

ARIZONA

STATE BOARD OF NURSING

NEWSLETTER

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From the Executive Director

by Joey Ridenour, RN MN

Special Column on Faculty Recruitment

As many of you are aware, the nursing programs in Arizona have responded to the nursing shortage by expanding their student enrollments. Unfortunately the plans will not be realized until faculties are recruited for the vacant positions. To assist in addressing the nursing shortage and subsequent risk to the public, the Arizona Board of Nursing will continue running a special column in each Newsletter for nursing programs to list their faculty needs.

Pima Community College is seeking an applicant for Instructional Faculty in Nursing. Primary duties are to teach courses in Nursing with an emphasis in Adult Medical/Surgical nursing to a diverse student population. Please visit our website at www.pima.edu to read more about the college and these positions. The application can be downloaded as a PDF file from www.humres@pimacc.pima.edu.

Maricopa Community College District Nursing Program is seeking full time and part time nursing faculty and clinical instructors for the following areas: Adult Medical/Surgical, Pediatrics, Psychiatric/Mental Health and Maternal Child Health nursing. Year-round, day, evening, weekend, bilingual

and online didactic positions are available. Applications may be submitted for full time positions online: www.dist.maricopa.edu/hrweb/faculty.html or for adjunct faculty and clinical positions online: www.dist.maricopa.edu/hrweb/adjunct.html

Arizona Western College, Yuma, Az, is seeking applicants for a full-time Nursing/Computer Lab Coordinator. Bachelor's degree in Nursing; valid Arizona license as a Registered Nurse; minimum 2 years of recent experience as a professional nurse providing direct patient care. Must have demonstrated ability to work in primary health care and clinical practice in performing nursing skills as per textbook reference guidelines, and the ability to manage human and physical resources to meet the needs of students and faculty of the Department of Nursing and Allied Health. Please contact AWC Human Resources at 928-344-7504 or visit our website, <http://www.azwestern.edu/hr/jobs.php?jobsID=68>.

Northern Arizona University, Flagstaff, AZ is seeking applicants for full time tenure track and clinical faculty positions as well as part time clinical positions to teach in the undergraduate and graduate programs in all specialty areas. Applicants with a Masters or Doctoral degree preferred, especially with CNS preparation and/or experience. We are also seeking a 50% time Coordinator of the Learning Laboratory on the Flagstaff campus that could be combined with a 50% time clinical faculty position. Our pre-licensure BSN, RN/BSN, and graduate program tracks are expanding in numbers of students, sites, and numbers of offerings. Therefore, we welcome applicants from areas outside Flagstaff. Please visit the Northern Arizona University nursing web site (www.nau.edu/hp/dept/nurse) for complete information about positions, qualifications, and application instructions or contact Dr. Margaret Conger 928-523-6710.

Northland Pioneer College is seeking applicants for a faculty position to teach theory in third and fourth semesters in an integrated curriculum and provide clinical supervision of students in regional health care facilities. Masters degree in Nursing Required. Eligible for Registered Nurse license in AZ. Experience in Medical/Surgical, Maternal/Child and Psychiatric nursing. Two to three years of teaching experience in nursing education and curriculum development preferred. Forward cover letter, resume, copies of transcripts, and five current professional references with addresses and phone numbers to: Attention: Personnel Department, Northland Pioneer College, P.O. Box 610, Holbrook, AZ 86025-0610

Eastern Arizona College, Thatcher, Az, is seeking applicants for a full-time Clinical Nursing Instructor. Bachelor's degree in Nursing; valid Arizona license as a Registered Nurse; minimum 2 years of recent experience as a professional nurse providing direct patient care. This position involves teaching clinical in Safford, Globe, Tucson and Mesa. Applicant must demonstrate ability to teach nursing skills as per textbook reference guidelines and the ability to manage human and physical resources to meet the needs of students and faculty of the Department of Nursing. Please contact EAC Human Resources at 928-428-8915 or visit our website, http://www.eac.edu/Working_at_EAC/detail.asp?ID=115

Central Arizona College seeks a full-time Professor of Nursing. The successful candidate will have a Master's degree in Nursing and Arizona RN license or ability to obtain one. Please visit the web site at www.centralaz.edu to read more about the college and to obtain application instructions. Central Arizona College is also seeking adjunct clinical nursing faculty to teach in the Associate Degree Nursing Program. Applicants must have a minimum of a Bachelor of Science degree in Nursing (BSN); Master's degree in Nursing preferred; valid Arizona license as a Registered Nurse; minimum 3 years of recent experience as a professional nurse providing direct patient care; previous teaching experience preferred. Please visit the website at www.centralaz.edu to read more about the college and to obtain application instructions.

From the President

By Alice Gagnaire RN MHSA

In August 2004 I had the privilege of representing the Arizona State Board of Nursing at the National Council of State Boards of Nursing (NCSBN) Annual Meeting in Kansas City, Mo. I joined Joey Ridenour, Executive Director of the Board of Nursing, as the second delegate from Arizona.

Most nurses know that each state has a board of nursing that helps define the practice of nursing and oversee the nursing profession on an individual state level. But what about at the national level? How do boards of nursing from different states work together to identify and solve issues or address opportunities in nursing regulation? How do we ensure that nurses from across the country are meeting the same standards for licensing? That's where the NCSBN steps in.

Every year, delegates from 60 states and U.S. territories attend the NCSBN annual meeting and help conduct the council's business. I was very impressed with the professionalism of this dedicated group. I found them to be very forward thinking, and proactive in helping advance nursing regulation.

One of the primary tasks of the NCSBN is to oversee the national licensure exam for nurses (NCLEX). This is a highly sophisticated testing mechanism that ensures graduates entering the nursing profession have the same knowledge and skill to safely practice nursing across the country. (On a side note: Congratulations to all Arizona's nursing schools and new nursing graduates. Arizona had the second highest pass rate on the NCLEX-RN in the country during the second quarter of 2004. Our pass rate was 93.61 percent, second only to the Northern Mariana Islands where one student took the test and passed.)

Some of the issues we addressed during this year's annual meeting of the NCSBN included:

- Reducing the barriers to nurses who want to move to a new state through the Nurse Licensure Compact and Model Nursing Practice Act and Model Administrative Rules.
- Standardizing how states can evaluate if nurses trained outside the United States meet the educational qualifications to work in the U.S.
- Discussing administration of the NCLEX in three foreign countries within the next six months and potentially offering the test in other languages. Delegates also directed the Examination Committee to research this possibility.

Another highlight of the week was the award presented to Joey Ridenour. The Board and staff were instrumental in Joey being selected for the most prestigious award given to a member of National Council, the R. Louise McManus Award. Over the past 25 or so years only 8 individuals have been chosen for this award out of a potential pool of over 900 Board/ Staff Members within the 60 Boards of Nursing.

This is just an example of the important work being done by the NCSBN. I was proud to represent Arizona and excited about the role I was able to play on behalf of all of Arizona's nurses in advancing nursing regulation.

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Arizona State Board of Nursing Competency Model

INTRODUCTION

Background

The mission of the Arizona State Board of Nursing is to protect the public health, safety and welfare through the safe and competent practice of nurses and nursing assistants. The Board relies on Advisory Committees composed of practicing nurses to guide them on matters relating to scope of practice, chemical dependency, education, law and rules, and nursing assistants.

The Education Advisory Committee is the entity that advises the Board on matters relating to education. The committee is composed of educators and nurses from a variety of programs and geographic regions. In 2003, the Education Advisory Committee became aware of confusion among nurses and the public regarding the competencies of nurses at differing educational levels. The multiple pathways to RN licensure at either an associate, baccalaureate, or in some cases diploma levels add to the confusion of the public, nurses, and prospective nursing students. Additionally, confusion exists regarding the competencies of a nurse with a master's degree in nursing as compared to a nurse with a master's degree in another field.

This document was developed to clarify nursing roles for the public, nurses, and prospective nursing students regarding nursing ability and function at the differing levels of nursing education.

To facilitate the work of the committee a subcommittee was formed to develop a draft document. The mission of the subcommittee was to develop a document that:

- *Delineates competencies for levels of nursing education from nursing assistant through doctoral level*
- *Focuses on outcomes and builds on previous competencies*
- *Is easily accessible to the public*
- *Is consistent with recognized models of nursing education*
- *Decreases confusion on the part of nurses, prospective nursing students and the public*
- *Is consistent with the administrative rules and statutes of the Arizona State Board of Nursing*
- *Demonstrates the inherent worth and value of all educational levels of nursing*

The subcommittee reviewed the language and structure of competency models developed by the Kentucky Nursing Education Mobility Task Force (2001), the Oklahoma Board of Nursing, and other related publications to guide the development of this model (see references). The subcommittee adapted the framework developed by the Kentucky Nursing Education Mobility Task Force to delineate nursing practice and education in Arizona.

Levels of Education

The Arizona State Board of Nursing regulates certified nursing assistants, licensed practical nurses, registered nurses, and advanced practice nurses. The Board also has jurisdiction over nursing assistant programs, pre-licensure nursing programs, and advanced practice nursing programs. Six levels of education are addressed in the competency model. Since there are no diploma-nursing programs in Arizona, this level of education was not addressed. The subcommittee

recognized the importance of including the doctoral level in order to inform the public of expectations of nursing care at that level. The levels of education and descriptions of these levels in Arizona are:

- **Nursing Assistant:** A nursing assistant has a minimum of 120 hours of education focused on meeting basic needs of long-term care residents.
- **Licensed Practical Nurse:** A licensed practical nurse generally completes a vocationally oriented program of 6 to 12 months in length at a community college, skill center, or private vocational college.
- **Associate Degree RN:** An associate degree RN completes a two-year nursing program at a community or private college. The program may be preceded by 2-3 semesters of prerequisite courses.
- **Bachelors of Science Degree RN:** A bachelor of science in nursing RN completes a 4-year degree at a university. The first 3-4 semesters of the program consist of prerequisites and general education courses.
- **Master of Science in Nursing:** A master of science in nursing degree consists of 3-5 semesters of full time study including a research thesis or project. There are several tracks available to students such as advanced practice, teaching, or administration.
- **Doctoral Level (Ph.D, DNSc):** A doctoral degree in nursing involves a minimum of 4 semesters of additional study and the completion of an extensive original research project (dissertation).

Conceptual Framework

The model describes attributes of nurses and nursing assistants from the CNA level through the doctoral level based on educational preparation. The framework is organized into three roles of nursing:

- **Provider of care:** "the nurse uses a systematic process and appropriate resources to assist clients in meeting health needs in an evolving health system." (Kentucky, 2001, p. 13)
 - **Manager of care:** "the nurse assures that the right care is given at the right time, in the right setting, and at the right cost to achieve desired outcomes," (Kentucky, 2001 p.14) and
 - **Member of the profession:** "the nurse is accountable for a practice reflecting the legal and professional standards governing nursing" (Kentucky, 2001, p. 15).
- Within each role, nursing functions include: caregiver, communicator, coordinator/collaborator, advocate, and teacher/counselor (Kentucky, 2001). These concepts are defined as follows:
- **Caregiver:** Provides care according to a nursing plan that promotes and maintains optimal health status.
 - **Communicator:** Engages in a complex, ongoing, interactive process, which leads to therapeutic and effective relationships with patients and others.
 - **Coordinator/Collaborator:** Manages resources and

interacts with others to achieve optimal client outcomes.

- **Advocate:** Directs actions so that client welfare prevails.
- **Teacher/Counselor:** Facilitates knowledge acquisition to effect behavioral changes that promote optimal health status.
- **Scholar:** Continually seeks and utilizes information to promote scientifically based nursing practice.

Uses

The competency model described in this document will serve to guide nurses, prospective nursing students, and the public in distinguishing the functions and abilities of nurses and nursing assistants by educational level. The model demonstrates that all levels of nursing practice/education contribute to the overall health and well being of individuals, families, and groups within the context of safe competent nursing care. This model is not intended to define the legal scope of practice for any level of nursing. As nursing practice evolves, the model will be updated to encompass the increasing complexity of nursing knowledge and changes in health care delivery systems.

Introduction by Pamela K. Randolph RN, MS, CPNP

Subcommittee Members:

Subcommittee members include:

- Joyceen Boyle RN, Ph.D., Associate Dean University of Arizona;
- Teri Britt, RN, Ph.D, Mayo Hospital;
- Linda Riesdorph RN, MS, Director, Mohave Community College Nursing Program;
- Margie Schultz, RN, Ph.D., GateWay Community College Practical Nurse Educator,
- Noel Smith, RN, BSN, Scottsdale Community College Nurse Assistant Educator, and
- Pamela Randolph RN, MS, CPNP, Arizona State Board of Nursing Education Consultant.

References:

- American Nurses Association (1997). *Position statement: Education for participation in nursing research*. Retrieved December 31, 2003 from www.nursingworld.org/readroom/position/research/rse-duccat.htm.
- State of Arizona (2003). *Nurse Practice Act*. Retrieved on December 31, 2003 from <http://www.azboardofnursing.org>.
- Kentucky Nursing Education Mobility Task Force (2000). *Nursing Education in Kentucky*. Louisville, KY: Kentucky Mobility Task Force.
- Nurse Utilization Task Force (2001). *Goals for Nursing Practice and Education in Oklahoma*. Retrieved December 31, 2003 from <http://www.youroklahoma.com/nursing/ed-goals.htm>.

Competency Model cont. on pg. 4

*Competency Model cont. from pg. 3***Manager of Care**

INTEGRATED CONCEPTS	NURSING ASSISTANT	LICENSED PRACTICAL NURSE	ASSOCIATE DEGREE	BACHELORS DEGREE IN NURSING	MASTERS DEGREE IN NURSING	DOCTORAL LEVEL
Caregiver	Under the direction of the licensed nurse, follows directions according to the established plan of care.	Under the direction of the registered nurse, uses an established plan of care to meet basic health needs.	Develops and implements a plan of care using theory and evaluates patient outcomes.	Develops and implements a plan of care and evaluates patient outcomes using theory, evidence based practice and interdisciplinary resources.	Applies specialized knowledge and expertise to design, coordinate, implement, and evaluate comprehensive, integrated care.	Designs and evaluates systems of care.
Communicator	Reports and records data using appropriate health care terminology and demonstrates caring behavior.	Establishes and participates in therapeutic relationships.	Uses goal-directed therapeutic communication techniques effectively with individuals and families.	Uses goal directed therapeutic communication effectively with individuals, families, communities and special populations.	Implements complex communication strategies with individuals, families, communities and special populations.	Provides creative leadership to address political, social, and ethical issues in health care.
Coordinator/ Collaborator	Completes assignments in an organized manner while contributing to team functioning.	Organizes and manages care for assigned clients while working with families and health team members.	Works with the patient and health team members to establish priorities and manage care to achieve desired patient outcomes.	Facilitates interdisciplinary services to ensure desired outcomes in individual, families, communities, and special populations.	Establishes and evaluates professional networks for the purpose of improving outcomes for individuals, families, communities and special populations.	Collaborates with individuals, families, communities, special populations, health systems to communicate research and theoretical concepts that improve outcomes.
Advocate	Recognizes situations that may impact patient/family well being.	Identifies and actively addresses issues related to protection of patients.	Uses knowledge of consumer rights and responsibilities to plan care and intervene on behalf of patients. Is aware of health policy and its impact on patient care.	Uses problem solving strategies in support of patient rights and facilitates policy changes. Disseminates information about health policy and consumer rights and responsibilities.	Analyses data and engages in health policy development and evaluation at the institutional and community level.	Synthesizes knowledge in nursing and related fields to improve health care policies at the institutional, state, regional, national and global level.
Teacher/ Counselor	Reports client knowledge needs and provides basic instruction as directed.	Implements health teaching for clients with identified health needs using established teaching plans.	Develops implements, and evaluates teaching plans for individuals and families.	Uses interdisciplinary resources to develop implement and evaluate comprehensive teaching plans to meet the learning needs of individuals, groups and communities.	Uses advanced theoretical knowledge to design, coordinate, and evaluate comprehensive teaching programs for individuals, populations and systems.	Uses concepts, theories, and strategies from nursing and related disciplines to promote excellence in contemporary nursing education and clinical practice.
Scholar	Achieves and maintains knowledge and skills necessary to provide safe patientcare.	Participates in formal and informal education necessary to perform nursing care consistent with the LPN scope of practice.	Participates in the implementation of evidence-based programs/practice.	Critically appraises and uses research findings to implement evidence based practice.	Commits to the development and dissemination of knowledge for the purpose of improving nursing care.	Independently conducts and communicates research that advances nursing knowledge and scholarship to improve nursing care.

Provider of Care

INTEGRATED CONCEPTS	NURSING ASSISTANT	LICENSED PRACTICAL NURSE	ASSOCIATE DEGREE	BACHELORS DEGREE IN NURSING	MASTERS DEGREE IN NURSING	DOCTORAL LEVEL
Caregiver	Organizes care for assigned clients	Prioritizes care for own clients and delegates to unlicensed assistive personnel.	Manages client care delivery and delegates/ assigns care to peers, L.P.N.s and unlicensed assistive personnel. Coordinates human and material resources for clients and families.	Assumes an influential role in planning, organizing, and monitoring the effective use of resources within the health care setting.	Analyzes and influences system level strategies to optimize resources and promote positive client outcomes.	Designs and evaluates organizational strategies and their impact on individuals, families, communities, and special populations.
Communicator	Effectively interacts with other health care workers.	Participates in group process to promote the provision of nursing care.	Uses appropriate communication strategies to effect positive outcomes for individuals and groups.	Interacts with multi-disciplinary teams to manage the continuum of care for individuals, families, or groups.	Implements complex communication strategies to create, modify, evaluate, and enhance health care policy and systems.	Effectively disseminates and utilizes relevant research-based strategies to scientific communities, policy makers and the public.
Coordinator/ Collaborator	Demonstrates efficient use of time, equipment, and supplies in managing own assignment.	Participates with the health care team to plan and implement client care.	Participates in the development and revision of standards of care.	Participates in the multidisciplinary management of client/organizational evaluative process.	Directs the health care team in achieving optimal outcomes.	Designs, implements, and evaluates multi-disciplinary models of management within health care systems.
Advocate	Supports client rights and reports instances of abuse/neglect.	Identifies, reports, and seek resolution in discrepancies in policies and practices related to individual and family well-being.	Uses appropriate processes to support client decisions regarding care decisions.	Develops, implements and evaluates strategies to support client care decisions.	Challenges assumptions and explores alternative avenues to anticipate and design, and implement changes in health care.	Creates and analyses health care models to support rights of individuals, families, groups, and special populations.
Teacher/ Counselor	Reinforces organizational policies related to safety and health.	Identifies and responds to client situations that require instruction.	Develops, evaluates and modifies teaching plans based on individual learning outcomes for clients and health care personnel.	Designs and evaluates instructional programs that meet learning needs in clients, families, groups and health care personnel.	Consults and collaborates with multi-disciplinary teams to design, manage, and implement education programs for specific populations.	Creates, implements and evaluates evidence-based educational programs to inform administration of best practices, and support optimal care.
Scholar	Updates and refines skills to enhance patient care.	Demonstrates knowledge of current practice trends and delivery of care.	Acquires knowledge to assist in modifying the delivery of care.	Analyzes the impact of practice trends based on evidence and applies the findings to the delivery of health care.	Systematically formulates solutions to problems resulting from practice and contributes to the delivery of health care.	Creates and synthesizes knowledge of nursing and health care systems to improve health care delivery.

Member of Profession

INTEGRATED CONCEPTS	NURSING ASSISTANT	LICENSED PRACTICAL NURSE	ASSOCIATE DEGREE	BACHELORS DEGREE IN NURSING	MASTERS DEGREE IN NURSING	DOCTORAL LEVEL
Caregiver	Demonstrates ethical and responsible behavior as a member of the nursing team and consistent with regulation.	Makes decisions and takes actions that are consistent with the standard of practical nursing practice, established policies, procedures, and licensing laws.	Makes decisions and takes actions that are consistent with the standard of registered nursing practice, established policies, procedures, and licensing laws.	Assumes a leadership role in the implementation of professional standards in nursing practice.	Evaluates and contributes to standards of nursing practice and practices consistent with advanced practice licensing regulations.	Creates and utilizes databases to evaluate organizational practices.
Communicator	Demonstrates caring behavior and projects a positive image.	Demonstrates ethical/legal behavior consistent with practical nurse standards of practice.	Promotes nursing as a profession.	Promotes public awareness of nursing's contribution to health care.	Explicates advanced nursing practice roles to the public, other health care providers, and policy makers.	Disseminates research to inform and advance the nursing profession.
Coordinator/ Collaborator	Performs within a defined role and accepts delegation and supervision.	Interacts with health care colleagues to promote legal and ethical practice.	Develops collegial relationships for the purpose of development of the profession.	Assumes leadership role in professional activities.	Partners with consumers and other groups to promote nursing.	Initiates and evaluates policy changes to promote the profession.
Advocate	Recognizes the rights of all individuals and respects differences.	Demonstrates awareness of political influences on nursing and health care.	Uses political processes to improve client care and promote nursing.	Demonstrates leadership skills to advocate and influence nursing practice.	Influences the political environment of the nursing profession.	Envisions and creates an environment that promotes an optimal future for nursing.
Teacher/ Counselor	Explains nurse assistant care to clients and others.	Communicates LPN scope of practice to clients and others.	Communicates RN scope of practice and practice standards to clients and others.	Communicates and differentiates levels of nursing practice.	Communicates and promotes advanced practice roles in nursing.	Communicates and promotes nursing research, leadership and clinical excellence.
Scholar	Seeks educational opportunities to advance knowledge and skills.	Identifies learning needs and establishes a plan for increasing knowledge and skills.	Implements a plan of continued professional growth.	Fosters professional and personal growth in self and health care team members.	Plans and implements evidence-based professional development programs for self and others.	Creates a climate that promotes scholarly inquiry and advances the profession.

Medical Treatment of self or others without Orders is not Acceptable Nursing Practice

by Sister M. Rachel Torrez RN, MS,
Nurse Practice Consultant

When did we learn in nursing programs that it was acceptable practice to prescribe and treat co-workers, others, or yourself with medications removed from the stock at a facility without a physicians order because someone was not feeling good, forgot their personal medication, or just because we thought it was the right thing to do? When did we learn in nursing programs that it was acceptable practice to remove intravenous supplies in order to prepare an IV, start the intravenous on a co-worker, or yourself while on duty for any reason without a physicians order? Where does the Nurse Practice Act (NPA) state this is acceptable practice? I would suggest that no nurse has ever been instructed in any nursing program that this is acceptable practice.

It is of interest that there are nursing staff who work in a variety of work settings who believe they have the authority to prescribe and treat for himself or herself or a co-worker. The Arizona State Board of Nursing staff is required to investigate any and all allegations suggesting a nurse may be practicing in this manner.

The following are some examples of investigations that have been conducted because a nurse was reported to Arizona State Board of Nursing (ASBN) alleging that a nurse was performing in such a manner.

- Nurses who gave each other medications because a staff member was nauseated, had a headache, needed an antibiotic (a variety of routes), forgot or ran out of their personal medication, wasn't feeling well and did not wish to go the ED for treatment.

- Removed intravenous supplies and initiated IV therapy on themselves or a co-worker while on duty.

- Removed stock medications, narcotic and non-narcotic medications and administered the medications to themselves or a co-

workers while on duty.

- Removed supplies from the facility in order to treat themselves or a co-worker.

- Called in a prescription for medications to a pharmacy or wrote a prescription without a physicians order.

A nurse can be disciplined when such a violation occurs. The following are potential Violations of Rules and Statutes of the Nurse Practice Act.

POTENTIAL VIOLATIONS OF LAW:

A.R.S. 32-1663 (D) AS DEFINED IN A.R.S. 32-1601 (16) (d) and (j)

16. "Unprofessional conduct" includes the following whether occurring in this state or elsewhere:

(d) Any conduct or practice that is or might be harmful or dangerous to the health of a patient or the public.

(j) Violating a rule that is adopted by the Board pursuant to this chapter.

POTENTIAL VIOLATIONS OF RULE R4-19-403

For purposes of A.R.S. 32-1601 (16) (d) and (j) a practice that is or might be harmful or dangerous to the health of a patient or the public includes the following:

A pattern of failure to maintain minimum standards of acceptable and prevailing nursing practice.

Intentionally or negligently causing physical or emotional injury.

Removing without authorization, narcotics, drugs, supplies, equipment or medical records from any health care facility, school, institution or other work place location.

Practicing in any other manner which gives the Board reasonable cause to believe the health of a patient or the public may be harmed.

Annual Reports from Arizona Prelicensure Nursing Education Programs

INTRODUCTION

The Mission of the Arizona State Board of Nursing is to protect the public health, safety and welfare through the safe and competent practice of nurses and nursing assistants.

The Annual Reports from Nursing Education Programs

The Arizona State Board of Nursing (Board) annually requests a report from all Arizona pre-licensure nursing education programs. The report includes student admission, graduation, and other information. Additionally the program administrator is requested to sign an attestation of compliance with Board education rules (A.A.C. Chapter 4, Title 19, Article 2) or self-report rule violations. The annual reports cover a calendar year.

For the 2003 annual reports, in addition to graduation and admission data, programs were asked about unfilled placements and number of applicants that met qualifications but were not admitted to the semester for which they applied. The number of RN to BSN and master degree recipients was also requested. In the 2002 annual report, the number of students who dropped back or dropped out was requested. This was not requested in 2003, but data on the whether a graduate completed on time, was advanced placement, or took longer than the specified length of the program was included. The number of full time equivalent faculty and unfilled faculty placements was also requested.

Definition of Terms

In order that the data can be understood, the following terms are operationally defined:

Total Enrollment: All students enrolled in a pre-licensure nursing program

Total Admissions: Students admitted in the first semester of a nursing program, regardless of whether it was fall, spring, or summer

Advanced Placement Admissions: A student, usually an LPN, admitted to a semester, other than the first, of an RN program

Capacity: Student placements available in a nursing program

Graduates from original cohort: Students who graduated with their admission class

Repeated or dropped back: Students took longer time to complete nursing program because they either repeated a course or dropped out for a period.

Assumptions/Explanatory remarks

The following assumptions and explanations must be understood in interpreting the data:

- Practical nurse (PN) data only applies to traditional PN programs, not multiple exit programs unless indicated in the explanatory comments

- The number of students "qualified but not admitted" to a program may be overestimated because some students, particularly in the metropolitan areas of the state, apply to multiple program and, due to varying requirements, a student may qualify for one program, but not qualify for another.

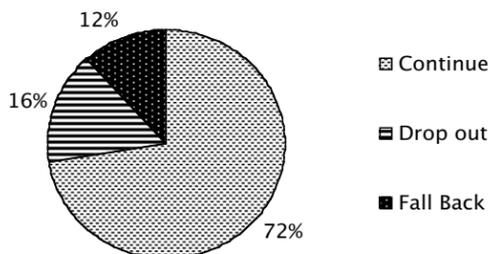
- Number of unfilled placements is probably overestimated as some programs only considered a student admitted if they attended class the first 45 days of class, therefore these unfilled placements were actually offered to a student and would not be available to another student. In reality, there were very few programs with unfilled placements at the start of the semester.

DATA AND ANALYSIS

Two programs self-reported rule violations involving hiring an unqualified adjunct clinical faculty. Both programs currently are compliant with rules and did not require Board action.

ATTRITION

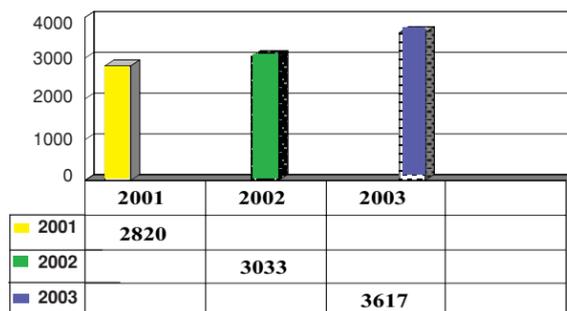
In 2002, 72 % of students admitted continued in a nursing program until graduation without stopping, repeating or failing. Sixteen percent of those admitted were lost to the program because they either failed out or dropped out and 12% fell behind but continued. These data were not requested in 2003, so it is not known if this is a typical attrition rate.



ENROLLMENT

The following figure shows enrollment in all nursing programs (RN/PN) increased each year since 2001. Enrollment increased by 7.55% between 2001 and 2002 and by 19.25% between 2002 and 2003. Overall enrollment increased by 26.28% in two years. This represents an additional 797 nursing students.

TOTAL PROGRAM ENROLLMENT



Registered Nurse Program Enrollment

There was a modest increase in enrollments in RN programs between 2001 and 2003.

RN PROGRAM ENROLLMENT

were not admitted to the semester for which they applied. The number of RN to BSN and master degree recipients was also requested. In the 2002 annual report, the number of students who dropped back or dropped out was requested. This was not requested in 2003, but data on the whether a graduate completed on time, was advanced placement, or took longer than the specified length of the program was included. The number of full time equivalent faculty and unfilled faculty placements was also requested.

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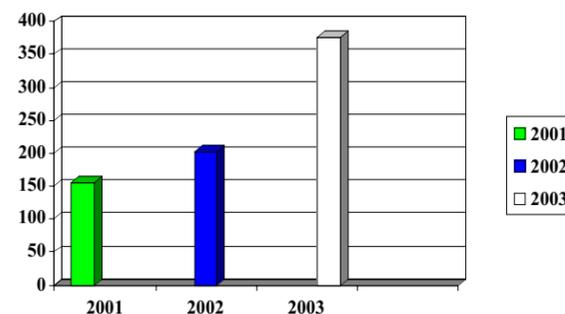
- Practical nurse (PN) data only applies to traditional PN programs, not multiple exit programs unless indicated in the explanatory comments
- The number of students "qualified but not admitted" to a program may be overestimated because some students, particularly in the metropolitan areas of the state, apply to multiple program and, due to varying requirements, a student may qualify for one program, but not qualify for another.

Overall enrollments in RN programs increased 6.23% in 2002 and 12.68% in 2003 for an overall 2-year increase of 17.8% or 577 students in two years.

Practical Nursing Program Enrollment

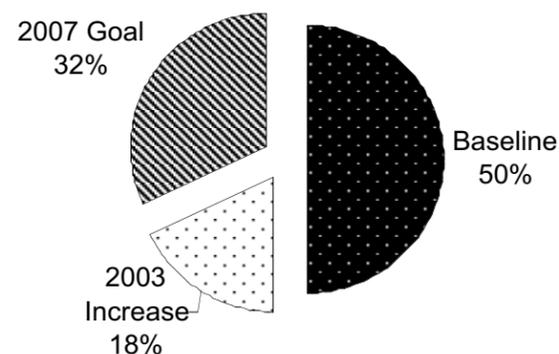
There was also an increase in practical nurse program enrollment. While the percentage increase is dramatic, the increase represents fewer students than the increase in RN programs. Practical nursing programs more than doubled enrollment from 2001 to 2003 and increased by 86% from 2002 to 2003 for an overall 2-year increase of 220 students. This is mainly due to the opening of a new practical nursing program at Estrella Mountain Community College and increases in enrollment at GateWay Fast Track Program and Pima Community College Center for Training and Development.

PN PROGRAM ENROLLMENT



PROGRESS TO GOAL OF SENATE BILL 1260

In the 2002 legislative session, Senate Bill 1260 entitled "An Act Providing for the Development of the Caregiver and Resource Expansion Program within the Arizona Board of Regents and Community College Districts" was passed. Senate Bill 1260 charged the educational community in Arizona develop a five year plan to double the capacity of Arizona RN nursing programs by 2007. If one examines over-

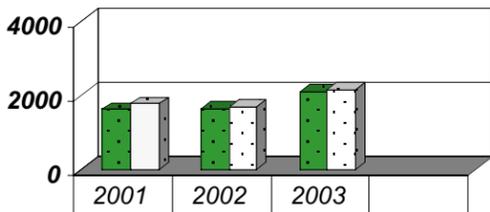


all enrollments as an indicator of capacity, the 2002 capacity was 2230 RN students. From 2002 to 2003 RN enrollments increased by 411 students, representing 18% of the total needed to double enrollment. Programs need to enroll an additional 1,819 students by 2007 to reach the goal of doubling enrollment/capacity.

PROGRAM ADMISSIONS AND CAPACITY

Admissions to the first semester of a nursing program increased slightly from 2001 to 2002 as did capacity. Admissions rose more dramatically in 2003 by 35.79%. Unfilled placements represented approximately 3-4% of capacity over the last 2 years. Registered nursing programs that reported admitting under capacity in 2003 include: Grand Canyon University (7), Maricopa Community College District Nursing Program (15), Mohave CC (1), and Northern Arizona University (30). Northern Arizona University's (NAU) high number of unfilled placements was due to insufficient qualified applicants for their distance program that serves Native American students exclusively. Thirteen qualified applicants were denied admission to NAU's Flagstaff program. Some programs did not report admitting students to capacity because, even though the placement was offered and accepted, the student did not attend the first day of class. Practical nursing programs admitting under capacity in 2003 are GateWay (6), and Pima Community College Center for Training and Development (29). Maricopa Skill Center admitted 20 students over capacity. These admission data do not include advanced placement admissions (LPN's enrolling in the 3rd semester of an RN program).

ARIZONA NURSING PROGRAM ADMISSIONS/CAPACITY

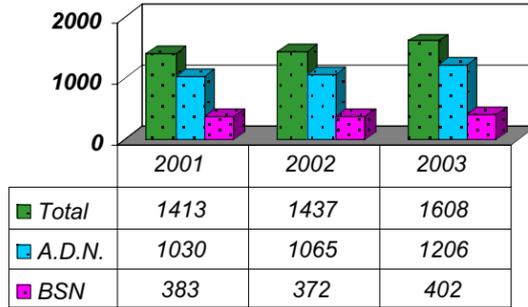


	2001	2002	2003
■ Admission	1614	1652	2083
□ Capacity	1773	1701	2160

Registered Nurse Program Admissions

Registered nursing program admissions to the first semester of a nursing program were totaled and then broken down by type of program. Total RN admissions remained stable between 2001 and 2002. Associate Programs increased admissions by 13% from 2002 to 2003 and 17% from 2001-2003; baccalaureate programs increased by 8% from 2002-2003 and 5% from 2001 to 2003. Baccalaureate programs reported a slight decrease of 11 students from 2001 to 2002.

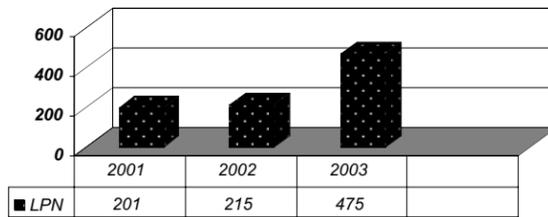
RN PROGRAM ADMISSIONS



Practical Nursing Program Admissions

A dramatic increase in practical nursing program admissions was seen in 2003. Practical nursing programs actually report more admissions than currently enrolled students. This can be explained by a shorter curriculum that allows a student to graduate in as little as 6 months. Therefore, some students were admitted and graduated before October 15 of the same year, the date on which enrollment was measured. Increases, while dramatic in percentage, actually represent an additional 274 students. By contrast RN program admissions increased by 195 students, but a less dramatic effect is seen due to the larger number of RN students.

PN PROGRAM ADMISSIONS



ADMISSIONS VS. CAPACITY

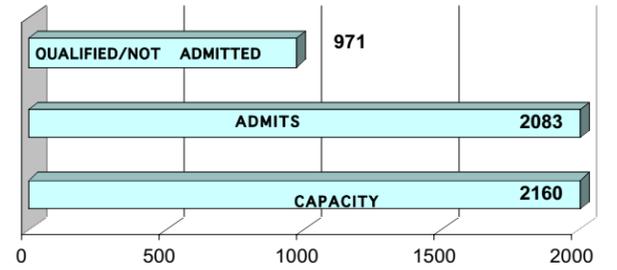
The number of students admitted in 2003 compared with the number of qualified applicants that were denied admission. Overall, 971 qualified applicants were not admitted in the semester for which they applied. Some of those that were denied admission in one program may have been admitted to another program or to an PN program. For example, on interview, approximately 80% of the students in one PN program stated the reason for attending was that they did not gain admittance to the RN program in the area. Also, due to differing admission standards, a student may qualify for admission in one program and not qualify for admission in another program.

ALL PROGRAMS

CAPACITY - ADMITS - QUALIFIED/NOT ADMITTED 2003

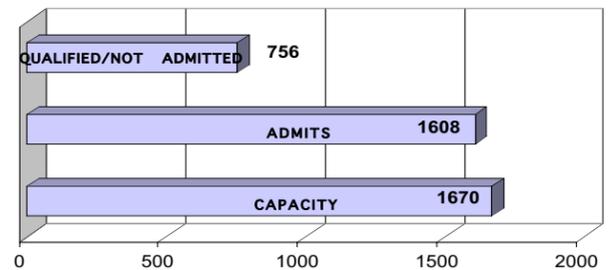
RN Programs

For RN programs, there were 756 qualified applicants who were not admitted to the semester for which they applied. Programs with the largest number of qualified applicants that were not admitted were MCCDNP (321), ASU (117),



University of Arizona (82), Cochise College (56), and Coconino Community College (30).

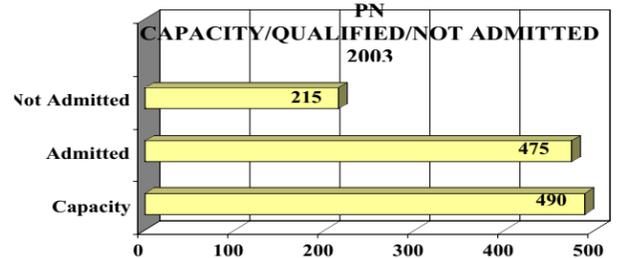
RN CAPACITY - ADMITS - QUALIFIED/NOT ADMITTED 2003



PN Programs

There were 215 qualified practical nurse applicants who were not admitted to the semester or session for which they applied. Programs with large numbers of qualified applicants who were not admitted include GateWay Fast Track (125) and Maricopa Skill Center (90). While GateWay Fast Track reported turning away qualified students, they also reported that they admitted under capacity by 6 students. Pima Community College Center for Training and Development also reported 29 vacant placements. Maricopa Skill Center reported admitting 20 students over their stated capacity.

PN CAPACITY/QUALIFIED/NOT ADMITTED 2003

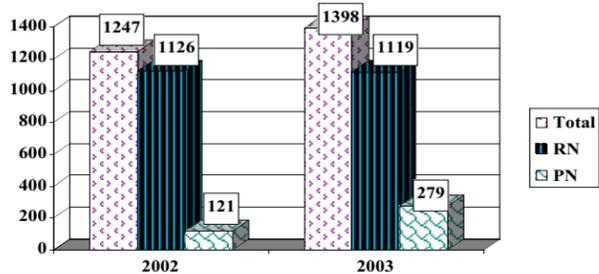


PROGRAM GRADUATES

Total Graduates

Graduates for all types of programs increased between 2002 and 2003 by 151 persons. Most of this increase is accounted for by the increase in practical nursing program graduates of 158 students.

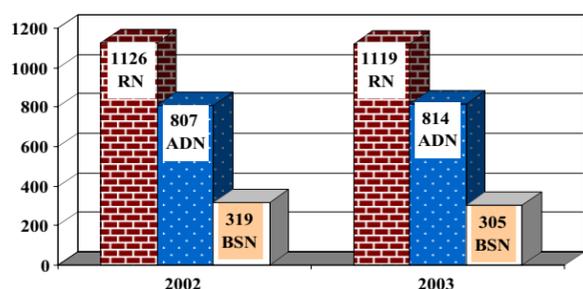
TOTAL GRADUATES IN ALL PROGRAMS



TOTAL GRADUATES IN ALL PROGRAMS RN Programs

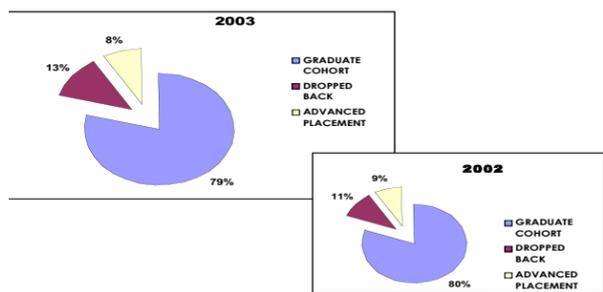
There was a slight decrease in RN graduates between 2002 and 2003. Associate degree graduates increased by 7 and BSN graduates decreased by 14. Graduates of RN programs are projected to increase in 2004 to reflect increased enrollments. BSN graduates comprise 27% of the total graduates in 2003 and 28% in 2002.

RN GRADUATES



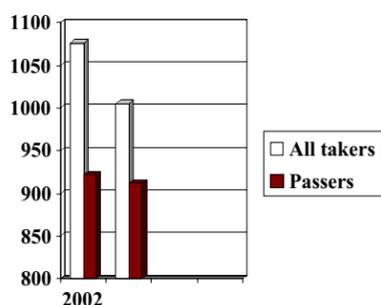
CHARACTERISTICS OF RN GRADUATES

Of RN graduates, 79% finished in the optimal allotted time for their program. 13% of the graduates took extra time to finish the program and 8% were advanced placement students, mostly LPN students finishing an RN program. These numbers are nearly the same as 2002, where 80% of graduates finished with their cohort, 11% dropped back and finished, and 9% were advanced placement.



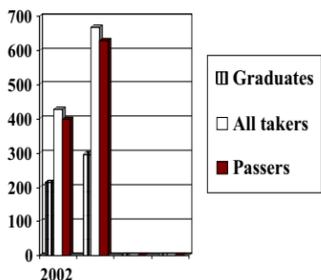
NCLEX® RN EXAM

In comparing takers and passers of the National Council Licensure Examination for Registered Nurses (NCLEX-RN), there were 7% fewer takers in 2003 than in 2002, but only 1% fewer first time passers. This represents a 40% decrease in the number of first time failures. The overall pass rate for NCLEX RN was 85.7% in 2002 and 91% in 2003. Seventy-four fewer persons took the exam in 2003. In comparing exam statistics with program statistics, it must be remembered that students graduating in December do not take NCLEX until the following year, therefore the number of graduates in a year may be considerably more than the number of NCLEX takers. There are very few graduates who do not take the NCLEX exam.



NCLEX® PN EXAM

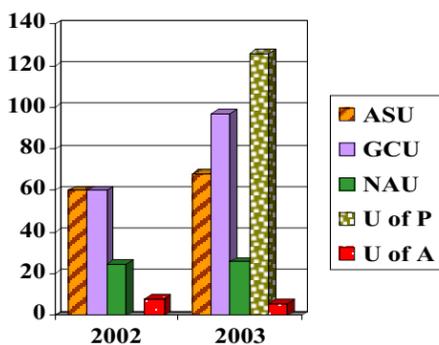
In 2003, there was an overall increase of 50% in both takers and passers of the NCLEX PN exam. This not only reflects the increase in admissions to PN programs, but a substantial increase in number of takers from multiple-exit RN programs. There was an overall increase of 158 PN program graduates.



RN to BSN Admissions

The programs were also requested to submit information on admissions to RN to BSN or RN to MSN completion programs. It is difficult to compare numbers for the total because University of Phoenix was not surveyed in 2002. Grand Canyon University and Arizona State University significantly increased admissions while Northern Arizona University remained steady. University of Arizona decreased admissions. University of Arizona only offers a RN-to-Masters program.

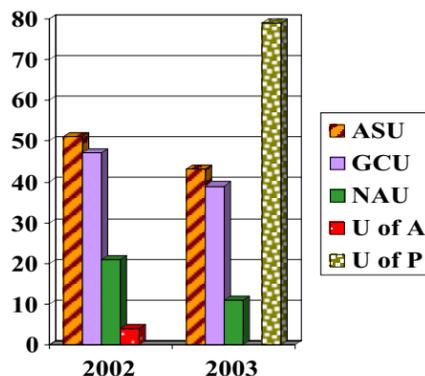
RN to BSN/MS Admissions



Graduates

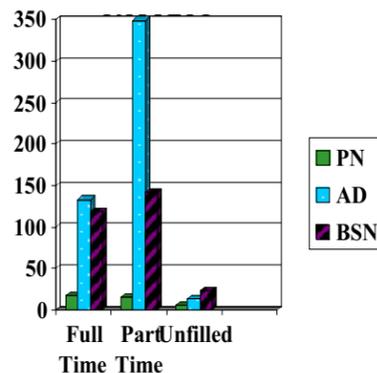
Graduates of RN to BSN programs appeared to increase in 2003 as compared to 2002. However, a significant proportion of BSN graduates are from the University of Phoenix, which was not surveyed in 2002. A total of 317 nurses graduated from RN to BSN programs 2003. These data may be more meaningful when compared in 2004.

RN to BSN/MS Grads



Faculty

At the time of data measurement, there were 775 Full-time equivalent (FTE) nursing faculty employed and 42 FTE faculty positions unfilled for a total number of 817.18 FTE available faculty positions. This represents a 5% vacancy rate in faculty positions. There are more vacancies in BSN programs, probably due to the increased educational requirements for teaching in a BSN program and plans to expand several BSN programs with subsequent faculty positions to be filled. Associate degree nursing programs employ twice the number of part-time faculty as baccalaureate, due to their increased number, increased enrollment, and the subsequent need for more clinical faculty to maintain the Board mandated student-to-faculty ratio of 10 to 1 during patient care experiences.



SUMMARY

The systematic and routine collection of nursing program data will assist the Board, nurses, and the public in understanding nursing education and enrollments and in setting realistic goals. In Arizona, nursing program enrollment and admissions increased in both 2002 and 2003. While an immediate increase in practical nurse graduates was experienced, it will take 2 years before a subsequent increase in registered nurse graduates is seen due to the length of the program. Bachelor of Science in Nursing graduates comprise less than 30% of new graduates. This is below the national average of 34% (NCSBN). The low proportion of baccalaureate prepared graduates may contribute to the reported shortage of nursing program faculty. In 2003 a large number of qualified students were either denied or placed on a waiting list.

Pamela Randolph RN, MS, CPNP
Education Consultant
Arizona State Board Of Nursing

REFERENCES

National Council of State Boards of Nursing. 2003 NCLEX Quarterly Reports. Available from Arizona State Board of Nursing, 1651 E. Morten, STE 212, Phoenix AZ, 85020.

Regulation Rundown

by Pamela Randolph RN, MS, CPNP
Current Rule Activity

R4-19-403 UNPROFESSIONAL CONDUCT AND ARTICLE 5. ADVANCED PRACTICE NURSING

An open public workshop was held on September 2, 2004. Changes were recommended in the rules consistent with community feedback and courtesy review by the staff at the Governor's Regulatory Review Council. The latest version of the rulemaking is on the website (www.azbn.org) and is expected to be filed for publication with the Secretary of State this fall. Please address all comments to Pamela Randolph by e-mail at prandolph@azbn.org, by fax 602-889-5155, or regular mail at the Arizona State Board of Nursing, 1651 E. Morten, Suite 210, Phoenix, AZ 85020.

Summary of Changes:

- Incorporating standard criteria for recognizing a specialty in advanced practice;
- Modifying and updating criteria for approval of NP and CNS programs;
- Requiring national certification in the category and specialty of NP or CNS practice, with some exceptions as noted below;
- Temporary provisions that allow nurses using the CNS title, who are not eligible for national certification, to obtain Board certification by demonstrating mastery of core competencies and successful CNS practice. These provisions will expire in a year;
- Restricting the use of the titles "Nurse Practitioner" and "Clinical Nurse Specialist" to those that are certified by the Board;
- Reorganizing and updating prescribing and dispensing rules and adding unprofessional practitioner prescribing practices currently in Article 4 (R4-19-403);
- Amending other unprofessional conduct rules in R4-19-403 to include boundary violations, providing false information to the Board in an investigation, falsifying health or other institutional records for any reason, use of force with a client, making a false employment application, and assisting an unlicensed person in the unlawful practice

of registered or practical nursing; and

- New rules that provide:
 - * Temporary certification for CNS and NP;
 - * Expiration and renewal of new nurse practitioner and clinical nurse specialist certificates;
 - * Delegation guidelines for nurse practitioners who delegate tasks to medical assistants, as authorized by the nurse practice act; and
 - * Clarification of the scope of practice of registered nurse anesthetists.

Article 2. Arizona Practical and Professional Nursing Programs.

The Notice of Proposed Rulemaking was filed with the Secretary of State. An oral proceeding on the proposed rulemaking is scheduled for October 15, 2004 at 9 a.m. in the Board offices. A copy of the rulemaking is available on the web www.azbn.org

Highlights of Proposed Changes:

- Allow a post secondary institution that is either regionally or nationally accredited by an accrediting agency recognized by the U.S. Department of Education to conduct a nursing program;
- Measurable criteria added for classroom specifications in a nursing program;
- A nursing program must develop policies to ensure students, faculty and preceptors are safe to deliver patient care;
- Clinical supervision criteria added;
- Programs must provide accurate information to students including cost of the program, length of the program, and transferability of credit;
- All programs must offer clinical instruction in the major areas of nursing practice for the level of the program;
- Standards for refresher programs were revised to allow more flexibility;
- New rules for out-of-state and distance programs were added

Article 8. Certified Nursing Assistants

The Nursing Assistant Advisory Committee has reviewed the draft rules. The Education Committee and

Law and Rules Committee will next review the rulemaking. It will be discussed at the CNA Educators Retreat on January 14, 2005. A draft of the rule is currently posted on the web for comment.

Highlights of Proposed Changes:

- Increased clarification of expectations for nursing assistant programs including minimum number of didactic hours, clinical hours, and minimum curriculum
- Allowing an LPN to supervise a clinical group in a C.N.A. program;
- Lists equipment necessary for a C.N.A. program to simulate patient care in a laboratory setting;
- Allows the Board to grant one-year initial approval to a new program without a site visit;
- Allows the Board to grant re-approval to a program with a telephone visit every other renewal cycle;
- Requires a C.N.A. program to graduate and certify at least one student in each renewal cycle;
- If approval is rescinded or revoked, the entity cannot reapply for 2 years;
- Increased options for endorsement C.N.A.s to qualify for certification if their program was less than 120 hours;
- Increased specificity in standards of conduct for Certified Nursing Assistants including boundary violations, dual relationships, and falsification of patient records or employment applications.

Future Rule Activity

Article 4. Regulation. Unprofessional Conduct will be amended with Article 5 and a copy of amendments is available with Article 5 on the website. The rest of the Article will be opened for revision in 2005.

Article 1. Definitions and Time-Frames. The Board will amend these rules to be consistent with other rulemaking changes over the past 2 years in 2005.

The person to contact at the Board regarding rules is:

Pamela Randolph
Nurse Practice Consultant
1651 E. Morten Suite 210
Phoenix, AZ 85020
602-889-5209
e-mail: prandolph@azbn.org

Nurse Imposter Alert, May, 2004 - September, 2004

The following individuals have either applied for a nursing position or have been employed as a nurse in Arizona without evidence of a valid nursing license.

Sandra Miller aka: Thompson, Nurse Imposter, Revoked LPN. A cease and desist letter was issued September 13, 2004 after the Board received information that Ms. Miller had represented herself as a nurse to health-care professionals and other members of the public. Although Miller was previously licensed, her Arizona license was revoked in May 1997.

Marlene Muller, LPN Imposter. A cease and desist letter was issued on June 14, 2004, after it was reported that Muller had represented herself to patients and others as a "nurse"; presented a forged LPN license and had business cards reflecting the credentials of "LPN". Muller is not licensed nor has she completed a nursing education program.

Cindy Parish-Tamayo, Nurse/CNA Imposter. A cease and desist letter was issued April 21, 2004, after the Board of Nursing received information that Parish-Tamayo represented herself as a Certified Nursing Assistant and as a Registered Nurse and presented business cards stating that she was a CNA. Parish-Tamayo is neither licensed nor certified in Arizona.

Richard Puczko, RN Imposter. A cease and desist letter was issued on October 6, 2004, after the Board received information that Puczko had represented of himself to the public as an RN. Puczko applied for and secured employment as a staff RN stating that he had recently graduated from nursing school. Puczko was in fact a respiratory therapist student and had not attended nursing school or obtained licensure to practice nursing.

Ketura Rathbun, Nurse Imposter, RN Denial. A cease and desist letter was issued July 21, 2004, after the Board received information that Rathbun accepted a travel assignment and had been working as a Registered Nurse in Arizona utilizing an Idaho multi-state license. Rathbun had previously submitted an Arizona application for licensure as a Registered Nurse and in December 2000, and was denied licensure. Based upon this prior denial, Rathbun was not authorized to practice nursing in the State of Arizona under the license or privilege of any other state

including a compact state.

Cheri Ritter, RN Imposter. A cease and desist letter was issued April 22, 2004, after the Board received information that Ms. Ritter had been employed as a nurse in Arizona since October 2000. Ritter does not hold a license to practice nursing in Arizona.

Neda Rodriguez, Nurse Imposter. A cease and desist letter was issued April 21, 2004, after the Board received information that Rodriguez represented herself as a nurse in order to obtain employment for a night Nurse Supervisor position.

Michael Ryan, RN Imposter, Revoked RN. Ryan's nursing license was revoked November 3, 2003. A cease and desist letter was issued May 12, 2004, after the Board received information that Ryan had continued to represent himself as a professional nurse by maintaining employment and accepting nursing shifts.

In addition to the above, the Board issued Cease and Desist letters to the following 8 individuals working as a

"CNA" without valid certification:

Yvonne Barret
Veronica Botello
Dee Dee Hicks.
Juanita Ibarra
June Simon
Molly Simon
Joseph Tinelli.
Antionette Welch

A complete list of imposters can be found by visiting our website at www.azbn.gov.

For questions regarding imposters or to report an imposter, please contact Valerie Smith, RN, MS, Associate Director at vsmith@azbn.org (602-889-5206) or Thereasa Berry, Assistant to Associate Director/Investigations at tberry@azbn.org (602-889-5208)

University of Arizona College of Nursing Appoints New Professor & Associate Dean for Research: Carolyn Murdaugh, RN, PhD



Murdaugh

"It gives me great pleasure to welcome this highly esteemed scientist, educator, and scholar to the University of Arizona College of Nursing. Dr. Carolyn Murdaugh will provide outstanding leadership for the future directions of the College's research mission," said Marjorie A. Isenberg, DNSC, RN, FAAN, Dean of the College of Nursing.

Dr. Murdaugh comes to the UA from the University of South Carolina College of Nursing, where she had served as Associate

Dean for Research since 1996. She also directed the College's Center for Health Promotion and Risk Reduction in Special Populations.

Prior to this she worked at the National Institute of Nursing Research at the National Institutes of Health, where she was senior scientist and chief of the Laboratory for the Study of Human Responses to Health and Illness. She also has held adjunct professorships at the University of Hawaii and Johns Hopkins University in Baltimore.

At the UA, Dr. Murdaugh's role will be to support the research efforts of College of Nursing faculty. She said the College's research traditionally has focused on three strengths: injury mechanisms and biobehavioral responses; health-care systems; and vulnerable populations, such as the elderly and those living in border or rural areas.

ARIZONA

STATE BOARD OF NURSING

NEWSLETTER

QUARTERLY CIRCULATION APPROXIMATELY 90,000 TO ALL
RNs, LPNs, CNAs AND STUDENT NURSES IN ARIZONA



SECTION 2

Volume 5, No. 4

November, December 2004, January 2005

CNA EDUCATORS RETREAT 2005

Phoenix Mountain Preserve Reception Center

Friday, January 14, 2005

Schedule:

- 9:15 - 9:50 a.m. Registration and Continental Breakfast
 9:50 - 10:00 a.m. **Welcome and Opening Remarks**
 10:00 - 11:00 a.m. **Building Effective Relationships Through Mentoring**
 Presented by: Sheila Sorrentino Ph.D., RN
 11:00 - 12:00 a.m. **Motivating CNAs to Care**
 Presented by: Jan Dougherty MS, RN
 12:00 - 1:00 p.m. **Buffet Lunch**
 1:00 - 2:00 p.m. **Effective Teaching Methods**
 Presented by: Elizabeth Gilbert, RNC, MS, cFNP
 2:00 - 2:45 p.m. **Legal Issues: Understanding Criminal Background**
 Presented by: Dan Christl, JD, Asst. Attorney General
 2:45 - 3:00 p.m. **Break**
 3:00 - 3:45 p.m. **Board Issues: Statute & Rule Update**
 Presented by: Joey Ridenour, MS, RN, Exec. Director, AZBN
 Pamela Randolph, MS, RN, Education
 3:45 - 4:15 p.m. **Dialogue with Testing service**
 Presented by: Testing Service
 4:15 - 4:30 p.m. **Evaluation**

Keynote Speaker:

Sheila Sorrentino, PhD, RN:

Dr. Sorrentino is currently a curriculum and health care consultant focusing on career ladder nursing programs and effective delegation and partnering with assistive personnel. She has taught at all levels of nursing from CNA to baccalaureate and higher degree. A Mosby author since 1982, Dr. Sorrentino has written several textbooks for nursing assistants and other assistive personnel. She was awarded the 1992 International Medical Films Award for her work on skills videos and the Alumni Achievement Award from Lewis University for outstanding leadership and dedication in nursing education. She was a consultant for *Mosby's Nursing Assistant Skills Videos* and *Mosby's Nursing Skills Videos* (selected for the 2003 AJN Book of the Year Award for Electronic Media). Her presentations at national conferences focus on delegation and other issues related to assistive personnel.

Registration Form

CNA EDUCATORS RETREAT

January 14, 2005

Fees include continental breakfast and lunch:

Before December 15th	\$50 per person
December 15th or later	\$75 per person
Walk-in (as space permits)	\$100 per person

Submit one form for each person attending:

Name: _____

Educational Institution: _____

Position: _____

Address: _____

Phone: _____ Fax: _____ E-mail: _____

Amount Enclosed: _____

Please pay by check or money order. **Make checks payable to Arizona State Board of Nursing and mail to:**

Arizona State Board of Nursing
 Attn: Meredith Fountain, Education
 1651 E. Morten, Suite 210
 Phoenix, AZ 85020-4613

Refunds: Money will be refunded only in the event the conference is cancelled.

MOUNTAIN PRESERVE RECEPTION CENTER



Mountain Preserve Reception Center

1431 East Dunlap
 Phoenix, Arizona 85068
(602) 943-2656

Directions from I-17:

Exit I-17 on Northern
 East on Northern to 12th Street
 North (left) on 12th Street
 Right on Dunlap

Arizona Nursing Exam Pass Rate Highest In U.S.

by Arizona State Board of Nursing

PRESS RELEASE 8/19/04

PHOENIX: The statewide first-time passing rate on the national licensure exam for registered nurses (NCLEX-RN®) for the second quarter, 2004 was the highest in the United States excluding the territories. At 93.61%, the pass rate for Arizona nursing programs graduates represents 425 (out of 454) graduates of Arizona community college and university nursing programs who passed the exam on the first attempt. This was only exceeded by Northern Mariana Islands, where one candidate took and passed the exam resulting in a 100% pass rate. The national passing rate for the same period was 88.45%. Kathy Malloch Ph.D. RN, Vice President of the Arizona State Board of Nursing and Chairperson of the Education Committee, expressed support and congratulations to all the nursing programs in Arizona for this remarkable achievement.

Just two years ago, the Board was concerned over low NCLEX pass rates posted by Arizona nursing programs and held a statewide meeting to discuss the issue with program representatives. At that meeting, the programs were asked to identify factors leading to success or failure on the exam and present a plan to improve scores. Following the meeting, based on the information shared, several programs instituted measures designed to improve a graduate's success on the exam. Steps taken by the programs include requiring program applicants to pass tests of competency in reading and math, requiring high scores on national predictor exams, and instituting high standards for

entrance and progression within the nursing program. Additionally, the Board indicated that all nursing programs should strive for a 90% pass rate on the NCLEX examination.

The NCLEX-RN competency examination test is required for nursing licensure in all states. The exam is computer adapted and based on a job analysis of entry-level registered nurses. The passing standard is assessed every three years. Board of Nursing Education Consultant, Pamela Randolph stated, "the high pass rates of Arizona programs are even more significant because the passing standard for the exam was raised on April first of this year." Because of the trends seen in the past when the passing standard was raised, the Board expected the passing rate to decrease. The Board does not grant licensure to applicants who do not take and pass the NCLEX examination.

Individual programs that posted very high passing rates include: Arizona Western College 96%, Central Arizona College 100%, The Maricopa District Community College Nursing Program 99%, Mohave Community College 100%, Northern Arizona University 100%, Northland Pioneer College 100%, and Yavapai College 98%.

Board President, Alice Gagnaire RN, MHSA stated, "These test scores are a real testament to the quality of nursing programs offered in the state of Arizona. With the national and state nursing shortage, having nurses successfully pass the exam the first time around is vital to patient care. We will be able to place more nurses into the health-care facilities to care for the patients. Congratulations to the nursing programs for all their hard work and accomplishments. Congratulations to all the new nurses."

Advanced Practice Corner

by Karen Grady, MS, RN, FNP, BC
Advanced Practice Consultant

Nurse Practitioners: Who Are They And What Do They Do?

For answers to your questions about nurse practitioners, including their certification requirements and scope of practice, visit our website, www.azbn.org, under Resources/Advisory Opinions, and review the advisory opinion, [Nurse Practitioner Description of Roles and Functions](#). This advisory opinion describes the multiple roles and functions of nurse practitioners, and for easy reference, cites the relevant statutes and rules from the Nurse Practice Act that pertain to nurse practitioner certification requirements and scope of practice. The cited statutes and rules can also be viewed in their entirety under Resources/Nurse Practice Act.

Nurse practitioners provide the services described in the above advisory opinion within the scope of practice of their education, training, and specialty area of certification. The specialty area of certification is based upon their educational program preparation in that specialty area. The specialty area of certification describes the population (e.g., pediatric, adult, family, psychiatric, etc.) of patients that are within the nurse practitioner's scope of practice. Nurse practitioners consult with or refer to physicians and other health care providers in situations that are outside the limits of the nurse practitioner's knowledge, expertise, and/or specialty area.

A common misconception is that Nurse Practitioners and Physician's Assistants are essentially identical providers. Although both are licensed health care providers and may provide similar services, there are significant differences:

- All Nurse Practitioners in Arizona are licensed professional nurses who have completed a nurse practitioner program approved or recognized by the Board. If entering practice after January 2001, they are required to hold a graduate degree in nursing or a health related area. If entering practice after July 1, 2004, they are also required to hold national certification.

Nurse Practitioners are regulated by the Board of Nursing and practice under the authority of their professional nursing license and advanced practice certification in a specialty area. Nurse practitioners collaborate with one or more physicians on an as-needed basis. They do not require direct or on-site supervision by a physician. Nurse practitioners authorized by the Board may prescribe and dispense medications, including Class II-V controlled substances if they also hold a DEA registration. Nurse practitioners may work in independent practice.

- Physician's Assistants in Arizona do not require any underlying health care licensure. Physician's Assistants must attend and complete an approved course of training and pass a certifying examination. Physician's Assistants

are licensed and regulated by the Arizona Medical Board and must practice under the supervision of a physician. A notification of supervision must be filed with the Medical Board. The tasks that Physician's Assistants perform must be delegated to them from their supervising physician, including the prescribing and dispensing of medications. There are restrictions on their ability to prescribe Class II and III controlled substances.

Death Certificates

The Board's on-line educational program for nurse practitioners who wish to sign death certificates became available on our website on September 1, 2004. For those without computer access, hard copies are available on request. Nurse practitioners **must** complete the program before they can sign a death certificate. Once the nurse practitioner has completed the program, they are eligible to sign death certificates. No additional certification is required.

Temporary Advanced Practice Certification

On September 23, 2004, the Board approved a policy to allow Temporary Advanced Practice Certification for new graduate applicants (nurse practitioners and clinical nurse specialists) who have met all other requirements for Board certification and who are waiting to take the National Certification Examination. If the new graduate has met all other certification requirements and can submit evidence of eligibility to sit for the national examination, a temporary certificate can be issued. The applicant must also provide written authorization to the national certifying body to release their exam results directly to the Board (i.e., pass/fail notification). The temporary certificate expires in 3 months or upon failure of the examination. The temporary certificate does not include P&D privileges. To apply, submit a temporary certification application plus the \$25 fee to Donna Frye, along with proof of eligibility to sit for the exam. If you need additional information about the application process, contact Donna Frye, Licensing Technician, at dfrye@azbn.org.

Advanced Practice Committee

The advisory opinion, [The Use of Controlled Substances for the Treatment of Chronic Pain](#), was presented to the Board and approved on September 24, 2004. The full text of the advisory opinion is published separately in this newsletter and is available on our website menu under Resources-Advisory Opinions-Controlled Substances for Treatment of Chronic Pain. The guidelines were developed to assist nurse practitioners in the responsible use of controlled substances in the treatment of patients with chronic pain.

The next meeting of the Advanced Practice Committee is tentatively scheduled to be held on November 12, 2004. If you have any questions about advanced practice or the committee, contact Karen Grady at kgrady@azbn.org.

Testing Schedule for Experior

November 11-12, 2004
Yuma

December 6, 2004
Flagstaff

Certified Nursing Assistant Corner

by Patricia A. Staten RN, MS & Pamela Randolph
RN, MS; Nurse Practice Consultants

Resident Rights

What is the difference between Resident's Rights and Patient's Rights? It may be useful to first examine the definitions of patient and resident. A patient is "one who suffers, one under medical care, one who is sick with, or being treated for, an illness or injury". A resident is "one who makes his home or dwell in a particular place". Patients are usually transient and do not dwell in a particular place. A patient does not "live" in the health care setting, whereas, a resident does. In many cases, it is the resident's only home. When visiting a long-term care facility, one may observe the residents dressed in their own clothing, strolling the hall, playing with facility pets, and keeping their own furniture, artwork, and bedspreads in their rooms. Hospitals and outpatient clinics have standard furniture, institutionalized artwork, and patients typically wear hospital-issued clothing.

The Federal Nursing Home Reform Act or OBRA '87 created a set of national minimum standards of care and rights for people living in certified facilities. The Federal Nursing Home Reform Act became law because of growing public concern with the poor quality of care in some nursing homes and the concerted advocacy of consumers, provider associations, and health care professionals.

Nursing home residents are guaranteed certain rights under federal and most state laws. Long-term care facilities are required to advise residents of these rights, and to encourage and assist residents in exercising their rights throughout their stay in a facility. The nursing home must list and give all new residents a copy of these rights. These rights include:

- **Financial:** The right to be informed in writing about services and fees before entering a long term care facility. The right to manage the resident's own money or to choose someone else to do this;
- **Information:** The right to access all records, be informed of their health condition;
- **Refuse treatment:** The right to refuse the care provided;
- **Privacy and confidentiality:** The right not to be unnecessarily exposed; visit with others in private areas; send and receive mail and phone calls; medical information is not released without the consent of the resident;
- **Personal Choice:** The right to choose a physician and

take part in planning treatment, choose activities, plan schedules and care—when to sleep, what to wear, and what to eat;

- **Disputes and Grievances:** The right to voice concerns, questions, and complaints about treatment or care;
- **Work:** The resident does not work for care, care items, or other items or privileges. A resident may work if they choose to;
- **Participation in Family and Group Activities:** The right to take part in resident and family groups and events;
- **Care and Security of Personal Belongings:** The right to keep and use personal items; the facility must protect the personal belongings of the resident;
- **Freedom from Abuse, Mistreatment, and Neglect:** The right to be free from verbal, sexual, physical, or mental abuse and involuntary seclusion;
- **Freedom from Restraint:** The right to have body movements unrestricted by either physical or chemical means;
- **Quality of Life:** Residents must be cared for in a manner that promotes dignity, self-esteem, and physical, psychological, and mental well-being. Activities that offer personal choice and a home-like environment must be provided.

Meticulous protection of a resident's rights by RNs, LPNs, and CNAs working in residential facilities will enhance the resident's quality of life and promote a therapeutic environment. It is also a component of the professional conduct expected of licensed health care professionals working with residential clients.

Reference:

Sorrentino, S. (2004). *Textbook for Nursing Assistants*. St. Louis, MO: Mosby.

Frequent Errors in the Manual Skills Test

Experior Rater, Doris Donithon has reported applicants often fail the manual skills test by mistakes such as these:

- Many candidates have difficulty telling the right side from the left side of the body (i.e. ROM on the wrong extremity or positioning the resident on the wrong side)
- When placing the resident on the bedpan, candidates often place the pan backwards under the resident (placing the handle of the fracture pan under the spine) or fail to give the resident an opportunity to clean themselves up after using the bedpan.
- If the bed is elevated, it must be lowered before the candidate exits the room.
- When making an occupied bed, the top linen goes over

the resident, not under.

- Attention should be paid to the type of soap being used during pericare, bed bath or catheter care. (Regular or rinseless.)

Attention to these matters in the CNA training program should enhance the student's opportunities for success on the manual skills exam.

Nursing Assistant Advisory Committee

The Committee met on June 4th and September 10th to continue reviewing the proposed changes to Article 8: Certified Nursing Assistants. The committee assisted in the planning of the CNA Educator's Retreat on January 14th, 2004. The committee also examined common violations of the Nurse Practice Act for CNAs and recommended that the Board adopt a proposed rule that requires a CNA program to inform students of certification requirements. The most common violation is criminal conduct and the most common discipline is denial or revocation of the certificate. The committee will meet again on December 3, 2004 and set the calendar for 2005. If you wish to attend a meeting, please contact the Board to confirm meeting dates and times.

CNA Program Curriculum Project

A diligent group of nursing assistant educators continues to meet to write a common CNA curriculum based on Board minimum competencies. The group is expected to release a draft of the work by the end of the year. It is hoped that the common curriculum will assist educators in teaching CNA content. Persons contributing to the project include: Diane Ayle, Emelia Lewis, Regina Cottrell, Katie Windsor, Jan Gibson, and Mary Edwards. The Board is grateful for the dedication and commitment of this group. If you would like to assist in this project, please contact Pamela Randolph at prandolph@azbn.org.

Medication Technician Update

The steering group for the pilot study on the use of medication technicians in long-term care has divided into three working groups: Financial, Research, and Curriculum. Preliminary drafts of the scope of work for the research study, protocols for delegating medications, and curriculum guidelines were reviewed on September 14, 2004. The next steps are to continue to refine protocols and curriculum guidelines, develop curriculum, secure funding and develop criteria for choosing pilot facilities. For additional information on this project, contact Pamela Randolph at 602-889-5209 (prandolph@azbn.org) or Joey Ridenour at 602-889-5200 (jridenour@azbn.org).

Arizona Nurses Association 2005 Lobby Day & Legislative Day

by Gayle Armstrong, RN, BSN,
Special Projects Coordinator

Save the dates of Friday, February 18, 2005 for **Nurses Legislative Day**, and Thursday, March 10, 2005 for **Nurses Lobby Day**. Attendance at one or both of these events allows attendees to meet key political players in the profession and state. Attendees will also learn how to influence the political scene and how the political scene influences the practice of nursing.

Highlights of **Lobby Day** include observation of the Arizona Senate and House Health Committees, followed by a legislative healthcare briefing by AzNA's lobbyist, Rory Hays, JD. Learn about keys to effective lobbying

from AzNA's Executive Director, Marla Weston, RN, MS. After lunch, attendees may meet with legislators, followed by a debriefing of those visits, with Rory and Marla.

Legislative Day will begin with the keynote speaker, Jana Bommersbach, one of Arizona's acclaimed journalists, who will speak on "Political Advocacy in Action".

Judy Lersch, Chair of AzNA's Political Action Committee, will provide information on Arizona's current political climate. If missed at Lobby Day, Rory Hays will give a legislative healthcare briefing. Following lunch, you can join either the novice nurse track or the experienced nurse track. The day will close with important information related to taking control and making changes in the controversial and always changing political arena.

Licensed Nurses

Hearthstone of Mesa is looking for experienced Sub-Acute Nurses to join our Team. We have FT, PT and Pool positions available for RNs (Evenings and Night Shift) if you have experience in working with Orthopedic, CVA, Cardiac and Medically complex rehab patients.

Call for an appointment 480-985-6992.
We are located at 215 S. Power Road, Suite 1251

Arizona Nurses Association Registration Form for Nurses Legislative Day and Nurse Lobby Day

Name _____ Credentials _____
 W-Phone _____ H-Phone _____
 E-mail _____
 Arizona Legislative District _____ (check www.vote-smart.org for this info.)
 Address _____ City _____
 Zip _____

Please mark appropriate program(s)

Nurses Legislative Day

___ Member \$ 80
 ___ Non-Member \$100
 ___ Entry Level Student \$ 45

Nurses Lobby Day

___ Member \$65
 ___ Non-Member \$95

***Late Fee**

___ Add \$25 if Legislative Day rec'd after Feb. 4, or Lobby Day rec'd after Feb. 24.

Registration is limited to RNs and space is limited

Total Enclosed \$ _____ (Make check payable to AzNA)

 Credit Card # _____ Exp.date _____

 Signature

Questions? 480.831.0404 www.aznurse.org debby@aznurse.org Fax: 480.839.4780
AzNA, 1850 E. Southern Ave., Ste. 1, Tempe, AZ 85282

• Education Corner •

Pamela Randolph RN, MS, CPNP

PACNE/AZBN CONFERENCE: Creating Educational Excellence—Changes and Challenges

The Practical and Associate Degree Council of Nurse Educators and the Arizona State Board of Nursing co-sponsored a conference on November 5, entitled, "Creating Educational Excellence: Changes and Challenges". At this conference, I spoke on the topic of faculty professionalism. Here is a summary of the talk.

Nursing faculty members have a responsibility not only to identify and appropriately intervene to promote professional behaviors in students, but to model professional behaviors themselves. Professional behavior is demonstrated by a faculty member's attentiveness to the needs of students, patients, and facility staff. The instructor will intervene in situations that pose a risk of patient harm that nursing practice entails, these teachers recognize their public fiduciary duty to ensure that students deliver safe nursing care. They have confidence in their assessment of student performance and their ability to motivate, explain, coach, and structure learning to help a student succeed. They counsel students who are not proficient, and will fail students that truly, despite all efforts, do not meet course competencies. They not only expect critical thinking from their students, but exhibit it themselves as they guide students in formulating nursing diagnoses, posing alternatives to problems, and evaluating strategies that did or more importantly, did not, achieve the expected goal. They will also critically examine a struggling student's learning style, proficiency, and educational need and formulate an educational plan.

Professional faculty members maintain faculty-student boundaries and do not establish personal relationships with students, accept gifts from students, or develop friendships or intimate relationships with students. They exhibit friendliness and compassion by offering genuine praise, encouragement, and attentive listening. They have the courage to tackle the tough issues: the impaired student, the student with poor hygiene, the student suspected of cheating. They have high standards for their own behavior. They do not violate copyright laws and readily admit when they make a mistake. They report errors and potential errors at the clinical site. They do not function as a student's personal counselor, physician, or therapist but recognize and refer when a student needs these services.

The basis of professional behavior lies in the instructor's own values such as altruism, accountability, excellence, duty, service, honor, integrity and respect for others. How can you tell if a faculty member is truly professional? You can tell by the amount of learning and growth in their students. Faculty members that adhere most strictly to codes of professionalism are not always the most beloved, but they are the most influential.

Question of the Quarter

Can a new graduate practice as an LPN or RN and utilize the title "graduate nurse" with verification that they have passed the appropriate licensure exam before the license is issued?

The answer is no. Practicing nursing without a license is a violation of the nurse practice act and against the law. There are three requirements for licensure: completing an approved nursing program, passing the licensure exam, and completing an application process that includes passing a criminal background check. The Board will not issue a license until all standards are met in each category. Before an Arizona exam applicant is authorized to take NCLEX®, the Board ensures that the educational program of the applicant meets Board standards. The criminal background check ensures that the applicant's past behavior does not indicate a threat to the health, safety, or welfare of the public. A potential reason for a delay in licensure, although rare, is that the Board received a complaint/self report on an applicant, which needs to be resolved before issuing a license.

2004-2006 Education Committee Members

The following individuals have been appointed by the Board to serve on the Education Committee for a 2-year term.

Committee Chair: Kathy Malloch, Ph.D., RN, ASBN Vice- President

Continuing Members:

Linda Riesdorph—Mohave Community College

Marty Mayhew—Pima Community College
Mary Killeen—Arizona State University
Sue MacDonald—Cochise College
Judith Sellers—Northern Arizona University
Teri Britt—Mayo Clinic
Sue Hanauer—J.C. Lincoln Health Network
Joyceen Boyle—University of Arizona

New Members:

Barbara Nubile—Yavapai College
Paula Calcaterra—Central AZ College
Cheryl Roat—Grand Canyon University
Ela-Joy Lehrman—University of Phoenix
Cathy Lucius—Maricopa Community College District Nursing Program
Kathleen Ellis—SouthWest Skill Center/Estrella Mountain Community College
Sherrie Beardsley—Banner Health System
Sue Roe—Performance Dimensions LLC

Board Actions on Education Matters

July 21-23, 2004

- Approved Clinical Nurse Specialist Program at Grand Canyon University
- Granted Estrella Mountain Community College's request to increase the length of the program

- Directed Board staff to conduct a focus site visit of Estrella Mountain Community College/SouthWest Skill Center in October 2004 and that the program submit documentation of faculty changes and impact on students within 10 days of a change in faculty.

- Granted request from Arizona Western College to award LPN certificate after 3 semesters of the nursing program

- Accepted report from Arizona Western College that deficiency in clerical help was remedied and continued approval of the program

- Granted 3-year approval to the Mohave Community College Nursing Program

- Accepted report from Education Committee advising against requiring NCLEX before graduation from a nursing program

- Adopted Competency Model for Certified Nursing Assistants, LPN's, RN's and Advanced Practice Nurses

- Offered a consent agreement for one-year probation to Northland Pioneer Nursing Program

- Approved the Notice of Proposed Rulemaking Article 2—Arizona Professional and Practical Nursing Programs

September 22-24, 2004

- Granted provisional approval to the associate degree multiple exit nursing program at International Institute of the Americas

- Granted proposal approval to Apollo College to establish a nursing program

- Denied application for credential evaluation service from Foreign Credential Services of America

- Dismissed complaint/self report Cochise College nursing program

Education Committee Future Meeting Dates

The Education Committee will meet on the following dates in 2004-05. Meetings start at the time indicated and conclude when business is finished. All meetings are held at the Arizona State Board of Nursing offices at 1651 E. Morten, Ste. 210, Phoenix, AZ. Agendas for each meeting are posted in advance at the Board offices. Dates and times are subject to change up to 24 hours before the meeting. Contact Pamela Randolph at 602-889-5209 (prandolph@azbn.org) or Meredith Fountain at 602-889-5187 (mfountain@azbn.org) to obtain further information regarding the meetings.

October 22, 2004 at 9:30 a.m.

February 11, 2005 at 9:30 a.m.

December 3, 2004 at 9:00 a.m.

April 8, 2005 at 9:30 a.m.

June 3, 2005 at 9:30 a.m.

Arizona State Board of Nursing

Nursing Assistant Programs Current Approved Program List - September 24, 2004

Facility				
Apache Junction Health Care Center	Apache Junction	(480)	983-0700	
Beatitudes Campus of Care	Phoenix	(602)	995-2611	
Beverly Health Care of Chandler dba Chandler Health Care Center	Chandler	(480)	899-6717	
Capri Care Center	Phoenix	(602)	944-1574	
Casa Del Mar Nursing & Rehabilitation Center, Sunbridge	Scottsdale	(480)	994-1333	
Christian Care Nursing Center	Phoenix	(602)	861-3241	
Chula Vista Nursing Home	Mesa	(480)	832-3903	
Citadel Care Center	Mesa	(480)	832-5555	
Copper Mountain Inn	Globe	(928)	425-5721	
Desert Cove Nursing Center	Chandler	(480)	899-0641	
Desert Life Rehabilitation and Care Center	Tucson	(520)	297-8311	
Devon Gables Health Care Center	Tucson	(520)	296-6181	
East Mesa Care Center, Sunbridge	Mesa	(480)	832-8333	
Evergreen Sun City	Sun City	(623)	933-0022	
Evergreen Valley Health & Rehab Center	Mesa	(480)	832-5160	
Gardens Rehab & Care Center, The	Kingman	(928)	718-0718	
Gila River Indian Care Center	Laveen	(520)	430-3813	
Good Shepherd Retirement Community	Peoria	(623)	875-0119	
Handmaker's Jewish Services for the Aging	Tucson	(520)	881-2323	
Havasu Nursing Center	Lake Havasu	(928)	453-1500	
Heather Glen Care Center	Glendale	(623)	842-4025	
Infinia @ Camp Verde	Camp Verde	(928)	567-5253	
Infinia at Flagstaff	Flagstaff	(928)	779-6931	
Infinia@Safford Care Center	Safford	(928)	428-4910	
Kachina Point Healthcare & Rehab	Sedona	(928)	284-1000	
Kivel Campus of Care	Phoenix	(602)	956-3110	
La Canada Care Center	Tucson	(520)	797-1191	
La Colina Health Care	Tucson	(520)	294-0005	
Lake Hills Inn	Lake Havasu City	(928)	505-5552	
Life Care Center at South Mountain	Phoenix	(602)	243-2780	
Life Care Center of North Glendale	Glendale	(602)	843-8433	
Life Care Center of Tucson	Tucson	(520)	575-0900	
Lingenfelter Center	Kingman	(928)	718-4852	

Mi Casa Nursing Center	Mesa	(480)	981-0687	
Mountain View Care Center	Tucson	(520)	797-2600	
Mountain View Manor	Prescott	(928)	778-4837	
Northern Cochise Nursing Home	Willcox	(520)	384-3541	
Payson Care Center	Payson	(928)	474-6896	
Peaks, The	Flagstaff	(928)	774-7160	
Plaza Del Rio Care Center	Peoria	(623)	933-7722	
Prescott Samaritan Village	Prescott	(928)	778-2450	
Prescott Valley Samaritan Center	Prescott Valley	(928)	775-0045	
Quiburi Mission	Benson	(520)	586-2372	
Ridgecrest Health Care	Phoenix	(602)	482-6671	
SilverRidge Village	Bullhead City	(928)	763-1404	
Southern Arizona Veteran's Administration Medical Center	Tucson	(520)	792-1450	
Sun Grove Village Care Center	Peoria	(623)	566-0642	
Sunbridge Catalina Health Care Center	Tucson	(520)	795-9574	
Valley Health Care	Tucson	(520)	296-2306	
Villa Campana Health Care Center	Tucson	(520)	731-8500	
Independent				
Academy for Caregiving - Chapter Classroom - American Red Cross	Phoenix	(602)	347-6501	
Academy for Caregiving @ Humanities & Science	Phoenix	(602)	347-6501	
Academy for Caregiving: East Valley American Red Cross	Phoenix,	(602)	347-6501	
American Red Cross	Phoenix	(602)	336-6674	
Academy for Caregiving				
Banker's NA Program at Desert Highlands	Kingman	(928)	716-3035	
Caring Connection, The	Amado	(520)	398-2090	
Direct Care Giver Association	Tucson	(520)	325-4870	
Dynamic Registry Nursing Assistant Program	Glendale	(623)	435-9000	
Fred G. Acosta Job Corps	Tucson	(520)	792-3015	

WE NEED TO KNOW.....

....IF YOU HAVE CHANGED YOUR ADDRESS RECENTLY

Keeping your address current with the Board of Nursing helps ensure that License or Certification Renewals will reach you in a timely manner, before renewal/expiration date.

For your convenience, you may use this form to submit your address change to the Board of Nursing

Name: _____

License/Certification No: _____

Old Address: _____

Old Phone No: (____) _____

New Address: _____

New Phone No: (____) _____

PRIMARY STATE OF RESIDENCE: _____

Horizon Health Care Inst @ Wickenburg Regional Med Center - Wickenburg AZ	Sierra Vista	(520)	559-4020
Horizon Health Care Inst. @ Las Fuentes - Care Center,Prescott	Sierra Vista	(520)	559-4020
Horizon Health Care Institute	Sierra Vista	(520)	559-4020
Horizon Health Care Institute @ Holy Cross - Nogales	Sierra Vista	(520)	559-4020
Horizon Health Care Inst. @ Infinia of Douglas	Sierra Vista	(520)	559-4020
Medical Services Company	Scottsdale	(480)	860-9552
Phoenix Shanti Group	Phoenix	(602)	279-0008
Referral for Senior Adult Assistance	Mesa	(480)	835-7679
Saunders Asso. @ Chinle Nursing Home	Chinle	(920)	739-4653
SEVEN Healthcare Academy	Tempe	(480)	557-9115
Tuba City Regional Health Care NA Program	Tuba City	(928)	283-2501
Yuma Private Industry Council - Palm View Rehab & Care Center	Yuma	(928)	783-8831
Yuma Private Industry Council @ Life Care Center	Yuma	(928)	344-0425
Yuma Private Industry Council at La Mesa Rehabilitation and Care Center	Yuma	(928)	344-8541
Yuma Private Industry Council at Yuma Nursing Center	Yuma	(928)	726-6700
School			
Arizona Western College	Yuma	(928)	344-7554
AWC Nursing Assistant at La Paz	Parker		
Buckeye Union High School CNA Training Program	Buckeye	(623)	386-4423
Cactus High School CNA Program	Glendale	(623)	412-5000
Catalina High Magnet School	Tucson	(520)	232-8404
Centennial High School	Peoria	(623)	412-4445
Central Arizona College - Signal Peak Campus	Apache Junction	(480)	288-4017
Central Arizona College @ Casa Grand UHS and Casa Verde	Apache Junction	(480)	288-4017
Central Arizona College @ Casa Grande Center	Apache Junction	(480)	288-4017
Central Arizona College @ Santa Cruz High School	Apache Junction	(480)	288-4017
Central Arizona College Aravaipa Campus	Apache Junction	(480)	288-4017
Central Arizona College Superstition Mtn Campus	Apache Junction	(480)	288-4017
Cochise College Douglas	Douglas	(520)	364-7943
Cochise College@Benson High School	Douglas	(520)	417-4016
Cochise College-Sierra Vista	Sierra Vista	(520)	364-7943
Coconino Community College	Flagstaff	(928)	527-1222
Coconino Community College/Page	PAGE	(928)	645-3987
Coconino High School	Flagstaff	(928)	522-6140
College America CNA Program	Flagstaff	(928)	526-0763
Dysart High School	El Mirage	(623)	932-2700
Dysart HS @ Southwest Skill Center	Avondale	(623)	535-2772
East Valley Institute of Technology	Mesa	(480)	461-4094
Eastern Arizona College - Thatcher	Thatcher	(928)	428-8389
Emmanuel Nursing Assistant Training Program	Phoenix	(602)	674-8888
Ethel Bauer School of Nursing	Phoenix	(623)	849-8208
Flagstaff High School	Flagstaff	(928)	773-8135
Gateway CC - EVIT	Phoenix	(602)	286-8529
Gateway Community College	Phoenix	(602)	392-5025
Gila County Community College Dist. - Globe	Globe	(928)	425-8481
Gila County Community College Dist. - Rim Country	Payson	(928)	468-8039
Glendale Community College	Glendale	(623)	845-3264
Globe High School	Globe	(602)	425-3211
Independence H.S.	Glendale	(623)	435-6100
Lamson College	Scottsdale	(480)	898-7000
Maricopa Skill Center	Phoenix	(602)	238-4300
Mesa Community College	Mesa	(480)	461-7106
Mesa Community College/Boswell	Sun City	(623)	974-7837
Mesa Community College /Precision HS Dual Excellent	Phoenix	(602)	453-3661
Metro Tech	Phoenix	(602)	271-2600
Miami High School	Miami	(928)	425-3271

Mingus Union High School	Cottonwood	(928)	634-7531
Mohave Community College @ Kingman	Lake Havasu City	(928)	505-3378
Mohave Community College- Bullhead City	Bullhead City	(928)	505-3378
Mohave Community College-Colorado City	Lake Havasu	(928)	505-3378
Mohave Community College-LHC	Lake Havasu City	(928)	505-3378
Mohave High in Partnership w/Mohave Community College	Bullhead City	(928)	763-0288
Northland Pioneer College	Holbrook	(928)	532-6133
Northland Pioneer College - Hopi Center	Holbrook	(928)	532-6133
Northland Pioneer College - Nat 101 Video,	Holbrook	(928)	532-6133
Northland Pioneer College - Springerville High School	Holbrook	(928)	352-6133
Northland Pioneer College - Wht Mtn Campus/ShowLow	Holbrook	(928)	532-6133
Northland Pioneer College - Winslow - Little Colorado Campus	Holbrook	(928)	532-6133
Northland Pioneer College -Springerville - WMRMC	Holbrook	(928)	532-6133
Northland Pioneer College -Wht Mtn Campus HS	Holbrook	(928)	532-6133
Northwest Education Ctr	Glendale	(623)	845-4066
Page High School	Page	(928)	608-4138
Paradise Valley Community College	Phoenix	(602)	787-7288
Paradise Valley High School fka Paradise Valley Unified School District	Phoenix	(602)	867-5554
Phoenix College	Phoenix	(602)	285-7133
Phoenix Job Corps Center	Phoenix	(602)	254-5921
Pima Community College (CTD)/Desert Vista	Tucson	(520)	295-5113
Pima Community College CTD @ Tucson Medical Center	Tucson	(520)	206-5113
Pima Community College@Manor Care	Tucson	(520)	206-5140
Pima Community College@Villa Campana	Tucson	(520)	206-5140
Pima Community College-West Campus - NRA 101	Tucson	(520)	206-6661
Pima Community College-West-NRS104	Tucson	(520)	206-6661
Pima CTD@Acosta Job Corps	Tucson	(520)	206-5176
Pima Medical Institute/Mesa	Mesa	(480)	898-9898
Saguaro High School	Scottsdale	(480)	443-7200
San Carlos High School	San Carlos	(928)	475-2378
Scottsdale Community College	Scottsdale	(480)	423-6000
Southwest Skill Center @ Estrella Mtn. CC	Avondale	(623)	932-2700
Sunnyside High School	Tucson	(520)	545-5466
Thunderbird - Greenway CNA Program Nursing Assistant Program	Glendale	(602)	588-5775
Thunderbird High School Glendale District	Phoenix	(623)	915-8900
Tucson College	Tucson	(520)	296-3261
Yavapai College@Verde Valley Campus	Prescott	(928)	776-2247
Yavapai Community College-Prescott	Prescott	(928)	778-2450
<i>NOTE: COLLEGE AND/OR VOCATIONAL-BASED PROGRAMS MAY OFFER THE NURSING ASSISTANT TRAINING PROGRAM AT MORE THAN ONE CAMPUS LOCATION.</i>			

Advisory Opinion: The Use of Controlled Substances for the Treatment of Chronic Pain

APPROVED: September 24, 2004

ORIGINATING COMMITTEE: ADVANCED PRACTICE COMMITTEE
STATEMENT OF SCOPE

A nurse practitioner may prescribe controlled substances for the treatment of chronic pain within the nurse practitioner's scope of practice for their specialty area.

RATIONALE

These guidelines are intended to assist nurse practitioners in the responsible use of controlled substances in the treatment of patients with chronic pain. Nurse practitioners who prescribe controlled substances for treatment of patients with chronic pain should use sound clinical judgment, utilizing the following outlined guidelines of responsible professional practice:

I. GUIDELINES FOR THE USE OF CONTROLLED SUBSTANCES FOR THE TREATMENT OF CHRONIC PAIN

The Arizona State Board of Nursing ("Board") urges nurse practitioners to view effective pain management as a high priority in all patients, including children and the elderly. Pain should be assessed and treated promptly, effectively and for as long as pain persists. The medical management of pain should be based on up-to-date knowledge about pain, pain assessment and pain treatment. Pain treatment may involve the use of several drug and non-drug treatment modalities, often in combination. For some types of pain the use of drugs is appropriate and should be pursued; for other types, the use of drugs is better de-emphasized in favor of other therapeutic modalities. Nurse practitioners should have sufficient knowledge or consultation to make such judgments for their patients.

Drugs, in particular the opioid analgesics, are considered the cornerstone of treatment for pain associated with trauma, surgery, medical procedures and cancer. Nurse practitioners are referred to available clinical practice guidelines for the management of these types of pain.

The prescribing of opioid analgesics for other patients with chronic non-cancer pain also may be beneficial, especially when efforts to remove the cause of pain or to treat it with other modalities have been unsuccessful. For the purposes of these guidelines, chronic pain is defined as:

A pain state which is persistent and in which the cause of the pain cannot be removed or otherwise treated. Chronic pain may be associated with a long-term incurable or intractable medical condition or disease. In the generally accepted course of medical practice, no relief or cure of the cause of the pain is possible or none has been found after reasonable efforts including, but not limited to, evaluation by the attending practitioner, physician or surgeon and one or more practitioners, physicians or surgeons specializing in the treatment of the area, system or organs of the body perceived as the source of the pain.

II. GUIDELINES FOR PATIENT CARE WHEN PRESCRIBING CONTROLLED SUBSTANCES FOR CHRONIC PAIN

A) Evaluation of the Patient

Pain assessment should occur during initial evaluation, after each new report of pain, at appropriate intervals after each pharmacological intervention, and at regular intervals during treatment. Unless a patient is terminally ill and death is imminent (in which case the diagnosis is usually evident and diagnostic evaluations may be of little value and discomforting to the patient), the evaluation should include:

1. A medical history and physical examination, which should be conducted and documented in the medical record. The evaluation should include the nature and intensity of the pain, current and past treatments for pain, underlying or coexisting diseases or conditions, the effect of the pain on physical and psychological function, and history of substance abuse. The evaluation should also document the presence of one or more recognized medical indications for the use of a controlled substance. The patient's medical history should be corroborated by reviewing the patient's medical records and/or speaking with the patient's former health care providers.

2. Psycho-social assessment, which may include but is not limited to:

- a. The patient's understanding of the medical diagnosis, expectations about pain relief and pain management methods, concerns regarding the use of controlled substances, and coping mechanisms for pain;

- b. Changes in mood which have occurred secondary

to pain (i.e., anxiety, depression); and

- c. The meaning of pain to the patient and his/her family.

3. Periodic urine drug screen testing for commonly abused street drugs as well as prescription pain drugs that are known abused or diverted drugs. Such screening will help identify drug abusers and drug diverters.

B) Treatment Plan

A treatment plan should be developed for the management of chronic pain and state objectives by which therapeutic success can be evaluated, including:

1. Improvement in pain intensity;
2. Improvement in physical function and/or psychosocial function, e.g., ability to work, need of health care resources, activities of daily living, and quality of social life;

3. Proposed diagnostic evaluations such as blood tests, radiologic exams such as CAT and bone scans, MRI and neurophysiologic exams, and psychological evaluations as indicated;

4. Potential exclusion criteria for opioid management, may include a history of chemical dependency, major psychiatric disorder, chaotic social situation, or a planned pregnancy; and

5. Exploration of other treatment modalities and/or rehabilitation programs as indicated.

C) Informed Consent

The nurse practitioner should discuss the risks and benefits of the use of controlled substances with the patient, persons designated by the patient, or with the patient's designated surrogate or guardian if the patient is incompetent. The patient should be counseled on the importance of regular visits, taking medications as prescribed, and the impact of recreational drug use.

The nurse practitioner and the patient should enter into a pain treatment agreement that specifically states the patient's required compliance with the treatment plan and what the consequences of non-compliance, misuse and abuse will be. It is particularly important that patients understand that they will be discontinued from the prescribed controlled substances in a safe manner and referred for appropriate treatment should it be revealed that they are abusing or diverting drugs.

D) Ongoing Assessment

The assessment and treatment of chronic pain mandates continuing evaluation, and if necessary, modification and/or discontinuation of opioid therapy. The nurse practitioner should monitor patient compliance in medication usage and related treatment plans. If clinical improvement does not occur, the nurse practitioner should consider the appropriateness of continued opioid therapy, and consider a trial of alternative pharmacologic and nonpharmacologic modalities.

E) Consultation

The nurse practitioner should refer the patient as necessary for additional evaluation to achieve treatment objectives. Nurse practitioners should recognize patients requiring individual attention, in particular, patients whose living situations pose a risk for misuse or diversion of controlled substances. The management of pain in patients with a history of substance abuse or with a comorbid psychiatric disorder may require extra care, monitoring, documentation, and consultation with or referral to an expert in the management of such patients.

F) Documentation

Documentation should include, as applicable:

1. The medical history and physical examination;
2. Diagnostic, therapeutic, and laboratory results;
3. Evaluations and consultations;
4. Treatment objectives;
5. Discussion of risks and benefits;
6. Treatments;
7. Medications (including date, type, dosage, and quantity prescribed);
8. Instructions and agreements; and
9. Periodic assessment of treatments and patient response.

Records should remain current and be maintained in an accessible manner and readily available for review.

G) Counting and Destroying Medication

The nurse practitioner may desire to see and count a patient's medication to determine if the patient is taking the medication as prescribed. The patient should display and count the medication in front of the nurse practitioner.

Under no circumstance should the nurse practitioner touch a patient's controlled substances. If the medication must be destroyed, it should be destroyed in accordance with federal guidelines. The nurse practitioner should document this fact in the patient record.

H. Post-Dated Prescriptions

Post-dated prescriptions are illegal in the State of Arizona. Therefore, nurse practitioners may not issue post-dated prescriptions.

I. Referral of Patients with Active Substance Abuse Problems

Patients discovered to have an active substance abuse problem should be referred to either a detoxification and rehabilitation program or to an appropriate maintenance program for substance abusers.

III. COMPLIANCE WITH LAWS AND REGULATIONS

A) Prescribing Controlled Substances

To prescribe controlled substances, nurse practitioners must comply with all applicable laws, including the following:

1. Possess a valid current RN license and certification as an RNP with prescribing and dispensing authority in the State of Arizona;

2. Possess a valid and current controlled substances Drug Enforcement Administration registration for the schedules being prescribed; and

3. Comply with A.A.C. R4-19-507.

B) Dispensing Controlled Substances

To dispense controlled substances, nurse practitioners must comply with all applicable laws, including the following:

1. Possess a valid current RN license and certification as an RNP with prescribing and dispensing authority in the State of Arizona;

2. Possess a valid and current controlled substances Drug Enforcement Administration registration for the schedules being dispensed;

3. Comply with A.A.C. R4-19-507 and R4-19-508; and

4. Comply with 22 CFR 1306.07(a) if controlled substances are dispensed for detoxification.

REFERENCES

Arizona Board of Medical Examiners Substantive Policy Statement #7, Guidelines for the Use of Controlled Substances for the Treatment of Chronic Pain (SPS #7), Revised October, 2003

Model Guidelines for the Use of Controlled Substances for the Treatment of Pain, Federation of State Medical Boards of the United States, May 1998

The Use of Opioids for the Treatment of Chronic Pain: A Consensus Statement from the American Academy of Pain Medicine and American Pain Society, 1996

Promoting Pain Relief and Preventing Abuse of Pain Medications: A Critical Balancing Act (A Joint Statement From 21 Health Organizations and the Drug Enforcement Administration, (heck year)

RESOURCES

Prescription Pain Medications: Frequently Asked Questions and Answers for Health Care Professionals, and Law Enforcement Personnel, U.S. Department of Justice Drug Enforcement Administration, In partnership with: Last Acts Partnership, Pain and Policy Studies Group, University of Wisconsin, 2004

RN/LPN DISCIPLINARY ACTION

July - August - September 2004

* Not reported in previous Newsletter

DATE	NAME	LICENSE	DISCIPLINE	VIOLATIONS
5/19/2004*	Adams, Glenn S.	LP Exam Applicant	License Denied	Misdemeanor, Failure to cooperate.
6/16/2004*	Alvarez, Catherine A.	LP034070	Decree of Censure	Unsafe Practice, Failure to Supervise, Inappropriate Delegation
6/29/2004*	Antrim, Diana M.	LP038791/CNA99995672	Decree of Censure	Drug Abuse, Drug Use on Duty, Drug Related
7/16/2004	Avery, Linda S.	RN118956	Decree of Censure	Practicing Beyond Scope, Misconduct-Theft
7/22/2004	Babalola, Joseph O.	RN Endorsement Applicant	License Denied	Failure to Maintain Minimal Standards, Unsafe Practice, Failure to Intervene
7/12/2004	Bacelli, Angela F.	RN108094	Revocation/Non-Voluntary	Drug Abuse, Drug Diversion, Violating Board Order
7/12/2004	Bailey, Kathy A.	RN044281	Decree of Censure	Documentation Errors
7/22/2004	Baldwin, Brian H.	RN092706	Decree of Censure	Misconduct-Verbal Abuse
7/1/2004	Benninger, Kimberly A.	RN115729	Revocation/Non-Voluntary	Drug Diversion, Failure to Comply with Requirements of Impaired Nurse Program
6/23/2004*	Bixby, Joni J.	RN087611	Voluntary Surrender	Drug Use on Duty
7/21/2004	Brock, Heather A.	RN094826	Probation	Failure to Assess, Failure to Intervene, Medication Errors
5/19/2004*	Brock, Jerry L.	RN Endorsement Applicant	License Denied	Criminal Conviction-Misdemeanor, Failure to cooperate
7/13/2004	Brown, Carroline	RN090127	Probation	Failure to Maintain Minimal Standards, Misconduct-Mental Abuse
8/19/2004	Brown, Shellee E.	RN129452/LP039947	Probation	Criminal Conviction-Misdemeanor, Misconduct-Theft – Client, Drug Abuse
7/16/2004	Budnick, August J.	RN083231	Stayed Revocation w/Suspension	Drug Diversion, Failure to Comply with Requirements of Impaired Nurse Program
6/11/2004*	Carter, Jennifer R.	RN120243	Suspension	Drug Abuse, Violating Board Order
7/21/2004	Chadderton, David W.	RN Endorsement Applicant	APPLICATION WITHDRAWN	Misdemeanor, Alcohol Abuse
5/10/2004*	Cheatham, Douglas L.	RN026404/CRNA0263	Suspension	Criminal Conviction-Misdemeanor, Alcohol Abuse, Failure to Comply with Requirements of Impaired Nurse Program
7/21/2004	Colby-Nielsen, Judith M.	RN044665	Probation	Documentation Errors, Drug Related; Fraud, Deceit
3/24/2004*	Conley, Temar R.	LP Endorsement Applicant	License Denied	Criminal Conviction-Misdemeanor
8/20/2004	Constantine, Denise R.	RN066106	Decree of Censure	Action in Another Jurisdiction
8/12/2004	Craig, Eileen E.	RN073699/LP020980	Voluntary Surrender	Drug Diversion, Failure to Comply with Requirements of Impaired Nurse Program, Drug Related
7/7/2004	Currier, Dorothy	RN046736	Voluntary Surrender	Failure to Comply with Requirements of Impaired Nurse Program, Drug Related
8/19/2004	Dallman, Susan M.	LP Endorsement Applicant	Stayed Suspension w/Probation	Misconduct-False Documentation, Drug Diversion, Action in Another Jurisdiction
6/15/2004*	Dassay, Jo M.	RN080875	Stayed Revocation w/Suspension	Drug Abuse, Alcohol Abuse, Violating Board
8/17/2004	Davis, Mechelle L.	RN119724/LP036795	Decree of Censure	Failure to Assess
7/1/2004	Dooley, Heidi B.	RN100963	Revocation/Non-Voluntary	Violating Board Order
5/21/2004*	Enick, Pamela G.	LP Endorsement Applicant	License Denied	Failure to Maintain Minimal Standards, False Documentation, Action in Another Jurisdiction
8/10/2004	Esquilin, Mittie A.	RN082179	Voluntary Surrender	Drug Abuse, Failure to Comply with Requirements of Impaired Nurse Program
8/18/2004	Falk, Dawn M.	RN093939	Decree of Censure	Fraud, Deceit-Obtaining License, Action in Another Jurisdiction
6/4/2004*	Farnell, Elizabeth	RN082173	Suspension	Unsafe Practice, Drug Abuse, Failure to Comply with Requirements of Impaired Nurse Program
6/14/2004*	Favor, Cathy R.	LP036229	Decree of Censure	Failure to Maintain Minimal Standards, Practicing Beyond Scope, Unprofessional Conduct
3/24/2004*	Fazzino, Salvatore	RN Endorsement Applicant	License Denied	Misdemeanor, Criminal Conviction, Sexual Abuse
7/21/2004	Fernandez, Julie M.	RN047484	Stayed Suspension w/Probation	Documentation Errors, Drug Abuse, Positive Urine Drug Screen
9/15/2004	Fernandez, Julie M.	RN047484	Suspension	Violating Board Order
8/13/2004	Finney, Linda H.	RN106212	Revocation/Non-Voluntary	Drug Abuse, Violating Board Order
6/13/2004*	Garner, Sandra R.	RN097360	Decree of Censure	Incompetent Practice
6/25/2004*	German, Timothy R.	RN080898	Revocation/Non-Voluntary	Positive urine drug screen, Violating Board Order
7/21/2004	Gidley, Jaime S.	RN094970	Decree of Censure	Criminal Conviction-Misdemeanor
7/1/2004	Gorow, Jeff A.	RN046900	Probation	Wastage Errors, Documentation Errors, Drug Related
5/19/2004*	Griffin, Susan M.	LP Endorsement Applicant	License Denied	Felony, Theft – Employer, Failed to respond to Board
8/1/2004	Grochowski, Jacqueline	RN040221	Decree of Censure	Medication Errors
7/1/2004	Hubner, Carol J.	RN088320	Revocation/Non-Voluntary	Drug Related-Positive urine drug screen, Violating Board Order
7/1/2004	Hull, Karen H.	LP005334	Decree of Censure	Failure to Maintain Minimal Standards, Documentation Errors
5/21/2004*	Jewett, Ronald A.	LP Endorsement Applicant	License Denied	Drug Diversion, Action in Another Jurisdiction
5/20/2004*	Johnson, Carla D.	RN070949	Suspension	Criminal Conviction-Misdemeanor, Alcohol Abuse, Drug Related
3/24/2004*	Jones, Lisa A.	RN Endorsement Applicant	License Denied	Criminal Conviction-Felony, Fraud, Deceit-Obtaining License
7/22/2004	Kennedy, Lezlie A.	LP037615	Decree of Censure	Theft – Employer
6/21/2004*	Kim, Hyesook	LP030890/CNA819361613	Decree of Censure	Failure to Maintain Minimal Standards, Unsafe Practice, Failure to Follow Orders
8/25/2004	Kindelspire, Kathleen M.	RN104452	Revocation/Non-Voluntary	Drug Abuse, Violating Board Order

*RN/LPN Disciplinary Action cont. from pg. 29***RN/LPN DISCIPLINARY ACTION****July - August - September 2004**

* Not reported in previous Newsletter

<i>DATE</i>	<i>NAME</i>	<i>LICENSE</i>	<i>DISCIPLINE</i>	<i>VIOLATIONS</i>
7/21/2004	Knoettgen, Sheri K.	LP037292	Stayed Revocation w/Probation	Documentation Errors, Drug Abuse, Violating Board Order
8/13/2004	Kovalcik, Shannon M.	RN111951	Probation Completed	
6/10/2004*	Lancaster, Carolyn J.	RN092645	Decree of Censure	Positive urine drug screen
7/22/2004	Lee, Laura S.	LP030473	Decree of Censure	Practicing Beyond Scope
7/1/2004	Lester, Linda E.	RN115200	Revocation/Non-Voluntary	Documentation Errors, Drug Related, Violating Board Order
8/4/2004	Lungwitz, Theresa A.	RN086077	Decree of Censure	Failure to Maintain Minimal Standards, Documentation Errors
6/17/2004*	Macias, Valery F.	RN120155	Decree of Censure with Fine	Medication Errors, False Documentation
6/25/2004*	Mack, Norman N.	LP018901	Probation Completed	
8/2/2004	Maloney, Caroline R.	RN119251	Decree of Censure with Fine	Practicing without License
6/18/2004*	Maloney, Cynthia	LP030744	Decree of Censure	Documentation Errors
7/1/2004	Maloney, Jeffrey R.	RN095109	Revocation/Non-Voluntary	Drug Diversion, Failure to Comply with Requirements of Impaired Nurse Program
5/21/2004*	Marinello, Karen K.	LP Endorsement Applicant	License Denied	Drug Abuse, Alcohol Abuse, Action in Another Jurisdiction
5/19/2004*	Marvin, Arthur K.	RN Endorsement Applicant	License Denied	Criminal Conviction-Misdemeanor, Alcohol Related
7/1/2004	Meisse, Linda A.	LP037981	Decree of Censure with Fine	Physical Abuse
9/14/2004	Mullen, Priscilla	LP034798	Voluntary Surrender	Drug Abuse, Failure to Comply with Requirements of Impaired Nurse Program
7/21/2004	Newman, Jennifer L.	RN115285	Probation Completed	
7/16/2004	Nwosu, Jude N.	RN114528	Voluntary Surrender	Incompetent Practice, Unsafe Practice, Documentation Errors
8/19/2004	O'Brien, Robert W.	RN125649	Probation	Criminal Conviction-Misdemeanor, Alcohol Abuse
6/18/2004*	Ortiz, Henry G.	LP022420	Voluntary Surrender	Criminal Conviction-Misdemeanor, Misconduct-Verbal Abuse
6/16/2004*	Pate, Kelsie D.	RN128151	Probation	Misdemeanor- Alcohol Related, Alcohol Abuse
8/30/2004	Peltz, Andrea S.	RN057428	Stayed Suspension w/Probation	Drug Abuse, Drug Use on Duty, Drug Diversion
8/22/2004	Perry, Cynthia L.	LP035799	Decree of Censure	Documentation Errors, Practicing Beyond Scope
8/3/2004	Pranke, Kristi A.	RN071157	Stayed Revocation w/Suspension	Drug Diversion, Failure to Comply with Requirements of Impaired Nurse Program
6/17/2004*	Prats, Gail G.	RN072526	Stayed Revocation w/Probation	Alcohol Abuse, Violating Board Order
7/1/2004	Remmers, Janice L.	LP029569/CNA164112103	Revocation/Non-Voluntary	Violating Board Order
1/22/2004*	Ritten, Therese F.	LP Endorsement Applicant	License Denied	Fraud, Deceit-Obtaining License
7/1/2004	Roberge, Judith M.	RN059282/AP0466	Voluntary Surrender	Alcohol Abuse
7/22/2004	Rodgers, Dianne E.	RN120630	Decree of Censure	Practicing Beyond Scope
3/24/2004*	Sarhan, Mark	RN Endorsement Applicant	License Denied	Criminal Conviction-Felony-Against Person, Sexual Misconduct
6/23/2004*	Schmidt, Connie K.	LP006672	Decree of Censure	Failure to Supervise, Documentation Errors
7/1/2004	Schreck, Sheryl V.	LP011748	Revocation/Non-Voluntary	Theft – Employer, Failure to Comply with Requirements of Impaired Nurse Program, Drug Related-Other
7/21/2004	Simpson, Barry A.	RN063242	Probation	Documentation Errors
8/20/2004	Soulik, Bareana	LP032393	Probation	Drug Related
7/6/2004	St. James, Katherine T.	RN041790	Voluntary Surrender	Positive Urine Drug Screen
6/25/2004*	Tiede, Benjamin B.	RN093484	Probation	Alcohol Abuse
8/10/2004	Tiede, Benjamin B.	RN093484	Voluntary Surrender	Alcohol Abuse
1/22/2004*	Tiedemann, Laine C.	RN Endorsement Applicant	License Denied	Action in Another Jurisdiction, Practicing without License
3/4/2004*	Tucker, Randy R.	RN Endorsement Applicant	License Denied	Criminal Conviction-Felony, Failure to Maintain Minimal Standards
8/10/2004	Valandry, Kelly D.	RN058286	Voluntary Surrender	Drug Abuse
3/24/2004*	Vissert-Hooft, Virginia A.	RN Endorsement Applicant	License Denied	Criminal Conviction-Felony, Criminal Conviction-Drug Related
6/10/2004*	Wartz, Kaye E.	RN128123	Decree of Censure	Fraud, Deceit, Practicing without a license
7/21/2004	Weaver, Rose M.	RN093868	Probation	Failure to Intervene, Medication Errors, Misconduct-False Documentation
5/19/2004*	Williams, Stacey	LP Endorsement Applicant	License Denied	Misdemeanor, Fraud, Deceit, Failure to cooperate
7/7/2004	Wormell, Karen L.	RN087133	Decree of Censure	Failure to Follow Orders, Failure to Assess
7/22/2004	Wright, Kenneth T.	LP037077	Probation	Criminal Conviction-Misdemeanor, Boundaries, Sexual Misconduct
7/1/2004	Wright, Mary G.	LP000033006	Revocation/Non-Voluntary	Documentation Errors, Drug Related, Failure to cooperate
7/1/2004	Yarbrough, John D.	RN119167	Revocation/Non-Voluntary	Failure to Comply with Requirements of Impaired Nurse Program
4/20/2004*	Young, Leslie D.	LP026109	Stayed Revocation w/Probation	Drug Abuse, Drug Diversion, Failure to Comply with Requirements of Impaired Nurse Program

CNA DISCIPLINARY ACTION

July - August - September 2004

* Not reported in previous Newsletter

DATE	NAME	LICENSE	DISCIPLINE	VIOLATIONS
8/30/2004	Bahe, Carol L.	CNA1000002879	Suspension	Criminal Conviction-Misdemeanor; Alcohol Abuse
7/1/2004	Bailey, Michelle K.	CNA999952235	Revocation/Non-voluntary	Criminal Conviction-Misdemeanor; Drug Related
4/19/2004*	Bankhead, Lola R.	CNA284814070	Civil Penalty	Criminal Conviction-Misdemeanor; Failure to Cooperate
7/21/2004	Barlow, Lilly	CNA189458353	Suspension Cleared	
7/23/2004	Barnes, John J.	CNA Applicant	Certificate Denied	Criminal Conviction-Misdemeanor; Failure to Cooperate
7/21/2004	Begay, Alberta	CNA999947883	Stayed Suspension Cleared	
6/13/2004*	Bell, Shawn D.	CNA100000222	Civil Penalty	Criminal Conviction-Misdemeanor, Against Person
4/5/2004*	Bennett, Shaunna M.	CNA1000001640	Civil Penalty	Criminal Conviction-Misdemeanor
7/28/2004	Bennett, Shaunna M.	CNA1000001640	Suspension	Violating Board Order
9/7/2004	Blair, David W.	CNA723074333	Revocation/Non-voluntary	Adjudication; Violating Board Order
9/7/2004	Bostwick, Georgia I.	CNA724917406	Revocation/Non-voluntary	Criminal Conviction-Misdemeanor; Violating Board Order; Failure to Cooperate
9/7/2004	Buchanan, Robin E.	CNA724553039	Revocation/Non-voluntary	Misconduct; Drug Related
7/1/2004	Byrd, John W.	CNA591777640	Revocation/Non-voluntary	Violating Board Order
9/7/2004	Cammiso, Joseph M.	CNA208641179	Revocation/Non-voluntary	Alcohol Abuse; Failure to Cooperate
6/23/2004*	Campbell, Hallie C.	CNA Applicant	Civil Penalty	Criminal Conviction-Misdemeanor; Drug Related
9/7/2004	Carbone, Mary Lou	CNA638866803	Revocation/Non-voluntary	Drug Related; Violating Board Order
7/23/2004	Carmichael, Genevieve M.	CNA Applicant	Certificate Denied	Criminal Conviction-Misdemeanor; Unprofessional Conduct; Failure to Cooperate
5/20/2004*	Chavez, Victoria J.	CNA999949017	Certificate Denied	Criminal Conviction-Misdemeanor; Alcohol Abuse; Failure to Cooperate
5/20/2004*	Chesshir, Sarah J.	CNA Applicant	Certificate Denied	Failure to Cooperate
5/20/2004*	Clarke, Willie	CNA Applicant	Certificate Denied	Criminal Conviction; Fraud/Deceit; Failure to Cooperate
9/7/2004	Clements, Jacquelin D.	CNA186855990	Revocation/Non-voluntary	Criminal Conviction-Misdemeanor; Obtaining Certificate by Fraud; Failure to Cooperate
4/5/2004*	Cody, Roseita A	CNA1000001364	Civil Penalty	Criminal Conviction-Against Person, Against Property
5/25/2004*	Cooke, Sarah K.	CNA1000001990	Civil Penalty	Criminal Conviction-Misdemeanor, Against Person
9/7/2004	Copas, Glenda A.	CNA 097331803	Revocation/Non-voluntary	False Documentation; Theft - Client; Fraud/Deceit
9/13/2004	Coris, Tara D.	CNA1000001591	Suspension	Violating Board Order
7/1/2004	Crater, Augusta D.	CNA827889003	Civil Penalty	Criminal Conviction-Misdemeanor, Against Person
7/1/2004	Dahl, Amy S.	CNA725615773	Revocation/Non-voluntary	Criminal Conviction-Felony; Criminal Conviction-Against Property
7/1/2004	Daniels, Arthur	CNA529472710	Revocation/Non-voluntary	Physical Abuse; Verbal Abuse; Sexual Misconduct; Obtaining Certificate by Fraud
7/28/2004	Davis, Shauniece D.	CNA477987713	Suspension	Violating Board Order
7/1/2004	Demara, Toni M.	CNA335617441	Revocation/Non-voluntary	Criminal Conviction-Misdemeanor; Obtaining Certificate by Fraud; Violating Board Order
3/31/2004*	Duarte, Jessica L.	CNA1000001300	Civil Penalty	Criminal Conviction-Misdemeanor, Drug Related
4/12/2004*	Egbo, Bartholomew T.	CNA999999045	Civil Penalty	Verbal Abuse
9/7/2004	Evans, Carla	CNA999947005	Revocation/Non-voluntary	Criminal Conviction-Misdemeanor; Drug Related; Failure to Cooperate
1/22/2004*	Ford, Shelly D.	CNA Applicant	Certificate Denied	Failure to Cooperate; Fraud/Deceit
3/24/2004*	Fowler, Darlene M.	CNA Applicant	Certificate Denied	Criminal Conviction-Felony; Obtaining Certificate by Fraud; Practicing without certificate
3/24/2004*	Frazier, Shaylynn L.	CNA Applicant	Certificate Denied	Criminal Conviction-Felony; Obtaining Certificate by Fraud
5/20/2004*	Garcia, Arturo V.	CNA Applicant	Certificate Denied	Failure to Follow Orders; Misconduct; Boundaries
7/6/2004	Garcia, Graciela V.	CNA Applicant	Stayed Suspension	Drug Abuse; Drug Related
4/7/2004*	Goe, Sally Y.	CNA999948720	Stayed Suspension	Failure to Maintain Minimal Standards; Verbal Abuse
9/7/2004	Grajeda, Lupe	CNA808426803	Revocation/Non-voluntary	Criminal Conviction-Misdemeanor; Leaving Duty Station; Violating Board Order
5/3/2004*	Greenberg, Alvin A.	CNA137969903	Stayed Suspension	Criminal Conviction-Misdemeanor; Alcohol Abuse
1/21/2004*	Gresham, Tamara S.	CNA Applicant	Certificate Denied	Criminal Conviction-Misdemeanor, Against Person
8/9/2004	Gustad, Leif N.	CNA1000002676	Civil Penalty	Criminal Conviction-Against Person; Failure to Cooperate
9/7/2004	Guzman, Naomi C.	CNA706065103	Revocation/Non-voluntary	Drug Related; Failure to Cooperate
5/19/2004*	Hall, Kelley M.	CNA999991876	Civil Penalty	Physical Abuse; Failure to Cooperate
5/20/2004*	Hall, Vincent L.	CNA Applicant	Certificate Denied	Criminal Conviction-Against Person; Failure to Cooperate

*CNA Disciplinary Action cont. from pg. 31***CNA DISCIPLINARY ACTION****July - August - September 2004**

* Not reported in previous Newsletter

<i>DATE</i>	<i>NAME</i>	<i>LICENSE</i>	<i>DISCIPLINE</i>	<i>VIOLATIONS</i>
6/24/2004*	Hamlin, John R.	CNA99999054	stayed suspension	Drug Abuse
9/7/2004	Hand, Danya C.	CNA999995245	Revocation/Non-voluntary	Violating Board Order, Drug Related
9/7/2004	Harter, Susan M.	CNA006679783	Revocation/Non-voluntary	Criminal Conviction-Felony; Fraud/Deceit; Theft - Client
9/7/2004	Haske, Julie	CNA532142803	Revocation/Non-voluntary	Physical Abuse; Failure to Cooperate
7/1/2004	Heinssen, Wendy K.	CNA838938803	Revocation/Non-voluntary	Criminal Conviction-Drug Related; Theft - Client; Misconduct
7/29/2004	Heng, Jane E.	CNA250832842	Stayed Revocation	Drug Related
9/7/2004	Hill, Beverly	CNA002341346	Revocation/Non-voluntary	Misconduct; Unprofessional Conduct
4/1/2004*	Holyfield, Shawna M.	CNA1000001363	Civil Penalty	Criminal Conviction-Against Person; Misconduct
9/7/2004	Hunt, Crystal	CNA058341034	Revocation/Non-voluntary	Practicing Beyond Scope; Obtaining Certificate by Fraud; Violating Board Order
5/20/2004*	Ingoldsby, Arthur L.	CNA Applicant	Certificate Denied	Criminal Conviction-Against Property; Unprofessional Conduct; Failure to Cooperate
7/21/2004	Jennings, Missy	CNA066129110	Stayed Suspension Cleared	
8/4/2004	Johnson, Brian D.	CNA999946984	Civil Penalty	Practicing Beyond Scope; Unprofessional Conduct; False Documentation
3/26/2004*	Johnson, Sherry D.	CNA Applicant	Certificate Denied	Criminal Conviction - Against Person, Alcohol Related, Failure to Cooperate; Practicing without certificate;
9/7/2004	Jones, Eric W.	CNA531182803	Revocation/Non-voluntary	Drug Abuse; Alcohol Abuse
6/3/2004*	Jones, Theresa M	CNA Applicant	Civil Penalty	Criminal Conviction-Drug Related
7/8/2004	Joseph, Sharon P.	CNA593027803	Suspension	Violating Board Order, Criminal Conviction Misdemeanor, Alcohol Abuse.
5/28/2004*	Kearns, Michael D.	CNA Applicant	Civil Penalty	Criminal Conviction-Against Person; Theft Related
6/1/2004*	Kolasinski, Joldie K.	CNA131718641	Civil Penalty	Unsafe Practice
7/1/2004*	Krause, John A.	CNA999990142	Revocation/Non-voluntary	Leaving Duty Station; Physical Abuse; Violating Board Order
7/21/2004	Labrie, Jill M.	CNA982903726	Stayed Revocation	Drug Abuse; Drug Related; Violating Board Order
5/26/2004*	Latham, Jacquelyn S.	CNA1000001941	Civil Penalty	Misconduct - Drug Related
5/21/2004*	Lewis, Jennifer A.	CNA1000001901	Civil Penalty	Criminal Conviction-Misdemeanor; Theft Related
7/1/2004	Leyva, Megan M.	CNA375218999	Revocation/Non-voluntary	Criminal Conviction-Misdemeanor; Violating Board Order
5/20/2004*	Lively, Regina D.	CNA Applicant	Certificate Denied	Criminal Conviction-Misdemeanor; Theft - Employer; Failure to Cooperate
4/27/2004*	Mackey, Annette G.	CNA1000001596	Revocation/Non-voluntary	Drug Abuse; Violating Board Order
7/1/2004	Martinez, Christina S.	CNA230461103	Revocation/Non-voluntary	Theft - Client; Misconduct
5/22/2004*	Matheny, Taiana L.	CNA1000001929	Civil Penalty	Criminal Conviction-Misdemeanor; Alcohol Abuse
5/20/2004*	McAlpin, Matthew A.	CNA Applicant	Certificate Denied	Criminal Conviction; Obtaining Certificate by Fraud
4/22/2004*	McDaniel, Diane I.	CNA050513489	Civil Penalty	Failure to Maintain Minimal Standards; Physical Abuse
9/7/2004	Mendivil, Jorge A.	CNA999991565	Revocation/Non-voluntary	Criminal Conviction-Felony; Obtaining Certificate by Fraud
9/7/2004	Messina, Jessica F.	CNA999992172	Revocation/Non-voluntary	Misconduct, Unsafe Practice, Failure to Follow Orders
6/14/2004*	Miranda, Rose M.	CNA999950297	stayed suspension	Drug Abuse
8/9/2004	Miranda, Rose M.	CNA999950297	Suspension	Violating Board Order
8/10/2004	Molina, Benjamin H.	CNA999992519	Suspension	Violating Board Order
4/7/2004*	Morales Beltran, Raymond E.	CNA1000001369	Civil Penalty	Misconduct; Failure to Maintain Minimal Standards; Failure to Follow Orders; Practicing without certificate;
7/28/2004	Morales, Annette	CNA848220353	Suspension	Violating Board Order
4/21/2004*	Morales, Annette	CNA848220353	Civil Penalty	Misconduct; Practicing without certificate; Failure to Cooperate
5/13/2004*	Navas, Rafael O.	CNA999991982	Voluntary Surrender	Fraud/Deceit
4/11/2004*	Nelson, Stefanie D.	CNA999994078	Civil Penalty	Physical Abuse
8/4/2004	Olcan, Natalija	CNA999995612	Civil Penalty	Drug Related
7/1/2004	Oles, Lavon M.	CNA999991991	Revocation/Non-voluntary	Failure to Follow Orders; Neglect; Verbal Abuse
9/7/2004	Pablo, Jennifer	CNA827837103	Revocation/Non-voluntary	Drug Related; Violating Board Order
9/7/2004	Parker, Timothy A.	CNA718058173	Revocation/Non-voluntary	Misconduct; Sexual Misconduct; Violating Board Order
9/7/2004	Parra, Anna	CNA321567803	Revocation/Non-voluntary	Misconduct - Financial Exploitation
8/10/2004	Perez, Roberta	CNA 567363103	Voluntary Surrender	Criminal Conviction-Misdemeanor; Obtaining Certificate by Fraud, Alcohol Abuse
4/2/2004*	Peterson, Tina M.	CNA Applicant	Civil Penalty	Criminal Conviction-Misdemeanor; Failure to Cooperate

CNA Disciplinary Action cont. from pg. 32

CNA DISCIPLINARY ACTION**July - August - September 2004**

* Not reported in previous Newsletter

<i>DATE</i>	<i>NAME</i>	<i>LICENSE</i>	<i>DISCIPLINE</i>	<i>VIOLATIONS</i>
5/20/2004*	Poolaw, Ramona C.	CNA Applicant	Certificate Denied	Criminal Conviction-Drug Related; Failure to Cooperate
7/1/2004	Pulbratek, Shawna R.	CNA999991886	Civil Penalty	Criminal Conviction Misdemeanor;
8/13/2004	Qendraj, Doreida	CNA100002830	Civil Penalty	Misconduct
7/11/2004	Quihuis, Teresa A.	CNA100002374	Civil Penalty	Criminal Conviction-Drug Related; Failure to Cooperate
4/6/2004*	Reaves, Bonnie R.	CNA999994111	Stayed Suspension	Failure to Maintain Minimal Standards; Incompetent Practice
5/20/2004*	Robles, Donato V.	CNA Applicant	Civil Penalty	Drug Related
8/12/2004	Rodriguez, Carolyn F.	CNA530015803	Revocation/Non-voluntary	Violating Board Order
9/7/2004	Romo, Nubia L.	CNA99999257	Revocation/Non-voluntary	Criminal Conviction-Felony; Drug Related, Failure to Cooperate
9/7/2004	Ruffin, Gary	CNA999950121	Revocation/Non-voluntary	Criminal Conviction-Felony; Drug Abuse
5/20/2004*	Russell, Charles E.	CNA Applicant	Certificate Denied	Criminal Conviction-Against Person; Obtaining Certificate by Fraud; Fraud/Deceit
3/26/2004*	Salazar, Gabriel A.	CNA Applicant	Certificate Denied	Criminal Conviction-Misdemeanor; Criminal Conviction-Against Person; Alcohol Abuse; Failure to Cooperate;
6/21/2004*	SantaMaria, Rene	CNA999992125	Revocation/Court Ordered	Criminal Conviction-Felony; Fraud/Deceit; Theft - Client
9/7/2004	Scholl, Darla J.	CNA999947699	Revocation/Non-voluntary	Criminal Conviction-Misdemeanor; Alcohol Abuse
3/26/2004*	See, Veronica L.	CNA Applicant	Certificate Denied	Criminal Conviction-Misdemeanor; Unprofessional Conduct; Failure to Cooperate
6/10/2004*	Sharma, Sonia	CNA Applicant	Civil Penalty	Misconduct; Unprofessional Conduct
7/21/2004	Shotwell, Cecelia	CNA999991649	Stayed Suspension Cleared	
9/7/2004	Skaggs, Tammy M.	CNA999950886	Revocation/Non-voluntary	Criminal Conviction-Against Property; Incompetent Practice; Obtaining Certificate by Fraud
7/1/2004	Smith, Leticia R.	CNA999952933	Revocation/Non-voluntary	Criminal Conviction-Felony
9/7/2004	Smith, Rebecca A.	CNA999947214	Revocation/Non-voluntary	Drug Abuse; Drug Related; Failure to Cooperate
9/7/2004	Sorensen, Fred B.	CNA460053463	Revocation/Non-voluntary	Drug Related, Drug Abuse
7/21/2004	Southwood, Patricia	CNA999948360	Civil Penalty	Misconduct
1/12/2004*	Spangler, Pamela J.	CNA Applicant	Civil Penalty	Criminal Conviction-Misdemeanor - Against Property
7/21/2004	Stanton, Sheila	CNA999992874	Suspension Cleared	
3/24/2004*	Stewart, Allison L.	CNA Applicant	Certificate Renewal Denied	Criminal Conviction-Felony, Drug Abuse Obtaining Certificate by Fraud;
5/27/2004*	Stone, Virginia A.	CNA100002003	Civil Penalty	Failure to Cooperate
4/1/2004*	Thompson, Connie D.	CNA Applicant	Civil Penalty	Misconduct; Failure to Cooperate
5/20/2004*	Tilley, Anthony	CNA Applicant	Certificate Denied	Criminal Conviction; Obtaining Certificate by Fraud; Failure to Cooperate
7/1/2004	Tillman, Loretta S.	CNA941123103	Revocation/Non-voluntary	Criminal Conviction-Felony
3/26/2004*	Tillman, Lynette D.	CNA Applicant	Certificate Denied	Misconduct - Theft Related; Failure to Cooperate
9/7/2004	Turner, Betty J.	CNA022575103	Revocation/Non-voluntary	Neglect; Misconduct; Fraud/Deceit
9/7/2004	Vesbach, Michele A.	CNA999950451	Revocation/Non-voluntary	Drug Abuse; Failure to Cooperate
7/1/2004	Villalpando, Sheila M.	CNA051731103	Revocation/Non-voluntary	Criminal Conviction-Felony
4/22/2004*	Wainwright, Betty A.	CNA100001549	Stayed Suspension	Criminal Conviction-Misdemeanor; Drug Abuse; Alcohol Abuse
9/7/2004	Waitley, Timothy S.	CNA999994750	Revocation/Non-voluntary	Physical Abuse; Fraud/Deceit; Failure to Cooperate
5/19/2004*	Wallace, Alvin B.	CNA073704353	Stayed Suspension	Criminal Conviction-Misdemeanor
8/10/2004	Wallace, Alvin B.	CNA073704353	Suspension	Violating Board Order
4/30/2004*	Welch, Tiffany R.	CNA486065803	Civil Penalty	Failure to Maintain Minimal Standards; Leaving Duty Station
5/31/2004*	Whitman, Kassandra J.	CNA99999202/RN Applicant	Decree of Censure	Drug Abuse
5/25/2004*	Worman, Shannon L.	CNA156208009	Civil Penalty	Criminal Conviction-Misdemeanor; Fraud/Deceit
9/7/2004	Zaragoza, Ysenia M	CNA999995466	Revocation/Non-voluntary	Drug Related; Failure to Cooperate