



KBN

SPRING 2018
Edition 55

CONNECTION

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KBN MISSION

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

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Statistics Corner

As of MARCH 25, 2018 KBN records show:

RN Active: 70,975

LPN Active: 14,065

Advanced Practice Registered Nurses: 7,844

Dialysis Technicians Active: 617

SANE Active: 260



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Lynn Keiso
ACNP, FCCM, FAANP



PRESIDENT'S MESSAGE

A healthy culture is created and maintained by focusing on the right goals and creating an environment. The spirit of our Kentucky nurses is a function of our collective commitment to success. The Board utilizes a flexible map of accountability to assess our actions and ultimately, our results. We strive to enlist active agents of change and optimize our resources through your essential feedback. Strategy is our strong suit and your voice is the crux of our strategy. The more collaborative we are, the more likely it is we will all succeed.

Over the past three quarters, the Board has sought knowledge of your contributions, challenges, and collaborations so that we can improve our service to you. We have engaged our strong community of nurses with a survey so that you may pose questions, challenge ideas, convey curiosity and be autonomous as a contributor of ideas. In this issue of the KBN Connection you will find some of the results of the survey. Thanks to your amazing response to the survey, we have begun a process of Board performance evaluation through a contract with the Center for Nonprofit Excellence. Now is the time for the Board to update our strategic plan and begin augmenting by establishing key performance indicators to allow monitoring and measuring board performance.

As a Kentucky Board of Nursing President, I appreciate being held to a standard to communicate our vision and its rationale. It is important to all Kentucky nurses that we commit together to gaining a better understanding of our processes, the reasons for our actions, and optimizing the regulatory future for our Kentucky nurses.

In closing, I want to encourage your participation in a nursing professional organization. Your participation assists in promoting the coordinated voice of nursing to impact and or shape the future of the nursing profession and thus safe patient care through good public policy. As the Gallup Poll shows nursing continues to be the most trusted profession in the eye of the public, the Kentucky Board of Nursing is committed to its mission: To protect the well-being of the public by development and enforcement of state laws governing the safe practice of nursing, nursing education, and credentialing.

A handwritten signature in black ink, appearing to read 'Lewis Perkins'.

Lewis Perkins, DNP, APRN, GNP-BC, NEA-BC
President, Kentucky Board of Nursing



EXECUTIVE DIRECTOR'S MESSAGE

Dear Colleagues in Nursing:

In the last issue of the KBN Connection, I wrote of the differences between the mission of the Board of Nursing as one of public protection and that of professional associations advocating for the nursing profession. In this message, I would like continue the discussion focusing on nursing licensure and what that means to you as an individual nurse and the profession as a whole.

KRS 314.021 Policy (1) states:

It is the declared policy of the General Assembly of Kentucky that the practice of nursing should be regulated and controlled as provided herein and by regulations of the board in order to protect and safeguard the health and safety of the citizens of the Commonwealth of Kentucky.

As stated in the Winter 2018 KBN Connection Executive Director message, many nurses believe that the KBN exists to promote the profession and advocate for nurses. Simply put, this is not correct. Health care professions like nursing, medicine, pharmacy, dentistry, etc. are regulated because they are considered safety sensitive professions. Specifically, the practice of nursing poses a risk of harm to the public if carried out by someone who is not educated to be a nurse and/or competent to practice safely. The public may not have sufficient knowledge and experience to identify unqualified health care providers and, as a result, is particularly vulnerable to unsafe and incompetent practitioners. A license issued by a governmental entity, like KBN, provides assurance to the public that the nurse has met minimal essential requirements to practice as a licensed practical nurse (LPN), registered nurse (RN) or advanced practice registered nurse (APRN). Licensure benefits nurses and the profession by the standardization of a clear articulation of the legal scope of nursing practice. In addition, the titles "LPN", "RN", and "APRN" are protected by statute

(KRS 314.031(1)) which states, in part,

It shall be unlawful for any person to call or hold herself or himself out as or use the title of a nurse or to practice or offer to practice as a nurse unless licensed or privileged under the provisions of this chapter.

This means that only those individuals who meet identified specific requirements can use the title (LPN, RN or APRN) and practice as such in the Commonwealth.

Licensure is a privilege. With this privilege, comes responsibility. KRS 314.021(2) states:

All individuals licensed or privileged under provisions of this chapter shall be responsible and accountable for making decisions that are based upon the individuals educational preparation and experience in nursing and shall practice nursing with reasonable skill and safety.

It is incumbent upon all nurses to be knowledgeable of the laws and regulations as it relates to the practice of nursing in the Commonwealth. This applies to all nurses, but even more so for APRNs who have the legal authority to prescribe controlled substances. It is imperative that APRNs who prescribe controlled substances are knowledgeable of Kentucky Revised Statutes KRS 314.011(8); 314.042, 314.091; 218A.010; 218A.202; 218A.205 (<http://www.lrc.ky.gov/Statutes/index.aspx>) and Kentucky Administrative Regulations 201 KAR 20:056; 057 and 059. (<http://www.lrc.ky.gov/kar/frntpage.htm>) Failure to practice consistent with the statutes and regulations may subject the APRN to potential disciplinary action. See KRS 314.091.

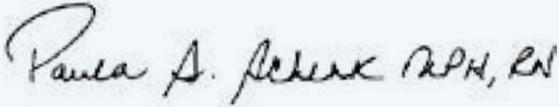
Ignorance of the law does not relieve a nurse of his/her responsibility to know, adhere and follow the applicable statutes and regulations.

Much has been reported in the news about illegal or inappropriate opioid prescribing being a contributor to the problem of substance use and addiction in our state. Following a recent meeting, organized by Senator Paul Hornback, of professional groups and regulatory agencies overseeing prescribers of controlled substances, KBN issued the following statement:

Consistent with its mission of public protection, the Kentucky Board of Nursing is committed to the equitable enforcement of laws governing the prescribing of controlled substances by advanced practice registered nurses (APRNs) in the Commonwealth of Kentucky. The Board supports educating APRNs about the opioid epidemic and assisting those involved with advocating for policies that support evidence-based prescribing of opioids and other controlled substances. The Board stands ready to partner with all agencies and

organizations involved with fighting the opioid epidemic in the Commonwealth. The Board will bring to bear all its power to appropriately address those who violate the laws of this state regarding prescribing of controlled substances.

Respect for the privilege of licensure and the accompanying legal responsibilities will assist you over your nursing career and, most importantly, will protect the safety and the well-being of the public we are here to serve.



Paula Schenk, MPH, RN
Executive Director

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ANNOUNCEMENT

Paula Schenk has announced her retirement from the Kentucky Board of Nursing effective March 31, 2018. Ms. Schenk's retirement marks the culmination of nearly 27 years of service to the Board, including several years of service as Executive Director. The Board thanks Paula for her many years of service dedicated to the safety and well-being of the citizens of the Commonwealth of Kentucky.

Effective March 16, 2018, Deputy Executive Director Pam Hagan is acting as Executive Director until the Board announces an official transition plan for the position. Ms. Hagan's contact information is as follows:

Pamela C. Hagan, MSN, RN
Acting Executive Director
Deputy Executive Director
APRN Education & Nursing
Practice Consultant
Kentucky Board of Nursing
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For program availability in your state visit uofl.me/statelists

CONTINUING COMPETENCY/ CONTINUING EDUCATION REQUIREMENTS FAQs

Chessica Nation
Continuing Competency Program Coordinator

Additional information can be found on the CE/Competency page of the KBN website (kbn.ky.gov/ce).



Q: What are the dates of the continuing education earning period for renewal of my nursing license?

A: November 1st through October 31st.

Q: How many continuing education contact hours do I need to earn?

A: LPNs and RNs must earn 14 contact hours (or the equivalent – see below for more information) of approved continuing education each year to renew their licenses. APRNs and SANE nurses have additional CE requirements.

Equivalencies:

- **National certification** related to the nurse's practice role (in effect during the entire period, or initially earned or recertified during the period); OR
- Completion of a **nursing research project** as principal investigator, coinvestigator, or project director. Must be qualitative or quantitative in nature, utilize research methodology, and include a summary of the findings; OR
- **Publication of an article** in a peer-reviewed health-related journal; OR
- A **nursing continuing education presentation** that is developed by the presenter, presented to nurses or other health professionals, and is evidenced by a program brochure, course syllabi, or a letter from the offering provider identifying the licensee as the presenter of the offering; OR
- Participation as a **preceptor** for at least one nursing student or new employee. Must be for at least 120

hours, have a one-to-one relationship with student or employee, may precept more than one student during the 120 hours, and preceptorship shall be evidenced by written documentation from the educational institution or preceptor's supervisor; OR

- **Proof of earning seven approved contact hours, PLUS a nursing employment evaluation** that is satisfactory for continued employment. Must be signed by supervisor and include the employer name, address, and phone number, and cover at least six months of the earning period.

Q: Who is approved by KBN to offer CE?

A: KBN accepts CE offerings from three types of providers:

- Those approved by KBN. They are assigned a KBN approval number formatted as X-XXXX and an approval expiration date.
- Those approved by recognized national nursing organizations. They should make their approval/accreditation information available to nurses prior to registering, and this information must be included on the certificate to be accepted. A list of the recognized national nursing organizations can be found on the KBN website at kbn.ky.gov/ce.
- Those approved by any state board of nursing.

Q: What are the specific CE requirements for an APRN license renewal?

A: Five contact hours of approved CE in pharmacology. APRNs with a CAPA-CS are required to earn 1.5 approved

CE contact hours on the use of KASPER, pain management, or addiction disorders. These hours may count as part of the required five pharmacology contact hours. APRNs must be able to identify to the KBN the unique controlled substance contact hours.

Q: So, does an APRN have to complete a total of 19 contact hours of CE?

A: No. APRNs may use their national nursing certification to satisfy the fourteen (14) CE contact hours needed for RN licensure renewal each year, as long as the certification was initially attained during the licensure period, has been in effect during the entire licensure period, or has been renewed during the licensure period. If these requirements are met, APRNs do not need to earn 14 contact hours of CE to renew their RN licenses.

Q: What are the specific CE requirements for a SANE credential renewal?

A: Five contact hours of approved sexual assault CE, which can include forensic medicine or domestic violence. These hours may count as part of the required 14 contact hours for RN renewal.

Q: Is there a requirement to earn CE in Pediatric Abusive Head Trauma?

A: There is a one-time requirement for all nurses to earn 1.5 CE contact hours in Pediatric Abusive Head Trauma (Shaken Baby Syndrome) within 3 years of their initial licensure date. This course was included in the curriculum for graduates of Kentucky Programs of Nursing as of December 2011, meaning that graduates after this date are not required to take additional CE on the subject.

Q: Is there a requirement to earn CE in Domestic Violence?

A: There is a one-time requirement for all nurses to earn 3 CE contact hours in Domestic Violence within 3 years of their initial licensure date. This course was included in the curriculum for graduates of Kentucky Programs of Nursing as of May 1998, meaning that graduates after this date are not required to take additional CE on the subject.

Q: Is there a requirement to earn CE in HIV/AIDS?

A: No. This requirement was removed effective June 24, 2015.

Q: Am I exempt from earning CE contact hours for my first renewal?

A: No. There is no exemption for a first time renewal.

Q: Do college courses count as CE hours?

A: Yes, but the course must be:

- a nursing course, designated by a nursing course number, or an academic course that is applicable to the nurse's role;
- beyond the prelicensure curriculum of the license; and
- successfully completed (a grade of "C" or better or a "pass" on an pass-fail grading system) during the earning period.

One semester credit hour equals 15 contact hours.
One quarter credit hour equals 12 contact hours.

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

A: Not automatically. A nurse can have the hours reviewed for possible conversion into nursing continuing education contact hours by submitting an Individual Review Application. This form can be found on the KBN website by clicking the "Education" tab, then "CE/Competency," then "CE Forms & Publications." There is non-refundable fee of \$10.00 and the application, with all supporting documentation, must be received no later than November 30, 2018.

APRNs are allowed to use CME credits for pharmacology continuing education, if the provider offering the course is recognized by their national certifying organization.

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

A: You can have the hours reviewed for possible conversion into nursing continuing education contact hours by submitting an Individual Review Application. This form can be found on the KBN website by clicking the "Education" tab, then "CE/Competency," then "CE Forms & Publications." There is non-refundable fee of \$10.00 and the application, with all supporting documentation, must be received no later than November 30, 2018.

Q: Is online/home study CE accepted by KBN?

A: Yes, if offered by an approved CE provider. All, or any combination of, contact hours can be online or home study.

Q: Can CPR be counted as CE?

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

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

A: If an approved provider offers the ACLS or PALS courses, the contact hours earned will be accepted by KBN. If audited, you must provide the certificate awarding contact hours; the certification card alone is not sufficient.

Q: Why did I receive an audit letter?

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

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

A: You will be asked to earn the required hours and submit copies of the CE certificates to KBN, along with a letter explaining why these hours were earned late. Once this documentation is received and accepted by KBN, you will be eligible to enter into a Consent Decree with KBN and pay the

Continued on page 10>>

<<Continued from page 9

required fine. If you do not earn the contact hours and pay the fine, your records will be forwarded to the Investigation Branch for initiation of disciplinary action.

Q: What is the difference between a CEU and a contact hour?

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

Q: If I am no longer employed as a nurse and do not plan to work as a nurse, but want to renew my nursing license, do I need to complete nursing CE?

A: Yes. Continuing education is required to renew a license, regardless of employment status.

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

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

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

A: No. KBN does not keep track of each nurse's CE contact hours. Nurses should retain records of their CE/competency for at least five years following a licensure period. You are not required to submit CE certificates to KBN unless requested to do so.

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APRN LICENSURE COMPLIANCE AUDIT

The Kentucky Board of Nursing will conduct an audit of KY-licensed APRNs before the end of the year to ensure licensees are compliant with the nursing laws. (Please read the companion article in this issue "Compliance with APRN Licensure Laws")

Data which will be reviewed will be:

1. Current certification documents on file with KBN
2. Evidence of CAPA-NS on file with KBN
3. Evidence of CAPA-CS on file with KBN
4. Evidence of any DEA, DEAX on file with KBN

Go to www.Kbn.Ky.Gov, under the licensees tab, to Online Validation and verify that the information posted publicly about your licensure status is correct.

Please contact Curt Lowther, APRN Licensure Coordinator, Curtwand.Lowther@ky.gov, 502-429-3329, to provide evidence of current information prior to the audit.

ARE YOU COMPLIANT WITH APRN LICENSURE LAWS/REGULATIONS?

Pamela C. Hagan, MSN, RN
APRN and Nursing Practice Consultant

1. The APRN must maintain a current mailing address with the KBN. [KRS 314:107]
2. The APRN must maintain current national certification to maintain current APRN licensure in the state of KY. [201 KAR 20:056 (7) (11)]
3. The APRN must provide the KBN evidence of current national certification on or BEFORE the national certification expiration date. [201 KAR 20:056 (7)]
4. The APRN's license will be voided if current national certification is not provided to the KBN on or BEFORE the previous national certification expiration date. [201 KAR 20:056 (7)]
5. The APRN may not practice or use the title APRN if the APRN license is voided. The APRN will be required to reinstate the license, meet all requirements and pay all fees before the license is reinstated. Prior to reinstatement, the Board must receive proof of current certification and a Federal (fingerprints) and KY criminal background check. [201 KAR 20:056 (7)]
6. If the APRN did not work in the APRN role while the APRN license was voided, and no other complaints are filed, reinstatement may occur prior to the Board's receipt of a federal background check. [See 201 KAR 20:056 (7)]. If the APRN worked in the APRN role while the APRN license was voided, or if any other complaint is filed with the KBN, the reinstatement of the APRN license will be delayed while the Board determines whether disciplinary action is appropriate. [See 201 KAR 20:225]
7. The APRN must provide the KBN evidence of the existence of a valid CAPA-NS BEFORE initiating prescribing nonscheduled legend drugs and shall maintain a CAPA-NS for at least the first four years of APRN practice when prescribing non-scheduled legend medications. [KRS 314.042 (8)]
8. The APRN must provide the KBN evidence of holding DEA registration BEFORE prescribing controlled substances. [KRS 314.042 (10)(h)]
9. The APRN must provide the KBN notification of the existence of a current CAPA-CS BEFORE prescribing controlled substances. [(KRS 314.042 (10))]
10. APRN licensure is a privilege and not a right. It is YOUR responsibility as the licensee to ensure that YOU are compliant with the law...not your employer, office manager, or other individual's responsibility.
11. GO TO THE KBN WEBSITE LICENSEES/ONLINE VALIDATION TO VERIFY THAT YOUR INFORMATION IS CORRECT AND POSTED ON THE WEBSITE www.kbn.ky.gov

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APRN PRACTICE

NATIONAL TRANSPORTATION SAFETY BOARD RECOMMENDATIONS RE: PRESCRIBING CONTROLLED SUBSTANCES

Pamela C. Hagan, MSN, RN
KBN APRN Education
and Practice Consultant

The National Transportation Safety Board (NTSB), an independent federal agency, is charged by Congress with investigating every civil aviation accident in the United States and significant accident in other modes of transportation – railroad, highway, marine, and pipeline. The probable cause of accidents is determined and safety recommendations are issued, aimed at preventing future accidents.

As a result of conducting the safety study *Drug Use Trends in Aviation: Assessing the Risk of Pilot Impairment, SS 14/01*, recommendations were made by the NTSB and an inquiry was communicated to former Kentucky Governor Steve Beshear to determine how the following recommendations are met by health care providers in Kentucky:

I-14-1 Include in all state guidelines regarding prescribing controlled substances for pain a recommendation that health care providers discuss with patients the effect their medical condition and medication use may have on their ability to safely operate a vehicle in any mode of transportation.

I-14-2 Use existing newsletters or other routine forms of communication with licensed health care providers and pharmacists to highlight the importance of routinely discussing with patients the effect their diagnosed medical conditions or recommended drugs may have on their ability to safely operate a vehicle in any mode of transportation.

APRN prescribers of controlled substances should routinely address and implement the NTSB recommendations

when following the scope and standards set out in 201 KAR 20:057(9)(10) by discussing and documenting their discussion with patients on the effect

their medical condition and medication use may have on their ability to safely operate a vehicle in any mode of transportation.

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COURTESY NOTIFICATION OF CERTIFICATION RENEWAL

Kentucky Nursing Laws and Regulations (KRS 314.042 and 201 KAR 20:056) state it is the APRN licensee's responsibility to maintain current certification and NOTIFY the KBN of APRN certification renewal. Significant numbers of APRNs fail to ensure that notification of certification renewal has been sent and received by KBN BEFORE THE EXPIRATION DATE.

Renewing your certification earlier than the expiration month is key to allowing processing time by the certification agency and the KBN. There is NO GRACE PERIOD available through the KBN as CURRENT CERTIFICATION is required to maintain current APRN licensure, regardless of the APRN license expiration date.

KBN sends a courtesy reminder email and a mailed letter notification 30 days before certification expiration and 15 days prior to certification expiration.

KEY POINTS:

- Nursing law states the licensee shall keep a current mailing address on file with KBN
- Providing a current email address allows us to send you relevant information. You will need to ensure an email received from KBN does not go to your junk/spam email box.

- Renew your certification early
- Submit evidence of current/renewed certification which includes name, certification number, certification population, and certification expiration date
- IF YOU DELEGATE to someone in your practice to submit your certification information, ensure the information is received and processed by the KBN by reviewing your licensure status on the KBN website/LICENSEE/ONLINE VALIDATION
- If you request (and possibly pay for) the certifying body to send renewal information to KBN, ensure the information was received by KBN and posted to the ONLINE VALIDATION
- Submit to KBN and review the ONLINE VALIDATION site BEFORE the EXPIRATION DATE
- It is YOUR responsibility...TRUST others, but VERIFY the action was completed.
- You may mail, fax, or scan and email a copy of your certification card or certificate.

For assistance on completion of this requirement contact: Curt Lowther, APRN Licensure Coordinator, Curtwand.Lowther@ky.gov, phone: 502-429-3329, fax: 502-429-3336.

NURSES KEEP HEALTHY LEAD AS MOST HONEST, ETHICAL PROFESSION ACCORDING TO GALLUP POLL



For the 16th consecutive year, Americans' ratings of the honesty and ethical standards of 22 occupations finds nurses at the top of the list. More than eight in 10 (82%) Americans describe nurses' ethics as "very high" or "high." Nurses have surpassed all other professions every year but one since Gallup first asked about them in 1999. In 2001, Gallup included firefighters on the list after the 9/11 terrorist attacks, and 90% of the public rated their honesty and ethical standards as "high" or "very high."

Overall, a majority of Americans in the Dec. 4-11 poll rated six professions as "high" or "very high" for honesty and ethical standards. In addition to nurses, that list includes military officers, grade school teachers, medical doctors, police officers and pharmacists. Three of the professions rated highest for honesty and ethical standards are in the healthcare field - nurses, medical doctors and pharmacists - a trend that has been the case in recent years.

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KENTUCKY BOARD OF NURSING CUSTOMER SATISFACTION SURVEY RESULTS

The Kentucky Board of Nursing (KBN or Board) sought licensee feedback about how well the Board was doing in fulfilling the mission of public protection. The questionnaire assessed communication and interaction with the Board through an online survey that ran from March 6 through May 8, 2017.

This mixed-methods survey was conducted using the Qualtrics® platform. Quantitative survey questions included age, preferred method of communication with the Board, preferred method of accessing KBN information, type of device used when accessing the website, frequency of contacting KBN by phone or email and corresponding reason, as well as an assessment of KBN staff, the KBN website, and the KBN Connection. Qualitative survey questions were comprised of free text comments following most quantitative questions, general comments and feedback, as well as a request for respondents to specifically state articles/topics they would like to see in the KBN Connection or on the education portion of the website.

A random sample of 10,000 licensed nurses in the state received the emailed survey link. The emailed survey link was active for two weeks; participants received a reminder email at the midway point. Survey results are summarized.

Quantitative Results

The final survey sample was 9,931 licensees. Of the respondents, 70.38% (n=6898) were between the ages of 41 and 70, and 27.29% (n=2710) were between the ages of 20 and 40. The majority (88.82%, n=9233) of respondents preferred to access KBN information through the website by various means including computer, smartphone, and tablet.

Approximately 88% (n=8809) of respondents preferred to contact the Board by email, while 8.5% (n=844) of respondents preferred telephone. More than 65% (n=6433 via email, n=6628 via phone) of respondents reported that they have never contacted the Board.

For respondents contacting the Board via email, approximately 74% (n=3083) were related to licensure with the remaining related to continuing education (12%, n=511), nursing practice (8%, n=288), and nursing education (6%, n=172).

For respondents contacting the Board via phone, approximately 66% (n=2402) were related to licensure with the remaining related to continuing education (17%, n=628), nursing practice (10%, n=366), and nursing education (7%, n=242).

Please note: Statistics related to “contacting the board” reflect merged responses related to licensure,

and correcting the sample size after accounting for “other” responses.

For raw statistics on reason for contacting the Board, please refer to the corresponding row in Table 1: Descriptive Statistics.

Satisfaction with KBN Staff

Respondents were overwhelmingly satisfied with Board staff. Staff assessed included Reception, Licensure/Credentials, Investigative, Compliance, Legal Services, as well as Education and Practice.

Qualitative Results

Coders reviewed and analyzed over 180 pages of qualitative data including 3500 comments. Coders independently read and reviewed comments several times in order to absorb general content. The coders then had general meeting to discuss and develop preliminary themes. Next, coders completed line-by-line coding including highlighting of significant statements, sentences, and quotes. Finally, coders further refined and formulated meanings from the significant statements, organized comments into clusters of themes with common meanings, and extracted comments for each theme.

Total Respondents	N=9,931	
Respondent Ages		
20-30	n=906	9.12%
31-40	n=1804	18.17%
41-50	n=2391	24.08%
51-60	n=2833	28.53%
61-70	n=1765	17.77%
Over 70	n=232	2.34%
Preferred Method of Communication with KBN	n=8809	88.74%
Email	n=844	8.5%
Telephone	n=4	0.040%
Twitter	n=88	0.89%
Facebook	n=5	0.05%
Snapchat	n=4	0.04%
Instagram	n=173	1.74%
Frequency of accessing KBN website		
Never	n=366	3.7%
1-2 times per year	n=8537	86.26%
1-2 times per month	n=888	8.97%
1-2 times per week	n=92	0.93%
Daily	n=14	0.14%
Frequency of contact with KBN by email		
Never	n=6433	65.13%
First time email	n=849	8.6%
1-2 times per year	n=2553	25.85%
1-2 times per month	n=40	0.4%
1-2 times per week	n=2	0.02%
Daily	n=0	0%