

ASBN *Update*

August/September 2018
Volume 22 • Number 4
www.arsbn.org



CELEBRATING OUR YOUNG NURSING LEADERS



ALSO IN THIS EDITION:
DISCIPLINE 101:
KNOW YOUR SCOPE
OF PRACTICE

APRN CORNER —
ANTIBIOTIC
STEWARDSHIP



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Celebrating Our Young Nursing Leaders

The Arkansas Center for Nursing hosted the 4th annual 40 Under 40 Awards Ceremony on June 29, 2018. This is a time forty nursing leaders under the age of forty are recognized for their ability to lead in the nursing profession. Each nominee must demonstrate their commitment to excellence, outstanding service and outreach, strong leadership qualities and contribute to the advancement of the nursing profession. Nominees come from many areas of nursing, such as bedside nursing, research, education and management.

THE 2018 HONOREES WERE:

- Brandi Alred, Conway Regional Health System
- Codi Anthony, University of Arkansas for Medical Sciences
- Melissa Bryant, Central Arkansas Veterans Healthcare System
- Katie Cox, Conway Regional Health System
- Stacy Dowdy, Howard Memorial Hospital
- Rachel Everett, White River Health System
- Rachel Farris, Baxter Regional Medical Center
- Sarah France, University of Arkansas for Medical Sciences
- Amanda Frost, University of Arkansas for Medical Sciences
- Gabriel Gartman, Conway Regional Health System
- Rebecca Graves, Baptist Health
- Toccara Gray, Baptist Health
- Sydney Harrell, Arkansas Children's Hospital
- Latecia Hence, Central Arkansas Veterans Healthcare System
- Stacy Hicks, CHI St. Vincent Health System
- Nickolas Hopkins, University of Arkansas
- Jaclyn Johnson, University of Arkansas
- Jayme Lemon, Baptist Health
- Brandon LeQuieu, Kindred Hospice
- Joshua Lingo, Central Arkansas Veterans Healthcare System
- Jessica Lock, Jefferson Regional Medical Center
- Sarah Loftin, Arkansas Surgical Hospital
- L. Taylor Loggins, Helena Regional Medical Center
- Lauren McCurry, University of Arkansas for Medical Sciences
- Lindsey Miller, Arkansas Children's Hospital
- Ebony Morgan, Central Arkansas Veterans Healthcare System
- Michelle Peppers, University of Arkansas for Medical Sciences
- Ashley Pierce, Conway Regional Health System
- JoEtta Powell, Central Arkansas Veterans Healthcare System
- Jourdan Quinn, Central Arkansas Veterans Healthcare System
- Anthony Reed, Baxter Regional Medical Center
- Jena Reekie, Conway Regional Health System
- Dustin Rhodes, Central Arkansas Veterans Healthcare System
- Brooke Richard, Conway Regional Health System
- Byron Robinson, CHI St. Vincent Health System
- Jacklyn Schneider, Central Arkansas Veterans Healthcare System
- Danielle Shelby, Central Arkansas Veterans Healthcare System
- Lauren Taylor, CHI St. Vincent Health System
- Devin Terry, University of Arkansas for Medical Sciences
- Jennifer Thornbrugh, Veterans Healthcare Systems of the Ozarks

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How to Positively Influence the FUTURE OF NURSING

As a nurse educator, I often get the opportunity to visit with nursing students following their clinical experiences, read their anonymous feedback from their clinical days and at times, I am fortunate enough to attend clinical with them. As we know, the nursing profession is practice-based and clinical experience is vital to the nursing student's education. The clinical experiences of the nursing student help to shape and prepare the new graduate nurse as they enter the workforce.

One common concern I hear from students across our state is that they often do not feel welcome in the clinical setting by the staff nurses. Too often, I hear, "They wanted us to work as an aide and I didn't have the opportunity to follow the nurse and learn the nurses' role." Learning activities and goals can be negatively influenced if they are treated with hostility, disrespect, or even ignored. This attitude interferes with the ability for the student to engage in the communication necessary to meet their educational goals. (Davey, 2003)

Unfortunately, poor treatment of nursing students is not uncommon and is often a direct result of being short staffed. The staff nurse may have an increased workload, lack teaching skills, or even feel threatened by the nursing student. (Davey, 2003)

Patient care is a priority, and as I discuss with my students, being able to do total care is valuable. After all, the best assessment comes during the bed bath, right? However, as we all know, students get many opportunities to do the fundamental skills in their early semesters of school. Once the students enter the hospital on the Medical-Surgical floor, it is vital that they learn to assess and respond to their assessment findings; perform skills that require nursing education and training, such as insertion and discontinuation of IVs and catheters; perform medication administration on multiple patients so they learn how to manage more

than one patient at a time and become familiar with a variety of medications.

The nursing students' education is highly dependent on the staff nurse caring for the patient(s) the students are assigned to that day. No, it is not the staff nurses' responsibility to educate the student, but as we all recall as former students, the nurse is who we were watching and learning from; the one we strived to model our behavior after and be like when we graduated and became a licensed nurse. Studies have shown "...that the relationship between the staff and the nursing students is the single most crucial factor in creating a positive learning environment." (Cahill, 1996)

I recently had the opportunity to attend clinical with my students at a large facility in central Arkansas. The nurses at this facility were phenomenal and were eager to educate and engage with the nursing students. They quizzed the student, showed them not only their role, but explained to them why things were done the way they were. The attitudes, professionalism and collegiality modeled by the nurses at this facility made me proud of our profession, and the students experienced one of the best clinical experiences they have had thus far. Students were eager to say that the welcoming attitude and professionalism demonstrated by their nurses made their clinical experience amazing, and they truly learned so much from them.

So, how can you make a difference? There are certain characteristics of a good clinical teacher that have been identified. As a staff nurse who has nursing students on their unit, you can be instrumental in assisting in their education. The characteristics that will benefit the profession and future of nursing include being supportive and encouraging, approachable and friendly, helpful, understanding, and most importantly, welcoming.

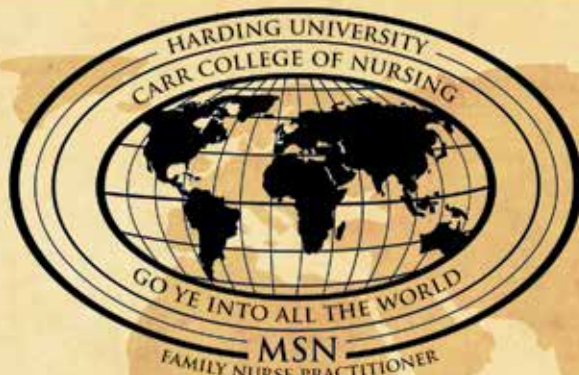
How do you make a student feel welcome? Staff nurses can help orient the student to the unit, the routine, and the people they will encounter; introduce students to other healthcare professionals involved in the care of their patients; encourage students to engage in all aspects of their patients' care; and involving the student in the problem-solving and decision-making process.

By acting as a role model, you can have a significant effect on the educational experience of nursing students who are soon to become our future nurses. Recognize that you have valuable skills and knowledge to share with the students and that by being patient, welcoming, and positive, YOU can have a positive influence on the future of nursing!



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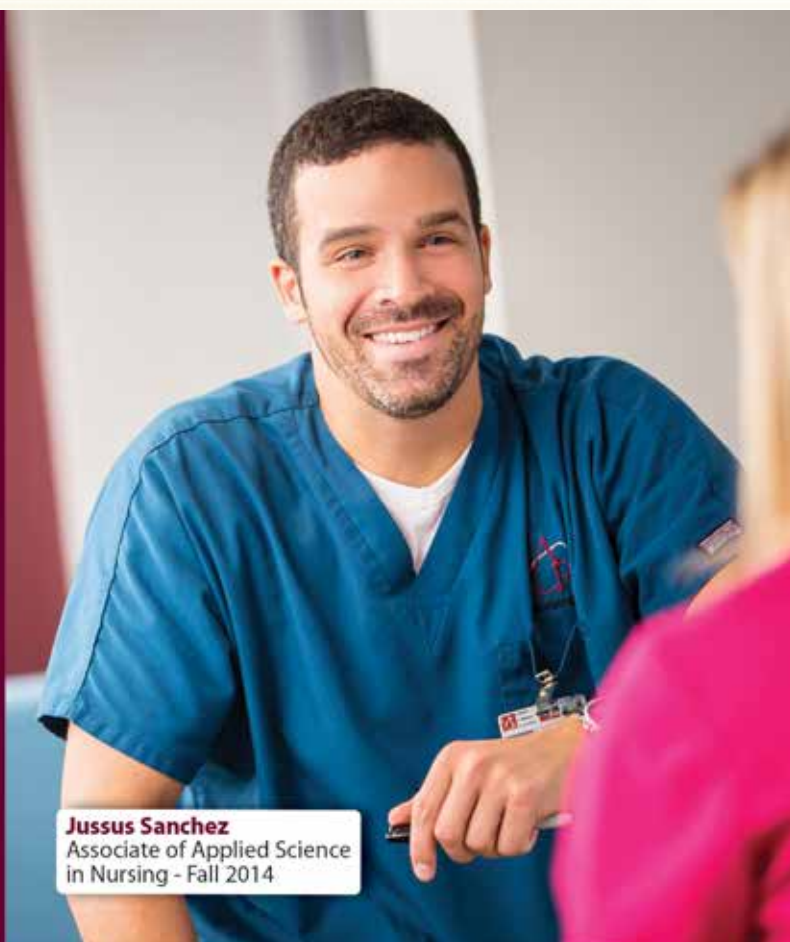
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Special Notice about the Arkansas State Board of Nursing Magazine

The Arkansas State Board of Nursing has designated this magazine as an official method to notify nurses residing in the state and licensed by the Board about information and legal developments. Please read this magazine and keep it for future reference as this magazine may be used in hearings as proof of notification of the *ASBN Update's* contents. Please contact LouAnn Walker at the Board office (501.686.2715) if you have questions about any of the articles in this magazine.



Standing, L to R: Renee Mihalko-Corbitt, APRN; Janice Ivers, RN; Melanie Garner, LPN; Rachel Sims, RN; Lance Lindow, RN; Stacie Hipp, APRN; Pamela Leal, RN, Rep. of the Older Population; Haley Strunk, LPN; Neldia Dycus, RN. Seated, L to R: Mike Burdine, RN, Treasurer; Yolanda Green, LPN, Vice President; Ramonda Housh, APRN, President; Kaci Bohn, Ph.D., Consumer Representative, Secretary

BOARD BUSINESS

President Ramonda Housh presided over the hearings held on July 11-12. Highlights of Board actions are as follows:

- Approved Faith A. Fields Nursing Scholarship Loan Recipients for Fall 2018:
 - Harwell, Amanda – University of Arkansas at Little Rock
 - Lindsey, Lori – Henderson State University
 - Richey, Kelsey – Arkansas State University
 - Ridgell, Jessica – University of Arkansas at Hope

- Riley, Elizabeth – American Sentinel
- Scalzo, Brook – University of Arkansas for Medical Sciences
- Smith, Nicole – Arkansas Tech University
- Underwood, Sara – University of Arkansas for Medical Sciences
- Approved Faith A. Fields Nursing Scholarship Loan in Memory of Jill Hasley Recipients for Fall 2018:
 - Ferguson, Susan – University of Arkansas at Fayetteville
 - Smith, Wesley – University of Arkansas at Little Rock

BOARD DATES

2018

September 12	Hearings
September 13	Business Meeting
October 10	Hearings
October 11	Hearings
November 14	Hearings
November 15	Hearings



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DISCIPLINE 101

Know Your Scope of Practice



Scope of practice questions arise daily. Nurses contact board staff with concerns that they may be placing their license in jeopardy when an employer requires them to perform duties that the nurse may or may not have been trained. The nurse has to consider competency-based practice and how the type of basic licensure preparation, practice experience and professional developmental activities will affect what each nurse is capable of in practice.

Nurses are advised to utilize the Decision Making Model, Position Statement 98-6 when they have scope of practice questions. The model is available on the Arkansas State Board of Nursing's website at www.arsbn.org. The Decision Making Model aids the nurse in evaluating their competency to perform nursing skills while considering the responsibility and accountability of their nursing practice.

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. It is important for nurses to determine their personal scope of nursing practice. Nurses must understand their responsibility, both professionally and legally, in this dynamic discipline. The scope of nursing practice is constantly evolving and increasing in complexity.

Each state has enacted laws to define the practice of nursing. These laws are contained in the *Nurse Practice Act* (NPA) and interpreted through *Rules*. The NPA is written in broad terms so not to limit the scope of the nurse as practice evolves. The Decision Making Model follows on page 11.

An example of how to evaluate a practice situation through the algorithm is presented for your consideration. Consider the scope of practice issue question that is frequently

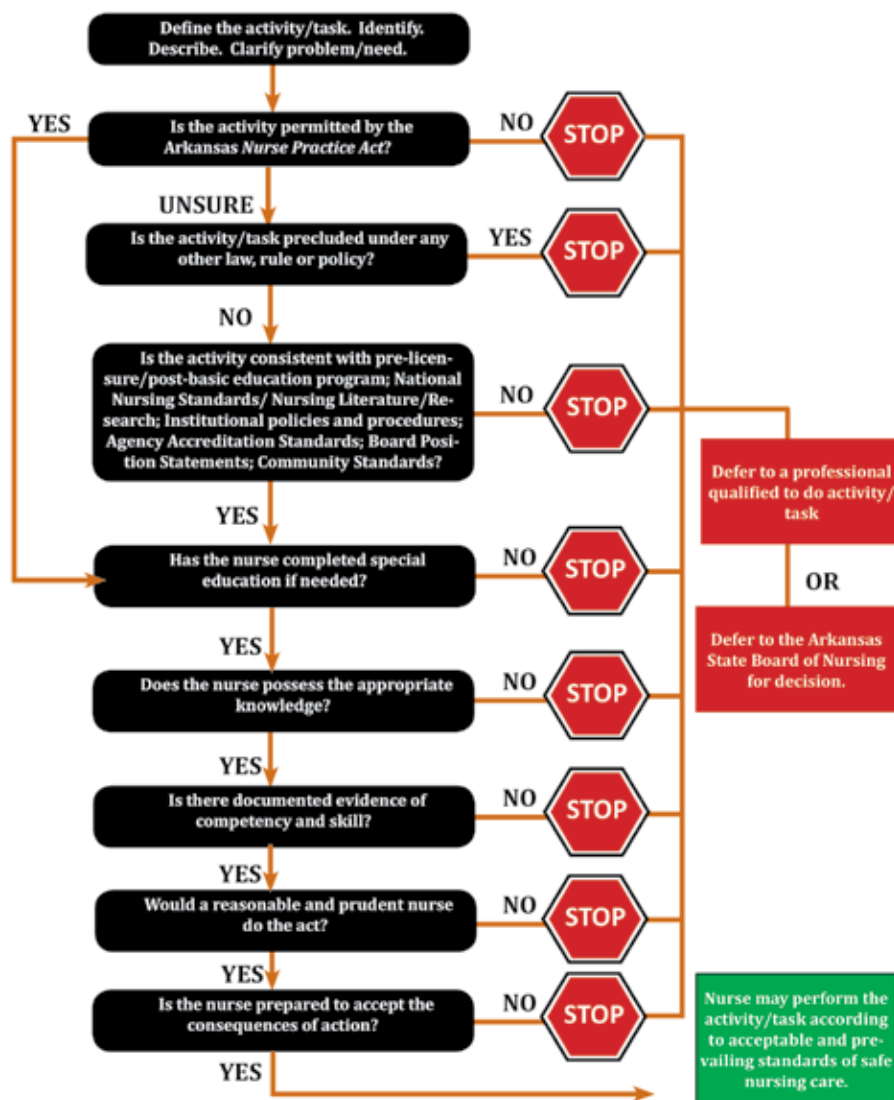
asked whether a nurse can insert a peripherally inserted central catheter (PICC line).

ISSUE: Is insertion of a PICC line in my scope of practice? Are you an LPN/LPTN or RN? When determining if a task is within the LPN/LPTN scope of practice, the first question you want to answer is "Does the task require Assessment, Diagnosis, or Planning? If the answer is yes, STOP — the task is not within the LPN/LPTN scope of practice. However, the RN is allowed to perform acts that require assessment. At any time if the nurse answers NO, then STOP — the insertion of a PICC line is not something the nurse is qualified to do based on personal experience and education or willingness to accept the responsibility. The nurse should defer to a professional qualified to do the act. If the nurse is willing to insert the PICC line but unsure if it is within their scope of practice, then consider the next question in the algorithm.

ACTIVITY PERMITTED: Is insertion of a PICC line permitted by the NPA? The NPA does not specifically address this act. Consider the next question in the algorithm.

ACT PRECLUDED: Is the insertion of a PICC line precluded under any other law, rule, or policy? Review of the Medical Practice Act does not declare this the practice of medicine. Consider the next question in the algorithm.

SCOPE OF PRACTICE DECISION MAKING MODEL



PRE- AND POST-LICENSURE EDUCATION and NATIONAL STANDARDS: Is insertion of a PICC line consistent with pre-licensure education curriculum or post-basic education program? While basic procedures are taught in RN programs, it is not the extent needed to provide PICC insertion. What has the RN learned in a post-basic education program? Some RNs will stop at this question. They may be new graduates or have not have gained experience and education in their practice. RNs need to consider National Nursing Standards/ Nursing Literature/ Research; Institutional policies and procedures; Agency Accreditation Standards; Board Position Statements; and Community Standards. Infusion Nurses Society supports a nurse's insertion of PICC lines with appropriate education and competency. Nursing literature also supports nurses with post-graduate education and experience. Consider the next question in the algorithm.

SPECIAL EDUCATION: The nurse answers this question based on personal experience and education. Consider the next question in the algorithm.

APPROPRIATE KNOWLEDGE: This answer is nurse specific. Consider the next question in the algorithm.

DOCUMENTED EVIDENCE OF COMPETENCY: Each nurse will have to answer this question. Each nurse will consider their personal experience and education. Consider the next question in the algorithm.

WHAT A REASONABLE AND PRUDENT NURSE WOULD DO:

Each nurse will consider their personal experience and education. Consider the next question in the algorithm.

ACCEPT THE CONSEQUENCES: This is a very personal decision. The nurse should defer to a professional qualified to insert the PICC line if they are not comfortable.

Once the nurse performs the requested act they are now legally accountable. If the nurse determines they are not competent or willing to perform the requested act, then the nurse should defer to a professional

qualified to do the act. The nurse always has the right to refuse any act if there are concerns for patient safety. Refusal of an act may have employment consequences, but if the nurse practices outside their scope of practice, they may be facing discipline on their license and nursing practice.

Learn how to work through the Decision Making Model. Collect the data as necessary to defend the decision to perform or refuse an act. If the nurse still has questions, then contact the Board of Nursing for assistance to work through the Decision Making Model.



ANTIBIOTIC STEWARDSHIP



Antibiotics are among the most commonly prescribed medications. However, up to 50 percent of the time they are prescribed unnecessarily. Overuse and misuse of antibiotics are the main driving factors behind antibiotic resistance. The sensitive bacteria are killed, but the resistant bacteria are left to grow and multiply.

The Centers for Disease Control and Prevention (CDC) estimates that each year in the United States, at least two (2) million people become infected with bacteria that are resistant to antibiotics resulting in 23,000 deaths. In addition, almost 250,000 people are admitted yearly to hospitals for treatment of *Clostridium difficile* (*C. difficile*) infections with the use of antibiotics as the major contributing factor. There are approximately 14,000 deaths from *C. difficile* infections yearly. Many of these deaths could be prevented.

Antibiotic resistant infections are also quite expensive. They add approximately \$20 billion in direct health care costs with a loss of \$35 billion a year in lost productivity.

Antibiotic prescribing practices vary widely and errors are common. In 2014, Arkansas was the sixth highest state for antibiotic prescribing. Many times health care providers can be too willing to meet patient's expectations for a prescription even when antibiotics are not necessary,

such as with viral respiratory infections.

Health care providers and prescribers of antibiotics must consider adopting CDC's principles of responsible antibiotic use, which is often called antibiotic stewardship. This is a commitment to use antibiotics only when necessary to treat/prevent disease, to choose the right antibiotic and to administer the antibiotic in the correct way in every case. It will ensure that every patient gets the maximum benefit from the antibiotic, will avoid unnecessary harm from allergic reactions and side effects and will help preserve the life-saving potential of these drugs for the future.

Please utilize the Arkansas Department of Health and the CDC websites for additional information on Antibiotic Stewardship. UAMS Learn on Demand has one (1) hour continuing education credit courses that may be used for pharmacotherapeutic CE maintenance. Go to <https://cdh.uams.edu/providers/education/learn-ondemand/> to enroll in a course.

REFERENCES

- <https://www.cdc.gov/antibiotic-use/>
- <https://www.cdc.gov/vitalsigns/antibiotic-prescribing-practices/>



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Women in Arkansas and across America face an urgent health crisis. Premature birth and its complications are the leading contributors to infant death in the United States and globally. The United States' preterm birth rate is among the highest in the developed world and continues to rise, according to the National Center for Health Statistics. There are also troubling racial and ethnic disparities in premature birth. Women of color are up to 50 percent more likely to give birth prematurely and their children can face a 130 percent higher infant mortality rate than white women.

March of Dimes, the leader in the fight to improve the health of moms and babies, has established an ambitious set of goals to reduce preterm birth rates in the United States. From the high of 12.8 percent in 2006, the goal is to reduce preterm births to 8.1 percent by 2020 and 5.5 percent by 2030. In Arkansas specifically, March of Dimes is working to decrease the rate of recurrent preterm birth from 8.5 percent in 2017 to 4.5 percent by 2020.

March of Dimes supports research toward solutions that ensure every baby is born healthy. The organization

provides resources and programs to help moms before, during and after pregnancy. The encouragement of optimal interpregnancy intervals (IPIs) or birth spacing is one intervention, supported by the March of Dimes, that is known to prevent preterm birth. Birth spacing is the period of time between giving birth and becoming pregnant again. Becoming pregnant too soon after having a baby increases the risk of premature birth and related complications in a subsequent pregnancy. Such problems include developmental delays, breathing problems, and vision and hearing loss.

Most women can reduce the risk of premature birth in a subsequent pregnancy by waiting 18 months after giving birth before becoming pregnant again. March of Dimes encourages women to speak with their health care provider about birth spacing and effective birth control options. By becoming educated and planning pregnancy, women can increase the chances of a healthy birth outcome.

Working locally, March of Dimes has trained and partnered with the Arkansas Department of Health, Blue Cross Blue Shield's "Life with Baby" case managers, Brothers and Sisters United, 14 birthing hospitals across the state, and various other organizations on birth spacing and its impact on preterm birth prevention. As a result of March of Dimes' provider training, the Arkansas Department of Health, Arkansas Blue Cross Blue Shield and Baptist Health Community Outreach have adopted the policy of asking women about pregnancy intent. They also counsel them about long-acting reversible contraception (subdermal implant or intrauterine device) for successful birth spacing.

March of Dimes' 80 years of innovation has led the fight to stand up for the health of all moms and babies. The organization supports research, leads programs, and provides education and advocacy so every family can have the best possible start.

Visit marchofdimes.org or nacersano.org for more information. Visit shareyourstory.org for comfort and support. Find us on Facebook and follow us on Instagram and Twitter.

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This activity has been submitted to the Midwest Multistate Division for approval to award nursing contact hours. The Midwest Multistate Division is accredited as an approver of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation.

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HOW MUCH DOES IT COST?

We sometimes receive questions about how much certain items cost. For your convenience, a copy of our Fee Schedule is included in this publication.

Although this printed version is current today, this schedule, like everything else in life, changes on occasion. The fees do not change often, but to be certain you have the correct fee, check our web-site at www.arsbn.org under "Licensing" "Fees" before submitting your payment to the Board of Nursing. This is a quick reference to our charges, and the schedule is updated whenever changes are made, so you will always be sure to have the current information. If you have a question regarding fees, check our website first. Chances are you can save yourself some time and get the answers you need.

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Duplicate License/Cert	\$30.00	\$30.00	\$30.00	\$30.00	\$30.00	\$30.00
License/Cert By Examination	\$100.00	---	---	\$100.00	---	\$35.00
License/Cert By Endorsement	\$125.00	---	---	\$125.00	\$100.00	\$65.00
Original License	---	\$125.00*	---	---	---	---
License by Examination for International Nurses	\$200.00	---	---	\$200.00	---	---
License/Cert Reinstatement (Late renewal penalty)	\$100.00	\$100.00	\$100.00	\$100.00	\$100.00	\$50.00
License/Cert Renewal	\$100.00	\$65.00*	\$40.00*	\$90.00	\$90.00	\$40.00
License Certification / Verification	\$30.00	\$30.00	\$30.00	\$30.00	\$30.00	\$30.00
PN Equivalency Examination	---	---	---	\$100.00	---	---
Reinstatement From Inactive Status **	\$10.00 + license renewal	\$10.00 + license renewal	\$10.00 + license renewal	\$10.00 + license renewal	\$10.00 + license renewal	\$10.00 + cert. renewal
Retired Nurse License	no fee	no fee	---	no fee	no fee	---
Temporary Permit	\$30.00	\$30.00	---	\$30.00	\$30.00	---

* Must also hold a valid RN license

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The annual pass rate for the National Council Licensure Examination (NCLEX) is calculated based on a fiscal year (July 1-June 30) for each nursing program in Arkansas. The Arkansas State Board of Nursing (ASBN) Rules require that each program achieve at least a 75 percent annual pass rate. Programs that do not achieve this minimum standard must submit documentation to the ASBN analyzing all aspects of their program. The report must identify and analyze areas contributing to the low pass rate and include a resolution plan that must be implemented.

REGISTERED NURSE PROGRAMS — July 1, 2017 - June 30, 2018

PROGRAM	NUMBER TAKING	NUMBER PASSING	PERCENT PASSING
Arkansas Northeastern College – Blytheville – ADN	29	29	100
Arkansas Rural Nursing Education Consortium (ARNEC) – ADN	296	246	83.1
Arkansas State University – ADN	95	77	81.1
Arkansas State University – BSN	93	89	95.7
Arkansas State University – Mountain Home ADN	16	16	100
Arkansas Tech University – BSN	66	60	90.9
Arkansas Tech University – Ozark – ADN	21	19	90.5
Baptist Health School of Nursing – ADN	216	170	78.7
Baptist Health School of Nursing – DPL (CLOSED)	5	4	80.0
College of the Ouachitas – ADN	76	53	69.7
East Arkansas Community College – ADN	17	15	88.2
Harding University – BSN	46	46	100
Henderson State University – BSN	21	21	100
JRMC School of Nursing - ADN	37	24	64.9
John Brown University – BSN	25	24	96.0
National Park College – ADN	48	41	85.4
North Arkansas College – ADN	41	41	100
Northwest Arkansas Community College - ADN	48	48	100
Phillips Community College/U of A – ADN	16	15	93.8
Southeast Arkansas College – ADN	17	9	52.9
Southern Arkansas University – BSN	26	22	84.6
U of A Community College – Batesville – ADN	64	56	87.5
University of Arkansas at Fayetteville – BSN	197	193	97.9
University of Arkansas at Fort Smith – BSN	78	72	92.3
University of Arkansas at Little Rock – ADN	169	130	76.9
University of Arkansas at Monticello – BSN	20	19	95.0
University of Arkansas at Monticello – ADN	5	3	60.0
University of Arkansas at Pine Bluff – BSN	8	3	37.5
University of Arkansas for Medical Sciences – BSN	105	101	96.2
University of Central Arkansas - BSN	61	56	91.8

PRACTICAL NURSE PROGRAMS — July 1, 2017 - June 30, 2018

PROGRAM	NUMBER TAKING	NUMBER PASSING	PERCENT PASSING
Arkansas Northeastern College – Blytheville	28	28	100
Arkansas State University – Beebe	24	23	95.8
Arkansas State University – Mountain Home	24	21	87.5
Arkansas State University – Newport	94	74	78.7
Arkansas Tech University – Ozark	29	29	100
Baptist Health College – School of Practical Nursing – Little Rock	82	66	80.5
Black River Technical College – Pocahontas	49	48	97.9
College of the Ouachitas – Malvern	63	53	84.1
Crowley's Ridge Technical Institute – Forrest City	21	19	90.5
National Park College – Hot Springs	24	21	87.5
North Arkansas College – Harrison	27	27	100
Northwest Technical Institute – Springdale	49	47	95.9
Ozarka Technical College – Melbourne	85	74	87.1
Phillips Community College U of A – Dewitt	14	14	100
Southeast Arkansas College – Pine Bluff	2	2	100
SouthArk Community College – El Dorado	43	41	95.4
Southern Arkansas University Tech - Camden	24	23	95.8
UA Cossatot – DeQueen	25	24	96.0
Univ. of AR Monticello College of Technology – Crossett	9	8	88.9
Univ. of AR Monticello College of Technology – McGehee	8	8	100
Univ. of AR Community College – Batesville	14	14	100
Univ. of AR Community College – Hope	37	32	86.5
Univ. of AR Community College – Morrilton	50	48	96.0
Univ. of AR at Fort Smith	4	4	100
Univ. of AR Pulaski Tech – Little Rock	10	10	100
Univ. of AR Rich Mountain – Mena	25	22	88.0

Congratulations to Nursing Programs with 100 Percent NCLEX® Pass-Rates for 2018

Congratulations to the following programs for achieving a 100 percent pass-rate on the NCLEX-RN® and PN® exams for the fiscal year 2018:

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Four Consecutive Years 2015 to 2018

- Phillips Community College UA — Dewitt — PN

Three Consecutive Years 2016 to 2018

- Harding University — Searcy — BSN

Two Consecutive Years 2017 to 2018

- Arkansas Northeastern College — Blytheville — PN
- Henderson State University —

Arkadelphia — BSN

- University of Arkansas at Fort Smith — PN

First Year 2018

- Arkansas Northeastern College — Blytheville — ADN
- Arkansas State University — Mountain Home — ADN
- Arkansas Tech University — Ozark — PN
- North Arkansas College — Harrison — ADN
- North Arkansas College — Harrison — PN
- Northwest Arkansas Community College — Bentonville — ADN
- Southeast Arkansas College — Pine Bluff — PN
- University of Arkansas Community

College — Batesville — PN

- University of Arkansas Pulaski Technical — Little Rock — PN

Arkansas approved nursing programs did very well on the NCLEX® exams during 2017-2018. Overall, Arkansas PN programs averaged more than 8 percent above the national average. The Arkansas PN average was 90.5 percent, as compared to the national average for all PN programs of 85.4 percent. Arkansas RN programs pass rates increased this year to 86.7 percent, as compared to the national average for all RN programs of 87.8 percent. The RN average is inclusive of the baccalaureate, associate and diploma passing rate averages. Five year pass rates for all programs are located at www.arsbn.org.

Disciplinary Actions

JULY 2018

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 A.C.A. §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). Probation periods vary and may include an employee monitored nurse contract and/or drug monitoring and treatment programs.

Each individual nurse is responsible for reporting any actual or suspected violations of the *Nurse Practice Act*. To submit a report use the online complaint form at www.arsbn.org, 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.

NAME	LICENSE #	CITY	ACTION	VIOLATION	EFFECTIVE DATE
Allen Adam Luke	R092939, L051241	Ft. Smith	Probation – 3 years	(a)(4), (a)(6)(u)	July 11, 2018
Almond Derek	L055192	Yellville	Suspension	Terms and Conditions	July 12, 2018
Barber Lisa Crawford	R068943, L032198	Ashdown	Letter of Reprimand	(a)(6), (a)(7)	May 23, 2018
Bell Leigh Ann Higgins	R071561	Keiser	Probation – 2 years	(a)(4), (a)(6)(m) and (p)	July 11, 2018
Borchers Heather Dawn Smith	R088694, L049284	Harrison	Probation – 2 years	(a)(6)(p)	July 11, 2018
Bowen Joshua Wayne	R098294	Springdale	Probation Status Removed		June 20, 2018
Bradshaw Mollie Adeliade Randle Jones	R095149, L053253	Conway	Probation Status Removed		June 20, 2018
Bryan Laura Nell Hooper	R056624	Lowell	Letter of Reprimand	(a)(1)(g), (a)(6)(u)	July 11, 2018
Case Michael Edward	L055375	Mountain Home	Probation Status Removed		June 20, 2018
Childers Mikelyn Yvonne	R092532, L052453	Dardanelle	Probation Status Removed		June 20, 2018
Clinkscale Captola Michelle	L048380	Marianna	Letter of Reprimand	(a)(2)	June 26, 2018
Cook Stoney Ray	R103552, L051811	Jonesboro	Letter of Reprimand	(a)(6)(a)(c)	July 10, 2018
Crumpler Mandy Lynn	R054421	Bismark	Voluntary Surrender	(a)(2)	June 13, 2018
Culclager Gwenith Nynell Allen	L030607	Irving, TX	Suspension – 2 years	Terms and Conditions	July 12, 2018
Deshazier Travis Fitzgerald	L030618	Pine Bluff	Probation – 3 years	(a)(4), (a)(6), (a)(9)	July 11, 2018
Dixon Jessica Pearl	R100979	Ward	Probation Status Removed		June 20, 2018
Drywater Elizabeth May	L050725	Fort Smith	Letter of Reprimand	(a)(6)(a)(e)	July 10, 2018
Elliot Sydnie Rebekah	L059678	Austin	Letter of Reprimand	(a)(6)	June 28, 2018
Frazier Alisha Nicole	L049482	Melbourne	Voluntary Surrender	Terms and Conditions	July 11, 2018
Gates Noah Andrew	L054122	Nashville	Suspension	Terms and Conditions	July 12, 2018
Gill Keri Nicole	R087178	Cabot	Suspension – 2 years	(a)(6)	July 11, 2018
Gillespie Carrie Robin	R045071	Ft. Smith	Probation – 3 years	Terms and Conditions (a)(4), (a)(6)	July 11, 2018
Gray Shayne Michael	R063378	Little Rock	Probation – 1 year	(a)(6)(u), (a)(9)(e)	July 11, 2018
Griffin Leigh Anne Warren Haynie Glover	L026019	Whelen Springs	Probation Status Removed		June 20, 2018
Harper Brenda Jo Morehead	L014883	Alexander	Suspension	Terms and Conditions	July 12, 2018
Henson Aimee Marie	R077501	Fayetteville	Probation Status Removed		June 20, 2018
Herring Kimberly Leann	R052262, L032407	Jonesboro	Voluntary Surrender	(a)(4), (a)(6)	June 26, 2018

Disciplinary Actions

JULY 2018

NAME	LICENSE #	CITY	ACTION	VIOLATION	EFFECTIVE DATE
Hodge Christy A.	LPN Applicant	Hot Springs	Probation – 2 years	(a)(2), (a)(4)	July 11, 2018
Jones Lisa Marie	R081915	Springdale	Voluntary Surrender	(a)(2), (a)(6)	June 26, 2018
Kelley Angela Michelle Grimes	L038809	Memphis, TN	Probation – 3 years	(a)(1), (a)(2), (a)(4), (a)(6)(e) and (u)	July 11, 2018
Krause Lisa Maria	R097046	Lonoke	Suspension – 2 years	Terms and Conditions	July 12, 2018
Laxton Scott Allen	L058198	Conway	Voluntary Surrender	(a)(6)	June 28, 2018
Ledbetter Crystal Deanne	R082369	Malvern	Suspension	Terms and Conditions	July 11, 2018
Lester Jacob Michael	L055520	Fayetteville	Summary Suspension	(a)(2), (a)(6)	June 19, 2018
Lucas Kristy Kaye	R052609	Little Rock	Letter of Reprimand	(a)(6)(a)(b)(c)	July 11, 2018
McCoy Colleen	RN Endorsement	Little Rock	Probation – 1 year	(a)(2), (a)(4)	July 11, 2018
McLellan Summer Lynn	L059418	Sulphur, LA	Voluntary Surrender	(a)(6)	June 19, 2018
Meyer Andrea Kay Barker Morris	R056730	Alexander	Letter of Reprimand	(a)(1)(a), (a)(6)(e)	July 13, 2018
Naegle Rebecca Dawn	R078253	Little Rock	Probation – 2 years	Terms and Conditions	July 11, 2018
O'Neal Charles Lester	R015988	Benton	Voluntary Surrender	Terms and Conditions	July 11, 2018
Outlaw-Miller Kevin James	R094612	Searcy	Probation Status Removed		June 20, 2018
Sanders Christi Lynn	R044642	Conway	Probation – 1 year	(a)(6)	July 11, 2018
Scantling Misty Lee Kendall	L056459	Fort Smith	Probation – 2 years	(a)(6)	July 11, 2018
Sharp, Jr. Danny Keith	R055901	Mountain Home	Probation Status Removed		June 20, 2018

continued on page 22

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Disciplinary Actions

JULY 2018

Continued from page 21

NAME		LICENSE #	CITY	ACTION	VIOLATION	EFFECTIVE DATE
Smith	Erica Genette	MS RN 906014	Jonesboro	Cease and Desist	(a)(6)	June 14, 2018
Smith	Rachael Nicole Stewart	L049888	Conway	Voluntary Surrender	(a)(4), (a)(6)(e), (m) and (u), (a)(9)(e)	July 6, 2018
Smith	Philander D.	L042145	Wynne	Probation Status Removed		June 20, 2018
Sommer-Long	Cynthia Lynn	MSPN315596	Horn Lake, MS	Cease and Desist	(a)(6)(p)	July 10, 2018
Stanton	Amy Janell Griffin	R065396	Jonesboro	Probation Status Removed		June 22, 2018
Stubbs	Rosanna June Ruiz Griffin	R053542	Van Buren	Probation Status Removed		June 20, 2018
Sutterfield	Adam Anderson	C002925, R077567	Jonesboro	Probation – 5 years	(a)(6)	July 11, 2018
Thacker	Matthew G	KY RN 1120458	WinchesterKY	Cease and Desist	(a)(4), (a)(6)	June 26, 2018
Thompson	Ronda Carol	L040154	Batesville	Letter of Reprimand	(a)(6)(e)(c)(k)	July 10, 2018
Walk	Valerie Lynette	MSRN884277	Meridian, MS	Cease and Desist	(a)(6)	July 13, 2018
Whitcomb	Susan Marie	R080486	Atkins	Probation – 1 year	(a)(6)	July 11, 2018
Williams	Katelynn Lee	L056840	Hickory Ridge	Voluntary Surrender	(a)(2)	June 18, 2018
Woodson	Doris Darcia	RN Endorsement	North Little Rock	Probation – 1 1/2 years	(a)(2), (a)(6)(q), (a)(7)	July 11, 2018
Young	Daniel Thomas	A001914, R064649	Winthrop	Probation – 5 years; APRN & PAC suspended – 1 year	(a)(6)	July 11, 2018

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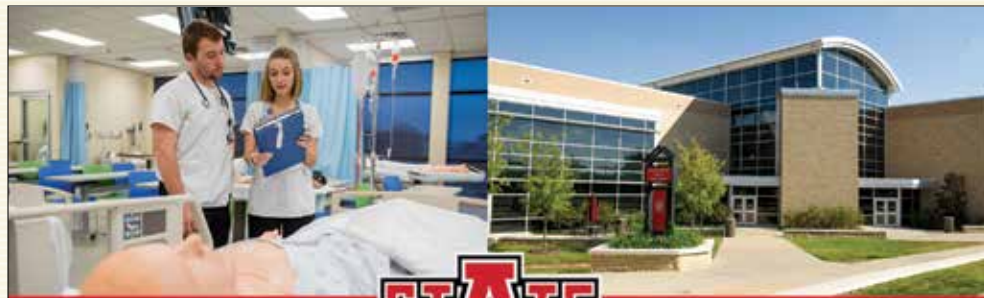
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We're searching Arkansas to find the one nurse we can say is the most outstanding in the state. Do you know a nurse that you feel is the most compassionate, caring and empathetic caregiver? A nurse who has given comfort or care to you, a family member, or a friend. It may be a nurse you work with. We are asking you to send us their name, where they work, phone number, and a short message expressing why you think they are the most deserving nurse in Arkansas.

For the seventh year we are also honoring the outstanding nurse educator of the year. We are searching for an educator that has been a driving force in development and support of nursing careers. Send in your nominee's name, place of work, and a short story of why they should receive the award. **Be sure to include your contact information for us to get back in touch with you.**

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School or place of employment: _____

Address: _____ Phone: _____

Include a short essay on why the nominee deserves the honor. (Please feel free to add extra pages.)

Contact information of person nominating:

Name: _____ Phone: _____

Email address: _____

It is important that the individual making the nomination includes their contact information for follow up.

Please email or send your nominations to the address below, no later than March 8, 2019.

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- **April Verver, RN** - CVICU H4 COMMUNITY SERVICE AWARD
- **Alex Cleveland, RN** - Women/Infant Service Line PRECEPTOR AWARD
- **Sherrie Searcy, RN** - Emergency Department RESOURCE AWARD
- **Rebecca Hulsey, RN** - Cardiac/Progressive Care F8 INNOVATION AWARD
- **Richard Milam, RN** - CVICU H4 EDUCATION AWARD

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From left to right: Becky Sartini, Richard Milam, Sherrie Searcy, April Verver, Rebecca Hulsey, and Alex Cleveland



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This activity has been submitted to the Midwest Multistate Division for approval to award nursing contact hours. The Midwest Multistate Division is accredited as an approver of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation.

For more information regarding contact hours, please call Teresa Gravett at 501.688.0762.



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