

Consistent Standards of Practice Sub Committee June 4, 2024, 12 p.m. to 1 p.m.

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Committee Members: Ella Guilford, MSN, M.Ed., BSN, RN, Chair

Quiana Daniels, BSN, RN, LPN, Member Heleena Hufnagel, MBA-HCA, BS, Member

Tiffany Randich, RN, LPN, Pro Tem

Diana Meyer, DNP, RN, NEA-BC, FAEN, Pro Tem

Staff: Shana Johnny, DNP, RN, Nursing Practice Consultant

Margaret Holm, JD, RN, Nursing Practice Consultant Marlin Galiano, MN, RN, Nursing Practice Consultant

Seana Reichold, Staff Attorney Luis Cisneros, Staff Attorney

Dennis Gunnarson, Administrative Assistant

Deborah Carlson, MSN, RN, Nursing Practice Director

Rebecca Nylin, MNc, RN

I. Opening:

Committee Chair Ella Guilford called the meeting to order at 12:03 p.m. Subcommittee members and staff were introduced. After introducing subcommittee members and staff, Ella Guilford read the Public Disclosure Statement.

II. Standing Agenda Items

A. Announcements/Hot Topics:

The CSPSC will use the consent agenda process for routine document revision items that do not require discussion or substantive changes. This process will help the subcommittee streamline action items into a single consensus for better efficiency.

We have grouped commonly asked questions (CAQ) revisions into one agenda item rather than going through each document separately; therefore, we will not discuss each item separately. We will allow public comment before the consent agenda items. Does anybody have any questions concerning this?

Deborah Carlson: We need to vote on the Consent Agenda.

Diana Meyer/Quiana Daniels/Affirmed

B. Public Comment:

Ella Bernita Guilford: Public comments?

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Gail McGaffick: I want to acknowledge the authors for all their hard work. Kat and I were pleased to be able to be the editors.

C. Presentations/Webinars:

Ella Guilford: The Joy of Nursing Seminar is on October 2nd.

D. Draft Minutes:

Ella Guilford: Our next item is a review of the draft minutes.

Diana Meyer/Quiana Daniels/Affirmed

II. Old business

A. Informed Consent Resource Update -Shana

- Our current cosmetic advisory opinion (AO) needs to address issues that have surfaced with informed consent.
- WABON approved drafting an AO on informed consent in November 2023. We held
 public workshops, and in January more workshops were scheduled. However, after a
 thorough discussion and further research of the nursing regulations, we stopped working on
 creating a new informed consent advisory opinion because the nursing regulations do not
 directly address this topic.
- We are reworking the strategy for developing informed consent, including AOs and CAQs.
 A new cross-agency task force has been developed to discuss and strategize on umbrella
 topics that include informed consent, such as Aesthetics. We invite you to be part of this
 effort and recommend rescinding the informed consent AO.

Quiana Daniels: So, we're resending the informed consent. Is the task force looking at something along the lines of general training?

Deborah Carlson: They're probably going to have to be legislation. It's not just us. It's national. That's why they're doing an Inter-Agency Task Force.

Diana Meyer: This is a great opportunity to make it solid, at least for the State of Washington. The nurses that are performing these procedures that require informed consent are the ones responsible for the informed consent.

Deborah Carlson: Some are saying that the person that's performing that procedure should be the one that is getting the informed consent. Verbal, too. I wouldn't doubt there'd be something around education or training.

Ella Bernita Guilford: We used to just make sure the physician had talked with the patient, and we got the signature, and they would sign before they did the procedures.

Gail McGaffick: I'm very interested in tracking the work of the interagency task force. How do you see that folks like us could be involved or stay informed on what's going on?

Deborah Carlson: I can let Alison know that you're you have an interest. Right now, it's just a discussion internally with the Medical and Pharmacy Commission to figure out what to do, but I'm sure there'll be something public.

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Quiana Daniels / Diana Meyer / Affirmed

B. CAQ Drafts – Debbie

Ella Bernita Guilford: We want to pull #4 and# 5 from the consent agenda to the regular agenda for discussion. Does anybody have any questions or concerns about us moving this to the agenda? Can I have a motion to move these two documents to the consent agenda?

Diana / Quiana / Affirmed

Ella Bernita Guilford: Let's have a motion to move the other 13 documents to the WABON meeting.

Diana / Quiana / Affirmed

IV. New Business:

A. Advisory Opinion Drafts

AO 14.01 and the revision (14.02). Delegation of glucose monitoring to nursing assistance (NA) and healthcare aids (HCAs) in the community-based setting and its revision - Debbie

- In 2019, the Department of Social and Health Services (DSHS) asked the BON to write an advisory opinion (AO). Then the law came out, so we wrote this. DSHS wanted to make sure that delegating insulin was okay, and the BON said yes.
- With the change in the new blood glucose (BG) law and the AO being five years old, we have initiated the process of updating it. The revised AO will specify that BG tests can only be conducted in community-based home settings. Our legal team is currently reviewing the update, which will address the delegation in the community and the supervision of BG tests. The new rule is expected to be in effect by July 1.

Diana Meyer: I'm not the expert so maybe we should defer to it our legal experts here with us, but I still don't see that this changes the intent, so it didn't need to be pulled from the consent agenda, especially since that information came in late.

Deborah Carlson: We do get the question about weight loss and those getting insulin for some kind of adrenal disease. We should also consider location. It goes with an AO I discussed, so we should send them all simultaneously. We should hold back on any of the questions about non-insulin until we can get that clarified.

Diana Meyer: You did such a great job describing the different levels of supervision in one of the CAQs. And then in other documents, we simply say, there needs to be supervision. So, I think we need to identify what level of supervision is needed when we say there needs to be supervision.

Quiana Daniels: It's great for the nurse delegator, but also the person who's receiving delegation. They need to know what their role is in the process.

Janet Wakefield DSHS: I am asked "Can we delegate this?" All the time. The latest issue is the insulin pump and the level of supervision.

Deborah Carlson: Sometimes they're even done with Telemedicine.

B. Quality Improvement/CSPSC Prioritization Matrix Update - Shana

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We are prioritizing tasks and activities for CSPSC. The prioritization matrix is in its final testing phase. We are consulting with Diana Meyer. For the next steps, there will be a small workgroup meeting to further test this tool.

V. Public Comment Ella Guilford opened the floor for additional comments.

VI. Ending Items

- Move the draft minutes to WABON for review,
- Rescind BON approval for the informed consent AO and postpone the development of the Informed Consent CAQs,
- Move the consent agenda CAQs to the BON meeting for review,
- Bring the AO14.02—Delegation of BG testing, monitoring, and insulin injection back to the August CSPSC meeting.
- Ella Bernita Guilford: Our next meeting date, August 6th, 2024.

Adjournment 12:47 PM