

| Volume 17 | Number 2 | Spring 2019 |

DAKOTA NURSE

C O N N E C T I O N

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DAKOTA NURSE

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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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A message from the Executive Director

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

A few years ago, the following message appeared in our magazine. I have had several requests to reprint it over the years and since it is that time of year when we are welcoming the new graduate nurses into our workplaces and profession, I have agreed to do so. I very much enjoyed writing this one.

This spring, the staff of the Board of Nursing and the residents of our office building were treated to a display of nature that we don't often get to see so up close and personal. A mother robin built her nest on the top of the mailbox that sits adjacent to the front door of our office building. The mailbox is so close to the door that the taller people in the office could look the robin in the eye as they approached the door. At first, the mother robin left the nest each time a person approached the door waiting nearby to return when the way was clear. It wasn't long until three small blue robin eggs appeared in the nest. I worried that the mother robin might be perceived as a bother to someone who would thoughtlessly remove the nest from the mailbox or that the work of nesting in this location might become too stressful for the mother robin with so many people to deal with on a daily basis. Much to my delight, neither of those unfortunate events occurred.

As the days went on, the mother robin became accustomed to the flow of human traffic in and out of the office. Staff members approached the door with care and it wasn't long until the mother robin confidently sat on her nest as we carried on with the daily comings and goings of the office. In time, all three eggs hatched and we watched the mother robin tending to the needs of her young. It became a common sight for us to see three baby birds emerge from inside the nest with beaks wide open to receive nourishment from the mother robin. They seemed to disappear inside the nest after each feeding, only to emerge again at the sight of their mother bringing food.

The baby robins grew fast from the constant nurturing of their mother and the day soon came for them to leave the nest. One by one the baby birds flew off. The last one to leave (and the only

departure that I personally witnessed) sat for a while on the edge of the mailbox outside of the nest. Eventually, the bird summoned the courage and off it went to the next phase of bird life. The next day the nest was gone. I still think about the birds and the gift that was given to all of us to bear witness to this miracle of nature that occurs so often but is seldom witnessed. Surely, there was at least one life lesson there for all of us. For me, I started thinking about the parallel of the robins and our new graduate nurses entering our profession each year.

Every year, the number of new graduates entering the nursing workforce increases. Last year there were over seven hundred new graduates that were licensed in our state by examination. We expect the numbers to increase again this year. Each of those nurses will be leaving the nest (so to speak) of nursing education where they have been educated and nurtured along the way to become members of the nursing profession. I worry that the workplace may be too stressful for them or that current members of our profession might find their needs bothersome and thoughtlessly cast them aside. From research, we know that the six month mark for new graduates is critical. It is at that point that many choose to leave the profession. We cannot afford to lose even one of them because we fail to nurture and guide them into seasoned professionals. With that being said, I am confident that each of you will do your part in order for all of health care to bear witness to the mentoring and nurturing of our young professionals. Have a great summer and I will be in touch with you again in the fall.

Sincerely,

A handwritten signature in cursive script that reads "Gloria Damgaard".

Gloria Damgaard, Executive Director



A message from the Executive Director

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

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

NDBON Update

The NDBON celebrated the retirement of Patricia Hill, RN, Assistant Director for Practice and Compliance. Patricia Hill started her employment at the Board office July 7, 1989. Patricia is well known for her expertise in licensure/registration, practice, and compliance. In addition, Patricia is often referred to as the Board's historian for her ability to instantly recall



Patricia Hill, RN retires February 2019

30 years' worth of details and events at any given moment. The Board is pleased to continue to work with Patricia on a contractual basis as a Compliance Consultant.

Committees and Meetings

ND Board of Nursing staff and members attended the National Council of State Board of Nursing (NCSBN)

Mid-Year meeting in March 2019. The meeting provided updates and education related to innovations in regulation and public protection, the Next Generation NCLEX (NGN), the Model Act and Rules, and the APRN Compact Taskforce. In the spirit of nursing regulation, the NDBON members and staff networked with over 230 NCSBN Mid-Year attendees representing nursing boards nationally and internationally.

The NDBON actively participates on the ND Center for Nursing (NDCFN) Rapid Response and Legislative Monitoring teams. During the 66th Legislative Assembly, the NDBON closely monitors regulation related to nursing and healthcare issues and provides legislators and stakeholders with education related to the Nurse Practices Act and ND Administrative Code. During this legislative session, the Board participated in several hearings and committees pertaining to occupational and professional licensing, as well as healthcare and nursing related bills. The NDBON and NDCFN encourage licensee and stakeholder participation on the weekly legislative update calls facilitated through the NDCFN. To review the legislative bills tracked through the NDCFN, please visit <http://www.ndcenterfornursing.org/advocacy-center/>.

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

Sincerely,
Stacey Pfenning, DNP, APRN, FNP, FAANP



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Director of Nursing

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MCHS is currently recruiting a dynamic, out-going team player to fill the role of Director of Nursing for our LTC facility. The LTC DON is responsible for directing resident care and managing licensed clinical personnel. The Long Term Care Director of Nursing is an integral part of the interdisciplinary team. Must be a graduate of an accredited school of nursing and have current ND license. Current BLS certification with three (3)+years of previous experience in geriatric care nursing and management preferred.

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For more info please contact
Julie Griffith, Director of
Human Resources,
McKenzie Co. Healthcare Systems,
709 4th Ave NE
Watford City ND 58854
(701) 842-3000, or email
HR@MCHSND.org



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Open Position for Public Member

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 2018-2019 BOARD MEETING DATES

April 25th, 2019

July 18, 2019 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 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

NORTH DAKOTA BOARD OF NURSING

"CARDLESS" FOR PUBLIC SAFETY
Wallet licensure cards are no longer issued for:

RN & LPN Renewal
License by Examination
License by Endorsement
UAP/Technician/Medication Assistant III
www.ndbon.org

ND Board of Nursing invites nursing and non-nursing public members to participate on the Advisory Panel. Visit <https://www.ndbon.org/Practice/AdvisoryPanel/ParticipationIndex.asp> for information and application.

NURSES Have you moved recently?

UPDATE YOUR ADDRESS ON THE ND BOARD OF NURSING WEBSITE

Change of Address and Contact Information

To ensure receipt of correspondences from the ND Board of Nursing, all licensees, registrants, and applicants are responsible for providing accurate, current address and other contact information may result in the inability to receive official notices or requests, which can lead to default or adverse action against the licensee or registrant. To change your address and other contact information visit 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

January 2019

- Sandra DePointes provided education to the Board and staff on open meetings, public notice, open records, minutes, and voting. Q&A provided.
- Approved the 2017-2018 FY financial audit report as distributed.
- Approved the July-December 2018 strategic plan.
- Approved the 2017-2018 annual report.
- Directed staff to research how other state boards of nursing structure their collaborative relationship and fiscal support with the state's center for nursing and bring information to the next finance committee meeting for consideration.
- Approved the executive director's request for consultant to assist with staffing starting January 2019 and temporary addition of 0.5 FTE for administrative staff April-October 2019.
- Brian Bergeson discussed an overview on the SAAG session and provided education to the Board and Staff related to compliance, hearings, and disciplinary action.
- Approved the draft revisions to the "Evaluation Criteria and Expected Outcomes" document.
- Found the progress report submitted by the Rasmussen College, School of Nursing, baccalaureate degree nursing education program nurse administrator addressing the issues of Met Progressing with North Dakota Administrative Code 54-03.2 Standards for nursing education programs: Section 54-03.2-02-05. Nursing education program evaluation. Section 54-03.2-04-01. Faculty responsibilities. Section 54-03.2-04-02. Faculty policies. Section 54-03.2-05-01. Student policies. Continue to be Met Progressing; and found the program to continue to be in substantial compliance with North Dakota Administrative Code 54-03.2 Standards for nursing education programs; and next follow-up of NDBON approved program implementation plans to be the May 2019 onsite survey required for continued initial approval.
- Found the report provided by the United Tribes Technical College, Department of Nursing, associate degree practical nurse program as a condition of the request for voluntary closure to be effective as of May 10, 2019, addressed all mandatory requirements and conditions related to ND Administrative Code 54-03.2. Standards for nursing education programs; and found the program in substantial compliance with ND Administrative Code 54-03.2. Standards for nursing education programs; and continued approval of the United Tribes Technical College, Department of Nursing, associate degree practical nurse program until May 10, 2019; and require the program's nurse administrator and college administrative officials to continue to meet the requirements and conditions outlined in the December 27, 2018 letter during the teach out phase of the program closure.
- Approved the request for overall curriculum design revisions for University of Mary, School of Health Sciences, Division of Nursing, Doctor of Nursing Practice, Family Nurse Practitioner Program, as the program has full approval and the change complies with NDAC 54-03.2-06-02. Programmatic changes.
- Approved the request of addition of a new course, deletion of current course for Sitting Bull College, Division of Nursing, associate degree practical nurse program as the program has full approval and the change complies with NDAC 54-03.2-06-02. Programmatic changes.
- Granted Ann Marie Waln a nursing education loan in the amount of \$500.00 for completion of a licensed practical nurse refresher course according to NDAC 54-04.1 Nursing education loans. With the condition the proof of enrollment form be provided to the board upon completion of the refresher course enrollment process.
- Granted NDBON staff the authority to approve up to \$500.00 toward nurse refresher course enrollees who apply for a nursing education loan, based upon nursing education loan funds available.
- Approved the NDBON staff request for an extension of approval of the Dakota Nursing Program consortium, certificate practical nurse and associate degree registered nurse programs through July 2019 to accommodate 2018-2019 board meeting schedule changes.
- Approved the 2017-2018 fiscal year NDBON nursing education annual report.
- Approved the draft of the new Background Check Application Review Policy and draft revisions of the Criminal History Record Check Policy.
- Ratified nursing practice hours for the following: Janet Riner R30404, volunteer hours: 840 hours in 2015 and 65 hours in 2016.
- Approved single state practical nurse licensure by endorsement for Missouri licensed practical nurse endorsement applicant J.M. and accepted the completion of Air Force BMTCP 4N051 (5 Skill Level) Program as the equivalent of an associate degree, practical nurse education program to meet NDAC 54-02-06.1., 4; NDCC 43-12.1-09, 2.b.
- Retired the practice statements: Complementary and Alternative Therapies (2004) and Role of the Registered Nurse Gastroenterology Procedures (2008).
- Approved the revisions of Abandonment Practice Guidance.

ONCE A NURSE, ALWAYS A NURSE

Joan Bachman, RN, NHA, RHIT(ret), BSBA

What makes nurses special? We have been 'called' to care for others, often when they are facing tremendous personal losses. We regularly face extraordinary situations and challenges, and must be 'there' for patients and their families, and for our own families as well. We work long hours in tense situations, remember to document everything, to order supplies, to pass along messages, to remember how that new thing-a-ma-jig works, to know generic drug names and remember drug interactions, to coordinate and ensure compliance with the entire plan of care for our patients. Few of us work "normal" hours, we mediate squabbles between physicians and administration, we fulfill the mission of healthcare without representation in determining what is that mission, we discharge patients before they are ready. We "fix" things at work, at home, and in the community. And, almost always, we do all of these things very well. Our families put up with our dedication to others and grow because of it.

Because we are nurses, we seem to believe that our "specialness" means that we must remain above whatever weaknesses others exhibit. We call upon our deepest reserves to remain objective to complete necessary tasks, to overcome exhaustion (20 hour shifts ARE inhumane), to care for our families, to participate as a friend, and to be happy. Too often we deplete our own bank of reserves without recognizing it or talking about our lost feeling.

It is through telling of my story that I hope to encourage you to find help before you crash, or to use the freedom after being "found out" to get back to your "calling".

I am a recovering alcoholic. How did I get here? I grew up in a loving hard-working Christian farm family in a wonderful rural ND community that offered opportunity and support. I held responsible positions from the age of 14 (music accompanist, elder care and child care), and upon receipt of my RN diploma and license. I married a farmer, had a family, raised a garden and sewed clothes for my kids. I was one

of the only women in the community working outside the home. I was never satisfied to be one of the crowd (only recently recognized) or to fill a regimented position (meds 8-12-4), so I chose to work in management positions, assuming ever more responsibility. I held positions with high visibility and opportunity to impact health care services, was always deeply involved and generally successful.

Just read the first paragraph again and know that I believed I had to do all of those things just right every time for every part of my life. Dishonesty is probably the most insidious of the tools I used to keep afloat. I don't know when it was that I began to lie to others and myself about my ability to maintain an even keel. I didn't recognize the dishonesty until long after the first DUI arrest. I will always contend that no harm came to patients, staff, or the business as a result of my abuse of alcohol. However, I will, at long last, acknowledge that two DUI arrests in 14 months constitute unprofessional conduct and an inability to manage my own life. I often missed family time because of my preference and need for liquor. Thankfully, they have been wonderfully welcoming as I returned from that personal selfishness.

All my life I have looked forward to being able to just relax like everyone else seemed to do, but was never without major projects to complete first. Co-workers diagnosed me as a workaholic early in my career. Alcohol has always been an acceptable way to relax. Friday nite dancing and drinking was the norm in the 60s and 70s, advancing to cocktail and dinner parties in the 80s. Then, living alone, to solitary drinking for relaxation at home. Now I recognize that alcohol gives a false impression of relaxation. A substance cannot renew and recharge; it only masks the frenzy that true relaxation replaces with peace.

At some point in time in the mid-90s, I began to think that I drank too much and too often. Occasional blackouts terrified me, but not enough to avoid the next one. Tomorrow would be the day

to not have a drink – or next week – or during Lent – or after my birthday – or after I retired. Even though magazine articles and internet resources identified me as an alcoholic, it seemed more shameful to attend an AA meeting than to continue making trips to the liquor store to maintain my home supply of vodka. How many times I drove drunk to get another bottle no one can even guess. Talk about insanity! No family member or co-worker ever spoke to me about my use of alcohol, and I certainly never asked for anyone's opinion. Perhaps they recognize the signs now after the fact, but have said nothing. Thank the Good Lord for intervening to return me to living and to keep us all from mortal injury.

"I'm too _____ important for you to arrest!" I tell the State Trooper – and mean it – twice in 14 months. Handcuffs are uncomfortable and degrading. Being fingerprinted and photographed in the middle of the nite didn't matter as much then as it does now. Calling my daughter to bail me out of jail was painful. Asking a different jailer what town I was in, and discovering many miles from my intended destination, was quite a shock. Those immediate consequences are shameful, but mostly not shared experiences. No family members have seen the mug shots. They cannot imagine what a jail cell is like, or how handcuffs feel. However, family and employer had to share the shame of legal consequences and the inconvenience of compromised transportation in the face of a 6-month and then a 2-year suspension of my driver's license.

The Employee Assistance Program at my place of work was helpful in getting me directed toward professional help, only AFTER I sought help following the first DUI. The lawyer to whom I paid \$1,500 did nothing other than setting court dates and failing to mail important papers to me. For the second DUI, I pled guilty with no outside help. Much more satisfying. The fines and penalties, the reclamation of my car, the car insurance, the medical expenses, and hired transportation (including my recently

totaled car) make for a very expensive period in my life. Early intervention in my drinking career would have made quite a difference in my financial status.

After failing intensive outpatient treatment for chemical dependency, I submitted to inpatient treatment, followed by intensive outpatient treatment together with regular visits to a psychologist. Thankfully, the second time through treatment, I began to recognize personal dishonesty and my right to be human – read, not perfect. With help from God and my family, the obsession to drink is gone. Attendance at AA meetings has provided good understanding into how similar are those of us with addictions. I am now 20 months clean and sober and have no need to drink today. With God's help, I won't drink tomorrow because of lessons learned in how to stay in reality.

What happens when you check the "yes" box for 'diagnosed with a chemical dependency' on your nursing license reapplication? The BON contacts you for the particulars and enrolls you in the Workplace Impairment Program.

This program requires periodic drug testing, regular reports to the BON, and abstinence. I failed the Program and was threatened with revocation of the RN license I'd held for 40+ years. At last, this got my attention! I challenged the BON and retained my RN license, encumbered for 3 years. Employers and organizations for which I volunteer must receive and acknowledge understanding of the 15 page Stipulation for Settlement, and submit quarterly reports to the BON. My Nursing Home Administrator licenses are on probation for 1 year for unprofessional conduct. I submit reports monthly to the licensing boards. My AA sponsor must submit monthly reports. My name appears on the Data Bank Registry. The record keeping is significant.

Wonderful opportunities have presented themselves during this major detour at my age of retirement, and I have been given courage and strength to recognize those opportunities and act on them. After planned retirement from a salaried position, my professional consulting business is as busy as it can be without easily accessible transportation.

I completed training as a Parish Nurse and am a volunteer at my church. I will offer Faith Community Nursing service to the AA community when I get back to driving. I also volunteer at a local residential treatment facility as a nurse educator.

I've learned interesting facts and shared unexpected experiences that will fill a book at some time in the future. There IS life after admitting to an outside dependency, and that life is rich and full.

NOTE - 3-6-2019 *It's about 12 years since I wrote this piece. I have expanded on my experience in a longer piece that studies ME, the addict, more deeply. I want to share that with nurses at various stages of dealing with stress, or as the friend of someone struggling, or as a student who will observe or experience such stress. ND no longer has the recovery program - but we **could** start our own recovery community. If you wish to receive a copy of A Story of Addiction and Recovery, email me at joan@bachmanconsulting.net. You might also check out the Minnesota Nurses Peer Support Network at <http://npsnetwork-mn.org/>. Anxious to hear from you.*

Open Position for Public Member to Serve on the ND Board of Nursing

The ND Board of Nursing currently has an open position for a public member to serve on the Board. To serve as the public member for the Board, one must be an eligible voting resident of ND and have no employment, professional license, or financial interest with any health care entity. Members of the ND Board of Nursing are appointed by the governor for a 4-year term.

Members have the option to apply for an additional 4-year term, not to exceed 2 consecutive terms. Members attend 1 full-day meeting quarterly (January, April, July, and October) in Bismarck, ND.

The public member is an important member of the NDBON because they represent the North Dakota consumer's point of view. Although public members are not expected to be experienced in

the nursing profession, they are expected to participate fully in NDBON activities.

Please refer anyone interested in serving as the ND Board of Nursing public member to the North Dakota Office of the Governor to complete the application form (available at <https://www.governor.nd.gov/boards/AppForm.aspx>).

Nurses with Fifty Years of Service

The North Dakota Board of Nursing recognized nurses who have served the profession for the past 50 years with certificates. The following nurses were on the list of nurses:

MAGNHILD ADRIAN, ND
PATRICIA AUCH, ND
MARIA BERGLUND, ND
SANDRA BERRETH, ND
BARBARA EDNER, MN
DIANNE FREED, ND
GRACIA FULWILER, ND

SHARYLN GEERDES, ND
JANE GIEDT, MN
MARCY HAASE, ND
ALICIA HEICK, ND
LINDA HUETTL, ND
SHIRLEY JENSEN, ND
JEAN LARSON, ND

CAROL LEFOR, ND
ALICE LEONARD, ND
COLLEEN MCGRAW, ND
NORMA OLDENBURGER, ND
VIVIAN RENICK, ND
CHERYL SAARI, ND
CAROL J SCHNEIDER, ND

SANDRA SJOLIN, MN
SHERRY TAGESTAD, ND
JANICE WARD, ND
KARYN WASLASKI, ND
JANET WEGGE, ND

The certificate acknowledges the 50 years of active licensure in North Dakota as either an RN or LPN. We take great pleasure in marking this special achievement. Thank you so much to the nurses and their dedication to the profession of nursing. Congratulations!

Frequently Asked Questions

Requirements for Licensure by Examination

APPLICATION PROCESSING

When am I made "Eligible for Licensure by Examination"?

In order to be made eligible to test **AND** be issued a work authorization to practice as a graduate nurse, the following must be received in the board office:

- ♦ On-line application for license by examination and \$130.00 nonrefundable fee (\$110.00 application fee and \$20.00 CHRC Fee) payable by credit or debit card.
- ♦ Official transcripts from nursing program with the degree posted; and
- ♦ Registration from NCLEX Candidates Services for testing (\$200.00 fee required)

What do I do if I have a name or address change?

Address and name changes can be made on this website under NURSE LICENSURE, DEMOGRAPHIC UPDATES.

What are the payment options and what do I do if I do not have a credit card or debit card?

You may use a Visa, MasterCard or Discover credit or debit cards. If you do not have a credit card or debit card, you can purchase a Visa, MasterCard or Discover gift card at many banks or credit unions or at discount stores such as Walmart and CVS Pharmacy for the purpose of paying for the on-line application.

What if I am claiming another compact state as my primary state of residence?

If you claim another compact state as your primary state of residence, you will need to apply for license by examination in your primary state of residence. If you change your primary state of residence at a later date, you can apply for license by endorsement in ND. See www.ncsbn.org for a current list of compact states.

SCHEDULING TO TEST

When can I schedule my appointment?

An Authorization to Test (ATT) is required to schedule your appointment. Once you have been made eligible for licensure by examination by the Board of Nursing, your ATT will be e-mailed to you by Pearson Vue.

How long is the ATT valid?

The authorization to test is valid for ninety (90) days.

How soon will I be able to test?

You are guaranteed to be offered a testing date within thirty (30) days of the time you call the Pearson Test Center. If the test center offers a date within the 30 days and you decline that date, the test center has met their contractual obligation. Please contact the board office if you have any problems scheduling your test.

What happens if I need to reschedule?

If you need to change your appointment, you must contact NCLEX Candidate Services one full business day (24 hours) prior to your scheduled appointment.

Is there a practice test?

Yes, there is a tutorial available on the test vendor website at www.pearsonvue.com/nclex

WORK AUTHORIZATION AND PRACTICE AS A GRADUATE NURSE

When do I get my Work authorization to practice as a graduate nurse?

When the ND Board of Nursing has made you eligible for licensure by examination, your work authorization will be issued. A paper work authorization will not be mailed. Your work authorization number, issue date and expiration date will be posted on our website. You can check our website at www.ndbon.org – click on the Verify Tab.

When can I start working as a graduate nurse?

Your work authorization must be

issued before you start practicing as a graduate nurse or attend any orientation sessions.

How long is a work authorization valid?

The work authorization is valid for 90 days, or until you are notified of the test results, whichever occurs first.

Can anyone get a work authorization?

You must complete the application for licensure process within sixty (60) days of graduation in order to be eligible to receive a graduate nurse work authorization.

Will I receive a work authorization by mail?

No. Work authorizations will be posted on our website for applicants and employers to access.

Can a graduate from a nursing education program who receives a work authorization for license by examination continue to work as a UAP or LPN if they have a current registration/license for a UAP or LPN?

If the employer decides to retain the employee in a UAP or graduate nurse role they may do so. The employer needs to verify permits, license, and registrations on the board website under Verify.

Can I complete any orientation (including classroom instruction and reading policy and procedures) prior to receiving a nursing license, permit, or work authorization?

No. The NDBON reaffirmed the position in 2018, as adopted and reaffirmed in 1987 and 1998, that orientation to a position that requires a nursing license, permit, or work authorization is considered nursing practice and therefore requires that the individual be properly licensed or authorized to practice for the position to which they are being oriented.

Can I work on a nursing unit in a position other than as a licensed nurse?

If a nurse holds licensure in ND and chooses to work in a position other than nursing, and the job description does not include use of nursing knowledge, skills, and abilities, the individual is free to do so. However, the individual could not claim those hours for nursing practice hours for purposes of maintaining eligibility for licensure. An individual who is applying for nurse licensure in ND or who is licensed as a nurse in another jurisdiction must be authorized to practice nursing, with a permit or work authorization, when hired to a position in a nursing unit, regardless of title, which may utilize nursing knowledge, unless the individual is licensed, registered or otherwise authorized to perform the work required in that position. For example, a nurse who is registered as a certified nursing assistant may serve in that role without having a license, permit or work authorization to practice nursing (October 25, 2018 motion).

CRIMINAL HISTORY RECORD CHECK

How do I apply for a criminal history record check (CHRC)?

After you complete your application for licensure by examination, click on the Criminal History Record Check link. Print and complete the CHRC Form provided on the link and CAREFULLY follow the instructions for fingerprinting.

How long does the fingerprinting process take?

Both federal and state checks will be performed. If fingerprints are not adequate for identification purposes for BCI, new cards will be required for a second set of prints. If the second set of prints are not adequate for identification purposes, a name search will be requested. Processing time averages ten days if first set of fingerprints are adequate.

OBTAINING RESULTS AND LICENSURE

How soon will my results be available?

Your unofficial examination results are available through NCLEX Quick Results Service offered by the

test service. You can access your unofficial results via the internet at www.pearsonvue.com/ndlex and sign in with a user name and password. Choose "Current Activity", then "Recent Appointments", and then "Status". After entering a credit card number the unofficial results will be displayed. The fee for this service will be listed on the website. Your credit card will only be charged if your results are available.

The examination results are mailed to you from the board office within 7 days of your testing. The board office makes every effort to mail the results within 48 hours of your testing. **DO NOT CALL** the board office for your test results, as we are unable to release them over the phone or to your employer. If you pass, you will receive a license to practice as a nurse.

Your Criminal History Record Check must be completed prior to your license being issued.

Can I find out if I passed or failed using the board's website?

You can access the board's website to see if a license has been issued. If a license is not showing for you, it does not necessarily mean that you've failed. It is possible that a license has not yet been issued for you. After the results have been processed, the license verification will show a license number if you passed, or the work authorization will be expired if you failed. **DO NOT CALL** the board office for confirmation, we cannot release pass/fail results by phone.

Can I start practicing as a nurse once I received my unofficial results that I passed?

No. You cannot start practicing as a nurse until you have been issued a license by the board of nursing. Licenses can be viewed in the "Verify" Section of the Board website.

When will my license expire?

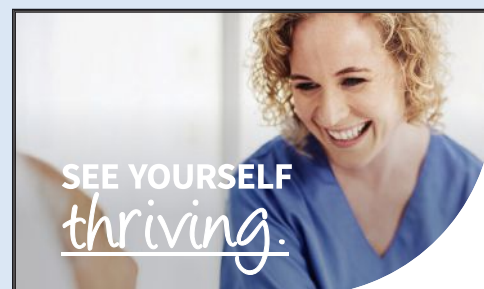
Effective 4/1/2014, applicants for initial license by examination shall receive a license expiring on 12/31 of the following year as part of the application fee.

What if I fail?

If you fail, you will receive a diagnostic profile of your areas of weakness, and the required documents to submit for retesting. You are able to retest 45 days after your original test date. The retesting application can be submitted on-line prior to that date for processing.

Can I continue to work as a graduate nurse if I fail the NCLEX?

No. Your Graduate Work Authorization becomes invalid when you receive the examination results. A candidate who fails the licensing examination may not be employed in a position with functions that are usually assigned to licensed nurses. You are **NOT** able to continue to practice as a graduate nurse.



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Nursing Education Loan Program Policies For Applicants/Recipients

APPLICATION/ REAPPLICATION PROCESS:

1. To be reviewed, the following materials must be completed and submitted:
 - a. Application - Nursing Education Loan Program form (SFN 11692).
 - Nursing Education Loan reapplication may occur annually if the applicant has not received the total loan allowed by NDAC 54-04.1-03-01. If you are applying for the same degree level you previously received an award for use the Reapplication - Nursing Education Loan Program form (SFN 58630)
 - b. \$25.00 nonrefundable application fee.
 - c. Official transcripts of all college credits from all schools attended must be sent directly from the school to the Board office.
 - d. Co-Signer Information form (SFN 14689).
 - e. Three letters of reference or three Personal Reference forms (SFN 14688).
 - f. Student Status memorandum form (SFN 14690) dated after March 1st verifying your acceptance and enrollment into a board approved nursing education program.
2. The spouse of an education loan applicant or another education loan applicant is not acceptable as the co-signer of the note. The co-signer of the note should be a North Dakota resident. If the co-signer is not a ND resident, the applicant must provide a letter of explanation. The co-signer must be 18 years or older. Proof of age may be requested by board staff.
3. A written statement from the administrator of the nursing program or designee verifying the applicant's acceptance and enrollment dates in the program will be used to determine if an applicant meets the qualifications for the education loan program. The baccalaureate applicant must be at least a junior within the next academic year to be considered for the education loan.
4. Applications will ONLY be accepted between March 1 and July 1. All education loan applications will be considered at the July board meeting. The application will be reviewed by the board if it is received into the board office by July 1 and the application is complete.
5. All applicants for education loans are considered under blind review. A board member, staff employee or family member of either of the foregoing, who submits an application for an education loan will be excluded from all application processing, review and board action relative to the education loan program.
6. Reapplication may occur annually if the applicant has not received the total loan amount allowed by NDAC 54-04.1-03-01.
3. Education loan recipients must maintain continuous enrollment and non-probation status in the education program to be eligible for disbursement of funds.
4. The undergraduate student must be enrolled in a minimum of six (6) credits per semester or twelve (12) credits per calendar year. The graduate student must be enrolled in a minimum of three (3) credits per semester or six (6) credits per calendar year.
5. Education loan payments will be made in one payment or as directed by the board.
6. An education loan award is transferable from one board-approved nursing education program to another upon receipt of proof of enrollment in the nursing program.
7. Request for variance from these guidelines must be appealed to the board.

LOAN REPAYMENT PROCESS:

1. The nursing education loan may be repaid by nursing employment in North Dakota or by holding a North Dakota license while serving in any branch of the United States Military after graduation. The repayment rate will be one dollar per hour of employment. The Board of Nursing will ask for verification of actual hours worked for employment credit from the employer.
2. Repayment by Nursing Employment
 - a. Recipients must be employed or making payment at any given time.
 - b. Recipients must be employed

- an average of 20 hours per week to qualify for repayment by nursing employment.
- c. A faculty member on a full-time contract will receive employment credit for 2080 hours per year.
3. Recipients completing a nursing program must provide the board with the name and address of their North Dakota employer within sixty days of graduation. If employment in North Dakota is terminated before the loan is canceled, interest will begin to accrue on the unpaid balance from the date of termination.
 4. The recipient who is not employed or has not applied for the NCLEX examination within sixty (60) days of graduation must begin to make repayment and interest will begin to accrue.
 5. The education loan recipient who has not passed the NCLEX examination within 180 days of graduation must begin to make repayment and interest will begin to accrue.
 6. Upon completion of an academic degree the recipient may request a deferment of payment if proceeding directly into the next level of education.
 7. Interest accrual and repayment on all notes will begin within sixty (60) days of withdrawal or dismissal from the nursing program.
 8. The loan may be forgiven at the discretion of the board upon proof of military deployment.
 9. A licensed nursing loan recipient who has graduated from a nursing education program but has not successfully passed the NCLEX-RN or APRN certification examination may use employment hours as a licensed nurse for repayment from the date of program completion.
 10. Employment credit for the registered nurse in a graduate program will begin after all academic requirements have been completed, including the completion of the master's thesis or the doctoral dissertation. The completion of requirements may occur in advance of the date of graduation.
 11. Education loan recipients and their co-signers who are sixty (60) days delinquent in repayment of their account will be sent a demand for payment according to NDAC 54-04.1-05-02. Demand for Payment.

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North Dakota Board of Nursing Celebrating Staff Service Awards for 2018-2019

The 2018-2019 staff service recognitions were celebrated this spring. The NDBON currently employs 8 staff to carry out the functions and operations of the board as defined in the Nurse Practices Act. The office staff

contribute to the duties of the Board, including the operations related to the licensing and registration process, and the many components of regulation for the 21,000 licenses and registrants of ND. The NDBON

would like to acknowledge and thank the following staff for their years of service to the licensees and stakeholders of ND.



Sally Bohmbach, Administrative Assistant II, started her employment with the NDBON in 1978 and celebrated 40 years of service.



Gail Rossman, Technology Specialist, started her employment in 1998 and celebrated 20 years of service.



Kathy Zahn, Administrative Assistant III, started her employment in 2008 and celebrated 10 years of service.

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- Doctor of Nursing Practice (BSN to DNP)/ Family Nurse Practitioner program

NDSU offers programs to part- and full-time students, working professionals and those seeking online educational opportunities.

ndsu.edu/nursing

The mission of the NDBON is to ensure quality nursing care through the regulation of standards for nursing education, licensure, and practice. The NDBON acknowledges and appreciates the hard work and dedication of each of the staff members and their essential contributions to the functions of the Board.

ATTENTION –CHECK YOUR UAP/MA EXPIRATION

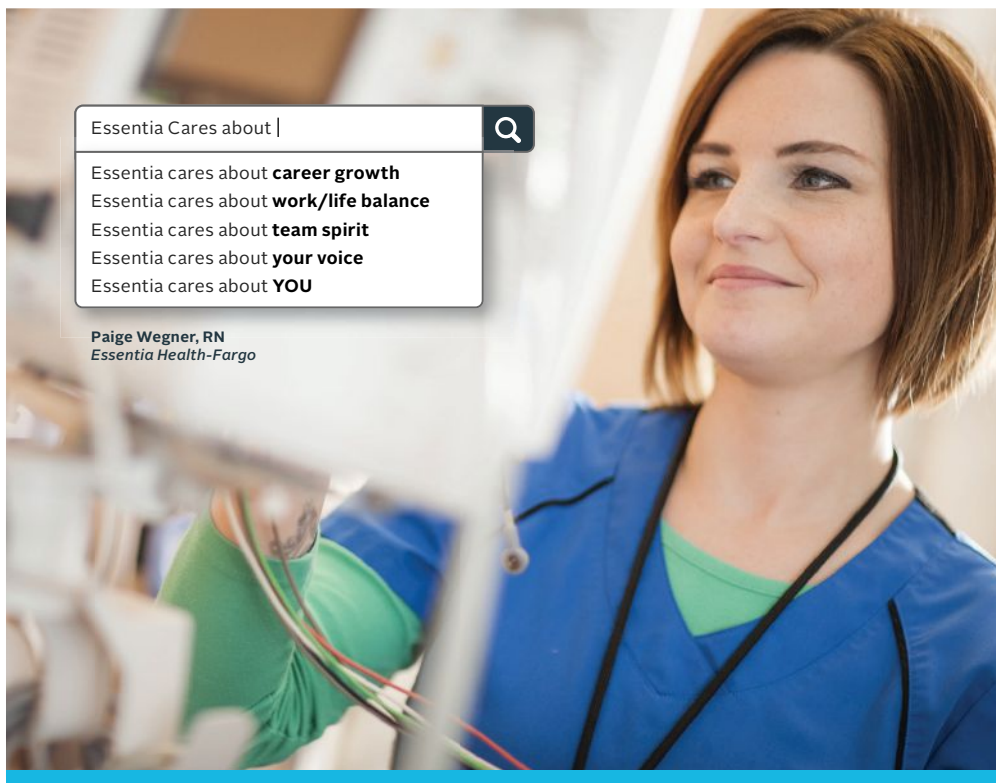
UNLICENSED ASSISTIVE PERSON/ TECHNICIAN AND MEDICATION ASSISTANT III EXPIRATION/RENEWAL

- ◆ Unlicensed Assistive Person/ Technician and Medication Assistant III who have a registration expiration date of June 30, 2019 will be mailed postcards in April 2019 notifying them to go to the ND Board of Nursing website (www.ndbon.org) for renewal. **RENEWAL WILL ONLY BE AVAILABLE ONLINE. NO PAPER RENEWALS WILL BE AVAILABLE.**
- ◆ Failure to receive a renewal notice does not relieve an Unlicensed Assistive Person/Technician or Medication Assistant III of the obligation to renew his/her registration before the expiration date.
- ◆ Unlicensed Assistive Person/ Technician and Medication Assistant III have the responsibility of notifying the ND Board of Nursing of any address changes.
- ◆ If an Unlicensed Assistive Person/ Technician and/or Medication Assistant III assists in the practice of nursing without a current registration, he/she may be assessed additional fees.
- ◆ The Unlicensed Assistive Person/ Technician/Medication Assistant III will be required to validate continued competency by providing one of the following:
 - Current Employer Verification
Current Employers Name, City, State
 - Past Employment Verification –
(employment must have occurred in the last two years)
Past Employers Name, City, State and Dates of Employment
 - Licensed Nurse Verification
(independent from applicant

employment setting)
Licensed Nurse Name, RN/LPN
License Number, RN/LPN
License Expiration, Date of
Competence Verification

- Verification of current certification or registration by board-recognized national bodies.

- Medication Assistant III candidates who entered the registry as a student nurse are required to verify eligibility by providing proof of enrollment in a nursing program within the past two years.



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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) 919 S 7TH Street, Suite 504 Bismarck, ND 58504-5881 Phone: (701) 328-9777 Fax: (701) 328-9785 Website: www.ndbon.org	North Dakota Nurses Association (NDNA) 1515 Burnt Boat Dr, Suite C #325 Bismarck, ND 58503 Phone: (701) 335-6376 E-mail: Director@ndna.org Website: www.ndna.org	North Dakota Center for Nursing (NDCFN) 3523 45 th Street South Fargo, ND 58104 Phone: (701) 639-6548 Website: www.ndcenterfornursing.org
Mission: <i>ND Board of Nursing assures North Dakota citizens quality nursing care through the regulation of standards for nursing education, licensure, and practice.</i>	Mission: <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>	Mission: <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>
Description: <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 	Description: <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 	Description: <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>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>Dr. Kevin Buettner, APRN, Grand Forks</p>	<p>Board of Directors:</p> <p><i>President</i> - Tessa Johnson, MSN, RN president@ndna.org</p> <p>Board of Directors listed at https://ndna.nursingnetwork.com/page/72991-board-of-directors</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>Maureen Bentz, MSN, RN, CNML Associate Director for Practice- mbentz@ndbon.org</p> <p>Chris Becker, Accounting/Licensure Specialist- cbecker@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>Sherri Miller, BSN, 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

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Francie Miller , BSN, RN, MBA, Nursing Compliance Specialist Concerning Nursing Complaints and Compliance	Francie.Miller@state.sd.us (605) 362-3545
Tessa Stob , BSN, 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
Ashley Vis , Program Assistant Concerning Registration of Unlicensed Personnel RN and LPN Initial Licensure and Examination	Ashley.Vis@state.sd.us (605) 362-3525
Linda Young , MS, RN, FRE, Nursing Practice Specialist Concerning APRN Regulation and Practice, RN and LPN Practice, and Center for Nursing Workforce	Linda.Young@state.sd.us (605) 362-2772

DISCIPLINARY ACTIONS TAKEN BY THE SOUTH DAKOTA BOARD OF NURSING

Name	License Number	February Board Action
Bachand, Julie	P007756	• Letter of Reprimand
Brandt, Nicole	P011711	• Probation with Mandate HPAP
DuBray, Michelle	P011986 & R050773	• Summary Suspension
Ford, Angela	R039610	• Probation with Mandated HPAP
Gorecki, Jessica	R050924	• Summary Suspension
Groeneveld, Sarah	R027933	• Letter of Reprimand with Remediation
Haynes, Monique	MS Multistate PN 318676	• Letter of Reprimand
Hofer, Shania	P012385	• Voluntary Surrender
Huck, Tanya	R032460	• Voluntary Surrender
Iversen, Heather	R042859	• Letter of Reprimand
Lone Elk, Kendra	R026838	• Letter of Reprimand
Midhlitsch, Natalie	R048010	• Letter of Reprimand with Remediation
Nielson (Halling), Carrie	R036271	• Grant Reinstatement with Mandated HPAP
Sideras, James	R026509	• Voluntary Surrender
Stoeser, Hollie	R045570	• Voluntary Surrender
Ten Fingers, Sherri	R027927	• Letter of Reprimand

Name	Registrant Number	February Board Action
Pisawis, Teresita	M002586	• Letter of Reprimand with Remediation
Wright, Donna	M002454	• Voluntary Surrender

The **MISSION** of the Board of Nursing is to protect the public through the regulation of nursing licensure, practice and education.

The **Vision** of the Board of Nursing is to inspire public confidence in the profession of nursing through regulatory excellence and honoring human dignity.

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
RN Member, Wessington Springs

Carla Borchardt
RN Member, Sioux Falls

Rebekah Cradduck
Public Member, Sioux Falls

Doneen Hollingsworth
Public Member, Pierre

Sharon Neuharth
LPN Member, Burke

Robin Peterson-Lund
CNP, 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

July 11-12, 2019

September 19-20, 2019

November 14-15, 2019

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

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 summit information online:
<http://doh.sd.gov/boards/nursing/sdcenter.aspx>

South Dakota Board of Nursing Meeting Highlights

February 2019

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.

Scheduled 2019 Board Meetings:

**July 11-12;
September 19-20;
and November 14-15.**

Nursing Education:

- The Board accepted the 2018 Final NCLEX Pass Rate Report.
- New graduate first-time National Council Licensure Examination (NCLEX-PN®) results are displayed in the tables for January-December 2018. Pass rates are evaluated by the Board for ongoing approval of a nursing program. The Board evaluates pass rates using measuring periods as defined in ARSD 20:48:07:47. A measuring period commences on January 1 of each calendar year and continues until December 31 of that calendar year in which the number of first-time writers since the start of that measuring period equals or exceeds 21. Measuring periods for programs with less than 21 test writers in a calendar year may extend over more than one year(s) until 21 is

2018 NCLEX-PN Results Practical Nurse Program	# Delivered	# Passed	# Failed	2018 Pass Rate
Lake Area Technical Institute	63	62	1	98.41%
Mitchell Technical Institute	15	15	0	*
Sinte Gleska University	2	1	1	*
Sisseton Wahpeton College	0	0	0	*
Southeast Technical Institute	86	86	0	100.00%
Western Dakota Technical Institute	35	30	5	85.71%
LPN Licensure by Equivalency	4	3	1	*
South Dakota PN Pass Rate	205	197	8	96.10%
National PN Pass Rate	47,031			85.91%
International PN Pass Rate	611			52.21%

*Pass rate to be determined upon reaching or exceeding an N of 21 graduates

2018 NCLEX-RN Results	# Delivered	# Passed	# Failed	2018 Pass Rate
Associate RN Programs				
Lake Area Technical Institute	0	0	0	*
Oglala Lakota College	12	10	2	*
Sisseton Wahpeton College**	2	1	1	*
Southeast Technical Institute	50	47	3	94.00%
University of South Dakota	19	16	3	*
AD RN Total:	83	74	9	89.15%
Baccalaureate RN Programs				
Augustana University	64	60	4	93.75%
Dakota Wesleyan University	18	18	0	*
Mount Marty College	19	16	3	*
National American University	21	18	3	85.71%
Presentation College	59	42	17	71.19%
South Dakota State University	288	266	22	92.36%
University of Sioux Falls	43	42	1	97.67%
University of South Dakota	119	108	11	90.76%
BSN RN Total:	631	570	61	90.33%
South Dakota RN Pass Rate	714	644	70	90.20%
National RN Pass Rate	163,238			88.29%
International RN Pass Rate	16,812			44.70%

*Pass rate to be determined upon reaching or exceeding an N of 21 graduates.

** Program Voluntary Closure

reached; therefore *pass rates for programs with less than 21 are not displayed*. South Dakota's pass rate

for first-time PN test writers in 2018 was 96.10%, and for first-time RN test writers was 90.20%.

continued on page 20

continued from page 19

- The Board granted approval for Southeast Technical Institute's LPN program reorganization to Huron, SD.
- The Board accepted the 2018 reports for the following Clinical Enrichment Programs and granted ongoing approval for 2019:
 - South Dakota Correctional Health
 - Avera St. Luke's Hospital
- The Board accepted South Dakota State University's 2018 report for the LPN and RN Refresher Courses and granted ongoing approval for 2019.
- The Board accepted the University of South Dakota's notification of voluntary closure of their associate degree program located in Watertown, SD.
- The Board reviewed and accepted the 2020 NCLEX-PN Test Plan.

Nursing Practice:

- The Board was provided the 2018 Report on Out-of-Hospital (OOH) Births by Certified Nurse Midwives (CNM). Four South Dakota licensed CNMs signed the Board of Nursing's OOH Practice Guidelines allowing them to perform OOH births. Three actively attended OOH Births in South Dakota in 2018 and had a total of 47 women who requested an OOH birth. Of these women, 40 delivered in an OOH setting; five were referred to another provider for a hospital birth and two were transported during labor to a hospital.

Licensure and Registration:

- **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 unlicensed 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), insulin administration tasks to Unlicensed Diabetes Aides (UDA), and dialysis tasks to Unlicensed Dialysis Technicians (UDT) who are 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 those tasks to that person.

- South Dakota is a member of the **Enhanced Nurse Licensure Compact (eNLC)**. LPNs and RNs who hold a multi-state compact license are able to provide care to patients in other eNLC states, without having to obtain additional licenses. An LPN or RN who holds a single-state license can only practice in the state that license was issued. See <https://www.ncsbn.org/11070.htm> for more information.
 - South Dakota does not belong to the APRN compact; therefore all South Dakota issued CNM, CNP, CRNA, and CNS licenses are single-state.

South Dakota's Active Workforce as of February 2019:

Licensed Workforce	Number
Licensed Practical Nurses (LPN)	2,638
Registered Nurses (RN)	18,576
Certified Nurse Midwives (CNM)	32
Certified Nurse Practitioners (CNP)	1,115
Certified Registered Nurse Anesthetists (CRNA)	490
Clinical Nurse Specialists (CNS)	64
Registered/Unlicensed Assistive Personnel Workforce	Number
Certified Nurse Aides (CNA)	10,302
Unlicensed Diabetes Aides (UDA)	121
Unlicensed Dialysis Technicians (UDT)	69
Unlicensed Medication Aides (UMA)	6,185

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 also 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.
- 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. **Keep your address current!** You may conveniently change your address online at: <http://doh.sd.gov/boards/nursing/address.aspx>
- **Enroll in Nursys e-Notify.** This is a **free service** open to all licensed nurses. Once enrolled, e-Notify will automatically send license **expiration reminders** and status updates to licensees or employers. <https://www.nursys.com/EN/ENDefault.aspx>

Center for Nursing Workforce (CNW):

- The South Dakota Center for Nursing Workforce hosted a Symposium on April 30, 2019 featuring keynote speaker Dr. Peter Buerhaus, Ph.D., RN, FAAN, a nationally known expert and economist on workforce. Participants had the opportunity to learn about South Dakota's

nursing workforce, network and share ideas on South Dakota's nursing supply, education, and practice, and identified strategies to meet the state's current and future nursing workforce needs.

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>.

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Frequently Asked Questions

Unlocking Access to Nursing Care Across the Nation

Q1: I live in a noncompact state. How do I get a compact multistate license?

Only nurses who declare a compact state as their primary state of residence may be eligible for multistate license. As a resident of a noncompact state, you may apply for a license by endorsement in a compact state. Your eligibility will be limited to a single state license that is valid in that state only. As a resident of a noncompact state, you can have as many single-state licenses as you wish, but are not eligible for a multistate license.

Q2: Where is the compact application and what is the application fee?

Use the state board of nursing (BON) application for licensure by exam or by endorsement, as found on your BON's website. Licensure fees vary by state. If your legal residence is in a state that joined the compact as of Jan. 19, 2018 (Florida, Georgia, Oklahoma, West Virginia and Wyoming), and you hold a single state license in that state, then you should complete the application for a multistate license on your BON website.

Q3: I live in a compact state and have a license. How do I know if my license is multistate? How do I get a compact license?

If your legal residence is in a state that joined the compact as of Jan. 19, 2018 (Florida, Georgia, Oklahoma, West Virginia and Wyoming), and you hold a single state license in that state, then you should complete the application for a multistate license on your board of nursing website.

If your legal residence is in one of the original compact states and you held a multistate license on July

20, 2017, you may already have a compact license due to being grandfathered. If you're unsure of your licensure status, use the Nursys® QuickConfirm tool at www.nursys.com. This report will indicate "multistate" or "single state" in the status column. When you click on "Where can the nurse practice?" you will see a map (or a list) of all states where you hold the authority to practice.

Q4: I have a compact license. How long can I work in another compact state?

There is no time limit As long as you maintain legal residency in the state that issued your multistate license and you remain in good standing, you may practice in other compact states.

If you were to take an action (while practicing in another NLC state or otherwise) which would change your legal residency status (see example below), then you have given up legal residency in that home state and you must now apply for license by endorsement in the new state of residence. The new license issued will replace the former license.

For example, a nurse has legal residency in Arizona and practices temporarily in Colorado for six months under the Arizona multistate license. While the nurse is practicing in Colorado, her Arizona driver's license expires. Rather than renewing the Arizona driver's license, the nurse obtains a Colorado driver's license.

Because a Colorado driver's license is only issued to a Colorado resident, the nurse has now become a Colorado resident unintentionally. Nurses must be careful not to take actions that would change their state of legal residency, when practicing in another state where they temporarily reside.

Q5: What if I move to another compact state?

When permanently relocating to another compact state, apply for licensure by endorsement and complete the Declaration of Primary State of Residence form within the application, which can be found on your board of nursing's website.

You may start the application process prior to or after the move. You should not delay applying once you have moved. There is no grace period.

- If you are moving from a compact state, you may not wait until your former multistate license expires before applying in your new state of legal residency. You can only practice on your former home state license until the multistate license in the new NLC home state is issued.
- If you are moving from a noncompact state applying to a compact state in advance of the move, you may be issued a single state license or your application may be held until you move and have proof of legal residency at which time you may be issued a multistate license.

Q6: My primary state of residence is a noncompact state; it is also where I am licensed. I am applying for licensure in a compact state. Do I have to give up my current license?

No, you may choose to keep and renew your current noncompact state license.

Q7: I live in a compact state where I am licensed. How do I get a license in a noncompact state?

Apply for licensure by endorsement to the board of nursing in the state where you seek a license. You may be issued a single state license valid only in the state of issuance. Applications can be found on that board of nursing's website. Visit ncsbn.org for board of nursing contact information.

Q8: I am graduating from a nursing program. Can I take the NCLEX® in a different state?

The NCLEX® is a national exam and can be taken in any state convenient to you. It is not a state exam. The results will be directed to the board of nursing where you applied for your authorization to test (ATT) and licensure.

- If you are applying to a compact state for a multistate license, you

should apply in the state where you intend to legally reside.

- If you are applying for a license in a noncompact state, you should apply for a license in the state where you intend to practice.

Q9: I live in a noncompact state, but I will be changing my primary state of residence to a compact state in a few months for a job. Can I apply for a license in that state now so I can work immediately after moving?

Yes. You may start the application process prior to the move. A new compact license will not be issued until you provide a Declaration of Primary State of Residence (PSOR) form and any proof of residence that may be required by the board of nursing (BON). Some states offer a temporary license; this

may enable you to practice before your permanent license is issued. Check with your BON to see if they offer one.

Q10: I live in a noncompact state, but own property in a compact state. Can I get a compact license?

In order to be eligible for a compact license, your declared primary state of residence must be a compact state. Primary state of residence does not pertain to owning property but rather it refers to your legal residency status. Proof of residence includes obtaining a driver's license, voting/registering to vote or filing federal taxes with an address in that state. These legal documents should be issued by the same state.

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Q11: I have a compact license and have accepted a temporary assignment in another compact state. My employer is telling me that I need to get that state's license. Is this true?

When hired in a remote state for a temporary position or commuting to a remote state from the primary state of residence (PSOR) (usually an adjacent state), employers should not require you to apply for licensure in the remote state when you have lawfully declared another state as your PSOR. PSOR is based on where you pay federal income tax, vote and/or hold a driver's license. The remote state board of nursing cannot issue a license to a nurse who has declared another compact state as the PSOR, since the multistate license from the home state applies to both states. You have the privilege to practice in any remote compact state with your multistate license issued by your home state.

Q12: How does the compact work for military or military spouses?

See military fact sheet on our Toolkit webpage at www.ncsbn.org/6183.htm for additional information.

Q13: How does the NLC pertain to advanced practice registered nurses (APRNs)?

The NLC pertains to registered nurses and licensed practical/vocational nurses licenses only. An APRN must hold an individual state license in each state of APRN practice. Visit ncsbn.org for BON contact information. Visit aprncompact.com for information on that compact.

Q14: Which nurses are grandfathered into the enhanced Nurse Licensure Compact (eNLC) and what does that mean?

Nurses in eNLC states that were members of the original NLC may be grandfathered into the eNLC. Nurses who held a multistate license on the eNLC effective date of July 20, 2017, in original NLC states, may be grandfathered. You can check if you hold a multistate license and the states in which you have the "authority to practice" by following the steps below.

- Go to nursys.com and click on nursys quick confirm
- Search by your name, license number or NCSBN ID
- Click "View Report."
- On the report page, click "Where can the nurse practice as an RN and/or PN?"

If you do not have a multistate license and you need to change your single state license to a multistate, contact the board of nursing. They may require proof of residence such as a driver's license prior to issuing you a multistate license.

Q15: Why would a nurse need a multistate license?

Nurses are required to be licensed in the state where the recipient of nursing practice is located at the time service is provided. A multistate license allows the nurse to practice in the home state and all compact states with one license issued by the home state. This eliminates the burdensome, costly, and time consuming process of obtaining single state licenses in each state of practice.

Q16: What is the difference between a compact license and a multistate license?

There is no difference between a compact license and a multistate license. This terminology is used interchangeably to reference the Nurse Licensure Compact (NLC) license that allows a nurse to have one license, with the ability to practice in all NLC compact states.

Q17: What do I need to do before I move to another state?

See moving scenarios fact sheet on our Toolkit webpage at www.ncsbn.org/nlc-toolkit.htm.

Q18: What does Primary State of Residence (PSOR) mean?

For compact purposes, PSOR is not related to property ownership in a given state. It is about your legal residency status. Everyone has legal documents such as a driver's license, voter's card, federal income tax return, military form no. 2058, or W2 form from the PSOR. If a nurse's PSOR is a compact state, that nurse may be eligible for a multistate (compact) license. If a nurse cannot declare a compact state as his/her PSOR, that nurse is not eligible for a compact license. They may apply for a single state license in any state where they wish to practice.

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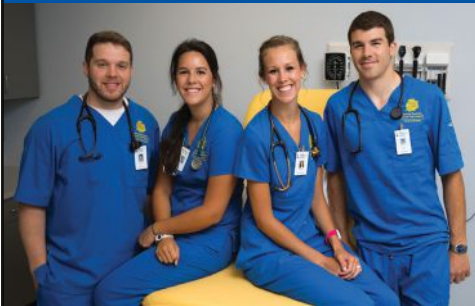
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2018 Annual Report of Nursing Education Programs

Nursing education programs located in South Dakota are required to submit information on their enrolled nursing students, graduates, curriculum, and faculty to the South Dakota Board of Nursing on an annual basis pursuant to ARSD 20:48:07. The information collected is analyzed and compiled into an annual report, *2018 South Dakota Annual Report of Nursing Education Programs*. Following review of the report at the April 2018 Board meeting, the Board members unanimously approved ongoing approval status of South Dakota's nursing education programs. Current information on a program's approval status is located on the Board of Nursing website: <https://doh.sd.gov/boards/nursing/education.aspx>.

The *2018 South Dakota Annual Report of Nursing Education Programs* full report includes comprehensive data and analysis, nursing program information, and historical actions adopted over the years. This article presents highlights of the report. The full report is available on the South Dakota Board of Nursing website under Nursing Education Programs: <https://doh.sd.gov/boards/nursing/education.aspx>.

More information on South Dakota's (SD) requirements for nursing education programs is located on the Board's website, <http://doh.sd.gov/boards/nursing>.

Enrollment

The total number of new and continuing undergraduate RN and LPN pre-licensure students who were enrolled in a nursing program is shown in Figure 1. Total practical nurse program enrollment in 2018 was 470 students, an increase of 89 students from the previous academic year. Associate RN student enrollment increased by 38 students from the previous academic year and baccalaureate RN students increased by 150 students. The total associate and baccalaureate RN program enrollment for new and continuing students in 2018 was 2,256 students, a 9.1% increase from the previous academic year.

Enrollment in RN Upward Mobility Programs

Enrollment in South Dakota's RN upward mobility nursing programs totaled 386 students in 2018, a decrease of 228 students since 2017 (Figure 2). Of the 252 LPN students who were enrolled in upward mobility programs, 149 students were enrolled in LPN to AD RN programs and 103 students were enrolled in LPN to BSN programs. There were 134 RN students enrolled in baccalaureate completion programs.

The declining number of RNs enrolled in upward mobility baccalaureate programs may be due in part to an increased number of pre-licensure RN programs in South Dakota now producing baccalaureate nurses rather than associate degree RNs; decreasing the need for RNs to enroll in upward mobility programs.

Figure 1. Pre-Licensure Student Enrollment

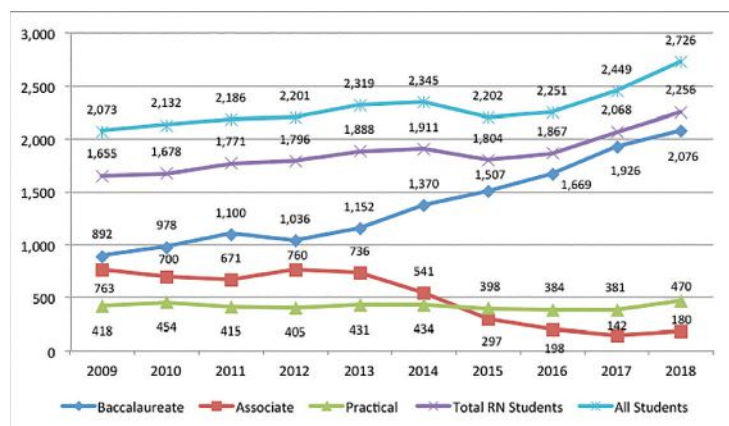
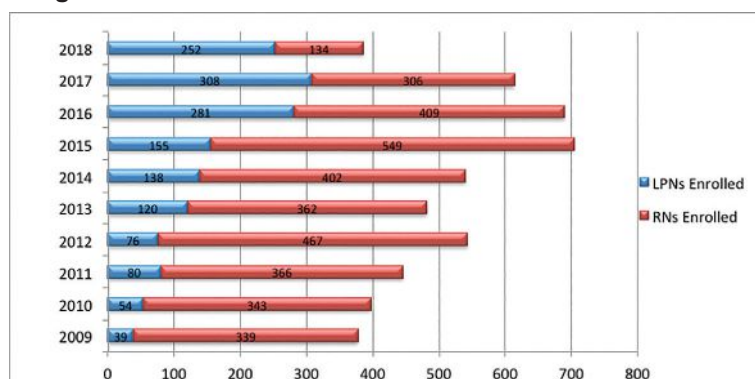


Figure 2. LPNs and RNs Enrolled in RN Upward Mobility Programs



Graduates

A total of 202 students graduated from practical nursing programs in 2018 (Table 1), 15 more than in 2017 and a total of 696 students graduated from pre-licensure RN programs (Table 2); 14 less than in 2017. The greatest percentage of RN graduates, 90.1%, was produced by baccalaureate degree RN programs.

NCLEX Examination Results

NCLEX pass rates for South Dakota's nursing program graduates remained above the national percentage in 2018. The pass rate for first-time LPN test writers was 96.1%; the national pass rate was 85.9%

(Figure 3). The pass rate for first-time RN test writers was 90.2%; the national pass rate was 88.3% (Figure 4). The pass rates from 2008 to 2018 are shown for historical comparison.

Graduates Licensed in South Dakota

The majority of graduates produced in South Dakota were licensed in the state. Of the 202 practical nurse graduates, 178 (88.1%) were issued a South Dakota LPN license. Of the 696 RN graduates, 503 (72.3%) were issued a South Dakota RN license. Figures 5 and 6 show the percentage of licensees licensed by each SD pre-licensure program.

Table 1. Graduates of Practical Nurse Programs

Practical Nurse Program	2018		2017	2017-2018	
	Graduates Produced	%	Number	Difference	% Change
Lake Area Technical Institute	66	32.7%	66	0	0.0%
Mitchell Technical Institute	15	7.4%	0	15	--
Sinte Gleska University	3	1.5%	1	2	200.0%
Sisseton Wahpeton College	1	0.5%	0	1	--
Southeast Technical Institute	84	41.6%	96	-12	-12.5%
Western Dakota Technical Institute	33	16.3%	24	9	37.5%
Total:	202	100.0%	187	15	8.0%

Table 2. Graduates of Pre-licensure (P-L) RN Programs

Pre-licensure (P-L) RN Graduates	LPN to AD RN	AD RN	BSN	Accelerated BSN	LPN to BSN	Total P-L RNs	% Total P-L RNs Produced
Associate RN Programs							
Lake Area Technical Institute	0	--	--	--	--	0	0
Oglala Lakota College	--	11	--	--	--	11	1.6%
Southeast Technical Institute	41	--	--	--	--	41	5.9%
University of South Dakota	17	--	--	--	--	17	2.4%
Total:	58	11	--	--	--	69	9.9%
Baccalaureate RN Programs							
Augustana University	--	--	42	22	0	64	9.2%
Dakota Wesleyan University	--	--	17	0	0	17	2.4%
Mount Marty College	--	--	20	0	0	20	2.9%
National American University	--	--	21	0	0	21	3.0%
Presentation College	--	--	9	0	40	49	7.0%
South Dakota State University	--	--	229	65	0	294	42.2%
University of Sioux Falls	--	--	15	28	0	43	6.2%
University of South Dakota	--	--	118	0	1	119	17.1%
Total:	--	--	471	115	41	627	90.1%
Associate and Baccalaureate Total:	58	11	471	115	41	696	100.0%

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Figure 3. NCLEX-PN® Pass Rates

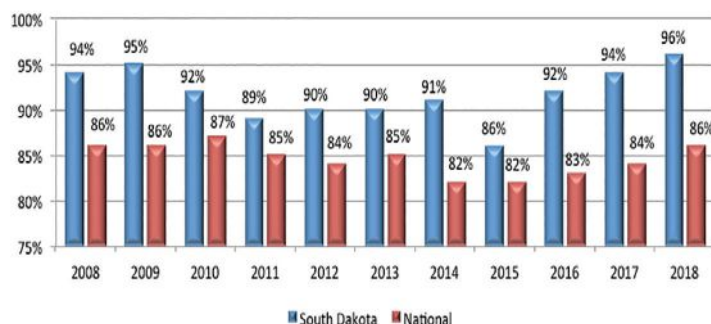


Figure 4. NCLEX-RN® Pass Rates

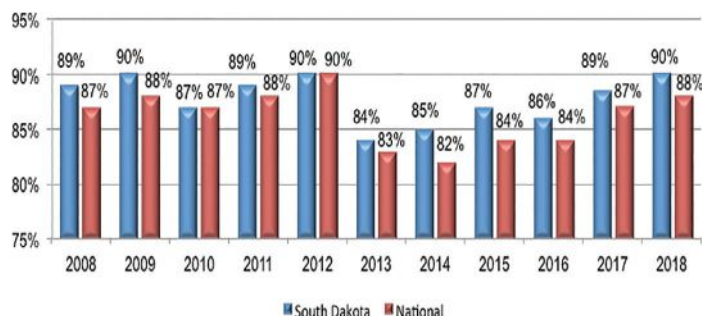


Figure 5. PN Graduates Licensed in South Dakota

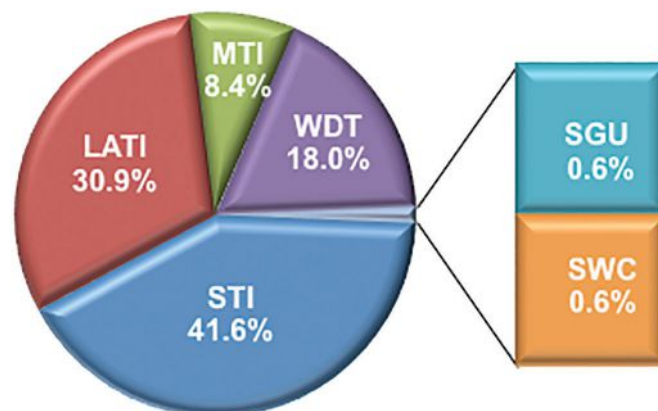
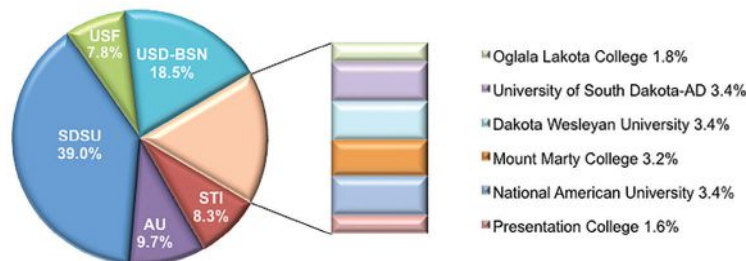


Figure 6. RN Graduates Licensed in South Dakota



Recruitment Assistance Program

This program provides qualifying nurse practitioners or nurse midwives an incentive payment in return for three continuous years of practice in an eligible rural community. The current amount of the incentive payment for a qualifying **nurse practitioner or nurse midwife** is currently **\$65,321**. To be eligible, the healthcare

provider must be licensed in SD, agree to practice full-time in an eligible community for at least three years, and not have previously participated in any other state or federal scholarship, loan repayment or tuition reimbursement program which obligates the provider to provide services in an underserved area. Eligible communities must have a

population of 10,000 or less and be assessed by the SD Office of Rural Health to determine community need. For additional information, contact the SD Office of Rural Health at or 1-800-738-2301 or visit their website at: <https://doh.sd.gov/providers/ruralhealth/recruitment/rap.aspx>.

Rural Healthcare Facility Recruitment Assistance Program

The Rural Healthcare Facility Recruitment Assistance Program provides a **\$10,000** payment to eligible health professionals including LPNs or RNs who complete a three-year, full-time service commitment. Eligible facilities must be in a community with a population of 10,000 or less.

Eligible Facilities are South Dakota licensed:

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Community Mental Health Centers
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Community Health Centers (FQHCs)
Ambulance Services

Applications will be available beginning May 1st on the SD Office of Rural Health website at: <http://doh.sd.gov/providers/ruralhealth/recruitment/Facility/>

For additional information about this program, contact the SD Office of Rural Health at 1-800-738-2301.

3RNet - Rural Recruitment and Retention

3RNet is a FREE service that connects healthcare providers searching for jobs with healthcare facilities in rural areas. Nurses

and other healthcare providers register on 3RNet and select states across the country where those healthcare providers are interested in working. The South Dakota Office of Rural Health administers this program in the state to assist healthcare providers and facilities by forwarding candidate registrations and posting job opportunities for rural healthcare facilities. By visiting the 3RNet website, nurses can register as a candidate and view job opportunities. To register, go to www.3rnet.org and select the For Healthcare Professionals tab at the top of the page. For additional information about 3RNet, contact South Dakota's 3RNet organization member, Jill.Dean@state.sd.us or call 1-800-738-2301.

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Hospitals
and Clinics



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