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Uvita Scott, Little Rock School District Health Services

2016 Outstanding Nurse Educator Award Winner
Debbie Koch, U of A Ft. Smith

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Kristy Fritz at 501-552-3738 (Little Rock)
or Tamme Kinney at 501-622-4621 (Hot Springs)
Address Change? Name Change? Question?
In order to continue uninterrupted delivery of this magazine, please notify the Board of any change to your name or address. Thank You.
What is the Board of Nursing’s Scope of Practice?

I know you have read the mission of the Board of Nursing many times, but I will share it again -

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

You practice under a specific scope of practice and our mission statement defines the scope of practice for the Board of Nursing. Have you ever stopped to think about what the ASBN mission statement really means? The down and dirty is that we are in existence to protect the health, safety and welfare of consumers. All nursing boards and other health care related boards have basically the same mission – public protection. The provisions of the Nurse Practice Act and Rules dictate how we carry out our mission. The main activities of the board that enable us to carry out our mission and result in public protection are:

- License only qualified nurses,
- Establish and uphold competency standards,
- Approve nursing programs, and
- Discipline nurses for violations of the Nurse Practice Act.

The Nurse Practice Act only gives the board authority over nurses, not employers or facilities. If an issue with a nurse arises and it is not a violation of the Nurse Practice Act, we cannot do anything about it. For example, if we get a complaint that a nurse has committed adultery and it occurred on the weekend while she/he was off duty, there isn’t anything the board can do about it. I believe it reflects badly on the profession, but our hands are tied by the Nurse Practice Act. However, if the same behavior occurred while the nurse was on duty, we could possibly take disciplinary action for unprofessional conduct.

Workplace issues, such as mandatory overtime, staffing ratios and wage increases are also not under the auspices of the nursing board. I know you are probably thinking these issues do affect patient safety. I totally agree, but we only have jurisdiction over nurses – not over employers.

These issues, and those like them, are where the professional nursing organizations have a very important role. Professional nursing organizations exist to support nurses. They respond and act based on their membership’s directives. Look at the mission of several nursing associations you may be familiar with:

- Arkansas Nurses Association (ARNA) fosters high standards of nursing practice, promotes professional development, and advocates for the profession of nursing. ARNA collaborates with other healthcare providers to facilitate access to quality health care for the people of Arkansas.
- American Nurses Association (ANA) advances the nursing profession by fostering high standards of nursing practice, promoting the economic and general welfare of nurses in the workplace, projecting a positive and realistic view of nursing, and by lobbying the Congress and regulatory agencies on health care issues affecting nurses and the general public.
- Emergency Nurses Association (ENA) serves as an authority, advocate, lobbyist and voice for emergency nursing.

Are you a member of a professional nursing organization? There are many professional nursing organizations in existence – just google “professional nursing organizations.” You will find many that relate to nursing in general, as well as many specialty organizations. Your professional organizations are the ones to fight your battles with workplace issues. I believe every nurse should be a member of at least one nursing organization. Join one and let your voice be heard. Be a part of resolving issues that affect your nursing practice.
President Ramonda Housh presided over the business meeting held on May 12. Highlights of Board actions are as follows:

- Granted Continued Full Approval to:
  - Arkansas Rural Nursing Education Consortium LPN to RN Associate of Applied Science Degree in nursing program until the year 2021
  - Northwest Technical Institute practical nurse program until the year 2021
  - Arkansas Tech University Ozark campus Associate Degree in nursing program until the year 2021

- Continued Conditional Approval for the Southern Arkansas University Baccalaureate of Science in Nursing program until two years of an above 75 percent pass rate is achieved or until the board withholds approval status for noncompliance with the education standards

- Approved the curriculum revision for Arkansas State University, Beebe Practical Nursing program effective immediately

- Approved the curriculum revision for National Park College Practical Nurse program effective immediately

- Approved the alignment of curriculum for the Arkansas State University-Newport, Jonesboro and Marked Tree satellite campus practical nursing programs effective immediately

- Approved the addition of a Licensed Practical Nurse to Associate of Applied Science in Nursing online degree program at Arkansas State University-Jonesboro, to begin August 2017

- Approved the closure of Arkansas State University Newport-Jonesboro and its satellite campus in Marked Tree Practical Nursing programs and transition both campuses to satellite programs of Arkansas State University-Newport, effective immediately

- Approved the transition of the University of Arkansas Fort Smith Practical Nursing program under the Western Arkansas Technical Center (WATC) program effective fall 2017

- Offered commendation to the ASBN staff in regards to the Commitment to Ongoing Regulatory Excellence (CORE) Committee Report Data in which Arkansas’ statistics far exceeds the national averages presented
By the time you read this, summer should be coming into full-bloom! I love warm weather, sunshine, long summer days, the smell of fresh-cut grass, beautiful flowers, budding trees, Cardinal baseball and spending time at the lake! I hope you take some time to enjoy this beautiful season in Arkansas as well! We are blessed with an amazing Natural State!

In March, six ASBN board members and staff represented Arkansas at the National Council of State Boards of Nursing (NCSBN) Midyear meeting in Baltimore. This was my first visit to Baltimore and I was impressed with its history and culture. It was a welcoming city and I hope to go back again someday.

This was also my first time to attend the NCSBN Midyear meeting and it was very enlightening. Among the topics covered were the Enhanced Nurse Licensure Compact, the APRN Licensure Compact, Legislative updates, Simulation Guideline Updates and a Standards Committee Forum. Each Area met for an afternoon to discuss issues in their states. Arkansas is in Area III, along with Alabama, Florida, Georgia, Kentucky, Louisiana, Mississippi, North Carolina, Oklahoma, South Carolina, Tennessee, Texas and Virginia. It was great to meet with the other presidents and see how they are addressing the issues in their states.

We also had the privilege of hearing from expert presenters on topics, such as fraud detection, resources available for protecting the public, a review of criminal convictions in nursing and an update on the Federal Rap Back program. Sue Tedford and I attended the Executive Officer and Member Board President Leadership Forum on the first day, and it was a wonderful opportunity to look at how other boards of nursing are working in their respective states to improve the practice of nursing, protect the public, and work alongside their legislators to improve health care.

I would like to share a few important tidbits from the meeting. One is Nursys e-Notify through the NCSBN. If you are not aware of Nursys, it is a national licensure verification and disciplinary database repository that allows you to access information on nursing licenses when needed. There are several very important features available to nurses and employers alike.

As a nurse, you can register online and you will be notified of a license status change or discipline updates for any of your licenses enrolled in Nursys e-Notify. Nursys is a free service and registration is quick and easy. You just go to www.nursys.com and register. You will receive license expiration reminders via e-mail and/or text, as well as status updates. It also offers free fraud protection, notifying you of any changes made to your license.

As a health care or educational institution, you can register your company and enroll your employees in the system. You will be notified of any disciplinary action taken on employees’ license, reminded of upcoming expiration dates, and made aware of any nursing license that has expired. It is a simple way to manage a large group of employees and not miss out on important information. Again, this is a free service and Arkansas does participate in Nursys, along with most of our surrounding states.

Second, the items we are watching closely include Telehealth, the new Enhanced Nurse Licensure Compact and the APRN Compact. Know that your board staff and board members are staying up-to-date on the changes occurring daily in surrounding states and across the nation. I encourage you to be informed and educated on the changes as well. You can get additional information on these and other health care policy issues by visiting our website, www.arsbn.org, National Council of State Boards of Nursing website, www.ncsbn.org and Arkansas Nurses Association website at www.arna.org. We will continue to keep you updated as changes occur.

In closing, I would like to mention that one of our board members, Kaci Bohn, PhD, consumer member, was recognized alongside her mother, Mrs. Kathy Shipp, APRN, president of the Texas State Board of Nursing, at the NCSBN Midyear Meeting as the first mother-daughter board members to attend the conference. We are proud to have Dr. Bohn representing Arkansas.
NCSBN Provides Nursys e-Notify Free of Charge to Nurses Wishing to Track Their License Status

The National Council of State Boards of Nursing (NCSBN) now provides automatic license status quickly, easily, securely and free of charge to individual nurses who enroll through Nursys e-Notify. This innovative nurse licensure notification system was previously only available to institutions that employ nurses.

Nursys is the only national database for licensure verification for registered nurses (RNs), licensed practical/vocational nurses (LPN/VNs) and advanced practice registered nurses (APRNs). Nursys is designated as a primary source equivalent database through a written agreement with participating boards of nursing (BONs). Nursys is live and dynamic, and all updates to the system are reflected immediately, pushed directly from participating BON databases through frequent, secured data updates.

In just a few minutes, nurses can self-enroll into Nursys e-Notify for free and take advantage of a quick and convenient way to keep up-to-date with their professional licenses. They can receive licensure status updates, track license verifications for endorsement and create and manage multiple license expiration reminders. Keeping on top of license status can help nurses prevent fraudulent licenses or certificates being issued in their names.

Creating an account is quick and easy. Enroll at www.nursys.com/e-notify and select “As a Nurse” to complete the registration process. Learn more about Nursys e-Notify by viewing an introductory video or visiting the Nursys website. For questions, contact nursysenotify@ncsbn.org.

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

BOARD MEMBERS Standing, L to R: Sandra Priebe, RN; Kaci Bohn, Consumer Representative; Haley Strunk, LPN; Lance Lindow, RN; Tammy Mitchell, LPN; Pamela Leal, Rep. of the Older Population; Renee Mihalko-Corbitt, APRN; Mike Burdine, RN (not pictured is Board member, Karen Holcomb, RN)
Seated, L to R: Yolanda Green, LPN, Secretary; Ramonda Housh, APRN, CNP, President; Terri Imus, RN, Vice President; Cathleen Schultz, RN, Treasurer

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 RESOURCE FOR CLINICIANS

The Arkansas Department of Health has requested that the following information be shared with clinicians to provide them with a resource for managing complex patients with addiction, chronic pain, behavioral health issues and people living with or at risk for HIV. The Substance Use Warmline provides peer-to-peer consultation and decision making support. Please see below for more information and two case scenarios how Warmline has benefitted clinicians. This information is also available on the Prescription Drug Monitoring Program (PMP) website under the “Resources” link.

Substance Use Warmline
Peer-to-Peer Consultation and Decision Support
7 am – 3 pm PST Monday - Friday
855-300-3595

Free and confidential consultation for clinicians from the Clinician Consultation Center (CCC) at San Francisco General Hospital focusing on substance use in primary care.

Objectives of the Substance Use Warmline:
• Support primary care providers in managing complex patients with addiction, chronic pain, and behavioral health issues.
• Improve the safety of medication regimens to decrease the risk of overdose.
• Enhance the treatment, care and support for people living with or at risk for HIV.
• Discuss useful strategies for clinicians in managing their patients living with substance use, addiction and chronic pain.

Consultation topics include:
• Assessment and treatment of opioid, alcohol, and other substance use disorders.
• Approaches to suspected misuse, abuse, or diversion of prescribed opioids.

Methods to simplify opioid-based pain regimens to reduce risk of misuse and toxicity.
• Urine toxicology testing — when to use it and what it means.
• Use of buprenorphine and the role of methadone maintenance.
• Withdrawal management for opioids, alcohol, and other CNS depressants.
• Harm reduction strategies and overdose prevention.
• Managing substance use in special populations (pregnancy, HIV, hepatitis).
• Productive ways of discussing (known or suspected) addiction with patients.

The CCC’s multi-disciplinary team of expert physicians, clinical pharmacists and nurses provides consultation to help clinicians manage complex patient needs, medication safety, and a rapidly evolving regulatory environment.

Case Scenarios
Clinician Consultation Center Substance Use Warmline (CCC SUW)
Case 1*:
A physician called after his first visit with a 36-year old female patient taking methadone for chronic low back pain for 2 years. Physical therapy had been ineffective. She asked the provider for alternatives to methadone, as well as treatment for chronic anxiety and insomnia. She had a history of substance use but denied current use. She was one of the physician’s newly-inherited panel of patients with histories of comorbid pain and substance use.

The caller was concerned about: (1) cardiac toxicity from methadone, (2) how to titrate the patient off methadone, and (3) whether the patient should be referred to a methadone maintenance program.

The CCC SUW consultant advised the caller to try to get additional details on the patient’s past and current substance use to verify whether an opioid use disorder was present (specific DSM categories for opiate use disorders were discussed). If an opioid use disorder seemed likely, the caller was advised not to prescribe methadone because prescribing methadone for opioid addiction maintenance/detoxification requires being registered with the DEA as a Narcotic Treatment Program. The patient would need to be referred to a methadone treatment program or to a provider who holds a buprenorphine waiver. If the patient did not have a diagnosis of opioid use disorder, the caller was advised to work with (and possibly refer the patient to) a pain specialist to discuss buprenorphine and non-opioid therapies (including continued on page 12
The University of Arkansas Hope-Texarkana is a growing educational institution seeking dynamic, engaging individuals for full time instructor positions. Successful candidates will be well organized, punctual, reliable, team oriented, and will motivate students. They will possess the ability to interact positively with diverse groups of individuals, possess strong communication skills, and have the ability and willingness to use advanced technology. They will have a passion for teaching, and a genuine desire to serve students and the workforce.

The University of Arkansas Hope-Texarkana is accepting applications for a Full-time Nursing Instructor & ARNEC Program Chair (11 month appointment) for the 2016-2017 academic year. Requirements:

- Masters degree in Nursing with an unrestricted Arkansas RN license.
- Three years clinical practice in patient care or nursing education.
- Teaching experience preferred.
- Willingness to teach at Hope and or Texarkana campuses.
- Night and weekend duties may be required.

Interested candidates should submit an application online which can be found at www.uacch.edu, letter of interest, resume, official transcripts, and three letters of recommendation. Applications may be mailed to University of Arkansas Hope-Texarkana, Human Resource Officer, P.O.B.140 Hope, Ar. 71801. The review process will begin immediately. Only complete applications will be considered.

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This position is subject to a pre-employment criminal background check. A criminal conviction or arrest pending adjudication alone shall not disqualify an applicant in the absence of a relationship to the requirements of the position. Background check information will be used in a confidential, nondiscriminatory manner consistent with state and federal law.

EOE/AA
non-pharmacologic interventions) for chronic pain. The consultant discussed principles of opioid safety (including cardiac monitoring and tapering), how to approach new patients who transfer into care on chronic opioid therapies, and to consider obtaining a DATA 2000 waiver to prescribe buprenorphine.

Clinician Consultation Center Substance Use Warmline (CCC SUW) Case 2*:

A nurse practitioner called regarding a young, homeless HIV+ male patient with a 2-year history of daily methamphetamine use and severe agoraphobia and depression. His substance use and mood had worsened since his mother’s death 3 months ago. He now presented to re-engage in care after being ‘lost to follow-up’ for the past year, at the urging of his new partner (who is HIV negative) and other family members.

The NP wanted to know: (1) what medications to use for treatment of his stimulant use disorder, and (2) whether structured treatment programs were available.

The CCC SUW consultant discussed multiple evidence-based pharmacologic treatment options now available, including mirtazapine and naltrexone. The decision was made to start mirtazapine to address methamphetamine use as well as the patient’s anxiety and depression. The consultant advised that a selective serotonin reuptake inhibitor (SSRI) could be added at a later point to help augment treatment if necessary. The consultant also provided information on alternative treatment options (e.g. naltrexone, bupropion) if the recommended first-line approach was unsuccessful. Finally, the consultant provided the name of a local program dedicated to treating methamphetamine use among men who have sex with men (MSM) and offered to connect the caller to the CCC HIV Warmline and/or PrEPline to discuss further HIV care and prevention for the patient and his partner.

*Please note these are abbreviated case write-ups. Follow-up and additional details have been omitted for purposes of brevity.

This project is supported by the Bureau of Primary Health Care (BPHC) and the HIV/AIDS Bureau (HAB) AIDS Education and Training Centers (AETCs) of the Health Resources and Services Administration (HRSA) in the U.S. Department of Health & Human Services (DHHS)

Learn more about the Clinician Consultation Center Substance Use Warmline at http://nccc.ucsf.edu/clinical-resources/substance-use-resources

Resource for Clinicians continued from page 10
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<tr>
<td>Completely online</td>
<td>7 hours of Master’s core courses online and hybrid</td>
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<tr>
<td>All courses run 7 ½ weeks</td>
<td>Some Master’s courses run the full semester instead of 7 ½ weeks</td>
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<tr>
<td>Only meet the first day of orientation for ID badge and onboarding</td>
<td>Meet for initial orientation class. Some Master’s courses require occasional meetings.</td>
</tr>
<tr>
<td>Program length 12 months</td>
<td>Program length 18 months</td>
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ATTENTION APRNS: LEGISLATIVE UPDATES TO THE NURSE PRACTICE ACT AND CHAPTER 4 RULES

The spring 2015 legislative session brought multiple changes to the Nurse Practice Act and Chapter 4 Rules that pertain to advanced practice registered nurse (APRN) practice and prescribing. Statute changes to the Nurse Practice Act became effective on July 22, 2015, and the subsequent changes to the Chapter 4 Rules became effective on March 26, 2016.

**Act 529:**
Allows APRNs with Prescriptive Authority and a Drug Enforcement Administration (DEA) number to prescribe hydrocodone-combination products (now in the Schedule II controlled substance category) if expressly authorized by the collaborative practice agreement (CPA). APRNs who wish to prescribe hydrocodone-combination products (HCPs) must submit a new or updated CPA that contains the following language:

“The (above named) APRN is authorized to prescribe drugs listed in Schedules III through V and hydrocodone-combination products from Schedule II of the Controlled Substance Act.”

After the ASBN receives the new or updated CPA with the required language, the DEA is contacted and the APRN is sent a letter containing the remaining steps to complete the process. This process is also located on the ASBN’s website and under the Adv. Practice tab (see link “APRNS: Process for Verification of DEA Registration for HCP Product Prescribing”). After the DEA has updated the APRN’s DEA registration to include Schedules 2, 3, 3N, 4, and 5, the APRN can begin prescribing HCPs (within their scope of practice). Please note that HCPs are the ONLY Schedule II controlled substance that can be prescribed by APRNs.

Also, remember:
- APRNs must fax a copy of their new or updated DEA registration to the ASBN for their file (fax #: 501.686.2714, attention APRN Dept). No confirmation of receipt will be sent.
- APRNs must add HCPs to their prescriptive protocols – do not submit these to the ASBN unless requested.
- It is the responsibility of APRNs to notify the DEA of additions or terminations to their collaborative practice agreements (including practice location/address).

**Act 824:**
Allows APRNs to enter into a collaborative practice agreement (CPA) with a practicing physician who has similar training in scope, specialty, or expertise to that of the APRN. The previous language required that the physician had to have a practice comparable in scope, specialty, or expertise to that of the APRN. This change provides APRNs with more options for qualified collaborative physicians for their CPA. It also requires that the collaborating physician be in current practice. Please note that this update does NOT change the APRN’s scope of practice.

**Act 1208:**
Allows the AR Department of Health (DHS) to review prescriber and dispenser information to determine if there is suspicion of abuse or misuse of con-
trolled substances. If identified, DHS will notify the appropriate licensing board.

Permits DHS to issue an alert to the prescriber if his/her patient is being prescribed opioids by more than three physicians within a 30-day period.

Requires prescriber education, patient evaluation, and prescriber requirements for treating patients with chronic nonmalignant pain. This requirement was added to the Chapter 4 Rules.

Prescribing Education –
Requirement of two hours of prescribing laws that apply to Arkansas APRNs. For APRNs who hold a Prescriptive Authority Certificate (PAC), upon APRN license renewal (every two years), two of the five required pharmacotherapeutic continuing education hours must contain information on maintaining professional boundaries and prescribing laws. APRNs issued a PAC after December 31, 2015, shall obtain a minimum of three hours of continuing education on maintaining professional boundaries and prescribing laws for their first license renewal. Subsequent license renewal cycles will only require two of the five hours to include this information. Please check the ASBN website and ASBN Update for information on how to obtain these continuing education hours. Also, to reactivate a PAC number, the APRN must submit documentation of two hours (total) of continuing education (that includes maintaining professional boundaries and prescribing laws). These two hours are counted toward the five hours for each 12 months of non-prescribing activity.

Allows licensing agencies to require prescribers to run a PMP report prior to prescribing opioids.

Opioid prescribing guidelines for emergency departments – hospitals will be responsible for drafting and adopting these guidelines for provider prescribing of opioids to their emergency department patients. These guidelines shall address, at a minimum:

continued on page 16
Attention APRNs: Legislative Updates to the Nurse Practice Act and Chapter 4 Rules continued from page 15

1. An opioid that is written for more than the equivalent of 90 tablets, or dangerous drugs, or trial of other modalities.

2. Includes the number of APRNs from one to two; at least one of these APRNs must hold a prescriptive authority certificate (PAC) number.

3. Decreases the number of RNs from six to five.

4. Decreases the number of LPNs/LPTNs from four to three.

5. Adds an “at large” position that can be filled by an RN, LPN, or LPTN.

6. Requires one of the APRNs or RNs to be a nurse educator.

7. Must be reported within 7 days of the APRN’s last disclosure.

8. Must be reported within 7 days of the APRN’s last disclosure.

9. The APRN will keep accurate records to include the medical history, physical examination, other evaluations and consultations, treatment plan objective, informed consent, treatment, medications given, agreements with the patient and periodic reviews.

10. The APRN will periodically review the course of scheduled drug treatment of the patient and any new information about etiology of the pain. If the patient has not improved, the APRN may assess the appropriateness of continued prescribing of scheduled medications or dangerous drugs, or trial of other modalities.

APRNs (who hold a DEA number) who have violated the Nurse Practice Act/Rules involving prescription drugs who are on current probation with the ASBN:

1. Shall review a current PMP report (run within the past 30 days) prior to prescribing an opioid. Review of the PMP report shall be documented in the patient’s medical record.

2. Per Act 1208, an additional section was added to the Chapter 4 Rules: Section XII “Prescribing for Chronic Nonmalignant Pain”:

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 90 tablets, each containing five milligrams of

continued on page 18
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Attention APRNs: Legislative Updates to the Nurse Practice Act and Chapter 4 Rules continued from page 16

hydrocodone; or
2. A morphine equivalent dose of more than 15 mg per day; or
3. Tramadol – a prescription for 120 or more, 50 milligram tablets.

B. Patient Treatment and Evaluation
1. The patient shall be evaluated at least one time every six months by a physician who is licensed by the Arkansas State Medical Board.
2. A current PMP report shall be reviewed at least every six 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

C. 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.

For questions, please contact Jill Hasley at jhasley@arsbn.org or 501.686.2725.

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The University of Arkansas – Fort Smith is located on a beautiful 140-acre campus in the River Valley of Western Arkansas, nestled between the scenic Ozark and Ouachita Mountains. UAFS is one of 18 campuses that comprise the University of Arkansas system and is one of the largest suppliers of healthcare professionals in the state.

The Carolyn McKelvey Moore School of Nursing offers an exciting environment to educate future nurses! Housed in a 66,000 square foot facility that features a birthing center, critical care unit, 2-nine bed and 1-six bed fully equipped lab, a 7 bed simulation lab with one way mirror and cameras and hi-fidelity patient simulators, a fully equipped patient room, a nursing station and three computer labs. Classrooms feature a nova station, Sanyo televisions with DVD/VCR combination mounted in the ceiling on either side of a large electric projection screen, Educarts, Elmos, and the capability to engage the DVD/VCR from the nova station!

Faculty enjoy fully furnished private offices! The School of Nursing is eager to attract faculty who are committed to active, learner-centered teaching, innovation in curriculum design and delivery, and ongoing professional development and scholarship. We are currently seeking candidates for the following nursing faculty positions:

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Licensed Practical Nursing
Medical - Surgical
Pediatrics
Douglas O. Smith Jr. Endowed Professorship

For additional information visit our website: www.uafs.edu

University of Arkansas – Fort Smith
Human Resources
5210 Grand Avenue, Fullerton Administration Bldg., Room 239
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Fort Smith, AR 72913-3649
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AA/EOE

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501-217-9774
EOE
## ASBN FEES
### EFFECTIVE JULY 1, 2016

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Sponsored by Publishing Concepts, Inc.
10th Annual Compassionate Nurse and Nurse Educator Awards Banquet

Nurses and Nurse Educators from around the state gathered with their families, employers, co-workers and friends for the 10th annual Awards Banquet Saturday, June 4th at the beautiful Chenal Country Club in Little Rock.

This annual event, created and presented by Publishing Concepts, Inc, celebrates the outstanding efforts our Arkansas Nurses and Nurse Educators put forth everyday—both on the job and off. Nominations for our Nurse and Nurse Educator heroes were submitted by patients, co-workers and employers statewide.

The Banquet was hosted by Mistress of Ceremonies, Donna Terrell, local Fox News anchorperson. Awards were presented by Al and Virginia Robertson founders of Publishing Concepts, Inc.

This year’s Compassionate Nurse Award Winner was Uvita Scott. Debbie Koch was chosen Nurse Educator of the year.

The Nurse Comforter

Everyone has heard of “horse whisperers”, who can calm those majestic animals. I would like to introduce you to a “Nurse Comforter”, who has affected our group of nurses in profound ways. Her name is Uvita Scott. She is like a mighty wind blowing away the hurts and anguish for those of us who are supposed to do that for our patients (who happen to be students in our public schools). That mighty wind infuses strength into each of us as School Nurses in the Little Rock School District enabling us to carry that strength to those we serve.

Our students are not protected by a hospital environment. In fact they often live in the war torn areas of our own city, the streets of Little Rock. They are subjected to violence, rape, human trafficking, hunger, child neglect or abuse and the list actually goes on and on.

At times someone will come into a health room with a broken body part and not necessarily caused from an injury that occurred that day. Sometimes it will have occurred on a Friday evening or weekend and they have to wait through the agony of a fractured bone until they can see the School Nurse on Monday. That nurse will then take steps to contact the parent to advise immediate medical care, which is not as “cut and dry” as it sounds, but it can take considerable time to get the parent involved and committed to take action.

In other words, School Nurses are often on the front lines of not only treating illnesses and injuries that present to the school health room and giving medications, but counseling children and young people broken by their circumstances. That involves intervening in crisis situations such as students with suicidal thoughts and/or threats. Uvita has a great record of performing all of these many times...
over in the more than twenty-five years of service she has rendered to her students in Little Rock School District.

Uvita is a seasoned nurse with an impeccable work ethic who does not shy away from honing her skills and continuing her education to improve her clinical strengths. She also maintains membership in professional nursing organizations such as ANA, ARNA, ASNA, NASN.

Her diligence in improving community health is evidenced by the projects she initiates at Booker Arts Magnet Elementary School in Little Rock. These have included exercise programs, science fairs and other ventures that benefit not only the students but the faculty and staff also. Each year in the Fall Uvita hosts the Little Rock School District Flu Vaccine kick off clinic which is usually reported by the local TV news channels.

Parents have even called to compliment her competent care of students with health concerns like diabetes. Teachers and staff have been known to seek her advice concerning their health issues.

A teacher and longtime coworker described her as someone who never gets lunch and remembrance of her not so infrequent comment: “Oh my gosh, it’s head lice”.

At one time in her own life Uvita faced an earth-shaking surgery that would have brought down a person of lesser strength. But she came back and overcame the odds in order to continue contributing to school nursing in particular and humanity in general. She did not whine or complain about her circumstances but became an even greater encourager to us, her fellow school nurses. She often signs off her messages with “BNKurged” (be encouraged). We consider her a “silent servant”, not expecting any compensation for her kindness except the good feeling she gets inside herself.

So it is in this environment as school nurses that we at times become overwhelmed when we ourselves face crisis in our own personal families. That can include the illness or death of someone we love such as husband, wife, child, friend or even illness for ourselves.

Uvita prays with us collectively with such profound faith that it is evident she gains her strength from God and not mere man. She is very quick to admit that. She calms our anxieties and our fears. She brings peace with her caring words. Uvita is always there with the right things to say and her tender touch that we can feel even through the “cloud” of an email. I would not only call her a “Nurse Comforter”, but I really consider her our “Nurse Chaplain”. She can take our pain and help us see that good can even come out of crisis.

Uvita Scott is our “Nurse Comforter”.

---

It is my privilege to nominate Dr. Debbie Koch for the honor of being recognized as the most outstanding nurse in our state. Dr. Koch is a caring servant leader to patients, students, faculty members, supervisors, as well as nurses and members of the community. Dr. Koch sets an example of excellence and compassion in her daily walk. She is the first to identify opportunities for support and or growth and offers to lead or collaborate with others to achieve desired goals for health care delivery and teaching learning experiences. Dr. Koch portrays the qualities of professional nursing in a quiet manner to ensure that she does not draw attention to her leadership actions as she serves those around her.

Dr. Koch is instrumental in the development of new faculty and nursing students in their careers. She is a driving force in the success of others and the school of nursing. Dr. Koch goes above and beyond to lift up those around her through example and the gift of her time and talent. She has the ability to understand the view and needs of others and offer support at the time of need. She seeks and implements new opportunities for learning, improvement, and the pursuit of excellence. Dr. Koch contributes to the development of all those around her. Students and faculty members often describe her as committed to their success and always there for them when they need something. She inspires us on a daily basis and I believe she is a light in the lamp of the nursing profession in Arkansas.
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Stephanie Paladino
BSN Graduate
Walker Scholar

The University of Arkansas Eleanor Mann School of Nursing’s Bachelor of Science in Nursing (BSN) program is scheduled for an on-site accreditation review by the Commission on Collegiate Nursing Education (CCNE) on September 26-28, 2016.

Written and signed third-party comments will be accepted by CCNE until September 5, 2016. “CCNE shares third-party comments with members of the valuation team prior to the visit, but at no time during the review process are these comments shared with the program” (CCNE, 2014, p.8).

Signed, written comments may be submitted to: Commission on Collegiate Nursing Education
Attn: Third-Party Comments
One Dupont Circle NW, Suite 530
Washington, DC 20036

Public Notice of Accreditation Review of University of Arkansas Baccalaureate Degree in Nursing

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ACTION PLAN TO PREVENT UNPLANNED PREGNANCIES

Arkansas has the highest teen birth rate in the nation. In 2014, 3,782 Arkansas teens gave birth to an unplanned child. Of these unplanned pregnancies, almost 75 percent occurred in women aged 18 to 19 years. While there have been improvements in the past decade, the need for dramatic action is necessary in Arkansas to improve the lives and futures of young adults.

Students who face an unplanned pregnancy encounter many obstacles to continue their education. They must balance time and energy between the obligations of rearing a family, school work and potentially a job. Those who are unable to continue their education because of these obstacles are much more likely to face economic challenges throughout their life. The value of a college education is clear. Individuals who go on to receive a degree are more likely to build a career and earn higher salaries.

During the 2015 Arkansas General Assembly Regular Session, State Reps. Deborah Ferguson and Robin Lundstrom, and State Sen. Keith Ingram sponsored legislation that Gov. Asa Hutchinson signed into law as Act 943. The law requires the Arkansas Department of Higher Education to implement a plan of action to prevent unplanned pregnancies among unmarried 18- and 19-year-old college students. Arkansas is only the second state in the country to initiate such a bold endeavor. Mississippi passed similar legislation in 2014.

A working group was established to draft an action plan for all two- and four-year public colleges and universities in Arkansas. The plan is designed to be a guide that can be adapted to meet individual needs and preferences at each school. The working groups was co-chaired by Angela Lasiter, Arkansas Department of Higher Education; Lynette Watts, Women’s Foundation; and Dr. Roger Guevara, Southern Arkansas University. Members included co-sponsors Ferguson and Lundstrom, student intern Madeleine Parrish, and representative of colleges, universities, nonprofits and various agencies.

The action plan received approval from the Arkansas Higher Education Coordinating Board and the Arkansas Legislative Council in early November 2015. The working group continued to collaborate on the best way forward.

Working closely with the National Campaign to Prevent Teen and Unplanned Pregnancy (National Campaign), the group developed suggested resources for the schools’ consideration that include:

- A website with information and data from state, regional and national sources
- A video featuring Arkansas students discussing the obstacles of an unplanned pregnancy
- Online lessons developed by the National Campaign including interactive activities that focus on the importance of preventing unplanned pregnancy, abstinence, information on birth control, and the creation of a personalized action plan

Schools retain the ability to choose which resources they will utilize. These tools can be easily incorporated into student orientation, curriculum, and/or an already established health awareness program.

While the Act 943 action plan targets unmarried older teens attending college, we anticipate a much further reach. As students receive preventative information as freshmen, they may reach out to older students, friends and family. Student organizations are also encouraged to educate and mentor younger teens on the prevention of unplanned pregnancy.

The action plan will help ensure students have readily available and accurate information and resources to prevent an unplanned pregnancy. Ultimately, this can help young women and men pursue and complete their higher education and reduce the rate of unplanned teen pregnancies in Arkansas.

For more information, contact:
- Angela Lasiter at 501-371-2021 or angela.lasiter@adhe.edu
- The National Campaign website at http://thenationalcampaign.org/
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Arkansas

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www.uca.edu/nursing
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.

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## Disciplinary Actions

### APRIL 2016

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</table>
You are Invited to Attend:
ACT 1208 and the APRN
Chapter 4 Rule Changes*
Related to the APRN
Practice and Prescribing

Saturday, August 6, 2016
Embassy Suites
11301 Financial Parkway
Little Rock, AR 72211
To register:
anpassociation.org
First 90 registrants will receive an
ANPA bag with goodies

Speakers:
Sophia L. Riviere, MN, APRN, FNP-BC,
PPCNP-BC, FNAP, FAANP, Past AANP
Region 6 Director
Dr. Jean McSweeney, PhD,
RN, FAHA, FAAN
Jill Hasley, MNSc, APRN, ASBN
Program Coordinator for APRN Practice

*Renewal Update: If you have prescriptive authority, effective January 1, 2017, 2 of the 5 hours of pharmacology credit MUST contain information related to maintaining professional boundaries and prescribing rules, regs, and laws.

Continental breakfast | Lunch provided

This education activity will be submitted to the American Association of Nurse Practitioners for approval of up to 5 contact hours of accredited education.

Congratulations to the 2016 award recipients of the Excellence in Nursing Awards at Arkansas Children’s Hospital.
Your commitment to excellence in nursing is an inspiration to all of us.

Clinical RN - ICU
Marcy Wright
Clinical RN - Med Surg
Alisha Stephenson
Clinical RN - Surgical/Ancillary
Ashlea West
Clinical RN - Ambulatory
Heather Brady
Clinical RN - Specialty
Sonya Thompson
Friend of Nursing - ICU
Semeria Hill
Friend of Nursing - Med Surg
Carol Manning
Friend of Nursing - Surg/Ancillary
Paula Oliver
Friend of Nursing - Ambulatory
Michelle Blackmon
APRN of the Year
Bonnie Kitchen
LPN of the Year
Kaila Kelly
Nursing Educator of the Year
Lora Parker
Excellence in Research
Amy Huett
Nursing Leader of the Year
Diana Ramsey
Spirit of Nursing
Nancy Halbert
Daisy Teamwork Award
Pediatric Intensive Care Unit Team

Arkansas Children’s Hospital

APRN Update
501.686.2700
We congratulate the following nurses who were recognized as our 2016 Annual Nursing Award recipients:

- **Christina Davis, RN, BSN** – Transformational Leadership
- **Eric Peppers, RN, BSN** – Preceptor
- **Kaylee Sisoukrath, RN, BSN** – Resource Nurse
- **Kerin Gray, RN, ADN, BS** – Innovation
- **Susan Porter, RN, BSN** – Nurse Educator
- **Megan Thomas, RN, BSN** – Community Service

If you want a nursing career where nurses are valued and supported, consider UAMS. Visit nurses.uams.edu or call 501-686-5691.
JRMC Uniquely Focused On The Future

JRMC has been a major presence in Southeast Arkansas since the dawn of the 20th Century, but our vision for healthcare has always been focused on the future. We have committed ourselves to providing the latest technology, improving access to services, and anticipating the needs of our patients—all components of a larger goal to improve the quality of life in our community.

For information on nursing opportunities at JRMC, call Nursing Recruiter Gigi Florly at 870-541-7774 or e-mail Florlygi@jrmc.org

October 15th is the application deadline for the January, 2017 class at the JRMC School of Nursing. If you’re interested in earning an Associates of Applied Science in Nursing degree, call 870-541-7858 or http://www.jrmc.org/schoolofnursing/index.html

JRMC is looking for exceptional nurses to share our journey into the future. Nursing benefit options include:

- $8,000 Sign On Bonus
- Flexible staffing and JSS in-house agency plans
- Additional compensation for BSN, MSN and National certifications
- Employer Paid CPR, PALS, NALS, CLSA
- Health/Dental/Pharmacy
- Employer Paid Group Life/Accidental Death & Dismemberment coverage
- Employer Paid Long Term Disability
- Tuition Reimbursement and 529 Gift Plan
- Free on-site parking

Congratulations to JRMC’s latest DAISY Award Recipient!

Nancy May, RN

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THE DAISY AWARD
FOR EXTRAORDINARY NURSES