Alabama Board of Nursing
Update - Focus on the LPN

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DIRECTOR OF QUALITY MANAGEMENT
ALABAMA BOARD OF NURSING
STATEMENT OF DISCLOSURE

➢ I am employed as the Director of Quality Management at the Alabama Board of Nursing-a state regulatory agency

➢ I have no financial relationship with the Alabama State Nurses Association

➢ I am receiving no fee for speaking at today’s conference
Demographic data were obtained from a renewal questionnaire added to RN and LPN renewal applications to elicit information about the nursing workforce - data is the property of the Alabama Board of Nursing, LPN data were obtained from the 2015 renewal.

The questions are part of the national workforce dataset and were approved by the Board of Nursing with input from Alabama Health Action Coalition.

Role and functions obtained from Alabama Administrative Code 610-x-1 through 13, www.abn.alabama.gov.
AGENDA

➢ Review of data from 2015 LPN renewal

➢ The Role and Function of the Alabama Board of Nursing

➢ Trying to simplify the Alabama Nurse Practice Act
Objectives

1. Be able to discuss some statistics with regard to LPNs in the State of Alabama

2. State the role/function of the Alabama Board of Nursing

3. Discuss the Alabama Nurse Practice Act
Brief History

➢ WWII-created a shortage of nurses in Alabama

➢ 1945-a study determined a second level of practitioner was needed

➢ 1946-LPNs began working in Alabama-first accepted by waiver

➢ First training schools in Birmingham, Gadsden and Dothan

➢ Currently 21 LPN schools in Alabama
Statistics are like bikinis. What they reveal is suggestive but what they conceal is vital. —Aaron Levenstein, Former Business Professor
Information about the nursing workforce is important for determining future workforce needs.

Demographic questions are added to RN and LPN renewal applications to elicit information about the nursing workforce.

The questions are part of the national workforce dataset and were approved by the Board of Nursing with input from Alabama Health Action Coalition.
## Daily Statistics

<table>
<thead>
<tr>
<th>License Type</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Registered Nurses</td>
<td>78298</td>
</tr>
<tr>
<td>Licensed Practical Nurses</td>
<td>16980</td>
</tr>
<tr>
<td>CRNPs in collaborative practice</td>
<td>3591</td>
</tr>
<tr>
<td>CNMs in collaborative practice</td>
<td>13</td>
</tr>
<tr>
<td>Active CRNAs</td>
<td>1695</td>
</tr>
<tr>
<td>Active CNSs</td>
<td>81</td>
</tr>
</tbody>
</table>
Strength in Numbers!

In the State of Alabama—

- 95,218 nurses
- 16980 of these are LPNs

LPNs represent 18% of all nurses in the State!!

Translates into major impact on healthcare in Alabama
Total Number of LPNs who renewed licenses in 2015: 15,300

Not all LPNs renewing licenses responded to all demographic questions.
## Gender

<table>
<thead>
<tr>
<th></th>
<th>Number</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>745</td>
<td>5.02</td>
</tr>
<tr>
<td>Female</td>
<td>14,108</td>
<td>92.2</td>
</tr>
<tr>
<td>No response</td>
<td>447</td>
<td>2.9</td>
</tr>
</tbody>
</table>
# Average Age of LPN Licensees

<table>
<thead>
<tr>
<th>Age Range</th>
<th>Number</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>18 - 29 years</td>
<td>1,535</td>
<td>10.0</td>
</tr>
<tr>
<td>30 – 39 years</td>
<td>3,259</td>
<td>21.2</td>
</tr>
<tr>
<td>40 – 49 years</td>
<td>4,084</td>
<td>26.5</td>
</tr>
<tr>
<td>50 – 59 years</td>
<td>3,900</td>
<td>25.3</td>
</tr>
</tbody>
</table>

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<thead>
<tr>
<th>Age Range</th>
<th>Number</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>60 – 69 years</td>
<td>2,277</td>
<td>14.8</td>
</tr>
<tr>
<td>70 – 79 years</td>
<td>328</td>
<td>2.1</td>
</tr>
<tr>
<td>80 – 89 years</td>
<td>22</td>
<td>0.1</td>
</tr>
<tr>
<td>90 + years</td>
<td>1</td>
<td>0.0</td>
</tr>
</tbody>
</table>
What’s our LPN age?

<table>
<thead>
<tr>
<th>Age Range</th>
<th>Numbers</th>
</tr>
</thead>
<tbody>
<tr>
<td>50 – 59 years</td>
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<td>328</td>
</tr>
<tr>
<td>80 – 90 years</td>
<td>23</td>
</tr>
<tr>
<td>TOTAL</td>
<td>6528 LPN's</td>
</tr>
</tbody>
</table>

Percentage of LPN work force over the age of 50

43%

Likely decreased since 2015 due to 1707 more LPNs
Who are our LPNs?

- 93.3% - Black/African American and White/Caucasian
- 1.8% - Combined - Native American, Asian, Native Hawaiian/Pacific Islander, Hispanic and Other
- 4.5% - no response
Employment

Actively Employed in Nursing:
- Yes: 12,486 81.6%
- No: 2814 18.4%

Employed:
- Full-Time: 10,399 68.8%
- Part-time: 1,228 8.0%
- Per Diem: 321 2.1%
- No response: 3,352 21.9%
Where do we work?

<table>
<thead>
<tr>
<th>Location</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>NH/Extended Care/Assisted Living</td>
<td>34.0</td>
</tr>
<tr>
<td>Hospital</td>
<td>10.2**</td>
</tr>
<tr>
<td>Home Health</td>
<td>6.5</td>
</tr>
<tr>
<td>School Health</td>
<td>5.0</td>
</tr>
<tr>
<td>Community Health</td>
<td>3.4</td>
</tr>
<tr>
<td>Correctional</td>
<td>3.2</td>
</tr>
<tr>
<td>Other</td>
<td>15.5</td>
</tr>
<tr>
<td>No Response</td>
<td>17.5</td>
</tr>
</tbody>
</table>
## LPNs planning to Retire

<table>
<thead>
<tr>
<th>Time Frame</th>
<th>Number</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Within 5 years</td>
<td>1,699</td>
<td>11.1</td>
</tr>
<tr>
<td>Within 10 years</td>
<td>1,702</td>
<td>11.1</td>
</tr>
<tr>
<td>Within 15 years</td>
<td>1,098</td>
<td>7.2</td>
</tr>
<tr>
<td>Within 20 years</td>
<td>1,985</td>
<td>13</td>
</tr>
<tr>
<td>&gt; 20 years</td>
<td>2,820</td>
<td>18.4</td>
</tr>
<tr>
<td>Not Planning to Retire</td>
<td>4,730</td>
<td>30.9</td>
</tr>
<tr>
<td>No answer</td>
<td>1,266</td>
<td>8.3</td>
</tr>
</tbody>
</table>
22.2% of the LPNs plan to retire within the next 10 years (about 3,400)
Workforce Concerns Continued

➢ 22.2% plan to retire in the next 10 years (3,401)

➢ The number of LPNs aged 18-29 is comparatively low (1,535)
Students Entering the LPN Workforce

Given the retirement data-

Will we be replacing retiring LPNs over the next 10 years?
## Workforce Replacement

<table>
<thead>
<tr>
<th>YEAR</th>
<th>LPN STUDENTS PASSING NCLEX</th>
<th>% OF TOTAL LPNs</th>
</tr>
</thead>
<tbody>
<tr>
<td>2015</td>
<td>817</td>
<td>5%</td>
</tr>
<tr>
<td>2016</td>
<td>890</td>
<td>6%</td>
</tr>
</tbody>
</table>

Given above data, growth should outpace attrition!
Well Prepared!

21 LPN schools in the State of Alabama
Alabama Pass Rate = 93%
National Avg. = 83.8%
The Alabama Board of Nursing:

Role and Function
Alabama Board of Nursing

- Legislature passed first law establishing Board in 1915
- Initial approach was to standardized nursing education requirements
- Voluntary registration
- Practical nurses first came into being after World War II
Composition of the ABN

- Statute Establishing ABN is The Alabama Nurse Practice Act
- 13 members
- Appointed by the Governor for 4 year terms – max of 2 consecutive terms or 8 consecutive years
Composition of the ABN Cont’d

- **8 RN Positions**
  - 3 (Three) must be from practice or administration
  - 3 (Three) must be from nursing education
  - 2 (Two) must be advance practice nurses

- **4 LPN Positions**
  - 2 Nominated by Licensed Practical Nurses Association of Alabama (LPNAA)
  - 2 Nominated by Alabama Federation of Licensed Practical Nurses (AFLPN)

- **1 Consumer**
  - No financial gain from health care and not previously a health care professional
Mission of the ABN

To safeguard and promote the health, safety and welfare of the public through licensing and approval of qualified individuals and adopting and enforcing legal standards for nursing education and nursing practice.
Functions of ABN: Rulemaking & Adjudication of Discipline

- Approval to practice (Newly licensed, endorsement and renewal)
- Establishment and Enforcement of Standards of Practice
- Establishing and enforcing Continuing Competency
- Removal from Practice
Attorney is a Deputy Attorney General
Legal Foundation of Nursing Practice

Nurse Practice Act: statutes passed by legislature - broad language - provides authority for Board to pass regulations.

Deals with broad subject area - Licensing, Continuing Education, etc.

ABN Administrative Code: regulations passed by Board to clarify, amplify, and explain the statutes.

Deals with narrower subject area - License required - mandatory renewal every two years - 24 CEUs required to renew, etc.
How do you access the Alabama Nurse Practice Act and Administrative Code?

WWW.ABN.ALABAMA.GOV

> NURSES
> LAWS

>NURSE PRACTICE ACT OR
> ALABAMA ADMINISTRATIVE CODE
Practice of Practical Nursing

- The performance, for compensation, of acts designed to
  - Promote and maintain health
  - Prevent illness and injury
  - Provide care utilizing standardized procedures and the nursing process
    - Including administering medications and treatments

Nurse Practice Act Section 34-2-1-(3)(b)
Practice of Practical Nursing Cont’d

- Under the direction of a
  - Licensed professional nurse
  - Licensed or otherwise legally authorized physician

Or

- Licensed or otherwise legally authorized dentist

Nurse Practice Act Section 34-2-1-(3)(b)
ABN Function:
Removal from Practice
&
Readmission to Practice
Complaints to ABN

- Must be in writing
  - Email (abn@abn.state.al.us)
  - Letter (Address on back of license card)
  - Form (website under Forms & Other Information)
    - Employer - Employers Report of Possible Violation Form
    - Consumer - Consumers Report of Possible Violation Form
    - Self Report
Complaints Cont’d

- Can be anonymous
- Must contain sufficient information to identify respondent (nurse)
Process

- Docketed in database
- Reviewed by Executive Officer
- Notice of Investigation sent to Nurse
- Acknowledgment sent to Complainant
- Subpoena(s) issued
- Investigated
NON-Discipline Options

- No violation: letter of closure
- No provable violation but conduct inappropriate: Letter of Admonishment
- VDAP
  - Drugs/Alcohol abuse & dependency
  - Mental Illness
  - Impairment
Types of Discipline

- Reprimand and Fine
- Probation
  - Fine
  - Until conditions met
  - Specific time period (1-5 years)
Types of Discipline Cont’d

- **Suspension:**
  - Fine
  - Until conditions met
  - Certain time period
  - One year: automatic revocation clause in consent orders if suspension extends beyond 12 months

- **Revocation**

- **Voluntary Surrender:** Self-revocation
Top Substandard Practice Violations

- NEGLIGENCE
- Combined*
- Diversion/Theft
- Scope of Practice
- Documentation
- Unprofessional Behavior/Conduct
Negligence

IGNORING ORDERS

NOT GIVING THE RIGHT MEDICATION

NOT FOLLOWING ORDERS WITH RESPECT TO MEDICATIONS
Documentation
Grounds for Disciplinary Action regarding Documentation

Administrative Code § 610-X-8-.03(6g,h)

- Failure to make entries
- Destroying or altering entries
- Pre-charting - Charting BEFORE assessment or delivery of care
  - Medication
  - Treatment
  - Assessment
Traditional......

- If you didn’t chart it, it wasn’t done.
If you didn’t do it, DON’T chart it!
Fraudulent Documentation

Examples

- **PRE-CHARTED** Patient transferred to ICU @ 1AM;
  I&Os already totaled for 6AM, and
  Assessments had already been charted for 3AM & 5AM

- **PRE-CHARTED & Fraudulent Documentation**
  Pre-charted administration of Insulin and falsified blood glucose values on MAR x 3 patients
Unprofessional Behavior/Conduct

CAN TAKE MANY FORMS:

- PHYSICAL ALTERCATION - TO PATIENT OR STAFF MEMBER
- BEHAVIOR DEEMED BY FACILITY AS A TERMINABLE OFFENSE - SLEEPING ON THE JOB, ABUSIVE OR INAPPROPRIATE BEHAVIOR/LANGUAGE
- ALL VIOLATIONS OF PRIVACY/CONFIDENTIALITY
Privacy/Confidentiality Violation

Example

- Shared knowledge about a particular patient’s medical condition with her women’s church group.
Scope of Practice
Includes but is not limited to:

- Educational preparation, initial and continued
- License status....
- State and federal statutes and regulations
- *(Facility/agency policies & procedures)*
- Nursing Experience
- Demonstrated competence
- Knowledge, skills and ability to manage risks and potential complications
Scope of Practice Violation

Example

- Performed sharp debridement on patient’s heel
Scope of Practice Violation & Diversion/Theft

Example

- Took IV Fluid (D5LR) home from hospital and administered to her 15 year old daughter without involvement of MD:

- Daughter later airlifted to Pediatric ICU
Scope of Practice Violation
(Also Diversion & Theft)

Example

- Took injectable medication (Phenergan) belonging to patient and used it to self-medicate without MD order.
Frequent SOP Misconceptions often resulting in Disciplinary Action

From the Nurse
- “Because a doctor told me to do a procedure/give a medication, it is OK.”

From the Physician
- “Because I told the nurse to do a procedure/give a medication, it is OK.”
Standardized Procedures

Administrative Code § 610-X-6-.05

FOR PRACTICE AND THOSE PROCEDURES BEYOND BASIC EDUCATION!
Components of Standardized Procedure

- Policy & Procedure
- Organized Program of Study
- Supervised Clinical Practice
- Demonstration of Competency
  - Initially
  - At Periodic Intervals
REMINDER: Standardized Procedures are Specific to the Approved Facility & Application

- Nurse works @ 2 facilities: Able to pull PICC lines @ Facility A but unable to do this procedure @ Facility B

- Facility A’s standardized procedure is for the nurse to perform arterial sticks in the SICU and ED: Nurse cannot perform the procedure in the Neuro ICU. (any area NOT included in SP)
Other Potential Violations

- Improper Delegation
- Improper Supervision
- Abandonment
- Illegal Practice
- Substance Abuse
- Sexual Misconduct
- Bad Checks
- Probation Violations
- Violations of VDAP Contract
- CE Violations
- Arrest/Convictions
- Discipline in other states
Other Roles

➢ Resource for nurses
  ➢ Educational opportunities
    ➢ Free CE credits from the board
    ➢ Free CE from outside sources
    ➢ ANRC

➢ Communication
  ➢ Newsletter, Facebook, list serve
  ➢ Leadership Development Academy-coming soon
Individual Nurse’s Responsibility

- Accept individual responsibility and accountability for timely reporting of:
  - illegal,
  - substandard,
  - unethical,
  - unsafe, or
  - incompetent nursing practice

**DIRECTLY** to the Board of Nursing.

Administrative Code § 610-X-6-.02(10)
Questions?
Don’t Forget!!

- LPN renewal is September 1, 2017 - November 30, 2017

- Late renewal (additional fee) - December 1, 2017 - December 31, 2017
Thank you for listening and thank you for what you do for the patients in the State of Alabama!