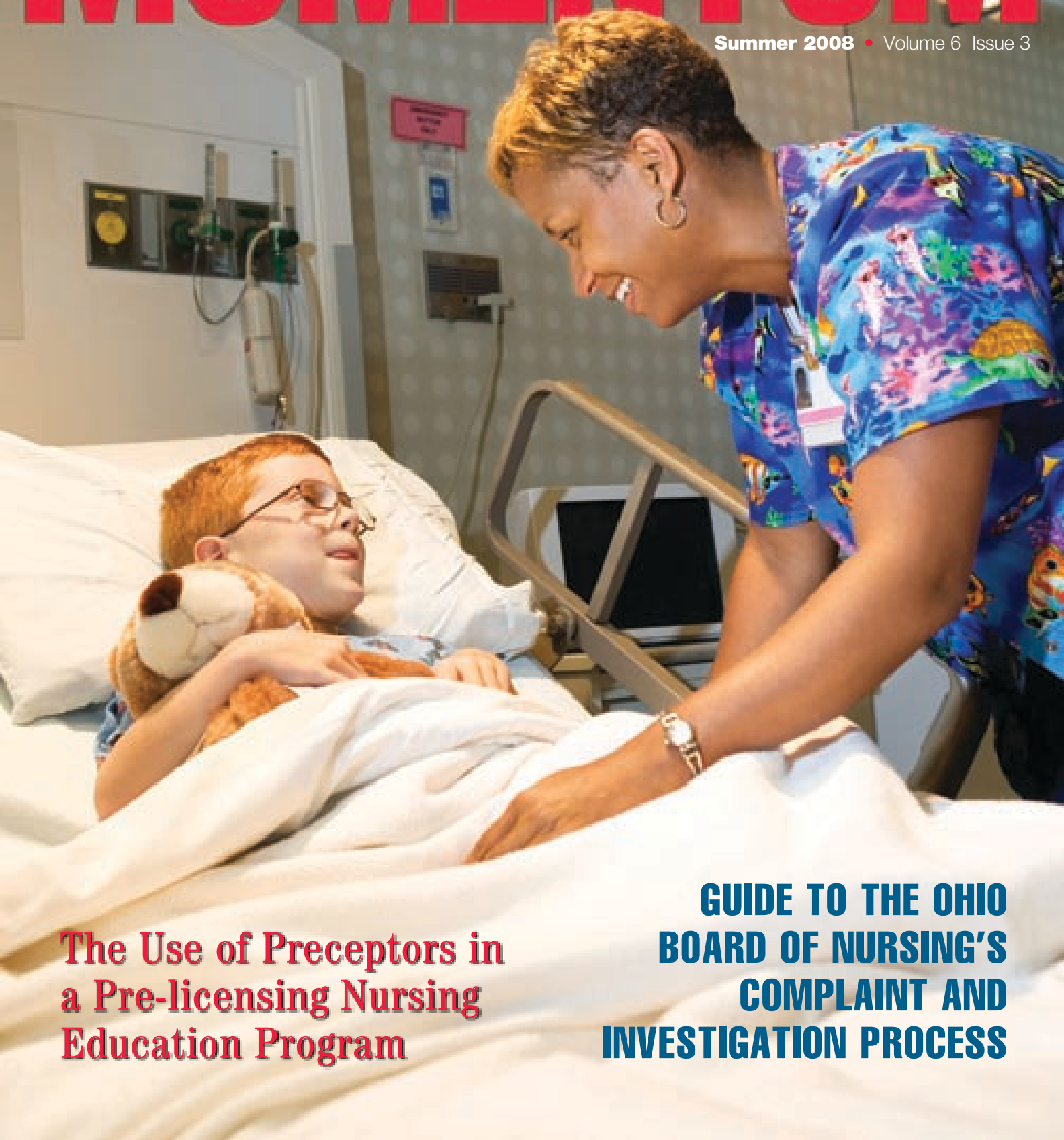


PUBLICATION OF THE OHIO BOARD OF NURSING

MOMENTUM

Summer 2008 • Volume 6 Issue 3



**The Use of Preceptors in
a Pre-licensing Nursing
Education Program**

**GUIDE TO THE OHIO
BOARD OF NURSING'S
COMPLAINT AND
INVESTIGATION PROCESS**

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is published by the
Ohio Board of Nursing
17 South High Street, Suite 400
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Phone: 614-466-3947
Fax: 614-466-0388
www.nursing.ohio.gov

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MOMENTUM is produced at no cost to Ohio taxpayers

Created by

Publishing Concepts, Inc.

Virginia Robertson, Publisher
vrobertson@pcipublishing.com
14109 Taylor Loop Road
Little Rock, AR 72223

501.221.9986 or 800.561.4686

www.thinkaboutitnursing.com

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Edition 22



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Lisa Klenke, MBA, RN
Board President

Greetings from the Ohio Board of Nursing!

The year is quickly progressing for the Board. We have been working closely with the Ohio Board of Regents (OBR) to increase the use of available loan funds for those interested in becoming nurses and for registered nurses interested in becoming nursing faculty by continuing their education through post-licensure nurse education programs. The Nurse Education Assistance Loan Program (NEALP) is a loan forgiveness program administered through the OBR.

In addition to the loan forgiveness program, OBR is currently administering a scholarship program for post-licensure education for registered nurses to become

nursing faculty. To learn more about NEALP and the scholarship program, contact the OBR State Grants and Scholarships Department at 1-888-833-1133 or visit their Web site at <http://regents.ohio.gov/sgs/nealp/>.

The Board begins the Administrative Code rule review in the summer of each year, and the process continues through November with a scheduled public hearing. In accordance with Ohio law, the Board is required to review, at least once every five years, each of its rules. As a result, the Board determines whether a rule should be revised, rescinded, or remain unchanged. This year, as part of the five-year review, the Board will be discussing Ohio Administrative Code Chapters 4723-4, Standard of Practice Relative to RN or LPN; 4723-6, Alternative Program for Chemically Dependent Nurses; 4723-18, Practice Intervention and Improvement Program; and 4723-20, Prevention of Disease Transmission. The Board is also considering revisions of other individual rules, primarily for technical and non-substantive changes. Proposed revisions will be posted on the Web site later in the year. If you have comments or questions regarding the rules and/or the process, please

contact us at law-rules@nursing.ohio.gov.

In conjunction with the five-year rule review, a Board Committee on Practice will provide comments to the Board regarding Chapter 4723-4, the “practice” chapter. The Committee meetings will be held in conjunction with the July 17-18 and September 18-19, 2008, Board meetings. After the work with Chapter 4723-4 is completed, the Board Committee will continue to meet to discuss IV therapy and LPNs. Please contact us at board@nursing.ohio.gov if you are interested in obtaining additional information about the meetings.

Lastly, the Board is proud to have worked in conjunction with Ohio’s regional nursing workforce centers, the Ohio League of Nursing, nursing associations, and interested parties to implement the Ohio Center for Nursing Web site, designed to provide resources and links to information regarding the nursing workforce. The site is at www.ohiocenterfornursing.org.

If you need to contact the Board, please refer to the Web page at www.nursing.ohio.gov and click on “Contact” for a directory of e-mail addresses and telephone numbers.

Lisa R. Klenke

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FROM THE EXECUTIVE DIRECTOR

The Ohio Board of Nursing is very happy to announce that Lisa Emrich, RN, MSN, has been selected to receive the Exceptional Contribution Award from the National Council of State Boards of Nursing (NCSBN). Presentation of the award will take place during an Awards Ceremony at the NCSBN Annual Meeting.

Lisa, a Program Manager for the Board, was chosen for her significant contributions to NCSBN activities and demonstrated support of NCSBN's mission. Lisa currently serves as Chair of the NCSBN's TERCAP (Taxonomy of Error, Root Cause Analysis and Practice-Responsibility) Committee. Her work to promote TERCAP is commendable. She has been dedicated to see that TERCAP becomes implemented by state boards of nursing and has worked through many questions and issues to expand its use. TERCAP will result in valuable data regarding systematic health care issues and nursing practice errors.

It has been my pleasure to work with Lisa at the Ohio Board of Nursing since 2002. Throughout this time, I have known her to be highly committed to the work of the Board and NCSBN. Lisa views her work at the Board and with NCSBN as an honor and frequently expresses how much she enjoys her work. The Board is very proud of Lisa and her accomplishments!

We are also proud to report that



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

Ohio Board staff were selected by the NCSBN Board to be members of NCSBN Committees for two-year terms:

- Tom Dilling, Esq., OBN Adjudication Coordinator and Legislative Liaison, was appointed to the Chemical Dependency Program Review Committee.
- Dennis Corrigan, RN, OBN Investigator, was appointed to the Disciplinary Resources Committee.
- Joyce Zurmehly, RN, Ph.D., OBN Education Consultant, was appointed to the Innovations in Education Regulation Committee.

We are proud of the Board staff and that Ohio is represented in nursing regulation at the national level. We look forward to our staff sharing their expertise with NCSBN and learning from other state boards of nursing across the country!



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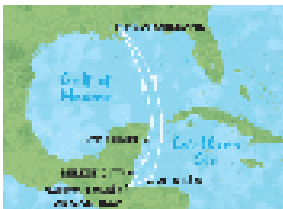
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THE USE OF PRECEPTORS IN A *Pre-licensing Nursing Education Program*

The mission of the Board of Nursing (Board) is to actively safeguard the health of the public through the effective regulation of nursing care. This mission is partly carried out in the Board's regulation of pre-licensure nursing education programs (Programs) to assure that newly graduated nurses in Ohio are prepared and competent to enter the practice of nursing. This is accomplished by establishing Program requirements in Chapter 4723-5 of the Ohio Administrative Code (OAC) that must be met and maintained by Programs. This assures that students learn nursing knowledge and skills in a framework that is congruent with the minimal knowledge and skills required for initial licensure as a nurse in Ohio.

The Board furthers this mission by establishing the minimal qualifications for the Programs' administrators, whom the Board holds accountable for all aspects of the Program, and for associate administrators, faculty, clinical instructors and preceptors, who provide oversight and instruction to nursing students. Establishing minimal qualifications assures that experienced nurse educators are administering Programs and are working with nursing faculty who are knowledgeable about nursing education and who prepare and teach the Program's curriculum/course content. The minimal qualifications also assure that the Program utilizes nurses with an adequate clinical foundation to guide and review nursing students in their learning of nursing practice.

Nursing students actively engage in the practice of nursing in Ohio through planned



clinical experiences. A clinical experience is defined as an activity planned to meet course objectives or outcomes and to provide a nursing student with the opportunity to practice cognitive, psychomotor, and affective skills in the delivery of nursing care to an individual or group of individuals who require nursing care. 4723-5-01 (F), OAC. Therefore, it is necessary that nursing students actively provide supervised nursing care to Ohio's citizens in identified clinical agencies.

The practice of nursing in Ohio requires that an individual obtain an Ohio nursing license. However, the Ohio Nurse Practice Act provides a licensure exception for pre-licensure nursing education students, as long as the student is enrolled in a Program, the student's practice is under the auspices of the Program and the student "acts under the

supervision of a registered nurse serving for the program as a faculty member or teaching assistant." Section 4723.32 (A), Ohio Revised Code ORC. If a nursing student were to provide nursing care outside of the instructional framework of the Program, the licensure exception would not apply, and the individual could be engaging in the unauthorized practice of nursing.

Programs are utilizing preceptors on a more frequent basis to facilitate nursing students' clinical learning. A preceptor is defined in Rule 4723-5-01(AA) OAC as "a registered nurse or licensed practical nurse who meets the requirements of this chapter, who provides supervision of a nursing student's clinical experience at the clinical agency in which the preceptor is employed, to no more than two students at any one time, and who

implements the clinical education plan at the direction of a faculty member responsible for the course in which the student is enrolled.” For purposes of Chapter 5, “supervision of a nursing student in a clinical setting” is defined in Rule 4723-5-01(HH) to mean that a faculty member, teaching assistant, or preceptor is immediately available to the nursing student at all times to provide guidance and review of the student’s performance. Thus, for purposes of evaluating nursing practice, it is the faculty member teaching the course that evaluates and supervises the student’s nursing practice; the faculty member gives direction to the preceptor, who may provide the clinical supervision as defined in Rule 4723-5-01(HH). See also Rules 4723-5-19 (D), OAC; 4723-5-20, OAC.

Preceptors are identified in a Program’s clinical agency contract as a nurse who has specific experience and skills in a specialty unit of the clinical agency or as a nurse who has practice expertise. The preceptor, by having intimate knowledge of the clinical agency and the provision of nursing care to the clinical agency’s clients, facilitates the student’s learning opportunities in meeting the clinical course objectives. This is accomplished within the framework of the learning objectives prepared by the faculty responsible for teaching the clinical course. It is imperative that preceptors be provided with a copy of the clinical course syllabi and engage in ongoing communications with the responsible faculty. It is the clinical course faculty who is responsible for determining the student’s clinical performance and progress towards meeting the clinical course’s objectives, based on valuable input from the preceptor.

The qualifications for preceptors are set forth in Chapter 4723-5 OAC. These include completion of an approved nursing program (registered or practical nursing depending on the student’s program – a practical nurse Program may utilize either a registered nurse or licensed practical nurse as a preceptor for its

CONTINUED ON THE NEXT PAGE

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students); experience for at least two years in the practice of nursing and demonstrated competence in the area of clinical practice in which the preceptor provides clinical experience supervision; and a current valid nursing license in the state or jurisdiction where the clinical experience occurs is required.

Programs that utilize preceptors are required to provide the Board with documentation that reflects how the nurse meets the preceptor qualifications, including the two years practice experience and the clinical competency. The clinical competency may be documented by the nurse's certification in a specialty practice or the number of years the nurse has been actively engaged in the specialty or area of practice. In addition, the Programs are required to have a contract with the preceptor's employing clinical agency, and the contract should contain language about the expectations the preceptor is to fulfill. A form is available for download from the Board's Web site that may be used by Programs to assist in documenting their preceptors' qualifications.

Below are frequently asked questions that arise regarding Program's use of preceptors:

QUESTION: Who is responsible for supervising a nursing student during a preceptorship?

ANSWER: The faculty member that teaches the clinical preceptor course is responsible for supervising and evaluating the student's nursing practice; however, a preceptor may be utilized to supervise the student nurse in the clinical experience at the faculty member's direction. The preceptor must be immediately available to the student, provide the student guidance, and review the clinical experience, and in turn, provide the faculty member with feedback concerning the student's clinical experience and clinical accomplishments.

DISCUSSION: The nursing student does not have a license to practice nursing and is permitted to engage in nursing practice based upon a licensure exception set forth in Section 4723.32(A), ORC. The exception

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requires the student nurse to act under the supervision of a registered nurse serving for the program as a faculty member or teaching assistant. When a preceptor is used, the preceptor acts both as an employee of the clinical agency providing the student access to the agency's clients for purposes of the clinical experience and as an instructional arm for the Program to facilitate the student's clinical learning.

QUESTION: The preceptor took an unplanned day off from the clinical agency on the day of the student's clinical experience. Can the agency's Unit Manager take the preceptor's place?

ANSWER: If the Unit Manager and clinical agency is agreeable, the Unit Manager meets preceptor qualifications, the Program obtains verification of these qualifications, the Unit Manager has communication from the faculty teaching the clinical course and an understanding of the student's clinical objectives, then the Unit Manager may precept the student.

DISCUSSION: Ideally, a contingency plan should be in place in the event of a designated preceptor's absence. The contingency plan should be developed and agreed upon by the faculty member, clinical agency representative and preceptor.

QUESTION: Because of the number of Programs needing preceptors, can one preceptor work with three students at one time as long as they are from different schools?

ANSWER: No.

DISCUSSION: Rule 4723-5-20(G), OAC states that: "A preceptor shall provide supervision to no more than two nursing students at any one time, provided the circumstances are such that the preceptor can adequately supervise the practice of both students." See also Rule 4723-5-01(A), OAC. The two-student limit is not altered by the number of Programs for whom the preceptor is supervising the clinical experience.

QUESTION: If the preceptor's clinical unit is quiet, can the preceptor take the student to another specialized unit or different depart-

ment to obtain skills, or can the preceptor reassign the student to another nurse in another unit?


ANSWER: The preceptor may take the student to another unit to seek additional learning opportunities if the learning opportunities available on the other unit are a part of the clinical learning objectives and remain within the expertise of the preceptor. Only a faculty

member may assign a student to a preceptor.

DISCUSSION: The Program faculty is responsible for assigning the nursing student's clinical experiences and providing for supervision of each student. Rule 4723-5-20 (F)(2), OAC requires that the preceptor "Design, at the direction of a faculty member, the student's clinical experience to achieve the stated objectives or outcomes..."

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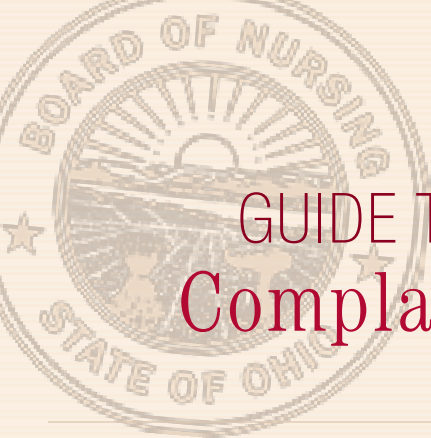
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GUIDE TO THE OHIO BOARD OF NURSING'S Complaint and Investigation Process

Ohio Revised Code Section 4723.28(H) requires the Board of Nursing to investigate evidence that appears to show that any person has violated any provision of law or rules regulating the practice of nursing. Any person may report to the Board any information that appears to show a violation of any provision of Chapter 4723 of the Ohio Revised Code or any rule of the Board. *In the absence of bad faith, any person who reports such information or who testifies before Board in any disciplinary hearing is not liable for civil damages as a result of his/her report (complaint) or testimony.* 4723.28(H), Ohio Revised Code. Further, information received by the Board in the course of its investigation is confidential.



TYPES OF COMPLAINTS THAT CAN BE ADDRESSED BY THE BOARD

The Board is required to investigate violations of Chapter 4723 of the Ohio Revised Code or any rule of the Board. These violations may include but are not limited to:

- Fraud or misrepresentation in obtaining a nursing license or dialysis certificate or certificate of authority.
- Denial, revocation, suspension, or restriction of authority to practice a health care occupation.
- Conviction, guilty plea or finding of eligibility for intervention in lieu of conviction for a felony.
- Conviction, guilty plea or finding of eligibility for intervention in lieu of conviction for a misdemeanor committed in the course of practice.
- Conviction, guilty plea or finding of eligibility for intervention in lieu of conviction for any drug law.
- Conviction, guilty plea or finding of eligibility for intervention in lieu of conviction for any crime involving gross immorality or moral turpitude.
- Performing duties beyond the scope of the practice.
- Impairment of the ability to practice because of drug or alcohol abuse, or because of physical or mental illness.
- Obtaining or attempting to obtain money or anything of value by intentional misrepresentation or material deception in the course of practice.
- Failure to practice in accordance with the standards of safe nursing practice or safe dialysis care.
- Failure to maintain professional practice.

TYPES OF COMPLAINTS THAT CANNOT BE ADDRESSED BY THE BOARD

- Complaints regarding a facility – *These complaints should be filed*

with the Ohio Department of Health.

- Employer/Employee disputes.
- Complaints regarding a nursing aide – *These complaints should be filed with the Ohio Department of Health.*
- Complaints regarding a physician – *These complaints should be filed with the Ohio Medical Board.*

HOW TO FILE A COMPLAINT

Complaint forms can be obtained on the Board's web site at <http://www.nursing.ohio.gov>, or by contacting the Compliance Section at (614) 466-9558. The Board accepts completed complaint forms via mail or facsimile at (614) 995-3686.

CONFIDENTIALITY

The Board's investigations are confidential by law, and as such, the Board cannot confirm or deny the existence of a complaint or an investigation to members of the public. Further, the Board cannot disclose the identity of the person who filed the complaint.

THE COMPLAINT PROCESS

To maintain confidentiality and to ensure that every complaint brought to the Board's attention is reviewed, each complaint is assigned a case number. The complaint is then reviewed by a Compliance Section staff member to determine whether the Board has the legal authority/jurisdiction to act on the complaint. The Board is required to investigate cases that indicate that there has been a violation of the law or rules governing the practice of nursing. Although all complaints are evaluated, many complaints do not result in formal disciplinary action being imposed by the Board. After the initial review of the case, if it is determined that the Board does not have jurisdiction, the complaint (case) will be closed.

If the board has jurisdiction, the case will be assigned to a compliance agent. The Board's compliance agents work throughout the state and their job is to gather all relevant

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information.

The Board, in the course of an investigation, may send the licensee a letter requesting information, obtain records or seek information through interviews with the licensee and other individuals relevant to the complaint. In addition, hospitals, pharmacies, and other health care facilities or providers of care, may also be contacted, in accordance with Board policies and depending on the nature of the complaint. The Board has subpoena power and will utilize this power when warranted.

Once an investigation is completed, the case is presented to the Board Supervising Member for Disciplinary Matters who then makes a disciplinary recommendation.

Please note that licensees may be placed in a confidential monitoring program, in accordance with provisions found in Chapter 4723 of the Ohio Revised Code.



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NORTH

Mercy Hospital Fairfield **513-682-7229**

RN – Quality Management – PRN
RN – Nursing Manager – General Surgery – FT
RN – Clinical Coordinator – Med/Surg – FT
RN – Emergency Department – FT, PT
RN – Cardiovascular Surgery – PT
RN – Labor & Delivery – FT
RN – Ortho/Neuro – FT, PT
RN – Recovery Room (PACU) – FT, PT, PRN
RN – Surgery/OR – FT, PT, PRN
RN – Telemetry – FT, PT, PRN
RN – Weekend Option – Various Units

Mercy Schroder **513-867-4109**

RN – Intermediate Care – PRN

EAST

Mercy St. Theresa **513-272-4962**

RN – Intermediate Care – PRN

Mercy Hospital Anderson **513-624-3200**

RN – Emergency Department Manager – FT
RN – Family Birth Center/L&D/Special Care Nursery Manager – FT
RN – Family Birth Center/L&D/Special Care Nursery – FT, PT, PRN
RN – Med-Surg Oncology – FT, PT, PRN
RN – ICU/CVICU – FT, PT, PRN
RN – iFlex Nurses – PRN
RN – Ambulatory Surgery – FT
RN – Emergency Department – FT, PT, PRN
RN – Orthopedics – FT, PT, PRN
RN – Cardiovascular Inpatient Unit – FT, PT, PRN
RN – Med-Surg Post Procedural Unit – PT, PRN
RN – Radiology – FT

Mercy Hospital Clermont **513-735-7534**

RN – Clinical Administrator – FT
RN – Clinical Coordinator – Telemetry – FT
RN – Behavioral Med – FT
RN – Telemetry – FT, PT, PRN
RN – Emergency Department – FT, PT, PRN
RN – ICU – FT, PT, PRN

WEST

Mercy Franciscan Terrace **513-948-6710**

RN – FT Weekend Commitment

Mercy Hospital Mt. Airy **513-853-5760**

RN – Charge Nurse – Emergency Dept., Telemetry, Oncology – FT, PT
RN – Nurse Educator – Emergency Services – FT
RN – Oncology – FT, PT
RN – Telemetry – FT, PT
RN – Emergency Department – FT, PT
RN – ICU – FT, PT
RN – Orthopedics – FT, PT
RN – Telemetry – FT Weekend Option Program

Mercy West Park **513-347-8219**

RN – Intermediate Care – FT
LPN – Assisted Living – PT
LPN – Intermediate Care – PRN

Mercy Hospital Western Hills **513-389-5037**

RN – Clinical Coordinator – ICU – FT
RN – Clinical Coordinator – Telemetry – FT
RN – Charge Nurse – Telemetry – FT
RN – Nurse Educator – Ortho – FT
RN – Quality Management – Case Management – FT
RN – Telemetry – FT, PT
RN – ICU – FT, PT
RN – Med/Surg Ortho – FT, PT
RN – Rehab – FT, PT
RN – Psych – FT, PT
RN – OR – FT, PT
RN – PACU – FT, PT
RN – Stroke Unit – FT, PT
RN – Senior Behavioral Health – FT, PRN
RN – ICU – Weekend Option – FT

What's New at Mercy



Mercy Hospital Fairfield

State of the Art Ortho/Neuro Unit opened November, 2007 currently has FT, PT and PRN positions available for Ortho RNs.

For more information, contact: 513-682-7229

Mercy Hospital Anderson

Mercy Hospital Anderson and Wellington Orthopaedic & Sports Medicine have partnered to create a **New Orthopaedic Center of Excellence** opening in late Summer '08. We currently have opportunities for Inpatient Ortho and Med/Surg RNs for FT, PT and PRN.

For more information, contact: 513-624-3200

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ADVISORY GROUPS AND COMMITTEES

All meetings of the Advisory Groups begin at 10:00 AM (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 from those listed.

Advisory Group on Nursing Education—October 9.
Chair: Kathleen Driscoll, JD, MS, RN

Advisory Group on Dialysis—August 12, October 14,
Chair: Debra Broadnax, MSN, RN, CNS

Advisory Group on Continuing Education Approvers—October 17.
Chair: Anne Barnett, BSN, RNC, CWS

Committee on Prescriptive Governance—September 8, October 28,
Chair: Jacalyn Golden, MSN, CNP

2007 Members Ohio Board of Nursing City Term Expires

Lisa Klenke, MBA, RN, CNA, *President*
Coldwater 2009

J. Jane McFee, LPN, *Vice President*
Perrysburg 2009

Debra Broadnax MSN, RN, CNS,
Supervising Member for Disciplinary Matters
Columbus 2008

Vacant, *Consumer Member*
2011

Delphenia W. Gilbert, BA, RN, M.ED, LSN
Akron 2011

Vacant, *LPN* 2011

Elizabeth Buschmann, LPN
Oregon 2008

Kathleen O'Dell, RN, M.Ed., N.C.S.N
Greenville 2008

Janet L. Boeckman, RN, MSN, CPNP
Mansfield 2009

Patricia Burns, LPN
Mentor 2009

Kathleen Driscoll, JD, MS, RN
West Chester 2009

Anne Barnett, BSN, RNC, CWS
Junction City 2010

Eric I. Yoon, MSN, ACNP, CCNS
Springboro 2010



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Columbus Area:

Bethel Centre

1486 Bethel Road
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& Sat. (9:00 a.m.-12:00 p.m.)

Westerville

4140 Executive Parkway
Westerville, OH 43081

Delaware BMV

8625 Columbus Pike
Lewis Center, OH 43035

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Tues. and Wed. (8:00 a.m.-6:30 p.m.)
& Sat. (8:00 a.m.-12:00 p.m.)

Dayton & Cincinnati Area:

Fairborn

1810 Successful Drive
Fairborn, OH 45324

West Chester

7600 Tyler's Place Blvd
West Chester, OH 45069

Mason

4605 Duke Drive, Suite 115
Mason, OH 45040

Toledo Area:

6135 Trust Drive, Suite 110
Holland, OH 43528



Cleveland & Northern Ohio Area:

Mentor

7350 Industrial Park Blvd.
Mentor, OH 44060

Independence

4100 Rockside Road, 2nd floor
Independence, OH 44131

Akron

1505 Corporate Woods Parkway, Suite 100
Uniontown, OH 44685

Youngstown : Atway & Cochran, LLC

19 East Front St
Youngstown, OH 44503

Hours: M-F, (9:00 a.m.-12:00 p.m.
and 1:00 p.m.-4:00 p.m.)

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Q & A

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FAQ

QUESTION: *I am a nurse practitioner who is certified through American Nurses Credentialing Center (ANCC). I received notification from ANCC that they are changing their credentials. What initials am I supposed to use?*

ANSWER: Section 4723.03 (C), Ohio Revised Code (ORC), and Rule 4723-8-03, Ohio Administrative Code, set forth the specific license and certification titles that advanced practice nurses must use. These include CRNA, CNP, CNS, CNW, or APN. However, the Nurse Practice Act and administrative rules do not address academic credentials or those approved by national certifying organizations. An advanced practice nurse is not prohibited from utilizing their appropriate certifying organization's approved titles and/or academic titles following those recognized in the Nurse Practice Act.

QUESTION: *I am certified as a family nurse practitioner. Can my collaborating physician be a pediatrician?*



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3700 Kolbe Rd., Lorain, OH 44053
Fax: 440-960-4629



EOE

ANSWER: A collaborating physician or podiatrist must be licensed and engaged in clinical practice in the state of Ohio and practicing in a specialty that is the same as or similar to the nurse's nursing specialty in accordance with Section 4723.431, ORC. For example, it would not be appropriate for a pediatrician to be a collaborating physician for an adult nurse practitioner; however, a pediatrician could be a collaborating physician for family nurse practitioner if they are practicing in a same or similar specialty.



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CERTIFIED MED AIDE PILOT PROGRAM UPDATE

An amendment to the budget bill extended the Medication Aide Pilot Program. There is no definite date specified for the Pilot Program to end since the ending date depends on the certification date of the seventy-fifth medication aide. Once the seventy-fifth medication aide is certified, the “clock” begins (see the timeline below). The Board will calculate the ending date of the Pilot, based on the timeline, and the end date will be posted on the Board’s Web site to provide notification to all facilities across the state. Throughout the Pilot Program, the Board may continue to receive applications from facilities seeking approval to participate in the Pilot. Should the Board deny an application, the Board is required to notify the leadership of the General Assembly of the denial and the reasons for the denial.

TIMELINE FOR EXTENSION OF MEDICATION AIDE PILOT PROGRAM:

When the 75th Medication Aide is certified, the “clock” starts:

- 91 days after the 75th medication aide is certified, the Board will request data from each Pilot Program facility including, but not limited to, costs and other financial matters pertaining to the use of medication aides, a summary of the facility’s experience in utilizing medication aides, and the facility’s perception of the quality and nature of the training of the medication aides. This report is due to the Board 31 days after the request is made.
- 181 days after the 75th Medication aide is certified, the Board is required to submit a report of its findings and recommendations (based upon its evaluation of the Pilot Program reports) to the governor, president and minority leader of the Senate, speaker and minority leader of the House of Representatives, and the Ohio Director of Health. The Pilot Program ends 31 days after the Board submits its report.

Due to the extension of the Pilot Program, Board staff have worked with individuals who held a Pilot Program Medication Aide certificate to extend and re-issue certificates that reflect the Pilot Program extension. As of June 13, 2008, the Board has issued 71 Medication Aide certificates.

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You may also fax your cover letter, resume, and salary requirements to 330/996 8746.

LICENSE VERIFICATION

Verification of a nursing license is available through the Board of Nursing (Board) website. The name, license number and license expiration date is public information and may be viewed by anyone. The Board strongly recommends that all employers use this website as verification of current licensure for nursing employees. Employers should not rely on the wallet card, which is sent to the nurse with the issuance of a license. Please note that when calling the Board office with questions about your license or certificate that Board staff generally will not use social security numbers as primary means to verify licensure or certificate information. You should have your license or certificate number readily available. •

LPN RENEWAL

LPNs have until August 31, 2008, to renew their license. The licenses of those individuals who do not renew are categorized as lapsed, and the individual is prohibited from practicing nursing. A lapsed license is one that “expires” without any communication from the licensee. The fee to reinstate

...notify the Board in writing that you are requesting that your license be placed on “inactive” status.

a lapsed license for LPNs is \$165. The Board recommends that a licensee not allow their license to lapse. If you do not intend to practice nursing in Ohio, temporarily or permanently, notify the Board in writing that you are requesting that your license be placed on “inactive” status, or check the box on the paper renewal application that requests “inactive” status.

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.*



HELLO
my name is
Tom

(NURSE)
(DAD)
(HANDYMAN)
(INVESTOR)
(COACH)
(LANDSCAPER)
(CHAUFFEUR)
(BANKER)
(HUSBAND)
(REPAIRMAN)
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DUPLICATE LICENSES

Duplicate 2007-2009

RN Licenses

RN 156948 Joanne Acocks
 201240 Kimberly Agler
 156624 Marianna Alacchi
 311902 Darlene Allen
 229939 Marguerite Allen
 153768 Violet Bailey
 326199 Joseph Barrett
 234141 Donna Beller
 301982 Andrea Benroth
 219225 Maryann Bernstein
 85378 Mary Black
 186176 Mary Bolen
 231470 Robbie Brandon
 152454 Susan Brown
 308304 Yvette Brown-Mann
 102283 Dorothy Brystrom
 232392 Gayle Burgess
 328692 Maureen Caro
 330624 Rachel Cauvin
 304148 Rachel Clift
 330767 Nancy Clough
 298908 Melissa Conkle
 287523 Melissa Cowser
 247961 Thomas Cross
 298235 Debra Curley
 289185 Gene DeChristofaro
 223540 Tina Deeter
 321922 Rhonda DeLeon
 119388 Marilyn Dillon
 219365 Denise Donatelli
 267009 Patricia Dupler
 314561 Beatrice Florant
 293089 Denise Fobell
 302284 Brian Foster
 186663 Victoria Froman-Berry
 118121 Susan Furman
 339407 Gary Gault
 91537 Tamar Gibson
 233495 Kelly Gohlke

166402 Darla Grindley
 268087 Paula Hacker
 250284 Jeff Hamm
 245703 Suzanne Hamrick
 274898 Eric Hanselman
 265073 Maryann Hayden
 295004 Carrie Hayes
 58846 Margaret Herrin
 254078 April Hines
 107841 Beverly Hodge
 227482 Susan Hodgson
 281896 Taya Hyde
 288271 Jane James
 217350 Deidre Jones
 277914 Kelli Kaltenbach
 320052 Molly Kern
 340090 Benjamin Kibler
 329619 Rebecka Knotts
 285542 Tiffany Krauss
 340321 Sabrina Leep
 281259 Jeffrey Lewis
 277188 Deborah Massie
 338905 Olga Mateshko
 111986 Katrene McDowell
 221502 Ellen McIntyre
 207242 Catherine McMakin
 259553 Linda Middaugh
 199539 Sherri Miller
 272128 Julia Parks
 245355 Janice Place
 259853 Laura Ponstingle
 307768 Stephanie Popovich
 215703 Natalie Poschner
 121650 Judith Pressler
 152794 Dawna Quinn
 336213 Shannon Raina
 222317 Denise Reffitt
 230078 Charles Riggs
 168664 Pearl Russell
 178063 Regina Saus
 283606 Janet Schultz

245819 Linda Sherfield
 323563 Laura Sinex
 127289 Margaret Sivakoff
 135306 Linda Smith
 277400 Kelly Smith-Strauss
 329303 Deborah Sonagere
 172765 Randy Spurlock
 327790 Lauren Tam
 211470 Loretta Taylor
 164084 Pamela Thurman
 146693 Darlene Vrotsos
 307480 Jennifer Waller
 312774 Sara Walters
 256346 Deborah Watson
 261202 Jill Winger
 236514 Leslie Witkoff
 102951 Janet Young

Duplicate 2006-2008

LPN Licenses

PN 099511 Laura Bodrogi
 122042 Marjorie Bolin
 115363 Holly Campbell
 057970 Jennifer DiMattio
 105514 Erica Fuqua
 114331 Shudonica Garlington
 118439 Tammy Gear
 120213 Vanetta Hall
 094289 Lucy Hogan
 115186 Shadel Lamb
 107679 Allison Martin
 123576 Erin Peck
 38386 Bernice Redmond
 109548 David Schenk
 94857 Susan Smart
 125633 Rebecca Spalding
 90482 David Bartholomew

Current as of 6/08

WHAT IS A DUPLICATE LICENSE?

A duplicate license is issued to replace a lost, destroyed, or stolen license.

To receive a duplicate license, complete the form *Affidavit of Lost Document*, and submit a \$25.00 replacement fee. The Board will issue a license with the designation "Replacement"

stamped across the top of the license. Once a duplicate is issued, the original wallet copy should not be used.

Each issue of Momentum lists those licenses for which a duplicate is issued during the months immediately preceding publication. •

PAYMENT FAILURES



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. Even though a renewed license may have been received in the mail, failure of a payment to clear the bank will cause an application to become incomplete. The purpose of publishing this list is to notify current and potential employers and to reach the individual when other avenues have failed.

Each person listed here has been notified by certified mail, using the last known address of record, and given 30 days (or more) to render proper payment to the Board. These applications, certificates, or licenses will not be considered complete until proper payment has been rendered. If payment is not received within 30 days after notice is provided, licensee information is turned over to the Compliance Unit and recommended for investigation. Individuals found to be working on a lapsed license may be subject to discipline.

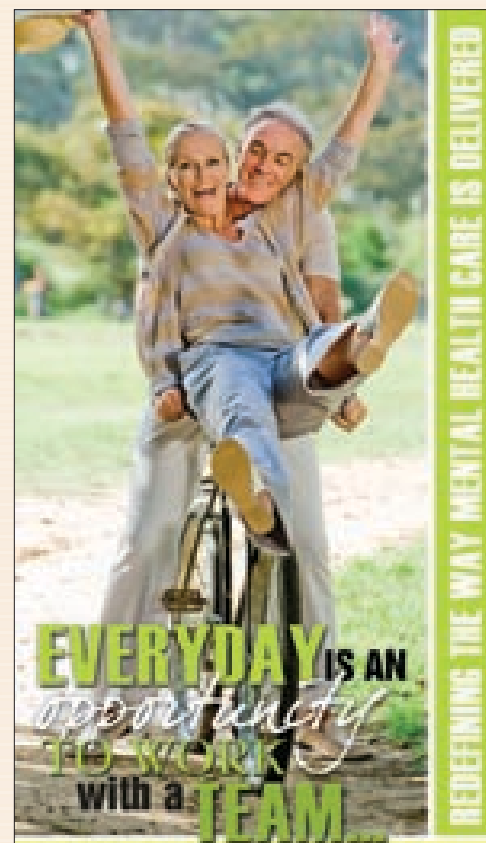
Below is a list of those nurses and dialysis technicians whose renewal applications, certificates, or duplicate licenses are incomplete due to payment failure related to insufficient funds. The licensee and certificate holders listed below failed to render payment by the date this publication went to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

BAD CHECK LIST

DT 01459	Lisa Miljour
PN 080412	Vera Bazemore
115970	Connie Burgess
109961	Sandra Carter
103692	Brenda Coburn
089104	Mary Darnell
107371	Patricia Edington-Wallace
077423	Barbara Freeman
114331	Shudonica Garlington
109407	Jamie George
066195	Teresa Gilmore
105124	Lisa Groves
113761	Colleen Hammonds
102088	Mildred Highlander
089727	Janice Jenkins-Williams
026851	Eugenia Lauinger
110478	Yvonna Meadows
113609	Miranda Pastol
095293	Susan Runion
094771	Kimberlee Sheller
109807	Stacey Townsend
040780	Jean Wehrle
099429	Paige Wilson
068305	Jeanease Zimmerman
RN 179628	Cheryl Balogh
196050	Beverly Chambers

169966	Susan Chapman
234395	Robert Clarke
284031	Deborah Conner
081572	Mary Hartmann
219322	Micheal Hipshire
278461	Yvonne Hoberek
320012	Vanessa Huff
254146	Ann Jarven
099852	Jane McCutcheon
256289	Linda McDaniel
169684	Bernadette Queener
303514	Jeanne Ryznar
323272	Jennifer Sheets
288354	Shelia Smith
292985	Therese Spalding
229036	Dundee Sweetland
300574	Jacque Young

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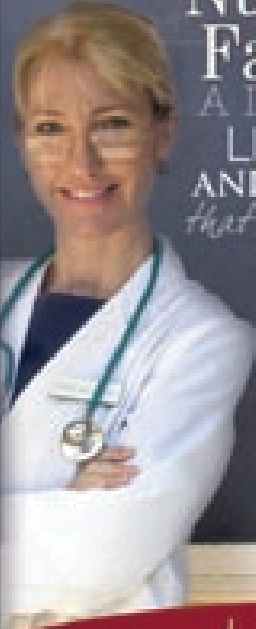
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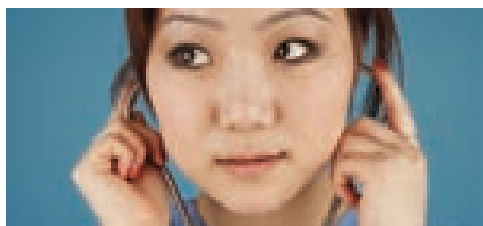
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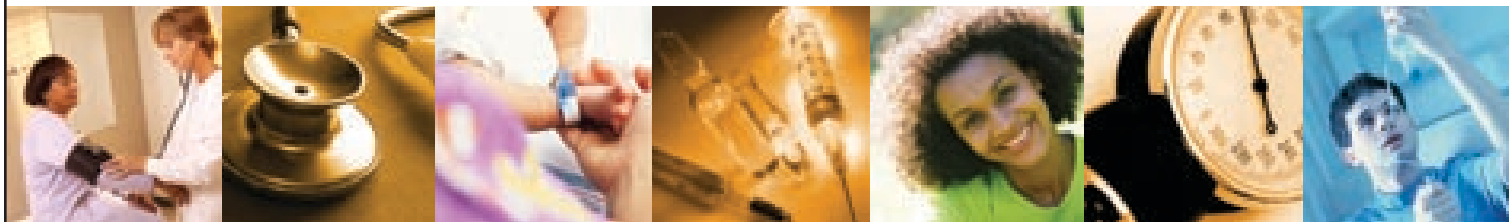


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