



**Janet Napolitano**  
Governor

**Joey Ridenour**  
Executive Director

## Arizona State Board of Nursing

### ANNUAL REFRESHER COURSE PROVIDER MEETING MINUTES October 27, 2005

#### ATTENDEES:

Ilene Borze, GateWay Community College  
Regina Cottrell, SEVEN Healthcare Academy  
Penny Fairman, Northland Pioneer College  
Georgette Howard, Glendale Community College  
Emelia Lewis, Pima Community College CTD  
Linda Riesdorff, Mohave Community College (telephonically)  
Dede Schmallen, John C. Lincoln  
Mark Stalzer, Glendale Community College  
James Wright, GateWay Community College

#### BOARD STAFF PRESENT:

Judy Bontrager, RN, MSN, Associate Director  
Pamela K. Randolph, RN, MSN, CPNP, Nurse Education Consultant

#### I. Call to Order – Introductions

Randolph called the meeting to order at 9:30 a.m.  
A list of agencies willing to accept refresher course students for clinical placement was distributed to attendees for their information and review.

#### II. Review of Current Refresher Course Rules

Randolph reviewed the refresher course rules as they appear in the Nurse Practice Act and requested input from refresher course educators present as to whether the current rules are achieving their purpose.

Attendees supported the refresher course rules and made no suggestions for revisions. Discussion points are included below:

- Borze offered that while GateWay Community College clinical hours are 180 rather than the required 160, students state that it is still not enough.

- Riesdorff maintained that student evaluations remain positive with regard to the 160 hour clinical requirement.
- Attendees agreed that there is a great deal of diversity in the types of students and reasons for the need of re-entry courses. Many students leave nursing because of life/life-style changes (starting families, etc.). Success varies, however it appears that students who have been away from nursing for an extended period of time and did not have a significant period of practice tend to become discouraged during didactic instruction and quit.
- All courses represented reported that they are doing some clinical instruction in laboratory settings.
- All programs stated that allowing a refresher program to adapt the clinical experiences to non-direct patient care settings has been very beneficial for both the program and students.

### III. Clinical Placements for Refresher Course Students

Randolph shared that the Board has received numerous requests from the students to assist in obtaining clinical placements. Attendees reported success in placing students in agencies where they have existing contracts. Hospitals in rural areas have readily accepted refresher course students for clinical experiences.

Randolph requested that programs submit a list of agencies that programs have utilized in the past for clinical placement and that programs not instruct students to call the Board for clinical placements. Program representatives agreed to both requests and will provide information to Randolph so that a statewide master list of potential clinical placements for refresher course students may be prepared and distributed.

#### Feedback from Preceptors

Overall, refresher programs have received positive evaluations from preceptors. Most evaluations are dependent upon student performance.

#### Attrition

Schmallen reported that John C. Lincoln has experienced a greater than 50% attrition rate after hire. Recorded reasons have included health issues, career advancement, and unsatisfactory performance. JCL is examining the data to determine success rates and predictors.

Wright offered that GateWay has experienced a 10% attrition rate. Informal data indicates that retention is good when facilities can offer flexibility in scheduling.

Fairman (Northland Pioneer College) stated that student success in her program is influenced by a series of factors that include cultural traditions, lack of transportation, living conditions and domestic violence.

#### IV. Licensure Issues

Bontrager reviewed Licensing Department policies regarding temporary licenses for refresher programs. In order for an applicant to receive a temporary license for participation in a refresher course, the applicant must show proof or confirmation that they are enrolled in an approved refresher course. Some programs require proof of license before enrollment, placing the student in an impossible situation. Bontrager recommended that programs provide a written statement to potential students stating that while they may enroll in the program and take didactic instruction, they must have a license to participate in the clinical portion of the program. Attendees agreed to implement this recommendation.

This provision will then allow a student who did not take and pass NCLEX within 2 years of graduation to take the didactic portion of the refresher program as preparation for NCLEX. After passing NCLEX and receiving a temporary refresher course license, the student may then complete clinical portion of the program.

Attendees were notified that the renewal process does not require fingerprint clearance. Individual programs may elect to have enrollees submit fingerprint clearance cards.

#### V. Other Concerns

Bontrager provided a list of compact states and addresses for verification. Lewis distributed an article on nurses re-entering the workforce.

Attendees were reminded that if a nurse holds a compact license they must renew in their home state or obtain an Arizona license. Nurses holding compact licenses are required to follow Arizona rules and are responsible for the contents of the Nurse Practice Act.

#### VI. There being further business the meeting was adjourned at 10:37 a.m.

#### **MINUTES SUBMITTED/APPROVED BY:**

\_\_\_\_\_ Signature

