A photograph of the Arkansas State Capitol building in Little Rock, Arkansas. The building is a grand, classical-style structure with a prominent white dome and a portico with columns. The sky is a clear, bright blue. The text is overlaid on the image.

ASBN *Update*

A Publication of the Arkansas State Board of Nursing ■ Volume 1 Number 1

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ASBN Update

PUBLISHED BY

Arkansas State Board of Nursing
University Tower Building
1123 S. University, Suite 800
Little Rock, Arkansas 72204
Telephone: 501.686.2700
FAX 501.686.2714
Verifications: 501.682.2200
www.arsbn.org

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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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from the Governor

Too often, Arkansans are reminded only of our health problems. It's time to remind ourselves of our health successes.

According to the United Health Foundation's 2001 state health rankings, Arkansas led the country in overall health improvement. From 1990 to 2000, Arkansas only managed to improve its health ranking by one position, moving from 47th to 46th. In 2001, we improved to 42nd in the country.



In a year's time, we reduced the smoking rate from 27.2 percent to 25.1 percent of the population. While our smoking rate is still far too high, we can take some solace in knowing we're moving in the right direction. I'm confident that as the smoking cessation programs funded by the CHART plan get up and running, we'll see smoking rates decline even further.

We've also succeeded in helping more people gain access to health insurance. In just a year's time, we decreased the number of people lacking health insurance from 18.7 percent to 14.7 percent of the population. At the same time, infant mortality decreased from 8.8 to 8.2 deaths per 1,000 live births, improving our national ranking from 44th to 38th.

In the end, we know our satisfaction doesn't come from seeing Arkansas ranked above other states. The child whose broken arm you help mend or the pregnant woman visiting the county health clinic doesn't care that Arkansas beat Alabama on some national survey. For those of us working in the policy arena, and especially for those of you who've committed your lives to serving others on the front lines of the health care profession, our success is measured in lives rather than lists.

It's easy for elected officials to get bogged down in the minutia of statistics, utilization rates, rankings and report cards. But I've tried to always keep the individual in mind. That's why I routinely ask my staff and Cabinet to leave Little Rock and join me in setting up shop for a day in a city outside Little Rock. These community forum days allow me to stay in touch with the people affected by the policies we pass. Along the way, I've had the privilege of eating dinner in the homes of families whose children have access to health care because of the ARKids First program. Their stories are what motivate me when it seems like people are looking only for the bad news.

In the months and years ahead, there will be more bad news. That's inevitable. But thanks to the hard work of people like you, I'm more confident the future holds a lot of good news as well. We're already seeing positive changes. Please know I'm committed to working with you to make Arkansas one of the healthiest states in which to live.

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

Governor Mike Huckabee

president's message

Publication of this journal marks another milestone in ASBN history. The first newsletter, four pages total, was published in October 1997. Since then, the *ASBN Update* has been sent to nursing schools, employers and subscribers after Board meetings with an eight-page compilation going to all nurses each July. This new, thirty-two page, full color journal - to be sent to all nurses, nursing schools, nursing students and employers quarterly - is a giant step forward in the Board's efforts to communicate with those interested in public protection and the profession.



In thinking about what would be of interest to our readers, it seemed appropriate to focus on Honesty, a value of paramount importance. Honesty is the foundation of nursing, and all Boards of nursing, as well as all members of our profession, are equally vested in its exemplification. Honesty was recently the focus of several other Boards as reflected in published articles and newsletters. The Oklahoma Board's President Schmelling addressed "fraud, dishonesty, deceit and falsification and the increase of complaints within this category. Other Boards addressed honesty in depth, with one saying, "it is imperative for the provision of safe and effective nursing care."

The ASBN, as other Boards, is all too familiar with dishonesty in the realm of falsification of information on applications for initial and advanced practice licensure and license renewal. All applicants must answer questions related to criminal background or history of arrest not previously reported to the Board. Falsification includes the omission of the answer as well as an incorrect answer. The temptation for the nurse to be dishonest is great for many reasons, the most common being: the belief that no one will find out; that the risk is worth it; their dues have been paid with fines and/or serving time; or the elapsed time since the offense has somehow lessened the importance of the offense and the need to report it. Some say that "my attorney" (or the Judge) said my record had been expunged or sealed, so it was like it had never happened. Others hope the Board will not find out about the recent DWI, the hot check arrest or the nolo contendere plea.

Why are Boards of Nursing so concerned with honesty? A simple answer is that a nurse who obtains or maintains a license through dishonesty cannot be trusted to provide professional nursing services to clients and patients. Conduct that includes theft, assault and battery, fraud and other criminal activities outside the workplace is an indicator that the nurse involved may also repeat these activities within health care settings, thus placing the patient and the general public at risk. For these reasons, the Board does not take lightly this unprofessional conduct and considers it to be high on the list for disciplinary action.

Past behavior is the best predictor of future actions, so an incident of lying, deceit or falsification raises concerns about whether this conduct will continue. It is generally accepted that committing the first dishonest act makes it easier and often necessary to commit subsequent acts. An example is if the nurse lies on an initial application for license, the same lie has to be told on subsequent renewals; thus increasing the probability of being discovered and most assuredly more severe disciplinary action by the Board.

Nurses provide care to the most vulnerable populations—the very young, the aged and the sedated patients. The integrity and honesty of the nurse is vital to public protection in all sectors.

All disciplinary actions are reported to a national practitioner data bank and to NURSIS (NCSBN's licensure database), both of which are made available to all state licensing Boards. Also, with the ever increasing number of states joining the Nurse Licensure Compact - 18 at last count - violations occurring within the compact states are investigated and adjudicated in a more coordinated effort.

It is a privilege and honor to serve as Board member and President. Today, just as it was many years ago when many of us began our nursing careers, it is imperative we perform our professional role with honesty, are truthful in documenting our nursing actions, and answer truthfully the questions on all types of applications. The true answer is always the best answer. In being truthful, the nurse exemplifies the fundamental value of honesty and enhances the image of the nursing profession.

A handwritten signature in cursive script that reads "Shirlene W. Harris".

Shirlene W. Harris, PhD, RN

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Verifications: 501.682.2200
Website: www.arsbn.org

Office Hours
Monday thru Friday:
8:00 - 12:00, 1:00 - 4:30

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Phyllis DeClerk, RN
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BOARD MEETING DATES

August 7Disciplinary	September 11Disciplinary	October 9.....Strategic Planning	November 13Disciplinary
August 8Disciplinary	September 12Business	October 10.....Disciplinary	November 14.....Business

The public is invited to attend ASBN Meetings. Groups of more than five should contact LouAnn Walker at 501.686.2704

LOST OR STOLEN LICENSE

A listing of all lost or stolen licenses can be found at www.arsbn.org. All reissued licenses will have duplicate stamped on them. Employers are urged to inspect the original license from a job applicant and verify the nurse's identity with a photo ID.



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College of Nursing
Continuing Education Program

Upcoming Events

September 16-20/21, 2002
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Course and SART Training**

presented with
The Memphis Sexual Assault
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November 1, 2002
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Professor Lecture**

Barbara K. Spring, PhD
Missoula Demonstration Project

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Continued Competency Model

Key components of the Arkansas State Board of Nursing Continued Competency Model are listed below. The full model and definitions may be accessed at www.arsbn.org. Random auditing for compliance with continued competency requirements will be instituted. When audited, it will be the responsibility of the nurse to provide verification of continued education during the renewal period.

In addition to meeting the requirements for license renewal/reinstatement outlined below, other evidence of compliance may be requested by the Board.

INITIAL LICENSURE

- Graduation from an approved program or equivalency; and
- Pass NCLEX examination (RN/LPN) or LPTN licensure examination.

RENEWAL OF ACTIVE LICENSE

Documented evidence of the following continuing education requirements during renewal period:

- 15 practice-focused contact hours from a nationally recognized or state continuing education approval body recognized by the ASBN; or
- Maintenance of certification or re-certification by a national certifying body recognized by ASBN; or
- Completed academic course in nursing or related field.

LICENSE ON INACTIVE STATUS

None

REINSTATEMENT FROM INACTIVE STATUS – 5 YRS OR LESS

Documented evidence of the following continuing education requirements within the past two years:

- 20 practice-focused contact hours from a nationally recognized or state continuing education approval body recognized by the ASBN; or
- Certification or re-certification by a national certifying body recognized by ASBN; or
- Completed academic course in nursing or related field.

REINSTATEMENT FROM INACTIVE STATUS – MORE THAN 5 YRS

Verification of completion of the above continuing education requirements; and

- a refresher course approved by the ASBN; or
- an employer competency orientation program.

Phase-In Requirements

LICENSE RENEWAL PERIOD

July 1, 2003 – June 30, 20048 practice-focused contact hours or other CE requirements above
 After July 1, 2004.....15 practice-focused contact hours or other CE requirements above

REINSTATING LICENSE FROM INACTIVE STATUS – 5 YEARS OR LESS

July 1, 2003 – June 30, 200410 practice-focused contact hours
 After July 1, 200420 practice-focused contact hours

REINSTATING LICENSE FROM INACTIVE STATUS – GREATER THAN 5 YEARS

July 1, 2003 – June 30, 200410 practice-focused contact hours plus refresher course or employer program
 After July 1, 200420 practice-focused contact hours plus refresher course or employer program

Continuing Education – *It's The Law!*

The word is out! Continuing education is now mandated by law! Act 86 of the 2001 Arkansas legislative session authorized the Arkansas State Board of Nursing to require evidence of continuing education in order for nurses to renew their licenses. Nurses may choose to participate in continuing education offerings, maintain certification from a national certifying body recognized by the ASBN or complete an academic course in nursing or related field during the renewal period (two-year period immediately preceding license renewal).

Starting with renewals in July 2003, there will be an additional statement on the renewal application

asking nurses to declare that they have met the continuing education requirement. A percentage of the nurses renewing each month will be asked to submit evidence of continuing education activities - just like an IRS audit! Nurses will keep their own records and should not send any

records to the Board of Nursing unless requested to do so for an audit. Records should be kept for two full renewal periods.

Appropriate continuing education contact hours earned for the two years prior to the renewal date will be accepted for meeting the continuing competency requirements.



Frequently Asked Questions

- Q** I attended a week-long educational conference and received 30 continuing education contact hours. Can I use these hours to count for the next two license renewal periods?
- A** Continuing education contact hours beyond the required contact hours cannot be carried over to the next renewal period.
- Q** My employer has required that I attend classes in computer technology. Can I count these hours for my continuing education contact hours requirement?
- A** No. The requirement is for nursing practice-focused continuing education.
- Q** Do I send in my continuing education contact hours for the ASBN to keep my records?
- A** No. It is the licensee's responsibility to maintain the records. These records must be original certificates of attendance, contact hour certificates, transcripts or grade slips. If audited, you will submit copies as evidence. Records of continuing education must be maintained for a minimum of two consecutive renewal periods.
- Q** I have information about an upcoming workshop that is in my practice area, but the approver of continuing education does not appear on your list. Can I take this workshop and use it for my continuing education contact hours?
- A** You may request an individual review for a non-approved workshop by submitting information containing the topic, agenda, presenters, content and objectives, along with a completed ASBN application form and fee for individual review.

continued on page 10

Q What happens if I get audited and I don't have appropriate continuing education hours?

A You will be allowed 90 days to meet the continuing education requirement. After 90 days, you will be assessed a late fee and receive a letter of reprimand which is reported to national and federal disciplinary data banks. The second occurrence of non-compliance will result in further disciplinary action.

Q My license is due for renewal on September 30, 2003. How many contact hours do I need to renew my license?

A If your license is up for renewal September 30, 2003, then you should have accrued 8 contact hours of Board approved, practice-focused continuing education between September 2001 and September 2003. Continuing education completed prior to September 2001 will not be counted!

Q Can I count CMEs (continuing medical education) as my continuing education contact hours?

A Possibly. If the target audience for CME's includes nurses and the content is relevant to your practice area in nursing, it can be counted.

Q What is the difference between CEUs and contact hours?

A One continuing education unit (CEU) equals 10 contact hours. The Board requirements are listed in contact hours. If a CE offering lists CEUs, you will need to multiply the number of CEUs by 10 to calculate contact hours. For example, 0.1 CEUs would be the same as one (1.0) contact hour.

Q I have ACLS training. Will ACLS count as continuing education?

A American Heart Association advanced life support courses for various age groups (ACLS, PALS, NALS) are acceptable as continuing education. The ASBN will allow ten (10) contact hours for initial training or retraining if it occurs during the two-year time frame immediately preceding license renewal.

The Continuing Education link at www.arsbn.org has more information that is updated periodically. For additional information, contact Dr. Jackie Murphree, Director of Nursing Education, at jmurphree@arsbn.org or at 501.686.2712.

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board meeting highlights



At the May 2002 Business meeting, the Board took the following actions:

- Granted approval to the Phillips Community College of University of Arkansas Practical Nurse Satellite Program to start fall 2002.
- Granted continued full approval to the Phillips Community College of University of Arkansas Practical Nurse Program until the year 2005.
- Granted continued full approval to the Phillips Community College of University of Arkansas Associate Degree Program until the year 2007.
- Granted continued full approval to the Baptist Health School of Nursing Diploma Program until the year 2007.
- Granted continued full approval to the Arkansas State University - Newport Practical Nurse Program until the year 2005. Deviations cited must be corrected within six months.
- Granted continued full approval to the Cossatot Community College of the University of Arkansas Practical Nurse Program until the year 2005. Deviations cited shall be addressed in a progress report every six months until corrected.

At the **November 2001** Business meeting, the Board approved revisions in Position Statement 97-1, "The Performance of Stapling and Suturing for Superficial Wound Closure by Nurses in the Operating Room," to include LPNs and LPTNs. The full text can be found in Positions Statements at www.arsbn.org or may be ordered from the ASBN.



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**Where Knowledge Creates
Better Medicine**

Knowledge Creates Better Nursing at UAMS Medical Center



In October of 2001 the Arkansas-Democrat Gazette conducted an extensive reader poll on the "Best of" in Arkansas. The clear winner in the "Best Place To Work" category was the University of Arkansas for Medical Sciences (UAMS).

This recognition came as no surprise to the 3600 nurses, doctors, technicians and other health care providers who work at the hospital in Little Rock. This includes University Hospital nurse recruiter, Susan Erickson, RN, who spends much of her time touting the benefits of joining the UAMS Medical Center family. "Working in a teaching hospital is where cutting edge medicine is being performed," Erickson said. "We provide a unique and positive environment that is patient centered, cost-effective and enriched with education and research."

"Our nurses are working side-by-side with physicians and nurses who are recognized as the best in their field, not only in Arkansas, but around the world," Erickson added. "Plus, we have many programs that are exclusive to UAMS Medical Center: skull base surgery, gamma knife, bone marrow transplants, innovative breast cancer treatments, high risk obstetrics and others."

University Hospital has also been named "One of America's Best" by U.S. News & World Report for the past six years. No other hospital in Arkansas has ever achieved this recognition. "If you want to be a part of the team that's creating new medical treatments, you'll want to work at UAMS," Erickson added.

UAMS Medical Center also offers competitive salaries. Annual market surveys are conducted within the central Arkansas area to determine needed adjustments. Average salaries for a nurse beginning a career in nursing are estimated between \$30,000 to \$36,000 depending upon nursing degree, shift (evening, nights or weekends) and/or past experience as either a nursing assistant, student nurse, licensed practical nurse, military aid, etc.

Continuing education is highly valued at UAMS. The Department of Clinical Programs, Staff Education is an official CE provider through the Arkansas Nurses Association, which is accredited to approve nursing continuing education by the American Nurses Credentialing Center's Commission on Accreditation. Nurses who attend continuing education classes at UAMS will receive hours that may be used to meet the ASBN requirements for license renewal, which begins July 2003.

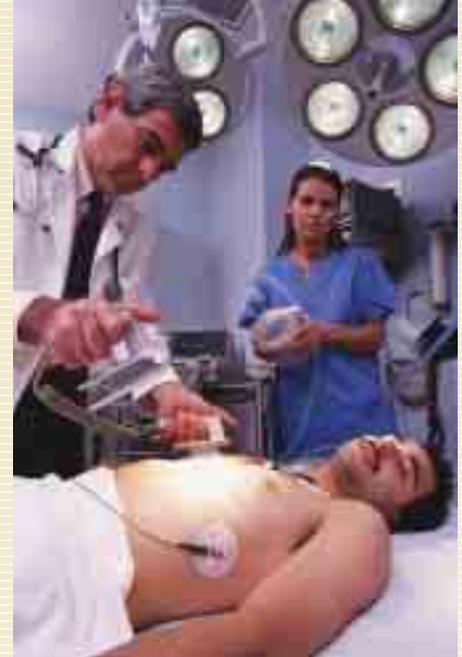
This enables our staff to avoid taking time from work, going out of state, etc., to earn CE hours.

Decision-making skills are encouraged at UAMS. Staff and management participate in the Professional Nursing Organization (PNO), a shared governance system to determine standards for practice, policy and procedure and to identify performance improvement initiatives. Nurses at UAMS are proud to be part of the team that includes physicians, social workers, respiratory therapists, and other specialists to determine the best outcomes for patient care. This year, the PNO will be adding multidisciplinary team members to expand the scope of practice for patient care.

Knowledge and education is a priority at UAMS. Our tuition reimbursement program allows full-time employees to attend school while working. UAMS pays 66% of tuition at any of the eight University of Arkansas colleges and universities. Employees pay \$5 per credit hour, if attending school at UAMS.

Last year, UAMS initiated a Summer Externship Program. This 8-week program offers junior nursing students who have completed a foundations course and one clinical rotation the opportunity to work side by side with a designated RN preceptor! Students can also continue to work after the program is completed and continue throughout the school year through our Clinical Care Assistant program. This wonderful learning experience also encourages the student to enhance individual technical skills, confidence and decision-making ability.

This year UAMS is offering FREE on-campus housing to students who agree to room with another extern student in an effort to provide statewide participation. Students will also select shift preference and area of interest. However, the student will work the same schedule as the assigned preceptor with opportunities to work in alternative settings when the preceptor is on vacation.



The New Graduate Nurse Internship Program offers graduating senior students the opportunity to participate in an eight week structured orientation program that extends throughout the first year of employment.

Good work does not go unrecognized either. We have an "Outstanding Nurse" program. We select an Outstanding Nurse of the Month based on customer service ratings. Monthly announcements of both the area and nurse are published in the campus and department newspapers, internet site, www.uams.edu, and outside the cafeteria. Posters are also displayed in the winning areas for 30 days to announce to both staff and the public our outstanding customer service providers. And during National Nurses Week we announce the Outstanding Nurse of the Year. This top nurse is selected by a panel of RN peers who are elected to serve on the campus Recruitment/Retention Council. This council meets monthly to develop recognition programs based on discussions of the current state of practice and literature reviews, new trends and legislation initiative as well as our community environment.

So if you are looking for an environment that is exciting, challenging, cutting-edge, values education, advancement and decision-making skills, check us out at www.uams.edu/don/nursing.htm. Nurse Recruitment would appreciate the opportunity to explain why "Knowledge Creates Better Nursing" at UAMS Medical Center.

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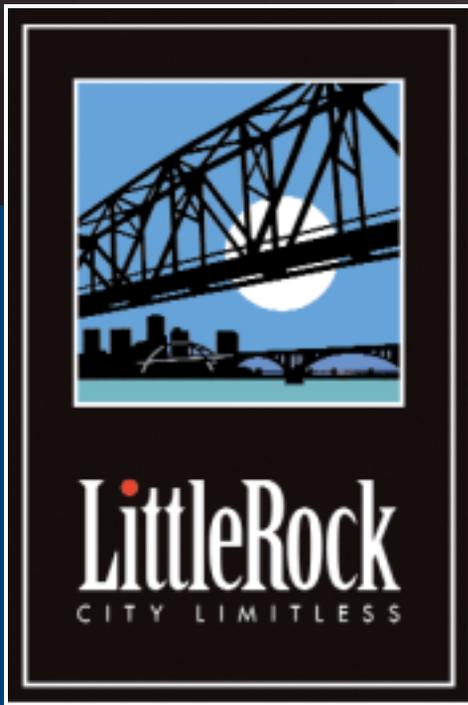
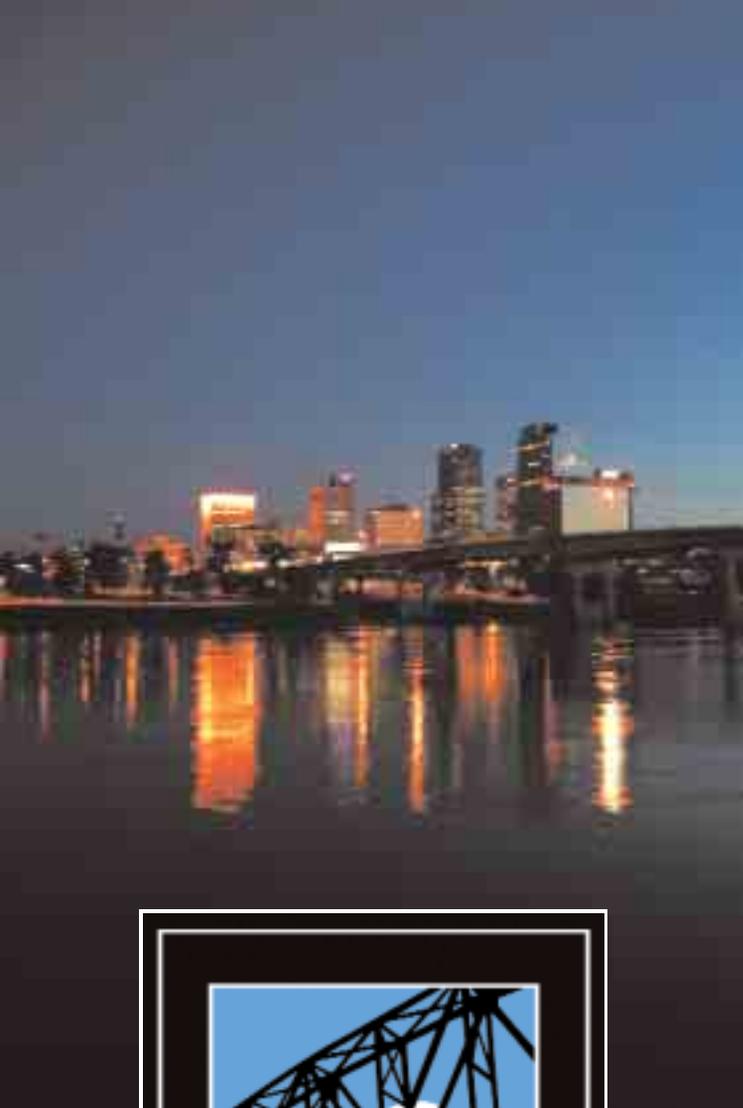
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CONVENTION & VISITORS BUREAU

The jubilant crowds that packed the lawn of the Old State House Museum nearly a decade ago to celebrate Bill Clinton's presidential victory have long gone, but the excitement and energy that filled the air that evening have not diminished. Throughout the 1990s and into the 21st century, Little Rock has been a city in renaissance, thanks in large part to its bustling River Market entertainment district along the banks of the Arkansas River. Other landmark developments have occurred as well, including the expansion of the city's Statehouse Convention Center, the opening of the new Peabody Little Rock hotel and the groundbreaking for the Clinton Presidential Library and Center.

The city has also recently adopted a new slogan, "Little Rock: City Limitless." The slogan is part of the Little Rock Convention and Visitors Bureau's new marketing campaign for 2002.

"We've come a long way and we think the best is still ahead for Little Rock," said Barry Travis, the bureau's chief executive officer. "We truly feel the city's potential is limitless."

Travis added that he believes Little Rock will become one of the region's top tourist destinations in the near future. Leading the way to that goal is the River Market entertainment district, a once abandoned warehouse district along the banks of the Arkansas River that has been transformed into a bustling entertainment area. It features specialty shops, art galleries, restaurants and nightspots. There's also the Museum of Discovery, the Central Arkansas Library and a farmer's market on Tuesdays and Saturdays from May to October.

The district will get a major boost in 2004 when the Clinton Presidential Library and Center opens. Construction on the project, which will anchor the district to the east, was expected to begin in the spring of 2002. In addition, Heifer International, a Little Rock-based organization dedicated to finding long-term solutions to world hunger and poverty, has plans to build the Heifer International Center on 30 acres adjacent to the library. The center will feature the first global village in an urban location authentically depicting housing and living conditions for impoverished people on five continents.

While the future looks bright, Little Rock already has plenty to see and do. The best place to begin a visit to Little Rock is at the city's new visitor information center located at historic Curran Hall. The center, which opened in May 2002 after a \$1.4 million restoration, features information on the tourism offerings of both the city and state.

Among the city's must-see attractions are the Old State House Museum, Arkansas' first capitol building, which gained international attention when Bill Clinton held victory parties here in 1992 and 1996; the Historic Arkansas Museum, which features some of the city's oldest buildings as well as exhibits on Arkansas history; the Arkansas Arts Center, which is known for its internationally recognized collection of draw-

Little Rock

ings; the Central High School National Historic Site, a civil rights landmark made famous in 1957 during the city's struggle to integrate its public schools; and the Little Rock Zoo, the home of about 600 animals including lowland gorillas, chimpanzees and orangutans.

Little Rock's newest museum is the MacArthur Museum of Arkansas Military History, located in the historic Tower Building of the old Little Rock Arsenal where Gen. Douglas MacArthur was born in 1880. Other highlights in Arkansas' capital city include the Aerospace Education Center and IMAX Theater, which has permanent and changing exhibits about aviation plus an IMAX theater, and the Museum of Discovery, an interactive museum featuring hands-on exhibits on telecommunications, electricity, robotics and more.

In addition to these attractions, Little Rock is home to the Arkansas Symphony Orchestra and Ballet Arkansas, which regularly perform in the city's Robinson Center. Theatergoers enjoy the Arkansas Repertory Theatre, Murry's Dinner



Playhouse productions and other community theater productions. Traveling Broadway productions are also regularly presented at Robinson Center.

Festivals and special events are also part of Little Rock's offerings. Each

Memorial Day weekend, thousands of people fill the city's Riverfront Park and the River Market District for Riverfest, the state's largest music, arts and food festival. And each summer, the Wildwood Park for Performing Arts presents the Wildwood Festival



featuring a variety of musical performances ranging from jazz to opera. Another popular special event is the Little Rock Convention and Visitors Bureau's "Big Downtown Thursdays" celebration featuring live music and dancing on Thursday evenings in May and September.

Dining is another major component of Little Rock's tourism industry. Visitors and travel writers often comment about the array of high-quality restaurants Little Rock offers for a city its size. Visitors can choose from more than 400 restaurants serving food ranging from Southern barbecue to sautéed salmon fillet.

Little Rock is also known for its fine selection of first-class accommodations. The latest addition is the Peabody Little Rock, located adjacent to Statehouse Convention Center in what was formerly Arkansas' Excelsior Hotel. The 418-room Peabody Little Rock, which has undergone a multi-million-dollar renovation, serves as the city's main convention hotel. Across the street from the Peabody is one of the city's most treasured institutions — the Capital Hotel.

Shopping is a favorite activity for locals and visitors to Little Rock. From the River Market District in downtown to Chenal Parkway and Bowman Curve in west Little Rock,

there's no shortage of shopping opportunities here. The Hillcrest and Heights areas are known for their "village" atmospheres with boutiques, antique shops and other specialty shops, while central Little Rock is home to the city's two major malls - Park Plaza and University. The area's largest mall - McCain Mall - is located across the Arkansas River in North Little Rock.

And while Little Rock is definitely a growing metropolitan area, it's no concrete jungle. In fact, you are never far from nature in Little Rock. With more than 50 city parks, Little Rock is often described as a city in a park. Within these parks are golf courses, hiking and biking trails, picnic facilities and more. On the city's western edge lies Pinnacle Mountain State Park, which features wooded hiking trails and an arboretum.

For more information on Little Rock, call: 501-370-3290; 1-877-220-2568 or visit us online at: www.littlerock.com

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Board Member Hope Hartz

First let me say that I appreciate this opportunity to write and “tell my story” about my experience being on the Arkansas State Board of Nursing. Since this is my eighth and final year on the Board (I cannot be reappointed without a break) and hold the longest tenure of any of the current Board members, I felt privileged to write this article.

If any one word comes to mind when thinking about this experience, it is OPPOSITES. First of all, when I came on the Board, I had the idea that the Board’s mission is to protect nurs-



es. As I will explain later they do accomplish a lot of that. But primarily, when one sits on the Board’s side of the table it becomes ingrained over time that the Board’s primary mission is one of protection of the public, a sacred trust placed in us to protect patients from unprofessional and illegal nursing actions. This mission is at the heart of democratic government, when representatives of the people are chosen to enact laws, rules of conduct (in our case the *Arkansas Nurse Practice Act*) and professional Boards and Commissions are formed to “police ourselves” and hold high the standards of nursing practice. Once the reality of this mission begins to sink in, one realizes the responsibility of the decisions that are made. The Board must serve both the nurses and the public. Thus, one of the main

functions of the Board is disciplinary action. However, many nurses are actually “helped” through the disciplinary process. It has been gratifying on the one hand to see many nurses use the disciplinary process as a time of personal introspection and self improvement, coming back as both stronger persons and better nurses. It is sorrowing to me, however, to see the nurses who do not take advantage of discipline to accomplish these positive ends and continue in the downward spiral of drugs or other forms of substance abuse. It is also disappointing to realize how many nurses do not own and read a copy of the *Nurse Practice Act* and the “Grounds for Discipline.” The lack of professionalism shown by nurses who choose not to attend their own hearing is also very distressing.

Opposite to discipline is the prevention of violations of the *Nurse Practice Act*. In the last several years the Board has tried to be more proactive in this area. We have emphasized activities such as communication with Arkansas nurses via the Web. We’ve made personal visits to groups around the state to educate nurses on the importance of reading the *Nurse Practice Act* and the “Grounds for Discipline.” Hopefully we’ve helped nurses define their scope of practice through the “Decision-Making Model” (Position Statement 98-6).



I have learned many things by being a Board Member. I have a better understanding of how state boards and regulatory commissions function and how our board participates in a national link called the National Council of State Boards of Nursing. It is run very professionally and provides a national forum for discussion of regulatory issues in nursing. I have had the opportunity as a Board Member to go to these national forums a couple of times and have been impressed by the level of organization and order, both at the meetings and behind the scenes. I have provided my perspective on advanced nursing practice in our meetings and I’ve had the chance to listen to the perspectives of other types of nurses. I have served on several task forces enabling me to meet many fine nurses from across the state and learn from their perspectives and about problems they have faced. This process of listening and learning from

others and the spirit of the group are my most cherished experiences. I will never cease to be amazed at the collec-

tive wisdom of this group and to marvel at the variety of experience of your current Board members. I feel honored to have been chosen to serve in this group. I have received much more than I have given—both professionally and personally. Thank you for the opportunities that I have had for the last eight years.

ADH Prepares for Bioterrorism

Nurses Counted and Prepared

A survey form will soon be sent to all Arkansas nurses to determine the nurse resources available to handle emergency health incidents throughout the state. The Arkansas Department of Health (ADH), the Arkansas State Board of Nursing and the Arkansas Nurses Association have collaborated on this survey, which will be mailed this month to each nurse licensed and residing in Arkansas. Completing this survey is necessary for a nurse to become part of the Health Alert Network.

The Health Alert Network, covering 90 percent of the population, is an information infrastructure used by the ADH to detect, respond to and manage public health emergencies. Their goal is to set up a statewide network to enable quick and efficient communication between public safety officials and health care providers in the event of a community emergency.

The ADH will provide management of the nursing workforce during emergency situations in the following ways:

1. ADH Health Alert Network will maintain a database of nurses who have registered with ADH through

the Health Alert Network survey, had disaster training, had credentials cleared and maintain current contact information.

2. Toll-free telephone numbers will be used to accept and filter spontaneous nurse volunteers from both within Arkansas and out-of-state, and assign them as needed and as deemed appropriate by ADH.

3. ADH Health Alert Network can alert key portions of the entire nursing workforce as certain skills are identified and required, i.e. the need for nurses who are knowledgeable and skilled in immunization.

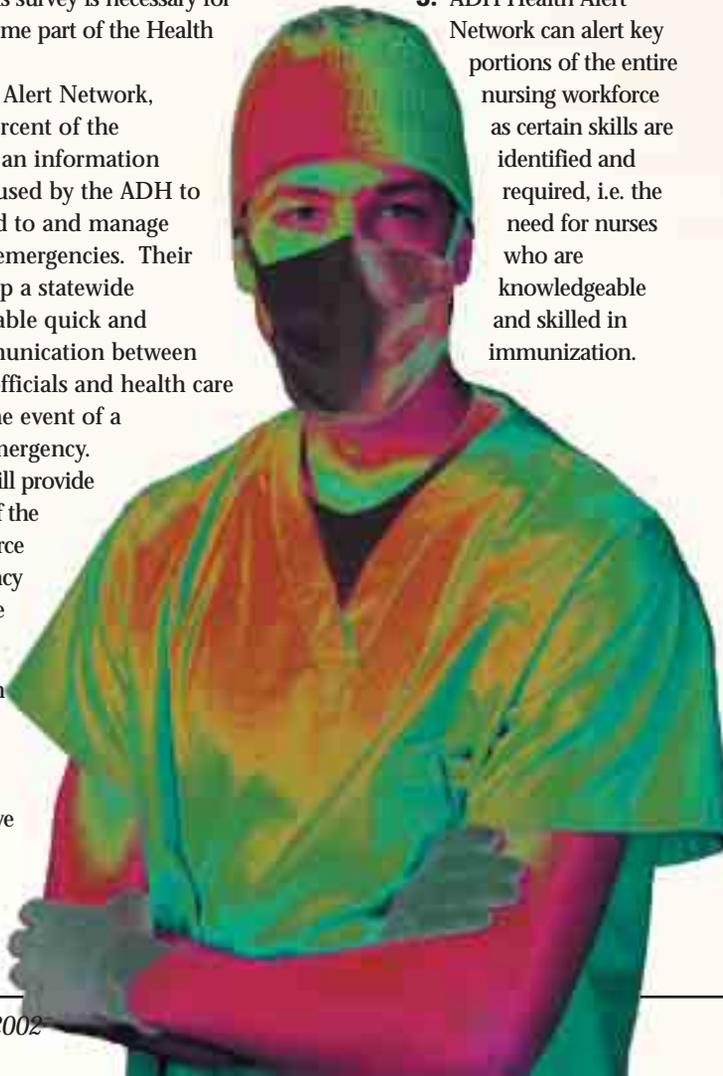
In addition to management of the nursing workforce, the Health Alert Network will provide education to prepare the nursing workforce to serve effectively in an emergency situation. A communication system with the nursing workforce, both ongoing and during emergency situations, will be developed utilizing the web, fax and mail.

Situation Assumptions are as follows:

- Arkansas nurses will be activated by appropriate Arkansas Department of Health contacts to the ADH Director, Fay W. Boozman, MD, MPH.
- Arkansas nurses will be activated when the local supply of nurses is insufficient to meet the depth and breadth of the emergency.
- Nurses employed or on staff at an acute care hospital will first fulfill the responsibilities of their institution disaster plan before volunteering into the system.
- Nurses employed in a local, county or state public health system will first fulfill the responsibilities of their entity before volunteering into the system.

The ADH and Health Alert Network welcomes Arkansas nurses whose diverse skills and experience will be a great asset to Arkansas during health emergencies.

Questions may be directed to the Health Alert Network Director, Terence Sutphin at 501.661.2081 or at tsutphin@healthyarkansas.com.



Attorney General Says Okay To Give Samples

In a long-awaited decision, Attorney General Mark Pryor put to rest the issue of whether advanced practice nurses with prescriptive authority could give out pre-packaged drug samples. The Boards of Nursing and Pharmacy requested an official Attorney General's opinion regarding advanced practice nurses with prescriptive authority having the implied authority pursuant to applicable law to give sample prescription drugs to patients. His response was that, "...it is my opinion that advanced practice nurses with prescriptive authority do have the implied authority to give sample prescription drugs to patients."

In formulating the opinion, the Attorney General cites the *ASBN Nurse Practice Act and Rules and Regulations*, which provide for the advanced practice nurse with prescriptive authority to receive and prescribe drugs, medicines or therapeutic devices appropriate to the advanced practice nurse's

He further states, "An interpretation of the prescriptive authority statute under which advanced practice nurses have the authority to receive drugs, but do not have a corresponding authority to give such drugs to patients would lead to an

absurd result. The clear intent was that these nurses be permitted to receive drugs so that they could give them to patients."

The full opinion can be found under AG Opinions Online for August 2001 at www.ag.state.ar.us.

"...it is my opinion that advanced practice nurses with prescriptive authority do have the implied authority to give sample prescription drugs to patients."

area of practice and to receive pre-packaged drug samples. He states that these, "...statutory and regulatory provisions and holdings lead me to conclude that under Arkansas law, advanced practice nurses have implied authority to give prescription drug samples to patients."



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APN Q&A

Q On the license renewal form, there is a requirement for a copy of current national certification. What happens if I forget to renew my certification?

A Current national certification is a requirement for advanced practice licensure. When your certification lapses, your APN licensure also lapses. If you have prescriptive authority, it will also lapse.

Q I notice that online renewal is now an option for APNs. How do you check for current certification with online renewals?

A Random audits of online renewals are being conducted. Falsification of the online renewal would be grounds for disciplinary action.

Q Are APNs required to have a certain number of continuing education hours? If so, are they required in the APNs specialty area?

A APNs are required to maintain current national certification for licensure. You should contact your national certifying body for specific requirements to maintain your national certification. Maintenance of current national certification meets the continued competency requirements for renewal of your Arkansas license.

Q Is there a specific number of hours I have to practice every two years to keep my APN license current and active?

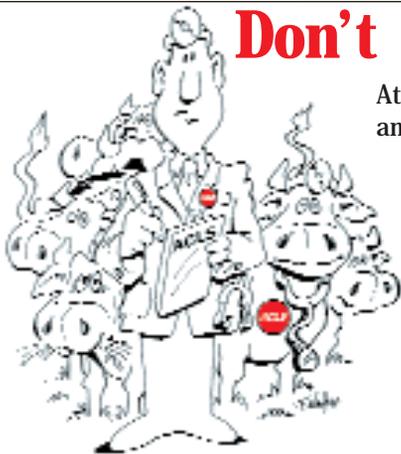
A The ASBN does not have a practice requirement for license renewal. You would need to check the practice requirements of the certifying body that was the basis for the issuance of your advanced practice license.

Q I am changing my practice site to another clinic. What do I need to do in relation to my collaborative practice agreement?

A According to *ASBN Rules and Regulations* Chapter Four Section VIII. D.3.e., "The APN shall consult the Board for direction the next working day following termination of the collaborative practice agreement." A notice faxed to 501.686.2714 regarding the termination of the collaborative practice agreement will suffice. An **original** collaborative practice agreement should be mailed to the Board when you establish a new practice relationship.

Q I am thinking of volunteering in a free clinic? Do I need another collaborative practice agreement?

A You will need a collaborative practice agreement with the physician who will be available for consultation and referral at the clinic. If this physician is the same as the one with whom you now collaborate, there is not a need for another collaborative practice agreement. If not, you will need a collaborative practice agreement with the medical director of the clinic.



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*This meeting is sponsored by the **Little Rock VA Geriatric Research, Education and Clinical Center (GRECC)** and the **Arkansas Geriatric Education Center.***

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Perhaps you, like many other nurses, have a number of patients who should be receiving yearly mammograms and Pap smears. Many of those patients may be unable to pay for the testing due to a lack of insurance. Now there's help. BreastCare provides reimbursement for mammograms, clinical breast exams, and Pap smears.

Cancer treatment, if needed, is available to patients who qualify through a collaborative effort of the Arkansas Department of Human Services and the Arkansas Department of Health to offer a new Breast and Cervical Cancer Medicaid category. During the period of coverage, your patient will be entitled to the full range of Medicaid benefits. Treatment of breast and cervical cancer is covered as well as other necessary medical care. Medicaid coverage continues as long as the patient is receiving cancer treatment. Your patient's Medicaid application must be made through the Arkansas Department of Health by calling toll-free 1-877-670-CARE (2273).

You are a valuable resource. Now you can assist your patients in obtaining the tests and treatment they need, thanks to BreastCare. If you are age 40 or older, you need to take care of yourself too. Say "Yes" to a mammogram and Pap smear, if needed, every year.



Patients should call
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address change

RECEIVE ASBN UPDATE, BUT NOT RENEWAL FORM? OR HAVE A NEW ADDRESS? A NEW NAME?

Although you received this *ASBN Update*, your current address may not be on file with the Board. The addresses on this journal were derived from a program that incorporates United States Postal Service address changes. But, the ASBN must mail all official mail - licenses and renewal forms - to the last address you submitted to the Board.

Pursuant to the *ASBN Rules and Regulations Chapter Two Section X*, a licensee shall immediately notify the Board in writing of an address change. The change may be made online at www.arsbn.org, faxed to 501.686.2714 or mailed to the Board office. The Board does not accept address changes by telephone. There is no fee for an address change.

A licensee whose name has legally changed may apply for a replacement license by submitting the current license(s), the required fee of \$10.00, and a copy of the marriage license or court order for each license. (The court order must specifically state the new name to be used.) For your convenience, use this form for either an address or name change.

IT IS IMPERATIVE THAT THE BOARD HAVE YOUR CURRENT NAME AND ADDRESS

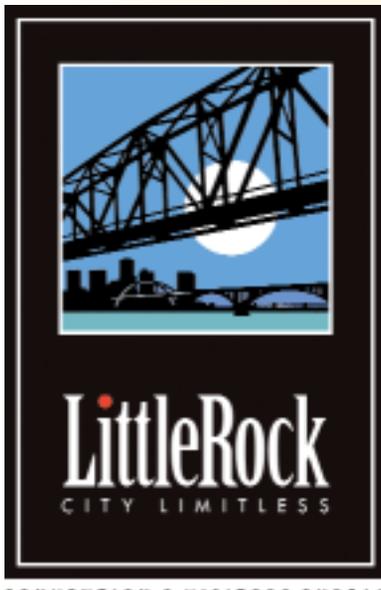
On all changes, please provide the following:

SS #:	ADDRESS CHANGE / NO FEE (Or online at www.arsbn.org)
LICENSE #:	NAME:
I DECLARE MY PRIMARY STATE OF RESIDENCE TO BE:	NEW ADDRESS:
SIGNATURE: (MUST BE SIGNED)	CITY, STATE, ZIP, COUNTY
NAME CHANGE (Certified copy of marriage license or court action must accompany fee.)	
CURRENT NAME:	ENTER LICENSE NUMBER AND ENCLOSE \$20.00 FOR EACH LICENSE HELD.
ADDRESS:	LPN _____ \$20.00 _____
CITY, STATE, ZIP, COUNTY	LPTN _____ \$20.00 _____
FORMER NAME (LAST, FIRST, MIDDLE, MAIDEN):	RN _____ \$20.00 _____
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Video/Facilitation Packages Focus On Professional Challenges

National Council of State Boards of Nursing has produced three video/facilitation packages on professional challenges that will be valuable for every nurse in every practice setting at every level of practice. Each curriculum was developed to provide a turnkey multimedia educational program that can be used by educators and managers in a variety of academic and clinical settings. The packages provide state-of-the-art information on highly sensitive subjects while reducing preparation time needed by the facilitator.

Each package contains valuable instructor facilitation tools: master overheads for projection, facilitator's notes, interactive learning exercises and a detailed reference list. Accompanying the facilitation materi-

als is a video designed to promote discussion and reinforce instruction. The videos blend expert opinions with dramatization. Component parts add versatility depending on the learner's needs, educational level and the amount of time available for the training.

Breaking the Habit: When Your Colleague Is Chemically Dependent (2001)

This video tackles one of the most serious problems facing the nursing industry by focusing on the experience of one chemically dependent nurse and her co-workers. The viewer is presented with two different scenarios with very different outcomes that illustrate the dilemmas that colleagues face.

The program presents the topic of reporting colleague drug addiction in a captivating and empathetic manner and provides a comprehensive intervention strategy.

Crossing the Line: When Professional Boundaries Are Violated (1998)

This video promotes nurses' awareness of the challenges presented by maintaining effective professional boundaries by telling the story of one nurse who fails to recognize the warning signs of over-involvement, and by showing what can happen if appropriate boundaries are not identified and maintained. A positive approach to preventing problems, identifying possible interventions and developing a repertoire of responses is stressed. The program also addresses that underinvolvement (when a nurse does not sufficiently connect with a client) can also result in a client with unmet needs and a nurse who is professionally unfulfilled.

Delegating Effectively: Working Through and With Assistive Personnel (Summer 2002)

This video provides the foundation for developing solid delegation skills. It outlines a step-by-step approach to insure the best way to meet client needs by working effectively through and with others, specifically assistive personnel.

Each complete package is priced separately at \$279 and may be purchased through Niche Communications, nichecom@comcast.net or 410.335.2618. Sample clips can be found online at www.nclex.com.

Source: NCSBN Council Connector, May 2002.

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Nurses Are Required To Report!

Did you know that you are required to report to the Arkansas State Board of Nursing your knowledge of any violation or attempted violation of the *Nurse Practice Act of the State of Arkansas*? "Failing to report to the Board within a reasonable time of the occurrence, any violation or attempted violation of the Arkansas Nurse Practice Act or duly promulgated rules, regulations or orders" is considered "unprofessional conduct" as stated in *Arkansas State Board of*

"Failing to report to the Board within a reasonable time of the occurrence, any violation or attempted violation of the Arkansas Nurse Practice Act or duly promulgated rules, regulations or orders" is considered "unprofessional conduct"

Nursing Rules and Regulations Chapter Seven Section XV A.6.j.

When reporting a possible or actual violation, include concise, factual information regarding the incident, along with the nurse's full name. Also submit the license number, if available. It is not required for complainants to give their names. Below are violations that should be reported:

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Northwest Medical Center of Washington County 688 W. Maple Ave., Springdale, AR 72764 479-757-4430

- **POSITIVE DRUG SCREENS:**

On a positive pre-employment urine drug screen, send the letter of complaint as well as a copy of the urine drug screen with the chain of custody and quantitative levels, if available. On random and for-cause (reasonable suspicion) positive urine drug screens, send a letter of complaint. The Board will issue a subpoena for the results.

- **SUSPECTED NARCOTIC THEFT (DIVERSION):**

Arkansas Department of Health Rules and Regulations states that, "...each practitioner and long term care facility shall notify the Division of Pharmacy Services and Drug Control at the Arkansas Department of Health, immediately upon discovery of any suspected loss, theft and/or diversion of any controlled substance." An investigation by the ASBN may be conducted based on the type of information submitted.

- **FALSE DOCUMENTATION:**

Falsifying employment applications, medical records, time sheets, etc. are all considered "unprofessional conduct." Copies of the falsified documents and other supporting documents should be submitted.

- **PATIENT NEGLECT/ABUSE:**

Witnessing a nurse mistreating a patient, family member or others in the performance of his/her duties should be reported at once to the immediate supervisor and then to the ASBN.

- **PRACTICE ISSUES RESULTING IN TERMINATION:**

If a nurse has been terminated due to practice issues, documents that support the decision should be submitted. Individuals who are employed by supplemental staffing agencies but are providing nursing care in a contracted facility should be reported by the nurse most familiar with the attempted violation.

Nurses, not the facilities, are responsible for reporting violations. The Board's mission is to protect the public, and your reports of actual or suspected violations of the *Nurse Practice Act* are investigated with disciplinary action taken when indicated. Your timely reports, while being your legal responsibility, assist the Board in providing public protection.

Please contact Phyllis DeClerk, Director of Nursing Practice, if you should need additional information.

DISCIPLINARY ACTIONS – APRIL AND MAY 2002

The full statutory citations for disciplinary actions can be found at 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 penalties (CP), specific education courses (ED), and research papers (RP).

Each individual nurse is responsible for reporting any actual or suspected violations of the Nurse Practice Act. To submit a report 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.

LETTER OF REPRIMAND

Bringham, Valerie Nicole Anderton
L38585, (a) (6)

Burke, Deronda Renee
R51455, (a) (1) & (9)

Byers, Angela Dawn Steiner
L38701, (a) (6)

Clark, Cathy A. Laningham
L25620, (a) (6)

Cook, Karen Elizabeth Roper Papasan
R56065, (a) (6), CP \$700, RP

Crippen, Linda Lee Rosenberger
L12339, (a) (6)

Frachiseur, Yevonda Rene
L37722, (a) (6)

Lacayo, Marjorie Paige
L33167, (a) (6)

Laughlin, Kathy L.
L16438, (a) (1) & (9)

Long, Sandra Jean Adeski
R54986, (a) (6)

Manning, Daphine Jean
L33649, (a) (6), CP \$650, RP

Minton, Christa Ann
L36067, (a) (6)

Parkin, Kathleen Faye Shoemaker
R42770, (a) (6)

Peters, Becky Lynn
L34831, (a) (6)

Profit, Jocylyn Annette
T01499, (a) (6)

Smith, Kathy Arlene Kelly Farnam Kelly
L22735, (a) (6)

Vail, Phyllis Ann
R22685, (a) (6)

PROBATION

Avery, Larry Dudley
L25878, (a) (6) & (9), CP \$700

Brooks, Judith Renee Rose
R45434, (a) (4) & (6), CP \$800

Carter, Tammy Rena Swan
L26820, (a) (6), CP \$700

Covey, Deanna Lynn Irvin Brinkley
L36355, (a) (6) & (9), CP \$1000

Evans, Teresa Joanne Chatham
R63458, (a) (4) & (6), CP \$900

Gyce, Donna Harris
L34537, (a) (6), CP \$600

Powell, Sharon Kaye
PN Applicant, CP \$1000

Welch, Jeanette Lazelle Aytch
James Brothers
R32424, (a) (6), CP \$700

Wyant, Rebecca Alene Hamby
R30368, (a) (4) & (6), CP \$700

SUSPENSION

Ballard, Charisse Camille
R66570, Probation non-compliance

Burton, Emma Kemp
L19823, Probation non-compliance

Cullum, Francilla Gail
L35296, Probation non-compliance

Dorman, Courtney
R56255, (a) (4) & (6) CP \$1500

Ferebee, Sandra Kaye Rodden
R40935, Probation non-compliance

Jenkins, Barbara Rowe
L34790, Probation non-compliance

Tims, Pam Johnson
R51388, Probation non-compliance

Winston, Jeff Wayne L28181
Probation non-compliance

VOLUNTARY SURRENDER

Aylett, Michael Day
R37777

Burnside, Christy Renee Cope Crisp
R50205, P01518

Mooney, Annetta Marie
L34028

IMPOSTERS

Swopes, Delinda
CP \$46,000

LICENSURE OR PERMISSION TO TAKE NCLEX DENIED

Brennan, Katherine Mary Botta Rains
RN Endorsement Applicant

Taylor, Karla Sue Foster
NCLEX-RN® Applicant

LICENSURE OR PERMISSION TO TAKE NCLEX GRANTED

Allen, Shakeylla Starr
NCLEX-PN® Applicant

PROBATIONARY STATUS REMOVED

Abney, Theresa Dee Thomas
L26753

Brown, Tina Ann Leary
R39946

Isaac, Helen M. Hawkins Depriest
L38812

Rice, Rhonda Gail Smith
R54208

Schimelpfenig, Robert Clark
R20230 C00230

REINSTATEMENT TO PROBATIONARY STATUS

Cox, Natalie Renee Phillips
L37547, CP \$500

Knight, Regina Denise Mosley Crossland
R30440

ASBN HOT CHECK NOTICE

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 Darla Turner at 501.686.2705 if any are employed in your facility.

Bradley, Rosa Marie.....L16658

Hughes, Kelley.....L34380

Long, Debra A.L25461

Lucas, Cassandra.....R48826

Skinner, Kim.....L15451

Williams, Sally F.L26287

Williams, Sommer D.L36335

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- The Chronicle, AFMC's annual report;
- The Hub, AFMC's internal newsletter;
- Healthy Family Jubilee, a series of festivals held throughout the state offering free mammograms and other health screenings;
- Save the Antibiotic, an educational booklet for children and parents designed to explain when antibiotics are appropriate for treating illness;
- Save the Antibiotic public service announcements and radio, television and print advertisements;
- Guard Against Breast Cancer, a brochure designed to encourage African-American women in Arkansas' Delta Region to get mammograms;
- "Race for the Cure" t-shirt design;
- AFMC's Quality Conference video.

All winners are listed in the May 2002 issue of Healthcare Marketing Report and on the publication's website at: <http://www.hmrpublicationsgroup.com>

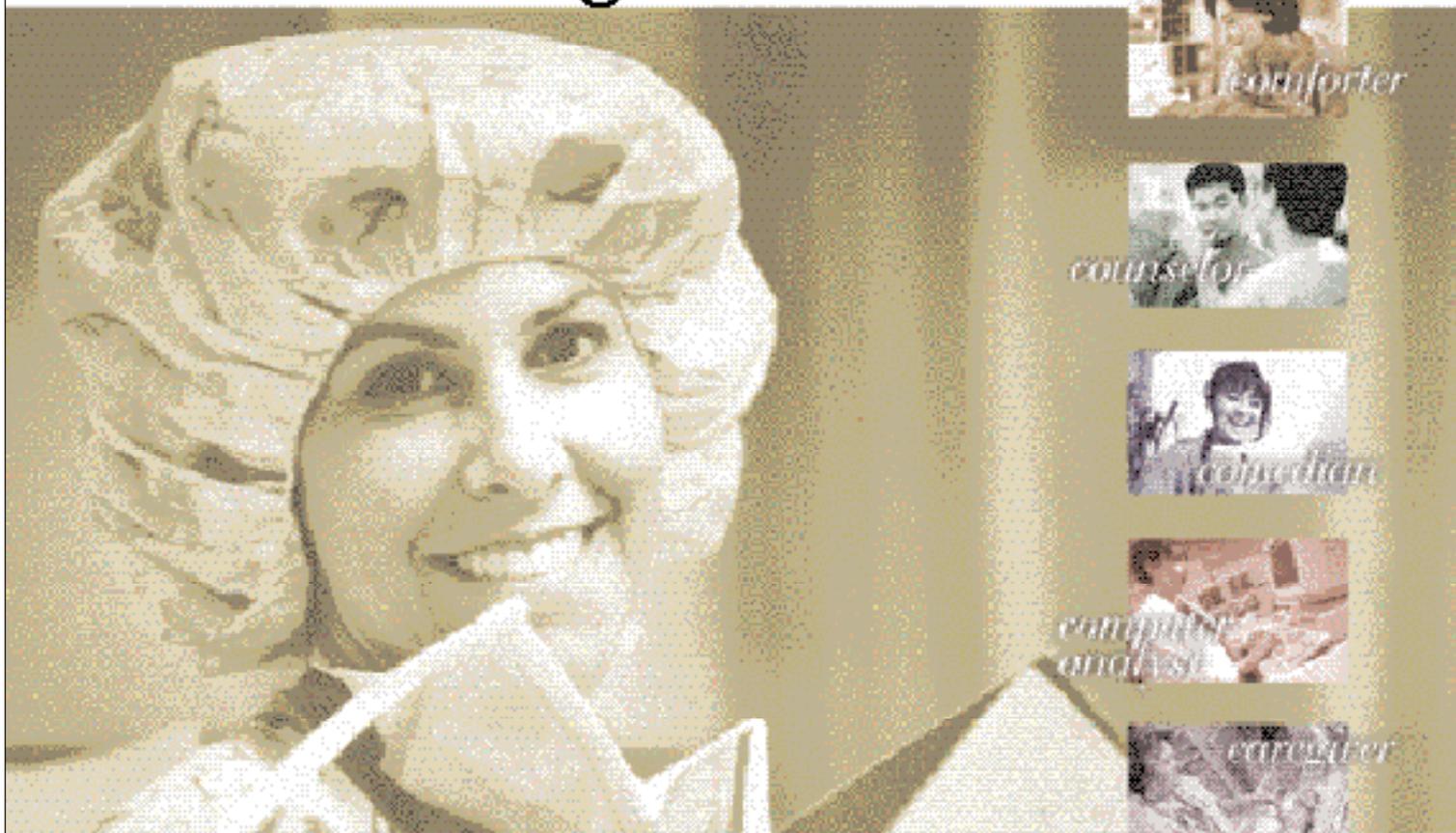
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