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Vol. 17, Issue 2, Edition 87

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KBN MISSION

The Kentucky Board of Nursing protects the public by development and enforcement of state laws governing the safe practice of nurses, dialysis technicians, and licensed certified professional midwives.

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PUBLICATION GUIDELINES

Articles from guest authors may be submitted for publication in the KBN Connection. Priority will be given to subject matter regarding Kentucky nurses, dialysis technicians, and licensed certified professional midwives. Articles should not exceed 1,000 words in length unless approved by the Editor. **Contact KBN Connection Editor for more detailed instructions.**

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STATISTICS CORNER

APRN-CNM:	197
APRN-CNP:	14,098
APRN-CNS:	117
APRN-CRNA:	1,915
CMA I:	2,198
CMA II:	165
DT Credential:	644
LCPM:	49
LPN:	12,517
Medicinal Cannabis:	355
RN:	78,997
SANE Credential AA:	501
SANE Credential PA:	82
SRNA Certification:	46,812
Total:	158,647



President's Message

Honoring the Legacy and Future of Nursing



Dear Kentucky Nurses,

Each year, National Nurses Week gives us an opportunity to pause, reflect, and recognize the extraordinary contributions nurses make to patients, families, communities, and the healthcare system as a whole. It is a time to celebrate not only the work nurses do, but the legacy they carry forward and the future they continue to shape.

Modern nursing is rooted in service, science, courage, and compassion. Florence Nightingale, often recognized as the founder of modern nursing, transformed the profession by demonstrating that nursing was not only an act of care, but a discipline grounded in evidence, observation, public health, and advocacy. Her work elevated the role of the nurse from caregiver alone to clinician, educator, leader, and reformer.

That legacy continues today. Nurses are present in some of life's most vulnerable and defining moments. They are at the bedside, in clinics, schools, public health departments, long-term care facilities, correctional settings, academic institutions, boardrooms, policy tables, and communities across the Commonwealth. Nurses assess, educate, advocate, lead, comfort, innovate, and respond. They are often the first to notice subtle changes in a patient's condition, the steady voice for a worried family, and the bridge between complex healthcare systems and the people they serve.

It is no surprise that nursing continues to be recognized as the most trusted profession in America. For more than two decades, the public has consistently rated nurses highest for honesty and ethical standards. That trust is not accidental. It is earned every day through competence, integrity, compassion, accountability, and a deep commitment to the well-being of others.

As President of the Kentucky Board of Nursing, I am especially mindful of the privilege and responsibility we share in protecting the public and supporting safe, competent nursing practice. The Board's

mission is grounded in public protection, but it is also connected to something larger: preserving the trust that communities place in nurses and ensuring that the profession remains strong, ethical, and prepared for the future.

Nursing is also changing rapidly. Advances in technology, shifts in care delivery, workforce challenges, health disparities, and growing patient complexity require nurses to practice with both skill and adaptability. Yet even as healthcare evolves, the heart of nursing remains constant. At its core, nursing is about seeing the person in front of us, responding with knowledge and compassion, and using our voice to improve care.

During Nurses Week, I hope every nurse in Kentucky feels seen, valued, and deeply appreciated. Whether you are a student just beginning your journey, a new graduate finding your confidence, a bedside nurse providing direct care, an educator preparing the next generation, an advanced practice registered nurse expanding access to care, a nurse leader shaping systems, or a retired nurse whose influence continues through those you mentored—your work matters.

Thank you for the countless ways you serve. Thank you for the sacrifices that often go unseen. Thank you for upholding the standards of the profession and for continuing to earn the trust of the people of Kentucky.

This Nurses Week, we honor our history, celebrate our present, and look with confidence toward the future of nursing. The Commonwealth is stronger, healthier, and better cared for because of nurses.

With gratitude and respect,

Audria Denker, DNP, RN, FAAN

Audria Denker, DNP, RN, FAAN, ANEF
President, Kentucky Board of Nursing



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Executive Director's Message



Dear Kentucky Nurses,

As we celebrate National Nurses Week, I want to take a moment to recognize and thank each of you for the extraordinary work you do every day across the Commonwealth.

Nursing is the backbone of healthcare. Whether you are practicing at the bedside, leading teams, educating the next generation, serving in long-term care, supporting community health, or advancing policy, your commitment ensures that Kentuckians receive safe, high-quality care. Your clinical expertise, compassion, and resilience are evident in every setting where nursing is practiced.

At the Kentucky Board of Nursing, our mission is to protect the public through the regulation of safe nursing practice, education, and credentialing. That mission is only possible because of you. Your professionalism and dedication to maintaining standards of care are what uphold public trust in nursing.

This past year has continued to present challenges—workforce demands, evolving patient needs, and the complexity of modern healthcare. Yet, time and again, Kentucky nurses have risen to meet those challenges with innovation, collaboration, and unwavering

commitment. Your ability to adapt while maintaining excellence speaks volumes about the strength of this profession.

Nurses Week is not only a time for recognition, but also for reflection and renewal. I encourage each of you to take time to care for yourselves as you care for others. Your well-being is essential to sustaining the vital work you do.

The Kentucky Board of Nursing remains committed to supporting you through clear communication, efficient processes, and continued efforts to modernize our systems and strengthen our partnerships. We value your role not only as licensees, but as essential partners in protecting the health and safety of the public.

On behalf of the Board and our staff, thank you for your service, your integrity, and your dedication to the people of Kentucky. You make a difference every single day.

With sincere appreciation,

A handwritten signature in black ink that reads "Kelly Jenkins".

Kelly Jenkins MSN, RN
Executive Director, Kentucky Board of Nursing

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APRN COMPLIANCE CORNER

APRN Scope of Practice

Marina McWilliams, MSN, APRN, NP-C
APRN Investigations Branch Manager



APRNs are licensed, independent practitioners, NPs practice autonomously and in coordination with health care professionals and other individuals. APRN scope of practice (SOP) is not setting specific. An APRN may work in almost any setting provided that the needs of the patients for whom they are providing care fall within their professional scope of practice; consistent with the APRN Consensus Model, that describes the four roles and the recognized population foci.

Acquiring New Skills and Activities

APRN academic/graduate programs follow established educational standards, which provide the APRN with specialized knowledge and clinical competency, which enable them to practice according to an established role and population focus. Pursuant to KRS 314.021(2) all nurses are held responsible and accountable for making decisions that are based upon the individual's educational preparation and current clinical competence.

When seeking to acquire new skills or activities an APRN may wish to consider whether the new skill is:

- Consistent with the professional scope and standards of practice in which the APRN has received national certification and licensure (role and population focus).
- Consistent with state and federal laws.
- Further, the APRN will be expected to be able to provide documentation for how the APRN become educationally prepared and clinically competent to perform a newly acquired skill.

One method for demonstrating educational preparation and clinical competence is through obtaining relevant certifications within a specialty area. Another method would be to create a portfolio of

trainings, workshops, and continuing education that demonstrates the acquisition of additional knowledge and clinical competency in the specialty area.

APRN Scope of Practice Topics of Frequent Concern

- Prescriptive Authority
- Medicinal Cannabis
- Certified Registered Nurse Anesthetist and Prescriptive Authority
- Same or Similar Specialty
- Dispensing
- Stocking and Storing of Controlled Substances
- Opening a Practice
- Med Spas
- Ambulatory Infusion Agencies vs IV Hydration Clinics
- Weight Loss and Semaglutide
- Hormone Replacement Therapy with Testosterone Containing Pellets
- Telehealth
- Malpractice Insurance
- Prescribing Across State Lines
- Death Certificates
- Age Range for the Pediatric Nurse Practitioner
- Age Range for the Adult-Gerontology Nurse Practitioner
- NEW LAW STARTS JANUARY 1, 2025: Vision Screenings Required for Kentucky Driver's License Renewals

Reference

Kentucky Board of Nursing Website:
<https://kbn.ky.gov/practice/Pages/APRN-Scope-of-Practice.aspx>

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General Counsel Statutory and Regulatory Update

Jeffrey R. Prather, JD
General Counsel

Kentucky Revised Statutes (KRS) Update

The following is a summary of some of the bills enacted during the 2016 regular session.

House Bill 134: An act relating to sexual assault nurse examiners.

This bill requires the Kentucky Board of Nursing to employ a health professional as a statewide sexual assault nurse examiner (SANE) coordinator. It also establishes the requirements for the description, essential duties, and responsibilities of the SANE coordinator position to develop a statewide strategic plan that utilizes a regional model to ensure SANE coverage for all Kentucky hospitals. The bills the board to develop a state registry of SANEs that is accessible from the board's website by December 1, 2026, and require the board to notify newly registered SANEs of the registry.

The bill was introduced on January 7, 2026. It passed both chambers unanimously and it was signed into law by the governor on April 10, 2026.

House Bill 185: An act relating to employment.

This bill creates new sections of KRS Chapter 335B that require hiring or licensing authorities to establish an application process that gives persons convicted of a crime an opportunity to obtain a determination about whether the crime will disqualify the individual from a position of public employment or occupational license, prior to pursuing employment or training. The authorities are required to create an application process, and regulations must be

promulgated by January 1, 2027. They must also provide an annual report to the Legislative Research Commission by November 1, 2027. It further requires authorities to evaluate information and provide written findings of fact to the applicant upon determination.

The bill was introduced on January 7, 2026. It passed both chambers unanimously and it was signed into law by the governor on April 10, 2026.

House Bill 280: An act relating to health care and declaring an emergency.

This bill amends KRS Chapter 314 to add educational credential requirements for licensure as a licensed practical nurse or a registered nurse who are applying for licensure by endorsement. It further requires physicians who collaborate with advanced practice nurses to have an active and unrestricted license in Kentucky. The bill further amends the time a licensee is required to report a conviction from 90 to 30 days. The bill also amends KRS 209.032, to permit a state licensing board to query the cabinet for a validated substantiated finding of adult abuse, neglect, or exploitation against an individual under the licensing board's jurisdiction. The bill creates new sections and amends definitions of KRS Chapter 158.830 to permit health care practitioners to prescribe and dispense undesignated certain medications in the name of a school or to a trained individual, and permit trained individuals to receive, possess, and administer the medications during diabetic medical emergencies.

It further permits schools to stock the medications, and limits civil liability for due to good-faith actions.

The bill was introduced on January 8, 2026. It passed both chambers unanimously and was delivered to the governor on March 31, 2026, who signed it on April 10, 2026. The bill was filed as an emergency and went into effect when it was signed.

House Bill 387: An act relating AN ACT relating to veterinarians and declaring an emergency.

This bill amends KRS 218A.025 to replace a physician and an advance practice registered nurse on the Controlled Substances Prescribing Council with a livestock veterinarian and an equine veterinarian. KRS 218A.202 is further amended to specify that a veterinarian shall not be required to report on prescribing, administering, or dispensing controlled substances to the Controlled Substances Prescribing Council, the cabinet, or any other governmental entity except the Kentucky Board of Veterinary Examiners.

The bill was introduced on January 14, 2026. The bill passed both chambers and was delivered to the governor on April 1, 2026, for signature. However, the governor vetoed the bill, and the general assembly overrode the veto on April 14, 2026.

House Bill 388: An act relating to prescription drugs.

This bill amends KRS 205.529, 218A.172, 218A.205, and 304.17A.165 to remove references to a Schedule III controlled substance containing hydrocodone; amend KRS 218A.010 to add optometrist and physician assistant to the definition of "practitioner" licensed in other states; amend KRS 218A.182 to exempt charitable health care practitioners from electronic prescription requirement; amend KRS 218A.202 to require an active account with the electronic monitoring system be maintained by practitioners or pharmacists prescribing or dispensing Schedule II, III, IV, or V controlled substances; amend KRS 218A.245 to permit the Cabinet for Health and Family Services to enter reciprocal agreements or contracts with any federal agency of the United States or its territories.

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The bill was introduced on January 8, 2026. It passed both chambers unanimously and was delivered to the governor on March 26, 2026; he signed it on April 7, 2026.

House Bill 459: An act relating to licensed occupations.

This bill provides for a new section of KRS Chapter 335B that requires licensing authorities of healthcare occupations to collect workforce participation data during the annual, biennial, or triennial licensure renewal process; prohibit the collection of a licensee's Social Security number in that data. The bill allows a licensee to decline to allow the sharing of the data. Licensing authorities are further required to report the collected data to the Cabinet for Health and Family Services. The bill further amends KRS Chapter 335 to authorize an applicant who holds an active license from another state to practice as an independent marriage and family therapist. The bill also creates a new section of KRS Chapter 335 requiring a board to notify an applicant of any technical error in any licensure, permit, renewal, or reinstatement application within 1 week of its discovery, and provide the applicant 2 weeks to correct the error; and requires the board to review the correction within 1 week of the submitted correction.

The bill was introduced on January 21, 2026. It passed both chambers unanimously and was delivered to the governor on March 31, 2026. It was signed by the governor on April 10, 2026.

Kentucky Administrative Regulation (KAR) Update

201 KAR 20:472

This administrative regulation concerns the initial approval for Dialysis Technician (DT) training programs

The amendment provides that an initial DT training program seeking board approval must only provide a copy of the approval of certification from the program's governing organization to operate a renal dialysis center, and it removes the requirement for the most recent site visit or survey report.

Promulgation:

- On November 25, 2025, the proposed amendments were reviewed with the DT Council.
- On January 16, 2025, the Practice Committee considered and approved the changes.

Continued on page 12>>



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- On February 26, 2026, the Board considered and approved the changes.
- On March 10, 2026, staff filed the regulation with the LRC.
- A public hearing has been tentatively scheduled for May 26, 2026, if no notifications of intent to attend the hearing are received by that date, the hearing may be cancelled; public comments are due by May 31, 2026.

201 KAR 20:474

This administrative regulation concerns the continuing approval and periodic evaluation of DT training programs.

The amendment provides a DT training program must notify the board of a Centers for Medicaid and Medicare Services (CMS) site visit within 90 days of the close of the visit, and the DT program will be required to file a report. If CMS finds deficiencies during the visit the DT program will be required to provide correspondence and reports from CMS related to the deficiencies; the program's plan of correction; and the DT training program's continued approval certification.

Promulgation:

- On November 25, 2025, the proposed amendments were reviewed with the DT Council.
- On January 16, 2025, the Practice Committee considered and approved the changes.
- On February 26, 2026, the Board considered and approved the changes.
- On March 10, 2026, staff filed the regulation with the LRC.
- A public hearing has been tentatively scheduled for May 26, 2026, if no notifications of intent to attend the hearing are received by that date, the hearing may be cancelled; public comments are due by May 31, 2026.

201 KAR 20:476

This administrative regulation concerns Dialysis Technician (DT) credentialing requirements for initial credentialing, renewal, and reinstatement.

The amendments remove reference to paper applications and update the associated material incorporated by reference, incorporating recent regulatory changes to DT training requirements.

Promulgation:

- On August 19, 2025, the DT Council was informed of the planned changes to the regulation.
- On September 18, 2025, the Governance Committee considered and approved the changes.
- On October 23, 2025, the Board considered and approved the changes.
- On November 12, 2025, staff filed the regulation with the LRC.
- On February 9, 2026, the regulation was considered by the Administrative Regulation Review Subcommittee (ARRS) and passed to the legislative committees of jurisdiction.
- On March 10, 2026, the Senate Committee on Health Services considered the regulation, and it was passed.
- On March 12, 2026, the House Committee on Health Services considered the regulation, and it was passed.

201 KAR 20:490

This administrative regulation concerns Licensed Practical Nurse (LPN) infusion therapy scope of practice.

The amendments update the Material Incorporated by Reference (MIR) to the current editions and require the LPN nurse to demonstrate and validation of competency for infusion therapy procedures under the in-person and direct supervision of a registered nurse, advanced practice registered nurse, physician assistant, licensed physician, or dentist.

Promulgation:

- On September 19, 2025, the Practice Committee considered and approved the changes.
- On October 23, 2025, the Board considered and approved the changes.
- On November 12, 2025, staff filed the regulation with the LRC.
- On February 9, 2026, the regulation was considered by the ARRS and passed to the legislative committees of jurisdiction.
- On March 10, 2026, the Senate Committee on Health Services considered the regulation, and it was passed.
- On March 12, 2026, the House Committee on Health Services considered the regulation, and it was passed.

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STAFF RECOGNITIONS – JEFF PRATHER AND ANDRE STUCKEY

Joe Lally, Deputy Executive Director, recognized Jeff Prather, General Counsel, for 20 years of service in Kentucky state government.

Kelly Jenkins, Executive Director, recognized Andre Stuckey, Human Resources Administrator, for five (5) years of service in Kentucky state government.

PRESIDENT'S REPORT

Audria Denker, Board President, announced that she will be attending the NCSBN mid-year conference in March, and there has been an ask for items to include on the Presidents' meeting agenda. If Board members have any subject item suggestions, please send them to Audria or Kelly asap.

FINANCIAL OFFICER'S REPORT

- It was moved and seconded to accept the financial officer's report, which was approved by acclamation.

EXECUTIVE DIRECTOR'S REPORT

Kelly Jenkins, Executive Director, presented the Executive Director's report and included information on the following: Operations [New software vendor; Annual report]; KBN Outreach; Personnel Professional Development; Personnel; Training for Board Members

- It was moved and seconded to accept the Executive Director's report, which was approved by acclamation.

Dialysis Technician Advisory Council New Member Appointment

Kelly Jenkins presented one nominee, Taylor Chase, for appointment as a new member of the Dialysis Technician Advisory Council. Ms. Chase fills a vacancy created by Tynne Strickert's resignation from the Council, and will serve the rest of the term ending in June 2028.

- It was moved and seconded to accept the Dialysis Technician Advisory Council New Member Appointment, which was approved by acclamation.

KBN Letter to submit to US Department of Education Undersecretary of Education, Nicholas Kent re: Reimagining and Improving Student Education (RISE) Committee

Kelly Jenkins presented the KBN Letter to submit to US Department of Education Undersecretary of Education, Nicholas Kent re: Reimagining and Improving Student Education (RISE) Committee.

- It was moved and seconded to accept The KBN Letter to US Department of Education Undersecretary of Education, Nicholas Kent re: Reimagining and Improving Student Education (RISE) Committee be accepted as written, and KBN staff be approved to submit the letter to the US DOE, which was approved by acclamation.

GENERAL COUNSEL'S REPORT

Jeff Prather, General Counsel, presented the General Counsel's Report.

- It was moved and seconded to accept the General Counsel's report, which was approved by acclamation.

CREDENTIALS REVIEW PANEL

- It was moved and seconded to accept the reports of the December 18, 2025 and January 15, 2026 Credentials Review Panel meetings, which were approved by acclamation.

EDUCATION COMMITTEE

Education Committee Report – January 15, 2026

- It was moved and seconded to accept the January 15, 2026 Education Committee report, which was approved by acclamation. The following committee recommendations were moved and seconded and were approved by acclamation after discussion and presentation of background materials:

Jefferson Community and Technical College, ASN – Shelbyville, site visit report

- Approve the requirements to be met as stated in the site visit report with quarterly progress reports providing evidence to those requirements, beginning January 30, 2026, and Jefferson Community and Technical College - Shelbyville Campus ASN Program be given approval status.

Beckfield College, All Programs: Interim Program Administrator Extension Request

- The Beckfield College, All Programs: Interim Program Administrator Extension Request be approved with the following revision: Change the date from 2025 to 2026.

Big Sandy Community & Technical College, ASN – Pikeville: Fulfillment of Requirements to be Met

- Big Sandy Community & Technical College, ASN – Pikeville be moved from initial to approved status.

PRACTICE COMMITTEE

Practice Committee Report – January 16, 2026

- It was moved and seconded to accept the January 16, 2026 Practice Committee report, which was approved by acclamation. The following committee recommendations were moved and seconded and were approved by acclamation after discussion and presentation of background materials:

Advisory Opinion Statements

Text Messaging, Patient Care Orders, and AOS #14 Roles and Responsibilities of the Nurse in the Implementation of Patient Care Orders

- Advisory Opinion Statement (AOS) #14 Roles and Responsibilities of the Nurse in the Implementation of Patient Care Orders, be approved by the Board, as submitted.

AOS #35 Roles of Nurses in Cosmetic and Dermatological Procedures

- Advisory Opinion Statement (AOS) #35 Roles of Nurses in Cosmetic and Dermatological procedures be approved by the Board, as submitted

AOS #17 Roles of nurses in the administration of "PRN" medication and placebos

- Advisory Opinion Statement (AOS) AOS #17 Roles of Nurses in the administration of "PRN" Medication and Placebos, be approved by the Board, as submitted

Dialysis Technician Regulation Revisions 201 KAR 20:472

- 201 KAR 20:472 Initial approval for dialysis technician training programs is to be amended, by the Board, as submitted.

201 KAR 20:474

- 201 KAR 20:474 Continuing approval and periodic evaluation of dialysis technician training programs be amended, by the Board, as submitted.

CONSUMER PROTECTION COMMITTEE

Consumer Protection Committee Report – January 15, 2026

- It was moved and seconded to accept the January 15, 2026 Consumer Protection Committee report, which was approved by acclamation. The following committee recommendations were moved and seconded and were approved by acclamation after discussion and presentation of background materials:

Recommendations from the KARE Subcommittee

- The Kentucky Alternative Recovery Effort for Nurses (KARE) Program be restructured and reduced from five years to a minimum of three years.

Agreed Order Template Revisions

- The Agreed Order template revisions be approved as presented.

ACTION ON LICENSES

- It was moved and seconded that 11 orders, with no exceptions filed, discussed in closed session be accepted as presented, which were approved by acclamation.

PERSONNEL ACTIONS

The personnel actions were provided for information only and discussed in closed session.

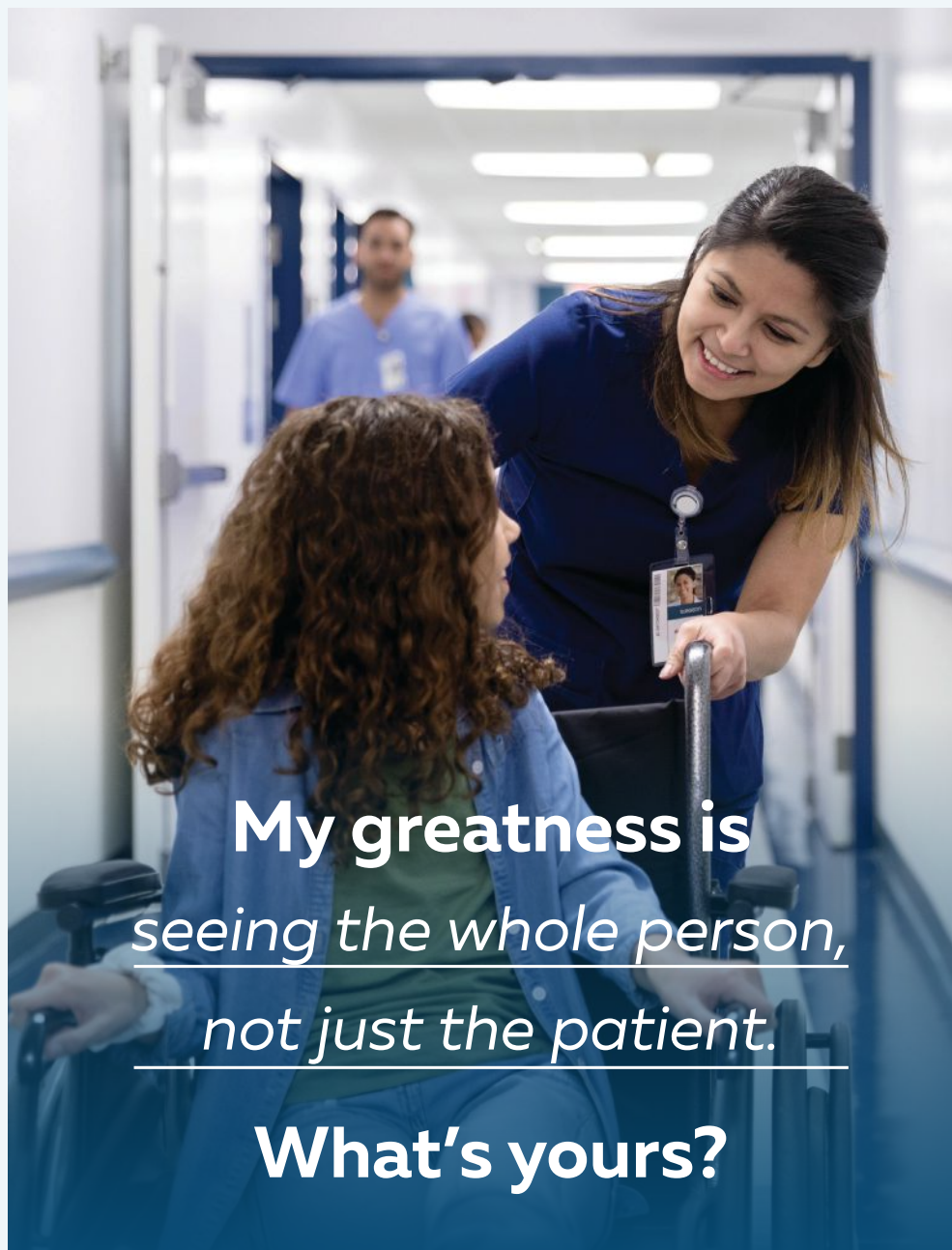
INFORMATION/ANNOUNCEMENTS

- A brief update on HB280 in the 2026 legislative session was provided.
- A brief update on Operation Nightingale was provided.

OTHER

The following items were provided for information only:

- KBN organizational chart, updated February 2026.



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PRESIDENT’S REPORT

Audria Denker, Board President, congratulated Kelly Jenkins, KBN Executive Director, on completing the ICRS course offered by NCSBN.

FINANCIAL OFFICER’S REPORT

- It was moved and seconded to accept the financial officer’s report, which was approved by acclamation.

EXECUTIVE DIRECTOR’S REPORT

Kelly Jenkins, Executive Director, presented the Executive Director’s report and included information on the following: Operations [New software vendor; Annual report]; KBN Outreach; Personnel Professional Development; Personnel; Training for Board Members

- It was moved and seconded to accept the Executive Director’s report, which was approved by acclamation.

GENERAL COUNSEL’S REPORT

Jeff Prather, General Counsel, presented the General Counsel’s Report, which included an update from the 2026 regular legislative session.

- It was moved and seconded to accept the General Counsel’s report, which was approved by acclamation.

CREDENTIALS REVIEW PANEL

- It was moved and seconded to accept the reports of the February 26, 2026 and March 26, 2026 Credentials Review Panel meetings, which were approved by acclamation.

EDUCATION COMMITTEE

Education Committee Report – March 26, 2026

- It was moved and seconded to accept the March 26, 2026 Education Committee report, which was approved by acclamation. The following committee recommendations were moved and seconded and were approved by acclamation after discussion and presentation of background materials:

MedQuest, PN – Louisville: 2025 Pass Rate Update

- The MedQuest, PN – Louisville: 2025 Pass Rate Update Report be approved as written.

Prelicensure Program Accreditation Status

- Approve the template letter as written, and allow staff to send it to affected programs.

University of Pikeville, ASN – Pikeville: Site Visit Report

- The requirements to be met for the University of Pikeville ASN Program, Pikeville, KY be accepted as written, the program be required to submit quarterly progress reports beginning May 31, 2026 and that the program remain on approved status.

Medical Career and Technical College, PN – Richmond: Site Visit Report

- The requirements to be met for the Medical Career and Technical College PN Program, Richmond, KY be accepted as written, the program be required to submit quarterly progress reports beginning May 1, 2026 and that the program remain on approved status.

Western Kentucky University, DNP/APRN – Bowling Green: Letter of Intent

- The Western Kentucky University, DNP/APRN – Bowling Green: Letter of Intent be approved as written.

PRACTICE COMMITTEE

Practice Committee Report – March 27, 2026

- It was moved and seconded to accept the March 27, 2026 Practice Committee report, which was approved by acclamation. The following committee recommendations were moved and seconded and were approved by acclamation after discussion and presentation of background materials:

Advisory Opinion Statements

AOS #22 Roles of Nurses who Provide “Private Duty” Nursing

- Advisory Opinion Statement (AOS) #22 Roles of Nurses who Provide “Private Duty” Nursing, be approved by the Board, as submitted.

AOS #29 Roles of Nurses in Respiratory Nursing Practice

- Advisory Opinion Statement (AOS) #29 Roles of Nurses in Respiratory Nursing Practice, be approved by the Board, as submitted.

AOS #35 Roles and Responsibilities of Nurses in Cosmetic and Dermatological Procedures – Addendum to the Practice Committee

- AOS #35 Roles and Responsibilities of Nurses in Cosmetic and Dermatological Procedures – Addendum to the Practice Committee

CONSUMER PROTECTION COMMITTEE

Consumer Protection Committee Report – March 26, 2026

- It was moved and seconded to accept the March 26, 2026 Consumer Protection Committee report, which was approved by acclamation. Anne Veno served as proxy to the Committee Chair in Ashley Adkins’s absence. The following committee recommendations were moved and seconded and were approved by acclamation after discussion and presentation of background materials:

Proposed Guideline Changes

1. The proposed language for GUIDELINES FOR DISPOSITION OF CASES BY STAFF PER DIRECTION OF CREDENTIALS REVIEW PANEL UNSUBSTANTIATION OR LETTER OF CONCERN (CPB-06) be approved.
2. The proposed language for GUIDELINES FOR THE EVALUATION OF A MINOR INCIDENT (CPB-07) with amendments be approved.
3. The proposed language for GUIDELINES FOR REVIEW OF CRIMINAL CONVICTIONS AND DISCIPLINARY ACTIONS FROM OTHER JURISDICTIONS (CPB-be approved.
4. The proposed language for GUIDELINES FOR DISCIPLINARY ACTIONS FOR LICENSED NURSES AND/OR APPLICANTS (CPB-3) be approved.
5. The proposed language for GUIDELINES FOR CONSENT DECREES (CPB-2) be approved.
6. The proposed language for GUIDELINES FOR ISSUANCE OF A CONSENT DECREE FOR PRACTICE CASES (CPB-2A) be approved.
7. The proposed language for NOTICE OF COMPLAINT-IB and NOTICE OF COMPLAINT-CB be approved.

Jeff Prather, General Counsel, informed the Board that as a result of a bill that recently passed in the legislative session, additional revisions to



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number 3 will be required. This item will be brought back to the Practice Committee when the revisions have been drafted.

GOVERNANCE COMMITTEE

- It was moved and seconded to accept the report of the March 26, 2026 Governance Committee meeting, which was approved by acclamation.

ACTION ON LICENSES

- It was moved and seconded that two (2) orders, with no exceptions filed, discussed in closed session be accepted as presented, which were approved by acclamation.

PERSONNEL ACTIONS

The personnel actions were provided for information only. There was no discussion in closed session regarding personnel matters.

OTHER

The following items were provided for information only:

- KBN organizational chart, updated April 2026.



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PRACTICE CORNER: Scope of Practice



IV Hydration Guidance Update

The Kentucky Board of Nursing, in collaboration with the Kentucky Board of Pharmacy and other regulatory agencies, has provided guidance on IV Hydration therapy. We are aware of confusion regarding this guidance. This email clarifies the nurse's role in preparing IV medications. To address this, we have updated our language on compounding IV medications as outlined below.

No more than two (2) sterile products may be added to a bag of IV fluids. Combining more than three (3) sterile products (*IV fluids are considered a sterile product) is outside the scope of practice of the nurse. For additional information regarding the preparation of sterile medications, see USP 797.

Immediate Use Compounded Sterile Products (CSPs) must be administered within 4 hours of the start of preparation and may not be batched, stored, or prepared in advance.

For more guidance regarding IV Hydration and the use of CSPs, please see KBN's FAQ webpage and the Kentucky Board of Pharmacy's FAQ webpage.

Advisory Opinions

As reported in the last KBN Connection Advisory Opinion Statements (AOS) are the Board's opinions on what constitutes safe nursing practice provide guidance to nurses. They do not have the force and effect of a statute or regulation. Each opinion is based on comprehensive research and review of Kentucky Nursing Laws, established standards of practice, and current evidence-based practices.

Have you ever wondered if a particular task was in your scope or practice?

A nurse's scope of practice is defined in Kentucky Nursing Laws by license type. See, Kentucky Revised Statutes (KRS) 314.011. These definitions provide a structured outline of the scope of practice based on the education and training required for a nurse, depending on the license type they hold. It is important to note that a nurse's scope of practice is dependent on their individual educational preparation and clinical competency. Each nurse is responsible and accountable for making decisions based on their education and experience, and for practicing with reasonable skill and safety. See, KRS 314.021. One way to demonstrate educational preparation and clinical competence is to attend training and relevant certifications in a particular area. Create a portfolio of training, workshops, and continuing education that demonstrates the acquisition of additional knowledge and clinical competency.

To ensure each AOS is current and evidence-based, the KBN reviews AOS on a 2 to 3-year schedule and when issues arise.

Check out the Advisory Opinion Statement Index to see each AOS by number, title, and the most current issue or revision date.

Recent AOS Revisions

In this article, we will look at a few AOS revisions since the last Practice Corner:

[AOS #14 Roles and Responsibilities of Nurses in the](#)

[Implementation of Patient Care Orders](#), originally issued in 1097 and revised in February 2026, to provide guidance to nurses. The most recent revision provides updated information on evidence-based practice, standards of care, and laws. It also provides background information and related definitions. This revision includes guidance regarding secure text platforms. Additionally, information on titration, taper, and automatic stop orders, which were previously included in AOS #17, Roles and Responsibilities of Nurses in the Administration of "PRN" Medications and Placebos, was added to AOS #14.

[AOS #22 Roles and Responsibilities of Nurses who Provide "Private](#)

[Duty" Nursing](#) was initially issued in 1990 and was recently revised in April of 2026. This AOS was revised to include family support as a factor to consider when determining private-duty nursing independent contracts, to provide recommendations for documentation, and to outline key essentials to guide private-duty nursing practice.

[AOS #29 Roles and Responsibilities of Nurses in Respiratory](#)

[Nursing Practice](#), initially issued in 1993, was recently revised in April 2026. The practice grid was revised in this AOS to ensure that practice tasks were aligned with the AOS guidance and the cited reference materials.

What's New!

The KBN website AOS Index now includes a link to What's New. This link allows users to review the most recent revisions to each AOS. After approval of AOS revisions by the KBN, the website is updated.

Advisory Opinion Statement Index

Looking for something specific? Review the [KBN AOS Content Index](#) to easily locate specific nursing interventions and topics

TOPIC	AOS	Issued/Revision Date
AOS #3	Recommended Course Content Infusion Therapy for Registered Nurses and Licensed Practical Nurses	10/2024 (What's New)
AOS #7	Role of Nurses in Wound Closure Procedures	06/2024 (What's New)
AOS #8	Role of Nurses in Perioperative Setting	02/2025 (What's New)
AOS #9	Role of Nurses in Assessment, Staging, and Treatment of Wounds	12/2023 (What's New)
AOS #10	Role of Nurses in Women's Health Across the Lifespan	12/2023 (What's New)
AOS #11	Role of Nurses in the Performance of Gastrointestinal and Genitourinary Procedures	10/2024 (What's New)
AOS #13	Role of Nurses in Psychiatric-Mental Health Nursing Practice	12/2023 (What's New)
AOS #14	Roles and Responsibilities of Nurses in the Implementation of Patient Care Orders	02/2026 (What's New)
AOS #15	Role of Nurses in the Supervision and Delegation of Nursing Acts to Unlicensed Personnel	06/2025 (What's New)
AOS #16	Role of Nurses in the Administration of Medication via Various Routes	10/2025 (What's New)
AOS #17	Roles and Responsibilities of Nurses in the Administration of "PRN" Medication and Placebos	12/2025 (What's New)

More questions. Unsure where to find answers?

Users can find information on what is addressed in each AOS by reviewing the AOS Content Index.

The KBN website provides additional information on practice under the "Practice Tab." You can review the scope of practice tabs for general information by license type, and access answers to frequently asked questions.

Additional questions related to practice may be submitted to the Professional Practice Branch using the Professional Support Contact Form.



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School Nurse Essentials 2026

May 13, 2026 at 10:00 AM ET

The KBN, in collaboration with the Kentucky Department of Education (KDE), is offering a free CE webinar via Zoom on May 13, 2026, to nurses working in the school setting.

Registration is required, and spots are limited.

For additional information, please visit

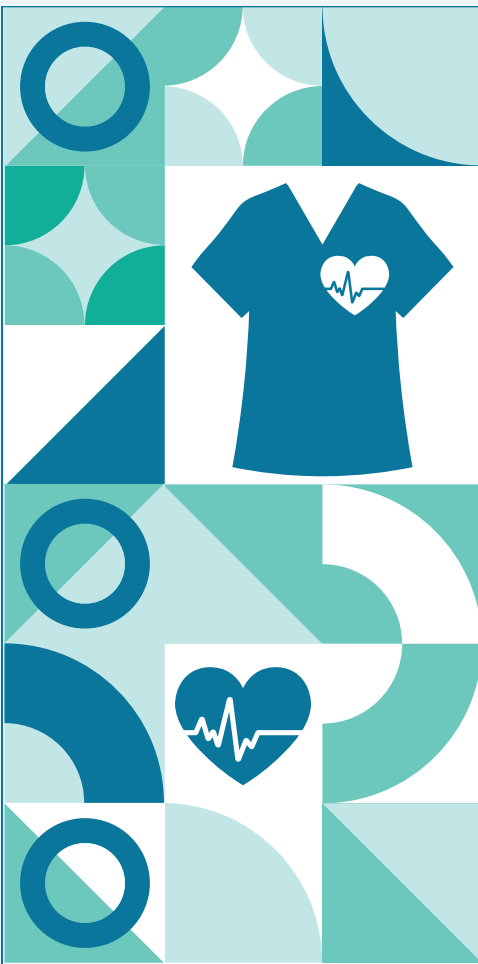
<https://kbn.ky.gov/continuing-education/Pages/KBN-Free-CE.aspx>.

Continuing Education Reminders

- ▶ **Annual CE Requirements** - must be completed between November 1 and October 31st of every year. Information on CE requirements by license type is available at <https://kbn.ky.gov/continuing-education/Pages/Continuing-Education-Requirements.aspx>
- ▶ **Alzheimer's Disease and other forms of Dementia** – Nurses actively licensed on July 15, 2024, who have not already done so, must complete the one-time content-specific CE requirement by October 31, 2027. Those licensed after July 15, 2024, have 3 years to complete the requirement. Information on this and other one-time content-specific CE is available at <https://kbn.ky.gov/continuing-education/Pages/Content-Specific-Continuing-Education-CE-Courses.aspx>.
- ▶ **Documentation** - Nurses must keep all CE documents for 5 years in the event of a CE Audit.
 - One way to maintain CE documents electronically is available in the KBN Nurse Portal's Manage Profile

Section. Although nurses are not required to upload CE records unless they are selected for the CE audit, saving documents in the portal provides an electronic record in the event you are audited. Instructions on this process are available at <https://kbn.ky.gov/KBN%20Documents/Entering%20Continuing%20Education%20in%20KBN%20Nurse%20Portal.pdf>. You may access the Nurse Portal at <https://kybn.boardsfnursing.org/kybn>.

- ▶ **Retired vs Retired with the KBN** - No longer working as a nurse. If you renew your license, you must complete CE requirements. Information on the difference between retired and retiring from licensure is available at <https://kbn.ky.gov/KBN%20Documents/Retirement%20v%20Retired%20License.pdf>.
- ▶ **KBN Free CE** - The KBN offers Free CE online courses available at <https://kbn.ky.gov/continuing-education/Pages/KBN-Free-CE.aspx>.



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The way back from addiction takes living in recovery one step at a time. Each determined step can bring about positive change and improvement in the life of a nurse battling addiction. In the article written by Talarico, A., 2024, "Rebuilding Your Life and Finding Purpose After Addiction" it states, "Life after addiction isn't about returning to your old self- it's about building something better." Kentucky Alternative Recovery Effort (KARE) for Nurses Program graduate, Elizabeth Campos, MBA, BSN, RN, found a way to build something better after coming back from addiction. Here is her story...*

There Is a Way Back: My Story of Recovery and Redemption

I survived addiction, incarceration and losing everything I loved—I share my story because I want you to know that survival is possible for you too. Whether you are a nurse, a mother, a friend, or simply someone who feels like you've fallen too far, hear this clearly: there is a way back.

When I walked into the ICU as a brand-new nurse, I felt more than I ever had. I was proud and eager to learn and determined to become the kind of nurse patients trusted with their lives. At the same time, I was raising a four-year old and trying to balance motherhood with the demands of a new nursing career. Behind the smile I wore to work, my marriage was quietly collapsing. When the divorce finally happened it left me shattered, while trying to be strong for my daughter while feeling like I was falling apart.

I began going out more, drinking heavily and chasing a sense of freedom I thought I had missed. At the time, it felt empowering, now I know I was running from my pain. Then I suffered a herniated disc, and the physical agony was overwhelming. A physician prescribed pain medication, and I held onto it like a lifeline. It didn't just dull the physical pain; it softened the ache in my chest, the loneliness, the fear. For the first time in months, I didn't have to feel anything.

Three months later, I had a moment of clarity. I realized I was slipping into something dangerous. I was off work, newly divorced, drowning in depression and anxiety. The pills quieted everything, but they also pulled me deeper into a darkness I didn't yet understand. I told myself they made life manageable. I had no idea how much worse things would get.

Over time, the prescription wasn't enough. I started buying pills illegally, convinced it was temporary. By the time I returned to nursing, I was taking far more than prescribed and using whatever I could find to get through the day.

Everything changed the night I was called in for a drug test. I already knew what the results would be. The test was positive for multiple substances, and I was reported to the board of nursing. Terrified of losing everything, I self-reported. I said, "I have a problem," but I didn't believe it. I thought I could outsmart addiction.

I entered the KARE program, completed every requirement. For a short period, I managed to stay clean. But addiction is patient. It waits in the shadows. It whispers lies that sound like truth. It convinces you that you are in control, that no one will ever know. I relapsed, began faking drug tests, and eventually sought treatment at a suboxone clinic without notifying the board. I still believed that I could hide the chaos my life had become.

Eventually, the board discovered everything. When my caseworker called to tell me my license was suspended, her voice wasn't just angry. It was disappointed, exhausted, and hurt. Hearing her lay out the truth felt like having a mirror held in front of me for the first time. Even then, I could barely admit what I had done. The shame was suffocating. I felt exposed, terrified, and completely alone.

Losing my license broke something inside me. Nursing wasn't just a career—it was part of my identity. Without it, I felt empty, worthless, and lost. As a single mother, I was overwhelmed by shame and guilt. I asked myself how someone educated, someone who "should have known better"—could fall this far. I was too ashamed to ask for help and too afraid to admit the whole truth, even to myself.

Instead of turning things around, my addiction worsened. I began using methamphetamine. My life became unrecognizable. My family attempted interventions, but I wasn't ready to hear them. Denial had its claws in me. When my significant other died from drug-related complications, the grief swallowed me whole. I felt like a ghost walking around on earth. A few months later, I ended up in jail. My children were gone. My life was unrecognizable. I was barely surviving.

That was my rock bottom. Addiction has a way of digging the hole deeper, until you're staring down the only three outcomes left: jail, death, or an institution. I was living proof of how far it could take you.

Addiction does not discriminate. It doesn't care about your age, income, education, or dreams. I went from a thriving young nurse to sitting in a jail cell in just a few years. Looking back, I genuinely believe that if something hadn't changed, I would have died. I hold strong conviction that the prayers offered by my mother ultimately preserved my life.

In jail, I was given a choice: stay incarcerated or enter long-term treatment. I asked my dad what I should do, and he told me something that broke me and saved me at the same time: He said that if I didn't go to treatment, I wouldn't be welcome back at his house. That was the moment something inside me cracked open. Treatment was my choice.

Rock bottom forced me to face the truth I had avoided for years. Jail, loss, and the absence of my children stripped me down to nothing but the realization that I couldn't keep living this way. For the first time, I was ready to surrender—not to addiction, but to healing.

Once in treatment, the fog of addiction lifted slowly. For the first time in years, I could see clearly. I saw the destruction I had caused, but I also noticed something I hadn't felt in a long

time: hope. After completing six months of inpatient treatment, intensive outpatient therapy, counseling, and Narcotics Anonymous meetings, I reached nearly one year clean. That's when I finally gathered the courage to contact the board of nursing. They didn't offer guarantees. They gave me a list of requirements and told me that only after completing them would I appear before the board. I leaned on my faith in God, trusting that if I kept doing the next right thing, the rest would follow.

A year and a half later, after fulfilling every requirement, every meeting, every drug test, every assessment, I stood before the board. I will never forget the moment they granted me my nursing license back. The rush of relief, pride, and disbelief washed over me all at once. I had accomplished something I once thought was completely out of reach. Nothing had been handed to me—I earned it through sweat, tears, humility, perseverance and relentless determination.

My license came with a five-year probation and multiple restrictions. To me, it was not punishment. It was redemption. It was proof that healing is possible, that broken things can be rebuilt, and that with honesty, perseverance, and faith, I could reclaim my life.

In the process, I found something unexpected: purpose.

For a long time, I wondered why I had survived when so many others didn't. I wondered what my life was supposed to mean now. I knew I was meant to be a nurse, but I didn't know what kind of nurse I was meant to become. I didn't know what I was supposed to be passionate about beyond the bedside.

Now I do.

I'm writing this because I want other nurses who are struggling to know that recovery is possible. You can come back from anything. You can rebuild a life more beautiful, more meaningful, and more grounded than you ever imagined.

When I was searching for help, it was nearly impossible to find other nurses in recovery. I only knew of one who later became my sponsor. She guided me through every step of reinstatement. She was the light I needed when shame consumed me. Now I want to be that light for someone else. I want nurses to know that there is life beyond substance abuse, that there is dignity beyond the mistakes, and that great things often begin with the hardest choices. If my story can help even one nurse believe in their own comeback, then every painful chapter will have been worth it.

Recovery is not a straight line. It is messy, painful, and humbling. But it gave me tools I never had before. It taught me how to feel again, how to cope, how to rebuild trust with myself and others. Slowly, I reconnected with my children, repaired relationships, and discovered a strength I didn't know I had.

Recovery gave me back more than sobriety. It restored my identity, my dignity, and my hope.

Today, I see recovery as a gift. It taught me resilience, compassion, and the power of honesty. It reminded me that healing is possible, even for those who feel lost beyond repair. And it allowed me to return to nursing with a deeper understanding of what it truly means to care for others, and for myself.

Continued on page 24>>

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Returning to the same hospital where I first became a nurse felt surreal. The halls and faces were familiar, but I was not the same woman who had walked out years earlier. I was excited but also intimidated. I carried a past not everybody knew, but I felt deeply. I had to swallow my pride, steady my nerves, and walk in with a humility that recovery had carved into me.

Finding a nursing job with extensive restrictions was difficult. Many doors closed immediately. Having disciplinary marks on your license makes you an HR red flag, and I felt that sting over and over again. But eventually, the same hospital that once shaped me took a chance on me. They saw something worth believing in. I will never stop being grateful for that. I genuinely believe it was nothing short of God placing me exactly where I needed to be.

Those first days back were emotional. I was surrounded by some of the very same nurses who had known me “before,” and I had to face the quiet fear that they might see me differently now. But instead of judgment, I found acceptance. Instead of distance, I found support. And almost immediately, I found a mentor—someone who stepped into my life at the perfect moment and helped guide me through the overwhelming mix of excitement, fear, and responsibility that came with returning to practice.

Over time, something beautiful happened. My workplace became more than a job. It became a family. They encouraged me,

challenged me, believed in me, and reminded me every day why I fought so hard to return. I rediscovered my passion for nursing, not as who I once was, but as the woman shaped by recovery.

I genuinely love being a nurse. Coming back to this profession after losing everything has allowed me to love it in a way I never could have before.

If you are a nurse who is lost in a life of addiction, please know that you are not alone. Elizabeth Campos said it best - recovery gave her back more than sobriety. It restored her identity and her hope. The KBN believes that release, redemption, recovery, and relief are all available to you. If you are a nurse or know of a nurse who is battling addiction, the KBN wants to help you/them take a step forward in restoring all that was lost. Please contact the KARE for Nurses Program at KBNComplianceMonitoring@ky.gov or call 502-871-1430. We are here to walk alongside you as you safely practice nursing and establish solid steps in your recovery.

Lisa A. Sosnin, BSN, RN, Compliance Nurse Investigator, Kentucky Board of Nursing

Reference: <https://recoverycentersofamerica.com/blogs/rebuilding-your-life-and-finding-purpose-after-addiction/>



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Nurses House, Inc. – Helping Nurses in Need

Welcome to Nurses House, Inc., the only national charitable fund providing financial aid to nurses in need. For over a century, Nurses House has been quietly helping RNs throughout the United States who are suffering due to a personal medical crisis. Today, it is the only non-profit organization of its kind – built off its founder, Emily Bourne’s, strong desire that someone must care for the caregivers.



Emily Bourne

The history of Nurses House goes back to 1922, when Emily Bourne made a charitable bequest of \$300,000 in her will, requesting the funds be used to create a respite place for nurses who had fallen ill. A stately beachfront mansion with sprawling grounds was purchased in Babylon, Long Island and a volunteer board of directors was established to run and maintain the home. The estate, which eventually included an adjacent beachfront, was purchased in 1924 and opened its doors to accept nurses as guests in January 1925.

From 1925-1960 hundreds of nurses came from all over the country to enjoy the home and the company of their peers while recuperating from illness or injury. Nurses who visited were well taken care of and paid little or nothing for their stay, which included room and board and numerous daily activities. As times and needs changed, the property was sold and the funds were used to establish an organization that would provide financial assistance to nurses in their own homes via charitable grants. It was aptly named Nurses House, and the dolphin statue that had adorned the front lawn became its lasting symbol.

Beginning with just a small office in NYC in the 1960’s, and a board of directors dedicated to helping nurses, Nurses House has been providing small short-term grants to RNs to help with basic needs for decades. Nurses who find themselves suffering financially due to a major health crisis can apply for a grant online at www.nurseshouse.org.

As a 501(c)3 public charity, Nurses House runs solely on donations from nurses, the healthcare community, and others who care, and is the only non-profit organization in the nation today providing short term aid to RNs suffering from illness or injury. Over the past decade Nurses House has provided over \$5 million in aid to nurses in need - including \$3.4 million in COVID aid - but they cannot do it alone. Nurses House depends greatly on the generosity of nurses and the nursing community to fulfill its mission. Each year Nurses House hosts a Nurses Week fundraiser from April 12-May 12 which nurse groups throughout the nation can participate in. Individuals can also host online fundraisers for Nurses House to celebrate special events or milestones such as birthdays or graduations. Nurses can also make single or recurring donations on the Nurses House website - and may choose to donate in honor of a friend or colleague, or in memory of a nurse who has passed. Additionally, Nurses House has a Legacy Circle to honor its founder, Emily Bourne. Anyone who makes a bequest to Nurses House in their will (of any amount) is added to the Legacy Circle on the Nurses House website.

To learn more about the work of Nurses House and other ways you can help, to donate, or to apply for assistance, please find us on Facebook, Instagram and LinkedIn, visit our website at www.nurseshouse.org, or email us at mail@nurseshouse.org.



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Know?



Amendments to the KRS Chapter 314, after the 2026 Regular Legislative Session.

- The Kentucky law regarding reporting a conviction has changed. With the passage of House Bill (HB) 280 during the 2026 Regular Session, Kentucky Revised Statutes (KRS) 314.109 has been amended to state,

Any person under the jurisdiction of the board shall, within thirty (30) days of entry of an order or judgment, notify the board in writing of any misdemeanor or felony criminal conviction, except traffic-related misdemeanors other than operating motor vehicle under the influence of drugs or alcohol, in this or any other jurisdiction. The person shall submit a certified or attested copy of the order and a letter of explanation.

- See [HB 280, pg 23](#). For more information, please visit the Board's [webpage](#) regarding mandatory reporting of convictions.
- If you are an APRN in a Collaborative Agreement for Prescriptive Authority (CAPA), KRS 314.042 has also been amended to clarify that the collaborating Kentucky physician must have an active license with unrestricted prescriptive authority.
- The period to request an expungement of a consent decree or disciplinary action has been reduced. For more information, please go to the [KBN Request and Expungement webpage](#).
- The KBN has changed the [Kentucky Alternative Recovery Effort \(KARE\)](#) to reduce the minimum participation time from 5 years to 3 years.

Substance Use Disorder (SUD) is a chronic, progressive illness characterized by the use of alcohol or other chemicals, despite the adverse consequences. SUD is a major factor threatening safe practice; if left untreated, it can place both you and your patients at risk.

If you feel you may be affected by SUD, please [contact the KBN for assistance](#).



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159 St. Matthews Avenue, Suite 1

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Disciplinary Actions

Since the publication of the last edition of the KBN Connection, the Board has taken the following actions related to disciplinary matters as authorized by the Kentucky Nursing Laws (KRS) Chapter 314. Licensure status of licensees against whom temporary action has been taken may have changed since data collection and publication. Please visit the Kentucky Board of Nursing License Validation Portal at <https://kybn.boardsofnursing.org/licenselookup> to confirm current licensure status of individual nurses.

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Brewster, Jacqueline	RN License 1103045	Belfry, KY	Eff. 2/26/26
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IMMEDIATE TEMPORARY SUSPENSION OF LICENSE/CREDENTIAL

Brown, Bailey	RN License 1159360	Elizabethtown, KY	Eff. 1/29/26
Catlett, Meredith	RN License 1154772	Erlanger, KY	Eff. 1/23/26
Clark, Leshia Jenene	LPN License 2030225	Mount Washington, KY	Eff. 2/20/26
Corbin, Brittni	RN License 1131416	Columbia, KY	Eff. 3/2/26
Disney, Rebecca Ann	LPN License 2056999	Elizabethtown, KY	Eff. 3/16/26
Gates, Debra	RN License 1104574	Shepherdsville, KY	Eff. 3/24/26
Grabmayer, Annemarie	RN License 1104771	Lexington, KY	Eff. 2/10/26
Rapp, Andrew Paul	RN License 1173638	Louisville, KY	Eff. 3/5/26
Ratcliff, Joseph	RN License 1079044	Butler, KY	Eff. 2/4/26
Stone, Kasia	RN License 4008026	Bardstown, KY	Eff. 3/30/26

LICENSE/CREDENTIAL SUSPENDED

Blaize, Amy	RN License 1155382	Henderson, KY	Eff. 2/26/26
Bradt, Cheyenne Marie	RN License 1142818	Paris, KY	Eff. 1/28/26
Gallin, Rustem	RN License 1111673	Louisville, KY	Eff. 2/26/26
Green, Tina	RN License 1165229	Vine Grove, KY	Eff. 2/26/26
Grubb, Amanda	LPN License 2055346	Phelps, KY	Eff. 3/2/26
Murphy, Crystal	LPN License 2042742	Danville, KY	Eff. 2/26/26
Troy, Nicole	LPN License 4037989	Salem, NY	Eff. 4/8/26
Wells, Brittany	RN License 1145891	Elkhorn City, KY	Eff. 2/26/26

LICENSE/CREDENTIAL DENIED OR DENIED REINSTATEMENT

Hale, Olivia	LPN License 2045990	Erlanger, KY	Eff. 2/26/26
Hooper, Laurie	RN License 1164586	Franklin, KY	Eff. 2/26/26
Otter, Karen	RN License 1084064; LPN License 2026521	Louisville, KY	Eff. 2/26/26
Simpson, Pecola	LPN Applicant by Endorsement	Evansville, IN	Eff. 3/20/26
Vessels, Terry	RN License 1155443	Sellersburg, IN	Eff. 2/26/26

PRIVILEGE TO PRACTICE DENIED REINSTATEMENT

Nale, Erica Nicole	TN LPN License 77992	Troy, TN	Eff. 2/26/26
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LICENSE/CREDENTIAL VOLUNTARILY SURRENDERED

Blythe, Sondra	RN License 1106567; APRN License 3005726	Covington, KY	Eff. 3/5/26
Dousay, Teresa	RN License 1154662	Lexington, KY	Eff. 4/15/26
Harbsmeier, Alexis	RN License 1166819	Charlotte, NC	Eff. 1/29/26
Morrow, Barbara	LPN License 2054706	Madisonville, KY	Eff. 3/17/26

PRIVILEGE TO PRACTICE VOLUNTARILY SURRENDERED

Holtzclaw, Emily	TN LPN License 95558	Union City, TN	Eff. 3/10/26
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LICENSE/CREDENTIAL PLACED ON LIMITATION/PROBATION

Bout, Aleethia	RN License 1133411	Lexington, KY	Eff. 3/31/26
Butcher, Susan	RN License 1175445	Wheatland, IN	Eff. 3/23/26
Butler, Julie	RN License 1110409	Hopkinsville, KY	Eff. 2/3/26
Grabmayer, Annemarie	RN License 1104771	Lexington, KY	Eff. 3/19/26
Huerta, Gabriela	DT Credential 4014764	Louisville, KY	Eff. 3/16/26
Kennedy, Whitney Brooke	RN License 1152089	Williamsburg, OH	Eff. 2/11/26
Killion, Briana	RN License 1173591	London, KY	Eff. 3/16/26
Marcum, Jori	RN License 1075054	Huntington, WV	Eff. 4/10/26
Scott, Paula	LPN License 2035998	Cumberland, KY	Eff. 4/7/26
Willis, Beth Ann	RN License 1140148	Coal Grove, OH	Eff. 2/3/26

LICENSE/CREDENTIAL REPRIMANDED

Cawood, Samantha	RN License 4013788	Corbin, KY	Eff. 3/17/26
Dedicatoria, Catherine Joy	RN Applicant by Examination	Milpitas, CA	Eff. 3/26/26
Gianni, Kimberly	RN License 1070840	Princeton, KY	Eff. 1/29/26
Hamblin, Krista	RN License 1136153	Pineville, KY	Eff. 2/5/26
Hammond, Jennifer Nicole	RN License 1132612	Flatwoods, KY	Eff. 2/4/26
Johnson, Julie	RN License 1147975	Gray, KY	Eff. 3/9/26
Luck, Lesa	LPN License 2035438	Poole, KY	Eff. 4/15/26
Marchand, Scott	RN License 1177816	Louisville, KY	Eff. 4/15/26
Medley, Tiffany	RN License 1114460	Ekron, KY	Eff. 2/17/26
Mynhier, Brittany	LPN License 2054767	Wheelwright, KY	Eff. 2/5/26

Russell, Tyler	RN License 1179011	Hamilton, OH	Eff. 2/3/26
Schoch, Cameron Michael	RN License 1152077	Louisville, KY	Eff. 2/4/26
Taylor, Michelle Hayden	RN License 1107421	Coxs Creek, KY	Eff. 3/25/26
Thomassy, Kathleen	RN License 1177205	Hazard, KY	Eff. 3/30/26
Thompson, Bethany	RN License 1132024	Columbia, KY	Eff. 3/3/26
Tiernan, Erica	LPN License 2057070	Science Hill, KY	Eff. 2/24/26
Townsend, Jessica Marie	RN License 1149235	Paducah, KY	Eff. 2/25/26
Trout, Megan	RN License 1179617	Dexter, MO	Eff. 4/14/26
Vonfumetti, Wanda	RN License 1091630	Russell Springs, KY	Eff. 2/26/26
White, Inger	RN License 1077124	Winchester, KY	Eff. 3/4/26
Wright, Alena	RN License 1181450	Maysville, KY	Eff. 4/8/26

PRIVILEGE TO PRACTICE REPRIMANDED

Dale, Nicholas David	GA RN License 295122	Macon, GA	Eff. 3/25/26
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LICENSE CLEARED FROM DISCIPLINARY ACTION

Allosa, Sara Jane	RN Applicant by Examination	Mountainhouse, CA	Eff. 2/6/26
Baldrige, Honey Kaye	RN License 1081047	Cincinnati, OH	Eff. 2/19/26
Blackmon, Larreata Denise	LPN License 2051192	Louisville, KY	Eff. 1/29/26
Blakley, Charlisha	RN License 1129031	Jellico, TN	Eff. 3/20/26
Bonn, Allyson	RN License 1124556	Muncie, IN	Eff. 4/6/26
Bouland, Makenna	RN License 4004564	Mayfield, KY	Eff. 3/30/26
Childers, Donica	RN License 1104415	Lawrenceburg, KY	Eff. 2/9/26
Dale, Nicholas David	GA RN License 1154825	Macon, GA	Eff. 4/7/26
Dedicatortia, Catherine Joy	RN Applicant by Examination	Milpitas, CA	Eff. 4/8/26
Dunbar, Beth Ann	RN License 1144464	Dawson Springs, KY	Eff. 3/2/26
Franchino, Jarrod	RN License 1176353	Stamping Ground, KY	Eff. 2/11/26
Fritz, Kimberlee	RN License 1129684	Paducah, KY	Eff. 2/17/26
Hall, Amber	RN License 1150102	Whitesburg, KY	Eff. 3/19/26
Hammond, Jennifer	RN License 1132612	Flatwoods, KY	Eff. 3/9/26
Hauser, Sarah	RN License 1140472	Nicholasville, KY	Eff. 4/1/26
Hill, Baylie	LPN License 2057035	Monticello, KY	Eff. 2/11/26
Jackman, Taylor	RN License 4014058	Williamsburg, KY	Eff. 1/26/26
Jairam, Sunita	RN License 1083751	Lexington, KY	Eff. 2/27/26
Kendrick, Natasha Nicole	RN License 1166331	Paducah, KY	Eff. 2/4/26
Labanino, Rubildo	APRN License 4026729	Katy, TX	Eff. 2/6/26
Lanter, Angela Dawn	RN License 1104415; APRN License 3004107	Nicholasville, KY	Eff. 2/12/26
Lopez Perrand, Humberto	RN License 4007472	Louisville, KY	Eff. 2/9/26
Mullins, Valerie	VA RN License 0001241543	Pound, VA	Eff. 3/5/26
Ogburn, Leslie Ann	RN License 1126809	Carrollton, KY	Eff. 2/4/26
Olson, Megan	RN License 1164134	Lexington, KY	Eff. 3/30/26
O’Nan, Sarah	RN License 1122966	Hanson, KY	Eff. 4/9/26
Rickey, Amanda Mae	RN License 1115396	Covington, KY	Eff. 3/19/26
Roberts, Amanda	RN License 1152475	Louisville, KY	Eff. 2/17/26
Russell, Jennifer Linn	RN License 1113956	Philpot, KY	Eff. 2/3/26
Salyer, Lisa Mullins	RN License 1096093	Salyersville, KY	Eff. 2/4/26
Sanchez Perez, Danny	FL RN License 9585175	Naples, FL	Eff. 4/6/26
Smith, Ashley Nicole	RN License 1136507	Maysville, KY	Eff. 4/9/26
Soeder, Wendy Gail	LPN License 2039906	LaGrange, KY	Eff. 2/26/26
Taylor, Michelle Hayden	RN License 1107421	Coxs Creek, KY	Eff. 4/2/26
Taylor, Melissa	RN License 1179946	Minford, OH	Eff. 3/5/26
Underwood, Andrew Steven	LPN License 2047969	Edgewood, KY	Eff. 4/9/26
Wells, Brittany Nicole	RN License 1145891	Elkhorn City, KY	Eff. 3/18/26
Wilborn, Brookie Lee	RN License 1156324	Gamaleil, KY	Eff. 3/19/26
Williams, Taylor	RN License 4005652	Bowling Green, KY	Eff. 1/27/26

CONSENT DECREES ENTERED FISCAL YEAR TO DATE

Imposition of civil penalty for practice without a current active license or temporary work permit	20	Imposition of civil penalty for falsification of an application for licensure	64
Imposition of civil penalty for failure to meet mandatory continuing education requirement	82	Imposition of civil penalty for a positive drug screen	13
Imposition of civil penalty for a practice issue	97		

Nursing Workforce Model 2025

<https://kbn.ky.gov/education/Pages/Nursing-Workforce-Projection-Model.aspx>



Licensures by Occupation

Occupation	Count
Total	86,863
CNM	256
CNP	19,881
CNS	158
CRNA	2,500
LPN	16,605
RN	47,563

Licensures by Gender

Gender	CNM	CNP	CNS	CRNA	LPN	RN
Female	100.0%	90.8%	95.0%	56.4%	94.0%	90.5%
Male		9.2%	3.7%	43.5%	6.0%	9.5%
Non-binary		0.0%	1.2%	0.0%		0.0%

License by Race

Race	CNM	CNP	CNS	CRNA	LPN	RN
American Indian ...	0.4%	0.4%	0.6%	0.5%	0.6%	0.4%
Asian	2.6%	2.1%		2.5%	1.0%	2.8%
Black/African Am..	5.1%	7.7%	3.6%	4.6%	15.5%	6.2%
Native Hawaiian ...		0.1%		0.4%	0.1%	0.2%
White/Caucasian	90.9%	88.5%	95.2%	89.5%	82.1%	89.6%
Choose not to an..	1.1%	1.1%	0.6%	2.5%	0.7%	0.9%
Other Race						

Licensures by Planning to Retire (in Years)

Retirement Planning	CNM	CNP	CNS	CRNA	LPN	RN
Less than 3 years	5.47% (n=14)	1.70% (n=338)	10.76% (n=17)	4.16% (n=104)	3.72% (n=618)	3.87% (n=3,363)
3-5 years	2.73% (n=7)	3.50% (n=695)	14.56% (n=23)	6.44% (n=161)	5.73% (n=952)	5.33% (n=4,632)
5-10 years	9.77% (n=25)	9.80% (n=1,949)	21.52% (n=34)	12.92% (n=323)	10.91% (n=1,812)	10.06% (n=8,735)
10-15 years	15.23% (n=39)	16.45% (n=3,270)	17.72% (n=28)	20.64% (n=516)	14.10% (n=2,342)	12.58% (n=10,930)
15-20 years	21.88% (n=56)	22.56% (n=4,486)	18.35% (n=29)	22.44% (n=561)	18.35% (n=3,047)	17.52% (n=15,222)
Greater than 20 years	44.53% (n=114)	45.06% (n=8,958)	15.19% (n=24)	33.24% (n=831)	43.34% (n=7,196)	45.18% (n=39,249)
Already Retired	0.39% (n=1)	0.93% (n=185)	1.90% (n=3)	0.16% (n=4)	3.84% (n=638)	5.45% (n=4,732)

*Data from 2025 KY nurse license renewals (excludes those licensed after May 1, 2025).



ENROLLMENT & GRADS - Statewide Prelicensure

Select an Area Type

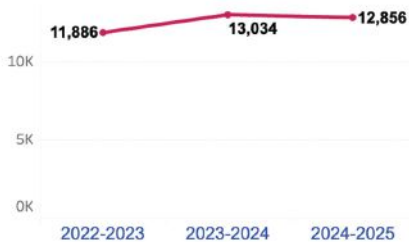
State

Select an Area Value

Statewide

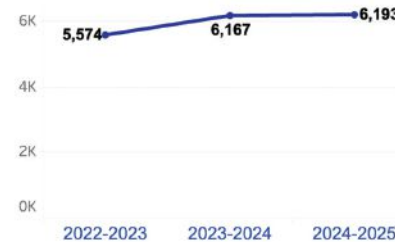
Total Enrollment

▼ -178 from Prior Year



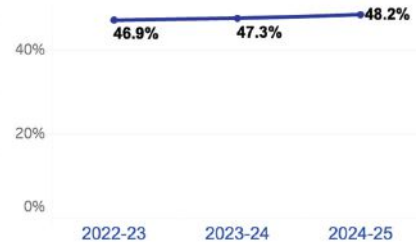
New Enrollment Counts

▲ 26 from Prior Year



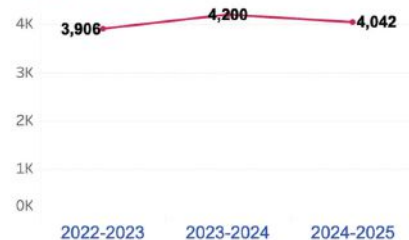
New Enrollment as % of Total Enrollment

▲ 0.9% from Prior Year



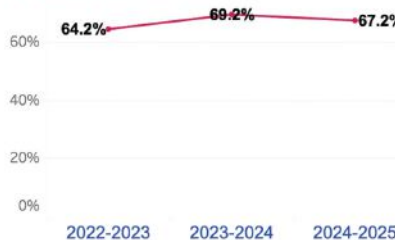
Total Graduates

▼ -158 from Prior Year



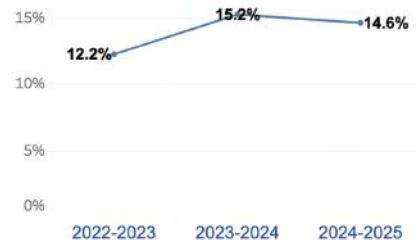
Graduation Rate

▼ -2.0% from Prior Year



Faculty Turnover Rate

▼ -0.6% from Prior Year





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