



license and attaching conditions. This bill would shorten the renewal period to three years and delete the provision specifying the Board's discretionary power to act beyond the delinquent renewal period.

Finally, this bill would revise certain administrative functions and responsibilities of PELS. [A. Inactive File]

AB 1363 (Lee). Existing law provides that if the county surveyor finds that the record of survey does not comply, as specified, it shall be returned to the person who presented it, together with a written statement of the changes necessary. Existing law also provides that the licensed land surveyor or registered civil engineer submitting the record may then make the agreed changes and note on the map those matters which cannot be agreed upon, and resubmit the survey. As introduced March 3, this bill would require the licensed land surveyor or registered civil engineer to make the agreed changes and note on the map any specific matters which cannot be agreed upon, before resubmission. The bill would also provide that the land surveyor or civil engineer and county surveyor shall not be prevented from resolving their differences prior to resubmission.

The bill would also provide that a record of survey may also be prepared and filed for the express purpose of (1) rescinding the effect of prior matters of disagreement, as specified, or (2) rescinding the effect of prior county surveyor opinions, as specified. The bill would provide that a record of survey amended and filed pursuant to this provision shall include an explanation of how these matters of disagreement or opinion were resolved. [S. B&P]

SB 296 (Ayala). Existing law permits a licensed land surveyor to offer to practice, procure, and offer to procure civil engineering work incidental to his/her land surveying practice, even though he/she is not authorized to do that work, provided all civil engineering work is performed by or under the direction of a registered civil engineer. As introduced February 17, this spot bill would make technical, nonsubstantive changes to existing law. [S. RIs]

AB 358 (Eastin). Existing law requires that all contracts awarded by any state agency, department, officer, or other state governmental entity for construction, certain professional services, material, supplies, equipment, alteration, repair, or improvement have statewide participation goals of not less than 15% for minority business enterprises, not less than 5% for women business enterprises, and not less than 3% for disabled veteran business enterprises. Existing law defines

minority business enterprise, women business enterprise, and disabled veteran business enterprise for purposes of these provisions.

As amended March 24, this bill would add to these definitions the requirement that if a business concern performs engineering or land surveying services, the persons who control the management and daily operations of the business shall be appropriately licensed or registered to render these services. In addition, the bill would require that if a business concern performs more than one of these professional services, a person who controls the management and daily operations of the business need only be licensed or registered to render any one of these individual services. [A. U&C]

RECENT MEETINGS

At its June 4 meeting in Irvine, PELS elected Richard Johnson to serve as 1993-94 Board President, replacing Larry Dolson; PELS also elected Sharon Reid to serve as Vice-President, replacing Johnson. Johnson, an electrical engineer who has served on PELS since 1989, is the founder, president, and chief executive officer of RAJ Information Networks, Inc. and Ubiquinet, Inc. Reid, who has served as a public member on PELS since 1983, is Deputy Director of the San Diego County Department of Public Works.

At its July 16 meeting in San Diego, the Board unanimously approved a motion to increase the examination time of its seismic principles and engineering surveying examinations from two hours to two and one-half hours each, effective October 1993; this action came in response to applicants' complaints that the Board did not provide sufficient time to complete the examinations.

At its August 27 meeting in Sacramento, PELS unanimously approved a proposal to delay, following the grading of examinations, making public the list of approved registrants, licensees, and certificants until after individual notice is received; this action follows the Board's release of an erroneous pass list for the civil engineering examination, which resulted in several candidates receiving incorrect information as to whether they passed the examination. Staff reported that the Board's computer program has been modified to prevent such an error from recurring. In addition, the Board decided that in the future, it will approve the passing scores and registration for those individuals who meet all the legal requirements and adopt the list of names at the Board meeting following exam administration; the list will then be made available four days after individual mailings.

FUTURE MEETINGS

January 7 in Ontario.
February 25 in Sacramento.
April 8 in San Diego.
May 27 in Sacramento.

BOARD OF REGISTERED NURSING

Executive Officer:
Ruth Ann Terry
(916) 324-2715

Pursuant to the Nursing Practice Act, Business and Professions Code section 2700 *et seq.*, the Board of Registered Nursing (BRN) licenses qualified RNs, certifies qualified nurse-midwifery applicants, establishes accreditation requirements for California nursing schools, and reviews nursing school curricula. A major Board responsibility involves taking disciplinary action against licensed RNs. BRN's regulations implementing the Nursing Practice Act are codified in Division 14, Title 16 of the California Code of Regulations (CCR).

The nine-member Board consists of three public members, three registered nurses actively engaged in patient care, one licensed RN administrator of a nursing service, one nurse educator, and one licensed physician. All serve four-year terms.

The Board is financed by licensing fees, and receives no allocation from the general fund. The Board is currently staffed by 90 people.

During the summer, BRN welcomed three new members: Myrna Allen (nursing service administrator member); Mary Jo Gorney-Lucero (nurse educator member); and Michael Moran (public member).

MAJOR PROJECTS

BRN Executive Officer Announces Retirement. At the Board's June 10 meeting in San Diego, Catherine Puri announced her retirement as BRN's Executive Officer; Puri had worked for the Board for over nine years. BRN selected Ruth Ann Terry, then a Board Supervising Nursing Education Consultant, to serve as Acting Executive Officer until Puri's replacement was named. Minimum qualifications for the position include a master's degree in nursing; seven years of active nursing experience, at least five years of which must be in an administrative or teaching position at a school of nursing; comprehensive knowledge of the principles of nursing education and practice; and working knowledge of federal and state statutes and regulations pertaining to nursing.

At a special September 22 meeting in Sacramento, BRN interviewed candidates



for its EO position, including Ruth Ann Terry. At its September 24 meeting, BRN announced its selection of Terry as its new EO. Terry has been a Supervising Nursing Education Consultant with BRN for over nine years; previously, she was a Nursing Education Consultant at the Board of Vocational Nurse and Psychiatric Technician Examiners. As an assistant professor at UC San Francisco, she taught undergraduate and graduate courses in community health, nursing health planning, and health education. Terry holds a bachelor of science degree in nursing from San Francisco State University and a master's degree in public health from UC Berkeley.

BRN Adopts Position Statement Regarding Acts of Violence Against Health Care Workers and Patients. At its June meeting, BRN discussed the increased incidence of violence occurring in the hospital setting, especially in emergency rooms. In response, BRN adopted a position statement which encourages hospital administrations and staff to form task forces to evaluate each institution's current safety features, and institute appropriate policies and environmental changes that will increase safety for health care workers and patients while providing quality, non-discriminatory health care to the people of California. The statement also notes BRN's support for the creation of "safe zones" near health care facilities; these safe zones would specify areas in which more stringent criminal penalties could be levied against individuals who commit violent acts. The Board hopes these safe zones will function as successfully as those which have been established near public facilities such as police stations.

BRN Approves Clinical Recency Requirement for Nurse-Midwife Certification. At the Board's September meeting, BRN's Nursing Practice Committee expressed concern that past nurse-midwife certification applicants lacked recent midwifery experience; some had not practiced midwifery during the ten years preceding their application for certification. The Committee noted that there is no recency requirement for any of the six methods of certification as a nurse-midwife. As a result, BRN adopted a clinical recency requirement which requires an applicant for nurse-midwife certification to have clinically practiced at the nurse-midwife level within the last five years and to have substantially engaged in the clinical practice of obstetrics in labor and delivery and attended continuing education at the nurse-midwife level. If unable to demonstrate current clinical competency, a nurse-midwife certification applicant may either complete a nurse-midwife refresher course approved by BRN or mentor with a certified

nurse-midwife practicing obstetrics who would submit written verification of clinical competency to BRN.

Legislative Committee Goals and Objectives. At BRN's June meeting, its Legislative Committee announced the following goals for 1993-94:

- keep BRN informed about pertinent legislation and regulations that relate to nursing practice, education, nurses' roles in the delivery of health care, and administrative functions of the Board;

- monitor current legislation on behalf of the Board; and

- serve as a resource to other Board committees on legislative and regulatory matters.

■ LEGISLATION

SB 350 (Killea), as amended September 7, repeals existing provisions related to the certification of lay midwives by the Medical Board of California's (MBC) Division of Allied Health Professions and enacts the Licensed Midwifery Practice Act of 1993; specifies the requirements for licensure as a midwife and the authority of a midwife with respect to the scope of the practice of midwifery; requires MBC's Division of Licensing to issue a license to practice midwifery to all applicants who meet certain requirements and who pay a prescribed fee; provides for the expiration and renewal of licenses and authorizes MBC to suspend or revoke a license for certain reasons; requires every policy of disability insurance issued, amended, or renewed on or after January 1, 1994, that offers coverage for perinatal services, to contain a provision for direct reimbursement to licensed midwives for perinatal services; requires reasonable consideration, as defined, to be given to licensed midwives by disability insurers contracting for services at alternative rates; and requires that midwifery services provided by a licensed midwife also be covered by Medi-Cal to the extent federal financial participation is available. This bill was signed by the Governor on October 11 (Chapter 1280, Statutes of 1993).

AB 890 (B. Friedman). The Nursing Practice Act requires applicants for licensure as nurses to have training in the detection and treatment of alcohol and chemical dependency. This bill also requires applicants to have training in the detection and treatment of client abuse, including spousal or partner abuse, and requires BRN to encourage continuing education in spousal or partner abuse detection and treatment. This bill was signed by the Governor on October 11 (Chapter 1234, Statutes of 1993).

SB 842 (Presley), as amended July 14, permits BRN to issue interim orders of

suspension and other license restrictions, as specified, against its licensees. This bill was signed by the Governor on October 5 (Chapter 840, Statutes of 1993).

AB 518 (Woodruff), as introduced February 18, requires BRN to conduct a study regarding clinical nurse specialists and the use of the title "clinical nurse specialist," in consultation with certain organizations and interested parties; this bill requires BRN to report the results of the study to the legislature on or before January 1, 1995. This bill was signed by the Governor on July 1 (Chapter 77, Statutes of 1993).

SB 1052 (Watson). Existing law requires skilled nursing facilities and intermediate care facilities to adopt a training program for nurse assistants that meets standards established by the state Department of Health Services (DHS); provides for the certification of nurse assistants who meet prescribed qualifications; requires that certified nurse assistants complete 24 hours of approved in-service training every year; and makes the renewal of certification, which occurs every two years, conditional upon completion of the required training. As introduced March 5, this bill instead requires that a certified nurse assistant complete 48 hours of in-service training every two years, and requires that at least twelve of the 48 hours be completed in each of the two years. This bill also revises the approved sources from which the training may be obtained to include in-service training taught by a director of staff development for a licensed skilled nursing or intermediate care facility who has been approved by DHS. This bill was signed by the Governor on July 30 (Chapter 268, Statutes of 1993).

AB 1807 (Bronshvag). Existing law authorizes BRN to issue interim permits to practice nursing pending the results of the first licensing examination taken by an applicant, and requires the Board to notify the applicant of termination of the interim permit by certified mail upon failure of the examination; existing law authorizes an applicant who fails the examination to be reexamined as deemed appropriate by the Board. As amended September 8, this bill would limit the authorization to practice under an interim permit to a maximum of six months; require BRN to send the notice by first-class mail; and provide that an applicant may not be reexamined more frequently than once every three months.

Existing law authorizes the issuance, upon the submission and approval of an application and payment of a prescribed fee, of a temporary certificate to practice as a certified nurse midwife, certified nurse practitioner, or certified nurse anesthetist for a period of six months. This bill



would also authorize issuance of a temporary certificate to practice as a certified public health nurse.

Existing law authorizes disciplinary action against a nurse for unprofessional conduct and for certain other actions, as prescribed. This bill would revise these provisions to make the denial, revocation, suspension, or restriction of a license, or other disciplinary action against a nurse taken by another state or other government agency, part of the definition of unprofessional conduct that is grounds for discipline in this state.

Finally, this bill would provide that an applicant for renewal of a nursing license who receives his/her license after payment of fees with a check that is subsequently returned unpaid shall not be granted a renewal until the amount owed is paid, including any applicable fees. [A. Inactive File]

AB 1445 (Speier), as amended June 1, would require DHS to develop minimum staffing ratios in accordance with prescribed criteria for the allocation of RNs and other licensed nursing staff by general acute care hospitals, acute psychiatric hospitals, special hospitals, and correctional treatment centers. This bill would also require general acute care hospitals, acute psychiatric hospitals, and special hospitals to adopt written policies and procedures for the training and orientation of nursing staff, including temporary personnel. This bill would require that if licensed nursing personnel have not worked in a given patient care unit or are temporarily assigned, a competency validation be completed prior to assigning that person total responsibility for patient care. This bill would prohibit these hospitals from utilizing certain personnel to perform prescribed functions that require scientific knowledge or technical skill. [A. W&M]

SB 1148 (Watson), as amended April 29, would require each health facility to make a nurse patient advocate available to receive complaints from patients or staff relating to inappropriate denial of treatment, limitations on treatment, early discharge or transfer, or unnecessary treatments or procedures. This bill would require that a nurse patient advocate be employed by DHS and be licensed as a registered nurse. The bill would require that the nurse patient advocate investigate any complaints and report his/her findings to DHS. This bill would also prohibit any licensed personnel or other staff member of the health facility from being subject to discipline for providing information to a nurse patient advocate, or for referring a patient or relative of a patient to the nurse patient advocate. [S. H&HS]

RECENT MEETINGS

At its June 10-11 meeting, BRN approved recommendations submitted by the Quality of Long-Term Care Demonstration Project, which is sponsored by the Medical Board and the Department of Aging's Ombudsman Program. The Project is intended to improve the handling of complaints received by regulatory agencies about the quality of care in long-term care (LTC) facilities. [13:2&3 CRLR 96; 13:1 CRLR 58] Among other things, the recommendations include the following:

-Each applicable regulatory agency will develop and annually update a packet of information that will be distributed by the Department of Aging's Ombudsman to LTC Ombudsman staff statewide; this information is expected to assist regional Ombudsman Coordinator/Managers in dealing appropriately with quality of care issues for residents in LTC facilities.

-Each applicable regulatory agency will add the Ombudsman to its mailing lists so that any changes in scope of practice, policies, procedures, or standards related to health professional practice or facility licensing can be distributed to regional Ombudsman Coordinator/Managers when these changes relate to LTC personnel and facilities.

-Each health professional licensing board involved in the Demonstration Project will provide information to its licensees, at least annually, through its newsletter or other publications about issues affecting the care of residents in LTC facilities.

At its September meeting, BRN approved a revision to its policy statement on full-time/part-time nursing faculty. In accordance with sections 1425.1(a) and 1424(g), Title 16 of the CCR, the revised policy statement provides that the majority of a nursing program's faculty must be full-time, and that "faculty" is defined to include full-time, part-time, hourly, and long-term substitutes. The nursing program must ensure that its nursing faculty's responsibilities are consistent with sections 1425.1(a) and 1424(g). Records must demonstrate that each faculty member has responsibility and accountability for instruction, evaluation of students, developing program policies and procedures, planning, and implementing and evaluating curriculum content; these records will be reviewed during interim visits and on approval visits.

FUTURE MEETINGS

February 10-11 in Los Angeles.

CERTIFIED SHORTHAND REPORTERS BOARD

Executive Officer: Richard Black
(916) 445-5101

The Certified Shorthand Reporters Board (CSRB) is authorized pursuant to Business and Professions Code section 8000 *et seq.* The Board's regulations are found in Division 24, Title 16 of the California Code of Regulations (CCR).

CSRB licenses and disciplines shorthand reporters; recognizes court reporting schools; and administers the Transcript Reimbursement Fund, which provides shorthand reporting services to low-income litigants otherwise unable to afford such services.

The Board consists of five members—three public and two from the industry—who serve four-year terms. The two industry members must have been actively engaged as shorthand reporters in California for at least five years immediately preceding their appointment. The Governor appoints one public member and the two industry members; the Senate Rules Committee and the Speaker of the Assembly each appoint one public member.

On June 1, the terms of Board members Ron Clifton and Claude Jennings expired; therefore, the two industry seats on CSRB are vacant. At its August 28 meeting, the Board selected Mary Steiner to serve as Chair and Bill Sarnoff to serve as Vice-Chair.

MAJOR PROJECTS

CSRB Developing Program Goals. At its June 19 and August 28 meetings, the Board discussed its ongoing development of specific goals for its various program areas; according to Board Chair Mary Steiner, the goals will facilitate CSRB's strategic planning for the next several years. For example, in the area of examination goals, the Board is considering a proposal to offer its licensing examination more frequently by utilizing test centers throughout the state; the Board directed staff to prepare specific proposals on offering the examination more frequently and in more locations, and to include budget assumptions related to its proposals.

CSRB is also considering a proposal to sponsor legislation imposing continuing education (CE) requirements on its licensees; according to Executive Officer Richard Black, the Board would need to devote one half-time staff position to implement a CE program. According to CSRB member Teri Jackson, the Board's Continuing