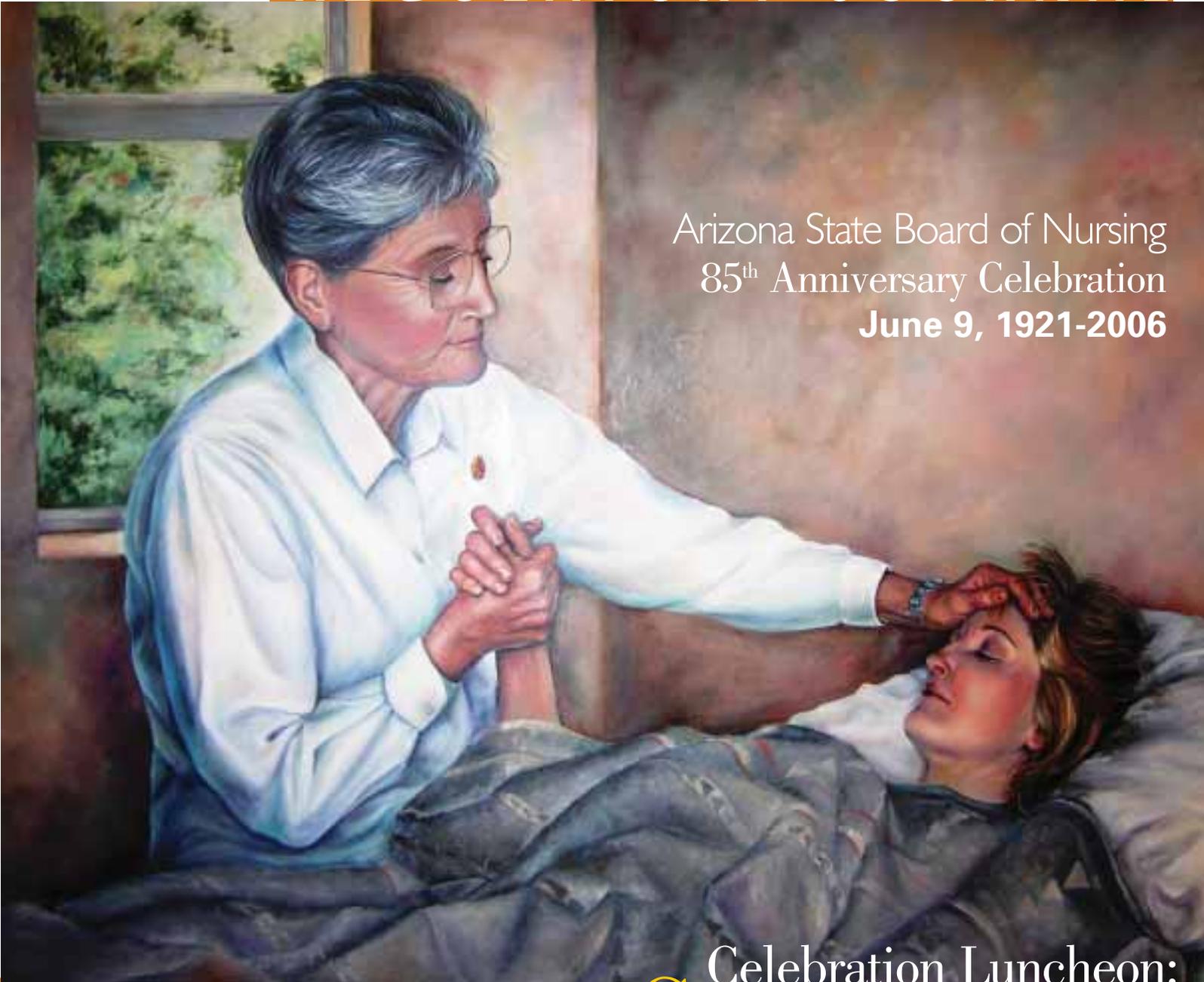


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2ND QUARTER

REGULATORY JOURNAL



Arizona State Board of Nursing
85th Anniversary Celebration
June 9, 1921-2006

Celebration Luncheon:

Governor's Task Force
on the **Nursing Shortage**

REDUCING HARM:

Common Signs of Substance Abuse
& Impaired Practice

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ARIZONA STATE BOARD OF NURSING
4747 North 7th Street, Suite 200
Phoenix, AZ 85014-3653
Phone: 602.889.5150
Main fax: 602.889.5155
CANDO fax: 602.889.5238
General e-mail: arizona@azbn.gov
Website: www.azbn.gov

GOVERNOR

The Honorable Janet Napolitano

Joey Ridenour, RN, MN
EXECUTIVE DIRECTOR

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ASSOCIATE DIRECTOR/OPERATIONS

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CREATED BY:

Virginia Robertson, PRESIDENT
vrobertson@pcipublishing.com
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Steve McPherson
smcpherson@pcipublishing.com
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Sue Hanauer,
VP Patient
Care Services,
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Above: Commissioned in 1995 by Joey Ridenour for the 75th anniversary of AzBN. The Oil Painting resides in the front lobby of the Board Office. The artist is R. Elaine Davis.

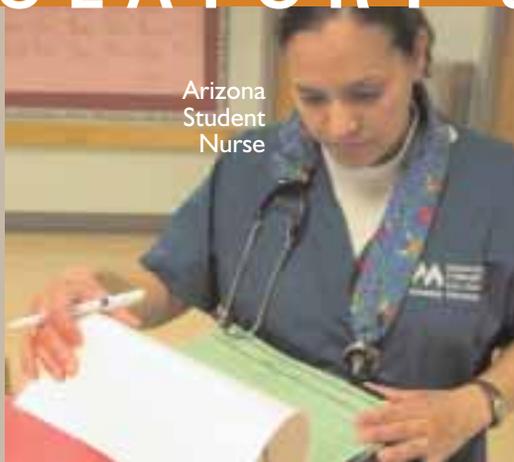
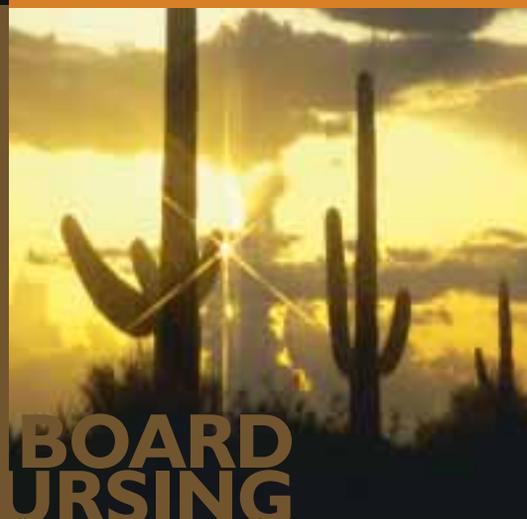
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from the executive director
JOEY RIDENOUR, RN, MN

FOURTEEN PRINCIPLES of Nursing Regulation

I had the pleasure of attending the March 2006 National Council of State Boards of Nursing Midyear Meeting. For the “first time ever”, 20 Executive Directors of Boards of Medicine and 45 Executive Officers of Boards of Nursing spent the day collectively discussing how we should “Ensure Safe Practitioners Through Collaboration & Regulatory Excellence.” Barbara Safriet, Associate Dean, Yale Law School moderated the process as well as presented her thoughts and reflections on the future of health care regulation.

As the Arizona State Board of Nursing nears its 85th Anniversary, I believe that the shared principles provided at the meeting are timeless and will be “guiding principles” for nursing regulation for the near future and perhaps decades to come.

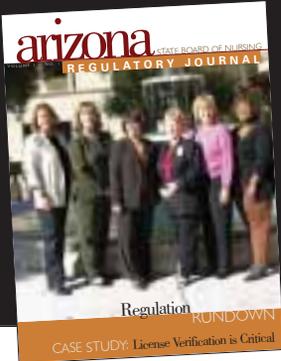
Dean Safriet provided the following General Principles of Regulation:

- 1.) Do the least possible required in statute/rules to achieve the goal identified.
- 2.) Don't create general statutes/rules for specific problems. When you create a general solution to a specific problem you create more problems.
- 3.) Gather, share and analyze information with other health professions. Understand the origins & contexts of the problems or issues. Analyze and connect the dots for knowledge.
- 4.) Explain what the problem is and how this regulatory change will work to address the issue.
- 5.) Be thoughtful about minimizing unintended consequences. When changing scopes of practice, be aware of other health professional roles and anticipate problems that could create consumer issues.
- 6.) Don't decrease access and increase costs when planning to change educational requirements.
- 7.) Be more active in testifying before the legislature on patient safety issues.
- 8.) As regulatory boards, demonstrate three key competencies: information, cooperation and respect.
- 9.) Mind the store, identify priorities and don't get distracted.
- 10.) Promote best practices related to safe patient care.
- 11.) Be active but not manic.
- 12.) Protect and promote the public interest.
- 13.) When educating others on scope of practice issues get beyond “us and them” and get to “we”.
- 14.) Be mindful of the actions of others that would diminish the Boards ability to regulate.

Finally, know that the recent office move to our new space at 4747 N. 7th Street, Phoenix, Arizona may have created disruption in services to you. By now the old office space on 1651 E Morten will be have been “bladed” to ready the grounds for a new development. Those attempting to access the prior address will not have the traditional building notification that AzBN has moved. Your assistance in getting information to your employees is appreciated.

Joey Ridenour, RN, MN
EXECUTIVE DIRECTOR

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from the president

KATHY MALLOCH PHD, MBA, RN



It gives me great pleasure to welcome our two new board members, Steve Robertson LPN member and Hunter Perry, public member. Steve and Hunter joined us for their first meeting in March and now bring the board to its full 9-member compliment. Both bring unique skills and experiences that will certainly enrich the quality of the board's decision making process in assuring public protection.

As most of you know, the board and staff continue to work aggressively to assure timely management of complaints (average time from complaint to board meeting is now 6.4 months!) as well as continuing to examine issues related to the overall regulatory processes. Recently, two issues have generated significant dialogue and differing opinions; the National Council of State Boards of Nursing (NCSBN) Draft Advanced Practice Vision paper and the issuance of a notice of deficiency to Excelsior College.

NCSBN Draft Advanced Practice Vision Paper • One issue that is being vigorously debated and examined is the NCSBN Advanced Practice Vision paper. This document, released in February 2006 by the board of directors of NCSBN as recommended by the Advanced Practice committee, presents a vision for nurse practitioners, certified registered nurse anesthetists, midwives, and clinical nurse specialists. The document was presented after three years of study, debate and dialogue by the NCSBN Advanced Practice Committee. The anticipated next phase of the process is to gather input, evidence, and recommendations to continue the debate at the NCSBN Delegate Assembly meeting in August 1-4, 2006 in Salt Lake City, Utah.

At the March 2006 meeting, the Arizona State Board of Nursing referred the document to the Advanced Practice Committee for review of the substance of the paper, review of comments from nurses in Arizona and other national organizations and to make recommendations to the board at its May 2006 meeting. A link on the Arizona board website to elicit comments and recommendations will also be created to allow nurses from across the state to share their opinions.

Excelsior College • As many of you are aware, Excelsior College is an external degree program that does not offer classroom or clinical instruction. The college awards credit by transfer from a regionally accredited institution or testing. To address the need for clinical instruction, Excelsior requires that applicants have a healthcare background which could include LPN, foreign physician, paramedic, respiratory therapist or military corpsman. To obtain clinical experience applicants are urged to practice in their present job role and seek an RN mentor to observe. Excelsior does not help students obtain a mentor. Students are tested on clinical skills during a two and a half day exam CPNE (Clinical Practice in Nursing Exam). The student is not tested in all areas of nursing in the CPNE.

The Arizona board approved Excelsior College (then Regents) to conduct clinical testing at Maricopa Medical Center in the 1990s. In 1997, the Arizona Board of Nursing Education committee requested Regents/Excelsior to address concerns related to the clinical instruction in their program and apparent lack of clinical

continued on Page 8

skills in some graduates investigated for unprofessional conduct.

In 2004, Excelsior lost their contract with Maricopa and obtained a contract with Banner Desert Medical Center. Staff at Banner Desert requested that Excelsior provide proof that it was a board-approved program. Excelsior presented a request to the Education Committee to conduct clinical testing at Banner Desert February 2005. The committee found that the Excelsior program did not meet rule requirements for nursing programs in Arizona and requested Excelsior work with the board to meet the intent of the current rules. Given the lack of progress in resolution of the lack of clinical experience, the board issued a notice of deficiency to Excelsior College at its January 2006 meeting.

Discussions continue with Excelsior College and the Education Committee to review a proposed preceptor program.

Six other states (Colorado, Kansas, Oklahoma, Washington, Georgia, and Louisiana) have taken action to limit the ability of Excelsior graduates to obtain licensure. Most recently the California Board of Registered Nursing prevailed in a state Court of Appeal decision that Excelsior College graduates, like other out-of-state programs, must fulfill all California licensing requirements, including supervised clinical practice, in order to qualify for licensure as a registered nurse in California. Clinical hour requirement is 810 hours in California.

The work of the board is to assure that registered nurses are competent to enter the workforce and continue to ask the hard questions:

What is the appropriate number or range of student clinical hours and in which specialties should they occur? Note: Hours of clinical experience vary widely in programs across Arizona.

Are there other innovative processes to gain the experiences that are believed essential to practice competence?

Is the evidence provided by Excelsior for clinical competence specific to student competence following graduation generalizable to all nursing students?

What are we missing?

Excellence, Excelsior and My Golf Game • On a personal note, as I ponder the Excelsior issue, I find myself reflecting on the game of golf—my much loved pastime. To become a somewhat competent golfer, I did several things—read the books about golf and learned as much as I could about techniques, players, equipment, and golf courses. Next, I went to the driving range in a controlled environment and simulated the golf swing for short, medium and long shots, practiced putting and hitting from sand traps. Finally, I began the real work of learning to play the game in all kinds of conditions and situations. I moved to the real world of the golf course with an experienced golfer and began to apply the knowledge and simulation experiences to the golf course. It was the beginning of my lifelong journey to develop competence and become a competent golfer. I share this because I believe that the Excelsior program has provided the instruction and simulation in some cases but has not assured that students are competent to manage the course through integration and application of principles learned.

To be sure, issues of this magnitude continually present challenges to both board members and board committee members. The issues of timeliness in responding, equity in decision-making, patient safety, consideration of available evidence to support decisions, and the ever present mandate to protect the public are regularly debated before decisions are made.

While these issues are fraught with varying amounts of emotion and evidence, our challenge as a board of nursing is to understand both the emotional and objective issues and then integrate them into policy that is based on evidence from research, the experience of experts, and the needs of the citizens of Arizona. We welcome your input and dialogue.

Kathy Malloch, President
ARIZONA STATE BOARD OF NURSING

STAFF DIRECTORY

ADMINISTRATION

Joey Ridenour, RN, MN
Executive Director
602.889.5200
jridenour@azbn.gov

Judy Bontrager RN, MN
Associate Director-Operations
& Licensing 602.889.5204
jbontrager@azbn.gov

Valerie Smith RN, MS
Associate Director-Nursing
Practice, Complaints &
Investigations
602.889.5206
vsmith@azbn.gov

Lila Wiemann
Administrative Assistant to the
Executive Director
602.889.5292
lwiemann@azbn.gov

Dolores Hurtado
Assistant to Associate
Director/Nursing
Practice, Complaints &
Investigations
602.889.5158
dhurtado@azbn.gov

Thereasa Huff
Assistant to Associate
Director/Nursing
Practice, Complaints &
Investigations
602.889.5208
thuff@azbn.gov

Mary Palmer
Administrative Assistant to
Associate
Director/Operations &
Licensing
602.889.5205
mpalmer@azbn.gov

ADVANCED PRACTICE

Karen Grady, MS, RN, FNP, BC
Advanced Practice/RN/LPN
602.889.5182
kgrady@azbn.gov

CANDO

Suanne Smith, RN, MS
Nurse Consultant - CANDO
602.889.5156
ssmith@azbn.gov

Olga Zuniga
Administrative Secretary –
Monitoring & CANDO
602.889.5157
ozuniga@azbn.gov

EDUCATION

Pamela Randolph RN, MS
Education
Consultant/Educational
Programs RN/LPN
602.889.5209
prandolph@azbn.gov

Rose Wilcox, RN
Education Programs CNA
602.889.5176
rwilcox.@azbn.gov

FISCAL SERVICES

Norma Salter
Accounting Technician
602.889.5211
nsalter@azbn.gov

Barry Harris
Business Manager
602.889.5210
bharris@azbn.gov

HEARINGS

Susan Barber, RN, MSN
Nurse Practice Consultant-
Hearing Dept
602.889.5151
sbarber@azbn.gov

Debra Blake
Legal Assistant
602.889.5183
dblake@azbn.gov

Vicky Driver
Admin. Assistant-Hearing Dept
602.889.5162
vdriver@azbn.gov

INVESTIGATIONS NURSE PRACTICE CONSULTANTS

Betty Nelson, RN, MS
602.889.5169
bnelson@azbn.gov

Jeanine Sage, RN, MSN
602.889.5174
jsage@azbn.gov

Mary Rappoport, RN, MN
602.889.5184
mrappoport@azbn.gov

Nan Twigg, RN, MSN
520.615.4945
ntwigg@azbn.gov

Pat Midkiff, RN, MN
602.889.5179
pmidkiff@azbn.gov

Sister Rachel Torrez, RN, MS
602.889.5180
srachel@azbn.gov

Sydney Munger, RN, MS
602.889.5186
smunger@azbn.gov

SENIOR INVESTIGATORS

Duncan "Cory" Polak
602.889.5172
cpolak@azbn.gov

James Williams
602.889.5167
jwilliams@azbn.gov

Jeanne Bauer
602.889.5178
jbauer@azbn.gov

Kirk Olson
602.889.5171
kolson@azbn.gov

Ronald "Ron" Lester
602.889.5159
rlester@azbn.gov

LEGAL SECRETARIES

Barbara Ritenour
602.889.5193
brittenour@azbn.gov

Dorothy Lindsey
602.889.5177
dlindsey@azbn.gov

Esther Garcia
602.889.5173
egarcia@azbn.gov

Karen Gilliland
602.889.5187
kgilliland@azbn.gov

Trina Smith
602.889.5175
tsmith@azbn.gov

INFORMATION TECHNOLOGY

Cory Davitt
Network Operations Director
602.889.5213
cdavitt@azbn.gov

Adam Henriksen
Information Technology
Director/Webmaster
602.889.5231
ahenriksen@azbn.gov

LICENSING

Becky Melton
RN/LPN Exam
602.889.5190
baranyos@azbn.gov

Debbie Kunkle
RN/LPN Renewals
602.889.5195
dkunkle@azbn.gov

Cristina Oates
RN/LPN Endorsements
602.889.5191
coates@azbn.gov

Donna Frye
Advance Practice – School
Nurses
602.889.5194
dfrye@azbn.gov

Helen Tay
CNA Exam/Endorsements
602.889.5189
htay@azbn.gov

Paula Delphy
RN/LPN Endorsements
602.889.5192
pdelphy@azbn.gov

Rhonda Rogers
CNA.Renewals
602.889.5188
rrogers@azbn.gov

MAILROOM

Rita Kelly.Sierra
602.889.5215
rkelly@azbn.gov

MONITORING

Erica Bailey
Senior Investigator
602.889.5160
ebailey@azbn.gov

Pamm Wiggin, RN, JD
Nurse Consultant
602.889.5170
pwiggin@azbn.gov

Brent Sutter
Legal Secretary
Monitoring & CANDO
602.889.5168
bsutter@azbn.gov

RECEPTIONISTS

Athena Santos
602.889.5196
asantos@azbn.gov

Marlane Brosseau
602.889.5199
mbrosseau@azbn.gov

Susan Kingsland
602.889.5224
skingsland@azbn.gov

RECORDS

Charlotte Seechoma
Records Room
602.889.5217
cseechoma@azbn.gov



education corner

PAMELA RANDOLPH RN, MS
EDUCATION CONSULTANT

Essential Elements of Nursing Education

The National Council of State Boards of Nursing (NCSBN) has been exploring evidence based indicators of quality nursing education as part of a large project where evidence based elements of education from published literature will be identified. The Elements of Education Study by Dr. Suling Li explored the relationship of the characteristics of a graduate's nursing program, practice, and transition program to the graduate's perception of preparedness and difficulty with client assignments. Graduates had an increased perception of preparedness and/or less difficulty with assignments when their programs:

- Teach specialty knowledge as independent courses (pediatric, medical-surgical, women's health, psychiatric/mental health, critical care)

- Integrate critical thinking, pathophysiology, the use of information technology, and evidence based practice throughout the curriculum

- Use the same faculty to teach both the didactic and clinical courses

- Have faculty who are highly available to students during both clinical and didactic

- Utilize faculty to demonstrate and assist with skills in clinical activities and require students to demonstrate skills before performing them on patients

- Require students to analyze multiple types of data when making client decisions

- Provide transition to practice programs of sufficient length and that focus on specialty knowledge of the patient population.

English Language Proficiency for Graduates of International Nursing Programs

The Board is considering changing the minimum scores for English language proficiency examinations in Article 3 (R4-19-301), based on research from National Council of State Boards of Nursing. Thomas O'Neill PhD, Associate Director of NCLEX Examinations at National Council of State Boards of Nursing will address the Education Committee and interested members of the public on the recommended cut scores for English language proficiency examinations on June 9th 2006. The Committee invites all interested members of the public to attend. Please see the Board website for

location and exact times of the June 9 Education Committee meeting.

Students Attend Board Meeting

Several Glendale Community College students attended the March Board meeting with the assignment to "role play" some aspect of the Board meeting. When talking with their instructor about the Board meeting, they reported that they were impressed by how well the Board worked together, how focused they were, the fairness of the proceedings, and how "student friendly" the Board was. Students and all members of the public are welcome to attend Board and Committee meetings. Please visit the Board website for dates and location of meetings.

BOARD ACTIONS ON EDUCATION MATTERS

January 2006

- Dismissed complaint against Pima Medical Institute
- Approved Maricopa Community College District Nursing Program to decrease the length of the program

- Released Northland Pioneer College from probation and approved request to increase enrollment

- Approved CNA Curriculum and CNA Minimum Competencies as a resource for CNA programs and the public

- Issued a Notice of Deficiency with 12 months to correct to Excelsior College for lack of instructed clinical experiences

March 2006

- Renewed full approval of Grand Canyon University
- Granted final approval of SouthWest Skill Center/Estrella Mountain CC PN program for 3 years with a site visit in 1 year and dismissed complaint (with a letter of concern)

- Approved new site for Maricopa Community College Nursing Program at Estrella Mountain CC

- Approved change in mission and goals at Northern Arizona University Nursing Program

- Approved new site and increase in enrollment at Baptist Health System Nursing Program

- Approved application of Consolidated Learning Services Refresher Program

- Approved University of Mary for clinical preceptorships in Arizona in Spring 06 only.

Open Letter to Board Members and Staff

Staff note: Portions of a letter written by a licensee and read to the Board during their March Meeting is being published with his permission. The letter describes some of the classic symptoms of addiction including the inability to predict and control one's use while mistakenly believing that control is possible; the preoccupation with using or not being able to use; the use of the substance despite the potential for negative consequences; the losses and chaos that substance abuse and addiction often causes in a person's life, and often years before being identified in the professional environment. Valerie Smith, MS, RN

MEMBERS OF THE BOARD:

I want to thank you for giving me the opportunity to explain how I got here today, how the events and circumstances of my life have led me to this point.

I am here as a direct result of having tested positive for marijuana while on a mandated random drug screening program, ordered by the this board as part of my conditions of probation from an incident about a 1 year ago, also related to marijuana use.

The fact is, I have smoked pot, on and off, for about 24 years. I've never smoked every day, but have friends who smoke and I and enjoy getting high in the company of those friends. I worked construction for 16 years prior to nursing, and would never use before or during work.

I've been married almost 19 years. My wife is against drug use of any kind, and neither of us smoke cigarettes, and only drink occasionally. My pot use has always been a source of friction between us, but she was able to tolerate it, as long as I didn't have it around the house or seemed to be using too often.

I honestly believed my smoking pot was not a problem. I have always been a loving husband, a hard worker, and a good provider. After my son was born I realized that I should stop. I would never want him to smoke. I told myself I would stop soon, but soon never came.

My life has changed in many ways since he was born, almost 10 years ago now. I went back to school, obtained my nursing degree, and have worked as an ER nurse now for 7 years. It was one of the best things I have ever done. I am dedicated and passionate about my work, extremely satisfied with my career choice, and love the fact that I continue to learn and grow with each shift. But, I still maintain ties with my old friends, and once in a while, I still smoke put.

A year ago, I was busted smoking pot while fishing in a public park. I could have been arrested, could have lost my job, and almost wrecked my marriage. I was so lucky. This board, my employer, and my wife all gave me another chance. I tried to be honest about my drug use, promised to quit completely, but in reality, I wasn't being honest with myself the only change I made was not smoking. I was resentful that I could no longer smoke, and continued to hang around my old friends and continued to be tempted. It was only a matter of time.

It finally happened. While over at a friend's house, I smoked again. It had been 11 months since my prior incident, 11 months without getting high. Knowing I was on probation, knowing my wife would be devastated, knowing my career was on the line, I did it anyway. Eight days later, my next urine drug screen was positive for marijuana.

"I have received overwhelming support, and I realize now that the help I needed was right there all the time, all I had to do was ask."

When I went to see Erica Bailey she was unforgiving, tough, and told it to me straight. I had seriously screwed up, and maybe I wasn't meant to be a nurse at all. Maybe I should just give up my nursing license and continue to be a stoner, seems that was what I really wanted. I'd lost my job, my marriage was in serious trouble, and I'd thrown away everything just to get high. I knew how bad this was, but I also knew I loved my wife and my son more than anything else in this world. I loved the life we had built together, and I knew that being an ER nurse was much more than just a job to me, it was who I am. I realized this was much more than just liking to get high once in a while, this was a serious addiction, and I needed help.

At Erica's urging, I contacted Valley Hope and enrolled in an intensive outpatient drug treatment program. The counselors there helped me realize I needed to stop minimizing my problems, that I needed to face the fact that I am indeed an addict, and will always be an addict, and that no one can beat a drug addiction until you recognize it for what it is.

Notice of Address Change from the Arizona State Board of Nursing

The Arizona State Board of Nursing has moved to a new location.
All contact numbers and email addresses have remained the same.

The new address is listed below.

4747 North 7th Street, Suite 200
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I've learned a tremendous amount about the nature of addiction, and have met many others who have suffered like I have and many others much worse off. I realize now the power that pot has had over me that all these years I was struggling to manage my addiction, when in fact, it was managing me. I've learned that I could never beat this until I admitted to myself that I am powerless over my addiction, and need to reach out beyond myself to get the strength I would need to overcome my problems with marijuana, my family, and my life. In addition, my wife and I are seeing a personal counselor to help us become a strong family unit again, and to be able to support each other and begin to repair the damage that this, that I, have done to our marriage, and to her ability to trust me again.

Although I have smoked pot for many years, in reality I was ashamed of it, and I have never told my parents or friends about my problem. Very few people actually knew the truth. Well, all that has changed. It was tremendously difficult to come clean to my parents, close friends and co-workers.

I was embarrassed and ashamed, and thought they would turn their back on me, tell me I got what I deserved. Instead, I have received overwhelming support, and I realize now that the help I needed was right there all the time, all I had to do was ask. Regardless of the outcome of this hearing today, I am confident I will never go back to smoking pot ever again, that I can find the strength to completely change, to no longer associate with my user friends, to learn to use the support system I have when I feel cravings or resentment, to not be afraid to communicate my fears and my needs, to realize that I will be a recovering addict for the rest of my life.

Authors Name Withheld



REDUCING HARM: ←

Common Signs of Substance Abuse & Impaired Practice

It is estimated that dependence on or abuse of alcohol or illicit drugs among persons aged 12 or older is approximately 10 percent, with alcohol being the most prevalent drug of abuse. While nurses' use of alcohol and drugs is about the same rate as the general population, a nurse's dependence on or abuse of alcohol or drugs may lead to unsafe practice and harm to patients as well as cause other potential serious medical complications. If left untreated, ultimately death occurs. Early recognition of addiction, treatment and monitoring of ongoing recovery and sobriety status is essential in minimizing the risk of harm to patients and to promoting the well-being of the nurse suffering from the disease of addiction.

Addiction is a chronic progressive disease characterized by increased tolerance, inability to predict and control one's use, and the preoccupation with securing or using the drug or alcohol.

Addiction is a chronic progressive disease characterized by increased tolerance, inability to predict and control one's use, and the preoccupation with securing or using the drug or alcohol. It involves the inappropriate, compulsive use of the drug or alcohol and despite a high potential for negative consequences. In nurses, substance abuse and addiction impairs the nurse's practice by affecting the nurse's communication, assessment, technical and decision-making ability, and ability to be present and

attentive to the patient. When a nurse is unable to or fails to provide care according to standards of nursing practice or disregards the policies and procedures of the facility, the safety of the patient may be threatened.

The workplace is often the last place for the signs and symptoms of substance abuse and addiction to be evident. By the time the symptoms do become recognizable in the workplace, the nurse typically has developed a significant substance abuse problem that may have already impacted other areas of the nurse's life. While there are numerous signs and symptoms indicative of a substance abuse problem, none of the symptoms alone is conclusive evidence of a substance abuse problem. Likewise,

there are times when there are no obvious symptoms until an acute event occurs such as overt symptoms of active impairment on duty or indications of narcotic diversion are identified.

It is imperative that administrators, managers and fellow nurses increase their knowledge about the problems and patient harm that substance abuse can cause and how to identify common signs that may be seen in nurses who abuse drugs and/or alcohol. All nurses have a legal and ethical responsibility to protect

patients from harm and a duty to respond to and report concerns about impaired practice. Failure to do so may facilitate the nurse moving from facility to facility and continue to endanger the safety of patients.

Behavioral indicators:

- emotionally labile, mood swings, inappropriate verbal or emotional responses
- diminished alertness, nodding off or sleeping on duty
- confusion or memory lapses
- absence from the unit
- frequenting the restroom after accessing drugs
- defensiveness, suspiciousness, secretiveness, lying
- elaborate implausible excuses for behavior
- isolation from peers and others
- neglect of commitments and obligations

Time and attendance indicators:

- excessive use of sick time or absent from work, particularly if drug of choice is accessed and used outside of the work environment (alcohol, marijuana, ...)
- late to work
- frequent or unexplained absences from the unit
- works excessive hours, particularly if drug of choice is accessed through the work environment (narcotic and controlled drug diversion)
- appears on the unit on days off

Physical indicators:

- odor of alcohol
- tremors or shakiness
- unsteady gait



- slurred speech
- constricted pupils

Job performance indicators:

- increasing difficulty in meeting deadlines
- requests for assignments that increases access to drugs
- medication “errors”, documentation “errors”, sloppy or illogical documentation
- poor judgment, errors in cognition, disorganization and difficulty prioritizing
- unreasonable excuses for poor performance
- gradual deterioration in job performance (commonly not identified until late in the disease and addiction process)

Drug diversion is symptomatic of the compulsion to use, loss of control, and continued use despite negative or high potential for negative consequences. It involves impulsive and compulsive thinking and behaviors and unfortunately, is not uncommon in nurses with the disease of addiction. Workplace indicators of drug diversion include:

- discrepancies involving incorrect, altered or missing controlled drug records
- high volume of narcotic removal
- discrepancies between nursing notes, medication records and controlled drug records
- narcotics signed out to patients who do not have an order, are not on the unit or who report they did not receive the medication
- inconsistencies with medications required from shift to shift
- drugs signed out to patients after discharge or transfer
- drugs signed out to patients outside his/her assignment

- patients report not receiving medications or not attaining pain relief from medications they reportedly received unwitnessed or excessive waste of controlled drugs
- tampered with drugs, vials or containers
- defensiveness when questioned about medications missing, administered, picked up, or delivered

It is usually a combination of several of the above signs that are noticed by a nurse manager or the other nursing staff and often requires an extensive process of gathering and reviewing multiple documents and interviewing others. The documents may include narcotic dispensing records, patients' medical records and personnel records. Gathering facts to confirm or substantiate observations and concerns about a nurse would also be necessary.

Once information and documentation has been gathered and analyzed, and the nurse is identified as potentially engaging in substance abuse, an intervention should be done as soon as possible so that the nurse's harmful behaviors can be stopped. During the meeting, the nurse should be presented with information regarding available resources and the Arizona State Board of Nursing's Chemically Addicted Nurses Diversion Option (CANDO) program. On our website, www.azbn.gov, under the heading of Resources select CANDO, there is the "Frequently Asked Questions" about the CANDO program. The nurse should be encouraged to call the Board's CANDO program at 602-889-5156 and speak with the CANDO Nurse Practice Consultant.

Whether or not the nurse contacts the CANDO program, the employer or others with information are required to notify the Board of Nursing. The Nurse Practice Act under A.R.S. §32-1664 (B) states:

A licensee, a certificate holder and a health care institution as defined in section 36-401 shall, and any other person may, report to the board any information the licensee, certificate holder, health care institution or individual may have that appears to show that a licensee or certifi-

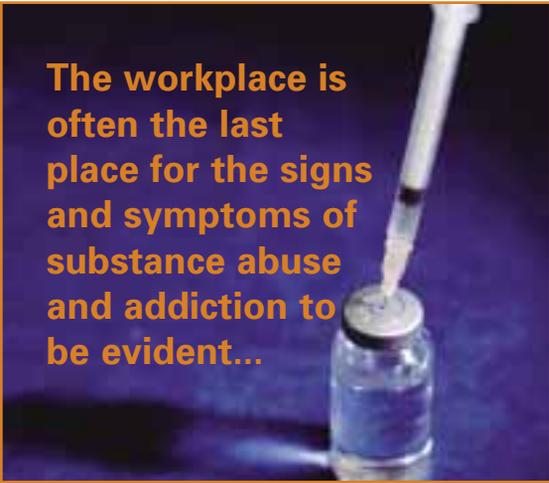
cate holder is, was or may be a threat to the public health or safety.

Failure to report such information to the Board of Nursing may be grounds for the Board to take disciplinary action against the license or certificate of those who had knowledge but failed to report. A.R.S. §32-1601 (16) (k) defines unprofessional conduct in part, as:

Failing to report to the board any evidence that a professional or practical nurse or a nursing assistant is or may be:

- (i) Incompetent to practice.
- (ii) Guilty of unprofessional conduct
- (iii) Mentally or physically unable to safely practice nursing or to perform nursing related duties. A nurse who is providing therapeutic counseling for a nurse who is in a drug rehabilitation program is required to report that nurse only if the nurse providing therapeutic counseling has personal knowledge that patient safety is being jeopardized.

CANDO is an alternative to discipline program, available to eligible nurses with substance abuse and addiction and who



The workplace is often the last place for the signs and symptoms of substance abuse and addiction to be evident...

are licensed by the Arizona State Board of Nursing. It is a voluntary program and is confidential to the general public as long as the nurse remains in compliance with the CANDO stipulated agreement. CANDO enhances protection of the public by providing earlier identification, intervention, monitoring and treatment of eligible nurses, and with a goal of returning the recovering nurse to safe nursing practice. Nurses, who are eligible, must voluntarily agree to

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Save the Date!

The Arizona State Board of Nursing
Invites You to Attend the:

Arizona Nurse Practitioner Summit

Maintaining Scope of Practice-
Expanding Competencies

Location: Rio Salado College

Conference Center

September 29, 2006

Information & Registration: www.azbn.gov



WELCOME TWO New Board Members

M. Hunter Perry

Mr. M. Hunter Perry is Business Development Manager for Sonora Quest Laboratories specializing in services for the geriatric and long term care community. His background in the area of aging also includes experience in neurodegenerative disease research. Hunter has been a healthcare professional for over 20 years, and is a graduate of U.S. Naval Health Sciences in San Diego. He is an active Business Affiliate Member of the Arizona Health Care Association and serves on the AHCA Public Policy Committee. Mr. Perry's term expires June 30, 2010.



Steve Robertson

Mr. Steve Robertson has been employed with Hospice of the Valley in Peoria for the past nine years. Steve has been a LPN for 28 years. He is currently a member of Hospice and Palliative Nurses Association. Mr. Robertson's term expires June 30, 2008



Rulemaking R4-19-215; R4-19-301; R4-19-302; R4-19-505; R4-19-506; and R4-19-507.

These individual rules need revisions to address issues that have arisen since their adoption. A rulemaking docket was filed and published on the Administrative Register on March 3rd, 2006. Amendments to Article 2 (R4-19-215) will incorporate a process for rescinding the approval of an out-of-state nursing program that does not substantially meet Board standards. Other Amendments to Article 3 (R4-19-302) will give the Board discretion to prescribe additional licensure requirements for an individual who graduates from a revoked nursing program. The Board is also considering changing the

minimum scores for English language proficiency examinations in Article 3 (R4-19-301) based on research from National Council of State Boards of Nursing. Please see the announcement in Education Corner regarding an opportunity to hear Dr. Thomas O'Neill, Associate Director of NCLEX Examinations at National Council of State Boards of Nursing, address the Education Committee and interested members of the public regarding recommended English language proficiency scores. Amendments to Article 5 (R4-19-505) will extend the waiver of certification for clinical nurse specialists practicing in the area of maternal/infant health or women's health until a certification exam is developed. The other

rules were opened to make technical and grammatical changes to improve clarity and internal consistency (R4-19-506; R4-19-507).

Future Rulemakings

Extensive revisions of Articles 4 (Regulation) and 1 (Definitions and Time-frames) are planned. Please watch the Board website for more information.

The person to contact at the Board regarding rules is:

Pamela Randolph
Nurse Practice Consultant
602-889-5209
e-mail: prandolph@azbn.gov
Fax: 602-889-5155

Nurse Leadership

When is it window dressing and when it is real?

Nurse leadership is a well-worn notion these days, often turning up alongside phrases like “supportive environment!” and “work/life balance!” But take a look inside most major hospitals you find authentic nurse leadership is still a rare thing—more common as talking point than reality. No surprise; instituting real nurse leadership means shaking up the status quo,

changing the way things are done, even handing over some power, which isn't always easy.

The rewards are rich, however, judging from the hand-

ful of innovative hospitals in the region that are benefiting from nurse guidance on everything from employment policies to clinical practice.

Case in point: Phoenix Children's Hospital (PCH), which has been turning heads since its Nursing Practice Council was instituted in 2004. This dynamic and influential self-governance body identifies issues and creates solutions, involving managers and directors in a consultative role where needed. The council includes representatives from each care area or department. (Each care area has its own self-governance, called a Unit Based Council—also initiated by the Nursing Practice Council—to work on solutions specific to that care area. When an issue requires housewide attention, the representative brings it to the Nursing Practice Council or vice versa.)

The council was behind the move to develop a clinical ladder (dubbed the ‘REFLECT Program’), a career track for bedside nurses resulting in increased pay and professional prestige as nurses advance from the Clinical Nurse I designation to Clinical Nurse IV. The REFLECT program, now being finalized, is slated to roll out by early summer.





Last year, nurses on the council kicked off Nursing Grand Rounds as part of Nurse's Week Celebration. These nurse-driven educational programs bring in clinical nurse specialists and other experts to speak on topics of interest to PCH nurses such as childhood obesity or childhood asthma. Now a popular and successful resource, Nursing Grand Rounds continues today; a check of the PCH website showed such intriguing Grand Rounds topics as "Adolescent Thoughts Involving Choices with Risk: Do They Differ When Asthma Symptoms are Involved?" and "The New T-Tube Tracheostomy: A Lesson in Patient Education."

This Nurse's Week brought the Second Annual Nursing Excellence Awards, another brainchild of PCH's Nursing Practice Council. (See awards and award winners listed in the sidebar.)

Ultimately, it's this impressive group that reminds us of the true importance of nurse leadership. Yes, it's critical for nurses to have the power to address nuts and bolts problems and start new initiatives. But in the end, nurse leadership is so much more: it's about creating the conditions for the best patient care possible by supporting nurses to do truly excellent work.

Learn more at
www.phoenixchildrenshospital.com/professionals/nursingexcellence

2005 Nursing Excellence Awards, Phoenix Children's Hospital

(award recipients and excerpts from their nominations)

Excellence in Practice:

Britt Olson, PNP

Center for Cancer and Blood Disorders

"Over the past year Britt has developed a new program for our patients. Our 'Late Effects of Cancer Therapy Clinic' is staffed by a multidisciplinary team including a physician, nurse coordinator (Britt), a social worker, an endocrinologist, and a nutritionist...this approach to patients previously treated for cancer has led to a new level of patient education and satisfaction."

Excellence in Leadership & Mentorship:

Laurie Meenan, RN

Care Area 1, General Pediatrics

"I saw her inspire everyone around her, including me, to be better as a nurse and as a human being. She believes in nursing - not just the science, but the art, the presence of a human being reaching out to help another. That is what she has done for me, and that is what she has precepted me to do for others."

Excellence in Patient & Family Education:

Penny Overgaard, RN

Airway/Tracheotomy Unit

"Penny has taken the initiative to apply evidence-based practice to tracheostomy care, collaborating with nurses in the Emily Center to ensure the teaching materials in the library reflect current practice and research. She not only teaches families to care for their children's trachs but teaches staff how to care for their trachs and how to teach families to do so, too."

Heart of Nursing:

Marcia Dern, RN

Clinical Coordinator, General Pediatrics Clinic

"The nicest thing about Marcia is her willingness to give you the immediate attention you need....She is very conscientious, reliable and cares about what she does for others...She goes the extra mile to give the kids the nurturing and care they deserve."

Pursuit of Excellence:

Peggy Daily, RN

Newborn Intensive Care Unit

"Peggy has mastered her clinical expertise in the CCN environment where the goal is to support families so that they transition successfully to the home environment. She takes every opportunity to help parents feel confident and knowledgeable; she is flexible and creative in her approach so that the teaching is specific to that family. She doesn't have to convince anyone that she loves her job - it is reflected in how she cares for the families of the patients."

Celebration Luncheon:

Governor's Task Force on the **Nursing Shortage**

February 14, 2006



Pictured Above: (From left to right) **back row**- Margaret Taylor, Barbara Weber-Averyt, Sandy Hughes, Bernadette Melynk, Daniel Chafetz, Ray Kronebitter, Judith Seller, Charlie Kelly, Marla Weston, Rose Conner, Bertha Sepulveda **middle row** - Jayne Wilkins, Linda Maschner, Doris Milton, Marty Enriquez, Julie Ward, Fran Roberts, Marjorie Isenberg, Kathy Scott **seated** - Patt Rehn, Governor Janet Napolitano, Pat Harris, Joey Ridenour

Reports from the Governor's Task Force on the Nursing Shortage are available on the Arizona State Board of Nursing website: www.azbn.gov

Arizona Nurse - Heidi



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participate and enter into CANDO stipulated agreement before the initiation of a complaint investigation. They may be accepted into CANDO following their self-report to the CANDO program or following the receipt of a complaint to the Board in which a nurse admits to using and/or abusing drugs or alcohol and prior to the initiation of the investigation. If a nurse is not eligible for CANDO or otherwise declines entering into CANDO, an investigation is initiated and the confidential, non-disciplinary option of CANDO, by statute, is no longer available.

The CANDO program is a three-year monitoring program that requires attendance at a Board-approved chemical dependency treatment program. Intensive treatment is then followed by attendance at weekly aftercare meetings for a minimum of six months. Other requirements are attendance at 12-Step meetings, such as Alcoholics Anonymous, Narcotics Anonymous, and Pills Anonymous; random drug screens at least monthly; weekly attendance at nurse recovery support group meetings, performance evaluations by the nurse's employer, involvement of the nurse's medical provider; and completion of self-report forms by the nurse.

Once a nurse enters the CANDO program, the information received to develop the rehabilitation plan and all other information is confidential and not subject to the public disclosure. The nurse's entry into the program remains confidential even after the nurse successfully completes the program. However, the nurse is required to notify any and all nursing employers of their involvement in CANDO while participating in the program.

Hiding an addiction to drugs and alcohol will put the care of patients at risk as well as risk the life of the person afflicted with the disease. Appropriate, effective intervention, treatment and monitoring can save a life, a license, and a career.

For further information on CANDO, please call Suanne Smith, RN, MS, CANDO Nurse Practice Consultant at 602-889-5156.

CNA'S AND CNA EMPLOYERS: Proof of Employment Changes July 1, 2006

The rules for Certified Nursing Assistants were recently amended. Effective July 1, 2006 Certified Nursing Assistants will be required to show proof of employment for a minimum of 160 hours within the previous two years, when applying for renewal of their certification. Currently the requirement is to show proof of working 8 hours in the previous two years.

Renewing Online

You can renew your CNA certificate on-line by accessing the AzBN website at www.azbn.gov

Print out the proof of employment

form, complete your section of the form and have your supervisor complete the form and sign.

Mail or fax the completed form 602-889-5155

Please note: The renewal process will not be finalized until one of the following has been received at the Board

- 1.) the signed proof of employment form, **OR**
- 2.) a copy of a paycheck stub which includes the employer's name, your name and /or social security number and date **OR**

- 3.) a copy of your W-2 form.

Renewing Through Mail

If you do not choose to renew on-line and prefer to send you application through the mail, access the Board website at [HYPERLINK "http://www.azbn.gov"](http://www.azbn.gov) www.azbn.gov, click on resources, and then click on applications. Scroll down to Certified Nursing Assistant Renewal application and print out the application packet.

Complete the application, have your supervisor complete/sign the proof of employment form and mail them both to Arizona State Board of Nursing.

When Your License Or Certificate Is Due for Renewal...

Post cards **will no longer be sent** to licensees/certificate holders reminding them of their renewal date. We will however continue to publish reminders in the Arizona State Board of Nursing's Journal.

If you have provided the Board with a valid email address, you will receive an email reminder 2-3 months before your date of renewal. UPDATE your email address and/or other demographic information by following the instructions provided.

All RNs/LPNs/CNAs can renew on line except a person with a status of inactive, lapsed, probation, suspended, or revoked license/certificate.

- To update your email address and/or other demographic information go to www.azbn.gov. Failure to notify the board within 30 days of a change of residence address will result in a \$5 address fine.
- Under My Services, click on the STAR ★ to get started
- Enter your license/certificate number followed by your PIN code
***If you do not remember your Username or PIN code Use the Retrieval tool supplied for you.*
- After entering your User Name & PIN code, click on LOGIN
- Following the instructions to update your personal information

Scope of Practice Committee REPORT

Board Members Co Chairs:
Trista Campbell RN BSN & Pat Johnson, LPN
Judy Bontrager, RN, MN, Associate Director of Operations



At the March 22, 2006 Board Meeting, the Board approved the Advisory Opinions listed below. ALL Advisory Opinions may be viewed and/or download from our website at ww.azbn.gov under the Resources menu.

New Advisory Opinion

Suture/Staple Removal – Role of the LPN

Updated Advisory Opinions

Supervision of Unlicensed Nurse Externs by Registered Nurses
Orders: Accepting, Transcribing, Signing-off Orders
Injection of Lidocaine: Local Infiltration for Femoral Sheath Removal
Death, Assessment of
Intra-Aortic Balloon Removal
Intra-Osseous Cannulation
Medication, Carrying by Licensed Nurses
Suture Mediated Closure Devices
Amniotomy
Lumbar Puncture
Abandonment of Patients
Foley Catheter: Use of Instrumentation to Deflate
Malfunctioning Foley Cath Balloon
Insertion (and removal) of Laminaria Sponge
Pacemaker Wires
Intrauterine Pressure Catheters

NURSE

IMPOSTER ALERT

by Valerie Smith, Associate
Director – Nursing Practice,
Complaints & Investigations

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

- **Patricia Vincent.** Nurse Imposter. A cease and desist letter was issued March 15, 2006. The Board of Nursing received information that Vincent had been represented as a “school nurse” while employed at Fort Mohave Elementary School to students, parents and others. There is no record at the Arizona Board of Nursing that validates Vincent completed an approved program of study or holds a valid license to practice nursing in Arizona.

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 Huff, Assistant to Associate Director/Investigations at thuff@azbn.gov (602) 889-5208.

CNA DISCIPLINARY ACTION

JANUARY - FEBRUARY - MARCH 2006 (NEWSLETTER MAY/JUNE/JULY 2006)

EFFECTIVE DATE	NAME	CERTIFICATE	DISCIPLINE VIOLATION(S)	
2/23/2006	Allison, Connie J.	CNA Applicant	Certificate Denied	Criminal Conviction-Misdemeanor; Drug Related
1/9/2006	Barthelemy, Carlo	CNA Applicant	Certificate Denied	Theft - Client; Misconduct; Failure to Cooperate
2/17/2006	Big, Lanova	CNA1000008496	Suspension/Indefinite	Criminal Conviction-Misdemeanor; Alcohol Abuse
3/13/2006	Brown, Amy K.	CNA Applicant	Certificate Denied	Criminal Conviction-Misdemeanor; Drug Related; Failure to Cooperate
12/27/2005*	Bullock, Lori I.	CNA Applicant	Certificate Denied	Criminal Conviction-Misdemeanor;
1/19/2006	Bunfill, Darice L.	CNA608063103	Voluntary Surrender	Sex with Client; Sexual Abuse
1/3/2006	Chapetti, Sara G.	CNA657248103	Stayed Suspension	Failure to Maintain Minimal Standards; Verbal Abuse
11/9/2005*	Chew, Jeremy B.	CNA1000007857	Civil Penalty	Criminal Conviction-Misdemeanor; Against Person
3/13/2006	Christopher, Gordon W.	CNA Applicant	Certificate Denied	Criminal Conviction-Misdemeanor; Failure to Cooperate
1/20/2006	Dejaynes, Sherry M.	CNA999990391	Voluntary Surrender	Criminal Conviction-Drug Related; Failure to Maintain Minimal Standards; Drug Abuse
1/12/2006	Dockery, George T.	CNA Applicant	Certificate Denied	Sexual Misconduct; Drug Related; Failure to Cooperate
2/10/2006	Duvall, Kelly M.	CNA1000008503	Stayed Revocation	Criminal Conviction-Misdemeanor
9/21/2005*	Fields, Hassan K.	CNA Applicant	Certificate Denied	Criminal Conviction-Felony
2/9/2006	Flores, Martha A.	CNA999993591	Civil Penalty	Obtaining Certificate by Fraud
3/13/2006	Ford, Charity R.	CNA Applicant	Certificate Denied	Criminal Conviction-Misdemeanor; Unsafe Practice; Failure to Cooperate
2/8/2006	Gustafson, Lisa A.	CNA090432533	Civil Penalty	Failure to Follow Orders; Documentation Errors; Practicing Beyond Scope
2/23/2006	Harris, Zonya M.	CNA1000008550	Civil Penalty	Criminal Conviction-Misdemeanor
3/15/2006	Hernandez, Sylvia O.	CNA999951510	Revocation/Non-voluntary	Violating Board Order
3/13/2006	Hoftender, Nancy J.	CNA Applicant	Certificate Denied	Criminal Conviction-Misdemeanor; Alcohol Abuse; Failure to Cooperate
11/1/2005*	Holland, Angelica C.	CNA999951367	Voluntary Surrender	Practicing Beyond Scope
2/21/2006	Iudean, Jennifer C.	CNA1000008505	Civil Penalty	Criminal Conviction-Misdemeanor
2/8/2006	Jones, Edna L.	CNA545593803	Civil Penalty	Mental Abuse; Verbal Abuse
12/15/2005*	Leatherwood, Stephanie M.	CNA999991924	Stayed Suspension	Practicing Beyond Scope
12/27/2005*	Lerma-Trillo, Franciso	CNA Applicant	Certificate Denied	Failure to Follow Orders; Leaving Duty Station
1/4/2006	Marshall, Che M.	CNA999952275	Revocation/Non-voluntary	Failure to Maintain Minimal Standards; Drug Abuse
2/22/2006	Martinez, Celia	CNA1000008504	Civil Penalty	Criminal Conviction-Misdemeanor
1/4/2006	McFadden, Shawn E.	CNA602791033	Revocation/Non-voluntary	Leaving Duty Station; Verbal Abuse; Failure to Cooperate
12/19/2005*	McRae, Jose A.	CNA1000007845	Civil Penalty	Criminal Conviction-Misdemeanor
1/9/2006	Meadows, Shamona R.	CNA999994266	Stayed Suspension	Failure to Follow Orders; Unprofessional Conduct; Leaving Duty Station
12/22/2005*	Mellone, Carrie L.	CNA1000007940	Civil Penalty	Criminal Conviction-Misdemeanor
3/2/2006	Mitchell, Bridgette I.	CNA999990182	Civil Penalty	Misconduct
10/21/2005*	Nave, Randi M.	CNA Applicant	Certificate Denied	Criminal Conviction-Misdemeanor
3/15/2006	Norton, Rosario A.	CNA531830641	Revocation/Non-voluntary	Violating Board Order
11/30/2005*	Norton, Rosario A.	CNA531830641	Stayed Revocation	Failure to Maintain Minimal Standards; Verbal Abuse; Violating Board Order
3/3/2006	Parks, Robert D.	CNA Applicant	Certificate Denied	Criminal Conviction-Felony; Against Person
12/21/2005*	Parra, Pearl M.	CNA999999540	Civil Penalty	Failure to Follow Orders
1/23/2006	Prempeh, George K.	CNA999997813	Voluntary Surrender	Failure to Follow Orders; Sexual Misconduct
11/16/2005*	Puhr, Lorelei M.	CNA Applicant	Certificate Denied	Criminal Conviction-Felony
3/3/2006	Quinn, Jamie L.	CNA Applicant	Certificate Denied	Criminal Conviction-Felony; Drug Related; Drug Related
2/15/2006	Riley, Sherry A.	CNA999999980	Stayed Revocation	Physical Abuse
1/4/2006	Rivenburgh, Robin L.	CNA Applicant	Certificate Denied	Drug Abuse; Criminal Conviction-Misdemeanor; Inability to practice safely; Alcohol Abuse
1/4/2006	Rodriquez, Ruben	CNA771951619	Revocation/Non-voluntary	Criminal Conviction-Felony; Misdemeanor; Boundaries; Obtaining Certificate by Fraud;

CNA DISCIPLINARY ACTION

JANUARY - FEBRUARY - MARCH 2006 (NEWSLETTER MAY/JUNE/JULY 2006)

EFFECTIVE DATE	NAME	CERTIFICATE	DISCIPLINE VIOLATION(S)
1/3/2006	Rojas, Anna c.	CNA Applicant	Certificate Denied
10/14/2005*	Schmidt, Keri L.	CNA Applicant	Certificate Denied
1/4/2006	Steward, Ruth A.	CNA999952555	Revocation/Non-voluntary
12/19/2005*	Taylor, Jacqueline	CNA308673580	Stayed Suspension
1/4/2006	Timmer, Barbara E.	CNA835278103	Revocation/Non-voluntary
3/13/2006	Torres, Eddy	CNA Applicant	Certificate Denied
1/25/2006	Trawally, Amy C.	CNA999994297	Civil Penalty
2/3/2006	Trimmer, Michele	CNA948680103	Civil Penalty
3/7/2006	Valencia, Elma V.	CNA975080803	Revocation/Non-voluntary
2/14/2006	Villanueva, Ana D.	CNA1000001076	Voluntary Surrender

RN/LPN DISCIPLINARY ACTION

JANUARY - FEBRUARY - MARCH 2006 (NEWSLETTER MAY/JUNE/JULY 2006)

EFFECTIVE DATE	NAME	LICENSE	DISCIPLINE	VIOLATION(S)
1/16/2006**	Alderson, Margaret A.	RN073411	Probation	Failure to maintain minimal standards; Failure to Follow Orders, Documentation
2/28/2006	Alvarado, Jennifer T.	LP034986	Voluntary Surrender	Violating Board Order
2/2/2006	Amity, Frank R.	RN115594/LP033324	Decree of Censure	Documentation Errors, Practicing Beyond Scope
2/7/2006	Bartholomay, Sandra L.	RN071937/LP019179	Revocation/Non-Voluntary	Alcohol Abuse, Violating Board Order
12/26/2005*	Bartholomay, Sandra L.	RN071937/LP019179	Stayed Revocation w/Probation	Alcohol Abuse
12/27/2005*	Bernot, Joanne L.	LP034146	Decree of Censure	Practicing Beyond Scope
1/1/2006	Bidgood, Roberta A.	LP015862	Stayed Suspension w/Probation	Unsafe Practice, Drug Diversion, Inability to Practice Safely
9/7/2005*	Boggs, Sharron L.	Multi State License-MD	Revocation-Privilege to Practice	Documentation Errors, Medication Errors, Alcohol Abuse
1/26/2006	Booker, Tina L.	LP038999	Decree of Censure	Positive Drug Screen
3/20/2006	Boyd, Anne P.	RN088106	Probation	Failure to Maintain Minimal Standards, Failure to Follow Orders, Medication Errors
3/1/2006	Brazier, Mary J.	RN039180	Voluntary Surrender	Unsafe Practice, Practicing Beyond Scope
2/14/2006	Bristol, Kenneth H.	RN130075	Voluntary Surrender	Incompetent Practice, Failure to Follow Orders
1/4/2006	Brown, Charmaine M.	LP032552	Revocation/Non-Voluntary	Criminal Conviction-Misdemeanor, Fraud, Deceit-Obtaining License
1/19/2006	Brunelle, Elizabeth M.	LP032299	Voluntary Surrender	Unsafe Practice, Failure to Follow Orders, Medication Errors
2/16/2006	Capriotti, Teresa L.	RN092105	Decree of Censure	Failure to Supervise, Unprofessional Conduct
1/25/2006	Carrillo, Carol D.	LP037206	Revocation/Non-Voluntary	Criminal Conviction-Misdemeanor, Misconduct-Theft – Employer, Fraudulent Billing
1/5/2006	Chamberlain, Kimberly D.	LP036261	Revocation/Non-Voluntary	Violating Board Order
1/4/2006	Choate, Donald D.	RN130952	Revocation/Non-Voluntary	Drug Abuse, Drug Diversion, Action in Another Jurisdiction
3/3/2006	Connell, Nicole L.	LP031853/ CNA780087103	Voluntary Surrender	Drug Diversion, Unsafe Practice, Action in Another Jurisdiction
1/9/2006	Cruz, Rhodora B.	RN106055	Probation	Unsafe Practice
2/6/2006	Day, Kristie M.	RN120453	Revocation/Non-Voluntary	Violating Board Order
3/20/2006	Demattia, Arlene C.	LP037609	Probation	Failure to Maintain Minimal Standards, Documentation Errors, Medication Errors
2/28/2006	Deptula, Shannon L.	RN120655	Voluntary Surrender	Action in Another Jurisdiction
1/25/2006	Dominguez, Rose Mary	RN045549	Probation	Drug Abuse, Failure to Cooperate with Board
3/29/2006	Donovan, Denise L.	RN129105	Voluntary Surrender	Fraud, Deceit-Obtaining License, Action in Another Jurisdiction
12/19/2005*	Drake, Susan J.	LP034210	Decree of Censure	Inappropriate Delegation
11/18/2005*	Fitch, James C.	LP038949	Court Ordered Revocation	Criminal Conviction-Felony
1/5/2006	Frost, Jason J.	RN Endorsement Applicant	License Denied	Drug Abuse, Fraud, Deceit-Obtaining License, Action in Another Jurisdiction

** Correction to prior violation as listed in March 2006 First quarter journal

EFFECTIVE DATE	NAME	LICENSE	DISCIPLINE	VIOLATION(S)
3/20/2006	Gallagher, Kathleen	LP036276	Decree of Censure	Failure to Maintain Minimal Standards, Unsafe Practice
1/4/2006	Garoulis, Jeana A.	LP040115	Revocation/Non-Voluntary	Positive Drug Screen, Failure to Cooperate with Board
1/25/2006	Gebhardt, Pamela G.	RN030942	Stayed Revocation w/Probation	Failure to Comply with Requirements of Impaired Nurse Program
2/23/2006	Gillespie, Karen L.	LP Exam Applicant	License Denied	Criminal Conviction-Misdemeanor, Alcohol Related, Failure to Cooperate with Board
3/8/2006	Gray, Delores F.	LP011483	Decree of Censure	Misconduct-Physical Abuse, Verbal Abuse
12/6/2005*	Gray, Kimberly C.	RN108798	Probation	Criminal Conviction-Misdemeanor, Violating Board Order, Failure to Cooperate with Board
2/21/2006	Greer, Juliana	LP033724	Voluntary Surrender	Failure to Maintain Minimal Standards, Unsafe Practice
3/9/2006	Grignon, Janet L.	RN072948	Voluntary Surrender	Violating Board Order
3/20/2006	Hagen, Robin L.	LP032674	Probation	Criminal Conviction-Misdemeanor, Alcohol Abuse
3/9/2006	Hallier, Charles R.	LP031511/ CNA732360803	Voluntary Surrender	Drug Use on Duty, Drug Diversion
12/8/2005	Hauser, Susanne M.	RN098514	Decree of Censure with Fine	Unsafe Practice, Failure to Intervene, Misconduct-Leaving Duty Station
1/4/2006	Heron, John D.	LP034472	Revocation/Non-Voluntary	Violating Board Order
1/4/2006	Hogan, Keitha R.	LP026375	Revocation/Non-Voluntary	Violating Board Order
3/7/2006	Hunter, Russia T.	LP Endorsement Applicant	License Denied	Action in Another Jurisdiction
1/25/2006	Iwunze, Eunice C.	LP032436	Stayed Suspension w/Probation	Criminal Conviction-Misdemeanor, Misconduct-Verbal Abuse, Failure to Cooperate with Board
1/25/2006	Jocque, Monica L.	RN100895/LP032473	Voluntary Surrender	Violating Board Order
2/28/2006	Johnson, Norma J.	RN061775	Voluntary Surrender	Violating Board Order
1/25/2006	Jones, Sandra M.	LP031384	Stayed Revocation w/Probation	Criminal Conviction-Misdemeanor, Drug Related-Positive Drug Screen, Violating State/Federal Statutes/Rules
1/4/2006	Kettner, Ruth A.	LP030743	Revocation/Non-Voluntary	Violating Board Order
1/4/2006	Kilbourne, Cherise P.	RN075265	Revocation/Non-Voluntary	Violating Board Order
12/14/2005*	Knowlton, Lisa M.	RN111439	Decree of Censure	Positive Drug Screen
1/12/2006	Lauber, Jane K.	RN098052	Voluntary Surrender	Criminal Conviction-Felony, Alcohol Abuse
1/4/2006	Lause, Carol A.	LP036145	Revocation/Non-Voluntary	Failure to Maintain Minimal Standards, Drug Abuse
1/19/2006	Light, Kelly A.	RN114070/LP033966	Decree of Censure	Failure to Follow Orders, Documentation Errors, Medication Errors
1/17/2006	Lubinski, Sandra M.	RN116696	Probation	Documentation Errors, Practicing Beyond Scope, Drug Abuse
12/15/2005*	MacMaster, Robert P.	RN107531	Probation	Positive Drug Screen
3/20/2006	Marsh, Audrey L.	RN085435	Stayed Revocation w/Suspension	Violating Board Order
1/4/2006	McKay, Barbara A.	LP032205	Revocation/Non-Voluntary	Drug Abuse, Drug Use on Duty, Drug Diversion
12/14/2005*	Medford, Wendy	RN115980	Probation	Medication Errors
2/9/2006	Miller, Angela M.	RN114201/LP035304	Probation	Failure to Maintain Minimal Standards
3/14/2006	Miranda, David F.	RN Endorsement Applicant	License Denied	Criminal Conviction-Misdemeanor, Unprofessional Conduct, Drug Abuse
1/4/2006	Molina, Georgina A.	LP038438/ CNA999992367	Revocation/Non-Voluntary	Criminal Conviction-Felony, Misdemeanor Misconduct-Leaving Duty Station
3/9/2006	Morgan, Tina L.	RN115990	Stayed Revocation w/Probation	Misconduct-False Documentation, Drug Diversion
1/12/2006	Nash, Jacqueline P.	RN106317	Voluntary Surrender	Alcohol Abuse, Failure to Comply with Requirements of Impaired Nurse Program
1/4/2006	Neal, Mary E.	LP030527	Revocation/Non-Voluntary	Drug Abuse, Positive Drug Screen
3/20/2006	Nopp, Kelly A.	LP028917/ CNA498965933	Summary Suspension	Failure to Maintain Minimal Standards, Misconduct-Theft – Employer, Drug Diversion
3/20/2006	Opuroku, Ezekiel T.	LP036460	Probation	Documentation Errors, Positive Drug Screen
2/3/2006	Parke, Todd S.	LP033596/ CNA999947954	Revocation/Non-Voluntary	Violating Board Order
2/3/2006	Pierson, Lynette D.	TLP041676	Probation	Action in Another Jurisdiction
1/25/2006	Powers, Tammy S.	RN124448	Voluntary Surrender	Violating Board Order
1/12/2006	Preuss, Sonia R.	RN074406	Voluntary Surrender	Failure to Maintain Minimal Standards, Alcohol Abuse, Inability to Practice Safely
3/20/2006	Rebel, Karen L.	RN078320/LP024669	Stayed Revocation w/Probation	Violating Board Order
3/21/2006	Robb, Diane L.	RN127554	Decree of Censure	Positive Drug Screen

EFFECTIVE DATE	NAME	LICENSE	DISCIPLINE	VIOLATION(S)
1/24/2006	Robertson, Sherry L.	RN127274	Revocation/Non-Voluntary	Drug Abuse, Violating Board Order
3/1/2006	Sharp, Christina E.	RN127552	Probation	Drug Abuse, Positive Drug Screen
1/4/2006	Shields, Felicia R.	RN096212	Revocation/Non-Voluntary	Criminal Conviction-Misdemeanor, Misconduct-Leaving Duty Station, Failure to Report Violations
1/25/2006	Songer, Denise J.	RN107519	Probation	Inability To Practice Safely
3/9/2006	Stanley, Juanita L.	RN078472	Voluntary Surrender	Violating Board Order
1/4/2006	Stephenson, Kendall	RN092605	Stayed Revocation w/Suspension	Failure to Maintain Minimal Standards, Inability to Practice Safely, Action in Another Jurisdiction
12/8/2005*	Strackbein, Nancy L.	RN130805	Decree of Censure	Documentation Errors, Medication Errors
1/12/2006	Suggs, Forrest M.	RN073691	Voluntary Surrender	Drug Diversion
1/20/2006	Tatum, Donna C.	LP Endorsement Applicant	License Denied	Criminal Conviction-Misdemeanor, Failure to Maintain Minimal Standards, Unsafe Practice
1/25/2006	Tosh, Ann Marie	RN087259	Probation w/Limited Licensure	Violating Board Order, Misconduct-False Documentation
1/26/2006	Trakes, Tara M.	RN122291	Decree of Censure	Practicing Beyond Scope
3/15/2006	Truman, Melissa M.	RN107102	Revocation/Non-Voluntary	Violating Board Order
2/6/2006	Wagner, Cindy A.	LP007420	Decree of Censure	Failure to Maintain Minimal Standards, Practicing Beyond Scope
12/27/2005*	Walker, Judith A.	RN129503	Probation	Alcohol Abuse
01/30/2005*	Welsh, Jason C.	LP039920	Probation	Drug Abuse
1/4/2006	Whitmore, Katharine M.	RN122964	Revocation/Non-Voluntary	Failure to Follow Orders, Alcohol Abuse, Violating Board Order
1/19/2006	Williams, Kathy B.	LP028430	Voluntary Surrender	Violating Board Order
1/4/2006	Worthington III, Frank B.	RN048087	Revocation/Non-Voluntary	Failure to Comply with Requirements of Impaired Nurse Program

Termination of Board Agreement/Order for **CNAs**

EFFECTIVE DATE	NAME	CERTIFICATE	DISCIPLINE VIOLATION(S)
2/14/2006	Collins, Sr., Raymond	CNA1000003963	Cleared / Stayed Revocation
3/21/2006	Bungay, Lydia N.	CNA809248219	Cleared / Stayed Suspension
1/26/2006	Gantala, Mary E.	CNA546613420	Cleared / Stayed Suspension
1/25/2006	Tenequer, Adrianna	CNA9999988247	Cleared / Stayed Suspension
3/28/2006	Ball, Jamie	CNA1000005416	Cleared / Suspension

Termination of Board Agreements/Orders for RNs/LPNs

EFFECTIVE DATE	NAME	LICENSE	DISCIPLINE VIOLATION(S)
3/21/2006	Bolton, Ryan W.	RN106954/LP032632	Probation Completed
3/21/2006	Brown, Cindy M.	RN087150	Probation Completed
1/25/2006	Brown, Shellee E.	RN129452/LP039947	Probation Completed
3/21/2006	Cowan, Cheryl L.	RN123412	Probation Completed
1/25/2006	Davis, Melissa	RN102422/AP1193	Probation Completed
1/25/2006	Dempsey, Elaine M.	RN067283	Probation Completed
3/21/2006	Iannoli, Jess E.	RN115489/LP036052	Probation Completed
3/21/2006	Igo, Charlotte E.	RN115692	Probation Completed
1/25/2006	Kelly, Laura L.	RN033549	Probation Completed
3/21/2006	Lyons, Scott W.	RN129737	Probation Completed
1/25/2006	Nagy, Jeri E.	LP038858	Probation Completed
3/30/2006	Reed, Zulema I.	LP036794	Probation Completed
3/21/2006	Torres, Nikki D.	RN132551	Probation Completed
1/25/2006	Velasquez, Jo Ann L.	LP027939	Probation Completed
1/25/2006	Vomaska, Suzanne M.	RN131114	Probation Completed
1/30/2006	Welsh, Jason C.	LP039920	Probation Completed
3/21/2006	Wheat, Jon M.	RN120488	Probation Completed

Arizona State Board of Nursing

TOTAL ACTIVE AZ LICENSES IN ALL STATES



	RN	LPN	TOTAL
6/30/1999*	42266	8812	51078
6/30/2000*	46207	9271	55478
6/30/2001*	47451	9389	56840
6/30/2002*	50486	9160	59646
6/30/2003**	52939	10302	63241
6/30/2004**	56722	11074	67796
6/30/2005**	58657	11221	69878
5/2/2006			
Daily Real Time Data	60,079	11,917	71,996
* NCSBN Report			
** Monthly Stat Report			

Fiscal Year Time Frame Data Reports

NUMBER OF APPLICATIONS RECEIVED

YEAR	RN	LPN	TOTAL
1999 Exam	470	248	718
Endorsement	2268	391	2659
Renewal	18945	3754	22699
2000 Exam	1855	702	2557
Endorsement	1522	212	1734
Renewal	15657	2989	18646
2001 Exam	610	249	859
Endorsement	803	111	914
Renewal	19636	3654	23290
2002 Exam	1236	486	1722
Endorsement	622	88	710
Renewal	18858	3443	41159
2003 Exam	1483	615	2098
Endorsement	2628	346	2974
Renewal	9937	1643	11580
2004 Exam	1725	742	2467
Endorsement	3627	438	4065
Renewal	9938	1769	11707
2005 Exam	1925	673	2598
Endorsement	4129	618	4747
Renewal	10639	1722	12361





18th Annual Southwestern Regional Nurse Practitioner Clinical Symposium

The Arizona Nurses Association and the Nurse Practitioner Council are sponsoring the 18th Annual Southwestern Regional Nurse Practitioner Clinical Symposium on July 28 - 30 2006, at the Scottsdale Hilton Resort & Villas, 6333 N. Scottsdale Road, in Scottsdale, Arizona.

This conference provides nurse practitioners who practice in a variety of settings with current practice and pharmacological knowledge as well as the opportunity for professional networking. Margaret A. Fitzgerald, MS, APRN, BC, NP-C, FAANP, CSP, President and Principle Lecturer with

Fitzgerald Health Education Associates will provide the keynote presentation "Entrepreneur or Intrapreneur, the future of NP Practice". Registration information will be posted at www.aznurse.org on the calendar of events page. This program is approved for continuing education by the Arizona Nurses Association accredited by the American Nurses Credentialing Center.

In addition, Fitzgerald Health Education Associates will provide a Nurse Practitioner Certification Practice Preparation seminar starting July 27. Register at www.aznurse.org on the calendar of events page.