

Nebraska Nursing NEWS

Volume 27 • Number 4 / Winter 2010

Nursing Education in Nebraska

*There is a lot of it, but is it enough to
prevent the projected nursing shortage?*

Strong Online Utilization 2010 RN and APRN Renewal Summary



Nebraska Department of Health
and Human Services

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Executive Director's Message



Diana Baker

It is an interesting time to be a nurse today. New ideas about nursing have come to the surface in the report from the Institute of Medicine in

answer to the passage of the Patient Protection and Affordable Care Act of 2010 (health care reform). With more than three million nurses licensed in the United States, the nursing profession is the largest segment of the nation's health care workforce, and nurses will be called upon to provide care in different ways and in many more venues than ever before. Health care reform is actually a very good thing for nurses. The IOM report's key messages are:

1. Nurses should practice to the full extent of their education and training.

We are in the midst of the most devastating nursing shortage that has ever been known in modern day. Yet, nurses are currently finding it difficult to find jobs because the economy is causing hospitals to cut operating costs. And when hospitals cut costs, the first place they look is cutting nursing staff because it is the biggest cost center. Nurses need to work cohesively and practice to the full extent of their education and training to make sure nursing is seen as adding value to patient care. One way of achieving value is through the practice of patient-centered care that is provided by educated, licensed nurses. Care that has been provided by licensed nurses has been proven to prevent many of the complications that Medicare will not be paying for as part of reform.

Nurses have also excelled in prevention education and wellness. We are good at managing issues with chronic care, school health, transitional care, and home health. These are all areas that will be emphasized under the new law. Another positive aspect of health care reform is the reward for quality, not quantity. Getting the attention of hospital administrators by promoting

RN-directed nursing care is a strong, results-oriented solution to achieving quality care and proving the value of nursing.

2. Nurses should achieve higher levels of education and training through an improved education system that promotes seamless academic progression.

Nursing education has been a topic of controversy for over 40 years. And yet, a new way of educating nurses to work in today's environment has not been fully developed. The IOM report emphasizes that the nursing education system must be improved. Nurses will be required to possess expertise in leadership, health policy, evidence-based care, teamwork and collaboration. Roles in community health, geriatrics and public health will be expanding. In order to meet these demands, higher levels of education and training must be made available with seamless transition from LPN, to Associate's and Bachelor's degrees and upwards to Master's, Ph.D. and Doctor of Nursing Practice (DNP) degrees.

All educational levels of nurses will be required to meet the needs of quality patient care. LPN, ADN, and BSN prepared nurses will likely continue to address the needs at the bedside in acute care. However, it is likely that nurse residency programs will need to be developed following the traditional nursing program in order to prepare the new graduates for the greater demands found in today and tomorrow's health care arenas. New technology and medical advances will necessitate the lifelong learning concept, and will enable nurses to be successful in spite of greater demands. By 2020, the IOM report estimates that 80 percent of nurses will need to be educated on a BSN level, and the number of nurses holding a doctorate must double to keep pace with the needs of people seeking health care in the future.

The authors of the new health care law have anticipated this need

for ramping up nursing education by providing major funding. A few key provisions include: 1) increasing loan amounts for educating nurses, and offering 85 percent forgiveness of the loan for working in an area with limited care options; 2) increasing nursing faculty loans for master's students and doctoral students who serve as nursing faculty for four years in accredited schools; 3) Geriatric Incentive Awards for APRNs who practice in geriatrics, long-term care, or chronic care for five years; 4) stipends for racial and ethnic minorities with diplomas and RN and ADNs who enter BSN completion programs; 5) grants for clinics managed by APRNs to provide primary wellness care to underserved or vulnerable populations; 6) grants to train family nurse practitioners in primary care to work in federally qualified health centers or nurse-managed health clinics. (See the U.S. Government HRSA Nursing Education Loan Repayment at www.center4nursing.com.)

3. Nurses should be full partners with physicians and other health professionals in redesigning health care in the United States.

Being a full partner with physicians and other health professionals involves playing an active role in achieving the vision of health care reform. Nursing professionals must provide leadership throughout the health care system, from the bedside to the boardroom. Leadership is fundamental to advancing the profession. Therefore, an emphasis needs to be placed on leadership-related competencies in nursing programs, mentoring programs at all levels, and accepting responsibility for personal and professional growth toward leadership competencies. To be effective in realizing this new paradigm, nurses must see policy as something they can achieve rather than something that happens to them. It is helpful to actively serve on advisory committees and nursing boards where policy is decided, and to be proactive in nursing associations where nursing regulations are developed and lobbied.

The United States is facing shortages of all health care professionals, including family physicians. The law contains considerable references regarding expanding primary care services to nurse practitioners and nurse midwives as well as different approaches to how primary care will be delivered. Millions of new patients will be seeking health care because of newly available health insurance. The aging baby boomers will also realize increasing needs for health care. With fewer primary care physicians available to meet this influx of new patients, nurse practitioners and nurse midwives need to be available to provide primary care. Nurse-managed clinics will begin to receive funding equal to physicians, and that will allow more nurse practitioners to be available to the increasing number of patients. However, one constraint nurse practitioners face in Nebraska is the inability to find true collaborative physicians, especially in rural areas. Legislators may be forced to reexamine the nurse practitioner scope of practice and allow for more independence to provide

primary care for the increasing numbers of patients.

4. **Effective workforce planning and policy making require better data collection and an improved information infrastructure.**

In planning for these extensive changes in health care, it will be necessary to know that a qualified workforce is available to meet the challenge of the future needs. The National Health Care Workforce Commission has been mandated to help gauge demands for health care workers, will monitor the supply of health care workers across professions, and will review data to develop accurate predictions of workforce needs. All data collected will be publicly accessible. Currently, the Center for Nursing collects statistics about Nebraska nurses, and reports can be found on www.center4nursing.com that reflect various workforce analyses for multiple years in Nebraska.

It is an exciting time to be a nurse in America. Change is coming, and it is often met with resistance. Nebraska nurses can choose to ignore it, or take

this opportunity to improve what we do, how we are educated, and how nursing is delivered. Staying informed is the best way to take advantage of the many benefits that can be achieved both personally and professionally. For more information, visit www.thefutureofnursing.org and follow the numerous links, or read "The Future of Nursing: Leading Change, Advancing Health."

Diana Baker RN MSN

Health care Reform and Nurses: Challenges and Opportunities; www.medscape.com/viewarticle/721049 Retrieved on November 9, 2010.

The Future of Nursing: Leading Change, Advancing Health; www.iom.edu/Reports/2010/The-Future-of-Nursing-Leading-Change-Advancing-Health Retrieved on November 8, 2010.

The IOM report; <http://books.nap.edu/catalog/12956.html> Retrieved on November 8, 2010.



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NEBRASKA BOARD OF NURSING

Meeting Schedule 2011

Meetings of the Nebraska Board of Nursing convene at 8:30 a.m.; however, the Board immediately goes into closed session to review investigative reports. Members of the public may not be present during closed session. The Board typically returns to open session after 11:30 a.m. The agendas for the meetings are posted on our website at <http://www.dhhs.ne.gov/crl/brdmtgs.htm>, or you may obtain agendas by phoning (402) 471-4376 or e-mailing angela.l.holly@nebraska.gov.

Day/Date	Time	Meeting	Location
January			
Wednesday, January 12	3:00 – 5:00 p.m.	<i>Practice Committee</i> <i>Education Committee</i>	Gold's Room 530 NSOB Room 1Y
Thursday, January 13	8:30 a.m.	Board meeting (Discipline case review-most of meeting in closed session)	Gold's Room 531
February			
Thursday, February 10	8:30 a.m.	Board meeting	Gold's Room 531
March			
Wednesday, March 9	3:00 – 5:00 p.m.	<i>Practice Committee</i> <i>Education Committee</i>	Gold's Room 530 NSOB Room 1Y
Thursday, March 10	8:30 a.m.	Board meeting (Discipline case review-most of meeting in closed session)	Gold's Room 531
Monday, March 14 – Wednesday, March 16		NCSBN midyear meeting	Chicago
April			
Thursday, April 14	8:30 a.m.	Board meeting	Gold's Room 531
May			
Wednesday, May 11	3:00 – 5:00 p.m.	<i>Practice Committee</i> <i>Education Committee</i>	Gold's Room 530 NSOB Room 1Y



President's Message

Crystal Higgins, RN MSN



Greetings! Fall brings many changes, and I would like to share some of the information from conferences that are talking about changes in nursing!

Several members of the Board of Nursing attended the annual meeting of the National Council of State Boards of Nursing (NCSBN) held in Portland, Ore. The theme was "Pioneering the Path for Public Protection." The keynote speaker was Susan Hassmiller from the Robert Wood Johnson Foundation. She presented information on the report to be released called "The Initiative on the Future of Nursing." This report will showcase nurse contributions to improve health care. She gave her vision for the 21st century nursing workforce. She feels in combination with health care reform, nurses will have input into making a more effective and efficient health care system.

On Oct. 5, a webcast allowed nurses from across the nation to participate in the report briefing of "Initiative on the Future of Nursing" from the Institute of Medicine committee on the Robert Wood Johnson Foundation. These recommendations will serve as the blueprint for expanding access, improving quality, and reducing cost in the health care system. Dr. Donna Shalala emphasized three points: 1) Nurses need to practice to the full extent of their education; 2) Nursing education must be improved to make it seamless, accessible and affordable, and; 3) Nurses need to be full partners with doctors and other health care professionals to lead discussions for change in health care. You can read the entire report online or obtain the printed report from the Institute of Medicine.

NCSBN had a follow-up conference call to discuss the report. Dr. Michael

Bleich led the discussion. The report describes nursing's role in meeting the public need for health and health care over the next 25 years. Implications for nursing regulation were discussed. Areas to be explored are differences in scope of practice from state to state and why Nurse Practice Acts are different.

The next step in the process will be a November meeting to develop strategies to implement the plan. It will also be available on webcast. There are many proposals for changes in health care that will affect nursing. Nurses must keep up with change and what is happening, not

just in Nebraska but in the nation and globally.

Florence Nightingale wrote, "For we who nurse, our nursing is something which, unless we are making progress every year, every month, every week, we are going back. No system shall endure which does not march."

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Crystal R. Higgins



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Nursing Education in Nebraska

There is a lot of it, but is it enough to prevent the projected nursing shortage?

By Sheila Exstrom, Nursing Education Consultant

In the calendar year of 2009, there were nearly 5,000 students enrolled in nursing education programs in Nebraska (4,995 to be exact). Of this number, 3,928 were enrolled in undergraduate nursing programs: 867 in practical nursing programs, 1,068 in associate degree programs and 2,958 in baccalaureate programs (163 of these in RN to BSN programs). Nebraska no longer has any hospital-based diploma programs. There were 728 students enrolled in nursing programs leading to a master's degree (33 of these were nurse anesthesia students) and 72 enrolled in the two doctoral nursing programs in the state.

To look more closely at the specific programs, the 867 practical nursing students are close to an all time high. Over the past 20 years, the lowest number of students enrolled in practical nursing programs was in 1994 with 274 students, and the highest number of students enrolled was in 2006 with 974.

The 1,068 nursing students enrolled in Associate Degree Programs was also an all-time high. Again, over the past 20 years, the lowest number of students enrolled in associate degree programs was 200 in 1989, and the highest number was 1,068 in 2009. The reason for this growth is primarily the increase in the number of programs that have opened during this time.

Growth in the number of students enrolled in baccalaureate nursing programs has also increased significantly. The lowest number of students enrolled was in 1999 with 1,464 generic baccalaureate students, and 2009 had the highest level of enrollment with 2,697 generic baccalaureate students.

This increase in baccalaureate nursing students is particularly important as the Institute of Medicine's Future of Nursing Report (2010) includes as one of its recommendations to increase the proportion of nurses with a baccalaureate degree to 80 percent by 2020. Some students who enter the profession either as a practical nurse or as a nurse with an associate degree go on and/or return and complete a baccalaureate degree. This must be encouraged and facilitated if the 2020 goal is to be met.

The Board of Nursing approves only those programs leading to initial licensure, but does collect data on all nursing programs within the state on a yearly basis. The trend of increasing student enrollments continues at the graduate level nursing programs also. The total student enrollment in master's programs of 185 in 1989 has grown to 695 in 2009. Each of the master's degree programs has increased enrollments from 1989 to the present. In addition, new master's degree programs have started (two in 2002 and another in 2007). For an example, the one nurse anesthesia program enrollment has increased from six students in 1991 to 33

students in 2009, and a second program has just started admitting students.

Nebraska has two doctoral programs in nursing, and the numbers of students have grown from 14 in 1991 to 72 in 2009. This is also a needed trend, as another recommendation from the IOM Future of Nursing Report is to double the number of nurses with a doctorate degree by 2020. Much of this goal is based on ensuring at least 10 percent of BSN graduates matriculate into a master's or doctoral program within five years of graduation.

To assure that there are adequate numbers of well qualified nurses to care for the health needs of Nebraska citizens requires continuous monitoring of student enrollment and graduation rates as well as monitoring matriculation rates from one graduate level to another.

Good nursing care does not depend upon numbers alone. Quality education that prepares safe nurses to deliver the nursing care for today as well as the future is dependent upon a number of factors, and the two situations that limit the amount of growth in numbers of students and graduates are not enough qualified faculty and limited clinical space. The problem with the lack of qualified faculty are the funds needed to attend master's or doctoral programs and the resulting salary that is non competitive with other nursing positions. The problem with limited clinical experience is just that. There is a limitation as to how many students any clinical site can accommodate because of patient/client numbers, whether it is an acute care hospital, a long-term care facility, an ambulatory clinic or a community agency.

With continuous monitoring of increased enrollment and expansion of existing programs, with the approval of additional programs that can be supported by clinical agencies and prepared faculty, and with the coordination of advancing from one level of education to another, it is planned that there will be adequate numbers of prepared nurses to meet the challenges of the "baby boomer" nurses retiring and meeting the existing and differing nursing care needs of the future.

Did You Know?

That there are 52 different videos that you can access on the National Council of State Boards of Nursing Website?

The videos can be accessed at www.ncsbn.org. Under the Role of Boards of Nursing as seen on CBS, click on "watch the video." This will take you to the video, and on the Right side of this page, there will be a list of 52 different videos that are available to view. The Role of Boards of Nursing video is only 30 seconds long, but most of the others will be 30 minutes long and some of them longer. The topics are varied. One of them is the 30 minute presentation that Dr. Peggy Hawkins presented at a NCSBN Scientific Symposium in Washington, D.C., on our grant regarding transition to practice.

Update: Center for Regulatory Excellence Transition Grant

By Peggy L. Hawkins, Ph.D., RN, BC, CNE

The Center for Regulatory Excellence provided Nebraska with a grant to study the transition to practice of new RN and LPN graduates in rural and urban settings at acute and long-term care facilities in Nebraska. This latest update on the project will focus on the fall activities associated with the project.

With the conclusion of the baseline data analyzed in Phase One of the project, Phase Two is well underway. Phase Two is a year-long activity in which facilities have been invited to participate in a two-step process. There are 20 facilities interested in participating. Of these 20 facilities, four are from acute care, urban facilities; 10 are from acute care, rural facilities; four are from long-term care, rural facilities; and two are from long-term care, urban facilities. It is essential that long-term care and rural facilities are well represented.

The first step in Phase Two is to conduct two pre-test surveys with current new graduates and their preceptors. Managers will also be queried. This step is nearing conclusion. Over 80 preceptors and 73 new graduates at the 20 participating facilities have completed pre-test

surveys. However, only one new graduate is an LPN. During the second step of Phase Two, preceptors are given a two-day preceptor development program, and new graduates are given eight online educational modules followed by more surveys as post-tests.

The first of the preceptor development programs were held Oct. 11-12 in Lincoln and Oct. 14-15 in North Platte. The speaker was Susan Boyer, RN, M.Ed., Director of the Vermont Nurses in Partnership (www.VNIP.org). Vermont has worked approximately 10 years on the issues surrounding new graduate transition to practice and has numerous resources and services it offers. Content of the two-day program included the roles of preceptors, novice to expert concepts, delegation and accountability, teaching/learning theory, communication, interpersonal relationships, tools for preceptors, critical thinking development, and collaboration. Additional preceptor development programs are being planned for Spring 2011 for any new facilities wishing to participate in the project.

Educational modules for new graduates

were drafted by nurse experts and will be approved by Review Groups (both rural and urban) for appropriateness, relevance, accuracy, completeness and feasibility. Once approved, the educational modules will be made available to participating facilities via a website.

The interest in new graduate transition to practice is of interest to many constituencies. Findings from Phase One of the project have been presented at the Nebraska Health Care Association on 9/21/10, the Scientific Symposium in Washington, D.C., on 9/26/10, as a poster presentation at Nebraska Nurses Association on 10/8/01, and as a poster presentation at the Licensed Practical Nurses Association of Nebraska on 10/21/10. In addition, updates have been provided to the Nebraska Center for Nursing and the Nebraska Assembly of Deans and Directors of Nursing.

Because of the need for more rural and long-term care facilities and especially new LPN graduates, please contact the project director, Peggy Hawkins, at Peggy.Hawkins@nebraska.gov or at 402.334.7136 if you are interested in learning more about participation.



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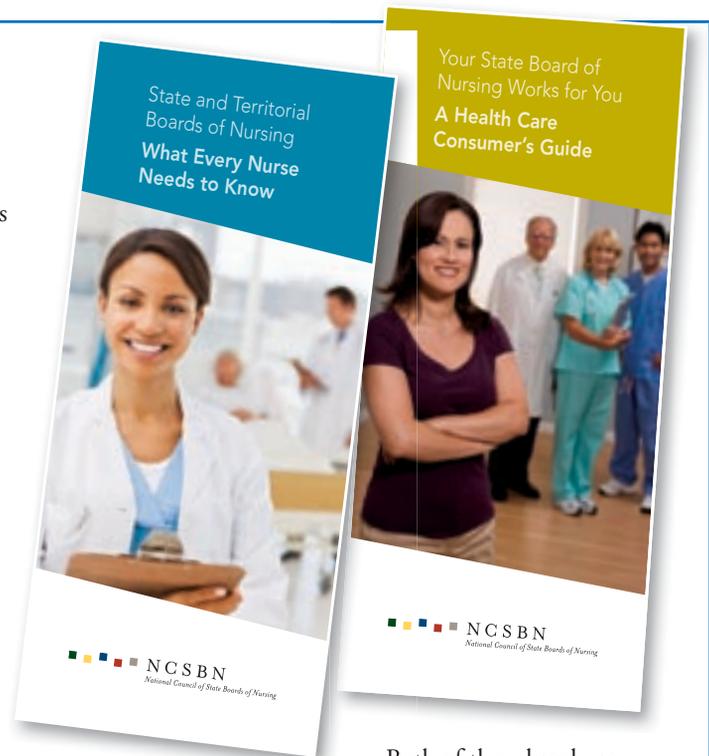
New Brochures Available

The National Council of State Boards of Nursing has recently released two new brochures; *State and Territorial Boards of Nursing: What Every Nurse Needs to Know* and *Your State Board of Nursing Works for You: A Health Care Consumer's Guide*.

State and Territorial Boards of Nursing: What Every Nurse Needs to Know offers an explanation of what Boards of Nursing do for the profession and those who work in it. It specifically addresses a Board's investigation into violations of a state's nurse practice act (NPA). This brochure explains the importance of the NPA; the process for filing a complaint against a nurse who has exhibited unsafe, negligent or incompetent behavior; and what a nurse can expect while their complaint is being investigated. It also offers helpful information for nurses who are the subject of a complaint.

Your State Board of Nursing Works for You: A Health Care Consumer's

Guide explains how a Board of Nursing protects the public. It serves as a guide to consumers to use when they have experienced or witnessed a nurse exhibiting unsafe, negligent or incompetent behavior. The brochure outlines actions a consumer can take to file a complaint, including examples of incompetent, negligent or unsafe behavior, how to file a complaint with the BON and what to expect while a complaint is being investigated. It also defines various nursing roles and responsibilities in an effort to help consumers understand who is providing care and in what capacity they should be doing so.



Both of these brochures are available on our website at <http://www.hhs.state.ne.us/crl/nursing/Rn-Lpn/brochures.htm>. If you are interested in obtaining hard copies, contact Diana Baker at 402-471-0317.

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Advanced Practice Q&A

Q: I am licensed in Nebraska as an APRN-NP. I currently hold a certification as a Family Nurse Practitioner. My certification expires this year. Do I need to recertify to maintain my APRN-NP license?

A: Yes. Current certification/recertification is a requirement for

licensure as an APRN-NP. It is also a requirement for the APRN-CRNA, APRN-CNM and APRN-CNS as well. If you do not maintain your certification, it could result in discipline on your license. The Uniform Credentialing Act (Neb. Rev. Stat. 38-178) states, "Disciplinary actions: grounds a credential to practice a profession may be denied, refused renewal, or

have other disciplinary measures taken against it on any of the following grounds: (19) Failure to maintain the requirements necessary to obtain a credential."

It is your responsibility to maintain your certification/recertification and ensure that official verification is provided to our office.

Practice Q&A

Q: I volunteer as a parish nurse for my church. I am semi-retired and not currently employed as a nurse. Can these volunteer hours count toward the hours I need to renew my nursing license?

A: Yes, the nursing volunteer hours do count as practice hours. To renew a nursing license, a nurse must meet the continuing competency requirements, which for most nurses include 500 hours of practice in the previous five years. The Nurse Practice Act defines nursing as "Practice of nursing means the performance for compensation or gratuitously of any act expressing judgment or skill based upon a systematized body of nursing knowledge," Neb. Rev. Stat. 38-2210.

As long as you are practicing nursing, there is no requirement that you are in a paid position for you to use the hours to renew your license. The only requirement is that you are practicing nursing. There are many nurses that are involved in volunteer nursing activities. If you are volunteering as a nurse, keep a personal log of the hours you work and if you are selected for audit at renewal time, you can provide us a copy of your log.

Volunteer Nursing Opportunities

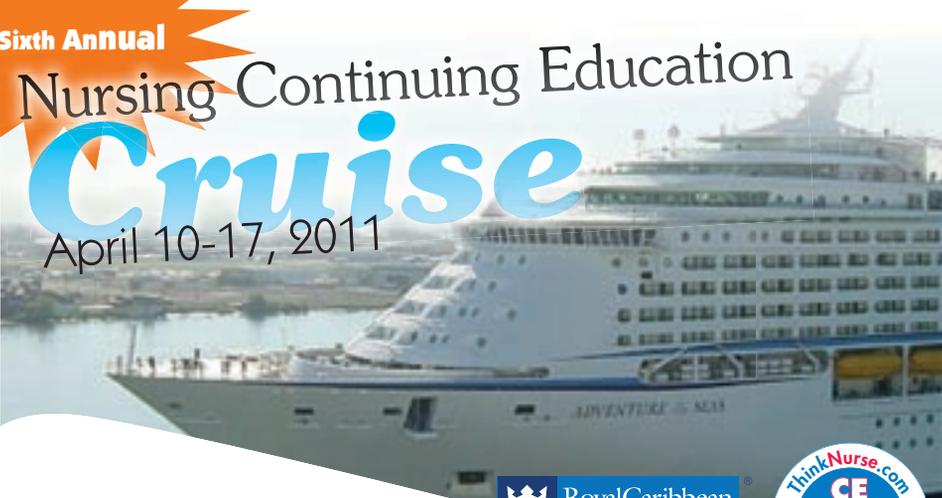
We, at the Board office, frequently hear from nurses that are interested in possible volunteer nursing activities. We would like to help by providing a resource for those nurses. We are establishing a list of volunteer opportunities on the *Center4Nursing* website, www.center4nursing.com. If you are looking for a nurse(s) to volunteer in your organization, please send the information to Karen Bowen, karen.bowen@nebraska.gov, for listing on the website. If you have further questions, contact Karen at 402-471-6443.

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12-Apr	Willemstad, Curacao	8:00 AM	6:00 PM	Docked
13-Apr	Oranjestad, Aruba	8:00 AM	6:00 PM	Docked
14-Apr				Cruising
15-Apr	Roseau, Dominica	8:00 AM	5:00 PM	Docked
16-Apr	Charlotte Amalie, St. Thomas	8:00 AM	6:00 PM	Docked
17-Apr	San Juan, Puerto Rico	6:00 AM		

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RN and APRN Renewal Summary 2010

The 2010 renewal period for RNs and APRNs is now complete. This is the first year that APRN licenses could be renewed online, and 88 percent of the credential holders renewed online. RN credential holders utilized the online option at 89 percent. The number of RN licenses renewed totaled 23,519, and the total number of APRN licenses was 1,485.

The online renewal process has many advantages over using the paper form. With online renewal, the application is processed the next business day, and if everything was complete, the renewed license is mailed the next business day. However, this process can be complicated for a number of reasons:

1. If your computer is set to avoid pop-ups, you will miss important information related to documentation

that must be sent into the Department by postal mail before a license can be issued, such as change of name, legal presence documents, convictions and discipline from another state.

2. It was noted early on that certain firewalls on personal computers would not allow the online process to work properly.
3. Using the roller wheel on the mouse when going through questions will cause the answers to change. This was a major problem with online renewal this year, and many people thought their licenses were renewed when in fact the Department was waiting

for written documentation for the applicant.

Paper renewals are still an option for those people who do not like to use the online system. The Department received 2,606 paper renewals from RNs and 206 paper renewal from APRNs. Paper renewals do take much more time for the licensing specialists to process, and applicants run the risk of not having licenses renewed if they are submitted late in the month of October.

Please remember to keep the Department updated with current mailing addresses and e-mail addresses. These addresses are the only way the licensing unit can communicate with you. You can call our office at (402) 471-4376 to change your address, or you may change your demographics at www.dhhs.ne.gov/lis/lisindex.htm and follow the directions.

1/2 H ad to come

Sheila Exstrom Wins Nebraska Nurses Association award

The Nebraska Nursing Association held its annual conference in Kearney again this year on Oct. 8-9. It was very well attended by many segments of the nursing community from across the state. Topics presented were timely and allowed participants to reexamine trends in



nursing on a local and national perspective. Health care reform was on the minds of many of the participants, and discussions were lively as the key points and recommendations from the Institute of Medicine (IOM) were discussed and debated.

Exhibitors at the meeting were able to display a wide array of products and information, including the Center for Nursing display presented by Juan Ramirez, Ph.D., who has been analyzing the statistical data since 2006. Juan is very enthusiastic about

his role with the Center for Nursing and helped many of the participants access the website that has amazing data related to nursing shortages, projections for nursing to 2020, numbers of minorities and men in nursing in Nebraska, and much more. The website for the Center for

Nursing is www.center4nursing.com.

During the evening dinner, our own Sheila Exstrom was awarded the "Outstanding Achievement in Nursing" award. Sheila has contributed to nursing in so many ways over the years and truly deserves this award. Several of the nursing students and nurses present congratulated Sheila on her award, and one even suggested that Sheila was "our very own Nebraska Florence Nightengale" because of her devotion to our profession. Congratulations, Sheila!!

1/3 V ad to come

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Practical Nursing Education Programs in Nebraska

There are 10 practical nursing education programs in Nebraska; six of the programs are located in Community Colleges, two are located in not-for-profit non-public (private) senior colleges, and two are located in “for profit” colleges.

The geographic locations span from Omaha to Scottsbluff and from Norfolk to Beatrice, and some of the programs have multiple campuses and satellites. The programs are:

- Central Community College, Grand Island, with additional campuses in Kearney and Columbus
- Clarkson College, Omaha
- College of Saint Mary, Omaha
- Kaplan University, Lincoln
- Kaplan University, Omaha
- Metropolitan Community College, Omaha
- Mid-Plains Community College, North Platte, with satellites in McCook, Broken Bow and Valentine
- Northeast Community College, Norfolk
- Southeast Community College, with an additional campus in Lincoln and satellites in Geneva and Falls City
- Western Nebraska Community College, Scottsbluff, with an additional campus in Alliance and a satellite in Sidney

All of the programs are approved by the Nebraska Board of Nursing, and two (Southeast Community College and Western Nebraska Community College) are also accredited by the National League for Nursing Accrediting Commission.

All of the programs are full time with the exception of Clarkson College, which has only a part-time program.

The programs vary in the number of classes they admit each year, from one class to five classes.

Below is a listing of the Nebraska practical nursing programs, website addresses, directors, and the number of 2009 graduates.

Name of Program	Website Address of Program	Nursing Director	# of 2009 Graduates
Central Community College	www.ccneb.edu	Jeanette Vincent, RN	59
Clarkson College	www.clarksoncollege.edu	Cynthia Schlotfeld, RN	3
College of Saint Mary	www.csm.edu	Tasha Conley, RN	27
Kaplan University, Lincoln	http://lincoln.kaplanuniversity.edu	Hope Bauman, RN	56
Kaplan University, Omaha	http://omaha.kaplanuniversity.edu	Mindy Barna, RN	123
Metropolitan Community College	www.mccneb.edu	Nancy Pares, RN	87
Mid-Plains Community College	www.mpcca.edu	Diane Hoffmann, RN	18
Northeast Community College	www.northeastcollege.com	Karen Weidner, RN	43
Southeast Community College	www.southeast.edu	Crystal Higgins, RN	102
Western Nebraska Community College	www.wncc.net	Anne Hippe, RN	39

Did You Know?

Information about the U.S. Government HRSA Nursing Education Loan Repayment Program grants can now be found on the Center4Nursing website?

Access this information at www.center4nursing.com and then click on the National Health Services Corps Nursing Educational Loan Repayment Program.

1/3 block ad to come



Registry Action on Nurse Aides

Medication Aides

Actions against nurse aides and medication aides will no longer be reported in the Nursing News. Current information regarding nurse aides and medication aides can be found by accessing the License Information System at www.dhhs.ne.gov/lis/lisindex.htm. Click on General License Information and follow the directions. You may contact the Nurse Aide Registry by e-mail at nancy.stava@nebraska.gov or telephone at 402-471-0537. The Medication Aide Registry may be contacted by e-mail at kathy.eberly@nebraska.gov or by telephone at 402-471-4364 for additional information.

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Licensure Actions

The following is a list of licensure actions taken between Aug. 1, 2010, and Oct. 31, 2010. Additional information is available on our website at www.nebraska.gov/LISearch/search.cgi or by e-mail at angela.l.holly@nebraska.gov.

Licensee	Date of Action	Action	Violation
Timothy Hendrickson LPN 16249	8/5/10	License Reinstated on Probation	Misdemeanor conviction which has a rational connection with fitness to practice the profession. Abuse of, dependence on, or active addiction to alcohol, any controlled substance . . . Disciplinary action taken against license to practice nursing in another state.
Heather Fowler RN 67973	8/6/10	Censure Civil Penalty	Violation of previously imposed probationary conditions.
Rebecca Grant RN 50108	8/6/10	Privilege to Practice Censured	Violation of the Uniform Credentialing Act-Practice of nursing in NE without an active compact license .
Philip Lofgren RN 49210	8/6/10	Censure Civil Penalty	Violation of previously imposed probationary conditions.
Jody Moore RN 63361	8/16/10	Suspension	Unprofessional Conduct-Departure from or failure to conform to standards of acceptable and prevailing practice or ethics of the profession.
Timothy Pontti RN 67696	8/9/10	Censure	Unprofessional Conduct-Departure or failure to conform to the standards of acceptable and prevailing practice or ethics of the profession.
Elaine Selig RN 64220	8/6/10	Censure Civil Penalty	Unprofessional Conduct-Failure to exercise technical competence based upon the level of nursing for which licensed. Falsification or misrepresentation of material facts in attempting to procure nursing employment.
Maryclare Vu RN 55502	8/6/10	Censure	Unprofessional Conduct-Departure from or failure to conform to the standards of acceptable and prevailing practice or ethics of the profession.
Alta Clark LPN 19957	8/6/10	Suspension Censure	Unprofessional Conduct-Departure or failure to conform to the standards of acceptable and prevailing practice or ethics of the profession.
Tami Fine LPN 22871	8/6/10	License Issued on Probation	Misrepresentation of material facts in procuring or attempting to procure a credential. Abuse of, dependence on, or active addiction to alcohol, any controlled substance . . . Misdemeanor convictions which have a rational connection with the fitness to practice the profession.
Rhonda Gaber LPN 12757	8/6/10	Voluntary Surrender in Lieu of Disciplinary Proceedings	Practice of the profession while ability to practice is impaired by physical, mental or emotional disability.
Mandie Johnson LPN 20886	8/6/10	Censure Civil Penalty	Violation of previously imposed probationary conditions.
Kimberley Skinner LPN 14600	8/6/10	Censure	Misrepresentation of material facts in procuring or attempting to procure a credential.
Jennifer Snyder LPN 20805	8/6/10	Revocation	Violation of previously imposed probationary conditions
Kimberly Weibel RN 31851	8/15/10	Non-disciplinary Assurance of Compliance	Unprofessional Conduct-Failure to follow policies or procedures implemented in the practice situation to safeguard patient care.
Glenda Capler RN 55653	8/14/10	Non-disciplinary Assurance of Compliance	Unprofessional Conduct-Failure to maintain an accurate patient record.
Anna Dedic RN 53905	8/16/10	License Reinstated on Probation	Previous disciplinary action.
Patricia Broberg RN 48949	8/14/10	Non-disciplinary Assurance of Compliance	Unprofessional Conduct-Failure to maintain an accurate patient record.
Patricia Piper RN 45434	8/17/10	Non-disciplinary Assurance of Compliance	Unprofessional Conduct-Failure to maintain an accurate patient record.
Audra Betts RN 63213	9/3/10	Suspension Probation	Alcohol Dependence. Misdemeanor convictions which have a rational connection with fitness to practice the profession. Unprofessional Conduct-Practice of the profession while ability to practice was impaired by alcohol.
Michael Carroll RN 68727	8/24/10	Revocation	Conviction of a felony which has a rational connection with fitness or capacity of the licensee to practice the profession.
Carla Curtis RN 49643	9/3/10	Probation	Conviction of a misdemeanor which has a rational connection with fitness to practice the profession. Alcohol Dependence.
Cynthia Daniels RN 60111	9/3/10	Probation	Alcohol Dependence.

Licensee	Date of Action	Action	Violation
Roxanna Hall RN 52363	9/3/10	Revocation	Violation of previously imposed probationary conditions.
Andrea Kopsi RN 51479	8/24/10	Censure	Unprofessional Conduct-Departure from or failure to conform to the standards of acceptable and prevailing practice of the profession. Failure to report loss of nursing employment in accordance with the State Mandatory Reporting Law.
Rose Kothe RN 49513	8/24/10	Censure	Unprofessional Conduct-Failure to conform to the standards of acceptable and prevailing practice of the profession.
Heidi Millar RN 56281	8/24/10	Voluntary Surrender in Lieu of Disciplinary Proceedings	Violation of previously imposed probationary conditions.
Kristin Shields RN 71362	8/24/10	License Issued on Probation	Misdemeanor convictions which have a rational connection with fitness to practice the profession. Abuse of . . . alcohol. . .
Shelley Uglow RN 43715	9/3/10	Suspension	Unprofessional Conduct-Failure to furnish the Board or its Investigator with required information or requested documents during the disciplinary investigation process. Diagnosis of opioid abuse rule out dependency.
Heidi Walker LPN 17436	8/24/10	Censure	Practice of the profession beyond authorized scope. Unprofessional Conduct-Failure to conform to the standards of acceptable and prevailing practice of the profession.
Bruce Lovejoy APRN 110411	8/26/10	Non-disciplinary Assurance of Compliance	Practice of the profession beyond authorized scope.
Marcy Erickson LPN 21302	8/28/10	Non-disciplinary Assurance of Compliance	Unprofessional Conduct-Failure to utilize appropriate judgment in administering safe nursing practice based on level of nursing for which licensed.
Sandra Fleming Collins LPN 19712	8/26/10	Non-disciplinary Assurance of Compliance	Failure to report misdemeanor conviction in accordance with the State Mandatory Reporting Law.
Kristin Willman RN 45712	9/3/10	Non-disciplinary Assurance of Compliance	Unprofessional Conduct-Failure to utilize appropriate judgment in administering safe nursing practice based upon the level of nursing for which licensed.
Joseph Swanson LPN 20832	9/10/10	Suspension Probation	Conviction of a felony which has a rational connection with fitness to practice the profession. Failure to report felony conviction and employment termination in accordance with the State Mandatory Reporting Law. Failure to provide Department Investigator with releases for treatment records requested.
Margaret Althaus RN 60116	9/13/10	License Reinstated on Probation	Previous disciplinary action.
Michael Amenta RN 60132	9/17/10	License Reinstated on Probation	Previous disciplinary action.
Tanisha Avery RN 60417	9/15/10	License Reinstated on Probation	Previous disciplinary action.
Maurine Bloemer RN 49886	9/15/10	Voluntary Surrender	Abuse of, dependence on, or active addition to alcohol . . . Unprofessional Conduct-Departure from or failure to conform to the standards of acceptable and prevailing practice of the profession.
Zak Hinzmann RN 68811	9/15/10	Censure	Unprofessional Conduct-Failure to conform to the standards of acceptable and prevailing practice or ethics of the profession. Dishonorable Conduct.
Carrie Smith RN 58264	9/25/10	Revocation	Violation of the Uniform Controlled Substances Act. Failure to report misdemeanor conviction and nursing employment termination in accordance with the State Mandatory Reporting Law.
Samantha Stephany RN 67319	9/15/10	Censure	Unprofessional Conduct-Failure to conform to the standards of acceptable and prevailing practice or ethics of the profession.
Lorri Gelder LPN 20148 LPN-C 1204	9/15/10	Suspension	Abuse of, dependence on or active addiction to alcohol, any controlled substance . . Failure to complete aftercare chemical dependency treatment program and failure to comply with the NE Licensee Assistance Program.
Mary Spinharney LPN 2487	9/15/10	Voluntary Surrender in Lieu of Disciplinary Proceedings	Violation of Non-Disciplinary Assurance of Compliance. Unprofessional Conduct-Departure from or failure to conform to the standards of acceptable and prevailing practice of the profession.
Donna Griggs-Stewart RN 23600	9/15/10	Limitation	Negligent Conduct. Unprofessional Conduct- Departure from or failure to conform to the standards of acceptable and prevailing practice of the profession.
Janie Rapier RN 58919	9/23/10	Limitation	Unprofessional Conduct-Departure from or failure to conform to the standards of acceptable and prevailing practice of the profession.
Mark Rea RN 41898	9/23/10	Revocation	Felony conviction which has a rational connection with fitness to practice the profession.
Elaine Rosane LPN 14304	9/23/10	Probation	Violation of a Non-Disciplinary Assurance of Compliance.

DISCIPLINARY ACTIONS

Licensee	Date of Action	Action	Violation
Audra Schmidt LPN 15430	9/23/10	Suspension Civil Penalty	Misrepresentation of material facts in procuring or attempting to procure a license. Unprofessional Conduct-Departure from or failure to conform to the standards of acceptable and prevailing practice of the profession.
Sandra Steinbach LPN 19619	9/23/10	Limitation	Negligent Conduct. Unprofessional Conduct-Failure to utilize appropriate judgment in administering safe nursing practice based upon level of nursing for which licensed. Failure to maintain an accurate patient record. Committing any act which endangers patient safety and welfare. Failure to report employment termination in accordance with the State Mandatory Reporting Law.
Linda Thomas LPN 16522	9/13/10	Suspension	Unprofessional Conduct-Failure to conform to the standards of acceptable and prevailing practice of the profession.
Heather Roberts LPN 17349	9/24/10	Non-disciplinary Assurance of Compliance	Unprofessional Conduct-Committing any act which endangers patient safety or welfare.
Arlene Goergen LPN 17637	10/1/10	Non-disciplinary Assurance of Compliance	Failure to report misdemeanor conviction in accordance with the State Mandatory Reporting Law.
Suzanne Hahn RN 47491 lapsed	10/7/10	Limitation	Unprofessional Conduct-Failure to utilize appropriate judgment and exercise technical competence in administering safe nursing practice based upon level of nursing for which licensed. Failure to follow policies or procedures implemented in the practice situation to safeguard patient care. Committing any act which endangers patient safety or welfare. Accepting an assignment when did not have competence to safely perform the intervention required by the assignment.
Michele Pearrow RN 70487	10/17/10	Probation	Unprofessional Conduct-Failure to utilize appropriate judgment and exercise technical competence in administering safe nursing practice based upon level of nursing for which licensed. Committing any act which endangers patient safety or welfare.
Michelle Phillips RN 68340	10/17/10	Suspension	Unprofessional Conduct-Departure from or failure to conform to the standards of acceptable and prevailing practice of the profession. Practice in a pattern of incompetent or negligent conduct
Kristan Moss RN 65689	10/7/10	Limitation	Unprofessional Conduct. Failure to report nursing employment termination in accordance with the State Mandatory Reporting Law.
Grace Sonntag RN 67047	10/7/10	Suspension	Dishonorable Conduct. Unprofessional Conduct-Failure to conform to the standards of acceptable and prevailing practice of the profession.
Kimberly Steinke RN 58419	10/17/10	Probation	Unprofessional Conduct-Multiple medication errors.
Clarissa Dickson LPN 22976	10/7/10	License Issued on Probation	Misdemeanor convictions which have a rational connection with the fitness to practice the profession. Alcohol abuse.
Jeannette Hintz LPN 11942	10/7/10	Voluntary Surrender in Lieu of Disciplinary Proceedings	Violation of previously imposed limitation conditions.
Michelle Hoefft LPN 16029	10/7/10	Censure Civil Penalty	Violation of previously imposed probationary conditions.
Debora Pebley LPN 7681	10/17/10	Probation	Abuse of, dependence on, or active addiction to . . . any controlled substance, or any mind altering substance.
Debra Rhoads LPN 7552	10/7/10	Censure Civil Penalty	Misrepresentation of material facts in procuring or attempting to procure a license.
Rachel Robinson LPN 20609	10/17/10	Probation	Abuse of, dependence on, or active addiction to alcohol, any controlled substance, or any mind-altering substance. Violation of the Uniform Controlled Substances Act. Unprofessional Conduct-Departure from or failure to conform to the standards of acceptable and prevailing practice of the profession.
JaNea Adkins LPN 13711	10/8/10	Non-disciplinary Assurance of Compliance	Failure to report loss of nursing employment in accordance with the State Mandatory Reporting Law.
Jeri Dentlinger RN 58304	10/14/10	Probation	Conviction of a misdemeanor which has a rational connection with fitness to practice the profession. Failure to report misdemeanor conviction in accordance with the State Mandatory Reporting Law. Diagnosis of alcohol abuse and alcohol dependence.
Brigette Grey RN 67141	10/16/10	Non-disciplinary Assurance of Compliance	Failure to report disciplinary action in another state as required by the State Mandatory Reporting Law.
Kayla Walsh RN 68137	10/14/10	Censure	Unprofessional Conduct-Failure to conform to the standards of acceptable and prevailing practice of the profession.
Dawn Pitner LPN 16399 LPN-C 1042	10/14/10	Probation	Violation of the Uniform Controlled Substances Act Unprofessional Conduct.

Licensee	Date of Action	Action	Violation
Heidi Rhynalds LPN 12290	10/28/10	Non-disciplinary Assurance of Compliance	Failure to report misdemeanor conviction in accordance with the State Mandatory Reporting Law.
Janelle Sharrar RN 51087 APRN-CRNA 100740	10/21/10	Temporary License Suspension	Abuse of, dependence on or active addiction to alcohol, any controlled substance . . . Violation of the Uniform Controlled Substances Act. Unprofessional Conduct-Failure to utilize appropriate judgment in administering safe nursing practice based upon level of nursing for which licensed, failure to follow policies or procedures implemented in the practice situation to safeguard patient care, misappropriating medications . . . Committing any act which endangers patient safety or welfare. Practice of the profession while ability to practice is impaired by alcohol, controlled substances or mind-altering substances.
Stephanie Blome-Weibel RN 65744 APRN 110914	10/25/10	Temporary License Suspension	Abuse of, dependence on or active addiction to alcohol, any controlled substance . . . Failure to report misdemeanor conviction in accordance with the State Mandatory Reporting Law. Misdemeanor conviction which has a rational connection with fitness to practice the profession. Misrepresentation of material facts in procuring or attempting to procure a license. Unprofessional Conduct-Failure to conform to the standards of acceptable and prevailing practice of the profession, failure to have an Integrated Practice Agreement on file with the Department.
Vanessa Evans RN 42210	10/29/10	Non-disciplinary Assurance of Compliance	Failure to report loss of nursing employment in accordance with the State Mandatory Reporting Law.



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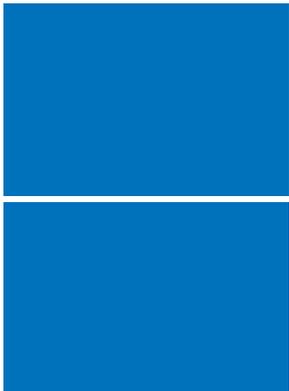
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1990 Twenty Years Ago in Nursing News

- RNs were reminded to renew their license before the December 31 expiration date.
- Employers were encouraged to verify RN license renewal by requiring a copy of the renewed license. If an RN could not produce a copy of a renewed license, employers were advised not to schedule them to work.
- Employers could also call the board office with name and license number information and verify up to 5 licenses.
- Renewal requirements included submission of all continuing education. Continuing education could be inservice education provided by an employer or education courses approved by the Nebraska Board of Nursing.
- Board of Nursing meeting highlights included:
 - Reappointment of Charles Meyer and Byron Anderson to the Nurse Practitioner Advisory Council
 - Reaffirmed the advisory opinion of the removal of chest tubes
 - Updates on the status of revised Rules and Regulations for Licensure of Nurses
 - Heard a report of the major actions taken by the Delegate Assembly of the NCSBN
 - Began discussion of the need for completion dates on nursing transcripts
 - Heard reports of the National Nursing Image Campaign in Nebraska
 - Approved the request for Corrinne Pederson, consumer member, to attend the AARP meeting of Board consumer members in Washington D.C.
 - Approved Ann Van Hoff to attend the NLN Baccalaureate and Higher Degree Program meeting
 - Heard reports of the meetings of the Special Care Providers task force
- A warning to nurses who practiced on an expired license (not renewed) that reinstatement of their expired license could be denied if evidence existed that they practiced after expiration of the license.
- An education program, "Management of Pesticides Poisonings: A Guide for Nurses" was available at the board office for use free of charge. The program consisted of an audio tape and accompanying slides.

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If you do not have access to the Internet, please contact the Licensure Unit for information or questions concerning:

Nursing and Nursing Support

General Issues

Diana Baker, RN, MSN
Section Administrator
(402) 471-0317
diana.baker@nebraska.gov

Advanced Practice Nursing

(APRN-NP, APRN-CRNA, APRN-CNM, APRN-CNS)

Initial Licensure

Licensure by Endorsement

Reinstatement of Licensure

License Renewal/Audit Questions

Angela Holly
(402) 471-2666
angela.l.holly@nebraska.gov

Nursing Practice Issues

Karen Bowen, RN, MS
(402) 471-6443
karen.bowen@nebraska.gov

Registered Nurse

Licensure Based on Examination (NCLEX®)

Licensure Based on Endorsement Renewal/Audit Questions

Karen McGann
(402) 471-4375
karen.mcgann@nebraska.gov

Licensed Practical Nurse

Licensure Based on Examination (NCLEX®)

Licensure Based on Endorsement Renewal/Audit Questions

Mary Ann Moore
(402) 471-4925
maryann.moore@nebraska.gov

Licensed Practical Nurse Certified

Certification by Examination

Certification Renewal/Audit Questions

Mary Ann Moore
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Nurse Aide

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Questions Related to: Interstate Endorsements, Nursing Students, Military Training, Foreign Trained Nurses

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General

Mailing Labels

Available online at:
<http://www.nebraska.gov/crl/orders.htm>

Information on Disciplinary Actions

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