

# ***KBN***

Fall 2014  
Edition 41

# **CONNECTION**

**THIS IS YOUR OFFICIAL LICENSURE RENEWAL NOTICE**

*It is time to renew all nursing licenses and credentials.*

*See pages 16-18 for renewal information.*

*Background checks now required if license lapses.*

## **2014 ANNUAL LICENSE RENEWAL NOTIFICATION**

**ANNUAL**

**KBN**

**RENEWAL**

**OFFICIAL RENEWAL NOTICE  
RENEWAL DATES:  
SEPT. 15 - OCT. 31, 2014**

*Official Publication of the Kentucky Board of Nursing*

SEE PAGE 24 FOR APPROVAL STATUS



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# **KBN** CONNECTION

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The Kentucky Board of Nursing protects the well-being of the public by development and enforcement of state laws governing the safe practice of nursing, nursing education, and credentialing.

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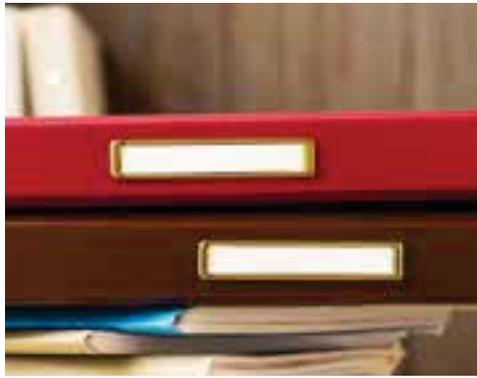
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## Statistics Corner

As of September 23, 2014 KBN records show:

**RN Active: 6,889**

**LPN Active: 15,722**

**Advanced Practice**

**Registered Nurses: 5,615**

**Dialysis Technicians Active: 536**

**SANE Active: 252**



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## PRESIDENT'S MESSAGE

Since the last edition of the KBN Connection, your Board of Nursing has been very busy. In mid-August, Dr. Jimmy Isenberg, Sonia Rudolph, Paula Schenk, Nathan Goldman, Myra Goldman, Lahoma Prather, Bernadette Sutherland and I attended the National Council of State Boards of Nursing annual meeting in Chicago. Council members approved new Canadian associate members Newfoundland, Labrador, the Yukon and New South Wales, watched a forum discussion on the future of distance nursing education among members of the Distance Learning Education Committee, learned about revisions to the APRN Compact, and saw the presentation "Renegotiating Health Care: Resolving Conflict to Build Collaboration" given by the Director of the Harvard School of Public Health's Program for Health Care Negotiation and Conflict Resolution. I've only mentioned a small sample of the topics about which we learned at the NCSBN meeting, but it was a few days packed with novel and vital education for all of us.

Moving on, a well attended August 6th stakeholders meeting at the KBN office centered on an interesting and informative discussion of Medication Administration in community settings and KBN Advisory Opinion Statement #15: "Roles of Nurses in the Supervision & Delegation of Nursing Tasks to Unlicensed Personnel." At this particularly productive meeting, stakeholders expressed a great deal of misunderstanding about delegation and teaching/training by licensed nurses and other providers. As a result of the meeting, KBN is now considering next steps to help clarify best practices for these complex but essential matters.

Next, I'd like to take a moment to update all nurses in the Commonwealth on our current fi-

nancial standing. On July 16th, KBN was notified that \$1 million of KBN funds were transferred by executive order to the state General Fund to help balance a shortfall in the 2014 budget, resulting in a grand total of \$1.5 million transferred from KBN funds this budget year. KBN is not supported by the state General Fund, relying instead on licensure fees for its operating income, and so because of the recent transfers to the General Fund, KBN staff has projected that a fee increase of an as-yet-undetermined amount may need to begin for 2015-2016. The KBN is working to determine a fair and necessary amount for this potential increase, and we ask that Kentucky nurses please bear in mind that KBN's financial standing is incredibly important to nursing in Kentucky and that licensure renewal fees were reduced with our switch to annual renewals in 2006.

Lastly, I'd like to point out some upcoming work to refine KBN's strategic plan. Dr. Kathy Malloch will help the Board by facilitating its discussion during the KBN annual retreat on October 2nd and 3rd focusing on the development of a living, breathing document to serve as the primary focus of our board meetings. We hope this refinement work will help the KBN reach new levels of purpose and productivity in working to protect the health of the public. Please look forward to news about our refined strategic plan and enjoy a happy and safe fall season!

A handwritten signature in dark ink that reads "Sally Baxter RN". The signature is written in a cursive, flowing style.

Sally Baxter, RN  
President, Kentucky Board of Nursing



## EXECUTIVE DIRECTOR'S MESSAGE

Dear Colleagues in Nursing:

In the immediate past issue of the KBN Connection, a July 28, 2014 addendum was included informing you of an unplanned fund transfer of \$1.0 million of KBN funds. On July 16, 2014, an Executive Order, signed by Governor Beshear, authorized this transfer to the General Fund to help offset the FY 2014 \$90 million statewide budget shortfall. In FY 2014, a total of \$1.5 million dollars of KBN funds were transferred to the General Fund. This means that the study of proposed revisions to 201 KAR 20:240 Fees for services has intensified as the impact upon Board operations is more substantial than previously described. The Board will be considering these proposed revisions at its September Governance Committee meeting. Any recommendations for approval will then be forwarded to the full Board for its consideration, at the earliest, on October 1, 2014. As a reminder to all, meetings of the Board are open to the public. Should you be unavailable to attend these meetings, you may submit written comments or concerns to my attention the Board office. All comments or questions about this issue will be forwarded to the Board for their consideration.

The National Council of State Boards Nursing (NCSBN) held its 2014 Annual Meeting in Chicago, IL August 12 – 15, 2014. Of note, NCSBN affirmed its commitment to facilitate interstate nursing practice by again endorsing a uniform mutual recognition model for state-based nurse licensure to enhance public protection and use of telehealth technology for access to health care as well as facilitate nurse mobility. Since 2007, the Kentucky Board of Nursing (KBN) has been a part of the Nurse Licensure Compact (NLC) along with twenty three (23) other jurisdictions. Over the past year, the NCSBN Executive Officer Forum, having discussed the mutual recognition model, reached consensus among those members who participated to propose revisions to the NLC that will allow for its expeditious adoption

by other states. Additionally, the Advanced Practice Registered Nurse (APRN) Compact, a mutual recognition model for advanced practice nursing, has been proposed and is being aligned with the NLC.

The Delegate Assembly elected members to its Board of Directors including Shirley Brekken, MS, RN, Executive Director, Minnesota Board of Nursing as its President. Katherine Thomas, MN, RN, FAAN, Executive Officer, Texas Board of Nursing, was elected to the role of President-Elect. Currently serving on the NCSBN Board of Directors as a Director-at-Large is KBN's General Counsel, Nathan Goldman, JD.

Immediately preceding the Annual Meeting, the NCSBN released its award winning research, "The NCSBN National Simulation Study: A Longitudinal, Randomized, Controlled Study Replacing Clinical Hours with Simulation in Prelicensure Nursing Education." For more information about this study, its methodology and outcomes, please refer to the Journal of Nursing Regulation, Volume 5, Issue 2 (July 2014 Supplement) at [www.ncsbn.org](http://www.ncsbn.org).

Welcomed to KBN staff is Sarah Wimsatt in the role of Practice Assistant. Sarah will be the primary support person for Lahoma Prather, MSN, RN, Nursing Practice Consultant, and Pamela Hagan, MSN, RN, APRN Education and Practice Consultant. On another note, after many years of service to the state and to KBN in particular, Mary Jane Oswald, Office Manager, retired from July 31, 2014. Board members and staff wish, in the words of the Irish blessing (paraphrased for brevity)...May the road rise up to meet you, May the wind always be at your back, May the sun shine warm upon your face,...

With best regards,  
Paula S. Schenk MPH, RN

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# *Kentucky Board of Nursing*

## *Milestones Over 100 Years*



### *Excerpts from the History of Nursing Laws in Kentucky*

#### *from 1914 to 2014*

- 1914** Legislature creates the **Kentucky State Board of Examiners of Trained Nurses**. The President acted as the inspector of training schools for nurses. All nurses were granted certificates without examination if they applied by August 1, 1914. The exam included “practical, surgical, and obstetrical nursing, hygiene, contagion, diet cooking, *material medica*, anatomy, physiology, gynecology and all other matters deemed necessary and proper by the board.”
- 1950** Name changed to **Board of Nursing Education and Nurse Registration**. Practical nurses recognized/licensed. Statutes reflect change from hospital-based diploma programs to college-based academic programs for RN.
- 1978** Name changed to **Kentucky Board of Nursing**. Three (3) Licensed Practical Nurse Board member positions were added. Citizen Board member added. Advanced Registered Nurse Practitioner (ARNP) recognized with voluntary registration. Mandatory continuing education added.
- 1982** Mandatory reporting of alleged discipline added.
- 1990** Nursing Incentive Scholarship Fund created.
- 1994** National Council Licensure Examination (NCLEX) changed to a computer adaptive test (CAT).
- 1996** Sexual Assault Nurse Examiner (SANE) recognized and credentialing began. ARNP prescriptive authority for nonscheduled legend drugs passed, under a written collaborative agreement.
- 2001** Board given authority to credential and regulate dialysis technicians.
- 2004** Clinical internship added as licensure requirement.
- 2006** Nurse Licensure Compact passed. Enacted ARNP prescriptive authority for controlled substances under a written collaborative agreement.
- 2010** Most of the National Council of State Boards of Nursing (NCSBN) APRN Consensus Model adopted which changed the title from ARNP to Advanced Practice Registered Nurse (APRN).
- 2011** Clinical internship repealed.
- 2012** House Bill 1, the “Pill Mill Bill”, passed.
- 2014** APRN written collaborative agreement for nonscheduled drugs is no longer necessary after four years of having the agreement.



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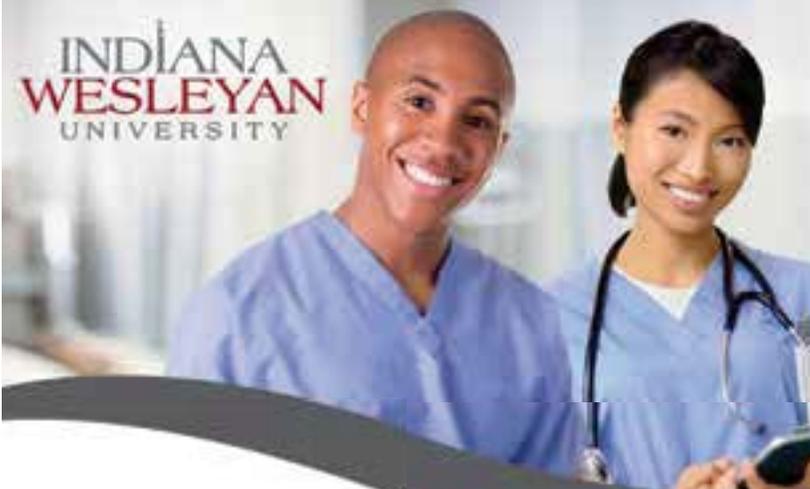


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## **Tuberculin Skin Test Administration and Assessment**

**Q:** Is it within the scope of licensed practical nursing practice to administer tuberculin skin tests and to assess the results?

**A:** This is a common question received by Board staff and was addressed by the Practice Committee in May of this year. The Practice Committee made the following recommendation which was approved by the Board in June:

It is within the scope of licensed practical nursing for the LPN, who is educationally prepared and clinically competent, to administer a tuberculin skin test and assess the result under the direction and supervision of the MD, APRN, or RN. There should be documentation of the nurse's educational preparation and clinical competence. Training resources include the Kentucky Department of Health and Family Services Tuberculosis Prevention and Control Program and the Centers for Disease Control and Prevention. The LPN should follow written policies and procedures that have been agreed upon by the medical staff and nursing administration and have been formally adopted by the facility.

## **External Jugular Peripheral Intravenous Catheters (EJPIV)**

**Q:** According to a previous advisory opinion it is within the scope of registered nursing practice to place an external jugular peripheral intravenous catheter in advanced life support situations. Does this mean that EJPIVs may not be placed by an RN in other situations or settings?

**A:** In response to several inquiries related to this question, the Practice Committee made a clarifying recommendation at its May meeting which was approved by the Board in June. The advisory opinion is:

The insertion of an external jugular peripheral intravenous catheter is within the scope of registered nursing (RN) practice for the RN who is educationally prepared and clinically competent. There should be documented evidence of educational preparation and clinical competence. The RN should follow written policy and procedures that have been agreed upon by the medical staff and nursing administration and formally adopted by the facility. Poli-

cies and procedures should be consistent with the Infusion Nurses Society Position Paper "The Role of the Registered Nurse in the Insertion of External Jugular Peripherally Inserted Central Catheters (EJPICC) and External Jugular Peripheral Intravenous Catheters (EJPIV) (2008) [http://www.ins1.org/files/public/08\\_26\\_08\\_INS\\_Position\\_Paper.pdf](http://www.ins1.org/files/public/08_26_08_INS_Position_Paper.pdf).

Further the Board advised that the insertion of an external jugular peripheral intravenous catheter is outside of the scope of licensed practical nursing practice.

## **Nurses as "Medical Scribes"**

**Q:** What is a "medical scribe" and can a nurse perform this role?

**A:** The Joint Commission defines a scribe as:

"A scribe is an unlicensed person hired to enter information into the electronic medical record (EMR) or chart at the direction of a physician or practitioner (Licensed Independent Practitioner, Advanced Practice Registered Nurse or

Physician Assistant). It is The Joint Commission's stand that the scribe does not and may not act independently but can document the previously determined physician's or practitioner's dictation and/or activities."

A nurse may act as a scribe however that nurse maintains accountability and responsibility for acting within his or her scope of practice at all times. For example, there is discussion in some facilities about a scribe entering provider orders. If a nurse acting in a scribe role enters orders that have been given by a provider that nurse must utilize his or her nursing judgment to recognize any potential issues and discuss them with the ordering provider.

Licensed or not, documentation should clearly show that the scribe completed the documentation on behalf of the provider. The provider must review all documentation and sign off as to its accuracy. The provider maintains responsibility for the accuracy of the documentation.

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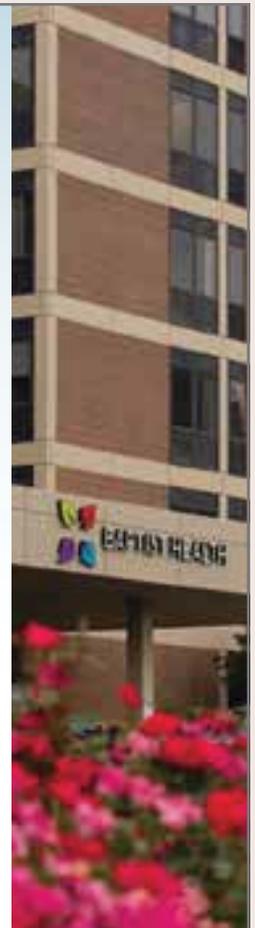
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**Q: I was selected for the CE audit last year. I have friends that have been in nursing for many years but have never been selected. Why did I receive an audit letter and they did not?**

A: Nurses receiving CE audit letters are chosen by random selection. The number of years one has been in nursing has nothing to do with the selection process.

**Q: What will happen if I am audited, and I do not have the required contact hours?**

A: You will be asked to earn the required hours and submit copies of the CE certificates to KBN along with a letter of explanation as to why these hours were earned late. Once this documentation is received and accepted by KBN, you will be allowed to enter into a Consent Decree with KBN and pay the required fine. If you do not earn the late hours and/or pay the fine, your records and audit response will be forwarded to the Investigation and Discipline Section of the Consumer Protection Branch for initiation of disciplinary action.

**Q: What are the dates of the CE earning period for renewal of my nursing license?**

A: Nurses are required to earn 14 contact hours or the equivalent within the yearly earning period of November 1st through October 31st. You may wish to view the CE brochure available on the KBN website ([www.kbn.ky.gov](http://www.kbn.ky.gov)) for additional earning information.

**Q: My friend refers to the continuing education hours she earns as CEUs. I notice that you refer to them as contact hours. What is the difference in a CEU and a contact hour?**

A: Contact hours refer to the stated amount of time an individual was present during a course. One contact hour is equal to 50 minutes of clock time. Continuing Education Unit (CEU) is the term used as the unit of measurement by colleges and universities to designate 10 contact hours. The terms contact hour and CEU cannot be used interchangeably. Kentucky and most nursing continuing education providers require offerings to be determined in contact hours.

**Q: I am a relatively new graduate. I am required to renew my nursing license for the first time by October 31st, 2014. Since this is my first renewal am I exempt from earning CE hours for this renewal?**

A: No, you are not exempt from earning CE hours for your first-time renewal. All nurses required to renew their licenses must also complete 14 approved CE contact hours or the equivalent within the earning period of Nov. 1st through Oct. 31st, 2014. There is no exemption for first-time renewal. All nurses

renewing their license during the Sept. 15 through Oct. 31, 2014 renewal period

**Q: Is it true that I can use an employment evaluation for part of my CE hours?**

A: Yes. A satisfactory employment evaluation or competency validation for your position as a nurse, that covers at least six months of the earning period, can be used for seven contact hours. You must earn the other seven hours. Other acceptable ways to earn

your CE hours can be found online ([www.kbn.ky.gov/ce](http://www.kbn.ky.gov/ce)) under "Licensure Renewal Requirements."

**Q: Do college courses count as CE hours?**

A: Academic courses in nursing and health care, or social or physical sciences will count toward your CE requirement. One semester credit hour equals 15 contact hours. One quarter credit hour equals 12 contact hours. These courses count as CE for the earning



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period in which the course was completed.

**Q: I have attended a CE course that is not offered by an approved CE provider. How can I get credit for these hours?**

A: You may wish to submit an "Individual Request for Review of CE Activities," ([www.kbn.ky.gov/ce](http://www.kbn.ky.gov/ce)) under "CE Forms and Publications," to KBN requesting contact hours for this course. There is a non-refundable charge of \$10 for the review. You can also request an application form by contacting the KBN office at 800-305-2042 ext. 7191. Once submitted, your application will be reviewed and, if approved, the appropriate number of contact hours will be awarded. Applications must be submitted no later than November 30th of the licensure year.

**Q: Are CE hours earned on the internet acceptable for licensure in Kentucky? If so, how many of the required 14 hours can be earned on the internet?**

A: Internet CE courses are acceptable if offered by an approved CE provider. All 14 hours or any combination of the hours may be from internet providers.

**Q: I understand that I can use my national nursing certification for the required 14 contact hours of CE. Is this correct?**

A: If you have a national nursing certification or recertification related to your practice role that is in effect the whole earning period or earned initially this period, it will count for the required 14 contact hours for Kentucky licensure. NOTE: In addition to the national nursing certification, APRNs are required to earn five approved contact hours in pharmacology each earning period. APRNs with a CAPA-CS are required to earn 1.5 approved CE contact hours on the use of KASPER, pain management, or addiction disorders.

These hours may count as part of the required pharmacology hours.

SANE-credentialed nurses must earn five contact hours of approved sexual assault CE.

**Q: I am required to take a class in CPR where I work. Will this CPR class count toward my CE requirement?**

A: No. CPR and BLS classes, as well as inservice education and nurse aide training, do not count as CE hours.

**Q: Will ACLS and PALS courses count toward my CE requirement?**

A: If an approved provider offers the ACLS or PALS courses, the hours earned will be accepted by KBN. See the list of national nursing organizations recognized by KBN for continuing education offerings on the KBN website ([www.kbn.ky.gov](http://www.kbn.ky.gov)).

**Q: Can a nurse substitute CME credits for nursing contact hours?**

A: CME credits do not automatically transfer to contact hours. If you wish to earn contact hours for a course that awarded CME credit, you will need to go to the KBN CE Web page ([www.kbn.ky.gov/ce](http://www.kbn.ky.gov/ce)) under "CE Forms and Publications," and submit an "Individual Request for Review of CE Activities." APRNs are allowed to use CME credits for pharmacology continuing

education if the provider offering the course is recognized by their national certifying organization.

**Q: I have earned more CE hours this earning period than I need. Can these hours be used for my next renewal?**

A: No. CE hours cannot be carried over to the next earning period. All 14 hours must be earned within the specified earning period (November 1st - October 31st).

**SEE PAGE 24 FOR APPROVAL STATUS**

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**Q: I understand Kentucky nurses are now required to complete a CE course in pediatric abusive head trauma. Please give me information about this requirement.**

A: All nurses licensed as of July 15, 2010 must earn 1.5 CE contact hours in pediatric abusive head trauma (shaken baby syndrome) by December 31, 2013. Nurses licensed after July 15, 2010 must complete this earning within 3 years of their initial licensure date. This one-time only requirement is included as part of the nursing curriculum for nurses graduating from a Kentucky Program of Nursing after December 2011.

**Q: Where can I find a list of approved CE providers?**

A: You can print a copy of the KBN approver provider list from the KBN website ([www.kbn.ky.gov](http://www.kbn.ky.gov)) under "CE Forms and Publications" or you may request a copy of the list by contacting the KBN office at 800-305-2042, ext. 7191. In addition, a list of National Nursing Organizations recognized by KBN for continuing education is also provided on the KBN website. If a provider approved by one of these organizations offers a course you wish to take, that course will be accepted by KBN for the same number of contact hours.

**Q: Does KBN have a record of the CE hours I have earned?**

A: No. KBN does not keep track of each nurse's CE hours – that responsibility falls on the individual nurse. It is the responsibility of the CE provider to see that the nurse receives a certificate of completion, but the provider does not send a copy of the certificate to KBN. You are not required to submit CE certificates to KBN unless requested to do so through the CE audit. Nurses must retain records of their CE/competency for at least five years following a licensure period. HIV/AIDS CE records must be retained for 12 years.

**Q: I understand there have been some changes in the HIV/AIDS CE requirements. How many HIV/AIDS contact hours must I earn, and what is the earning period?**

A: All nurses are required to earn two contact hours of approved HIV/AIDS CE at least once every 10 years. The course must be offered by an approved CE provider or approved by the Kentucky Cabinet for Health and Family Services in Frankfort, Kentucky.

**Q: I am an Advanced Practice Registered Nurse (APRN) in Kentucky. Are there any specific CE requirements for my registration renewal?**

A: APRNs are required to earn five contact hours of approved CE in pharmacology each licensure period.

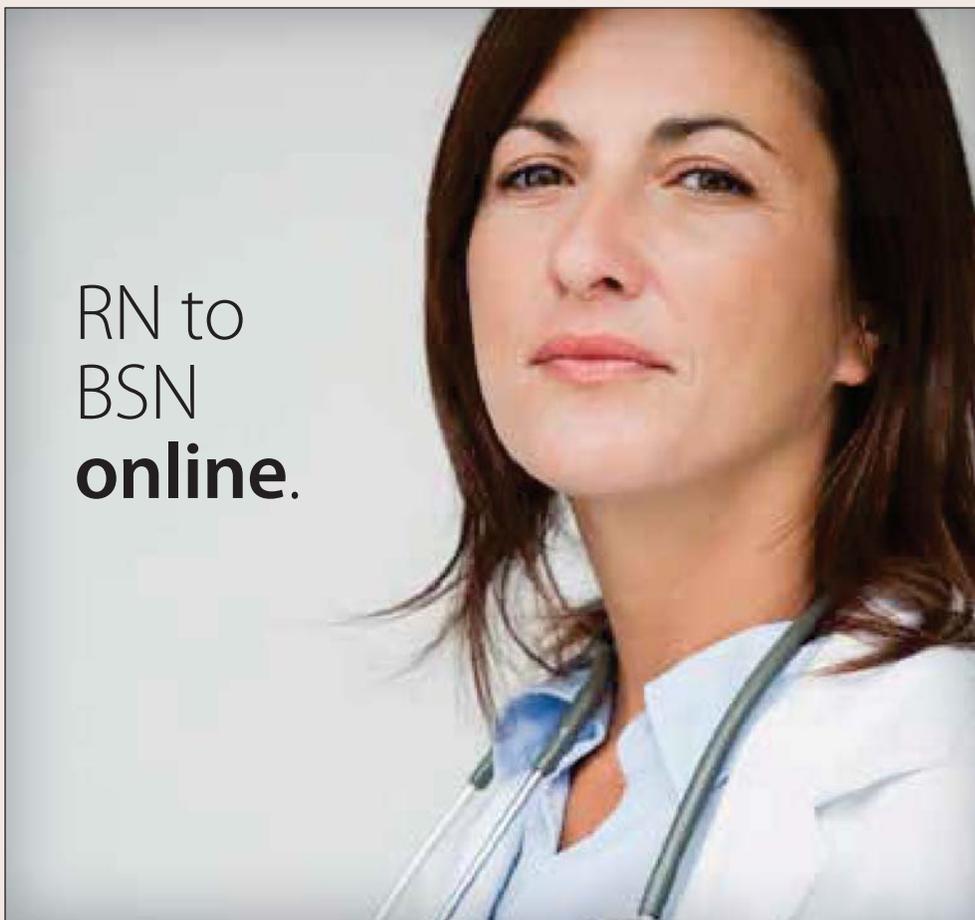
The licensure earning period is November

1st through October 31st of the renewal year. In 2008, the regulation was amended to reflect that pharmacology CE hours can be earned from any provider that is recognized by your APRN accrediting body. It is the responsibility of the individual APRN to contact the certifying body for a complete and up-to-date list of recognized providers for their organization. APRNs with a CAPA-CS are required to earn 1.5 approved CE contact hours on the use of KASPER, pain management or addiction disorders. These

hours may count as part of the required pharmacology hours.

**Q: Are SANE-credentialed nurses required to earn specific CE hours in addition to the required 14 contact hours for RN renewal?**

A: SANE-credentialed nurses are required to earn five contact hours of approved sexual assault CE (forensic medicine or domestic violence CE will meet this requirement). These hours count as part of the required 14 hours for RN renewal.



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## THIS IS YOUR OFFICIAL RENEWAL NOTIFICATION.

### 2014 RENEWAL INFORMATION

**BEGINS:** September 15, 2014 at 12:01 a.m.

**ENDS:** Midnight October 31, 2014, Eastern Time

**RENEWAL WEB ADDRESS:** [www.kbn.ky.gov/Pages/renewal.aspx](http://www.kbn.ky.gov/Pages/renewal.aspx)

**NOTIFICATION OF RENEWAL:** When your license has been renewed you will receive an email notification to the email address you listed with KBN. You can also validate the expiration date of your license at [www.kbn.ky.gov](http://www.kbn.ky.gov)

Clicking on the submit button at the end of the renewal application does not renew your license.

Validate that your license was renewed from this site: <https://secure.kentucky.gov/kbn/bulkvalidation/basic.aspx>

**RENEWAL FEES:** Print the confirmation page for your record of payment for your license renewal.

RN: \$50

LPN: \$50

APRN: \$40 for each designation  
(plus \$50 for the RN license)

SANE: \$35

Clicking on the “submit” button at the end of the renewal process is an attestation that you have or will have met the continuing competency requirements by midnight, October 31. Your license is NOT renewed when you click on the submit button.

#### **LAST DAY OF RENEWAL**

If your license has not been renewed before midnight, Eastern Time, October 31, your license will lapse. You cannot practice as a nurse in Kentucky if your license has lapsed. Remember Oct. 31, 2014 is a Friday and KBN offices are closed on Saturday and Sunday. If your license is not renewed prior to midnight on Friday, you may not practice on the following Saturday or Sunday. Depending on the situation, your license may be renewed on Monday Sept. 3.

If an application is received before midnight on October 31st and an individual answers “No” to the disciplinary and conviction questions, a license MAY be renewed by noon on the next business day.

If you answered “yes” to the discipline, criminal, and/or the APRN national certification revocation questions, your license will not be renewed until KBN receives and reviews the required documents.

Required documentation includes:

1. Certified court records and letters of explanation, if you answer “yes” to the criminal activity question;

2. Board certified orders and letters of explanation, if you answer “yes” to the disciplinary question;
3. Documentation from your APRN national certification organization if you answer “yes,” that your national certification was revoked or issued on a provisional or conditional status; and,
4. Other documentation requested by KBN staff.

#### **NURSE LICENSURE COMPACT AND KENTUCKY LICENSE RENEWAL**

If your primary state of residence is another compact state and you do not practice ONLY in a military/federal facility, you will not be able to renew your Kentucky RN or LPN license.

#### **APRN RENEWAL**

If you do not intend to practice as an APRN and want to relinquish your APRN license (allow it to expire) but do want to renew your RN license, access the RN/APRN renewal application. There will be a drop down selection for you to renew only your RN license.

If your national certification has expired, you will not be able to renew your license(s). You cannot practice as an APRN in Kentucky with an expired national certification.

To renew your APRN license in only one designation and your Kentucky RN license, you MUST use the RN-APRN link on the renewal web page (<http://kbn.ky.gov/Pages/renewal.aspx>). From this link, you will renew your RN and APRN licenses simultaneously, for the combined fee of \$90 (RN-\$50 and APRN-\$40).

To renew your APRN license in more than one designation and your Kentucky RN license, use the link listed above and select each designation that you want to renew by clicking on the appropriate radio button. The fee for renewing each APRN designation is \$40 per designation, plus the \$50 RN renewal fee. You must maintain current national certification in each designation.