



ASBN

Volume 14 Number 4

# Update

[www.arsbn.org](http://www.arsbn.org)

July 2010



2009  
**Nursing**  
*Compassion*  
AWARD

**CONGRATULATIONS**  
**Angie Durham**  
OF Little River  
Nursing & Rehab



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*The mission of the Arkansas State Board of Nursing is to protect the public and act as their advocate by effectively regulating the practice of nursing.*

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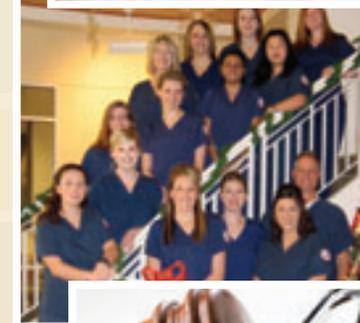
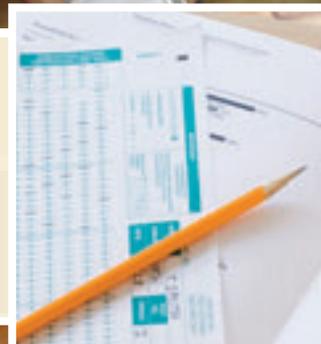
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The ASBN Update's circulation includes over 48,000 licensed nurses and student nurses in Arkansas.





I am honored that the Arkansas Board of Nursing appointed me as its new executive director. But let me tell you, following in the footsteps of Faith Fields is an enormous job. However, I am excited about taking on this new role and look forward to the challenges that I know will come my way. I have been the director of nursing education/ASBN assistant director for nearly eight years now. It is unbelievable how much I have learned about the world of nursing regulation. First and foremost, I learned how important the ASBN mission is to everything we do in our office. The mission of the Arkansas State Board of Nursing is to protect the public and act as their advocate by effectively regulating the practice of nursing. The Board protects the public through: (1) licensure by examination and endorsement; (2) discipline for violations of the Nurse Practice Act; (3) criminal record checks; (4) approval of nursing education programs; (5) continuing education requirements; and (6) renewals. Each time we consider making a change to the Nurse Practice Act or the ASBN Rules, institute a new policy, answer a question posed by a nurse, lecture to a group of nurses, or take disciplinary action against a licensed nurse, we ask ourselves, "Is this action congruent with the mission, the Nurse Practice Act and ASBN Rules?"

Ms. Fields may be leaving the Board, but she has left a legacy that will be long remembered due to the strong leadership and cutting edge vision she demonstrated throughout her tenure. Just a few of the things that have occurred as a result of her leadership are: (1) Arkansas was the second state to pass legislation for the Nurse Licensure Compact; (2) advanced practice nurses were licensed; (3) continuing education became a requirement for licensure renewal; (4) criminal record checks became a part of the initial licensure process; and (5) the licensure exam is now a computer adaptive exam.

Recently, I was asked about my vision for the future of the ASBN, and the question brought to mind one of my favorite storybooks, *Alice in Wonderland*. At one point in the story, Alice approaches the Cheshire Cat and asks him, "Would you tell me, please, which way I ought to go from here?" The cat replied, "That depends a good deal on where you want to get to." Alice said, "I don't much care where..." and the cat answered, "Then it doesn't matter which way you go..."

That approach may work for Alice, but I don't believe that approach will work for the Arkansas State Board of Nursing. The future of our profession is too important not to give serious consideration to the path we take. The Board must meet issues such as health care reform, continued competence, alternatives to discipline and transition into practice head on in order to take regulation in the direction that is best for our profession.

As we make decisions, we must continue to look at what is happening in Arkansas. But more importantly, we must be cognizant of what is happening in the United States and worldwide. My crystal ball tells me there are many changes to the practice of nursing headed our way. I can promise you the ASBN will stay involved and be a part of shaping the future of our profession.

A handwritten signature in black ink that reads "Sue A. Tedford". The signature is written in a cursive, flowing style.





It is my distinct pleasure to introduce you to our new executive director, Sue Tedford. Ms. Tedford was initially appointed as the Arkansas State Board of Nursing's director of nursing education in September of 2002. Prior to taking the position with the ASBN, Ms. Tedford was the level III coordinator at Jefferson School of Nursing in Pine Bluff. She also has clinical experience in surgical and respiratory intensive care, home health, and in long-term care. Ms. Tedford has held advanced practice licensure and practiced as a self-employed biofeedback specialist, teaching biofeedback techniques to patients with a variety of disorders. She holds a bachelor's degree in nursing from the University of Central Arkansas and a master's of nursing science degree with a focus as a medical surgical clinical nurse specialist from the University of Arkansas for Medical Sciences.

Since appointed to the ASBN education director position, Ms. Tedford has been in charge of licensing, approval of nursing education programs, licensing and certification examinations, criminal background checks, medication assistants, advanced practice and continuing education. During her tenure with the Board, she discovered our board of nursing had never taken the opportunity to perform a review of NCLEX®, so she instituted a regular cycle of review of the examination within our state to determine if the exam is entry level and appropriate in light of the provisions of our *Nurse Practice Act*. This helped educate Board members and staff in the NCLEX process and to have a better understanding and respect for the licensure examination. Ms. Tedford lectures throughout the state in regional workshops, teaching students in schools of nursing what to expect when they take the NCLEX.

Ms Tedford has served on several committees of the National Council of State Boards of Nursing (NCSBN). She was appointed by the NCSBN Board of Directors as chair of the Continued Competence Committee. In this capacity, Ms. Tedford led the diverse members from all over the country on a groundbreaking and complex journey through the research, analysis, and application of the information needed to bring the NCSBN to the forefront in providing a model for assuring continued competence among nurses in the United States.

She serves on the Nursys Committee within the NCSBN. As a member of this Committee, she works with our state board to ensure licensure and discipline data integrity. Ms. Tedford initiated educational sessions for ASBN staff regarding a new functionality provided to member boards called FITS. FITS is the fraud identification tracking system available to all boards of nursing. She worked to implement a FITS search for applicants and disciplinary cases as part of the state's procedures.

Ms. Tedford was instrumental in implementing a statewide process to begin online criminal records checks as a prerequisite for licensure when the infrastructure came into place to support the background checks. She then used her knowledge to teach other boards of nursing how to implement background checks and has become the resident expert in the field of nursing regulation.

Since 2004, she has served on the NCSBN Editorial Advisory Pool, evaluating online educational opportunities provided by the NCSBN. Ms. Tedford will be recognized this August at the Annual Meeting of the NCSBN with its Exceptional Contribution Award.

Her participation and contributions to the state and nation have prepared her to lead the Arkansas State Board of Nursing into the future. Please join me in welcoming Sue and congratulating her on all her successes.

# Board Business

**President Darlene Byrd presided over the disciplinary hearings held on April 15 and May 13, the strategic planning session held on April 14 and the business meeting held on May 12. Highlights of Board actions are as follows:**

- Authorized the ASBN to sponsor a continuing education program annually for nurse educators. The topics to be considered are: (1) issues that cross all program types such as quality and safety, (2) academic progression, (3) high-stakes testing and simulation, etc. The initial program will begin during the 2010-2011 academic year.
- Approved a request by ARNEC to add two new programs, one at Rich Mountain Community College in Mena and the other at University of Arkansas Community College in Hope, and approved a request that the current programs be allowed to increase the number of admissions.
- Granted Continued Full Approval to the University of Arkansas Little Rock Associate of Science in Nursing Program until the year 2015.
- Requested the ASBN Practice Committee to obtain additional information on the administration of glucagon to school children by unlicensed personnel.
- Directed the ASBN staff to conduct a comprehensive review and survey of the University of Arkansas at Pine Bluff nursing program to be presented to the ASBN at the July Board meeting.

## DID YOU KNOW?

That U.S. boards of nursing regulate more than 3 million licensed nurses.

## BOARD DATES



July 14	Hearings
July 15	Hearings
August 11-13	National Council of State Boards of Nursing Annual Meeting, Portland, OR
September 8	Hearings
September 9	Business Meeting
*October 13	Hearings
*October 14	Hearings
October 20	CE Workshop – Staying On Top Of Nursing Practice In 2010, Baxter Regional Medical Center, Mountain Home
November 3	Hearings
November 4	Hearings
November 10	CE Workshop – Staying On Top Of Nursing Practice In 2010, Baptist Health School of Nursing, Little Rock

*All events will be held at the ASBN Boardroom unless noted otherwise.*

*\*Will decide by September if dates are needed*

# STAFF DIRECTORY

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Executive Assistant to the Director  
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Susan Moore  
Licensing Coordinator

Amanda Newton  
Licensing Coordinator

Mary Stinson  
Licensing Coordinator

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Matt Stevens  
Information Systems Coordinator



## SPECIAL NOTICE

The Arkansas State Board of Nursing has designated this magazine as an official method to notify nurses residing in the state and licensed by the Board about information and legal developments. Please read this magazine and keep it for future reference as this magazine may be used in hearings as proof of notification of the ASBN Update's contents. Please contact LouAnn Walker at the Board office (501.686.2701) if you have questions about any of the articles in this magazine.

## ASBN NOTICE OF INSUFFICIENT FUNDS

The following names appear on the ASBN records for checks returned to the ASBN due to insufficient funds. If practicing in Arkansas, they may be in violation of the Nurse Practice Act and could be subject to disciplinary action by the Board. Please contact Gail Bengal at 501.686.2716 if any are employed in your facility.

Rosa Marie Bradley	L16658
Jessica Gonzalez	Exam Application
Tonya Humphrey	R55602
Victoria Knighten	R81020
Toni Diane McKeever	R42190
Amber Sanders	R73529
Nathan Shaheed	T01220
Angela Shupert	L37543
June Elizabeth Sivils	L30290
Della Williams	L28175
Sally F. Williams	L26287



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Standing, L to R: Doris Scroggin, RN; Clevesta Flannigan, LPN; Cassandra Harvey, RN; Peggy Baggenstoss, LPN; Sandra Priebe, RN; Karen Holcomb, RN; Roger Huff, LPN Not pictured: Cathleen Shultz, RN; Richard Spivey, LPN



# 2009 Nursing Compassion AWARD



Photos by Jayne L. Eden

## Angie Durham. 2009 Nursing Compassion Award Winner.

Angie Durham, RN, is the Director of Nursing at Little River Nursing & Rehab in Ashdown, AR. She truly inspires, encourages and cares. A young man had tragedy in his life due to a gunshot wound to the head. He lost the use of his right side including vision and body control, able to ambulate, and speak. He had a young wife at home along with 9 and 12-year old daughters. His life had been changed forever. He was admitted to our long term care facility. He was in deep depression. Angie made him her mission in life. First he spoke only broken English; Angie went to the local college and enrolled in a Spanish class so she could communicate with him. Next she had PT, OT, and ST work daily with him on ambulation, body control, and language development. Angie had a social worker visit him and his family daily to meet their emotional needs. Angie knew the hardship they were going through. Last, Angie provided transportation for him for fishing trips, sports events, and rodeos. Angie knew he needed to re-learn how to interact in a social setting. The most important thing Angie did was inspire him to live and not give up. She daily pushed him to walk another step, speak one more sentence, and be proud of himself. Angie gave him his life back. Without her, he would be a disabled man with no hope. They are now great friends and have many happy moments together.

On May 7th at the "Celebrate Nursing" event at Dickey-Stephens Park, a warm, beautiful spring evening, Angie Durham was presented the 2009 Nursing Compassion Award. Angie was chosen as Arkansas' most compassionate nurse from a very competitive field of deserving nominees from across the state.

The award was presented by Faith Fields, Executive Director of the Arkansas State Board of Nursing and Virginia Robertson, Publisher of the ASBN Update. The annual Compassion Award was instituted by Publishing Concepts, Inc./ThinkNurse.com and is

co-sponsored by Arkansas Farm Bureau. The award is designed to allow patients and family members to show their gratitude and appreciation for the special care given them, or their loved ones, by Arkansas nurses. Their short essays and submissions are reviewed and finalists are selected from every county in the state. Angie was chosen from that group of finalists as the winner.

In addition to the display trophy and other items, Angie received an expenses-paid weekend getaway for two at the Capitol Hotel in Little Rock.

Angie is a 1976 graduate of Ashdown



High School. Her nursing career actually began at 15 years of age when she served as a Candystriper at the very same facility where she now works as the Director of Nursing, some thirty odd years later. Her decision to act on her affection for the profession was spurred by her brother's tragic motorcycle accident in 1986. He sustained debilitating, life-altering head injuries in that accident. The lengthy, heart-rending search for a long term care facility for her brother spurred her to enter the profession to try and make a difference in people's lives and care. Her brother is now 44 years old and in a facility for young adults who are not ready for a nursing home residence.

Angie earned her Licensed Vocational Nursing degree at the Texarkana School of Nursing in 1994. She returned to school to obtain her Associate Degree in Science of Nursing and registered in the state of Texas in 1999, while raising two sons as a single parent.

Angie is compact licensed in multiple



of Nursing Administration for Long-Term Care, she is also a member of the Arkansas Nursing Home Nurses' Association.

Her 16 years of nursing have included positions in both clinical and long term care settings.

She was named Director of Nursing for Little River Nursing and Rehab in January of 2007. Since that time she has implemented numerous quality initiatives, helping the facility to earn a 5-Star Rating from the Medicare Compare Program.

Under Angie's leadership, the facility has been awarded both the 2008 and 2009 Innovator Award from the Arkansas Healthcare Association. Angie was selected to participate in the 2009 AHCA Spring Convention mock trial in Hot Springs, Arkansas.

Angie and her husband, John "Bull" Durham are lifelong residents of Ashdown, and avidly support all

community efforts to make Little River County an even better place to live. Their blended family consists of her two sons and John's three daughters. Six grandchildren give Angie the chance to play the role of "Granny" and she loves every minute of it.

Back at work, team members refer to Angie as their "cheerleader" due to her therapeutic approach to disciplinary actions and getting everyone involved in providing the best possible "quality" of life for their residents. The residents also respond to her attention to that goal.

Many of them refer to her as "Angel." Everyone enjoys her sense of humor when she portrays Dolly Parton at all of the facility and community talent shows. Compassion, skills, talent and a sense of humor!

*Congratulations Angie Durham-- 2009 Nursing Compassion Award Winner!*



states and is certified in T.I.L.E.S. for the state of Texas.

A 2008 graduate of the Arkansas Health Care Foundation's Director

## Runner up



**Cindy Jackson**

Cindy Jackson began teaching for Henderson State University Department of Nursing in 1985 when she completed her Master of Science in Nursing degree at the University of Central Arkansas.

From 1995 to 2002 she worked part time (intermittently) for HSU while she served as the Director of Nursing for Baptist Health Medical Center - Arkadelphia. The original concept for the Clark County Charitable

Health Service probably began as early as 1995 while Cindy was still teaching full-time for HSU. There was an incubation period and slow progress while Cindy served in the capacity of DON at Baptist Health, and then she resumed work on the concept/project with students when she returned to full-time instructional faculty at Henderson State University.

Cindy's career has been a

tripod of obstetrical nursing, nursing administration, and nursing education. She served in leadership positions in the above areas (Mother/Baby Unit Manager, Assistant DON, DON, Interim Chair of the HSU Nursing Department) as well as in related professional organizations (AONE Board Member, Vice-president of ARNA District #12, Arkansas Perinatal Association Regional Conference Coordinator).



**Andrea Fletcher**

Many comments were made on behalf of Andrea Fletcher RN. This is just one of those from over 20 messages we received supporting her outstanding nursing care.

Our nurse, Andrea, has been the best nurse we have ever had. I wish I could put into words the tender care, compassion, and help she has been to

us. From the moment I met Andrea, I sensed she was just as concerned about our loved one as we were. Andrea has been very attentive to pain levels, as well as working tirelessly to make sure the nausea and vomiting were under control. She has not only taken care of our loved one but the family as well. Every time she is in the room, when

she finishes, she always looks to the family and asks, "Are you OK? Is there anything I can do for you?" Andrea has never made us feel that we were a burden when we called needing medicines or help. She is always so caring and helpful. I hope you will commend Andrea for her compassionate care. We are so thankful for her.

# Recruiting for NCLEX® Examination Item Development Panel



The National Council of State Boards of Nursing depends on practicing nurses to assist in the National Council License Exam (NCLEX®) item development process. Panel members travel to Chicago (all expenses paid) to write or review test items for the NCLEX. On-site training is provided. NCLEX panel members not only have the opportunity to earn contact hours, but also to network with nursing colleagues on a national level.

❑ To be qualified for acceptance, an applicant must be a licensed nurse in the jurisdiction where she/he practices. Specific requirements for the volunteer panels also include:

❑ To write for the NCLEX-PN®

exam, an item writer must be an RN or LPN/VN. To write for the NCLEX-RN® exam, an item writer must be an RN with a master's degree or higher. Both exams require item writers to be responsible for teaching basic/undergraduate students in the clinical area.

An item reviewer must be currently employed in a clinical setting and work directly with nurses who have entered practice within the last 12 months.

Panels are held throughout the year. Volunteering is a chance to contribute to the continued excellence of the nursing profession. Visit [www.ncsbn.org/1227.htm](http://www.ncsbn.org/1227.htm) to apply online.

*-National Council of State Boards of Nursing*



**Company or Sponsor**  
(this is not the name of the "Approved Provider")

ABC Company  
123 Right Way  
Anytown, USA 12345

**Certificate of Completion**

Attendee Name  
Ima Goodnurse

License Number  
R00000

has successfully completed  
**(NAME OF EDUCATIONAL ACTIVITY)**

for Continuing Education credit in nursing in the amount of 15 Contact Hours

Date of Issuance: 1/1/15

Practice focused course of study

Must be less than two (2) years old at time of renewal or reinstatement

A statement similar to this must appear on **every** certificate identifying the Accrediting Organization/Approved Provider which must be one found on the ASBN list.

ABC Company has been approved as a provider of continuing education in nursing by the (name of accrediting organization/approved provider). This certificate must be retained by the licensee for a period of four (4) years from the date of course completion. Do not send it to the Board of Nursing.

Signature & Title

## WILL THIS CONTINUING EDUCATION ACTIVITY COUNT FOR LICENSE RENEWAL?

We receive numerous phone calls and e-mails from nurses asking, "Will this continuing education activity count toward my requirement for license renewal?" If you are meeting the requirement by contact hour activities, we have designed this example of a certificate of completion that demonstrates compliance with the law.

### CONTACT HOUR OPTION

**Number of contact hours:** This information must be listed on the certificate.

Fifteen (15) practice-focused contact hours are required for on-time renewals.

For a late renewal/reinstatement, you must complete twenty (20) contact hours.

**Date:** The completion date must be listed on the certificate. The activity(s) must be completed and dated no more than two years prior to renewal/reinstatement.

**Title:** Include the full title of the educational activity.

**Course:** Must be practice-focused education specific to your job duties. For nurses not currently practicing, course of study may be selected from a variety of nursing topics.

**Name of Accrediting Organization/Approved Provider Statement:** This information should be the accrediting organization and not the company or sponsor of the activity. The name of the accrediting organization must be included on every certificate. There will be a statement similar to: "This activity has been approved for nursing continuing education by (this is where the accrediting organization is found) ..." The most common accrediting organization of nursing continuing education is the American Nurses Credentialing Center's

Commission on Accreditation (ANCC), but there are many others that are acceptable. The accrediting organization must be one of the organizations found on the "ASBN Approved Accrediting Organizations/Approved Providers" list. The list can be found on the ASBN Web site, [www.arsbn.org](http://www.arsbn.org), through the Education tab – Continuing Education.

Rules governing continuing education require that you maintain original copies of certificates of completed contact hour activities for a minimum of four years. If you complete activities via the Internet, upon each course of study, print a copy of the certificate when prompted for your records. A number of nurses, at times, have found it impossible to retrieve copies of the certificates at a later date. Keeping a "list" of courses completed via the Internet and/or if your employer keeps a file is permitted, although it is also your responsibility to maintain the original copies of certificates for each course of study or workshop attended. If you are selected for a random audit, you will receive notification by mail asking that you demonstrate compliance by submitting copies of your documents for review by the ASBN. Submitting a list does not demonstrate compliance and will result in the issuance of a second request for appropriate documentation. Avoid future problems by following the guidelines outlined in the ASBN Rules.

If in doubt whether a certificate will count toward your requirement for license renewal, compare it to the example and assess whether it contains all the necessary information. If it does, then there's your answer!

## HIPAA AND BOARDS OF NURSING

The health information privacy and security regulations promulgated by the Department of Health and Human Services pursuant to the administrative simplification provisions of the Health Insurance Portability and Accountability Act of 1996 ("HIPAA" or the "Privacy Rule") governs the use and disclosure of "protected health information" ("PHI") by "covered entities." Uses and disclosures of information that is not protected health information, or uses and disclosures of protected health information by entities other than covered entities, are not subject to the Privacy Rule.

"Covered entities" include healthcare providers that conduct standard transactions electronically, health plans, and healthcare clearinghouses. While a board of nursing typically will not fall into any of these categories, the health care providers from which it receives information in the course of carrying out its activities typically are covered entities.

"Protected health information" is "health information" that is "individually identifiable" and is "created or received" by a covered entity. "Health information" includes any oral or recorded information relating to the past, present or future physical or mental health of an individual; the provision of healthcare to the individual; or the payment for healthcare. Health information is "individually identifiable" if it identifies or reasonably can be used to identify the individual. Health information that meets one of the three criteria described above is considered to be PHI covered by the Privacy Rule regardless of the media or form in which it is maintained or transmitted. Thus, any and all oral, written and electronic information created or received by a covered entity which is related to a patient's health condition and identifies the patient will be protected health information.

De-identified information, however, can be used so long as the information cannot be used to identify the individual and "with respect to which there is no reasonable basis to believe that the information can be used to identify an individual."

Among the uses and disclosures of PHI that are permitted under the Privacy Rule, there are two which, if the applicable criteria are met, permit disclosures of PHI to state boards of nursing: disclosures to "health oversight agencies" for oversight activities authorized by law, and disclosures to law enforcement officials for law enforcement purposes.

### *Disclosures to Health Oversight Agencies*

A "health oversight agency" is a governmental or quasi-governmental agency that is "authorized by law to oversee the health care system (whether public or private) or government programs in which health information is necessary to determine eligibility or compliance, or to enforce civil rights laws for which health information is relevant." Neither consent nor authorization is required when disclosing PHI to a health oversight agency:

"for oversight activities authorized by law, including audits; civil, administrative, or criminal investigations; inspections; licensure or disciplinary actions; civil, administrative, or criminal proceedings or actions; or other activities necessary for appropriate oversight of: (i) The health care system; (iii) Entities subject to government regulatory programs for which health information is necessary for determining compliance with program standards."

### *However,*

"a health oversight activity does not include an investigation or other activity in which the individual is the subject of the investigation or activity and such investigation or other activity does not arise out of and is not directly related to: (i) The receipt of health care; (ii) A claim for public benefits related to health; or

(iii) Qualification for, or receipt of, public benefits or services when a patient's health is integral to the claim for public benefits or services."

### *Disclosures for Law Enforcement Purposes*

Neither consent nor authorization is required when a covered entity discloses PHI to a law enforcement official for law enforcement purposes, including an administrative request, if the information is relevant and material, the request is specific and limited in scope, and information that is not individually identifiable cannot be used instead.

The Privacy Rule defines a law enforcement official as one who can lawfully "investigate or conduct an official inquiry into a potential violation of law, or prosecute or otherwise conduct a criminal, civil, or administrative proceeding arising from an alleged violation of law."

### *The Minimum Necessary Standard and "Incidental" Disclosures of PHI*

Most uses and disclosures of PHI permitted without a patient's authorization, other than uses and disclosures for the purposes of treatment, must be limited to only that which is necessary to accomplish the purpose of the permitted use or disclosure. The "minimum necessary" standard applies to minimum necessary means that the information disclosed is only as much as is necessary to achieve the purpose of the disclosure.

The Privacy Rule takes into account that the possibility of incidental disclosure of protected health information exists. "A use or disclosure of this information that occurs as a result of, or as 'incident to,' an otherwise permitted use or disclosure is permitted as long as the covered entity has adopted reasonable safeguards as required by the Privacy Rule, and the information being shared was limited to the 'minimum necessary,' as required by the Privacy Rule."

### ***Compliance with State Law***

Normally, the Privacy Rule will supersede state law; although, this is not the case when state law is more stringent and provides greater privacy protection than the federal rule. If state law falls within this exception, a covered entity may have to follow additional standards when providing information to a board of nursing.

A number of state boards of nursing provide guidance for their members on HIPAA-related issues. The Kentucky Board of Nursing, for example, has advised its members that under state law it functions as both a health oversight agency and a law enforcement agency within the definitions of the Privacy Rule, and, therefore, is not subject to the patient authorization requirements of the Privacy Rule. Similarly, the Montana Board of Nursing has advised its members that “[b]oth Montana law and HIPAA authorize the Board to receive patient information for purposes of investigating complaints of professional misconduct—the Board is required to keep that information confidential.”

### ***Uses and Disclosures of PHI in Context***

As discussed above, boards of nursing will have occasion to request, use and disclose PHI in a number of different contexts, subject to varying standards and requirements. The following are some of the more common instances in which boards of nursing use and disclose PHI.

**Investigations.** One of the core functions of boards of nursing is to investigate allegations of misconduct. Such investigations often will require board staff to review the medical records of individual patients, or multiple patients if a pattern of misconduct or substandard care is alleged. A covered entity that employs the nurse under investigation may disclose requested information to a board of nursing as a health oversight activity. Such disclosures would also be permitted as disclosures required by law, if the board is authorized by law to compel such disclosures.

If the covered entity is not required by law to furnish the requested PHI as

part of a board of nursing investigation, it can only make the disclosure as part of a health oversight activity. In that event, the covered entity must limit the PHI disclosed to the minimum necessary to accomplish the purpose of the disclosure. If the disclosure is required by law, the disclosure must be limited to only that PHI is required to be disclosed.

There is one important caveat to the health oversight disclosure standards. A covered entity may not disclose the PHI as part of a health oversight activity if the PHI requested is for the subject of the investigation. For example, a hospital that employs a nurse could not disclose the nurse’s own medical record to the board as a health oversight activity. This means, for instance, that a hospital could not voluntarily provide, under the health oversight activity exception, a nurse’s drug test to a board of nursing investigating allegations of substance abuse. However, a board of nursing could subpoena such records and the hospital could produce the results without violating HIPAA because it

would be required to do so by law.

**Disciplinary Hearings.** Another core function of boards of nursing is conducting disciplinary hearings. In many cases, relevant evidence will consist of patient medical records and other PHI from covered entities. If the board has the authority to subpoena medical records for this purpose, the covered entity may furnish the requested information (and only the requested information) for this purpose. In some cases, the covered entity will be required to first obtain a court order requiring the board to protect the confidentiality of the requested records to the extent possible, and limit the use of the PHI to the purposes of the hearing and any subsequent appeals.

**Judicial Proceedings.** Where a disciplinary hearing results in an adverse decision, the nurse will in most instances have a right to appeal the decision in state court. PHI will often be used by boards in responding to such appeals, subject to any applicable protective orders.

# The Arkansas Graduate Nursing Student Loan/Scholarship Program Provides Funding for Graduate Nursing Students



Since 1995, the Arkansas Graduate Nursing Student Loan/Scholarship Program has provided loans that can be converted to scholarships to over 500 graduate nursing students in Arkansas. Beginning fall 2010, for the first time in the history of the program, part-time graduate nursing students are now eligible to apply for the practice loan.

Eligibility is extending to graduate nursing students at UAMS, ASU, U of A, and UCA who are taking the required amount of credit or contact hours. As long as the student complies with the payback terms of the loan, the loans will be converted to scholarships after the student graduates and has fulfilled the service agreement. The payback terms vary depending on if the student takes out a practice loan or an educator loan. For practice loans, the service agreement is practicing as an APN in Arkansas one year for each year of funding received, working as a nurse administrator in any complex Arkansas health care agency, or as a CRNA in Arkansas. For educator loans, the service agreement is teaching full-time in any nursing program in Arkansas one year for each year of funding received.

- Master's practice recipients can enroll full-time (nine or more credit hours/semester or 18 contact hours/week) to receive up to \$4,000.00 per semester in funding, or part-time (six to eight credit hours/semester) to receive up to \$2,000.00 a semester in funding, both for a program maximum of

\$16,000.00.

- Master's nurse educator recipients can enroll full-time (nine or more credit hours/semester) to receive up to \$4,000.00 per semester in funding, or part-time (six to eight credit hours/semester) to receive up to \$2,000.00 a semester in funding, both for a program maximum of \$16,000.00.
- Doctoral nursing students can receive up to \$8,000.00 per semester in funding if enrolling full-time (nine or more credit hours/semester), or up to \$4,000.00 per semester if enrolling part-time (six to eight credit hours/semester), for a program maximum of \$50,000.00.

Actual funding awards vary by student and are contingent on several factors including the number of applications received and the financial situation of each student. The amount awarded is

determined by the Arkansas Graduate Nursing Student Loan/Scholarship Program Board. The program fact sheet is located at <http://nursing.uams.edu/fin-aid/default.asp>, and applications are available online at <http://nursing.uams.edu/fin-aid/applications.asp>. The deadline to apply for the spring 2011 semester is Oct. 1, 2010, and applications will be available on Aug. 1, 2010. The funding must be reapplied for annually. The deadline for the 2011-2012 academic year will be July 15, 2011, and applications will be available on Jan. 15, 2011.

For more information, contact Kimberly J. Morton, director of academic administration and informatics, University of Arkansas for Medical Sciences College of Nursing, by e-mail ([kjmorton@uams.edu](mailto:kjmorton@uams.edu)) or telephone: 501.526.6498.



# CHANGE INVOLVING CONTROLLED SUBSTANCES ACT AND THE DRUG ENFORCEMENT ADMINISTRATION

Advanced practice nurses with prescriptive authority and a DEA number for controlled substances need to be aware of a change this spring involving the Controlled Substances Act (CSA) and the Drug Enforcement Administration (DEA). The DEA adopted a stricter interpretation of the CSA in relation to long-term care facilities. In the past, the DEA allowed nurses at the facilities to be the agents of the qualified providers. But now, a strict reading of the CSA by the DEA has made prescribing narcotics for a nursing home resident a potentially punishable event. The strict interpretation of the law by the DEA is to prevent drug diversion and abuse by anyone who is involved in the distribution or dispensing of narcotics.

In accordance with 21 Code of Federal Regulations 1306.11 and 1306.21, a controlled substance can only be dispensed pursuant to either:

- 1) A valid, written and signed prescription by a practitioner;
- 2) A fax of a written, signed prescription transmitted by the practitioner or the practitioner's agent to the pharmacy;
- 3) An oral prescription for a Schedule III-VI controlled substance made by an individual practitioner and promptly reduced to writing by the pharmacist; or
- 4) When in an emergency situation, the pharmacist receives oral authorization for a Schedule II controlled substance directly from the individual prescribing practitioner and immediately reduces the oral prescription to writing.

Also, as of March 1, 2010, medication removed from the emergency narcotic box must first have a prescription from the physician. Once the prescription is received by the pharmacy, an authorization code will be given to the facility to authorize removal of the controlled substance.

### **I WAS WONDERING...**

I thought I would share some of the recent questions that have come across my desk. If you have a question you would like answered, e-mail it to me at [mtrentham@arsbn.org](mailto:mtrentham@arsbn.org), and the answer will be posted in this section.

### **I have been told that I need a DEA number for each practice site. Is this correct?**

Rick Boyd, chief, registration and program support, Office of Diversion

Control, clarified the federal regulation regarding multiple locations. "The CSA requires that a separate registration be obtained for each principal place of business or professional practice where controlled substances are manufactured, distributed, or dispensed (21 U.S.C. 822(e)). DEA has historically provided an exception that a practitioner who is registered at one location, but also practices at other locations, is not required to register separately for any other location at which controlled substances are only prescribed (21 CFR 1301.12(b)(3)) as long as it is in the same state. If the practitioner maintains supplies of controlled substances, administers, or directly dispenses controlled substances at the separate location, the practitioner must register for that location. The exception applies only to a secondary location within the same state in which the practitioner maintains his/her registration. DEA individual practitioner registrations are based on state authority to practice medicine and prescribe controlled substances. Since a DEA registration is based on a state license, it cannot authorize controlled substance dispensing outside that state. Hence, the separate registration exception applies only to locations within the same state



in which practitioners have their DEA registrations."

### **I am an advanced practice nurse (APN), and I have heard that I need pharmacology continuing education hours to renew my license. How many hours do I need?**

Effective Jan. 1, 2010, APNs with prescriptive authority shall complete five contact hours of pharmacotherapeutics continuing education in the APN's area of certification each biennium prior to license renewal.

For reinstatement of prescriptive authority effective Jan. 1, 2010, APNs whose prescriptive authority is inactive shall complete five contact hours of pharmacotherapeutics continuing education in the APN's area of certification for each 12 months of non-prescribing activity in addition to the five contact hours required for APN license renewal prior to reactivation of prescriptive authority.

## UA Fort Smith Graduates First BSN Class



1. Greg Deen Fort Smith, AR
2. Michelle Peters Mulberry, AR
3. April Whittington Greenwood, AR
4. Kortney Harmon Benton, AR
5. Jaime Eubanks Fort Smith, AR
6. Kristy Roman Siloam Springs, AR
7. Shannon Bass Fort Smith, AR
8. Whitney Webb Fort Smith, AR
9. Sarah Smith Fort Smith, AR
10. Puja Padhiar Fort Smith, AR
11. Amber Schneider Subiaco, AR
12. Bao Vang Fort Smith, AR
13. Ashley Oglesby Fort Smith, AR
14. Ashley Howell Fort Smith, AR

Walking across the platform for May commencement exercises at the University of Arkansas - Fort Smith were 14 students who had a special reason to be proud - they were the first graduates of the university's traditional Bachelor of Science in nursing program.

Dr. Carolyn Mosley, dean of the College of Health Sciences, said the BSN program makes it possible for students in the Western Arkansas area to realize the goal of earning a bachelor's degree in nursing.

"Having this BSN degree in Fort Smith is a plus for our entire region, since the BSN degree is a foundation for nurses to pursue advanced degrees to become practitioners or educators," said Mosley, who came to UA Fort Smith in 2006 and became dean in 2007. "Each of the 14 students has worked very hard throughout the program, and they've all been well received in the community. Residents of this region will be fortunate to have such talented and dedicated nurses caring for them."

UA Fort Smith received national recognition this spring when one of the BSN students had the distinction of being selected as one of five finalists in the inaugural "Nursing Student of the Year" award program sponsored by a national nursing publication. Whitney Webb of Fort Smith competed with students from all levels of nursing programs, even doctoral ones, to emerge as one of the top five in the country profiled in *StuNurse.com*, which is a member of the Publishing Concepts Inc. family of targeted nursing magazines.

Part of the end-of-year awards ceremony for the BSN students included recognition of Dr. Brenda Mitchell, associate provost for academic affairs and former dean of the College of Health Sciences. She was credited for her efforts in getting the BSN program approved by the Higher Learning Commission and the Arkansas State Board of Nursing.

BSN Executive Director Dr. Barbara Baker and the BSN faculty are proud of this first class.

"They have persevered without the input sometimes given from alumni in programs like this, since there were none," Baker said. "These students, however, have been role models to those following them and have developed projects to assist future BSN students as they go through the program."

Jamie Flower, a member of the BSN faculty at UA Fort Smith, said the students in the first BSN class had a positive impact on instructors as well.

"They pushed faculty to provide better learning opportunities and to evaluate effectiveness in a collaborative manner with students," said Flower.

UA Fort Smith's BSN program was approved in fall 2005 by the Arkansas Higher Education Coordinating Board, and the program began the next academic year. UA Fort Smith also offers a two-year associate degree program in nursing and the RN-to-BSN completion program, as well as a practical nursing certificate program.

# Quality Improvement: Whose Job Is It?

As nurses, we have all filled out forms that ask for our area of practice. They list med-surg, OB/gyn, cardiac, surgery, and many others, and instruct us to choose the one that is most applicable. The area name that has always given me pause is “quality.” Does choosing one of the other areas mean I don’t practice quality?



Quality improvement has historically been treated as a separate function in health care, but this is changing. A national focus on health care reform and patient safety makes all of us more aware of our role in and accountability for providing patient-centered, quality health care. An organization’s quality improvement professional may be the one who facilitates the improvement process, but the front-line staff and those most involved in the processes of care are key to creating systems that allow for the best outcomes.

## Steps of Improvement

How does one approach improving processes? There are many models of the steps in quality improvement, but they are all similar. If you are a nurse, you have been exposed to those steps while learning about the scientific method, the nursing process or other topics. We gather information; we analyze it; we draw conclusions; we implement interventions, and we review or study the results.

The Plan-Do-Study-Act (PDSA) method is common in the health care

community. As health care providers, we often identify opportunities where systems do not work or need improvement. Quality improvement begins here. It may be a situation where there is a threat to patient safety, redundancy in the work performed, gaps in achieving expected positive outcomes or waste of resources. An individual perspective is not enough. A team of individuals who are connected to the process is the best way to gather information and data, and confirm that there is an opportunity for improvement. This team begins with the Plan phase of improvement. Their role is to identify the gaps, the changes they believe will make an improvement, and the best way to implement those changes.

They then move on to the Do phase. It is really important to make changes in a small way first so that you can determine whether they elicit the results you expect. There are many examples of an organization rolling out a form, a policy, etc. that was not tested first. Making changes first on a small scale

minimizes the number of people affected if the changes do not have a positive result. It also allows for adaptations to improve the results before going large scale. Testing changes can increase organizational buy-in and validate for others in the organization that the changes are needed.

The third phase, Study, actually begins during the Do implementation phase. In this phase, the team examines the results of the small-scale implementation and determines if the desired outcomes were achieved. This may be done through gathering quantitative and/or qualitative data related to the implementation. This phase sets the direction of the final stage.

The Act phase is where decisions are made to complete the improvement. After studying the implementation, the team has three basic directions from which to choose. The team may decide the change achieved exactly what was desired and the “new” process should be adopted. This is where larger-scale implementation occurs. The team may decide the change almost achieved what was desired and the “new” process should be adapted. If the process is adapted, it should be tested once again on a small scale and the PDSA steps repeated. The team may decide the change did not achieve the desired outcome and the “new” process should be abandoned. If this occurs, the team again uses the PDSA process to decide what to do next.

Nurses in any setting and in any area of practice are an integral part of the quality improvement process. As health care continues to become more patient-centered, quality and safety evolve from a separate function to an embedded part of our day-to-day job performance.

# HAVE YOU CONSIDERED SERVING ON THE STATE BOARD OF NURSING?

The Arkansas State Board of Nursing is a 13-member board appointed by the governor for four-year terms with the following designations: seven registered nurses, one of which is advanced practice with prescriptive authority; four licensed practical nurses or licensed psychiatric technician nurses; one consumer member; and one representative of the older population (age 60 or over). Board members can serve a total of two four-year terms.

Qualifications to be a nurse Board member are that you have to have been a nurse for five years and have actively practiced for the last three years, the last two of which must be in Arkansas.

Service on the Board requires a time commitment of two days a month for about nine

months out of the year.

Board members whose term expires on Oct. 1, 2010, are the advanced practice nurse with prescriptive authority and one of the licensed practical nurses or licensed psychiatric technician nurses.

If you are interested in serving on the Board, you can apply through the governor's website, [www.governor.arkansas.gov](http://www.governor.arkansas.gov). On the left side under Services, choose the link for Board Appointments. You will then fill out an online application. It is helpful to have letters of support from your legislators and your professional colleagues. If considered, a thorough background investigation is conducted. If selected, you will receive an appointment letter from the governor.

## Nurses – Save the Date

### July

- Independence Day: July 4
- Mental Illness Awareness Month

### August

- National Immunization Awareness Month
- Spinal Muscular Atrophy Awareness Month

### September

- National Cholesterol Education Month
- Prostate Cancer Awareness Wk: 19-25

### October

• Join the largest team of nurses to Race for the Cure.

October 16 2010

- Breast Health Awareness Month
- Oct 22-23 ARNA Convention, Doubletree Hotel/Statehouse Convention Center, Little Rock

nurses  
for the  
GIRLS

### November

- National Hospice Month
- American Diabetes Month
- Great American Smokeout: 18th

### December

- 8th Annual Nursing Expo: Dec. 4th Clear Channel Metroplex, 9a-3p



# POSITION STATEMENT 00-2

## TELENURSING

Telenursing is defined as the practice of nursing using protocols through telecommunication technology. The Arkansas State Board of Nursing has determined that an active license to practice nursing in Arkansas is required to practice telenursing in this state. The ASBN "Position Statement 98-6 Decision Making Model" shall be followed to determine if a particular act of telenursing is within the scope of practice of the nurse, with emphasis on completion of special education, possession of appropriate knowledge, and documented evidence of competency and skill in the nurse's personnel file.

Health care professionals have been using various forms of telehealth for many years, and according to the *American Nurses Association Core Principles of Telehealth (1999)*, the basic standards of professional practice are not altered by the use of telehealth technologies in the provision of health care. It is further stated that, "A health care practitioner cannot use telehealth as a vehicle for providing services that are not otherwise legally or professionally authorized."

The practice of professional nursing (registered nursing) in the *Arkansas State Board of Nursing Nurse Practice Act ACA §17-87-102(6)* means the performance of acts which require substantial specialized judgment and skill based on knowledge and application of the principles of biological, physical, and social sciences. Assessment is within the practice parameters of the RN in the ASBN "Position Statement 95-1 Scopes of Practice."

In ACA §17-87-102(5) and (7), the practices of licensed practical nursing and licensed psychiatric technician nursing means the performance of acts under the direction of a registered professional nurse, an advanced practice nurse, a licensed physician, or a licensed dentist, those acts which "...do not require the substantial specialized skill, judgment, and knowledge required in professional nursing." Observation is within the practice parameters of the LPN/LPTN in the ASBN "Position Statement 95-1 Scopes of Practice."

The ASBN has determined that nurses licensed to practice in Arkansas may practice telenursing under

the following circumstances:

1. There shall be an established relationship with the client and a record to document data collected and all care provided or recommended.
2. There shall be protocols that outline the care to be given. These protocols shall be reviewed annually by the licensed physician and nurse and be made available to the Board upon request.
3. Documentation of each client contact shall include demographics, health history, assessment of the chief complaint, the protocol followed, referral, and, if indicated, any follow-up.
4. Deviations from protocols shall require a direct order from a practitioner authorized to prescribe and treat in accordance with state law. All deviations shall be documented in the client record.
5. Protocols shall not include prescription drugs. (Does not apply to protocols by APNs and RNPs.)
6. The roles of the RN, LPN and LPTN are limited to the parameters set out in "Position Statement 95-1 Scopes of Practice." Because their practice parameters do not include assessment, the roles of the LPN and LPTN are limited to data collection in telenursing.

*The "Position Statement 98-6 Decision Making Model" considers evolving practice potentials based on type of licensure and educational preparation. According to the model, "the licensed nurse is responsible and accountable, both professionally and legally for determining his/her personal scope of practice," within the boundaries set by the Nurse Practice Act and the ASBN Position Statements.*

*Nurses who practice telenursing may be requested to provide documentation that they have followed the "Position Statement 98-6 Decision Making Model" in making their decisions.*

The ASBN Position Statements can be accessed at [www.arsbn.org](http://www.arsbn.org).

Position Statement 00-2  
Adopted: November 16, 2000



Darla Erickson, CPA, Administrative Services Manager

# LICENSURE STATUS... WHAT ARE MY OPTIONS?

We often get questions from nurses considering changing their licensure status. They either want to become inactive or retired, but do not know which is best for them, or are already inactive and want to return to work. To get a better idea of which option works for you, it might help to have an overview of the different licensure status types available.

## TEMPORARY PERMIT

A temporary permit may be issued to examination or endorsement applicants for a period not to exceed six months. To receive a temporary permit, the applicants must meet all other qualifications for licensure. This permit becomes invalid if the state or federal

background check reveals information that would bar an applicant from being a nurse. The permit also becomes invalid upon notification of pass or fail of the examination. There is a non-refundable fee required to receive a temporary permit.

## ACTIVE

An active status means you have a current nursing license valid in Arkansas that allows you the privilege to practice nursing within the scope of your licensure. There is a biennial renewal application, renewal fee and continuing education to maintain an active status.

## LAPSED LICENSE

If your license is not renewed, made inactive or retired before the expiration date, you have a lapsed license. To renew

## INACTIVE STATUS

a lapsed license, you must file a renewal application and pay the renewal fee plus a late fee. You will also be required to obtain 20 contact hours - instead of 15 contact hours - if it has been less than five years. In addition, if it has been more than five years, a refresher course will be required. Practicing nursing with a lapsed license is a violation of the *Nurse Practice Act*.

required to obtain continuing education while on inactive status. If you choose to reactivate the license you will be charged a reactivation fee as well as the customary renewal fee. In addition, you will be required to obtain 20 hours of continuing education, and if the license is inactive for more than five years a refresher course is required.

## RETIRED STATUS

You must have a current license to choose this option. If you choose the Retired Nurse Status, you cannot practice nursing, but you can still sign your name as APN, RN, LPN, or LPTN depending upon your licensure. There is a \$10 fee to be changed to this status and a biennial fee of \$10 to maintain the Retired Nursing Status. You will still

receive newsletters and publications. You are not required to obtain continuing education while on retired status.

## HOW TO PUT YOUR LICENSE ON INACTIVE STATUS

Send a written statement to the ASBN by mail or fax including the following:

- Your name
- Address
- License number
- The statement, "I would like to be placed on Inactive status."
- Sign and date

## HOW TO PUT YOUR LICENSE ON RETIRED STATUS

Download and complete a "Retired Nurse Application" from our website at [www.arsbn.org](http://www.arsbn.org). Remit the application with the retired application fee.

## HOW TO REACTIVATE YOUR LICENSE AFTER BEING PLACED ON INACTIVE OR RETIRED STATUS

- If it has been less than five years:
  - Renew online. There will be a renewal fee and a reactivation fee.
  - You will be required to have 20 contact hours instead of 15.
- If it has been more than five years:
  - Send a written statement to ASBN by mail or fax including the following:
    - Your name
    - Address
    - License number
    - The statement, "I am currently on inactive (or retired) status and would like to reactivate my nursing license, please send me the forms to reinstate my license."
    - Sign and date
      - Send the required forms you receive after sending the request above with the required fees.
      - You will be required to take a Board approved refresher course.

For more information, check our website at [www.arsbn.org](http://www.arsbn.org).



# Staying on Top of Nursing Practice in 2010



A continuing education workshop sponsored by the Arkansas State Board of Nursing

**REGISTRATION FEE: \$45.00 (includes lunch)**  
Pre-registration required. Fees are non-refundable.

## Schedule

8:00 a.m.	Registration
8:30 a.m.	ASBN 101
9:00 a.m.	Infection Control
10:00 a.m.	Break
10:15 a.m.	Scope of Practice
11:00 a.m.	Going Green
12:00 p.m.	Lunch
12:45 p.m.	Professionalism
1:30 p.m.	Recognizing Unprofessional Conduct
2:30 p.m.	Break
2:45 p.m.	NCLEX®

## Dates and Locations

**February 17** *Completed* Baptist Health School of Nursing  
11900 Colonel Glenn Road, Little Rock

**March 3** *Completed* East Arkansas Community College - Lecture Hall  
1700 Newcastle Road, Forrest City

**October 20** Baxter Regional Medical Center  
624 Hospital Drive, Mountain Home

**November 10** Baptist Health School of Nursing  
11900 Colonel Glenn Road, Little Rock

Continuing education awarded is 6.0 contact hours. Participants who leave immediately prior to the NCLEX presentation will receive 5.0 contact hours. E-mail [info@arsbn.org](mailto:info@arsbn.org) if you have questions.

*This continuing nursing education activity was approved by Arkansas Nurses Association, an accredited approver by the American Nurses Credentialing Center's Commission on Accreditation. Provider Code 09-31-EA*

REGISTER ONLINE AT [WWW.ARSBN.ORG](http://WWW.ARSBN.ORG)

### REGISTRATION FORM

Mail completed registration form and \$45.00 registration fee (in-state check or money order) to ASBN, 1123 South University, Suite 800, Little Rock, AR 72204. Registration must be received one week prior to workshop.

Check date you plan to attend:     October 20                       November 10

NAME \_\_\_\_\_ LICENSE NUMBER \_\_\_\_\_

CITY \_\_\_\_\_ ZIP \_\_\_\_\_ PHONE \_\_\_\_\_





The full statutory citations for disciplinary actions can be found at [www.arsbn.org](http://www.arsbn.org) under Nurse Practice Act, Sub Chapter 3, §17-87-309. Frequent violations are ACA §17-87-309 (a)(1) "Is guilty of fraud or deceit in procuring or attempting to procure a license to practice nursing or engaged in the practice of nursing without a valid license;" (a)(2) "Is guilty of a crime or gross immorality;" (a)(4) "Is habitually intemperate or is addicted to the use of habit-forming drugs;" (a)(6) "Is guilty of unprofessional conduct;" and (a)(9) "Has willfully or repeatedly violated any of the provisions of this chapter." Other orders by the Board include civil penal-

ties (CP), specific education courses (ED), and research papers (RP). Probation periods vary and may include an impaired-nurse contract with an employer and/or drug monitoring and treatment programs.

Each individual nurse is responsible for reporting any actual or suspected violations of the Nurse Practice Act. To submit a report use the online complaint form at [www.arsbn.org](http://www.arsbn.org), or to receive additional information, contact the Nursing Practice Section at 501.686.2700 or Arkansas State Board of Nursing, 1123 South University, Suite 800, Little Rock, Arkansas 72204.

PROBATION					
<i>Abbott, Travis James</i> L48571, Little Rock A.C.A. §17-87-309(a)(6) Probation – 2 years Civil Penalty – \$2,000	<i>Fisher, Danna Jeannene Holt</i> Baugh R25098(exp), Manila A.C.A. §17-87-309(a)(4)&(6) Probation – 2 years Civil Penalty – \$500 + prev.	<i>McBee, Vonnie K. Tyler</i> R53519, Greenwood A.C.A. §17-87-309(a)(6) Probation – 2 years Civil Penalty – \$2,000	<i>Peppers, Robin Elaine Russell</i> R31172, Conway A.C.A. §17-87-309(a) (2),(4)&(6) Probation – 1 year	<i>Taylor, Tonya Angeline Dingman</i> Phillips R69691, Jacksonport A.C.A. §17-87-309(a)(4)&(6) Probation – 2 years Civil Penalty – \$1,000	
<i>Aitchison, Phillip Colin</i> R24167, Little Rock A.C.A. §17-87-309(a) (2),(4)&(6) Probation – 1 year	<i>Fitzhugh, Casey Lee</i> R80953, Benton A.C.A. §17-87-309(a)(6) Probation – 1 year Civil Penalty – \$1,200	<i>McClellan, Anna Lois Jackson</i> Bowen R37811, Newport A.C.A. §17-87-309(a)(6) Probation – 1 year Civil Penalty – \$500	<i>Robinson, Melanie Ann Brown</i> L38983, Hot Springs A.C.A. §17-87-309(a)(6) Probation – 2 years Civil Penalty – \$1,500	<i>Titsworth, Christopher Dale</i> L47741, Russellville A.C.A. §17-87-309(a) (2),(4)&(6) Probation – 2 years	
<i>Babineaux, Terrie Gwen Brown</i> R68154, Arkadelphia A.C.A. §17-87-309(a)(6) Probation – 2 years Civil Penalty – \$1,700	<i>Garloch, Melissa Sue Stromley</i> Burch R72474(exp), Greenwood A.C.A. §17-87-309(a) (2),(4)&(6) Probation – 2 years Civil Penalty – \$1,000	<i>Martin, Miranda Nicole</i> R81513, Traskwood A.C.A. §17-87-309(a)(4)&(6) Probation – 3 years	<i>Rogers, Earl Edward</i> R54849, Bella Vista A.C.A. §17-87-309(a) (2),(4),(6),(8)&(9) Probation – 2 years Civil Penalty – \$1,000	<i>Wall, Megan Michelle Barton</i> RN End. Applicant, Conway A.C.A. §17-87-309(a)(4)&(6) Probation – 1 year	
<i>Bhatia, Ravi Alethea</i> R56347(exp), Little Rock A.C.A. §17-87-309(a)(4)&(6) Probation – 2 years Civil Penalty – \$1,000	<i>Gibson, Jennifer Diana Johnson</i> L41221, Dierks A.C.A. §17-87-309(a)(6) Probation – 1 year Civil Penalty – prev.bal.	<i>Merillat, Tara Elizabeth</i> R80235, Searcy A.C.A. §17-87-309(a)(6) Probation – 1 year Civil Penalty – \$500	<i>Rogers, Earl Edward</i> R54849, Bella Vista A.C.A. §17-87-309(a) (2),(4),(6),(8)&(9) Probation – 2 years Civil Penalty – \$1,000	<i>Woolsey, Holly Christine Whitley</i> R70607(exp), L38015(exp), Hollister, MO A.C.A. §17-87-309(a)(4)&(6) Probation – 2 years Civil Penalty – prev.bal.	
<i>Brady, Lou Ann</i> R76869, Benton A.C.A. §17-87-309(a)(2)&(6) Probation – 1 year	<i>Harper, Kathy Renee Lane</i> L40214, Mena A.C.A. §17-87-309(a)(6)&(9) Probation – 2 years Civil Penalty – \$1,000	<i>Misenheimer, Britni Ann</i> L47112, El Dorado A.C.A. §17-87-309(a)(6) Probation – 1 year Civil Penalty – \$500	<i>Schwartz, Carrie Marie Jeffers</i> Schwartz McCain R66257(exp), Fayetteville A.C.A. §17-87-309(a)(2)&(6) Probation – 2 years Civil Penalty – \$1,000	<b>SUSPENSION</b> <i>Blackmon, Bobby Wayne</i> R73249, Forrest City Summarily Suspended	
<i>Brown, Leah Dawn</i> L47353, Coal Hill A.C.A. §17-87-309(a)(4)&(6) Probation – 1 year	<i>Hunter, Heidi Lynette Allen</i> R70351(exp), Bella Vista A.C.A. §17-87-309(a) (2),(4)&(6) Probation – 3 years Civil Penalty – \$500 + prev.bal.	<i>Ortego, Patricia Lynn</i> R82873, Hardy A.C.A. §17-87-309(a)(1)&(6) Probation – 1 year Civil Penalty – \$950	<i>Scorfina, Jacalyn Michelle</i> L46766, Paragould A.C.A. §17-87-309(a)(6) Probation – 1 year Civil Penalty – \$1,200	<i>Dean Kimberly Ann</i> L37639, Mountain Home Probation Non-Compliance Suspension – 3 years, followed by Probation – 3 years Civil Penalty – \$2,500 + prev. bal.	
<i>Clay, Julia Michelle Kaufman</i> R73230(exp), Gainesville, GA A.C.A. §17-87-309(a)(6) Probation – 1 year Course – The Nurse & Professional Behaviors	<i>Immel, Caren Rena Stephens</i> Coale L37943, Clarksville A.C.A. §17-87-309(a)(6) Probation – 2 years Civil Penalty – \$2,500	<i>Paladino, Andrew John</i> R77309, Little Rock A.C.A. §17-87-309(a)(6) Probation – 1 year Civil Penalty – \$1,300	<i>Smith, Jamie Lynn</i> R71142, Texarkana A.C.A. §17-87-309(a)(6) Probation – 2 years Civil Penalty – \$1,000	<i>Garbade, Jayne A.</i> R84770, Gilbert Summarily Suspended	
<i>Clark, Marjorie Margaret</i> PN Applicant, Pottsville A.C.A. §17-87-309(a)(2) Probation – 1 year	<i>Kendall, Tara Meghan</i> PN Applicant, Pochontas A.C.A. §17-87-309(a)(2)&(4) Probation – 1 year Course – AR Nurse Practice Act	<i>Partain, Carrie Roxanne Holt</i> R78314, Fayetteville A.C.A. §17-87-309(a) (2),(4)&(6) Probation – 3 years Civil Penalty – \$1,600	<i>Stack, Maria Nodlaig</i> R24165, Maumelle A.C.A. §17-87-309(a)(6) Probation – 2 years Civil Penalty – \$2,000	<i>Goza, Melissa Ann Jenkins</i> R68226, Lewisville Summarily Suspended	
<i>Clay, Niana Imani Akins</i> R65358, Little Rock A.C.A. §17-87-309(a)(6) Probation – 1 year Civil Penalty – \$500	<i>Kirk, Nancy Jean Bradford</i> R48538, Pine Bluff A.C.A. §17-87-309(a)(4)&(6) Probation – 2 years Civil Penalty – \$2,100	<i>Patterson, Karoline Denise</i> Stephens Rook L47648, Hope A.C.A. §17-87-309(a)(6) Probation – 1 year Civil Penalty – \$1,500	<i>Talbert, Debra Lynn Bagby</i> Stewart Baldrige Loggins McClanahan R38076, Maumelle A.C.A. §17-87-309(a)(6) Probation – 1 year Civil Penalty – \$500	<i>McFarland, Amber Nicole</i> L46978(exp), Viola Probation Non-Compliance Suspension – 2 years, followed by Probation – 3 years Civil Penalty – \$2,500 + prev. bal.	
<i>Dennis, Jana Elizabeth Shook</i> R66261(exp), Van Buren A.C.A. §17-87-309(a)(4)&(6) Probation – 3 years Civil Penalty – prev.bal.	<i>Lloyd, Ashley Dawn Allen</i> R74370, L42616(exp), Jonesboro A.C.A. §17-87-309(a)(4)&(6) Probation – 2 years Civil Penalty – \$2,000	<i>Patterson, Lee Ann</i> L32976, Bentonville A.C.A. §17-87-309(a) (1),(2)&(6) Probation – 1 year Civil Penalty – \$500	<i>Tate, Evelyn Marie Baker Savage</i> Andrews L11657, Little Rock A.C.A. §17-87-309(a)(6) Probation – 1 year	<i>Marks, Catricia Elaine</i> L44219, North Little Rock Probation Non-Compliance Suspension – 1 year, followed by Probation – 2 years Civil Penalty – \$500 + prev.bal.	
<i>Ducharme, Jenny Lynn</i> R81232, Wynne A.C.A. §17-87-309(a)(6) Probation – 1 year					

Continued on next page

## Disciplinary Actions- April 2010 continued from page 27

*Marsh, Kimberly Kay Keech Whitney*  
R66699, Waldron  
A.C.A. §9-14-239  
April 9, 2010

*Neel, Corinna Drum James*  
L36144, Prairie Grove  
Letter of Reprimand Non-Compliance  
Suspension – until terms are complete  
Civil Penalty - \$500

*Smith, Addie Carin Sayre*  
R74403, Little Rock  
Probation Non-Compliance  
Suspension – 6 months, followed by  
Probation – 1½ years

*Stricker, Teresa Marietta Sisk Cleveland*  
R50445, Paragould  
A.C.A. §17-87-309(a)(4)&(6)  
Suspension – 2 years, followed by  
Probation – 3 years  
Civil Penalty - \$2,500

*Stuart, Julie Kathleen Johnson*  
R41341, L24604(exp), Prescott  
Probation Non-Compliance  
Suspension – 1 year, followed by Probation – 2 years  
Civil Penalty - \$1,000

*Walker, Robert Charles*  
L30847, Little Rock  
A.C.A. §17-87-309(a)(6)  
Suspension – 2 years, followed by Probation – 3 years  
Civil Penalty - \$2,500

### VOLUNTARY SURRENDER

*Ault, Amanda Michelle*  
L46064, Malvern  
February 4, 2010

*Barham, Melissa Renee Davis*  
R42881, Hope  
April 12, 2010

*Barry, Elizabeth Jane*  
R50398, Little Rock  
April 5, 2010

*Briggs, Trista Marie Wilson*  
L40831, Fayetteville  
January 25, 2010

*Davis, Virginia S. Duke McCarver*  
L20585, Little Rock  
March 2, 2010

*Free, Jonathan Porter*  
R76842, Little Rock  
January 27, 2010

*Golleher, Dana Lynn Austin*  
L35019, DeWitt  
February 11, 2010

*Herring, Kimberly Leann Herring Bagwell Baxter*  
R52262, L32407(exp),  
Jonesboro  
January 21, 2010

*Iberg, Gayla Ann Mahan*  
L44798, Greenbrier  
April 13, 2010

*Krisko, Joanne M.*  
R79991, Cleveland, OH  
March 30, 2010

*McCord, Melissa Rene Thomas*  
L35482, Lonoke  
March 26, 2010

*Osborne, Jessica Golden*  
L46979, Mountain Home  
February 17, 2010

*Pieroni, Amy Beth Clark*  
R54948, Glen Allen, MS  
March 24, 2010

*Webster, Stephanie Dawn Patterson*  
L30730, Harrisburg  
March 26, 2010

*Weston, Amber Carlene Elder*  
L43930, Mount Ida  
March 4, 2010

*Whitmore, Sherry Ann*  
L49522, Conway  
January 27, 2010

*Yarbrough, Sherry Lee*  
R79173, Naylor, MO  
February 11, 2010

### REINSTATEMENTS WITH PROBATION

*Eudy, Melinda Martinek*  
R64108, Little Rock  
Reinstate to Probation – 2½ years  
Civil Penalty – prev.bal.

*Gerot, Liza Michelle Murphy*  
R32923(exp), L20538(exp),  
Conway  
Reinstate to Probation – 1 year  
Civil Penalty – prev.bal.

*Pipkin, Robin Christine Moore Canterbury Proctor*  
R36210(exp), L47496(exp),  
Little Rock  
Reinstate to Probation – 2 years  
Civil Penalty – prev.bal.

*James, Meagan Elizabeth*  
L49493, Cave City  
A.C.A. §17-87-309(a)(4)&(6)  
Probation – 2 years  
Civil Penalty - \$1,500

### REPRIMAND

*Bivin, Martha Croley Grigsby*  
R65735, Mountain Home  
A.C.A. §17-87-309(a)(1)&(6)  
Board Reprimand  
Civil Penalty - \$510

*Campbell, Lashaunda Nicole Gardner*  
L44337, Pine Bluff  
A.C.A. §17-87-309(a)(6)  
January 13, 2010

*Clayton, Tanya Marie Burns McConnell*  
R19925, Little Rock  
A.C.A. §17-87-309(a)(1)&(6) and §17-87-207(c)(2)  
January 7, 2010

*Floyd, Lori Lynn Howie*  
R68664, Crossett  
A.C.A. §17-87-309(a)(6)  
December 15, 2009

*Jordon, Junko Erika Cabot*  
A.C.A. §17-87-309(a)(1)&(6)  
March 10, 2010

*Lisk, Berna Elaine Bryant*  
L21303, Caldwell  
A.C.A. §17-87-309(a)(6)  
January 13, 2010

*Martini, Thomas John*  
R85319, Tallahassee, FL  
A.C.A. §17-87-309(a)(1)&(2)  
February 25, 2010

*Nelson, Amanda Diane Hedden*  
L26731, Star City  
A.C.A. §17-87-309(a)(1)&(6), §17-87-207(c)(2) and Rules  
CE Late Fee - \$750  
February 25, 2010

*Pfeiffer, Teri Gayle*  
R77692, Russellville  
A.C.A. §17-87-309(a)(6)  
February 22, 2010

*Price, Susan Leigh*  
R76800, Fayetteville  
A.C.A. §17-87-309(a)(6)  
December 28, 2009

*Read, Leaellen Marie Oaks*  
L27225, Little Rock  
A.C.A. §17-87-309(a)(1)&(6) and §17-87-309(c)(2)  
CE Late Fee - \$1,000  
January 7, 2010

*Southerland, Susan Rena Miller*  
L44046, Poteau, OK  
A.C.A. §17-87-309(a)(1)&(6), §17-87-207(c)(2) and Rules  
CE Late Fee - \$750  
February 25, 2010

*Talley, Deborah Sue*  
L27149, Little Rock  
A.C.A. §17-87-309(a)(6)  
March 10, 2010

*Thayer, Jennifer Lyn*  
R85410, Voorheesville, NY  
A.C.A. §17-87-309(a)(1)&(2)  
February 25, 2010

*Valentine, Lahnee Camille Crowell*  
R79097, Bryant  
A.C.A. §17-87-309(a)(6)  
February 26, 2010

*Zahner, Mary Theresa*  
R85063, Kansas City, KS  
A.C.A. §17-87-309(a)(1)&(2)  
January 7, 2010

### REVOCATION

*Awalt, Susie Evon Brumley*  
L43533, Muldrow, OK  
A.C.A. §17-87-309(a)(2)&(6)  
April 15, 2010

*Dobson, Janice Marie*  
R36001, Brinkley  
A.C.A. §17-87-309(a)(6)  
April 15, 2010

*Fitzgerald, Tina-Marie*  
R79928, Harrisburg  
A.C.A. §17-87-309(a)(2)&(6)  
April 15, 2010

*Yielding, Jeffrey Alan*  
L39358(exp), Maumelle  
A.C.A. §17-87-309(a)(2)&(6)  
April 15, 2010

### PROBATIONARY STATUS REMOVED

*Ballard, Annie Lorie Webb Newton*  
R54719, Conway  
March 16, 2010

*Barham, Melissa Renee Davis*  
R42881, Hope  
March 16, 2010

*Batts, Janiece Cheryl Rogers Thrift*  
R49278, North Little Rock  
January 21, 2010

*Blevins, Cornelius Louise Brown Means*  
L28779, Pine Bluff  
March 16, 2010

*Brossett, Robin Michelle Reimard*  
R33712, Cammack Village  
March 1, 2010

*Crowder, Kandace Marie Moore Jauch*  
R72577, Benton  
March 16, 2010

*Davis, Gwynn Allison Vaughan*  
P00491, R20734, Little Rock  
March 16, 2010

*Dedmon, Mark Randall*  
R42034, Lowell  
January 20, 2010

*Dedmon, Michael Tyler*  
R80558, Springdale  
March 16, 2010

*Draper, Melanie Lynn Hedges*  
R72926, Malvern  
March 16, 2010

*Drummond, William Gerald*  
L27841, Cherry Valley  
February 25, 2010

*Duggar, Christa Rene*  
R76718, Rosie  
March 1, 2010

*Holt, Lisa Sue Boling*  
R71474, Marion  
January 20, 2010

*Houston, Faith Watkins*  
R70344, Conway  
January 21, 2010

*Kenward-Easom, Margaret Kristina*  
R50660, P01568, Maumelle  
January 21, 2010

*Lancaster, Dena Faye Wilson*  
R28807, Sherwood  
March 1, 2010

*Mathews, Kandace Dawn*  
R50782, Mabelvale  
March 1, 2010

*Shanahan, Danny George*  
R80083, Bella Vista  
March 16, 2010

*Sims, Robyn Marie Berry*  
R56379, Springdale  
January 28, 2010

*Spurlin, Natali Elizabeth*  
L47862, Hot Springs  
March 15, 2010

### CEASE AND DESIST

*Conerly, Derik Barrett*  
MS. R874934, Tylertown, MS  
January 12, 2010

## Disciplinary Actions

## MAY 2010

### PROBATION

*Brown, Leslie Nicole Dorton*  
LPN Applicant, Bono  
A.C.A. §17-87-309(a)(4)  
Probation – 1 year

*Perry, Vallyn Nicole*  
R82820, Heber Springs  
A.C.A. §17-87-309(a)(6)  
Probation – 1 year  
Civil Penalty - \$500

*Piper, Lori Leigh Garrison*  
R66950, North Little Rock  
A.C.A. §17-87-309(a)(6)  
Probation – 1 year  
Civil Penalty - \$500

*Ray, Courtney Ann*  
L48737, Sherwood  
A.C.A. §17-87-309(a)(6)  
Probation – 1 year

Reynolds, Kathleen Dawn  
R82052, Conway  
A.C.A. §17-87-309(a)(6)  
Probation – 1 year  
Civil Penalty - \$500

Samuel, Denise Raylene Henthorn  
Horton  
R32964, Amity  
A.C.A. §17-87-309(a)(6)  
Probation – 1 year

Smith, Philander D.  
L42145(exp), Wynne  
A.C.A. §17-87-309(a)  
(2),(4)&(6)  
Probation – 1 year  
Civil Penalty - \$500

#### SUSPENSION

Crain, Deborah Yvonne Cayton  
Howard  
L09842, El Dorado  
A.C.A. §17-87-309(a)  
(2),(6)&(9)  
Suspension – 6 months, fol-  
lowed by Probation – 2 years  
Civil Penalty - \$1,500

Obigbo, Winnie Ebele  
R84536, L49226(exp), Little  
Rock Summarily Suspended  
May 13, 2010

Stewart, Kathryn Jean Riddle  
L18774, Alma  
A.C.A. §17-87-309(a)(6)&(9)  
and Letter of Reprimand Non-  
Compliance Suspension – 1  
year, followed by Probation – 2  
years Civil Penalty - \$1,500 +  
prev.bal.

Stine, Jenni Rebecca Norwood  
L33256(exp), Bryant  
Probation Non-Compliance  
Suspension – 2 years, followed  
by Probation – 3 years  
Civil Penalty - \$2,500 + prev.  
bal.

Tosh, Bethany Allison Darr  
A01883, R71948,  
PAC01777(Susp)  
Probation Non-Compliance  
Suspension – 6 months, fol-  
lowed by Probation – 4 years  
Civil Penalty - \$500 + prev

#### VOLUNTARY SURRENDER

Bouscher, Kami Rachelle Holbert  
Franks  
R70284, DeWitt  
May 6, 2010

Britt, Scott Hamilton  
P01640, R29734, Cherokee  
Village  
April 28, 2010

Daniel, Ryan Andrew  
R77813, Malvern  
April 28, 2010

Daniels, ReDaunda Carrie  
Treadway  
L35291, Friendship  
April 15, 2010

French, Elizabeth Ann Bair  
R50539, Newark  
May 6, 2010

Hines, Theron Ray  
R39894, Rogers  
May 6, 2010

Jackson, Minnie Pearl Evans  
Williams Holland Pate  
L27515, Little Rock  
April 15, 2010

Lloyd, Ashley Dawn Allen  
R74370, L42616, Jonesboro  
May 6, 2010

Lyle, Misty Dawn Sanchez  
L38482, Hartman  
April 21, 2010

Osborn, Angela Margaret  
R79484, Jonesboro  
May 6, 2010

Steinsiek, Melinda Charlene Duke  
R31620, Fayetteville  
May 6, 2010

#### REINSTATEMENTS WITH PROBATION

Thomas, Cheryl Lynne Rogers  
R39726, Bella Vista  
Reinstate to Probation – 4 year  
Civil Penalty – prev.bal.

#### REPRIMAND

French, Rebecca Jane Hill  
R20038, Texarkana  
A.C.A. §17-87-309(a)  
(1),(2)&(6)  
March 26, 2010

Harris, Tansha A. Thurman  
Williams  
R85626, Luxora  
A.C.A. §17-87-309(a)(1)&(2)  
March 30, 2010

McCandless, Michelle Marie  
Pominville Williams  
L39702, Walnut Ridge  
A.C.A. §17-87-309(a)(6)  
March 25, 2010

Pruitt, Terry Lynn Pinkston  
R72708, L20071, Fort Smith  
A.C.A. §17-87-309(a)(1)&(6),  
§17-87-207(c)(2) and Rules  
March 30, 2010

Smith, Suzanne Sawyer  
R81366, Benton  
A.C.A. §17-87-309(a)(6)  
April 5, 2010

Walker, Fandra Marchall Owens  
L38827, Texarkana  
A.C.A. §17-87-309(a)  
(6),(7)&(9)  
March 30, 2010

#### REVOCAION

Ames, Misty J.  
PN Endorsement Applicant,  
Springdale  
Future Privilege to Practice be  
Revoked  
May 17, 2010

Green, Michael Albert  
L32108(exp), Salesville  
A.C.A. §17-87-309(a)  
(1),(2)&(7)  
May 13, 2010

#### PROBATIONARY STATUS REMOVED

Charles, Jr., Wilmington Owen  
R68687, L34371(exp), Bryant  
April 30, 2010

Christman, Robbin Annette  
Earnest  
R77682, L41744(exp), Sheridan  
May 11, 2010

Church, Lynna Beth  
R62663, L23381(exp), Sallisaw,  
OK  
May 11, 2010

Cooper II, Richard Allen  
R80074, Harrison  
May 11, 2010

Dickey III, Joseph Randolph  
R80155, Little Rock  
April 20, 2010

Emerson, Anita Suzanne  
L48413, Harrison  
May 11, 2010

England, Anna Beth White  
R71359, Marion  
May 11, 2010

Fontana, Kristi Shantell Carr  
C01435, R69890, Shreveport,  
LA May 11, 2010

Haley, Patti Dawn Hadley  
R54019, Cabot  
May 11, 2010

Howie, Katherine Lynn Fowler  
Meek Murphy  
R49810, West Helena  
May 11, 2010

Lee, Lori Lynne Robinson  
R77688, Percy  
May 11, 2010

Moore, Kelly Anne Herron  
Williamson  
R67080, Fort Smith  
April 30, 2010

Smith, Margaret Elaine Owens  
McCall  
R39171, Little Rock  
May 11, 2010

Wheeler, James David  
R73837, Eureka Springs  
May 11, 2010

#### APPEAL DENIED

Bertie-Fox, Cynthia Ann  
L49340, DeQueen  
May 13, 2010

Flores, Peggy Sue  
L49375, Mena  
May 13, 2010

#### WAIVER DENIED

Ames, Misty J.  
PN Endorsement Applicant,  
Springdale  
May 17, 2010

#### WAIVER GRANTED

Henson, Allen Keith  
PN Applicant, Newport  
May 13, 2010

#### CEASE AND DESIST

Hewlett-Grady, Dana M  
CO RN169724 / FL RN9210333  
Loveland, CO / Sarasota, FL  
April 22, 2010

LouAnn Walker, Public Information Coordinator

## PAPERLESS LICENSING...Changes You Need to Know

The Arkansas State Board of Nursing is going paperless. Beginning July 1, 2011, the Board will no longer issue a license card upon renewal.

This change is driven by identify theft, fraud, imposers, and the reduction of costs and errors associated with printed license cards.

Each nurse will receive a permanent license card indicating that they are licensed. The license card will not have an expiration date on it, and a statement on the license will direct an individual wishing to verify the license status to the Board's

website. The status of a license may be verified at any time online. The online verification system is updated daily to provide the most current licensure data. Information found on the Board's website is much more up-to-date and is considered more secure than what is on the licensing card. Employers should feel confident that the individual they are hiring has a current unencumbered nursing license by using the online verification system plus asking for a government issued photo ID.

The licensure renewal process will not change.

Nurses will continue to renew their license biennially.

Many boards of nursing have gone paperless over the last few years including Texas, Maryland, Maine, New Hampshire, New Mexico, North Carolina, Ohio and South Carolina.

The Arkansas State Board of Nursing suggests that you provide a copy of this article to your employer, director of nursing and/or human resource department so they will be aware of the upcoming change.





Arkansas State Board of Nursing  
University Tower Building  
1123 S. University, Suite 800  
Little Rock, AR 72204

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