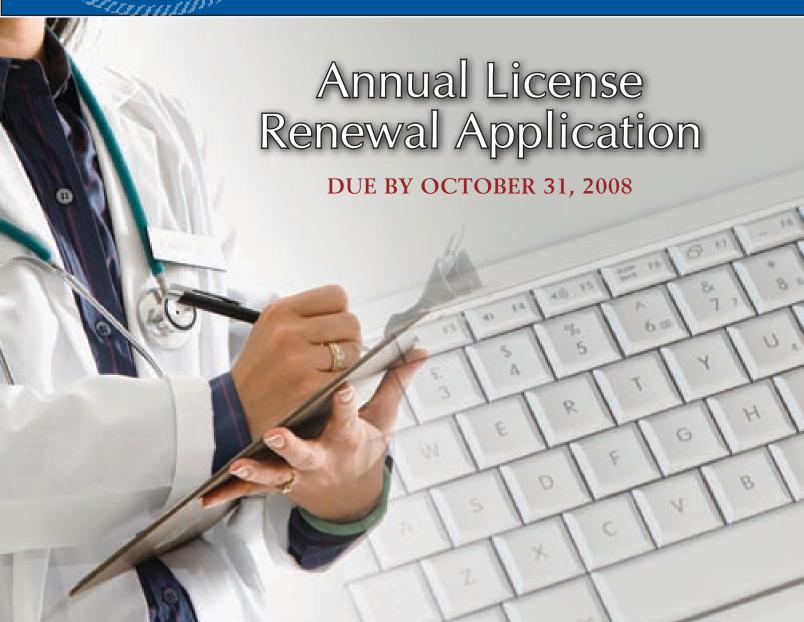
## West Virginia

## RN Nursing News

Volume 1 Number 7

Official Publication of the West Virginia Board of Examiners for Registered Professional Nurses



The Constance M. Baker Endowed Scholarship Fund Established at the NLN Foundation • WV REDI

SAVE TIME...RENEW ONLINE!!

# RN Nursing News

Official Publication of the West Virginia Board of Examiners for Registered Professional Nurses

West Virginia Board of Examiners for Registered Professional Nurses

101 Dee Drive, Suite 102 Charleston, WV 25311-1620 Phone: (304) 558-3596 e-mail: rnboard@state.wv.us web: www.wvrnboard.com

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The Constance M. Baker Endowed Scholarship Fund Established at the NLN Foundation

20

Reach every Registered Professional Nurse licensed in West Virginia.



#### **MISSION**

#### GOALS AND OBJECTIVES

#### STATUTORY HISTORY

#### PERFORMANCE MEASURES

#### RECOMMENDED IMPROVEMENTS

#### WEST VIRGINIA BOARD OF EXAMINERS FOR REGISTERED PROFESSIONAL NURSES

The West Virginia Board of Examiners for Registered Professional Nurses is established to promote and protect public health, safety, and welfare through the regulation of registered professional nurses and dialysis technicians.

In accordance with WV Code §30-7-1 et seq. the Board will:

- I. Function according to the Code of Conduct.
- 2. Be accessible to the public.
- 3. Assure the quality of the basic education process for registered professional nurses.
- 4. Assure the quality of the basic education process for the dialysis technician.
- 5. Assure initial and continuing competence of the registered professional nurse.
- 6. Assure initial and continuing competence of the dialysis technician.
- 7. Define the scope of practice for registered professional nursing and advanced practice nurses.
- 8. Define the scope of practice for the dialysis technician.
- 9. Provide a disciplinary process.
- 10. Review issues related to the nursing shortage.
- 11. Support the mission of the West Virginia Center for Nursing.

The Board of Nursing is mandated under Chapter 30 of the West Virginia Code to:

- 1. Review and evaluate National Council of State Boards of Nursing registered nurse licensure examination scores of each program in relation to the standard.
- 2. Conduct on-site visits to at least two nursing education programs annually.
- 3. Issue licenses to qualified persons in a timely fashion.
- 4. Provide educational information to registered nurses, dialysis technicians, and the public related to:
  - a. Discipline
  - b. Orientation to the Board
  - c. Advanced Practice
  - d. Licensure
  - e. Practice Issues
- 5. Process complaints from health care professionals and the public in a timely fashion.
- 6. Expeditiously respond to requests related to:
  - a. Verification of licenses and certification
    - b. Discipline cases
    - c. The function of the Board
    - d. Patients' rights information
- 7. Continue the review and evaluation of multi-state regulation.
- 8. Provide and evaluate the effectiveness of the impaired nurse treatment program.
- 9. Provide multiple modes of communication opportunities with the Board.
- 10. Implement the rules relative to the regulation of dialysis technicians.

Continue updating computer equipment and database program. Evaluate and provide personnel, equipment, and database programs.

Reviewed and revised by the Board 6/14/1999; 6/13/2000; 6/13/2001; 6/12/2002; Reaffirmed 6/12/2003; Reviewed and revised by the Board 6/15/2004; 6/15/2005; 6/14/2006; 6/13/2007.



#### From the President

West Virginia's nursing community lost a dear colleague with the death of Dr. Patsy Haslam on July 25, 2008. Dr. Haslam served on the WV RN Board for two full terms and was the President for many of those years. Patsy's leadership moved the Board forward on a steady path and many positive changes occurred during her tenure. Dr. Haslam most recently worked at Mountain State University and retired from there June 30, 2008.

When thinking about Patsy and hearing the comments offered by those who knew her and worked with her, the descriptors heard over and over were: "compassionate, caring, student advocate, community directed and kind". The student testimonies remind me of thinking about how difficult it is to begin a new career and profession and how important it is for those of us who have been around a while to help new nurses have good early experiences. Some of you may have forgotten what it is like to be a new nurse on the floor, fresh out of school. Looking back more than 30 years I still remember my first day working as a graduate nurse.

Take a moment and reflect on the one nurse who served as your mentor. The one who taught you what is was really like to be a nurse. The one nurse you most wanted to emulate in your professional career.

Now, take those memories, find a new graduate, and become a mentor. Help them along, teach them, be their friend. So many times we hear nurses "...eat their young..." We must change this perception. After all nursing is a profession of caring and if we care we will be compassionate to others.

Many times we forget what it was like to be new, to be a new nurse. We must remember they are beginning practitioners, novice nurses. Our expectations of the novice should be for them to be at the entry level, not what we know from all our years of experience and practice. Let's lead by example.

I hope you are having an enjoyable summer. Take time for yourselves and your family. Remember, life is precious; we are only on earth a short time. Make the most of this life and in your professional career, help make memories and teach lessons that will last.

Pamela Alderman, MSN, RN Board President

#### REMINDER

• RN license expiration date is October, 31, 2008



#### From the Executive Director

Laura Skidmore Rhodes, MSN, RN, Executive Director



Changes are always taking place. Some make us smile and some make us sad. Both give us a different insight to our lives and hopefully have us adjusting our world to make it better or to be better than we were before. If you have read the President's letter you know about the death of Dr. Patsy Haslam. Patsy's contributions to West Virginia, nursing, students and her local community set excellent examples of how we can make a difference in the lives of many. Our thoughts are with all those whose lives were touched by Patsy. We want to share more about her in our next edition.

There are other changes "in the works" for the Board and licensees. The Board just approved rule changes for Limited Prescriptive Authority, Requirements for Schools of Nursing and for an increase in Fees. All of these rules are available on the Board's web site. Of particular note is the increase in fees for exam applicants and license renewal that won't be effective until and unless the rule passes during the 2009 Legislative Session. If the rule passes during the 2009 Legislative Session then the exam fee will be \$70.00 and the renewal fee will be \$50.00. The \$50.00 renewal fee will provide the Board with \$40.00 (\$15.00 more than they currently receive) and the Center for Nursing with \$10.00. Because of the Board's fiscal responsibility, the renewal fee has not increased since 1992 and the exam fee has not increased since the 1980s. As with all businesses, the Board is faced with increased costs. The increased fees will provide the Board with enough income to continue to fulfill their regulatory role.

This year, the renewal fee is \$35.00. Please take time to renew online as this is the quickest and easiest way to renew!

Remember, all licenses expire OCTOBER 31, 2008.

SAVE TIME... RENEW ONLINE.

#### Notice for Readers

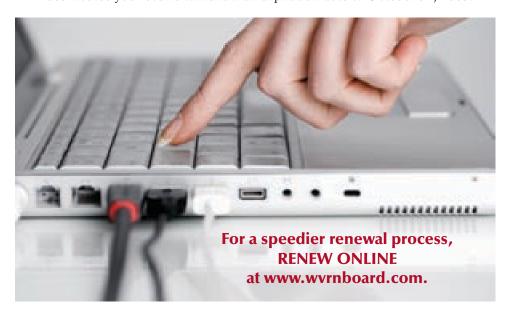
• Interested in becoming a Reader for the NCLEX-RN Examination? Contact Cyndy Haynes at 304-558-3596 or email her at chaynes@state.wv.us

#### **Renewal Season is Upon Us!**

The online renewal will be available beginning mid August. So, by the time you read this article, you should be able to renew online by going to www. wvrnboard.com and following the link to the online renewal page.

To renew online you will need your license number, last four digits of your social security number and a credit card.

THE FEE THIS YEAR IS THIRTY FIVE DOLLARS (\$35.00). The 2008-2009 license you receive will show an expiration date of October 31, 2009.



A paper renewal is in the middle of this magazine. You may remove the middle pages, complete the renewal and return it to the RN Board within thirty (30) days of receipt. For a speedier renewal process, RENEW ON-LINE at www.wvrnboard.com.

The renewal may also be downloaded from the web site for those preferring to submit a paper renewal and lost the renewal in this magazine.

You will not be able to renew online if you have a complaint that has not previously been reported to the Board.

If you have a name change, you can renew online only after you have sent in the required name change form. A link to this form is located on the web site home page at www.wvrnboard.com.

If you have any questions please send an e-mail to rnboard@state.wv.us. Please note the word RENEWAL in the subject line.

**REMEMBER:** An active license is required to practice as a registered professional nurse in West Virginia. Practicing without an active license will result in a fine and related administrative costs and could include disciplinary action.

### BOARD MEETING DATES

#### $2008 \, \text{AND} \, 2009$

October 23 – 24, 2008

February 20, 2009

(Tentative Date)

March 12 – 13, 2009

June 17 – 19, 2009

RN/LPN Joint Meeting June 17, 2009 at 1:00 PM

October 22 – 23, 2009

#### WEST VIRGINIA BOARD OF EXAMINERS FOR REGISTERED PROFESSIONAL NURSES

#### ANNUAL LICENSE RENEWAL APPLICATION

P.O. Box 5337, CHARLESTON, WV 25361-0337 304-558-3596 OR 1-877-743-6877 VOICE MAIL SYSTEM Web: <a href="www.wvrnboard.com">www.wvrnboard.com</a> E-mail: <a href="mailto:rnboard@state.wv.us">rnboard@state.wv.us</a>

Save time. . . Renew Online <a href="https://www.wvrnboard.com">www.wvrnboard.com</a> through October 31, 2008

**RENEWAL INFORMATION**: Your RN license expires October 31, 2008. You must renew the license to continue working or identifying yourself as an RN.

PLEASE READ QUESTIONS CAREFULLY COMPLETE **ALL PAGES** OF THE APPLICATION AND SIGN Incomplete or unsigned applications will be returned unprocessed

Make checks payable to: WV BD OF EXAM FOR RN. Place your license number on your check. There is a \$20.00 fee for returned checks. A license becomes invalid upon failure to redeem a check after notification. Online credit card payment is available at <a href="https://www.wvrnboard.com">www.wvrnboard.com</a>. Faxed applications are not accepted.

RENEWAL APPLICATION MUST BE RECEIVED IN THIS OFFICE BY OCTOBER 1, 2008

TO BE ASSURED OF RECEIPT OF YOUR LICENSE BY OCTOBER 31, 2008

MAIL TO: WV RN Board, PO Box 5337, Charleston, WV 25361-0337

Board Office closes at 5:00 pm October 31, 2008.

Name

License Number (if known)

| A.I.I.   |  |  | (  | 201  |                                      |                  |
|--|--|--|--|--|--------------------------------------|------------------|
| Address  | City   | State  | Zip  | SSN:   | -                                    |                  |
| E-mail Address   |  |  | —.r  |  |                                      |                  |
| READ EACH QUESTION CAR   | EFULLY: CHECK OR CIR   | CLE THE CORR   | ECT RESPON   | ISE  |                                      |                  |
| <ol> <li>A. ☐ RENEWAL FEE = \$35</li> <li>B. ☐ Renewal Fee with Na your name or a signed and n</li> <li>C. ☐ Inactive Status Requon inactive status if discipline</li> <li>D. ☐ Retired Status Requeregistered nurse. A special Fee</li> </ol> | otarized affidavit. The affi<br>est = No fee. No license<br>is pending or there is cur<br>est = No Fee. Must be un | d requires a certif<br>davit is on the we<br>issued. Must sig<br>rently action again<br>employed. May no | ied copy of the<br>b site at <u>www</u><br>n back of rene<br>nst your licens | e legal docur<br>wvrnboard.c<br>wal form. Mee. | nent cha<br>c <u>om</u><br>lay not b | anging<br>e plac |
| 2. Marital Status: (S) - Single  | (M) - Married (W) - Wid  | owed (D) - Dive  | orced  |  |                                      |                  |
| 3. To which racial/ethnic group do ☐ White, not of Hispanic or ☐ Asian/Pacific Islander  | igin 🔲 Black, not of Hispani   | c origin  Hispan   | ic ☐ Ameri<br>acial/ethnic gro   | can Indian/Ala<br>up                           | askan Na                             | tive             |
| 4. Check the degrees you hold oth  | ner than your original nursi   | ng degree and pro  | vide the year o  | btained. All Di                                | iploma D                             | egrees           |
| are currenly in the database:  ☐ Associate, nursing ☐ Associate, other field☐  | Baccalaureate, nursing<br>Baccalaureate, other field   |  | s, nursing<br>s, other   | Doo  | ctoral, nu<br>ctoral, oth            | rsing_<br>ner    |
| YES* answers for 5 - 11 require a 5. Have you ever been convicted or reported to the Board?  | additional information: an e   | xplanation and ce  | rtified copies of<br>Yes* se   | of court relate                                | ed docur<br>No                       | nents            |
| 6. Have you ever been convicted of contendere or deferred prosecution crime that has NOT been previous exclusive of minor traffic violations   | or been pardoned in relation sly reported to the Board?  | n to any<br>(Any conviction  | Yes*<br>reported.)   |  | No                                   |                  |
| 7. Do you have any criminal charg territory or country that have <b>NOT</b> I  |  |  | Yes*   |  | No                                   |                  |

| 8. Has a complaint ever been f that has NOT been dismissed   |   | West Virginia                        | Yes*   | No  |
|--|---|--------------------------------------|--|---|
| 9. Has a complaint ever been f territory or country that has NO                                    |   |                                      | Yes*<br>d?   | No  |
| 10. Are disciplinary charges pe other state, territory or country t                                | Yes*<br>Board?  | No                                   |  |   |
| 11. Has your nursing practice e action or otherwise, by any facil reported to the Board? (Action   | ity, board or group that has NO   | T been previously                    | Yes*<br><b>y</b>   | No  |
| 12. Do you currently possess a safely and effectively practice re YES** If you answer "yes" please | egistered professional nursing?   | •                                    | Yes**  | No  |
| 13. Do you have a court ordere   | ed child support obligation?  |                                      | Yes  | No  |
|  | any unpaid obligation equal or  | exceed the                           | Yes  | No  |
| amount of child sup  | port payable for six (6) months?<br>e subject of a child-support or p   | ?                                    |  | No  |
| 14. Do you own all or part of a  | business that operates within V   | /est Virginia?                       | Yes***   | No  |
|  | ***If yes, please enter the FEI   | N number of your h                   | nusiness   |   |
|  | •   | •                                    | ·  |   |
| WV'21A-6(18) provides that a b are in default under either the u                                   |   |                                      |  | profession if you                               |
| 15. Are you currently employed   | I in a paid position?   |                                      |  |   |
| YES, check one below   | •   | □ NO check the                       | e reason below   |   |
| In nursing   | •   |                                      | king in nursing ONLY as a  | n unpaid volunteer                              |
| Full time paid position  |   | ☐ Sala                               | ry inadequate  | •   |
| ☐ Part time paid position☐ Per Diem paid position☐   |   |                                      | e responsibilities   |   |
| ☐ Fel Dielli pald position   | 11  | ☐ Call                               | ng for elderly parents<br>bled   |   |
| In healthcare but not nursing  |   | ☐ Seel                               | king work as a nurse   |   |
| Full time paid position  |   |                                      | king work in another field   | hla.  |
| <ul><li>☐ Part time paid position</li><li>☐ Per Diem paid position</li></ul>                       |   | ☐ Seer                               | king work but no job availa<br>red   | bie   |
|  |   | Othe                                 |  |   |
| NOT in nursing or healthcare   |   |                                      |  |   |
| ☐ Full time paid position ☐ Part time paid position  | ]   |                                      | ny weeks have you been sob? weeks  | eeking a  |
| Per Diem paid position   |   | nursing jo                           | DD? weeks  |   |
| IF EMPLOYED PROVIDE THE an active license to practice a time each month.                           | as a nurse. PRIMARY NURSIN  | : Employment as<br>NG POSITION is th | a nurse means any job the nursing position in which  | nat requires you to hol<br>n you spend the most |
| time each month. Employer  | : <u></u>   |                                      |  |   |
|  | Name  |                                      |  |   |
|  | Address   | City                                 | State  | Zip   |
| County of Emp  | loyment:  | Employ                               | er Phone Number:   |   |
| Number of hou  | rs Worked per week:   | Numbe                                | r of weeks worked per yea  | ar:   |
| SETTING OF EMPLOYMENT:<br>PRIMARY NURSING<br>POSITION  | B. COMMUNITY/PUBLIC HE C. CORRECTIONS D. HOME HEALTH AGENCY E. HOSPITAL F. INDUSTRIAL/BUSINESS G. MILITARY INSTALLATION | ALTH AGENCY<br>//HOSPICE<br>N        | I. OCCUPATIONAL HEAD. OFFICE K. PRIVATE PRACTICE. L. SCHOOL/COLLEGE H. SCHOOL OF NURSIN. STATE INSTITUTION O. TEMP. AGENCY/NUR | /SELF EMPLOYED<br>HEALTH<br>NG<br>I             |
|  | H. NURSING HOME/EXTEN   | DED CARE                             | P. OTHER   |   |

TYPE OF POSITION: **PRIMARY NURSING POSITION** 

A. ANESTHESIA

- A. ADMINISTRATOR/MANAGER/DIRECTOR G. QLTY ASSURANCE/RISK MGNT
- B. DISCHARGE PLANNER/CASE MNGR
- C. FACULTY/EDUCATOR (includes in-service)
- D. HEAD NURSE/CHARGE/TEAM LDR
- E. INFECTION CONTROL
- F. NURSE PRACTITIONER, CNM, CNS, **CRNA**

H. RESEARCHER/CONSULTANT

I. SCHOOL NURSE

J. STAFF NURSE/GENERAL DUTY

K. UTILIZATION REVIEW/ OUTCOMES MNGMT/ OTHER INSURANCE RELATED

Q. REHABILITATION

L. OTHER

I. MEDICAL SURGICAL

#### MAJOR CLINICAL TEACHING OR PRACTICE AREA: PRIMARY NURSING POSITION

| B. COMMUNITY/PUBLIC<br>C. EMERGENCY CARE<br>D. GENERAL PRACTICE<br>E. GERIATRIC<br>F. HOME HEALTH<br>G. INTENSIVE/CRITICA<br>H. IV THERAPY   | E   | K. OBST<br>L. ONCC<br>M. OPEF<br>N. PEDIA<br>O. PSYC | LOGY<br>RATING/POST-ANES<br>ATRIC  | R. OTHER: THESIA RECOVERY LTH/SUBSTANCE ABUS SK MGNT    |                            |
|--|---|--|--|---|----------------------------|
| 16. Do you hold any of the follo   | owing certifications?   |  |  |   |                            |
| AMERICAN ASSOCIATION  Critical Care Clinical Nurse Special Control of the Control |   | RE NURSES  |  |   |                            |
| AMERICAN NURSES'CF Acute Care Nurse Practitioner Family Nurse Practitioner Pediatric Nurse Practitioner Adult Psychiatric and Mental Clinical Specialist in Commu Clinical Specialist Adult Psyc Nursing Administration, Advan   | er<br>I Health Nurse Practii  | tioner   | Adult Nurse Practi<br>Gerontological Nu<br>School Nurse Prac<br>Clinical Specialist<br>Clinical Specialist<br>Clinical Specialist<br>Psychiatric a | rse Practitioner<br>ctitioner<br>in Medical-Surgical Nu | irsing<br>ing<br>it<br>ing |
| AMERICAN ACADEMY (  Adult Nurse Practitioner   | OF NURSING PRACTI   |  | Family Nurse Prac  | titioner  |                            |
| NATIONAL CERTIFICAT  | TION CORPORATION I  |  | •  |   | RSING                      |
| Women's Health Care Nurs   |   |  | Neonatal Nurse P   |   |                            |
| PEDIATRIC NURSING C  Certified Pediatric Nurse Pra   |   | D (PNCB)   |  |   |                            |
| COUNCIL ON CERTIFIC  Certified Registered Nurse A  |   | ATION OF NURSE                                       | ANESTHETISTS   |   |                            |
| Answer the following questions than one nursing position, answortsing position in which you s  | s <mark>if you work in a paid</mark><br>wer the following ques<br>spend the most time e | nursing position stions related to tach month.       | or as an unpaid nu<br>he PRIMARY NURS  | se volunteer. If you wo<br>NG POSITION which is         | ork in more<br>the         |
| 17. Does your <b>primary nursing լ</b>   | position involve providi  | ing direct care serv                                 | rices to patients/famil  | ies? □YES   | □NO                        |
| <ol> <li>How many hours did you wor nours if they were paid).</li> </ol>   | k last week in your <b>prin</b>   | nary nursing posi                                    | tion? (Do not count  | on-call hours, vacation or                              | sick leave                 |
| 19. If you work as a nurse in a se   | econd job, how many ho  | ours per week do y                                   | ou work?   |   |                            |
| 20. Please list all states in which  | you hold an ACTIVE lic  | ense as an RN  |  |   |                            |
| 21. Please list all states in which  | you are currently practi  | cing as an RN  |  |   |                            |
| 22. How long do you expect to s  | tay in your primary nu  | rsing position?                                      |  |   |                            |
| ☐ 3 years or less ☐  | ☐4 to 10 years ☐  | more than 10 year                                    | s 🔲 Not Applical   | ole   |                            |
| 23. How many years have you be   | een in your current <b>prim</b>   | nary nursing posi                                    | tion?  |   |                            |
| ☐ 1 - 5 years ☐  | ] 11 - 15 years   |  | □ 04 au maaua .  | oors.   |                            |
|  | l II - 15 years   | ☐ 21 - 25 years                                      | ☐ 31 or more   | rears   |                            |
| •  | •   | ☐ 21 - 25 years<br>☐ 26 - 30 years                   | ☐ Not applicat   |   |                            |
| •  | ] 16 - 20 years   | ☐ 26 - 30 years                                      |  |   |                            |
| ☐ 6 - 10 years ☐   | 16 - 20 years rovide direct patient ca  | ☐ 26 - 30 years                                      |  | le  |                            |

| <ol> <li>If you are planning to leave y apply)</li> </ol>      | our current <b>primary nursing posit</b>   | <b>on</b> , for what reason(s) w                          | ould you be leaving? (Mark all that                          |
|--|--|---|--|
| ☐ NOT APPLICABLE   | ☐ RETURNING TO SCHOOL  | ☐ CARING FOR E  | DERLY/DISABLED FAMILY  |
| ☐ RELOCATING   | ☐ WORKING ENVIRONMENT  | ☐ STARTING/RAIS   | SING A FAMILY  |
| ☐ SALARY/PAY   | ☐ CHANGING SPECIALTY   | ☐ OTHER   |  |
| ☐ RETIRING   |  |   |  |
| 26. What age were you when                                     | you graduated from your origina  | I nursing program?  |  |
| CERTIFICATION STATEMENT:                                       |  |   |  |
| By signing this application, true and that I have met one      | I hereby certify that the inform of the continuing education r   | ation provided on the equirements below:                  | is application is complete and                               |
| I was initially licensed in V hours of CE; <b>or</b>           | VV <b>before</b> November 1, 2007, a   | nd have satisfactorily o                                  | ompleted twelve (12) required                                |
| I was initially licensed in V<br>CE in "End of Life Care In    | VV on <b>or after</b> November 1, 200<br>cluding Pain Management."   | 7, and have satisfactor                                   | ily completed two (2) hours of                               |
|  | nour requirement for "End of Life<br>ife Care Including Pain Manager   |   |  |
| of disciplinary action describ<br>sent myself as an RN until I | ralse information is a violation of WV ed therein. If I fail to renew my licer have met the reinstatement requirer ubject to fines, administrative costs at rules. | ise, my license will lapse<br>nents. If I do work or repi | and I may not work or repre-<br>resent myself as an RN while |
| Your Daytime Phone Number: (                                   | ) Ho   | me Phone Number: ( )                                      |  |
| LICENSEE SIGNATURE:  | OLONATURE RECUERS  | DATE:   |  |
|  | SIGNATURE REQUIRED   |   |  |

#### **Before Mailing Your Application:**

- 1. Consider renewing online at <a href="https://www.wvrnboard.com">www.wvrnboard.com</a>. Save Time, Renew Online.
- 2. Answer all questions and fill in all blanks.
- Provide supporting documentation if needed (Yes answer to questions 5 12).
- 4. Include a check or money order for the required fee.
- 5. Sign the renewal certifying that all information is correct.

Failure to complete steps 2 - 5 above will result in a delay in the processing of the renewal application. The incomplete application will be returned to you to complete and send back to the Board office. If the application is not returned to the Board office prior to the 10/31/08 deadline, the license will lapse and a reinstatement fee and application will be required to obtain an active license. There is a monetary penalty for practicing without a current active license. Fines and administrative costs of five hundred dollars (\$500.00) for practicing without a valid license from the date the license lapsed up to thirty (30) days or any portion thereof. One hundred dollars (\$100.00) for each additional thirty (30) days or any portion thereof. Disciplinary action may be taken for other violations of the law and for practicing without a license for six (6) months or more.

If you have any questions about the renewal process please send an e-mail to: **rnboard@state.wv.us** and reference 2008 Renewal in the subject line.

## **CONFIDENTIALITY OF**NCLEX Examination Content

Reprinted from the media room at the NCSBN.

#### **OVERVIEW**

The National Council of State Boards of Nursing, Inc. (NCSBN®) is a nonprofit organization that is comprised of the boards of nursing in the 50 states, the District of Columbia, and four U.S. territories - American Samoa, Guam, Northern Mariana Islands and the U.S. Virgin Islands. The boards of nursing were established by state governments to protect the public's health by overseeing and ensuring the safe practice of nursing. The mission of NCSBN is to provide leadership to advance regulatory excellence for public protection. The purpose of NCSBN is to provide an organization through which boards of nursing act and counsel together on matters of common interest and concern affecting the

public health; this includes the development of licensing examinations in nursing.

NCSBN develops two licensure examinations, the National Council Licensure Examination for Registered Nurses (NCLEX-RN®) and the National Council Licensure Examination for Practical Nurses(NCLEX-PN®) that are used by member boards of nursing to assist in making licensure decisions. In order to obtain a license to practice nursing in the U.S. and its jurisdictions, each candidate must pass the NCLEX-RN® or NCLEX-PN® Examination.

#### NCLEX CONFIDENTIALITY

Before a candidate begins the NCLEX examination, he/she must agree to NCSBN's terms of confidentiality. The "NCLEX Confidentiality Agreement" states

Disclosing NCLEX examination content to others, whether intentional or unintentional, can compromise the integrity of the examination results

that a candidate "agrees that he/she will not divulge any items, including response options, on this examination any individual or entity." Additionally, the candidate must understand that the unauthorized possession, reproduction, or disclosure of any examination materials, including the nature or content of examination items, before, during, or after the examination is in violation of law. In brief, each candidate must agree that he/she will not disclose the content of examination items before, during, or after the examination. It is possible



that a candidate might disclose examination content and ultimately violate their "NCLEX Confidentiality Agreement" by talking with classmates about examination content, sharing examination content with faculty members and test preparation instructors, and reconstructing and/ or compiling examination content to share with others. Disclosing NCLEX examination content to others, whether intentional or unintentional, can compromise the integrity of the examination results, which places the public at risk of having licensed yet incompetent nurses caring for them. The results of the NCLEX are based upon the candidate being able to use his/her own knowledge to answer each item on the examination and not use information about exam content gained from illegitimate sources. Candidates who violate the terms of the confidentiality agreement, such as NCSBN's intellectual property rights, may be subject to several penalties.

In addition to the above violation of confidentiality, in the 2008 NCLEX® Candidate Bulletin, there is a list of "Grounds for Dismissal or Cancellation of Results" with a definition of behaviors that are considered to be "irregular" and may constitute cancellation of exam results. Some of these rules include: not bringing any study aids (textbooks, notebooks, review course notes, etc.) to the exam; accessing study aids or seeking assistance of a third party in answering items, in person or by any electronic devices (i.e. cell phone) after the exam has begun; copying, removing, or attempting to remove exam items/responses

or notes about the exam. For additional information about candidate behaviors to be avoided, visit www.ncsbn.org, and click on the 2008 NCLEX® Candidate Bulletin.

Moreover, the NCLEX Security tip line telephone number is located in the 2008 NCLEX® Candidate Bulletin. Suspicious or un-professional behavior may be reported at 1.866.496.2539 or by e-mail at pytestsecurity@pearsonvue.com.

Sharing NCLEX examination content

is illegal, unethical and un-professional. It is critical that nurse educators model the appropriate professional and ethical behavior by not asking students about their examination content, and, if students volunteer information, ask them to stop. You can assist NCSBN in defending the integrity of nursing licenses by making your fellow students and colleagues aware of the importance of maintaining the confidentiality of the NCLEX examination.

## WEST VIRGINIA DESPONDED EMEDICALICA DEPLOYMENT INFORMATION SVETEM

## THE OFFICIAL WEST VIRGINIA HEALTH VOLUNTEER CREDENTIALING SYSTEM

## D ESPONDER EMERGENCY DEPLOYMENT INFORMATION SYSTEM



#### WHAT IS WV REDI?

The Responder Emergency Deployment Information (REDI) System is a web-based registration and credentialing system for West Virginia health care professionals and others who are willing to assist during a health emergency that exceeds routine response capacity.

#### AS A WV REDI PARTICIPANT, WHAT KIND OF ACTIVITIES MIGHT I BE PARTICIPATING IN DURING A RESPONSE?

Volunteers might be called upon to assist with direct health care services or public health response activities such as disease investigation, community vaccination or distribution of medication.

#### WHAT INFORMATION WILL I NEED TO PROVIDE DURING REGISTRATION?

You will be asked to complete several fields of personal and professional information, which include previous education, training, licenses, vaccinations and employment status. Not all information is required for registration; however accurate completion of all fields helps system administrators determine how best to utilize your skills during a response.

#### WILL MY PERSONAL INFORMATION BE SECURE WITHIN THE WV REDI SYSTEM?

WV REDI meets federal Emergency Systems for Advance Registration of Volunteer Health Professionals (ESAR-VHP) program requirements. Examples of protective measures to ensure privacy include:

- encrypted transfer and storage of data
- firewall protection
- permission-based administrator accounts

## WEST VIRGINIA REDI 1.304.558.6900

#### WHAT WILL BE EXPECTED OF ME AFTER I REGISTER IN WV REDI?

After registration, individuals are linked to a local health and medical volunteer group within their area. Groups may provide training opportunities and information or other tools needed for response. While recommended, registration does not require that you attend group meetings or trainings. Registration does not obligate you to volunteer during an emergency. If selected to assist during a response, you will be contacted using the information submitted during the registration process. At that time, you will have the opportunity to indicate whether or not you are willing and able to respond.

#### WHY SHOULD I REGISTER WITH THE WV REDI NOW?

Previous emergencies have demonstrated that many people have a strong desire to provide assistance during disasters. Limited or delayed access to credentialing information can prevent volunteers from being able to do so. Whether you are a licensed health care provider or a person otherwise willing to volunteer your time and service to assist in health and medical response, advanced registration in WV REDI can help ensure that you will be identified, cleared and able to assist quickly.

#### WHAT IF MY INFORMATION CHANGES AFTER I REGISTER?

Information changes and updates may be completed as often as necessary by logging on to www.wvredi.org. After providing your username and password, you will be able to edit your information.

#### HOW DO I RESGISTER IN WV REDI?

Visit the www.wvredi.org home page and click on register now.

#### WHERE CAN I GET MORE INFORMATION?

Contact the volunteer coordinator at the Local Health Department nearest you or contact: Bureau for Public Health • Division of Threat Preparedness 505 Capitol Street, Suite 200
Charleston, WV 25301

## The Constance M. Baker Endowed Scholarship Fund Established at the NLN Foundation

The National League for Nursing and the NLN Foundation for Nursing Education are pleased to announce the Constance M. Baker Endowed Scholarship Fund. Designated for minority nurses seeking doctoral degrees in preparation for nurse faculty careers, the generous \$100,000 gift from Dr. Baker is the first endowed minority scholarship fund and will strengthen the NLN's commitment to increasing the number of doctorally prepared minority nurse educators.

Having served as dean of two schools of nursing in her career, Dr. Baker knows well the challenges of building a diverse faculty prepared to serve as role models and mentors for nursing students. She says, "I believe one approach to decreasing health disparities is to increase the number of affected minorities in the health professions



work force. We urgently need more doctorally prepared nurse faculty who represent groups experiencing health disparities. I was fortunate to be awarded a number of scholarships to complete my professional education, now I am pleased to be able to help other nurses become faculty."

The NLN and the NLN Foundation share a mission to promote excellence in nursing education to build a strong and diverse nursing workforce.

"Dr. Baker has been a tremendous advocate for the NLN Foundation, said NLN CEO Beverly Malone. While serving as vice chair on the foundation board, she has tirelessly advanced our charge to increase diversity in the nurse educator workforce."

The NLN and the NLN Foundation share a mission to promote excellence in nursing education to build a strong and diverse nursing workforce. The creation of the Constance M. Baker Endowed Scholarship Fund will ensure a lasting legacy that will benefit future generations of nurses and nurse educators. The foundation anticipates awarding the first scholarship from this fund in 2009.

For information on how you can contribute to this scholarship fund or to establish a new fund, please contact Maureen Peters, executive director of the NLN Foundation, at mpeters@nln.org or 800-669-1656.

#### CADUCEUS RECOVERY MEETINGS

#### **FAIRMONT**

WHEN: Weekly each Wednesday,

5 p.m.

WHERE: Manchin Healthcare Health Education Center, 401

Guffey St,

Fairmont, WV 26554

CONTACT: Brad H. 304-677-9283 email: pbh20060lhuges.net

#### **CHARLESTON**

WHEN: Weekly each Wednesday, 7 p.rn.

WHERE: Thomas Memorial Hospi-

tal, Southway Outpatient Dept,

4605 MacCorkle Ave,

South Charleston, WV 25309

CONTACT: Renee G. 304-744-6047 or Bill B. 304-543-2167 (cell)

#### **LEWISBURG**

WHEN: Weekly each Wednesday OR Sunday (varies), 5:30 p.m.

WHERE: Emmanuel Episcopal Church, Maple Ave & Locust St,

LEWISBURG CONT.

Covington, WV

CONTACT: Haven W. 304-646-

8106

#### POINT PLEASANT

WHEN: Weekly each Tuesday, 7

WHERE: Main St. Christ Episcopal Church , Point Pleasant, WV 25550

CONTACT: Brett M 304-675-7000 or 304-593-2663

West Virginia Board of Examiners for Registered Professional Nurses 101 Dee Drive, Suite 102 Charleston, WV 25311-1620

