

WASHINGTON STATE BOARD OF NURSING (WABON)

Consistent Standards of Practice Sub Committee Minutes August 6, 2024 12 p.m. to 1 p.m.

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United States: +1 (253) 215-8782 Meeting ID: 863 7463 1831

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

I. Opening

- a. Ella called the meeting to Order at 12:01
- b. Ella read the Public Disclosure Statement
- c. Ella/Shana introduced members and staff.

II. Standing Agenda Items

Ella: We have the practice performance measures form and the SharePoint transition. Shana, did you want to say anything about that?

Shana: We are transitioning a lot of our documents and projects. Even the CSPSC meeting minutes and agendas will be on SharePoint. We're transitioning to SharePoint with the goal of doing that by the end of August. You will receive orientation for how to access the CSPSC Agenda and packet.

Deborah - WABON: Josh who is leading this work said he will be doing individual orientations. It will be different than the Y/X drive that you're using now.

Ella: She's sending out links so you can make an appointment with them. Deborah - WABON: We're still having that interagency task force meeting for aesthetics and IV hydration. You know, that's why we put our informed consent Advisor Opinion on hold and waiting for recommendations from that interagency task

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force, and we've broken out into, I want to say 3 or 4 subgroups working on different topics.

Gail McGaffick: Hey, this was just perfect timing, because I had a follow up question for Debbie. I'm curious about this inter-agency task force on informed consent. And I wonder if you could provide any more detail about the four subgroups.

Deborah: There's one on entrepreneurship regarding these cosmetic places opening up medical spa businesses. Then there's one specifically on informed consent. I don't remember the other two.

Gail: If there's an opportunity, either, maybe before the next meeting, if you could send an email. I'm interested in tracking this, and I know that WSHA would as well. Deborah: Our Jurisprudence (JP) module is in the process of being revised. It's going to sustain significant changes because of the nurse licensure compact. The JP module is not active right now. We've decided to just not have it open for use now, because the licensing section is going to be so different.

Ella introduced the WABON Nursing Conference on **October 2nd**, and the topic will be Voice and Vision, the Possibilities. Next, the Washington State presentation Webinar.

Shana: Margaret, I, and Marlin have a presentation for WSNA tomorrow for a large swath of nurses from all over.

- a. Ella opened the floor for public comment
- b. Ella introduced the **June 4th** minutes for discussion and approval. We will send them to the next BON meeting. June 4th meeting minutes approved
- III. Draft minutes approved.
- IV. Old Business
 - a. CAQ Drafts Debbie

Ella: Next item on the agenda is old business.

Deborah: We had all those commonly asked questions (CAQs) the board and approved. Two were kept out because there was this discussion about the current advisory opinion that says the nurse can delegate giving insulin, but it doesn't say non-insulin. Our advisory opinion was done a few years ago that said they could also give non-insulin for treatment of diabetes. We were going to be revising this, there was a question about whether we really could use the word non-insulin for treatment of diabetes because of the way the way the law is written. I took out non-insulin and just left insulin. Gail had a couple of minor clarifications that are not in the packet. The changes are just grammatical changes.

- RN Delegation of Blood Glucose Testing/Monitoring and Administration of Insulin/Non-Insulin for Treatment of Diabetes Mellitus to Non-Credentialed Staff in Schools, Kindergarten-Twelve (K-12) Grades, Public and Private.
- ii. RN Delegation of Blood Glucose Testing/Monitoring and Administration of Insulin/Non-Insulin for Treatment of Diabetes

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Mellitus to the Nursing Assistant-Registered/Nursing Assistant Certified (NA-R/NA-C) or Home Care Aide-Certified (HCA-C). Ella: Shana wanted to say something about the consent agenda?

Shana: I think Debbie really touched on this earlier, and I think you did. And then Gail, of course, had her questions about the interagency task force. I just want to give a little bit of background to the public. The conversation around aesthetics has really shapeshifted due to a lot of depth and complexity to a lot of these issues that keep arising, so a task force was recommended. We brought all these internal agencies first together. They're prioritizing these topics that cascade down from aesthetics. One of those being informed consent. We had drafts in place, but we've placed everything on hold. The task force is really there to help us. Other agencies, the pharmacy and the Medical Board, all have a piece of this.

Deborah: The questions we are getting are difficult to answer because there are no laws or rules around medical spas and cosmetic procedures.

Ella led the vote to approve the CAQS. Approved.

V. Ella presented the new business.

a. Quality Improvement/CSPSC's Prioritization Work Update
Shana: This is a prioritization matrix. And we're at this stage now, where we're
really refining and testing it so that it can really enhance our ability to
prioritize. Our work activities, the requests that are made to the CSP. The
requester can be an internal agency or a public member, and they can fill it out
to ask. You know whatever question is supposed to be practice related. We put
weight to the actual inquiry, the weight having to do with risk. Is this a risk to
the public, and so forth. Thank you, Dennis and Marlin. It calculates the
weights that we have placed to the actual task. To the right is our priority
value.

The higher number is more of a priority than the lower number. We're looking at improving how we respond to the public and being more efficient in our work. We're in the testing phase. The next step is we will have just a very small work group come together to see

Quiana: I'm loving to see how everything has been organized and I'm loving the scale that let's see what we need to prioritize.

b. Shana: Diane was our consultant. She has had some great ideas. And certainly, Marlin and Dennis developed this form.

VI. Ending Items

- a. Ella presented the meeting evaluation.
- b. Date of Next Meeting October 1, 2024