Creating Unity
Renewal Countdown
Mission of the Board: The mission of the State Board of Nursing for South Carolina is the protection of public health, safety, and welfare by assuring safe and competent practice of nursing.

This mission is accomplished by assuring safe initial practice as well as continuing competency in the practice of nursing and by promoting nursing excellence in the areas of education and practice. The Board licenses qualified individuals as licensed practical nurses, registered nurses or advanced practice registered nurses. Complaints against nurses are investigated and disciplinary action taken when necessary. Schools of nursing are surveyed and approved to ensure quality education and practice as well as continuing competency in the practice of nursing. Nurses, students, and professionals from healthcare organizations turn to this publication for updates on clinical practices, information on government affairs initiatives, to discover what best practices are being implemented, and for insight into how healthcare providers are facing today’s challenges.

ADVERTISING
Reach a highly targeted market of licensed nurses at all levels of practice, nursing students, as well as healthcare employers, educators, and regulators. Present your message in a well-read, professional publication tailored directly to those involved in healthcare. Gain name recognition in the primary care community. Advertisements contained herein are not necessarily endorsed by the South Carolina Department of Labor, Licensing and Regulation - Board of Nursing. The publisher reserves the right to accept or reject advertisements for the Palmetto Nurse.

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OFFICE LOCATION/HOURS OF OPERATION
The Board of Nursing is located at Synergy Business Park, Kingstree Building, 110 Centerview Drive, Suite 202, Columbia, SC 29210. Directions to our office can be found on our Web site – www.llr.state.sc.us/pol/nursing/

Our mailing address is LLR - South Carolina Board of Nursing, Post Office Box 12567, Columbia, SC 29211-2567.

Our normal business hours are 8:30 a.m. to 5:00 p.m., Monday through Friday. Our offices are closed for holidays designated by the State.

DESIGNATED STATE HOLIDAYS FOR REMAINDER OF 2007
September 3        Labor Day
November 12       Veterans Day
November 22-23    Thanksgiving
December 25-26    Christmas

The Palmetto Nurse is published quarterly by the South Carolina Board of Nursing. Each issue is distributed to every actively licensed LPN, RN, APN, as well as to nurse employers and nurse educators. Nurses, students, and professionals from healthcare organizations turn to this publication for updates on clinical practices, information on government affairs initiatives, to discover what best practices are being implemented, and for insight into how healthcare providers are facing today’s challenges.

To order a subscription, call (803) 896-4550 or visit our Web site: www.llr.state.sc.us/pol/nursing/
Many of you have stepped up to the plate by agreeing to be a preceptor for a Registered Nurse or Licensed Practical Nurse who are either taking a refresher course, or enrolled in Recovering Professional Program (RPP), or under Board order. Your willingness to support these nurses is so critical in assisting the nurse to return to practice.

For the refresher course, after completion of a didactic component, the commitment for the clinical component is approximately 80 hours. The preceptor must be a Registered Nurse for both the Registered Nurse and Licensed Practical Nurse refresher course. The nurse will receive a temporary license which states the license is active in South Carolina in a specific facility for a specified period of time. Practice settings must be approved in advance of orientation, shadowing, computer training, etc. In a positive light, this preceptorship is a great opportunity to recruit a nurse for the facility after the refresher course is completed.

Other nurses are required by a Board ordered consent agreement to be supervised in their nursing practice by a Registered Nurse who must remain on shift at all times. Some reasons for this requirement are because the nurse has been disciplined by the Board because of an error in practice, judgment or have a substance abuse/addiction problem and is currently enrolled in RPP.

Those nurses that are participating in RPP for substance abuse or addiction are usually committed to the program for 5 years. They also are required to be supervised by a Registered Nurse who must be on shift at all times. LPNs cannot assume any component of this responsibility and cannot be the supervisor. The definition of supervision means the process of critically observing, directing and evaluating another’s performance. The supervisor is required to complete a report quarterly but can solicit input from the other Registered Nurses that may be participating in the supervision. It is the responsibility of the disciplined nurse to assure that reports are done timely and close communication is maintained with the Board of Nursing.

Hospice, home health, and/or telenursing are not approved practice sites under any circumstances. Public consent agreements can be found on our web site at www.llr.state.sc.us/pol/nursing/

Your continued support of these programs is very much appreciated.
There are two vacancies on the Board of Nursing. Currently, the position of licensed practical nurse member from Region I, which is comprised of Congressional Districts one, two, and three, is vacant. Licensed practical nurse members must be licensed in South Carolina, must be employed in nursing, must have at least three years of practice in their respective professions immediately preceding their appointment, and shall reside in the district they represent.

The second position vacant is for a lay member. The Nurse Practice Act signed by Governor Sanford on May 11, 2004, established an additional lay member for the Board of Nursing. Lay members represent the public at large as a consumer of nursing services and may not be licensed or employed as a health care provider.

Board members must be appointed by the governor with the advice and consent of the Senate. An individual, group, or association may nominate qualified persons and submit them to the governor for consideration. Vacancies must be filled for the unexpired portion of a term by appointment of the governor. When appointing members to the board, consideration should be given to including a diverse representation of principal areas of nursing including, but not limited to, hospital, acute care, advanced practice, community health, and nursing education. No Board member may serve as an officer of a professional health-related state association.

If you know eligible candidates who are interested in these positions, they should submit a letter of request, along with a resume to Boards and Commissions, Governor’s Office, Post Office Box 11829, Columbia, SC 29211.
Bits from the Board

Do you want to hear a snapshot presentation of the latest bits from the Board in your facility at no charge?

An individualized program especially geared to your practice setting, your staff needs, and at your convenience is just a phone call away. You can invest one hour or more, whatever you decide.

All facilities, businesses, and practice settings are encouraged to request a program that you can design to meet your needs. Number of attendees does not matter. At a minimum, the program will include a short update on legislation, recent board decisions, competency, and the Recovering Professional Program, etc. The requestor can add any topic or any focus for the agenda that would be especially helpful to you. Your programs and related discussions will not generate disciplinary action, as the intent is to focus on education and quality improvement in nursing practice.

The sole purpose of this program is to “bring a face from the Board of Nursing” to you and your staff. Staying abreast of nursing practice is your responsibility.

For an individualized program, call Joan Bainer at 803-896-4537 or use e mail at bainerj@llr.sc.gov for your convenience.

RETURNED CHECKS

When submitting any fees to the Board of Nursing, please be certain there are sufficient funds in your account to cover your check and that the check has cleared before closing any account. Section 40-1-50(G) of the South Carolina Code of Laws states that a license must be suspended if a fee payment is made by a check that is subsequently returned by the financial institution unpaid, and is not made good within ten days of official notification. This suspension is exempt from the Administrative Procedures Act. Unpaid checks constitute a non-payment of license fees. Notifications are sent to the address of record on the licensee’s file. Section 40-33-38 (C) of the South Carolina Code of Laws (Nurse Practice Act) requires that all licensees notify the Board in writing within 15 days of an address change. If you use a post office box for mailing purposes, the Board also will require a physical address for its records. When a check is returned, replacement funds plus the returned check fee allowed by law must be submitted in the form of a cashier’s check or money order. The Board cannot provide any further licensure services until the returned check is made good. Notice of the suspension is sent to the licensee’s employer(s) if the check is not made good within ten days of official notification.
South Carolina continues to participate in the Nurse Licensure Compact. Kentucky joined the Compact on June 1, 2007. Colorado and Rhode Island will become part of the compact on October 1, 2007, and July 1, 2008, respectively.

Please visit the National Council of State Boards of Nursing (NCSBN) Web site (www.ncsbn.org) for updates as more states join and implement the Compact.
HAVE YOU MOVED?

Section 40-33-38 (C) of the S.C. Nurse Practice Act requires that all licensees notify the Board in writing within 15 days of an address change. So that you do not incur disciplinary action or miss important time sensitive information such as your renewal and audit or other important licensure information, please be sure to notify the Board immediately whenever you change addresses. Please submit a letter including your name (as shown on your license), license number, former address and new address as well as your new telephone number and email address. You may also change your address on-line utilizing the address change form found on our Web site: www.llr.state.sc.us/pol/nursing/.
# BOARD and COMMITTEE MEETINGS

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ATTENTION EXAMINATION & ENDORSEMENT APPLICANTS

ONLINE APPLICATION STATUS CHECK

The South Carolina Department of Labor, Licensing and Regulation implemented online status check on April 1, 2006, for all of its professional and occupational licensing boards, which includes the Board of Nursing. What does this mean for you? This means that approximately 7-14 days after you have submitted your application for examination or endorsement to the Board of Nursing, you can log on to the Board’s Web site at www.llr.state.sc.us/pol/nursing and check the status of your application to see what items are still pending or have been received. You may also change your address. Applicants can log onto the system using their user ID and password (provided by the Board) or by entering the last 5 digits of their social security number and their last name.

This service is convenient, fast and available 24 hours a day, 7 days a week. Online status checks will allow staff to expedite your application by eliminating the need to telephone the Board’s office to verify receipt or status of your application. If your status shows pending on any item, it means that we may not have received the document or it has not been processed at the time you check the status of your application. “Pending” on review means that your application is in the final stages of the process. The Board hopes that you and your fellow nurses will utilize this new system.

You may also check to see if your license has been issued on the Licensee Lookup system. This link is also located in the upper right corner on the Board’s Web site. There is no need to complete all of the information. Just a portion of the first and last name will bring up the information. When the name comes up, click on the license number for more information. This site gives the name and home city of the nurse as well as the license number, license type, issue date, expiration date, status and whether the license is multi-state or single-state only. This site is also utilized by employers to verify licensure.
The Advisory Committee on Nursing (ACON) assists the State Board of Nursing with strategic planning for regulation of nursing education and practice. It also facilitates collaboration between education and practice. The Committee provides periodic recommendations to the Board relating to existing and proposed nursing educational programs, supply and demand for nursing, as well as national, regional, and state trends that may impact legislative strategy. One overall goal includes the encouragement and support of new models for delivery of nursing services based on safe and competent standards of practice. ACON is a pivotal standing committee for the Board because voting members represent multiple strata of nursing practice and education. The committee is a working model of nursing education and practice.

In a general sense and separate from the good work of ACON, the “marriage” of nursing education and practice in everyday life for the everyday nurse has historically, in this state, been one akin to serial monogamy. A nurse gains an initial credential, i.e. licensed practical nurse (LPN), associate degree registered nurse (RN), or baccalaureate RN, and begins clinical work within the appropriate scope of nursing practice and education. The work experience that leads to clinical competency is valued by both educators and employers, and is a necessary component of safe practice for future educational growth. Clinical expertise is an expected consideration for admission to advanced educational degrees.

Therefore, a necessary merit to advance one’s nursing career is relevant ongoing work resulting in greater clinical expertise. However, in order to gain an advanced educational degree, nurses have traditionally had to stop or alter work to “sacrifice” for the degree in order to meet the requirements of the educational institution. Typically, both work and the events of everyday life of the nurse can be permanently altered as a result, often negatively, i.e. “the divorce.” The nurse then moves on to the next work setting and the next “marriage” to a new educational credential. Although changes in work settings are often concomitant with expanded scope of nursing practice, these choices are ideally ones of professional choice rather than personal necessity.

Working nurses (with years distanced at the same educational level and licensed scope of practice) typically have similar “life” needs and circumstances that make working full time (or enough hours to gain employment benefits) a necessity. Because “life” happens and the need to work is the human experience for the majority of nurses, educational gaps of time often occur for nurses who desire to advance their educational credentials. Over 60 percent of RNs in South Carolina are prepared at the entry level scope of practice, the associate degree. Until life circumstances and motivation/means allow the time and financial incentives to earn an advanced degree, nurses continue to work within the scope of practice appropriate for their existing nursing licensed credential.

Employers have the need to maintain a stable nursing workforce to provide safe and competent ongoing care to the public. With the tremendous technological advances in healthcare, there is an increasingly pressing need for both employers and educators to educate nurses at higher academic levels. The expansion of nursing scope of practice in nursing regulation over the past decade illustrates legislative recognition of this need. However, the vision of South Carolina nurses to get from point “A” to “B” to “C” to “D” from an educational advancement standpoint has often not been clear within the realities of a particular healthcare
locality. Within the context of the locality in which nurses live, work, and have everyday life, educational credentials can be seen as “obstacles,” rather than incentives for expanded scope of practice. The “obstacles” often relate to the time and impact on personal/family finances. The incentives often are not there in terms of employer compensation for the achievement of advancing nursing education, particularly with associate degree RNs who want to advance to become baccalaureate nurses. What is missing is the lack of a WORKABLE educational pathway by all South Carolina nurses.

Today, collaboration between nursing education and nursing practice is encouraged and has resulted in several working models with resulting educational and fiscal benefit for clinical and educational partners. There is no one “correct” credential for nursing practice. Each nursing credential, whether it is LPN, RN, masters in nursing (MSN), or doctor of philosophy (PhD), or other relevant doctoral degree has an appropriate legal scope of practice and appropriate practice setting. The vision and ability of working nurses to achieve additional credentials while continuing to practice and maintain reasonable home lives will be critical to addressing existing and predicted nursing shortages within the next decade in South Carolina. Nursing educators within geographic localities are actively creating collaborative bridges for nursing education, and many curricular educational barriers have been eliminated in this state through the hard work and results of South Carolina nursing educational leaders. There is a palpable sense of urgency to address the current disparity of masters and doctoral prepared nurses in this state to staff faculty and advanced nursing practice needs. The key to success doesn’t lie with the establishment of more and more separate nursing educational entities; it lies with geographically and fiscally prudent partnerships.

Workforce retention as a necessary partner to successful nursing educational advancement models has not been consistently utilized as the bridge within a local community to allow WORKING nurses the opportunity and fiscal ability to achieve individual educational and scope of practice goals. The greatest disparity in nursing salaries lies between the RN and the masters in nursing educational levels. Therefore, the key to workforce retention and successful educational advancement lies primarily with the adaptability of RN to MSN programs or with the traditional RN – bachelor in nursing - MSN programs to engage in non-traditional education systems, both in times and methodology. Regional and local partnerships with hospitals and nursing educational institutions can provide everyday working nurses the ability to achieve advanced educational goals in a way that makes sense to them and works within their life situations. Hybrid and on-line educational programs can aid in this effort to maximize educational advancement. But the key to success is the willingness of all educational and clinical partners to work together fiscally and philosophically in a way that makes sense to specific healthcare communities. When workforce retention is also a focus, the ultimate benefactors of educational and practice partnerships will be South Carolinians with a more stable nursing workforce. In a state where cardiovascular disease, diabetes, and obesity exist at epidemic proportions now and in the immediate future, the partnerships developed now may dictate our ability as a state to improve the overall health status of communities.

The Advisory Committee for Nursing and the State Board of Nursing encourage local and regional partnerships that encourage cooperation between practice and education, advance both the capacity and practicality of nursing education at all levels, and keep the necessary vigilance to protect the public health of the citizens of South Carolina. The unity of practice and education initiatives coupled with the anchor of workforce retention can provide an educationally qualified nurse the initial and ongoing vision that he/she can attain any desired level of nursing education with minimal gaps from the workforce or community of choice.
It is not too early to begin thinking about your 2008 nursing license renewal. Online renewals will begin in February 2008. You may be randomly audited after April 30, 2008, when renewals are over, so be prepared to document the competency option you chose.

Section 40-33-40 of the Nurse Practice Act states that renewal of an active license biennially requires documented evidence of at least one of the requirements listed below during the two year licensure period. You are not required to complete more than one of the options. For this renewal, we will be looking at competencies completed between May 1, 2006, and April 30, 2008.

(a) completion of 30 contact hours from a Board-recognized continuing education provider; OR
(b) maintenance of certification or re-certification by a Board-recognized national certifying body; OR
(c) completion of a Board-recognized academic program of study in nursing or a related field; OR
(d) verification of competency and the number of hours practiced, as evidenced by employer certification on a Board-approved form.

Here are a few suggestions that we hope you will find helpful as you think about your 2008 renewal.

• On Valentine’s Day of even years (2008, 2010, 2012, etc.), think to yourself, “I love being a nurse, did I renew my license yet?” Online renewal is available after February 1 on even years. You will use your same user ID and password.

• When you renew your license and choose a continued competency option, that option must be completed prior to renewal. The Competency Requirement and Competency Requirement Criteria can be found on our web site under Licensure. When you complete your renewal, you are attesting that you have completed the competency option chosen, and that all information on your renewal application is true and correct.

• As you review continuing education courses for renewal of your license, verify on the Competency Requirement Criteria that the course is accepted by the Board for your renewal. Remember that the requirement is 30 contact hours not 30 CEUs (continuing education units).

We hope this information will assist you with your renewal. Remember, it is never too early to begin planning for your next renewal.
The Center for Disease Control (CDC) has released new guidelines regarding aspirations of vaccines and other pertinent practice information. You may access this invaluable resource at www.cdc.gov/Publication/.