

NC BOARD
OF NURSING

SUMMER 2015 VOLUME 11 {Nº 3} EDITION 33

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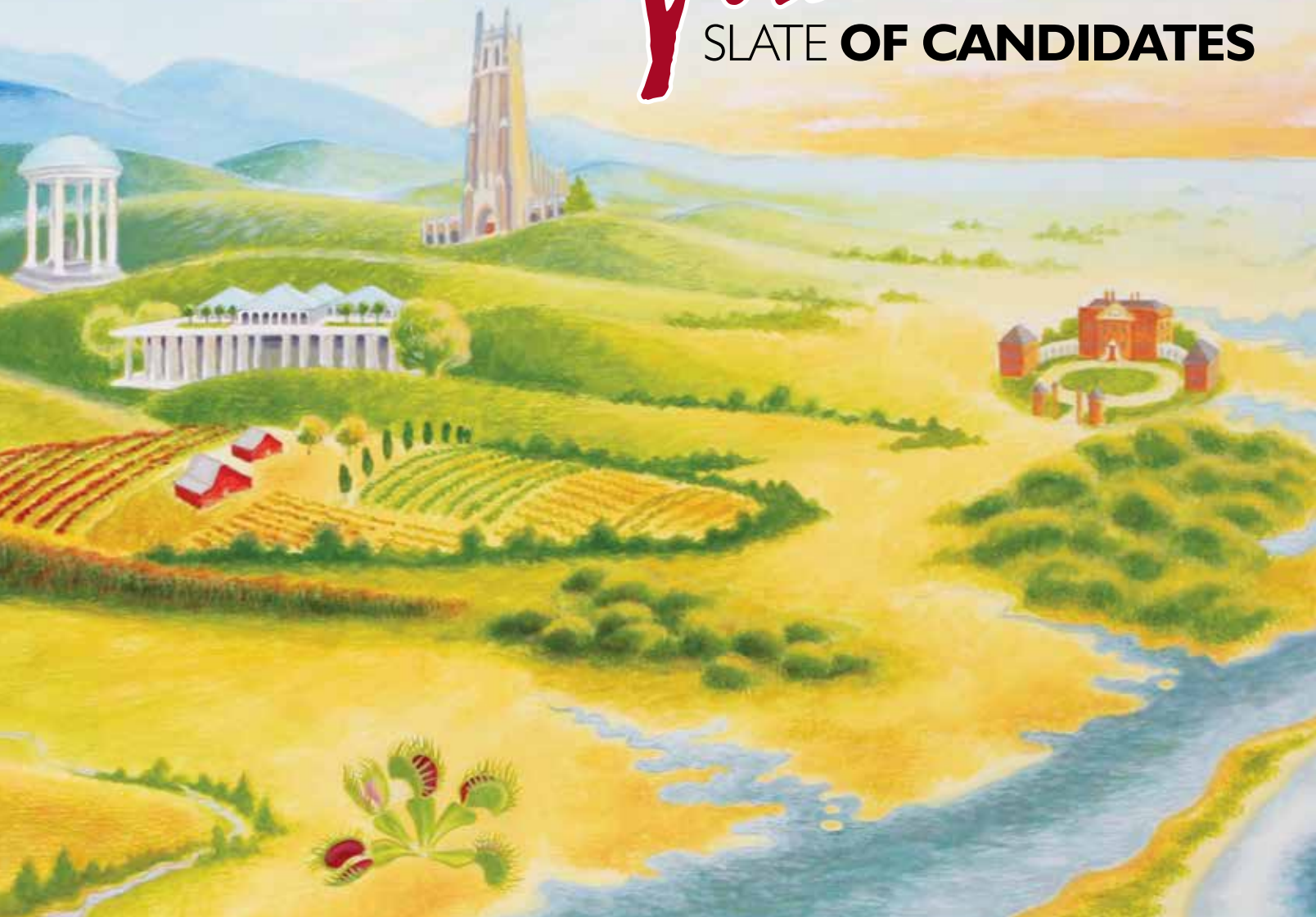
NURSING BULLETIN

Vote



SPECIAL
ELECTION EDITION

SLATE **OF CANDIDATES**



Publication of the North Carolina State Board of Nursing

SUMMER 2015 BULLETIN
NC BOARD OF NURSING
Nursing Bulletin is the official
publication of the North
Carolina Board of Nursing.

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Monday through Friday

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DayMeetsNight Media Services

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practice of nursing.

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NC BOARD
OF NURSING
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BULLETIN**

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from the **EDITOR**

Nursing Modernization Bill – not heard

The 2015 long session is still in session as I type this letter, but it's mostly over except for the budget negotiation (which could take a fair amount of time.) During this long session the Board of Nursing put forward its Nursing Practice Act Modernization Bill. It was introduced in both houses (SB 695 and HB 807). Several legislators stepped up to sponsor the bills and many nurses and supporters of nursing modernization worked long hours to encourage legislators to support the bills.

The Nursing Practice Act Modernization Bill does:

- Update language to align with electronic submission of applications and complaints
- Standardizes education, licensure and certification requirements for Advanced Practice Registered Nurses (APRNs)
- More closely aligns with the Model Act and Rules of the National Council of State Boards of Nursing (NCSBN)
- Adds language to better protect the public through disciplinary proceedings

Am I disappointed that the bill did not pass the legislature this first time? Yes. But having observed the General Assembly for more than a decade, I realize that many bills have to be introduced multiple times before they are acted upon and finally enacted into law.

For me, the most troubling part of our efforts to pass a Modernization Bill, was that the Board's bill didn't get a hearing in either the House or the Senate. Why was that? Perhaps the list of more important issues was so long the legislators just couldn't get to it. An alternative reason could be that the bill was controversial. All the more reason to have a hearing – so that the public and the legislators could hear the different viewpoints and decide the bill's future based upon its merits.

An academic study supported the bill as did the Federal Trade Commission (FTC). So who is against the bill and why? If it never comes up for discussion how are we going to address the concerns?

I encourage nurses and supporters of nursing to remain engaged. I will see you on Jones St. (the legislative bldg. address) in the near future.

David Kalbacker

Editor

Nursing Transport of the Client

Recently the Board of Nursing (BON) has received several calls and emails from across the state regarding the Registered Nurse's role and responsibilities for the emergency transport of clients, especially inter-facility transports. Registered Nurses (RNs) have an extensive and historical role of providing nursing care for critically ill and injured clients during interdisciplinary air and/or ground transports. During both emergent and non-emergent client transports, nurses serve to provide a continuum of client care throughout all phases of the transport. Nurses providing client transports utilize knowledge and expertise from various areas of specialty nursing practice including emergency, critical care, pediatrics, obstetrics, neonatal, trauma, and medical-surgical. The nursing transport of critically ill or injured clients requires accurate nursing assessment, analysis, nursing diagnosis and goals for outcomes, planning, implementation of interventions and medical orders, evaluation of responses to treatment, and management of technical equipment. Registered Nurses practicing in nurse transport roles must possess critical thinking, judgment, decision-making, prioritization, assessment, and evaluation skills that enable them to immediately recognize and respond appropriately to subtle and latent client signs and symptoms.

It is within RN scope of practice to provide nursing care and function as members of interdisciplinary air and/or ground transport teams on a routine and/or as needed basis. Transports may include specialty care programs, critical care, emergency, inter-facility, and convalescent. The transport of critical care, specialty care, and

inter-facility clients is beyond the LPN scope of practice. However, the LPN may provide convalescent transports for stable clients under the assignment and supervision of an RN, physician, or other person authorized by State law to provide LPN supervision. RN responsibility may include specific advanced activities/skills (such as endotracheal intubation, intraosseous access, emergency medication administration, etc.) that may be performed during transport and within the facility as permitted by policies and procedures. The Board of Nursing Scope of Practice Decision Tree for the RN and LPN is used to determine the RN scope of practice. The decision tree is located at www.ncbon.com in the Nursing Practice – Position Statements and Decision Tree's section.

States differ regarding the authority, the board of nursing or the state emergency medical services office, that regulates the out-of-hospital transport practice of the RN. In North Carolina, RNs providing nursing care during client transports are licensed and regulated by the Board of Nursing and are not required to hold Emergency Medical Services (EMS) credentials. An agency/facility maintains the option to require RNs within their employment to hold additional credentials or certifications prior to transporting clients. Client transports require an interdisciplinary approach. Transport team member roles are determined in accordance with the legal scope of practice, agency policies and procedures, operational protocols, and physician orders. The transporting RN maintains accountability for

providing oversight and supervision of the care of the client.

The most technologically advanced medical care and procedures are often available only at large regional medical centers. To receive specialty care, ill or injured clients often must be transferred to the regional medical centers by air or ground ambulances. Whenever possible, inter-facility transport of the client should be provided by a specialty transport team staffed with an RN. However, situations may arise in which the specialty transport team is unavailable and immediate transport of the client is required to prevent further injury and delay in surgical or medical treatment. In these circumstances, it is within the RN scope of practice for the hospital staff RN to transport the client from one facility to another and implement nursing care and medical orders appropriate to meet the needs of the client provided the:

- physician has designated the level of transport service requires an RN,
- referring physician provides transport/transfer orders, and
- hospital staff RN has received education, training, and validation of competencies specific to the needs of the transported individual client.

The RN providing transport services is accountable for a standard of care that is equivalent with his/her knowledge, education, training, and level of licensure. The RN is responsible for maintaining the appropriate level of nursing care and



● ●

Each member of the transport team is responsible and accountable for his/her actions and for the care she/he provides or, in some cases, does not provide. All members of the transport team: nurses, out-of-hospital providers, and healthcare professionals, bring unique skill sets and must work collaboratively to provide safe effective care. The BON has approved a new Position Statement, Transport of the Client: Position Statement for RN Practice, to provide clarification and guidance regarding the RN's scope of practice, role, and responsibilities for client transports. The position statement is located at www.ncbon.com in the Nursing Practice – Position Statement & Decision Tree's section.

NORTH CAROLINA NURSES VOTE!

Purpose:

To provide information and instructions about nominations, qualifications, and elections for members of the North Carolina Board of Nursing.

Objective:

Discuss the privilege held by North Carolina nurses to nominate and elect the nursing members of the North Carolina Board of Nursing.

The mission of the North Carolina Board of Nursing (Board) is to protect the public through the regulation of nursing practice. Over the years, the Board has grown to license more than 147,300 nurses (125,389 registered nurses and 21,976 licensed practical nurses).

DO YOU KNOW

- North Carolina licensed nurses have a privilege not held by other nurses in the United States. The North Carolina licensed nurse has the privilege to nominate, vote, and elect the nursing members to the North Carolina Board of Nursing.
- Elections for members of the North Carolina Board of Nursing are conducted annually. Elections are held from July 1st to August 15th.

- The percentage of nurses that voted in the 2014 election was 3.5%.
- Every nurse holding an active North Carolina nursing license is eligible to vote in the annual North Carolina Board of Nursing elections. Candidate positions for the 2015 NC Board of Nursing Elections of nurse members are: Nurse Administrator – Hospital or Hospital System, Nurse Educator – Baccalaureate or Higher Degree, and Licensed Practical Nurse.
- Nurses of North Carolina can preserve their privilege to elect members to the Board of Nursing by participating in the annual elections. Nurses of North Carolina have been given a great privilege to elect the members of the Board of Nursing. This privilege is sustained through active voting by the nurses of North Carolina. **VOTE!**

In the Beginning: A Brief History of the North Carolina Board of Nursing

In 1903, the North Carolina Legislature passed a law creating the Board of Nurse Examiners, later to be known as the Board of Nursing. The Bill was signed by Governor Charles Aycock and made North Carolina the first state in the nation to have a Board of Nursing and to mandate nursing registration for nurses. The first North Carolina Board of Nurse Examiners was composed of two physicians (elected by the North Carolina Medical Society) and three nurses from the North Carolina State Nurses' Association. The nurses to first

serve on the newly formed Board of Nurse Examiners were Constance E. Pfohl of Winston-Salem, Mrs. Marion H. Laurance of Raleigh, and Mary L. Wyche of Durham.

North Carolina is the only state in the nation in which the nurses have the privilege to nominate and elect nursing members to the Board. Eleven of the 14 Board of Nursing members are nurses and are elected by nurses holding a valid North Carolina nursing license. Participating in the election of Board members enables nurses to pro-actively and significantly influence the decisions and directions of nursing practice in North Carolina.

Composition of the Board of Nursing

The Board of Nursing consists of fourteen members composed of eight elected registered nurses; three elected licensed practical nurses; and three appointed public members, one by the Governor and two by the General Assembly. Members of the Board serve a four-year term. The four-year terms are staggered so that vacancies are consistently filled while maintaining a Board of experienced members. A Board member may not serve on the Board for more than two consecutive four-year terms or eight consecutive years.

Qualifications of Members Elected to the Board of Nursing

Elected Board members are composed of eight registered nurses and three licensed practical nurses. The minimum employment requirement for each registered nurse and licensed practical nurse on the Board is continuous employment equal to or greater than fifty percent (50%) of a full-time position.

The qualifications for each registered nurse position are:



- Nurse administrator (1 position) – is employed by a hospital or a hospital system, has accountability for the administration of nursing services, and is not directly involved in patient care;
- Advanced Practice Registered Nurse (APRN) (1 position) – meets the requirements to practice as a certified registered nurse anesthetist, a certified nurse midwife, a clinical nurse specialist, or a nurse practitioner;
- Staff nurses (2 positions) – individuals primarily involved in direct patient care regardless of the practice setting;
- At-large registered nurse (1 position) – registered nurse that is not currently an educator in a nursing program that leads to licensure or granting a degree;
- Nurse Educators (3 positions): must meet the minimum education requirements established by the Board's education program standards for nurse faculty. The positions are:

- o Practical nurse educator (1 position)
- o Associate degree or diploma nurse educator (1 position)
- o Baccalaureate or higher degree nurse educator (1 position)
- Hold a current, unencumbered license to practice as a registered nurse in North Carolina and be a resident of North Carolina;
- Have a minimum of five years of experience as a registered nurse;
- Have been engaged continuously in a position that meets the criteria for the specified Board position for at least three years immediately preceding the election; and
- Provide evidence that the registered nurse's employer is aware of the nurse's intentions to serve on the Board.

The APRN member (nurse practitioner, certified registered nurse anesthetist, certified nurse midwife, or clinical nurse specialist) is a registered nurse that:

- Graduated from or completed a graduate level advanced practice nursing education program accredited by a national accrediting body,
- Maintains current certification or recertification by a national credentialing

body approved by the Board or meets other requirements established by rules adopted by the Board, and

- Practices in a manner consistent with rules adopted by the Board and other applicable law.

The qualifications for the three licensed practical nurse positions are:

- Hold a current, unencumbered license to practice as a licensed practical nurse in North Carolina and be a resident of North Carolina;
- Have a minimum of five years of experience as a licensed practical nurse;
- Have been engaged continuously in the position of a licensed practical nurse for at least three years immediately preceding election; and
- Provide evidence that the employer of the licensed practical nurse is aware that the nurse intends to serve on the Board.

Powers and Duties of the Board of Nursing [G.S. 90-171.23]

The North Carolina Board of Nursing is charged by General Statute to hold at least two meetings each year for the transaction of business. The Board meets three (3) times per year in the following months: January, May, and September. Board meetings are open to the public and attendance is encouraged. The duties and responsibilities empowered to the Board by the Nursing Practice Act (NPA) are:

- Administer and issue interpretations of the NPA.
- Adopt, amend, or repeal rules and regulation necessary to implement the NPA.
- Establish qualifications and employ an executive officer who shall be a registered nurse and who is not a member of the elected Board.
- Employ other personnel to implement the NPA.
- Examine, license, and renew the licenses of duly qualified applicants for nursing licensure.
- Investigate and take appropriate disciplinary action for all persons violating the NPA.
- Establish standards for nursing education

programs; to include standards to be met by students, faculty, curricula, facilities, resources, and administration of the programs.

- Grant or deny approval for nursing programs, and review all nursing education programs at least every eight years or more often as necessary.
- Grant or deny approval of continuing education programs for nurses.
- Maintain records of all proceedings and provide an annual summary of actions.
- Appoint as necessary, advisory committees to deal with any issue under study.
- Appoint and maintain a subcommittee of the Board to work jointly with the subcommittee of the Board of Medical Examiners to develop rules and regulations to govern the performance of medical acts by registered nurses.
- Recommend and collect fees for licensure, renewals, examinations, and re-examinations.
- Implement the interstate compacts to facilitate the practice and regulation of nursing.
- Establish and provide programs for aiding in the recovery and rehabilitation of nurses who experience chemical addiction or abuse, or mental or physical disabilities.
- Request criminal background checks for applicants applying for licensure.
- Implement and regulate continuing competence in the practice of nursing at the time of license renewal or reinstatement.
- Order the production of any records concerning the practice of nursing relevant to a complaint received, an inquiry, or investigation by the NCBON.

Elections of Board of Nursing Members

Elections for Board members are held annually by the Board to fill vacancies of nurse members for the upcoming year. Nominations for candidates for election (RN and LPN) to the Board member vacancies are submitted to the Board annually between January 1st and April 1st:

- Candidates nominated for election of registered nurse members would need to submit the written petition of nomination (available from the Board) along



with at least 10 registered nurses' signatures endorsing the nomination. The endorsing registered nurses must be eligible to vote in the election.

- Candidates nominated for election of licensed practical nurse members would need to submit a written petition of nomination (available from the Board) along with at least 10 licensed practical nurses' signatures endorsing the nomination. The licensed practical nurses must be eligible to vote in the election.
- Eligibility requirements for voting for Board members are:
 - o Registered nurses with an active North Carolina license are eligible to vote in the election of the registered nurse Board members.
 - o Licensed practical nurses with an active North Carolina license are eligible to vote in the election of the licensed practical nurse Board members.
- Appointments of public Board members are: one by the Governor and two by the General Assembly.

Perspectives from Former Board Members

Gene Tranbarger, EdD, RN, MSN, FAAN, served in a registered nurse position as a member of the Board from 1979 to 1986 and provides a perspective of his service.

In the 1970's appointment to the Board of Nursing was by the Governor. The only qualification required for appointment was a current,

unrestricted license to practice nursing in North Carolina as a Registered Nurse or Licensed Practical Nurse. The Governor also appointed two physicians licensed to practice in North Carolina and two Hospital Administrators.

The Task-force of nurse leaders charged with rewriting the practice act determined the need for additional numbers of nurses due to a significant increase in the work demanded of the nurse members. In those days, the nurse members of the Board administered the licensure examinations and the Joint Sub-Committee of the Board of Medical Examiners and Board of Nursing reviewed applications for approval of Nurse Practitioners and their supervising Physician. Additionally it was felt that it would be useful to have nurses with a variety of nursing expertise to strengthen the Boards regulation of practice.

Conversations between the Governor and a representative of the Task-force indicated the Governor was not supportive of listing multiple qualifications for appointment to Boards. Discussion by the Task-force led eventually to a decision to change appointment by the Governor to election by individuals licensed to practice as registered nurses in NC for the RN members and by individuals licensed to practice as LPNs for the LPN members. The general wisdom was the election versus governor appointment could be used as a bargaining chip to succeed in writing in qualifications for appointment to the Board.

No one in the Governor's Office challenged the election and the qualifications and increased numbers of RN members of the Board was agreed to, written into the draft of the Act and adopted by the General Assembly.

The draft of the Practice Act established a transition period of four years. Each year an election would be held and one fourth of the existing Board would be replaced by the elected members. This would allow for transition to the new Board while continuing to have experienced members of the Board remain to assure continuing expertise during the transition period. Non-nurse stakeholders objected to the transition plan and demanded a total Board replacement by the first election. This was drafted into the Act and passed the General Assembly.

North Carolina has now had an elected Board since 1980 and remains the only Board of Nursing in the United States where licensees elect the members of the Board. The election process is not inexpensive and participation in the election is not impressive. Most individuals motivated to serve on the Board of Nursing over the years have served the Board with distinction. The Board of Nursing has continued to demonstrate excellence in regulating nursing practice. The public has been well-served by an elected Board. Our responsibility is to continue to demand excellence by monitoring the election process and voting for the best qualified candidates.

Patricia A Beverage, LPN served as a licensed practical nurse member on the NCBON from 1996 to 2001 and shares her perspective.

I have recently retired after serving as a Licensed Practical Nurse for 41 years. As most new retirees do, I reflect on my professional experiences, and look forward to the future. Beyond working with the many patients, I can honestly say that being an active North Carolina Board member was especially rewarding. There was so much to learn about the process of regulation, education and practice of our profession. During my two terms I participated in numerous hearings keeping the goal of protecting the public foremost, while maintaining compassion for the licensees who appeared before the Board. In addition, as a Board member I was afforded the opportunity to travel and was privileged to meet others in the nursing profession on a state and national level.

We are so privileged to be able to vote for the representatives on our Nursing Board. I believe it gives nurses genuine input into regulating our own profession, as opposed to outsiders telling us what needs to be done. In North Carolina the Board is independent, as opposed to an "umbrella" agency. This independence allows Board members and staff opportunities to

research many topics to improve nursing not only for those in practice, but for those we care for.

I cannot encourage NC nurses enough to take the time to serve on their Board of Nursing. The privilege of being able to vote for that representation should be exercised by ALL RNs and LPNs in this state. It is comparable to political voting, if you don't vote, then your voice is not heard.

I want to take this opportunity to thank the many nurses who voted for me during my two terms on the Board. They made it possible

for me to serve all the citizens of North Carolina in a very meaningful way. I am also indebted to NC Board Executive Directors Carol Osman and Polly Johnson and to the Board staff for the guidance and friendship they extended to me during my tenure.

In closing, not only do I recommend that each licensed nurse vote in North Carolina, but I also recommend that you consider running for the Board yourself should you have inclination. I can't help but think that you will find it a most rewarding experience.



NC

A NURSING PRIVILEGE

The opportunity to elect nursing members to the Board of Nursing is a privilege held by nurses of the state of North Carolina. In the words of former Board member, Patricia Beverage, LPN "... not only do I recommend that each licensed nurse vote in North Carolina, but I also recommend that you consider running for the Board yourself should you have inclination. I can't help but think that you will find it a most rewarding experience."

Reference:

Nursing Practice Act State of North Carolina August 2009, GS 90-171.21, GS 90-171.23

Wyche, M.L. (1938). The History of Nursing in North Carolina. University of North Carolina Press: Chapel Hill, NC.

Voting begins July 1, 2015 and continues until August 15, 2015 at midnight

Voting for Board members is as easy as clicking a computer mouse. Voting is an on-line process, can be accessed from any location via computer, and is available 24 hours a day, seven days a week.

Vote with or without Receiving Continuing Education Credit

Steps for voting are as follows:

- Have your nursing license number and year of birth readily available.
 - For an easy way to obtain your license number, verify it on-line at the NCBON website www.ncbon.com, select "Verify License" and enter your name or social security number.
- Access the NCBON website if you have not already done so, at www.ncbon.com
- On the Homepage, click on the vote logo under Information Spotlight.
- Then follow the instructions as indicated.
- You will have two options:
 1. Vote and receive Continuing Education Contact Hours, or
 2. Vote without Receiving Continuing Education Credit.
- Follow the instructions on the appropriate link.

NCBON CNE Contact Hour Activity Disclosure Statement

The North Carolina Board of Nursing will award

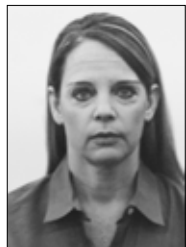
2.0 contact hours for this continuing nursing education activity.

The North Carolina Board of Nursing is an Approved Provider of continuing nursing education by the North Carolina Nurses Association, an accredited approver by the American Nurses Credentialing Center's Commission on Accreditation.

The Board invites you to take the opportunity to learn more about the candidates nominated for the upcoming Board member nominations. The candidates' positions on nursing issues are provided with biographical information and a brief interview with each of the candidates. **Elections are held on-line July 1 – August 15, 2015.**

SLATE OF CANDIDATES

POSITION: ONE – NURSE ADMINISTRATOR (7 Candidates)



NAME: Crystal Hayden • Position: Nurse Administrator

BIOGRAPHICAL INFORMATION: I have been a nurse for 22 years; 20 of which in NC. I received my BSN from Hawaii Pacific University in Kaneohe, Hawaii while stationed there with my husband during his service with the US Marine Corps. I have completed both a MSN (2004) and DNP (2013) from Duke University. I am currently the CNO at Onslow Memorial Hospital in Jacksonville, NC. Throughout my career I have served in a variety of roles such as staff nurse, Patient Care Coordinator in the Emergency Department, Director of Education, and full time faculty member at a local Community College. • **I would like to serve on the North Carolina Board of Nursing because...** Professionally, I am committed to ensuring those I work with have the resources to provide excellent, quality care in a patient and family centered environment. It is important to me that nursing works collaboratively with all other disciplines for the best patient outcomes in the most cost effective manner possible. In this age of healthcare reform and uncertainty, I truly believe nursing will have a leading role in defining and providing new pathways of care. • **What do I have to offer the public of North Carolina if I am elected to the**

Board of Nursing? Having been a nurse for 22 years, and progressed to the level of senior leadership, patient safety and advocacy are truly important to me. My experiences provide a background which will enable me to support the nursing profession in delivering safe and efficient care to those entrusted to us. I will be a strong voice for the nursing profession in collaboration with the needs of the public and the patients to help create an environment of excellent healthcare.

• **How do you think you can enhance public protection through your actions on the Board of Nursing?** I am committed to protecting the health and safety of North Carolina consumers while also promoting quality nursing care. Having served as a staff nurse and in a variety of leadership roles, I have the experience of balancing quality, safety and cost. I will use the lessons I have learned to examine current issues and participate in collaborative discussions and decision making to ensure the public receives high quality, excellent nursing care. • **How will the experience you have had as a nurse contribute to the Board's work?** Throughout my career, I have pursued safe high quality, ethical care both in my individual practice and as a leader of other nurses. It is my desire to assist the board in developing policy that continues this pursuit. Leadership experiences, conflict and change management and effective communication will be paramount in the public service of the board and are tools to which I am committed. • **Some perceive nursing as a job and other perceive it as a profession. How do you perceive nursing and why?** Nursing is much more than a job. A profession perhaps, but more accurately, a calling. Nursing combines the science of medicine with the art of caring for people and as with any art, the artist must have a passion, a true calling for what they do. Nursing can never be just a job; it is as much a part of who we are as being a husband/wife or a mother/father.



NAME: Frank DeMarco • Position: Nurse Administrator

BIOGRAPHICAL INFORMATION: I received a diploma in nursing in 1988 from Albany Medical Center School of Nursing. I have 27 years of community and tertiary healthcare experience. Since 1992 I have worked in Duke University Hospital's Emergency Department in staff, charge, preceptor and nurse manager roles and for the past seven years as the Clinical Operations Director. I completed a Bachelor of Science in Nursing from Winston-Salem State University in 2012 and will complete in 2015 a Master of Science in Nursing from East Carolina University. I am currently certified as a Nurse Manager Leader from the American Organization of Nurse Executives. • **I would like to serve on the North Carolina Board of Nursing because...** As the director of one of the busiest EDs in NC, I am concerned with how nurses respond to patients in times of crisis. I represent the realities of the healthcare environment and the capacity of novice and experienced nurses to respond to increased volumes and acuity. Serving on the Board would allow me to focus on patient safety and advocacy to support the nursing profession and my colleagues in such an honorable manner, giving back to the public and to the profession

that I have benefited from for the past 27 years. • **What do I have to offer the public of North Carolina if I am elected to the Board of Nursing?**

In 27 years of caring for the public in their most vulnerable situations, I have led teams in caring, advocating, and protecting patients and their families, with extensive experience with all socioeconomic, ethnic, and age groups, to include people impacted by the increasing mental health crisis. My passion is to improve the care we deliver to all people regardless of their reason for using healthcare services. Our patients and nurses deserve the best care. • **How do you think you can enhance public protection through your actions on the Board of Nursing?** As a nurse leader I continuously work with state and regulatory agencies. These relationships have helped me understand that protecting the public through regulation improves the quality and safety of patients. I strive to ensure that the nurses I lead provide the appropriate standard of care. Protecting patients while retaining and protecting staff is our most important responsibility. My voice will represent the patient and the nurse for board decisions. • **How will the experience you have had as a nurse contribute to the Board's work?** Understanding and leading nursing clinical practice is critical to the review of policies, procedures, and future practice guidelines generated by the Board of Nursing. My role involves negotiation every day through skillful communication to achieve the safest, highest quality outcome while maintaining standards. This experience will allow me to contribute to decision-making with the Board of Nursing. My experience at the bedside, as well as managing and directing nursing teams, will support those decisions. • **Some perceive nursing as a job and other perceive it as a profession. How do you perceive nursing and why?** Nursing is my profession; caring for patients in their most vulnerable states is my gift. Assuring my practice is based on evidence, my responsibilities are to contribute to decisions in my organization and the profession at large, and lifelong learning. Each is necessary to earn the trust of the patient and therefore it is my responsibility to serve to protect the public and maintain that trust. I would be honored to serve my profession.



NAME: Jacqueline Ring • Position: Nurse Administrator

BIOGRAPHICAL INFORMATION: I began my nursing career as a Staff Nurse in the Pediatric ICU at Carolinas Medical Center, after receiving my BSN from UNC-Charlotte. I have since held positions in varying capacities including; Nursing Instructor at Watts Hospital School of Nursing, Nurse Manager and Assistant Director of Women and Infant Services at WakeMed in Raleigh, Chief Nursing Officer at several hospitals including; Chatham Hospital, Johnston Health, and my current position as President/CNO at Highlands-Cashiers Hospital. In addition to my BSN, I hold a MBA/MHA degree from Pfeiffer University, and am currently pursuing my PhD in Nursing at UNC. • **I**

would like to serve on the North Carolina Board of Nursing because... I am sincerely focused on the delivery of safe, competent, nursing care, and will utilize my energy and expertise to contribute to the development and enforcement of standards that support the goal of keeping public safety in the forefront. As member of the Board of Nursing, I would have the opportunity to work with the other members to positively impact my profession, while maintaining a focus that supports safe patient outcomes. • **What do I have to offer the public**

of North Carolina if I am elected to the Board of Nursing? I offer the public of North Carolina a commitment to utilize my experience and leadership ability to ensure safe, competent and ethical nurses. I will provide insight based on my previous experience as a member of the NC Board of Nursing, and 39 years of nursing practice to provide a prudent voice toward decisions that govern nursing practice in North Carolina. • **How do you think you can enhance**

public protection through your actions on the Board of Nursing? The public is dependent on the North Carolina Board of Nursing to ensure the delivery of safe, ethical, competent care. I believe that it is the responsibility of nurses to hold each other accountable for the provision of the highest quality of care possible. I will work with the other board members to establish policy development and governance of the nursing profession to ensure that all nurses are held to the highest of professional standards. • **How will the experience you have had as a nurse contribute to the Board's work?** I have practiced

nursing in educational, administrative, and front-line clinical roles, and can relate to issues in all settings. I clearly understand and have experienced the challenges to providing safe nursing care, from clinical as well as administrative viewpoints. My previous experience on the Board of Nursing provides an excellent knowledge base of nursing regulation and policy development. I bring strong leadership qualities as well as a commitment to ensure safe, competent nursing care. • **Some perceive nursing as a job and other perceive it as a profession. How do you perceive nursing and why?** Nursing is much more than a job! It is clearly a profession requiring dedication and a commitment to provide care to those in need. The nursing profession is respected by the public as a collection of caring, professional individuals who give selflessly for the good of others. I am very passionate about the nursing profession, and am proud to be associated with such compassionate, dedicated individuals.



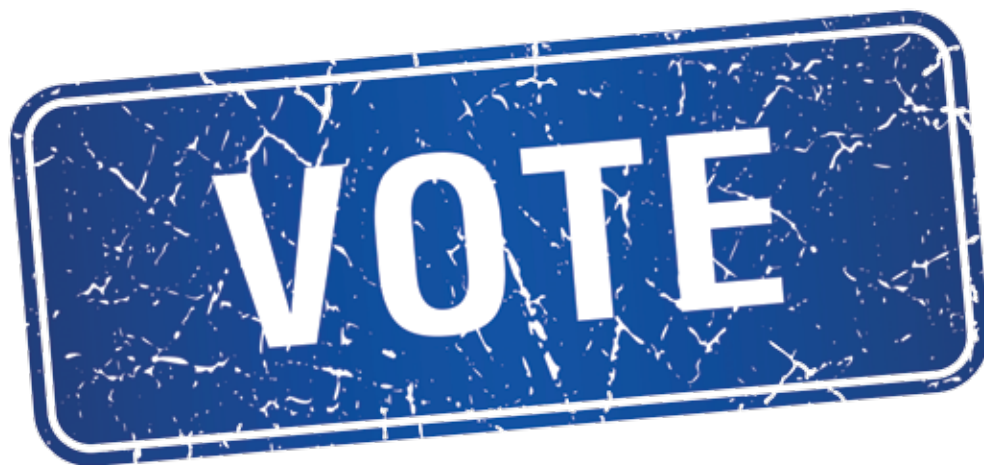
NAME: Karen Daniels • Position: Nurse Administrator

BIOGRAPHICAL INFORMATION: I am a graduate of Valdosta State College School of Nursing in Georgia and earned my BSN. I have held many positions in nursing with increasing responsibility. I returned to school at East Carolina University for my Master's Degree in clinical services management. I currently have clinical and administrative responsibility for all of nursing services in the corporation. As CNO I am also responsible for policy and procedure development; standards and practices development and adherence to the Nurse Practice Act and the Board of Nursing Regulations; as well as case management, customer service and education; I share responsibility for regulatory compliance issues with Quality Management. • **I would like to serve on the North Carolina Board of Nursing because...** I

am in a place in my career where it is time to give back to the public at whose discretion I serve and to the profession I love. • **What do I have to offer the public of North Carolina if I am elected to the Board of Nursing?** I have been a nurse for 35 years and bring a wealth of clinical, cultural and administrative experience with me. As a military dependent I was able to practice nursing all over the

world. I have worked in many different nursing settings; nursing home, as a volunteer clinical assistant and as a Registered Nurse in Med-Surg, ER, ICU, and L&D. I have been a charge nurse, nursing supervisor, manager, director and CNO. • **How do you think you can enhance public protection through your actions on the Board of Nursing?** I am acutely conscious of the social contract that exists between the profession of nursing and the public. Patient safety and therapeutic experience have always been uppermost in my thoughts and practice. By ensuring that all levels of nursing are permitted to work to the extent of their education and scope of practice we can ensure better community health as well as provide sick care. • **How will the experience you have had as a nurse**

contribute to the Board's work? Since my experience is so broad within nursing and has been culturally enhanced by years of travel I believe I bring a unique perspective to the board. • **Some perceive nursing as a job and other perceive it as a profession. How do you perceive nursing and why?** Nursing is a profession because it bears the marks of a profession. We maintain a code of ethics; we are social institution that provides an essential service; we engage in decision making for and with the client; we have agreed-upon performance standards for admission to and continuance in the profession; there is a high level of public trust and confidence in nursing; nursing has its own theoretical and applied knowledge and skills. It can be nothing else.





NAME: Eric Wolak • Position: Nurse Administrator

BIOGRAPHICAL INFORMATION: After graduating from UNC-CH School of Nursing in 2000, I began my professional career at UNC Hospitals and worked in the Burn Center, in Nursing Education and a Clinical Nurse IV in the CTICU. In 2007, I completed my MSN from UNC-Greensboro and shortly thereafter moved to Seattle, WA to be a nurse manager of both an ICU and ED. While in Seattle, I went back to school and received a Masters of Health Administration. In 2012, I moved back to NC and begin my tenure as Nursing Director for Medicine at UNC Hospital. • **I would like to serve on the North Carolina Board of Nursing because...** I am passionate about both nursing and healthcare policy. Holding a seat on the NC Board of Nursing provides a unique opportunity to support and advance our profession of nursing in the State of North Carolina, as well as participate in the important dialogue on how to provide safe care and reliable access to all of our citizens. • **What do I have to offer the public of North Carolina if I am elected to the Board of Nursing?** Holding both a MSN and a MHA, I have the unique ability to understand, and speak to, the clinical side, the public policy side, and the business side to our healthcare needs. I am also the eternal optimist and truly believe that, as a team, anything can be accomplished. • **How do you think you can enhance public protection through your actions on the Board of Nursing?** I pride myself in thinking from both a broad and detailed perspective. Often, new initiatives and/or policies are developed with good intentions when viewed from 30,000 feet. However, unintended consequences often arise once operationalized. As a member of the NC Board of nursing, I will ensure that issues are not only rationalized from a 30,000 foot view, but also drilled down to the minutia of detail so as to understand its impact on day-to-day operations. • **How will the experience you have had as a nurse contribute to the Board's work?** I have held multiple roles during my tenure as a Registered Nurse, which has provided me with a wealth of experiences. As an ICU Nurse, I saw sadness, resolve and happiness daily. As an educator, I mentored and developed clinicians in both technical and critical thinking skills needed to be successful. As an administrator, I have learned the art and science of building teams, creating a common vision and executing action items to meet goals. • **Some perceive nursing as a job and other perceive it as a profession. How do you perceive nursing and why?** Nursing is part of my self-identify. For me, it transcends being a job, or even a profession. It is not only a science, but also an art. In addition to contributing to and examining the literature for evidence-based practice, one must also have the passion and heart to care for people on the worst day(s) of their life, and do so knowing that for you, it is simply another day as a nurse.



NAME: Pamela Rudisill • Position: Nurse Administrator

BIOGRAPHICAL INFORMATION: Currently the Senior Vice President/CNO at Community Health Systems (CHS). CHS owns 199 hospitals across 29 states; four are located in North Carolina. From 2007-2014, I was Vice President/Nursing/Patient Safety at Health Management Associates (HMA). HMA owned 72 hospitals; three were in North Carolina. From 1996-2007, I was CNO at Lake Norman Regional Medical Center. During that time, Lake Norman Regional Medical Center achieved ANCC Magnet Recognition. Prior to 1996, I served as Critical Care CNS/NP at Presbyterian Hospital. I obtained a DNP from Duke University; MSN and BSN (Magna Cum Laude) from UNC Charlotte; diploma from Cabarrus School of Nursing. • **I would like to serve on the North Carolina Board of Nursing because...** I can contribute to the progression of nursing in the State of North Carolina. My diverse experience with nursing in 29 states and various roles provide knowledge and expertise in the field of nursing practice. North Carolina continues to lead the way through innovation in nursing practice as well as public protection. I want to provide my experience through working at both a regional and national level to

continue moving nursing forward in NC. • **What do I have to offer the public of North Carolina if I am elected to the Board of Nursing?** I have extensive nursing and healthcare environment knowledge as overseeing patient safety and collaborative preventative measures for HAC's, The Joint Commission and other regulatory bodies in my job. I also serve on The Joint Commission Nursing Advisory Board. In addition, the role as system CNO of a large health organization affords the opportunity to be a registered nurse in the state of TN since it is a Compact State, with primary license in NC. • **How do you think you can enhance public protection through your actions on the Board of Nursing?** I can enhance awareness of current trends in healthcare and offer input to nursing issues related to practice and safety. The work on providing input on Patient Safety initiatives as a member of the Joint Commission Nursing Advisory Board enhances the safety of the public. Just Culture environments are necessary for all health care organizations. • **How will the experience you have had as a nurse contribute to the Board's work?** My job affords the opportunity to work collaboratively with all disciplines of the healthcare team. Also as past president of AONE I continue to serve as chairperson of System CNE group. This collaboration gives me the opportunity to network with nursing leaders throughout the country. The broad knowledge of the state in past roles as President of the North Carolina Organization of Nurse Leaders, and Member of NCNA will be an asset to the board. • **Some perceive nursing as a job and other perceive it as a profession. How do you perceive nursing and why?** My background speaks to perception of nursing as a profession. Lifelong learning is a goal, starting as a diploma graduate, progressing to BSN, MSN, Med and DNP. Certification has been important in various roles from clinical (CCRN) to administration (NEA-BC). Continuous involvement in leadership roles in professional organizations speaks to perception as a profession (President GAMMA Iota Chapter Sigma Theta Tau, President NCONL, National Board of Directors for AONE and AACN, President of AONE).



NAME: Samantha Rowley • Position: Nurse Administrator

BIOGRAPHICAL INFORMATION: Samantha Rowley has been a Registered Nurse for more than 10 years. She started her nursing education by achieving an ADN, then continued to further her knowledge by going on to complete her BSN and MSN with nurse anesthesia specialty and is now a DNP(c). She has held multiple positions throughout the hospital setting that include CVICU RN, Certified Registered Nurse Anesthetist, Director of Surgical Services and Executive Director of Perioperative Services. She is currently employed by the Mission Health System with a role within Mission Hospital in Asheville, North Carolina as the Executive Director of Perioperative Services. • **I would like to serve on the North Carolina Board of Nursing because...** I am honored to be a member of the profession of nursing and all the facets that it offers. I have thoroughly enjoyed experiencing a variety of different aspects within the field and desire to expand my involvement within the profession and the community of North Carolina. I have a true passion for nursing and aspire to share this commitment with our state. • **What do I have to offer the public of North Carolina if I am elected to the**

Board of Nursing? If elected, I will offer the community of North Carolina my service and commitment to work towards making this the safest state for the nursing profession. This would encompass ensuring that our practicing nursing professionals are aligning with the Board's regulations and goals. Additionally, I believe in supporting initiatives that further propel the profession of nursing forward. • **How do you think you can enhance public protection through**

your actions on the Board of Nursing? I am a believer in “just culture,” as well as addressing challenges and opportunities when they arise. I am consistent and methodical with approaching sensitive topics and areas of concern. I support ensuring that the community is kept safe and that decreasing all harm is our primary focus, whether that be protecting the nursing community or healthcare population. • **How will the experience you have had as a nurse contribute to the Board’s work?** My experience has ranged from front line team member to advanced practitioner to executive leadership. I believe that having multiple perspectives to offer and experiences to share will only further enhance the work. Supporting the overall goals and strategic vision of the Board would be my primary motivation. • **Some perceive nursing as a job and other perceive it as a profession. How do you perceive nursing and why?** I perceive nursing as a profession. Nursing has only grown in its requirements to focus on specialized training, experience, and to expand education and academic preparation. There is a strong emphasis on ensuring the identity of nursing and all the profession represents. Nursing is an integral part of the healthcare environment and offers the community an invaluable professional service that is widely cherished and recognized.

POSITION: ONE - NURSE EDUCATOR – BACCALAUREATE or HIGHER DEGREE (4 Candidates)



NAME: Susan Hall • Position: Nurse Educator

BIOGRAPHICAL INFORMATION: Dr. Susan Hall serves as an instructor and Maternity Coordinator in the Division of Nursing traditional Baccalaureate Program at Winston-Salem State University. Dr. Hall has been an obstetrical/woman’s health nurse for 33 years. She earned her MSN at University of Phoenix, field of study in Health Care Administration and her Doctorate in Education (EdD) at University of Walden. Also, Dr. Hall obtained a Graduate Certification in Integrative Technology at Walden University. Susan has taught nursing since 2007. She is multifaceted in woman’s health such as, certified Childbirth Education, and Inpatient Obstetric Nursing. • **I would like to serve on the North Carolina Board of Nursing because...** Being a member of the Board will promote nursing excellence and allow me the opportunity to grow professionally and gain more knowledge on North Carolina policies, nursing practices, and procedures that will affect patients, families, and the community. As a nurse educator, it is important to stay abreast in order to direct and coordinate high level patient care and accountability in all job roles. • **What do I have to offer the public of North Carolina if I am elected to the**

Board of Nursing? I am dedicated and committed to learning and providing support to the board and the public of North Carolina. My work experience in education speaks a lot about me as a person. I would like to provide students with updates on policy changes and better prepare nursing students in providing high quality care and ensuring patient safety. • **How do you think you can enhance public protection through your actions on the Board of Nursing?** As an educator, my job is to communicate issues as soon as they occur with patients or families and uphold professionalism, and ensure fairness to all citizens. • **How will the experience you have had as a nurse contribute to the Board’s work?** I have had the privilege to work as a clinical staff nurse, and leadership role in Labor and Delivery and High Risk Maternity Care Unit. For several years I represented the unit in policy changes for clinical improvement. Being involved in nursing standards of practice in perinatal and woman’s health help me to stay current in standards and guidelines set with the association of Women’s health, Obstetric and Neonatal Nursing (AWOHN) to ensure high-quality patient care. • **Some perceive nursing as a job and other perceive it as a profession. How do you perceive nursing and why?** There is no question in my mind that nursing to me is a profession. Since I was a little child I wanted to become a nurse to make a difference with my patients. In other words to provide education, be there for the family and at the end of the day I could say I provided guidance, and loving care to all clients; this is what I perceive as a profession and not a job.



NAME: Judy Neubrandner • Position: Nurse Educator

BIOGRAPHICAL INFORMATION: Judy is a tenured professor and director of the School of Nursing at Western Carolina University. She received her BSN at William Jewell College in Liberty Missouri and her MS (N) in adult health and education from the University of Kansas. Her doctorate in education is from NC State University. She received a post-masters certificate in Family Nurse Practitioner and Palliative Care Nursing from the University of Alabama at Birmingham. Judy has worked in hospice and palliative care for many years. She maintains an active presence in the classroom and volunteers as an FNP in her local free clinic. • **I would like to serve on the North Carolina Board of Nursing because...** I am interested in the work of the board and believe my years of experience as an educator could contribute to the purpose of the board. I am passionate about nursing and the role that nurses play in our society. I believe a state board of nursing sets a tone and agenda that makes a difference in the health and well-being of our state and nation. • **What do I have to offer the public of North Carolina if I am elected to the Board of Nursing?** I bring many years of experience as a nurse and

a nurse educator and a keen interest in the future of our health care system and how we educate our future nurses. I am also very interested in the role nurses will play in the future and would like to be a part of creatively shaping the future of our health care system-of which I believe nursing is the foundation. • **How do you think you can enhance public protection through your actions on the Board of Nursing?** I think public protection involves increasing Quality and Safety—QSEN in our schools of nursing and our health care facilities. It also includes regulating nurses in their role as care providers and balancing that regulation with just culture. My active participation on the board will include bringing my current experiences from academics and practice to the thinking and decision making of the board. • **How will the experience you have had as a nurse contribute to the Board’s work?** My experiences both as an educator and a hospice/palliative care nurse and nurse practitioner have taught me to be a thoughtful decision maker and a collaborative leader. I have a background in workforce development and diversity that has increased my awareness of the many challenges and opportunities that face current and future nurses. My international and local work with indigent populations has made me more aware of social determinates that effect every aspect of our patient’s and student’s lives. • **Some perceive nursing as a job and other perceive it as a profession. How do you perceive nursing and why?** Nursing is a profession. It involves specialized education, a code of ethics and in some cases a calling. Nursing is both an art and a science and the role of the nurse should be based on evidence. It is important that nurses are life-long learners, always maintaining an expertise in their area of practice.



NAME: Yolanda Hyde • **Position:** Nurse Educator

BIOGRAPHICAL INFORMATION: I have 20 years of nursing experience. I earned my ADN from Richmond Community College; BSN and MSN in Nursing Education from UNC Greensboro; PhD in nursing from UNC Chapel Hill. I also earned an Interdisciplinary Certificate in Health Disparities from UNC Chapel. I am a full-time Assistant Professor at UNC Greensboro in the Adult Health Nursing Department. I also work part-time as a Patient Placement Coordinator at First Health of the Carolinas-Moore Regional Hospital in Pinehurst. • **I would like to serve on the North Carolina Board of Nursing because...** I have been teaching nursing for 15 years. I started teaching ADN students and now teach RN-BSN, MSN, and PhD nursing students. I see that I can better teach and serve them as a member of the NCBON. As President of the North Carolina League for Nursing, I love seeing all educators work together to ensure a strong nursing workforce. As I continue to practice, I see how NCBON benefits both education and practice. • **What do I have to offer the public of North Carolina if I am elected to the Board**

of Nursing? I have 20 years of experience providing safe, evidenced-based, nursing care to North Carolinians. I have numerous presentations and publications which show I want NC to have the best nurses. I also review forthcoming nursing textbooks and journal manuscripts to ensure they reflect the art and science of nursing. My leadership experience at FHC-Moore Regional Hospital has prepared me to assist nurses to provide quality care in strongly regulated and fiscally challenging times. • **How do you think you can enhance public protection through your actions on the Board of Nursing?** I have a strong set of professional ethics on which I will base my actions on the Board of Nursing. My ethics derived from my obligations and duties to every human being and my obligations as a nurse to help ensure and promote the health of all our citizens. My actions will serve all of North Carolina by ensuring that all nursing students and practicing nurses in the state are competent colleagues. • **How will the experience you have had as a nurse contribute to the Board's work?** More than any time of our history, nursing education has embraced innovation and excellence that is paving the way for transformation in nursing education, research and practice. As a nurse educator, I bring to the Board firsthand experience in promoting innovation and excellence in nursing education. In my 20 years of clinical experience, I have seen many trends and changes, which provides me with the foresight to where we need to go in the future. • **Some perceive nursing as a job and other perceive it as a profession. How do you perceive nursing and why?** As a professor, I ask nurses this question. Their responses confirm my belief that nursing truly is a profession. Nurses' decisions are based largely on science and our values, belief, and ethics are an integral part of our education and practice. In our practice, we are committed and accountable to our patients and each other. My teaching, practice, research, and publications all reflect these characteristics of our profession.



NAME: Nida Mullin • **Position:** Nurse Educator

BIOGRAPHICAL INFORMATION: 1992 ASN Davis and Elkins College, Elkins, WV; 1995 BSN Fairmont State College, Fairmont, WV (RN-BSN); 1999 MSN UNC Greensboro – Nursing Education Concentration; Clinical Instructor and currently clinical Assistant Professor at UNCG; Worked as staff RN at Moses Cone for 4 years. Taught at Rockingham Community College for 4 years. Taught at NC A&T SU for 4 years. Member Sigma Theta Tau; Certified Medical Surgical RN. • **I would like to serve on the North Carolina Board of Nursing because...** I would like to serve on the BON because I want to learn more about how the BON makes decisions regarding education and practice. As academic and healthcare environments change I want to be able to be involved in the process of upholding the standards of the BON. I think serving as the RN Educator member will allow me to fully understand the BON's work and be better able to implement changes within the academic setting. • **What do I have to offer the public of North Carolina if I am elected to the Board of Nursing?** I have a lot of knowledge and experience

having taught 16 years at the associate, generic BSN and RN to BSN levels. I have also taught at an HBCU. My teaching and practice experiences in NC have provided me unique understanding of the challenges of educating and practicing in our rapidly changing healthcare environment. • **How do you think you can enhance public protection through your actions on the Board of Nursing?** The BON RN Educator member is a powerful position as nurse educators are charged with education of safe, competent practitioners. As the nurse educator for the BON I pledge to stay up to date and uphold the standards set forth by the BON. • **How will the experience you have had as a nurse contribute to the Board's work?** I have been a nurse for 20+ years, both in practice and in education. Of particular interest are the BON's values on professionalism and accountability. Incivility is a problem in nursing practice and nursing education. Research demonstrates that up to 80% of staff nurses report having been bullied. In nursing education, 50% of faculty report being yelled at in the classroom and 43% of faculty report being yelled at in clinical setting. Since it appears bullying behavior is increasing, it is imperative that efforts be made to address this issue starting in nursing education. I will work with the Board to address this serious practice issue. • **Some perceive nursing as a job and other perceive it as a profession. How do you perceive nursing and why?** Nursing has all of the characteristics of a profession. It has a specific body of knowledge that provides a framework for practice; it has a standardized, formal higher education process which provided multiple entry points into the profession. It provides a service to the community; recognizes accountability, autonomy and responsibility within the role; has standards and a code of ethics set forth by the ANA and finally, a commitment to the profession by the establishment of professional organizations at the local, state and national levels.

POSITION: ONE - LICENSED PRACTICAL NURSE (3 Candidates)



NAME: Jodi Capps • **Position:** Licensed Practical Nurse

BIOGRAPHICAL INFORMATION: After graduating from Isothermal Community College, I began working in long-term care. I have served as a Unit Coordinator and Restorative Nurse but my experience is mostly as a floor nurse. Having also worked in a locked dementia unit, I state that my heart is truly for geriatrics and dementia patients who need someone to speak up for them. I became a Certified Dementia Practitioner with NCCDP in 2012. I'm currently employed by Carolina Village, a Continuing Care Retirement Community, in the Assisted Living Unit, as well as PRN in two skilled nursing facilities. • **I would like to serve on the North Carolina Board of Nursing because...** The field of nursing is ever changing, especially with the implementation of the Affordable Care Act. I would like to both understand and shape the future of nursing at the policy level. • **What do I have to offer the public of North Carolina if I am elected to the Board of Nursing?** I offer my eyes to observe, my ears

to listen, my mind to think critically, my time to serve and my voice to advocate for my patients. • **How do you think you can enhance public protection through your actions on the Board of Nursing?** I can bring awareness to the potential safety concerns that I've seen both as a nurse and consumer, and use my experiences to be part of practical solutions to said concerns. • **How will the experience you have had as a nurse contribute to the Board's work?** I provide the perspective of a long-term care nurse practicing in western North Carolina. I'm so thankful our Board of Nursing is varied in age, gender, race, religion, geographical location and practice! Each member's unique viewpoint helps bring out different facets in each situation. • **Some perceive nursing as a job and other perceive it as a profession. How do you perceive nursing and why?** Nursing is a profession because it requires specific skills and training. It is a calling because it demands much of us: physically, mentally and emotionally. Lastly, it is a great privilege to serve others in their times of need.



NAME: : Carol Wilson • Position: Licensed Practical Nurse

BIOGRAPHICAL INFORMATION: I graduated from the Practical Nursing program at Rockingham Community College in 1992. I began my nursing career on the telemetry unit at Annie Penn Hospital in Reidsville, NC. Now I work in home health and have for 22 years. I am currently employed with Bayada working with trach/vent clients. Since then I have earned a BA in psychology and a master's degree in counseling. I am also a therapist at RHA Behavioral. I currently serve on the Board of Nursing, and have since 2012. This has proven to be one of the most enriching experiences of my nursing career. • **I would like to serve on the**

North Carolina Board of Nursing because...It is a honor to be of service to a profession that has been such a tremendous influence in my life. The Board of nursing stands to protect the public through regulating the practice of nursing. Promoting nursing

education and up to date standards of practice enable nurses to reach farther than ever before to have an impact on our communities. The current health care politics both complicate and enhance the role of nurses in our state. • **What do I have to offer the public of North Carolina if I am elected to the Board of Nursing?** I can add the home health perspective to broaden the board's knowledge of home health needs. Home health differs greatly from hospital practice. Resources are not available in the home as they are in an institution. Also, having experience in mental health and physical health gave me an experience base to draw from that is unique. I am able to integrate that knowledge into my board related decisions and help nurses treat the whole person. • **How do you think you can enhance public protection through your actions on the Board of**

Nursing? I have served on the Board of Nursing for the past two years. Through that experience I've gained an understanding of the effects nursing has on the public. Board staff created "Just Cause" to ensure nurses get a fair shake when practice issues arise. Discipline for nurses is not simply black or white. Cause and effect, experience, personal circumstances, and institutional mindset all play a role. Understanding these processes is crucial. • **How will the experience you have had as a nurse contribute to the Board's work?** First, I bring over two years of board service to the table. I also bring 22 years of home health knowledge & experience, and 3 years of mental health experience. Board decisions affect nurses statewide in all fields. The differing experience of board members is what enables us to assess practice, education, safety, and disciplinary issues that arise from a broad perspective. • **Some perceive nursing as a job and other perceive it as a profession. How do you perceive nursing and why?**

Nursing is a noble profession that reflects a lifestyle of caring. I perceive nursing as a calling to service. We will all leave a legacy of some sort. I hope the work of my hands and heart characterizes mine.



NAME: : Lola McCune • Position: Licensed Practical Nurse

BIOGRAPHICAL INFORMATION: I have had the pleasure of being a Licensed Practical Nurse for nineteen and a half years. My career started off in long term care then moving into Psychiatric Nursing with the State of Michigan for hospital/prison for approximately seven years, followed by sub-acute care and Admissions nurse which allowed me to build on my assessment skills and understanding of continuum of care; while evaluating, teaching, caring for and educating families and patients. I do believe I am continuing to evolve as a nurse. I am currently growing my gift in Homecare as a field nurse working with clients who are tracheostomy and ventilator dependent. I am committed to quality and continuum of care. I truly feel that my experience and knowledge of healthcare will aide in a joint effort for continued growth. • **I would like to serve on the North Carolina**

Board of Nursing because...I would like to make a difference. I would like for the Board to use my knowledge and experience to help in shaping policy and procedure in the ever changing world of healthcare. • **What do I have to offer the public of**

North Carolina if I am elected to the Board of Nursing? I have 19 ½ years of nursing experience, compassion and professionalism. I believe I understand policy and continuum of care from hospital to home. • **How do you think you can enhance public protection through your**

actions on the Board of Nursing? I can assist in the protection of the public by adhering to the Mission, Laws and Procedures with honesty, compassion and integrity. • **How will the experience you have had as a nurse contribute to the Board's work?** My 19 ½ years of experience and knowledge of continuity of care can act as a bridge coupled with laws and policy of the Board will allow us to always move forward toward our missions and goals. • **Some perceive nursing as a job and other perceive it as a profession. How do you perceive nursing**

and why? I perceive nursing as a profession that an individual is called to do. To have the ability to care for someone in a healing way with compassion, skill, quality and good bedside manner is a gift.

SUMMARY of ACTIVITIES

ADMINISTRATIVE MATTERS

- Approved increase in renewal fee from \$92 to \$100 effective July 1, 2015
- Approved the proposed fiscal year 2015-2016 budget and designation of funds

REGULATORY COMPLIANCE ACTIONS

Received reports and Granted Absolutions to 0 RNs and 1 LPNs.

Removed probation from the license of 15 RNs and 9 LPNs.

Accepted the Voluntary Surrender from 11 RNs and 0 LPNs.

Suspended the license of 7 RNs and 3 LPNs.

Reinstated the license of 12 RNs and 3 LPNs.

Number of Participants in the Alternative Program for Chemical

Dependency: 159 RNs and 10 LPNs (Total = 169)

Number of Participants in the Chemical Dependency Program (CDDP):

108 RNs, 7 LPNs (Total = 115)

Number of Participants in Illicit Drug and Alcohol/Intervention Program:

31 RNs, 10 LPNs (Total = 41)

EDUCATION MATTERS:

Ratification of Full Approval Status – 3 programs

Ratification of Expansion in Enrollment – 1 program

Determination of Program Approval Status:

Initial Approval – 1 program

FYI Accreditation Decision by ACEN – 7 programs

NORTH CAROLINA BOARD of Nursing Calendar

Board Meeting
Sept. 24-25

**Licensure
Review Panels**
August 13
Sept. 10
Oct. 8

**Administrative
Hearings**
July 23
Sept. 24

**Education/Practice
Committee**
Aug 5
Dec. 2

CNS Recognition Required by October 1, 2015

Effective October 1, 2015, recognition by the NC Board of Nursing will be required for practice at the advanced practice clinical nurse specialist (CNS) level. This means that those who currently have voluntary recognition by the Board of Nursing and all those who wish to practice as a CNS must qualify under the new requirements. All voluntary recognitions will end on October 1, 2015.

There are two parts to the CNS recognition process—completion of an online application and submission of required documentation for review by the Board.

For the online application:

- Go to www.ncbon.com and click on Licensure/Listing.
- Go to Advanced Practice Registered Nurse and click on

Clinical Nurse Specialist.

- Follow the instructions to complete the online application.

Supporting documentation:

- A transcript indicating completion of a master's or higher degree in Nursing must come directly from the school.
- Evidence of national certification as a CNS sent directly from the certification body.
- If no CNS certification is available in the clinical specialty, a Portfolio must be submitted.

More detailed information regarding what must be submitted to the Board is available on the Board of Nursing website, www.ncbon.com, on the Homepage under News and Announcements.

*See how
filling a canvas
can erase so
much else.*

Through lessons in painting, drawing, poetry, photography, music, and more, we transform a patient's hospital room into an artist's studio. Until there's a world free of illness and disability, we help kids imagine one.

You can help them, too, by donating at artsforlifenc.org



A Certified Nurse-midwife's mission

It's what we all strive for every day with every patient we see: safe, respectful high-quality care.

For certified nurse-midwives, our mission is to make sure women and infants are as healthy as they can be. Our philosophy puts the women at the center of care and we know that a woman's good health is essential for the wellbeing of her family, community and nation.

North Carolina needs innovation and modernization in its approach to maternity care and women's health. Access to care is an issue across the state, in both urban and rural communities. 31 out of 100 counties lack an obstetrician/gynecologist. In urban areas, a woman can wait up to eight weeks for her first prenatal visit. These shortages lead to delays in care, and in some cases, no care at all. The result: undesirable outcomes like increases in neonatal and infant mortality, low birth weight, medical intervention and caesarean section.

The research shows early and regular high-quality prenatal and pre-conception care can improve the health of women and their families. This healthy start has lifelong benefits for everyone.

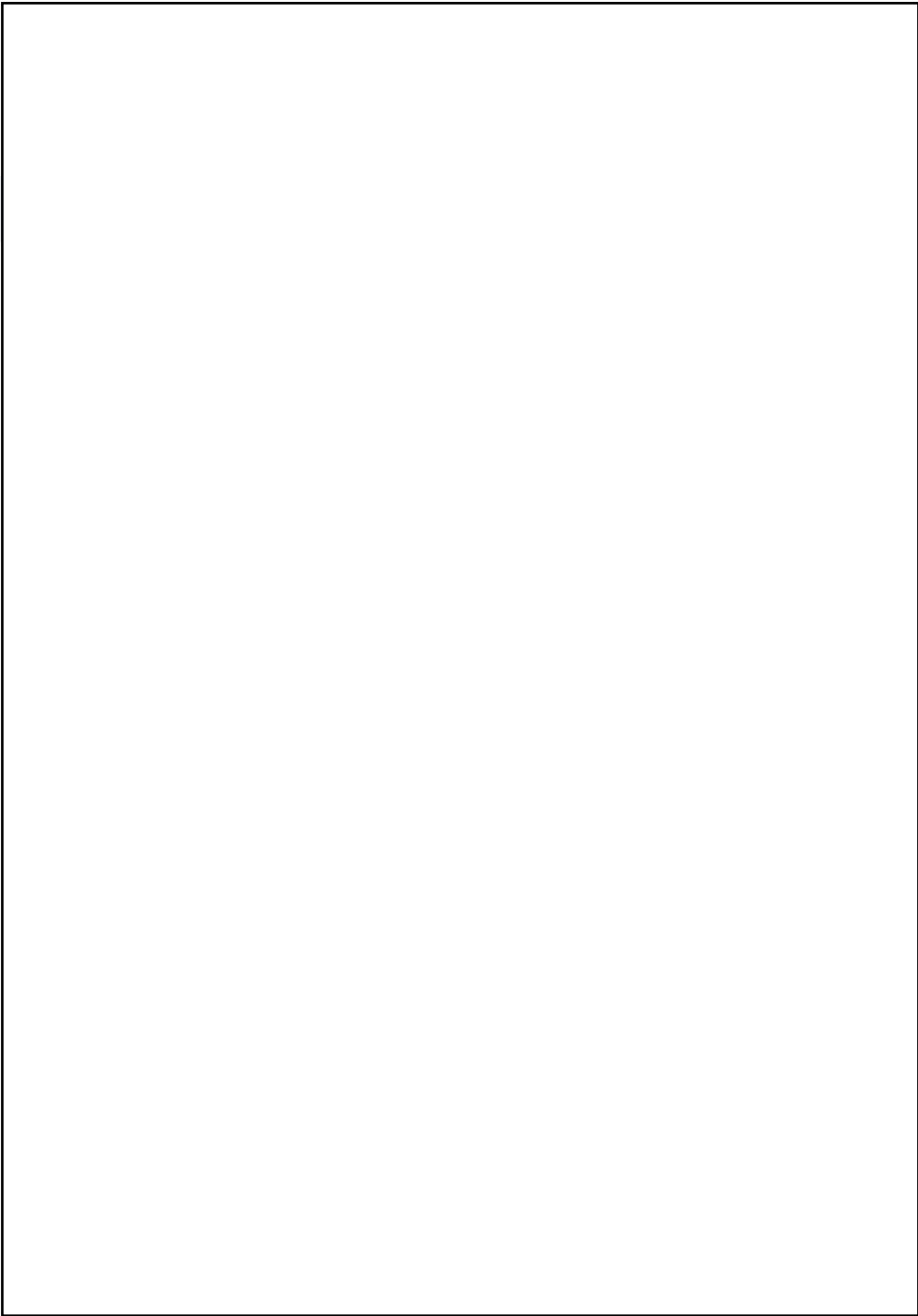
One way to increase access is to encourage certified nurse-midwives to practice wherever we are needed, across the state. The current requirement

for physician supervision limits the availability of qualified providers and inhibits innovation in women's health.

Modernizing the practice act would remove that archaic requirement and allow certified nurse-midwives to practice where we are needed. Practicing to the full extent of our

training and education is essential when our mission aims to guarantee our patients get the very best care.

Suzanne Wertman, MSN, RN, CNM
President, North Carolina Affiliate
of the American College of Nurse-Midwives



CE Opportunities 2015



To access online CE articles, webcasts, session registration, and the presentation request form, go to:

www.ncbon.com Click on:



to the right of the homepage.

Questions on Online Bulletin Articles

Contact:: Linda Blain
919-782-3211 ext. 238 lindab@ncbon.com

For Webcasts and Orientation Session see bottom of columns for contact info.

Online Bulletin Articles

North Carolina Nurses Vote in 2015! (2 CHs)

July 1 – August 15, 2015
No fee required

Who's Your Supervisor or Manager? Nursing Practice: The Management and Supervision of Nursing Services (1 CH)

No fee required

Getting to Know your Licensing Board: the North Carolina Board of Nursing at a Glance (1 CH)

No fee required

Uh oh...the Board of Nursing called... Complaint Reporting & Resolution (1 CH)

No fee required

Social Networking and Nurses (1 CH)

No fee required

Delegation: What are the Nurse's Responsibilities? (2 CHs)

No fee required

More offerings on website

Webcasts

Understanding the Scope of Practice and Role of the LPN (1 CH)

Provides information clarifying the LPN scope of practice. An important course for RNs, LPNs, and employers of LPNs. No fee required.

LEGAL SCOPE OF PRACTICE (2.3 CHs)

Provides information and clarification regarding the legal scope of practice parameters for licensed nurses in North Carolina.

\$40.00 Fee.

Questions:

Pamela Trantham
919-782-3211 ext. 279
pamela@ncbon.com

Orientation Session

Face-to-face workshop at NC Board of Nursing office.

Information session regarding the functions of the Board of Nursing and how these functions impact the roles of the **nurse administrator** and the **mid-level nurse manager** in all types of nursing services.

Session Dates

September 16, 2015
November 5, 2015

\$40.00 fee (non-refundable unless session is canceled)

Register online at www.ncbon.com.

Registration at least two weeks in advance of a scheduled session is required.

Seating is limited. There is usually a waiting list for this workshop. If you are unable to attend and do not have a substitute to go in your place, please inform the NCBON so someone on the waiting list can attend.

Paper registration request, contact:

Paulette Hampton
919-782-3211 ext. 244
paulette@ncbon.com

PRACTICE CONSULTANT AVAILABLE TO PRESENT AT YOUR FACILITY!

An NCBON practice consultant is available to provide educational presentations upon request from agencies or organizations.

To request a practice consultant to speak at your facility, please complete the Presentation Request Form online and submit it per form instructions. The NCBON will contact you to arrange a presentation.

Standard presentations offered are as follows:

- **Continuing Competence (1 CH)** – 1 hour – Presentation is for all nurses with an active license in NC and is an overview of continuing competency requirements.
- **Legal Scope of Practice (2.0 CHs)** – 2 hours – Defines and contrasts each scope, explains delegation and accountability of nurse with unlicensed assistive personnel, and provides examples of exceeding scope. Also available as webcast.
- **Understanding the Scope of Practice and Role of the LPN (1 CH)** – 1 hour – Assists RNs, LPNs, and employers of nurses in understanding the LPN scope of practice. Also available as webcast.
- **Documentation and Medication Errors (1 CH)** – 1 hour – Explains purpose, importance, and desirable characteristics of documentation; describes relationship between nursing regulation and documentation; identifies practices to avoid and those that may violate NPA; and identifies most common medication errors and contributing factors.
- **Nursing Regulation in NC (1 CH)** – 1 hour – Describes Board authority, composition, vision, function, activities, strategic initiatives, and resources.
- **Introduction to Just Culture and NCBON Complaint Evaluation Tool (1.5 CHs)** – 1 hour and 30 minutes – Provides information about Just Culture concepts, role of nursing regulation in practice errors, instructions in use of NCBON CET, consultation with NCBON about practice errors, and mandatory reporting. Suggested for audience NOT familiar with Just Culture.
- **Introduction to the NCBON Complaint Evaluation Tool (1 CH)** – 1 hour – Provides brief information about Just Culture concepts and instructions for use of the NC Board of Nursing's Complaint Evaluation Tool, consultation with NCBON about practice errors, and mandatory reporting. Suggested for audience already familiar with Just Culture.

The North Carolina Board of Nursing is an approved provider of continuing nursing education by the North Carolina Nurses Association, an accredited approver by the American Nurses Credentialing Center's Commission on Accreditation.

Helpful Tips on Diagnosing Acute Pesticide Poisoning



The North Carolina Pesticide Incident Surveillance Program, a program within the NC Division of Public Health, monitors the frequency of acute pesticide poisonings in the state and requires health providers to report confirmed or suspicious cases to them. Like many illnesses linked to environmental exposures, however, pesticide poisonings are commonly under diagnosed due in large part to barriers in seeking care and lack of recognition.

So how do you properly diagnose and treat a pesticide poisoning? Taking an occupational and environmental history is the first step. It is not only extremely important for diagnostic and therapeutic reasons, but for workplace corrective action and prevention counseling. A thorough occupational and environmental history can result in these benefits:

- An accurate diagnosis increases the possibility that pesticide poisonings and other environmental exposures are recognized,
- An accurate diagnosis leads to appropriate care,
- An accurate diagnosis helps in identifying the source of exposure.

This information provides the basis for education about avoiding future overexposures and correcting workplace health and safety failures.

Suggested screening questions for adult patients (EPA*):

- What kind of work do you do?
- Are your health problems related to your home or other location? (if unemployed)
- Are your health problems related to your work? (if employed)
- Are your symptoms better or worse when you are at home or at work?
- Are you now, or have you previously, been exposed to pesticides, solvents, or other chemicals, dusts, fumes, radiation or loud noise?

Want more information of diagnosing pesticide poisonings? See EPA 6th Edition Recognition and Management of Pesticide Poisonings @ <http://www2.epa.gov/pesticide-worker-safety/recognition-and-management-pesticide-poisonings>

Want to report? Call Carolinas Poison Center at 1-800-222-1222.

Nurse's Faces Nurse's Places

Each year the NC Board of Nursing is required to submit an Annual Report to our state Legislature that details the workings of the board. Last year we featured the NCBON staff for all of their hard work and dedication to our mission of protecting the public. You can find last year's Annual Report here: <http://www.ncbon.com/myfiles/downloads/annual-report1314.pdf>.

This year we would like to dedicate our Annual Report to you, our nurses. We, at the Board, would like to thank the 145,000 nurses from the Great Smokies to the Crystal Coast for caring for the 10 million citizens across the Old North State. Whether you call the larger cities of Charlotte and Raleigh home or you reside in the smaller crossroads of Eureka, Love Valley or Peachland, we would like to thank you for all that you do for the health of North Carolinians.

So, let us say thank you by featuring you and your hometown in our 2014 – 2015 Annual Report. Please send us an email that includes your name, credentials and a high quality digital photograph of yourself standing next to your city/town sign. The photo can be taken with a cell phone or digital camera and emailed to ecurlin@ncbon.com no later than Aug 31, 2015. Thank you for all that you do!



Rick Curlin, RN – Trent Woods, NC





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