, retiring as a Major. During his military career, he received numerous decorations including the Bronze Star. He was appointed to the Statewide Health Coordinating Council (SHCC) by Governor Bill Clements in 1989 and served on the SHCC for two years. Lawrence takes a participatory role in professional organizations such as the American Association of Nurse Anesthetists, Texas Nurses Association and the Texas Association of Nurse Anesthetists. Mr. Canfield represents Nursing Practice during his term on the BNE.



Is there a single event that inspired you to pursue the position with the Board or the profession of nursing? If so, what was it?

As an operating room technician in the U.S. Navy assigned to Guantanamo Bay, Cuba in 1962, I worked closely with the anesthesiologist and anesthesiologist assigned there. It was during this time that I decided to become a CRNA, knowing that I had to complete nursing school first. I had my goal, so I plotted out the steps to attain it. Once I completed those steps and attained the goal, I set more and more steps and goals. When I retired from the military, I decided it was time to give something back and help the profession of nursing and my specialty of anesthesia. I did this by becoming active in organizations. I am proud to have been appointed to the Board of Nurse Examiners for the State of Texas to represent and protect the citizens of this state.

What do you see as the most important issues affecting the regulation of professional nursing?

One of the major issues affecting the regulation of professional nursing is to continue to update, inform and enforce the Nursing Practice Act and to keep the public informed as in the past. The Legislature needs to be constantly updated by the profession about the profession and the changing trends.

In your experience, how has professional nursing changed over the years?

The advances in medicine overall were inconceivable when I entered nursing in 1967. The technological and scientific advances have propelled nursing into a new computerized era. With all these advances, we must not let ourselves forget the reason for our being there...the patient!

How do you see the role of the RN changing as the nursing shortage becomes more of a problem?

The nursing shortage is here and will only get worse in the next five years. Hopefully, nursing will not delegate its way out of the nursing profession. With this shortage, salaries should increase for both nurses and nursing educators in an effort to recruit and maintain individuals in the profession of nursing. Legislators must also help by providing funding and incentive programs to recruit and retain candidates into nursing.

Is there anything specific you'd like to say to the readers of *RN Update*?

Get active in your organization to better help your profession.

Use of Advanced Practice Titles

by Jolene Zych, MS, RNC, WHCNP

In the January 1999 *RN Update* article entitled “RN Identification is Essential in Today’s Health Care Environment,” board staff explored the issue of utilization of credentials for registered nurses. The article did not, however, explore the issue of credentials as it relates to advanced practice nurses. Section 301.351 of the Nursing Practice Act (*Texas Occupations Code*) requires that RNs wear insignia that identifies them as registered nurses. Section 221.11 of the *Rules and Regulations relating to Professional Nurse Education, Licensure and Practice* requires that advanced practice nurses wear clear identification indicating that they are registered nurses with the appropriate advanced practice titles as authorized by the board. Advanced practice nurses are prohibited, however, from using APN as a title [Rule 221.2(b)]. Therefore, a nurse-midwife must wear identification indicating both the RN and nurse-midwife titles. Likewise, a family nurse practitioner must identify him/herself using both the RN and family nurse practitioner (FNP) titles. Although the language in both the statute and the rule requires wearing identification, the requirement is much broader than simply wearing a name tag.

RNs, including advanced practice nurses, have a responsibility to appropriately identify themselves to the public. This includes not only wearing an appropriate name tag, but also includes appropriate identification in written communication. When looking at a patient’s medical record, it is impossible for anyone to determine whether a person is a registered nurse, an advanced practice nurse, physician, etc., without the appropriate credentials next to the person’s name. Although advanced practice nurses understand that they must be registered nurses in order to be authorized as advanced practice nurses, the public, including some other health care providers, does not understand this concept. Board staff frequently receive calls asking for clarification of the differences between LVNs, RNs, and advanced practice nurses. It is imperative that all RNs, including advanced practice nurses, appropriately identify themselves as such in all forms of communication, particularly in an environment where services are provided by many different types of providers.

The CRNA credential, however, is unique among the APN designations because it indicates that the person is both a registered nurse and a nurse anesthetist. No other APN designation or certification credential meets this requirement. Therefore, in the case of nurse anesthetists who hold national certification as such (i.e., are authorized by the Council on Certification/Recertification to utilize the CRNA credential), board staff have acknowledged the CRNA credential as meeting the minimum requirements of the Nursing Practice Act and Rule 221.11. Those nurse anesthetists who do not hold national certification, however, must still identify themselves utilizing both the RN and nurse anesthetist credentials.

It is also important to remember that the ONLY license held by an advanced practice nurse in the State of Texas is the RN license. The Board of Nurse Examiners does not issue a separate “license” for advanced practice nurses in the State of Texas. An advanced practice nurse is authorized to expand his/her scope of practice beyond that of the RN license in a specific advanced practice role and specialty; therefore, he/she must still hold a license to practice as a registered nurse and identify him/herself as such to comply with the requirement specified in the Nursing Practice Act and in Rule 221 when practicing as an advanced practice nurse in Texas.

The Board of Nurse Examiners does not have any specific requirements relating to education or certification credentials. The individual nurse may determine whether he/she will include these additional earned credentials on name tags or with signatures. Although certifying bodies may bestow a specific certification credential (such as CNM or NP-C) and have jurisdiction over who may utilize that credential, state law prevails regarding the required use of certain credentials (such as RN.)

RN & Nurse Manager Responsibilities Related to Staffing Issues

by Carol Marshall, MSN, RN

The Board receives a large volume of phone calls from RNs who are concerned about their duty to the patients/clients when situations such as understaffing, floating, overtime, or patient abandonment arise. The topic of "Abandonment" was addressed in the October 2000 *RN Update*, and "Consecutive Hours or Shifts a Nurse Can Work" was addressed in the January 2001 *RN Update*. Past issues of the *RN Update* may be located on our web site at www.bne.state.tx.us under the Files & Downloads area.

To further understand the responsibilities of the Registered Professional Nurse (RN), a review of Rule §217.11 Standards of Professional Nursing Practice is essential. This rule establishes the minimum acceptable level of professional nursing practice. The Nursing Practice Act (NPA) and Board rules apply to all RNs, regardless of practice setting or job title (staff nurse, charge nurse, Director of Nursing.) **Every** RN is obligated to maintain a safe environment for clients and others [§217.11(5)]. As such, the requirements set forth in Rule §217.11 should serve as the foundation for the decision making process that each RN uses to determine the appropriate nursing action in any given situation.

Rule §217.11(9) relates to RNs who supervise other licensed personnel (RNs, LVNs.) This standard requires supervisory RNs to "make assignments to others that take into consideration client safety and which are commensurate with the educational preparation, experience, knowledge, and physical and emotional ability of the persons to whom the assignments are made." Nurse managers who violate §217.11(9) and/or any other part of the Nursing Practice Act (NPA) and Board Rules are subject to being reported to the BNE, as well as to possible disciplinary action by the BNE on their RN license.

Likewise, staff RNs who accept assignments for which they lack the competency or which are beyond their physical or emotional abilities [Rule §217.11(12)] are also subject to being reported for violating the NPA and Board Rules. In relation to accepting of assignments, a frequent question of staff RN's is: "When does the RN's "duty" to a patient(s) begin?" This is not determined by any single action, such as "clocking in" or taking report. As with most clinical situations, the RN must use his/her "professional judgement." Should the RN be reported to the Board, any disciplinary action on the RNs license is decided on a case-by-case basis, with consideration for factors contributing to the situation and the RNs decisions/actions, as well as application of the NPA and Board Rules. NPA, Section §301.352 protects the RN from retaliatory actions for refusing an assignment provided the RN communicates the reason for refusing an assigned task to the supervisor making the assignment. However, the RN must be aware that there may be employment consequences to declining an assignment. The BNE has no jurisdiction over employee/employer matters, but the RN does have civil recourse in matters where the RN's decision to refuse an assignment was made in "good faith" based on the NPA and Board Rules (NPA, Sec. 301.352).

In situations where RNs face issues such as floating, working double/extra shifts, taking on charge duties, or working short-staffed, clear communication between staff and supervisors [§217.11(21)] is essential to manage patient care and decrease conflict in the work setting. A RN may also seek opportunities in his/her practice setting to become involved with committees or other facility-based efforts in developing staffing strategies that comply with the RN scope of practice and that balance the needs of the facility with the requirements for safe patient care.

Both staff and supervisory RNs working in settings that utilize 10 or more RNs may also consider invoking "Safe Harbor" ("Request for Peer Review") when the RN believes conditions described in the NPA, Sec. 302.352 exist. Information on safe harbor peer review may be found in the NPA, Sec. 303.005(c), and Rule §217.17(f). Following the procedure described in the rules and completing the form for invoking "Safe Harbor" at the time of the incident protects the RNs license for a specified period of time, even when the RN chooses to accept the assignment in the best interest of patient/client care.

No facility policy or physician order may relieve the RN of his/her responsibility to maintain patient safety. By knowing the laws that govern RN practice, every RN can serve as an effective member of the health care team.



EDUCATION REPORT

By Sandra Owen, MN, RN



October 2001 Board Action

Approved placing a Distance Education Initiative (DEI) in dormant status for:

The University of Texas Health Science Center at San Antonio in cooperation with Texas A & M University-Kingsville System Center DEI at Palo Alto

Approved faculty petitions for:

Baptist Health System School of Nursing
Midland College

Approved a request for an extension of an Interim Director for:

College of the Mainland

Approved a request for an extension of a faculty waiver for:

Blinn College

Based on a site visit report & review of a proposal, approved initial accreditation for:

Texas A & M University at Texarkana Post Licensure RN to BSN Program

Based on a review of a survey visit report, changed the accreditation status from Initial to full with commendation, recommendations, and requirement for:

Prairie View A & M University College of Nursing Family Nurse Practitioner Program

Texas RN Candidates Can Participate in NCLEX Beta Test

National Council of State Boards of Nursing (NCSBN) will transition to a new NCLEX-RN® Examination Test Vendor in the Fall of 2002 and is recruiting candidates to participate in both the Alpha and Beta phases of transition. The new test vendor is **VUE**, a NCS Pearson business. There will be no change to the NCLEX-RN® examination format or test questions.

Texas has been chosen to participate in the Beta test of this transition from January 14, 2002 to April 5, 2002 at the following locations: 500 Grapevine Highway, Suite 375, Hurst, TX 76054 (Dallas/Fort Worth area) and 8876 Gulf Freeway, Suite 220, Houston, TX 77017

New graduates and repeat test takers for the NCLEX-RN® examination are eligible to participate in the Beta Test. As an incentive, NCSBN is offering a one time reduction of the test fee and a one time travel voucher for Beta Test participants.

Time lines for participation have been established as follows:

Beta Registration is from January 14, 2002 through March 22, 2002
Beta Scheduling is from January 14, 2002 through March 29, 2002
Beta Testing is from March 1, 2002 through April 5, 2002

For additional information concerning **VUE** or the Beta Test process please contact webmaster@bne.state.tx.us.



Practice Q & A

by Cara S. Mueller, MSN, RN



Q: (1) I am a home health RN who provides nursing services close to the state border. I frequently care for clients who see physicians in the neighboring state. Can I accept and carry out orders from out-of-state physicians?

(2) As a school nurse I am responsible for administering medications to the students at our elementary school. One student is currently under the care of an out-of-state physician. Can I administer this medication?

A: RNs in Texas may accept orders only from those physicians who are legally authorized to practice in this state. It is our understanding that the Medical Practice Act and related rules state that physicians practicing across state lines into Texas are required to have a special purpose license to practice medicine in this state [see Board of Medical Examiners (BME) Rule 174 [Telemedicine](#)]. This rule does provide exemptions to licensure (§174.13) including situations such as (1) "episodic consultation" and (2) physicians located in states bordering Texas. In relation to the latter, this provision permits licensed home and community support services agencies in Texas to accept orders for home health or hospice services from physicians located in states bordering Texas. In relation to school nursing, medication may be administered by the RN, as ordered by a physician who meets the aforementioned BME requirements. Alternatively, the Education Code, Section 22.052(a), permits principals to assign medication administration to school district employees. You may wish to look at the agency rules of the Texas Board of Medical Examiners at their web site which is located at www.bme.state.tx.us. You can look at other agency statutes and rules on-line via the State of Texas website at www.texas.gov.

Advisory Committee Update

BNE Appoints Task Force in Response to HB 456

During the 77th Legislative Session, House Bill 456 was signed into law. It permits persons with disabilities to utilize services of unlicensed personnel to perform certain tasks. This bill requires the Board of Nurse Examiners to appoint a task force "to review and make recommendations regarding the provision of health maintenance tasks to persons with functional disabilities in independent living environments." The Board has made appointments to this Assistance with Functional Disabilities (AFD) Task Force which consists of 13 voting members and 5 ex officio members. Such organizations as Texas Nurses Association, advocacy groups for the disabled, and Texas Department of Human Services will be represented as stipulated in the bill. The AFD Task Force's first meeting will take place on January 23, 2002, from 10:00 am - 3:00 pm, in the William P. Hobby Building, 333 Guadalupe Tower, room 2-225 in Austin. For additional information regarding this task force, contact the Board office at 512/305-6844.

Concern Over Insurance Telemarketing - continued from page one

Company is an insurance agency that specializes in making benefits available to working men and women. Its marketing process consists of cold calling lists of working people and offering them health discount cards and the opportunity to take advantage of insurance being made available to them. If RNs do not want to be seen, the company does not set the appointment. However, once an appointment has been set, a licensed insurance agent comes out to the home to drop off the discount cards and explains the optional insurance available. If a prospect would like to take advantage of the insurance then they can do so at that time. Mr. Orell's e-mail further stated that American Income Life Insurance in no way claims to be endorsed by the Board of Nurse Examiners and would never "claim that a portion of [the RN's] licensing fee is paid to our company." He stated further that "if an agent representing our agency ever made a claim like this, whether express or implied, they would no longer be working at our agency" and would be terminated. Any inquiries of the company may be made at (972) 789-9663. Any individual who wishes to report a complaint of inappropriate insurance benefit telemarketing is encouraged to call the consumer information line at the Texas Department of Insurance at (800)252-3439 or follow complaint procedures described in the TDI website at www.tdi.state.tx.us.

NOTICE OF DISCIPLINARY ACTION

The following registered nurses had disciplinary action taken against their licenses. If you would like to receive additional information regarding the disciplinary action which has been imposed, please send your request to the Board of Nurse Examiners, Enforcement Division, P.O. Box 430, Austin, Texas, 78767-0430.

<u>NAME</u>	<u>LICENSE #</u>	<u>DISCIPLINE</u>	<u>DATE OF ACTION</u>
Alexander, Debra A.	515925	Reprimand w/Stipulations	December 11,2001
Alford, Marilyn S. Young	221468	Fine w/Remedial Education	October 11, 2001
Andrews, Elizabeth	627199	Warning w/Stipulations	December 11,2001
Anthony, Jeannie A.	665439	Reprimand	December 11,2001
Arciniaga, Chung H.	666458	Reprimand w/Stipulations	November 13, 2001
Bening, Donna Mae	561297	Warning w/Stipulations	October 11, 2001
Brinkley, Catherine	650552	Warning w/Stipulations	December 11,2001
Brooks, Melissa A.	532742	Reprimand w/Stipulations	November 13, 2001
Brown, Tracie Michelle	644842	Warning w/Stipulations	November 13, 2001
Bure, Paula D.	516235	Warning w/Stipulations	October 11, 2001
Bybee, Angie Denise	600577	Warning w/Stipulations	October 11, 2001
Bynum, Frances Lou Harp	214141	Suspend/Probate	November 13, 2001
Carnaby, Leoni Beatrice	576033	Remedial Education	November 14, 2001
Cochran, Deanna Flores	670476	Reprimand w/Stipulations	October 11, 2001
Coles, Mary Lorraine	581919	Reprimand w/Stipulations	December 11,2001
Collins, Hermia E.	505451	Remedial Education	October 30, 2001
Cook, Jodell Ruth	538078	Warning w/Stipulations	October 11, 2001
Cox, Tammy	651532	License Revoked	October 11, 2001
Ese, Lovelyn Betsy	610324	Warning w/Stipulations	October 11, 2001
Everman, Sherril	647561	Remedial Education	September 27, 2001
Freeman, Bonnie Jean	562569	Warning w/Stipulations	October 11, 2001
Garner, Bonnie	516773	Warning	December 11,2001
Gelvosa, Genevieve Masuecos	604970	Suspend/Probate	November 13, 2001
George, Stephen Hugh	571929	Warning w/Stipulations	December 11,2001
Glenn, Connie J.	255433	Warning w/Stipulations	December 11,2001
Gonzalez, Elia	577539	Remedial Education	October 23, 2001
Goodrich, Linda Sue	458542	Warning w/Stipulations	October 11, 2001
Gressett, Chantel	616819	Warning w/Stipulations	December 11,2001
Hale, Madlyn L.	245945	Warning w/Stipulations	December 11,2001
Hastings, Rosemary Louise	655571	Reprimand	December 11,2001
Hatch, Ruby Hyacinth	251124	Warning w/Stipulations	December 11,2001
Heil, Martha Louise	244628	Warning	December 11,2001
Henley, Karen R.	525610	Reprimand w/Stipulations	December 11,2001
Hobbs, Linda Gail	552036	Fine w/Remedial Education	November 28, 2001
Hobgood, Ilene Nelson	608673	Fine w/Remedial Education	October 1, 2001
Hodo, Mandy Marie	652569	Remedial Education	October 2, 2001
Hood, Richard Hall	613239	Remedial Education	October 17, 2001
Huston, Frances Culbert	457775	Suspend/Probate	November 13, 2001
Ikpeama, Emmanuel Uzodimma	611150	Reprimand w/Stipulations	November 13, 2001
Jines, Kathryn Marie	550226	Warning w/Stipulations	December 11,2001
Jones, Gloria D.	534100	Reprimand w/ Stipulations	November 13, 2001
Jones, Lisa	641915	Remedial Education	October 2, 2001
Kimble, Melissa Leech	604299	Warning w/Stipulations	November 13, 2001
Kovar, Eugene Charles	606606	Remedial Education	November 19, 2001
Kramer, Donna Jean	536648	Warning	December 11,2001
Lamm-Harlamor, Constance	434763	Remedial Education	November 30, 2001
Latta, Judith E. Mayer	220667	Warning	December 11,2001
Lemond, Betty L.	525964	Remedial Education	October 29, 2001
Luttrell, Windy Rae	609239	Warning	December 11,2001
Mack, Shundra	641965	Remedial Education	November 14, 2001
Manly, Gary Wayne	440463	Reprimand	December 11,2001
Martin, Elaine Marie	587129	Suspend/Probate	November 13, 2001
Martinez, Yolanda Salinas	601521	Warning w/Stipulations	October 11, 2001

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DISCIPLINARY ACTION

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<u>NAME</u>	<u>LICENSE #</u>	<u>DISCIPLINE</u>	<u>DATE OF ACTION</u>
Merritt, Linda Ann	627444	Reprimand w/Stipulations	October 11, 2001
Micklin, Destiny Amber	666297	Warning w/Stipulations	December 11, 2001
Mike, David	642628	Reprimand w/Stipulations	December 11, 2001
Miller, Linda Nell	460372	Warning	December 11, 2001
Molnar, Cyndee	637110	Remedial Education	October 2, 2001
Montoya, Ocotlan	583678	Reprimand w/Stipulations	November 13, 2001
Moravits, Walter	629625	Warning w/Stipulations	December 11, 2001
Morse, Joyce Patricia	667193	Remedial Education	November 8, 2001
Nelson, Mary Lou	667387	Warning w/Stipulations	October 11, 2001
Nguyen, Mary	637120	Suspend/Probate	December 11, 2001
Nicholson, Donna Lynn	518293	Fine w/Remedial Education	November 30, 2001
Norwood, Ruth S.	629640	Warning w/Stipulations	October 11, 2001
Novak, Amy Katharine	661787	Warning w/Stipulations	November 13, 2001
Osborne, Michelle Dawn	627748	Warning	December 11, 2001
Owens, Sandra Kaye	554345	Remedial Education	November 28, 2001
Pagala, Lerma	519660	Warning w/Stipulations	December 11, 2001
Patton, Lois Ellen	528052	Warning w/Stipulations	October 11, 2001
Peka, Gaylynn Kathryn	621481	Suspend/Probate	December 11, 2001
Pepper, Janet K.	502091	Warning	December 11, 2001
Pucek, Lori Denise	558343	Remedial Education	November 20, 2001
Reed, Rebecca A.	256403	Reprimand	December 11, 2001
Rhodes, Adrien Rachel	584187	Reprimand w/Stipulations	October 11, 2001
Robison, Colleen	255525	Warning w/Stipulations	December 11, 2001
Ross, Karen Lea	661270	Reprimand w/Stipulations	October 11, 2001
Rubalcava, Val Denise	555587	Warning w/Stipulations	November 13, 2001
Sanders, Kenora Lavona	669551	Remedial Education	November 27, 2001
Scott, Kathlene	637771	Reprimand w/Stipulations	December 11, 2001
Shultz, David Allen	465157	Reprimand w/Stipulations	October 11, 2001
Simpson, Martin Alton	447258	Remedial Education	November 13, 2001
Slater, Judy Lynn	564288	Remedial Education	November 6, 2001
Slaughter, Glenda Sue	534006	Reprimand w/Stipulations	October 11, 2001
Small, Pamela Ann	509609	Warning	December 11, 2001
Smith, Krista Mary	515764	Warning	December 11, 2001
Stilley, Colleen Anne	635231	Warning w/Stipulations	November 13, 2001
Tamling, Vickie	554218	Remedial Education	October 30, 2001
Thomas, Lilly	676420	Warning w/Stipulations	November 13, 2001
Thompson, Annie P.	537905	Remedial Education	December 4, 2001
Thompson, Shannon Lea	660340	Warning w/Stipulations	October 11, 2001
Tucker, Nancy M.	253174	Remedial Education	November 28, 2001
Varkey, Mary K.	615514	Remedial Education	November 29, 2001
Welch-McGill, Barbareta Anita	570024	Warning	December 11, 2001
Wheeler, Arllys Brooks	581535	Remedial Education	December 5, 2001
White, Patricia C.	597472	Remedial Education	November 6, 2001
Wical, Gail Suzette	548813	Warning w/Stipulations	November 13, 2001
Wilson-Jeffers, Mary K.	522762	Warning	December 11, 2001
Wood, Charles Mark	597588	Warning w/Stipulations	October 11, 2001
Woody, Melinda S. Stitt	418607	Warning w/Stipulations	November 13, 2001
Woolard, Rosemary L. W.	218945	Reprimand w/Stipulations	November 13, 2001
Wright, Jo Lynn	597610	Reprimand w/Stipulations	December 11, 2001

continued on next page

HPC Offers Toll-Free Number for Complaint Forms

The Health Professions Council has a toll-free phone number for obtaining complaint forms to report inappropriate actions by Texas-licensed health professionals including Doctors, Physician Assistants, Therapists, RNs, and LVNs. The number is: **1-800-821-3205**.

VOLUNTARY SURRENDERS

The following individuals have voluntarily surrendered their license to practice professional nursing in the State of Texas.

<u>NAME</u>	<u>LICENSE #</u>	<u>DATE OF SURRENDER</u>
Barry-Green, Charleen Michele	655496	November 29, 2001
Bargsley, Larry Swain	244798	November 28, 2001
Bartel, Linda	641176	September 28, 2001
Byrd, Shirley B. Smith	220199	September 28, 2001
Cash, Brenda Leigh	255583	October 11, 2001
Clark, Christine Marie	599155	December 12, 2001
Collenburg, Susan Catherine	588334	October 12, 2001
Cooke, Peggy J.	537243	October 15, 2001
Doiron, Michael Joseph	223722	August 23, 2001
Finlinson, Sandy	574443	November 19, 2001
Garon, Sandra Jane	654964	November 26, 2001
Hewett, Beverly Faye	232724	October 2, 2001
Hober, Nadine Marie	552962	October 31, 2001
Huebel, Stacie Lynn	577673	October 15, 2001
Issaac, Richard John	636378	December 12, 2001
Kassir, Laurie Kripp	601320	November 1, 2001
Kowalik, Vance	640083	October 16, 2001
Kuehn, Sharon R.	530331	October 4, 2001
Laduke, Bertie Cornwell	212611	November 7, 2001
Lawson, Glenda D.	439709	November 19, 2001
Legrand, Kelly Marie	572593	December 12, 2001
Leonard, Barbara Jo	453790	October 1, 2001
McCormack, Nella Walker	534066	December 12, 2001
Minton, William Steele	456593	December 4, 2001
Morgia, Kimberly Anne	609028	November 14, 2001
Naulls, Kitty Elizabeth	674320	October 9, 2001
Powell, Carol Coggins	403700	December 4, 2001
Pritchard, Helen Ruth	519636	November 8, 2001
Schnell, Ernestine G.	228264	November 1, 2001
Sears, Ronald G.	544844	October 10, 2001
Sims, James Bryan	574923	September 27, 2001
Thompson, Paula Marie	597204	December 12, 2001
Valero, Peggy Jean	556932	December 11, 2001
Veniegas, Quirino Laroya	597329	October 16, 2001
Walker, Robin Elaine	671082	December 10, 2001
Wilson, Venus Lee	582516	October 2, 2001
Watson, Carolyn Joyce	230405	November 30, 2001
West, Cherry Annise	650271	October 11, 2001
Williams, Joyce Angela	567081	October 5, 2001
Yaworsky, Patricia Elaine	568815	October 2, 2001

Texas Peer Assistance Program for Nurses - TPAPN

If you have concerns regarding a nursing colleague's practice related to chemical dependency or mental illness, call TPAPN at 1-800-288-5528 to speak to a nurse case manager.
Your call is confidential.

Dispelling Some Misconceptions about TPAPN

Nurses having contact with the Texas Peer Assistance Program for Nurses (TPAPN) sometimes state that, "TPAPN isn't what I thought it was." The purpose of this article is to help correct some of the misconceptions that may exist about TPAPN through a series of statements: What "TPAPN Is Not" *versus* what "TPAPN Is" stated in parentheses ().

TPAPN IS NOT:

1. Just for nurses with substance abuse or substance dependency. (TPAPN also provides services to nurses diagnosed with major depression, anxiety disorders, bipolar disorder, schizophrenia and schizo-affective disorder.)
2. Necessarily a softer, gentler option. (For most nurses, TPAPN participation consists of a 24-month program including requirements for monitoring, meeting attendance, employer involvement, and other stipulations. Over the past 14 years, 1500 RN's and LVN's have successfully completed TPAPN contracts. Most of them will attest that it has taught them better methods of coping with their respective disease processes. These nurses will also agree that without serious sacrifices, education, and lifestyle changes, their diseases would be progressive and potentially fatal.)
3. A means for nurses to escape from licensure discipline. (Referral to TPAPN fulfills a RN's mandatory reporting requirement. TPAPN does forward to the BNE extreme practice violations, nurses ineligible for participation and participants who are acutely or chronically non-compliant.)
4. A process that benefits only the nurses who are able to complete their participation agreements. (A recent review by TPAPN revealed that nurses who required referral to the BNE or BVNE for non-compliance with their TPAPN contracts were able to work safely while in TPAPN an average of 13.3 months! Some nurses reported to their respective boards have still been able to later successfully complete rehabilitation programs.)
5. An Employee Assistance Program. (TPAPN does work closely with EAPs for preliminary assessments, referrals to local treatment, job opportunities and complementary monitoring. Every health care facility can utilize TPAPN as an essential element to a comprehensive risk management/harm reduction program that can help improve patient safety, employee retention and morale.)
6. Administered by the BNE. (TPAPN is a private, non-profit program administered by the Texas Nurses Foundation and approved by the BNE. TPAPN maintains a service contract with the BNE and is primarily funded by a portion of nurses' license renewal fees.)
7. A treatment program. (TPAPN understands that appropriate treatment provides the foundation for successful participation and recovery.)
8. A 12-Step program. (TPAPN encourages recovery through support group attendance and working the 12-Steps of recovery.)
9. A 12-Step Sponsor. (TPAPN encourages every participating nurse to have a 12-Step Sponsor when appropriate. TPAPN recruits, trains and utilizes local nurse volunteers for 1 : 1 advocacy and community education.)
10. A program in which participants' records are public. (TPAPN abides by appropriate federal and state confidentiality regulations. The BNE may never need to know about those RNs who successfully complete TPAPN, whereas board action results in public record on the RN's license - in perpetuity - and publication of one's name and the action in the *RN Update*.)

Section 301.410 of the Nursing Practice Act provides for referral/reporting to a peer assistance program any nurse with suspected chemical dependency or mental illness impairing the nurse's ability to practice safely in lieu of reporting to the BNE or requesting peer review evaluation of the nurses practice. TPAPN approaches its' mission to protect the safety of the health care consumers of Texas through offering nurses the opportunity for rehabilitation, when appropriate, as opposed to automatic investigation and possible disciplinary action by the BNE. TPAPN has provided the option for peer assistance to RN's and LVNs in Texas since 1987. For more information, call TPAPN at 800/288-5528 or visit them on the web at www.texasnurses.org. (Article contributed by Mike Vandoren, Program Director, TPAPN.)

Insufficient Funds

As of December 18, 2001, the following nurses appear on the records of the Board of Nurse Examiners as debits for failure to respond to notices of returned checks. Should any of these nurses be employed or seeking employment with your agency/institution, please contact the Board's office. If any of these nurses are practicing in Texas as a registered nurse, they may be in violation of the Nursing Practice Act and may be subject to disciplinary action by the Board.

<u>NAME</u>	<u>LICENSE #</u>	<u>NAME</u>	<u>LICENSE #</u>
Allen, Julie Ann	RN 623827	Oanta, Daniela	TL 83765
Dunlap, Kimberly Alison	RN 665696	Quillin, Rhonda	RN 238758
Edgar, Mildred A	RN 509650	Roberts, Lydia Medrano	TL 84205
Meyers, Stephanie	RN 655919		

Have you moved lately?

Rule §217.7(b) requires RNs in Texas to notify the Board in writing within 10 days of a change of address, providing the new address and the RN's license number. Some RNs have had their licenses revoked because the BNE had no way to notify them of a pending investigation and/or subsequent Board orders.

Change of Address

Last Name: _____
First Name: _____
Middle Name: _____
SSN: _____ / ____ / ____
RN# _____
Today's Date: _____

Old Address:

Address _____

 City _____
 State _____ Zip _____

New Address:

Address _____

 City _____
 State _____ Zip _____

Mail to: Board of Nurse Examiners
 P.O. Box 430
 Austin, TX 78767-0430

or
 e-mail information to:
webmaster@bne.state.tx.us

Workshop Update

**Overview of Current Regulations:
A Foundation for Safe RN Practice***

Three workshops addressing nursing jurisprudence issues are scheduled for January through March 2002:

- Corpus Christi - January 10**
- San Antonio - February 8**
- Nacogdoches - March 6**

The jurisprudence workshop has been revised to include an *update on legislation* that was passed last session and an *expanded discussion of Peer Review and Safe Harbor*. The workshop has been approved for 6.4 Type 1 contact hours from the Texas Nurses Association which is accredited as an approver of continuing education for nursing by the American Nurses Credentialing Center Commission on Accreditation.

Registration Information

Brochures/registration forms will be available with pre-registration accepted **six weeks** prior to the workshop. Preregistration is always encouraged since space is limited. Payment *must* accompany the registration form, so registration cannot be taken over the phone, e-mail, or fax. If you do not receive a brochure and registration form by five weeks prior to the workshop, you may download one from our website or request one by contacting us. Our phone number for workshop information is (512) 305-6844 and e-mail address is Tiffany.Flores@bne.state.tx.us.

* Formerly entitled "Focus on Nursing Practice"

BNE HELPFUL NUMBERS

MAIN NUMBER.....(512) 305-7400
 -- 24 Hour Access
 -- License Verification
 -- General Information

OPERATIONS

CUSTOMER SERVICE.....(512) 305-6809
 -- License Renewals
 -- Endorsement/Reciprocity
 -- Continuing Education for RNs

ACCOUNTING SERVICES.....(512) 305-6853
 -- Returned checks
 -- Refunds
 -- Debits

SALES OF LISTS.....(512) 305-6848
 -- Computerized RN mailing lists or labels
 -- Publications

NEWSLETTER INFO.....(512) 305-6842

WEB Address.....www.bne.state.tx.us
 -- Refer e-mail inquiries to:
webmaster@bne.state.tx.us

ENFORCEMENT.....(512) 305-6838
 -- Complaint and disciplinary action inquiries
 -- Violations of NPA rules and regulations
 -- Monitoring of disciplined RNs

PROFESSIONAL NURSING

ADVANCED PRACTICE.....(512) 305-6843
 -- APN application and Prescriptive Authority procedures
 -- Application Requests.....(512) 305-6867
 (Voice Box Only)

-- Initial Authorization to Practice
 -- Prescriptive Authority

EDUCATION & EXAM.....(512) 305-6818
 -- RN/APN nursing programs
 -- Distance Education Initiatives
 -- NCLEX-RN applications
 -- Graduate Nurse permits
 -- Declaratory orders

NURSING PRACTICE.....(512) 305-6844
 -- Nursing practice issues
 -- Legislation
 -- Workshop Information



The purpose of the *RN Update* is to disseminate information to registered nurses licensed by the State of Texas, their employers, health care providers, and the public concerning laws and regulations established by the Board of Nurse Examiners related to the safe and legal practice of professional nursing. The *RN Update* provides information on current issues and trends in nursing regulation, status of nursing education programs, information regarding licensure and nursing practice, and disciplinary action taken against licensees who violate the Nursing Practice Act.

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Office Hours and Location

The Office of the Board of Nurse Examiners is located in The William P. Hobby Building, located at the corner of 4th and Guadalupe in downtown Austin. The mailing address is P.O. Box 430, Austin, Texas 78767-0430. Office hours are 8:00 a.m. to 5:00 p.m., Monday through Friday, except for designated holidays.

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Board Meeting Schedule - 2002

January 24-25

April 18-19

July 25-26

October 24-25

Meetings to be held in Austin

Board of Nurse Examiners
for the State of Texas
P.O. Box 430
Austin, TX 78767-0430

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