

| Volume 16 | Number 1 | Winter 2018 |

DAKOTA NURSE

C O N N E C T I O N

**South Dakota Board of Nursing Adopts
Revised Advisory Opinion on Dermatologic
Procedures Performed by Licensed Nurses**

**Support the North Dakota Center for
Nursing's Recruitment and Scholarship
Efforts on Giving Hearts Day**

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What's the Difference?

Dakota Nurse Connection circulation includes over 28,000 licensed nurses, hospital executives and nursing school administrators in North and South Dakota.



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919 S. 7th Street, Suite 504, Bismarck, North Dakota 58504-5881 • 701-328-9777



A message from the Executive Director

Gloria Damgaard, RN, MS, FRE
South Dakota Board of Nursing

Message from the Executive Director

Happy 2018 to all of our readers of the Dakota Nurse Connection! We are preparing for another busy year at the Board of Nursing. We are happy to be involved in innovative methods of nursing regulation such as the enhanced Nurse Licensure Compact (eNLC). You will recall that the South Dakota legislature enacted the new compact during the 2016 Legislative Session.

On January 19, 2018, twenty-seven states will implement the eNLC. By now, South Dakota nurses, employers and educators have received communication about the implementation process. We are preparing for a smooth transition. The most significant changes with the eNLC include a set of uniform licensure requirements for any nurse that obtains a multistate license in a compact state. Nurses holding an active and unencumbered multistate license on July 20, 2017, are grandfathered into the new compact as long as the license remains unencumbered on the implementation date of January 19, 2018. Nurses applying for a multistate license after July 20, 2017 are required to meet the new uniform licensure requirements.

Not all nurses will automatically obtain a multistate license if they reside in a compact state. Nurses and employers need to verify that a nurse holds a multistate license if they intend to practice in SD on a privilege. In some of the new states to the eNLC, nurses will be required to apply for a multistate license. Therefore, the license status needs to be verified on each nurse. **Do not assume that licensure in a compact state automatically means that the nurse has a multistate license, it may be a single state license.** Nursys.org and Nursys eNotify are excellent tools for verification of the status of a nurse's license. For up-to-date information about the eNLC and Nursys tools, visit ncsbn.org/eNLC.

There are three states in the current compact that have not adopted the eNLC. Those states are: New Mexico, Colorado and Rhode Island. Colorado and New Mexico are planning to adopt the new compact during their 2018 legislative sessions. The ncsbn.org/eNLC web-site will be updated when these states enact the legislation.

If you have any questions about the implementation of the eNLC, please do not hesitate to call our office for assistance.

I will touch base with you again in the spring. Best wishes for a happy and productive 2018.

Sincerely,

A handwritten signature in cursive script that reads "Gloria Damgaard". The ink is dark and the signature is fluid and legible.

Gloria Damgaard, RN;MS
Executive Director, SD Board of Nursing



A message from the Executive Director

Stacey Pfenning, DNP, APRN, FNP, FAANP
North Dakota Board of Nursing

Greetings and welcome to the Winter edition of the *Dakota Nurse Connection*, the official publication of the North Dakota Board of Nursing (NDBON).

Nurse Licensure Compact

The NDBON is busy preparing for the January 19, 2018 “Go Live” date for the enhanced Nurse Licensure Compact (eNLC). In December, the governor of Wisconsin signed legislation enacting the eNLC, bringing the number of states moving forward with implementation to 27. The NDBON directors and administrative staff are working closely with Nursys and the eNLC operations team to facilitate a seamless licensure transition for nurses in ND. In October and November, letters were sent to all licensees, employers, and nursing education programs to provide the required information related to licensure during the transition and outlining procedures. On December 12, 2017, the eNLC adopted an initial set of rules which will be effective January 19th. For more information, please visit the NLC website at <https://www.nursecompact.com/index.htm>. For upcoming eNLC meetings and webinars for employers and licensees, implementation FAQs, and adopted rules, please visit the Licensure Compact section of the National Council of State Boards of Nursing website at <https://www.ncsbn.org/enhanced-nlc-implementation.htm>. This information is also available on the NDBON website and ND Center for Nursing website, Facebook, and Twitter.

Committees and Meetings

The NDBON actively participates in Governor Burgum’s ND Nursing Workforce Shortage Taskforce and contributed to presentations to stakeholders across the state during fall and winter 2017. The presentations served to disseminate the workforce data analysis, describe drivers contributing to the shortage, and explore potential solutions with stakeholders. Next steps for the taskforce will be to prioritize the action plans and facilitate implementation to enhance nursing workforce to meet the needs of the state. To view the final nursing supply and demand projections and taskforce action plan slides presented, visit the ND Center for Nursing platform titled “Nursing Workforce Research” available at <https://www.ndcenterfornursing.org/nursing-workforce-research/>.

The NDBON also participates in the State of Emergency Opioid Epidemic Team initiated by Governor Burgum in Fall 2017. The NDBON is currently working with ND Board of Medicine and ND Board of Pharmacy to draft a regulatory joint statement to provide guidance to prescribers with the aim to curb the opioid epidemic in ND.

The NDBON convened the first Advisory Panel to address the numerous inquiries received by the NDBON related to the RNs legal scope of practice and ketamine administration and/or monitoring. The Advisory Panel workgroup consists of 6 members including Dr. Kevin Buettner, APRN as the Board Member Chair. The workgroup has met several times in person and via videoconferencing. The workgroup plans to have information and recommendations for the NDBON directors and legal counsel to review prior to presenting to the Board.

The NDBON will continue to post news on licensure, education, practice, and pertinent legislative activities on the website. Watch for the Spring 2018 edition of the *Dakota Nurse Connection* as the Board and staff continue to provide regulatory updates and publications.

Sincerely,
Dr. Stacey Pfenning DNP APRN FNP FAANP



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MISSION

The mission of the North Dakota Board of Nursing is to assure North Dakota citizens quality nursing care through the regulation of standards for nursing education, licensure and practice.

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NORTH DAKOTA BOARD OF NURSING 2017-2018 BOARD MEETING DATES

January 18, 2018

March 22, 2018

May 17, 2018

July 19, 2018 Annual Meeting

Please note:

All meetings will be held in the Board office conference room, 919 South Seventh Street, Suite 504, Bismarck, ND and are open to the public. Observers are welcome to attend.

Agendas will be listed on the Board website, www.ndbon.org, and will include the time. The agenda will be available 5 business days prior to each meeting.

As a service to the citizens of North Dakota, the Board provides a PUBLIC FORUM during each Board meeting (refer to agenda of each meeting for time). This is a time when anyone may address the Board about any issue regarding nursing. Prior notification is not necessary. Individuals will be recognized in the order of their signature on a roster available at the meeting.

ND Board of Nursing Office Security Announcement

The NDBON implemented new office security including entrance control. If you plan to visit the Board office, please consider the following:

1. A visit to a Director requires an appointment. To schedule an appointment, call 701-328-9777
2. Email items to contactus@ndbon.org or fax to 701-328-9785.
3. If you do plan to visit the Board office, you will need to push the buzzer at the door, state your name and the reason for the visit prior to admittance.
4. If you have any questions, please call 701-328-9777

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Web site: www.ndbon.org
Choose *Demographic Updates* under *Nurse Licensure*

LICENSURE VERIFICATION

North Dakota License Verification Options

The North Dakota Board of Nursing provides the following options for individuals attempting to verify a ND nursing license:

- North Dakota Board of Nursing Website – go to www.ndbon.org
Choose “Verify”
- Nursys® QuickConfirm at www.nursys.com
 - Look up a license from any QuickConfirm participating board of nursing and print/download a report with the licensure and discipline status information for that nurse.
- Nursys® E-Notify at www.nursys.com
 - **Institutions:** Enroll your entire nurse list and e-Notify will send regular updates of changes to licenses from e-Notify participating boards of nursing.
 - **Nurses:** Sign up to receive license expiration reminders and status updates via email or SMS for all your licenses from e-Notify participating boards of nursing.

NORTH DAKOTA BOARD HIGHLIGHTS

September 2017

- Approved Drug and Alcohol Testing Network, LLC, Bismarck, ND for drug testing encumbered licensees during their probationary period with the board.
- Approved the proposed revisions to the “drug testing policy”. The revisions reflected changes related to the transition to the new drug testing company, updating the fee schedule for Letter of Concerns, and required disclosures of use of any substance which could alter a drug screen.
- Buchholz provided an update to the board regarding the petition for continued recognition of the ND Board of Nursing by the Department of Education.
- Reviewed minutes of the August 31st meeting of the Ketamine Advisory Panel Workgroup. The Panel is composed of three APRNs and three RNs and board of nursing staff. The panel is reviewing the role of the RN in the monitoring of ketamine and is also reviewing current practice statements related to this topic. The panel plans to bring an evidence based interpretive statement to the board for consideration after research of discussion of this topic.
- Reviewed a summary of the progress of the eNLC implementation. On July 20th, the 26th state enacted the eNLC and the implementation date will be January 19, 2018. The current NLC will no longer exist on that date for state implementing eNLC. The board reviewed a list of meetings held in preparation for implementation.
- Board supported the election of Pfenning to the NCSBN eNLC Compact Administrator Executive Committee as a director at large through September 30, 2019, and membership on the eNLC administrative rules committee.
- Shirley Porter, President of the ND Medial Imaging and Radiation Therapy Board of Examiners (NDMIRTB) was present to address the board. The NDMIRTB was established during the 2015 legislative session, and is in the process of holding a public hearing for rules related to performing medical imaging and radiation therapy. In July 2017, Pfenning attended a meeting with the Executive Director and Dr. Connie Kalanek (assisting with rules) to discuss ND Nurses performing bone densitometry medical imaging. The proposed rules will require continuing education, a certification, and licensure through NDMIRTB for continued performance of this testing. The proposed rules were available for board member review.
- Reviewed progress of the ND Board of Medicine of proposed rule revisions related to telehealth and Prescription Drug Monitoring Program (PDMP).
- Approved the appointment of Pfenning to President of the Board of Directors for the ND Center for Nursing through October 2019.
- Pfenning is representing the Board on the Envision 2030 Health Care Advisory Committee.
- Reviewed the Draft Action Plan developed by the Governor’s Nursing Workforce Shortage Planning Team. Michelle Kommer, Labor Commissioner, Interim Executive Director, Job Service ND and Patricia Moulton, Executive Director for the ND Center for Nursing were available to present the Planning Team’s findings and recommendations, and request feedback from board members and the nursing community. The presentation is currently being shared with stakeholders throughout the state.
- Dr. Kevin Buettner, APRN Board Member, submitted a summary of the Health Care Advisory Group Meeting with Senator Heidi Heitkamp at the UND School of Medicine & Health Sciences he attended on August 16, 2017 on behalf of the board.
- A meeting the Executive Director’s from the ND Board of Pharmacy, ND Board of Nursing, ND Board of Dental Examiners and ND Board of Medicine was convened by State Health Officer Mylynn Tufte related to the declaration and implementation of Emergency Executive Orders related to the opioid crisis in ND. Proposed strategies were presented and reviewed.

November 2017

- Brian Bergeson, SAAG, presented an annual overview on the complaint resolution process used by the Board’s Compliance Division and Compliance Advisory Council (CAC) including: Board office receipt of potential violation reports; investigation and analysis; CAC review of case evidence gathered during investigation; negotiation of settlements with respondents and legal counsel; final recommendation to the Board. The SAAG provided education on open meeting requirements and recusing and abstaining when voting.
- Approved the Compliance Advisory Council (CAC) Policy and Procedure and continued delegation of the following authority to the CAC: 1) Review case facts and evidence provided by the Primary Case Investigator; 2) Determination as to whether a violation of ND 43-12.1 Nurse Practices Act occurred; 3) Propose recommendations to the Board related to disciplinary proceedings; and 4) Resolve and disposition cases that meet select criteria.
- Board accepted the Nursing Education Committee recommendation to:

continued on page 8

continued from page 7

1. Find the compliance report submitted by the Rasmussen College, School of Nursing, Baccalaureate degree nursing education program nurse administrator addressing the issues of partial compliance with NDAC 54-03.2 Standards for Nursing Education Programs: *faculty policies*. and *54-03.2-05-01. Student Policies*. meets the standard; and
2. find the progress report submitted by the Rasmussen College, School of Nursing, Baccalaureate degree nursing education program nurse administrator demonstrates alignment with approved plans for program implementation proposed with the June 2017 NDBON survey; and
3. find the Rasmussen College Baccalaureate degree nursing education program in substantial compliance with NDAC 54-03.2. Standards for Nursing Education Programs; and
4. continue initial approval of the Rasmussen College Baccalaureate degree nursing education program until July 2018; and require an onsite survey in June 2018; and
5. require the Rasmussen College Baccalaureate degree nursing education program nurse administrator to submit a

progress report demonstrating continued implementation of approved plans to the board office March 1, 2018.

- Board accepted the Nursing Education Committee recommendation to approve the North Dakota State University Traditional Baccalaureate Program Request for Curriculum Major Programmatic Change as the Program has Full Approval from the ND Board of Nursing and the Programmatic Change is in Compliance with NDAC 54-03.2-06-02. Programmatic Changes.
- NDSU School of Nursing submitted notification of change in Program Administrator. Wendy Kopp, Associate Professor of Practice and Interim Director has been appointed as the Director of NDSU Nursing at Sanford Health.
- The University of Mary, Division of Nursing, Traditional Baccalaureate Program submitted notification of a programmatic change for the board's review. The program will implement the addition of an accelerated second-degree BSN program. Program enrollment will be limited to 16 students, with 11 accepted to begin the program in January 2018.
- The Petition for Renewal of DOE Recognition for the ND Board of Nursing is progressing, and the surveyor's report has been received with five areas identified for additional review and information.

The board office has submitted or provided guidance for those items and is currently awaiting a response. The DOE will meet in February to review the board's approval status, and Buchholz and possibly Pfenning will attend the meeting.

- Board accepted the Nursing Education Committee recommendation to grant J.S. a Nursing Education Loan in the Amount of \$500 Pending Acceptance into a Board Approved Licensed Practical Nurse Refresher Course, and Receipt of Required Nursing Education Loan Documentation According to *NDAC 54-04.1 Nursing Education Loans*.
- Directors recently received several correspondences related to the scope of practice for registered nurses (RN) working in Medi (medical) spas. Directors are in the process of reviewing a scope of practice decision-making framework which was formally completed and submitted to the board office by a concerned citizen. The board considered the following queries: level of training/certification of RNs performing the injections; use of protocols; the prescribing, dosing, ordering, and dispensing of the pharmaceuticals in the spas; the practitioner/prescriber supervision; oversight of the Medi Spa facilities in the state. Directors described discussions with several state Boards regarding public safety concerns related to RN's role in medical spas and aesthetic-related procedures and/or injections. Directors reported variations in rules and practice statements among states in respects to medical directors/prescriber supervision during the RN performance of these treatments. The board reviewed practice statements from SD Board of Nursing, as well as the board's current practice statement "*Aesthetic Cosmetic and Dermatological Procedures by Licensed Nurses*". The board instructed directors to add the discussion to the upcoming ND Tri-Regulator Council meeting, as this is may be a pharmacy and medical concern as well. The board requested directors further review the board's



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current practice statement. Directors to provide update to the Board in January.

- As part of the Governor's meeting in September on the Opioid Epidemic, it was requested that the Prescription Drug Monitoring Program (PDMP) distribute a list of the top prescribers for each board. Names were redacted from the list, and it is suggested the lists be used as a tool to point out where the boards can improve in reducing the number of opioids prescribed.
- In July 2016 the Comprehensive Addiction and Recovery Act (CARA) was signed into law. One major provision of CARA is the authorization of prescribing privileges to NPs and PAs for FDA approved opioid treatment medications containing buprenorphine, a Schedule III controlled substance. Under CARA, NPs and PAs must complete 24 hours of training to be eligible for a waiver to prescribe and must be supervised by or work in collaboration with a qualifying physician (defined under Federal law as a physician that is an addiction specialist or has taken the appropriate training), *if supervision or collaboration is required by state law*. ASAM collaborated with the AANP and the AAPA to help develop the curriculum and the training to meet this training requirement. It is discussed that NPs in family practice would not be presented with this issue but should be addressed through human service centers. The group's request that state boards distribute this information to NPs throughout the state.
- On behalf of the ND Association of Nurse Anesthetists (NDANA), Buettner and Paula Schmalz presented results of research on the topic of dry needling interventions and the role of the Certified Registered Nurse Anesthetist (CRNA). The purpose of the research was to address the following: 1) do existing graduate entry-level nurse anesthesia educational programs include the didactic content and practicum experiences necessary for

safe practice utilizing dry needling as an intervention for chronic pain management? 2) for the CRNA that desires to utilize dry needling as an intervention for chronic pain management, what additional education (didactic and practicum) would be necessary? The board reviewed and discussed the research findings and motioned to support "NDANA Interpretive Statement for Dry Needling by CRNAs in North Dakota". Buettner recused himself from voting on this agenda item.

- Pfenning discussed the progress of the eNLC Implementation occurring January 19, 2018 and the Rule Promulgation timeline. Board staff had input on a letter sent to all licensed nurses from NCSBN, and the letter for ND nurses was sent in the past weeks. The administrative rules have been prepared and are currently open for public comment. A 2nd phase of rulemaking is being drafted and will be ready by March 2018. Board staff are preparing for implementation.
- Approved the reappointment of Sara Berger and Janet Johnson as external members for Nursing Education Committee for an additional two-year term through September 2019.
- Approved participation of NDBON directors in the CFN nurse regulation day to be scheduled in 2018 and waive \$300 CE presentation fee.
- Reviewed an update on collective efforts by ND Dept. of Health, ND Dept. of Human Services and regulatory boards to address the opioid epidemic in ND. The Tri-Regulator Collaborative (boards of medicine, pharmacy and nursing) will be meeting with plans to develop a position statement on pain management and opioid addiction. Board members support this effort.
- Directed the Executive Director to participate in the development of a ND Tri-Regulator collaborative joint statement addressing opioid state of emergency to be presented to the board for consideration.



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Nursing Education Loan Program

Below are highlights of the Nursing Education Loan program.

- To the extent funds are available the education loans will be made in the following amounts:
 - \$1000 for the non-degree licensed practical nurse student.
 - \$2000 for the associate degree practical nurse student and the associate degree registered nurse student.
 - \$3000 for the baccalaureate registered nurse student.
 - \$4000 for the master’s degree in nursing including the post-master’s certificate.
 - \$5500 for the doctoral graduate student.
 - Refresher course students
- may receive a loan of not more than the cost of the course.
- The funding for the program is \$10.00 per renewal fee which typically amounts to approximately \$70,000 - \$80,000 annually.
- Applications are accepted annually beginning March 1st with a deadline of July 1st.
- The awards are made annually and reapplication may occur annually if the applicant has not received the total loan amount.
- The awards for undergraduates are disbursed from the Board of Nursing to the financial aid office in one payment each fall (or upon acceptance into the nursing program), for distribution to the recipient as determined by the financial aid office.
- The awards for the graduate students are made directly to the recipient.
- No changes have been made to the repayment portion of the program.
- A recipient receives \$1.00 credit toward repayment of the loan for every hour they are employed in nursing in the state of ND after program completion.
- Our records indicate a vast majority of nursing education loan recipients take advantage of this option, and do remain in the state of ND for employment after graduation.
- Application forms are available on the North Dakota Board of Nursing website at <https://www.ndbon.org/Education/NursingEdLoan/Overview.asp>.

NURSING EDUCATION LOAN DISBURSEMENTS PER FISCAL YEAR

The following table identifies the nursing education loan disbursements by program type and monetary awards for the last five years.

Nursing Education Loans awarded for:	2012-2013		2013-2014		2014-2015		2015-2016		2016-2017	
LPN Certificate Program	1	\$550	1	\$800	1	\$800	1	\$800	1	\$850
LPN Associate Degree Program	4	\$4000	3	\$3200	3	\$3360	3	\$4280	0	\$0
RN Associate Degree Program	11	\$10,550	9	\$13,600	4	\$5760	1	\$650	4	\$5750
RN Baccalaureate Degree Program	26	\$30,900	19	\$28,640	27	\$45,456	21	\$31,090	24	\$37,725
Master’s Degree Program	14	\$19,300	16	\$32,950	12	\$25,386	16	\$28,943	18	\$29,476
Doctoral Program	12	\$18,400	8	\$21,000	6	\$11,748	7	\$15,779	12	\$17,945
Refresher Course	0	0	0	0	0	0	0	0	0	0
Total	68	\$83,700	56	\$100,190	53	\$92,510	49	\$81,542	59	\$91,746



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Feb. 23.....8th Annual Sanford Rare Disease Symposium (Sioux Falls, SD)

Mar. 29Perinatal Neonatal Women's Conference (Sioux Falls, SD)

Apr. 5.....Pediatric Trauma Symposium (Sioux Falls, SD)

Apr. 12Heart and Vascular Symposium (Fargo, ND)

Apr. 20Edith Sanford Breast Center Symposium (Sioux Falls, SD)

Apr. 25Kidney Symposium (Sioux Falls, SD)

Jun. 22-2340th Annual Black Hills Pediatric Symposium (Deadwood, SD)

Aug. 24Diabetes Care Conference (Sioux Falls, SD)

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Support the North Dakota Center for Nursing's Recruitment and Scholarship Efforts on Giving Hearts Day

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ONE GIVING HEART

GIVING HEARTS DAY | FEB. 8TH, 2018

The North Dakota Center for Nursing is excited to once again participate in Giving Hearts Day, to be held February 8th, 2018. Giving

Hearts Day is a 24-hour fundraising effort hosted by the Impact Foundation and the Alex Stern Family Foundation for organizations

in North Dakota and Western Minnesota. Each year the campaign raises millions of dollars for non-profits across the region.



Representatives from the ND Center for Nursing Board of Directors

All proceeds given to the North Dakota Center for Nursing on Giving Hearts Day will fund scholarship opportunities, as well as recruitment efforts. The North Dakota Center for Nursing's goal, through your Giving Hearts Day Donations, is to provide student nurses with financial resources in addition to marketing the nursing profession to meet the healthcare demands of tomorrow. Your donations will help support the next generation of nurses.

There are three easy ways to give towards our Giving Hearts Day Campaign – all donations must be \$10 or greater to be counted towards Giving Hearts Day:

1. Drop off or mail a check to our Fargo office – your check must be dated for February

8th, 2018 and made out to the North Dakota Center for Nursing. Our office is located at the following address:
North Dakota Center for Nursing
3523 45th St S, Suite 152
Fargo, ND 58104


2. Drop a check off at our Bismarck Giving Hearts Day drop-off location at the North Dakota Board of Nursing in Bismarck, located at 919 S 7th St, Suite 504. Be sure to date your check for February 8th, 2018 and that it is made out to the North Dakota Center for Nursing.

3. Make a donation online on Giving Hearts Day, February 8th, 2018 at www.givingheartstoday.org

The Dakota Medical Foundation is partnering with the center to provide matching dollars. If the North Dakota Center for Nursing is able to raise \$4,000, the Dakota Medical Foundation will provide an additional \$4,000 in matching dollars.

In addition, the North Dakota Center for Nursing will be participating in the Giving Hearts Day/Vision Bank video contest. As Giving Hearts Day approaches, the North Dakota Center for Nursing will email out a link allowing nurses to vote for its video. This year's video winner will receive \$500. Everyone is encouraged to vote and share the voting link with their friends, family and co-workers.

Help support our future nurses by making a donation on Giving Hearts Day!


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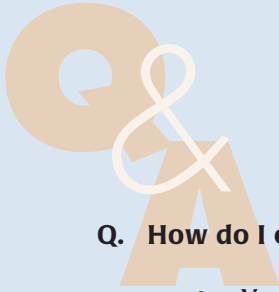
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ndsu.edu/nursing

Frequently Asked Questions
License by Endorsement



Q. How do I endorse into North Dakota?

- A. You may endorse into North Dakota by completing the online application process for Initial License by Endorsement and submitting all the necessary documents listed under “To Apply”. The License by Endorsement application is available on the website under Nurse Licensure.

Q. How long is my initial license valid?

- A. Effective 4/1/2014, applicants for initial licensure by endorsement or examination shall receive a license expiring on 12/31 of the following year as part of the application fee. _

Q. Does North Dakota require an FBI background check or criminal history record check for nurses?

- A. YES. All individuals seeking reinstatement, reactivation, or initial licensure as a nurse in the state of North Dakota must submit, along with the other requirements for licensure/ registration, the required documents and fee to BCI for the purpose of obtaining a Criminal History Record Check (CHRC) from the Bureau of Criminal Investigations (BCI) and the Federal Bureau of Investigations (FBI).

Q. How do I obtain verification of licensure status from ND if I am moving to another state?

- A. Go to the Nursys website at www.nursys.com. From this site you may complete the process online with a credit card. Follow the instructions on the website or form. The online process will allow the state to which you are moving to obtain the required ND verification information from the Nursys system after you apply.

Q. Are records from other nursing boards required?

- A. Yes. We require license verification from your original state of licensure. Most Boards of Nursing use the Nursys system for license verification. To see which Boards of Nursing participate in Nursys please go to www.nursys.com and choose “Nurse License Verification for endorsement participating board of nursing”.

If your original state of licensure does not participate in Nursys, you will need to complete the “Verification of Licensure” form and forward the form to your original state of licensure. Most states charge a fee for completing a verification form. Please contact the appropriate state for proper fee information.

If you do not hold an active license in your original state of licensure, you are required to submit a second verification of licensure form from the state in which you hold an active license and were most recently employed.

Q. How long is the process?

- A. Once all of the paperwork and fee is received in our office, the process will take about 7 to 10 days. A temporary permit will be issued once the board office has received the application, fee, and either an official transcript from your school of nursing or Verification of licensure.

Q. How do I check the status of my endorsement application?

- A. To track the progress of your application, choose “Application Status” under “Nurse Licensure” at www.ndbon.org - those items listed without dates next to them have not been received in our office yet. You may also



check the Board's website at www.ndbon.org and choose "Verify" to see if your license has been issued. If it has not been issued, you may email the Board office by choosing "Contact Us" at the top of the website.

the official transcript from the school of nursing or verification of licensure is received in the board office, a temporary permit is usually issued within 3-5 days.

Q. How long does an incomplete endorsement application stay active in the NDBON files?

A. Incomplete endorsement applications remain active for one year from the date they are initially received in the NDBON office.

Q. What is the average length of time for a nurse who is licensed in another jurisdiction, and who meets ND's criteria for licensure, to receive a temporary permit to practice nursing in ND?

A. Once the application for licensure by endorsement, endorsement fee, and

Q. Can I be granted a temporary permit for license by endorsement while waiting for the results of the CHRC?

A. Yes. The board may grant a 90-day non-renewable temporary permit to an applicant for initial licensure by endorsement who has applied for a CHRC provided the applicant has met all other requirements for the temporary permit.

Q. How long does a temporary permit remain active?

A. Temporary permits are issued for 90 days.

NDBON, NDNA and NDCFN: What's the Difference?

There is some confusion regarding the differences between the North Dakota Board of Nursing (NDBON), the North Dakota Nurses Association (NDNA) and North Dakota Center for Nursing. Hopefully, the following will help clarify some of the confusion.

A COMPARISON OF THE THREE ORGANIZATIONS

North Dakota Board of Nursing (NDBON)	North Dakota Nurses Association (NDNA)	North Dakota Center for Nursing (NDCFN)
<p>919 S 7TH Street, Suite 504 Bismarck, ND 58504-5881 Phone: (701) 328-9777 Fax: (701) 328-9785 Website: www.ndbon.org</p>	<p>1515 Burnt Boat Dr, Suite C #325 Bismarck, ND 58503 Phone: (701) 335-6376 E-mail: Director@ndna.org Website: www.ndna.org</p>	<p>3523 45th Street South Fargo, ND 58104 Phone: (701)639-6548 Website: www.ndcenterfornursing.org</p>
<p>Mission:</p> <p><i>ND Board of Nursing assures North Dakota citizens quality nursing care through the regulation of standards for nursing education, licensure, and practice.</i></p>	<p>Mission:</p> <p><i>NDNA promotes the professional development of nurses, and advances the identity and integrity of nursing to enhance healthcare for all through practice, education, research, and development of public policy.</i></p>	<p>Mission:</p> <p><i>The mission of NDCFN is to through collaboration guide the ongoing development of a well-prepared and diverse nursing workforce to meet health care needs in North Dakota through research, education, recruitment and retention, advocacy and public policy.</i></p>
<p>Description:</p> <ul style="list-style-type: none"> • Governmental regulatory body established by state law under the North Dakota Century Code 43-12.1 Nurse Practices Act to regulate the practice of nursing and protect the health and safety of the public • Regulates the practice of individuals licensed and registered by the Board • Establish standards of practice for RNs, LPNs, and APRNs • Establish standards and regulate nursing education programs • Discipline licensees and registrants in response to violations of the Nurse Practices Act 	<p>Description:</p> <ul style="list-style-type: none"> • 501(c)6 non-profit association • Professional Association for Registered Nurses. • Constituent member of the American Nurses Association (ANA) • Influences legislation on health care policies and health issues and the nurse's role in the health care delivery system • Promotes the continuing professional development of Registered Nurses • Advances the identity and integrity of the profession to enhance healthcare for all through practice, education, research, and development of public policy • Promotes the Scope and Standards of Nursing Practice and the Code of Ethics for nurses 	<p>Description:</p> <ul style="list-style-type: none"> • 501c3 non-profit organization • All nurses and over 40 nursing organizations, education programs, grant programs, state agencies and other stakeholders are members and are invited to volunteer on ND Center for Nursing Leadership Team. • Works to unify voice of nursing in North Dakota through connecting nursing organizations interested in policy issues. • Develops statewide programming to fulfill mission across multiple areas including nursing education faculty and resources, workplace planning, research and development and practice and policy. • Tracks supply, demand and education of nursing workforce.

<p>Board Members:</p> <p>Jane Christianson, RN member, Bismarck: <i>President</i></p> <p>Michael Hammer, RN member, Velva: <i>Vice President</i></p> <p>Jamie Hammer, RN member, Minot: <i>Treasurer</i></p> <p>Tanya Spilovoy, Public Member, Bismarck</p> <p>Janelle Holth, RN member, Grand Forks</p> <p>Mary Beth Johnson, RN member, Bismarck</p> <p>Bonny Mayer, LPN member, Minot</p> <p>Wendi Johnston, RN member, Kathryn</p>	<p>Board of Directors:</p> <p><i>President</i> - Tessa Johnson, MSN, RN president@ndna.org</p> <p>Board of Directors listed at http://ndna.org/Main-Menu/About/Board-Members</p>	<p>Board of Directors: 13 organizations represented. List available on website at: http://www.ndcenterfornursing.org/board-of-directors/</p>
<p>NDBON Staff:</p> <p>Stacey Pfenning, DNP, APRN, FNP FAANP-Executive Director- spfenning@ndbon.org</p> <p>Tammy Buchholz, MSN, RN-Associate Director for Education- tbuchholz@ndbon.org</p> <p>Melissa Hanson, MSN, RN-Associate Director of Compliance- mhanson@ndbon.org</p> <p>Pat Hill, BSN, RN, Assistant Director- Compliance/Practice- phill@ndbon.org</p> <p>Julie Schwan, Administrative Service Coordinator- jschwan@ndbon.org</p> <p>Gail Rossman, Technology Specialist II- grossman@ndbon.org</p> <p>Kathy Zahn, Administrative Assistant- III kzahn@ndbon.org</p> <p>Sally Bohmbach, Administrative Assistant II- bohmbach@ndbon.org</p>	<p>NDNA Independent Contractor:</p> <p>Carmen Bryhn, MSN, RN Executive Director Director@ndna.org</p>	<p>NDCFN Staff:</p> <p>Patricia Moulton, PhD Executive Director Patricia.moulton@ndcenterfornursing.org</p> <p>Kyle Martin, BS Associate Director Kyle.martin@ndcenterfornursing.org</p>



Board Staff Directory

Gloria Damgaard , MS, RN, FRE, Executive Director Concerning Administrative, Legislative, Rules and Regulations	Gloria.Damgaard@state.sd.us (605) 362-2765
Abbey Bruner , Senior Secretary Concerning RN and LPN Renewal, Reinstatement, and Reactivation	Abbey.Bruner@state.sd.us (605) 362-2760
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Tessa Stob , AD, RN, Nursing Program Specialist Concerning Medication Aide Training Programs, Dialysis Tech Training Programs, Unlicensed Diabetes Aide Training and Nurse Aide Training Programs	Tessa.Stob@state.sd.us (605) 362-2770
Jill Vanderbush , Program Assistant Concerning RN and LPN Licensure by Endorsement and Criminal Background Checks	Jill.Vanderbush@state.sd.us (605) 362-2769
Linda Young , MS, RN, FRE, Nursing Program Specialist Concerning APRN Regulation and Practice, RN and LPN Scope of Practice, and Center for Nursing Workforce	Linda.Young@state.sd.us (605) 362-2772

MISSION STATEMENT

To safeguard life, health, and the public welfare, and to protect citizens from unauthorized, unqualified, and improper application of nursing education programs and nursing practices, in accordance with SDCL 36-9 and SDCL 36-9A.

South Dakota Board of Nursing Officers and Members

- Nancy Nelson**
President, RN Member, Sturgis
- Mary Schmidt**
Vice-President, LPN Member, Sioux Falls
- Deborah Letcher**
Secretary, RN Member, Brandon
- Darlene Bergeleen**
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- Sharon Neuharth**
LPN Member, Burke
- Robin Peterson-Lund**
APRN Member, Kadoka
- Kristin Possehl**
RN Member, Brookings
- Lois Tschetter**
RN Member, Brookings

South Dakota Board of Nursing Scheduled Meetings

Location: 4305 S. Louise Ave., Suite 201;
Sioux Falls, SD, Time: 9:00AM

- February 8, 2018
- April 19, 2018
- June 28, 2018
- September 13, 2018
- November 15, 2018

Agenda will be posted 3 business days prior to the meeting on Board's website.

DISCIPLINARY ACTIONS TAKEN BY THE SOUTH DAKOTA BOARD OF NURSING

Name	License Number	September 2017 Board Action
Hennen, Stacey	R027018	Letter of Reprimand
Klein, Courtney	R037251	Summary Suspension
Larson, Katelynn	P012197	Summary Suspension
Lehman, Amy	P011995	Probation and Mandated HPAP
Martinmaas, Cynthia	R024843	Voluntary Surrender
Mitchell, Charnette	P008257	Letter of Reprimand
Peyton, Renae	R029400	Letter of Reprimand
Name	License Number	November 2017 Board Action
Andal, Joni	R023018	Probation with Mandated HPAP
Barnes, Wylie	R033181	Reinstatement with Mandated HPAP
Berens, Beth	R033164	Summary Suspension
Brown, Ashley	R040455	Letter of Reprimand
Cameron, Jessica	R044614	Summary Suspension
Deutscher, Keith	R023070	Suspension
Doerr, Brenda	R042995	Reinstatement with Mandated HPAP
Ford, Angela	R039610	Letter of Reprimand
Fox, Shelley	P010132	Summary Suspension
Grambihler, Susan	R022925	Probation Complete
Klein, Courtney	R037251	Suspension
Larson, Katelynn	P012197	Suspension
Lidgett, Adara	R045252	Letter of Reprimand
Nance, Betty	R014880	Letter of Reprimand
Palmer, Karen	R047702	Voluntary Surrender
Peterson, Daniel	R040467	Suspension
Seibert, Spencer	R032335	Letter of Reprimand
Skeie, Susan	R035789	Letter of Reprimand
Slusser, Brande	R027955	Probation Complete
Swanson, Chelsey	R038317	Reinstatement with Mandated HPAP
Swee, Blake	R045625	Probation with Mandated HPAP
Thomas, Ebonie	RN Applicant	Licensure Denial
Warns-Anderson, Mary	R025737	Letter of Reprimand with Remediation
Wieskus, Deanna	P007546	Letter of Reprimand
Williams, Sarah	R034798	Probation with Mandated HPAP

Access

Licensure forms, update contact information, find advisory opinions, nurse practice act, and more online: www.nursing.sd.gov

Verify

Nurse Licensure and UAP Registration:
<http://doh.sd.gov/boards/nursing/verificationlink.aspx>

SOUTH DAKOTA Center for Nursing Workforce

Find workforce data and trends, future leadership training and submit information online:
<http://doh.sd.gov/boards/nursing/sdcenter.aspx>

South Dakota Board of Nursing Meeting Highlights

November 2017

Board Meetings:

Pursuant to SDCL 36-9-17, the Board is required to meet annually and as often as necessary to transact its business. The South Dakota Board of Nursing generally meets five times a year. Meetings are open to the public; however, SDCL 1-25-2 allows a public body to close a meeting for discussing employee or legal matters. Individuals interested in attending should check the Board’s website for more information and agendas. Information is posted 72 hours prior to the meeting at: <http://doh.sd.gov/boards/nursing/>. Minutes following a Board meeting are posted on the Board’s website within 10 days of the meeting.

The Board selected the following meeting dates in 2018: February 8; April 19; June 28; September 13; and November 15.

Practice:

- Following passage of House Bill 1183 in the SD 2017 legislative session, clinical nurse specialists (CNS) and certified nurse practitioners (CNP) who hold advanced certification with the American Nurses Credentialing Center (ANCC) in psychiatric-mental health nursing, may now perform court ordered criminal justice mental health evaluations. The Department of Social Services will also be requiring CNSs and CNPs who meet the certification criteria to complete a 20-hour training session on performing the evaluation. The Board will assist the DSS in compiling a list of CNSs and CNPs meeting the criteria as required in the new law.
- The Board moved to adopt a revised advisory opinion on dermatological procedures by licensed nurses; see <http://doh.sd.gov/boards/nursing/title-opinion.aspx#Dermatological>.

Education:

- The Board moved to award \$1,000 each to three applicants for the South Dakota Board of Nursing’s Practical Nurse Scholarship.
- The Board moved to approve Southeast Technical Institute’s request to reorganize their program to offer an LPN to RN associate degree program in Huron, South Dakota.
- The Board moved to deny Western Dakota Technical Institute’s request to lift their practical nurse program’s probationary status.
- The SDBON granted a motion to accept the annual reports and continue the approval for the following clinical enrichment programs: Avera McKennan Hospital, Sanford Health, St. Michaels Hospital, SD Correctional Health, Rapid City Regional Hospital, and Huron Regional Medical Center.

Center for Nursing Workforce (CNW):

- The Board granted a motion to financially support a 2018 nursing leadership program, using CNW funds, to be offered in the Sioux Falls area to begin in 2018; this cohort will graduate in 2019. The Board also approved partial funding for Presentation College’s Sigma Theta Tau Rho chapter’s conference speaker.

South Dakota Health Professionals Program:

- The Board contracts with the South Dakota Health Professionals Assistance Program (HPAP) to offer an alternative program which supports health professionals with substance use or mental health disorders and their recovery efforts. Participating in HPAP enhances public safety by reducing risks associated with potentially impaired health conditions. Early intervention and referrals may, over time, decrease licensing board discipline.
- Entry in the program can be voluntary, and if so, confidentiality is maintained. The Board may also mandate nurses to participate in HPAP to protect the public.
- To be eligible to participate, a nurse must hold, or be eligible to hold licensure with the SD Board of Nursing. More information on HPAP is available at: <http://www.mwhms.com/hpap.html>.
- 109 nurses participated in HPAP in 2017. From June 1, 2016 – May 31, 2017 HPAP discharged 24 nurses from the program and admitted 40 new nurse participants. Of the participants 35 voluntarily enrolled and 69 were Board mandated to participate.

Licensure and Registration:

- *South Dakota’s Active Workforce:*

Licensed Workforce	Number
Licensed Practical Nurses (LPN)	2,625
Registered Nurses (RN)	18,177
Certified Nurse Midwives (CNM)	35
Certified Nurse Practitioners (CNP)	946
Certified Registered Nurse Anesthetists (CRNA)	469
Unlicensed Assistive Personnel (UAP) Workforce	Number
Certified Nurse Aides (CNA)	10,323
Unlicensed Diabetes Aides (UDA)	78
Unlicensed Dialysis Technicians (UDT)	56
Unlicensed Medication Aides (UMA)	5,727

continued on page 20

continued from page 19

- **Enhanced Nurse Licensure Compact (eNLC)** implementation will occur on **January 19, 2018**; upon this date nurses holding eNLC multistate licenses may begin practicing in the other states that also adopted the eNLC. Nurses holding multistate compact licenses from an original NLC compact state that has also enacted the new eNLC compact will be grandfathered into the new eNLC. They will be able to practice in the other eNLC states. A nurse residing in a state that is *new* to the eNLC, not a part of the previous original NLC, will be able to practice in other eNLC states contingent upon the board of nursing issuing that

nurse a multistate license. See <https://www.ncsbn.org/11070.htm> for more information.

- **Verification of Employment:** RNs and LPNs are required to attest to the hours worked during a renewal period. The Board does conduct random audits of licensees, if you are selected you will be required to submit a completed employment verification form to the Board office.
- **Nurse License and UAP Registration Verification:** Licensure status for all licensees and registrants may be verified online at: www.nursing.sd.gov select Online Verification.

- The Board's registry *only* provides assurance that individuals listed on the registry have met minimal criteria including the completion of required training and testing to allow them to accept the delegated task of medication administration from a licensed RN or LPN while under nurse supervision. **Registry status does NOT imply that an individual has met moral, ethical, or legal standards and should not take the place of an employer's hiring screening process or background check.**

- **Unlicensed Medication Aides:** Licensed nurses in South Dakota may only delegate medication administration to Unlicensed Medication Aides

(UMA) listed on the South Dakota Board of Nursing's registry. Registry status is valid for a two year time period; registry status may be verified on the Board's website: <https://www.sduap.org/verify/>. If the person is not listed on the registry a nurse may not delegate medication administration to that person.

Prevent a Lapsed License:

- A lapsed nursing license is a serious violation of the Nurse Practice Act. A nurse that has a lapsed license must pay an additional fee to reinstate the license and may also incur discipline. Nurses that practice on a lapsed license may cause their employers to bear additional burdens. Facilities may lose reimbursement money, be cited for lack of compliance, or receive other sanctions by regulatory bodies.
- **Enroll in Nursys e-Notify.** This is a **free service** open to all licensed nurses and employers. Once enrolled, e-Notify will *automatically* send the enrollee, a licensee or employer, license **expiration reminders** and status updates. <https://www.nursys.com/EN/ENDefault.aspx>
- **Keep your address current!** As a practicing nurse you are responsible and accountable to maintain an active license. The Board sends a renewal notice to an actively licensed nurse's *last known address* 90 days in advance. You may change your address online at: <http://doh.sd.gov/boards/nursing/address.aspx>

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South Dakota Board of Nursing Welcomes Dr. Lois Tschetter



The Board of Nursing welcomes Dr. Lois Tschetter, RN, EdD, IBCLC, CNE as a new member. Governor Dennis Daugaard recently appointed her to represent nursing education and serve as a registered nurse member. This is Dr. Tschetter's second opportunity to serve as a member of the Board of Nursing. Her first appointment was from 1993 to 2003. Dr. Tschetter earned her bachelor's and master's degrees from SDSU's College of Nursing, and a doctorate in adult and higher education from the University of South Dakota.

Dr. Tschetter's nursing career began at Sioux Valley Hospital, where she worked initially as a staff RN, then later as an instructor for Sioux Valley Hospital's School of Nursing. She then took a position in Pierre with the South Dakota Department of Health where she served as

the Program Director for the Women, Infants, and Children (WIC) program during a time of expansion of WIC services across the state. In the mid-1980s she became a faculty

member with the College of Nursing at South Dakota State University. She currently serves as Interim Associate Dean for South Dakota State University's undergraduate nursing program.

Rho Xi 24th Annual Research Day

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...the Art and Science of Nursing

Nurses and nursing students in the community will obtain information about how to listen to our patients of diverse cultures and collaborate with health care professionals to provide high quality nursing care, to reduce stress, and incorporate care of patients who have an infectious disease.

Monday, March 19, 2018

**Strode Activity Center
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Keynote: Barbara Bancroft RN, MSN, PNP

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Rho Xi Chapter 420

This continuing nursing education activity was approved by Montana Nurses Association, an accredited approver with distinction by the American Nurses Credentialing Center's Commission on Accreditation.

SD Board of Nursing Seeks Interested Certified Nurse Midwife for Open Position on Advanced Practice Nursing Advisory Committee

The South Dakota Board of Nursing is seeking to fill an open position on their Advanced Practice Registered Nursing (APRN) Advisory Committee for one certified nurse midwife (CNM) open position.

The APRN Advisory Committee is a Board of Nursing appointed committee composed of the following South Dakota licensed APRNs: two CNMs, four Certified Nurse Practitioners, two Certified Registered Nurse Anesthetists, and two Clinical Nurse Specialists.

Committee involvement requires attending an annual meeting held in August and committee work throughout the year conducted by teleconference and e-mail. The Committee is responsible to assist the Board of Nursing in evaluating advanced practice nursing care standards and regulation.

CNMs interested in being considered as an advisory committee member should complete the application questions below and send along with resume/vitae to the Board of Nursing Office, attention Linda Young by March 16, 2018. The Board of Nursing will select a new committee member at their regular scheduled meeting, at which time applications will be reviewed and new committee member selected. Applicants will receive a letter informing them of the Board's decision.

APRN Advisory Committee Application Directions:

1. Provide a copy of your resume/vitae including full name, SD and other state licensure information, and contact information.

Provide a type written response to the following questions:

2. Explain your interest in serving on the Advanced Practice Nurse Advisory Committee.
3. Describe your background education, experience in evaluating standards of APRN care, and experience in policy development.
4. Explain your ability to commit to serving a 3-year term, attend annual meeting in Sioux Falls (next meeting: August 24, 2018), and availability via e-mail or phone to provide direction to Board staff on APRN practice.
5. Submit application materials by **March 16, 2018** to:
Linda Young
South Dakota Board of Nursing
4305 S. Louise Ave, Suite 201
Sioux Falls, SD 57106-4305

Or Email: Linda.Young@state.sd.us Or Fax to Linda Young: 605-362-2768

Contact Linda Young at 605-362-2760 with questions.

Practical Nurse Scholarship Recipients Announced

The South Dakota Board of Nursing offers a Nurses' Education Assistance Scholarship Program to RN and LPN nursing students that are residents of South Dakota who are accepted into a board approved nursing education program. Students may be enrolled in a program leading to initial licensure or a program that leads to nursing degree enhancement. Scholarship money that is distributed through this program is generated through a \$10 fee charged to each nurse upon renewal of a South Dakota RN and LPN license.

Registered nurse scholarships are awarded in the spring and LPN scholarships are awarded in the fall of each year. The number and amount of each scholarship is determined annually by South Dakota Board of Nursing, not to exceed \$1,000 per academic year per student. Scholarship money may be used for direct education expenses such as tuition, books, and fees. To learn more about the SDBON Scholarship program, go to <https://doh.sd.gov/boards/nursing/loan.aspx>.

At the November 16, 2017 Board meeting, members unanimously approved \$1000 be awarded to the following 3 applicants currently enrolled in a practical nursing program. A total of \$3,000 was awarded.

Nursing School	First Name	Last Name	Degree Sought
Lake Area Technical Institute	Marissa	Mickelson	Practical Nurse Diploma
Southeast Technical Institute	Grace	Yount	Practical Nurse Diploma
Western Dakota Technical Institute	Robyn	Hoard	Practical Nurse Diploma



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South Dakota Board of Nursing Adopts Revised Advisory Opinion on Dermatologic Procedures Performed by Licensed Nurses

Linda Young, RN, MS, FRE
Nursing Practice Specialist, South Dakota Board of Nursing

At their November 16, 2017 meeting, the Board moved to adopt the following revised advisory opinion on dermatological procedures performed by licensed nurses. The statement is also posted online at <http://doh.sd.gov/boards/nursing/title-opinion.aspx#Dermatological>.

"The South Dakota Board of Nursing affirms, pursuant to SDCL 36-9-3, SDCL 36-9-4, and ARSD 20:48:04:01, that the performance of aesthetic cosmetic, medical aesthetic or other dermatological procedures may be performed by a licensed RN and LPN as a part of a medically prescribed plan of care for treatment of various dermatological conditions or as a part of a health maintenance/health promotion regime.

With appropriate education, agency approval, and as appropriately supervised by a South Dakota licensed and qualified medical provider, such as a physician, nurse practitioner, or physician's assistant, a licensed RN and LPN may perform:

- Non-ablative light-based devices;
- Non-invasive chemical peels, topical procedures, and microdermabrasion;
- Cold heat for destruction of fat with non-invasive methods (such as Coolsculpting®);
- Injectable treatments, excluding dermal fillers, using FDA approved products only (such as Botox®); and
- Sclerotherapy of superficial veins (LPNs are excluded from performing sclerotherapy).

** Authorized prescribers are expected to use particular caution when delegating injections due to potential risks.*

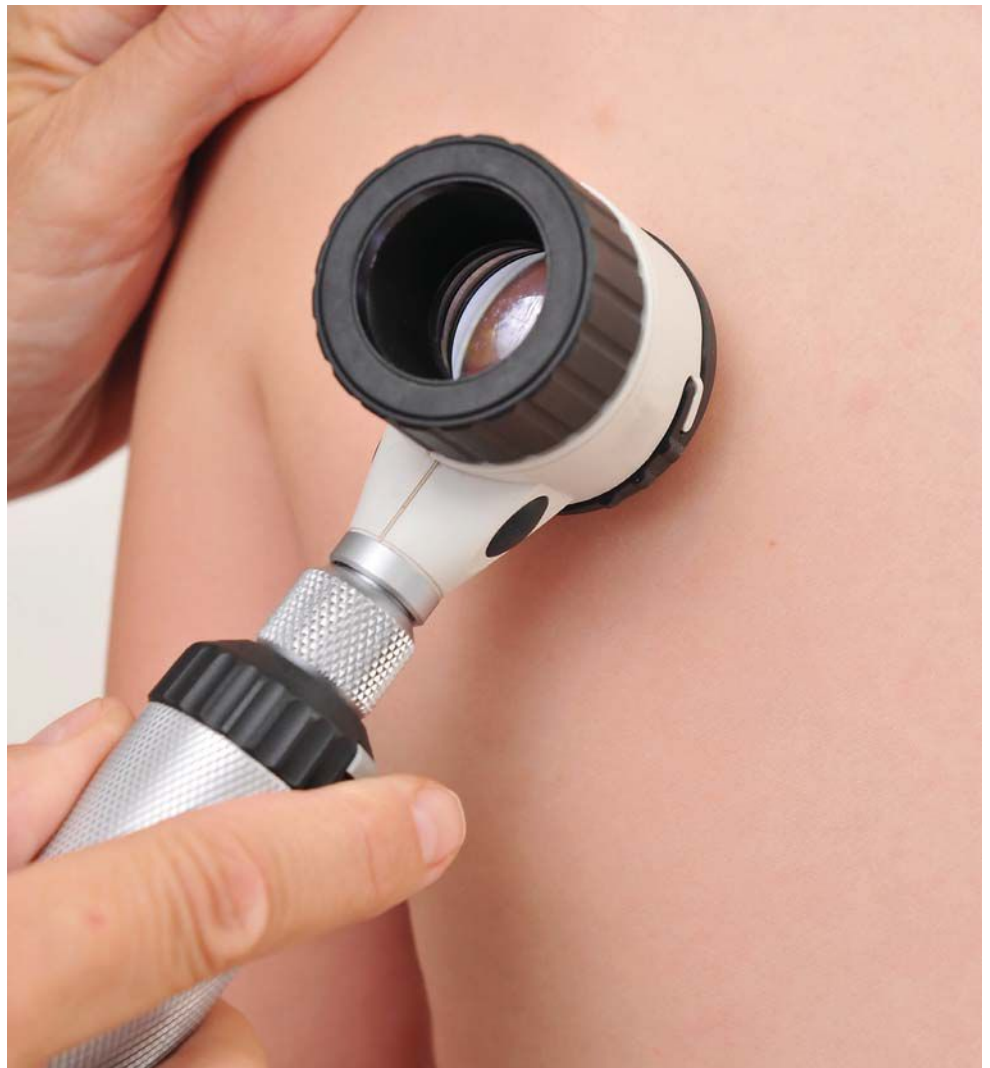
LPNs require direct supervision by the medical provider/prescriber who is physically present in the immediate area and available to intervene if necessary (ARSD 20:48:01).

The ultimate responsibility for delegation and supervision of the delegated procedures lies with the qualified medical prescriber. The RN or LPN must exercise clinical judgment and is personally responsible when accepting

delegated medical acts from qualified medical providers.

Each nurse should obtain educational preparation, receive supervised clinical practice experience, and demonstrate clinical competency to perform these acts within a safe and effective manner and according to accepted standards of practice. Documentation on educational preparation should be readily available upon request; and include:

- Anatomy, physiology, pathophysiology of the integumentary system and supporting structures specific to procedure performed;



- Proper client selection and history taking, physical assessment parameters, and wound healing principles;
- Safe use of product, device, equipment; indications/contraindications, side effects of treatment;
- Pharmacology including drug action/interactions, indications/contraindications, side effects of treatment;
- Management of emergencies; and
- Competency validation.

The facility or practice setting should maintain written policies consistent with applicable standards of practice and evidence based practice. Documentation of procedures performed should include:

- Review and verification of informed consent informing patient of nurse's qualifications and expected outcomes of procedure;
- Patient assessment and history data;
- Specifics of procedure performed and patient response to procedure; and
- Directions for referral back to or consultation with the authorized prescriber of the procedure.

The nurse should provide the patient with written pre and post procedure education.

Laser Use: The South Dakota Joint Board of Nursing and Medical and Osteopathic Examiners affirmed in 2011 that only physicians, nurse practitioners, and physician assistants may be trained to use lasers pursuant to SDCL 36-4-8.2 and approved the Laser Utilization by Nurse Practitioners and Physician Assistants protocol.

Other Acts: Regarding the performance of body piercings, tattoos, permanent

make-up, and electrolysis, the Board affirmed that these functions are not the practice of nursing and hours worked performing such acts may not be used for initial licensure or renewal of a nursing license. If a nurse chooses to perform these procedures the nurse should be appropriately registered or licensed by the appropriate state regulatory board.

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This opinion was rendered by the Board of Nursing upon submission of a written request. Although advisory opinions are not judicially reviewable and do not have the force and effect of law, they do serve as a guideline for nurses who wish to engage in safe nursing practices. This advisory opinion was adopted by the South Dakota Board of Nursing at its 2002 Board meeting, revised: April 2010, March 2011, and November 2017.



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Grief, Stress, Burnout in Nursing and Teachings of the Buddha

Teachings of Buddha

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Of late, I have made an attempt to familiarize myself to the teaching of the Buddha and reflected on how his teachings from nearly 2500 years ago are applicable to the modern world, especially nursing. This article is a reflection of my understanding of the teachings of the Buddha, my experience of being a nurse and an educator.

Buddha was born in India as Siddhartha Gautam to King Suddhodhana and Queen Maya of the Sakhya Dynasty around 563 BC. At his birth, astrologers predicted that he would become a sage. His father had other wishes for him and wanted him to become a warrior and the future king of the Dynasty instead. He felt that one way to keep Siddhartha from becoming a sage was to fill his life with happiness and with all the pleasures one could imagine. As a young Prince, Siddhartha was shielded from any form of grief and sorrow and his father issued special orders to not expose him to any suffering. He was not allowed to venture out on his own and stay within the confines of the palace. However, Siddhartha's intrinsic personality was that of someone who had immense "karuna" for anyone around him including animals and plants. The literal translation of the Sanskrit word "karuna" is hard to find in the English literature. Although translated as "compassion", it, however, has a much deeper connotation than that. It stems from the concept of "Ahimsa" or "non-violence toward all living beings". In Sanskrit and in the

Indian context, the word "karuna" signifies an emotion that is a combination of empathy and compassion, and the experience of which moves one to take action to relieve suffering.

As Siddhartha grew older, he was exposed to death, disease, ageing and the grief and suffering of the people in his kingdom. As a warrior, he was involved in wars with neighboring kingdoms and he realized that wars only caused more suffering and did not relieve suffering and grief. He read the religious scriptures of the times but did not

find any answers to the burning questions that arose in his mind, namely "What was the cause of human suffering and grief?" and "What needs to be done to overcome grief?".

In his desire to find the answers, he left his kingdom and for the next seven years lived the life of a monk. He practiced severe forms of "dhayana" which led to him attaining self-knowledge and enlightenment. "Dhayana" is a Sanskrit word which means "contemplation, reflection" and "profound, abstract meditation". The name "Buddha", meaning a person who has attained full enlightenment, was given to him by his followers.

At the core of Buddha's teachings is the realization that grief is universal, a distinct part of nature itself, and that one cannot escape it. Attachment leads to grief and suffering. To deal with it, he proposed the "middle path"- a path of moderation, between the extremes of sensual indulgence and self-mortification. This, according to him, was the path of wisdom. He asked people to gain knowledge and wisdom and proposed that one can gain the power to deal with grief and suffering by not seeking the



answers outside but within. Knowledge of the “SELF” and attaining the state where one is not “overwhelmed by grief” or “overly excited by happiness” is the state that he proposed one should strive to attain. He accepted that emotions can be powerful, and it is not easy to keep them under control. However, one could attain “self-realization” and the path of moderation through meditation and by controlling one’s breath to control “prana”, meaning life.

Nursing and the teachings of Buddha

The concepts of “Ahimsa” and “Karuna” are integral part of the profession of Nursing. Yes, in the modern times, although we do call it a profession, it is really a calling. It is a profession embraced by those that possess the essential qualities of compassion and empathy and have an intrinsic desire to serve others.

Grief and suffering are also an integral part of Nursing. Be it in an inpatient care setting (acute care) or outpatient care setting (clinic setting or palliative and hospice care), nurses are exposed to grief and suffering on a daily basis. Working 12-hour shifts, especially in an environment where pain, suffering and grief is abundant, can be stressful and can take its own toll. The emotional toll of unexpected death of a patient or caring for a dying patient and their family members

can have its own impact. Nurses create relationships with their patients and attachment is a natural outcome of those relationships. Decline in health or death of a patient that a nurse cared for can take an immense emotional effect. In my practice as a bedside nurse, I have seen many strong and experienced nurses break down emotionally. This emotional impact can be even more profound on new nursing graduates and on nurses during the first few years of their practice. No amount of education can prepare nurses for these experiences. These experiences are individualistic and every person will need to learn to deal with it in their own way. Nursing is a stressful profession in which burnout is commonly experienced. If nothing else, these emotional experiences compound the effect of the stress.

Yes, nurses are resourceful, they adapt and learn. However, we also know that the nursing profession does have a shortage and that burnout is commonly reported by nursing professionals. There is an urgent need to find a way to help nurses deal with the situation, reduce the stress and prevent burnout. How do nurses stay in control of their emotions, and remain in a moderate emotional state- between the extremes of sensual indulgence and self-mortification? I have taught the

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concept of “Grief” to nursing students for the past couple of semesters at the University of South Dakota. The content covered in the classroom provide students with an understanding of grief and the grieving process across the lifespan. Students are taught how to communicate with the patient and their family members with honesty using therapeutic communication. Students are exposed to the fact that experience of death and dying can take an emotional toll on their emotional health. However, I believe that the content covered in most nursing programs across the country falls woefully short of providing students with the necessary information to help them take care of their emotional health. Although schools and colleges focus heavily on developing the knowledge and skill aspects of nursing, students and nursing professionals are not adequately provided with the tools to care for themselves. I feel that there is a tool available for us to use - one that Buddha provided 2500 years ago. The answer is to practice “meditation and breathing exercises” to control emotions. The health literature provides some evidence of the benefits of meditation and breathing exercises on physical and emotional health. These practices should be encouraged among nursing students and professional nurses. Also, researchers need to investigate the benefits of these practices through rigorously designed experimental trials.

Nursing shortage and burnout is a problem that we all (administrators, managers, academicians and nurses themselves) need to be concerned about. Introducing and exposing nursing students to meditation and breathing exercises while they are still in school may be a way to address the issue. Introducing practice of meditation and breathing exercises in nursing schools and hospitals can be an effective way to help nurses deal with grief, suffering and the stressful demands of the nursing profession.

By advocating the teachings of Buddha, I am by no means suggesting anyone to convert to Buddhism. The practice of meditation and breathing exercises can be independent of religious beliefs. Just as hand hygiene is advocated to keep the patient safe, meditation and breathing exercises should be advocated to keep the nurse safe. Above all, nurses need to be cared for as well.



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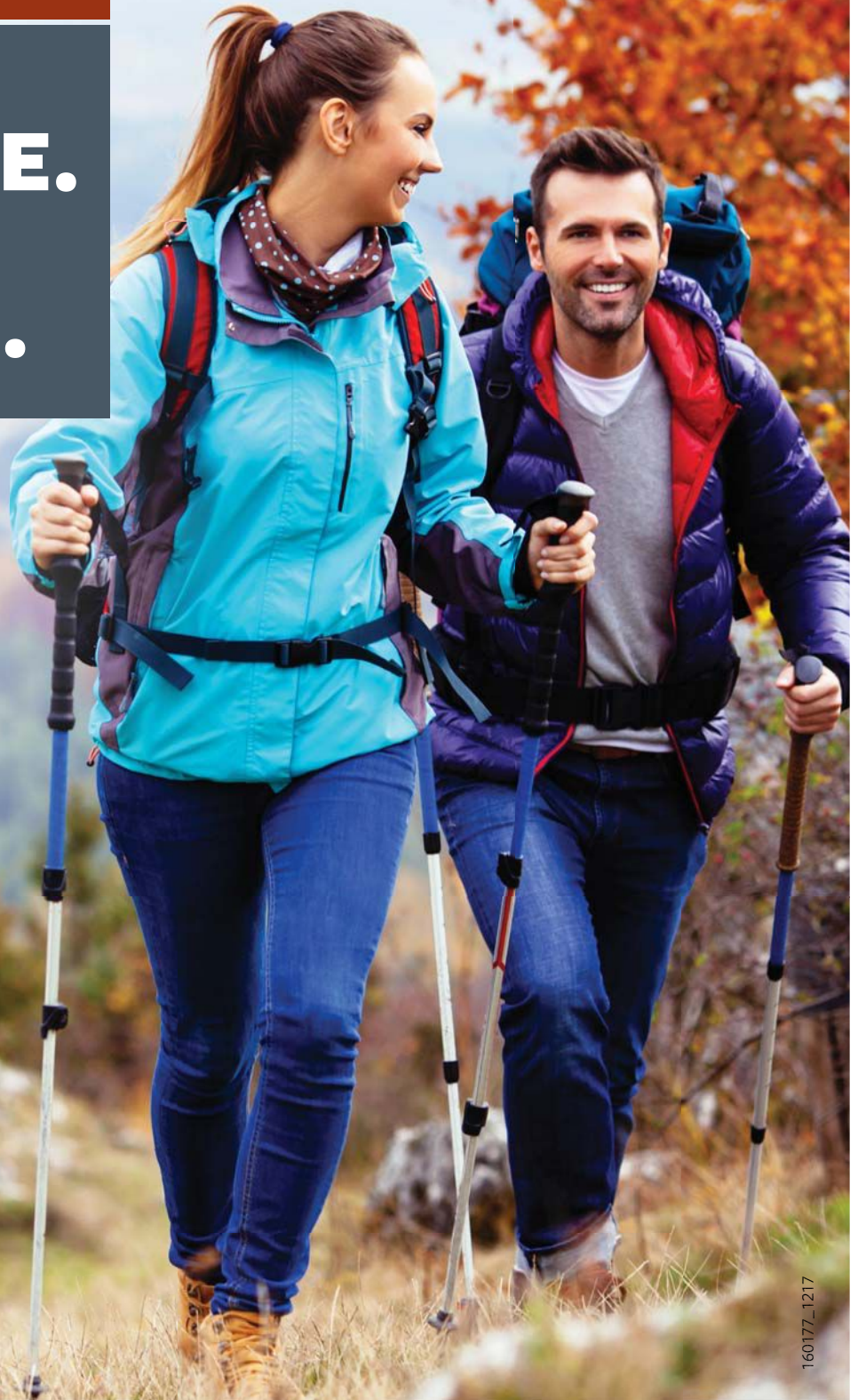
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