

Ohio Board of Nursing

Spring 2010 • Volume 8 Issue 2

MOMENTUM

Official Publication of the Ohio Board of Nursing



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Response Situations**

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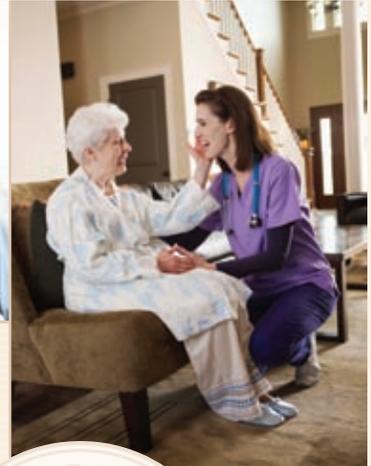
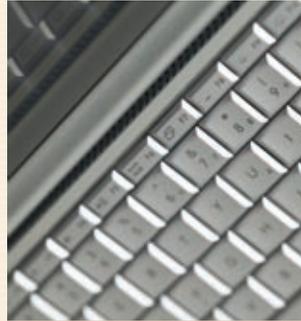
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Momentum reaches every nurse, dialysis technician, medication aide, and community health worker, every hospital and nursing school administrator in the state of Ohio. Over 210,000 copies are addressed and mailed statewide.

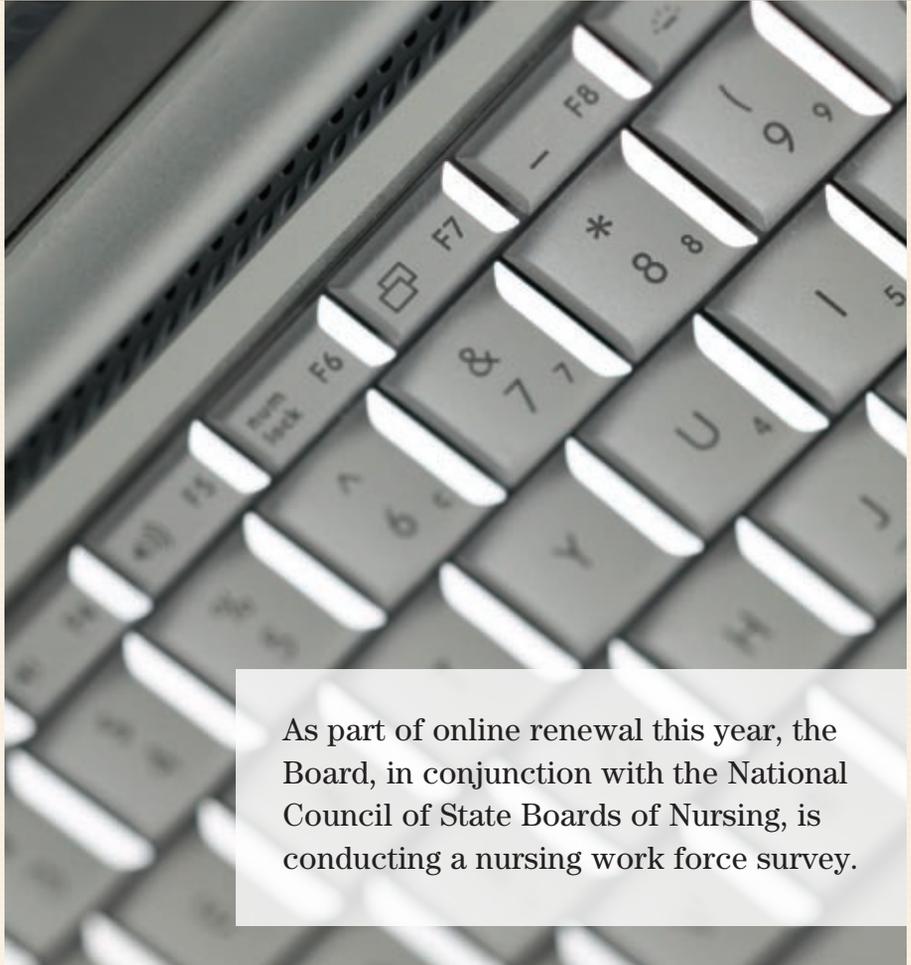


Bertha Lovelace
Board President

We are happy to welcome

three newly appointed members to the Board! Maryam Lyon, RN, works as a clinical nurse manager at the Dayton Regional Dialysis Center in Dayton and previously served on the Board's Advisory Group on Dialysis. Tracy Ruegg, RN, CNP, works at the James Cancer Hospital and Solove Research Institute in Columbus as a nurse practitioner. Roberta Stokes, RN, CNS, CNP, is a nurse practitioner at Marymount Hospital in Garfield Heights. We look forward to serving with them on the Board. At the same time, we acknowledge the service and contributions of Board members whose terms ended: Lisa Klenke, RN, past Board president; Janet Boeckman, RN, CNP; Patricia Burns, LPN; and Kathleen Driscoll, RN. Jane McFee, LPN, Past Vice-President, was reappointed to the Board in February 2010 – Congratulations Jane!

With spring comes the beginning of the renewal cycle for LPNs in Ohio. In March, the Board mailed



As part of online renewal this year, the Board, in conjunction with the National Council of State Boards of Nursing, is conducting a nursing work force survey.

54,305 renewal notices to LPNs. We encourage you to renew online, as it is the fastest, most convenient and cost-effective method of renewal. Please renew early and online!

As part of online renewal this year, the Board, in conjunction with the National Council of State Boards of Nursing, is conducting a nursing work force survey. The goal of the survey is to provide a “snapshot” of the nursing work force in Ohio and contribute to a national work force database. It consists of questions about work

setting, employment status, education, practice area, ethnicity, age, and plans to continue to practice nursing. Also this year, NCSBN is distributing the survey to RNs.

The survey should take less than 10 minutes to complete. Please complete it to provide information about the nursing work force in Ohio! And LPNs, please renew online as soon as possible! •

Bertha M. Lovelace



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The Board has been implementing a comprehensive approach to practice breakdown complaints with a goal of more directly addressing patient safety. Several initial steps have already been accomplished.

flaws, and maintaining accountability for reckless behavior or repeated behavior that poses increased risk to patients. Just Culture finds middle ground between a punitive culture that generally does not consider



First, in 2009, the Board incorporated the principles of “Just Culture” in the review process for practice complaint cases. Just Culture, a risk management model pioneered by Outcomes Engineering Inc., is a systematic method that can be used by nursing employers and the Board to increase patient safety by recognizing and modifying system

the systems issues that contribute to errors, and a blame-free culture that does not hold individuals appropriately accountable. Just Culture holds individuals accountable for their performance based on their job responsibilities, but does not expect individuals to assume accountability for system flaws over which they had no control.



Betsy J. Houchen,
RN, MS, JD
Executive Director

Secondly, the Board revised the complaint intake form and expanded data collection for practice complaints. The data we collect will be used to identify patterns of error, risk factors, and system issues that contribute to practice breakdown. The Ohio data will be part of a national patient safety database developed by the National Council of State Boards of Nursing. The complaint forms are available on the Board Web site at www.nursing.ohio.gov under “Discipline and Compliance.”

The next step is to work closely with employers to further incorporate Just Culture, reporting of practice and systems data, and increased employer-sponsored practice remediation. Our goal is to increase patient safety through effective reporting, remediation, modification of systems, and individual accountability.

We are proud of this innovative approach and look forward to increasing our partnerships for patient safety! •

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NEW ADMINISTRATIVE RULES: Effective Feb. 1, 2010

In 2009, the Board reviewed the following rule chapters as part of the five-year review process: Chapters 4723-16, 4723-17, 4723-25 and 4723-26. In addition, the Board reviewed other individual rule additions or revisions primarily to make technical corrections. Based on public discussion, culminating in a public hearing on Nov. 18, 2009, the Board adopted new administrative rules and revised existing rules. The effective date of the new rule language is Feb. 1, 2010.

As part of rule review, Executive Order 2008-04S, "Implementing Common Sense Business Regulation," effective Feb. 12, 2008 (EO), required agencies to "amend or rescind rules that are unnecessary, ineffective, contradictory, redundant, inefficient, needlessly burdensome..." Consistent with the EO, rule language was removed or corrected to the extent it was redundant, unnecessary or contradictory to the law or other rules, and if feasible, "plain English" was used to make the rules more understandable to the reader.

The following is a highlight of some of the rule changes. The full text of all of the rule changes may be accessed by clicking on the "Laws and Rules" link on the Board's Web site at: <http://www.nursing.ohio.gov>, and following the link to the Register of Ohio Web site.

1. Chapter 4723-16 Hearings

Rules 4723-16-01, 4723-16-13, and throughout Chapter: This Chapter reflects the use of a new Board

Hearing Committee that is appointed annually by the Board to conduct administrative hearings and provide a report and recommendation to the full Board. The Committee is composed of at least three Board members and one alternate, with one presiding member, appointed for a term of one year. The use of a Board Committee is a cost-efficient alternative to the full Board conducting hearings, while enabling licensees/certificate holders to argue their case directly before Board members. The Board will also continue to use attorney hearing examiners. Whether hearing examiners or a Board Committee is used, the full Board deliberates on all cases and makes a final decision, in the form of an adjudication order.

Other changes to Chapter 4723-16 were made to spell out the authority and duties of hearing examiners, or the Board hearing committee (Rule 4723-16-13), and to streamline language regarding hearing processes (e.g., Rule 4723-16-05).

2. Chapter 4723-17 Intravenous Therapy Courses for Licensed Practical Nurses

Rule 4723-17-01(B): New definition added for "antibiotic" to include "an anti-infective or anti-fungal, administered to inhibit the growth of, or destroy, microorganisms in the treatment of prevention of infectious disease." Rule 17-01 (F) includes a revised definition of "piggyback" to



reflect that it means an "intermittent or secondary" intravenous infusion, rather than "secondary" (or, as in former rule, "intermittent"). The term "piggyback" is used in the law (Section 4723.17(D)(6)(b), ORC). Rule 17-03 (B)(3) was revised to add "intermittent or" secondary intravenous infusion, consistent with Rule 17-01 (F).

Rule 17-03 (B)(8): Clarifies that a LPN authorized to perform IV therapy may perform procedures including stopping an infusion of blood or blood component when a complication arises.

3. Chapter 4723-25 Nurse Education Grant Program

This Chapter was amended primarily to eliminate redundant or unnecessary language consistent with the EO. No substantive changes to loan eligibility were made.

4. Chapter 4723-26 Community Health Workers

Changes to this Chapter were made to clarify language, making it more consistent with the provisions for licensed nurses (see, e.g., Rule

26-05, Continuing Education Requirements; Rule 26-11, Disciplinary Actions Against Certified Community Health Workers; Investigations).

5. Other Rule Changes

Rule 4723-5-10 (C) and Rule 4723-5-11 (C) (Qualifications of Administrative, Faculty, and Instructional Personnel): These rules applicable to nursing education programs were revised to facilitate the use of foreign-educated nurse graduates, by allowing individuals to meet the academic preparation requirements for administrative, faculty and instructional personnel in PN or RN nursing programs if they have practiced for the past two years in Ohio or in another National Council of State Boards of Nursing (NCSBN) jurisdiction.

Rule 4723-13-05, Criteria and Standards for a Licensed Nurse Delegating to an Unlicensed Person: This rule was amended to reflect that prior to delegating a nursing task to an unlicensed person, the delegating nurse needs to determine, among other things, that the task requires no judgment based on nursing knowledge and expertise on the part of the unlicensed person.

Rules 4723-7-05 and 4723-7-06 (RN and PN Licensure by Endorsement): The rules have been revised to facilitate endorsement into Ohio, by allowing the applicant to submit verification of current, valid licensure in any NCSBN jurisdiction, rather than requiring verification from the state in which the applicant most recently practiced. •

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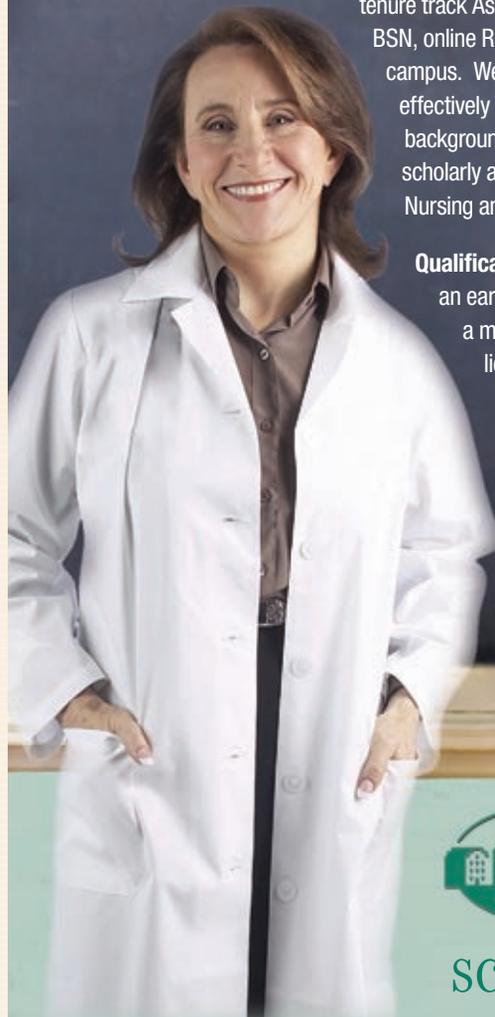
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The position will remain open until filled. For full consideration for a September 2010 start date candidate must apply by May 31, 2010.



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Using Nursys[®] to Verify Nurse Licensure in Emergency Response Situations

Emergency Response Organizations

When a national emergency is declared, numerous individuals lend a hand to the cause, including nurses and other health care professionals. To protect the public, emergency response organizations need to confirm the licensure status of any nurse who offers assistance during an emergency in a quick and efficient manner.

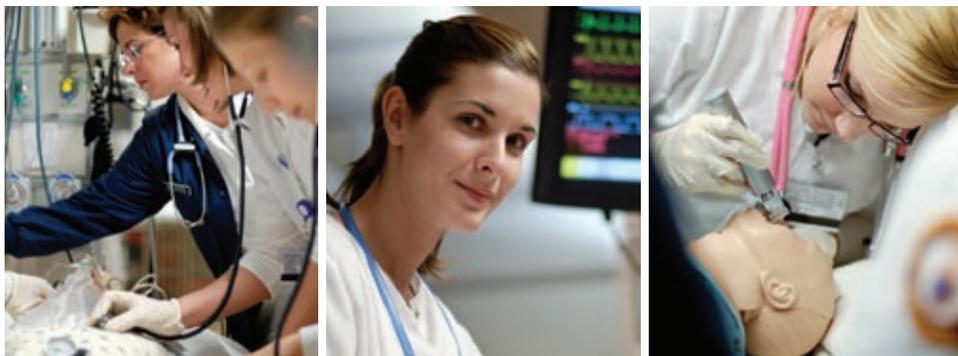
As of Dec. 18, 2009, approved emergency response organizations can now use Nursys.com, a database maintained by the National Council of State Boards of Nursing (NCSBN), to verify nurse licensure through bulk verification, which allows emergency response organiza-

NCSBN encourages emergency response organizations to apply for Nursys.com access before a disaster strikes in order to understand the system and provide proper training to those who will need it the most.



tions to verify nurse licensure in large quantities, rather than one at a time. This can be done through a standard file format, such as uploading a Microsoft Excel spreadsheet, or through Web Services, a system-to-system verification process that is completed over the Internet in real time. Since this is an automated process, verifications can be completed in minutes, mobilizing nurses instantly.

NCSBN encourages emergency response organizations to apply for Nursys.com access before a disaster strikes in order to understand the system and provide proper training to those who will need it the most. However, in the event that a disaster strikes and an emergency response organization needs immediate access, NCSBN has created registration processes for these situations.



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ADVISORY GROUPS AND COMMITTEES

All meetings of the advisory groups begin at 10:00 a.m. (unless otherwise noted) and are held in the Board office. If you wish to attend one of these meetings, please contact the Board office at 614-466-6940 to determine any change in the location, date or times.

Advisory Group on Continuing Education — Feb. 19, June 18, Oct. 15. Chair: Delphenia Gilbert

Advisory Group on Dialysis — Feb. 23, June 15, Oct. 19. Chair: Melissa Meyer

Advisory Group on Nursing Education — To be determined. Chair: Judith Church

Committee on Prescriptive Governance — Jan. 14, May 10, Oct. 18. Chair: Eric Yoon

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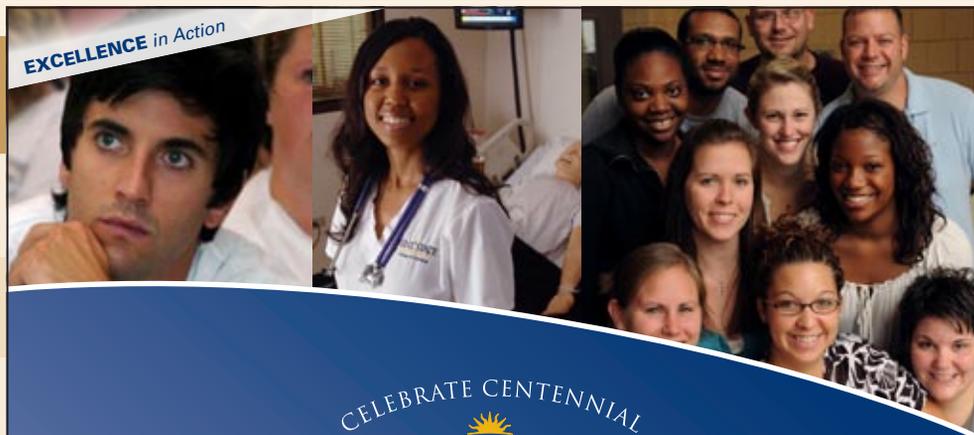
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Providing Nursing Care That is Beyond Basic Nursing Preparation

As the science of health care evolves, questions arise regarding the ability of nurses to perform certain tasks. To determine if a particular task is within the nursing scope of practice, nurses should review Section 4723.01 of the Ohio Revised Code (ORC) as well as the Decision Making Model which is available on the Board's Web site in the Publications section. Once you have determined that a task is within the nursing scope of practice, you need to decide if the individual nurse has the knowledge, skills and abilities to perform the task. Nurses are



required to demonstrate competence and accountability in all areas of the practice in which the nurse is engaged, which include, but are not limited to 1) consistent performance of all aspects of nursing care and 2) recognition, referral or consultation, and intervention, when a complication arises. So what if there is a new procedure or activity that is within the nursing scope of practice but the nurse does not yet have the competency to perform the activity? Ohio Administrative Code Rule 4723-4-03(D) for RNs and Rule 4723-4-04(D) for LPNs offers guidance to nurses who need to provide nursing

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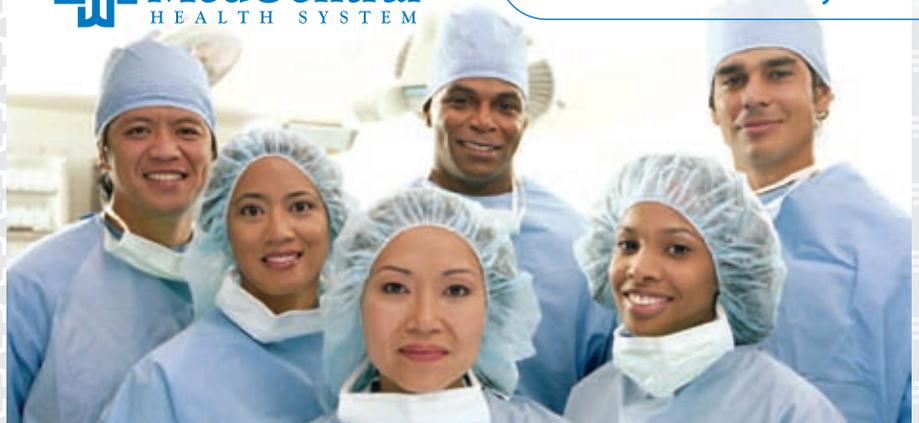
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care that is beyond basic nursing preparation. In order to provide nursing care in this situation, the following must be in place:

- The nurse obtains education which emanates from a recognized body of knowledge relative to the nursing care being provided;
- The nurse demonstrates knowledge, skills and abilities necessary to provide the nursing care;
- The nurse maintains documentation satisfactory to the board of meeting the requirements noted above;
- When the nursing care to be provided is in accordance with division (B)(5) for RNs, or (F)(3) for LPNs, of Section 4723.01, ORC, the nurse has a specific current order from an individual who is authorized to practice in this state and is acting within the course of the individual's professional practice; and
- The nursing care does not involve a function or procedure that is prohibited by any other law or rule.

Do I need to attend a class to obtain the education required to perform a particular task?

The rule does not specify the format for instruction. Depending on the particular task, it may be appropriate for the education to be provided as a formalized course, a staff in-service, individualized instruction, etc.

I am an LPN and would like to receive additional training as a wound care nurse. Can I do this?

You are not prohibited from obtaining additional education, but as an LPN, you are accountable to the LPN scope of practice, and as such would not be able to independently assess or develop patient plans of care. •

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Interpretive Practice Guidelines

In 2007, the Board began approving Interpretive Guidelines pertaining to specific nursing practices. Interpretive Guidelines provide guidance to Ohio's nurses in the application of existing nursing law and rules to very specific clinical situations. An Interpretive Guideline is not a regulation of the Board and does not carry the force and effect of law. An Interpretive Guideline is adopted by the Board as a guideline to licensees who seek to engage in safe nursing practice. Currently, the Board has adopted five Interpretive Guidelines that are posted under the "Nursing Practice" link on Board's Web site at: www.nursing.ohio.gov. Current Guidelines include:

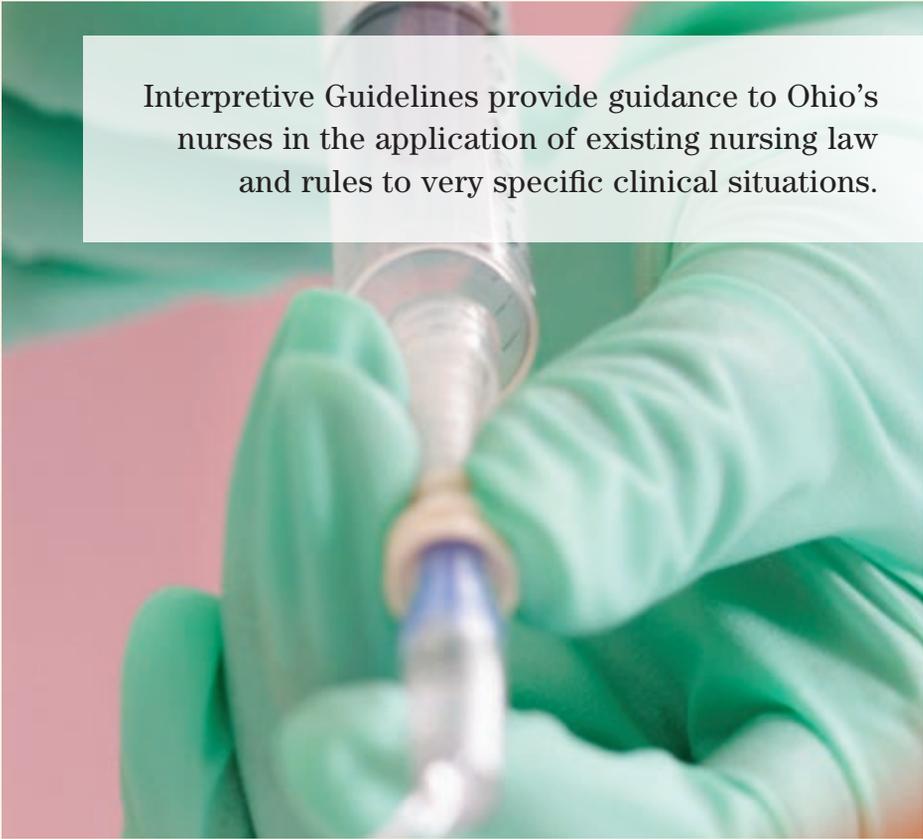
- Guidelines for Conservative Sharp Wound Debridement
- Guidelines for Intrapartum Monitoring of Obstetrical Patients Receiving Epidural Infusions
- Guidelines for Monitoring and Management of Epidural Infusions
- Guidelines for Administration of Medications, and Monitoring of Patients Receiving Intravenous Moderate Sedation for Medical/Surgical Procedures
- Guidelines for the Care of Patients Receiving Intramuscular, Subdermal, or Subcutaneously Injected Medications for Cosmetic/Aesthetic Treatment.

An accompanying document that explains the use of Interpretive Guidelines is also available on the Web site in the same section.

At its May 2010 meeting, the Board will convene a Board Committee on Practice to review information concerning the nurse's role in bariatric procedures, specifically gastric banding. During the meeting, the

Board will review materials and hear from various health care practitioners who actively engage in the care of bariatric clients. The Board Committee will make recommendations to the Board concerning the need for and development

Intravenous Moderate Sedation for Medical/Surgical Procedures. Both the existing Interpretive Guideline and the proposed Interpretive Guideline were disseminated through the Board's e-news. The Board will determine



Interpretive Guidelines provide guidance to Ohio's nurses in the application of existing nursing law and rules to very specific clinical situations.

of an additional Interpretive Guideline that addresses the nurse's role in this specialized practice.

In addition to convening the Board Committee on Practice, the Board will also review public comments concerning proposed Interpretive Guidelines related to a registered nurse's role in emergent intubations, and review the existing Interpretive Guideline for Administration of Medications and Monitoring of Patients Receiving

whether or not to revise or adopt the proposed Interpretive Guideline, and whether to revise or reapprove the existing Interpretive Guideline concerning moderate sedation.

The Board appreciates the opportunity to assist its licensees and Ohio's citizens in providing information and clarification in the application of the Nurse Practice Act and the Board's Administrative Rules to various areas of nursing practice. •

MOMENTUM 2010: Ohio Women's Summit



On March 8, 2010, Board staff attended *Momentum 2010, Ohio Women's Summit*, a well-attended event focusing on health, economic and education issues of interest to Ohio women. The event opened with remarks by First Lady Frances Strickland. Board of Nursing staff participated in the health track, which included a break-out session on mental health, trauma and addiction. A Contemporary Women's Health Issues Panel featured several physicians, including Dr. Rebekah Gee, Dr. Rebecca Jackson and Dr. Stephen Pomeranz. Discussion included recently revised standards for mammography screening after age 40 and hormone-replacement therapy, access to health care, and better education. For more information on health issues affecting woman, panelist Cristal Thomas (regional director, U.S. Department of HHS) recommended the following Web site: <http://www.womenshealth.gov>. The Women's Summit concluded with Governor Ted Strickland signing an Executive Order establishing the Ohio Council on Women and Girls. The council will work to advance the status of women and girls, particularly in the areas of economic development, education, and health care. •



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REMEMBER TO USE STANDARD PRECAUTIONS

In an effort to make influenza vaccines widely available, immunization clinics are being offered in many non-traditional health care settings. Regardless of the setting of nursing practice, nurses are reminded that they are required to be familiar with, observe and rigorously adhere to the acceptable and prevailing standard precautions to minimize exposure to disease and prevent infection. As noted in Ohio Administrative Code, Chapter 4723-20, standard precautions include at least the following:

- Appropriate use of hand hygiene including hand washing and use

of alcohol-based waterless hand sanitizers or gloves when indicated.

- Appropriate use of respiratory hygiene including covering coughs or sneezes, utilizing masks when appropriate and separating patients with respiratory ailments in common waiting areas.
- Effective disinfection and sterilization of equipment that is designed to be re-used.
- Safe injection practices including proper procedures for withdrawing and administering the vaccine. **Nurses are reminded not to remove needle caps with their teeth.**

- Safe handling and disposal of needles and other sharp instruments in appropriate containers. Nurses are reminded not to recap, bend or break needles.
- Safe handling and disposal of blood and body fluid.
- Appropriate use of personal protective equipment, including wearing and disposal of gloves and other protective garments and devices.

For additional information, you may want to visit the Infection Control in Healthcare Settings page on the Center For Disease Control Web site at <http://www.cdc.gov/ncidod/dhqp/index.html>. •



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LPN RENEWAL

If you hold a current, valid license as an LPN in Ohio, your license will expire after Aug. 31, 2010. All LPNs who are eligible to renew their license in 2010 will receive a renewal notice through the mail with a personal ID, password, and instructions on how to renew their license online. Renewal notices were mailed during the month of March to the address that the Board has on file. It is extremely important to notify the

the online renewal application. LPNs who do not want to renew their license online must submit a written request for a paper renewal application by e-mail at renewal@nursing.ohio.gov, fax at (614) 466-0388, or by mailing the request to the Board.

It is strongly recommended that you renew your license as soon as you receive your renewal notice. Incomplete applications may result in late or lapsed



Board of a name and/or address change immediately. An incorrect name and/or address may delay the renewal of your license. Please note that for a change in name, a court certified copy of the document indicating the change in name is required. This certified document may be obtained from the court where the original record was filed. If you have not yet notified the Board of any changes, please do so immediately. A Name/Address Change Form may be obtained through the Board Web site at www.nursing.ohio.gov under Forms.

When renewing online, you can pay the required renewal fee using MasterCard or VISA credit cards, or debit cards with a MC or VISA logo. By utilizing the online renewal process, you may be able to verify the renewal of your license through the Board's Web site at www.nursing.ohio.gov in as little as three business days after completing

fee charges and delay the renewal of your license. The fees for licensure renewals are as follows:

- Before July 1, 2010 – \$65
- July 1, 2010 to Aug. 31, 2010 – \$115
- After Aug. 31, 2010 (to renew a lapsed license) – \$165

The Board audits thousands of nurses each year to determine compliance with continuing education requirements. If you were notified of an audit of your continuing education for the LPN licensing period of Sept. 1, 2006, through Aug. 31, 2008, and have not completed that audit, you will not receive your renewal notice for 2010-2012 until you complete the audit requirements. Board staff are available to assist you in taking the necessary steps to renew your license. If you have questions about the renewal process, please contact the Board at (614) 995-5420 or by e-mail at renewal@nursing.ohio.gov. •

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PAYMENT FAILURES



If your name is listed here, please contact the Board at 614-995-3691 to arrange for proper payment of your fees. Because the name of a licensee may be the same as another, please do not assume from the name alone that a particular individual has a payment failure. You may verify the license number on the Board's Web site at www.nursing.ohio.gov by clicking on Verification. •

There is often a lag-time between the time a payment is processed by the bank and the time the Board receives notification of error or insufficient funds. Failure of a payment to clear the bank will cause an application to become incomplete. Under Rule 4723-1-04, Ohio Administrative Code, return of a check does not waive or extend the date upon which a license or certificate lapses. The purpose of publishing this list is to notify current and

potential employers and to reach the individual when other avenues have failed.

Below is a list of those nurses and dialysis technicians whose renewal applications, certificates, or duplicate licenses are incomplete due to payment failure related to insufficient funds. The licensees and certificate holders listed below failed to render payment by the date this publication went to press.

OUTSTANDING PAYMENT FAILURES

DT 01459 Lisa Miljour

PN 121873 Adebisi Adedoyin

088845 Rebecca Anderson

080412 Vera Bazemore

110095 Alicia Bennett

109961 Sandra Carter

089104 Mary Darnell

107371 Patricia Edington-Wallace

100040 Lavonda Featchurs

077423 Barbara Freeman

104926 Stacy Freeman

105124 Lisa Groves

086632 Sandra Haulter

102088 Mildred Highlander

044929 Gaynell Hunt

026851 Eugenia Lauinger

095293 Susan Runion

090935 Autumn Schrader

109807 Stacey Townsend

099429 Paige Wilson

068305 Jeanease Zimmerman

RN 254983 Lynn Baker

179628 Cheryl Balogh

196050 Beverly Chambers

234395 Robert Clarke

284031 Deborah Conner

081572 Mary Hartmann

219322 Micheal Hipshire

278461 Yvonne Hoberek

254146 Ann Jarven

099852 Jane Mccutcheon

256289 Linda Mcdaniel

169684 Bernadette Queener

323272 Jennifer Sheets

288354 Shelia Smith

292985 Therese Spalding

229036 Dundee Sweetland

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