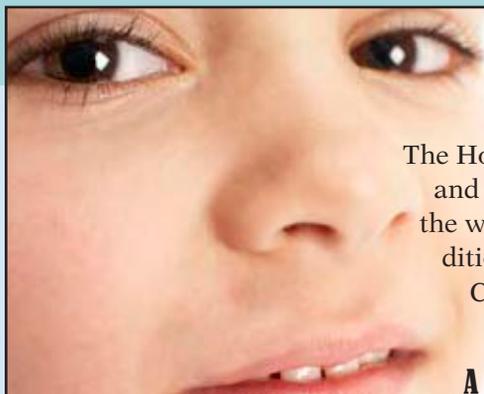


or endorsements have been reviewed for violations of the laws that govern DTs. This includes approximately 12 conviction reviews. The outcome in most, if not all, of those cases resulted in no further action against the person.

Most of the cases referred to the Investigation and Discipline Branch of the Board involving DTs are related to practicing on a lapsed DT credential. The Board has entered approximately 13 Consent Decrees for DTs practicing without an active, current DT credential. A Consent Decree is issued for non-willful violations of the law and is not considered "formal" action by the Board; nor is it reported to other entities or published in this newsletter. The information is subject to the Kentucky Open Records Act and information about the Consent Decree would only be shared if the person making the request specifically asks for information related to any informal action taken against the DT's credential. Currently, DT credentials are renewed for 24 months and the credential lapses on the last day of the credentialing period.

Approximately five DT cases have been reviewed for practice related complaints ranging from practicing beyond their scope, alleged patient abuse, to falsifying records. At least two cases resulted in formal action against the DT.

Just like nurses, DTs need to familiarize themselves with the laws and regulations that safeguard their practice. Being informed and knowledgeable could prevent unnecessary or unwanted review of the credential. Our website (kbn.ky.gov) offers an extensive overview of information related to DTs. Should you need further assistance or wish to speak with someone directly related to a school program or credential issue, you may contact Richelle Livers, Program Coordinator, at the Board office at 502-429-7180 or the Board's Nursing Practice and Research Consultant, Suzette Scheuermann, for the Board at 502-429-7184. The Consumer Protection section of the Board is available at 502-429-3300 for any questions related to the disciplinary process of DTs.



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Scope of Licensed Practical Nursing Practice and the Definition of “readily available” that is referenced in 201 KAR 20:490 - Licensed practical nurse intravenous therapy scope of practice

In February 2010, it was the advisory opinion of the Board that the definition of “readily available” should be based upon the patient assessment by the registered nurse and the acuity of the patient. Supervision requirements should be adhered to as defined in 201 KAR 20:490, Section 3. which state in part....Supervision Requirements, (1) An LPN performing IV therapy procedures shall be under the direct supervision of a registered nurse (RN), advanced registered nurse practitioner (ARNP), physician or dentist. (2) For a patient whose condition is determined by the LPN’s supervisor to be stable and predictable, and rapid change is not anticipated, the supervisor may provide supervision of the LPN’s provision of IV therapy without being physically present in the immediate vicinity of the LPN, but shall be readily available.

201 KAR 20:490 regulation may be accessed via the KBN website (<http://kbn.ky.gov/laws>) under the Kentucky Administrative Regulations section.

How to Request a Written Advisory Opinion Statement from the Kentucky Board of Nursing

Approved: 2/2010

The Kentucky Board of Nursing is granted authority to issue advisory opinions related to nursing practice issues by KRS 314.131(2). In order for there to be sufficient time to assure the opinions issued are focused on safety and protection of the citizens of the Commonwealth, the following will need to be submitted to the Nursing Practice Consultant forty-five (45) days prior to a Practice Committee meeting.

1. A written request for an advisory opinion related to a specific nursing practice
2. Existing literature and research related to the subject
3. Information on Standards of Practice issued by the appropriate nationally recognized professional organization
4. Position statements and opinions of professional groups
5. Information about necessary education or training
6. Description of “Scope of Practice Determination Guidelines” inadequacy to address issue
7. Completion of the “Request for Advisory

Opinion” form (available from the KBN website at <http://kbn.ky.gov/practice/AOS/RequestAO.htm>)

If you have any questions, please contact Sharon Eli Mercer, RN, Nursing Practice Consultant (502-429-3307 or SharonE.Mercer@ky.gov).

This does not preclude calls or e-mails to the Practice Consultant. The use of the above is for those questions which have not been previously addressed or for request to review a previous advisory opinion.

AOS #3, “Recommended Course Content Intravenous (IV) Therapy for Registered Nurses and Licensed Practical Nurses”

In February 2010, the Board approved the revision and renaming of Advisory Opinion Statement #3. Previously, this Advisory Opinion Statement (AOS) had been titled “Roles of Nurses in Intravenous Therapy Practice.” The revised version of AOS #3 is titled “Recommended Course Content: Intravenous (IV) Therapy for Registered Nurses and Licensed Practical Nurses.”

The content of the original AOS related to specific tasks in IV therapy. These tasks have been incorporated into 201 KAR 20:490, “Licensed practical nurse intravenous therapy scope of practice.”

The revised AOS #3 follows:

PURPOSE

The Kentucky Board of Nursing (KBN) has developed recommended course content to be included in a basic intravenous (IV) therapy prelicensure or continuing education course for licensed practical nurses and registered nurses who wish to perform specified IV therapy procedures as defined in 201 KAR 20:490.

COURSE DESCRIPTION

An intravenous therapy course should be designed to provide fundamental knowledge, skills and abilities needed by Registered Nurses (RNs) and Licensed Practical Nurses (LPNs) to perform specified IV therapy procedures. Course content should include but not be limited to: 1) legal scope of nursing practice for RNs and LPNs in IV Therapy; 2) needs of clients receiving IV therapy; 3) related anatomy and physiology including fluid and electrolytes balance; 4) principles and procedures for venipuncture and site maintenance; 5) principles of pharmacology as related to IV therapy; 6) principles and procedures for

administration of specified solutions and medications via intravenous route; 7) principles of blood and blood products administration; 8) assessment of and appropriate interventions for complications related to IV therapy; and 9) demonstration and practice of specified IV therapy procedures.

COURSE OBJECTIVES

Upon completion of all instructional components of an IV Therapy course, the RN or LPN participant should demonstrate the ability to:

1. Discuss the legal implications of RN or LPN practice as related to the performance of IV therapy procedures.
 - A. Identify a minimum of two (2) legal considerations in each of the following regarding IV therapy and the scope of practice for the RN and LPN:
 1. Kentucky Nursing Laws
 2. Related Kentucky administrative regulations
 3. Related KBN advisory opinion statements
 4. National nursing standards of practice
 5. Health care facility policies, and
 6. Health care facility job descriptions
 - B. Discuss the accountability and responsibility of the RN and LPN in the performance of specified IV therapy procedures.
 - C. State the limitations of practice for the LPN who has successfully completed a Kentucky Board of Nursing approved IV therapy course.
 - D. Identify the principles of quality control/assurance and risk management related to IV therapy practice.
2. Identify normal anatomy and physiology applicable to IV therapy practice.
 - A. Describe the structure and function of the vascular system.
 - B. Describe the interrelatedness of the vascular system and other body systems in maintaining fluid equilibrium.
 - C. Discuss the distribution and physiologic balance of fluids and electrolytes in the body.
 - D. Identify the basic physiological principles applicable to the safe performance of IV therapy procedures.
 - E. Identify two (2) veins on the dorsal aspect of the hand and two (2) veins in the arm commonly used to administer IV fluids.

- F. Differentiate between arteries and veins in each of the following: tissue layers, color of blood, pulsation, valves, location, tissues supplied, spasm of vessels, and blood flow.
3. Assist in the implementation of the nursing process in caring for clients receiving IV therapy.
 - A. Discuss the role of the LPN and the RN in the management of care for a patient receiving IV therapy.
 - B. Discuss the nursing responsibilities in assisting the patient to maintain fluid and electrolyte balance.
 - C. Discuss nursing measures for patient's receiving IV therapy, which contribute to the nursing care plan.
 - D. Identify how each of the following affects vital sign measurement, i.e., heart rate/rhythm, respiratory rate, and blood pressure:
 1. Fluid retention/deficit
 2. Increased/decreased blood volume
 3. Vasodilatation/vasoconstriction
 4. Increased/decreased cardiac output
 - E. Describe the observable effects of isotonic, hypertonic, and hypotonic IV fluids on the body.
 - F. Observe and report adverse reactions related to IV therapy and initiate appropriate nursing intervention.
4. Initiate, maintain, monitor, and/or discontinue IV therapy as defined in the Kentucky Board Nursing advisory opinion statement.
 - A. Accurately interpret medical orders for IV therapy.
 - B. Select appropriate sites and infusion devices for IV infusion administration.
 - C. Demonstrate assembling and setting up IV solutions with tubing and needles.
 - D. Correctly and aseptically start a peripheral IV infusion.
 - E. Given a prescribed quantity of fluid to be infused, calculate a flow rate correctly.
 - F. Demonstrate appropriate use of selected IV equipment including: infusion pumps, mechanical controllers, and patient controlled administration systems.
 - G. Demonstrate both continuous and intermittent administration of IV fluids and/or medications.
 - H. Demonstrate accurate documentation of IV therapy.
 - I. Demonstrate IV therapy maintenance procedures, i.e., site care, dressing and tubing changes, flushing, conversion of primary line to intermittent access device, hanging replacement solutions and pre-mixed medications.
 - J. Discontinue IV infusion safely.
 - K. Identify local and systemic complications common to IV therapy and discuss appropriate nursing interventions.
 - L. Differentiate the role of the registered nurse and the role of the licensed practical nurse in the maintenance of central line infusion as defined in the Kentucky Board of Nursing advisory opinion statement.
5. Identify the drugs and solutions commonly used in IV therapy and discuss their action, therapeutic dosage, and adverse effects.
 - A. Identify the principles of medication administration as related to premixed medication additives for IV therapy.
 - B. Identify the incompatibilities of selected drugs and fluids including blood and blood products.
6. Address the classifications of intravenous medications, including but not limited to, indications for use, pharmacological properties, contraindications, dosing, clinical mathematics, anticipated side effects, potential complications/antidotal therapy, compatibilities, stabilities, and any other specific special considerations.
 - D. Discuss the dosage, action, and adverse effects of the commonly used emergency IV medications.
 - E. Identify medications approved for IV push or bolus by the LPN and demonstrate proper technique for administration of these IV "push or bolus" medications.
 - F. Identify the principles related to the safe administration of blood and blood products.
 - G. Differentiate the role of the registered nurse and the licensed practical nurse in the peripheral administration of blood and blood products as defined in the Kentucky Board of Nursing advisory opinion statement.
 - H. Describe potential reaction to blood/ blood products and related nursing interventions.

Approved: 8/89
 Revised: 10/89; 12/89; 12/92; 10/93, 6/99;
 6/05; 2/10

NURSING LEADERSHIP PROGRAMS

The Kentucky Board of Nursing participates in co-sponsored Nursing Leadership Programs that provide an overview of the Kentucky Nursing Laws and KBN. Upon completion of this program, the participant should be able to achieve the following objectives:

- Review KBN's role as a regulatory agency, its mission, programs and activities, including current legislation.
- Examine the responsibility and accountability of nurses, nursing supervisors, and administrators in relation to the

Kentucky Nursing Laws, nursing practice, and current practice opinions.

- Discuss the complaint and disciplinary processes including mandatory reporting, investigation and resolution of complaints with actual case scenarios.
- Describe the requirements of nurses on probation and the role of an employer or peer.
- Explain the Kentucky Alternative Recovery Effort (KARE) for Nurses.
- Discuss the process of obtaining initial licensure by examination.

Upcoming Nursing Leadership Programs:

- April 23, 2010: Bowling Green, KY (Hosted by Western Kentucky University)
 - May 6, 2010: Manchester, KY (Hosted by Eastern Kentucky University)
 - July 8, 2010: Danville, KY (Hosted by Ephraim McDowell Hospital)
- Those interested in attending any of these programs can find registration information on the KBN website (<http://kbn.ky.gov/practice/leadership.htm>).

NURSES AS ADVOCATES IMPROVE HEALTH STATUS OF OUR COMMUNITIES

By **Patricia Calico, DNS, RN**, Adjunct Professor, University of Cincinnati

Dr. Calico is a former member of the Kentucky Board of Nursing and is active in health care advocacy at the community and state levels.

Nurses are key players in improving the quality of life for people who live in their communities. Florence Nightingale (1860/1969) was resolute about improving the quality of care environments, including light, air, and water. She secured funds to make environmental improvements and kept statistical data to demonstrate how hygiene improved the quality of life. In the early 1900s, Lillian Wald established the Henry Street Settlement in New York City and taught health concepts to immigrant women (Henry Street Settlement, 2004). She extended the concept of community health by implementing nursing services in schools (as cited in Freeman, 1970) and later became a social reformer and leader in local and national politics (Henry Street Settlement, 2004). Mary Breckinridge devoted her life to building healthy communities in Eastern Kentucky and saving the lives of women and children (Breckinridge, 1952). These women and other strong nursing leaders set a precedent for all nurses to be advocates for healthy communities wherever we live and work.

Kentucky nurses have extraordinary opportunities to become leaders in health promotion. Our state has higher cancer deaths, more motor vehicle deaths, and more occupational deaths than the nation (KentuckyHealthFacts.org, 2009). We have high rates of chronic diseases such as cardiovascular and diabetes (state-healthfacts.org, 2009). The Every Child Matters Education Fund (everychildmatters.org, 2009) ranked Kentucky first in the nation in death rates from child abuse/neglect, so we have challenges in behavioral health. Many small communities lack grocery stores and public transportation to access shopping; recreational areas for children and young people are often lacking.

Groups across the United States are working to define and measure a "Healthy Community." The Robert Wood Johnson Foundation Commission to Build a

Healthier America (Robert Wood Johnson Foundation [RWJF], 2009) suggests that we need policies that promote economic opportunity, early childhood development, and excellent schools. RWJF describes unhealthy aspects of our neighborhoods as those that are unsafe; lack parks/areas for physical exercise, have no grocery stores; lack public transportation, walking or bike paths, to name a few. The healthy counterparts are safe neighborhoods and safe schools, well equipped parks and organized community recreation; accessible, safe public transportation, walking and bike paths; and grocery stores that offer healthy food choices. The National Civic League [NCL] (www.ncl.org) staff asked individuals across the nation the question "What would our community look like if it were a really healthy place to live?" Responses to the question include:

- A clean and safe environment
- A diverse and vibrant economy
- Good housing for all
- People who respect and support each other
- A place that promotes and celebrates its cultural and historical heritage
- A place where citizens and government share power
- A place that has affordable health care for all
- A place that has good schools
- A place that has and supports strong families

Currently there is no tool to measure the health of communities. However, the Centers for Disease Control [CDC] Healthy Communities Program (2009) is testing a data collection tool for communities to measure their progress toward health in five areas: schools, worksites, healthcare, community-at-large (e.g. transportation) and community institutions such as child-care centers and faith-based organizations. Improved conditions in these five areas build social capital, which has positive effects on the community as a whole.

Nurses can help people ask the right questions about whether their communities are healthy. For example, do 100 percent of teens graduate from high school,

is our child abuse rate 0 percent, is our unemployment rate 0 percent, do worksites have 100 percent safety records and wellness programs, do 100 percent of our communities have recreation and accessible transportation? Do 100 percent of our families have good housing? Do 100 percent of residents, schools and groceries purchase locally grown foods? Once we pose the questions, nurses then have a responsibility to engage others to promote, maintain and to restore the health of people and the communities in which they live.

Every nurse can make a difference. Find your community nursing niche and collaborate with others to promote a healthy community. Partnering is essential so that we can build resource infrastructure and create powerful relationships that enable us to craft healthy lifestyle designs. Your partnerships might address smoking cessation, assisting vulnerable populations, reducing pesticide or lead poisoning exposure or promoting good housing. You might have an interest in health policy, improving schools, providing locally grown foods or even promoting the arts and culture. Florence, Lillian, and Mary built the foundation for advocacy in their era. Our state cries out for our leadership in our time. The need has not diminished over the years, nor has our responsibility.

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HIGHLIGHTS OF BOARD ACTIONS

December 2009 Board Highlights

President's Report

President Isenberg anticipates the February 2010 Board Meeting will be a two-day meeting to be held on February 18 and 19, 2010. A final decision will be made after the January Education Committee Meeting.

Executive Director's Report

Approved that 201 KAR 20:370 be amended to incorporate the changes to the Universal Application.

Education Committee

Madisonville Community College - Associate Degree Program: Addition of an on-line track

- Directed that KBN receive more specific detail on the use of the clinical partner approach for clinical and oversight of student outcomes by program faculty.
- Directed that correspondence sent to and received from the program's accrediting body, NLNAC, be submitted to the Education Consultant.
- Directed that the program work with the Education Consultant regarding details of program implementation plans.
- Directed that the program share data with the Board regarding other programs from across the United States that have successfully utilized this clinical partner approach and the Board of Nursing approval process.
- Directed that prospective students slated for admission in January 2010 receive a letter detailing approval status of program and possible aspects of the program that may not be implemented as presently scheduled.

Southeast Kentucky Community & Technical College – Practical Nursing Program

Southeast Kentucky Community & Technical College communicated that a decision was made not to implement a program extension at Whitesburg. Whitesburg is located only 25 miles from the program's Cumberland campus and students from Letcher County will have to apply for admission to the program in Cumberland if they wish to pursue nursing education with them.

CONTINUING COMPETENCY

Accepted the following reports as submitted: Initial CE Provider Approval, CE Provider Renewal, Individual Review of CE Offerings, CE Audit (RNs & LPNs). In the future, Committee will examine CE reports biannually to allow for more analysis and trending.

Practice Committee

- Approved the letter of response to Genevieve Clifford, RN, Randa Bryan, RN, and Jane Carmody, RN, regarding the scope of registered nursing practice in the administration of Etomidate.
- Accepted, after one minor revision, the "Decision Tree for Delegation to UAPs" as written.
- Accepted, after a few minor revisions, the

UAP Medication Administration Training Manual as written.

Consumer Protection Committee

- Approved the proposed revisions to KRS 314.171.
- Approved the proposed revisions to KRS Chapter 314.
- Approved the proposed change to 201 KAR 20:161.

Dialysis Technician Advisory Council

- Approved that a Kentucky Administrative Office of the Courts (AOC) background check be obtained for initial dialysis technician applicants and those reinstating.
- Approved that the dialysis technicians provide evidence of national certification at renewal of their credential from one of the following national certifying organizations: Nephrology Nursing Certification Commission; The Board of Nephrology Examiners Nursing and Technology; or The National Nephrology Certification Organization.
- Approved revising the fee for reinstatement to \$100.00.
- Approved the change on the Dialysis Credential Application to omit the notary and picture identification requirements.
- Approved the recommendation to allow dismissal of a council member if they fail to make the first meeting and to request an alternative to fill the vacated member seat.

UAP Task Force

Approved the Medication Administration Training Manual for Non-Licensed School Personnel with two changes.

Other

Jimmy Isenberg appointed Board Members, Patricia Birchfield, Elizabeth Partin, Christe Coe, Sonia Rudolph, and staff member, Suzette Scheuermann to a work group to address the issues of the scope of practice between the Advanced Registered Nurse Practitioners (ARNP's) and the American Medical Society.

Disciplinary Action

Approved eight (8) Proposed Decisions, as written, and received reports on the approval of nineteen (19) Agreed Orders, twelve (12) Consent Decrees, and three (3) Removal of Licenses from Probation.

February 2010 Board Highlights

President's Report

- Jimmy Isenberg announced the nominating committee members for the Kentucky Board of Nursing (KBN) officer election for 2010-2011. The members are Christe Coe, Chairperson; Susan Mudd and Deborah Phillips.

Executive Director's Report

A number of bills have been filed with the Kentucky General Assembly that could impact KBN. KBN President, Jimmy Isenberg and Vice President, Trish Birchfield along with KBN Executive Director presented HB 179 before

the House of Representatives Committee on Health and Welfare February 4, 2010. The bill was passed out of committee and has been passed by the full House of Representatives.

Education Committee

Campbellsville University – Associate Degree Program

- Accepted the report from the Associate Degree program of Campbellsville University, Campbellville.
- Agreed that based on review of documents provided to the Committee during the meeting by Campbellsville University representatives, it was determined that the program has provided all evidence as requested and that no additional information is required.
- Directed the approval status of the Associate Degree program of Campbellsville University, Campbellville be changed from Conditional to Full.

Madisonville Community College – Associate Degree Program: Addition of an on-line track

- Directed that approval of the curriculum change proposed by Madisonville Community and Technology College be deferred pending response from 1) National League of Nursing Accrediting Commission regarding the curriculum change and 2) a complete analysis of the proposed clinical model in relation to 201 KAR 20: 310 administrative regulations "Faculty for prelicensure registered nurse and practical nurse programs, section – Clinical Preceptors."
- Directed that the program shall provide additional information with respect to the qualifications and potential liability of preceptors.
- Directed that Education Consultant conduct a site visit to review the full proposed plan with the college administration; program leadership; faculty members assigned to the on-line portion of the program; proposed clinical facilities; and students admitted to the program.
- Directed that all students admitted to the on-line track at Madisonville Community and Technical College participate in standard clinical rotations as do on-campus students until such time that the proposed curriculum change request is acted on by the Board.

NEW PROGRAM APPLICATIONS/ PROPOSALS

ITT Technical Institute, Louisville – Associate Degree Program

- Accepted the Proposal for the development of an Associate Degree program by ITT Technical Institute, Louisville.
- Approved that the proposed Associate Degree program of ITT Technical Institute, Louisville be granted developmental approval status for an admission class no earlier than September 2010.

continued on page 22 >>

<< BOARD HIGHLIGHTS from page 21

- Directed that as the proposed location of the program is still in the planning phases and at the present time there is not evidence that they meet the requirements set forth in 201 KAR 20:350: Educational facilities and resources for prelicensure registered nurse and practical nurse programs, that the ITT nursing program keep the Board of Nursing apprised of the construction status and that students may not start classes until said time that a representative from the Board returns for a site visit and all requirements established in 201 KAR 20:350 are met.
- Directed that the Program Administrator arrange with the Education Consultant for a site visit at least three (3) months prior to the admission of the first class.
- Directed that at the time of the pre-admission site visit, the program shall have available for the consultant the following: documentation of the implementation of the program as compared to the approved proposal; list of students admitted to the first class and their adherence to admission criteria; a copy of the nursing and campus student handbooks; copies of each syllabus for the 1st semester/quarter; list of faculty and clinical instructors for the first academic year as assigned by course; summary of clinical agencies to be utilized for the first academic year by course; copies of signed clinical agreements; policy manual for the nursing program; complete evaluation plan for the program.
- Accepted that failure to submit Board required reports within the designated time period may result in the rescinding of developmental or initial approval status.
- Accepted that approval to establish a program of nursing may be withdrawn if program requirements are not met and if a class is not enrolled within eighteen (18) months after the Board granted developmental approval. If the Board determines that a proposed program does not comply with all administrative regulations of the Board, developmental or initial approval may be withdrawn. The governing institution shall be notified in writing of the withdrawal of developmental or initial approval.

SCHOOLS APPEARING BEFORE THE BOARD REGARDING APPROVAL STATUS

President Isenberg read the guidelines and procedures for the presentations from Gateway Community and Technical College, Hazard Community and Technical College, Northern Kentucky University and Spencerian College for failure to achieve an 85 percent first time pass rate for three or more years on NCLEX.

Nathan Goldman, KBN General Counsel, presented the legal briefing regarding the Board's options for the schools approval status. Each program was instructed to discuss all plans previously submitted to the Board to

correct identified deficiencies. Data collected to evaluate each action step, including an assessment of the success of each action and any modifications made for subsequent years, were to be detailed. Any actions not implemented were also to be explained.

Gateway Community & Technical College – Associate Degree RN Program

Gail Wise recused herself from voting.

- Accepted the focused visit report of February 1-2, 2010 for the Associate Degree Nursing Program at Gateway Community & Technical College, Edgewood as specified in the June 11-12, 2009 Board Actions.
- Accepted the August 15, 2009 and the December 15, 2009 reports submitted by the Associate Degree Nursing Program at Gateway Community & Technical College, Edgewood as required within the "Letter to Show Cause" issued on May 6, 2009.
- Accepted that the Associate Degree Program of Gateway Community and Technical College, Edgewood has provided evidence of the satisfactory adherence to 201 KAR 20:260-360. That as the Associate Degree Program at Gateway Community and Technical College, Edgewood has supplied all requested information and all requirements have been met, no further follow-up is required.
- Directed that the approval status of the Associate Degree Program of Gateway Community & Technical College, Edgewood be changed from Conditional to Full.

Hazard Community & Technical College, Lees Campus – Associate Degree Nursing Program

- Accepted the focused visit report of February 4 -5, 2010 for the Associate Degree Nursing Program at Hazard Community & Technical College-Lees Campus, Jackson as specified in the "Letter to Show Cause" issued on May 6, 2009.
- Approved the Requirements to be Met as stated in this February 2-3, 2010 report to the Associate Degree program of Associate Degree program of Hazard Community & Technical College-Lees Campus, Jackson.
- Accepted the August 15, 2009 and the December 15, 2009 reports submitted by the Associate Degree Nursing Program at Hazard Community & Technical College-Lees Campus, Jackson as required within the "Letter to Show Cause" letter issued on May 6, 2009.
- Directed that the Associate Degree program of Hazard Community & Technical College-Lees Campus, Jackson submit an update report on the additional strategies implemented since the last visit and evidence collected to evaluate current strategies designed to increase first time candidate NCLEX pass rates (NCLEX report). This report shall be sent to the KBN Education Consultant no later than August 15, 2010.

- Directed the representatives of the Board of Nursing to conduct a follow-up focused site visit to the program in November 2010, to review evidence of the continued implementation of actions and evidence of outcomes.
- Directed that due to the evidence available to the Board visitors during the site visit, and the evidence reported by the program administrator and the college leadership, Hazard Community & Technical College-Lees Campus, Jackson has shown a concerted and sustained effort to meet all Board requests for the analysis and commitment to the improvement of graduate scores for the first time NCLEX-RN testers. Based on these assessments, the Associate Degree Nursing Program at Hazard Community & Technical College-Lees Campus, Jackson should remain on Conditional Approval Status.

Northern Kentucky University, Highland Heights – Baccalaureate Nursing Program

- Accepted the focused visit report of February 11, 2010 for the Baccalaureate Nursing Program at Northern Kentucky University, Highland Heights as specified in the Board Action of June 11-12, 2009.
- Approved the Requirements to be Met as stated in the February 11, 2010 report to the Baccalaureate program of Baccalaureate Degree program of Northern Kentucky University, Highland Heights.
- Accepted the August 15, 2009 and the December 15, 2009 reports submitted by the Baccalaureate Nursing Program at Northern Kentucky University, Highland Heights as required within the "Letter to Show Cause" letter issued on May 6, 2009.
- Directed that the Baccalaureate program of Northern Kentucky University, Highland Heights submit an update report on the additional strategies implemented since the last visit and evidence collected to evaluate current strategies designed to increase first-time candidate NCLEX pass rates (NCLEX report). This report shall be sent to the KBN Education Consultant no later than August 15, 2010.
- Directed that representative(s) of the Board of Nursing conduct a follow-up focused site visit to the program in November 2010, to review evidence of the continued implementation of actions and evidence of outcomes.
- Directed that as a result of the evidence available to the Board visitors during the site visit, and the evidence reported by the program administrator and the college leadership, Northern Kentucky University has shown a concerted and sustained effort to meet all Board requests for the analysis and commitment to the improvement of graduate scores for the first-time NCLEX-RN testers. Based on these

assessments, the Baccalaureate Nursing Program at Northern Kentucky University, Highland Heights should remain on Conditional Approval Status.

Spencerian College – Associate Degree Nursing Program

- Accepted the focused visit report of January 28-29, 2010 for the Associate Degree Nursing Program at Spencerian College, Louisville as specified in Board Action of June 11-12, 2009.
- Approved the Requirements to be Met as stated in this January 28-29, 2010 report to the Associate Degree Nursing Program at Spencerian College, Louisville.
- Accepted the August 15, 2009 and the December 15, 2009 reports submitted by the Associate Degree Nursing Program at Spencerian College, Louisville as required within the "Letter to Show Cause" letter issued on May 6, 2009.
- Directed that the Associate Degree Nursing Program at Spencerian College, Louisville submit an update report on the additional strategies implemented since the last visit and evidence collected to evaluate current strategies designed to increase first time candidate NCLEX pass rates. This report shall be sent to the KBN Education Consultant no later than August 15, 2010.
- Directed the representative(s) of the Board of Nursing conduct a follow-up focused site visit to the program in November 2010, to review evidence of the continued implementation of actions and evidence of outcomes.
- Directed that due to the evidence available to the Board visitors during the site visit, and the evidence reported by the program administrator and the college leadership, Associate Degree Nursing Program at Spencerian College, Louisville has not shown a concerted and sustained effort to meet all Board requests for the analysis and commitment to the improvement of graduate scores for the first time NCLEX-RN testers. Based on these assessments, the Associate Degree Nursing Program at Spencerian College, Louisville should be placed on Probational Status as outlined in 201 KAR 20:360.

OTHER

Assistance with the Self-Administration of Medication

President Isenberg introduced the subject of assistance with self-administration of medication by unlicensed personnel. He explained that several regulatory/legislative matters were currently pending before the General Assembly. He identified materials that had been prepared by staff on this issue. He acknowledged that several board members had asked that the full board consider this issue. A number of people have indicated that they would like to address the Board on this matter.

Each person who indicated that they wanted to address the Board was given five minutes to express his/her opinion. The Board Members were then given five minutes to ask questions of the speaker.

The people addressing the Board were: Mary Begley, Inspector General, Cabinet for Health and Family Services (CHFS), Frankfort, KY

Diana Mullinis, Office of Inspector General, CHFS, Frankfort, KY

Suzanne Hornstein, Office of Inspector General, CHFS, Frankfort, KY

Stephanie Brammer-Barnes, Office of Inspector General, CHFS, Frankfort, KY

Carolyn Roberts, Caring People Services

Tim Veno, KAUSA, Louisville, KY

Karen Hinkle, Kentucky Home Health Association

Colette Hofelich, Home Instead Senior Care

Becky Beanblossom, Home Instead Senior Care

Mark Lee, Attorney and member of the Board of Kentucky Assisted Living Facilities Association

Sheila Carter, Belmont Village

The Board approved the following motions:

- We as the Kentucky Board of Nursing define the assistance with self administration of medications.
- The Kentucky Board of Nursing refers the issue of definition of assistance with self administration of medications to the Practice Committee with the consumer representatives and that we express our concerns and collaborate with the Office of Inspector General and sponsors of House Bill 444.

Practice Committee

- Approved the letter of response to Angela Livingston, RN, regarding the scope of licensed practical nursing practice and the definition of "readily available" as stated in 201 KAR 20:490.
- Accepted the revisions to 201 KAR 20:490, "Licensed practical nurse intravenous therapy scope of practice" regulation.
- Approved the "KBN Guidelines to Request an Advisory Opinion" and the "Request for Advisory Opinion" form.
- Approved the revisions to AOS #3, "IV Therapy Recommended Course Content" be approved.
- Accepted the UAP Taskforce meeting report dated 11/12/09 as written.
- Directed that the UAP Taskforce not be assigned a new unlicensed assistive personnel topic at this time.

Governance Committee

- Accepted the proposed equipment policy for board members be adopted.
- Accepted the proposed amendment to 201 KAR 20:240.

Disciplinary Action

Approved five (5) Proposed Decisions, as written, and received reports on the approval of twelve (12) Agreed Orders, nine (9) Consent Decrees, and two (2) Removal of Licenses from Probation.



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The position requires a doctoral degree in nursing or a related field (if doctoral degree is in a related field, master's degree must be in nursing), at least two years of clinical practice, two years experience in nursing education, and a current, unencumbered Kentucky RN license.

Classes are taught on the Louisville and Radcliff campuses, as well as the satellite locations of University, Glasgow, and Frankfort Regional Hospitals.

Send letter of application, curriculum vitae, statement of teaching philosophy, and three current letters of recommendation with contact information referencing position # NRS12 to Shirley A. Rentz at HR@McKendree.edu or 701 College Road, Lebanon, IL 62254.

Screening will begin immediately and continue until position is filled. Minorities and members of underrepresented groups are encouraged to apply. McKendree University is an EEO/AA/ADA employer.



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KBN Congratulates Schools with 100% NCLEX Pass Rate



The Board of Nursing sends CONGRATULATIONS to the following programs of nursing that are able to boast a 100 percent pass rate for 2009. Henderson Community College Practical Nursing and Maysville Community and Technical College Practical Nursing have made this achievement for two years in a row!! Great Job!

BACCALAUREATE PROGRAMS

Morehead State University

ASSOCIATE DEGREE PROGRAMS

Big Sandy Community & Technical College, Prestonsburg
Bowling Green Technical College
Campbellsville University
Hopkinsville Community College
Morehead State University, Mt. Sterling
Southeast KY Community & Technical College, Cumberland
Western Kentucky University, Glasgow

PRACTICAL NURSING PROGRAMS

Bowling Green Technical College, Bowling Green
Elizabethtown Community & Technical College
Henderson Community College (100 percent pass rate in 2008 and 2009)
Madisonville Community College
Maysville Community & Technical College (100 percent pass rate in 2008 and 2009)
Owensboro Community & Technical College
Somerset Community College
Southeast KY Community & Technical College, Pineville
West KY Community & Technical College, Murray

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DISCIPLINARY Actions

Since the publication of the winter edition of the *KBN Connection*, the Board has taken the following actions related to disciplinary matters as authorized by the *Kentucky Nursing Laws*. A report that contains a more extensive list of disciplinary actions is available on the KBN website (<http://kbn.ky.gov/conprotect/investdiscp/disciplinary.htm>). If you need additional information, contact KBN's Consumer Protection Branch at 502-429-3300.

CEASE AND DESIST NOTICES ISSUED

Craig, Tracey L.		Mauckport, IN	Eff. 1/11/2010
Ramos, Jessica		Louisville, KY	Eff. 3/10/2010

LICENSE/CREDENTIAL REVOKED

Wilson, Karen Marie Breeden	RN License #1076562	Warsaw, KY	Eff. 2/19/2010
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IMMEDIATE TEMPORARY SUSPENSION OF PRIVILEGE TO PRACTICE

Wilson, Jennie L.	TN LPN License #69330	Paris, TN	Eff. 4/7/2010
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IMMEDIATE TEMPORARY SUSPENSION OF LICENSE/CREDENTIAL

Azzara, Michelle Lynn Humphrey	RN License #1087095	Louisville, KY	Eff. 1/29/2010
Brashear, Hope Annette Morgan	LPN License #2031299	Shepherdsville, KY	Eff. 2/18/2010
Brophy, Amber Beth Kiskaden	RN License #1117035	Maysville, KY	Eff. 3/3/2010
Buckner, Jacqueline S. Rice	RN License #1108900	Louisville, KY	Eff. 4/7/2010
Davis, Debra Jean	LPN License #2027922	Lexington, KY	Eff. 2/10/2010
Fullerton, Norman Irving	LPN License #2039048	New Albany, IN	Eff. 3/30/2010
Hall, Amy Michelle Welborn	LPN License #2037023	Louisville, KY	Eff. 3/18/2010
Henson, Hargis Lloyd	RN License #1099467	Bonnyman, KY	Eff. 2/10/2010
James, Wayne Allen	RN License #2041037	Louisville, KY	Eff. 12/22/2009
Johnson, Melissa Sue Tooley	RN License #1074021	Williamsburg, KY	Eff. 1/14/2010
Kelley, Jennifer Hope	LPN License #2039245	Versailles, KY	Eff. 2/18/2010
Mcarter, Jessica L. Howard	LPN License #2037177	Dry Ridge, KY	Eff. 2/18/2010
McIntosh, Cheri Echo Gaver	LPN License #2040319	Scottsville, KY	Eff. 4/7/2010
Moser, Patricia L. Fitzgerald	RN License #1100708	Carrollton, KY	Eff. 3/30/2010
Thomas, Vada	RN License #1102047	Littcarr, KY	Eff. 2/18/2010
Weaver, Susan Beth Stiltner	RN License #1061489	Crown City, OH	Eff. 3/30/2010
White, Erin Carol	LPN License #2041976	Taylorsville, KY	Eff. 12/22/2009
Winder, Rebecca Sue Adams	RN License #1087990	Louisville, KY	Eff. 3/25/2010

IMPORTANT LICENSURE INFORMATION

Renewing Your License: The licensure renewal period has changed and is now September 15 - midnight October 31, 2010. Failure to renew will require a reinstatement application with different criminal history requirements.

Reinstating Your License: Beginning April 1, 2010, all reinstatement applicants must submit a criminal history report obtained from the Administrative Office of the Courts (AOC). This may delay your reinstatement by up to 10 business days.

LICENSE/CREDENTIAL IMMEDIATELY SUSPENDED OR DENIED REINSTATEMENT FOR FAILURE TO COMPLY WITH BOARD ORDER; STAYED SUSPENSION IMPLEMENTED OR TERMINATION FROM THE KARE PROGRAM

Byrum, Karen Ann Gibbs	RN License #1070667; LPN License #2023303	Granite City, IL	Eff. 2/8/2010
Couch, Daphne Tawania Young	RN License #1082050	Madisonville, KY	Eff. 2/25/2010
Crain, David Paul	LPN License #2041754	Bledsoe, KY	Eff. 1/28/2010
Duvall, Sandra Denise King	RN License #1084921	Caneyville, KY	Eff. 2/8/2010
Ethridge, Brenda Lee Barr	RN License #1080571	Whitesville, KY	Eff. 1/20/2010
Fetty, David Stuart	RN License #1114584	Booneville, KY	Eff. 2/25/2010
Gearlds, Lisa Dawn	LPN License #2033828	Edmonton, KY	Eff. 1/12/2010
Gomez, Misty Renee White	RN License #1099921; LPN License #2035337	Jeffersonville, IN	Eff. 1/7/2010
Harris, Lisa Ann Beverly	RN License #1060520	LaGrange, KY	Eff. 3/31/2010
Howell, Paula K. Roberts	RN License #1054316	Inez, KY	Eff. 2/25/2010
Jackson, Pamela Kay Blincoe	RN License #1078227	Owensboro, KY	Eff. 2/19/2010
Joyce, Kimberly Lynn Tucker	LPN License #2032322	Shelby Gap, KY	Eff. 3/9/2010
Matney, Patricia Marie Abshire	RN License #1075639	Feds Creek, KY	Eff. 2/19/2010
Miller, Barbara A.	LPN License #2041073	Bowling Green, KY	Eff. 3/9/2010
Nelson, Lynn Rae Kendrick	RN License #1092107	Georgetown, KY	Eff. 2/8/2010
Perkins, Jason Derrick	RN License #1112588	Madisonville, KY	Eff. 2/8/2010
Ridener, Symmi Karl Thompson	RN License #1108363	Georgetown, KY	Eff. 1/5/2010
Robertson, Sherry Lynn Schmits	RN License #1096996	Indianapolis, IN	Eff. 3/31/2010
Whitworth, David Lee	LPN License #2032781	Louisville, KY	Eff. 2/4/2010
Wilson, Christy Lea	LPN License #2034877	Louisville, KY	Eff. 3/16/2010

LICENSE/CREDENTIAL CONTINUED ON SUSPENSION

Burchett, Deanna Sue	LPN License #2035513	West Liberty, KY	Eff. 2/19/2010
Merk, Kathleen Mary Mulvey	RN License #1093653	Corydon, IN	Eff. 2/12/2010

LICENSE/CREDENTIAL VOLUNTARILY SURRENDERED

Baughman, James Clayton	RN License #1114480	Hebron, KY	Eff. 2/24/2010
Brewer, Maryann Hodge	RN License #1100314	Marion, KY	Eff. 1/14/2010
Dilsaver, Shannon Lynn Breeding	RN License #1083729	New Albany, IN	Eff. 2/24/2010
Gunter, Robin Leigh	LPN License #2028860	Louisville, KY	Eff. 3/3/2010
Hamilton, Brenda Joyce Fannin	ARNP #4054-P	Fulton, KY	Eff. 3/25/2010
Norris, Heather L.	LPN License #2039544	Burkesville, KY	Eff. 1/14/2010
Porter, Derek Hill	RN License #1112750	Louisville, KY	Eff. 3/16/2010
Rohrscheib, Sandra Jo	RN License #1097894	Boonville, IN	Eff. 1/14/2010
SeEVERS, Deborah Lynn McKinney	RN License #1064303	Lexington, KY	Eff. 1/28/2010

LICENSE/CREDENTIAL DENIED REINSTATEMENT

Cope, Kimberly Ann Perkins LPN License #2039376 London, KY Eff. 2/19/2010

LICENSE/CREDENTIAL DENIED REINSTATEMENT/REINSTATE LIMITED-PROBATED

Heien, Kathy Jo Thorpe RN License #1057620 Utica, KY Eff. 1/14/2010

LICENSE/CREDENTIAL TO BE REINSTATED LIMITED/PROBATED

Anderson, Heidi Jo	LPN License #2034517	Covington, KY	Eff. 2/19/2010
Bailey, Elizabeth Robin Glenn	RN License #1042321	Louisville, KY	Eff. 3/30/2010
Belt, Patricia Diane	RN License #1095474	Smithland, KY	Eff. 12/10/2009
Compton, Kathryn Elizabeth Wood	RN License #1089330	Pikeville, KY	Eff. 12/10/2009
Cox, Susan Rae Youngblood	RN License #1053261	Kuttawa, KY	Eff. 12/10/2009
Culver, Bridget Marie	RN License #1096146	New Haven, KY	Eff. 12/10/2009
Henry, Jon Gregg	LPN License #2024726	Greenville, KY	Eff. 12/10/2009
Howe, Lorilee E. Kaufman	RN License #1109027	Bowling Green, KY	Eff. 2/19/2010
Lewis, Leetha W.	RN License #1070535	Versailles, KY	Eff. 12/10/2009
Nipper, Patricia Lee Watson	RN License #1030834	Louisville, KY	Eff. 12/10/2009
Parsley, Carole Ann	RN License #1104520	Williamson, WV	Eff. 12/10/2009
Robertson, Sherry Lynn Schmits	RN License #1096996	Indianapolis, IN	Eff. 1/14/2010
Walden, Denise Michelle Burgess	RN License #1073841	Glasgow, KY	Eff. 2/12/2010

LICENSE/CREDENTIAL LIMITED-PROBATED

Davidson, Sharon K. Sears	RN License #1061251	Somerset, KY	Eff. 3/16/2010
	LPN License #2021056		
Ford, Katrina Beatrice	RN License #1096298	Florence, KY	Eff. 3/16/2010
Hiser, Stacey Lee Button	RN License #1103814; ARNP #5366-P	Glasgow, KY	Eff. 2/12/2010
House, Alice Faye Bennington	LPN License #2015150	Lily, KY	Eff. 3/16/2010
Selvae, Kelli Ann Green	RN License #1113413	Louisville, KY	Eff. 1/15/2010
Shewmaker, Amber Marie	RN License #1114282	Lexington, KY	Eff. 1/14/2010
Todd, Bridgette Rene Beason	LPN License #2036197	Louisville, KY	Eff. 3/5/2010

LICENSE/CREDENTIAL REPRIMANDED

Carroll, Brenda L. Hundley	RN License #1099983; LPN License #2030118	Morning View, KY	Eff. 1/28/2010
Korfhage, Denise F. Morneau	RN License #1080830	Louisville, KY	Eff. 3/25/2010
Shepherd, Melissa Renae Thomas	LPN License #2034495	Lejunior, KY	Eff. 1/29/2010
Truitt, James Thomas Jr.	RN License #1088494	Lexington, KY	Eff. 2/12/2010
Vanyo, Cynthia Louise Savel	RN License #1096781	Ashtabula, OH	Eff. 3/19/2010

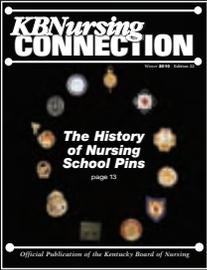
CONSENT DECREES ENTERED FISCAL YEAR TO DATE

Imposition of civil penalty for practice without a current active license, temporary work permit, or ARNP registration..... 20
 Imposition of civil penalty for falsification of an application for licensure 1
 Imposition of civil penalty for failure to meet mandatory continuing education requirement 15
 Imposition of civil penalty for a positive drug screen 14

LICENSES REMOVED FROM PROBATION FISCAL YEAR TO DATE..... 10

KENTUCKY ALTERNATIVE RECOVERY EFFORT (KARE) PROGRAM GRADUATES FISCAL YEAR TO DATE..... 20

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CRIMINAL HISTORY REPORT REQUIREMENT FOR REINSTATEMENT

Beginning April 1, 2010, all applicants for licensure by reinstatement must submit a criminal history report obtained from the Administrative Office of the Courts (AOC). The report cannot be dated more than six (6) months prior to the date the application is received at KBN.

The Administrative Office of the Courts (AOC) accepts online requests for a criminal background report, with payment by credit or debit card. The online request process may be accessed from the AOC website (<http://courts.ky.gov/aoc/AOCFastCheck.htm>).

Criminal history reports, as PDF files, are made available to KBN within 10 business days of the date the request is received.

Though the preferred method of requesting a criminal history report is from their website, AOC will accept paper requests. The paper form for obtaining the criminal history report may be printed from the KBN web site (www.kbn.ky.gov) under "Forms and Publications." Complete the

form and mail with a check or money order to the address listed on the form.

Regardless of whether a criminal history report is requested electronically or by paper, **applicants must request a report in every last name ever used.** An application for reinstatement will not be processed until all reports are received.

The additional requirement of a criminal history report for reinstatement may delay the reinstatement of an expired license by up to 10 business days, but will further promote the Board's mission of protection of the public.

NATIONAL CERTIFICATION FOR ARNP PRACTICE

Kentucky Nursing Laws, KRS 314.042 (4) states, "An advanced registered nurse practitioner shall maintain a current active registered nurse license issued by the board or hold the privilege to practice as a registered nurse in this state and maintain current certification by the appropriate national organization or agency recognized by the board."

The additional requirement of a criminal history report for reinstatement may delay the reinstatement of an expired license by up to 10 business days, but will further promote the Board's mission of protection of the public.

201 KAR 20:056, Section 7 (1) and (2) respectively, state that an ARNP shall maintain current certification or recertification "throughout the registration period" and if an ARNP fails to attain certification or recertification from a KBN approved national certifying organization, the individual "shall



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not Practice or use the title of advanced registered nurse practitioner until the requirements” have been met.

Even though national certification organizations may “back-date” or give grace periods for lapsed certifications, KBN does not. Practicing as an ARNP or using the legally protected title of ARNP beyond the expiration date of the national certification, even though the board issued ARNP registration is current, is considered a violation of Kentucky Nursing Laws and may subject the individual to disciplinary action.

Individuals are encouraged to send a copy of the national certification card, showing the certifying organization’s name, the individual’s name, the certification number, and the expiration date to KBN prior to the expiration date of the national certification. This allows KBN to update our database and avoids issues of practicing in violation of the Kentucky Nursing Laws.

Beginning this year, an ARNP will not be able to renew the ARNP registration unless KBN records reflect current certification.

RENEWAL PERIOD BEGINS SEPTEMBER 15

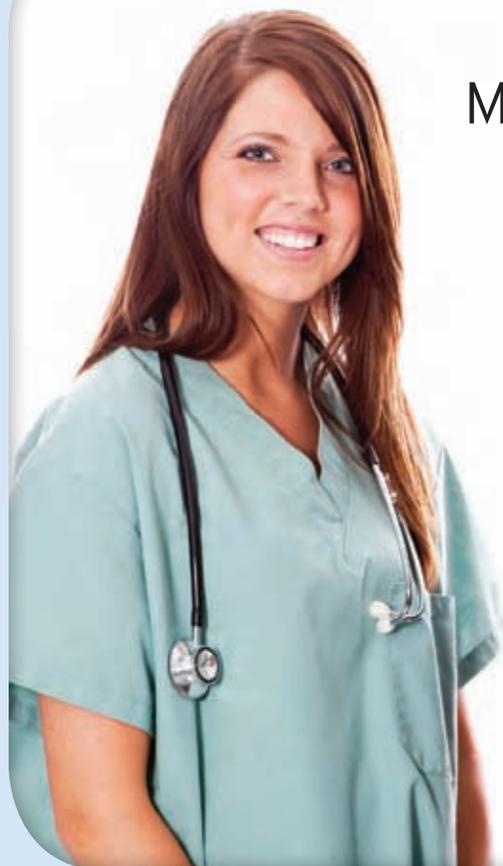
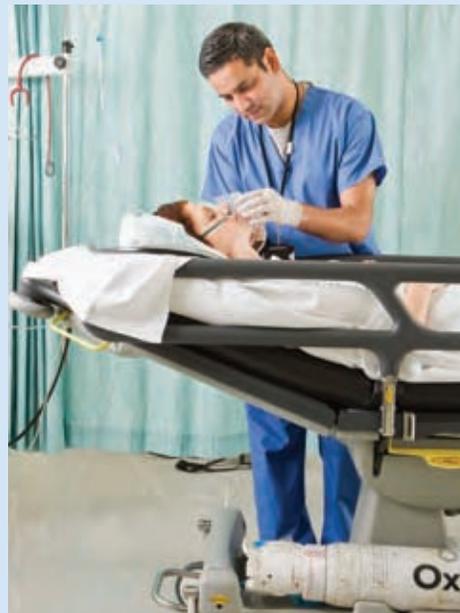
Mark your calendar: September 15 is the first day that Kentucky nurses can renew a license, registration or credential. All RN and LPN licenses, ARNP registrations, and SANE credentials expire at midnight, October 31, of every year.

Failure to renew will subject the licensee to reinstatement and the new criminal history requirement (information on p. 28).

E-MAIL ADDRESSES AND TELEPHONE NUMBERS

KBN does not distribute e-mail addresses or telephone numbers to third party vendors. The board only uses e-mail addresses to send important licensure information to licensees. If you receive e-mail or telephone solicitations that relate to the practice of nursing, be assured that the solicitors did not receive your e-mail address or telephone number from KBN. Please check the privacy policies

of websites you interact with to ensure that your e-mail address is not being used for direct marketing purposes. Your ISP (Internet Service Provider) should be able to tell you how to report unsolicited e-mail as spam.



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What is the KARE for Nurses Program?

by Paula S. Schenk, MPH, RN,
KARE Program Manager

The Kentucky Alternative Recovery Effort (KARE) for Nurses program was developed and is offered by the Kentucky Board of Nursing (KBN). The purpose of KARE is to identify and assist nurses whose abilities to provide nursing care are compromised by dependency on drugs or alcohol so that they can return to competent and safe practice. The program recognizes that nurses are individuals who have dedicated their lives to helping others and are now in need of help. KARE's foundation is that substance abuse is treatable and that the recovery and return to competent nursing practice is in the best interest of the nurse and public health. KARE believes that a nurse should not lose a job or license due to substance abuse and offers an opportunity for encouragement, treatment and recovery. The program emphasizes hope and is administered with compassion, confidentiality, concern and dignity for the nurse.

The Disease . . .

Many people believe that nurses are immune from addiction by virtue of their intelligence and education. In reality, exposure, easy availability, and familiarity with medications often lead predisposed health professionals to develop chemical dependency. Substance abuse is one of the major factors threatening safe nursing practice. Chemical dependency is a chronic, progressive illness characterized by the use of chemicals in spite of adverse consequences. This compulsive-use cycle may have periods where use is controlled, but it is normally followed by at least one episode of out-of-control use causing adverse consequences in one's life. Not recognizing or dealing with chemical dependency will exacerbate the problem. Often we are too engrossed in our own problems to be objective, and our individual efforts result in more stress that increases the severity of the situation. Left untreated, chemical dependency will not only risk your life, but the life and safety of patients.

There is a place to turn for help . . .

Nurses often buy into the myth that they should be able to handle their chemical dependency because they are health care providers. What may seem a tremendous burden to one person can become a lighter load when shared with someone else. The first step is to admit there is a problem. It isn't easy to admit to another person that we are having trouble handling our problems alone. It is a subject that we avoid discussing or confronting. Yet once we reach that first step, we can begin the process of regaining our life.

Services . . .

KARE develops individualized Program Agreements

based upon the unique circumstances of the nurse. Monitoring can be facilitated in many ways, such as:

- Assisting with identification, assessment and referral to approved treatment providers.
- Monitoring participants' compliance during recovery and continued nursing practice.
- Providing education to nurses, employers and other groups about KARE.
- Providing encouragement and support to help ensure the participants are able to practice nursing in accordance with acceptable and prevailing standards of safe nursing care.

Confidentiality . . .

Requests for information and/or assistance are strictly confidential. All records of program participants are confidential. Participation in KARE is voluntary and will remain anonymous as long as the participant is compliant with the terms of the program agreement.

Eligibility . . .

A nurse may access KARE by self-referral, board referral, referral from another person or agency, such as an employer, coworker or family member. Admission to KARE is available to individuals who, at the time of application, meet the requirements listed below:

- RN or LPN, licensed in Kentucky, or an applicant for a credential issued by KBN;
- Request participation in the program (regardless of whether referred by the Board, self, or another person);
- Admit, in writing, to being a chemically dependent individual;
- Have not been terminated from a similar program in this or any other state for noncompliance;
- Have attended an approved treatment provider;
- Obtain a chemical dependency assessment, which includes a complete physical and psychosocial evaluation performed by a licensed or certified medical or psychological specialist in the field of drug, alcohol, or other chemical dependency;
- Agree to the terms set forth in the agreement; and
- Agree not to be employed in any capacity in a patient care setting or one that requires licensure until approved to do so by the program staff.

Questions? KARE compliance forms are located on the KBN website (<http://kbn.ky.gov/kare.htm>). To obtain further information or to make a confidential referral, call 800-305-2042 and speak with Paula Schenk, KARE director (Ext. 236 or PaulaS.Schenk@ky.gov) or Jill Cambron, KARE Coordinator (Ext. 289 or JillM.Cambron@ky.gov).



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Nicola – Registered Nurse

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