

KBN CONNECTION

Spring 2024
Vol 15, Issue 2, Edition 79

Nurses Make a Difference!



**2023 KBN
WORKFOCE
DATA**

Page 6

**REVISED CONTINUING
EDUCATION REQUIREMENTS
FOR APRNs**

Page 19



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Pamela.hagan@ky.gov

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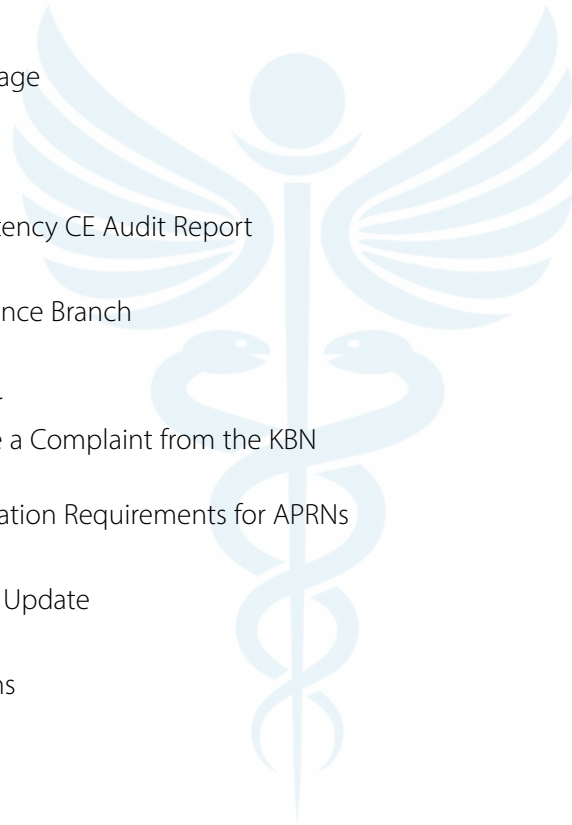


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4	President's Message
5	Executive Director's Message
6	2023 KBN Workforce Data
13	2023 Continuing Competency CE Audit Report
18	Successes of the Compliance Branch
19	APRN Compliance Corner What to do if You Receive a Complaint from the KBN
19	Revised Continuing Education Requirements for APRNs
20	Statutory and Regulation Update
26	Summary of Board Actions
32	Disciplinary Actions
38	Public Service Recognition Week – Recognizing KBN Staff



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STATISTICS CORNER

As of April 1, 2024
(in-state and out of state)

RN: 75,159
LPN: 12,733
APRN-CNM: 145
APRN-CNP: 11,733
APRN-CNS: 127
APRN-CRNA: 1,712
DIALYSIS TECHNICIANS (CREDENTIALLED): 696
SANE: (PEDIATRIC/ADOLESCENT): 35
SANE: (ADULT): 418
SRNA: (NURSE AIDE CERTIFICATION): 43,399



President's Message

Shaping the Future of Nursing: Addressing Challenges and Embracing Innovation

Nursing stands as a cornerstone of healthcare, embodying a profound commitment to serve and heal. Despite its noble calling, the nursing profession grapples with significant challenges, including workforce shortages that strain healthcare systems worldwide. However, amidst these hurdles, there are promising trends shaping the future of nursing, offering hope and inspiration. I will address both the challenges faced by the nursing profession and the emerging trends that signify positive transformations in nursing practice.

National Trends in Nursing Workforce Shortages

The United States, like many nations, confronts a shortage of nurses, a disparity exacerbated by an aging population, rising chronic illnesses, and evolving healthcare reforms. An aging workforce and limited resources for nursing education exacerbate this gap, while the rigorous demands of nursing education deter potential candidates. The COVID-19 pandemic further strained the nursing workforce, amplifying demands and pushing many nurses to the brink of burnout.

Positive Trends for the Future

Despite these challenges, there are encouraging signs of progress within the nursing profession. Growing recognition of nurses' importance has led to increased investment in their education, training, and professional development. Healthcare organizations are implementing initiatives to attract and retain nurses, including competitive salaries, flexible work schedules, and advancement opportunities. Technological advancements, such as telehealth and electronic health records, are transforming nursing practice, improving efficiency, and expanding access to care. Moreover, interdisciplinary collaboration and team-based care models recognize nurses' central role in coordinating patient care across various settings, enhancing both patient outcomes and job satisfaction.

Additionally, there is a concerted effort to increase diversity and inclusion within the nursing workforce, ensuring that nursing teams reflect the communities they serve and bringing diverse perspectives to patient care. Nurses are also engaging in healthcare policy and advocacy, advocating for legislation to improve patient safety, expand access to care, and address social determinants of health.

New Trends in Nursing

In recent years, several innovative trends have emerged in nursing practice. Telehealth and telemedicine have revolutionized healthcare delivery, particularly in remote or underserved areas, allowing nurses to provide virtual consultations and monitor patients remotely. Advances in genomics and precision medicine offer new opportunities for nurses to personalize patient care, while population health management initiatives address broader community health needs. Healthcare technology, including artificial intelligence, supports nurses in decision-making and patient monitoring, enhancing efficiency and accuracy.

Interprofessional education and collaboration promote teamwork among healthcare professionals, optimizing patient care outcomes. Cultural competence and diversity initiatives ensure that nurses provide culturally sensitive care to diverse patient populations. Environmental sustainability efforts integrate eco-friendly practices into healthcare settings, promoting environmental responsibility. Holistic and integrative approaches recognize the interconnectedness of physical, emotional, and spiritual well-being, incorporating complementary therapies into patient care plans. Finally, ongoing professional development and lifelong learning empower nurses to stay abreast of the latest evidence-based practices and technologies, fostering continuous growth and improvement.

Nurses stand at the forefront of healthcare, confronting challenges with resilience and determination while embracing innovation and transformation. By addressing workforce shortages, leveraging emerging trends, and advocating for patient-centered care, nurses are shaping the future of healthcare delivery. As we celebrate their invaluable contributions, let us continue to support and empower nurses in their vital role as healers, advocates, and leaders in the journey toward a healthier, more equitable future.

HAPPY NURSES MONTH to my most deserving colleagues!

Yours in Nursing,

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

Executive Director's Message



Happy Nurses Week!

First and foremost, I want to extend my heartfelt gratitude to each licensee for your unwavering commitment to the nursing profession. Your dedication to providing exceptional care, especially during these unprecedented times, is nothing short of commendable.

2023 was a year of great innovation and progress for the staff of the Kentucky Board of Nursing. After years of planning, KBN rolled out a new cloud-based, license management platform called the Optimal Regulatory Board System (ORBS), developed by the National Council of State Boards of Nursing (NCSBN), will streamline licensing and discipline enforcement processes. It will be a one-stop point of contact to meet the licensure needs every nurse, dialysis technician and licensed certified professional midwife in Kentucky for the entirety of their careers.

The build and roll-out of ORBS was a massive undertaking. Staff from every KBN branch and section spent months both before and after the March 1 “go-live” date collaborating with the NCSBN build team to tailor the digital platform to KBN’s specific needs. Extensive outreach efforts through mailings and emails, a social media campaign and public appearances at events such as the Kentucky State Fair encouraged the agency’s over 100,000 licensees to sign up for ORBS accounts prior to the fall 2023 license renewal period.

During the six-week renewal period in September and October, dedicated KBN staff worked hours of overtime answering calls and emails from licensees and assisting them with difficulty they were experiencing registering for ORBS accounts and submitting their online renewal applications and payments in the new system. As a result of this effort, KBN noticed no significant drop in the number of licenses successfully renewed during the 2023 renewal period.

Another area where KBN staff modernized the agency’s processes in 2023 was the digitizing of records. Over the summer of 2023, three KBN Investigations Branch staff members volunteered to work after hours and on weekends to scan, review, and securely destroy two rooms full of paper investigative files and to file them in digital format. These staff members worked together to devise a plan and equally distribute the work so that this daunting task was accomplished in just a few months.

KBN now contracts with Laserfiche, an enterprise content management and business process automation provider, to house KBN’s digital files. The LaserFiche platform will interact seamlessly with ORBS and will automate many KBN processes, such as mail processing and meeting statutory record retention and destruction responsibilities. KBN staff spent hours working with LaserFiche personnel strategizing how to adapt the product to KBN’s unique requirements.

KBN became the first state board of nursing to utilize the EdVera online management system to automate and simplify the complex processes associated with the approval, authorization, and licensing/permitting of Kentucky’s nursing schools. Previously, documents and reports were printed, manually filed and stored, leading to mounds of paperwork creating bottlenecks and inefficiencies.

So many advancements would have been a major undertaking in a normal year, but 2023 was far from normal for the staff of the Kentucky Board of Nursing.

In closing, I want to express my deepest appreciation to the KBN staff for their dedication and commitment to nursing and the safety of Kentucky’s citizens. Your passion and professionalism inspire us all, and I am honored to serve alongside such exceptional individuals.

Sincerely,

A handwritten signature in cursive script that reads "Kelly Jenkins".

Kelly Jenkins MSN, RN, NE- BC
Executive Director, Kentucky Board of Nursing

2023 KBN Workforce Data

The 2023 licensure renewal process for over 100,000 licensees provided the KBN with accurate workforce data. We will be sharing some of this data in the next few issues of the KBN Connection to provide insight into the status of Kentucky’s nursing workforce. As a licensee you will be required to respond to the questions when renewal rolls around again Sept. 15-October 31, 2024. Thus, the KBN will be able to acquire comparable data for future planning.

The following graphs show general demographic information about nurses in Kentucky. Future issues will look at data on school enrollments and faculty as well as specifics about where nurses practice.

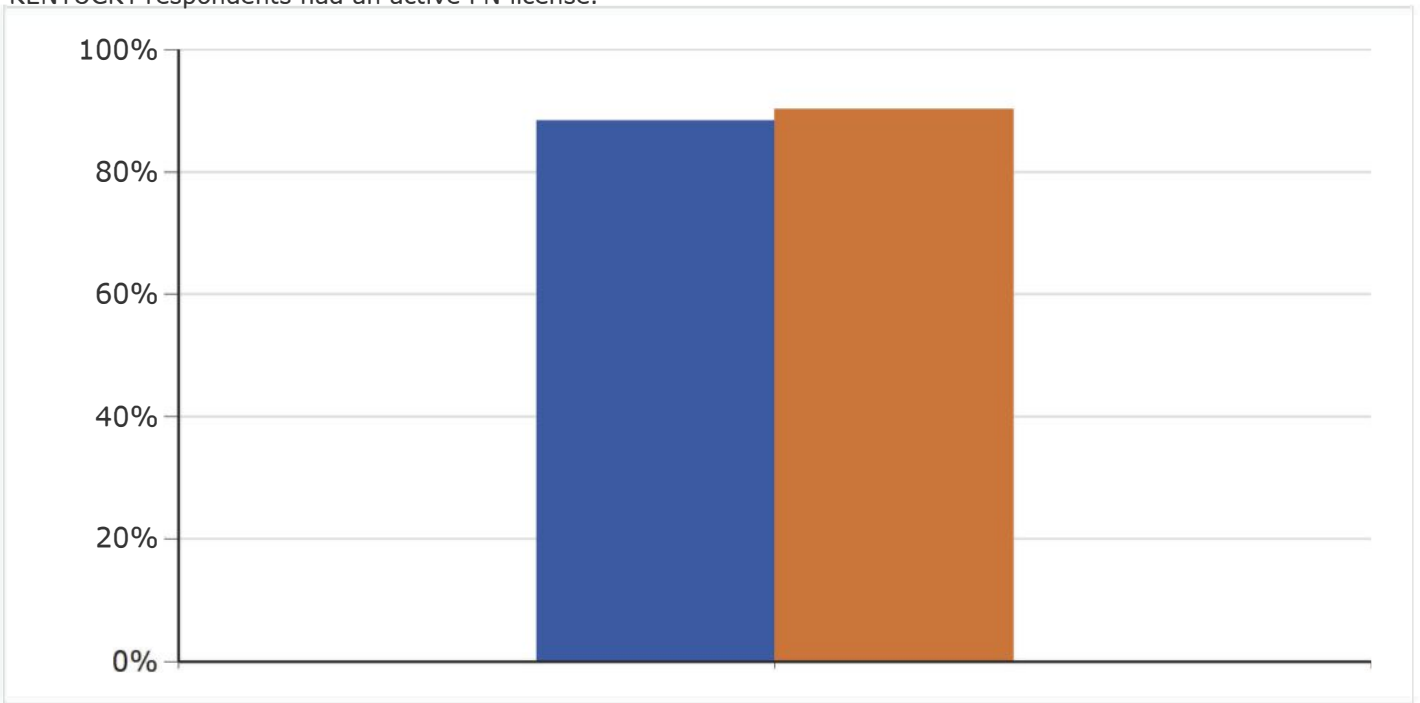
You will note that there is not 100% response to the data. Nurses who license between May 1 and October 31 as new graduates, reinstatements, endorsement from other states are not required to “renew” their licenses at the next renewal cycle. The KBN in the future will be determining how we can obtain this data during the licensure renewal period.

Response Rate

9/15/2023 - 11/1/2023

RN respondents = 69,691 [Represents 88% of the total KENTUCKY RN workforce for the given date range] PN respondents = 11,682 [Represents 90% of the total KENTUCKY PN workforce for the given date range]

The data sample suggests that between 09/15/2023 - 11/01/2023, 88% of the KENTUCKY respondents had an active RN license. The data sample suggests that between 09/15/2023 - 11/01/2023, 90% of the KENTUCKY respondents had an active PN license.



9/15/2023 - 11/1/2023

Response	RN	PN
Responses	69,691 (88%)	11,682 (90%)

Continued on page 8>>



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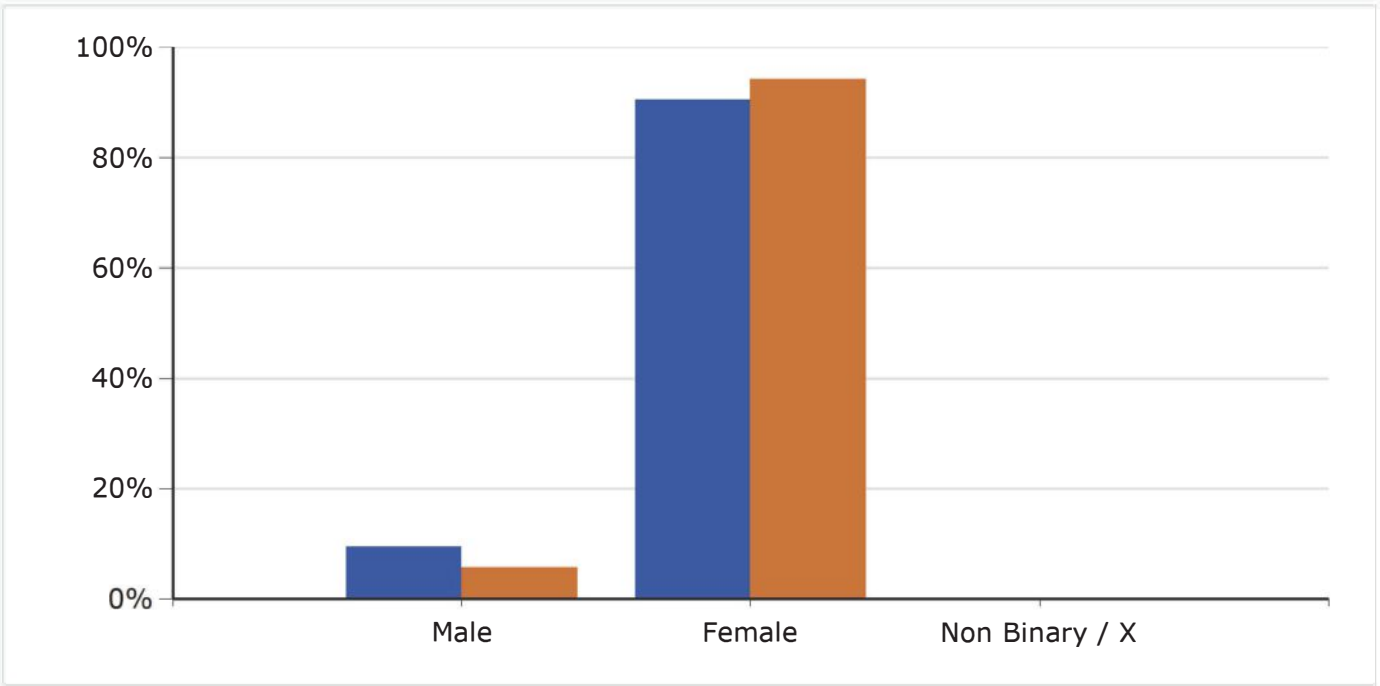
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Gender

9/15/2023 - 11/1/2023

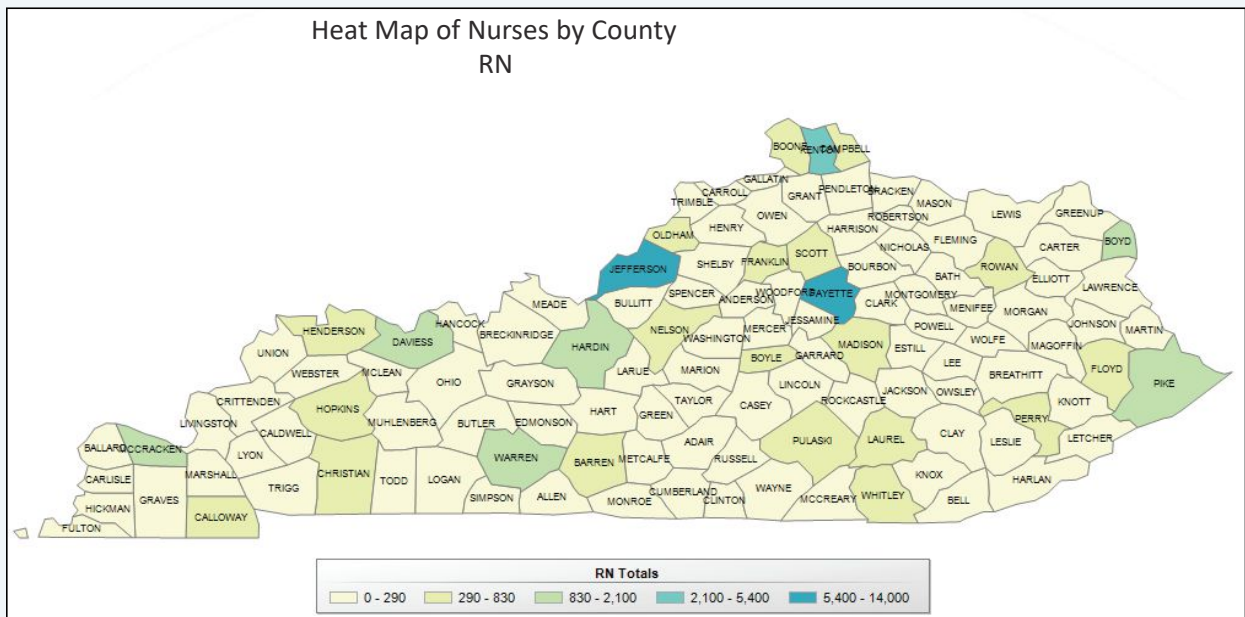
RN respondents = 69,691 [Represents 88% of the total KENTUCKY RN workforce for the given date range] PN respondents = 11,682 [Represents 90% of the total KENTUCKY PN workforce for the given date range]

The data sample suggests that 91% of the KENTUCKY RN workforce is female, 9% of the RN workforce is male and 0% of the RN workforce is non binary / x. The data sample suggests that 94% of the KENTUCKY PN workforce is female, 6% of the PN workforce is male and 0% of the RN workforce is non binary / x.



9/15/2023 - 11/1/2023

Gender	■ RN	■ PN
Male	6,608 (9%)	675 (6%)
Female	63,082 (91%)	11,007 (94%)
Non Binary / X	1 (< 1%)	0 (0%)





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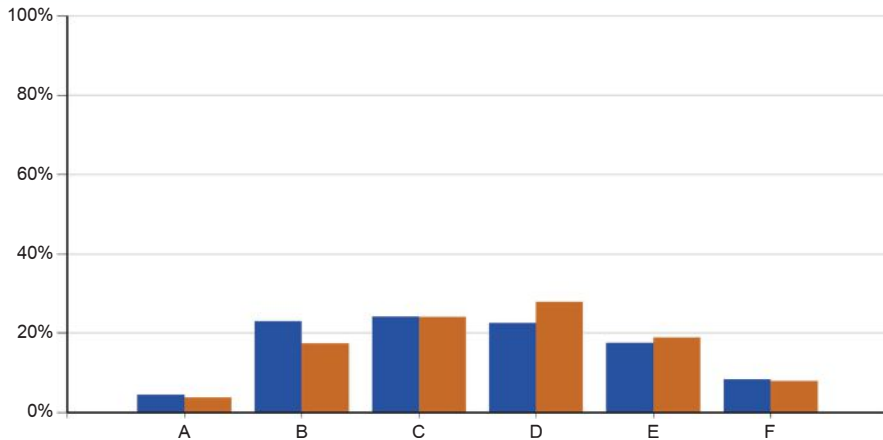
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Age Distribution

9/15/2023 - 11/1/2023

RN respondents = 69,691 [Represents 88% of the total KENTUCKY RN workforce for the given date range]
 PN respondents = 11,682 [Represents 90% of the total KENTUCKY PN workforce for the given date range]

The data sample suggests that during 09/15/2023 - 11/01/2023, the top age range for the KENTUCKY RN workforce is 36 to 45. This age range represents 24% of the overall RN sample. The data sample suggests that during 09/15/2023 - 11/01/2023, the top age range for the KENTUCKY PN workforce is 46 to 55. This age range represents 28% of the overall PN sample.



9/15/2023 - 11/1/2023

Legend	Age Range	RN	PN
A	25 or younger	3,101 (4%)	437 (4%)
B	26 to 35	15,993 (23%)	2,025 (17%)
C	36 to 45	16,919 (24%)	2,827 (24%)
D	46 to 55	15,642 (22%)	3,267 (28%)
E	56 to 65	12,200 (18%)	2,201 (19%)
F	66 and older	5,836 (8%)	925 (8%)



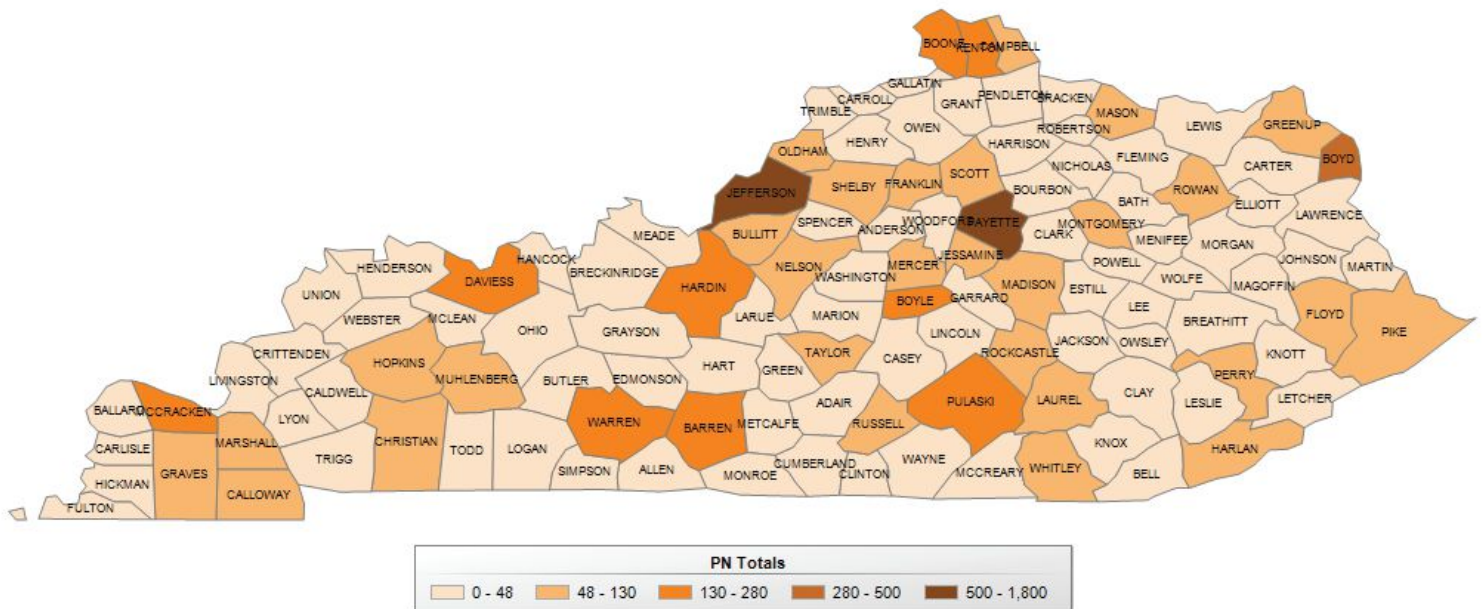
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Heat Map of Nurses by County LPN

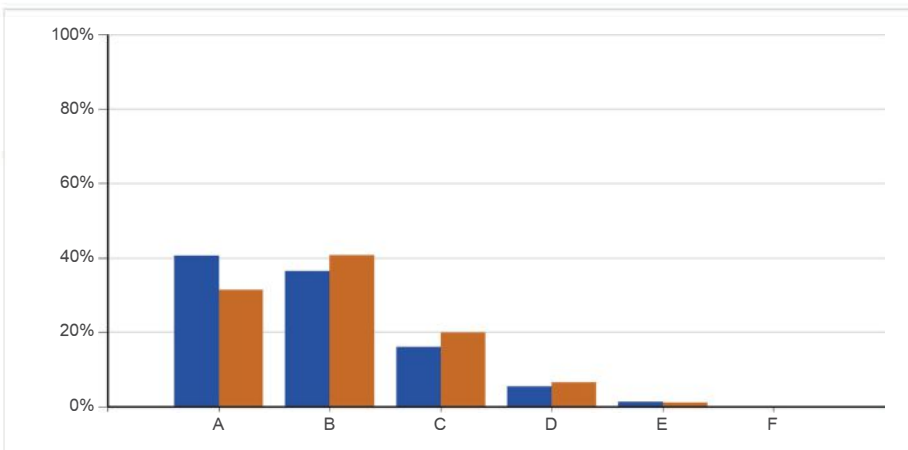


Age at Licensure

9/15/2023 - 11/1/2023

RN respondents = 69,691 [Represents 88% of the total KENTUCKY RN workforce for the given date range]
 PN respondents = 11,682 [Represents 90% of the total KENTUCKY PN workforce for the given date range]

The data sample suggest that during 09/15/2023 - 11/01/2023, the top age range for initial licensure for the KENTUCKY RN workforce is < 25. This age range represents 41% of the overall RN sample. The data sample suggest that during 09/15/2023 - 11/01/2023, the top age range for initial licensure for the KENTUCKY PN workforce is 26 - 35. This age range represents 41% of the overall PN sample.



9/15/2023 - 11/1/2023

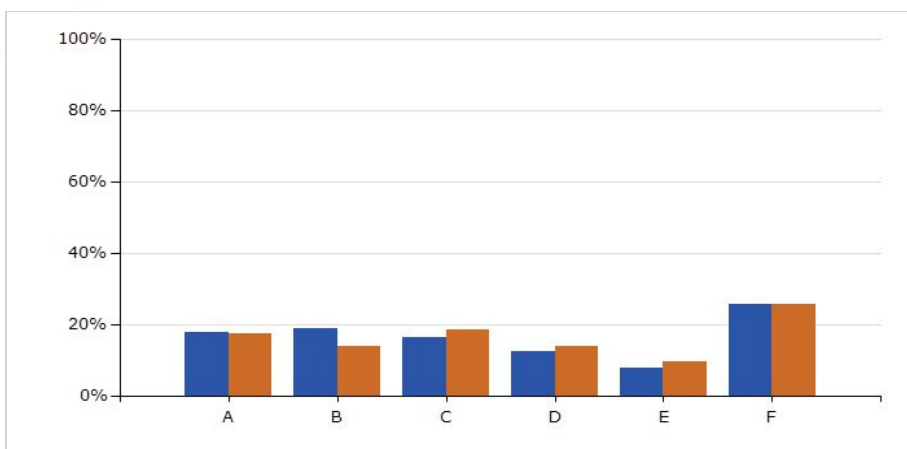
Legend	Age Range	RN	PN
A	< 25	28,294 (41%)	3,683 (32%)
B	26 - 35	25,461 (37%)	4,762 (41%)
C	36 - 45	11,154 (16%)	2,331 (20%)
D	46 - 55	3,806 (5%)	764 (7%)
E	56 - 65	890 (1%)	131 (1%)
F	66 and older	86 (< 1%)	11 (< 1%)

Number of Years Licensed

9/15/2023 - 11/1/2023

RN respondents = 69,691 [Represents 88% of the total KENTUCKY RN workforce for the given date range]
 PN respondents = 11,722 [Represents 86% of the total KENTUCKY PN workforce for the given date range]

The data sample suggests that highest number of years licensed for the KENTUCKY RN workforce is 25 and over. This range represents 26% of the overall RN sample. The data sample suggests that highest number of years licensed for the KENTUCKY PN workforce is 25 and over. This range represents 26% of the overall PN sample.



9/15/2023 - 11/1/2023

Legend	Year Range	RN	PN
A	0 - 4	12,567 (18%)	2,062 (18%)
B	5 - 9	13,294 (19%)	1,647 (14%)
C	10 - 14	11,500 (17%)	2,176 (19%)
D	15 - 19	8,689 (12%)	1,659 (14%)
E	20 - 24	5,602 (8%)	1,156 (10%)
F	25 and over	18,039 (26%)	3,022 (26%)

* In cases where a nurse has an RN & PN, both licenses are counted.

Nurses Rated Highest on the 2023 Gallup Honesty and Ethics Poll Update

On January 22, 2024, Gallup released its “Honesty and Ethics” poll, which assessed the public’s trust in nearly two dozen different types of professionals. While the poll ratings were lower for 2023 than in recent years, nurses remain the most trusted profession, “with 78% of U.S. adults currently believing nurses have high honesty and ethical standards.” However, that is down seven percentage points from 2019 and 11 points from nursing’s peak at 85% in 2020. Nurses topped the list for the 22nd consecutive year. The lowest ratings were for members of Congress, senators, car salespeople, and advertising executives. The poll was conducted December 1-20, 2023 with 800 adults rating participating.

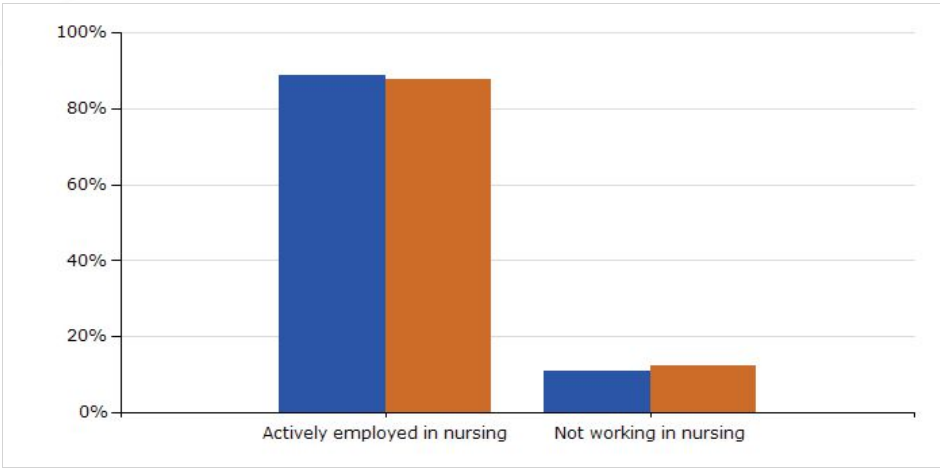
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Work Status

9/15/2023 - 11/1/2023

RN respondents = 69,684 [Represents 88% of the total KENTUCKY RN workforce for the given date range]
 PN respondents = 11,681 [Represents 90% of the total KENTUCKY PN workforce for the given date range]

The data sample suggests that 89% of the KENTUCKY RN workforce is actively employed in nursing. The data sample suggests that 88% of the KENTUCKY PN workforce is actively employed in nursing.



9/15/2023 - 11/1/2023

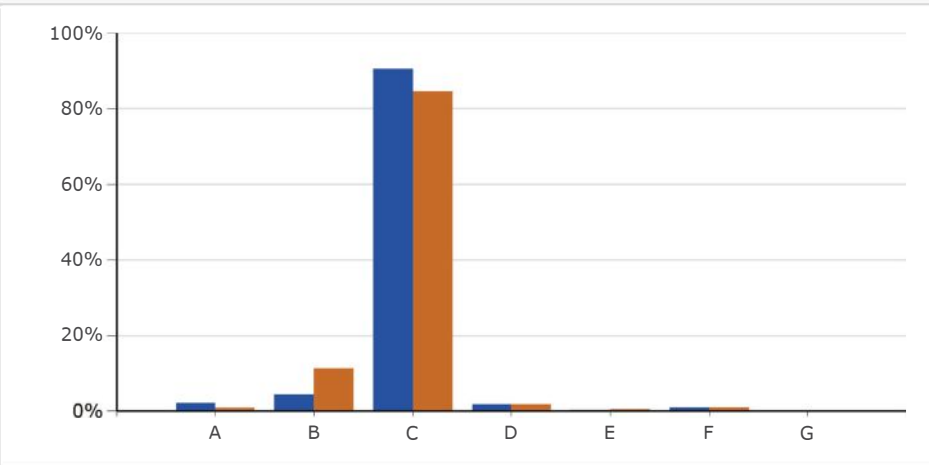
Work Status	RN	PN
Actively employed in nursing	61,977 (89%)	10,263 (88%)
Not working in nursing	7,707 (11%)	1,418 (12%)

Race

9/15/2023 - 11/1/2023

RN respondents = 69,691 [Represents 88% of the total KENTUCKY RN workforce for the given date range]
 PN respondents = 11,682 [Represents 90% of the total KENTUCKY PN workforce for the given date range]

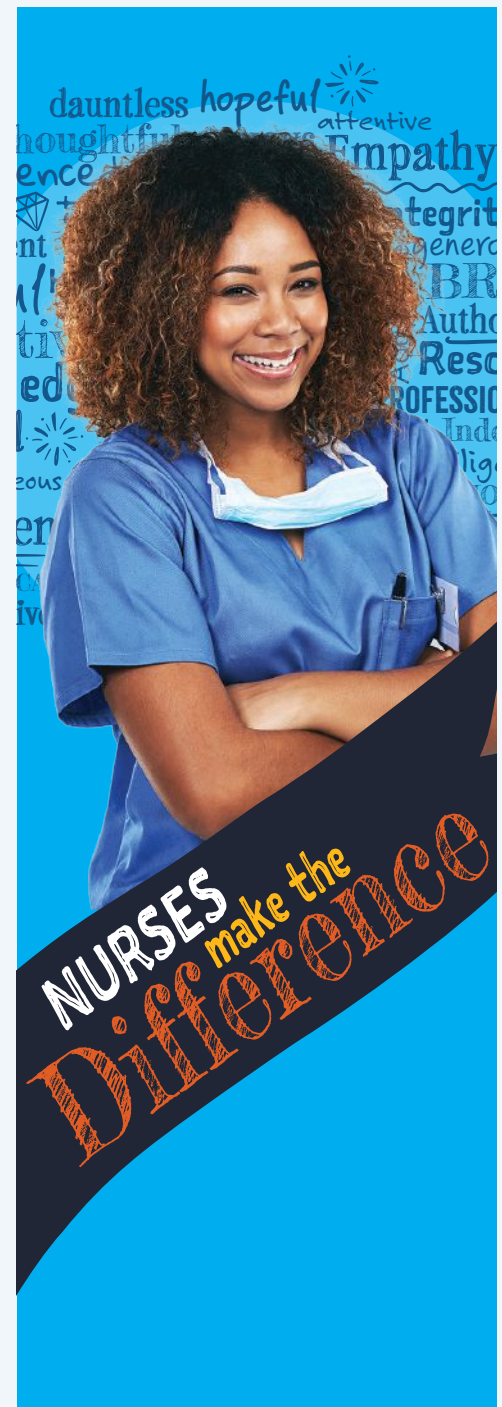
The data sample suggests that the top ethnicity for the KENTUCKY RN workforce is White/Caucasian. This ethnicity represents 91% of the overall RN sample. The data sample suggests that the top ethnicity for the KENTUCKY PN workforce is White/Caucasian. This ethnicity represents 85% of the overall PN sample.



9/15/2023 - 11/1/2023

Legend	Demographics	RN	PN
A	Asian	1,474 (2%)	104 (1%)
B	Black/African American	3,071 (4%)	1,338 (11%)
C	White/Caucasian	64,581 (91%)	10,138 (85%)
D	Hispanic/Latino	1,209 (2%)	211 (2%)
E	American Indian or Alaska Native	202 (< 1%)	57 (< 1%)
F	Other	706 (1%)	115 (1%)
G	Native Hawaiian or Other Pacific Islander	75 (< 1%)	11 (< 1%)

* Report values above might be higher than the number of respondents due to some respondents being in multiple demographics



AMERICAN NURSES ASSOCIATION

MAY 6-12, 2024

2023 Continuing Competency CE Audit Report

Michelle Gary
Continuing Competency Coordinator

Nurses who obtained their license before May 1, 2023, and hold current licensure through October 31, 2024, were subject to the 2023 CE Audit. During the annual renewal process, nurses must attest they have or will have completed their continuing education requirements on or before October 31st.

The selection of licensees for an audit is completed through a random sampling process. On November 13, 2023, a total

The 2023 CE Audit required the licensee to submit by December 6, 2023, items to verify compliance with regulatory continuing education requirements for the earning period November 1, 2022 – October 31, 2023.

2023 CE Audit

The 2023 CE Audit totals are illustrated in Chart 1. This chart provides an overview of the individuals selected for the audit and the status of each.

As of March 11, 2024, 907 responses were received for a final response rate of 98%.

Notices – Emails - Mailing

2023 CE Audit - Initial notices were sent via CE Broker® and ORBs, the KBN licensure portal. The initial return date was set for December 6, 2023. On January 31, 2024, 76 letters were sent via US mail to nurses who failed to respond to the initial CE Audit notice. A total of 56 days occurred between the initial due date and the mailing.

The number of days between the initial due date requested in the email notices (Dec. 6, 2023) and the date of the mailing (Jan. 31, 2024) provided for a higher number of individuals who responded to the CE audit between the two dates, therefore decreasing the number of non-response notices sent (8%).

Compliance

As of March 12, 2024, 796 licensees have provided proof of compliance with CE requirements for the earning period November 1, 2022 – October 31, 2023, for a compliance rate for the 2023 CE Audit at 86%. Compliance requires the submission of required documents to verify completion of continuing education requirements before referral for investigation. A comparison of compliance in previous years is depicted in Chart 2.

Non-Compliance

Non-compliance with a CE Audit includes those nurses who fail to respond to notices and requests for verification of completion of CE requirements and those who fail to complete or provide proof of completion of continuing education within the earning period. Figure 1 provides an illustration of non-compliance types for the 2023 CE Audit, including a specific breakdown of consent decrees (CDs).

Failure to Respond

Seventeen (17) individuals did not reply to KBN requests for submission of CE documents to verify compliance with the 2023 CE Audit. Individuals who do not reply to an audit are referred to Investigations at the end of the audit.

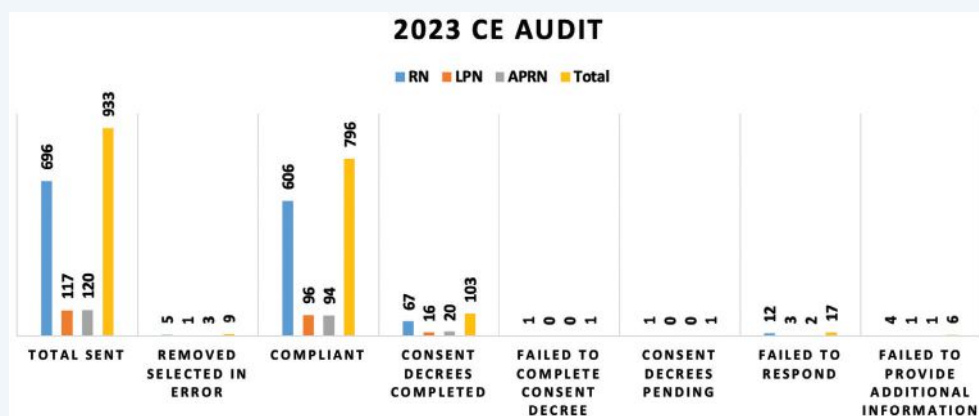


Chart 1: N = 933*

*Please note: Information provided is calculated based on a total of 924 licensee audits, due to the removal of nine (9) individuals who were selected in error.

of 933 nurses were selected to participate in the 2023 CE Audit. It was determined that (9) were selected in error. They were removed from the audit reducing the total to 924 licensees (691 RNs, 116 LPNs, and 117 APRNs).

Response Rate

As of January 31, 2024, 848 responses were received for an initial response rate of 92%. Letters were sent via US mail to the 76 individuals who failed to respond to the initial notice.

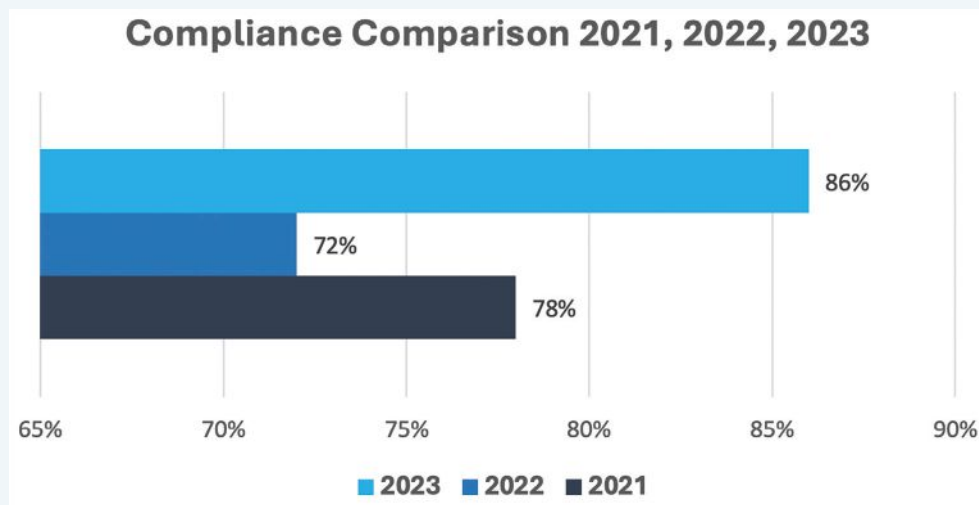


Chart 2: Comparison of the compliance rates for the 2021, 2022, and 2023 CE Audits.

Continued on page 14>>

Failure to Provide Additional Items/
Information

This category includes individuals who do not provide additional documents or information upon request of the KBN. Six (6) of those selected for the 2023 CE Audit were referred to Investigations for failure to provide additional information or documents
Consent Decrees

Consent decrees are agreements that KBN provides to licensees who acknowledge their lack of compliance with various elements of laws or regulations which include conditions to be met as well as a civil penalty. Individuals who do not provide proof of completion of continuing education requirements must complete the CE requirements immediately and submit a letter of explanation as to why the hours were not completed during the earning period. Eligible licensees may complete a consent decree and pay a civil penalty for the non-willful violation of KRS 314.073.

Consent decrees were sent to one hundred and ten (110) licensees who completed contact hours after the earning

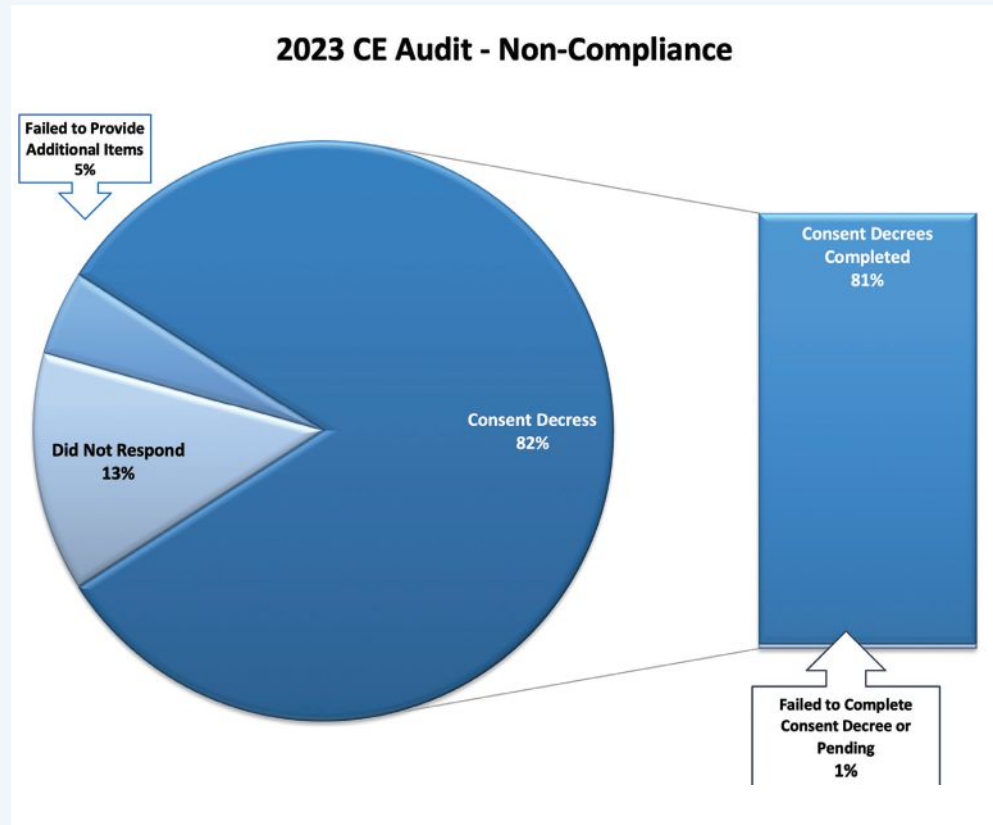


Figure 1: 2023 Non-Compliance by Type N=128

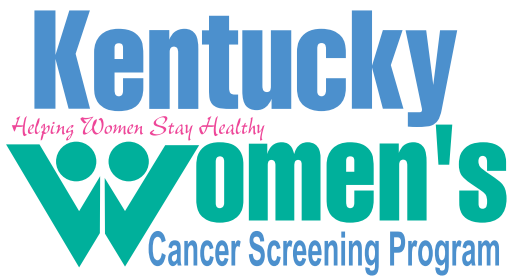
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- Has a household income at or below 250% of the federal poverty level
- Has no health insurance (no Medicare, no Medicaid, or no private health insurance)

For a list of contracted screening providers, scan this **QR code** and scroll down to the state map.



All I Need to Know is Where I Need to Go! Call 1-844-249-0708!

The Kentucky Women's Cancer Screening Program (KWCSPP) offers FREE breast and cervical cancer screenings. The program provides Mammograms and Pap tests and follow-up services, education and outreach to low income, eligible women. Once in the program, if a woman has an abnormal screening, the KWCSPP covers the cost of most diagnostic tests. If a pre-cancer or cancer is found, the program connects her to treatment through Medicaid's Breast and Cervical Cancer Treatment Program (BCCTP). The KWCSPP provides services through Kentucky's local health departments, community health clinics and other healthcare providers. A woman does not have to reside in the same county in which she receives services. Healthcare providers, please refer eligible women to a participating KWCSPP clinic/provider. For a participating clinic/provider listing call KWCSPP, 1-844-249-0708.



period and submitted a letter of explanation. Five (5) were able to provide proof of compliance after issuance of a consent decree and the consent decrees were rescinded. Of the remaining licensees, one hundred three (103) completed the consent decree process including payment of the civil penalty.

An individual was sent a consent decree later in the process and it is pending completion at this time.

An individual who completed hours after the earning period and submitted additional information related to the matter has been added to the Credential Review Panel for consideration. Once a decision has been made this matter will be concluded. Information on this matter is included in the overall non-compliance numbers for this audit.

Non-Compliance Comparison

The non-compliance rate for the 2023 CE Audit is 14%.

End of Audit - Referral Totals 2023 CE Audit

A total of twenty-four (24) individuals were referred to Investigations for non-compliance by the end of the 2023 CE Audit. Included in the number of referrals are those who failed to respond to the CE Audit, failed to provide additional information or items requested, failed to complete a consent decree, or those who did not complete CE and had received a consent decree during a previous audit. Individuals who complete a consent decree are not included in the referral totals.

Conclusion

The 2023 CE Audit included an increase in the number of individuals selected due to an increase in the number of licensees during the previous licensure period. Changes to the CE Audit for the 2023 earning period include a change in the date the audit was launched to November 15, a change in the program for the random audit selection, and changes to the processes for issuing consent decrees. Even though there was an increase in the number of licensees audited, there was a decrease in the number of individuals referred to Investigations between the 2021 and 2023 CE Audits.

CE Broker® is the official tracking system for KBN. The KBN began conducting the CE audit through CE Broker® in 2021 for the 2020 CE Audit. In the years since the 2020 audit, more CE providers report CE

participants directly through CE Broker® and the number of licensees who hold

CE Broker® accounts has increased. As of March 5, 2024, of the 101,291 active Kentucky RNs, LPNs, and APRNs, 30,381 (30%) have CE Broker® accounts.

CE Broker® is continuing to review and make changes to the platform which provides additional functionality, and efficiency when reviewing and approving courses reported directly by providers during the CE Audit.

KBN staff will continue to review audits identifying items for reporting purposes and when possible adjust processes. KBN encourages licensees to submit, monitor, and track continuing education requirements using CE Broker®. More detail on the CE Audit will be contained in the 2023-2024 KBN Annual Report to be published later this year.

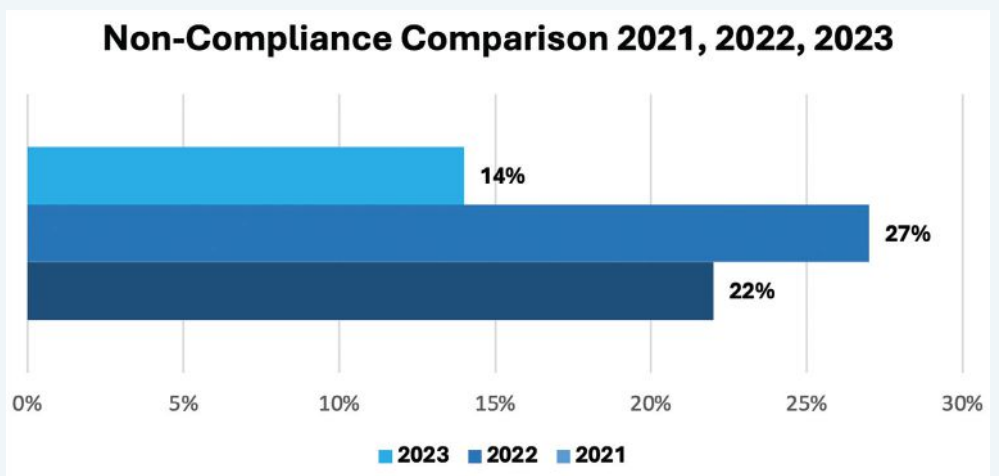
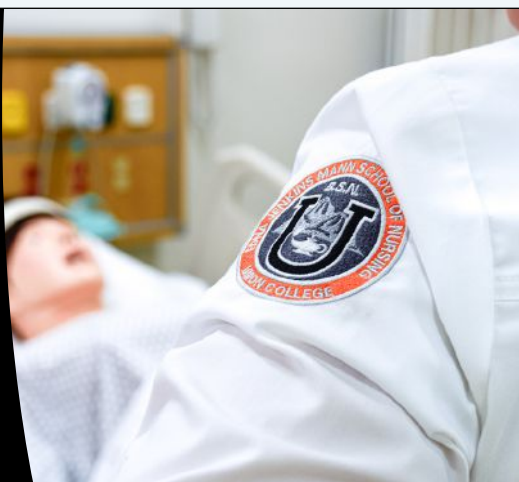


Chart 3: CE Audit Non-Compliance Rates for 2021, 2022, and 2023



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Successes of the Compliance Branch

Melissa Haddaway, BSN, RN
Compliance Branch Manager

The Kentucky Board of Nursing's (KBN) Compliance Branch staff monitors nurses participating in the Kentucky Alternative Recovery Effort (KARE for Nurses Program) and those with discipline on their license/credential. This monitoring safeguards the public and helps to ensure that these individuals are skilled and safe to return to nursing practice. Compliance Branch staff also assists individuals who are seeking to reinstate their license following a period of disciplinary action resulting from suspension, voluntary surrender, or denied reinstatement.

The KARE for Nurses Program was established over 20 years ago to identify nurses whose abilities to provide nursing care may be compromised by a Substance Use Disorder (SUD). The purpose of the program is to assist nurses in their recovery so that they can return to competent and safe practice. The KARE for Nurses Program believes that a nurse should not lose a job or license due to SUD and offers an opportunity for treatment and monitoring. It is an alternative to discipline program and monitors individuals for a period of at least five years.

During fiscal year 2023, the Compliance Branch began conducting a survey to request feedback from individuals noting their experiences while being monitored by Compliance Branch staff. The following responses were received:

- *Basically, KARE gave me the second chance I so strongly needed to get my life back. It assisted me in reuniting with my children in a healthy way, as well as reuniting with me, finding out who I am without alcohol.*
- *I want to thank each and every person that works with KARE. I have been shown many times, that working as a staff member in this program, requires much more than just a nursing degree. It requires a genuine desire to help others, and true heartfelt love for those in need, when they need it the most.*
- *Words cannot begin to describe how thankful I am for this program, I can say with confidence that I would not be alive if it wasn't for this program. It helped me to get my life back on track when everything had seemed to fall apart. From*

the accountability to the rigidity of guidelines, it seemed overwhelming at first and like I was signing my life away when I signed my contract but it was so worth it. Not only did the program help me in my sobriety but it also helped in rebuilding relationships with my family members, being able to show them negative drug screens and positive reports from case managers and therapist helped to rebuild trust that was lost during my active addiction. This program will always mean the world to me and I hope that one day I can give back to the program that changed and saved my life.

- *I know that without this program I would not have been able to retain my sobriety. This program forced me to recognize and own my issues in a way that nothing else could. I am able to be a nurse!! A sober nurse. I am more open minded and have better integrity than I ever did.*
- *I felt that the staff was very caring and wanted me to succeed. The program was incredibly helpful. The website and Apps were convenient and easy to use. There was always clarity with expectations.*
- *I am so thankful for the KBN's KARE/Monitoring program. The help of wonderful people who genuinely care about you as an individual and a nurse second was paramount in my recovery. I will be forever grateful. If you put in the work, you can not only get your career back but more importantly you can get your life back.*

Although not everyone is successful in completing the KARE for Nurses Program, the survey data from those who did complete the program indicates that a few individuals experienced discomfort with the financial component related to random drug and alcohol testing; however, the majority of individuals felt that the accountability and monitoring by Compliance Branch staff was beneficial to sustain sobriety and successfully complete the KARE for Nurses Program.

To learn more about the KARE for Nurses Program or information on how to seek admission to KARE, please visit <https://kbn.ky.gov/KARE/Pages/kentucky-alternative-recovery-effort.aspx> or call 502-429-3313.

APRN COMPLIANCE CORNER

WHAT TO DO IF YOU RECEIVE A COMPLAINT FROM THE KBN

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

The Kentucky Board of Nursing will contact you in writing should a formal complaint be initiated. You will NOT receive a phone call from anyone claiming to be a staff member, unless your letter is returned undeliverable. Ensure your personal data in the Portal is current and maintained.

Should you receive a written complaint, an investigation is being initiated by the Kentucky Board of Nursing (KBN). The Board has received or identified sufficient information

to merit an investigation and explore in more detail. We communicate with you, the licensee. The investigation will examine the allegations made against you, including an assessment of any potential violations relating to your APRN licensure or your practice actions. An APRN investigator is assigned and will examine multiple areas including your APRN prescribing practices and will perform a KASPER review for the previous two years. Your APRN documents will be examined to verify they are current and on file in the APRN portal (licensure, certification, CAPA agreements or discontinuations, KASPER certification.

You as the APRN licensee will be requested to respond to the complaint which may include submitting a written explanation, submitting additional information, asking you to appear at an investigative meeting with the APRN investigator and other staff assigned to your case.

Once an investigation is conducted, a determination is made by the KBN if any violation(s) has occurred. If the KBN finds that you have violated any statutes (laws) or regulations, the Board may take disciplinary action against your nursing license. This disciplinary action may be formal or informal based on the nature and severity of the violation(s).

Should you receive a complaint from the Kentucky Board of Nursing, it is important to take it seriously and imperative to return any requested documentation by the due date. Your assigned investigator will be identified with whom you should communicate directly.

Ensure you provide a thorough and detailed response to the complaint. If you have any questions, please refer to the Kentucky Board of Nursing website, kbn.ky.gov or contact Marina.McWilliams@ky.gov APRN Investigations Manager.

Revised Continuing Education Requirements for APRNs

Proposed changes to Kentucky Administrative Regulation, 201 KAR 20:215 regarding continuing competency requirements became effective on March 21, 2024. The changes affect CE requirements for APRNs who prescribe controlled substances.

Under the amended regulation, APRNs who are registered with the DEA and have a Prescription Drug Monitoring Program (PDMP) account must complete at least three (3) contact hours in either pain management or addiction disorders every year beginning with the current earning period which ends October 31, 2024. These hours may be completed as part of the total number of 5 contact hours in pharmacology required for all APRNs annually. To qualify as pharmacology, course content must "include drug specific information, safe prescribing practices, safe medication administration, prescribing methodologies, new administrative regulations, or similar topics." See 201 KAR 20:215, Section 5 (1).

As a reminder, APRNs are not required to complete additional hours for their RN license as long as their national certification remains current.

Review additional information on CE requirements and CE Broker on the KBN website.

Be sure to complete your CE requirements by October 31st!

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Kentucky Revised Statutes (KRS) Legislation Update - 2024 Regular Session

House Bill 159

House Bill (HB) 159 creates a new KRS that:

- Defines “health care provider” and “health services”, and
- Establishes that health care providers, included those who provide health services under KRS Chapter 314, are immune from criminal liability for harm due to a health services-related act or omission.
- The immunity does not extend to gross negligence or wanton, willful, malicious, or intentional misconduct.

HB 159 passed the House 94-0, and the Senate 37-0. It was signed into law by the Governor Andy Beshear on March 26, 2024.

House Bill 459

HB 459 makes the following changes to KRS Chapter 314 and KRS 311.844

- Creates the provisional advanced practice registered nurse applicant license.
- Requires Advanced Practice Registered Nurses (APRNs) and Registered Nurses (RNs) experienced in long-term care serve as members on the Kentucky Board of Nursing (Board).
- Allows the executive director to hire officers and other personnel with the approval of the Board.
- Provides for a one time, one-hour Alzheimer’s continuing education (CE) requirement for nurses and physician’s assistants.
- It repeals KRS 314.193, which created the Advanced Practice Registered Nurse Council.

HB 459 passed the House 96-0, and the Senate 36-0. Due to amendments that added the CE requirements, the Bill was posted for concurrent on March 28, 2024. On April 15, 2024, the bill, as amended, was passed 95-0. The bill was delivered to the Governor on the same day and was signed into law on April 14, 2024. It will be effective July 15, 2024.

House Bill 493

HB 493 amends KRS 194A.705 to limit the provision of enumerated health and health-related services to assisted living communities and nursing homes.

HB 493 passed the House 91-0, and the Senate 36-0. It was signed into law by the Governor on April 4, 2014.

House Bill 829

HB 829, as filed, would amend KRS Chapter 218B as follows:

- Revises the definition of “bona fide practitioner-patient relationship”;
- Requires the Board of Physicians and Advisors to assist the Cabinet for Health and Family Services in developing a Medicinal Cannabis Advisory Pamphlet;
- Prohibits vaping cannabis products on any form of public transportation, in any public place, or in any place of public accommodation, resort, or amusement;
- Requires local boards of education and the boards of directors of public charter schools to establish policies related to the use of medicinal

cannabis on school property, and if such policies are established they include a process by which a school nurse or other school administrator may refuse to administer medicinal cannabis to a student who is a cardholder;

- Requires the administration of medicinal cannabis on school property to occur out of view of other students;
- Requires that an application for a registry identification card to include a written certification issued not more than 60 days prior to the date of the application;
- Requires the Cabinet for Health and Family Services to conduct a criminal background check on each application for a registry identification card solely to determine if the applicant was previously convicted of a disqualifying felony offense;
- Requires a medicinal cannabis practitioner to notify the Cabinet for Health and Family Services if the practitioner has knowledge that a patient has died, ceased to suffer from a qualifying medical condition, or is no longer likely to receive safe and effective therapeutic or palliative benefits from the use of medicinal cannabis;
- Establishes a requirement that dispensaries provide cardholders with a copy of the Medicinal Cannabis Advisory Pamphlet;
- Revises the process for initiating a public question related to medicinal cannabis business operations;
- Requires the Cabinet for Health and Family Services to establish a medicinal cannabis adverse drug effects reporting system and to produce the Medicinal Cannabis Advisory Pamphlet;
- Deletes provisions related to the issuance of a provisional licensure receipt;
- Requires the Cabinet for Health and Family Services to prioritize review of cannabis business license applications submitted by an individual or entity who is an existing Kentucky hemp business in good standing with the Kentucky Department of Agriculture;
- Establishes the Cabinet for Health and Family Services’ authority and powers related to inspections and investigations of licensed cannabis businesses;
- Establishes the power of a local government to impose reasonable local fees on a cannabis business and to limit the power of a local government to prohibit cannabis business operations within its territory to before the Cabinet for Health and Family Services issues a license for cannabis business operations in the territory;
- Adds one pharmacist appointed by the Kentucky Board of Pharmacy and confirmed by the Senate to the Board of Physicians and Advisors;
- Establishes operational conditions for licensed cannabis businesses;
- Establishes authority and power of local governments to regulate cannabis business operations.
- Requires the governing body of each certified nonpublic school to develop policies related to the use of medicinal cannabis on school property;
- Establishes that licensed cannabis businesses shall be subject to and required to comply with any local government action to prohibit cannabis business operations if that action is taken prior to January 1, 2025;

- Prohibits licensed cannabis dispensaries from opening to the public or dispensing medicinal cannabis to cardholders prior to January 1, 2025;
- Deletes provisions requiring the Cabinet for Health and Family Services to collaborate with the Kentucky Board of Medical Licensure, the Kentucky Board of Nursing, and the Kentucky Center for Cannabis on the definition of a daily supply, 10-day supply, and 30-day supply of medicinal cannabis;
- Establishes that property and casualty insurance carriers shall not be required to reimburse a person for costs associated with the use of medicinal cannabis;
- Establishes the Office of Medicinal Cannabis, the Division of Enforcement and Compliance, and the Division of Licensure and Access in the Cabinet for Health and Family Services; and
- Unless otherwise provided, makes the effective date of the statute, July 1, 2024, as an emergency.

HB 829 passed the House 66-30, and, after amendments, the Senate 69-15. It was delivered to the Governor on April 15, 2014, and was signed into law on April 17, 2024.

Kentucky Administrative Regulations (KAR)

201 KAR 20:056

This regulation establishes APRN licensure and certification requirements.

The Amendments:

- Provide that the Kentucky Board of Nursing (Board) may request evidence of the APRN's current national certification;
- Remove the requirement that the Board notify the APRN that the certification is about to expire; and
- State that if the APRN requests a hearing regarding the license being voided due to the lapse of the national certification, and the result of the hearing is unfavorable to the APRN, the APRN must bear the cost of the hearing.

Promulgation:

- On July 27, 2023, the Practice Committee held a special meeting. The Committee considered the amendments to the regulation and recommended their approval to the full Board.
- On August 24, 2023, the Board considered and approved the regulation for promulgation.
- Staff filed the regulation with the Legislative

Research Commission (LRC) on September 12, 2023.

- A public hearing was set November 21, 2023, and the comment period ended on November 30, 2023. However, a hearing was not requested, and no comments were received.
- On December 11, 2023, the Administrative Regulation Review Subcommittee (ARRS) considered the regulation and passed it to the Senate Standing Committee on Health Services.
- On January 10, 2024, the Senate Standing Committee on Health Services considered

the regulation and passed it to the House committee for consideration.

- On January 18, 2024, the House Standing Committee on Health Services considered the regulation and passed it.

201 KAR 20:057

This administrative regulation establishes the scope and standards of APRNs.

During the 2023 regular session, Senate Bill (SB) 94 created a new section of KRS Chapter 218B and changed requirements related to "Collaborative Agreement for the

Continued on page 22>>

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— Dr. Viktoriya Kashin, FNU Alumna



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Advanced Practice Registered Nurse’s Prescriptive Authority for Controlled Substances” (CAPA-CS) and the relationship between an APRN and the collaborating physician. The bill also established the CAPA-CS Committee to create a standardized CAPA-CS form. SB 94 further provided that an APRN with four years of controlled substance prescribing may request an exemption from the CAPA-CS requirements, if the APRN is in good standing and meets statutory requirements. Finally, the bill established the Controlled Substances Prescribing Council. The bill also required the Board to promulgate regulations.

The Amendments:

- Use the acronym “APRN”;
- Define “Good standing”, “Immediate family” and “PDMP”, the acronym for prescription drug monitoring program;
- Establishes regulatory standards for APRNs engaged in a CAPA-CS, including the new CAPA-CS form; and
- Provide a regulatory process for an APRN to request an exemption from the CAPA-CS requirement.

Promulgation:

- On July 27, 2023, the Practice Committee held a special meeting. The Committee considered the amendments to the regulation and recommended its approval to the full Board.
- On August 24, 2023, the Board considered and approved the regulation for promulgation.
- On September 12, 2023, staff filed the regulation with the LRC.
- A public hearing was set November 21, 2023, and the comment period ended on November 30, 2023. A hearing was not requested.
- Comments were received from stakeholders. Therefore, on December 1, 2023, counsel requested an extension to give staff an opportunity to review the comments and prepare responses for the Board’s consideration.
- On January 5, 2024, the Board held a special called board meeting. After considering the comments, the Board amended the regulation.
- On January 11, 2024, Board staff refiled the regulation with statement of consideration.
- The ARRS considered the regulation on February 12, 2024, and passed it to the general assembly committees.
- On March 14, 2024, the House Standing Committee on Health Services considered the regulation and passed it.
- On March 21, 2024, the Senate Standing Committee on Health Services considered the regulation and passed it.

201 KAR 20:065

This administrative regulation professional standards for prescribing Buprenorphine-MonoProduct or Buprenorphine-Combined-with-Naloxone by APRNs for medication assisted treatment for opioid use disorder.

The Amendments:

- Remove references to the X-waiver;
- Update “KASPER” to the more general acronym “PDMP”;
- Require that an APRN who prescribes Buprenorphine shall have an active DEA registration and PDMP account;
- Require that an APRN who prescribes controlled substances shall have had education training on managing and treating opioid and other substance abuse disorders, as well as continuing education, see also 201 KAR 20:215, below; and
- Clarify the patient drug screening requirements.

Promulgation:

- On July 27, 2023, the Practice Committee held a special meeting. The Committee considered the amendments to the regulation and recommended its approval to the full Board.
- On August 24, 2023, the Board considered and approved the regulation for promulgation.
- On September 12, 2023, staff filed the regulation with the LRC.
- A public hearing was set November 21, 2023, and the comment period ended on November 30, 2023. However, a hearing was not requested.
- Comments were received from stakeholders. Therefore, on December 1, 2023, counsel requested an extension to give staff an opportunity to review the comments and prepare responses for the Board’s consideration.
- On January 5, 2024, the Board held a special called board meeting. After considering the comments, the Board did not amend the regulation.
- On January 11, 2024, Board staff refiled the regulation with statement of consideration.
- The ARRS considered the regulation on February 12, 2024, and passed it to the general assembly committees.
- On March 14, 2024, the House Standing Committee on Health Services considered the regulation and passed it.
- On March 21, 2024, the Senate Standing Committee on Health Services considered the regulation and passed it.

201 KAR 20:067

This is a new regulation that establishes the APRN professional standards for medicinal cannabis, as required by SB 47. The bill created KRS Chapter 218B, which provides that patients with qualifying medical conditions may obtain from an authorized practitioner a written certification for the use of medicinal cannabis. An APRN may be authorized to provide certifications if the APRN can prescribe controlled substances under KRS 314.042. The practitioner must establish a bona fide practitioner-patient relationship with the patient, which excludes via telehealth. Moreover, the regulation provides,

- The APRN may be authorized to provide a written certification for the use of medicinal cannabis for qualifying medical conditions;
- The conditions and application process for authorization, and renewal process;
- Continuing education requirements for medicinal cannabis practitioners;
- Reasons authorizations may be suspended or revoked; and
- The minimal standards of care.

Promulgation:

- The Board held a special meeting on September 7, 2023, to consider the regulation for promulgation.
- On September 12, 2023, staff filed the regulation with the LRC.
- A public hearing was set November 21, 2023, and the comment period ended on November 30, 2023. However, a hearing was not requested.
- Comments were received from stakeholders. Therefore, on December 1, 2023, counsel requested an extension to give staff an opportunity to review the comments and prepare responses for the Board’s consideration.
- On January 5, 2024, the Board held a special called board meeting. After considering the comments, the Board amended the regulation.
- On January 11, 2024, Board staff refiled the regulation with statement of consideration.
- The ARRS considered the regulation on February 12, 2024, and passed it to the general assembly committees.

- On March 14, 2024, the House Standing Committee on Health Services considered the regulation and passed it.
- On March 21, 2024, the Senate Standing Committee on Health Services considered the regulation and passed it.

201 KAR 20:215

This administrative regulation establishes continuing education competency requirements.

The Amendments:

- On July 27, 2023, the Education Committee held a special meeting. The Committee considered the amendments to the regulation and recommended its approval to the full Board.
- On August 24, 2023, the Board considered and approved the regulation for promulgation.
- On September 12, 2023, staff filed the regulation with the LRC.
- A public hearing was set November 21, 2023, and the comment period ended on November 30, 2023. However, a hearing was not requested.
- Comments were received from stakeholders. Therefore, on December 1, 2023, counsel requested an extension to give staff an opportunity to review the comments and prepare responses for the Board's consideration.
- On January 5, 2024, the Board held a special called board meeting. After considering the comments, the Board did not amend the regulation.
- On January 11, 2024, Board staff refiled the regulation with statement of consideration.
- The ARRS considered the regulation on February 12, 2024, and passed it to the general assembly committees.
- On March 14, 2024, the House Standing Committee on Health Services considered the regulation and passed it.
- On March 21, 2024, the Senate Standing Committee on Health Services considered the regulation and passed it.

201 KAR 20:220

This administrative regulation establishes standards for nursing continuing education provider approval.

The Amendments:

- Update the Material Incorporated by Reference (MIR) to reflect proposed amendments to 201 KAR 20:215, above.
- Promulgation:**
- On August 24, 2023, the Board considered and approved changes.

Continued on page 24>>

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- On September 12, 2023, staff filed the regulation with the LRC.
- A public hearing was set November 21, 2023, and the comment period ended on November 30, 2023. However, a hearing was not requested and no comments were received.
- On December 11, 2023, the Administrative Regulation Review Subcommittee ARRS considered the regulation and passed it to the Standing Committee on Health Services.
- On January 10, 2024, the Senate Standing Committee on Health Services considered the regulation and passed it to the House committee for consideration.
- On January 18, 2024, the House Standing Committee on Health Services considered the regulation and passed it.

201 KAR 20:225

This administrative regulation establishes standards for reinstatement of licenses.

The Amendments:

- Remove a reference to KRS 164.772, which was repealed on June 26, 2019, and
- Update references to KRS 314.041 and 314.051.

Promulgation:

- On October 19, 2023, the Board considered and approved changes.
- On November 2, 2023, staff filed the regulation with the LRC.
- A public hearing was tentatively set January 22, 2024, and the comment period ended on January 31, 2024. No comments were received.
- The ARRS considered the regulation on February 12, 2024, and passed it to the general assembly committees.
- On March 14, 2024, the House Standing Committee on Health Services considered the regulation and passed it.
- On March 21, 2024, the Senate Standing Committee on Health Services considered the regulation and passed it.

201 KAR 20:320

This administrative regulation regards standards for curriculum of prelicensure registered nurse and practical nurse programs.

The Amendments:

- Clarify that external examinations may be weighted no more than the lowest weighted individual examination included within the course grade average;
- Require on-campus physical facilities pursuant for students to practice clinical skills

and be observed and provided feedback prior to testing; and

- Remove implicit bias as a required curriculum subject for programs of prelicensure RN and LPN education.

Promulgation:

- On December 5, 2023, and January 11, 2024, a workgroup met to recommend amendments to the regulation.
- On January 18, 2024, the Education Committee considered and approved changes.
- On February 15, 2024, the Board considered and approved changes.
- On March 13, 2024, staff filed the regulation with the LRC.
- A public hearing has been tentatively set May 21, 2024, and the comment period will end on May 31, 2024.

201 KAR 20:360

This regulation regards the continuing approval and periodic evaluation of prelicensure registered nursing and licensed practical nursing programs.

The Amendments:

- Bring the annual reporting requirements into alignment with other compact states and the National Council of State Boards of Nursing (NCSBN); and
- Make the report form more generic to account for yearly reporting without having to update the specific years subject to reporting.

Promulgation:

- On January 18, 2024, the Governance Committee considered and approved changes.
- On February 15, 2024, the Board considered and approved changes.
- On March 13, 2024, staff filed the regulation with the LRC.
- A public hearing has been tentatively set May 21, 2024, and the comment period will end on May 31, 2024.

201 KAR 20:370

This administrative regulation regards applications for licensure.

The Amendment requires a multistate licensee who changes primary state of residence to Kentucky shall apply for a multistate license in Kentucky within sixty (60) days, in accordance with Nurse Licensure Compact (NLC) rules.

Promulgation:

- On December 14, 2023, the Board considered and approved changes.
- On December 27, 2023, staff filed the regulation with the LRC.
- A public hearing was tentatively set March 25, 2024, and the comment period ended

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- on March 31, 2024. A hearing was not requested, and no comments were received.
- On April 9, 2024, the ARRS considered the regulation and passed it to the general assembly committees.

201 KAR 20:506

This administrative regulation regards the nurse licensure compact.

The Amendments update the NLC MIR to the latest versions.

Promulgation:

- On December 14, 2023, the Board considered and approved changes.
- On December 27, 2023, staff filed the regulation with the LRC.
- A public hearing was tentatively set March 25, 2024, and the comment period ended on March 31, 2024. A hearing was not requested, and no comments were received.
- On April 9, 2024, the ARRS considered the regulation and passed it to the general assembly committees.

201 KAR 20:700

This this is a new regulation that establishes medication aide training and credentialing by the Board, pursuant to KRS 314.133.

The regulation was required by SB 110 in the 2023 regular session, which created KRS 314.133. The Board promulgated the regulation regarding educational and training requirements to certify medication aides to practice in long-term care facilities. The regulation supplements the CHFS regulation 902 KAR 20:480, which states in pertinent part,

Delegation of medication administration.

- (a) In accordance with the credentialing requirements of KRS 194A.705(2)(c), a nurse or other appropriate licensed health professional may delegate medication administration to an unlicensed staff person in an ALC-BH or ALC-DC as follows:

- If administration of oral or topical medication is delegated, the unlicensed staff person shall have a:
 - Certified medication aide I credential from a training and skills competency evaluation program approved by the Kentucky Board of Nursing (KBN); or
 - Kentucky medication aide credential from the Kentucky Community and Technical College System (KCTCS); and
- If administration of a preloaded insulin injection is delegated in addition to oral or topical medication, the

unlicensed staff person shall have a certified medication aide II credential from a training and skills competency evaluation program approved by the Kentucky Board of Nursing (KBN).

The new regulation establishes:

- Requirements for the credentialing of medication aides, including educational requirements, standards for training programs including delegation of the administration of oral or topical medications and preloaded insulin injection.
- The KBN approval process of medication aide training programs.
- Credentialing requirements, and fees for initial, renewal, and reinstatement of credentials.
- Associated fees.

Promulgation:

- On May 4, 2023, the Board approved the amendment at a special called board meeting.
- On May 9, 2023, staff filed the amended regulation with LRC to begin the promulgation process.
- A public hearing date was tentatively set for July 17, 2023, and the comment period ended on July 31, 2023. A hearing was not requested. However, comments were received.

- On August 24, 2023, the full Board considered the comments.
- On September 12, 2023, staff filed a Statement of Consideration regarding the comments.
- On October 10, 2023, the ARRS considered the regulation. Due to stakeholder concerns, the regulation was deferred until the December 2023 meeting of the ARRS.
- On November 28, 2023, Counsel requested that the regulation be deferred until the January 2024 meeting of the ARRS while associated regulations, 902 KAR 20:480, are promulgated by the CHFS.
- On January 8, 2024, Counsel requested that the regulation be deferred until the January 2024 meeting of the ARRS to consider an amendment that would exclude state-funded personal care homes from its requirements. The regulation was not amended.
- The ARRS considered the regulation on February 12, 2024, and passed it to the general assembly committees.
- On March 14, 2024, the House Standing Committee on Health Services considered the regulation and passed it.
- On March 21, 2024, the Senate Standing Committee on Health Services considered the regulation and passed it.

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SUMMARY OF BOARD ACTIONS

SPECIAL BOARD MEETING – JANUARY 5, 2024

PERSONNEL MATTER

Upon returning from closed session, the following actions were taken:

- That the personnel matter discussed in closed session be referred for external review
- That the KBN HR administrator will share with and make the KY State Employee Handbook available to all KBN staff to review

NEW BUSINESS

1. Consideration of Proposed Regulation Comments

201 KAR 20:065 – Buprenorphine

KBN General Counsel, Jeff Prather, outlined the comments received regarding 201 KAR 20:065. No motions were made to change the regulation.

201 KAR 20:067

KBN General Counsel, Jeff Prather, outlined the comments received regarding 201 KAR 20:067. The following recommendations were moved and seconded and were approved by acclamation after discussion and presentation of background materials:

- Change “require” to “recommend” regarding pregnancy tests for women of childbearing age.
 - Change “medicinal cannabis practitioner” to “health care provider.”
- 201 KAR 20:057
- KBN General Counsel, Jeff Prather, outlined the comments received regarding 201 KAR 20:057. The following recommendations were moved and seconded and were approved by acclamation after discussion and presentation of background materials:
- Add the same 30-day grace period that currently exists for the CAPA-NS for the CAPA-CS as well.
 - Add “phone conferencing” into the regulation

201 KAR 20:215

KBN General Counsel, Jeff Prather, outlined the comments received regarding 201 KAR 20:215. No motions were made to change the regulation.

2. Discussion of Regulation

201 KAR 20:320 – Section 4, Use of External Examinations

KBN General Counsel, Jeff Prather, outlined 201 KAR 20:320 – Section 4, Use of External Examinations. The following recommendations were moved and seconded and were approved by acclamation after discussion and presentation of background materials:

- That the workgroup previously created by the Education Committee also be tasked with reviewing the entirety of 201 KAR 20:320 and make any recommended changes to be considered by the full Education Committee and the Board.

OTHER

Informational

KBN General Counsel, Jeff Prather, and KBN Executive Director, Kelly Jenkins provided an explanation and update on Operation Nightingale, an investigation of programs of nursing being conducted by the FBI.

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SUMMARY OF BOARD ACTIONS

BOARD MEETING – FEBRUARY 15, 2024

STAFF RECOGNITION

Melissa Haddaway was recognized by KBN Board member Anne Veno for 10 years of service at KBN.

PRESIDENT'S REPORT

Audria Denker, KBN Board President, provided a brief update from the NCSBN scientific symposium in January. In March she will be attending the NCSBN mid-year conference in Atlanta.

FINANCIAL OFFICER'S REPORT

- It was moved and seconded to accept the financial officer's report (February financial summary), 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: Building; Operations [ORBS; Laserfiche; Presentation at KHA Workforce Committee]; Professional Development; Social Media; 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

Appointments

Audria Denker presented two nominees for reappointment to two open seats on the DT Advisory Council for four-year terms from June 2024-June 2028.

- It was moved and seconded to reappoint the following nominees to the LCPM Advisory Council, which were approved by acclamation:
 - o Amy Simms
 - o Tyne Strickert

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 14, 2023, and January 18, 2024 Credentials Review Panel meetings, which were approved by acclamation.

EDUCATION COMMITTEE

Education Committee Report – January 18, 2024

- It was moved and seconded to accept the January 18, 2024 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:

Workgroup findings and recommendations for 201 KAR 20:320

- The workgroup findings and recommendations for 201 KAR 20:320 be approved as presented.

Erica Lemberger, Education Committee Chair, outlined the proposed changes to sections 5 and 6 from the workgroup.

American National University ASN Program curriculum change

- The American National University Curriculum Change be approved with the requirement of a physical facility and the

requirement that students be assessed in person included.

Bellarmine University PMHNP degree program letter of intent

- The Bellarmine University PMHNP Degree Program Letter of Intent be approved as presented.

Bellarmine University PMHNP post-masters program letter of intent

- The Bellarmine University PMHNP Post-Masters Program Letter of Intent be approved as presented.

Southeast Community and Technical College PN Program site visit

- Southeast PN Program of Nursing be granted continued Program Approval Status, with semi-annual progress reports providing supportive evidence concerning the program's progress in fulfilling the Requirements to be Met, to be submitted beginning March 31, 2024.

Continued on page 28>>

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Southeast Community and Technical College
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- Southeast ASN Program of Nursing be granted continued Program Approval Status, with semi-annual progress reports providing supportive evidence concerning the program’s progress in fulfilling the Requirements to be Met, to be submitted beginning March 31, 2024.

PRACTICE COMMITTEE

Practice Committee January 19, 2024 Report

- It was moved and seconded to accept the January 19, 2024 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 #41 RN/LPN scope of practice determination guidelines

- Advisory Opinion Statement (AOS) #41 RN/LPN Scope of Practice Determination

Guidelines, be approved by the Board with specified additional revisions.

AOS #43 Roles of nurses in the administration of subanesthetic dosing Ketamine for psychiatric disorders and chronic pain

- Advisory Opinion Statement (AOS) #43 Roles of Nurses in the Administration of Subanesthetic Dosing Ketamine for Psychiatric Disorders and Chronic Pain, be approved.

CONSUMER PROTECTION COMMITTEE

- It was moved and seconded to accept the January 18, 2024 Consumer Protection Committee report, which was approved by acclamation.

ADVANCED PRACTICE REGISTERED NURSE COUNCIL

- It was moved and seconded to accept the January 18, 2024 Advanced Practice Registered Nurse Council 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:

Fluoroscopy advisory opinion

- The utilization of fluoroscopy and the operation of the equipment in the performance of fluoroscopic-guided procedures is within the scope of advanced practice registered nursing practice for the APRN who is currently educationally prepared and clinically competent in performing fluoroscopic-guided procedures.
- Additionally, 1) the fluoroscopic-guided procedure and the utilization of fluoroscopy is performed according to an established, approved policy and procedure in the health care facility; and 2) the APRN has been granted clinical privileges to perform the fluoroscopic-guided procedure and utilize fluoroscopy through the health care facility’s credentialing process.

AOS #24 patient abandonment

- AOS #24 Patient Abandonment by Nurses opinion revised to include APRNs be approved by the Board as submitted and that the matter be referred to the Practice Committee for review of the opinion as it relates to RN and LPN practice.

Advisory opinion bone marrow aspiration

- The October 2000 advisory opinion on the performance of bone marrow aspiration and biopsy by registered nurses which states: “It is not within the scope or practice of registered nurses to perform these acts. This does not preclude the qualified advanced registered nurse practitioner from the performance of the acts”, be revised, as follows:

- o It is within the scope of practice of an APRN who is educationally prepared and clinically competent to perform bone marrow aspiration and biopsy. It is not within the scope of a registered nurse to perform such acts.

AOS #23 the application and removal of a cast by nurses and closed reduction of a fracture by an APRN

- The section discussing APRN practice within AOS #23 The Application and Removal of a Cast by Nurses and Closed Reduction of Fracture by Advanced Practice Registered Nurses, be reaffirmed.

GOVERNANCE COMMITTEE

- It was moved and seconded to accept the January 18, 2024 Governance 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:

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201 KAR 20:360 – MIR update to annual report

- The proposed changes to 201 KAR 20:360 – MIR update to annual report be approved as written.

A copy of the updated strategic plan was provided for information only.

ACTION ON LICENSES

- It was moved and seconded that 20 orders, with no exceptions filed, discussed in closed session be adopted, which were approved by acclamation.
- It was moved and seconded that one (1) order, with suggested revisions, discussed in closed session be adopted, which was approved, as amended, by acclamation.

PERSONNEL ACTIONS

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

INFORMATION/ANNOUNCEMENTS

Other

The following items were provided for information only:

- KBN organizational chart, updated February 7, 2024



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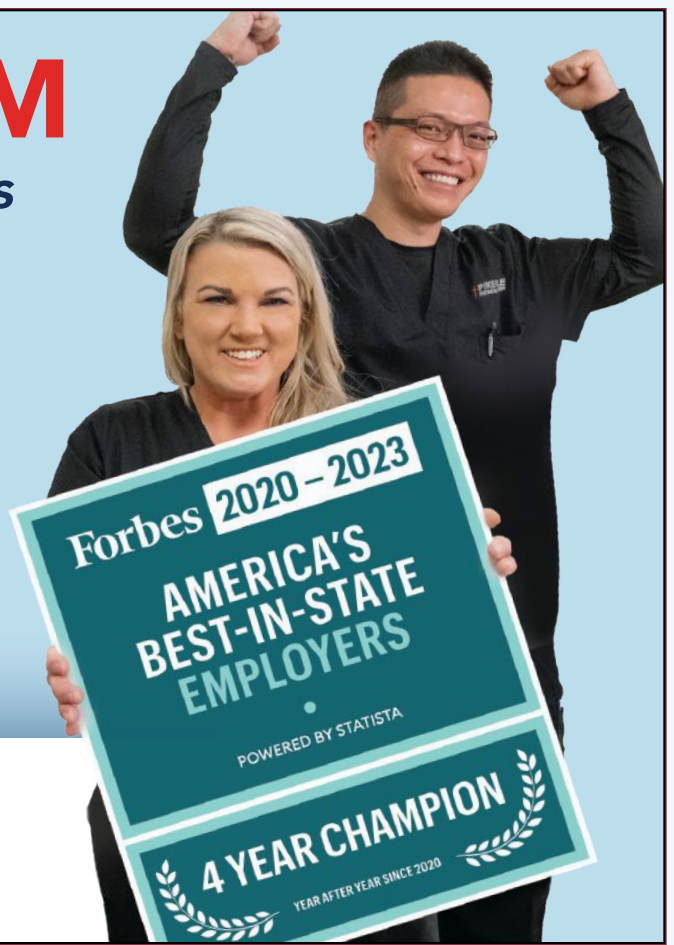
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Disciplinary Actions

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.boardsfnursing.org/licenselookup> to confirm current licensure status of individual nurses.

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Clark, Sara Lynn	LPN License 2048503	Bowling Green, KY	Eff. 2/9/24
Clemons, Timothy James	RN License 1155142	Hazard, KY	Eff. 1/30/24
Covetts, Rachel	RN License 1149590	Lexington, KY	Eff. 2/16/24
Dunn, Maranda Leigh	RN License 1126929	Lexington, KY	Eff. 2/16/24
Elkins, Matthew Ryan	RN License 1134026;	Crestwood, KY	Eff. 3/25/24
	APRN License 3007849		
Gaskins, Julie	RN License 1086406;	Columbia, KY	Eff. 3/19/24
	APRN License 3004081		
Kendall, Amanda Lee	RN License 1105254	Eastview, KY	Eff. 2/16/24
Olmstead, Megan Elizabeth	RN License 1135541	Louisville, KY	Eff. 2/21/24

IMMEDIATE TEMPORARY SUSPENSION OF PRIVILEGE TO PRACTICE

Elkins, Danica	IN RN License 28270379A	Georgetown, IN	Eff. 3/19/24
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LICENSE/CREDENTIAL SUSPENDED

Bingham, Lakie Kainell	RN License 1129997	Elkhorn City, KY	Eff. 2/15/24
Carney, Abigail Marie	RN License 1150159	Louisville, KY	Eff. 2/15/24
Christensen, Keram James	RN License 1130840	Covington, KY	Eff. 2/15/24
Coots, Mekisha Almada	LPN License 2033061	Manchester, KY	Eff. 2/15/24
Decker, Regina A.	LPN License 2038684	Louisville, KY	Eff. 2/15/24
Fields, Cynthia	RN License 1145439	Wallingford, KY	Eff. 2/15/24
Legner, Aimee Christina	LPN License 2042632	Wilder, KY	Eff. 2/15/24
Simrell, Kristin	LPN License 2050932	Terre Haute, IN	Eff. 2/15/24
Vanderpool, Robert	RN License 1074802	Nicholasville, KY	Eff. 2/15/24

PRIVILEGE TO PRACTICE SUSPENDED

Eldridge, Jessica Vada	TN LPN License 70922	Tazwell, TN	Eff. 2/15/24
Ihaza, Veronica	TN LPN License 85564	Somerville, TN	Eff. 2/15/24
Morphis, Kimberly Blair	TX LPN License 190586	Nocona, TX	Eff. 2/15/24
Webb, Teresa	TN RN License 104550	Knoxville, TN	Eff. 2/15/24

LICENSE/CREDENTIAL DENIED OR DENIED REINSTATEMENT

Black, Verlyncia K.	LPN Applicant by Endorsement	Valparaiso, IN	Eff. 1/17/24
Cecil, Katrina Lynn	LPN License 2037680	Lebanon, KY	Eff. 3/18/24
Clonch, Lanita	LPN License 2053099	Paintsville, KY	Eff. 2/15/24
Fischer, Christina Marie	RN License 1137281	Cincinnati, OH	Eff. 2/15/24
Fultz, Tiffany Nicole	RN License 1109731	Morehead, KY	Eff. 3/18/24
Henley, Kimberly Dawn	RN Applicant by Endorsement	Owensboro, KY	Eff. 2/6/24
Hudson, Mary Catherine	RN License 1106274	Benton, KY	Eff. 3/27/24
Kelly, Michelle	RN License 1159756	Richmond, KY	Eff. 2/15/24
McClain, Keith Tyler	RN License 1136362	Grayson, KY	Eff. 2/15/24
McKinney, Peggy June	RN License 1075726	Smithfield, KY	Eff. 2/15/24
Ortiz, Eric Steven	RN License 1156348	Owensboro, KY	Eff. 2/15/24
Preston, Deborah	LPN License 2021756	Crittenden, KY	Eff. 2/15/24
Ward, Cheryl Lynn	RN License 1079574	Calvert City, KY	Eff. 2/15/24

LICENSE/CREDENTIAL VOLUNTARILY SURRENDERED

Harrison, Cindy M.	LPN License 2026321	Smiths Grove, KY	Eff. 2/15/24
Huninghake, Madeline Anne	RN License 1169602	Crestview, KY	Eff. 1/9/24
Keeling, Samantha Nicole	RN License 1153035	Taylorsville, KY	Eff. 3/19/24
Lotspeich, Shari Ann	RN License 1068163	Union, KY	Eff. 3/5/24
Mitchell, Rashonda Nicole	LPN License 2042554	Greensburg, KY	Eff. 3/11/24
Warren, Angela Marie	RN License 1083272;	Pineville, KY	Eff. 1/3/24
	APRN License 3003461		
Wiley, Adrian Gale	RN License 1076483	Danville, KY	Eff. 2/26/24 PRIVILEGE

TO PRACTICE VOLUNTARILY SURRENDERED

Holliday, Allan	TX RN License 648246	San Antonio, TX	Eff. 12/18/23
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LICENSE/CREDENTIAL PLACED ON LIMITATION/PROBATION

Champeau, Robin	DT Applicant	Madisonville, KY	Eff. 2/26/24
Doud, Ashley Lynn	RN License 1131373	Edgewood, KY	Eff. 1/22/24
Garrison, Angela	RN License 1149955	Lexington, KY	Eff. 3/27/24
Marrero, Jermia	DT Credential 8002180	Louisville, KY	Eff. 1/19/24
Page, Juddson Farley	RN License 4016409	Pikeville, KY	Eff. 2/19/24
Starks, Abby Lynn	LPN License 2042852	Louisville, KY	Eff. 1/29/24

LICENSE/CREDENTIAL REPRIMANDED

Abdul-Rahmaan, Maha	LPN License 2057163	Louisville, KY	Eff. 2/14/24
Blair, Rachel Leeann	RN License 1170076	Ashland, KY	Eff. 2/28/24
Caradine, Latisha Marie	LPN License 2056570	Lorain, OH	Eff. 1/3/24
Cassell, Brianna	RN License 1142172	Nicholasville, KY	Eff. 2/29/24
Clark, Jessica Dawn	LPN License 2050756	Greenup, KY	Eff. 1/30/24
Crabtree, Crystal Dawn	RN License 1124994	Clay City, KY	Eff. 3/4/24
Findlay, Kristina Maxine	RN License 1145637	Paducah, KY	Eff. 1/3/24
Finley, Erica Nicole	RN License 1104412	Williamsburg, KY	Eff. 2/14/24
Gardner, Sherri L.	RN License 1101005	Elizabethtown, KY	Eff. 1/8/24
Ghimire, Michelle	RN License 1181444;	Richmond, KY	Eff. 2/22/24
	APRN License 4010091		

Howard, Amanda Megan	RN License 1172811	Owensboro, KY	Eff. 1/19/24
Huffman, Alexis	LPN License 2055914	Brandenburg, KY	Eff. 3/21/24
Jenkins, Jonathan	RN License 1158047	London, KY	Eff. 3/19/24
Jewell, Jessica	RN License 1127640	Paintsville, KY	Eff. 3/13/24
McKnight, Howard Scott	RN License 1088079; LPN License 2029870	Bagdad, KY	Eff. 1/29/24
Miller, Maria Samantha	LPN License 2050016	Lexington, KY	Eff. 1/25/24
Moore, Amanda Lynn	RN License 1170329	Guthrie, KY	Eff. 2/12/24
Pickerell, Angelina Rachelle	RN License 4015909	Hodgenville, KY	Eff. 2/5/24
Sebastian, Gratiana Marie	LPN License 2055631	Paris, KY	Eff. 3/5/24
Short, Susan Marie	LPN License 2051715	Shelbyville, KY	Eff. 2/6/24
Trent, Joey Michele	RN License 1089754	Lawrenceburg, KY	Eff. 2/22/24
Walker, Deborah Jeanine	LPN License 2018029	Louisville, KY	Eff. 3/4/24
PRIVILEGE TO PRACTICE FINED			
Hermesman, Louis Robert	FL RN License 9451756	Lake City, FL	Eff. 1/17/24
PRIVILEGE TO PRACTICE REPRIMANDED			
Andan Hugo, Leonora	FL RN License 9270351	Margate, FL	Eff. 2/6/24
Shofner, Connie Elizabeth	NM RN License R38430	Carlsbad, NM	Eff. 1/8/24
Zalsman, Lisa	TN RN License 177578	Troy, TN	Eff. 2/22/24
LICENSE CLEARED FROM DISCIPLINARY ACTION			
Adams, Tracey Michelle	LPN License 2056615	Burkesville, KY	Eff. 2/20/24
Aikins, Sheria Michelle	LPN License 2055748	Covington, KY	Eff. 1/17/24
Blair, Rachel Lecann	RN License 1170076	Ashland, KY	Eff. 3/1/24
Bushong, Denise Noel	RN License 1086040; APRN License 3006592	Owensboro, KY	Eff. 1/12/24
Caradine, Latisha Marie	LPN License 2056570	Lorain, OH	Eff. 1/12/24
Davis, Mary Nicole	RN License 1091891	Louisville, KY	Eff. 2/19/24
Findlay, Kristina Maxine	RN License 1145637	Paducah, KY	Eff. 1/17/24
Finley, Erica Nicole	RN License 1104412	Williamsburg, KY	Eff. 3/20/24
Gardner, Sherri L.	RN License 1101005	Elizabethtown, KY	Eff. 3/5/24
Ghimire, Michelle	RN License 1181444; APRN License 4010091	Richmond, KY	Eff. 3/8/24
Gray, Teresa Darlene	RN License 1105782; APRN License 3007325	Flatlick, KY	Eff. 1/30/24
Grider, Elizabeth Taylor	RN License 1120801; APRN License 3010381	Lawrenceburg, KY	Eff. 3/12/24
Halligan, Shelley	RN License 4009281	Niantic, CT	Eff. 1/12/24
Hulen, Kyle Robert	RN License 1138871	Crestview Hills, KY	Eff. 1/8/24

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Kimberlin, Melissa Dawn	RN License 1118344; APRN License 3008998	Owensboro, KY	Eff. 1/30/24
Long, Chrystal Renee	RN License 1181661	Lexington, KY	Eff. 1/25/24
Marquardt, Tommi Beth	RN License 1125031	Nicholasville, KY	Eff. 1/22/24
McCaslin, Shelly Ann	LPN License 2046962	Paducah, KY	Eff. 2/15/24
Mikes, Amber	LPN License 2044568	Owensboro, KY	Eff. 1/8/24
Neblett, Juliona Louise	RN License 1104827	Russellville, KY	Eff. 1/25/24
Norris, Beverly Ann	LPN License 2038505	Madisonville, KY	Eff. 3/25/24
Parks, Heather Michelle	RN License 1167685	Middletown, OH	Eff. 2/13/24
Penn, Aquelia Breanna	RN License 1125110	Mannsville, KY	Eff. 2/16/24
Powell, Ashley Maree	LPN License 2054372	Dunnville, KY	Eff. 1/8/24
Robinson, Whitney Wainscott	RN License 1120440	Lexington, KY	Eff. 2/12/24
Smith, Eric Christopher	RN License 1094004	Lexington, KY	Eff. 2/8/24
Smith, Karen D.	RN License 1110209	Louisville, KY	Eff. 2/15/24
Wiggins, Cassandra	LPN License 2055899	Wallins, KY	Eff. 1/8/24
Williams, Patricia D.	RN License 1057085; APRN License 3002666	Elizabethtown, KY	Eff. 2/13/24

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Imposition of civil penalty for practice without a current active license or temporary work permit	21	Imposition of civil penalty for falsification of an application for licensure	38
Imposition of civil penalty for failure to meet mandatory continuing education requirement	149	Imposition of civil penalty for a positive drug screen	9
Imposition of civil penalty for a practice issue	63		



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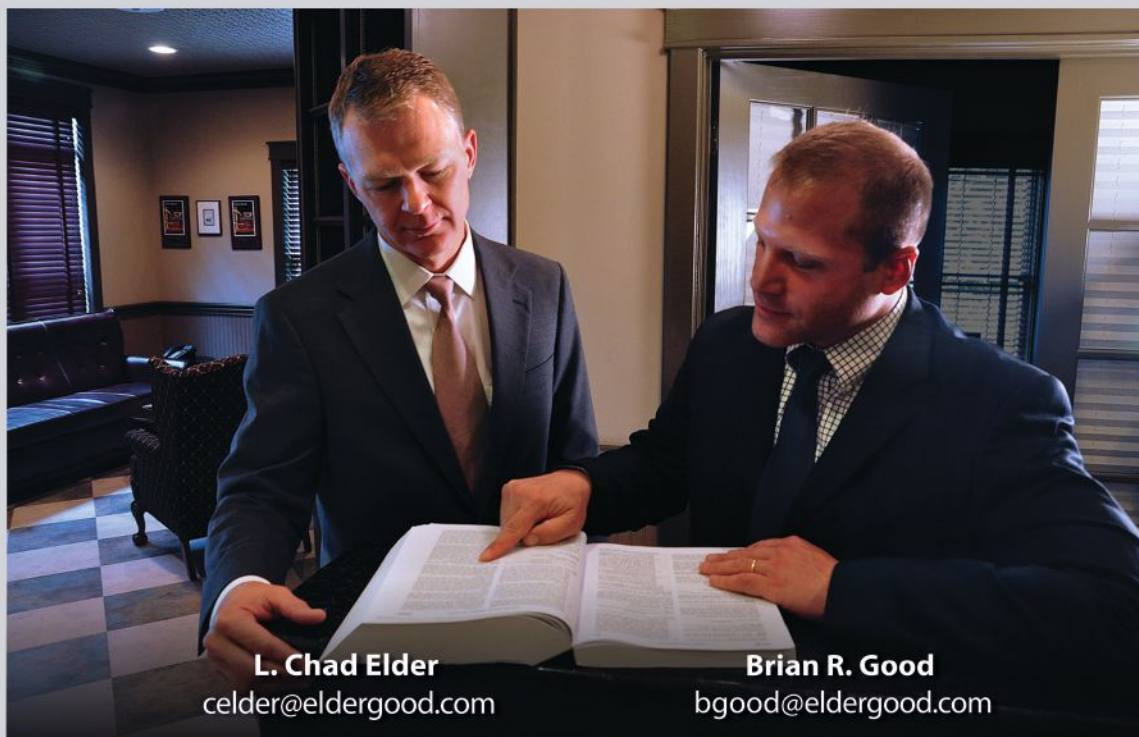
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Public Service Recognition Week – Recognizing KBN Staff

As the first full week of May is Public Service Recognition Week devoted to recognizing public servants for their dedication and commitment, I also want to commend the KBN Staff for their support and dedication during 2023!

So many advancements would have been a major undertaking in a normal year, but 2023 was far from normal for the staff of the Kentucky Board of Nursing.

On December 22, 2022, Kentucky was hit by a winter storm so severe that Governor Beshear was prompted to declare a state of emergency. Two days of extreme conditions proved to be too much for the Louisville office building that houses KBN. During the night on Christmas Eve, a water line in the 3rd Floor KBN Board Room froze and burst. The resulting flood flowed down through three floors of KBN offices, destroying wiring, dry wall, carpet, furniture, and equipment along its way.

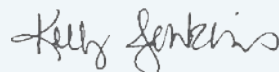
The KBN offices were rendered unusable. It took the entirety of 2023 to renovate the building and restore it to its former condition. During the year, the KBN staff worked together as a cohesive unit to not only continue to meet the agency's mandate to protect the public, but to also move forward with the technology projects that had already been years in the planning.

During the construction, a core group of administrative staff were housed in a makeshift office in a temporary location. This group saw to it that phone calls were answered, letters were mailed and received, service of legal process was accepted, bills were paid, paychecks were issued and all the other important tasks necessary to keep a public agency operating were accomplished. The rest of the KBN staff telecommuted for the year, a situation that many had hoped they had left behind after the height of the COVID pandemic.

The conditions were far from ideal, and yet, the KBN staff accomplished all of the planned process improvements successfully and on schedule. Creative problem-solving and adaptability were required at times. The meeting room of a hotel across the street from KBN's offices was used as a base of operations for the ORBS go-live process. Staff worked in the KBN office scanning paper files while construction was still going on in other parts of the building. But through team-work and collaboration, the staff of the Kentucky Board of Nursing successfully worked together to accomplish all of the agency's goals and bring KBN into the 21st Century.

In closing, I want to express my deepest appreciation to the KBN staff for your dedication and commitment to nursing and the safety of Kentucky's citizens. Your passion and professionalism inspire us all, and I am honored to serve alongside such exceptional individuals.

Sincerely,



Kelly Jenkins MSN, RN, NE- BC
Executive Director, Kentucky Board of Nursing



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