



ASBN

Update

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**NEW ALTERNATIVE
TO DISCIPLINE
PROGRAM —
ARKANSAS NURSES
ALTERNATIVE
PROGRAM (ArNAP)**

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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.

EXECUTIVE DIRECTOR Sue A. Tedford, MNSc, APRN
EDITOR LouAnn Walker

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In order to continue uninterrupted delivery of this magazine, please notify the Board of any change to your name or address. Thank You.

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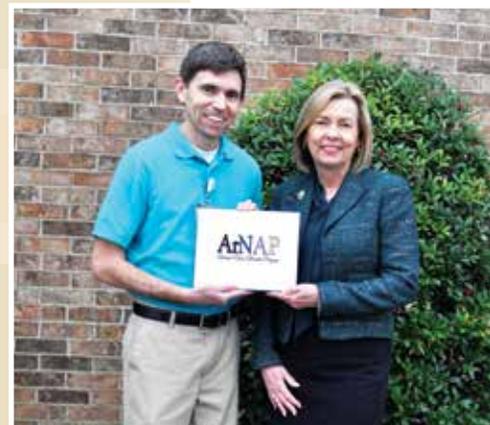
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ON THE COVER: The ASBN held a logo contest to introduce the new alternative to discipline program — ArNAP

Congratulations to the winner, **Caleb Kaspar, APRN**, of Mountain Home. Pictured with Kaspar is ASBN Executive Director Sue Tedford, MNSc, APRN

Thank you to the following for submitting logos: Jonathan Broniste, APRN, Lavaca; Sondra Cline, RN, Jonesboro; Hunter Cox, RN, Cabot; Marla Shapiro, RN, White Hall; Holly Taylor, RN, Malvern; Kathi Walker, RN, Malvern

The ASBN Update circulation includes over 57,000 licensed nurses and student nurses in Arkansas.





Your Opinion Matters

Many nurses are not aware or have forgotten the mission of the Board of Nursing – protect the public. We accomplish this in several ways, such as setting practice standards and scope of practice, regulating nursing educational programs, ensuring licensees meet minimum standards for licensure, requiring continuing education to maintain competence and disciplining nurses who violate the *Nurse Practice Act*. We also like to reach out to licensees to find out what they are thinking.

The Board of Nursing conducts a stakeholder survey every three years asking what we are doing well and what we can do better. We always receive very insightful feedback which we use to make changes in our day-to-day operations, as well as in the development of our strategic plan. Below are just a few items from the survey.

Forty-seven percent of those responding to the survey were 50 years of age or older with the majority of respondents living in central Arkansas.

According to the survey, when there is a question about nursing practice or education the main sources of information utilized are the *Nurse Practice Act* (81%), the *ASBN Update* magazine (66%) and the website (62%).

The preferred methods of communication with the Board of Nursing is email (54%) and telephone (21%). None of the individuals responding to the survey used Twitter as a preferred method of communication, but I believe that is to be expected when the age of those responding is taken into consideration.

There were three open-ended questions on the survey, which allowed for a variety of feedback. Here are a few of the trends noted:

- More continuing education offerings
- Better communication by phone and email
- Speed up application processing
- Doing a great job of public protection

There were multiple comments about the Board becoming more involved with nursing issues, such as staffing ratios, stopping violence against nurses, and outlawing mandatory overtime and 12 hour shifts. I agree these are critical issues and should be addressed. However, as a regulatory agency this is out of our scope. These are issues that our many professional organizations should be addressing because they are the voice for “protecting the nurse.” If you want to see change, join your professional organization and become involved.

Unless you follow us on Facebook, Twitter or visit our website you were probably not aware of the survey. We want more feedback from nurses, so we are working with modern technology to make our survey more available. Hopefully, in the near future every Arkansas nurse can “tell us what they think.”

The Board of Nursing is:	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
Approachable	30.77%	33.94%	21.72%	9.05%	4.52%
Respected	47.96%	33.48%	12.67%	4.07%	1.81%
In touch with nurses' needs	27.15%	31.67%	23.53%	12.22%	5.43%
Responsive	27.15%	39.37%	25.79%	5.43%	2.26%
Meeting their mission of protecting the public	44.8%	34.39%	15.38%	4.07%	1.36%



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So what attributes must a nurse possess to instill such faith?

There are a number of qualities that define a great nurse. According to <https://diversitynursing.com>, the top 10 are listed below.

- **Attention to Detail:** I often stress the importance of this with my students. Putting your decimal in the wrong place when calculating a drug dose can have dire consequences. Everything from medication administration, patient assessment, documentation and following an order, require a great deal of attention. A mistake can be the difference between life or death.
- **Communication Skills:** Communications skills are vital in the nursing field. Not only speaking, but equally, if not more important, is the ability to listen.



The nurse then takes the information gathered, critically thinks, problem solves and effectively communicates with physicians and other members of the health care team, as well as the patient and family members.

- **Emotional Stability:** A day in the life of a nurse can present with many challenges. It can be equally rewarding and devastating. It is crucial that the nurse has the emotional stability to manage those traumatic days, not allowing it to affect them on a personal level, and to have the ability to pull their strength from the days or events that are so rewarding in this occupation.
- **Empathy:** Successful nurses demonstrate empathy for their patients. Nurses should not pity their patients, but should be able to put aside their own viewpoint and see things from their patient's point of view. Even without personal experience of the situation, which would result in sympathy, you can feel what the other person is feeling.
- **Flexibility:** Nurses never know what their day holds. If you go to work expecting one thing, you can almost guarantee your day will be dramatically different. Work shifts vary, are often longer than anticipated and responsibilities can change in a heartbeat – literally.
- **Interpersonal Skills:** This isn't the first time I have talked about interpersonal skills. Nurses are required to work with patients, family members, physicians, pharmacy, radiology, respiratory, and laboratory personnel, therapists, other nurses, and so on. Nurses are often the central hub of communication

between all stakeholders. It is important that nurses possess strong interpersonal skills.

- **Physical Endurance:** Long shifts, prolonged hours of standing, transferring people and frequent lifting are all part of a nurse's day. It is important that we maintain our own health so we can care for others.
- **Problem Solving Skills:** A nurse must possess the ability to solve problems. One must be a quick and critical thinker, and even foresee potential problems and work to prevent them.
- **Quick Response:** Situations arise that require an emergent response and nurses have to be able to respond quickly, all while maintaining their composure.
- **Respect:** Nurses must have a respect for the beliefs and wishes of others. They need to be nonjudgmental and maintain confidentiality. They must also have a healthy respect for policies and procedures because problems can ensue if they do not.

Nurses are at the bedside, and Americans believe they can always rely on their nurse to be their advocate, to intervene on their behalf and ensure quality health care. Continue to be a patient advocate and demonstrate those critical attributes and nursing will continue to be a respected profession. Well done!



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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.



BOARD MEMBERS

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

2019 BOARD DATES

March 26-28. . . NCSBN Mid-year Meeting, San Antonio, TX
April 10.Hearings
April 11.Hearings
May 8.Hearings
May 9. Business Meeting
June 5.Hearings
June 6. . Board Strategic Planning
July 10.Hearings
July 11.Hearings
August 21-23. . . . NCSBN Annual Meeting, Chicago, IL
September 11.Hearings
September 12. . Business Meeting
October 9.Hearings
October 10.Hearings
November 13.Hearings
November 14.Hearings

BOARD BUSINESS

President Ramonda Housh presided over the hearings held on January 9 and the business meeting held on January 10. Highlights of Board actions are as follows:

- Granted Continued Full Approval to:
 - o Arkansas Tech University practical nurse program until the year 2023
 - o Arkansas Northeastern College associate degree in nursing program until the year 2023
 - o Southern Arkansas University Tech practical nursing program until the year 2023
 - o East Arkansas Community College practical nursing program until the year 2023
 - o University of Arkansas-Cossatot practical nursing program until the year 2023
 - o Arkansas Tech University-Russellville baccalaureate degree in nursing program until the year 2023
- Approved the Southeast Arkansas associate of applied science degree in nursing program's curriculum revisions effective with the spring 2019 class
- Approved Arkansas Tech University-Ozark associate of applied science in nursing program's addition of a paramedic RN bridge track to their current LPN to RN program and add a paramedic to RN transition course to the curriculum
- Accepted the 2018 NCLEX® low pass rate responses and reports for the following programs:
 - o College of the Ouachitas – ADN – first year
 - o University of Arkansas at Monticello – ADN – first year
 - o Jefferson Regional Medical Center (JRMC) School of Nursing – ADN – second year
 - o University of Arkansas at Pine Bluff – BSN – second year
 - o Southeast Arkansas College – ADN – fourth year (admissions suspended 2018)

- Approved Southeast Arkansas College associate degree in nursing to begin admission of students effective summer 2019
 - Approved the distribution of funds from the Faith A Fields Nursing Loan Program for the 2019 spring semester, as follows:
 - o Chamberlain College of Nursing – \$600 – on behalf of Amanda Harwell
 - o University of Arkansas Community College-Batesville – \$1,200 – on behalf of Kelsey Richey
 - o University of Arkansas-Hope – \$1,200 – on behalf of Jessica Ridgell
 - o University of Arkansas for Medical Sciences – \$1,500 – on behalf of Sara Underwood
 - o University of Arkansas for Medical Sciences – \$1,500 – on behalf of Brook Scalzo
- Jill Hasley Memorial Scholarship
- o University of Arkansas-Fayetteville – \$1,500 – on behalf of Susan Ferguson

ONE NEW MEMBER APPOINTED AND ONE MEMBER REAPPOINTED TO THE ARKANSAS STATE BOARD OF NURSING

Gov. Asa Hutchinson recently appointed one new member and reappointed one member to the Arkansas State Board of Nursing. They are:

- **Jasper Fultz**, of Augusta, is a licensed practical nurse. He has been employed at White County Medical Center for over 30 years. Fultz's awards include the Arkansas Nursing Compassion Award and the Arkansas Business Healthcare Hero. He hopes to make a positive difference in nursing by serving on the Board and feels his many years experience will be beneficial to the Board. He replaces Haley Strunk on the Board.
- **Ramonda Housh**, MNSc, APRN, CNP, C-PNP, of Pochontas, was reappointed by Gov. Asa Hutchinson to serve a second term on the Board.

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ARKANSAS NURSES ALTERNATIVE PROGRAM – ArNAP

Voluntary Disciplinary Alternative for Licensed Nurses and Applicants Who Have a Drug or Alcohol Abuse Problem

LouAnn Walker,
ASBN Update Editor/Public
Information Coordinator



Nurses who provide care to patients while impaired, or otherwise practicing unsafely, present a significant risk to public safety. The U.S. has seen an alarming increase in reported instances of harm associated with use of drugs and alcohol. The Centers for Disease Control and Prevention (CDC) reports that “nearly 2 million Americans abused or were dependent on prescription opioids in 2014” (CDC, 2018). The CDC also reports that there is one fatality every 51 minutes due to an alcohol impaired driver. (CDC, 2018).

Health care professionals battle drug addiction or alcoholism just like many others professionals, so it is becoming more common for occupational and professional regulatory boards to offer impaired practitioners education, consultation, referral, monitoring, and support with conduct related to substance use and abuse. States bordering Arkansas that have an alternative to discipline program are Louisiana RN, Mississippi, Oklahoma, Tennessee and Texas.

The Board of Nursing received legislative authority (Ark. Code Ann. 17-87-801 et seq.) to establish an abstinence-based, non-disciplinary, monitoring program in 2017. The Board appointed a task force consisting of Board members and staff to write the rules for the alternative to discipline program, and after the promulgation process the rules became effective January 1, 2018. The Arkansas Nurses Alternative to Discipline Program (ArNAP) offers

nurses in the State of Arkansas an alternative to discipline for issues relating to drug or alcohol abuse, or addiction. It gives nurses the opportunity to maintain licensure, return to safe and competent practice, and avoid the personal and professional stigma associated with a flagged license. This voluntary program refers impaired practitioners to appropriate treatment and offers continuous monitoring of progress for participants. In many cases, voluntary participation may avoid disciplinary action and, if the nurse successfully completes ArNAP, no flag will be placed on the nurse’s license.

To be eligible to participate in ArNAP, a nurse must:

- Hold an Arkansas nursing license or be eligible for licensure.
- Otherwise be eligible for continued licensure under the Arkansas *Nurse Practice Act*.
- Acknowledge a drug or alcohol abuse problem or addiction, and
- Voluntarily request participation in ArNAP.

Nurses are referred to ArNAP in one of three ways:

- Self-referral
- Referral by a third party (employer, coworker, friend, family member, etc.)
- Referral by Board

Enrollment in ArNAP is free. However, any costs associated with treatment and/or screening are the responsibility of the participant. The Board accepted its first participants into ArNAP in December 2018.



The mission of the Arkansas Nurses Alternative to Discipline Program (ArNAP) is to protect the public by providing education, consultation, referral, monitoring, and support for chemically dependent and recovering individuals licensed by the Arkansas State Board of Nursing.



ASBN Assistant Director **Tonya Gierke, JD, BSN, RN,** directs ArNAP and joined the ASBN staff in August 2018. Gierke grew up

in Wisconsin and moved to Memphis while in junior high school. She earned her nursing diploma from the Methodist School of Nursing in Memphis and a bachelor of science in nursing degree from Memphis State University. Gierke received her juris doctor degree from University of Memphis Cecil C. Humphreys School of Law. Her nursing background includes working at St. Jude’s Children’s Research Center in

Memphis, emergency nursing and being a flight nurse.

After graduating law school, Gierke worked as an insurance defense attorney for a medium sized law firm in Memphis. She moved to Conway where she worked as a risk manager, compliance officer and privacy officer at Conway Regional Medical Center, and in August 2016 joined the Friday, Eldredge & Clark law firm in Little Rock where she practiced law in the Health Care Regulatory Division.

Gierke says nurses should be aware of how to identify fellow nurses who have a drug or alcohol problem and encourages nurses to, "Say something!" She is excited about working with ArNAP and "protecting the public while supporting the nurse."

To obtain further information, or to seek admission, contact Tonya Gierke at 501.683.0016 or via email at tgierke@arsbn.org. The ArNAP Participant Handbook is located online at www.arsbn.org.



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NEW WEB PAGE, REVISIONS TO CHAPTER 4 RULES, MANDATORY CONTINUING EDUCATION AND ANTIBIOTIC STEWARDSHIP

NEW WEB PAGE

Please see the new web page for advanced practice nurses. Hopefully, you will find this to be user friendly. Go to www.arsbn.org and choose the Adv. Practice tab at the top right.

REVISIONS TO RULES, CHAPTER 4 – ADVANCED PRACTICE REGISTERED NURSE

The Arkansas State Board of Nursing (ASBN) has completed revisions to Chapter 4 Rules. Go to www.arsbn.org and choose the Laws and Rules tab. ASBN *Rules*, Chapter 4, is dedicated to the practice of the Advanced Practice Registered Nurse (APRN). APRNs are responsible for integrating these laws into their practice.

ASBN *Rules*, Chapter 4, Section III, I and J, includes information on placing an advanced practice nursing license on inactive or retired status.

ASBN *Rules*, Chapter 4, Section XII, includes Prescribing for Chronic Nonmalignant Pain. Much of this section was written by the Arkansas State Medical Board's Pain Committee and then adopted by the Arkansas State Board of Nursing. It follows the Center for Disease Control (CDC) guidelines for opioid pain management and must be incorporated into your practice as written.

A. Chronic nonmalignant pain is defined as pain requiring more than three consecutive months of prescriptions for:

1. An opioid that is written for more than the equivalent of ninety (90) tablets, each containing five (5) milligrams of hydrocodone; or
2. A morphine equivalent dose of more than fifteen mg (15 mg) per day; or
3. Tramadol – an average dose of two hundred milligrams (200 mg) or greater per day.

B. When opioids are started, the lowest effective dosage should be prescribed. APRNs should use caution when prescribing opioids at any dosage and carefully reassess

evidence of individual benefits and risks when considering increasing dosage to >50 morphine milligram equivalents (MME) per day. APRNs should avoid increasing dosage to >90 MME/day or carefully justify a decision to titrate dosage to >90 MME/day.

C. If opioids are prescribed at a level defined by the Centers for Disease Control and Prevention (CDC) as excessive (>50 MME/day) the following shall be documented in the patient's medical record:

- a. Objective findings, which include, but are not limited to, imaging studies, lab testing and results, nerve conduction testing, biopsy, and any other test that would establish pain generating pathology.
- b. Specific reasons for the need to prescribe > 50 MME/day.
- c. Documented alternative treatment plans as well as alternative therapies tried and failed prior to considering chronic opioid therapy.
- d. Documented risk factor assessment detailing that the patient was informed of the risk and addictive nature of the prescribed drug.
- e. Documented assessment of the potential for abuse and/or diversion of the prescribed drug.
- f. Documented review of the Prescription Drug Monitoring report prior to issuing the prescription.
- g. A detailed clinical rationale for the prescribing.

D. Patient Treatment and Evaluation

1. The patient shall be evaluated through an in-person examination at least every three (3) months by the APRN and at least one (1) time every six (6) months by a physician who is licensed by the Arkansas State Medical Board.
2. A current Prescription Drug Monitoring Program report shall be reviewed at least every six (6) months. The review shall be documented in the patient's medical record.

3. A current pain contract with the patient shall be maintained and include, at a minimum, requirements for:

- a. Random urine drug screens and
- b. Random pill counts

E. The requirements of this section shall not apply to a patient:

1. Whose pain medications are being prescribed for a malignant condition;
2. With a terminal condition;
3. Who is a resident of a licensed healthcare facility;
4. Who is enrolled in a hospice program; or
5. Who is in an inpatient or outpatient palliative care program.

ASBN *Rules*, Chapter 4, Section XV, includes language regarding licensure for certain military nurses and spouses. The four (4) subsec-

tions include Expedited Licensure; Extension of Licensure Expiration Date; Consideration of Military Training and Experience; and Waiver of Continuing Education.

Contact the Arkansas State Board of Nursing Advanced Practice Department with questions.

MANDATORY CONTINUING EDUCATION

The updated "mandatory" continuing education course is now available online. All APRNs with prescriptive authority must complete this prior to license renewal. It is located on My Table Mesa (<https://www.mytablemesa.com/account/registermain>) or you can find the link under the Advanced Practice tab on our website.

ANTIBIOTIC STEWARDSHIP

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 further information on antibiotic stewardship. UAMS Learn on Demand has one (1) hour CE credit courses that may be used for pharmacotherapeutic CE maintenance. Please visit the UAMS Learn on Demand website and enroll in a course.

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SCREENINGS REDUCE READMISSIONS AND IMPROVE CARE

Nearly 20 percent of Medicare beneficiaries live with at least one mental health or substance use condition, but fewer than 40 percent receive treatment. In the Medicare population, depression has a higher inpatient readmission rate than all other conditions except heart failure.

Alcohol is the most commonly abused substance and can potentially cause serious medical complications. Coupled with depression, alcohol use disorders (AUD) can be life-threatening for older adults.

Mental health treatment is often delayed because the focus is on physical ailments. Also, older adults are less likely to seek mental health care because of a perceived stigma about mental health treatment.

Nurses can play an important role in identifying patients needing depression and AUD screenings. Nurses are often the patient's first clinical contact and the first person to question them about symptoms. Nurses frequently have a relationship with patients and can identify subtle behavior or mood changes that others may not notice. Patients often feel more comfortable confiding behavioral-health problems to a nurse.

The TMF Quality Innovation Network Quality Improvement Organization (QIN-QIO), partnering with AFMC to serve Arkansas, is addressing these concerns through its Behavioral Health Learning and Action Network. The network has convened community coalitions of primary care clinicians, inpatient psychiatric facilities (IPFs), hospitals, specialists and stakeholders to increase depression and AUD screenings in primary care. Screenings can reduce the 30-day readmission rate for patients discharged from IPFs. The coalitions have increased the number of beneficiaries who see a behavioral health provider after an IPF hospitalization.

Quality improvement specialists provide network members with individualized technical assistance to:

- Identify benefits of and how to use screenings
- Explain screening instruments and billing
- Use electronic health records (EHR) to capture screenings and incorporate into work flows
- Discuss process-improvement tactics

Practices receive multiple resources and tools (available in Spanish) including:

- Depression Zone and Alcohol Use Disorder Zone tools

- Patient brochures to self-identify AUD and depression symptoms
- Patient Health Questionnaire-9 (PHQ) and AUDIT tools for patients and providers
- Low-literacy patient tools

Network members can attend free, quarterly behavioral health webinars and access a virtual community to discuss and share best practices, promote improvement strategies, and stimulate networking and sustainability.

Quality improvement specialists complete individual scorecards for each participating practice to review their rates, rate trends and goals. High-performing practices share their best practices with other providers.

ARcare, one of Arkansas' high-performing providers, focused on improving depression screening by developing standing orders for nurses to perform PHQ-2 and PHQ-9 testing and create EHR reminder alerts. Within four months, screenings increased from less than 5 percent to more than 90 percent for both AUD and depression.

Network members could participate in a Special Innovation Project focusing on depression and AUD treatment. It integrated behavioral health into primary care through Project ECHO (Extension for Community Healthcare Outcomes) and the Mental Health Integration model.

Project ECHO connects teams of specialists with primary care practices in rural communities. The specialists mentor clinicians and give feedback on patient cases. At weekly teleECHO clinics, clinicians develop specific behavioral health conditions treatment skills.

Join the Behavioral Health network and receive access to free resources and training to increase screening rates for depression and AUD. Network resources can help primary care practices reduce the 30-day readmission rate and increase follow-up care for patients discharged from IPFs.

To learn more, visit <http://www.tmfqin.org> and hover over Networks tab to access Behavioral Health page, or contact Arkansas' Program Director Julia Kettlewell at jkettlewell@afmc.org.

Material developed by TMF Health Quality Institute, the Medicare QIN-QIO, under contract with CMS, U.S. Dept. of Health and Human Services. Content does not necessarily reflect CMS policy. 11SOW-QINQIO-G1-18-39.

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- North Metro Medical Center
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- Springwoods Behavior Health
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- The Highland Midtown
- The Robust Olive
- Total Life Changes
- Travel Nurse Across America
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Dean of Nursing and Health Professions

ABOUT THE JOB:

The Dean of Nursing and Health Professions reports to the Vice Chancellor for Academic Affairs and has responsibility for the development, coordination, oversight, and assessment of Registered Nursing, Licensed Practical Nursing and Health Professions programs, courses, and faculty for campuses at Newport, Marked Tree, and Jonesboro and all other ASUN instructional locations.

The Dean for Nursing and Health Professions must demonstrate strong leadership, management, and development skills to carry out the role of Director of Nursing and to support the programs, and faculty in teaching, industry partnership, and service within the academic programs of Nursing, Surgical Technology, Patient Care Technology, Certified Nursing Assistant, Phlebotomy, Emergency Medical Technician, Paramedic, and the IGNITE program. This role supports the College's mission of providing and ensuring quality educational programs for ASUN's various constituencies.

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- A Master's of Nursing degree from an accredited institution of higher education.
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- A minimum of 4 years of demonstrated work within the nursing industry with evidence of high-level partnership capacity building and advisory committee development and leadership, preferably at the two-year college level.
- A minimum of two-years of two-year college teaching experience or nurse educator experience (or a combination of the two).
- Two years of supervisory experience preferred.

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On April 13, 2019, Publishing Concepts, Inc. will be celebrating their 14th Annual Nursing Expo in the Jack Stephens Event Center on the UALR campus. In conjunction with this event we will be honoring nominees and winners of The Compassionate Nurses Award and Nursing Educator Award in the Legends room.

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.**

Nominate a candidate from your school or facility today. DEADLINE IS MARCH 8, 2019.

Your nomination should include:

Name: _____ License #: _____

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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CONSENT AGREEMENT FREQUENTLY ASKED QUESTIONS

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A Consent Agreement is an informal way of entering into an agreement with the State Board of Nursing for disposition of your disciplinary case. It is essentially a contract between the Board of Nursing and the nurse. If you choose to enter into the Consent Agreement, you may not have to appear before the Board for a hearing. However, the Board reserves the right to reject the Consent Agreement upon presentation for ratification. The Consent Agreement has stipulations that are required. Stipulations may include courses, random drug screening, performance evaluations, employment restrictions and a civil penalty.

Q. Who do I contact with questions regarding my Consent Agreement BEFORE it has been accepted by the Board?

A. Mary Trentham, Attorney Specialist
Phone: 501.686.2741
Email: mtrentham@arsbn.org

Q. Which pages do I need to initial and send back to board staff so the Board will consider my Consent Agreement?

A. You will need to initial ALL lettered and numbered paragraphs of the Consent Agreement and sign the agreement in front of a notary. You also need to complete the two (2) questionnaire forms and sign them in front of a notary. ALL pages of the Consent Agreement and questionnaires need to be returned to the Board office before it will be presented to the Board for consideration.

Q. What is the effective date of my Consent Agreement?

A. Your Consent Agreement becomes effective on the date the Board President signs it at the Board hearing.

Q. How will I know which courses I need to take if I am ordered to take courses?

A. Course information will be included with the packet that you receive after approval of the Consent Agreement by the Board.

Q. What proof of course completion do I need to send?

A. The Certificate of Course Completion is the only document that board staff will accept. Be sure to print the Certificate when you complete the course.

Q. May I pay my fine when I turn in my initialed Consent Agreement to be presented to the Board?

A. NO. Hold your payment until you receive your Board approved Consent Agreement packet in the mail. If you send the payment in with the offered Consent Agreement, the payment will be sent back to you.

Q. How will I pay my fine?

A. There will be a payment plan included in your Consent Agreement packet sent AFTER the Board approves your Consent Agreement. You may pay the Civil Penalty in full OR submit the payment plan. You may mail your payment or pay it online.

Q. How will I know when reports and civil penalty payments are due each quarter?

A. You will receive a letter of explanation that will list all of the due dates of the reports and payments you need to submit during your monitoring.

Q. What is a Personal Report?

A. A personal report is a written statement by you indicating where you are working or not working. It also lets you tell the Board how you are doing while under disciplinary action.

Q. If I do not have a job, do I still need to send in personal reports?

A. Yes.

Q. Can I email my Personal Report and other required materials each quarter?

A. No. You must mail, fax, or hand deliver them. If you use registered or certified mail, the post office will send you a card documenting the date the Board received your packet. You should retain the fax confirmation record when faxing.

Q. If I send my required quarterly materials by fax, is it necessary to mail or hand deliver the originals?

A. No. Board staff does not need multiple copies of your quarterly compliance materials.

Q. When do I call to get set up with the drug testing company?

A. You will have five (5) days to contact the drug monitoring company after you sign the green card you receive with your Board approved Consent Agreement packet.

Q. Where do I get the Chain of Custody forms for my drug screens?

A. The chain of custody forms will be sent to you by the drug monitoring company after you have set up your account with them. YOU MUST USE THESE FORMS.

Q. May I take a vacation while I am on Consent Agreement and having to do drug testing?

A. It depends. Inside the Continental US: Contact the drug monitoring company at least two (2) weeks before your scheduled vacation. The drug monitoring company will attempt to set up testing sites for you along your trip and at your destination. International: Contact Lisa Wooten, ASBN Assistant Director, Enforcement, with your vacation dates. You will also have to turn in an itinerary for your international vacation that has your name printed on it.

Q. What medications can I take while being drug screened?

A. You may not take controlled or abuse potential substances. This includes over the counter medication and supplements that contain alcohol or hemp by-products. It also includes homemade products, such as yogurt or kefir (alcohol content is not controlled during fermentation).

Q. What number do I call if I need to contact the drug screening company?

A. 833.476.1173

Q. Do I still have to comply with the terms of probation if I am NOT working in a nursing position?

A. Yes. You will be under the terms of your Consent Agreement for the duration of your probation period

whether you are working in a nursing position or not.

Q. Are there any circumstances that would allow my probation to end early?

A. No. The length of probation will not be reduced.

Q. After the Board approves my Consent Agreement, how long before it is sent to me?

A. The Consent Agreement packet will be sent to you approximately two weeks after approved by the Board.

Q. What if I have a medical marijuana card from another state?

A. If you have a medical marijuana card from another state, it is not recognized by the State of Arkansas.

Therefore, testing positive for marijuana on drug screens is considered noncompliance with your Consent Agreement.

Q. Where can I find the disciplinary forms that I need to comply with my Consent Agreement?

A. Go to the ASBN website, www.arsbn.org. Click on the "Forms" tab and scroll down to the disciplinary forms section.

Q. Who do I contact with questions regarding my Consent Agreement AFTER it has been accepted by the Board?

A. Lisa Wooten, ASBN Assistant Director, Enforcement
Phone: 501.686.2711
Email: lwooten@arsbn.org



DO YOU KNOW THE DIFFERENCE BETWEEN APPROVAL AND ACCREDITATION?

On a daily basis, the Arkansas State Board of Nursing (ASBN) receives calls regarding in-state and out-of-state nursing education programs. One of the primary questions asked is, “does this program have approval from the Board and/or is it accredited?” The first thing to understand is the difference between approval and accreditation.

Approval

Approval of a nursing education program is granted by each individual state and it is mandatory. In Arkansas, the approval for a pre-licensure nursing program is granted by the ASBN. Arkansas pre-licensure nursing programs are required by law to have approval, in order to offer nursing courses to students in the state. The ASBN has set minimum education standards that nursing schools must meet and maintain. The education standards can be found in the ASBN *Rules*, Chapter Six. You can also find a list of in-state Arkansas approved nursing programs at www.arsbn.org.

Approval of a nursing program is also important because it is a requirement to take the National Council Licensure Examination (NLCEX®) for registered nursing (RN) or licensed practical nursing (LPN).

Accreditation

Accreditation of a nursing education program is done by a national accrediting organization that has been approved by the U.S. Department of Education (DOE) and it is voluntary. Accreditation lets potential students know that the program has met common standards of quality, as compared to other accredited programs throughout the United States. There are currently three national nursing accrediting agencies that have been approved to accredit nursing programs:

- The Accreditation Commission for Education in Nursing (ACEN) accredits practical, diploma, associate, bachelor’s, master’s and clinical nursing doctorate programs.
- The Commission on Collegiate Nursing Education

(CCNE) accredits bachelor’s programs and graduate nursing programs.

- The Commission for Nursing Education Accreditation (CNEA) is the newest accrediting agency that accredits practical, diploma, associate, bachelor’s, master’s and doctor of nursing practice programs.

Accreditation of a nursing program is not a requirement to take the National Council Licensure Examination (NLCEX®) for registered nursing (RN) or licensed practical nursing (LPN). A list of accredited nursing programs can be found on each of the above accrediting agencies websites.

What does this mean to you?

If you are currently an LPN or RN looking for a program to continue your nursing education, knowing the status of the program you choose is important. The ASBN must approve all pre-licensure programs, whether they are in-state or out-of-state. Pre-licensure programs include all practical, diploma, associates and bachelor’s in nursing programs, whether they are online or face-to-face. There is one exception, if you already have an associate or diploma RN license and are completing your BSN, you do not have to take the NCLEX again; therefore, the program does not require approval by the ASBN. The RN to BSN completion programs and post-licensure graduate nursing programs are required to have certification through the Arkansas Department of Higher Education (ADHE) and/or the Arkansas Higher Education Coordinating Board (AHECB). If you are researching post-licensure nursing programs, you will need to contact ADHE to assure the program you choose has been certified.

References:

1. Arkansas Department of Higher Education.
<https://www.adhe.edu/>
2. Arkansas State Board of Nursing. www.arsbn.org
3. National Council State Boards of Nursing.
<https://www.ncsbn.org/665.htm>

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Disciplinary Actions

JANUARY 2019

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	
Ayers	Tina Johnny Ayers Bill	R079728	Horatio	Probation - 1 year	(a)(6)(u)	January 9, 2019
Andrews	Abby Kay	L052326	Conway	Voluntary Surrender	(a)(4), (a)(9)(e)	December 5, 2018
Atherton	Graham David	R104307	Rogers	Voluntary Surrender	(a)(4)	December 3, 2018
Bartolin	Tenisha Brook Winningham	R102358 L047991	Jacksonville	Suspension - 2 years	(a)(6)(c),(o) and (p)	January 9, 2019
Bentley	Melissa Renee Walker	L040475	Katy, TX	Suspension - 2 years	(a)(6)(h),(i),(p),(a) (7), and (a)(8)	January 9, 2019
Bishop	Mary Angela	R033701	Rogers	Voluntary Surrender	(a)(4), (a)(6)(m)	January 3, 2019
Briggs	Robin Lee	R084028	Mountain View	Probation - 1 year	(a)(2)	January 9, 2019
Burton	Ginnie Lee Harris Baggett	R031676	Jonesboro	Probation Status Removed		December 12, 2018
Carter	Suzanne Renee	R081337 L045217	Hot Springs	Probation Status Removed		November 27, 2018
Clifton	Amanda Kaye	L053058	Hope	Probation - 1 year	(a)(2), (a)(4), (a)(6) and (a)(9)	January 9, 2019
Coleman	Katrina Anette	L054689	Batesville	Probation - 1 year	(a)(6)(c) and (a)(9)(e)	January 9, 2019
Crawford	Jennifer Magen	L047140	Greenbrier	Voluntary Surrender	(a)(4), (a)(6)(d)	December 10, 2018
Drywater	Elizabeth May	L050725	Ft. Smith	Letter of Reprimand	(a)(6)(h)	December 4, 2018
Ellis	Quana LaCol	L047915	Ashdown	Probation - 3 years	(a)(4), (a)(6)(u) and (a)(9)(e)	January 9, 2019
Emerson	Jennifer Marie	R078192	Little Rock	Probation - 1 year	(a)(6)(p)	January 9, 2019
Farrar	Yolanda	R089810	Little Rock	Letter of Reprimand	(a)(6)(g)	January 8, 2019

NAME	LICENSE #	CITY	ACTION	VIOLATION	EFFECTIVE DATE	
Fox	Michelle Hughes	R052778	Lincoln	Voluntary Surrender	(a)(4)	December 3, 2018
Garrison	Christie Lee Queen Mason Todd	L041226	Melbourne	Probation - 1 year	(a)(6)(u) and (a)(9)(e)	January 9, 2019
Gillespie	Carrie Robin	R046071	Fort Smith	Voluntary Surrender	(a)(9)(a)	November 21, 2018
Goodrum	Christina Lena	L052454	Pine Bluff	Letter of Reprimand	(a)(6)(e)	December 4, 2018
Hacker	Susan Rechelle Felker	R041646	Poteau, OK	Voluntary Surrender	(a)(6)(p) and (a)(7)	December 20, 2018
Harshaw	Christie Lynn	R083552	North Little Rock	Probation Status Removed		November 27, 2018
Hayes	Patricia Kaye	L028906	Malvern	Voluntary Surrender	(a)(6)(d)	January 7, 2019
Hendrix	Brittney Gae	R063594 L033986	El Dorado	Voluntary Surrender	(a)(4), (a)(6)(c)(p)	January 7, 2019
Jacks	Dennis William	C002870 R070488	White Hall	Probation - 2 years	(a)(6)(c)	January 9, 2019
Johnson	Cassandra Dawn	R093055	Batesville	Letter of Reprimand	(a)(6)(c)(e)	December 4, 2018

continued on page 26

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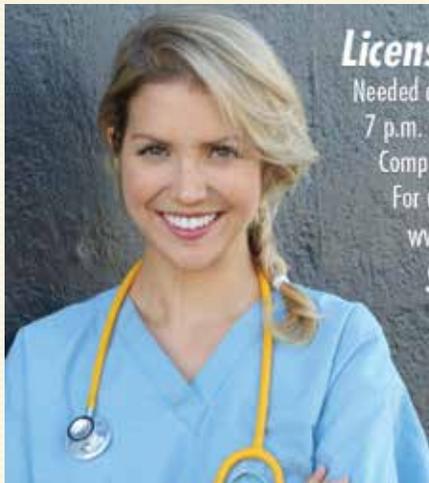
When making reservations, make sure to ask for the ASNA block of rooms

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Gaylord Rockies • Denver, Colorado
June 28 - July 1, 2019
Register for conference online at: www.arknsn.com

Continued from page 25

NAME	LICENSE #	CITY	ACTION	VIOLATION	EFFECTIVE DATE	
Kaufman	Lisa Gail Hoggard	R055401	Maumelle	Probation - 3 years	(a)(4), (a)(6)(d) and (a)(9)(e)	January 9, 2019
Kieselhorst	Taira Renea	R089079	Bryant	Suspension - 6 months	(a)(9)(e)	January 9, 2019
Lane	Jaime Leighann Kirkpatrick	L041749	Van Buren	Suspension - 2 years	(a)(6)(c)(d)	January 9, 2019



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The Bachelor of Science in Nursing degree program, the Master of Science in Nursing degree program and the Doctor of Nursing Practice degree program at the University of Arkansas Eleanor Mann School of Nursing are accredited by the Commission on Collegiate Nursing Education (www.ccnaccreditation.org).

NAME	LICENSE #	CITY	ACTION	VIOLATION	EFFECTIVE DATE
Lansdell	Teresa Joy	L046334	Fouke	Probation Status Removed	November 27, 2018
Leeks	Shanett Lanae	L059450	Ashdown	Letter of Reprimand	(a)(2) December 4, 2018
Long	Marissa Ann	PN Applicant	Bella Vista	Probation - 1 year	(a)(2) January 9, 2019
Lossing	Chase Jacob	L057130	Rogers	Probation - 2 years	(a)(2) and (a)(9)(e) January 9, 2019
Mason	Connie Elizabeth Hoover	R084976 L041464	Winthrop	Probation Status Removed	December 20, 2018
McAllister	Randy Don	R105319	Fort Smith	Probation - 1 year	(a)(6)(u) January 9, 2019
Mondragon	Hernan Roman	R106863	Montrose	Probation - 2 years	(a)(6)(p) January 9, 2019
Mungle	Sara Jane West Lee Liddell	R036903	Paragould	Probation Status Removed	November 27, 2018

continued on page 28

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Fax 501-660-6838
HumanResources@cfyf.org

EOE

Disciplinary Actions

JANUARY 2019

Continued from page 27

NAME	LICENSE #	CITY	ACTION	VIOLATION	EFFECTIVE DATE
Myers Joshua Ryan	R101141	Hackett	Probation - 1 year	(a)(2) and (a)(6)(u)	January 9, 2019
New Beverly Renee Hudson	L046475	Vilonia	Probation Status Removed		November 27, 2018
Newcomb Andrea Paige	L053853	Benton	Probation - 1 year	(a)(6)(e)	January 9, 2019
Nunley Sherry Elaine Waddell	L045402	Wilburn	Suspension - 2 years	(a)(6)(c),(d),(e),(p)and (a)(7)	January 9, 2019
Owen Erinn	R089216	North Little Rock	Probation Status Removed		November 27, 2018
Rowan Wendy Diane	L047447	Lowell	Suspension - 2 years	(a)(2),(a)(4),(a)(6) (u)	January 9, 2019
Ryan Erin Nicole	L047090	Mena	Voluntary Surrender	(a)(9)(a)	December 10, 2018
Smith Tammy Jean Edwards Fuller	L033837	Huntsville	Probation - 2 years	(a)(1), (a)(2) and (a)(6)(c)	January 9, 2019
Spooner Mary Elizabeth	R037289	El Dorado	Probation - 1 year	(a)(6)(p)	January 9, 2019
Steele Amy Nicole	L046266	Fort Smith	Probation - 3 years	(a)(6)(b), (d) and (q)	January 9, 2019
Stewart Debra Ann Irby	L036568	West Helena	Letter of Reprimand	(a)(6)	December 20, 2018
Terry Rochelle Nicole	R083174	Maumelle	Voluntary Surrender	(a)(6)(u) and (a)(9)(e)	December 20, 2018
Thompson Ashley Marie Wilson	L055591	Cabot	Probation Status Removed		November 27, 2018
Thornton Melanie Breanne	R107677 L051276	Hensley	Voluntary Surrender	(a)(4), (a)(9)(e)	December 3, 2018
Townsend Caroline Walker	R089235 L049981	Mountain View	Probation - 2 years	(a)(2), (a)(4) and (a)(6)(u)	January 9, 2019
Tyndal Amber Sue	R105502	Fort Smith	Probation Status Removed		November 27, 2018
Wagner Laura Beth Reynolds	R080021	Ocean Springs, MS	Probation Status Removed		November 27, 2018
Williams Steven Michael	TXPN301723	Beebe	Cease and Desist	(a)(6)(b)(c), (a)(7), (a)(9)	November 27, 2018
Williams Tracy Gail Bowers	R052411	Maumelle	Revocation	(a)(2), (a)(6)(u) and 312(e) (32)	January 9, 2019
Wilson Nikki Suzanne Waldorf Dickinson	R044512	Cabot	Probation Status Removed		November 27, 2018

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Most things with the Arkansas State Board of Nursing can be done online, and this is the best option. So if it can be done online, we would encourage you to do so. However, there are still a few items that may be processed with a check or money order and a paper application. Each month the ASBN returns forms and/or payments back to people for various reasons. The following are some simple tips to avoid being one of the people who receive returned correspondence from the Board.

1. READ THE INSTRUCTIONS

Everyone is busy, but failing to read the appropriate instructions is not the best way to save time when it comes to your licensure. Most questions can be answered by doing this simple step.

2. PLEASE SIGN

The main reason forms are returned is because the applicant did not sign it. Your money order or check must be completed and signed as well.

3. COMPLETE THE ENTIRE FORM

Another common problem is the applicant submits an incomplete form. All questions must be answered. Please check both sides of the form(s) and be certain all required fields are completed.

If a form is required to be notarized, please do so. The application will be considered incomplete if this step is omitted.

4. INCLUDE THE CORRECT FEE

Applications are often returned because the person did not include the fee or the incorrect fee was included with the form. If you are paying by a check or money order, please DO NOT include the additional processing fee. This fee only applies when submitting a paper application and paying by credit card.

Do not round your payment up or down. Pay the exact amount. We will not keep the change for a "pizza fund" nor do we have a "give a penny, take a penny" cup like your local gas station. It will be returned to you if the amount is incorrect.

5. FORMS SENT TO OUR OFFICE IN ERROR

Requests for nurse verifications may be returned as well. Verifications for participating states are processed through www.nursys.com. You may also use the free phone verification at (501) 682-2200 and follow the prompts. Licensure status may also be verified at www.arsbn.org by utilizing the registry search.

6. OTHER HELPFUL INFORMATION

An address change can be made online. However, changing your name on your nursing license requires a copy of your marriage license, divorce decree or other legal document stating the legal name change.

If you are retired or no longer practicing nursing, you can place your license on Inactive Status or Retired Nurse Status. Please note that if it is after the expiration date on your license, it is too late to take this option.

If you are including a payment by check or money order, use blue or black ink.

Do not send coupons, gift cards, cash or other presents. Although we appreciate the sentiment, we are unable to accept them.

These are simple steps that can be easily overlooked. The forms must be complete and signed before we can process them. Please help us to serve you better. Double check your form and/or payment before mailing, or better yet, if you can complete the form online at www.arsbn.org, this is always your best option.

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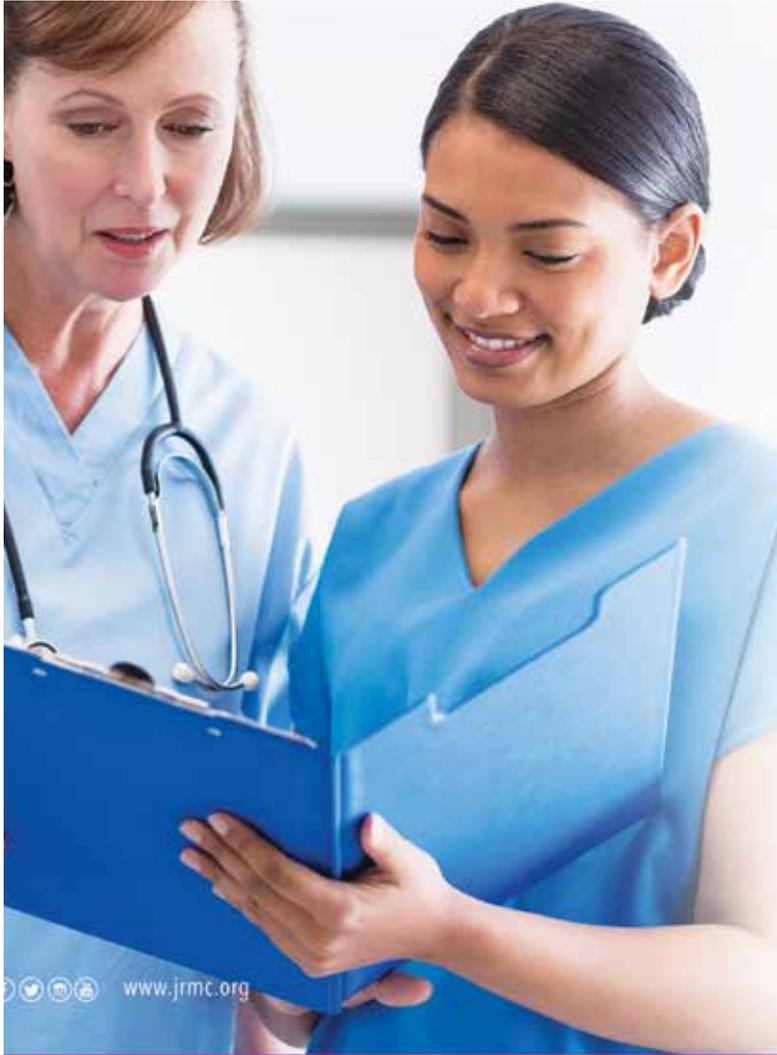
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