

REPORT OF THE EXECUTIVE DIRECTOR

NATIONAL ISSUES

NCSBN e-Notify Service: This service delivers real-time notification to employers about nurses in their employ. The system provides licensure and publicly available discipline data directly as the information is entered into the Nursys database by boards of nursing. Employers can chose the types and frequency of notifications such as expiration of license and discipline on a license. Currently there are 739 Texas nursing employers with 99,071 Texas nurses enrolled in e-Notify. NCSBN permits individual nurses to enroll.

Strategies to Prevent High-alert Medications (HAMs) Errors in Hospital Patients: A recent article discusses how a select group of medications, HAMs, carry a higher risk of patient injury, and when these medications are administered incorrectly, the risk of serious injury or death increases. Medications identified as HAMs have a narrow therapeutic index, making them dangerous because even small changes in dosage or blood medication levels can lead to life-threatening adverse events. Despite the increased risk of patient injury associated with the use of HAMs, only a few organizations have developed use guidelines: the Institute for Safe Medication Practices (ISMP), the Institute for Healthcare Improvement and The Joint Commission. These organizations identify four specific HAM drug classes which are frequently linked to potentially harmful outcomes -- anticoagulant, sedative, insulin and opioid.

Prevention strategies can reduce the risk of errors when administering HAMs. An independent double check (IDC) is an error prevention strategy in which a second nurse verifies that the patient, drug, dosage and route are correct and match the physician's order. IDCs help ensure safe administration of HAMs. According to ISMP, IDCs can prevent up to 95 percent of errors before they reach the patient. Other prevention strategies include limiting interruptions during medication administration, reducing confusion around drug names and standardization of drug labeling, storage, concentrations and dosages. The authors note that combining multiple error prevention strategies can reduce errors even further.

http://www.medscape.com/viewarticle/846296?src=wnl_edit_specol&uac=226719HZ&impID=870118&faf=1

New National Patient Safety Foundation (NPSF) Report Released: According to a new NPSF report, Free from Harm: Accelerating Patient Safety Improvement Fifteen Years After to Err is Human, patient safety concerns remain a serious public health issue that must be tackled with a more pervasive response. This comes 15 years after the Institute of Medicine brought public attention to the issue of medical errors and adverse events. In February, the NPSF convened an expert panel to assess the state of the patient safety field and set the stage for the next 15 years of work. The resulting NPSF report calls for the establishment of a total systems approach and a culture of safety, and calls for action by government, regulators, health professionals and others to place a higher priority on patient safety science and implementation. The report proposes eight recommendations for achieving total system safety: 1.) Ensure that leaders establish and sustain a safety culture;2.) Create centralized and coordinated oversight of patient safety; 3.) Create a common set of safety metrics that reflect meaningful outcomes; 4.) Increase funding for research

in patient safety and implementation science; 5.) Address safety across the entire care continuum; 6.) Support the health care workforce; 7.) Partner with patients and families for the safest care; and 8.) Ensure that technology is safe and optimized to improve patient safety.

<http://www.npsf.org/?freefromharm>

White Paper on State Telemedicine Policies Released: The National Conference of State Legislators (NCSL) recently released a white paper that examines the policy issues related to telehealth and the state laws that govern the use of this technology. NCSL identified three major policy issues arising from telehealth: coverage and reimbursement, licensure, and safety and security. Highlighting current state policies, which allow for reimbursement of telehealth services, the white paper encourages state policymakers to leverage telehealth to fill gaps in access to medical coverage. The paper provides recommendations on how telehealth can improve health care and health outcomes, and lower costs. The NCSL notes that while more research is needed, studies show that telehealth can be a cost-effective alternative to traditional care delivery methods.

<http://www.fiercehealthit.com/node/48431/print>

Telehealth Market Expected to Reach \$2.8 Billion by 2022: The U.S. telehealth market is expected to reach \$2.8 billion by 2022, according to a new report from Grand View Research Inc. The report indicates that increasing demand for centralization of health care administration, and enhanced quality and safety by telehealth applications are key drivers of the market growth. Increasing demand of mobile and internet technology and rising adoption of home care by patients are expected to propel the growth over the forecast period even more. The report also notes that telehealth legislation will be another key to the growth of telehealth services, including recent pushes by government officials to expand the use of telehealth.

<http://www.fiercehealthit.com/story/telemedicine-market-hit-28-billion-2022/2015-10-30>

New Institute of Medicine (IOM) Report Released: The new IOM report, "Assessing Progress on the Institute of Medicine Report The Future of Nursing," describes progress and changes made since the previous report, The Future of Nursing: Leading Change, Advancing Health, was published in 2010. In 2014, the Robert Wood Johnson Foundation asked the IOM to convene a committee to assess progress made on implementing The Future of Nursing report includes recommendations and identified areas that should be highlighted over the next five years. The current committee determined that progress has been made in many aspects of the recommendations from the 2010 report. To focus future work, the committee formulated four key messages and eight recommendations to achieve the key messages. 1.) Nurses should practice to the full extent of their education and training; 2.) Nurses should achieve higher education and training levels through an improved education system that enables seamless academic progress; 3.) Nurses should be full partners with physicians and other health care professionals in the U.S. in redesigning health care; and 4.) Improving data collection and information infrastructure requires effective workforce planning and policy making. Recommendations: 1.) Remove scope of practice barriers for APRNs; 2.) Expand leadership and collaborative improvement opportunities for nurses; 3.) State nursing boards, accrediting bodies, the federal government and health care organizations should establish nurse residencies; 4.) Academic nurse leaders should work to increase the proportion of nurses with a baccalaureate degree from 50 percent to 80 percent by 2020; 5.) Double the number of nurses with a doctorate degree by the year 2020, with attention to increasing diversity; 6.) Ensure that nurses continue with lifelong learning; 7.) Educate nurses to assume leadership positions across all levels; and 8.) Develop an infrastructure to support collection and analysis of interprofessional data on health care workforce requirements.

<http://www.medscape.com/viewarticle/855496>

Proposed Bill Would Grant Full Practice Authority to Advanced Practice Registered Nurses (APRNs) Working in Department of Veterans Affairs (VA) Facilities: Recently proposed bipartisan legislation, The Veterans Health Care Staffing Improvement Act, would make changes in staffing policies at the VA and improve veterans' care at VA health care facilities. The legislation would allow APRNs and physician assistants to provide a wider range of health care to patients by providing full practice authority to all APRNs and physician assistants in Veterans Health Administration.

<https://defazio.house.gov/media-center/press-releases/in-advance-of-veterans-day-merkley-wyden-and-defazio-announce-new>

President Announces Efforts to Reduce Prescription Drug and Heroin Use: The White House recently announced federal, state, local and private sector efforts to address prescription drug abuse and the heroin epidemic. The new initiative includes two major aims: prescriber training and improving access to treatment. The initiative requires federally employed health care providers who prescribe opioid pain medications to complete opioid prescriber training. The initiative to improve access to addiction treatment includes the use of medication-assisted therapy for the treatment of prescription painkiller and heroin addiction. Federal departments and agencies that directly provide, contract to provide, reimburse for or facilitate access to health benefits must conduct a review to identify barriers to medication-assisted treatment for opioid use disorders and develop action plans that address these barriers. Other actions recommend increasing the number of drug monitoring programs; increasing the number of physicians certified to prescribe buprenorphine for opioid use disorder treatment; increasing the number of providers that prescribe naloxone; and reaching more than 4 million health care providers through awareness messaging on opioid abuse, appropriate prescribing practices, and actions providers can take to be part of the solution in the next two years.

<http://www.modernhealthcare.com/article/20151021/NEWS/151029981>

Report Calls for Reforms to Curb the Prescription Opioid Epidemic: A November 2015 report, The Prescription Opioid Epidemic: An Evidence-based Approach, provides recommendations for curbing the prescription opioid epidemic in the U.S. The recommendations were developed by a national group of professionals from the fields of medicine, pharmacy, injury prevention and law as well as patient representatives, insurers and drug manufacturers. The report recommendations include changes to the way medical students and physicians are trained, prescriptions are dispensed and monitored, first responders are equipped to treat overdoses and those with addiction are identified and treated. The report provides guidance in seven categories: The report calls for stricter oversight of clinical prescribing and more comprehensive training of medical students. One report recommendation calls for the expansion of the roles of pharmacies and pharmacy benefit managers in reducing opioid misuse and abuse through increased use of electronic prescribing to identify high-risk patients and prescribers. Other recommendations include: mandatory use of PDMPs, the development of more secure and tamper-resistant opioid drug packaging, expanding "take back" programs that allow patients to return unused medication to pharmacies, providing funding for treatment programs to communities with high rates of addiction and expanding the availability of naloxone, which can reverse the effects of an overdose.

<http://www.jhsph.edu/news/news-releases/2015/public-health-leaders-urge-far-reaching-reforms-to- curb-prescription-opioid-epidemic.html>

U.S. Drug Enforcement Agency (DEA) Announces "360 Strategy" to Address Heroin, Prescription Drug Abuse and Drug Trafficking: The DEA recently announced that Pittsburgh is the pilot city for a new comprehensive strategy to help cities dealing with a heroin and prescription

drug abuse epidemic and its related violent crime. The aim of the "360 Strategy" is to break the cycle of drug trafficking, heroin and prescription drug abuse and the violence that accompanies it by using a three-fold approach: 1.) provide DEA leadership - offer leadership in law enforcement operations targeting drug trafficking organizations and violent gangs that supply drugs to local areas; 2.) have a long-lasting impact - engage manufacturers, wholesalers, prescribers and pharmacists to raise awareness of the heroin and prescription drug abuse epidemic and advocate for responsible prescribing practices throughout the medical community; and 3.) change attitudes - provide communities with the tools necessary to fight the epidemic through community outreach and partnerships with local organizations following DEA enforcement actions. Gary Tuggle, DEA special agent in charge for the Philadelphia Division, stated that the "360 Strategy" recognizes that every community resource needs to be utilized to reach young people and attack the heroin and prescription drug epidemic at multiple levels, and that this strategy could be a model for many other communities.

<http://www.dea.gov/divisions/hq/2015/hq111015.shtml>

Potential Misuse Alerts Result from Prescription Monitoring Program (PMP) Data : The Minnesota Board of Pharmacy utilized the state's PMP database to identify approximately 194 patients who were prescribed controlled substances by multiple doctors and filled those prescriptions at multiple pharmacies. After 10 months of sending notices to health care providers alerting them of the identified patients who might be "doctor shopping," 88 percent of these patients dropped off the alert list within a month after their prescribers were notified. Some of the patients who dropped off the list after the alerts were sent had their medication dosages modified or were referred to treatment. Prescribers in Minnesota are currently not required to consult the PMP before writing a prescription for a controlled substance, but the board of pharmacy is advocating for a law requiring prescribers to register with the PMP so that they have access to the PMP database when needed.

<https://www.nabp.net/news/minnesota-board-uses-pmp-data-to-alert-prescribers-of-potential-misuse-support-assistance-for-patients>

STATE ISSUES

Health Professions Council: The Health Professions Council (HPC) met on December 14, 2015 for its regular quarterly meeting. Discussion included the HPC role in the legislated Behavioral Health Committee and agencies under current Sunset Review. Budget and Information Technology Reports were presented with discussion of opportunities for sharing information on best practices, resources and training.

Contracts: Staff have reviewed and modified all contracts to provide compliance with Senate Bill 20 (84th Legislature). We are currently awaiting final rules from the Comptrollers Office and will post appropriate contracts online.

BOARD ISSUES

BON Bulletin Articles : The January issue of the *Board of Nursing Bulletin* contains articles on: 1.) Sunset Review of Board of Nursing; 2.) the Choosing Wisely Campaign; 3.) Broadening of TPAPN Eligibility Criteria; 4.) Bullying in the Workplace; and 5.) Nurse Licensure Compact Q&A.

Board Development: A board development session titled, *An Overview of Regulation of Pre-Licensure Nursing Education Program Approval in Texas* will be held during the meeting on Friday, January 22, 2016.

AGENCY ISSUES

Staff News: Several changes have occurred in the Nursing Department. Christina Stelly, MSN, RN, Nursing Practice Consultant resigned to take a clinical position. Bonnie Cone, MSN, RN, Nursing Practice Consultant retired. Jolene Zych, PhD, RN returned to full time status as a Nursing Consultant. Stacey Cropley, DNP, RN, CPN has been promoted to Lead Practice Consultant.

Jody McFarland, JD, MSN, RN has joined the staff as a Nursing Practice Consultant. Jody earned a BA in speech communications from Denison University, a JD from Capital University, and an MSN from DePaul University. Her primary area of nursing practice has been in hospice nursing in the roles of RN case manager, triage nurse and visit nurse. Kristen Sinay, MSN, RN has been promoted to Nursing Practice Consultant. Ms. Sinay has been a Nurse Investigator for the Board for the past year. Her nursing practice experience includes Labor and Delivery, women's health office practice, clinical teaching, and childbirth education. Susan K. Lee, PhD, RN has joined as an Education Consultant. Dr. Lee earned a diploma in nursing from Baptist Memorial Hospital System, both a BSN and an MSN from the University of Texas Health Science Center at San Antonio, and most recently, a PhD in nursing from Texas Women's University-Denton. She has experience teaching in associate and baccalaureate degree nursing programs, most recently as Clinical Associate Professor at St. David's School of Nursing at Texas State University in Round Rock. Her research interest is the experience of homeless Vietnam Veterans in relation to health care access.

In the Legal Department, Jessica Lance passed the bar and is now a licensed attorney! She has been promoted to Attorney II. Ms. Lance was a Law Clerk for the Board at the time of her promotion.

Space Needs for New Staff: Several meetings and communications with the Texas Facilities Commission (TFC) have taken place to discuss the Board's space needs for new staff beginning September 1, 2015. We have been informed that the agency's space needs will be accommodated in Tower III, 2nd floor, although construction and moving are likely to take 8-12 months to complete. In the meantime, a conference room on the 5th floor has been provided as temporary space.

Nursing Jurisprudence Examination: The Jurisprudence examination required for initial licensure by Texas Occupations Code Section 301.252, License Application, was implemented in September 2008. Those applying for initial licensure by exam or endorsement **after** September 1, 2008 must pass the Jurisprudence Exam in order to be eligible for licensure. Also, nurses who have not been current in Texas for four or more years, must complete the Jurisprudence Examination prior to reinstatement. Attached are statistics for Jurisprudence exam takers for past 3 fiscal years including through the first quarter of Fiscal Year 2016. (***See Attachment A***). Staff continue working with a psychometrician to update the Jurisprudence Examination.

Business Continuity/Continuity of Government Planning (COOP): The State of Texas must be prepared to ensure the continuing performance of critical government functions under all conditions, including emergencies that disrupt normal operations. This capability depends on effective continuity planning that identifies critical functions; identifies the personnel, facilities, and other resources required to continue delivery of those functions; and ensures those resources will be available when needed through coordination with partners and stakeholders. Requirements for state agency continuity planning are established in the Texas Labor Code (Section 412.054), with

additional information on information security rules related to information security standards in Rule §202.24 of the Texas Administrative Code. The Texas BON is required to have an employee that has been certified and would serve as the agency continuity coordinator. Further, the agency must have our continuity coordinator review the agency's current plan, compare it to the Federal Emergency Management Agency COOP standards and revise our plan as needed to meet these new standards. The revised plan was submitted to SORM who found that the required agency plan was in compliance. Following this notification the agency conducted a visit to our remote disaster site and tested the operations and notification of management staff; the visit was successful and a report was filed with SORM. Agency internal agency staff training has also been completed.

National Council of State Boards of Nursing (NCSBN) Projects: Staff continues the BON on-boarding process for the new NCSBN data base system, Optimal Regulatory Board System, ORBS, (formally known as ROMS). The Business analyst has completed in-depth mapping of all the BON licensure business processes and will finalize enforcement business processes by January 31,2016 so the agency and NCSBN can proceed with launching of Phase 1 of ORBS in 2016.

Information Technology Updates:

This quarter the IT department has been focusing on updating infrastructure and business continuity.

1. Upgraded BON Infrastructure and systems including hardware and servers at the office and at the Disaster Recovery (DR) site
2. Improved operations time at the DR site for quick access in event of disaster at home site
3. Deployed new software at DR site to provide remote internet access to stass in event of disaster
4. Performed exercise to test response at DR site
5. Performed testing of loss of electrical power at office site
6. Tested cloud server during shutdown
7. Set up computers in new temporary space in Hobby Building Tower III
8. Created new compliant equipment and software for data from Department of Public Safety Fact Clearinghouse
9. Sent full licensure records to NCSBN for the start of new data base on-boarding
10. Provided statistical data to Department of State Health Services Center for Nursing Workforce Studies for their research and reports
11. Began deployment of the two factor authentication to office staff workstations to improve security

Website: The following are changes that have been made to the website for the first quarter of fiscal year 16:

1. Updated education documents including: Nursing Education Programs, approved out of state clinical programs document and quarterly Education Newsletter
2. Added a new nursing education program to the Military web page
3. Posted the Nursing statistical data
4. Posted July and October disciplinary pages
5. Posted October Board meeting agenda and materials
6. Posted BON October Bulletin
7. Removed the ability to purchase NPA from the website as it is now available as a free download
8. Updated the Nurse Practice Act
9. Posted the Internal Audit Reports
10. Updated Imposter Warning section
11. Added instructions for background checks. Changed the Fast Pass fees and posted new instructions

12. Updated NLC map and information on the website.

Key Meetings and Presentations: by the Executive Director and Staff since the last Board meeting. (Does not include internal meetings with staff).

Executive Director

Conference Call: Texas Team Advancing Education Committee Meeting, October, 26, 2015

Conference: NCSBN Leadership and Policy, October 28-29, 2015, Westlake Village, California

Conference Call: Texas A&M College of Nursing/RCHI/ BON KSTAR Nursing Pilot, November 4, 2015

Conference Call: Texas A&M College of Nursing/RCHI/ BON KSTAR Nursing Pilot, November 18, 2015

Conference Call: Texas Nurses Association Regulatory Subcommittee, November 18, 2015

Conference: Nursing Organizations Alliance Fall Summit November 19-21, 2015, Palm Springs, CA

Webex Meeting: Nurse Licensure Compact Administrators Compliance Committee, November 23, 2015

Conference Call: Texas Team Advancing Education Committee, November 23, 2015

Meeting: Advanced Practice Registered Nurses (APRN) Consensus Model Update, December 1, 2015, Washington, DC

Meeting: APRN Compact, December 2, 2015, Chicago

Meeting: Enhanced Nurse Licensure Compact, December 3, 2015, Chicago

Meeting: NCSBN Board of Directors, December 8-10, 2015, Chicago

Meeting: Health Professions Council, December 14, 2015, Austin

Conference Call: NCSBN Executive Officer Leadership Council, December 14, 2015

Conference Call: Texas Team Advancing Education Committee Meeting, January 6, 2016

Conference Call: Nurse Licensure Compact Administrators, January 12, 2016

General Counsel

Presentation: 2nd Annual Central Texas Team Legislative Symposium, *Panel Discussion: Impact of the 2015 Texas Legislative Session on the Texas Board of Nursing and the Future of the Nursing Workforce*, October 28, 2015, Austin

Conference Call: Texas A&M College of Nursing/RCHI/ BON KSTAR Nursing Pilot, November 4, 2015

Meeting: Austin Community College Faculty Meeting, *Regarding Expert Witnesses*, November 9, 2015, Austin

Conference Call: Texas A&M College of Nursing/RCHI/ BON KSTAR Nursing Pilot, November 18, 2015

Conference Call: Texas A&M College of Nursing/RCHI/ BON KSTAR Nursing Pilot, December 2, 2015

Conference Call: Susan Schulz, *Regarding DADS SB 304 Negotiated Rulemaking Process*, December 14, 2015

Director of Operations

Presentation: Texas Association of Vocational Nurse Educators, October 30, 2015, Austin

Presentation: Central Texas Veterans Health Care System, November 6, 2015, Temple

Meeting: NCSBN Bylaws Committee, November 10-11, 2015, Chicago

Presentation: Texas Association of Healthcare Recruiters, November 13, 2015, San Antonio

Presentation: Texas State Human Resource Association, November 17, 2015, Austin

Conference: Texas State Human Resource Association, December 2, 2015, Austin

Meeting: Texas State Veterans Commission, December 9, 2015, Austin

Meeting: UT School of Social Work, December 11, 2015, Austin

Meeting: NCSBN Bylaws Committee, January 12-13, 2016, Chicago

Director of Enforcement

Meeting: TPAPN 3rd Party Referral Reviews with TPAPN staff, October 30, 2015, Austin

Conference Call: Texas A&M College of Nursing/RCHI/ BON KSTAR Nursing Pilot, November 4, 2015

Conference Call: Texas A&M College of Nursing/RCHI/ BON KSTAR Nursing Pilot, November 18, 2015

Meeting: TPAPN 3rd Party Referral Reviews with TPAPN staff, November 6, 2015, Austin

Meeting: TPAPN 3rd Party Referral Reviews with TPAPN staff, November 13, 2015, Austin

Meeting: TPAPN 3rd Party Referral Reviews with TPAPN staff, November 20, 2015, Austin

Meeting: TPAPN 3rd Party Referral Reviews with TPAPN staff, November 27, 2015, Austin

Conference Call: Texas A&M College of Nursing/RCHI/ BON KSTAR Nursing Pilot, December 2, 2015

Meeting: TPAPN 3rd Party Referral Reviews with TPAPN staff, December 4, 2015, Austin

Meeting: TPAPN 3rd Party Referral Reviews with TPAPN staff, December 11, 2015, Austin

Meeting: TPAPN 3rd Party Referral Reviews with TPAPN staff, December 17, 2015, Austin

Director of Nursing and Nursing Consultants

Conference Call: Texas Team Advancing Education Committee Meeting, October, 26, 2015

Meeting: Texas Team Legislature, October 28, 2015, Austin

Conference: NCSBN Leadership and Policy, October 28-29, 2015, Westlake Village, California

Meeting: NCSBN APRN Education, October 28-30, 2015, Chicago

Meeting: Texas Association of Vocational Nurse Educators (TAVNE) Annual Meeting, October 28-30, 2015, Austin

Presentation: APRN Application Process, October 29, 2015, Webinar

Presentation: TAVNE Annual Meeting, October 30, 2015, Austin

Meeting: Nursing Innovation Grant Meeting at THECB, November 3, 2015, Austin

Conference Call: Texas A&M College of Nursing/RCHI/ BON KSTAR Nursing Pilot, November 4, 2015

Conference Call: NCSBN Practice Knowledge Network, November 5, 2015

Meeting: Texas Association of Health Plans, November 6, 2015, Austin

Meeting: Joint Meeting- Texas Board of Nursing, Texas Workforce Commission, Texas Higher Education Coordinating Board, November 9, 2015, Austin

Conference: Career Colleges & Schools of Texas, November 10, 2015, Houston

Conference Call: NCSBN Advanced Practice Knowledge Network, November 12, 2015

Workshop: TPAPN, November 13, 2015, Austin

Meeting: Texas Higher Education Coordinating Board, November 16, 2015, Austin

Conference Call: Texas TERCAP Pilot Participants, November 18, 2015

Conference Call: Texas A&M College of Nursing/RCHI/ BON KSTAR Nursing Pilot, November 18, 2015

Conference Call: Texas Team Advancing Education Committee, November 23, 2015

Meeting: Texas Center for Nursing Workforce Studies Workplace Violence Against Nurses Task Force, November 30, 2015, Austin

Conference Call: Texas A&M College of Nursing/RCHI/ BON KSTAR Nursing Pilot, December 2, 2015

Conference Call: NCSBN Education, December 3, 2015

Meeting: Assessing Progress on the IOM Report, The Future of Nursing, December 4, 2015, Webinar

Meeting: TPAPN Advisory Committee Meeting, December 4, 2015, Austin

Conference: Faculty Development Conference, January 3-5, 2016, Las Vegas

Conference Call: Texas Team Advancing Education Committee Meeting, January 6, 2016

Meeting: Health Integrity, LLC, January 11, 2016, Austin

Meeting: NCLEX Committee, January 11-12, 2016, Chicago

Meeting: NCSBN CORE Meeting, January 12-14, 2016, Chicago

Conference Call: NCSBN Knowledge Network Call, January 14, 2016

Quarterly Statistics Where Executive Director Closed Cases in Compliance with Board Policy:

Case Resolution Report
September 1, 2015 through November 30, 2015

Type of Action	Total
No Jurisdiction	5
No Violation	4
No Action	515
Insufficient Evidence	138
Admonish	15
Without Prejudice	1217
TPAPN Referrals	101
EEP Referrals	11
Corrective Actions	50
Totals	2,056

Quarterly Statistics Where Executive Director Ratified Temporary Suspension Cases in Compliance with Board Policy:

Temporary Suspension Case Resolution Report
September 1, 2015, through November 30, 2015

Type of Action	Total
Voluntary Surrender	3
Enforced Suspension	4
Enforced TPAPN_	1
Suspend/Probate	2
Reprimand with Stipulations	1
Totals	11

Quarterly Statistics Where Executive Director Ratified Requests for Exception in Compliance with Board Policy:

REQUESTS FOR EXCEPTION TO A PREVIOUSLY ISSUED AGREED ORDER
September 1, 2015 through November 30, 2015

Total Number of Requests Received	29
Number of Requests Resolved	21*
Number of Requests Granted by Executive Director	4
Number of Requests Granted by Eligibility and Disciplinary Committee	5
Number of Requests Denied by Eligibility and Disciplinary Committee	2
Number of Requests Denied Pursuant to Board's Guidelines for Exceptions to Existing Board Orders	3
Number of Requests Pending	46**

*One (1) request was withdrawn.

** Seven (7) requests set for next E&D.

LVN DISCIPLINARY ORDERS

Time frame: September 1, 2015, through November 30, 2015

DISCIPLINARY	
13	<p>FINE WITH REMEDIAL EDUCATION</p> <ul style="list-style-type: none"> 9 Submitted an Application/Renewal Document in which false, deceptive, and/or misleading information was given by failing to disclose a criminal history 1 Inappropriately administered an injection of Rocephin/Lidocaine without a physician's order 3 Practiced professional nursing without a valid nursing license
12	<p>REMEDIAL EDUCATION</p> <ul style="list-style-type: none"> 1 Convicted of 6 counts of Failure Maintain Financial Responsibility 1 Failed to administer antibiotics as ordered 1 Failed to properly assess and/or document a pain assessment in the medical record 1 Failed to accurately and/or completely document the condition of a patient when the patient presented with a swollen tongue and face 1 Failed to ensure that correct medication was being administered 1 Convicted of two counts of misdemeanor Disorderly Conduct, 1 Failed to submit complete skilled nurse visit documentation 1 Inappropriately accessed a medical record 1 Administered an Albuterol nebulizer treatment using another student's Albuterol and nebulizer 1 Violated professional boundaries of the nurse/client relationship by tagging a patient's mother on Facebook 1 Failed to ensure that the patient received acetaminophen timely, as ordered by the physician 1 Violated patient confidentiality by calling to provide medical information without the patient's consent
11	<p>TPAPN CONFIDENTIAL BOARD ORDER</p> <ul style="list-style-type: none"> 1 Misappropriated Propofol, in that she was observed taking a discontinued bottle of Propofol 1 Misappropriated Dilaudid, Hydromorphone and Morphine 1 Intemperate use of Benzodiazepines, Oxazepam, Lorazepam, Opiates, Morphine, Hydromorphone and Hydrocodone 1 Intemperate use of Benzodiazepines and Opiates 1 Misappropriated Dilaudid <p>TPAPN ENFORCED SUSPENSION BOARD ORDER</p> <ul style="list-style-type: none"> 1 Misappropriation of Hydrocodone tablets, admitted to being addicted to Hydrocodone, intemperate use of Opiates 1 Arrested for misdemeanor Driving While Intoxicated and Possession of a Controlled Substance 1 Admitted as an inpatient to La Hacienda Treatment Center 1 Removed medications from the Omnicell using a patient's account number without a valid physician's order 1 Non-compliance with prior Board Order 1 Intemperate use of Alcohol While on Duty
32	<p>VOLUNTARY SURRENDER</p> <ul style="list-style-type: none"> 2 Submitted a statement voluntarily surrendering their license to practice nursing 5 Disciplinary action taken by another Licensing Authority 1 Misappropriation of Hydrocodone; deferred judgment for third degree felony Fraud 1 Failed to promote a safe environment for patients; intemperate use of a controlled substance 1 While under psychological distress and the influence of drugs committed an indecent act with a patient 1 Made sexually inappropriate physical contact and sexually inappropriate comments to a co-worker 1 Obtained Hydrocodone, Ativan, Klonopin, and Lortab under her name and her mother's name 1 Failed to document the administration of Dilaudid and Lorazepam; diagnosed as having Alcohol Dependence, Benzodiazepine Dependence and a mental health disorder 1 Convicted of third degree felony of Fraudulent Possession of Controlled Substance Prescription Sch III/IV 1 Deferred judgment for third degree felony Hindering Apprehension or Prosecution Known Felon 1 Failed to prime the Normal Saline filled syringe, obtain a blood return, and ensure patency of the intravenous line prior to administration of IV; exceeding scope of practice 4 Submitted statement of surrender in lieu of complying with Board Order 12 Non-compliance with previous Board Order

LVN ENDORSEMENT/PETITIONER DISCIPLINARY ORDERS

Time frame: September 1, 2015, through November 30, 2015

373	<p>APPLICANTS/ PETITIONERS</p> <ul style="list-style-type: none"> 1 Active patient in an outpatient program 1 Diagnosed with Bipolar Disorder 1 Deferred judgment for misdemeanor Theft by Check, convicted of Possession of Dangerous Drug 1 Convicted of first degree felony Delivery of a Controlled Substance - Cocaine 1 Deferred judgment for second degree felony Possession of a Controlled Substance - Cocaine 1 Convicted of misdemeanor Possession of Marijuana 1 Convicted of misdemeanor Simple Assault - Domestic Abuse and Violation of Conditional Bond 1 Convicted of three counts of misdemeanor Theft by Check 1 Deferred judgement for Obstructing Highway Passageway 1 Deferred judgment for misdemeanor Driving While License Suspended; convicted of four counts of Issue Bad Check 4 Prior Board Order during Petitioner Process 1 Convicted of misdemeanor Driving While Intoxicated; deferred judgment for misdemeanor Possession of a Controlled Substance 1 Deferred judgment for misdemeanor Theft; convicted of Theft by Check 1 Convicted of three counts of misdemeanor Possession of Marijuana 1 Convicted of misdemeanor Possession of Marijuana; deferred judgment for Trespassing 1 Deferred judgment for misdemeanor Theft 1 Deferred judgment for third degree felony OBT Controlled Substance - Fraud 1 Deferred judgment for state jail felony Possession of a Controlled Substance; Cocaine 1 Convicted of two counts of misdemeanor Prostitution; convicted of state jail felony Forgery; deferred judgment for felony Forgery 1 Convicted of two counts of state jail felony Endangering a Child 1 Convicted of five counts of felony Forgery of Financial Instrument 1 Deferred judgment for third degree felony Assault on a Public Servant; misdemeanor Assault 1 Pre-Trial Diversion for state jail felony Theft of Property 1 Medically referred to Alcohol Treatment Services 1 Pre-Trial Diversion for state jail felony Theft of Property and third degree felony Possession of a Controlled Substance 1 Deferred judgment for misdemeanor Possession of Marijuana; convicted of Driving While Intoxicated 1 Convicted of two counts of misdemeanor Organized Retail Theft 1 Deferred judgment for misdemeanor Criminal Mischief and two counts of Driving While Intoxicated 1 Convicted of two counts of misdemeanor Driving While Intoxicated 3 Disciplinary action taken by another Licensing Authority 4 Denial of Licensure 334 No Grounds for Denial/Youthful Indiscretion
50	<p>ENDORSEMENTS</p> <ul style="list-style-type: none"> 6 Disciplinary action taken by another Licensing Authority 3 Denial of Licensure 1 Convicted of felony Attempted Felony Theft 4 Non disclosure of Criminal History or Disciplinary Action on Application for Licensure by Endorsement 36 No Grounds for Denial

LVN CORRECTIVE ACTION

Time frame: September 1, 2015, through November 30, 2015

23	<p>CORRECTIVE ACTION</p> <ul style="list-style-type: none"> 1 Non disclosure of misdemeanor Theft of Property by Check 1 Non disclosure of misdemeanor Possession of Dangerous Drugs 1 Non disclosure of misdemeanor Public Intoxication 1 Non disclosure of misdemeanor Criminal Trespass 1 Non disclosure of misdemeanor Possession of Marijuana < 2 oz 1 Non disclosure of pending misdemeanor Driving While Intoxicated and Theft >\$50 <\$500 1 Driving W/ Previous Conviction/Suspension W/Out Financial Responsibility 1 Non disclosure of misdemeanor Assault 1 Erroneously documented that a patient had been seen and checked out before the patient had been seen 1 Non disclosure of information on license renewal applications for year 2004, 2007, 2012, and 2014 9 Non disclosure of misdemeanor Driving While Intoxicated 1 Non disclosure of misdemeanor Interfere with Public Duties 1 Inappropriately gave orange juice and sugar packets for a critically low blood sugar, instead of glucose gel 2 Practiced Nursing without a valid license
5	<p>ENDORSEMENTS</p> <ul style="list-style-type: none"> 1 Non disclosure of misdemeanor Theft by Check 1 Non disclosure of misdemeanor Driving While Intoxicated 1 Non disclosure of misdemeanor Theft 1 Non disclosure of misdemeanor Disorderly Conduct 1 Non disclosure of misdemeanor Driving While Ability Impaired - Intoxication
5	<p>APPLICANTS/ PETITIONERS</p> <ul style="list-style-type: none"> 1 Non disclosure of misdemeanor Assault 1 Non disclosure of misdemeanor Driving While Intoxicated 1 Practiced as a Graduate Nurse without a Permit 1 Non disclosure of misdemeanor Disorderly Conduct 1 Non disclosure of misdemeanor Theft of Property

LVN DEFERRED DISCIPLINE

Time frame: September 1, 2015, through November 30, 2015

2	<p>REMEDIAL EDUCATION - DEFERRED DISCIPLINE</p> <ul style="list-style-type: none"> 1 Failed to document a patient's injury and assessment made in the nurses notes 1 Failed to notify physician's of two patients that antibiotics were not administered.
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Cases Where Executive Director Offered and Entered Ordered Orders in Compliance with Board Policy:

Time frame: September 1, 2015, through November 30, 2015

DISCIPLINARY	
10	<p>FINE WITH REMEDIAL EDUCATION</p> <ul style="list-style-type: none"> 5 Submitted an Application/Renewal Document in which false, deceptive, and/or misleading information was given by failing to disclose a criminal history 1 Failed to implement measures to prevent exposure to infectious pathogens and communicable conditions 1 Withdrew Hydrocodone but failed to timely document the administration; administered Hydrocodone two hours earlier than ordered by the physician 2 Failed to disclose disciplinary action taken by another licensing authority 1 Inappropriately administered an injection of Rocephin/Lidocaine without a physician's order
26	<p>TPAPN CONFIDENTIAL BOARD ORDER</p> <ul style="list-style-type: none"> 1 Diagnosed with Bipolar Disorder 1 Misappropriated Propofol, in that she was observed taking a discontinued bottle of Propofol 1 Engaged in the intemperate use of Hydromorphone resulting in a positive drug screen 1 Misappropriated Demerol; entered a twenty-eight (28) day drug rehabilitation program 1 Diagnosed with Opioid Type Dependence continuous use, Chronic Pain Syndrome and Depressive Disorder 1 Intemperate use of Cocaine resulting in a positive drug screen 1 Misappropriated Fentanyl, Dilaudid, Soma and Norco 1 Obtained Soma and Xanax from the HEB pharmacy through the use of a fraudulently written prescription 1 withdrew two 100 milliliter bottles of Propofol without a physicians' order 1 Convicted of two counts of Driving While Intoxicated and one count Public Intoxication 1 Intemperate use of Benzodiazepines, Oxazepam, Lorazepam, Opiates, Morphine, Hydromorphone and Hydrocodone 1 Intemperate use of Benzodiazepines and Opiates 1 Tested positive for alcohol and amphetamines 1 Misappropriated Dilaudid, Hydromorphone and Morphine 1 After attending three weeks in rehab for alcohol abuse he was arrested for Assault - Family Violence <p>TPAPN ENFORCED SUSPENSION BOARD ORDER</p> <ul style="list-style-type: none"> 1 Misappropriation of Hydrocodone tablets, admitted to being addicted to Hydrocodone, intemperate use of Opiates 1 Intemperate use of Alprazolam by producing a positive specimen 1 Admitted himself into a treatment center for twenty-three (23) days 1 Convicted of Driving With .08 or more Alcohol; sobriety date of December 11, 2013 1 Intemperate use of Marijuana 1 Diagnosed and treated for a mental health condition and cognitive impairment related to short-term memory loss 1 Incorrectly documented that she administered Xanax 1mg for wrong patient 1 Misappropriated Dilaudid, Demerol, and Morphine; intemperate use of Hydromorphone, Hydrocodone and Alprazolam 1 Non-compliance with prior TPAPN Board Order 1 Removed medications from the Omnicell using a patient's account number without a valid physicians order 1 Intemperate use of Alcohol While on Duty

17	<p>REMEDIAL EDUCATION</p> <ul style="list-style-type: none"> 1 Disciplinary action taken by another Licensing Authority 1 Inappropriately accessed a medical record 1 Inaccurately documented discharge visit 1 Prepared to administer Vancomycin without verifying that the medication was for the correct patient 1 Mislabeled a lab specimen 1 Restrained the patient after he verbalized that he wished to leave the facility against medical advice 1 Supplemented a current residents medication with medications of discharged residents 1 Failed to administer Actigall per physician's order 1 Falsely attested to having the required minimum hours of current practice 1 Made inappropriate comments while examining a seventeen-year old female patient 1 Inaccurately documented nursing care that was not provided 1 Non-compliance with previous Board Order 1 Failed to notify the physician in a timely manner to read and review the x-ray post Sobhoff feeding tube insertion to confirm placement 3 Violated professional boundaries of the nurse/client relationship 1 Violated patient confidentiality by calling to provide medical information without the patient's consent
35	<p>VOLUNTARY SURRENDER</p> <ul style="list-style-type: none"> 7 Submitted a statement voluntarily surrendering license to practice nursing 6 Disciplinary action taken by another Licensing Authority 1 Convicted of state jail felony Theft 1 Failed to follow the facility's policy and procedures regarding wastage of medications; misappropriation of Toradol and Zofran 1 Diverted Dilaudid and Lortab 1 Arrested for misdemeanor offense for Driving While Intoxicated with two prior Board Orders 1 Failed to adequately assess or intervene when the patient's blood glucose was sixty-four and patient was diaphoretic and lethargic 1 Diagnosed and treated for a mental health condition that could result in an injury to a patient 1 Intemperate use of Benzodiazepines and Tricyclic Antidepressants 1 Falsely attested to having the required minimum hours of current practice 1 Deferred judgment for state jail felony Burglary of a Building 1 Lacked fitness to practice professional nursing by exhibiting signs of impaired behavior 1 Administered Ancef intravenously to a dialysis patient with a known allergy resulting in patient expiring 1 Convicted of third degree felony of Fraudulent Possession of Controlled Substance Prescription Sch III/IV 1 Failed to promote a safe environment for patients; intemperate use of a controlled substance 9 Non-compliance with previous Board Order

RN ENDORSEMENT/PETITIONER DISCIPLINARY ORDERS

Time frame: September 1, 2015, through November 30, 2015

566	<p>APPLICANTS/ PETITIONERS</p> <ul style="list-style-type: none"> 4 Non disclosure of Criminal History or Disciplinary Action on Application for Licensure by Examination 5 Diagnosed with Bipolar Disorder 1 Entered treatment at Louisiana New Life Retreat 2 Convicted of two counts of Driving While Intoxicated 1 Deferred judgment for misdemeanor Possession of Controlled Substance, Public Intoxication and Theft 1 Deferred judgment for four counts of second degree felony Unlawful Possession with Intent to Deliver 1 Entered Teen Challenge Women's Residential Recovery Program 1 Diagnosed with Schizophrenia 2 Deferred judgement for state jail felony Securing Execution of Document by Deception 1 Pre-Trial Diversion for misdemeanor Theft; convicted of misdemeanor Driving While Intoxicated 1 Convicted of misdemeanor Open Container in Vehicle and three counts of Issuance of Bad Check 1 Diagnosed with Opiate and Amphetamine Dependence 1 Pre-Trial Diversion for misdemeanor Theft of Property; deferred judgement for Possession of Marijuana 1 Failed to timely assess and provide interventions that patient had an acute change in condition 1 Convicted of two counts of misdemeanor Disorderly Conduct; convicted of Criminal Domestic Violence 1 Article 15 for Larceny and Wrongful Appropriation 1 Convicted of misdemeanor Driving while License Suspended; Escape and DWI - 1st offender 1 Deferred judgment for misdemeanor Consumption of Alcohol, Possession of Drug Paraphernalia and Driving While Intoxicated 1 Convicted of Possession of Marijuana; Possession of Instrument of Crime and two counts of Contribute of Delinquency of a Minor; deferred judgment of second degree felony Manufacture Controlled Substance 1 Deferred judgment for two counts of misdemeanor Theft 1 Pre-Trial Diversion for misdemeanor Racing on Highway, Possession of Marijuana and Driving While Intoxicated 1 Failed to assess and timely intervene when a ventilator patient became unresponsive 1 Charged with misdemeanor Elder and Dependent Adult Abuse 1 Deferred judgment for misdemeanor Assault 1 Deferred judgment for state jail felony Possession of a Controlled Substance - Cocaine 1 Convicted of class B felony Mail Fraud 1 Convicted of felony Conspiracy to Transport Undocumented Aliens 1 Deferred judgment for misdemeanor False Report to Police Office; state jail felony Forgery of Financial Instrument 1 Deferred judgment with state jail felony Credit/Debit Card Abuse 1 Deferred judgment for misdemeanor Attempted Tampering with Governmental Record 1 Deferred judgment for third degree felony Assault; misdemeanor Interfere with Duties of Public Servant 1 Convicted of misdemeanor Fail to Identify, Possession of Alcohol and two counts of Public Intoxication 1 Deferred judgement for third degree felony offense of Forgery 1 Deferred judgement for misdemeanor Theft of Property 1 Convicted of misdemeanor Driving While Intoxicated, two counts of Possession of Marijuana and two counts of Theft 2 Prior Board Order during Petitioner Process 1 Convicted of misdemeanor Driving While Intoxicated and three counts of Possession of Marijuana 1 Convicted of two counts of misdemeanor Driving While Intoxicated 1 Admitted to Grapevine Valley Hope Drug & Alcohol Treatment Center for Alcohol/Chemical Dependency 1 Entered Laurel Ridge Treatment Center for opiate dependence, depression and anxiety disorder 4 Disciplinary action taken by another licensing authority 4 Denial of Licensure 508 No Grounds for Denial/Youthful Indiscretion
199	<p>ENDORSEMENTS</p> <ul style="list-style-type: none"> 12 Disciplinary action taken by another licensing authority 1 Convicted of misdemeanor Driving Under the Influence and Driving While License Revoked/Suspended 1 Convicted of fourteen counts of misdemeanor Arkansas Hot Check Law 1 Convicted of misdemeanor Under Influence of a Controlled Substance, felony Burglary and four counts of Possession of a Controlled Substance 1 Convicted of misdemeanor Careless Driving and two counts of Driving Under the Influence; deferred judgment for felony Unlawful Possession of a Controlled Substance 1 1 Entered into the Recovering Nurse Program after admitting to diverting Oxycodone and Dilaudid 1 Convicted of misdemeanor Criminal Trespass; deferred judgment for Theft/Stolen/<\$300 14 Non disclosure of Criminal History or Disciplinary Action on Application for Licensure by Endorsement 2 Denial of Licensure 164 No Grounds for Denial

RN CORRECTIVE ACTION

Time frame: September 1, 2015, through November 30, 2015

27	<p>CORRECTIVE ACTION</p> <ul style="list-style-type: none"> 7 Non disclosure of misdemeanor Driving While Intoxicated 1 Non disclosure of misdemeanor Terroristic Threat Family 1 Failed to submit urine and blood specimens of a patient for laboratory testing, as ordered 1 Non disclosure of misdemeanor Assault Causes Bodily Injury - Family Member 1 Failed to document in the medical record that the patient refused to go to the local emergency room 1 Non disclosure of misdemeanor Criminal Trespass 1 Non disclosure of misdemeanor Disorderly Conduct 1 Erroneously documented that a patient had been seen and checked out before the patient had been seen 1 Non disclosure of pending misdemeanor Driving While Intoxicated and Theft >\$50 <\$500 2 Non disclosure of misdemeanor Obstructing Highway Passageway 1 Non disclosure of misdemeanor Battery - Simple 1 Non disclosure of misdemeanor False Report to Police Officer/SP INV/Law Enforcement Employee 1 Inappropriately sutured a laceration to the thumb of a patient when the surgeon staffing the emergency department offered to let her do so under his direction 1 Failed to administer a complete meningococcal vaccine 1 Failed to conduct a two person check prior to feeding a patient expressed breast milk 1 Non disclosure of misdemeanor Public Intoxication 4 Practiced Nursing without a valid license
5	<p>ENDORSEMENT</p> <ul style="list-style-type: none"> 1 Non disclosure of misdemeanor Worthless Check 1 Non disclosure of misdemeanor Criminal Trespass 1 Non disclosure of misdemeanor Battery - Simple 2 Non disclosure of misdemeanor Driving While Intoxicated
13	<p>APPLICANTS/ PETITIONERS</p> <ul style="list-style-type: none"> 1 Non disclosure of misdemeanor Retail Theft - Shoplifting 1 Non disclosure of misdemeanor Operated Motor Vehicle on Highway While Driver's License Revoked 4 Non disclosure of misdemeanor Driving While Intoxicated 1 Non disclosure of misdemeanor Passing a Bad Check 1 Practiced without a Valid Permit 1 Non disclosure of misdemeanor Possession of Alcohol by a Minor 1 Non disclosure of misdemeanor Underage Consumption 2 Non disclosure of misdemeanor Reckless Driving 1 Non disclosure of misdemeanor Theft of Property

RN DEFERRED DISCIPLINE

Time frame: September 1, 2015, through November 30, 2015

2	<p>REMEDIAL EDUCATION - DEFERRED DISCIPLINE</p> <ul style="list-style-type: none"> 1 Failed to document vital signs and respiratory rates 1 Was physically abusive to a patient by lifting her off the floor and threw her on the bed over the rails
1	<p>FINE WITH REMEDIAL EDUCATION - DEFERRED DISCIPLINE</p> <ul style="list-style-type: none"> 1 Failed to document notifying the House Supervisor that the bowl of patient was exposed and protruding from his abdominal wound

Texas Board of Nursing Statistical Report: FY 2016

v2.2

Measure ID	Measure Description	Totals FY'13	Totals FY'14	Totals FY'15	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Running FY 2015 Total
5	Education Statistics								
5.1	Nursing Jurisprudence Exam Statistics								
5.1.1	Total Nursing Jurisprudence Exam taken	30,816	46,193	41,696	8959				8959
5.1.1.1	Exam Not Completed (total)	1,715	14,324	6,553	136				136
5.1.1.2	Percentage Not Completed	5.57	27.6625	15.14	1.52				1.52
5.1.1.3	Did Not Pass the Exam (total)	2,384	3,910	5,529	1421				1421
5.1.1.4	Percentage Did Not Pass Exam	7.74	7.45	13.855	15.86				15.86
5.1.1.5	Exam Passed (Total)	26,717	27,960	28,814	7402				7402
5.1.1.6	Percentage Exam Passed	86.69	64.885	71.00	82.62				82.62
5.1.2	LVN-Candidate	6,630	8,632	7,846	1689				1689
5.1.2.1	Exam Not Completed	382	2,217	1,007	13				13
5.1.2.2	Did Not Pass the Exam	735	1,201	1,667	389				389
5.1.2.3	Exam passed	5,513	5,214	5,172	1287				1287
5.1.3	LVN-Endorsement	1,612	2,604	2,212	492				492
5.1.3.1	Exam Not Completed	113	958	433	5				5
5.1.3.2	Did Not Pass the Exam	346	415	559	160				160
5.1.3.3	Exam passed	1,153	1,231	1,220	327				327
5.1.4	RN-Candidate	12,470	18,694	15,334	3626				3626
5.1.4.1	Exam Not Completed	634	5,459	2,218	67				67
5.1.4.2	Did Not Pass the Exam	488	1,108	1,415	405				405
5.1.4.3	Exam passed	11,348	12,128	11,701	3154				3154
5.1.5	RN-Endorsement	9,256	15,000	14,464	2928				2928
5.1.5.1	Exam Not Completed	535	5,220	2,699	50				50
5.1.5.2	Did Not Pass the Exam	783	1,138	1,821	442				442
5.1.5.3	Exam passed	7,938	8,642	9,944	2436				2436
5.1.6	Refresher Course/Renewal Requirements	848	1,262	1,040	224				224
5.1.6.1	Exam Not Completed	51	470	196	1				1
5.1.6.2	Did Not Pass the Exam	32	48	67	25				25
5.1.6.3	Exam passed	765	744	777	198				198