

ASBN UPDATE

President...Karen Buchanan, RN
 Vice-President...Hope Hartz, APN
 Michael Canney, Representative of
 Older Population
 Lorenda Cox, LPN
 Janie Cumpton, LPN
 Shirlene Harris, RN
 Carolyn Saulsbury, RN



Treasurer...Karen Taylor, LPTN
 Secretary...Carol Austin, LPN
 Martha Tyler, LPTN
 Earnestine Taylor, Consumer
 Lawana Waters, RN
 Clemetine Wesley, RN
 Dan West, RN
 Dona Young, LPTN

Executive Director...Faith A. Fields, MSN, RN

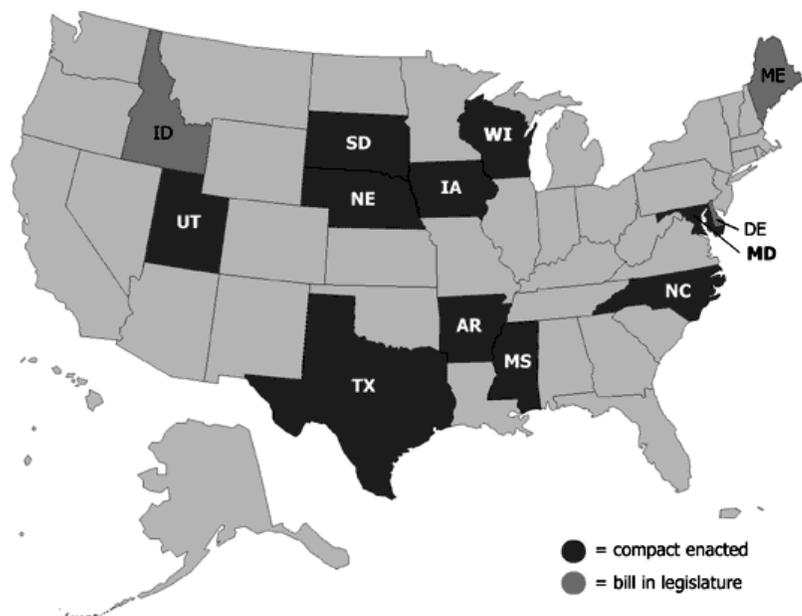
Editor...Georgia C. Manning, MN, RN

PRACTICING NURSING ON AN EXPIRED LICENSE

The number of nurses who practice nursing after their license has expired is increasing. Those who practice nursing on an expired license may receive disciplinary action and a civil penalty. The disciplinary action remains in the nurse's license history permanently. All licensed nurses practicing in Arkansas should remember:

- Licensees born in even-numbered years renew their licenses by the last day of their birth month in even-numbered years. Licensees born in odd-numbered years renew their licenses by the last day of their birth month in odd-numbered years.
- Renewal applications are mailed 6-8 weeks prior to the license expiration date.
- Renewal applications are mailed to the last known address of the licensee. A written notice of address change may be mailed or faxed to the Board.
- Failure to receive a renewal application does not relieve the licensee of the responsibility for renewing on time.
- The renewal application must be complete and accompanied by the required fee. Advanced practice nurses must also provide evidence of current certification prior to the expiration date.
- Any person practicing nursing on an expired license is considered an illegal practitioner.

If you have questions about these or any other policies regarding the practice of nursing in Arkansas, you may call or write the Board of Nursing.



NURSE LICENSURE COMPACT

On July 1, 2000, Arkansas will enter into the Nurse Licensure Compact with **Iowa, Maryland, North Carolina, Texas, Utah and Wisconsin**. Other states have signed on to the compact and the effective dates for their legislation vary (see table on page 5). A nurse may hold only one compact state license. This one compact state RN or LPN license will be recognized by any state that has signed on to the compact. (The Nurse Licensure Compact does not apply to LPTN or APN licensure.) Frequently asked questions on the compact follow:

Q: How will the Nurse Licensure Compact affect nurses who live in compact states?

A: After July 1, a nurse who resides and holds an unencumbered license in our state or in any of the other compact states listed above will have the "multistate privilege to practice" in any of the other compact states. If there is a change in primary state of residence, the nurse is required to apply for and obtain a nursing license in the new state of residence. The nurse may work on the "compact" license for 30 days in the new compact state of residence while awaiting licensure there.

Q: What does a multistate privilege to practice mean?

A: Similar to the driver's license, this is the mechanism in the Nurse Licensure Compact that allows a nurse who is licensed in one compact state (home state) to legally practice in another compact state (remote state). It is important to understand that the Nurse Licensure Compact requires the nurse to adhere to the practice laws and rules of the state where practicing. In the case of electronic practice (telenursing), the nurse must adhere to the practice standards of the state in which the client receives care. Practice laws and regulations for each state can be found at www.nursingboards.org.

continued on page 5

Office Location

1123 S. University
University Tower Bldg.
Ste. 800
Little Rock, AR 72204

Phone: 501/686-2700

FAX: 501/686-2714

Website: www.state.ar.us/nurse

Office Hours

Monday thru Friday:
8:00 a.m. - 4:30 p.m.

Staff**Faith A. Fields, MSN, RN**

Executive Director

Phyllis DeClerk, RN

Director of Nursing Practice

Karen Hawkins

Director of Accounting & Information Services

Deborah Jones, RN, MNsc

Assistant Director of Nursing Practice

Fred Knight, JD

General Counsel

Georgia C. Manning, MN, RN

Director of Advanced Nursing Practice

Jackie Murphree, EdD, MNsc, RN

Director of Nursing Education Programs

Margie Brauer, Licensure Certification

Naomi Bryant, Licensure Renewal

Chad Calhoun, Computer Services
Specialist

Sarah Gibson, Disciplinary Coordinator

Tami Hill, Editorial Assistant/Advanced
Practice Secretary

Cindy Scheu, Data Entry Secretary

Mary Stinson, Education Secretary

Catherine Thomey, Examinations/
Endorsements Coordinator

Melinda Thornton, Executive Assistant

Nancy Walker, Receptionist/Cashier

*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.*

**Message from the President,
Karen Buchanan**

What an exciting, challenging and rewarding time to be a nurse in Arkansas. Nursing has always been a dynamic profession, but is more so today with rapid advances in technology, knowledge and global communications. The ASBN strives to be proactive instead of reactive as we face these challenges.

This is a special newsletter from several perspectives. It is the third annual mailout sent to all licensees to update them on Board actions in the past year. There are newly promulgated rules and regulations related in this newsletter which will affect most licensees. As in previous years, disciplinary actions, lost and duplicate licenses and certain items are not included in the annual mailout, but may be found in the newsletters that are posted on the website after Board meetings.

This newsletter contains critical information on the interstate compact. As of July 1, 2000, Arkansas will be joined by six other states in mutual recognition of the interstate compact. Several other states are in the process of obtaining legislative approval, so the number of states involved should steadily increase.

The criminal background checks through the Arkansas State Police went into effect February 1. A criminal background check will be required before any new graduate will be allowed to take the NCLEX. All endorsement applicants will be required to have criminal background checks also. We continue to see increasing numbers of disciplinary cases. Working on an expired license is considered unprofessional conduct and may result in disciplinary action.

The Board reviewed several national certifying exams for advanced practice nursing and determined that they did not meet the requirements set forth in the *Arkansas State Board of Nursing Rules and Regulations*. Chapter Four, Section VII. These certifying bodies did not meet the requirement that the applicant complete an organized program of nursing education in the advanced practice nursing category being certified.

Invasive nursing procedures were defined as nursing acts which require entry into the body, including but not limited to urinary catheterization, feeding tube insertion and maintenance, oral/pharyngeal suctioning, trach and ostomy care and injections. Adoption of the Delegated Medical Acts Position Statement and revision of the Decision Making Model Position Statement will allow licensees to determine if acts are within their scopes of practice. Position statements on chest tube removal and laser hair removal were rescinded.

The PN equivalency for RN Program non-completion was approved to become effective July 1, 2000. We established a probational approval category for nursing programs not meeting the minimum NCLEX passing rate.

The Telenursing Subcommittee of the Nursing Practice Committee has been meeting to create a position statement on telephone triage. The School Nurse Subcommittee has been active developing guidelines for school nurses that clarify their scope of practice. The Prescriptive Authority Advisory Committee drafted the position statement on Prescribing for Self and Others and proposed changes in *Rules and Regulations*. Chapters Three and Four found on page 7. The ASBN Continued Competence Task Force held a workshop on continued competency with nurses attending from all around the state. This task force is developing a model to ensure continued competence of licensees on renewal and reinstatement.

We are aware of the challenges and the rewards we face in the future. The ASBN is committed to our mission to protect the public and act as their advocate by effectively regulating the practice of nursing. I wish to express my appreciation for the opportunity I have to be involved in this mission.

Karen Buchanan

NEXT BOARD MEETING DATES - 2000

August 16 Wednesday Disciplinary
August 17 Thursday Disciplinary

The public is invited to attend ASBN Meetings. Groups of more than five should contact Melinda Thornton at 501/686-2704 for scheduling.

RNP & APN PROPOSED RULEMAKING

At the May 18 business meeting, the Board approved proposed changes in *Arkansas State Board of Nursing Rules and Regulations*. Chapters Three and Four recommended by the Prescriptive Authority Advisory Committee (PAAC). In Chapter Four, Section VIII. A. 3, the proposed change would stipulate that the advanced pharmacology course include a competency component and be offered only by an accredited college or university. This would eliminate acceptance of continuing education courses sanctioned by a national continuing education accrediting body. The PAAC denied acceptance of the Contemporary Forums advanced pharmacology course as meeting the requirements for prescriptive authority.

A proposed change in Chapter Four, Section VIII. A. 6. would stipulate that the advanced practice nurses who will prescribe controlled substances *shall* (as opposed to *should*) seek a collaborative practice with a physician who has an unrestricted DEA registration number.

Another proposed rule change, originating in the PAAC and approved by the Board, allows the APN without prescriptive authority to transmit a prescription order orally or telephonically or to inpatient medical records from protocols developed in collaboration with and signed by a licensed physician. This provision is only available while the APN is accruing the 1000 hours necessary to apply for prescriptive authority.

Proposed changes in Chapter Three, Section II. would terminate the issuance of *new* registered nurse practitioner licenses after November 30, 2000. Proposed changes in Chapter Four that would allow the new APN to transmit orders from protocols during the thousand hours of practice required for the certificate of prescriptive authority would eliminate the need for new graduates to seek the RNP license.

RNPs currently licensed may continue to renew their RNP license as before. For additional information, please contact Georgia Manning, Director of Advanced Nursing Practice.

ASBN NOMINATED FOR NATIONAL COUNCIL AWARD

The Texas Board of Registered Nursing Examiners has nominated the Arkansas Board for the National Council's Member Board award. The award recognizes the Member Board which has made an identifiable, significant contribution to the purposes of the National Council in promoting public policy related to the safe and effective practice of nursing in the interest of public welfare. Excellence of contribution is the main criterion for selection of recipients.

As a part of their written nomination of Arkansas for this award, Kathy Thomas, Executive Director of the Texas Board, writes: "On a personal note, and as a border state, I have found this agency to be exceedingly cooperative in their timely response to requests and their concerted efforts to examine regulatory criteria which create increased uniformity in requirements and processes. This is an agency that demonstrates vision and creativity in regulation. It is with great pleasure that I nominate this outstanding board of nursing for their contributions to excellence in nursing regulation."

LICENSE VERIFICATION AVAILABLE VIA TELEPHONE

The Board of Nursing now has available an integrated voice response (IVR) system to verbally verify nursing licenses. This automated system allows the caller to enter a nurse's social security number or license number and receive information regarding licensure status.

The phone verification system is available twenty-four hours a day, seven days a week. To access the IVR, phone 501/682-2200 and follow the directions below:

1. To check an RN license press 1; for an LPN license press 2; and to check an LPTN license press 3.
2. Enter the social security number or license number (omit letter) followed by the pound (#) key.
3. Please wait while the system checks for the license. If the nurse is found, the first few letters of the last name will be read.
4. If this is correct press 1. To enter another license number press 2 or to end the call press 9.
5. The system will read out the license status and expiration date.
6. If the information is required to be given by a Board of Nursing staff member, the system will transfer the call automatically to the Nursing Practice Department. When the office is closed, the system will notify the caller to contact the office during normal business hours.

An agency requiring written verification should contact the Information Network of Arkansas at www.state.ar.us/ina/subscribe.html or 501/324-8900 to subscribe to their service.

RENEW LICENSES ONLINE!

The Arkansas State Board of Nursing announces online renewals for RN, LPN and LPTN licenses starting July 1, 2000. Certain restrictions will apply. Details are available at www.state.ar.us/nurse.

NAME TAGS: A WORD FROM THE EXECUTIVE DIRECTOR

It seems that everybody wears scrub clothes these days. They're comfortable, neat and practical for much of the work nurses do. But, if I'm a patient, how do I know if you are a nurse or the housekeeper if you both have on scrubs? The patient should know because nurses are REQUIRED (*ASBN Rules and Regulations* Chapter One, Section III.) to wear insignia to inform the public that they are nurses.

The insignia may be a name tag, badge or even monogramming on a lab coat. This insignia must show the nurse to be an LPN, RN, RNP or APN, whichever the case may be. If a name badge provided by the employer does not clearly identify the nurse type, then you should wear a name pin or some other insignia that meets the requirements of being clearly legible and readily identifiable.

This identification separates the nurse from those individuals who are doing nursing functions but are unlicensed personnel. The public has a right to expect their caregivers to have completed a program and proven themselves to have the knowledge, skills and abilities to practice safely.

According to Arkansas law, no person may call himself/herself a nurse or use any title or initials to imply that he or she is licensed as a nurse unless they do, in fact, hold a license from the Board of Nursing.

Wear a name tag and let your patients know that you are a nurse. It not only helps your patients, it's the law!

Steve O. Walker, MSN, RN

ACTIVE LICENSEES JUNE 1, 2000

	Non-Res	Residents	Total
RN	5219	23672	28891
LPN	1943	14896	16839
LPTN	22	530	552
CRNA	262	287	549
CNM	5	20	25
ANP	62	369	431
CNS	7	75	82
RNP	121	1055	1176
RX	28	341	369

FEES INCREASE IN JULY

Effective July 1, 2000, the following fees will be due every two years, except for prescriptive authority which is a one-time-only fee.

	OLD	NEW
RN	\$25	\$40
LPN/LPTN	\$25	\$35
Duplicate License	\$5	\$10
RX Authority	\$25	\$100

FORMS OF DISCIPLINARY ACTION LEVIED BY BOARD

Within each monthly issue of the *ASBN UPDATE* is a listing of disciplinary actions taken since the previous edition. Many of the disciplinary actions are consent agreements, which are negotiated agreements between the Board and the nurse as a result of a substantiated violation of the *Nurse Practice Act*. When imposing disciplinary action, the Board attempts to select the remedy which will most appropriately protect the public, bearing in mind the unique circumstances and specific facts of each individual case. The following are the most common disciplinary actions:

Letter of Reprimand - The nurse is admonished for a particular conduct.

Civil Penalty - A monetary fine which may be imposed with any disciplinary action.

Probated License - Retention of the nurse's license is contingent upon meeting specific requirements. These might include taking courses, abstaining from abuse-potential substances, providing proof of compliance with the random urine drug screening program, and/or submitting reports from an employer who is monitoring the individual's nursing practice.

Suspended License - The license must be surrendered. The nurse is prohibited from practicing nursing for a definite period of time. The nurse is also prohibited from using any title which implies licensure as a nurse or

from functioning in any position requiring a nursing license. Mechanisms for reinstatement are outlined in the disciplinary order.

Revocation - The Board bars the nurse from the practice of nursing in Arkansas. Subsequent relicensing is not possible. This is the most stringent disciplinary action and is used only in extremely serious circumstances.

All of these disciplinary actions are reported to the Disciplinary Data Bank of the National Council of State Boards of Nursing, which then reports to the Healthcare Integrity and Protection Data Bank. (See article below.)

A non-disciplinary administrative remedy sometimes used is as follows:

Letter of Warning - A non-disciplinary letter which will notify individuals, on whom certain types of complaints have been filed, that disciplinary action will follow if they continue such acts. These letters may be removed upon request of the licensee after six months, in the absence of additional complaints.

Board disciplinary and administrative actions result in official documents. The documents are classified by the Arkansas Freedom of Information Act as public information and are available upon written request.

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

ASBN UPDATE ONLINE

Issues of the *ASBN UPDATE* for the last year are available at the Board's website, www.state.ar.us/nurse.

ASBN REPORTS TO HEALTHCARE DATA BANK

All governmental agencies and health plans are responsible for reporting and disclosing certain final adverse actions taken against healthcare providers, suppliers and practitioners to the Healthcare Integrity and Protection Data Bank. HIPDB was established under Section 1128E of the Social Security Act as added by Section 221(A) of the Health Insurance Portability and Accountability Act of 1996.

Information on healthcare providers, suppliers and practitioners that will be available through the HIPDB includes:

- Licensing and certification actions.
 - Revocation, reprimand, suspension (including length), censure, probation.
 - Any other loss of license, or right to apply for, or renew, a license of the provider, supplier, or practitioner, whether by voluntary surrender, non-renewability or otherwise.
 - Any other negative action or finding by a federal or state licensing and certification agency that is publicly available information.
- Civil judgements.
- Criminal convictions.
- Exclusions from federal or state healthcare programs.
- Other adjudicated actions or decisions.

Those able to access the HIPDB will include federal and state government agencies, health plans, healthcare practitioners, providers, and suppliers (self-query), and researchers (statistical data only). The Board of Nursing will participate by reporting final disciplinary actions on nurse licensees.

IT'S THE LAW

All address changes must be reported to the Board in accordance with the *ASBN Rules and Regulations*, Chapter Two, Section X. Pursuant to the *Rules*, a licensee shall ***immediately*** notify the Board in writing of an address change.

Although you received this *ASBN UPDATE*, your current address may not be on file with the Board. This newsletter was mailed by an outside firm that uses United States Postal Service address changes. The ASBN must mail all official mail - licenses and renewal forms - to the last address you submitted to the Board.

The Board will not accept address changes by telephone. The change may be faxed (501/686-2714) or mailed to the Board office. There is no fee for an address change.

A licensee whose name is legally changed may apply for a replacement license by submitting the current license(s), along with a notarized statement, copy of marriage license or court order, and the required fee of \$10.00 for each license.

For your convenience, the form on the back of the *ASBN UPDATE* may be used for either an address or name change.

CONTROLLED SUBSTANCE LOSS

Federal law requires that healthcare agencies or individuals who hold DEA registration notify their local DEA office of the theft or significant loss of any controlled substance at the time the loss or theft is discovered.

The Arkansas Department of Health Rules and Regulations Pertaining to Controlled Substances requires each practitioner and long-term care facility to notify the Division of Pharmacy Services and Drug Control, Arkansas Department of Health at 501/661-2325, immediately upon discovery of any suspected loss, theft and/or diversion of any controlled substance.

CRIMINAL BACKGROUND CHECKS ARE HERE!

Effective February 1, 2000, a state criminal background check showing no violations is required prior to licensure by exam or endorsement.

The Board also has the authority to request criminal background checks on current license-holders if it is deemed necessary. The Board relies primarily on self-report of criminal convictions upon renewal for current license holders.

Falsification of the applicant's criminal record history is grounds for disciplinary action by the Board.

For further information, or questions regarding Arkansas' requirements, contact Dr. Jackie Murphree, Director of Nursing Education Programs.

PRESCRIBING FOR SELF/FAMILY POSITION STATEMENT APPROVED

On November 18, 1999, the Board voted to adopt the Prescribing for Self and Family Position Statement drafted by the Prescriptive Authority Advisory Committee at its September 29 meeting.

Position Statement 99-3

Prescribing controlled substances and other legend drugs for self and family raises many ethical questions. Prescribing for self and family members has inherent risks related to lack of objectivity. Effort should be made to discuss the condition with the collaborating physician. In addition, the *Arkansas State Board of Nursing Rules and Regulations*, Chapter Four, Section VII.C. 3, 5, outlines the documentation requirements for prescribing.

The Arkansas State Board of Nursing has determined that the advanced practice nurse with prescriptive authority may prescribe for self and family under the following circumstances:

1. There shall be a medical record on the patient/client to document the prescription of the medication.
2. The prescription must be within the prescriber's scope of practice.
3. The prescription shall be documented on the medical record in accordance with *Arkansas State Board of Nursing Rules and Regulations*, Chapter Four, Section VII.C. 3-5, portions of which are reprinted below:

The APN shall note prescriptions on the client's medical record and include the following information:

- | | |
|-----------------------------|----------------------------------|
| a. Medication and strength; | d. Direction for use; |
| b. Dose; | e. Number of refills; and |
| c. Amount prescribed; | f. Initials or signature of APN. |

PRACTICE Q & A

Q: May student nurses who work in a facility outside of their school-directed clinical setting perform procedures that they have been "checked off" on by their clinical instructor?

A: Student nurses working as unlicensed personnel in facilities outside their school-directed clinical setting may only perform procedures as specified in the *ASBN Rules and Regulations Chapter Five*, Delegation. These are the same rules that apply to delegation to any unlicensed person working in a healthcare setting. Nurses may have disciplinary action taken against their licenses for inappropriate delegation.

Q: May nurses accept telephone orders from personnel working in the physician's office?

A: While the best route to receive orders is for the authorized prescriber to write the order or give it directly to the receiving nurse, there are times when this is not feasible. Nurses may accept verbal or telephone orders only from licensed personnel. The receiving nurse must know the name and licensure of the person who is relaying the order. Orders cannot be accepted from unlicensed personnel. The order must be documented according to the facility's policy that includes a listing of persons with their legal titles who were involved in relaying the order.

Q: What would the risk be to a nurse who works in a physician's office where medical assistants perform invasive procedures and administer medications?

A: The Delegation Chapter of the *Rules and Regulations* lists tasks which can be delegated without prior assessment, tasks that shall not be delegated and describes circumstances under which other tasks can be delegated if the five rights are met. Medication administration by any route is in the list of tasks that shall not be delegated to any unlicensed persons. Nurses who delegate to unlicensed personnel the performance of tasks other than as described in Chapter Five are subject to disciplinary action for unprofessional conduct.

SCHOOL NURSE GUIDELINES

In collaboration with the Arkansas School Nurses Association, the ASBN has developed guidelines for nurses practicing in schools. These guidelines are applicable to settings where nurses are acting in *loco parentis* or in place of the parent. A copy of the guidelines can be found at www.state.ar.us/nurse. Questions may be directed to Deborah Jones, Assistant Director of Nursing Practice.

COMPACT *continued from page 1*

Q: Will the nurse who lives in a non-compact state and practices in Arkansas still need to have a license to practice in Arkansas?

A: Yes. Nurses who practice nursing in Arkansas but live in a non-compact state, such as Louisiana, must continue to hold a license issued by the Arkansas State Board of Nursing. The Nurse Licensure Compact will not change how they obtain or renew their Arkansas license. However, the Arkansas nursing license will be a single state license for non-compact state residents. *It will not include the multistate licensure privilege to practice in other compact states.*

Q: Does the Compact affect military personnel?

A: Military personnel are governed by federal law and regulations and the Compact does not supersede that law.

Q: Where will nurses obtain/renew their licenses under this model?

A: Nurses must meet the requirements in their primary state of residence to obtain and renew their licenses. *Primary state of residence* as defined in the compact means "the person's fixed permanent and principal home for legal purposes; domicile." For a nurse who holds a license in more than one compact state, only the license issued by the nurse's primary state of residence will be valid after July 1, 2000. (Exemption for federal facilities applies.)

Q: How will complaints about nurses be handled within this mutual recognition model?

A: The compact authorizes the nurse licensing board of any compact state (home or remote) to investigate allegations of unsafe practice by any nurse practicing in that state. Based upon the outcome of the investigation, a remote compact state licensing board may deny the nurse's privilege to practice in that state. Only the nurse's home state (state of residence) licensing board may take action against the nurse's license. States will continue to apply the same administrative and due process procedures for imposing discipline as they have always done. However, compact states will have more timely access to information, including current significant investigative information and the disciplinary history of nurses, through the coordinated licensure information system called *NURSYS*.

Q: How do I get more information about the Nurse Licensure Compact?

A: The National Council's website www.ncsbn.org has a current list of all the states that have enacted the Nurse Licensure Compact and provides in-depth information on the mutual recognition model. Their website may also be accessed through the Board's website, www.state.ar.us/nurse. If you have specific questions about this new model of nursing regulation, please contact the Board office.

STATE	DATE
Arkansas	7/1/2000
Iowa	7/1/2000
Maryland	7/1/1999
Mississippi	7/1/2001
Nebraska	1/1/2001
N Carolina	7/1/2000
S Dakota	1/1/2001
Texas	1/1/2000
Utah	1/1/2000
Wisconsin	1/1/2000
Maine	By 9/2000
Delaware	Pending
Idaho	Pending

NURSING EDUCATION PROGRAMS

CONGRATULATIONS! The Board congratulates the following nursing education programs that achieved a 100% pass rate for the NCLEX during the calendar year 1999. All are practical nursing programs: Arkansas State University - Mountain Home, Baptist School of Practical Nursing, Black River Technical College, Foothills Technical Institute, Forest Echoes Technical Institute, Northwest Technical Institute, Pulaski Technical College, U of A Community College – Hope

CHANGES IN RULES & REGULATIONS

A summary of the most significant changes in *Arkansas State Board of Nursing Rules & Regulations* made this last year follows:

CHAPTER ONE

Section II. A. now allows the nurse to administer medications and treatments ordered by *any* practitioner authorized to prescribe and treat according to state law.

Section IV. gives a new term for nursing program approval: "PROBATIONAL APPROVAL – A status designated to a nursing education program which does not meet the minimum NCLEX passing rate established by the Board."

CHAPTER TWO

Section I. E. states, "... no person shall be eligible to receive or hold a license issued by the board if that person has pleaded guilty or nolo contendere to, or been found guilty by any court ... of any offense listed in Act 1208 of 1999."

Section II. stipulates that to be eligible to take the licensure examination, applicants must have a state criminal background check. The fee, set by the Arkansas State Police, is the responsibility of the applicant and is nonrefundable. The background check is valid for one year, so applicants retaking the exam and those seeking second licensure (APNs and RNPs) may need a repeat check.

Section II. H. also allows candidates who have completed a portion of an RN program to take the LPN licensure examination.

Successful completion of classroom instruction and clinical practice similar to the minimum requirements for practical nursing programs is mandated. The applicant will also be required to successfully complete a Board-approved course regarding the LPN role and scope of practice.

Section III. A., B. and C. cover the interstate nurse licensure compact. (See page one for more details.)

Endorsement into Arkansas is covered in Section IV. B. 4. allows for endorsement of candidates who have successfully completed a portion of an RN program if the classroom instruction and clinical practice is substantially similar to the minimum requirements for practical nursing programs (provided they are otherwise qualified). C. 3. states that the results of the criminal background check must be received prior to issuance of a permanent license.

Section V. gives more details on criminal background checks. Effective February 1, 2000, a state criminal background check will be required for all applicants for initial licenses for RNs, LPNs, LPTNs, RNPs and APNs. A state background check will be

conducted by the Arkansas State Police and shall be completed no earlier than twelve (12) months prior to application for initial licensure.

There is a provision for an applicant to request a waiver if denied licensure pursuant to the provisions of Act 1208 of 1999. The request for a waiver shall be made in writing within thirty (30) calendar days after notification of denial of a license. The request for waiver must include, but is not limited to the following: (1) certified copy of court records indicating grounds for conviction and (2) any other pertinent documentation to indicate surrounding circumstances.

After receipt of the request for hearing in writing, the ASBN will schedule the individual for a hearing pursuant to the Arkansas Administrative Procedures Act.

Section VI. outlines the process for the issuance of temporary permits, after federal criminal background checks are initiated, to endorsement applicants who have no violations on their Arkansas criminal background check. Federal criminal background checks will not be implemented until after the next legislative session.

Section X. states that the licensee shall notify the Board *in writing* of a change in address. This rule is repeated in Chapters Three and Four for registered nurse practitioners and advanced practice nurses.

CHAPTER FOUR

Revision of Section II. C. 3. says that certified nurse midwives will need a written agreement with a consulting physician *only* if providing intrapartum care.

Section VIII. A. 4. allows one year from the initiation of an advanced pharmacology course to complete the 300-hour preceptorship. B. 1. and 2. lists how an APN with prescriptive authority in another state may apply for endorsement. The applicant must provide documentation that the prescriptive authority is current and that they have prescribed 1000 hours in the past year. A history of DEA registration, if applicable, is also required.

If prescriptive authority is lost, the APN must meet requirements of the Board to be reinstated (G. 2.) In Section IX. C., provision was made in the Prescriptive Authority Advisory Committee for the members to be reappointed.

CHAPTER SIX

Section I. C. outlines the process for nursing programs to be placed on "probational approval" for not meeting the minimum NCLEX passing rate. Probational approval

remains in effect until the program has maintained a minimum passing rate for two years. The nursing program's approval will be removed if the passing rate is not improved in four years.

Section II. L. sets the nursing program minimum NCLEX passing rate for first writes as 70%, increasing to 75%, effective January 2003. After the first year of an unacceptable passing rate, the program will receive a letter of concern and will be required to submit a report on the program with a plan of action for improvement. The second consecutive year of an unacceptable passing rate will necessitate the program administrator and institution head appearing before the Board to present an analysis of the problems and a further corrective plan of action. The program will be placed on probational approval at this time.

The full text of both the *Arkansas Nurse Practice Act* and the *Rules and Regulations* can be downloaded free from the website at www.state.ar.us/nurse or ordered from the Board office for seven dollars.

NCLEX-PN® MAY BE TAKEN IF PART OF RN PROGRAM COMPLETED

The Board voted in October 1999 to adopt the Uniform Core Licensure Requirements developed by the National Council of State Boards of Nursing, to become effective July 1, 2000. As part of the core requirements, applicants who have completed equivalent courses in a state approved registered nursing program may be admitted to the NCLEX-PN provided they are otherwise qualified.

Criteria for eligibility to write the NCLEX-PN under the equivalency provision include the following:

- Successful completion of coursework in an RN education program approved by the ASBN or a similar board in another state.
- Academic courses with clinical components in medical-surgical, maternity and pediatric nursing; general education courses in anatomy and physiology; and course content in growth and development, mental health, pharmacology and nutrition, completed with a minimum grade of "C."
- The last nursing course of the RN program completed no longer than two years prior to application.
- Successful completion of a Board approved practical nurse role and scope of practice course.

Arkansas State Board of Nursing
 1123 South University, Suite 800
 Little Rock, AR 72204

Bulk Rate US Postage Paid LITTLE ROCK AR Permit 588
--

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

Has your name or address changed? If so, please complete this form and return it to:
Arkansas State Board of Nursing, 1123 S. University, Suite 800, Little Rock, AR 72204

ADDRESS CHANGE <i>(NO FEE)</i>	For identification, please provide the following:
	SSN# _____
Name: _____	License # _____
New Address: _____	I DECLARE MY PRIMARY STATE OF RESIDENCE TO BE: _____
City, State, Zip, County _____	SIGNATURE: (MUST BE SIGNED) _____

NAME CHANGE

(Notarized copy of marriage licence or court action must accompany fee.)

Current Name: <i>(Last, First, Middle, Maiden)</i> _____	ENTER LICENSE NUMBER AND ENCLOSE \$10.00 FOR EACH LICENSE HELD.	
	LPN _____	\$10.00 _____
Address: _____	LPTN _____	\$10.00 _____
	RN _____	\$10.00 _____
City, State, Zip, County _____	APN _____	\$10.00 _____
	RNP _____	\$10.00 _____
Former Name <i>(Last, First, Middle, Maiden)</i> _____		Total _____