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MOMENTUM is the official journal of the Ohio Board of Nursing. Momentum’s traditional journal & interactive digital companion serve over 280,000 nurses, administrators, faculty and nursing students, 4 times a year all across Ohio. Momentum is a timely, widely read and respected voice in Ohio nursing regulation.
Wow. The Momentum Spring issue was ready to go to print in March. Then, everyone’s life changed, around the world, and in what seemed like an instant. Days turned into weeks and the realities of a socially isolated world began to set in for many of us. But nurses and other health care frontline workers faced new and special challenges daily in efforts to heal and contribute to contain this viral danger. We fear at times for our own safety and that of our family and friends, as well as our patients. These are indeed challenging times for all, and all the more important to remember that we are in this together.

To raise awareness of some of Ohio’s and the Board’s efforts in meeting public safety during the pandemic and addressing nursing issues, we decided to circle back and change the focus of this issue of Momentum. We dedicated additional articles about our State’s response to COVID-19 and how nursing can adapt and contribute to these efforts during the emergency. In this issue, we have included articles highlighting some of our website content on nursing practice guidance and other resources (www.nursing.ohio.gov).

Executive Director Betsy Houchen and her staff at the Board have done a remarkable job keeping up all operations remotely, expediting licensing and absorbing new initiatives to deal with the latest developments. The Board has engaged regularly with State leaders and other health care boards to review ideas for policy and law changes. While the Board is consulted, the final decisions are enacted by the Ohio legislature or a Governor’s Executive Order.

After an idea is put into law, the Board determines how to implement the new initiative. For example, HB197, effective March 27, 2020, suspends, for the period of the COVID-19 emergency, the law requiring an applicant for licensure by examination to have passed the NCLEX. The law authorizes the Board to issue licenses to practice as a RN or LPN to applicants who meet the remaining legal requirements, including completing a Board-approved nursing education program and criminal records check. This is an opportunity for an estimated 4,000 to 5,000 individuals to be added to the nursing workforce in this time of need.

The Board recently participated in the Provider Wellbeing and Patient Safety Advisory Committee that was convened by the Health Policy Institute of Ohio (HPIO) on behalf of The Ohio State University College of Nursing Helene Fuld Health Trust National Institute for Evidence-based Practice in Nursing and Healthcare. Discussions focused on organizational culture and workplace wellness policies and practices that improve provider wellbeing and patient safety and reduce patient harm. HPIO issued a policy brief, “A Call to Action: Improving Clinician Well-Being and Patient Care and Safety,” at https://www.healthpolicyohio.org/. This brief provides a framework for the relationship between clinician wellbeing and patient care and safety. It summarizes research findings and reviews evidenced-based policies, programs and practices that improve clinician wellbeing and support high-quality, safe patient care. One of the key findings in the report spotlighted the serious problems clinicians face related to their overall health and wellbeing. When nurses suffer from high rates of burnout, depression, addiction, and suicide, patient safety is affected. The brief calls for the need for a comprehensive approach providing for a continuum of prevention, treatment and recovery supports. It is recognized that clinician wellness is vital to the nursing and health care workforce. The OSU College of Nursing and Board are hopeful the result of the brief will motivate continued work and actions to address the issues involved with clinician well-being.

Stay safe. Stay healthy. Comply with social isolation best practices and directives, and let’s work together and emerge from this pandemic stronger for it.
THANK YOU

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As the Spring issue of Momentum goes to print, we are in the middle of the COVID-19 emergency and nurses are vitally needed across Ohio. We recognize the national and global nature of the pandemic and I want to reiterate that our thoughts are with everyone as we face these difficult challenges. As the State’s message has been and the Board would like to emphasize, we are all in this together.

The Board understands that nurses are vital for patient care and safeguarding public health during the COVID-19 emergency.

The Board has taken numerous actions and provided considerable information to address nursing licensure, education, and practice during the COVID-19 emergency. While we are highlighting information in this issue of Momentum, we encourage you to visit our website at www.nursing.ohio.gov for documents/links posted on the front page. Since the beginning of the emergency, the Board has been working with others and submitted recommendations to State officials to identify changes in the law and/or rules to address the nursing workforce. While the Board office is closed to visitors, staff are working remotely, and the Board continues 100% of its operations.

The Board immediately addressed nurse mobility. Under Ohio law, out-of-state nurses can work in Ohio during a declared emergency without obtaining a license in Ohio. If out-of-state nurses choose to be licensed in Ohio, temporary permits can be issued within one (1) business day.

Further focusing on ways to increase the workforce, the Board expedited the issuance of all types of licenses and added non-licensure staff to process applications. The Board identified that a large number of nurses needed to enter the workforce by becoming newly licensed or re-enter the workforce by reinstating/reactivating their license. From March 1 through April 18, the Board issued a total of 5,426 new or reinstated licenses/certificates of all types.

Recent law changes in House Bill 197, effective March 27, 2020, included the authority to suspend, for the period of the COVID-19 emergency, the law requiring an applicant for licensure to have passed the NCLEX examination. The Board implemented this immediately and estimates it will potentially add 4,000 to 5,000 nurses to the workforce.

HB 197 additionally authorizes extending licenses that would expire during the declared emergency. Approximately 1,400 licenses have been extended. Licenses will remain valid until the earlier of either 90-days after the date the emergency ends or December 1, 2020, unless revoked, suspended, or otherwise subject to discipline or limitations. That is especially significant to LPNs who renew this year.

LPN renewal is still scheduled to begin July 1, and LPN licenses do not lapse until October 31, 2020. LPNs will have the opportunity to renew; however, if the declared emergency continues those licenses that are not renewed, will not expire/lapse, until the expiration date established in accordance with HB197.

During this emergency, nurses will likely be reassigned to various clinical areas, types of patients and conditions, and/or equipment. As a guidance resource, the Board posted, “RN and LPN Nursing Practice in the COVID-19 Health Care Environment” on the front page of our website; it is also published in this issue of Momentum. It addresses various nursing practices, and includes information on telehealth practice, delegation of nursing tasks, and personal protective equipment (PPE).

The Board has also been communicating with Program Administrators frequently, including to address practice/academic partnerships. “A Policy Brief: U.S. Nursing Leadership Supports Practice/Academic Partnerships to Assist the Nursing Workforce during the COVID-19 Crisis” encourages partnerships so nursing students could be employed by a facility and work as a nursing student for compensation, in conjunction with the student’s nursing education program, and receive academic credit for clinical requirements. Ohio law and rules do not prohibit this type of partnership and the Board recognizes that this practice has occurred in the past. Soon after the release of the Policy Brief, the Board published a document supporting the Policy Brief, “Academic/Education Partnerships to Assist the Nursing Workforce During the COVID-19 Declared Emergency” (March 31, 2020).
The Board reviews other state actions that impact nursing in their states, however, in many instances the other state actions are not applicable to Ohio because Ohio does not have the same regulations. For example, some states’ laws establish a minimum number of clinical hours students are required to complete, and the other state is now waiving those minimum hours. Ohio does not establish a minimum number of clinical hours. Ohio law provides discretion and flexibility for the education program to establish its own curriculum and to move hours between clinical and laboratory experiences as needed. The Board issued guidance on March 24, 2020, acknowledging that clinical experiences for nursing students may need to be altered; it is posted as “Additional Guidance to Pre-license Nursing Education Programs.”

The Board can offer guidance on many topics and clarify the current law and rules, but there are some questions that cannot be answered at this time - this is an evolving situation and information may be available in the future based on the declared emergency. We appreciate the questions and input we have received and will continue to work with the Governor, legislature, state nursing and health care boards and associations to consider best practices and options while ensuring public safety for all Ohioans.

We thank you for your patience and understanding during this public health emergency. For updated information about COVID-19, visit www.coronavirus.ohio.gov or call 1-833-4-ASK-ODH from 9:00 a.m. – 8:00 p.m. (7 days/week).
practice/academic partnerships to assist the nursing workforce

during the COVID-19 declared emergency communication March 31, 2020

“A Policy Brief: U.S. Nursing Leadership Supports Practice/Academic Partnerships to Assist the Nursing Workforce during the COVID-19 Crisis” (Policy Brief) has been issued by a collaboration of nursing leaders and is included as part of this communication. The Policy Brief proposes academic-practice partnerships between health care facilities and pre-license RN and PN nursing education programs during the COVID-19 emergency in order to meet academic and workforce needs as follows:

Policy Brief Provisions

The Policy Brief proposes:
1. Nursing students would be employed by the facility on a full or part-time basis and work in the role of a nursing student for compensation and, in conjunction with the student’s nursing education program, would receive academic credit toward meeting clinical requirements.
2. Nursing students would be required to be enrolled in a Board approved pre-license RN or PN education program.

The Policy Brief recommends:
1. Health care facilities and nursing programs are encouraged to promulgate plans to take advantage of this opportunity and make every effort to reach out to eligible nursing students and inform them of the opportunity.
2. Health care facilities and nursing programs are encouraged to collaborate to identify ways to accomplish appropriate facility supervision of the nursing student-employee to achieve the final learning outcomes of the nursing program. For example, the health care facility could hire nursing program faculty to oversee the nursing student-employee, the nursing program faculty could hold joint appointment by the college/university/school and the health care facility, or the health care facility-employed preceptors could oversee the nursing student-employee with nursing program faculty oversight.
3. Nursing program leaders/faculty are encouraged to work with health care facility representatives to align clinical skills and competencies with the nursing student-employee work role/responsibilities.
4. Nursing student-employees must have planned clinical practice experiences that enable the students to attain new knowledge and demonstrate achievement of the final learning outcomes of the nursing programs.
5. Nursing programs should consult with their State Board of Nursing to ensure clinical requirement regulations would be met with this opportunity and experience.
6. Nursing programs are responsible for informing nursing students of the risks and responsibilities associated with working in a health care facility at this time. Additionally, nursing programs are responsible for communicating with students about their rights to be protected from infection and their options for completing the clinical practice requirements of the nursing program.

Application of the Nurse Practice Act and Administrative Rules

While the law and rules specify certain required safeguards for a partnership and to assure safe patient care, the law and rules in Ohio do not prohibit this type of proposed

continued on page 10
RESOURCES FOR COVID-19

The Centers for Disease Control and Prevention (CDC) and the Ohio Department of Health (ODH) continue to update information and alerts for COVID-19. On the home page of the Board website, the Board posted a link to the ODH coronavirus website (www.coronavirus.ohio.gov) for readers to access updated resources and the latest developments. In addition, as the Board receives updates from ODH, we are providing the information to nursing associations to share with their members.

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practice/academic partnership and the Board recognizes that this practice has occurred in the past.

In addition, Ohio does not require specific minimum hours for clinical experiences, and the Board has issued guidance acknowledging that clinical experiences may need to be altered. See “Additional Guidance to Pre-license Nursing Education Programs” (March 24, 2020).

Nursing Students Practicing Nursing Care
- Nursing students are authorized to provide nursing care as long as the student is currently enrolled in and actively pursuing completion of an Ohio approved pre-licensure nursing education program, practicing under the auspices of the program, and acting under the supervision of a RN serving for the program as a faculty member or teaching assistant. Section 4723.32(A), ORC.
- If the requirements of Section 4723.32(A) are not met, the nursing student would be working as an unlicensed person and would be limited to performing only nursing tasks that are delegated by a licensed nurse. (See Chapter 4723-13, OAC).

Nursing Education Programs
- The nursing program must have a current executed written agreement with the clinical site, where the nursing student is employed as part of their clinical experience. Rule 4723-5-17, OAC.
- For clinical experience, the nursing student must be engaged in clinical practices established by the faculty responsible for teaching the course to meet clinical course objectives. Rule 4723-5-01(F), OAC; Rule 4723-5-13, OAC (RN programs) and 4723-5-14, OAC (PN programs).
- The student’s nursing practice must be supervised by a faculty member, teaching assistant or preceptor. See Rule 4723-5-10, OAC (RN programs) and Rule 4723-5-11, OAC (PN Programs); and Rule 4723-5-20, OAC.

QUICK TIPS OF THE MONTH

UPDATE Your Email Account with the Board
Please make sure your email account stays up to date as it is the primary way the Board communicates with applicants and licensees. To update your email address, log into your Ohio eLicense account; click on your name in the right corner; and then click “Manage Profile.”

If you experience difficulties, call the Customer Service Center at (614) 466-3947, Option# 1, Monday-Friday, 8am-5pm. After business hours, email nursing.registration@das. ohio.gov. Include a brief description of the issue, first and last name, telephone number, email address, and license number, if you have it.

Calling About BCI/FBI Record Checks
Did you know BCI means Bureau of Criminal Investigation? If you need information about the status of your BCI/FBI record checks, you can call BCI at 877-224-0043.
FRAUDULENT CALL ALERT

The Board continues to hear from nurses and employers who are receiving calls from someone posing as a Board of Nursing investigator. The caller may state that nurse(s) are under investigation by the DEA, FBI, or Board of Nursing; the caller may ask for DEA numbers or bank account numbers and may threaten loss of licensure if the caller does not receive the information. Please be aware that these calls are NOT from the Board of Nursing. The calls are fraudulent. Do not provide DEA numbers, banking numbers, or SSNs to anyone saying they are from the Board of Nursing – the Board would not demand that information over the telephone. If you need to confirm whether a caller is an investigator for the Board of Nursing, please email: board@nursing.ohio.gov.
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Nurses are vital for patient care and safeguarding public health during the COVID-19 public health emergency. Nurses will likely be reassigned to unfamiliar clinical areas, types of patients or conditions, and/or equipment.

Standards are established by the Nurse Practice Act (Chapter 4723. ORC) and in administrative rules: Standard of Practice Relative to Registered Nurse and Licensed Practical Nurse (Chapter 4723-4, OAC); Delegation of Nursing Tasks (Chapter 4723-13, OAC); and Prevention of Disease Transmission (Chapter 4723-20, OAC).

The standards of practice in Chapter 4723-4, OAC, are broadly written and apply to all nursing practice, regardless of the nurse’s area of specialization, the patient’s condition or illness, the type of facility, or location of the patient.

**Telecommunications; Audiovisual Equipment; and Telehealth**

Nurses may use any type of telecommunication equipment to examine and assess patients; provide patients and family health teaching and health counseling (by the RN); patient teaching (by the LPN); and convey information to authorized health care providers and other members of the health care team. In providing telehealth, nurses practice in the same manner as they would if physically present with the patient, including ensuring patient privacy, confidentiality, and documenting the nursing care provided and the patient’s response.

**Delegation of Nursing Tasks**

In general, nurses are authorized to delegate a nursing task to an unlicensed person or teams of unlicensed persons, provided the task is not prohibited (such as unauthorized medication administration), the nurse has obtained verification that the unlicensed person is educated and competent in the safe performance of the task, and the task does not require complex observations or critical decisions be to be made during the performance of the task. Nurses may delegate to persons who have existing authority to administer medications, including medication aides certified by the Board of Nursing or medication aides certified by the Ohio Department of Developmental Disabilities. RNs and LPNs may not delegate to an unlicensed person, the administration of medications with the exception of over the counter topical medications applied to intact skin, over the counter eye drops, ear drops, suppository medications, foot soak treatments, and enemas.

**Personal Protective Equipment (PPE)**

On March 27, 2020, Governor DeWine made an urgent plea to the U.S. Food and Drug Administration (FDA) to issue an emergency waiver for the use of new technology that could sterilize up to 160,000 used personal protective face masks per day in Ohio. Due to the urgent need for PPE in Ohio, Governor DeWine once again asked that anyone who has unneeded PPE or can manufacture new PPE to email the state at together@governor.ohio.gov. The Board has dedicated a section on its website (www.nursing.ohio.gov) to practice issues that are heightened by COVID-19 and provides updated information on PPE.

When caring for patients who have or are presumed to have COVID-19, be familiar with the disease and use universal precautions. A reliable resource for COVID-19 information, including PPE and other efforts to protect both patients and health care providers, is the Ohio Department of Health hotline, 1-833-4-ASK-ODH and Coronavirus.Ohio.Gov.
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Bianca Thompson, MSN, FNP-BC, CCHP-RN is the Director of Nursing for Unity Health Care at the Department of Corrections. She has the most awesome task of leading a team of other nursing professionals to deliver the highest quality of care to the District’s most vulnerable population. Not only does her team provide high quality care under her leadership, she has also led them to achieve and maintain two major accreditations - NCCHC (National Commission on Correctional Health Care) and ACA (American Correctional Association). Her achievement was recognized in an article published in Advanced for Nurses Magazine, April 6, 2009, Volume 11. Prior to obtaining her current position, from 2002 – 2006, she served as Director of Education, Laboratory, and WIC Services for Unity Health Care. She had the privilege of overseeing nursing education, clinical laboratory services, as well as support services to underserved mothers. Before working for Unity Health Care, she worked as a Clinical Manager at the Greater Southeast Community Hospital (currently known as United Medical Center), where she was a nurse manager for the med-surg unit, security unit, dialysis unit, and the diabetes education center. For Dr. Thompson, nursing is more than a career. It is a calling that must be answered and is met with passion, energy, compassion, empathy, excellence, and professionalism each day.

Eleni Spartos O’Donovan, MD, SM
is the Medical Director for Unity Health Care at the Department of Corrections, where she has practiced for over 11 years. She is a family physician and the Associate Program Director for the National Family Medicine Residency at Unity Health Care in Washington, DC. An innovative, consortium-model Teaching Health Center program serving the District's most vulnerable patients through Unity's network of Federally Qualified Health Centers. Dr. O’Donovan received her Master of Science in Maternal and Child Health from the Harvard School of Public Health in 2000. She graduated from the University of Massachusetts Medical School in 2003 and completed her family medicine residency training at the Boston Medical Center Department of Family Medicine Residency Program. She joined Unity Health Care as a National Health Service Corps Scholar in 2005 and started their Teaching Health Center program in 2011. Dr. O’Donovan’s interests include maternal and child health, correctional medicine, and leveraging community-based medical education to improve health equity at the local and national level.
Coronavirus Omnibus Legislation (HB197) Licensing Authorization

Governor DeWine signed the Coronavirus Omnibus Legislation Authorization (HB197) on March 27, 2020. HB197 became effective immediately. HB 197 suspends, for the period of the COVID-19 emergency, the law requiring an applicant for licensure by examination to have passed the NCLEX examination.

HB 197 authorizes the Board to issue licenses to practice as a RN or LPN to applicants who meet the remaining legal requirements, including completing a Board-approved nursing education program and criminal records check.

The license will be valid until whichever of the following dates occurs first: (1) the date that is ninety days after December 1, 2020; (2) the date that is ninety days after the duration of the period of the emergency declared by the Governor’s Executive Order 2020-01D.

Background

Currently, there are an estimated 4,000 to 5,000 nursing education students who are in the last semester of their programs (or have just completed the last semester) and would be eligible to take the NCLEX examination. Ohio law requires that in order to be licensed as a RN or LPN, the nursing program graduate take a national license examination of the National Council of State Boards of Nursing (NCSBN), or any other national standardized nursing examination. Section 4723.09, ORC; 4723.10, ORC. NCSBN develops and administers two nurse license exams: the NCSBN Licensure Examination for Registered Nurses (NCLEX-RN) and the NCSBN Licensure Examination for Practical Nurses (NCLEX-PN). These examinations are used by all U.S. states/territories to test entry-level nursing competence of candidates for licensure. NCSBN administers the examination through Pearson VUE in testing sites. Pearson VUE issued a statement suspending all testing on March 17, 2020. On March 25, 2020, some sites across the country opened, but without providing full testing capacity, the NCLEX will continue to be unavailable to the majority of candidates.

Impact for Workforce and Public Protection Measures

HB197 will potentially place 4,000 to 5,000 additional health care providers in the workforce. In balancing public safety, in order to issue licenses, the law requires that the Board of Nursing receive documentation from nursing programs that the applicant has successfully completed the program (Completion Letters). This assures that the applicants, although they have not passed the national examination, have obtained the necessary education to engage in safe nursing practice. This also prevents imposters from obtaining licenses. In addition, as another public protection measure, criminal records checks will continue to be required.

Applying for Initial Licensure as a RN or LPN During the COVID-19 Emergency

To apply, complete the steps below. Detailed information about all aspects of licensing can be found at www.nursing.ohio.gov.
1. Submit an application online, by going to www.nursing.ohio.gov and click on the large red button in the middle of the front page, “Licensing-Apply/Renew Online”
2. Pay the application fee when submitting the application
3. Provide evidence of nursing education program completion; the education program must submit a Program Completion Letter directly to the Board
4. Complete a criminal records check that includes BCI and FBI checks

Processing RN and LPN Initial Licenses

Board staff are working remotely and continuing Board operations. Additional resources have been assigned to licensing and all licensing has been expedited.

The Board expects a minimum of 5,000 applicants for initial licenses and even with additional resources and working as quickly as possible, there may be some delays. Please know we are diligently processing applications as quickly as possible.

Also, please be aware that we cannot issue the initial license without a Program Completion Letter from your education program and a completed Criminal Records Checks (CRCs). Information regarding CRCs is located on the Board website under Licensing & Certification tab at the top.

While we are striving to respond to emails, our primary focus is to issue licenses as quickly as possible, so responses to calls and emails will be delayed. To see if you have been issued a license, go to www.nursing.ohio.gov and click on the large red button, “License Search,” and check for your name. To check on the status of documents submitted, sign into your eLicense account, click options, then click review status.

We appreciate your understanding and know how vital nursing care and a nursing workforce is during the pandemic.

1. These numbers are based on the numbers of nursing students completing education programs from March 1, 2019 through June 15, 2019, i.e.: RN students (3,999); LPN students (650).

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The renewal period for LPN licenses will begin on July 1, 2020. Starting in May, the Board will be sending renewal information through eNews and social media, and please check the Board website at www.nursing.ohio.gov for up-to-date renewal information.

There are important deadlines to remember during renewal which begins on July 1, 2020 and ends October 31, 2020.

- There is a first renewal deadline of September 15th. If you renew on or before September 15th, you pay a fee of $65.00 and the $3.50 state transaction fee.
- If you miss that deadline, you then have until October 31st to renew your license, but there is a late processing fee and the $3.50 transaction fee. The late processing fee applies between September 16th and October 31st.
- If you miss the October 31st deadline, your license will lapse on November 1, 2020. You cannot work as an LPN as long as your license is lapsed. You must apply for reinstatement of your lapsed license which requires an additional application, Board review, and fee. You will not be able to work under the lapsed license while the application for reinstatement of your lapsed license is being reviewed and processed.

Renewal is be completed online using the Ohio eLicense system, a comprehensive professional regulatory license system used by a variety of state licensing boards, the same system used during the last renewal period.

It is estimated over 55,000 licenses will be renewed this year. The earlier you renew, the better chance you have to avoid issues with your license close to the renewal deadline.

Renew Timely
- Renew ASAP. Incomplete applications will not be accepted by the online system. Waiting until a deadline and realizing you do not have all the information needed to complete the application may prevent you from renewing timely.
- If you wait to renew until close to the September 15th deadline and encounter any difficulties or cannot provide all the information, the application will be incomplete, and you will then pay a late fee on or after September 16th. The late processing fee is the $65 renewal fee plus an additional $50 fee. Also, the $3.50 state transaction fee applies.
- If you wait to renew until close to the October 31st deadline and encounter any difficulties or cannot provide all the information, the application will be incomplete, and your license will lapse on November 1st. You cannot work as a nurse as long as your license is lapsed. You must then apply for reinstatement of your license. The reinstatement process takes additional time to process. Please take the necessary steps to avoid this.

Must Pay by Credit or Debit
- The State of Ohio charges a $3.50 transaction fee, so in addition to the application fee, the $3.50 transaction fee is charged for each application.
- Fees must be paid online at the time of renewal. Use Master Card, VISA or Discover credit or debit cards. If you do not have this type of personal credit or debit card, you can obtain these pre-paid cards at local stores to use for renewal.
- If you purchase a prepaid Master Card, VISA or Discover credit or debit card, please have enough funds available in the card before submitting the renewal application.
on it to cover (a) the credit/debit card company’s processing fee, if applicable; (b) the Board’s application fee; and (c) the state transaction fee of $3.50.

• If the fee is not paid when you submit your application, the application will be incomplete and will not be processed until you submit all required fees. All fees are non-refundable.

Additional Information May Be Required

• If you are asked to provide documentation of citizenship, court documents or other information that may be required as part of your application, please be prepared to upload the documents electronically through the online system. This information is usually required of applicants who answer “yes” to one of the additional information questions on the renewal application.

• No hardcopies of court documents or other information required as part of your application will be accepted. Waiting until a deadline and then realizing you do not have all the information and in the form needed to upload the documents electronically through the online system will prevent you from renewing.

• Incomplete renewal applications cannot be accepted by the system. If all required documents are not provided electronically, the renewal application is incomplete and will not be processed.

Continuing Education Renewal Requirements

• You must complete the continuing education (CE) requirements by October 31, 2020 to maintain licensure.

• You are not required to submit documentation of CE when you renew your license, but you must attest on the renewal application that you met or will meet the CE requirement by October 31, 2020. Failure to comply with CE requirements may be grounds for disciplinary action. For more information on CE, please refer to the CE FAQ document at www.nursing.ohio.gov found on the Licensing, Certification and CE page.

The Board will be sending weekly renewal tips and reminders through eNews and social media throughout the renewal cycle. Please subscribe to eNews, Facebook and Twitter for updates and alerts. And please check the Board website at www.nursing.ohio.gov for renewal information.
You’ll draw more than a paycheck here.

You’ll draw inspiration.

Eskenazi Health has been named by Becker’s Hospital Review as one of the 150 top places to work in health care in the United States. Here, each patient is treated with skill and kindness, never like a number on a chart, and we never stop looking for health care professionals who share our philosophy. To learn more about careers at Eskenazi Health, please call 1.855.360.JOBS or visit eskenazihealth.edu/careers.
Elevate Your Nursing Practice

Degree Options for Nurses

Take charge of your career with a nursing degree that caters to the demanding schedule of a working nurse. A top choice for busy adults for more than 115 years, Franklin University provides an accredited nursing degree along with the flexibility you need to balance your education with your life. You’ll learn from our faculty of in-field experts and gain knowledge you can put to use right away.

B.S. IN NURSING (RN-BSN)
- Designed for RNs with an associate degree (ADN) or nursing diploma
- Transfer up to 24 technical credits toward your degree
- Take advantage of our low tuition rate ($398 per credit hour)
- Earn your degree 100% online in about one year

M.S. IN NURSING*
- Strengthen your critical-thinking and problem-solving skills
- Take online courses and complete a 12-week on-site practicum in an approved healthcare setting
- Earn your degree in 18 months or transfer up to 12 credit hours and finish faster

M.S. IN NURSING FAMILY NURSE PRACTITIONER*
- Manage the health of individuals and families
- Take online courses and complete on-site clinicals in an approved healthcare setting during the last year of the program
- Earn your degree in 27 months

M.S. IN NURSING NURSE ADMINISTRATOR*
- Lead strategic change and manage teams
- Take 6-week online courses and complete an 80-hour practicum requirement
- Earn your degree in 16 months

* A streamlined RN-MSN admission pathway is available for RNs with an associate degree (ADN) or nursing diploma.
How Do I Change My NAME with the Board?

Requests received online are processed in 2-3 business days

- Go to eLicense.ohio.gov
- Log into your account
- Scroll to the panel displaying your license type and number
- Click the “Options” link on the appropriate license panel
- Click on the link “Change Name”
- Upload one of the certified court records listed below:
  - Marriage Certificate/Abstract
  - Divorce Decree
  - Court Record indicating change of name
  - Documentation from another state/country consistent with the laws of that jurisdiction
- Click “Submit”

If you have difficulties logging into your account or uploading documents, contact the Customer Service Center at 614-466-3947, “Option 1” (weekdays 8am-5pm, except for holidays). If you need assistance after business hours, email nursing.registration@das.ohio.gov and include a brief description of the issue, your first and last name, telephone number, email address, and license number, if you have it.

For other questions, email licensure@nursing.ohio.gov and include a brief description of the issue, your first and last name, telephone number, email address, and license number, if you have it.

Make sure you timely update your address – it is a requirement by law that licensees report address changes, within 30 days of the change, to the Board. Your address of record is used for communication purposes.

- Go to eLicense.ohio.gov
- Log into your account
- Scroll to the panel displaying your license type and number
- Click the “Options” link on the appropriate license panel
- Click on the link “Change Address”
- Click “Submit”
- Address changes made online are processed through the system automatically

If you have difficulties, contact the Customer Service Center at 614-466-3947, “Option 1” (weekdays 8am-5pm, except for holidays). If you need assistance after business hours, email nursing.registration@das.ohio.gov and include a brief description of the issue, your first and last name, telephone number, email address, and license number, if you have it.

For other questions, email licensure@nursing.ohio.gov and include a brief description of the issue, your first and last name, telephone number, email address, and license number, if you have it.

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**ADVISORY GROUPS AND COMMITTEES**

All meetings of the advisory groups are held in the Board office. If you wish to attend one of these meetings, please contact the Board office at 614-466-6940 or board@nursing.ohio.gov to confirm the location, date or time.

<table>
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<tr>
<th>Advisory Committee on Advanced Practice Registered Nursing – Chair: Erin Keels, RN, APRN-CNP</th>
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<tr>
<td>Advisory Group on Continuing Education – Chair: Lauralee Krabill, RN</td>
<td>July 24, 2020, September 18, 2020</td>
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<td>Advisory Group on Dialysis – Chair: Barbara Douglas, RN, APRN-CRNA</td>
<td>May 19, 2020, September 15, 2020 – Meeting will begin at 1:00 p.m.</td>
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<td>Advisory Group on Nursing Education – Chair: Patricia Sharpnack, DNP, RN</td>
<td>June 11, 2020, October 8, 2020</td>
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<td>Committee on Prescriptive Governance – Chair: Sherri Sievers, DNP, APRN-CNP</td>
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<td>Daniel Lehmann, RN, LPN Dayton</td>
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January 2020 Disciplinary Actions

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- Competitive Pay with BSN Recognition
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- A generous PTO Plan with Paid Holidays
- 401B Retirement Plan
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- Dependent Tuition Assistance Program

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We are an EOE. All qualified applicants will receive consideration for employment and will not be discriminated against on the basis of disability, veteran status or other protected status.
## January 2020 Disciplinary Actions

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## Ohio Board of Nursing

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Full-service legal guidance for Ohio nursing license hearings

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Ohio law requires the Board to review a portion of its administrative rules at least once every five years. In addition to the five-year review, the Board may consider new rules or revisions to the rules at various times.

The public purpose for rule-making is to actively safeguard the health of the public through the effective regulation of nursing. Ohio Revised Code (ORC) Section 4723.07 authorizes the Board to adopt rules governing the practice of nursing, including standards and procedures for licensure, minimum standards for nursing education programs, continuing education, and other rules necessary to enforce ORC Chapter 4723. Meetings with interested parties and Board advisory groups and committees prior to filing the rules allow for further public comments and consideration and help ensure that rules are applied consistently for the regulated community.

The Board held a public hearing in November 2019 to implement changes to rules following the five-year rule review for Ohio Administrative Code (OAC) Chapters:
- Chapters 4723-2, Licensing for Active Duty Military and Veterans
- Chapter 4723-16, Hearings
- Chapter 4723-17, Intravenous Therapy Courses for Licensed Practical Nurses
- Chapter 4723-25, Nurse Education Grant Program
- Chapter 4723-26, Community Health Workers.

The Board also made changes to individual rules: 4723-1-03, 4723-5-04, 4723-5-10, 4723-5-21, 4723-6-01, 4723-6-02, 4723-6-03, 4723-7-05, 4723-7-06, 4723-8-08, 4723-9-10, 4723-9-13, 4723-20-01, 4723-20-03, 4723-20-07.

The rule changes were effective February 1, 2020. Rules can be accessed online at: http://codes.ohio.gov/oac/.

The following is an overview of some of the rule revisions:

**Licensing for Active Duty Military and Veterans (Chapter 4723-2)**
- Minor changes were made to correct obsolete language in Rules 2-01 and 2-03.

**Education Program Rules (Chapter 4723-5)**
- Rule 5-10(A)(5)(b) and 5-11(A)(5)(b): As determined by the Board and as recommended by the Advisory Group on Nursing Education, (Rules) 5-10(A)(5)(b) and 5-11(A)(5)(b) were revised to remove the requirement that preceptors have at “at least two years” experience in nursing practice.
- Rule 5-21(E)(2): This language was revised consistent with removal of the two-year experience requirement for preceptors in Rules 5-10 and 5-11.

**Alternative Program for Chemical Dependency/Substance Use Disorder (Chapter 4723-6)**
- Rules 4723-6-01, 6-02, and 6-03 remove references to “chemical dependency” and replace with “substance use disorder”, consistent with HB 119, 132nd General Assembly (GA) and current professional terminology.

**Examination and Licensure (Chapter 4723-7)**
- Rules 7-05(E)(1) and 7-06(F)(1): The process for issuance of a temporary permit to RN/LPN endorsement applicants was changed to expedite issuing permits by eliminating the documentation of completion of a nursing education program requirement. The rationale is that: (a) The law, Section 4723.09(D), ORC, does not require this documentation for temporary permits; (b) Frequently the education program information is not readily available through NURSYS, which staff relies upon to confirm licensure in another state, and this delays the temporary permit process; (c) Endorsement applicants are required to provide evidence of licensure in another NCSBN jurisdiction, which would require completion of a NCSBN-member approved education program; and (d) To obtain a full license, documentation of completion of an education program is required.

**Advanced Practice Nurse Certification and Practice (Chapter 4723-8)**
- Rule 4723-8-08 (B): The language for RNs allows for those newly licensed on or after July 1 to have a license renewal date in the next odd-numbered year (see 4723-7-09(J)); this language is proposed for APRNs rather than the renewal fee waiver (which was added in 2017 to accommodate the COA renewal/APRN license issuance, and is no longer needed). In addition, since the law was changed to establish an APRN license, the license renewal is separate from the RN license renewal application, so language was deleted to reflect this change.

**Prescriptive Authority (Chapter 4723-9)**
- 9-10 (A), (B), (C): Language is revised to include the Exclusionary Formulary for prescribing in paragraph (B), rather than referring to a Formulary that is posted online. Should the Committee on Prescriptive
Governance (CPG) recommend that drugs be added to the Formulary, i.e., that APRNs cannot prescribe certain drugs, the CPG’s recommendation would go the Board for approval, and the Board would amend Rule 9-10 to reflect the updated Formulary. The language in (C) is statutory (Section 4723.50(C), ORC).

- 9-10(A)(13): The definition of “terminal condition” is revised consistent with Medical Board Rule 4731-11-01, OAC.
- 9-10(K)(6): Oncologists and hematologists were added by the Medical Board in Rule 4731-11-14 as prescribers who may exceed the 120 MED; consistently, APRNs with national certification in oncology or hematology would also be able to exceed the 120 MED for established patients. Language regarding pain management, hospice and palliative care is not new but reorganized within the paragraph.
- Rule 9-13: This is the new Medication Assisted Therapy (MAT) rule, effective February 1, 2019. The following changes are included:
  - 9-13(A): Change to reflect changes in Rule 4723-9-10, i.e., the Formulary is now included in rule rather than solely published online.
  - 9-13(B): Include Certified Nurse Midwives as prescribers who can potentially engage in medication-assisted treatment. Effective October 24, 2018, the “Substance Use-Disorder Prevention that Promotes Opioid Recovery and Treatment for Patients and Communities Act” (H.R. 6), was signed into Federal law amending 21 U.S.C. § 823 to expanding the definition of “qualified other practitioners” for purposes of buprenorphine prescribing for MAT. In addition to nurse practitioners (whose eligibility was made permanent), clinical nurse specialists, certified registered nurse anesthetists, and certified nurse midwives were added (for a period of five years).

**Hearings (Chapter 4723-16)**

- Rule 16-08(A): The time period to file subpoena requests is changed from 30 days to 45 days prior to hearing.
- 16-09(A): The word “solely” is added before procedural in line three (“relates solely to a procedural matter”).

**Intravenous Therapy Courses for Licensed Practical Nurses (Chapter 4723-17)**

- Rules 4723-17-01, 17-03: Added a reference to “physician assistant” consistent with SB 110 (131st GA) which added physician assistants to the providers that may direct LPN practice.

**Nurse Education Grant Program (Chapter 4723-25)**

- Rule 25-02(H)(2), Rule 25-07: Replaced “Ohio board of regents” with “chancellor of higher education” to reflect current statutory terminology.

**Community Health Workers (Chapter 4723-26)**

- Rule 26-12(A)(2)(b): Replace “Ohio board of regents” with “chancellor of higher education” to reflect current statutory terminology.
The APRN Prescribing Flow Chart is designed to provide guidance to prescribers based on the requirements of Rule 4723-9-10, OAC. APRN prescribers are encouraged to review Section 4723.481, Ohio Revised Code (ORC), and Rule 4723-9-10, Ohio Administrative Code (OAC) which govern APRN prescribing in Ohio and be familiar with other state laws and federal laws related to their prescribing.

**APRN PRESCRIBING Rule 4723-9-10 OAC**

*For MAT Prescribing see Rule 4723-9-13*

**STOP do not prescribe**

Is the drug a controlled substance?

- NO
- YES

May prescribe

*But note: Gabapentin products require days’ supply

Is drug C-II?

- NO
- YES

Will C-II be issued from allowed location or through a hospice program (Section 4723.481 ORC)?

- NO
- YES

Is the drug for acute, chronic or sub-acute pain as defined in 4723-9-10(A)?

- NO
- YES

Is prescription for inpatient use, or is patient: (a) in hospice care; or (b) in a terminal condition as defined in 4723-9-10(A)(13)? **Or, for acute pain only**, is receiving palliative care, or is being treated for cancer or associated condition?

- NO
- YES

If non-opioid treatment options have been ruled out, may prescribe for pain that is

**Acute**: presumption is 3-day or less supply is sufficient, but may prescribe up to 7 days (adults), 5 days (minors) with no refills and not more than an average of 30 MED per day. 30 MED may be exceeded only if Rule 4723-9-10(H)(3)(c) requirements are met.

**Chronic or Sub-Acute**: Only if requirements of Rule 4723-9-10(K) are met.

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