



**Janice K. Brewer**  
Governor

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Executive Director

## Arizona State Board of Nursing

### REFRESHER COURSES ANNUAL MEETING MINUTES April 19, 2011

AGENDA ITEM	TOPIC	DISCUSSION	ACTION	FOLLOW-UP
1	Call to Order	The meeting was called to order by Pamela Randolph at 11:00 a.m.		
	Introduction and Welcome	Randolph welcomed everyone. Participants and Board staff introduced themselves.		
2	Reports/Discussion Refresher Program Issues			
A	Refresher Course Data	Randolph presented the 2010 Annual Course Survey describing data provided by refresher program directors. The number of students enrolled and graduated in RN Refresher programs decreased by 21-22% from 2009 to 2010. Randolph attributed the reduction in enrollment to the 5-year time lapse since the Board instituted the 960-hour practice requirement for licensure renewal. Nurses may be planning their careers around the requirement currently. Members felt nurses might be becoming more discouraged with the job market and perhaps letting their license lapse. When nurses complete online applications, if their experience isn't current, they are not considered eligible for hire.		

**AGENDA ITEM VII.E.2.a.**

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B	Program Innovations/	<p>Pima Community College has added a transition course with short online components addressing delegation and case management and providing a more intensive clinical preceptorship. The hope is students will be better able to obtain employment if they complete 240 clinical hours. If they are hired, they pass the course. We know nurses are needed but refresher nurses experience more difficulty getting hired. The course is still in the process of acquiring college approval.</p> <p>SEVEN Healthcare Academy is offering a 7-week didactic preparation for students who have not passed the NCLEX to retest. Thus far, only one student has not passed until a 2<sup>nd</sup> attempt. Student using review books are surprised with alternative items. The Academy has readily located preceptorships, which makes placements easier. Once placed in clinical experiences, 70-80% are hired, while others are asked if they are interested in pool positions.</p> <p>Innovative Academic Solutions opened early last year requiring 120 hours of didactic and 120 hours of clinical. The theory portion is a self-paced, self-study online which the students love. The course has recently been separated so student can take just the theory portion to work toward passing the NCLEX.</p>		

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	Program Challenges	<p>Mohave Community College’s biggest challenge continues to be finding clinical placements. Quite a few students who were licensed, cannot acquire a license in another state until they are licensed in AZ. The only option these nurses have is the Veterans Administration system. Randolph indicated attempts to work with other board officials have not always been successful.</p> <p>Northland Pioneer College indicated piloted a hybrid method of instructional delivery, with an online component and found older students lacked computer skills. Randolph indicated students need to be expected to function and demonstrate required computer skills as this is a requirement in clinical practice. The 2011 IOM Future of Nursing report indicates Health Information Technology has fundamentally changed how nurses plan and deliver care.</p> <p>State budget cuts required Gateway to improve efficiencies and the program identified solutions. The program has observed foreign nurses experiencing difficulty adapting to cultural differences and adjusting to hospital settings – perhaps another setting would allow an easier transition. Another program observed foreign nurses voluntarily taking the refresher program to become comfortable in different healthcare delivery settings.</p> <p>Innovative Academic Solutions experienced difficulty acquiring clinical placements – the facilities consider the student an independent</p>	Regina Cottrell at SEVEN Healthcare Academy offered to share her clinical	

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		contractor. Cottrell recommended setting up clinical agreements with facilities.	agreement with Angele Bennett.	
	Program Successes	<p>Mesa Community College acquired funds for equipment to support pediatrics, obstetrics and specialty areas in preparation for preceptorships. The program is part of a pilot for placement in urgent OB, outpatient oncology, and pediatric homecare. Students' performance during this experience can result job offers.</p> <p>Gateway indicated the development of computer skills has improved by incorporating an evidence-based practice assignment with electronic searches and student interface with databases and the learning management system. The program has also added more simulation for competency checks which student enjoyed. The program has incorporated National Patient Safety Goals and core measures of competency.</p>		
3	Board Update			
	Article on Board Ordered Refreshers	<p>Randolph thanked everyone for supplying the data to support analysis of success rates of board-ordered refresher candidates. She explained the information provided last year from program directors was summarized in a paper published in the <a href="#">Journal of Nursing Regulation</a>. The analysis found nurses with substance abuse issues were more successful than nurses with practices issues. Support systems available to nurses with substance abuse issues are not available to nurses with</p>		

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		practice issues, who may lack diligence, have faulty habits and take short cuts.		
4	Clinical Placements and Preceptorships for Refresher Students	<p>Werth described ways in which students enter the consortium system of clinical assignment:</p> <ol style="list-style-type: none"> <li>1) Routine clinical coordination process working with refresher programs.</li> <li>2) Werth sometimes is able to place a student individually for a 1:1 experience but this is a difficult task. Participants discussed the importance of the preceptorships as a “160 hour job interview”.</li> </ol> <p>Werth explained the importance of working through the consortium to avoid “phantom booking” which creates unused clinical slots. The clinical site wants to know students will or will not be attending when placements have been arranged.</p> <p>Brown explained how Pima created a file with agencies, addresses, websites, type of agency, contact person with phone. Students shadow at different places and may be able to obtain a clinical placement by creating relationships during the experience. Students have found placements in pre-procedural care, urgent care, wound care, case management, and home health. Students are proactive and learn presentation and professional development skills. They create their own opportunity. Shadowing also reassures and reaffirms their professional capability, allowing them to gradually become reacquainted with the clinical environment and gaining early confidence in the reentry process.</p>		

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		<p>Werth explained current problems with multiple criminal background checks required by the board for licensure, by the educational institution, and by the institutional providers. Checks for students had not been as restrictive as employment background checks. EEOC complaints uncovered inequities, thus healthcare facilities are requiring identical checks for the students and employees. A subcommittee is trying to devise a formula to better screen students before they come into the Maricopa programs so they will have a higher confidence of being accepted by clinical agencies. Some facilities have a lifetime bar on felonies while others have a 5 or 7 year bar. Some facilities have a lifetime ban on arson and kidnapping. The facilities have uncovered previously unknown sexual assaults reduced to misdemeanors, hit and run, kidnapping, and persons with 7 or 8 arrests. There are two levels of clearance and exclusions even at the higher level are not absolute or acceptable to agencies. The MaricopaNursing system is looking at meeting the needs of currently enrolled, those on the waiting list, and others in the process of applying. Werth thought the solution might be a DPS card and a private background check. Ultimately it would be ideal if there were uniformity among all facilities, but there is no chance of that with federal institutions. Werth indicated programs need to identify barrier offenses. Some contracts require faculty be checked as well.</p>		

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		<p>Different screening for CNA vs RN student. Should we have different requirements for screening for employees who are doing intimate care? Randolph explained there is no regulatory control over agencies which are free to change their requirements.</p> <p>Even if a record has been expunged, students need to disclose those circumstances.</p>		
5	Licensure Issues/Notification of Course Completion	<p>A handout about how to obtain a temporary license for refresher courses was provided to participants prior to the meeting. Bontrager provided an overview of changes in the process. She introduced Donna Frye who will be handling the renewals and Paula Delphy who may be helping out. A formal letter attached to an email is sufficient Board notice of refresher completion.</p> <p>Kutzler offered to share an algorithm for licensure with links to the application process and requirements.</p>	Randolph will send the algorithm out to all participants.	Algorithm sent.
6	Other Issues	<p>A student failed and then wanted to be admitted to another school. Is there a way to track these students? Can you tell people about former students? Randolph indicated you can call up for information that the student has had a license previously.</p> <p>Williams generated a discussion about refresher clinical core competencies and physical capacity. An elderly person had come through the program with impaired motor skills. The discussion included direct observation of skills and use of checklists;</p>		

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		<p>asking the student to disclose disabilities; considering the area in which the student prefers to practice; and preparing students for indirect care.</p> <p>Williams' concern was that students may say they are simply going to be a school nurse and then find themselves in another clinical area. Randolph reported students are refreshing to acquire positions in education, quality improvement, case management, administration, etc. It is up to the employer to verify past experience and current skills. Most professional nurses will not place themselves in an unsafe situation or jeopardize their licensure.</p>		
7	Adjournment		Meeting adjourned at 11:38am	

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**April 19, 2011 Refresher Courses Annual Meeting Attendance**

<b>Members Present</b>	<b>Members Absent</b>	<b>Board Staff</b>	<b>Guests</b>
<p>Angele Bennet Innovations (telephonically)            Karen Brown, Pima Community College            Ilene Borze, Gateway Community College            Regina Cottrell, Seven Healthcare Academy            Diane Dietz, Mesa Community College            Betty Heying-Stanley, Gateway Community College            Diane Hutquist, Pima Community College            David Kutzler, Pima Community College            Linda Riesdorff, Mohave Community College            Terri Roske, Pima Community College            Penny Weiermann, Northland Pioneer College            Jane Werth Maricopa Community Colleges            (telephonically)            Nancy Williams, Northland Pioneer College</p>		<p>Pamela Randolph,            Associate Director, Education and Evidence-            Based Regulation</p> <p>Judy Bontrager, Associate Director, Operations            &amp; Licensing</p> <p>Debra McGinty, Education Program            Administrator</p>	