

Nevada State Board of

# NURSING NEWS

January 2013

## ANCC Pathway to *Excellence*



## A WALK IN LONG TERM CARE

Nurses and  
the Affordable  
Care Act



Regulations Changes beginning  
September 14, 2012 LCB File No. R113-11

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The **Nevada State Board of Nursing News** publishes news and information quarterly about Board actions, regulations, and activities. Articles may be reprinted without permission; attribution is appreciated.

Circulation includes more than 35,000 nurses, nursing assistants and student nurses.

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# MESSAGE

• FROM THE EXECUTIVE DIRECTOR

Debra Scott, MSN, RN, FRE

Several of my staff members and I give presentations to nursing programs, nursing assistant training programs, nursing groups, conferences, and facilities numbering more than 200 presentations to thousands of individuals annually. The topics for our presentations range from delegation to how to apply for a nursing license, from substance use disorders in nurses to what constitutes unprofessional conduct. More recently, we have presented on social media, professional boundaries, and state, national, and international nursing issues. The common theme for every presentation is the importance of staying informed, getting involved, and enhancing nursing professionalism. We find our time spent educating nurses and our community about nursing regulation to be very rewarding, not to mention an excellent opportunity to develop and nurture the relationships we have within our state.

Building on that foundation, the NSBN News Magazine is one of many important tools that we utilize in giving you, our readers, the information you need related to nursing regulation. Another excellent tool is our agency's website: [nevadanursingboard.org](http://nevadanursingboard.org). We have educational brochures, nursing regulation videos, and we are personally available through a toll free number, (888) 590-6726.

That being said, each nurse must be accountable for being informed about the latest information on regulation of our profession. For example, this issue brings you information about the latest nursing regulation creations, revisions, and deletions. On September 14, 2012, your Nursing Board approved LCB File No. R113-11. Do you know what changes were made to the Nevada Nurse Practice Act (NRS and NAC 632) on September 14th? In fact, this year two LCB files were passed with new regulations that will impact your practice in several ways. A previous article in the June, 2012 issue of our magazine described the changes made in February, 2012, and this issue describes the changes made in September.

Why does the Nursing Board change regulations? We often hear that we need less, rather than more laws. I, personally tend to agree with that opinion. Well, in fact, when you review both of the new groups of regulations, you will find that there have been some deletions as well. But, if you aren't aware of those changes, you may be in jeopardy of being outside of the law regulating our profession. The primary reason that we have changed some regulations is to reach our ultimate goal of patient safety for all consumers of healthcare. Transparency and clarity for patients about their providers of healthcare, increased access to services, and streamlining of the application process enhance patient safety.

Make sure that you are informed so that you provide the safest, highest quality nursing care to all we serve.

A handwritten signature in black ink that reads "Debra Scott".



# WORDS

## ● FROM THE PRESIDENT

Tish Smyer, DNSc, RN, NSBN President

Leaders can succeed with a wide variety of styles as long as they are always authentic...authenticity stems from behaviors that reflect values and makes these values obvious to all (Baum, 2007).

Does your area of practice have a leadership succession plan? I wanted to spend some time discussing leadership related to the practice of nursing. Why is this important at this time? Recent statistics for the nation and Nevada give a startling glimpse related to looming retirements in the nursing profession. According to the American Nurses Association (2012), 50% of the national nursing workforce is close to retirement, and in Nevada the majority of these retirements will be from acute care facilities. For the academic arena, those who will teach our future nurses, the situation is even worse--the average ages of nurse faculty holding the ranks of professor, associate professor, and assistant professor are 60.5, 57.1, and 51.5 years (AACN, 2012) The loss of human capital and knowledge as the nursing baby boomers retire will create a vacuum in not only expertise and a shortage of nurses but in leadership. Leadership succession plans must be a priority whether in education, regulation, or practice. Because nurses are the largest segment of the health care workforce, it is crucial that we foster nursing leaders early to move the profession forward.

Leadership is not merely for Chief Nursing Officers, Nurse Managers, or hospital administrators. It is, or should be, fostered upon entry into the nursing profession. Support for the novice nurse focuses on clinical skills, reasoning, and judgment related to patient care. These are certainly a priority and build both the self-confidence and competence of these new nurses. One area that the profession often overlooks, however, is early intentional leadership training. Front line decision making is often at the bedside. Nurses must make decisions related to assessment findings and plans of care, when to call a physician, and which nursing interventions are most appropriate. These are early necessary steps that can provide the foundation for leadership, but they are not sufficient. Promoting self-direction rather than giving direction or micromanaging often takes extra time for the unit manager or supervisor. Yet this strategy can promote leadership and autonomy in novice nurses as they develop not only clinical proficiency but also leadership skills. Developing and creating relationships and trusting environments along with recognizing contributions in the workplace promote leadership development. Recognizing the mosaic of skills, passions, and strengths that each novice nurse brings to the profession can only help us build a stronger profession and provide safer and more effective care.

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# AFFORDABLE CARE ACT

## • Nurses and the Affordable Care Act

By Susan Van Beuge DNP,APN,FNP-BC, CNE

The Patient Protection and Affordable Care Act [(PPACA) (Public Law 111-148)] was signed into law on March 23, 2010 (American Nurses Association, 2012). This law is known as the 'ACA'. Since being signed into law, it has been incrementally implemented each year. In total, there are 91 new provisions to be implemented over the time frame from 2010 to 2018. Of the new provisions, 60 have been implemented (Kaiser Family Foundation, 2012).

Examining the ACA from the perspective of nurse as the health care provider will give insight into where nurses fit into the changing health care practice landscape. Nurses are the single largest group of clinical health care providers in the American health care system. According to the Bureau of Labor Statistics, there were over 2.7 million nurses in the US based on employment projections in 2010-2011. There are over 180,000 nurse practitioners in the US (Pearson Report, 2011). Nurses provide seamless, accessible, high-quality, and evidence-based care to patients in a variety of settings to include acute hospital care, community clinics, prisons, long-term care facilities, school-based clinics, private offices, community health centers and rural clinics. Many nurses lead the way with care in volunteering activities in their churches, social groups,

care system.

As implementation of the ACA continues, nurses have many opportunities to further demonstrate their leadership. There are many opportunities outlined in the ACA to support nursing in the areas of public health, community health center and shortage hospitals. There are workforce development programs to recruit and promote advancement within nursing and improve patient outcomes.

Many programs are offered in the ACA to encourage nurses to work in areas of shortage such as rural locations, public health, pediatric medical or surgical subspecialty or child mental health and behavioral health care for at least two years in underserved areas. The benefit is two-fold: first, nurses may serve in areas of greatest need, helping their communities with the skills only nurses provide. The second benefit may be realized in student loan repayment for those willing to practice in these areas of need (American Nurses Association, 2012). These competitive programs offer wonderful opportunities for nurses at all levels of education and specialty.

Advanced practice registered nurses (APRNs) focus on high-quality, cost-effective primary care for patients from

**“Nurses are the single largest group of clinical health care providers in the American health care system. According to the Bureau of Labor Statistics, there were over 2.7 million nurses in the US based on employment projections in 2010-2011.”**

neighborhoods, schools and any place there are people with a need for professional nursing.

Nurses are leaders in health care tending to individual, group and societal needs at various levels. Those involved at the highest levels of nursing leadership in our country from local to national organizations have given the voice to nursing so we are included and are an integral part of the new health care landscape. The ACA outlines opportunities for nurses at all levels to participate providing needed access, evidence-based and safe care. From registered nurses to advanced practice nurses, all nurses have one voice of leadership in our health

birth to death. APRNs are trained to provide safe, evidence-based primary and specialty care in the current health care system are known as nurse practitioners, certified registered nurse anesthetists, certified nurse midwives, and clinical nurse specialists. As part of incentives to train new nurse practitioners, the ACA has established the Prevention and Public Health Fund which was designed to create infrastructure to provide early detection, prevention and management before it becomes severe. As part of this fund, increasing nurse practitioner training is a priority with an allotment of \$30 million to train an additional 600 nurse practitioners to provide comprehensive

continued on page 8 >>

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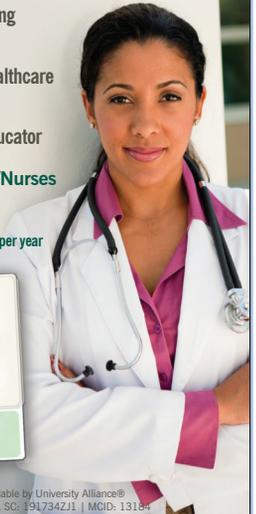
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primary care. The Fund also establishes nurse practitioner-led clinics with \$15 million in grants to establish 10 nurse-managed health clinics to provide care to medically underserved communities as well as places to assist in the training of new nurse practitioners (HealthCare.gov, 2012).

Nurses are leaders in health care and should embrace the opportunity which comes with change. Nursing has always practiced from a holistic framework viewing individuals, families and communities as parts of a whole system in the continuum of health with a focus on wellness and disease prevention. It is an opportunity to move from a sick care model to a wellness model, with nurses as leaders of this charge. As the largest group of healthcare providers in the US, the opportunity to be part of policy creation, change and impact as we forge ahead will be both opportunity and responsibility of nurses at all levels of practice.

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# ANCC PATHWAY TO EXCELLENCE®

By Jennifer Richards PhD RN

On Friday, August 10th, 2012 Renown Regional Medical Center and Renown South Meadows Medical Center became the first Pathway to Excellence® hospitals in Nevada. The Pathway to Excellence designation, granted by the American Nurses Credentialing Center (ANCC), is based on the confirmed presence of characteristics known as “The Pathway to Excellence Criteria.” For an organization to earn the Pathway to Excellence distinction, it must successfully undergo a thorough review process that documents foundational quality initiatives in creating a positive work environment, as defined by nurses and supported by research. These initiatives must be present in the facility’s practices, policies, and culture. Nurses in the organization verify the presence of the criteria in the organization through participation in a completely confidential online survey. The survey requires a minimum of 51% participation and an overall 75% positive response to the questions. Both Renown Regional Medical Center and Renown South Meadows Medical Center met these survey requirements and were commended on having several exemplars in the written portion of their respective applications. The written documentation included evidence to support how we meet the 12 Pathway to Excellence Practice Standards:

- Nurses control the practice of nursing
- The work environment is safe and healthy
- Systems are in place to address patient care and practice concerns
- Orientation prepares new nurses
- The Chief Nursing Officer is qualified and participates in all levels
- Professional development is provided and utilized
- Competitive wages/salaries are in place
- Nurses are recognized for achievements
- A balanced lifestyle is encouraged
- Collaborative interdisciplinary relationships are valued and supported
- Nurse Managers are competent and accountable
- A quality program and evidenced-based practices are utilized



The Pathway to Excellence designation identifies the elements of work environments where nurses flourish and as a result, where optimal patient care is delivered every day. In the words of Lorraine Haines, MSN, RN “receiving this designation is a great recognition of the dedication and determination of our nurses to keep patient care the priority in this ever challenging and changing healthcare environment.”

“I cannot over-emphasize the significance of the Pathway to Excellence designation for Renown Regional and Renown South Meadows Medical Center nurses, our patients, our community, and our state, said Jennifer Richards, PhD, RN, “I am honored to be part of this truly remarkable achievement which has put Nevada on the map in a very positive way.”

# • Northern Nevada NURSES OF ACHIEVEMENT

By Vickie L. Wright, MSN MBA RN

Northern Nevada Nurse of Achievement will be holding their 13th annual recognition dinner on Friday May 10, 2013 at John Ascuaga's Nugget. Nominations will begin January 1, 2013 and will close at 8:00 AM on January 31, 2013.

Northern Nevada Nurses of Achievement was formed in 1999 to shine the spotlight on the many nurses who contribute to care and nurturing of those living in the Northern Nevada area. The Northern Nevada Nurses of Achievement also recognizes the need to support and promote the profession of nursing and to that end has awarded over \$114,000 in nursing scholarships to Northern Nevada nursing students.

The committee is comprised of volunteer nurses who represent many areas of nursing across northern Nevada. This committee has two major goals: to raise money for nursing scholarships and to host an event where northern Nevada's greatest nurses can be recognized and all northern Nevada nurses and their supporters can enjoy an evening of fun, socializing and continuing to raise money by buying silent auction items at the event.

Through the support of community partners, Northern Nevada Nurses of Achievement continues its long-standing tradition of supporting our region's best professional caregivers. With several contribution levels to choose from each offer the opportunity to show support for the nursing profession, either by providing monetary donations, or by providing items for the silent auction. The event sponsors help to fund the educational scholarships that will help ensure a healthy community.

Nurses can be nominated in a number of categories including Critical Care Nursing, Rookie of the year, Medical/Surgical, Maternal Child, Advance Practice, Community Health, Education, Innovation, Leadership, LPN's, Lifetime Achievement, Long Term Care/Rehabilitation, Office/Outpatient, Patient Advocacy. The committee also acknowledges those nurses who have passed away in the previous year.

Nominations are made during the month of January, and then the nominated nurses are notified of their recognition. Next, nominees are encouraged to accept their nomination in a few short paragraphs, by answering self-evaluation questions. Responses to the questions are essential to help the judges choose the winner of that particular category.

A previous nominee states, "It's like the Grammy's! I still get a little teary about it. It was one of the proudest moments of my life".

This year's event is May 10th at John Ascuaga's Nugget; doors open at 5 p.m. with dinner beginning at 6:00 p.m. Attendees are greeted with music and the Silent Auction as well as catching up with old friends.



# BOARD TALK

## BOARD MEETINGS

A seven-member board appointed by the governor, the Nevada State Board of Nursing consists of four registered nurses, one practical nurse, one certified nursing assistant and one consumer member. Its meetings are open to the public; agendas are posted on the Board's website and at community sites.

## BOARD MEETING DATES

January 8-10, 2013 Las Vegas  
March 27-29, 2013 Reno

## ADVISORY COMMITTEES

The Nevada State Board of Nursing is advised by and appoints members to five standing advisory committees. Committee meetings are open to the public; agendas are posted on the Board's website and at community sites. If you are interested in applying for an appointment to fill an upcoming opening, please visit the Board's website or call the Reno office for a committee application.

## MEETINGS AND OPENINGS

The openings (listed in parentheses) will occur in the next six months. All meetings will be held via video-conference in Reno and Las Vegas.

### Advanced Practice Advisory Committee (two)

February 12, 2013

### Certified Nursing Assistant/MA-C Advisory Committee (three)

January 24, 2013

### Disability Advisory Committee (none)

April 19, 2013

### Education Advisory Committee (none)

January 31, 2013

### Nursing Practice Advisory Committee (two)

February 12, 2013

\*One Home Health LPN, one Long Term Care RN, one MA-C

## • COME TALK TO THE BOARD

During each regularly scheduled meeting of the Nevada State Board of Nursing, Board members hold a Public Comment period for people to talk to them on nursing-related issues.

If you want to speak during the Public Comment period, just check the meeting agenda for the date and time it will be held. Usually, the Board president opens and closes each day of each meeting by inviting Public Comment. Time is divided equally among those who wish to speak.

For more detailed information regarding the Public Comment period, please call the Board.

## • WE'LL COME TALK TO YOU

Board staff will come speak to your organization on a range of nursing-related topics, including nursing education, continuing education, delegation, the impaired nurse, licensure and discipline processes, and the Nurse Practice Act.

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Nurses: the Board is also auditing for compliance with the one-time renewal requirement for a four-hour bioterrorism course. You must keep a copy of your bioterrorism certificate of completion indefinitely.

## MOVING?

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You're required by law to inform the Board, in writing, of any address change, including a zip code change. The easiest and fastest way for you to make your address change is to go to the Board's website and click on the Address Change link. You may also send an email to [nursingboard@nsbn.state.nv.us](mailto:nursingboard@nsbn.state.nv.us), call the Board and request an address change form, or mail a signed letter to the Las Vegas office. Remember to include your name, license or certificate type and number, former address, current address, social security number, date of birth, and email address.



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# REGULATION CHANGES



The Nevada State Board of Nursing is charged with protecting the public's health, safety and welfare through effective regulation of nursing. The Board was created in 1923 by the Nevada Legislature through a legislative declaration, NRS 632.005. One of the many duties of the Board is to adopt regulations establishing reasonable standards to regulate the profession of nursing in Nevada pursuant to NRS 632.120. The following changes were made to the Nevada Administrative Code through a public process and approved on September 14, 2012.

#### Changes related to Advanced Practitioners of Nursing:

- The term "clinical" replaced the term "medical" to describe the advanced practice specialties to more clearly define the difference between an APN and a physician.
- The term "doctorate degree" was added as an alternative degree that may qualify a nurse to practice in advanced practice role.
- Clarification was made to the requirements that an APN must meet in order to write prescriptions if the APN has not practiced in prescribing recently.

- **Regulations Changes beginning September 14, 2012  
LCB File No. R113-11**

- APN roles were clarified to include a certified nurse midwife, a nurse psychotherapist, a certified nurse practitioner, a clinical nurse specialist, or any combination thereof and that the certificate of recognition to practice would be issued to reflect the clinical specialty in the advanced role.
- During the last Legislative Session, a bill was passed requiring that all APNs be nationally certified. The new regulations provide for grandfathering of previously certified APNs so that APNs who complete a program to prepare an advanced practitioner of nursing before July 1, 2014, will be encouraged but not required to be nationally certified. Anyone graduating from such a program after that date will be required to be nationally certified as a requirement for issuance of a certificate of recognition as an APN.
- Regulation that requires a student who is enrolled in a formal educational program for advanced practice was strengthened by clarifying the language of the regulation.
- The licensure process for an APN was streamlined to allow the Board to issue a certificate of recognition to an APN without submission of a collaborative agreement and protocols to the Board. The APN must submit a copy of the collaborative agreement with a physician prior to the APN practicing in the advanced nursing role. This allows the APN to secure employment with an active license/certificate, giving the physician or facility assurance that the APN meets all the requirements for practice in the advanced role.
- Regulations were revised to allow the Board to audit the APN's competence and practice site as part of ongoing quality assurance for practicing APNs.

#### Deletion related to Approval of Continuing Education Courses

- The requirement for the Board to approve individual continuing education courses was deleted. Course providers must be approved by the Board and will be audited to verify that they are meeting the requirements to provide courses to nurses in Nevada.

Please refer to the Board's website to review all recent regulation changes at [nevadanursingboard.org](http://nevadanursingboard.org).

**PRACTICE SAFELY**

# A WALK IN LONG TERM CARE

By Roseann Colosimo PhD RN

Leadership requires a vision and persistence. Joe Ann Cole, the administrator, and Vangie Tupas, the director of nursing, have worked on their dream for eight years together. Royal Springs has become a premier skilled nursing and rehabilitation center with their fortitude, guidance and commitment to excellent nursing care. They received the Health Insight award for a significant reduction in falls, below the state and national average. This was done with a concurrent reduction in the use of psychotropic medication. The team of psychiatrists, physicians, nurses and rehabilitation staff all worked to enhance investigations ruling out pain, hunger, infection and incontinence as sources for falls. The Director of Nursing, Vangie Tupas, was able to change the culture to no restraints by limiting access to restraints, and retraining and coaching staff.

What nursing and the interdisciplinary team can accomplish for quality of life! The miracles are created by a dedicated team. What follows are just a few examples of change that made a significance difference in patient outcomes.

A resident who is semi comatose from a car accident is admitted in restraints, on a ventilator, and on a G tube. After three months of interdisciplinary patient focused health and nursing care, the resident is able to have his vent capped, sit in chair and talk. The resident is working on a toileting program.



Two years ago, the nursing staff began a resident patrol for infection control. Residents were educated about spread of infection. This program has improved the nosocomial rate to a very low .46. The rate of ventilator acquired pneumonia is often zero at the facility because respiratory and nursing staff have collaborated to see that every resident has oral care every shift.

Four years ago, evidence-based research on the number of Alzheimer patients who elope told the nursing staff that sky blue unit paint was contributing to problems. The unit was painted a soothing shade of green and the residents stayed safely on unit with fewer interventions.

Loretta Dolphin was added to the team four years ago to help with education and

the constant improvement of nursing care. She has invested most of her time in educating and assisting certified nursing assistants with improving the quality of care either through bedside observation, skill competency or inservice trainings

The Director of Nursing, Vangie Tupas knows every resident. Vangie describes how important communication is with families who are usually going through a difficult time of their own ,grieving the loss of health of a family member. Vangie stresses the importance of communication and knows each and every one of her 200 patients.

Joe Ann Cole, the administrator of the facility, certainly excels in creating and maintaining a stable team to achieve excellent patient care. She is

continued on page 16 >>



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# NURSING *Leadership*



Myra Broadway JD MS RN President of the National Council of State Boards of Nursing presents Debra Scott MSN RN FRE with Meritorious Service Award.

The focus of this issue is nursing leadership. Nevada is fortunate to have many excellent nursing leaders but Nevada needs more courageous nursing leaders and board President Tish Smyer alerts Nevada Nursing leaders must be actively involved in succession planning. This issue is sprinkled with a few of our Nursing leaders who have recently been recognized by organizations for their leadership.

Debra Scott, MSN, RN, FRE, executive director, Nevada State Board of Nursing, received the Meritorious Service Award, which is presented to a board or staff member of a member board for positive impact and significant contributions to the purposes of National Council of State Boards of Nursing (NCSBN). Picture above

Jeffery Stout, MSN, RN, Jennifer Richards, PhD, RN, and Gail Green MSN, RN led Renown Regional Medical Center and Renown South Meadows Medical Center to become the first Pathway to Excellence® hospitals in Nevada. The Pathway to Excellence designation was granted by the American Nurses Credentialing Center (ANCC). Cover story.

Loretta Dolphin, ADN, RN, Vangie Tupas, BSN, RN, and Joe Ann Cole NHA RN received the Health Insight Award for 2012 for demonstrating a commitment to excellence in Healthcare. Page 14

In the issue you will read more specifics but each of these nurses saw a vision of better nursing care for Nevada citizens. The planning and implementation required all to have moments of determination through resistance.

<< continued from page 14

an administrator who has the rare talent of truly creating an interdisciplinary team for improved patient outcomes. During the interview, the staff constantly said, “We are a team and this department worked with us to achieve better healthcare for our residents.”

The Healthcare Insight Award is given for demonstrating excellence in healthcare. In 1998 Judith Viorst wrote a book called

Necessary Losses in which she the author spoke eloquently about the difficulties in our society of learning to live with loss. Royal Springs has developed expert nursing care by nurses and an interdisciplinary healthcare team that will make its vision statement of “embracing commitment to quality of care and making a difference to those who trust us with their care” a reality.

# BETTER WORKFORCE DATA

Nursing Helps lead Nevada to better workforce data.

Health Sector and Medical Services Council Members and Colleagues,

I am pleased to report that this morning the Nevada State Board of Nursing unanimously approved a measure that would require all nurses renewing their license to complete a brief set of Minimum Data Set questions on nursing employment characteristics, sociodemographic, and other MDS data we have been discussing for the last couple of years.

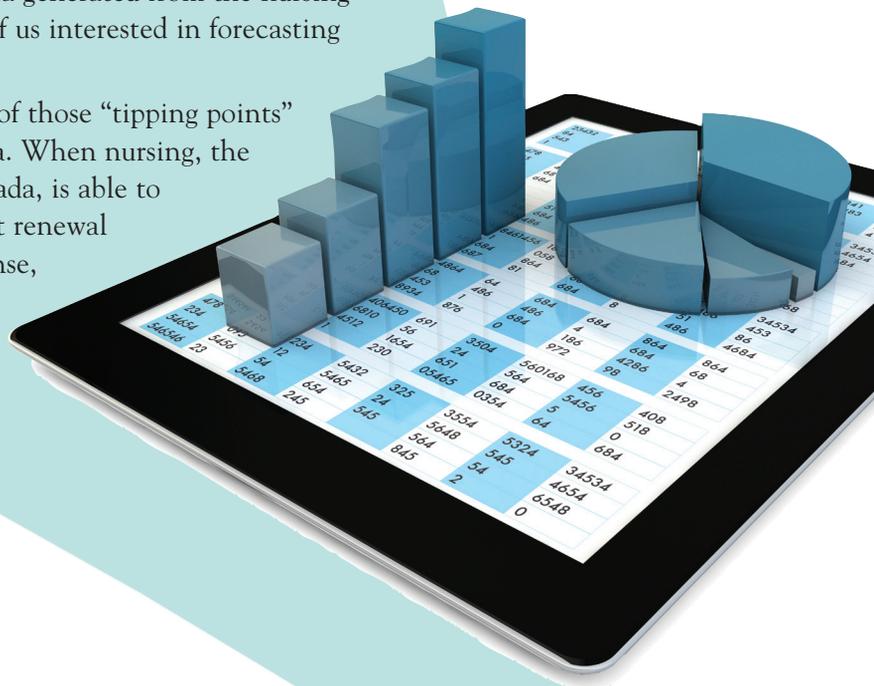
This development represents a major step forward in our state's ability to understand nursing workforce characteristics and trends in Nevada. Data generated from the nursing MDS will also provide a solid foundation for those of us interested in forecasting nursing supply and demand in Nevada.

I believe that the board's decision represents one of those "tipping points" for health workforce research and analysis in Nevada. When nursing, the largest group of health professionals licensed in Nevada, is able to demonstrate the value of capturing workforce data at renewal with a minimal burden on those renewing their license, I'm confident that other boards will follow.

Deb Scott and the NSBN Board are to be commended for this important step forward.

JP

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# MEET THE STAFF

Sandra 'Sandy' Webb is one of the receptionists at the Board.

Sandy's is responsible for general program support including inquiries, information and referrals; processing initial and renewal application in addition to fingerprint capture.

Prior to coming to the Board, Sandy worked for a non-profit organization for 11 years. She still volunteers for 2 different organizations. When asked what she likes most about working for the Board, she said "I like the people who work here and how they care for the individuals whom they help."

Sandy is a Henderson native and enjoys spending time with her 17 year old son and 12 year old daughter; she says "it's an adventure."



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- Potential Funding to Support the Dislocated Worker New Grad or Re-Entry Nurse Transition into Practice Program

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The re-entry nurse experiences challenges similar to those lived by NGNs. Nevada law mandates that if a nurse holds an

inactive RN license (greater than five years) the nurse must participate in a nurse refresher course in order to be re-licensed. Characteristically nurses returning to acute care nursing after being away for three to four years may find that even if they have kept up with continuing education, an employer will require orientation very similar to new graduate nurses seeking their first professional position.

The dynamic collaboration between the NHA, NIN and the HCTA-NV develops employer partners and promotes an effective and safe new grad/re-entry nurse transition into professional practice. The HCTA-NV developed and implemented both the New Grad-Transition into Practice Program (NG-TIPP) and Registered Nurse-Transition Into Practice Program (RN-TIPP), both of which provide training, education and mentoring in order to bridge new and re-entry nurses from academia or unemployment to nurses who provide quality care safely (both programs are approved by the NSBN).

There may be funding available for the DW NG-TIPP or RN-TIPP program in January/February 2013. Eligible Registered Nurses must meet one of the following criteria:

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