



Nursing Care Quality Assurance Commission (NCQAC)
Discipline Subcommittee Agenda
August 23, 2022 MINUTES
Rescheduled from August 16, 2022
3:30 pm to 5:30 pm

Join the Meeting
from your computer, tablet or smartphone

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United States: +1 564-999-2000
Conference ID: 478 294 276#

Committee Members: Adam Canary, LPN, Chair
Sharon Ness, RN
Tiffany Randich, RN
Tracy Rude, LPN ad hoc *vacation*
Dawn Morrell, RN, BSN, CCRN
Quiana Childress, GCertHealthSc, BS, LPN
Judy Loveless-Morris, PhD, public member *absent*

Staff: Catherine Woodard, Director, Discipline and WHPS
Karl Hoehn, Assistant Director, Discipline - Legal
Grant Hulteen, Assistant Director, Discipline – Investigations and WHPS
John Furman, PhD, MSN, COHN-S, WHPS Liaison *vacation*
Teresa Corrado, LPN, Assistant Director, Discipline – Case Management/HELMS
Barb Elsner, HSC
Margaret Holm, JD, RN ad hoc
Rena Powell, Case Manager
Alicia Payne, WHPS
Adena Nolet, Compliance Officer

Public: Suzy Green, WorkWell NW
Patricia McCotter, McCotter Consulting, Board member WorkWell NW
Karen Schwisow, WorkWell NW
Phyllis Smith, WSNA

I. 3:30 pm opening – Adam

- Call to order – digital recording announcement
- Roll call

II. New members, member expectations, and consensus on meeting dates and time – Adam

- New member Quiana Childress, LPN. With the commission since December 2021; this is her first subcommittee meeting. She worked with an organization that provides in-home fertility and lab services. Has been a nurse for >15 years. New parent.
- Renae Powell new to case management. With Licensing for 15 years, complaint intake for 1.5 years, now in new role as discipline case manager.
- Meeting times and dates: third Tuesday every other month opposite commission meetings. Is this still good with everyone? Sharon, Dawn, Quiana, Tiffany, Adam all good with the meeting times.
- Highlights of commission members expectations from full document. Purpose from RCW 18.79.010. Catherine added the importance of signing up for hearings, participating in meetings. Staff does the commission's work.

III. June 21, 2022 Minutes– Adam

- In draft format until the commission approves at the September 2022 business meeting.
- Recommend moving forward to the September meeting. Everyone found them to be accurate.

IV. Performance measures – Catherine, Grant, Karl

- Investigations: Grant provided highlights. He went into a little more detail for the benefit of new people. June and July. Investigations queue is reduced to 411 in the queue in July. Grant explained the balance of performance measures.
- Legal: Karl provided highlights. Healthy average caseload. Approximately 45 per staff attorney. Just hired a second paralegal who will start in September. Worked a few special projects. Sometimes cases are late because of RCM delay; summer vacations are here.
- WHPS: Grant provided highlights. Important to note we have 245 in monitoring; approximately 40 fewer than a year ago. The program has reduced in numbers; not as many referrals. Grant explained the different categories of reporting. Graduations, discharges for other reasons, percent employed. Highlights from non-compliance report, graduation report.

V. Updated Personal Data Questions – Karl

- Karl pointed out the changes to the questions, such as adding a question about pending charges and investigations in addition to convictions. Nurses sometimes rush to endorse into WA before a conviction is finalized in another state. Expanded questions in a positive way.
- These questions will go into the HELMS system.
- If everyone agrees with changes, we will bring them to the September meeting. Sharon is good, Tiffany says great work, Dawn said they worked through Licensing subcommittee and Karl added edits, Quiana supports, Adam supports.
- Teresa explained that the need arose to submit these application questions soon to avoid complications in HELMS development.

VI. NCSBN Strategic Objective work: Guiding Nursing Philosophy, Principles, and Disciplinary Decision Pathway – Catherine

- Karl said these are in line with how we do our business. Consistent with just culture principles. Uses state of mind to determine intent.
- Add to our tool kit? Present to the commission meeting in September? Yes. Decision pathway reminds Sharon of the practice tree. Dawn: annual chair's meeting at NCSBN last week – reviewed then. Loved it! Common sense approach. Tiffany – agreed with Sharon and Dawn. This benefits us. Adam agrees. Quiana agrees – provides a pathway on how to evaluate decisions and be objective.

VII. WorkWell NW, Suzy Green – Catherine, Karl, Margaret

- Consider including classes in practice orders and Early Remediation action plans.
- Ms. Green introduced herself and her colleagues; her company works primarily with facilities, peer support programs, and health care professionals whose practice is impacted by stress and burnout.
- Ms. Green presented a PowerPoint describing the problem and their approach to it. It is a full course intended to be comprehensive.
- Margaret – can the program be shortened to less than eight weeks? No. What is the cost of the program? It depends. Needs to be an additional conversation. Mindfulness classes have a huge conversation component, which (for nurses) would have to be 1:1 with a facilitator. What they would propose would look different for nurses. Reimbursement from insurance? No. Margaret: instead of disciplinary like most of our classes, this is more rehabilitative and supportive.
- Adena: valuable and helpful for everyone. How many hours per week? Two hours. A nurse who is suffering from burnout would not likely sign up for more classes, so they would work to create a program that would tailor to the nurse's busy life. How do you know the nurse understands and gets it? Stress response and well-being index are measurable. No guarantee that the nurse will change.
- Dawn: Is travel involved? Over Zoom. Benefits to group and 1:1 work. Nurses must feel safe to disclose. Must be able to share in the group.
- Quiana: Not clear on how this could be structured, group v. 1:1. The study is based on 2014 data and the health care environment is much different in 2022. Used a night shift focus group and it changes when nurses are in a different environment. Nurses want to be able to sleep and spend time with family when they have off time. How many nurses would take advantage of this? Eight weeks is a long time. Suzy: The 2014 study is just theirs; there is a ton of other studies to support the concepts.
- Ms. Green recommends that if we think we'd like to explore further, we need to have a deeper conversation about it. Dawn agrees and wants to see if there's a way, we could make it fit in. She thinks it could fit well with WHPS. Quiana thinks not enough information yet. Sharon: Great in theory, but we need to discuss it more. Agrees with Dawn that it might be appropriate with WHPS. Margaret: We might look at it as conference opportunity.
- More discussion? Agreement for that. Catherine will coordinate future discussion.

VIII. WHPS Updates – Grant

- Genotox. Nurses struggling since COVID with testing. Genotox is DNA-based testing for urine collection. Starts with a buccal swab to set a DNA baseline, observed by RT personnel. Then testing is convenient as nurses buy the test kits and follow the instructions to submit to Recovery Trek. Tests for 110 substances. To date, 10% nurses in WHPS have started using Genotox and have provided positive feedback.

- Quiana asked about the downside. Grant said the same issues arise as if they went to a collection site. Nurses cannot substitute urine because the DNA will not match. Technology is advanced.

IX. Work plan and strategic plan review – Adam, Catherine

- Voluntary participation v. alternative to discipline in WHPS
- Dawn: where is our safety for the patients if the employer doesn't know and is still practicing. Grant: most voluntary participants have a force on them to join the program. Most of that force is from the employer, so the employer already knows. Dawn: thinks we don't have to work so hard at increasing voluntary participation.
- Shift to more education to inform and encourage alternative to discipline.
- Quiana thinks there's an advantage to education. What are the barriers? Commitment, cost, and...
- Margaret: last conference did not concentrate on ATD, but only SUD. Kick it off and package this with the wellness program.
- Dawn: should be focused on employers to get the nurses in ATD. They don't have enough knowledge. Make employers aware. They just don't know. There's a shift from employers to keep them and support nurses because they need them. Grant: when nurses are in the program, they are safest because they're monitored. Quiana: important to stay employed.
- DSC agrees to shift the focus to ATD and make a concerted effort to educate employers.

X. Highlights of NCSBN Annual Meeting – Adam, Dawn, Tracy, Grant

- Moved to next meeting.

XI. Public comment – Adam

- Limited to two minutes per speaker
- No comments.

XII. Anything for the good of the order? – all

- Refers to the portion of the agenda during which members may make statements or offer observations about the character or work of the subcommittee without having any particular item of business before the meeting.

Adjourned at 5:37pm