

NC BOARD
OF NURSING

SUMMER 2013 VOLUME 9 {N° 3} EDITION 27

NURSING BULLETIN

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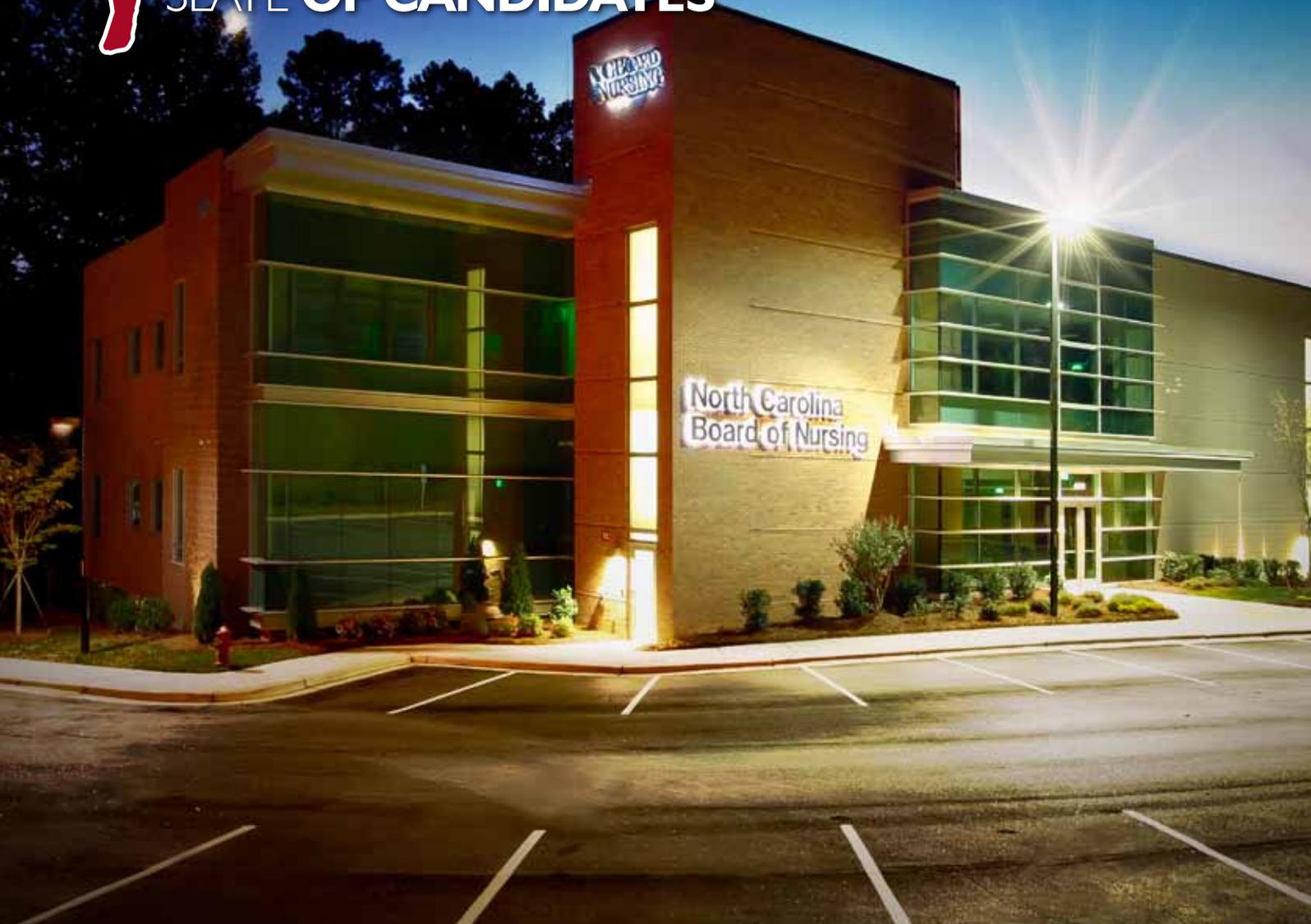
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SLATE OF CANDIDATES



SUMMER 2013 BULLETIN
NC BOARD OF NURSING
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Office Location

4516 Lake Boone Trail
Raleigh, NC 27607

Mailing Address

P.O. Box 2129
Raleigh, NC 27602

Telephone

(919) 782-3211

Fax

(919) 781-9461

Automated Verification

(919) 881-2272

Website

www.ncbon.com

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Board Chair

Dr. Peggy C. Walters, RN

Executive Director

Julia L. George, RN, MSN, FRE

Editor

David Kalbacker

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NC BOARD OF NURSING
**NURSING
BULLETIN**

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Created by Publishing Concepts, Inc.
David Brown, President • dbrown@pcipublishing.com
For Advertising info contact
Victor Horne • 800.561.4686 ext 114
vhorne@pcipublishing.com

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from the
Executive Director

STRATEGICALLY LOOKING AHEAD



The summer issue of the Nursing Bulletin Magazine brings the slate of candidates for openings on the Board of Nursing. I am impressed by all the nurses who have submitted their names and I encourage you to take the time to read the concise biographical information they have provided us. Follow it up by taking a few moments to go online and make your choice for 2014. The Cover story on Voting is also Continuing Education (CE) story that can provide two contact hours to the reader.

With that in mind be sure to check the growing list of CE opportunities (P. 24) that were formerly cover stories in the Bulletin and are now available free on line. Records show that thousands of you have taken advantage of this opportunity and if you haven't done so to date, we encourage you to check these offerings on our website. To find all the articles just click on the CE logo on the right side of the Board's homepage, www.ncbon.com

As we continue on our journey of honoring the past and embracing our future, I look forward to two important events this year: first the, publication of our book, *First in Nursing*, a history of nursing regulation in North Carolina (1903-2013) and secondly, the development of our strategic plan for the next four years.

It has been said that "he who controls the past controls the future". I have also heard it said that "history is a story of the past that is both significant

and true". I believe our upcoming book will tell a compelling story of the origins of nursing in North Carolina and the evolution that has occurred for more than a century. We hope to have the book published in late summer or early fall. Dr. Shirley Toney, Professor Emeritus of Gardner Webb University, has been instrumental in drafting the book. Stay tuned!!

Reflection on the past prompts us to think of the future. Our Board thoughtfully engages in a formal strategic planning process every four years. This is the year when we review our mission, vision, values and set our strategic initiatives for the coming years. We look at internal strengths and weaknesses along with external opportunities and threats. It will be important that our strategic plan guide us in advancing nursing regulation that is responsive to the environment and supportive of our mission of public protection.

The North Carolina General Assembly is finishing their work in Raleigh for this long session. Our staff will be reviewing any legislation that may affect nursing regulation as well as watching for any study bills that are authorized by the General Assembly that involve regulatory issues related to nursing.

Julia L. George, RN, MSN, FRE
Executive Director

Editor's Note

I want to thank our readers who contacted me about the error on the last issue's cover. During a photo shoot in 2009 we used name badges for placement, not thinking that we use the picture full size. The name badges were incorrect. As one nurse so nicely put it "you may want to bring it to the publisher's attention for subsequent magazines. I enjoy reading it from cover to cover and happened to notice the error and wanted to inform you."

The error was entirely my fault. Even after printing out a large proof copy, my printer did not bring the badges into focus so that print or individual images could be seen clearly. However, when it was printed on a four color press the images became very clear, much to my dismay.

My apologies,
David Kalbacker
Editor, NC Nursing Bulletin

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CARENET
Healthcare Services



from the Board Chair

HEAR YE! HEAR YE! IT IS TIME TO VOTE!

This call goes out every July and August for nurses to open their Bulletins, study the Slate of Candidates and Vote! What a privilege to be a nurse in the only state in the US that elects its Board. Nurses of North Carolina have this special and unique opportunity – We Vote for our Board.

I have been voting long enough to remember vividly the days of paper ballots, the phone voting system and now electronically. The access and ease of voting could not be better. Many thanks to the Board staff who make this happen for us!

The mantra is the same each year – “But I don’t know the candidates.” I am right there with you, trying to decide for whom I should vote. What’s the best way to go about deciding? There is no best way, find what works for you.

Each candidate will respond to the same questions giving you the opportunity to have many views and comparisons for your selection. Candidates will give their background information and respond to the follow questions:

- Why serve on the NC Board of Nursing?
- What do you have to offer the public of NC if elected?
- How do you think you can enhance public protection through your actions on the Board of Nursing?
- How will the experience you have had as a

nurse contribute to the Board’s work?

- Some perceive nursing as a job and others perceive it as a profession. How do you perceive nursing and why?

As the voting process continues, the newly appointed Ad Hoc Committee for Board Composition and Tenure is working to review the composition of the Board and length of tenure. A Three Phase process has begun for data collection: Phase One is underway with the collection of evidence based data and best practices related to Board composition and tenure; in addition currently seated Board members are being surveyed for collection of data. Phase Two involves a continuation of data collection and will take place this Summer when we will survey all Board members who have served within the last 10 years. Phase Three will take place this Fall when the committee will reach out to survey and collect data from external stakeholders.

So for 46 days (July 1 – August 15) the polls will be open waiting for your input. Hear Ye! Hear Ye! It is time to VOTE!

Dr. Peggy C. Walters RN
Chair

NORTH CAROLINA NURSES VOTE!

Purpose:

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

DO YOU KNOW

- **What privilege does a North Carolina licensed nurse have that no other nurse in the United States has?**

Answer: The North Carolina licensed nurse has the privilege to nominate, vote, and elect the members to the North Carolina Board of Nursing.

- **When are elections held for members of the North Carolina Board of Nursing?**

Answer: Annually between July 1 to August 15th.

- **What percentage of nurses voted in the 2011 election?**

Answer: < 1%

- **How do I become eligible to vote in the North Carolina Board of Nursing elections?**

Answer: Every nurse holding an active North Carolina nursing license is eligible to vote in the elections.

- **What can nurses of North Carolina do to preserve their**

privilege to elect members to the Board of Nursing?

Answer: VOTE! 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 of the nurses of North Carolina.

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 NC 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 nursing election of members to the North Carolina Board of Nursing is a proactive method to significantly influence the decisions and directions of nursing practice in North Carolina.

The mission of the Board is to protect the public through the regulation of nursing practice. Over the years, the

NCBON has grown to license more than 145,000 registered nurses and license practical nurses. The Board's office is located in Raleigh at 4516 Lake Boone Trail.

Composition of the Board of Nursing

The Board of Nursing consists of 14 members composed of eight elected registered nurses, three elected licensed practical nurses, and three appointed public member representatives. 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 to the Board as members are eight registered nurses and three licensed practical nurses. The minimum employment requirement for each registered nurse and license 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) – 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 (1) – 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) – individuals primarily involved in direct patient care regardless of the practice setting;
- At-large registered nurse (1) – registered nurse that is not currently an educator in a nursing program that leads to licensure or granting a degree;
- Nurse Educators (3) – must meet the minimum education requirements established by the Board’s education program standards for nurse faculty:
 - Practical nurse educator (1)
 - Associate degree or diploma nurse educator (1)
 - Baccalaureate or higher degree nurse educator (1);
- 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 (*nurse practitioner, certified registered nurse anesthetist, certified nurse midwife, or clinical nurse specialist*) member 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;
- 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 (Board) 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 who are encouraged to attend. 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 , or 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 peti-

tion 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:
 - registered nurses with an active North Carolina license are eligible to vote in the election of the registered nurse Board member;
 - licensed practical nurses with an active North Carolina license are eligible to vote in the election of the licensed practical nurse Board member.
- The public members are appointed as follows: one by the Governor, 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 LPN's 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.

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, 2013.**

SLATE OF CANDIDATES

Candidates

RN – At-Large



NAME: Misty Hackett • **BIOGRAPHICAL INFORMATION:** My name is Misty Hackett and I graduated with my ADN from Rockingham Community College in 1989. I have over 24 years of clinical nurse experience and my current position is Director of Nursing at Avante of Reidsville. I have been involved in nursing for over 24 years in numerous positions. I have acute care experience in ICU, telemetry, cardiac rehab, home health, LTC, and education. I held the position of VP of NC DONA chapter. In my current position as a Director of Nursing, I was essential with the development and training to the EMR. • **I would like to serve on the North Carolina Board of Nursing because...****RESPONSE:** I want to represent the nurses of North Carolina in the continued development and refinement of the standards in which we as nurses operate. Being a nurse is my passion and being able to represent nurses would be an honor • **What do I have to offer the public of North Carolina if I am elected to the Board of Nursing?** **RESPONSE:** With my previous experience serving as a board member for other organizations, I bring willingness to hear all sides of an issue and weigh the ramifications of my decisions. This allows me to ensure that the measures taken are the most appropriate for all concerned, especially the public at large. • **How do you think you can enhance public protection through your actions on the Board of Nursing?** **RESPONSE:** By being a consistent voice for the development/refinement of standards and expectations in our profession, I seek to ensure that the public receives the most appropriate services. This enhances public protection by striving for continuous quality improvement. • **How will the experience you have had as a nurse contribute to the Board's work?** **RESPONSE:** I have been blessed to work in many different arenas of nursing and that will enable me to contribute a unique perspective in many different areas as it relates to issues that arise. • **Some perceive nursing as a job and others perceive it as a profession. How do you perceive nursing and why?** **RESPONSE:** If I had to choose I would say it's a profession but for me personally it's a calling or a vocation if you will. Being a nurse is as much a part of me as being a wife and mother of which there is no greater calling.

RN – At-Large



NAME: Debra H. Banks • **BIOGRAPHICAL INFORMATION:** I began my career in 1975 as a Diploma nurse from Lenoir Memorial Hospital School of Nursing in Kinston, NC and have since earned a BSN from UNCW. I have worked the past 29 years at Carolina East Medical Center in New Bern, NC. The last 25 years have been in ICU. I have had the privilege of working as an Assistant Nurse Manager, preceptor, charge nurse, educator and have served on various committees and been a team member on numerous projects. Other activities include CCRN since 2002, CPR instructor and adjunct faculty at Craven Community College, New Bern, NC. • **I would like to serve on the North Carolina Board of Nursing because...****RESPONSE:** After 38 years of nursing I am still eager to learn new things and to find ways to give back to our profession. Serving on the Board of Nursing will allow me to do these things. It will be exciting to work with other nurses in this arena and to take back to my peers information concerning the functions of the Nursing Board. • **What do I have to offer the public of North Carolina if I am elected to the Board of Nursing?** **RESPONSE:** I am willing to work hard at this position because I am very concerned about patient safety and the delivery of quality care to patients. Monitoring licensure, standards of nursing programs and the rehabilitation and recovery of fellow nurses are important functions of the Nursing Board that I would like to be a part of. • **How do you think you can enhance public protection through your actions on the Board of Nursing?** **RESPONSE:** By working with the team of the Board of Nursing we will come together to make best practice decisions. We will be charged with; setting standards for and auditing nursing programs and continuing education programs, monitoring licensure and license renewal, and reviewing disciplinary actions and rehabilitation of licensed nurses. These actions of the Nursing board will increase the ongoing protection of our public. • **How will the experience you have had as a nurse contribute to the Board's work?** **RESPONSE:** I have been a hospital nurse providing patient care for 34 of my 38 years in nursing. During that time I have served on various committees dealing with delivery of quality care, policies, procedures and standards of nursing practice. I have been active in staff competencies, education and precepting for nearly 20 years. As a charge nurse I must set priorities and problem solve. These activities touch on the duties of the Board of Nursing. • **Some perceive nursing as a job and others perceive it as a profession. How do you perceive nursing and why?** **RESPONSE:** I view nursing as a profession. We are required to attend a formal education program and learn certain skills for graduation. Nursing requires dedication to the work at hand, a license to practice, continued education for license renewal, adherence to standards of care and observance of a Code of Ethics. Nurses are an example of the definition of profession which talks about mastery of complex knowledge and skills through formal education.

RN – At-Large



NAME: Lorena Silva • **BIOGRAPHICAL INFORMATION:** I started my education at University of South Dakota where I obtained an Associate Degree in Nursing. Later on I obtained a baccalaureate in Nursing as well as a Masters in Nursing and a Masters in Business Administration. Recently I have been accepted to the Doctorate in Nursing Practice program at Duke University. I started my clinical career as a registered nurse focusing on medical patients as well as labor and delivery and emergency care. Later on I discovered that my passion was critical care and that was the setting I practiced for most of my clinical career. Eventually I ventured into management holding leadership positions as manager for Endoscopy departments, Director of Procedural Services; Director of Critical Care services & Perioperative Services; Chief Nursing Officer & Chief

Operating Officer. I currently work as the Chief Nursing Executive at Lake Norman Regional Medical Center. • **I would like to serve on the North Carolina Board of Nursing because...** **RESPONSE:** I would like to make a positive impact as it relates to patient safety and advocacy by being an active member of North Carolina Nursing regulatory body. • **What do I have to offer the public of North Carolina if I am elected to the Board of Nursing?** **RESPONSE:** Throughout my career, I have worked in a variety of clinical areas from a bedside nurse to a manager and nursing executive. I believe my clinical knowledge coupled with management, leadership, quality and regulatory experience will benefit the profession and the public. • **How do you think you can enhance public protection through your actions on the Board of Nursing?** **RESPONSE:** By actively utilizing data, research, legislation and professional/clinical experience as I serve. • **How will the experience you have had as a nurse contribute to the Board’s work?** **RESPONSE:** This answer is similar to the one related to what I have to offer. My professional and clinical experience as well as the multiple roles I have served in the State of Arizona within the Arizona Nurse Association as well as the multiple committees should provide a level of expertise that may greatly assist the Board with promoting quality & safe practice for nursing and ultimately the public. • **Some perceive nursing as a job and others perceive it as a profession. How do you perceive nursing and why?** **RESPONSE:** Nursing is a profession. We are educated at the same or at a higher level as other healthcare professionals with the use of scientific methodology and framework. Furthermore, our ability to work so closely with patients and families allow us to integrate the scientific knowledge gained via formal education with an extraordinary opportunity to impact healing through patient centered care and compassion. In addition, nurses advocate for patients and the profession actively via clinical and professional associations, driving research, high clinical standards and policy making.

RN – At-Large



NAME: Paul Packard • **BIOGRAPHICAL INFORMATION:** Dr. Packard’s educational background includes an AA in Nursing, Gardner-Webb University (1992); BSN, Western Carolina University (1996); EMT-P certification (1999); business administration graduate level coursework (2004); MSNA, Medical University of South Carolina (2007); and Doctorate of Nurse Anesthesia Practice, Texas Wesleyan University (2012). Over the last 20 years, he has worked as an emergency nurse, ICU nurse, flight nurse, paramedic, consultant, educator and administrator. He is also a veteran of the NCARING and US Army Reserves. Currently he practices anesthesia as a CRNA and Director of Anesthesia at Catawba Valley Medical Center in Hickory. • **I would like to serve on the North Carolina Board of Nursing**

because... **RESPONSE:** I believe we all have a duty to promote public safety and patient advocacy. The NCBON provides an ideal environment to champion these efforts. • **What do I have to offer the public of North Carolina if I am elected to the Board of Nursing?** **RESPONSE:** My professional nursing experience traversed multiple specialty areas over the last 20 years. This experience fostered the kind of critical thinking skills that are required to not only promote public safety but will also keep nursing in North Carolina at the forefront of the industry expectations for safe and competent healthcare. • **How do you think you can enhance public protection through your actions on the Board of Nursing?** **RESPONSE:** I possess both the inherent curiosity to investigate matters objectively and the deliberate follow-through to see a course of action to its final resolve. • **How will the experience you have had as a nurse contribute to the Board’s work?** **RESPONSE:** My vast experience and proven record of accomplishment provides for multiple perspectives of nursing practice. Having worked as a staff nurse, educator, and administrator affords the type of insight required to make tough decisions regarding the future of nursing practice, all the while promoting high quality patient care. • **Some perceive nursing as a job and others perceive it as a profession. How do you perceive nursing and why?** **RESPONSE:** Nursing is a profession. We have a duty to be highly trained through formal education and apprenticeship, are autonomous in our actions, have formal governance, and licensure to practice; all of which are defining characteristics of a profession. My passion about nursing goes much farther than can possibly be expressed in such a contained forum. Ultimately, I can confidently say that I am proud to be a professional nurse.

RN – At-Large



NAME: Vicki Dale • **BIOGRAPHICAL INFORMATION:** My career in nursing started with LPN school, while working as a CNA. After graduation I worked as a staff nurse at Autauga Medical Center. When I returned to school for my BSN, I worked for Kimberly Care as a home health nurse. After earning my BSN I moved to Florida where I worked at Martin Memorial Hospital as a telemetry nurse and team leader. I also participated on many quality improvement projects. Since moving to North Carolina I have been at Blue Ridge Health Care in Intensive Care as a staff nurse and for the past three and one-half years the nurse manager. • **I would like to serve on the North Carolina Board of Nursing because...**

RESPONSE: I believe that it is my duty as a patient advocate to help protect the public from harm as well as to maintain the highest standards of my chosen profession. By serving on the NC Board of Nursing I feel I can effectively accomplish that goal and continue to grow and improve myself as a medical professional. • **What do I have to offer the public of North Carolina if I am elected to the Board of Nursing?**

RESPONSE: My extensive education, thirty-two years of clinical nursing and experiences as a patient allow me to visualize and address both the patient and nursing issues that confront us every day. I feel this would allow me to effectively contribute to the continued goals and mission of the NC Board of Nursing. • **How do you think you can enhance public protection through your actions on the Board of Nursing?**

RESPONSE: As a patient advocate I passionately believe we need to strive to continuously protect the public by ensuring nurse's practice in a competent and professional manner within today's multi-cultural society. Patients trust us to protect and care for them. If we can't fulfill that duty then those issues must be addressed and corrected thru enhanced training, continued education and strong leadership. • **How will the experience you have had as a nurse contribute to the Board's work?**

RESPONSE: My experience in school and at the bedside has given me strong clinical skills as well as critical thinking skills. Being directly involved with staff management, quality improvement projects, patient education as well as ethical decision making has taught me to look at all aspects of the patient/nurse relationship. I believe this extensive experience will allow me to be a valuable asset to the board. • **Some perceive nursing as a job and others perceive it as a profession. How do you perceive nursing and why?**

RESPONSE: I perceive nursing as a profession as well as a calling. Nursing has many avenues of opportunity whether it is clinical, managerial, consulting or administration you are only limited by your imagination, education and professional goals.

RN – At-Large



NAME: Susan D. Neeley • **BIOGRAPHICAL INFORMATION:** Knowledge through continuing education is the surest way to provide our consumers with evidence based nursing practice. During that time I have been engaged in both academic and continuing education. I received my Masters of Science in Nursing from the University of North Carolina at Greensboro in 1995, my Bachelor of Science in Nursing from Gardner-Webb University in 1989 and my Associate Degree in Nursing from Gaston College in 1974. My work experience is as follows: Director, Health Services, Gaston County Schools; School Nurse GCS; Health Educator GCS, Shift Manager 450 beds; Manager Emergency Services • **I would like to serve on the North Carolina Board of Nursing because...**

RESPONSE: I would like to serve on the North Carolina Board of Nursing because I believe my 30+ years of nursing has given me a broad knowledge of what it means to protect the public through regulation of nursing practice. There is a growing movement to expand the boundaries of our practice and I want to be sure that the Board keeps pace with proposed expansion of our role. • **What do I have to offer the public of North Carolina if I am elected to the Board of Nursing?**

RESPONSE: I offer a strong sense of the value of the nurse in the provision of quality patient care. I am deeply committed to our public and their need and right for safe care delivered by competent nursing professionals. My academic and work history demonstrates my ability to collaborate with other leaders to develop the safest care while maintaining public trust. • **How do you think you can enhance public protection through your actions on the Board of Nursing?**

RESPONSE: In my work as a Manager of Emergency Services and a Legal Nurse Consultant, I have seen the damage an incompetent nurse can do. I have also seen how a competent nurse, practicing within their scope of practice can improve the quality of a patient's life. I want to be a part of ensuring public safety and representing those competent nurses in North Carolina. • **How will the experience you have had as a nurse contribute to the Board's work?**

RESPONSE: In June 2012, I was chosen as the N.C. School Nurse Administrator of the year and recognized by the National Association of School Nurses for "Excellence in School Nursing" (the first in N.C.). I was honored for providing new and innovative ways to ensure quality nursing and health programs for children. I would utilize my vision, enthusiasm, knowledge, experience and relentless passion in my work with the Board. • **Some perceive nursing as a job and others perceive it as a profession. How do you perceive nursing and why?**

RESPONSE: Without a doubt, I consider Nursing as a profession and a calling. When I speak with other nursing professional's I hear words like "unique body of knowledge", "research", "ethical", "trusted", "practice standards" and "art and science". All of these words describe a profession not a job. I am proud to be a registered professional nurse leader in the innovative state of North Carolina!

RN – At-Large



NAME: Dawn Ciokan • **BIOGRAPHICAL INFORMATION:** I received a diploma in nursing in 1976 from Mercy School of Nursing in Charlotte, NC. I began as a RN circulating Nurse at Forsyth Memorial Hospital until relocation to Ohio. In 1988 I began long-term care nursing and held positions as supervising nurse, staff development, research project manager, director of nursing services, QAA consultant, licensed administrator, and my current position as the Corporate Director of Clinical Operations, Risk Management, and Corporate Compliance with Century Care Management. In 1997 I completed a Master of Nursing from the University of Akron in Akron, Ohio and my certification as a Certified Professional Healthcare Risk Manager from the American Hospital Association in 2011. • **I would like to serve on the North Carolina Board of Nursing because...**

RESPONSE: Having been in the practice of nursing at various levels over the past 37 years, I feel that I can bring a needed aspect of the long-term care industry and the nurses involved in this very difficult arena of nursing practice, both for the Registered Nurse and the Licensed Practical Nurse. • **What do I have to offer the public of North Carolina if I am elected to the Board of Nursing?**

RESPONSE: With the aging of not only our state population, but the national population, I feel I can bring a view and information for means to provide enhancement of quality nursing care within the long-term care arena through education and development of advanced practice skills for the nurses who are asked to meet the growing demands of providing care to sicker and more clinically complex clients in a strongly regulated and fiscally challenged field. •

How do you think you can enhance public protection through your actions on the Board of Nursing? **RESPONSE:** The long-term care healthcare arena is a very complex and difficult area to manage because we are dealing with some of our state's most vulnerable population. Having chosen geriatric nursing as my professional career, I am most adamant with the staff in the facilities and in my teaching of those desiring to be healthcare administrators that you MUST act as the resident's advocate to ensure their safety and to maintain the highest level of well being. It is our responsibility to speak up and intervene for those who cannot speak for themselves. It is truly my passion to give our elderly the best quality of life they can experience despite their physical or mental limitations. • **How will the experience you have had as a nurse contribute to the Board's work?** **RESPONSE:** Again, I feel that representation and a deeper understanding of the long-term care arena for nursing practice and the nurses who choose to work in this area has not been very well represented. The 26 years I have spent in long-term care from staff nurse, to director of nursing, to facility administrator, to my current position as Corporate Director of Clinical Operations for 8 facilities has provided me with, not only extensive knowledge of the geriatric population, but a greater understanding of the everyday challenges the nurses in this area face. • **Some perceive nursing as a job and others perceive it as a profession. How do you perceive nursing and why?** **RESPONSE:** If I only wanted a "job" it definitely would not be nursing. The field of nursing requires much more than the desire to work, it requires a dedication to attaining on-going knowledge and commitment to learn and promote the best practice to provide the public with skilled, safe, caring, and trustworthy healthcare providers. Nursing is not a 9 to 5 job; it is a life-style choice. To me, that defines the difference between a "job" and a chosen profession. It does not matter at what level the choice has been made, CNA, Med Aide, LPN, RN, Advanced Practice Nurse, etc. It is a choice that requires dedication to improving the lives of persons placed within our care.

RN – At-Large



NAME: Deborah Herring • **BIOGRAPHICAL INFORMATION:** Ms. Herring received her Bachelor of Science in Nursing from NC A&T SU in 1976 and a Master of Healthcare Administration from Bellevue University, Bellevue, NB in 2008. Deborah Herring is the Director of Nursing at Pitt County Health Department in Greenville, NC. Ms. Herring has more than 37 years of nursing experience. She began her first years as a surgical staff nurse in various hospitals and as an assistant head nurse in a surgical unit for approximately 4 years. Ms. Herring has 29 years of experience in public health as a PHN I, PHN II, PHN Supervisor and has served as Director of Nursing II for the past 5 years. • **I would like to serve on the North Carolina Board of Nursing because...**

RESPONSE: It is an honor and an opportunity to protect the health and safety of the public by promoting quality nursing practice through the NCBON. The future of nursing is destined to take a vital role in assuring access to healthcare by allowing nurses to practice at their fullest scope. I have been engaged as a leader and served on the NC Future of Nursing Coalition – Practice Barriers taskforce. The BON's mission will assure safe transition. • **What do I have to offer the public of North Carolina if I am elected to the Board of Nursing?** **RESPONSE:** I offer my experience, integrity and passion to serve all people in the state of NC as a member of the Public Health workforce by upholding the mission to protect, promote and assure the health of all people. I have demonstrated my commitment and leadership by serving as the 2011 President of the North Carolina Association of Public Health Nurse Administrators as well as essential committees and taskforces in local partnerships and statewide. • **How do you think you can enhance public protection through your actions on the Board of Nursing?** **RESPONSE:** I have served approximately 30 years of my career in various leadership positions and therefore have developed the characteristics needed for regulatory oversight to assure the safe standard of nursing practice. As a supervisor and division director I have developed mature skills in policy development and adjudication of personnel issues. • **How will the experience you have had as a nurse contribute to the Board's work?** **RESPONSE:** As an at-large candidate my initial experiences in hospital settings, as a general staff nurse, intensive care nurse and assistant head nurse, will be an asset to understand and appreciate the responsibilities of the largest employer of nurses. My present role as division manager and director of nursing has given me the broad perspective and knowledge needed to take on the responsibilities required to perform the duties of the NCBON. • **Some perceive nursing as a job and others perceive it as a profession. How do you perceive nursing and why?** **RESPONSE:** I perceive nursing as a profession that requires academic preparation and a lifelong commitment to learning. Within this profession there is a job or work to be accomplished but the profession of nursing is the element that taps our energy to be productive, creative and accomplish the job that is set before us to provide excellent nursing care. The driving force is to fulfill the purpose of the profession abiding by a code of ethics and practice standards.

RN – At-Large



NAME: Miriam Jolly • **BIOGRAPHICAL INFORMATION:** Education: UNC-Chapel: BSN, 1982; East Carolina University: MSN-Nursing Leadership, 2011. Work Experience: UNC Hospitals-NC Jaycee Burn Center staff nurse; Private OB-GYN practice office nurse/first surgical assistant. Employed by Catawba Valley Medical Center (Hickory) since 1987, holding positions as staff nurse/charge nurse in Critical Care Unit and Post Anesthesia Care Unit; Director of PACU; Director of PACU & Day Surgery; Director of Professional Nursing Practice/Magnet Program Director (2007-present); Certification: Nurse Executive-Board Certified by ANCC; Memberships: AONE; North Carolina Organization of Nurse Leaders (Board Member); ANA, NCNA; Sigma Theta Tau. • **I would like to serve on the North Carolina Board of Nursing because...**

RESPONSE: I had the privilege to complete my MSN student practicum at the NCBON and observe first hand the complex and far reaching work of the Board. That experience motivated my interest in becoming a member of the Board to advocate for patient safety in all settings. It would be an honor to serve the public and nurses of NC if elected to this position.

• **What do I have to offer the public of North Carolina if I am elected to the Board of Nursing?** **RESPONSE:** NC residents have diverse healthcare needs; many of which nursing can fulfill. The NCBON's work to ensure nurses are able to practice to the full extent of their education and training is of utmost importance and is part of the IOM 2010 Future of Nursing Report recommendations. I offer to the public, my passion for nursing, my experience and time to ensure they receive the nursing services they require in a safe and competent manner. • **How do you think you can enhance public protection through your actions on the Board of Nursing?** **RESPONSE:** My peers would attest to my attention for detail and that I will usually have a question about most any topic we discuss. I believe my quest to gather as much evidence as possible will enhance my ability to uphold the Board's mission to protect the public through regulation of nursing practice. • **How will the experience you have had as a nurse contribute to the Board's work?**

RESPONSE: I have gained a broad nursing knowledge base through practice in a variety of settings in my 31 year career. My current position influences daily nursing practice within my organization and promotes patient safety, in part through the promotion of professional development of our nursing staff. Additionally, as part of the leadership team responsible for implementing the Just Culture framework within our organization, I have an understanding of these concepts inherent in the NCBON's work. • **Some perceive nursing as a job and others perceive it as a profession. How do you perceive nursing and why?** **RESPONSE:** Nursing is a profession. Most descriptions of a profession require a specialized body of knowledge and intense academic education, both of which nursing requires. In addition, as a profession, nursing conducts its own research, develops evidence based practice and has its own set of theories to guide practice. The profession of nursing is unique, derived from both art and science, but at the core is the patient that we care for as a whole.

RN – At-Large



NAME: Beverly Essick • **BIOGRAPHICAL INFORMATION:** Education: BSN, UNC-CH 1972; MSN, UNC-C 1980; Clinical Positions: Director of Clinical Compliance & Regulatory Services; Director of Ambulatory Nursing; Associate Director-Risk Management, Nurse Manager-Rehab Unit, Staff Nurse, Assistant Head Nurse; Educational Positions: Chairperson-Associate Degree Nursing Programs, Instructor-Associate, Baccalaureate, Graduate Degree Nursing Programs, Staff Development Instructor, Risk Management Trainer, Legal Nurse Consultant/Nurse Expert/Risk Management Lecturer; Member: NC Board of Nursing 2009-2013, 1989, American Society Healthcare Risk Management, American Association Legal Nurse Consultants, North Carolina Associate Degree Nurse Educator of the Year 1990-91, Sigma Theta Tau. Currently: Director of Clinical Compliance/Regulatory Services-Wake Forest Baptist health, Adjunct

Professor, Winston-Salem State University, Certified Legal Nurse Consultant. • **I would like to serve on the North Carolina Board of Nursing because...** **RESPONSE:** I want to complete the work our present Nursing Board has initiated, especially regarding delegation of tasks to unlicensed personnel and the enhancement of the advanced practice nurse role. Serving on the Board of Nursing for the past four years has given me valuable insights to the role and responsibilities of a Board of Nursing Member. I believe I have more to offer in a second term. • **What do I have to offer the public of North Carolina if I am elected to the Board of Nursing?** **RESPONSE:** The past four years have given me extensive experience as to the role of the Board of Nursing in protecting the public by regulating nursing practice and nursing education. I want to continue improving the professional role of licensed nursing personnel, especially as the patient population is aging and will need alternative methods of nursing care delivery systems in the future. • **How do you think you can enhance public protection through your actions on the Board of Nursing?** **RESPONSE:** Commitment to patient safety throughout the state's various healthcare agencies; broad professional background encompassing leadership roles in nursing and healthcare educational programs, nursing practice models, and patient safety/risk management; experience in approaching problems in a pragmatic, practical manner with Christian values and ethical principles guiding my decisions; appreciation of the needs of other professionals to achieve innovative quality outcomes for the North Carolina public • **How will the experience you have had as a nurse contribute to the Board's work?** **RESPONSE:** Forty-one years of nursing experiences as an educator, speaker, consultant, administrator, caregiver, author and the past four years as a member of the Board of Nursing will greatly contribute to my service on the Nursing Board. I am presently the Chair of the Education/Practice Committee and the Chair of a Licensure Review Panel on the Board of Nursing. I respectfully request your vote to enable me to continue service to my nursing colleagues. • **Some perceive nursing as a job and others perceive it as a profession. How do you perceive nursing and why?** **RESPONSE:** Nursing has always been a calling for me. I thank God that I knew at an early age I wanted to be a nurse and prepared myself for this incredible public service. We are privileged to share the most critical times with patients and their families and are empowered to influence their lives as no other profession. I will be proud to continue serving as your representative if elected for a second term.

RN – At-Large



NAME: Dianna Knight • **BIOGRAPHICAL INFORMATION:** My name is Dianna D. Knight, MSN, RN, NE-BC and I am running for the NC Board of Nursing's RN At-Large seat. I have been a Registered Nurse since graduating from Wake Technical Community College in 1997. I am also a 2007 BSN graduate of Winston-Salem State University and a 2010 MSN graduate of East Carolina University. I have worked for WakeMed Health and Hospitals since 1997 when I started my healthcare career as a CNA within the Emergency Department. Since 1998, my staff nurse and leadership career has been within Heart and Vascular Services. • **I would like to serve on the North Carolina Board of Nursing because...** **RESPONSE:** I believe in the mission and work of the NCBON. The importance of licensure, educational programs of nursing and assessing the practice of nursing are paramount to the wellbeing and safety of our patients and to the communities we serve. In my experience and perception, the NC BON is a collaborative partner that focuses on the betterment of nursing through focus on the education of our profession and on patient outcomes. • **What do I have to offer the public of North Carolina if I am elected to the Board of Nursing?** **RESPONSE:** I believe in the art and science of nursing as a profession. I will bring to the table a level of professional practice that focuses on the patients that we serve. Through a focus on patient and family centered care, quality outcomes, nursing engagement and ongoing professional development, I believe the profession of nursing can be enhanced and therefore the care we provide will also be enhanced. • **How do you think you can enhance public protection through your actions on the Board of Nursing?** **RESPONSE:** I believe in collaboration. Through the established relationships the NCBON has already forged, we can continually assess and improve in the areas licensure of nurses and assessing the educational standards of nursing programs. Additionally, I am comfortable discussing the difficult topics of diversion and negligence, while seeking outcomes that protect the public we serve while seeking the best possible outcome for the RN. • **How will the experience you have had as a nurse contribute to the Board's work?** **RESPONSE:** I have 15 years of clinical, leadership and relationship experiences to draw on. However, over the last two years, I have been researching and focusing on the importance of patient and family centered care. Through my committee work I have developed a passion for this concept and for working on achieving the best possible experiences for all patients. I feel that this concept can be applied to the role of the NC BON. • **Some perceive nursing as a job and others perceive it as a profession. How do you perceive nursing and why?** **RESPONSE:** Nursing is a profession of service, caring and quality. Most nursing students learn of Sister Elizabeth Ann Seton and the Sisters of Charity and Mercy because of their roles during the Revolutionary War; I was taught by nuns of the Sisters of Charity order who instilled the values of service into all of their teachings and behaviors. These early interactions and experiences have largely contributed to my view of nursing as both an art and a science, a profession based in service and education.

LPN



NAME: Robert Newsom • **BIOGRAPHICAL INFORMATION:** I am currently employed by Golden Living Center-Greensboro as a Charge Nurse. I am also an instructor of Philosophy at Guilford Technical Community College, where I teach Ethics and other philosophy classes. I have been a practicing nurse for 15 years, and have served on the Board of Nursing for over 3 years. In addition to my Nursing diploma, I have degrees in Philosophy and Law. Articles that I have written are published in the Journal of Nursing Ethics, the Journal of Nursing Philosophy, and the Journal of Nursing Law. • **I would like to serve on the North Carolina Board of Nursing because...** **RESPONSE:** I want to continue to contribute to the Education and Practice Committee, where LPN input and contribution is of critical importance, and to the Board's ongoing efforts to implement the "Just Culture" model for the evaluation of disciplinary matters. Also, during present Board service, I have identified opportunities to improve the efficiency and fairness of the Board's disciplinary process, and I hope I can bring about constructive changes by serving for an additional term. • **What do I have to offer the public of North Carolina if I am elected to the Board of Nursing?** **RESPONSE:** Knowledge and experience gained from my present term of service, along with my education, training and experience in the other professional areas, will permit me to make unique contributions to the board at a time when the profession of Nursing is facing unparalleled challenges and opportunities. I bring to my Board service ideas and perspectives that are valuable, but not readily available to other members with different educational and professional backgrounds. • **How do you think you can enhance public protection through your actions on the Board of Nursing?** **RESPONSE:** Our Board is one of the best, if not THE best, nursing boards in the world in terms of efficiency with which it "polices" the profession. However, opportunities for further improvement exist and there is a real need for the board to determine if gender and status disparities influence our disciplinary outcomes. These are efforts that I wish to advocate for, and will urge the board to undertake in the public interest. • **How will the experience you have had as a nurse contribute to the Board's work?** **RESPONSE:** Over the next several years the NCBON will address the responsibilities nurses are shouldering in terms of supervising unlicensed personnel, who are being given increasingly critical tasks to perform. LPNs will feel the impact of these changes, but have until now been excluded from the process of establishing standards for training and evaluating these assistive personnel. This is a failure that must be addressed immediately, and my LPN experience will help me do that. • **Some perceive nursing as a job and others perceive it as a profession. How do you perceive nursing and why?** **RESPONSE:** : A "Profession" is "an occupation to which a person is specially drawn, and which is founded upon specialized educational training, in order to be of service to others, for a fixed compensation, and with no expectation of other economic gain." Nursing educational training is indeed specialized, nurses are unquestionably "of service" to others, and nurses have no expectation of acquiring wealth. Nursing is indeed a profession, and I am very proud to be a nurse.

Instructions for

Voting!

Voting begins July 1, 2013 and continues to August 15, 2013 at midnight

Note: Participating in the election is a significant way to influence the decisions that affect your nursing practice in North Carolina. The process is quick and easy! All you need is your license number and year of birth. You can vote from any location...work, home, even out of state!

But wait! The Board has a cardless licensure system and I cannot recall my certificate number. No worries! Simply visit our website at www.ncbon.com, click on "Quick Links" at the top right of the home page and select "Verify License". By entering your social security number or your name, you can easily access your license number.

Voting is fast, it is easy, and it makes a difference so mark your calendars! Voting begins July 1st and runs through midnight August 15th. You can vote 24 hours a day, 7 days a week. Be sure to check out the on-line Slate of Candidates to learn more about your candidates!

TO VOTE ONLINE: Visit the Board's website at www.ncbon.com, click on the Election 2013 link, and follow the instructions.

Questions? Contact Chandra Graves (919) 782-3211, ext. 232; Chandra@ncbon.com.

SUMMARY of ACTIVITIES

NC

ADMINISTRATIVE MATTERS

- Approved the proposed fiscal year 2013-2014 budget and designation of funds
- Approved proposed revisions to Committee Profiles
- Approved appointment of Ad Hoc Committee for Generic Nursing Education Faculty Requirements
- Approved proposed changes to the following Rules:
 - 21 NCAC 36.0702 Issuance Of A License By A Compact Party State
 - 21 NCAC 36.0804 Process for Approval to Practice
 - 21 NCAC 36.0808 Inactive Status

INVESTIGATION AND MONITORING ACTIONS

Received reports and Granted Absolutions to 2 RNs and 1 LPN.
Removed probation from the license of 18 RNs and 7 LPNs.
Accepted the Voluntary Surrender from 21 RNs and 3 LPNs.
Suspended the license of 9 RNs and 2 LPNs.
Reinstated the license of 6 RNs and 1 LPN.
Number of Participants in the Alternative Program for Chemical

Dependency: 150 RNs and 8 LPNs (Total = 158)

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

85 RNs, 9 LPNs (Total = 94)

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

31 RNs, 7 LPNs. (Total = 38)

EDUCATION MATTERS

Summary of Actions related to Education Programs

Ratification of Full Approval Status – 2 programs

Determination of Program Approval Status – 6 programs

Notification of Alternate Scheduling Options – 1 program (ABTech?)

Notification of Suspending Enrollment – 1 program (Mayland PN)

RULES 21 NCAC 36. 0702 IS PROPOSED TO BE AMENDED AS FOLLOWS:

For the purpose of the Compact:

- (1) A nurse applying for a license in a home state shall produce evidence of the nurse's primary state of residence. Such evidence shall include a declaration signed by the licensee attesting to the licensee's primary state of residence. Further evidence that may be requested includes, but is not limited to:
 - (a) Driver's license with a home address;
 - (b) Voter registration card displaying a home address;
 - (c) Federal income tax return declaring the primary state of residence;
 - (d) Military Form No. 2058 – state of legal residence certificate; or
 - (e) W2 from US Government or any bureau, division or agency thereof indicating the declared state of residence.
- (2) A nurse changing primary state of residence, from one party state to another party state, may continue to practice under the former home state license and multistate licensure privilege during the processing of the nurse's licensure application in the new home state for a period not to exceed ~~30 days.~~ 90 days.
- (3) The licensure application in the new home state of a nurse under pending investigation by the former home state shall be held in abeyance. The ~~30-day~~ 90-day period in Item (2) of this Rule shall be stayed until resolution of the pending investigation.
- (4) The former home state license shall no longer be valid upon

- the issuance of a new home state license.
- (5) If a decision denying licensure is made by the new home state, the new home state shall notify the former home state within 10 business days and the former home state may take action in accordance with that state's laws and rules.
- (6) ~~As of July 1, 2005, no~~ No individual shall be issued a multistate licensure privilege unless the applicant provides evidence of successful completion of the licensing examination developed by the National Council of State Boards of Nursing, Inc.
- (7) A nurse on a visa from another

- country applying for licensure in a party state may declare either the country of origin or the party state as the primary state of residence. If the foreign country is declared the primary state of residence, a single state license will be issued by the party state.
- (8) A license issued by a party state is valid for practice in all other party states unless clearly designated as valid only in the state which issued the license.

History Note: Authority G.S. 90-171.82(6); 90-171.83(a)(b); 90-171.85(b); 90-171.87(4); Eff. July 1, 2000; Amended Eff. October 1, 2013; July 1, 2012; July 1, 2005.

Advanced Practice Update

Proposed Addition to NP Rules Related to NP Refresher Course

At its meeting on May 15, 2013, the Joint Subcommittee approved a proposed addition to language related to the nurse practitioner refresher course. 21 NCAC 36 .0808(d) and 21 NCAC 36 .0804(b) were approved for entry into the rule making process by the Board of Nursing on May 16, 2013. A public hearing will be held on Friday, July 26th at 8:30 a.m. in conjunction with the meeting of the Board of Nursing. These proposed rules will allow for the issuing of an approval to practice to an NP in the refresher course. The approval to practice will be limited to clinical activities required by the refresher course. The NC Medical Board is working on separate but matching rules for the NPs. The full text of these proposed rules read as follows:

21 NCAC 36 .0808 INACTIVE STATUS

- (a) Any nurse practitioner who wishes to place her or his approval to practice on an inactive status shall notify the Board of Nursing in writing.
- (b) A nurse practitioner with an inactive approval to practice status shall not practice as a nurse practitioner.
- (c) A nurse practitioner with an inactive approval to practice status who reapplies for approval to practice shall meet the qualifications for approval to practice in Rules .0803(a)(1), .0804(a) and (b), .0807, and .0810 of this Section and receive notification from the Board of Nursing of approval prior to beginning practice after the application is approved by both Boards.
- (d) A nurse practitioner who has not practiced as a nurse practitioner in more than two years shall complete a nurse practitioner refresher course approved by the Board of Nursing in accordance with Paragraphs (o) and (p) of 21 NCAC 36 .0220 and consisting of common conditions and management of these conditions directly related to the nurse practitioner's area of education and ~~certification~~ certification. ~~in order to be eligible to apply for approval to practice.~~ A nurse practitioner refresher course participant may be granted an approval to practice that is limited to clinical activities required by the refresher course.

History Note: Authority G.S. 90-18(13); 90-18.2; 90-171.36; 90-171.83; Recodified from 21 NCAC 36 .0227(g) Eff. August 1, 2004; Amended Eff. October 1, 2013; January 1, 2013; December 1, 2009; December 1, 2006; August 1, 2004.

21 NCAC 36 .0804 PROCESS FOR APPROVAL TO PRACTICE

- (a) Prior to the performance of any medical acts, a nurse practitioner shall:
 - (1) meet registration requirements as specified in 21 NCAC 36 .0803;
 - (2) submit an application for approval to practice;
 - (3) submit any additional information necessary to evaluate

- the application as requested; and
- (4) have a collaborative practice agreement with a primary supervising physician.
- (b) A nurse practitioner seeking approval to practice who has not practiced as a nurse practitioner in more than two years shall complete a nurse practitioner refresher course approved by the Board of Nursing in accordance with Paragraphs (o) and (p) of 21 NCAC 36 .0220 and consisting of common conditions and their management directly related to the nurse practitioner's area of education and certification. A nurse practitioner refresher course participant may be granted an approval to practice that is limited to clinical activities required by the refresher course.
- (c) The nurse practitioner shall not practice until notification of approval to practice is received from the Board of Nursing after both Boards have approved the application.
- (d) The nurse practitioner's approval to practice is terminated when the nurse practitioner discontinues working within the approved nurse practitioner collaborative practice agreement, or experiences an interruption in her or his registered nurse licensure status, and the nurse practitioner shall so notify the Board of Nursing in writing. The Boards shall extend the nurse practitioner's approval to practice in cases of emergency such as injury, sudden illness or death of the primary supervising physician.
- (e) Applications for approval to practice in North Carolina shall be submitted to the Board of Nursing and then approved by both Boards as follows:
 - (1) the Board of Nursing shall verify compliance with Rule .0803 and Paragraph (a) of this Rule; and
 - (2) the Medical Board shall verify that the designated primary supervising physician holds a valid license to practice medicine in North Carolina and compliance with Paragraph (a) of this Rule.
- (f) Applications for approval of changes in practice arrangements for a nurse practitioner currently approved to practice in North Carolina shall be submitted by the applicant as follows:
 - (1) addition or change of primary supervising physician shall be submitted to the Board of Nursing and processed pursuant to protocols developed by both Boards; and
 - (2) request for change(s) in the scope of practice shall be submitted to the Joint Subcommittee.
- (g) A registered nurse who was previously approved to practice as a nurse practitioner in this state who reapplies for approval to practice shall:
 - (1) meet the nurse practitioner approval requirements as stipulated in Rule .0808(c) of this Section; and
 - (2) complete the appropriate application.
- (h) Volunteer Approval to Practice. The North Carolina Board of Nursing shall grant approval to practice in a volunteer capacity

to a nurse practitioner who has met the qualifications to practice as a nurse practitioner in North Carolina.

- (i) The nurse practitioner shall pay the appropriate fee as outlined in Rule .0813 of this Section.
- (j) A Nurse Practitioner approved under this Section shall keep proof of current licensure, registration and approval available for inspection at each practice site upon request by agents of either Board.

History Note: *Authority* G.S. 90-18(13), (14); 90-18.2; 90-171.20(7); 90-171.23(b); *Recodified from* 21 NCAC 36.0227(c) *Eff.* August 1, 2004; *Amended Eff.* October 1, 2013; January 1, 2013; December 1, 2009; November 1, 2008; January 1, 2007; August 1, 2004.

Both of these rules can be found on the homepage of the NC Board of Nursing website www.ncbon.com

CONTINUING COMPETENCE ALERT

All nurses in North Carolina must meet the Continuing Competence requirement in each license renewal period. The license renewal form requires the nurse to attest that he/she has met the Continuing Competence requirement during the previous licensure period. Attesting that you have met the requirement means that you are stating you have completed the entire Continuing Competence process – completion of a self assessment, development of a plan to meet your identified learning needs, and completion of your plan.

It has come to the attention of the Board that mailings from some continuing education companies are stating that completion of the programs they offer will meet North Carolina continuing competence requirements. *This is only true if the educational offering meets the learning need you identified in your self assessment, and is congruent with the plan you developed to meet the learning need you identified.* Please evaluate all continuing education offerings carefully to be sure that any offerings you complete for NCBON Continuing Competence requirements are appropriate to help you meet the plan that you have developed.

An Open Letter

REGARDING NURSE AIDE I TEST PREP COURSES



of consideration from individuals; and
 (2) Educate, train, or claim or offer to educate or train students in a program leading toward an examination in a profession or vocation (i.e. Nurse Aide I Exam), and/or a program leading toward employ-

ment at a beginning or advanced level.

There are six license exemptions, most notably for avocational programs, religious institutions and tax-exempt charities that do not charge tuition or fees. Schools or classes conducted by employers for their own employees are also generally

Dear Licensed Nurses:

Nurse Aides play an invaluable role in healthcare facilities and private residences across North Carolina. Preparing individuals to challenge the Nurse Aide I Examination is currently a legitimate and legal practice. You may not realize, however, that certain business practices require licensure by the State Board of Community Colleges.

What requires licensure and what exemptions apply?

Article 8, Chapter 115D of the North Carolina General Statutes, mandates licensure for business entities with a physical presence in North Carolina that:

- (1) Charge tuition or receive any form

exempt. However, excluding “school” in the name of a Nurse Aide test prep business or otherwise failing to offer certificates or diplomas does not qualify as an exemption. Neither is required by the statute.

How do I license a Nurse Aide I Test Prep Course or Business?

You start by submitting an Inquiry Packet from the North Carolina Community Colleges website: <http://www.ncccommunitycolleges.edu>. The Office of Proprietary Schools will review your submission. If it is determined that you need to become licensed, you will be asked to complete an Initial Application (available from the website above).

After you submit an Initial Application, the Office of Proprietary Schools will work with you to resolve any issues before presenting it to the State Board of Proprietary Schools for consideration. The State Board of Proprietary Schools will then make a licensure recommendation to the State Board of Community Colleges.

Who am I hurting by not being licensed?

Our primary concern is for students. The State Board of Proprietary Schools has a statutory obligation to protect students who enroll in educational institutions offering vocational training. We are increasingly receiving complaints from students who believed they were taking state-approved Nurse Aide training, only to discover that their instruction is not recognized by potential employers, licensing boards or accredited community colleges and universities.

As for yourself, you run the risk of criminal prosecution as it is against the law to operate a proprietary school without a license. The North Carolina Department of Justice has directed the Office of Proprietary Schools to provide the names of individuals suspected of operating such unlicensed businesses for investigation. In addition, a criminal prosecution will expose you to possible discipline by the Board of Nursing.

What should I take away from this letter?

For those operating or providing instruction at Nurse Aide test prep businesses, the State Board of Proprietary Schools appreciates the great passion that you have for assisting individuals in your community to become nursing assistants. We ask, however, that you comply with the law. If you are an owner, check to see if you need licensure. If you are an instructor, make sure you teach at state-approved programs.

Regards,



Scott Corl
Executive Director
Office of Proprietary Schools
919-807-7061
corls@ncccommunitycolleges.edu



CE Opportunities 2013



Online Bulletin Articles	Webcasts	Orientation Session
<p>North Carolina Nurses VOTE! (2 CHs) No fee required</p> <p>Delegation: What are the Nurse's Responsibilities? (2 CHs) No fee required</p> <p>Continuing Competence Self Assessment: Have You Met Your Professional Responsibility? (1 CH) No fee required</p> <p>Competency Validation: What Does it Mean for You? (.75 CH) No fee required.</p> <p>Public Protection Through Safe Nurse Staffing Practice (.85 CH) No fee required.</p> <p>Incivility in Nursing (1 CH) No fee required.</p> <p>Fitness for Duty Includes Getting Your ZZZzs (1 CH) No fee required.</p>	<p>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.</p> <p>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.</p> <p>Questions: Pamela Trantham 919-782-3211 ext. 279 Pamela@ncbon.com</p>	<p>Face-to-face workshop at NC Board of Nursing office.</p> <p>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.</p> <p>Session Dates September 26, 2013 November 6, 2013</p> <p>\$40.00 fee (non-refundable unless session is canceled)</p> <p>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.</p> <p>PAPER REGISTRATION REQUEST, CONTACT PAULETTE HAMPTON 919-782-3211 EXT 244</p>

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.

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.

NORTH CAROLINA BOARD

of Nursing Calendar

LICENSURE REVIEW PANELS

- July 11
- August 18

ADMINISTRATIVE HEARING

- July 26
- September 20

EDUCATION/PRACTICE COMMITTEE

- July 31

BOARD MEETING

- September 19-20



ARE YOU NEW TO NURSING ADMINISTRATION OR MANAGEMENT?

OR, are you a nurse administrator or manager that would benefit from attending an update on nursing regulation?

The NC Board of Nursing (NCBON) offers an orientation workshop that provides information about nursing law and regulation pertinent to the responsibilities of the nurse administrator and manager. The workshop is designed for newly appointed, as well as experienced nurse administrators and managers. The workshop entitled Orientation Sessions for Administrators of Nursing Services and Mid-level Nurse Managers promotes the NCBON's mission to protect the public through the regulation of nursing practice by providing regulatory education

and information to enhance the knowledge and understanding of nursing administrators and managers. The topics provided during the workshop include:

Regulatory Trends and Issues, Nursing Scope of Practice, Filing Board Complaints and the Investigation Process, Programs for the Impaired Nurse, Delegation to Unlicensed Assistive Personnel and Validation of Competency, Nurse Licensure Compact, Just Culture and the NCBON Complaint Evaluation Tool (CET), The Practitioner Remediation Enhancement Program, and The Employer Notification System

The workshop provides an in-person format on the NCBON campus in Raleigh, and awards 4.6 contact hours of continuing education. This is an excellent opportunity to interface with NCBON staff and to network with other nurse administrators and managers.

The 2013 remaining workshop dates are:
September 26th
November 6th

Registration and additional information is located at www.ncbon.com, select "Workshops and Conferences," select "Board Sponsored Workshops," and scroll to "On-site Workshop".

A SUMMARY OF THE REGIONALLY INCREASING BACCALAUREATE NURSES (RIBN) PROJECT BUSINESS CASE ANALYSIS AND ECONOMIC IMPACT EXECUTIVE SUMMARY AND RECOMMENDATION

BACKGROUND

The Business Case Analysis and Economic Impact examines the economic impact of the RIBN initiative on nursing students, community colleges, universities, and employers of nurses. The RIBN initiative is an educational partnership coordinated by the Foundation for Nursing Excellence to increase the number of baccalaureate prepared nurses in the workforce by combining the best benefits of community college based ADN programs and university BSN programs. RIBN students are dual-enrolled at a community college and partner university. They spend the first three years based at the community college and the fourth year as a full-time student at the university. The RIBN project is projected to include 55 community colleges and 15 universities organized into regional collaboratives across the state when fully developed.

FINDINGS

For nursing students, the RIBN BSN is financially more worthwhile over a lifetime nursing career than either an ADN or traditional four year BSN. The RIBN BSN enables nurses to be more fully engaged in the profession sooner. Participating in RIBN is not cost neutral to community colleges or universities as originally expected. RIBN students replace ADN student enrollments and bring only one year of additional tuition revenue as they take their first year general education classes at the community colleges. The community colleges are also responsible for the costs of hiring the Student Success Advocates that serve as advisors to the RIBN students. The additional tuition revenue at the university does not fully

cover the expected additional costs for the RIBN students. With a projected 175 RIBN BSN graduates entering the workforce annually beginning in 2020, hiring RIBN BSN graduates will save hospitals and other practice providers an estimated \$3 million by 2022 and \$4 million by 2030. Savings will come from reduced tuition reimbursement costs, as well as lower recruiting and "onboarding" replacement expenses due to reduced turnover.

RECOMMENDATIONS

Hospitals and other practice providers should financially support the development of RIBN by community colleges and universities as doing so is strongly in their own economic self interest, in addition to the many other reasons to support more favorable patient outcomes from having a better educated nursing workforce.

When RIBN is fully developed by 2020, the annual tuition reimbursement cost savings

alone for hospitals and other practice providers is estimated to be \$1,575,000 a year, a dollar amount far in excess of the estimated total annual cost of \$765,550 for community colleges and universities to offer the RIBN BSN as an alternative to the traditional two year ADN and four year BSN education tracks to enter the nursing profession.

RIBN also increases the pool for future faculty to assure the continued preparation of the nursing workforce as well as increases the number of advanced practice nurses providing access to quality health care for all North Carolinians.

To access the full Business Case Analysis and Economic Impact Executive Summary and Recommendation report, presentation, and interactive models, please visit our website at www.ffne.org.



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