

**Agency Mission:** To assure the citizens of Kansas safe and competent practice by nurses and mental health technicians.

**Kansas State Board of Nursing  
Continuing Nurse Education Committee Agenda  
June 15, 2021**

**NOTE: The meeting will be held via Zoom. Link to access meeting to follow agenda.**

**Time:** 12:30 p.m. – 2:00 p.m.

**Committee Members:** Julianna Rieschick, RN, MSN, NEA-BC – Chair  
Rebecca Sander, MSN, RN – V. Chair  
Adri Gouldsmith, LPN  
Gwendolyn Loyd, MBA, MSN, RN  
Geovanne Gone, Public Member  
Melanie Burnett, MSN, RN  
Laura Aberle, BSN, RN  
Kenetta Markelionis, RN, MSN  
Karen Aufdemberge, RN, BSN

**Staff:** Chelsey Stephenson – Education Specialist, CNE  
Carol Moreland, MSN, RN – Executive Administrator

- I. Call to Order
- II. Review of On-Site Packet
- III. Additions/Revisions to the Agenda
- IV. Announcements
- V. Approval of Minutes – March 23, 2021
- VI. Unfinished Business
  - 1. Delinquent Long-Term CNE Providers Update
  - 2. Suggested regulation revisions
    - a. KAR 60-9-105 – Definitions - CNE
    - b. KAR 60-9-106 – License renewal - CNE
    - c. KAR 60-9-107 – Approval of CNE
- VII. New Business
  - 1. IOA Statistical Report
  - 2. Program Coordinator Education
  - 3. LTP Relinquishments
    - a. Home Health & Hospice of Kansas – LT0301-0607
  - 4. LTP 5-Year Renewals
    - a. Citizens Medical Center, Inc. – LT0298-0616
    - b. Fort Scott Community College – LT0205-0506
    - c. Greater Kansas City Chapter of NAPNAP – LT0203-0505
    - d. Memorial Health System – LT0292-0615
    - e. Optum Infusion Pharmacy – LT0271-0610

- 5. Initial LTP Applications
  - a. Debriefing the Front Lines Inc.
- VIII. Agenda for September 2021 Committee meeting
- IX. Adjourn

**Please note: Additional items which have come to the attention of the Board or Committee will be handled as time permits. Agenda is subject to change based upon items to come before the Board. Handouts or copies of materials brought to the Board or Committee for discussion by Committee Members or visitors must be submitted to staff 30 calendar days prior to start of the meeting. Any items received after the 30<sup>th</sup> calendar day may be addressed at the meeting at the discretion of the President of the Board or Chairperson of the Committee.**

**Please click the link below to join the webinar:**

**<https://us02web.zoom.us/j/87007849758?pwd=SXBTSDNzbkVvYU5qYzRZd1lwTmpMQT09>**

**Passcode: KsbnCEComm**

**Or One tap mobile :**

**US: +12532158782,,87007849758#,,,,\*8103967720# or +13462487799,,87007849758#,,,,\*8103967720#**

**Or Telephone:**

**Dial(for higher quality, dial a number based on your current location):**

**US: +1 253 215 8782 or +1 346 248 7799 or +1 669 900 6833 or +1 301 715 8592 or +1 312 626 6799 or +1 646 876 9923**

**Webinar ID: 870 0784 9758**

**Passcode: 8103967720**

**International numbers available: <https://us02web.zoom.us/j/kQ1bP4YJD>**

**Or watch via YouTube at: <https://www.youtube.com/user/ksnursing>**

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<b>Long Term CNE Provider</b>	
<b>Allied Health Career Training, LLC; LT0302-0917</b> 2622 W Central Avenue, B102 Wichita, KS 67203	
<b>Atkins Physical Therapy &amp; Ergonomics, LLC; LT0283-0813</b> 11449 Mastin Street Overland Park, KS 66210	Did Not Submit in 2019
<b>Bailey Medical Service, LLC; LT0295-1215</b> 415 South Cleveland Colby, KS 67209	Did Not Submit in 2019
<b>Carrefour Associates; LT0280-0612</b> 10810 E 45th Street South, #300 Tulsa, OK 74146	
<b>Clay County Medical Center; LT0298-0616</b> 617 Liberty Street Clay Center, KS 67432	Did Not Submit in 2019
<b>Kansas Department of Health &amp; Environment; LT0300-0317</b> 1000 SW Jackson, Suite 330 Topeka, KS 66612	Did Not Submit in 2019
<b>Omnicare Pharmacy of Kansas City; LT0150-0738</b> 10400 Hickman Mills Drive, Suite 200 Kansas City, MO 64137	
<b>Parsons State Hospital &amp; Training Center; LT0304-0619</b> 2601 Gabriel Avenue Parsons, KS 67357	
<b>Perinatal ReSource; LT0286-1213</b> 5519 Foxridge Merriam, KS 66202	

**60-9-105. Definitions.** ~~For the purposes of these regulations,~~ Each of the following terms, as used in this article of the board's regulations, shall have the meaning specified in this regulation:

(a) "Approval" means the act of determining that a providership application or course offering meets applicable standards based on review of either the total program or the individual offering.

(b) "Approved provider" means a person, organization, or institution that is approved by the board and is responsible for the development, administration, and evaluation of the continuing nursing education (CNE) program or offering.

(c) "Authorship" means a person's development of a manuscript for print or a professional paper for presentation. Each page of text that meets the definition of continuing nursing education (CNE), as defined in K.S.A. 65-1117 and amendments thereto, and is formatted according to the American psychological association's guidelines shall equal three contact hours.

(1) Authorship of a manuscript means a person's development of an original manuscript for a journal article or text accepted by a publisher for statewide or national distribution on a subject related to nursing or health care. Proof of acceptance from the editor or the published work shall be deemed verification of this type of credit. Credit shall be awarded only once per topic per renewal period.

(2) Authorship of a professional research paper means a person's completion of a nursing research project as principal investigator, co-investigator, or project director and presentation to other health professionals. A program brochure, course syllabus, or letter from the offering provider identifying the person as a presenter shall be deemed verification of this type of credit. Credit shall be awarded only once each renewal period.

(d) "Behavioral objectives" means the intended outcome of instruction stated as measurable learning behaviors.

(e) "Certificate" means a document that is proof of completion of an offering consisting of one or more contact hours.

(f) “CE transcript” means a document that is proof of completion of one or more CNE offerings. Each CE transcript shall be maintained by a CNE provider.

(g) “Classic reference” means either a book published more than 10 years ago or a periodical published more than five years ago that is the most current available source with a recognized value pertinent to the content of an offering.

(g)(h) “Clinical hours” means planned learning experiences in a clinical setting. Three clinical hours equal one contact hour.

(h) (i) “College course” means a class taken through a college or university, as described in K.S.A. 65-1119 and amendments thereto, and meeting the definition of CNE in K.S.A. 65-1117, and amendments thereto. One college credit hour equals 15 contact hours.

(i) (j) “Computer-based instruction” means a learning application that provides computer control to solve an instructional problem or to facilitate an instructional opportunity.

(j) (k) “Contact hour” means 50 total minutes of participation in a learning experience that meets the definition of CNE in K.S.A. 65-1117, and amendments thereto. Fractions of hours over 30 minutes to be computed towards a contact hour shall be accepted.

(k) (l) “Distance learning” means the acquisition of knowledge and skills through information and instruction delivered by means of a variety of technologies.

(l) (m) “Independent study” means a self-paced learning activity undertaken by the participant in an unstructured setting under the guidance of and monitored by an approved provider. This term shall include self-study programs, distance learning, and authorship.

(m) (n) “Individual offering approval” and “IOA” mean a request for approval of an education offering meeting the definition of CNE, pursuant to K.S.A. 65-1117 and amendments thereto, but not presented by an approved provider or other acceptable approving body, as described in K.S.A. 65-1119 and amendments thereto.

(n) (o) "In-service education" and "on-the-job training" mean learning activities in the work setting designed to assist the individual in fulfilling job responsibilities. In-service education and on-the-job-training shall not be eligible for CNE credit.

(o) (p) "Mergener formula" means a formula utilized to recognize the amount of continuing education credit provided by a program based upon the material utilized when measured against complexity, time, questions, and participant feedback.

(p) (q) "Offering" means a single CNE learning experience designed to enhance knowledge, skills, and professionalism related to nursing. Each offering shall consist of at least 30 minutes to be computed towards a contact hour.

(q) (r) "Orientation" means formal or informal instruction designed to acquaint employees with the institution and the position. Orientation shall not be considered CNE.

(r) (s) "Program" means a plan to achieve overall CNE goals.

(s) (t) "Refresher course" means a course of study providing review of basic preparation and current developments in nursing practice.

(t) (u) "Total program evaluation" means a systematic process by which an approved provider analyzes outcomes of the overall CNE program in order to make subsequent decisions. (Authorized by and implementing K.S.A. 2015 2017 Supp. 65-1117, as amended by L. 2018, ch. 42, sec. 3, and K.S.A. 65-1119; effective Sept. 2, 1991; amended March 9, 1992; amended April 26, 1993; amended April 3, 1998; amended April 20, 2001; amended Oct. 25, 2002; amended March 6, 2009; amended May 10, 2013; amended April 29, 2016; amended P-

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**60-9-106. Continuing nursing education for license renewal.** (a) At the time of license renewal, any licensee may be required to submit proof of completion of 30 contact hours of approved continuing nursing education (CNE). This proof shall be documented as follows:

(1) For each approved CNE offering, a certificate or a transcript that clearly designates the number of hours of approved CNE that have been successfully completed, showing the following:

(A) Name of CNE offering;

(B) provider name or name of the accrediting organization;

(C) provider number or number of the accrediting organization, if applicable;

(D) offering date;

(E) number of contact hours awarded; and

(F) the licensee's name and license number as shown on the course roster; or

(2) an approved Kansas state board of nursing IOA, which shall include approval of college courses that meet the definition of continuing education in K.S.A. 65-1117, and amendments thereto.

(b) The required 30 contact hours of approved CNE shall have been completed during the most recent prior licensing period between the first date of the licensing period and the date that the licensee submits the renewal application as required in K.S.A. 65-1117, and amendments thereto, and K.A.R. 60-3-108. Contact hours accumulated in excess of the 30-hour requirement shall not be carried over to the next renewal period.

(c) Acceptable CNE may include any of the following:

(1) An offering presented by an approved long-term, ~~or~~ single offering provider, or national organization whose focus is patient safety and improving nursing practice.

(2) an offering as designated in K.S.A. 65-1119, and amendments thereto;

(3) an offering for which a licensee has submitted an IOA, which may include credit requested for a college course that meets the definition of continuing education in K.S.A. 65-1117, and amendments thereto. Before licensure renewal, the licensee may submit an application for an IOA to the board, accompanied by the

following:

(A) A rationale statement that applies the meaning of CNE as defined in K.S.A. 65-1117(a)

~~(B)~~ An agenda representing exact learning time in minutes;

~~(B)~~ (C) official documentation of successfully completed hours, which may include a certificate of completion or an official college transcript; and

~~(C)~~ (D) learning or behavior objectives describing learning outcomes;

(4) a maximum of 15 contact hours for the first-time preparation and presentation as an instructor of an approved offering to licensed nurses. Two contact hours of instructor credit shall be granted for each hour of presentation;

(5) an offering utilizing a board-approved curriculum developed by the American heart association, emergency nurses association, or Mandt, which may include the following:

(A) Advanced cardiac life support;

(B) emergency nursing pediatric course;

(C) pediatric advanced life support;

(D) trauma nurse core course;

(E) neonatal resuscitation program; or

(F) Mandt program;

(6) independent study;

(7) distance learning offerings;

(8) a board-approved refresher course if required for licensure reinstatement as specified in K.A.R. 60-3-105 and K.A.R. 60-11-116;

(9) participation as a member of a nursing organization board of directors or the state board of nursing, including participation as a member of a committee reporting to the board. The maximum number of allowable

contact hours shall be six and shall not exceed three contact hours each year. A letter from an officer of the board confirming the dates of participation shall be accepted as documentation of this type of CNE; or

(10) any college courses in science, psychology, sociology, or statistics that are prerequisites for a nursing degree.

(d) Fractions of hours ~~over~~ 30 minutes or greater to be computed towards a contact hour shall be accepted.

(e) A maximum of 15 contact hours shall be accepted for renewal of certification in advanced cardiac life support (ACLS), pediatric advanced life support (PALS), or similar standardized recertification courses developed by the American heart association, emergency nurses association, or Mandt each licensing period.

(f) Contact hours shall not be recognized by the board for any of the following:

(1) Identical offerings completed within a renewal period;

(2) offerings containing the same content as that of courses that are part of basic preparation at the level of current licensure ~~or certification~~;

(3) in-service education, on-the-job training, orientation, and institution-specific courses;

(4) an incomplete or failed college course or any college course in literature and composition, public speaking, basic math, algebra, humanities, or other general education requirements unless the course meets the definition of CNE;

(5) offerings less than 30 minutes in length will not be recognized; or

(6) a board-approved refresher course for license renewal. (Authorized by and implementing K.S.A. 2015 2017 Supp. 65-1117, as amended by L. 2018, ch. 42, sec. 3; effective Sept. 2, 1991; amended April 3, 1998; amended April 20, 2001; amended July 20, 2007; amended May 10, 2013; amended April 29, 2016; amended P-  
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**60-9-107. Approval of continuing nursing education.** (a) ~~Offerings of approved providers shall be recognized by the board.~~ To become an approved provider an application shall be submitted to the Board as follows:

(1) Long-term provider. A completed application for initial approval or five-year renewal for a long-term continuing nursing education (CNE) providership shall be submitted to the board at least 60 days before a scheduled board meeting.

(2) Single offering provider. The application for a single CNE offering shall be submitted to the board at least 30 days before the anticipated date of the first offering.

(b) Each applicant shall include the following information on the application:

(1)(A) The name and address of the organization; and

(B) the name and address of the department or unit within the organization responsible for approving CNE, if different from the name and address of the organization;

(2) the name, education, and experience of the program coordinator responsible for CNE, as specified in subsection (c);

(3) written policies and procedures, including at least the following areas:

(A) Assessing the need and planning for CNE activities;

(B) fee assessment;

(C) advertisements, ~~or~~ offering announcements, and certificates of completion. Published information and each certificate of completion shall contain the following statement: “~~(name of provider)~~ [Name of provider] is approved as a provider of CNE by the Kansas State Board of Nursing. This course offering is approved for contact hours ~~applicable~~ for [specify each applicable license type: APRN, RN, ~~or~~ LPN, or LMHT] relicensure. Kansas State Board of Nursing provider number: \_\_\_\_\_”;

(D) for long-term providers, the offering approval process as specified in subsection (d);

(E) awarding contact hours, as specified in subsection (e);

(F) verifying participation and successful completion of the offering, as specified in subsections (f) and (g);

(G) recordkeeping and record storage, as specified in subsection (h);

(H) notice of change of coordinator or required policies and procedures. The program coordinator shall notify the board in writing of any change of the individual responsible for the providership or required policies and procedures within 30 days; and

(I) for long-term providers, a copy of the total program evaluation plan; and

(4) the proposed CNE offering, as specified in subsection (i).

(c)(1) Long-term provider. The program coordinator for CNE shall meet these requirements:

(A) Be a licensed professional nurse;

(B) have three years of clinical experience;

(C) have one year of experience in developing and implementing nursing education; and

(D) have a baccalaureate degree in nursing, except those individuals exempted under K.S.A. 65-1119

~~(e)(6)~~ and amendments thereto.

(2) Single offering provider. If the program coordinator is not a nurse, the applicant shall also include the name, education, and experience of the nurse consultant. The individual responsible for CNE or the nurse consultant shall meet these requirements:

(A) Be licensed to practice nursing; and

(B) have three years of clinical experience.

(d) For long-term providers, the policies and procedures for the offering approval process shall include the following:

(1) A summary of the planning;

(2) the behavioral objectives;

(3) the content, ~~which shall meet the definition of CNE in K.S.A. 65-1117 and amendments thereto;~~

(4) the instructor's education and experience, documenting knowledge and expertise in the content area;

(5) a current bibliography that is reflective of the offering content. The bibliography shall include books published within the past 10 years, periodicals published within the past five years, or both. Classic references, if included, shall be limited to less than 25 percent of the bibliography; and

(6) an offering evaluation that includes each participant's assessment of the following:

(A) The achievement of each objective; and

(B) the expertise of each individual presenter.

(e) An approved provider may award any of the following:

(1) Contact hours as documented on an offering agenda for the actual time attended, including partial credit for ~~one or more contact hours~~ fractions of hours over 30 minutes to be computed towards a contact hour;

~~(2) credit for fractions of hours over 30 minutes to be computed towards a contact hour;~~

(3) ~~(2)~~ instructor credit, which shall be twice the length of the first-time presentation of an approved offering, excluding any standardized, prepared curriculum;

(4) ~~(3)~~ independent study credit that is based on the time required to complete the offering, as documented by the provider's pilot test results or determined by Mergener formula; or

~~(5) (4)~~ clinical hours.

(f)(1) Each provider shall maintain ~~documentation~~ a daily roster to verify that each participant attended the offering. ~~The provider shall require each participant to physically or electronically sign a daily roster,~~ which shall contain the following information:

(A) The provider's name, address, provider number, and coordinator;

(B) the date and title of the offering, and the presenter or presenters; and

(C) the participant's name and license number, and the number of contact hours awarded.

(2) Each provider shall maintain documentation to verify completion of each independent study offering, if applicable. To verify completion of an independent study offering, the provider shall maintain documentation that includes the following:

- (A) The provider's name, address, provider number, and coordinator;
- (B) the participant's name and license number, and the number of contact hours awarded;
- (C) the title of the offering;
- (D) the date on which the offering was completed; and
- (E) either the completion of a posttest or a return demonstration.

(g)(1) A certificate of attendance shall be awarded to each participant after completion of an offering, or a CE transcript shall be provided according to the policies and procedures of the ~~long-term~~ approved provider.

(2) Each certificate and each CE transcript shall be complete before distribution to the participant.

(3) Each certificate and each CE transcript shall contain the following information:

(A) The provider's name, address, and provider number; *(LMS – Learning Management Systems do not often allow for Provider Name, address and provider number on the certificate. Examples of LMS include Healthstream, CareLearning, Relias, Up to Date, etc. We have the definition of computer based instruction, however how do we handle when the CE transcript will not have all the information we need)*

(B) the title of the offering;

(C) the date or dates of attendance or completion;

(D) the number of contact hours awarded and, if applicable, the designation of any independent study or instructor contact hours awarded;

(E) the handwritten or electronic signature of the individual responsible for the providership; ~~and~~

(F) the name and license number of the participant; and

(G) the following statement: "[Name of provider] is approved as a provider of CNE by the Kansas State

Board of Nursing. This course offering is approved for contact hours for [specify each applicable license type: APRN, RN, LPN or LMHT] relicensure. Kansas State Board of Nursing provider number \_\_\_\_\_:”.

(h)(1) For each offering, the approved provider shall retain the following for two years:

(A) A summary of the planning;

(B) a copy of the offering announcement or brochure;

(C) the title and objectives;

(D) the offering agenda or, for independent study, pilot test results;

(E) a bibliography;

(F) a summary of the participants' evaluations;

(G) each instructor's education and experience; and

(H) documentation to verify completion of the offering, as specified in subsection (f).

(2) The record storage system used shall ensure confidentiality and easy retrieval of records by authorized individuals.

(3) Each approved single offering CNE provider shall submit to the board ~~the original signature roster~~ and a ~~typed, alphabetized~~ a roster of the individuals who have completed an offering, within 15 working days of course completion.

(i)(1) Long-term provider application. The provider shall submit two proposed offerings, including the following:

(A) A summary of planning;

(B) a copy of the offering announcement or brochure;

(C) the title and behavioral objectives;

(D) the offering agenda or, for independent study, pilot test results;

(E) each instructor's education and experience;

(F) a current bibliography, as specified in paragraph (d)(5); and

(G) the offering evaluation form.

(2) Single offering provider application. The provider shall submit the proposed offering, which shall include the information specified in paragraphs (i)(1)(A) through (G).

(j)(1) Long-term provider application. Each prospective coordinator who has submitted an application for a long-term CNE providership that has been reviewed once and found deficient, or has approval pending, shall submit all materials required by this regulation at least two weeks before the next board meeting. If the application does not meet all of the requirements or the prospective coordinator does not contact the board for an extension on or before this deadline, the application process shall be considered abandoned. A new application and fee shall be submitted if the prospective coordinator still wants a providership ~~is still desired~~.

(2) Single offering approval application. If the application for a single offering has been reviewed and found deficient, or has approval pending, the CNE coordinator shall submit all materials required by this regulation before the date of offering. If the application does not meet the requirements before the offering deadline, the application shall be considered abandoned. There shall be no retroactive approval of single offerings.

(k)(1) Each approved long-term provider shall pay a fee for the upcoming year and submit an annual report for the period of July 1 through June 30 of the previous year on or before the deadline designated by the board. The annual report shall contain the following:

(A) An evaluation of all the components of the providership based on the total program evaluation plan;

(B) a statistical summary report; and

(C) for each of the first two years of the providership, a copy of the records for one offering as specified in paragraphs (h)(1)(A) through (H).

(2) If approved for the first time after January 1, a new long-term provider shall submit only the statistical summary report and shall not be required to submit the annual fee or evaluation based on the total program evaluation plan.

(1)(1) If the long-term provider does not renew the providership, the provider shall notify the board in writing of the location at which the offering records will be accessible to the board for two years.

(2) If a provider does not continue to meet the criteria for current approval established by regulation or if there is a material misrepresentation of any fact with the information submitted to the board by an approved provider, approval may be withdrawn or conditions relating to the providership may be applied by the board after giving the approved provider ~~notice and~~ an opportunity to ~~be heard~~ provide written response.

(3) Any approved provider that has voluntarily relinquished the providership or has had the providership withdrawn by the board may reapply as a long-term provider. The application shall be submitted on forms supplied by the board and accompanied by the designated, nonrefundable fee as specified in K.A.R. 60-4-103(a)(3). (Authorized by and implementing K.S.A. 2011 K.S.A. 65-1129, 2017 Supp. 65-1117, as amended by L. 2018, ch. and session laws 42, sec. 3, and K.S.A. 65-1119; effective March 9, 1992; amended Sept. 27, 1993; amended April 3, 1998; amended Oct. 25, 2002; amended March 6, 2009; amended May 10, 2013; amended P-\_\_\_\_\_.)

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**March 2021**

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**IOAs**

Received: 87

Approved: 64 (2,637.3 hours)

Denied: 23

Pending: 0

**LTP Applications**

Received: 0

Approved: 0

Denied: 0

Pending: 0

**SP Applications**

Received: 0

Approved: 0

Denied: 0

Pending: 0

**IVT Providership Applications**

Received: 0

Approved: 0

Denied: 0

Pending: 0

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**April 2021**

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**IOAs**

Received: 54

Approved: 40 (1,508.4 hours)

Denied: 14

Pending: 0

**LTP Applications**

Received: 1

Approved: 0

Denied: 0

Pending: 1

**SP Applications**

Received: 8

Approved: 8

Denied: 0

Pending: 0

**IVT Providership Applications**

Received: 0

Approved: 0

Denied: 0

Pending: 0

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**May 2021**

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**IOAs**

Received: 45

Approved: 36 (1,205.7 hours)

Denied: 9

Pending: 0

**LTP Applications**

Received: 0

Approved: 0

Denied: 0

Pending: 0

**SP Applications**

Received: 1

Approved: 0

Denied: 0

Pending: 1

**IVT Providership Applications**

Received: 0

Approved: 0

Denied: 0

Pending: 0



**Long Term CNE Provider Checklist**  
(K.A.R. 60-9-107)

**Name of Provider:** Citizens Medical Center, Inc. LT0298-0616 Five-Year Renewal

**Name of Program Coordinator:** Jenny Niblock, DNP, MSN

**Date to CNE Committee:** June 16, 2021

Information Required	Received	N/A
Completed application for initial approval or five-year renewal for LT CNE providership shall be submitted at least 60 days before a scheduled board meeting	04/06/2021	
The name and address of the organization on the application	X	
The name and address of the department or unit within the organization responsible for approving CNE, if different from the name and address of the organization		X
The name, education and experience of the program coordinator responsible for CNE	Jenny Niblock, DNP, MSN	
<ul style="list-style-type: none"> <li>Be a licensed professional nurse</li> </ul>	X	
<ul style="list-style-type: none"> <li>Have three years of clinical experience</li> </ul>	X	
<ul style="list-style-type: none"> <li>Have one year of experience in developing and implementing nursing education</li> </ul>	X	
<ul style="list-style-type: none"> <li>Have a baccalaureate degree (unless held this position for the provider at least five years immediately prior to January 1, 1977)</li> </ul>	X	
<b>Policies &amp; Procedures:</b>		
Written policies and procedures, including at least the following areas:		
<ul style="list-style-type: none"> <li>Assessing the need and planning for CNE activities</li> </ul>	X	
<ul style="list-style-type: none"> <li>Fee assessment</li> </ul>	X	
<ul style="list-style-type: none"> <li>Advertisements or offering announcements. Published information shall contain the following statement: "(name of provider) is approved as a provider of continuing nursing education by the Kansas State Board of Nursing. This course offering is approved for contact hours applicable for APRN, RN, or LPN relicensure. Kansas State Board of Nursing provider number: "</li> </ul>	X	
<ul style="list-style-type: none"> <li>Notice of change of coordinator or required policies and procedures. The program coordinator shall notify the board in writing of any change of the individual responsible for the providership or required policies and procedures within 30 days</li> </ul>	X	
For long term providers, the policies and procedures for the offering approval process shall include the following:		

• A summary of the planning	X	
• The behavioral objectives	X	
• The content, which shall meet the definition of CNE in KSA 65-1117	X	
• The instructor's education and experience, documenting knowledge and expertise in the content area	X	
• A current bibliography that is reflective of the offering content. The bibliography shall include books published within the past 10 years, periodicals published within the past five years, or both	X	
• An offering evaluation that includes each participant's assessment of the following:		
▪ The achievement of each objective	X	
▪ The expertise of each individual presenter	X	
An approved provider may award any of the following:		
• Contact hours as documented on an offering agenda for the actual time attending, including partial credit for one or more contact hours	X	
• Credit for fractions of hours over 30 mins to be computed towards a contact hour	X	
• Instructor credit, which shall be twice the length of the first-time presentation of an approved offering, excluding an standardized, prepared curriculum	X	X
• Independent study credit that is based on the time required to complete the offering, as documented by the provider's pilot test results		X
• Clinical hours		X
<b>Documentation of Attendance</b>		
Each provider shall maintain documentation to verify that each participant attended the offering. The provider shall require each participant to sign a daily roster, which shall contain the following information:		
• The provider's name, address, provider number, and coordinator	X	
• The date and title of the offering, and the presenter or presenters	X	
• The participant's name and license number and the number of contact hours awarded	X	
Each provider shall maintain documentation to verify completion of each independent study offering, if applicable. To verify completion of an independent study offering, the provider shall maintain documentation that includes the following:		
• The provider's name, address, provider number, and coordinator		X
• The participant's name and license number, and the number of contact hours awarded		X

• The title of the offering		X
• The date on which the offering was completed		X
• Either the completion of a posttest or a return demonstration		X
<b>Certificate of Attendance/CE Transcript</b>		
A certificate of attendance shall be awarded to each participant after completion of an offering, or a CE transcript shall be provided according to the policies and procedures of the long-term provider		
Each certificate and each CE transcript shall be complete before distribution to the participant		
Each certificate and each CE transcript shall contain the following information:		
• The provider's name, address and provider number	X	
• The title of the offering	X	
• The date or dates of attendance or completion	X	
• The number of contact hours awarded and, if applicable, the designation of any independent study or instructor contact hours awarded	X	
• The signature of the individual responsible for the providership	X	
• The name and license number of the participant	X	
<b>Recordkeeping &amp; Storage</b>		
For each offering, the approved provider shall retain the following for two years:		
• A summary of the planning	X	
• A copy of the offering announcement or brochure	X	
• The title and objectives	X	
• The offering agenda or, for independent study, pilot test results	X	
• A bibliography	X	
• A summary of the participants' evaluations	X	
• Each instructor's education and experiences	X	
• Documentation to verify completion of the offering	X	
The record storage system used shall ensure confidentiality and easy retrieval of records by authorized individuals	X	
<b>Program Evaluation Plan</b>		
For long-term providers, a copy of the total program evaluation plan	X	
<b>Two Proposed Offerings</b>		
The provider shall submit two proposed offerings, including the following:		
	ACLS	PALS
• A summary of planning	X	X

• A copy of the offering announcement or brochure	X	X
• The title and behavioral objectives	X	X
• The offering agenda or, for independent study, pilot test results	X	X
• Each instructor's education and experience	X	X
• A current bibliography	X	X
• The offering evaluation form	X	X

12/2018

Review Completed by Chelsey Stephenson, CNE Education Specialist on May 25, 2021.

**Reference No.:** 24855 **Date submitted:** Apr 6 14:35 2021

**radio** ~ Renewal

**Providername** ~ Citizens Medical Center, Inc

**providernum** ~ LT0298-0616

**legalbody** ~ ~

**address** ~ 100 E College

**adress2** ~ Colby, KS 67701

**telephone** ~ 7854627511

**email** ~ jniblock@cmciiks.com

**coordinator** ~ Jenny Niblock

**date** ~ 04-06-2021

**planningce** ~ Citizen's University is a division of Citizen's Medical Center, Inc. and is responsible for promoting "Our People," "Our Story," "Our Community," and "Our Development" to all persons served by CMCI. "Our Development" deals with personnel and professional development, including the continuing education of medical professionals. Evaluation and planning for continuing education needs of medical professionals will be managed by Citizen's University. "Our Development" executive committee includes the following: Education Manager, Ancillary Services Manager, Acute Care Nurse Manager, CU Ambassador Chair, and Executive Director of Fund Development and Marketing.

CNE subjects should be presented based upon needs shown, requested needs, and potential needs of the patients, staff, and community.

Continuing nursing education means learning experiences intended to build upon the educational and experiential bases of the registered professional and licensed practical nurse for the enhancement of practice, education, administration, research or theory development to the end of improving the health of the public. CNE offerings will only be awarded if the content is in alignment with the above definition.

**feeassessment** ~ Calculation of Fees: Continuing education offerings will be provided on a break-even basis. Occasionally continuing offerings will be provided at no cost and will be stated on the offering announcement. Income will be matched as closely as possible with expenses. Expenses may include: Faculty honorarium and expenses (mileage, meals, accommodations, etc.); Facility rent - if off hospital premises; Printing; Mailing; Materials (books, xeroxing, tape rental, shipping, etc); Refreshments; Education department staff time. Tuition will be calculated by adding the projected costs of the previous items

and dividing by the estimated number of paying attendees. A written agreement will be sent to all course speakers for their signature and returned for our records. The agreement will specify approved expenses for the speaker.

**Insufficient Fund Checks:** If it is known prior to the program that a check did not clear the bank, the CNE certificate will be held until the participant pays for the course in cash. Any checks which do not clear the bank following the program will be referred to the CMCI Billing & Collections Dept. to attempt to collect payment for the program per Policy 082.4.

**Cancellations/Refunds/Transfers:** If pre-registered for a program and unable to attend, the registration fee will be refunded (minus \$5 for processing cancellations) if the CMCI Education Department is notified at least 24 hours prior to the offering. If an offering must be canceled due to inclement weather, speaker illness, etc., CMCI will notify all participants as soon as possible. A full refund of tuition fees will be made. Registrations can be transferred from person to person without penalty if the CMCI Education Department is notified at least 24 hours prior to the offering.

**advertisement** ~ Offering announcements for continuing education will include the following information (see Attachment): Title of course offering; Date(s), time(s), and location; Purpose and offering objectives; Speaker(s) and credentials; Target audience; Fees; Contact hours awarded; The provider statement and provider number (as per KSBN guidelines) "CMCI is approved as a provider of continuing nursing education by the Kansas State Board of Nursing. This course offering is approved for \_\_\_\_ contact hours applicable for RN, LPN, or LMHT relicensure. Kansas State Board of Nursing Provider Number: \_\_\_\_\_"; Provider's name, phone number, email address, and physical address; Sponsorship information, if applicable.

Offering Announcements may be distributed via the following: Printed flyers; PDF via email; Website postings; Newspaper advertisements.

The following information will be posted on the CMCI website for general public information: Non-discrimination policy statement; ADA policy statement; Cancellation/refund policy.

Agenda will be provided upon request and upon registration completion.

**approvalprocess** ~ Planning: Identify topic area and target audience; Establish planning committee: Clarify goals of the offering; Determine

the format of the offering; Establish time and location for offering; Select title for offering; Develop measurable objectives or learning outcomes (Objectives must be stated in terms of behaviors that will assure that the broad goals have been met and The number of objectives depends upon the complexity of the offering goal.); Develop offering content based upon goal, objectives, and ability to meet the definition of CNE (Continuing nursing education means learning experiences intended to build upon the educational and experiential bases of the registered professional and licensed practical nurse for the enhancement of practice, education, administration, research or theory development to the end of improving the health of the public and Bibliography for each offering will be kept on file and up to date.); Collaborate with the speaker to determine the most appropriate teaching/learning strategies; Establish a prospective agenda with designated times for break and meals; Calculate the number of contact hours according to the formula approved by the Kansas State Board of Nursing. (50 min=1 CNE); Identify speakers for the selected content (Curriculum vitae and biography for speakers will be reviewed before reserving speaker and will be kept on file and up to date.); Offering evaluation will be completed using Citizens University Evaluation; All planning items will be completed for each offering before the presentation.

**contacthours** ~ Calculate the number of contact hours according to the formula approved by the Kansas State Board of Nursing. (50 min=1 CNE); Instructor Credit Contact are hours awarded by an approved provider, or if the offering is not by an approved provider by the board, to the individual who prepared and presents the CNE. A 50-minute presentation equals two contact hours of instructor credit. The minimum presentation length is 50 minutes.

#### Attendance

Late arrival/early departure: An offering shall consist of a minimum of 30 minutes (0.6 hours). Fractions of hours over 30 minutes may be given with the approval of the Education Supervisor based on 0.1 contact hours for every 5 minutes of presentation time. Participants can be no more than 15 minutes late to a continuing education offering and must attend the entire offering to receive contact hour credit. Exception: participants must attend the entire time for offerings of one contact hour or less. The coordinator has the right/responsibility to deny or reduce credit hours awarded if the participant arrives late or leaves prior to the completion of the offering.

Partial Credit: Partial credit may be granted with the approval of the coordinator for participants arriving late or leaving early due to

emergency situations. Partial credit may also be awarded in the event a program-in-progress must be canceled suddenly due to unexpected circumstances (i.e. blizzard) or for attendance during one day of a two-day offering.

Independent study will not be offered.

**verifycompletion** ~ Roster: The attendance roster shall identify the provider's name, address, phone number, provider number, course title, the CNE. The list of names will be alphabetized and will include the license numbers of the participants. (See Attachment).

Sign-in process: Participants must sign-in on the roster at the beginning of each offering with their name exactly as it appears on their nursing license. The sign-in process is monitored by registration staff. Each registrant is asked to verify personal information on the roster. Sign-in sheets are collected within fifteen (15) minutes of the start of the offering. At no time are sign-in sheets left unattended in a public place.

Certificates of attendance will be awarded to participants after completion of a continuing education offering. The certificate will contain: provider's name, address, and provider number; the title of the course; date(s) of attendance; the number of CNE contact hours awarded; signature of the individual responsible for CNE; name, address, and license number of the participant; type of credit awarded if applicable (instructor, independent study)

**recordkeeping** ~ Records are kept for each offering and include the following: offering announcement; curriculum vitae for speaker(s); evaluations with summaries; sign-in rosters; attendance roster; handouts; bibliography; agenda; objectives; budget information; correspondence; planning details.

Records will be stored in the Education Department: Keeping records for at least five years and Maintaining confidentiality and security of records. Records will be either stored in a locked file cabinet or on a password-protected shared drive; Records will be filed in chronological order by offering date, then title; and Only the Education Manager and assistant will have access to files.

**noticeofchange** ~ Policies and procedures are reviewed annually. Changes to policies, procedures, or a change of coordinator will be communicated to KSBN within 30 days via email and phone.

**programevaluation** ~ Total Program Evaluation is conducted annually in June and reported to KSBN. (See Attachment)



**Submission date** ~ 04-6-2021 14:35:08  
**Form ID** ~ 1672730

# Jenny L. Niblock

1880 County Road O Colby, KS 67701  
(785) 443-1191– jniblock@cmckks.com

## EDUCATION

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<b>Fort Hays State University – Hays, KS</b> Doctor of Nursing Practice Expected Graduation: May 2020	2018 - Present
<b>Friends University – Wichita, KS</b> Master of Business Administration	2015 - 2017
<b>Fort Hays State University – Hays, KS</b> Master of Science in Nursing Family Nurse Practitioner	1996 – 1998
<b>Fort Hays State University – Hays, KS</b> Bachelor of Science in Nursing	1995 – 1996
<b>Colby Community College – Hays, KS</b> Associate of Science in Nursing	1992 – 1995

## CERTIFICATIONS AND LICENSURE

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*Kansas Advanced Nurse Practitioner License*  
*Hospice and Palliative Care Certification*  
*Wound Care Certification*  
*Advanced Trauma Life Support*  
*Pediatric Advanced Life Support*  
*Advanced Life Support*  
*Neonatal Resuscitation Support*  
*Basic Life Support – Healthcare Provider*

## SERVICE & LEADERSHIP

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<b>Kansas Governor's Ringneck Classic</b> <ul style="list-style-type: none"><li>• Board Member</li></ul>	2019-Present
<b>Kansas Hospital Association Policy Committee</b> <ul style="list-style-type: none"><li>• Member</li></ul>	2018-Present
<b>Kansas Palliative Care Advisory Council</b> <ul style="list-style-type: none"><li>• Member</li></ul>	2018-Present
<b>Kansas Clinical Improvement Collaboration</b> <ul style="list-style-type: none"><li>• Clinical and Technology Committee</li><li>• Skilled Nursing Committee</li></ul>	2016-Present
<b>KPPEPR Practice Research Network</b> <ul style="list-style-type: none"><li>• Board Member</li></ul>	2016-Present
<b>Colby Community College</b> <ul style="list-style-type: none"><li>• Health Science Advisory Board Member</li></ul>	2015-Present
<b>Kansas State Research and Extension Council</b> <ul style="list-style-type: none"><li>• Thomas County 4-H Executive Council Member</li></ul>	2015-2017
<b>Kansas Honor Flight</b> <ul style="list-style-type: none"><li>• Medical Volunteer on Flights</li></ul>	2011-Present

Niblock, Jenny

**Thomas County Fair**

2005-Present

- Clothing Superintendent

**Heartland Christian School**

2005-2008

- School Board Member

**Puddle Duck Preschool**

2004-2019

- Board Chairman

**Hospice and Palliative Care of Northwest Kansas**

2000-Present

- Fundraising Event Volunteer Committee

## WORK EXPERIENCE

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**Washburn University – Colby, KS**

2018-Present

- *Adjunct Professor*
  - Responsible for preparing and teaching Master level courses in Population Health Management and Health Policy.

**Citizens Health – Colby, KS**

2015-Present

- *Chief Clinical Officer*
  - Overseeing all clinical areas for 25 bed Critical Access Hospital, 60 bed Long-term care unit and rural health clinic.

**Hospice and Palliative Services of Northwest Kansas – Phillipsburg, KS**

2015-Present

- *Nurse Practitioner*
  - Working as an Advanced Registered Nurse Practitioner coordinating clinical services for hospice and palliative care patient in 15 county area as needed including wound care consults.

**Citizens Health – Colby, KS**

1998-Present

- *Nurse Practitioner*
  - Working as an Advanced Registered Nurse Practitioner in a family practice setting providing primary care to all ages and oversight of all nursing staff and clinical areas.

**Citizens Health – Colby, KS**

1997-1998

- *Registered Nurse*
  - Working as a Registered Nurse in long term care setting in capacity of director of the departments of quality assurance, risk management, infection control, and education.

**Sheridan County Health Complex – Hoxie, KS**

1996-1997

- *Registered Nurse*
  - Working as a Registered Nurse in the long term care setting working in capacity of MDS and Care Plan Coordinator.

**Citizens Health – Colby, KS**

1995-1997

- *Registered Nurse*
  - Working as a Registered Nurse in the long term care setting.

## PRESENTATIONS

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**Kansas Capitol Graduate Research Summit –Topeka, KS**

2020

- *Poster Presentation, Advanced Directives in Primary Care*
- Health Science in Schools Conference –Salina, KS** 2018
  - *Partnering with Hospitals, Breakout Presentation*
- Kansas Hospital Education and Research Foundation** 2019
  - *Palliative Care in Primary Care, Breakout Session*
- Health Science in Schools Conference –Salina, KS** 2018
  - *Partnering with Hospitals, Breakout Presentation*
- 2018 Rural Health Best Practices Conference –Oakley, KS** 2018
  - *Serious Illness Conversations, Breakout Presentation*
- Midwest Cancer Alliance –Kansas City, KS** 2018
  - *Strategies to Insure Rural Access to Oncology Services*
- American College of Healthcare Executives – North Platte, NE** 2017
  - *Building Positive Culture for Employee Retention*

## PROFESSIONAL SOCIETIES

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<b>Hospice and Palliative Nurse Association</b>	2013-Present
<b>Kansas Organization of Nurse Leaders</b>	2015-Present
<b>American College of Healthcare Executives</b>	2019-Present

## PERSONAL INTEREST

- 
- Volunteering at School, Church, Community and 4-H events.
  - Quilting and Scrapbooking.
  - Raising show steers and pigs and working on the farm with my family.
  - Lifelong learning and traveling with my family.

**CITIZENS MEDICAL CENTER, INC.**  
**Colby, Kansas**

Page 1 of 3

Policy #: C-073.001

Original Date: 7/11/2016

Revision Date:

Approval:

Department: Education Department

Subject: Continuing Education Needs Assessment

**POLICY:**

It is the policy of Citizens Medical Center, Inc. (CMCI), that continuing education needs for medical professionals will be assessed and planned for on a continual basis.

**PURPOSE:**

It is the purpose of this policy to establish processes of assessing and planning for the continuing educational needs of medical professionals served by CMCI.

**PROCEDURE:**

- I. Needs Assessment Process:
  - A. Determine the purpose or specific need.
  - B. Define the scope of the assessment.
  - C. Assess resources and constraints for conducting the assessment.
  - D. Elicit support.
  - E. Select appropriate methods:
    - 1. Ask questions of perspective participants, employers, nurse colleagues, and consumers (i.e. focus groups).
    - 2. Include a needs assessment question on each offering evaluation.
    - 3. Review current literature and research findings.
    - 4. Conduct a formal needs assessment utilizing a questionnaire/survey tool.
    - 5. Consult an advisory committee or colleagues/peers.
  - F. Collect the data using the appropriate methodology:
    - 1. Advisory Groups - A group not to exceed eight – nine people who attend to share ideas in their area of practice.

2. Brainstorming - A representative group who are willing to generate ideas without criticism or praise for their clinical area.
3. Checklists - Readily available data such as orientation checklists which can indicate learning needs.
4. Delphi Technique - A specific strategy to obtain consensus. Questionnaires are sent to a targeted group, responses are summarized, and a new version of the questionnaire is sent to the same responders for additional response.
5. Interviews - An opportunity to share in-depth views, expand on areas of particular concern, and provide examples to clarify points.
6. Literature Analysis - Keeping current with the literature in various areas of nursing is important to analyze trends and project learning needs for future programs.
7. Nominal Group Process - A method designed to create consensus through individual ranking of items and a pooling of scores.
8. Observations - Direct observation of work performance can illicit learning needs.
9. Questionnaires - Most common type of needs assessment. These surveys focus only on the respondent's opinion as opposed to their actual knowledge or skill (Attachment #1).
10. Rating Scales - A Likert scale commonly has response ranges from 1 to 5, with 1 representing most or least and 5 representing the other extreme.
11. Records and Report Analysis - Careful analysis of data reports such as quality assurance reports often reflect institutional need.
12. Services and Institutional Changes - Changes in the existing services of and institution provide indicators for learning needs.

G. Analyze data.

H. Prioritize needs.

I. Plan the offerings based on the needs assessment.

II. Citizen's University:

A. Citizen's University is responsible for promoting "Our People," "Our Story," "Our Community," and "Our Development" to all persons served by CMCI. "Our Development" deals with personnel and professional development, including the continuing education of medical professionals.

B. Evaluation and planning for continuing education needs of medical professionals will be managed by Citizen's University.

III. Continuing Nursing Education (CNE):

- A. Continuing nursing education means learning experiences intended to build upon the educational and experiential bases of the registered professional and licensed practical nurse for the enhancement of practice, education, administration, research or theory development to the end of improving the health of the public.
- B. CNE offerings will only be awarded if the content is in align with the above definition.
- C. CNE offerings will be considered based upon needs shown, requested needs, and potential needs of the patients, staff, and community.

**Needs Assessment Questionnaire**

In order to better meet your needs and interests, we would appreciate a few minutes of your time to complete the following survey.

[Check one] RN \_\_\_\_\_ LPN \_\_\_\_\_ OTHER \_\_\_\_\_

**1. What is your current place of employment?**

Hospital

Physician's office

Nursing Home

School of Nursing

Other \_\_\_\_\_

Not currently employed.

**2. In what area do you specialize?**

Community Health

Critical Care

Geriatrics

Medical/Surgery

Obstetrics

Pediatrics

Psychiatry/Mental Health

Other \_\_\_\_\_

**3. How do you most often hear about continuing nursing education (CNE) offerings?**

Through information posted on  
bulletin boards at work

Through brochures received at home

Other \_\_\_\_\_

Through advertisements in professional  
newsletters and journals

Through friends/colleagues

**4. For your most recent re-licensure period, approximately how many hours of CNE were obtained through programs held within your work organization?**

**5. For your most recent re-licensure period, approximately how many hours of CNE were obtained through independent study?**

**6. For your most recent re-licensure period, approximately how many hours of CNE were obtained through college credit?**

**7. When attending programs do you prefer one that is:**

1-2 hrs in length

3-4 hrs in length

6-7 hrs in length



**8. Does your schedule best allow attendance of programs that are:**

All day	Evening
Afternoon only	Saturday
Morning only	

**9. What do you like most about our continuing education programs?**

**10. What do you like least about our continuing education programs?**

Please circle all topics of interest:

ACLS Medications	Grief	Sleep Disorders
Adolescent Crises	Growth and Development	Spinal Injuries
Aging	Guardianship	Spirituality
Allergies	GYN Problems	Sports Injuries
Arthritis	Humor in Healthcare	Stabilization/Transport of Neonate
Asthma	Hypertension	Stress
Attention Deficit Disorder	ID of High Risk Infant	Stroke
Blood Disorders	Illegal Drug Use	Substance Abuse
Breast Feeding	Immunizations	Sudden Infant Death Syndrome
Burns	Inflammatory Bowel Disease	Suicide
Cancer	Diabetic Ketoacidosis	Thyroid Disorders
Cardiac Rehabilitation	Laparoscopic Surgical Procedures	Total Parenteral Nutrition
Case Management	Legal Perspectives	Toxemia
Chemotherapy	Neuro Disorders	Trauma
Chest Injuries	Nursing Care Plans	Urinary Tract Infection
Child Abuse	Nursing Diagnosis	Urologic Disorders
Cirrhosis	Organ/Tissue Donation	Utilization Review
Co-dependency	Orthopedic Infections	Valvular Heart Disease
Conflict Resolution (patient, resident, or family)	Osteoporosis	Wellness
Communicable Diseases	Ostomy	Other
Compassion	Pacemaker	
Complications of Pregnancy	Panic Lab Levels	
COPD	Patient Teaching	
Cor Pulmonale	Pediatrics	
Cultural Differences	Pelvic Inflammatory Disease	
Dementia Care	Peptic Ulcer Disease	
Depression	Pericarditis	
Dermatologic Problems	Peripheral Vascular Surgery	
Diabetes	Physical Assessment	
Discharge Planning	Premature Labor	
Drug Update	Pulmonary Edema	
Dysrhythmias (Basic)	Pneumonia	
Eating Disorders	Pulmonary Embolism	
EKG Interpretation	Renal Disorders	
Elderly Abuse	Respiratory Distress Syndrome	
Epidurals for Pain Control	Reyes Syndrome	
Epilepsy	Seizures	
Epilepsy	Self-esteem in Children	
Ethical Issues	Self-image	
Fluid / Electrolytes	Septic Shock	
Future of Healthcare	Sexual Transmitted Diseases	
Geriatrics	Shock	
G.I. Bleeding		

**CITIZENS MEDICAL CENTER, INC.**  
**Colby, Kansas**

Page 1 of 3

Policy #: C-073.002

Original Date: 7/11/16

Revision Date:

Approval:

Department: Education Department

Subject: Continuing Education Offerings - Registration/Fees

**POLICY:**

It is the policy of Citizens Medical Center, Inc. (CMCI), to have consistent registration of continuing educational offerings and determination of fees.

**PURPOSE:**

It is the purpose of this policy to establish guidelines for registration completion, determination of fees, and collection of said fees.

**PROCEDURE:**

I. Pre-Registration:

- A. Pre-registration is required for most continuing education offerings and will be so stated on the offering announcement.
- B. The registration fee must accompany the pre-registration form (see fees below).
- C. All information on the pre-registration form should be as it appears on the participant's license.
- D. Participants will receive confirmation of registration via inter-facility mail or email.

II. Waiting List:

- A. In the case of over-registrations, a waiting list will be started and the individual notified.
- B. If cancellations occur, the first person on the waiting list will be taken.

- C. If unable to contact the individual within a reasonable period, the next person will be contacted.

III. Walk-ins:

- A. Walk-ins are accepted at continuing education offerings if seating is available and only if so stated on the offering announcement (see fees below).

IV. Children / Non-registered Persons:

- A. Participants attending continuing education offerings have paid for a learning experience.
- B. Due to limited seating and because children can be distracting to others, children and non-registered persons will not be allowed at continuing education offerings unless otherwise stated on the offering announcement.

V. Calculation of Fees:

- A. Continuing education offerings will be provided on a break-even basis.
  - 1. Occasionally continuing offerings will be provided at no cost and will be stated on the offering announcement.
- B. Income will be matched as closely as possible with expenses. Expenses may include:
  - 1. Faculty honorarium and expenses (mileage, meals, accommodations, etc.).
  - 2. Facility rent - if off hospital premises.
  - 3. Printing.
  - 4. Mailing.
  - 5. Materials (books, Xeroxing, tape rental, shipping, etc.).
  - 6. Refreshments.
  - 7. Education department staff time.
- C. Tuition will be calculated by adding the projected costs of the above items and dividing by the estimated number of paying attendees.
- D. A written agreement will be sent to all course speakers for their signature and returned for our records. The agreement will specify approved expenses for the speaker.

VI. Registration Fees:

- A. Pre-registered non-CMCI associates including physicians - full fees with the exception of the program speakers.

- B. Pre-registered CMCI associates - full fees with the exception of the program speakers. Promissory note signed as per HR policy 907.1.020 - Excludes CMCI medical providers.
- C. Walk-in non-CMCI associates - full fees plus \$5.00 additional charge.
- D. Pro re nata (PRN) CMCI associates - may attend at CMCI associate rate if they have worked within 30 days prior to a scheduled offering with Department Leader approval (in-service days will not count toward working time).
- E. CMCI associates on leave of absence or Family and Medical Leave Act (FMLA) - may attend at CMCI associate rate for 6 months. After 6 months, the associate will be expected to pay the stated non-CMCI registration fee. This includes associates on medical leave, educational leave, workers compensation, etc.
- F. Students - will follow the same policies as CMCI associates if seating is available.
  - 1. Certificates will be issued only upon request with a flat fee of \$5 and no contact hours will be provided unless a specific request is made.
  - 2. Individuals must be full-time students in an accredited program to qualify.

VII. Insufficient Fund Checks:

- A. If it is known prior to the program that a check did not clear the bank, the Continuing Nursing Education (CNE) certificate will be held until the participant pays for the course in cash plus a returned check fee.
- B. Any checks which do not clear the bank following the program will be referred to the CMCI Billing & Collections Dept. to attempt to collect payment for the program per Policy 082.4.

VIII. Cancellations/Refunds/Transfers:

- A. If pre-registered for a program and unable to attend, the registration fee will be refunded (minus \$5 for processing cancellations) if the CMCI Education Department is notified at least 24 hours prior to the offering.
- B. If an offering must be canceled due to inclement weather, speaker illness, etc., CMCI will notify all participants as soon as possible. A full refund of tuition fees will be made.
- C. Registrations can be transferred from person to person without penalty if the CMCI Education Department is notified at least 24 hours prior to the offering.

**CITIZENS MEDICAL CENTER, INC.**  
**Colby, Kansas**

Page 1 of 2

Policy #: C-073.003

Original Date: 7/11/16

Revision Date:

Approval:

Department: Education Department

Subject: Continuing Education Offering Announcement

**POLICY:**

It is the policy of Citizens Medical Center, Inc. (CMCI), that continuing education for medical professionals will be announced appropriately to allow for sufficient planning and attendance.

**PURPOSE:**

It is the purpose of this policy to establish guidelines for continuing education announcements.

**PROCEDURE:**

- I. Offering announcements for continuing education will include the following information (see Attachment):
  - A. Title of course offering.
  - B. Date(s), time(s), and location.
  - C. Purpose and offering objectives.
  - D. Speaker(s) and credentials.
  - E. Target audience.
  - F. Fees.
  - G. Contact hours awarded.
  - H. The provider statement and provider number [as per Kansas State Board of Nursing (KSBN) guidelines].
    1. CMCI is approved as a provider of continuing nursing education by the Kansas State Board of Nursing. This course offering is approved for \_\_\_\_ contact hours applicable for Registered Nurses, Licensed Practical Nurses, or Licensed Mental Health Technicians relicensure. Kansas State Board of Nursing Provider Number: \_\_\_\_\_
  - I. Registration form.

- J. Provider's name, phone number, email address, and physical address.
- K. Sponsorship information, if applicable.
- II. Offering Announcements may be distributed via the following:
  - A. Printed flyers.
  - B. Portable Document Format (PDF) via email.
  - C. Website postings.
  - D. Newspaper advertisements.
  - E. Direct mailings.
- III. The following information will be posted on the education portion of the CMCI website for general public information.
  - A. Non-discrimination policy statement.
  - B. Americans with Disabilities Act (ADA) policy statement.
  - C. Cancellation/refund policy.
- IV. Agenda will be provided upon request and upon registration completion.

**CITIZENS MEDICAL CENTER, INC.**  
**Colby, Kansas**

Page 1 of 4

Policy #: C-073.004

Original Date: 07/11/16

Revision Date:

Approval:

Department: Education Department

Subject: Continuing Education, Development of an Offering of

**POLICY:**

It is the policy of Citizens Medical Center, Inc. (CMCI), that continuing education offerings for medical professionals will be developed with purpose and intent.

**PURPOSE:**

It is the purpose of this policy to establish guidelines for the development of continuing education offerings.

**PROCEDURE:**

- I.     Assessment:
  - A.     Complete needs assessment per policy C-073.001.
  - B.     Assess resources:
    - 1.     Operating budget.
    - 2.     Faculty.
    - 3.     Hardware.
    - 4.     Supplies.
    - 5.     Facilities.
- II.    Planning:
  - A.     Identify topic area and target audience.
  - B.     Establish planning committee.
  - C.     Clarify goals of the offering.
  - D.     Determine format of offering.



- E. Establish time and location for offering.
  - F. Select title for offering.
  - G. Develop measurable objectives or learning outcomes.
    - 1. Objectives must be stated in terms of behaviors that will assure that the broad goals have been met.
    - 2. The number of objectives depends upon the complexity of the offering goal.
  - H. Develop offering content based upon goal, objectives, and ability to meet definition of Continuing Nursing Education (CNE).
    - 1. Continuing nursing education means learning experiences intended to build upon the educational and experiential bases of the registered professional and licensed practical nurse for the enhancement of practice, education, administration, research or theory development to the end of improving the health of the public.
    - 2. Bibliography for each offering will be kept on file and up to date.
  - I. Collaborate with speaker to determine the most appropriate teaching/learning strategies.
  - J. Establish a prospective agenda with designated times for break and meals.
  - K. Calculate the number of contact hours according to formula approved by Kansas State Board of Nursing. [50 minutes (min.) =1 CNE].
    - 1. Instructor Credit Contact are hours awarded by an approved provider, or if the offering is not by an approved provider by the board, to the individual who prepared and presents the CNE. A 50 minute presentation equals two contact hours of instructor credit. The minimum presentation length is 50 minutes.
  - L. Identify speakers for the selected content:
    - 1. Curriculum vitae and biography for speakers will be reviewed prior to reserving speaker and will be kept on file and up to date.
  - M. Offering evaluation will be completed using Citizens University Evaluation.
  - N. All planning items will be completed for each offering prior to presentation.
- III. Registration:
- A. Roster:
    - 1. The attendance roster shall identify the provider's name, address, phone number, provider number, the course title, the CNE. The list of names will

be alphabetized and will include the license numbers of the participants.  
(See Attachment).

B. Sign in process.

1. Participants must sign in on the roster at the beginning of each offering with their name exactly as it appears on their nursing license. The sign in process is monitored by registration staff. Each registrant is asked to verify personal information on the roster. Sign in sheets are collected within 15 minutes of the start of the offering. At no time are sign in sheets left unattended in a public place.

IV. Attendance:

A. Late arrival/early departure:

1. An offering shall consist of a minimum of 30 minutes (0.6 hours). Fractions of hours over 30 minutes may be given with the approval of the Education Supervisor based on 0.1 contact hours for every five minutes of presentation time. Participants can be no more than 15 minutes late to a continuing education offering and must attend the entire offering to receive contact hour credit. Exception: participants must attend the entire time for offerings of one contact hour or less. The coordinator has the right/responsibility to deny or reduce credit hours awarded if the participant arrives late or leaves prior to the completion of the offering.

B. Partial Credit:

1. Partial credit may be granted with the approval of the coordinator for participants arriving late or leaving early due to emergency situations. Partial credit may also be awarded in the event a program-in-progress must be canceled suddenly due to unexpected circumstances (i.e. blizzard) or for attendance during one day of a two day offering.

V. Certificates:

A. Certificates of attendance will be awarded to participants after completion of a continuing education offering. The certificate will contain:

1. provider's name, address, and provider number.
2. title of the course.
3. date(s) of attendance.
4. number of CNE contact hours awarded.
5. signature of the individual responsible for CNE.
6. name, address, and license number of the participant.
7. type of credit awarded if applicable (instructor, independent study).

VI. Maintain Records:

- A. Records are kept for each offering and include the following:
  - 1. offering announcement.
  - 2. curriculum vitae for speaker(s).
  - 3. evaluations with summaries.
  - 4. sign in rosters.
  - 5. attendance roster.
  - 6. handouts.
  - 7. bibliography.
  - 8. agenda.
  - 9. objectives.
  - 10. budget information.
  - 11. correspondence.
  - 12. planning details.
  
- B. Records will be stored in the Education Department:
  - 1. Keeping records for at least five years.
  - 2. Maintaining confidentiality and security of records.
    - a. Records will be either stored in a locked file cabinet or on a password protected shared drive.
    - b. Records will be filed in chronological order by offering date, then title.
    - c. Only the Education Manager and assistant will have access to files.

**CITIZENS MEDICAL CENTER, INC.**  
**Colby, Kansas**

Page 1 of 2

Policy #: C-073.005

Original Date: 07/11/16

Revision Date:

Approval:

Department: Education Department

Subject: Continuing Education Program Management

**POLICY:**

It is the policy of Citizens Medical Center, Inc. (CMCI), to establish and manage a successful continuing education program for medical professionals.

**PURPOSE:**

It is the purpose of this policy to establish guidelines for the management of the continuing education program.

**PROCEDURE:**

- I. Program Administration:
  - A. Organizational chart:
    - 1. CEO.
    - 2. CNO.
    - 3. Education Manager.
    - 4. Support Specialist.
  - B. Mission Statement:
    - 1. Enhancing the lives of those we serve.
  - C. Vision Statement:
    - 1. CMCI is the people's choice as a provider of care, place to work and partner for regional growth. Our financial health supports keeping pace with an ever changing healthcare environment. Our reputation of quality and caring continuously strengthens our relationships with the communities we serve. Every choice made and action taken during the life of this vision helps achieve our mission.
  - D. Program Coordinator job description:
    - 1. See Education Manager Job description.
    - 2. Changes will be submitted to KSBN within 30 days (email, phone, postal).
  - E. Citizen's University:

1. Citizen's University is responsible for promoting "Our People," "Our Story," and "Our Community" to all persons served by CMCI. "Our People" deals with personnel and professional development, including the continuing education of medical professionals.
2. Evaluation and planning for continuing education needs of medical professionals will be managed by Citizen's University.

II. Program Management:

A. Policies and Procedures:

1. Reviewed annually.
2. Changes will be submitted to KSBN within 30 days (email, phone, postal).

B. Needs Assessment Process:

1. Completed prior to each educational offering.
2. Refer to policy A.073.001.

C. Offerings:

1. Refer to policy A.073.004.

III. Total Program Evaluation Plan:

- A. Conducted annually and reported to KSBN.
- B. See Attachment #1.

**CITIZENS MEDICAL CENTER, INC.**  
**Colby, Kansas**

Page 1 of

Policy #: C-073.006

Original Date: 07/11/2016

Revision Date:

Approval:

Department: Education Department

Subject: Continuing Education - Managing Conflicts of Interest for Continuing Education

**POLICY:**

It is the policy of Citizens Medical Center, Inc. (CMCI), to identify and resolve any conflict of interest as it relates to Continuing Education.

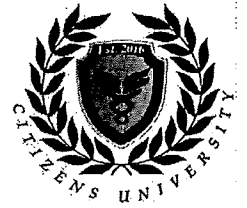
**PURPOSE:**

It is the purpose of this policy to establish guidelines for determining and managing conflicts of interest as it relates to Continuing Education.

**PROCEDURE:**

- I. Any individual in a position to control content must disclose, in writing to the Continuing Medical Education (CME) Provider, the existence of any financial relationships with a commercial interest within the past 12 months. The Accreditation Council for Continuing Medical Education (ACCME) defines a commercial interest as any entity producing, marketing, re-selling, or distributing health care goods or services consumed by, or used on patients. Disclosure information must be received and reviewed by CMCI Education Department prior to confirmation of the individual's participation. Any conflicts of interest must be identified and resolved by the CMCI Education Department prior to the individual's confirmation as an activity planner, faculty author, or other content controlling role. The ACCME's definition of conflict of interest is when an individual has an opportunity to affect CME content about products or services of a commercial interest with which he/she has a financial relationship. It is necessary to update disclosure information should the status change during the course of the CME activity.
- II. The review, identification, and resolution process must take place prior to the activity; all individuals in a position to control content must return the disclosure information by the due date. Failure to disclose within the necessary timeframe will result in withdrawal of the invitation. The disclosure information will be reviewed, and should a potential conflict be identified, additional information or dialogue may be required.

- III. Acknowledgement of all relevant disclosures—i.e., nothing to disclose or existence of affiliation(s), and/or financial relationship(s) or interest(s)—for every individual who serves in a position to control content of the educational activity must be presented to the learners in writing prior to presentation or publication.
- IV. Failure or refusal to disclose, false disclosure, or inability to work with the CMCI Education Department to resolve an identified conflict of interest will result in withdrawal of the invitation to participate and replacement of the individual.
- V. Resolution of Conflicts of Interest:
  - A. Should no conflict of interest be identified, the individual's role in the activity may be established.
  - B. Should a conflict of interest be identified, the individual will be contacted and asked for clarification or additional information. Upon receipt and review of this additional information, methods of resolution will be identified and discussed with the individual. Resolution methods may include, but not be limited to, one or more of the following:
    - 1. Peer review of content prior to the activity to ensure evidence-based, unbiased content using best available, highest strength of evidence. The activity faculty or authors must be responsive to revision requirements.
    - 2. Assigning a different topic for the individual.
    - 3. Assigning a different faculty for a topic.
    - 4. Cancellation of the faculty.
  - C. The resolution process and outcome will be documented in the CME activity file (See Attachment#1).



## CME Conflicts of Interest Form for CME Activities

Please check where applicable and sign below. Provide additional pages as necessary.

Date \_\_\_\_\_

Name: \_\_\_\_\_

Address, City, State, and Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_

E-mail: \_\_\_\_\_

Name of CME Activity: \_\_\_\_\_

Date(s) and Location of CME Activity: \_\_\_\_\_

Topic: \_\_\_\_\_

Role you hold specific to this CME activity: \_\_\_\_\_

### DISCLOSURE OF FINANCIAL RELATIONSHIPS WITHIN 12 MONTHS OF DATE OF THIS FORM

A commercial interest is any entity producing, marketing, re-selling, or distributing health care goods or services consumed by, or used on, patients.

- ☐ A. Neither I nor an immediate family member (spouse or partner) has a financial relationship with or interest in a commercial interest.
- ☐ B. I have or an immediate family member (spouse or partner) has a financial relationship with or interest in a commercial interest. Please check the relationship(s). (Check all that apply):

Research Grants

Speakers' Bureaus\*

Ownership

Receipt of Equipment or Supplies

Consultant or Advisory Board

Manuscript Preparation\*\*

Stock/Bond Holdings (excluding mutual funds)

Employment

Partnership

Honorarium

Other (please list) \_\_\_\_\_



Please indicate the names of the organization(s) with which you have a financial relationship or interest, and the topic areas that correspond to the relationship. If more than four relationships, please list on separate piece of paper:

Organization with which Relationship Exists	Type of Relationship	Topic Area(s) Involved
1.	1.	1.
2.	2.	2.
3.	3.	3.
4.	4.	4.

\*If you checked "Speakers' Bureaus" in item B, please continue:

Did you participate in company-provided speaker training?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Did you travel to participate in this training?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Did the company provide you with slides of a presentation in which you were trained as a speaker?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Did the company pay the travel/lodging/other expenses?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Did you receive an honorarium or consulting fee for participating in this training?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you received any other type of compensation from the company?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

\*If you checked "Manuscript Preparation" in item B, please continue:

Was any assistance provided by a commercial interest, medical communications company or professional writer?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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If yes, please describe who provided the assistance. \_\_\_\_\_

Was the topic suggested by an advisory panel that receives support (ex: educational grant) from a commercial interest?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
--	------------------------------	-----------------------------

I have read the [CME Provider] Policy and Procedures for Managing Conflicts of Interest. If I have indicated a financial relationship or interest, I understand that this information will be reviewed to determine whether this relationship precludes my participation, and I may be asked to provide additional information. I understand that failure or refusal to disclose, false disclosure, or inability to resolve conflicts of interest will disqualify me from participating in this activity.

Signature \_\_\_\_\_ Date: \_\_\_\_\_

RETURN BY: \_\_\_\_\_

TO: Citizens Medical Education Department  
c/o Monique Cheatum  
100 E College Drive  
Colby KS 67701  
785-460-4850  
mcheatum@cmciiks.com

CATEGORY/SECTION	CRITERIA	DATE/OUTCOME	ACTION PLAN	
<b><u>A. Administration</u></b>				
<b>Organization</b>	1. Organizational structure of CNE is identified with the parent organization.	7.28.20 Organizational structure does identify CNE unit		
<b>Philosophy, Goals and Objectives</b>	1. The CNE unit functions within the parent mission philosophy and meets CE goals and objectives.	7.28.20 CNE unit does function within parent institution, mission and goals.		
	2. The CNE unit promotes compliance with CE Rules and Regulations of the KSBN.	7.28.20 Administration of CNE is in compliance with KSBN regulations.		
<b>Coordinator</b>	1. Program Coordinator's job description complies with KSBN coordinator criteria.	7.28.20 Program Coordinator's level of education is in compliance with KSBN regulations.	It is the responsibility of the CCO to coordinate and supervise all continuing education for all disciplines within Citizens Health	
<b>Advisory Component</b>	1. The CNE unit works collaboratively with clinical educators and nursing staff to provide CNE.	7.28.20 Level of involvement with clinical educators and nursing staff is adequate.		
	2. Nursing Educator/Consultant participates in identifying CNE offerings presented.	7.28.20 Nursing Educator/Consultant identifies topics for CNE offerings.		-54-
<b><u>B. Program Management</u></b>				
<b>Policies and Procedures</b>	<p>There are policies and procedures to facilitate the CNE program:</p> <ul style="list-style-type: none"> <li>• CNE Attendance Rosters, CNE certificates, Independent Study CNE evaluation and CNE Instructor Credit</li> <li>• Marketing Materials</li> <li>• CNE Instructor Criteria</li> <li>• CNE Record Management</li> <li>• Contracting for CNE by Outside Groups</li> <li>• Independent Study for CNE</li> <li>• Duplicate certificates</li> <li>• Payments of Tuition fees for CNE offering</li> <li>• Refunds of Registration fees</li> <li>• Policy statements</li> </ul>	7.28.20 Policies and Procedures are in place and up to date. This is tracked via SQSS.		

<b>Records</b>	1. Records are maintained for each CNE offering that include: *syllabus *bibliography *copy of handout *vita *original roster/KSBN roster *independent study pilot results *evaluation results	7.28.20 Record complies with KSBN regulations.		
	2. Storage of CNE records by major nursing categories allows for easy retrieval of information.	7.28.20 Records are accessible on the server.		
	3. Confidentiality of sign-in rosters is monitored.	7.28.20 Rosters are in a locked file. Sign in rosters are not left unattended at offering.		
<b>Instructors</b>	1. The faculty are academically and clinically prepared in their area of responsibility.	7.28.20 Credentials are appropriate for teaching nursing continuing education.		-55-
	2. Faculty utilized adult education principles and exhibits effective teaching skills.	7.28.20 Teaching skills are effective for promoting learning.		
	3. Faculty are providing appropriate content for CNE approval.	7.28.20 Content is continuing education for participants.		
<b>Needs Assessment</b>	1. Nursing staff have input into topics for CNE offerings.	7.28.20 Nursing staff participate in the Needs Assessment Questionnaire annually.		
	2. Participants have input into topics for CNE offerings.	7.28.20 Input for future CNE topics is solicited from the participant.		
<b>Offering Design</b>	1. Offerings are planned by faculty representing the topic content area, learner and management.	7.28.20 Planning committees have sufficient representation.		
	2. Faculty take an active part in planning, implementing, and evaluating the offering.	7.28.20 Faculty are involved in the CNE process.		
	3. Objectives are stated in behavioral terms that define the expected outcomes for the learner.	7.28.20 Objective outcomes are attainable.	CNE 55	

	4. Objectives are consistent with time allotted for the offering.	7.28.20 Objectives are met in the class time allotted.		
	5. Objectives are consistent with knowledge base of target audience.	7.28.20 Objectives reflect education level of audience.		
	6. Content reflects current or advanced nursing practice in the topic area.	7.28.20 Content reflects latest trends in nursing practice.		
	7. Content satisfies the stated behavioral objectives for participant.	7.28.20 Participant perceives the objectives were met.		
	8. Content is appropriate for the time allotted for offering.	7.28.20 Content is adequately covered in time allotted.		
	9. There is a tool provided to the participant for evaluation of the following: *Teaching effectiveness *Content	7.28.20 Participants do have an opportunity to evaluate the offering.		
	10. The marketing tool includes: *offering description *objectives *target population *faculty *fee *KSBN provider statement and number *number of contact hours awarded *policy statements	7.28.20 Marketing tools include appropriate information for the participant.		-56-
<b>Learner</b>	1. Participants are satisfied with topic areas presented.	7.28.20 Offering evaluations reflect satisfaction in content offered.		
	2. Participants are provided an opportunity to interact with the faculty.	7.28.20 Opportunities for participant involvement are provided by the faculty.		
<b>C. TPEP Analysis</b>	1. The TPEP continues to be appropriate and effective in meeting the needs of the KSBN and CMCI.	7.28.20 Criteria statements are appropriate and effective in evaluating the total program.		



# ACLS

In the 2020 ACLS Provider Course, students will learn and practice

- Systematic approach (assessment)
- High-quality BLS
- Airway management
- Rhythm recognition
- Defibrillation
- Intravenous (IV)/intraosseous (IO) access (information only)
- Use of medications
- Cardioversion
- Transcutaneous pacing
- High-performance teams

The ACLS Course is designed for healthcare professionals who either direct or participate in the management of cardiopulmonary arrest or other cardiovascular emergencies. This includes personnel in emergency response, emergency medicine, intensive care, and critical care units such as physicians, nurses, and paramedics, as well as others who need an ACLS course completion card for job or other requirements.

Instructors: Scott Hubbell, RRT; Vickie Duffey, RN; Linda Laevenstein, RN; Brooke Schiltz, RN

This two-day course is offered every month on the following dates for 2021:

January 19 & 20	May 18 & 19	September 21 & 22
February 16 & 17	June 15 & 16	October 19 & 20
March 16 & 17	July 20 & 21	November 16 & 17
April 20 & 21	August 17 & 18	December 21 & 22

Day 1 9:00am – 5:00pm

Day 2 8:00am – 12:00pm

Citizens Medical Conference Room

\$75 course/ \$45 book

Registration for classes can be completed on our website [cmciiks.com](http://cmciiks.com) or by calling or emailing.

CMCI is approved as a provider of CNE by the Kansas State Board of Nursing. This course offering is approved for 12 contact hours applicable for APRN, RN, or LPN relicensure. Kansas State Board of Nursing provider number: LT0298-0616

Citizens Medical Center, Inc 785-462-7511 [education@cmciiks.com](mailto:education@cmciiks.com) 100 E College Drive, Colby KS 67701

## Overview of ACLS

### Introduction

#### Course Description and Goal

The Advanced Cardiovascular Life Support (ACLS) Provider Course is designed for healthcare providers who either direct or participate in the management of cardiopulmonary arrest or other cardiovascular emergencies. Through didactic instruction and active participation in simulated cases, students will enhance their skills in the recognition and intervention of cardiopulmonary arrest, immediate post-cardiac arrest, acute dysrhythmia, stroke, and acute coronary syndromes (ACS). The goal of this course is to improve outcomes for adult patients of cardiopulmonary arrest and other cardiovascular emergencies through early recognition and interventions by high-performance teams.

#### Course Objectives

After successfully completing this course, you should be able to

- Define *systems of care*
- Apply the Basic Life Support (BLS) Assessment, Primary Assessment, and Secondary Assessment sequences for systematic evaluation of adult patients
- Discuss how using rapid response teams (RRTs) or medical emergency teams (METs) may improve patient outcomes
- Discuss early recognition and management of ACS, including appropriate disposition
- Discuss early recognition and management of stroke, including appropriate disposition
- Recognize bradycardia and tachycardia that may result in cardiac arrest or complicate resuscitation outcome
- Perform early management of bradycardia and tachycardia that may result in cardiac arrest or complicate resuscitation outcome
- Model effective communication as a member or leader of a high-performance team
- Recognize the impact of team dynamics on overall team performance
- Recognize respiratory arrest
- Perform early management of respiratory arrest
- Recognize cardiac arrest
- Perform prompt, high-quality BLS, which includes prioritizing early chest compressions and integrating early automated external defibrillator (AED) use
- Perform early management of cardiac arrest until termination of resuscitation or transfer of care, including immediate post-cardiac arrest care
- Evaluate resuscitative efforts during cardiac arrest by continually assessing cardiopulmonary resuscitation (CPR) quality, monitoring the patient's physiologic response, and delivering real-time feedback to the team

## Course Design

To help you achieve these objectives, the ACLS Provider Course includes learning stations and a Megacode evaluation station. The learning stations provide activities such as

- Simulated clinical scenarios
- Video or instructor demonstrations
- Discussion and role-playing
- Group practice to achieve effective high-performance teams

In these learning stations, you will practice essential skills both individually and as part of a team. Because this course emphasizes effective team skills as a vital part of the resuscitative effort, you'll practice as both a team member and as Team Leader.

In the Megacode evaluation station at the end of the class, you will participate in a simulated cardiac arrest scenario to evaluate your

- Integration of core material and skills
- Application of algorithms
- Interpretation of arrhythmias
- Use of appropriate ACLS drug therapy
- Performance as an effective leader and member of a high-performance team
- Achieving objective measures such as chest compression fraction (CCF)

## Course Prerequisites and Preparation

The American Heart Association (AHA) limits enrollment in this course to healthcare providers who

- Direct or participate in the resuscitation of patients in or out of hospital
- Have the basic knowledge and skills to participate actively with the instructor and other students

Before class, read the *ACLS Provider Manual*, complete the mandatory precourse work in ACLS Student Resources (accessed via [eLearning.heart.org](http://eLearning.heart.org)), identify any gaps in your knowledge, and remediate those gaps by studying the applicable content in the *ACLS Provider Manual* or other supplementary resources, including ACLS Student Resources. You must pass the Precourse Self-Assessment with a minimum score of **70%**. You may retake the self-assessment as often as needed to pass. **Print your certificate of completion and bring it with you to the course.**

You will need the following knowledge and skills to successfully complete the course:

- BLS skills
- Electrocardiogram (ECG) rhythm interpretation for core ACLS rhythms
- Knowledge of airway management and adjuncts
- Basic ACLS drug and pharmacology knowledge
- Practical application of ACLS rhythms and drugs
- Effective high-performance team skills

### BLS Skills

Strong BLS skills form the foundation of ACLS, so you must pass the high-quality BLS Testing Station to complete this course. *Make sure that you are proficient in BLS skills before attending the class.*



American  
Heart  
Association.

# **Advanced Cardiovascular Life Support**

PROVIDER MANUAL

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ACLS Student Resources can be found at [eLearning.heart.org](http://eLearning.heart.org).  
Contact your Training Center Coordinator for more information about  
accessing these before your course.

To find out about any updates or corrections to this text, visit  
[www.heart.org/courseupdates](http://www.heart.org/courseupdates).

## **Scott E. Hubbell, MHSc, RRT, ACCS-NPS, C-NPT, NREMT, CCT**

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1101 Court Pl.  
Colby, KS 67701  
Cell: (785) 443-4001  
Email: flightrthub@gmail.com

### **EDUCATION**

2010	Master of Health Science, Nova Southeastern University (Honors)
1994	BA, Fort Hays State University
1998	AS, California College of Health Science
1990	AA, Colby Community College

### **EMPLOYMENT**

2018-present	<b>Cardiopulmonary Manager/CEC, Citizens Medical Center, Colby KS</b>
2015-2018	<b>Flight RRT, Med-Trans d.b.a. EagleMed, Goodland, KS</b>
2011-2015	<b>Clinical Education Coordinator/Flight RRT, EagleMed LLC, Wichita, KS</b>
2006-2013	<b>Program Director-Respiratory Therapy, NWKTC, Goodland, KS</b>
1997-2013	<b>Staff therapist/Instructor, Citizens Medical Center, Colby, KS</b>
2004-2007	<b>Staff therapist, Goodland Regional Medical Center, Goodland, KS</b>
1995-2006	<b>Lead therapist/sales, Apria Healthcare, Colby, KS</b>

### **Professional Credentials\*, Licenses and Advanced Certifications**

**Registered Respiratory Therapist (RRT)\***  
**Adult Critical Care Specialist (RRT-ACCS)\***  
**Neonatal-Pediatric Specialist (RRT-NPS)\***  
Licensed, State of Kansas  
License # 2403 exp. 3-31-2022  
**Certified Neonatal Pediatric Transport (C-NPT)\***  
**National Registry Emergency Medical Technician (NREMT)\***  
Certified, State of Kansas  
Certification # 55705  
National Registry # E3507032  
**Certified Cardiographic Technician (CCT)\***  
Certification # 00071903  
**Advanced Cardiovascular Life Support (ACLS) Instructor/Provider**  
**Basic Life Support (BLS) Instructor/Provider**  
**Pediatric Advanced Life Support (PALS) Instructor/Provider**  
**Advanced and Difficult Airway/SALAD/RSI Instructor**  
**Rhythm Strip, 12-Lead ECG, and Cardiac Pharmacology Instructor**  
**Neonatal Resuscitation Program (NRP) Instructor/Provider**  
**S.T.A.B.L.E Lead Instructor/Provider**  
**Prehospital Trauma Life Support (PHTLS) Advanced Instructor/Provider**

**Advanced Medical Life Support (AMLS) Instructor/Provider**  
**EZ I/O Instructor**  
**Advanced Burn Life Support (ABLS) Provider**  
**Mechanical Ventilation and NPPV Instructor**  
**Transport Professional Advanced Trauma Course (TPATC) Provider**  
**Pediatric Fundamentals of Critical Care Support (PFCCS) Provider**  
**Non Violent Crisis Intervention provider**

**Other**

**Adjunct faculty, Hays Medical Center – ALS Courses**  
**Former The Difficult Airway Course EMS/Provider-Faculty**  
**EMS adjunct instructor**  
**TNCC adjunct instructor**  
**Presenter, Colby Community College RN Program**  
    Mechanical Ventilation and 12 Lead ECG's (2009)  
    CPAP for Acute Pulmonary Edema (2010)  
    Advanced Airways (2010-11)  
    Mechanical Ventilation and Advanced Airways (2014)  
    I/O Insertion and Maintenance (2020)  
**Presenter, "Last Chance" Kansas EMS seminar – CPAP for APE (2010)**  
**Presenter, Western KS Respiratory Seminar-**  
    CPAP for APE (2013)  
    Taking Flight (2014)  
    STEMI (2015)  
    ScAIRways (2018)  
**Presenter, Hutchison, KS KEMSA- Pediatric Advanced Airways (2015)**  
**Presenter, Hays Medical Center Trauma Symposium-**  
    Emergent Field Airways (2016)  
**Presenter, NWKS EMS – Airway, Respirations & Ventilation (2018-2020)**  
**Presenter, TCEMS – Common airway problems, ID and TX (2018-19)**  
**Presenter, Region 1 EMS Annual Education forum - ScAIRways (2018)**  
**American Association for Respiratory Care (AARC)**  
**National Board of Respiratory Care (NBRC)**  
**Kansas Respiratory Care Society (KRCS)**  
**National Association of Emergency Medical Technicians (NAEMT)**  
**KRCS CH V Secretary 2000-2002**  
**Development of an RRT/EMT-P to RN Bridge Program with CCC**  
**Base Educator/Clinical Coach EagleMed/Med-Trans (2011-2018)**  
**Previous Licenses-Colorado, Nebraska, Oklahoma, South Dakota.**

# Advanced Cardiovascular Life Support Course Roster

Emergency Cardiovascular Care Programs



## Course Information

- ☒ ACLS Course  
☒ ACLS Update Course  
☐ HeartCode® ACLS  
☐ ACLS EP  
☐ ACLS Instructor  
☐ ACLS EP Instructor

Lead Instructor Scott Hubbell  
Lead Instructor ID# 03080756766  
Card Expiration Date 04/2022  
Training Center FCEMS  
Training Center ID# 165  
Training Site Name (if applicable) CMCI  
Address 100 E. College Dr.  
City, State ZIP Colby, KS 67701  
Course Location CMC

Course Start Date/Time <u>12-16-2020/0900</u>	Course End Date/Time <u>12-16-2020/1200</u>	Total Hours of Instruction <u>3</u>
No. of Cards Issued <u>5</u>	Student-Manikin Ratio <u>2:1</u>	Issue Date of Cards <u>12/22/2020</u>

## Assisting Instructor (Attach copy of instructor aligned with a TC other than the primary TC)

Name and Instructor ID#	Card Exp. Date	Name and Instructor ID#	Card Exp. Date
1.		5.	
2.		6.	
3.		7.	
4.		8.	

I verify that this information is accurate and truthful and that it may be confirmed. This course was taught in accordance with AHA guidelines.

Signature of Lead Instructor

Date

12-16-2020

# Course Participants



life is why™

Date 12-16-2020 Course ACLS-R Lead Instructor Scott Hubbell Lead Instr. ID# 03080756766

Name and Email <small>Please PRINT as you wish your name to appear on your card. Please print email address legibly.</small>	Mailing Address/Telephone	Complete/ Incomplete	Remediation/Date Completed (if applicable)
1. <u>[illegible]</u>	<u>[illegible]</u>	C	
2. <u>[illegible]</u>	<u>[illegible]</u>	C	
3. <u>[illegible]</u>	<u>[illegible]</u>	C	
4. <u>[illegible]</u>	<u>[illegible]</u>	C	
5. <u>[illegible]</u>	<u>[illegible]</u>	C	
6. <u>[illegible]</u>	<u>[illegible]</u>		
7. <u>[illegible]</u>	<u>[illegible]</u>		
8. <u>[illegible]</u>	<u>[illegible]</u>		
9. <u>[illegible]</u>	<u>[illegible]</u>		
10. <u>[illegible]</u>	<u>[illegible]</u>		

# ECC Course Evaluation

## ACLS Classroom Course



American  
Heart  
Association.

Date 12-16-20

Instructor(s) SCOTT HUBBLE

Training Center \_\_\_\_\_

Location Colby, KS

Please answer the following questions about your instructor.

My Instructor:

1. Provided instruction and help during my skills practice session

- ☒ a. Yes  
☐ b. No

2. Answered all of my questions before my skills test

- ☒ a. Yes  
☐ b. No

3. Was professional and courteous to the students.

- ☒ a. Yes  
☐ b. No

Please answer the following questions about the course content.

1. The course learning objectives were clear.

- ☒ a. Yes  
☐ b. No

2. The overall level of difficulty of the course was

- a. Too hard  
b. Too easy  
☒ c. Appropriate

3. The content was presented clearly.

- ☒ a. Yes  
☐ b. No

4. The quality of videos and written materials was

- a. Excellent  
☒ b. Good  
c. Fair  
d. Poor

5. The equipment was clean and in good working condition.

- ☒ a. Yes  
☐ b. No

Please answer the following questions about your skill mastery.

1. The course prepared me to successfully pass the skills session.

- ☒ a. Yes  
☐ b. No

2. I am confident I can use the skills the course taught me.

- ☒ a. Yes  
☐ b. No  
☐ c. Not sure

3. I will respond in an emergency because of the skills I learned in this course.

- ☒ a. Yes  
☐ b. No  
☐ c. Not sure

4. I took this course to obtain professional education credit or continuing education credit.

- ☒ a. Yes  
☐ b. No

Optional questions:

Have you previously taken this course via another method, such as in a classroom or online?  
Which learning method do you prefer and why?

Were there any strengths or weaknesses of the course that you would like to comment on?

What would you like to see in future courses developed by the AHA?

After Completing This Evaluation

Please return this evaluation to your instructor before you leave the class.

Alternatively, you can send the evaluation to your instructor's Training Center. Ask your instructor for the contact information.

If you have significant problems or concerns with your course, please contact the AHA at 877-AHA-4CPR.



# PALS

In the 2020 PALS Provider Course, students will learn and practice

- High-quality Child CPR AED and Infant CPR
- Assessment
- Cardiopulmonary arrest
- Apply team dynamics
- Respiratory distress
- Respiratory failure
- Shock
- Arrhythmias
- Post-cardiac arrest management

The PALS Course is designed for healthcare providers who respond to emergencies in infants and children. This includes personnel in emergency response, emergency medicine, intensive care and critical care units, such as physicians, nurses, paramedics and others who need a PALS course completion card for job or other requirements.

Instructors: Scott Hubbell, RRT; Brooke Schiltz, RN

This two-day course is offered every month on the following dates for 2021:

January 26 & 27	May 25 & 26	September 28 & 29
February 23 & 24	June 22 & 23	October 26 & 27
March 23 & 24	July 27 & 28	November 23 & 24
April 27 & 28	August 24 & 25	December 28 & 29

Day 1 9:00am – 5:00pm

Citizens Medical Conference Room

Day 2 8:00am – 12:00pm

\$75 course/ \$45 book

Registration for classes can be completed on our website [cmciiks.com](http://cmciiks.com) or by calling or emailing.

CMCI is approved as a provider of CNE by the Kansas State Board of Nursing. This course offering is approved for 12 contact hours applicable for APRN, RN, or LPN relicensure. Kansas State Board of Nursing provider number: LT0298-0616

Citizens Medical Center, Inc 785-462-7511 [education@cmciiks.com](mailto:education@cmciiks.com) 100 E College Drive, Colby KS 67701

# Part 1

## Course Overview

### Course Objectives

The Pediatric Advanced Life Support (PALS) Provider Course is designed for healthcare providers who manage respiratory and/or cardiovascular emergencies and cardiopulmonary arrest in pediatric patients. By preparing for the course and participating in the skills stations and simulated cases, you will enhance the recognition of and intervention for respiratory emergencies, shock, and cardiopulmonary arrest.

During the course, you will participate in a series of case scenario practices with simulations that reinforce important concepts, including

- Identifying and treating problems that place the child at risk for cardiac arrest
- Applying a systematic approach to pediatric assessment
- Using the evaluate-identify-intervene sequence
- Using the PALS algorithms and flowcharts
- Demonstrating effective resuscitation team dynamics

### Goal of the PALS Provider Course

The PALS Provider Course aims to improve outcomes for pediatric patients by preparing healthcare providers to effectively recognize and intervene in patients with respiratory emergencies, shock, and cardiopulmonary arrest by using high-performance team dynamics and high-quality individual skills.

### Learning Objectives

After successfully completing this course, you will be able to

- Perform high-quality cardiopulmonary resuscitation (CPR) per American Heart Association (AHA) basic life support (BLS) recommendations
- Perform your role as a high-performance team member
- Differentiate between patients who require immediate intervention and those who don't
- Differentiate between respiratory distress and failure
- Perform early interventions for respiratory distress and failure
- Differentiate between compensated and hypotensive shock
- Perform early interventions for the treatment of shock
- Differentiate between unstable and stable patients with dysrhythmias
- Demonstrate treatment of dysrhythmias
- Implement postarrest management



## Course Description

To help you achieve these objectives, the PALS Provider Course includes

- BLS competency testing
- Skills stations
- Case scenario discussions and simulations
- Case scenario testing stations
- An exam

## BLS Competency Testing

To receive an AHA PALS Provider course completion card, you must pass 2 BLS tests: the Child CPR and AED Skills Test and the Infant CPR Skills Test.

The PALS Provider Course does not include detailed instructions on how to perform basic CPR or how to use an automated external defibrillator (AED), so you must know this in advance. Consider taking a BLS course to prepare, if necessary.

Before taking the PALS Provider Course, read the *PALS Provider Manual* to prepare for taking the BLS tests.

## Skills Stations

The course includes the following skills stations:

- Airway Management
- Rhythm Disturbances/Electrical Therapy
- Vascular Access

In the skills stations, you will use the skills station competency checklists as you practice specific skills and then demonstrate competency. Your instructor will evaluate your skills by using the criteria in these checklists.

To prepare, see the Appendix for the skills station competency checklists, which list detailed steps for performing each skill.

## Airway Management Skills Station

In the Airway Management Skills Station, you will show your understanding of oxygen (O<sub>2</sub>) delivery systems and airway adjuncts. You will practice and demonstrate competency in airway and breathing supports, including

- Inserting an oropharyngeal airway
- Providing effective bag-mask ventilation
- Suctioning with an oropharyngeal airway and endotracheal (ET) tube
- Confirming advanced airway device placement by physical examination and an exhaled CO<sub>2</sub> detector device
- Securing the ET tube

If it is within your scope of practice, you may be asked to demonstrate advanced airway skills, including correctly inserting an ET tube.

Review the Bag-Mask Ventilation and Endotracheal Intubation sections in Resources for Managing Respiratory Emergencies in Part 8 of this manual to learn more about airway management skills.



American  
Heart  
Association.

# **Pediatric Advanced Life Support**

PROVIDER MANUAL

© 2020 American Heart Association

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10 9 8 7 6 5 4 3 2 1

## Acknowledgments

The American Heart Association thanks the following people for their contributions to the development of this manual: Kelly D. Kadlec, MD, MEd; Mary E. McBride, MD, MEd; Reylon Meeks, RN, BSN, MS, MSN, EMT, PhD; Sallie Johnson, PharmD, BCPS; Adam Cheng, MD; Ian R. Drennan, ACP, PhD; Susan Fuchs, MD; Mike Helbock, MICP, NR-P, SEI; Elizabeth A. Hunt, MD, MPH, PhD; Garth Meckler, MD, MSHS; Ryan Morgan, MD, MTR; Stephen M. Schexnayder, MD; Sarah Tabbutt, MD, PhD; Janice A. Tijssen, MD, MSc; and the AHA PALS Project Team.



PALS Student Resources can be found at [eLearning.heart.org](http://eLearning.heart.org).  
Contact your Training Center Coordinator for more information about  
accessing these before your course.

To find out about any updates or corrections to this course, visit  
[www.heart.org/courseupdates](http://www.heart.org/courseupdates).

# Pediatric Advanced Life Support Course Roster

Emergency Cardiovascular Care Programs



American  
Heart  
Association®

life is why™

## Course Information

- ☐ PALS Course
- ☒ PALS Update Course
- ☐ HeartCode® PALS
- ☐ PALS Instructor

Lead Instructor Scott Hubbell

Lead Instructor ID# 03080756766

Card Expiration Date April 2020

Training Center Finney County EMS

Training Center ID# 165

Training Site Name (if applicable) CMCI

Address 100 E. College Dr.

City, State ZIP Colby, KS 67701

Course Location \_\_\_\_\_

Course Start Date/Time 1-30-20/0900

Course End Date/Time 1-30-20/1200

Total Hours of Instruction 3

No. of Cards Issued 1

Student-Manikin Ratio 1

Issue Date of Cards 1-30-20

## Assisting Instructor (Attach copy of instructor aligned with a TC other than the primary TC)

Name and Instructor ID#	Card Exp. Date	Name and Instructor ID#	Card Exp. Date
1.		5.	
2.		6.	
3.		7.	
4.		8.	

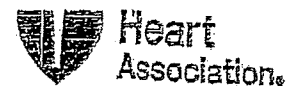
I verify that this information is accurate and truthful and that it may be confirmed. This course was taught in accordance with AHA guidelines.

[Signature]  
Signature of Lead Instructor

1-30-20  
Date



# PALS Classroom Course



Date 1/30/20 Instructor(s) Scott

Training Center \_\_\_\_\_ Location Colby, KS

Please answer the following questions about your instructor.

My instructor:

1. Provided instruction and help during my skills practice session  
☒ a. Yes  
☐ b. No
2. Answered all of my questions before my skills test  
☒ a. Yes  
☐ b. No
3. Was professional and courteous to the students  
☒ a. Yes  
☐ b. No

Please answer the following questions about the course content.

1. The course learning objectives were clear.  
☒ a. Yes  
☐ b. No
2. The overall level of difficulty of the course was  
☐ a. Too hard  
☐ b. Too easy  
☒ c. Appropriate
3. The content was presented clearly.  
☒ a. Yes  
☐ b. No
4. The quality of videos and written materials was  
☐ a. Excellent  
☒ b. Good  
☐ c. Fair  
☐ d. Poor
5. The equipment was clean and in good working condition.  
☒ a. Yes  
☐ b. No

Please answer the following questions about your skill mastery.

1. The course prepared me to successfully pass the skills session.  
☒ a. Yes  
☐ b. No
2. I am confident I can use the skills the course taught me.  
☒ a. Yes  
☐ b. No  
☐ c. Not sure

3. I will respond in an emergency because of the skills I learned in this course.

- ☒ a. Yes  
☐ b. No  
☐ c. Not sure

4. I took this course to obtain professional education credit or continuing education credit.

- ☒ a. Yes  
☐ b. No

Optional questions:

Have you previously taken this course via another method, such as in a classroom or online?  
 Which learning method do you prefer and why?

Were there any strengths or weaknesses of the course that you would like to comment on?

What would you like to see in future courses developed by the AHA?

## After Completing This Evaluation

Please return this evaluation to your instructor before you leave the class.

Alternatively, you can send the evaluation to your instructor's Training Center. Ask your instructor for the contact information.

If you have significant problems or concerns with your course, please contact the AHA at 877-AHA-4CPR.



## Citizens University Course Evaluation

Course Name: \_\_\_\_\_

Instructor: \_\_\_\_\_

### About the Instructor

	5 Strongly Agree	4 Agree	3 Neither Agree nor Disagree	2 Disagree	1 Strongly Disagree	N/A Does Not Apply
1. Was well prepared for class and demonstrated knowledge of course materials.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. Explained concepts and ideas clearly.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. Made the course interesting.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. Increased my understanding of the subject.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. Please include any additional suggestions you have about the instructor or guest speakers. Constructive suggestions for improvement are welcome.						

### About the Course

	5 Strongly Agree	4 Agree	3 Neither Agree nor Disagree	2 Disagree	1 Strongly Disagree	N/A Does Not Apply
1. Course objectives were clearly presented.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. Course materials were well-prepared and were in a helpful sequence.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. The course increased my knowledge and understanding of the subject.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. Please include any additional suggestions you have about the course structure. Constructive suggestions for improvement are welcome.						

### About the Student

	5 Strongly Agree	4 Agree	3 Neither Agree nor Disagree	2 Disagree	1 Strongly Disagree	N/A Does Not Apply
1. I would take another course with this instructor.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. I would recommend this course to another.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. Please provide any suggestions, comments, or ideas you have for improving the experience at Citizens University.						





**Long Term CNE Provider Checklist**  
(K.A.R. 60-9-107)

**Name of Provider:** Fort Scott Community College, LT0205-0506 Five-Year Renewal

**Name of Program Coordinator:** Darcus Kottwitz, MSN, RN

**Date to CNE Committee:** June 16, 2021

Information Required	Received	N/A
Completed application for initial approval or five-year renewal for LT CNE providership shall be submitted at least 60 days before a scheduled board meeting	04/12/2021	
The name and address of the organization on the application	X	
The name and address of the department or unit within the organization responsible for approving CNE, if different from the name and address of the organization		X
The name, education and experience of the program coordinator responsible for CNE	Darcus Kottwitz, MSN, RN	
• Be a licensed professional nurse	X	
• Have three years of clinical experience	X	
• Have one year of experience in developing and implementing nursing education	X	
• Have a baccalaureate degree (unless held this position for the provider at least five years immediately prior to January 1, 1977)	X	
<b>Policies &amp; Procedures:</b>		
Written policies and procedures, including at least the following areas:		
• Assessing the need and planning for CNE activities	X	
• Fee assessment	X	
• Advertisements or offering announcements. Published information shall contain the following statement: "(name of provider) is approved as a provider of continuing nursing education by the Kansas State Board of Nursing. This course offering is approved for contact hours applicable for APRN, RN, or LPN relicensure. Kansas State Board of Nursing provider number: "	X	
• Notice of change of coordinator or required policies and procedures. The program coordinator shall notify the board in writing of any change of the individual responsible for the providership or required policies and procedures within 30 days	X	
For long term providers, the policies and procedures for the offering approval process shall include the following:		

• A summary of the planning	X	
• The behavioral objectives	X	
• The content, which shall meet the definition of CNE in KSA 65-1117	X	
• The instructor's education and experience, documenting knowledge and expertise in the content area	X	
• A current bibliography that is reflective of the offering content. The bibliography shall include books published within the past 10 years, periodicals published within the past five years, or both	X	
• An offering evaluation that includes each participant's assessment of the following:		
▪ The achievement of each objective	X	
▪ The expertise of each individual presenter	X	
An approved provider may award any of the following:		
• Contact hours as documented on an offering agenda for the actual time attending, including partial credit for one or more contact hours	X	
• Credit for fractions of hours over 30 mins to be computed towards a contact hour	X	
• Instructor credit, which shall be twice the length of the first-time presentation of an approved offering, excluding an standardized, prepared curriculum	X	X
• Independent study credit that is based on the time required to complete the offering, as documented by the provider's pilot test results		X
• Clinical hours		X
<b>Documentation of Attendance</b>		
Each provider shall maintain documentation to verify that each participant attended the offering. The provider shall require each participant to sign a daily roster, which shall contain the following information:		
• The provider's name, address, provider number, and coordinator	X	
• The date and title of the offering, and the presenter or presenters	X	
• The participant's name and license number and the number of contact hours awarded	X	
Each provider shall maintain documentation to verify completion of each independent study offering, if applicable. To verify completion of an independent study offering, the provider shall maintain documentation that includes the following:		
• The provider's name, address, provider number, and coordinator		X
• The participant's name and license number, and the number of contact hours awarded		X

• The title of the offering		X
• The date on which the offering was completed		X
• Either the completion of a posttest or a return demonstration		X
<b>Certificate of Attendance/CE Transcript</b>		
A certificate of attendance shall be awarded to each participant after completion of an offering, or a CE transcript shall be provided according to the policies and procedures of the long-term provider		
Each certificate and each CE transcript shall be complete before distribution to the participant		
Each certificate and each CE transcript shall contain the following information:		
• The provider's name, address and provider number	X	
• The title of the offering	X	
• The date or dates of attendance or completion	X	
• The number of contact hours awarded and, if applicable, the designation of any independent study or instructor contact hours awarded	X	
• The signature of the individual responsible for the providership	X	
• The name and license number of the participant	X	
<b>Recordkeeping &amp; Storage</b>		
For each offering, the approved provider shall retain the following for two years:		
• A summary of the planning	X	
• A copy of the offering announcement or brochure	X	
• The title and objectives	X	
• The offering agenda or, for independent study, pilot test results	X	
• A bibliography	X	
• A summary of the participants' evaluations	X	
• Each instructor's education and experiences	X	
• Documentation to verify completion of the offering	X	
The record storage system used shall ensure confidentiality and easy retrieval of records by authorized individuals	X	
<b>Program Evaluation Plan</b>		
For long-term providers, a copy of the total program evaluation plan	X	
<b>Two Proposed Offerings</b>		
The provider shall submit two proposed offerings, including the following:		
	Nurse Power!	Pharmacology ..
• A summary of planning	X	X

• A copy of the offering announcement or brochure	X	X
• The title and behavioral objectives	X	X
• The offering agenda or, for independent study, pilot test results	X	X
• Each instructor's education and experience	X	X
• A current bibliography	X	X
• The offering evaluation form	X	X

12/2018

Review Completed by Chelsey Stephenson, CNE Education Specialist on May 25, 2021.

**Reference No.:** 24857    **Date submitted:** Apr 12 10:39 2021

**radio** ~ Renewal

**Providername** ~ Fort Scott Community College

**providernum** ~ LT 0205-0506

**legalbody** ~ ~

**address** ~ 2108 South Horton

**adress2** ~ 810 West Burke

**telephone** ~ 6202232700

**email** ~ darcusk@fortscott.edu

**coordinator** ~ Darcus Kottwitz MSN, RN

**date** ~ 04-12-2021

**planningce** ~ The planning committee consists of the three full-time faculty members one adjunct faculty member and the Director of the nursing program. Any suggestions for CNE programs and/or requests from the professional service area are presented at our bi-yearly meetings. These suggestions and/or requests are evaluated for their content ability to meet the definition of a CNE. The CNE must offer the professional community the ability to enhance their practice, education, administrative, research or theory development to ultimately improve the health of the public.

**feeassessment** ~ Fort Scott Community College regulates the fee assessment for each CNE hour that is offered. Full refunds are given to a participant enrolled in a CNE that is cancelled or if the participant cancelled by the announced date for cancellation with a refund. Policy for insufficient fund checks is per Fort Scott Community College protocol.

**advertisement** ~ Notification of scheduled CNE to the target areas are accomplished by either/or public mail system, e-mail or announcements in target areas newspapers. All advertisement and/or offering announcements will contain the following statement.

"Fort Scott Community College is approved as a provider of continuing education by the Kansas Board of Nursing. This course offering is approved for contact hours applicable for RN or LPN licensure. Kansas Board of Nursing provider number LT0205-0506." Example of published information is included per brochure of previous offering. Due to the increased use of the electronic communication systems offerings are also announced to our professional colleagues via FSCC Facebook and the internet.

**approvalprocess** ~ First, the planning committee establishes the value of the offering to the professional community. The next step of the planning criteria is the feasibility of Fort Scott Community College

Nursing Department to offer the CNE. This decision is based on cost to college and the access to a suitable location for the offering. After it has been determined that offering this CNE is feasible the following objectives are evaluated and met.

A summary of planning is completed and incorporated into the offerings file, indicating the acceptability of the offering for presentation.

Behavioral objectives are stated as measurable learner behaviors.

The CNE must offer the professional community the ability to enhance their practice, education, administrative, research or theory development to ultimately improve the health of the public.

Instructor's resume must be current and include education, experience and knowledge/expertise in the area of the CNE.

Bibliography must be current. References must be within the last 10 years for books and within the last 5 years for periodicals.

Evaluation form that includes assessment of the learner's achievement of each objective and the expertise of the individual presenter.

**contacthours** ~ Participant must attend at least 30 minutes of each hour of the offering to receive partial credit. Credit will be given for fractions of hours over four contact hours. Credit will be given for fractions of hours over one contact hour if the offering is documented on the agenda as a fraction of an hour.

Instructor credit will be given at the rate of two contact hours for every hour of the offering. This applies to first-time presentation of the material only and does not include standardized prepared curriculum.

We do not offer independent study CNE.

Clinical hours would be calculated on a three contact hours to one hour of CNE credit. If participant arrives late or leaves early he/she must sign in at the time arrived and /or sign out at the time departing the offering. Participants that do not follow this procedure will not receive partial credit according to our criteria.

**verifycompletion** ~ Each participant is required to sign a daily roster sheet at the beginning of each day and after lunch break. A representative of Fort Scott Community College will be present at the sign in table.

The roster contains the following information:

Provider's name, address, provider number and coordinator. Date, title of the offering and the presenter(s).

Participant's name, address, telephone number, license number and number of contact hours awarded.

We do not offer independent study CNE.

Certificates contain the following:

Provider's name, address and provider number.  
Title of the offering, date(s), of attendance, number of contact hours awarded or number of instructor contact hours awarded.  
Signature of the individual responsible for the providership.  
Name and license number of the participant.  
A certificate of attendance shall be awarded to each participant after completion of offering. Each certificate shall be complete before distribution to the participant. Sample copy of roster is enclosed

Sample of certificate is enclosed.

**recordkeeping** ~ The following information is retained for at least two years on each offering:

Summary of the planning

Copy of the announcement.

Title, objectives and offering agenda.

Summary of participant evaluations.

Each instructor's education and experience.

Documentation to verify completion of the offering. Information regarding CNE offerings is filed in alphabetical order in a locked file

cabinet.

The file cabinet is located in the office of the CNE coordinator.

The Director of the nursing program and the departmental Administrative Assistant have access to the material.

**noticeofchange** ~ The program coordinator will notify the board in writing of any changes in policy, procedures or of the individual responsible for the provider ship within 30 days of the change

**programevaluation** ~ A copy of the Total Program Evaluation for 2021 is attached. We do not offer independent study CNE..

**Submission date** ~ 04-12-2021 10:39:36

**Form ID** ~ 1672730



## Darcus Kottwitz

---

705 East Street

Iola, Ks 66749

Home Phone (620)-496-7381

**PROFESSIONAL OBJECTIVE:** To continue being involved in nursing education.

### EDUCATION

2002	Pittsburg State University---Master of Science in Nursing
1995	Pittsburg State University---Bachelor of Science in Nursing
1993	Allen County Community College---Associate in Arts Degree
1969	Osawatomie State Hospital---Remotivation Therapist Certification

### HONORS

1995-2003	Sigma Theta Tau International Honor Society of Nursing
1993	National Dean's List
	Vice-President of Phi Theta Kappa Honor Society
1991-1994	Dean's Honor Roll

### EMPLOYMENT

2013-Present	<u>Fort Scott Community College</u> Lab Coordinator/Instructor, tutor for all areas of the nursing program. I coordinate and assist with skill check-offs and the simulation lab for both levels of the nursing program. Also involved in creating and writing reports, mentoring new faculty, assisting with Blackboard and ATI education and testing, and involved in maintaining accreditation reports. CNE Coordinator. Lead instructor for Mental Health, Medical Terminology and Applied Math for Nursing. I am certified as a CNA and CMA instructor and teach both courses as an online hybrids.
1999-2013	<u>Nursing Instructor, Fort Scott Community College</u> Full-time instructor for Pharmacology, The Evolving Family, Mental Health and Math for Meds. Clinical instructor for Mental Health. Level Coordinator for the first and second levels of the nursing program.
1996-1999	<u>Nursing Instructor, Fort Scott Community College</u> Part-time clinical instructor for Medical-Surgical rotations for first and second levels. Math for Meds and Introduction to Nursing instructor.

- 1996-2005     Supervisor, Moran Manor  
Weekend supervisor in charge of all departments at the facility.
- 1995-1996     Supervisor and MDS Coordinator, Twin Oaks Health Care  
Weekend supervisor in charge of nursing and MDS coordinator for Facility.
- 1991-1995     Attending college for my BSN.
- 1990-1992     Store Clerk, Skidmore Davis Paint Store  
Store clerk. Worked extensively with the public and inventory.
- 1990-1990     General Manager, Coastal Mart  
Responsible for payroll, bookkeeping, personnel and inventory.
- 1989-1990     Kept books for my husband's painting company.
- 1985-1989     General Manager, Best Western Majestic Inn  
Responsible for payroll, accounts payable and receivable, human resources, advertising, budgeting, maintaining a running inventory and public relations.
- 1983-1985     Kept books for my husband's painting company.
- 1982-1983     Homemaker.
- 1981-1982     Desk Clerk, Best Western Majestic Inn  
In charge of reservations, bookkeeping and public relations.
- 1977-1981     Took time off to raise family.
- 1976-1977     Nursing Tech in Obstetrics, Allen County Hospital  
Worked on the surgical floor and obstetrics. Assisted with labor and delivery, newborn, and postpartum care.
- 1973-1976     Evening Charge Tech, Autumn Manor Nursing Homes  
Responsible for the care of 50 residents and supervision of two nursing assistants. Duties included resident care, charting, giving medications, assessing residents and relaying information to other medical personnel.
- 1969-1973     Took time off to raise family.
- 1967-1969     Nursing Assistant and Remotivation Therapist, Autumn Manor Nursing Homes.  
General resident care and group therapy.

## PROFESSIONAL ACTIVITIES

- |              |  |
|--------------|--|
| 2006-Present | Continue to contribute and/or review various nursing educational materials.  |
| 2006         | Reviewer for the revision of the textbook, <i>Pharmacology for Nurses</i> to be published in 2007.   |
| 2005         | Contributor to revision of the textbook, <i>Pharmacology for Nurses</i> to be published later in 2005 or early in 2006.  |
| 2005         | Reviewer for NCLEX review text to be published later in 2005.  |
| 2005         | Involved in a research project with Dr. Sharon Bowling, PhD on Sensory Perception in Alzheimer's disease.  |
| 2005         | Reviewer for a textbook, <i>Maternal Child Nursing Care</i> published spring 2006 by Pearson/Prentice Hall.  |
| 2004         | Contributor to workbook for <i>Pharmacology for Nurses</i> , published by Pearson/Prentice Hall in spring 2005.  |
| 2003         | Published article written on Elder Abuse using graduate thesis as the main source of references and background material for the article. The article was co-authored by Dr. Sharon Bowling, PhD and published in the fall of 2003 by Kansas Nurse. |
| 2003         | Certification for CNA and CMA instructor approved.   |
| 2001         | Collaborated in organizing a support group for home caregivers of family members with Alzheimer's disease.   |
| 1998-Present | Developed and present a Continuing Nursing Education class for Trends in Alzheimer Care.   |
| 1996         | C.A.R.E. assessment Certification  |
| 1993-1995    | Member of Kansas Nursing Students Association.   |

## COMMUNITY ACTIVITIES

- |           |   |
|-----------|---|
| 2001-2002 | Vice-President of the Pittsburg State University Nursing Alumni Association.  |
| 2001-2002 | Rejoined Business and Professional Women Organization.  |
| 1986-1993 | Member of Business and Professional Women Organization.<br>President 1989-1991. Involvement in many community projects. |

## REFERENCES

References can be supplied per request.

**KANSAS STATE BBOARD OF NURSING  
LONG-TERM CONTINUING NURSING EDUCATION (CNE)  
PROVIDER FIVE -YEAR RENEWAL**

<b>Administration</b>		
<b>Regulation</b>	<b>Regulation Description</b>	<b>Additional Information</b>
60-9-107 b (1) (A)	Fort Scott Community College 2108 South Horton Fort Scott, KS 66701	
60-9-107 b (1) (B)	Fort Scott Community College Nursing Department 810 West Burke Street Fort Scott, KS 66701	Any communication sent through the federal mail system intended for the Fort Scott Community College Nursing Department is to be addressed to Fort Scott Community College, 2108 South Horton, Fort Scott, KS 66701 Attention: Nursing Department per college policy.
60-9-107 (2) 60-9-107 c (1)	Darcus M. Kottwitz RN, MSN Received a BSN in 1995 and a MSN in 2002 from Pittsburg State University, Pittsburg KS. Licensed in Kansas since 1995. Also licensed in Missouri. Full-time lab coordinator/nursing instructor 2016-present. Part-time nursing instructor <del>2012</del> <u>2013-</u> 2016 Full-time nursing instructor 1999- <u>2015</u> <u>2013</u> Clinical instructor for Fort Scott Community College Nursing Program 1996-1999. Employed by Moran Manor, Moran KS from 1996-2005 as a weekend charge nurse. Contributor to several nursing instructional textbooks. Test item writer for NCLEX review online sites.	
<b>Program Management – Written Policies and Procedures</b>		
60-9-107 b (3) (A)	The planning committee consists of the <del>four</del> <u>three</u> full-time faculty members one	

	adjunct faculty member and the Director of the nursing program. Any suggestions for CNE programs and/or requests from the professional service area are presented at our <del>monthly</del> <u>bi-yearly</u> meetings. These suggestions and/or requests are evaluated for their content ability to meet the definition of a CNE. The CNE must offer the professional community the ability to enhance their practice, education, administrative, research or theory development to ultimately improve the health of the public.	
60-9-107 b (3) (B)	Fort Scott Community College regulates the fee assessment for each CNE hour that is offered.	Full refunds are given to a participant enrolled in a CNE that is cancelled or if the participant cancelled by the announced date for cancellation with a refund. Policy for insufficient fund checks is per Fort Scott Community College protocol.
60-9-107 b (3) (C)	Notification of scheduled CNE to the target areas are accomplished by either/or public mail system, e-mail or announcements in target areas newspapers. All advertisement and/or offering announcements will contain the following statement. "Fort Scott Community College is approved as a provider of continuing education by the Kansas Board of Nursing. This course offering is approved for contact hours applicable for RN or LPN licensure. Kansas Board of Nursing provider number LT0205-0506."	Example of published information is included per brochure of previous offering. Due to the increased use of the electronic communication systems <del>later offerings have been</del> <u>are also</u> announced to our professional colleagues via <u>FSCC Facebook and the internet</u> .
60-9-107 b (3) (D) 60-9-107 d	First, the planning committee establishes the value of the offering to the professional community. The next step of the planning criteria is the feasibility of Fort Scott Community College Nursing Department to offer the CNE. This decision is based on cost to college and the access to a suitable location for the offering. After it has been determined that offering this CNE is feasible the	Example of criteria requirements included in the enclosed material. Sample of an offering. Presenter's resume Evaluation form.

	<p>following objectives are evaluated and met.</p> <p>A summary of planning is completed and incorporated into the offerings file, indicating the acceptability of the offering for presentation.</p> <p>Behavioral objectives are stated as measurable learner behaviors.</p> <p>The CNE must offer the professional community the ability to enhance their practice, education, administrative, research or theory development to ultimately improve the health of the public.</p> <p>Instructor's resume must be current and include education, experience and knowledge/expertise in the area of the CNE.</p> <p>Bibliography must be current. References must be within the last 10 years for books and within the last 5 years for periodicals.</p> <p>Evaluation form that includes assessment of the learner's achievement of each objective and the expertise of the individual presenter.</p>	
<p>60-9-107 b (3) (E) 60-9-107 e</p>	<p>Participant must attend at least 30 minutes of each hour of the offering to receive partial credit. Credit will be given for fractions of hours over four contact hours. Credit will be given for fractions of hours over one contact hour if the offering is documented on the agenda as a fraction of an hour.</p> <p>Instructor credit will be given at the rate of two contact hours for every hour of the offering. This applies to first-time presentation of the material only and does not include standardized prepared curriculum.</p> <p>We do not offer independent study CNE. Clinical hours would be calculated on a three contact hours to one hour of CNE credit.</p>	<p>If participant arrives late or leaves early he/she must sign in at the time arrived and /or sign out at the time departing the offering. Participants that do not follow this procedure will not receive partial credit according to our criteria.</p>
<p>60-9-107 b (3) (F) 60-9-107 f</p>	<p>Each participant is required to sign a daily roster sheet at the beginning of each day <u>and after lunch break</u>. A representative of</p>	<p>Sample copy of roster is enclosed</p>

60-9-107 g	<p>Fort Scott Community College will be present at the sign in table.</p> <p>The roster contains the following information:</p> <p>Provider's name, address, provider number and coordinator. Date, title of the offering and the presenter(s).</p> <p>Participant's name, address, telephone number, license number and number of contact hours awarded.</p> <p>We do not offer independent study CNE.</p> <p>Certificates contain the following:</p> <p>Provider's name, address and provider number.</p> <p>Title of the offering, date(s), of attendance, number of contact hours awarded or number of instructor contact hours awarded.</p> <p>Signature of the individual responsible for the providership.</p> <p>Name and license number of the participant.</p> <p><u>A certificate of attendance shall be awarded to each participant after completion of offering. Each certificate shall be complete before distribution to the participant.</u></p>	<p>Sample of certificate is enclosed.</p>
60-9-107 b (3) (G) 60-9-107 h	<p>The following information is retained for at least two years on each offering:</p> <p>Summary of the planning</p> <p>Copy of the announcement.</p> <p>Title, objectives and offering agenda.</p> <p>Summary of participant evaluations.</p> <p>Each instructor's education and experience.</p> <p>Documentation to verify completion of the offering.</p>	<p>Information regarding CNE offerings is filed in alphabetical order in a locked file cabinet.</p> <p>The file cabinet is located in the office of the CNE coordinator.</p> <p>The Director of the nursing program and the departmental Administrative Assistant have access to the material.</p>
60-9-107 b (3) (H)	<p>The program coordinator will notify the board in writing of any changes in policy, procedures or of the individual responsible for the <del>providership</del><u>provider ship</u> within 30 days of the change</p>	
60-9-107 b (3) (I)	<p>A copy of the Total Program Evaluation for <del>2016-2021</del> is attached. We do not offer independent study CNE.</p>	




**TOTAL PROGRAM EVALUATION  
FORT SCOTT COMMUNITY COLLEGE  
MANAGEMENT**

Area	Reviewed By	How Often?	What to Review?	Date Evaluated	Results	Actions Taken
<b>Offerings</b> (See appendices (M, N, O))	Darcus Kottwitz Cheryl Craig Judy Nelson Jennifer Jackman Jordan Howard	Annually	1. Compare offerings with needs assessment. 2. Analyze offerings for content relevant to education of learners, outcome based and current.	April 11, 2021	Determined by the committee members that the list of offerings needed to include workshops on nursing education through simulation lab incorporation to meet the needs of the community and surrounding area in relevance to content for education of the learners. The present offerings were determined to be current and outcome based. Determined by the committee members offerings for active learner participation educational methods be added to the offerings.	No changes made in this area.
<b>Individual Program File</b> (See appendices (K, O, M, I))	Darcus Kottwitz Cheryl Craig Judy Nelson Jennifer Jackman Jordan Howard	Annually	1. Syllabus 2. Brochure with objectives 3. Handouts with bibliography 4. Speakers vitae 5. Evaluation summary 6. Roster	April 11, 2021	Determined by the committee members to meet the needs of the program.	Roster format complies with state requirements.

<b>Policy and Procedure</b> (See appendices B,O)	Darcus Kottwitz Cheryl Craig Judy Nelson Jennifer Jackman Jordan Howard	Annually	Examine policies and procedures on: Required: 1. Registration 2. Roster 3. Attendance 4. Partial credit 5. Certificates 6. Brochures 7. Instructors 8. Record keeping 9. Instructor credit Optional: 10. Cancellations 11. Refunds 12. Fees 13. Co-sponsorship 14. Compressed video programming	April 11, 2021	Determined by the committee members to meet the needs of the program with the exception of instructor credit and/or compensation for the programs. It has again been recommended that instructors be guaranteed compensation for the programs that are offered regardless of the number of attendees. Also the amount of compensation for on-line programs continues to be evaluated.	Changes to the program are determined necessary in the area of instructor credit and/or compensation. This continues to be an on-going recommendation. There has not been a final decision made in regard to these recommendations. Policies related to payment of adjunct college class instructors present problems with this issue. In-house speakers and webinars may be funded by the Perkins Grant and The KNI Grant.
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<b>Learning Needs Assessment</b> (See app. M)	Darcus Kottwitz Judy Nelson Jennifer Jackman Jordan Howard Cheryl Craig	Annually	1. Target population 2. Questionnaires or surveys 3. Frequency of programs	April 11, 2021	Determined by the committee members that to better serve the target population offerings on the use of simulation labs in nursing educations be included in the current offerings. Frequency of programs, time frames and methods of presentation for these programs were determined to require different sequence of time frames and additional methods of presentation to meet the needs of the target population.	Programs that are offered as on-line sessions to accommodate more of the target population are an on-going change in the method of presentation. This method of presenting sessions remains in the developmental process. We still do not have an instructor that is actively involved in the process of developing an on-line offering. There has been discussion concerning the use of IDL or Zoom for offerings. Nursing have their own IDL lab and Zoom capabilities at the Burke Street Campus giving the nursing department control over the scheduling process. This continues to be an on-going process for development regarding the accessibility of qualified presenters for the programs. The department has presented offerings through Webinar. This has proven successful.
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**TOTAL PROGRAM EVALUATION  
FORT SCOTT COMMUNITY COLLEGE  
ADMINISTRATION**

<b>Area</b>	<b>Reviewed By</b>	<b>How Often</b>	<b>What to Review</b>	<b>Date valuation</b>	<b>Results</b>	<b>Action Taken</b>
<b>Organization &amp; Philosophy</b> (See appendices C, D)	Darcus Kottwitz Cheryl Craig Judy Nelson Jennifer Jackman Jordan Howard	Annually	1. Review & update organizational chart & philosophy statement.	April 11, 2021	Determined by the committee members to meet the needs of the program.	No changes to the program were determined necessary in this area.
<b>CNE Goals &amp; Objectives</b> (See appendices B, C)	Darcus Kottwitz Cheryl Craig Judy Nelson Jennifer Jackman Jordan Howard	Annually	1. Review CNE Goals & Objectives to see if they are being met. 2. Review CNE Organizational Chart.	April 11, 2021	Determined by the committee members to meet the needs of the program.	No changes to the program were determined necessary in this area.
<b>Budget</b> (See appendix O)	Darcus Kottwitz Cheryl Craig Judy Nelson Jennifer Jackman Jordan Howard	Annually	1. Plan budget 2. Review past year's budget 3. Review cost of programs.	April 11, 2021	Suggestion from committee members is to present a plan to base reimbursement on the following: Adjunct salary/hour for presentation and 1.5 hours prep per hour of presentation.	This suggestion will again be presented to the instruction and finance offices for discussion and approval/denial.
<b>Program Coordinator</b> (See appendices E, F)	Darcus Kottwitz Cheryl Craig Judy Nelson Jennifer Jackman Jordan Howard	Annually	1. Review and update job description. 2. Update vitae. 3. Review title and license.	April 11, 2021	Program coordinator will remain Darcus Kottwitz RN, MSN.	No changes to the program were determined necessary in this area.

<b>Advisory Committee</b> (See appendix G)	Darcus Kottwitz Cheryl Craig Judy Nelson Jennifer Jackman Jordan Howard	Annually	1. Review number of meetings held. 2. Update membership roster. 3. Review minutes in relation to committee functions.	April 11, 2021	No change in meetings or committee functions.	No changes to the program were determined necessary in this area.

**TOTAL PROGRAM EVALUATION PLAN  
FORT SCOTT COMMUNITY COLLEGE**

<b>Area</b>	<b>Reviewed By</b>	<b>How Often</b>	<b>What to review</b>	<b>Date Evaluated</b>	<b>Results</b>	<b>Action Taken</b>

Total Program Evaluation (See appendix P)	Darcus Kottwitz Cheryl Craig Judy Nelson Jennifer Jackman Jordan Howard	Annually	1. Administration 2. Program Management 3. Evaluation of plan	April 11, 2021	<p>1. Organization, Philosophy, CNE Goals, Objectives were determined by the committee to meet the needs of the program. It was determined that changes in the Budget were necessary to compensate instructors of programs regardless of the number of attendees and to evaluate the amount of compensation for on-line offerings.</p> <p>2. Offerings, Individual Program File, were determined by the committee to meet the needs of the program. Policy and Procedure required adjustments also to accommodate changes in the compensation for instructors of the programs, both on and off-line.</p> <p>Learning Needs Assessment: target population and questionnaires or surveys were determined by the</p>	<p>1. Changes to the Budget area of the program continue to be determined necessary for compensation of instructors for on and off-line offerings.</p> <p>2. Programs offered as on-line sessions to accommodate more of the target population are still being considered as an on-going change. The amount of compensation for developing an on-line offering continues to be undetermined at this point. The amount of compensation factor presents in the continuing difficulty of recruiting an instructor to develop online CNEs.</p> <p>Included in our future plans for the up-coming year of 2021-2022 are continuing considerations related to the ongoing CDC guidelines for gatherings due to COVID- 19.</p> <p>3. The revisions stated earlier in the evaluation will continue to be in</p>
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					<p>committee to be served by the current offerings. Frequency of programs, time frames and methods of presentation for these programs were determined to require different sequence of time frames and additional methods of presentation to meet the needs of the target population.</p> <p>3. The overall evaluation plan was determined by the committee to meet the needs of the current CNE program now in place at Fort Scott Community College.</p>	<p>progress during the coming 2021-2022 academic year.</p>
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KEYNOTE SPEAKER/ HUMORIST/ MASTER MOTIVATOR

# Donna Cardillo

The Inspiration Nurse RN  
CSP  
FAAN

## FREE CEU EVENT AT FORT SCOTT COMMUNITY COLLEGE

AUGUST 12, 2019- ELLIS FINE ARTS CENTER

9AM-11:30AM

Nurse Power!™ - Harnessing the power,  
the passion and the pride of nursing

- What nurses already have going for them
- How nurses have already changed the face of healthcare
- How to be a nursing advocate
- Techniques for assertive behavior/communication
- Strategies for elevating the profession to new heights

12:30PM-3PM

Nursing- The Future is Ours!

- What's in store for the healthcare delivery system
- Why nursing must reinvent itself
- How nursing will evolve into a "superpower" in healthcare
- Which behaviors, mindsets, and patterns no longer serve us
- How to get in shape to meet the challenges - and opportunities- of the future

### Falling Together

How to Find Balance, Joy,  
and Meaningful Change  
When Your Life Seems

to be Falling Apart

Event sponsored by Fort Scott Community College Department of Nursing.  
For additional questions/ inquiries contact 620-768-2908

CNE 101

# Donna Cardillo

## The Inspiration Nurse

RN  
CSP  
FAAN

### Donna Cardillo Bio

Donna Cardillo, RN, CSP is The Inspiration Nurse. She is a powerhouse of energy, wisdom, humor, and solid content and has been referred to as a positive force of nature who lights a path for others to follow. She is an expert blogger at **DoctorOz.com** and the original “Dear Donna” columnist at **Nurse.com**.

Donna travels the world inspiring and empowering individuals to move beyond fear and live and work to their highest potential. She does that as a keynote speaker, columnist, author, and cut-up. Her accomplished career combines over 25 years of clinical, managerial and business experience, not to mention her stint as a professional singer. Donna’s clinical experience includes emergency and psychiatric nursing. She is a life-long Jersey Girl with attitude and chutzpah to spare!

Donna holds a diploma in nursing, a BS in Health Care Management and an MA in Corporate and Public Communication. She was formerly known as the “Healthcare Careers Expert” at **Monster.com**. She holds the highly sought after **Certified Speaking Professional (CSP)** designation, the highest earned international recognition for professional speakers. Only 10% of all speakers hold this designation. She is one of only 20 nurses in the world with this credential.

Donna has twice been named **NJ Business Woman of the Year** and has received the coveted **Athena Award**, a national leadership award for women. She is also recipient of the prestigious **Vanguard Award** from the National Nurses in Business Association. Donna was designated a **Diva in Nursing** by the Institute for Nursing in NJ for outstanding achievements and excellence in practice. She has also been named one of **50 Best Women in Business** by NJBIZ. Donna was recently named a Fellow in the American Academy of Nursing (FAAN) and will be inducted in October 2018.

Donna appears regularly on television and radio, is frequently quoted in newspapers and magazines and has published numerous articles. Donna has appeared on *The Doctor Oz Show* and the *Today* show and has been featured in the *Los Angeles Times*.

Donna is author of the books, *Falling Together—How to Find Balance, Joy and Meaningful Change When Your Life Seems to be Falling Apart*, *Your First Year as a Nurse – Making the Transition from Total Novice to Successful Professional*, *The ULTIMATE Career Guide for Nurses - Practical Advice for Thriving at Every Stage of Your Career*, and *A Day Book for Beginning Nurses*.

Donna is a founding member and past president of the NJ Chapters of the **National Speakers Association (NSA)** and the **National Association of Women Business Owners (NAWBO)**.

How to overcome their fear of change  
Specific ways to build 'change stamina'  
How to maintain inner calm in the midst of outer chaos  
Strategies for personal and career transformation  
The importance of avoiding obsolescence

future."

Kenn M. Kirksey, RN, MSN, PhD.  
Director  
The Center for Nursing Research,  
SETON Family of Hospitals



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## Taking Care of You, Inc. – The Business of Self-Care

In the hectic, fast-paced, and high-pressure world we live and work in, it's not enough to manage our time; we also have to manage our energy. Energy reserves, depleted by increasing demands, must regularly be replenished. Neglecting this need results in negativity, poor focus, reduced productivity, and ultimately burnout.

Join Donna in a refreshing and upbeat program about the whys and hows of renewal, rejuvenation, and energy management guaranteed to make you happier, healthier, more focused, and yes, even more productive!

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This upbeat program offers practical strategies for:

Keeping a fresh perspective year after year  
Creating, innovating and inspiring when those around you are wilting  
Staying energized and focused in the midst of chaos  
The power of disengagement – what it is and how to do it  
Formulating a dynamic for future success

## Nurse Power!™

*Harnessing the power, the passion, and the pride of nursing*

This uplifting program is designed to remind nurses of their own greatness and empower them for future success. It's guaranteed to make nurses feel good and proud about who they are, what they do, and how they contribute to healthcare. Get ready to be pumped up, turned on, and super-charged with Nurse Power!

Participants will learn:

What they already have going for them  
How nurses have already changed the face of healthcare  
How to be a nursing advocate  
Techniques for assertive behavior/communication  
Strategies for elevating the profession to new heights

## Nursing – The Future is Ours!

Nursing and healthcare stand at the precipice of radical change. As such, a unique opportunity presents itself for us to take on a larger and more pivotal role in healthcare beyond anything that most of us could have ever imagined. As this new role takes shape, nurses will need to change their way of seeing themselves, their profession, and their capabilities. It's time to stop whining and start owning our power!

Participants will learn:

What's in store for the healthcare delivery system over the next 20 years  
Why nursing must reinvent itself  
How nursing will evolve into a 'superpower' in healthcare  
Which behaviors, mindsets, and patterns no longer serve us

How to get in shape to meet the challenges – and opportunities – of the future

## Passionate Leadership: Soaring to New Heights

Today's nursing leaders are challenged like never before. At the same time they are in a unique position to have greater impact on the future of nursing and of healthcare. So how can you stay inspired and continue to grow and evolve as a leader when chaos reigns, morale is low and change is a constant? Spend a high-content, high-fun hour (or longer) with Nurse.com's Dear Donna and get primed, pumped-up and supercharged for the coming decade!

Participants will learn how to:

- Identify and avoid the perils and pitfalls of being an experienced leader
- Become stronger by softening yourself
- Create physical and emotional accessibility
- Stay relevant and inspired year after year
- Self-management strategies to support your success

## Empowered Nurse, Enlightened Practice™

Whether your passion for nursing is fired up or has fizzled out, Empowered Nurse, Enlightened Practice™ is for you! It has been created to empower, energize, and enlighten you for future success.

It is being offered in a setting that will provide an opportunity for individual disengagement (detaching from everyday work and life), relaxation, reassessment and planning, and recharging.

Workshop objectives:

- Honor, value and celebrate your career path and each other
- Heal and renew the healer within
- Build confidence and personal power
- Become a catalyst for positive change in nursing

[Download event flyer \(pdf\)](#)

## CONTINUING EDUCATION COURSE ROSTER

Presenter: Donna Cardillo

Title of Offering: Nurse Power! – Harnessing the Power, the passion and the pride of nursing. Nursing – The Future is Ours!

Provider: Fort Scott Community College

Provider Number: LT 0205-0506

Address: Fort Scott, KS 66701

Date of Course: August 12, 2019

Location of Course: Burke Street Campus

Signature of Coordinator: \_\_\_\_\_

Participant's Name	License Number	August 12, 2019 Morning	August 12, 2019 Afternoon	Total Number of Contact Hours

## **Nurse Power!**

**Harnessing the power, the passion and the pride of nursing**

**Nursing – The Future is Ours!**

### **Participant's Evaluation**

We are interested in your opinion of this continuing educational program. The information will be used as future offerings are planned.

Please use the following scale and circle the appropriate number:

**1 – Not Addressed   2 -- Poor   3 – Average   4 – Above Average   5 – Excellent**

- |   |   |   |   |   |   |
|---|---|---|---|---|---|
| 1. My interest in this program was:                               | 1 | 2 | 3 | 4 | 5 |
| 2. The content of the program was:                                | 1 | 2 | 3 | 4 | 5 |
| 3. The speaker Donna Cardillo was able to maintain my interest:   | 1 | 2 | 3 | 4 | 5 |
| 4. Objectives of the program were met:                            |   |   |   |   |   |
| • Described what nurses already have going for them.              | 1 | 2 | 3 | 4 | 5 |
| • Defined how nurses have already changed the face of healthcare. | 1 | 2 | 3 | 4 | 5 |
| • Discussed how to be a nursing advocate.                         | 1 | 2 | 3 | 4 | 5 |
| • Identified techniques for assertive behavior/communication.     | 1 | 2 | 3 | 4 | 5 |

• Identified strategies for elevating the profession to new heights.	1	2	3	4	5
• Described what is in store for the healthcare delivery system.	1	2	3	4	5
• Explained why nursing must reinvent itself.	1	2	3	4	5
• Described how nursing will evolve into a "superpower" in healthcare.	1	2	3	4	5
• Defined which behaviors, mindsets and patterns no longer serve us.	1	2	3	4	5
• Explained how to get in shape to meet the challenges and opportunities of the future.	1	2	3	4	5

5. What did you like best about this program?

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6. What did you like least about this program?

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7. Do you feel you will utilize this information in your practice in the future?

Yes \_\_\_\_\_ No \_\_\_\_\_

8. I would recommend this program to my colleagues. Yes \_\_\_\_ No \_\_\_\_



## **Fort Scott Community College**

2108 South Horton, Fort Scott, Kansas

### **Certificate of Completion**

**Title:** Nurse Power! Harnessing the power, the passion  
and the pride of nursing

Nursing - The Future is Ours!

**Location:** Fort Scott Community College

**Dates of Course:** January 10, 2020

**Instructor:** Donna Cardillo RN, CSP

**Participant:**

**License Number:**

**Contact Hours:**

Fort Scott Community College, as an Approved Long-Term Provider of Continuing Education by the Kansas State Board of Nursing, offers this program for 5 contact hours applicable for relicensure for LPNs , RNs, and LMHTs.

**Kansas Provider Number:** LT 0205-0506

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Darcus Kottwitz, RN, MSN  
Director of Continuing Education

6  
CEU  
HOURS

FORT SCOTT COMMUNITY COLLEGE  
NURSING DEPARTMENT PRESENTS A

# FREE NURSE CEU EVENT

JANUARY 10, 2020  
ELLIS FINE ARTS CENTER

FEATURING SPEAKER, HUMORIST AND AUTHOR  
BARB BANCROFT, RN, MSN, NP

8:30AM-12:00PM

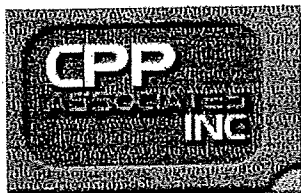
Pharmacology-  
SIMPLIFY DON'T MYSTIFY!

1:00PM-3:30PM

Trends in Infectious  
Diseases

Event sponsored by Fort Scott Community College Department of Nursing.  
For additional questions / inquiries, contact 620-768-2008

CNE 110



# Barb Bancroft

## PROFESSIONAL VITA BARBEE BANCROFT, RN, MSN, PNP

<b>Home</b>
<b>Barb's DVDs</b>
<b>Barb's Books</b>
<b>Seminars</b>
<b>Clinical Updates</b>
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<b>About Barb</b>
<b>Barb's CV</b>
<b>Evaluations</b>
<b>Links</b>
<b>Contact</b>

CPP Associates  
3100 N. Sheridan Rd  
Suite 9C  
Chicago IL 60657 USA  
[bbancr9271@aol.com](mailto:bbancr9271@aol.com)

### Address

3100 N. Sheridan Road #9C  
Chicago, IL 60657 USA  
870-715-7508 (phone for Barb's Associate, Deanne Blach)  
870-749-2276(fax)  
312-543-7688 (Barb's mobile phone)

### E-mail Address:

[bbancr9271@aol.com](mailto:bbancr9271@aol.com)  
[deanne@deanneblach.com](mailto:deanne@deanneblach.com)

### Web Site:

<http://barbbancroft.com>

### EIN

36-429-6167 CPP Associates, Inc.

### Educational Background:

- East Carolina University, Greenville, North Carolina BSN 1968-1972
- University of Virginia, Charlottesville, Virginia PNP, MSN 1976-1978
- University of Chicago, Chicago, Illinois Doctoral studies in Pathology 1980-1984 (Ph.D. not completed)

### Teaching Experience:

- University of Virginia Clinical Coordinator, PNP and FNP programs; Pediatric Graduate Pathophysiology 1978-1980
- Loyola University of Chicago—Undergraduate Pathophysiology Fall 1986, Summer 1987
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- University of Arkansas—Graduate Pathophysiology, Graduate Pharmacology for Nurse Practitioners, Fall 1990-1996
- University of Missouri—Post-Master's NP Program—Advanced Pathophysiology Fall 1997, Fall 1998
- Virginia Commonwealth University—NP Program—Advanced Pharmacology Summer 1999

### Continuing Education Teaching Experience:

I have taught over 2500 continuing education seminars on health related topics to corporate groups and health care professionals throughout the United States and Canada over the past 20 years. I have been the keynote/plenary session presenter for numerous professional associations and corporations including:

The American Association of Spinal Cord Injury Professionals  
The Association of Practitioners for Infection Control  
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The Emergency Nurses' Association

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 The Case Management Society of America  
 The National Association of Biology Teachers  
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 Smith Barney/Citicorp  
 The Pacific Coast Dental Association  
 The Washington State Dental Association  
 The Edmonton Dental Society  
 The Vancouver Island Dental Society

#### **Publications:**

- Editor, bi-monthly newsletter entitled "Clinical Quips and Timely Tips" (2000-2008)
- Editor, monthly eBlurbs (2010-2016)
- Author, *Medical Minutiae* (1994)
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- Contributing Editor: *Bearnes' Adult Med-Surg Nursing.* Mosby (1998)
- Author: Immunology Simplified. *Journal of Perioperative Nursing*, 1994

#### **Clinical Experience:**

- Staff Nurse, Joseph Ladd School, Newport Rhode Island
- Staff Nurse, Pediatrics, Georgetown University Hospital
- Assistant Head Nurse/Pediatrics—Georgetown University Hospital 1972-1976
- Pediatric Nurse Practitioner—Private Family Practice 1976-1978
- Adult Neurology Clinic—University of Chicago 1980-1983

#### **Current Position:**

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**SHAMPOOS, TATTOOS, AND BARBEQUES—INFECTIOUS DISEASE UPDATE**

This one day seminar provides an up-to-the minute overview and update on current issues in the world of infectious diseases. New vaccines, new diseases, new drugs and new bugs!! Barb will answer many questions you might have including: What's new in the world of vaccines? Is it safe to travel the world today? Is it safe to eat the food where you travel and for that matter, is it safe to eat the food you buy here at home? What is the critical prenatal period for the ZIKA virus? There are lots of "microbes on the menu" in today's world—how can you avoid them and what are their clinical manifestations and treatment? Barb discusses the benefits of antibiotic stewardship for all patients—not just patients in long-term care facilities. The ever-expanding role of fecal transplants in chronic *C. diff* patients, as well as some new experimental uses of fecal transplants will be explained. Senior living and STIs will open your eyes! Learn about why DEET is your new summer fragrance, how summer picnics can be hazardous to your health, why hand washing is *still important*, but also why there are a few "hazards" of using alcohol-based gels. Learn how long a tick has to be attached before you can acquire Lyme disease, how long a flu virus lives on a doorknob, how long a herpes virus lives on a toilet seat, the absolute risk of acquiring hepatitis C from a fingerstick, and the absolute risk of acquiring hepatitis B from vertical transition from a mother. Barb's seminar on infectious disease is infectious—with laughter, enthusiasm, and a plethora of pearls you can take home and take back to your clinical practice.

**PHARMACOLOGY—SIMPLIFY DON'T MYSTIFY**

This is a must see clinical seminar on the most common classes of drugs used in the world of medicine and nursing today. Learn about the "prils", the "sartans", the "triptans", the "dipines", the "cyclovirs", the "statins", the "prazos", the "azoles", the "glitazones", the "floxacin", and the "olols, alols, and ilols" and many more. Barb's way of learning Pharmacology is entertaining and enlightening. You'll learn about mechanisms of action with each class of drugs, clinical indications, adverse effects, drug and food interactions, and a whole lot more. After hearing this lecture you'll feel much more comfortable with your clinical expertise in Pharmacology.

## CONTINUING EDUCATION COURSE ROSTER

Presenter: Barb Bancroft

Title of Offering: Pharmacology - SIMPLIFY DON'T MYSTIFY and Trends in Infectious Diseases

Provider: Fort Scott Community College

Provider Number: LT 0205-0506

Address: Fort Scott, KS 66701

Date of Course: January 10, 2020

Location of Course: Burke Street Campus

Signature of Coordinator:

Participant's Name	License Number	January 10, 2020 Morning	January 10, 2020 Afternoon	Total Number of Contact Hours

## **Pharmacology – SIMPLIFY DON'T MYSTIFY!**

### **Trends in Infectious Diseases**

#### **Participant's Evaluation**

We are interested in your opinion of this continuing educational program. The information will be used as future offerings are planned.

Please use the following scale and circle the appropriate number:

**1 – Not Addressed   2 -- Poor   3 – Average   4 – Above Average   5 – Excellent**

- |   |   |   |   |   |   |
|---|---|---|---|---|---|
| 1. My interest in this program was:   | 1 | 2 | 3 | 4 | 5 |
| 2. The content of the program was:  | 1 | 2 | 3 | 4 | 5 |
| 3. The speaker Barb Bancroft was able to maintain my interest:                        | 1 | 2 | 3 | 4 | 5 |
| 4. Objectives of the program were met:  |   |   |   |   |   |
| • Described what are the top 10 "trends" in infectious disease today?                 | 1 | 2 | 3 | 4 | 5 |
| • Defined how the "trends" have influenced today's healthcare.                        | 1 | 2 | 3 | 4 | 5 |
| • Discussed the history of infectious diseases.                                       | 1 | 2 | 3 | 4 | 5 |
| • Identified behaviors for keeping the population safer from all infectious diseases. | 1 | 2 | 3 | 4 | 5 |



- Identified what consists of “antibiotic stewardship.” 1 2 3 4 5
- Described what is the “name game.” 1 2 3 4 5
- Explained why timing is everything. 1 2 3 4 5
- Described the “s” rule in administering drugs. 1 2 3 4 5
- Defined the action, adverse effects, clinical Indications and the food and drug interactions of the drug classifications in an “simplified” presentation. 1 2 3 4 5

5. What did you like best about this program?

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6. What did you like least about this program?

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7. Do you feel you will utilize this information in your practice in the future?

Yes \_\_\_\_\_ No \_\_\_\_\_

8. I would recommend this program to my colleagues. Yes \_\_\_\_ No \_\_\_\_

## **Fort Scott Community College**

2108 South Horton, Fort Scott, Kansas

### **Certificate of Completion**

**Title:** Pharmacology-  
Simplify Don't Mystify!  
  
Trends in Infectious Diseases

**Location:** Fort Scott Community College

**Dates of Course:** January 10, 2020

**Instructor:** Barb Bancroft, RN, MSN, NP

**Participant:**

**License Number:**

**Contact Hours:**

Fort Scott Community College, as an Approved Long-Term Provider of Continuing Education by the Kansas State Board of Nursing, offers this program for 6 contact hours applicable for relicensure for LPNs , RNs, and LMHTs.

**Kansas Provider Number:** LT 0205-0506

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Darcus Kottwitz, RN, MSN  
Director of Continuing Education

# Donna Cardillo

## The Inspiration Nurse

RN  
CSP  
FAAN

### Donna Cardillo Bio

Donna Cardillo, RN, CSP is The Inspiration Nurse. She is a powerhouse of energy, wisdom, humor, and solid content and has been referred to as a positive force of nature who lights a path for others to follow. She is an expert blogger at **DoctorOz.com** and the original "Dear Donna" columnist at **Nurse.com**.

Donna travels the world inspiring and empowering individuals to move beyond fear and live and work to their highest potential. She does that as a keynote speaker, columnist, author, and cut-up. Her accomplished career combines over 25 years of clinical, managerial and business experience, not to mention her stint as a professional singer. Donna's clinical experience includes emergency and psychiatric nursing. She is a life-long Jersey Girl with attitude and chutzpah to spare!

Donna holds a diploma in nursing, a BS in Health Care Management and an MA in Corporate and Public Communication. She was formerly known as the "Healthcare Careers Expert" at **Monster.com**. She holds the highly sought after **Certified Speaking Professional (CSP)** designation, the highest earned international recognition for professional speakers. Only 10% of all speakers hold this designation. She is one of only 20 nurses in the world with this credential.

Donna has twice been named **NJ Business Woman of the Year** and has received the coveted **Athena Award**, a national leadership award for women. She is also recipient of the prestigious **Vanguard Award** from the National Nurses in Business Association. Donna was designated a **Diva in Nursing** by the Institute for Nursing in NJ for outstanding achievements and excellence in practice. She has also been named one of **50 Best Women in Business** by NJBIZ. Donna was recently named a Fellow in the American Academy of Nursing (FAAN) and will be inducted in October 2018.

Donna appears regularly on television and radio, is frequently quoted in newspapers and magazines and has published numerous articles. Donna has appeared on *The Doctor Oz Show* and the *Today* show and has been featured in the *Los Angeles Times*.

Donna is author of the books, *Falling Together-How to Find Balance, Joy and Meaningful Change When Your Life Seems to be Falling Apart*, *Your First Year as a Nurse - Making the Transition from Total Novice to Successful Professional*, *The ULTIMATE Career Guide for Nurses - Practical Advice for Thriving at Every Stage of Your Career*, and *A Day Book for Beginning Nurses*.

Donna is a founding member and past president of the NJ Chapters of the **National Speakers Association (NSA)** and the **National Association of Women Business Owners (NAWBO)**.



## PROFESSIONAL VITA

### BARBEE BANCROFT, RN, MSN, PNP

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**Address**

3100 N. Sheridan Road #9C  
 Chicago, IL 60657 USA  
 870-715-7508 (phone for Barb's Associate, Deanne Blach)  
 870-749-2276(fax)  
 312-543-7688 (Barb's mobile phone)

**E-mail Address:**

[bbancr9271@aol.com](mailto:bbancr9271@aol.com)  
[deanne@deanneblach.com](mailto:deanne@deanneblach.com)

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**Long Term CNE Provider Checklist**  
(K.A.R. 60-9-107)

**Name of Provider:** Greater Kansas City Chapter of NAPNAP, LT0203-0505 Five-Year Renewal

**Name of Program Coordinator:** Tammie Wingert, MSN, RN, CPNP

**Date to CNE Committee:** June 16, 2021

Information Required	Received	N/A
Completed application for initial approval or five-year renewal for LT CNE providership shall be submitted at least 60 days before a scheduled board meeting	03/17/2021	
The name and address of the organization on the application	X	
The name and address of the department or unit within the organization responsible for approving CNE, if different from the name and address of the organization		X
The name, education and experience of the program coordinator responsible for CNE	Tammie Wingert, MSN, RN, CPNP	
<ul style="list-style-type: none"> <li>Be a licensed professional nurse</li> </ul>	X	
<ul style="list-style-type: none"> <li>Have three years of clinical experience</li> </ul>	X	
<ul style="list-style-type: none"> <li>Have one year of experience in developing and implementing nursing education</li> </ul>	X	
<ul style="list-style-type: none"> <li>Have a baccalaureate degree (unless held this position for the provider at least five years immediately prior to January 1, 1977)</li> </ul>	X	
<b>Policies &amp; Procedures:</b>		
Written policies and procedures, including at least the following areas:		
<ul style="list-style-type: none"> <li>Assessing the need and planning for CNE activities</li> </ul>	X	
<ul style="list-style-type: none"> <li>Fee assessment</li> </ul>	X	
<ul style="list-style-type: none"> <li>Advertisements or offering announcements. Published information shall contain the following statement: "(name of provider) is approved as a provider of continuing nursing education by the Kansas State Board of Nursing. This course offering is approved for contact hours applicable for APRN, RN, or LPN relicensure. Kansas State Board of Nursing provider number: "</li> </ul>	X	
<ul style="list-style-type: none"> <li>Notice of change of coordinator or required policies and procedures. The program coordinator shall notify the board in writing of any change of the individual responsible for the providership or required policies and procedures within 30 days</li> </ul>	X	
For long term providers, the policies and procedures for the offering approval process shall include the following:		

• A summary of the planning	X	
• The behavioral objectives	X	
• The content, which shall meet the definition of CNE in KSA 65-1117	X	
• The instructor's education and experience, documenting knowledge and expertise in the content area	X	
• A current bibliography that is reflective of the offering content. The bibliography shall include books published within the past 10 years, periodicals published within the past five years, or both	X	
• An offering evaluation that includes each participant's assessment of the following:		
▪ The achievement of each objective	X	
▪ The expertise of each individual presenter	X	
An approved provider may award any of the following:		
• Contact hours as documented on an offering agenda for the actual time attending, including partial credit for one or more contact hours	X	
• Credit for fractions of hours over 30 mins to be computed towards a contact hour	X	
• Instructor credit, which shall be twice the length of the first-time presentation of an approved offering, excluding an standardized, prepared curriculum	X	X
• Independent study credit that is based on the time required to complete the offering, as documented by the provider's pilot test results		X
• Clinical hours		X
<b>Documentation of Attendance</b>		
Each provider shall maintain documentation to verify that each participant attended the offering. The provider shall require each participant to sign a daily roster, which shall contain the following information:		
• The provider's name, address, provider number, and coordinator	X	
• The date and title of the offering, and the presenter or presenters	X	
• The participant's name and license number and the number of contact hours awarded	X	
Each provider shall maintain documentation to verify completion of each independent study offering, if applicable. To verify completion of an independent study offering, the provider shall maintain documentation that includes the following:		
• The provider's name, address, provider number, and coordinator		X
• The participant's name and license number, and the number of contact hours awarded		X

• The title of the offering		X
• The date on which the offering was completed		X
• Either the completion of a posttest or a return demonstration		X
<b>Certificate of Attendance/CE Transcript</b>		
A certificate of attendance shall be awarded to each participant after completion of an offering, or a CE transcript shall be provided according to the policies and procedures of the long-term provider		
Each certificate and each CE transcript shall be complete before distribution to the participant		
Each certificate and each CE transcript shall contain the following information:		
• The provider's name, address and provider number	X	
• The title of the offering	X	
• The date or dates of attendance or completion	X	
• The number of contact hours awarded and, if applicable, the designation of any independent study or instructor contact hours awarded	X	
• The signature of the individual responsible for the providership	X	
• The name and license number of the participant	X	
<b>Recordkeeping &amp; Storage</b>		
For each offering, the approved provider shall retain the following for two years:		
• A summary of the planning	X	
• A copy of the offering announcement or brochure	X	
• The title and objectives	X	
• The offering agenda or, for independent study, pilot test results	X	
• A bibliography	X	
• A summary of the participants' evaluations	X	
• Each instructor's education and experiences	X	
• Documentation to verify completion of the offering	X	
The record storage system used shall ensure confidentiality and easy retrieval of records by authorized individuals	X	
<b>Program Evaluation Plan</b>		
For long-term providers, a copy of the total program evaluation plan		
<b>Two Proposed Offerings</b>		
The provider shall submit two proposed offerings, including the following:		
	Trends & Updates in COVID-19 & Influenza	... Understanding Complex Trauma



• A summary of planning	X	X
• A copy of the offering announcement or brochure	X	X
• The title and behavioral objectives	X	X
• The offering agenda or, for independent study, pilot test results	X	X
• Each instructor's education and experience	X	X
• A current bibliography	X	X
• The offering evaluation form	X	X

12/2018

Review Completed by Chelsey Stephenson, CNE Education Specialist on May 25, 2021.

**Reference No.:** 24849 **Date submitted:** Mar 17 17:26 2021

**radio** ~ Renewal

**Providername** ~ Greater Kansas City Chapter of NAPNAP

**providernum** ~ LT0203- 0505

**legalbody** ~ ~

**address** ~ 6220 W 61st Street

**adress2** ~ Mission, KS 66202

**telephone** ~ 8163045663

**email** ~ twingert@cmh.edu

**coordinator** ~ Tammie Wingert, MSN, RN, CPNP

**date** ~ 03-17-2021

**planningce** ~ The Board members of the Greater KC Chapter of NAPNAP met to determine what CNE events could be offered this year. A survey was sent to all members listing possible topics and requesting feedback for topic areas. The results of the survey were reviewed and topics were determined. The Continuing Education chair is responsible for arranging all speakers and arranging all aspects of the CNE including advertising, venue, registration, and the evaluation process.

The speakers for all CNE events are content experts on a specific topic. Curriculum vitae's are obtained to ensure accuracy and appropriateness of the speaker.

**feeassessment** ~ Due to the pandemic, all CNE events are held virtually and are free of charge. In the past, the cost of the CNE was determined based on the cost of the venue. The registration fee for a CNE has never exceeded \$25.00.

In the future, we would like to return to in-person CNE events and continue to offer virtual events. All registration fees are collected through an online third party site which eliminates the concern for insufficient funds. Should an event be canceled, we are able to refund the entire registration cost through the same third part site.

**advertisement** ~ Each CNE event is advertised electronically. A post is placed on the Greater KC Chapter of NAPNAP's website. An email is also distributed to all nurse practitioners working at Children's Mercy Hospital.

**approvalprocess** ~ The summary of planning is completed by the CE Chair and the Board of the Greater Kansas City Chapter of NAPNAP. The speaker is asked to provide learning objectives and a curriculum vitae at least 6 weeks prior to the event date. This information is reviewed for appropriateness by the CE Chair.

The powerpoint presentation, including bibliography, is requested to be received by the CE Chair one week prior to the presentation. The

bibliography is reviewed to ensure that all sources are appropriate and relevant.

Following the CE event, an evaluation is distributed to all participants via Survey Monkey. The completed evaluation then triggers the CE certificate to be sent to the participant.

**contacthours** ~ All CE events are currently offered for one full hour of content. Partial credit is not available at this time. Instructor credit is currently calculated based on KAR-60-9-107b as 2 hours of CNE. Independent study is not currently available.

**verifycompletion** ~ All registrations are completing utilizing an online third party database. This information includes the event title, event date, organization providing the offering, number of CNE, and the contact information for the CE Chair. Participants provide their name, address, phone number, and email address. License number is requested from the participant on the CEU certificate.

**recordkeeping** ~ Records are maintained on the Children's Mercy server. This server is password protected and only the current Greater KC NAPNAP board members employed by Children's Mercy have access to this.

Records include the advertisements, objectives, powerpoint presentation, CV of the speaker(s), and the CEU certificate. The evaluation forms and all comments are stored on the Survey Monkey website. All records are currently maintained for a minimum of 5 years.

**noticeofchange** ~ The KSBN will be notified by email of any change in the CE Chair within 10 days of this event occurring. Any notification of a change in policy will be completed by the CE Chair within 30 days of that vote occurring.

**programevaluation** ~ Program evaluations are completed following each event. The evaluation resorts and comments are utilized to better plan future events. A complete program evaluation is completed annually by the Greater KC Chapter of NAPNAP's board members.

**Submission date** ~ 03-17-2021 17:26:12

**Form ID** ~ 1672730

**Tammie L. Wingert, RN, MSN, CPN, CPNP, AQH**  
**Pediatric Nurse Practitioner II**  
**Children's Mercy Hospitals & Clinics**  
**Division of Child Neurology – Section of Headaches**  
**2401 Gillham Road**  
**Kansas City, MO 64108**  
**(816) 234-3490**  
**twingert@cmh.edu**

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## **EDUCATION**

University of Missouri at Kansas City – Kansas City, Missouri  
Master of Science in Nursing – Pediatric Nurse Practitioner track  
Graduation date: May 2015

St. Luke's College – Kansas City, Missouri  
Bachelor of Science in Nursing  
Graduation date: May 2006

University of Missouri at Columbia – Columbia, Missouri  
Bachelor of Science in Human Development and Family Studies  
Graduation date: December 1998

---

## **LICENSURES**

- APRN – Missouri – 2015022740
- APRN – Kansas – 76810
- RN - Missouri – 2006021712
- RN - Kansas – 14-103763-072

---

## **NATIONAL CERTIFICATIONS**

- Certificate of Added Qualification in Headache Medicine
- Certified Pediatric Nurse Practitioner
- Certified Pediatric Nurse

---

## **PROFESSIONAL EXPERIENCE**

June 2015  
to present

Children's Mercy Hospitals & Clinics  
Nurse Practitioner – Neurology – Section of Headache

Comprehensive, evidence-based care is provided to pediatric patients under the direction and collaboration with Dr. Jennifer Bickel. Physiologic and psychosocial needs of patients experiencing headaches or concussions are addressed using traditional medicine, acupuncture, and other complimentary methods.

July 2012 to June 2015	Children's Mercy Hospitals & Clinics Staff Nurse – Urgent Care East
February 2007 to July 2012	Children's Mercy Hospitals & Clinics Staff Nurse – Section of Child Abuse & Neglect
June 2006 to February 2007	Children's Mercy Hospitals & Clinics Staff Nurse – Pediatric ICU
April 2000 to June 2006	Children's Mercy Hospitals & Clinics Child Life Specialist II

---

## PROFESSIONAL AFFILIATIONS

- American Headache Society
- American Academy of Neurology
- National Headache Foundation
- National Association of Pediatric Nurse Practitioners
- Greater Kansas City Chapter of NAPNAP

---

## PUBLICATIONS

- Connelly M, Bickel J, Wingert T, & Galemone, C. The Headache Action Plan Project for Youth (HAPPY): school nurses as facilitators of system change in pediatric migraine care. *NASN School Nurse*, 33(1), 40-47.
- Esparham, A., Herbert, A., Pierzchalski, E., Tran, C., Dilts, J., Boorigie, M., Wingert, T, Connelly, M., & Bickel, J. (2018). Pediatric headache clinic model: Implementation of integrative therapies in practice. *Children*, 5(6), 74-84.

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## TEXT REVIEW

- Constantino, R., Crane, P., & Young, S. (2013). *Forensic Nursing: Evidence-Based Principles & Practice*. Philadelphia, PA: F.A. Davis Company.

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## PRESENTATIONS

May 2019	Neuroscience of Headaches UMKC Physician Assistant Program	Kansas City, MO
April 2018	Headaches & Child Abuse 12 <sup>th</sup> Annual Missouri Valley Child Neurology Colloquium	St. Louis, MO

December 2016	Management of Headaches in the School Environment Frontier Trail Middle School                      Olathe, KS
October 2016	Diagnosis and Management of Headache Disorders CMH Neurology Clinic Staff

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## RESEARCH

**Pfizer**                      2014-2017

“Headache Action Plan Project for Youth: System Change through School-Facilitated Intervention”  
Co-Investigator

The goal of this project was to establish a generalizable framework to be utilized within community schools. A dedicated web portal ([www.headachereliefguide.com](http://www.headachereliefguide.com)) was designed to provide education to medical professionals and families on migraine headaches. Education was provided to school nurses and students on the early identification of migraine headaches and useful resources for preventing headaches.

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## LEADERSHIP

2020-2021              Continuing Education Chair  
Greater Kansas City Chapter of NAPNAP

Name of Provider: Greater Kansas City Chapter of NAPNAP

Provider Number: LT0203-0505

Legal Body: NAPNAP

Program Coordinator: Tammie Wingert, MSN, RN, CPNP

Address of Provider: 6220 W. 61<sup>st</sup> Street, Mission, KS 66202

Telephone: 816-304-5663

Email: twingert@cmh.edu

Created: 02-05-2020

Revised 5-31-2021

### **Policies and Procedures Related to CNE**

#### **Assessing Need and Planning CNE**

Our goal is to enhance the health of the public in the Greater Kansas City area by bringing current and up-to-date, evidence-based information related to the care of children and advanced nursing practice. We always intend to offer 2-3 educational programs a year offering 1 to 4 CNE each depending on the specific event. At the beginning of each professional year, the entire board, including the Education Committee, meets to identify goals for the coming year. The process to insure we are providing quality programs that meet the needs of our attends is multi-faceted. First, we review all previous offering to insure we don't repeat content. We also review the evaluations of the previous offerings in an effort to recognize what was well received and could be complemented with further similar offerings and what didn't work and should be avoided.

We ask that our members fill out a survey about our speakers and their presentations after every educational offering. We include a space for members to provide ideas for speakers and topics they would be interested in for the future educational offerings. We also send a periodic needs survey to our members annually. We also consider our professional association's goals for learning the year and make special efforts to include these topics of interest at the local level as well. Recent areas of special interest have focused on obesity, human sex trafficking, opioid misuse and vaping. Additionally, we encourage informal comments from NAPNAP members to program chairs and board members in planning of our offerings.

## **Process for Fee Assessment**

Membership dues are paid annually to the national organization of NAPNAP and distributed to each individual chapter. We charge a discounted fee for members and full fee for non-members for each educational opportunity which is used for venue and speaker fees.

We use an electronic means of payment for our educational opportunities through PayPal. This has worked out well for us and our members. Fees are based on membership and cost of the program provided. We do provide refunds if written or verbal notification is received 72 hours prior to the

offering. There are no refunds for “no-shows” or cancellations less than 72 hours in advance. Extenuating circumstances are evaluated on a case by case basis. If insufficient funds are received, an additional fee will be collected during sign-in on the night of the program.

## **Process of Advertisements and Announcements**

Educational program offerings are emailed to membership and previous, non-member attendants via an electronic brochure copy. Electronic communication has become both the Greater Kansas City NAPNAP Chapter and the National NAPNAP organization's main mode of communication recently. Monthly announcements are provided via our website as well as when important news must be shared. We also put out quarterly newsletter for our members. Members register for national membership electronically and contact information for local chapter members, including email addresses, are sent to the local chapter's membership chairperson. Electronic brochures are also placed on our Chapter website and sent to local schools of nursing as well. Every effort is made to send out the announcements 6-8 weeks prior to the date of the offering if possible. We also communicate with our members regarding upcoming educational offerings through our Facebook and Twitter accounts.

All CE events are advertised in an electronic format. Emails will be distributed to all nurse practitioners at Children's Mercy Hospitals advertising the event. Electronic posts will also be placed on the Greater KC Chapter of NAPNAP's website. This automatically distributes an email to members containing the information for the event. A similar post is also placed on the national NAPNAP website with information regarding the event.

All advertisements contain the following verbiage: “The Greater Kansas City Chapter of NAPNAP is approved as a provider of continuing nursing education by the Kansas State Board of Nursing. This course offering is approved for \_ contact hours applicable for APRN, RN, or LPN relicensure. Kansas State Board of Nursing Provider Number: LT0203– 0505”



## **Process for Coordinator Changes**

The program coordinator will change every two years. It will be the responsibility of the outgoing coordinator to provide KSBN with the name and contact information for the new coordinator. This information will accompany the annual report summary. The new program coordinator will be responsible to submit an updated curriculum vitae. The coordinator will notify the KSBN of all relevant policy changes. This information will be included in the organization's report summaries and Total Program Evaluations or within 30 days, whichever comes sooner

## **Process of Offering Approval**

Topics are selected based on membership needs. Instructors selected for educational program offerings must have demonstrated expertise in the field of interest. They include advanced practice nurses, physicians, attorneys, social workers, psychologists, and others who have knowledge related to care of children and youth. Speakers must also have experience in teaching continuing education or other types of courses using a variety of teaching methods. Recommendations are sought from the membership, colleagues, and others. Program content is up-to-date and evidence based. Objectives include information on prevention, education, treatment, and follow-up related to the pertinent topic being discussed. The objectives must be obtained and reviewed by the CE Chair prior to the presentation to ensure that they are applicable to the membership. The content of the presentation must meet criteria established for CNE in KSA 65-1117.

All instructors are asked to provide a current curriculum vitae. This must be obtained and reviewed by the CE Chair prior to the presentation to ensure that the presenter has the expertise, education, and knowledge to present on the content area.

A bibliography must be included with the presentation. This must be obtained and reviewed by the CE Chair prior to the presentation to ensure that the resources utilized are appropriate and current.

At the conclusion of the program, all participants are asked to complete a program evaluation to assess to the following: achievement of each objective, presenter expertise, and the overall learning environment.

The speaker's CV, learning objectives, presentation, and evaluation results will be maintained in an electronic format for at least 5 years.

## **Process of Awarding Contact Hours**

Upon completion of the educational program offering, participants are provided with the information on how to obtain their Certificate of Attendance. Participants must go on-line and complete the evaluation of the program in order to receive their CNE document. Requiring participants to complete an online survey evaluation has significantly increased feedback on our programs. Upon completion of the survey, the CNE document pops up and may be printed by the participant. Participants must attend the entire program in order to receive full credit. The majority of our program offerings are two contact hours. Participants may receive credit for one contact hour, but do not attend the entire program offering. No fractions of contact hours are provided. We do not offer instructor credit, independent study credit, pilot tester credit, or credit for clinical hours.

## **Continuing Education Certificates**

- A Certificate of Attendance will be provided to all participants either physically or electronically once the program evaluation has been completed.
- The Certificate of Attendance will be provided by the Greater Kansas City Chapter of NAPNAP. This information will be provided on the certificate. The name, contact information, and signature of the CE Chair will also be provided on the certificate.
- The Certificate of Attendance will contain the title of the presentation, speaker's name and credentials, the date of the offering, and the time of the offering.
- The certificate will contain the name of the participant and a space to provide the KS BON license number.
- The certificate will contain the number of contact hours awarded.

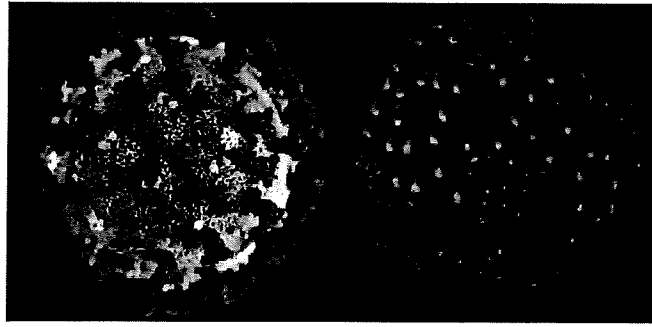
## **Process of Verifying Participation and Completion of Offering**

At the program offering, participants must sign the attendance roster. The roster includes the provider's name, address, provider number, and coordinator's name; date and title of the offering and the presenter's name; the participant's name, address place of employment, license number, number of contact hours, and initials. Upon completion of the offering, we send an electronic survey via SurveyMonkey for our participants to fill out. Once they have completed the survey, they will receive their electronic Certificate of Attendance. The certificate includes: our name, address, and provider number; the number of contact hours awarded, the name and license number of participants and the signature of program coordinator and president.

## **Evaluation of Effectiveness**

Yearly, the program coordinator(s) analyze the outcomes of the overall CNE program to evaluate the program's effectiveness. The evaluations guide the decision making process regarding changes needed to better meet the goals of the organization while fulfilling the definition of

CNE. Additionally, evaluating for immediate change needs will be done by the program coordinator when compiling the evaluation summary after each program. In addition, this will be discussed at quarterly board meetings.



Please join us virtually on  
Tuesday, 2/2/21, from 12-1 for

***Trends & Updates in COVID-19 and Influenza***

Presented by Christine Symes, MSN, RN, APRN & Gina  
Weddle, DNP, RN, CPNP-AC/PC

Hosted by the Greater KC Chapter of NAPNAP  
1 hours of CEU is available for this through the KSBON

Please email Tammie Wingert ([twingert@cmh.edu](mailto:twingert@cmh.edu)) with  
any questions.

The Greater KC Chapter of NAPNAP is approved as a provider of continuing nursing education  
by the Kansas State Board of Nursing. This course offering is approved for 1 contact hours  
applicable for RN, LPN, or LMHT relicensure. Kansas State Board of Nursing Provider Number:  
LT0203– 0505

Presenter: Christine Symes

Title: Trends & Updates in COVID-19 and Influenza

Objectives:

- Review most recent CDC quarantine and isolation guidelines for COVID-19
- Review most recent CDC recommendations for return to work after COVID-19 infection for health care workers
- Understand current testing options for COVID-19
- Review current statistics of COVID-19 infections
- Review current statistics for influenza

C H R I S T I N E   S Y M E S

816-760-5588  
E-Mail: casymes@cmh.edu

E D U C A T I O N

- 5/2007    Masters of Science in Nursing-Pediatric Primary Care Nurse Practitioner Tract  
University of Missouri Kansas City  
GPA 4.00
- 12/1993    Bachelor of Science in Nursing  
Research College of Nursing / Rockhurst College, Kansas City, Missouri  
GPA 4.00
- 5/1992    Bachelor of Arts in Biology  
William Jewell College, Liberty, Missouri  
GPA 3.39

R E L A T E D   E X P E R I E N C E

- 10/2018–present    **Children's Mercy Hospital**, Kansas City, Missouri  
Pediatric Nurse Practitioner  
Infectious Diseases
- 3/2013–10/2018    **Children's Mercy Hospital**, Kansas City, Missouri  
Pediatric Nurse Practitioner  
Hematology/Oncology – Inpatient Bone Marrow Transplant
- 9/09–03/13    **Children's Mercy Hospital**, Kansas City, Missouri  
Pediatric Nurse Practitioner  
Rehabilitation Medicine Clinic
- 10/10-09/11    **University of Mary**, Associate Professor  
Instructor for Nursing Program – Biomedical Ethics and Leadership courses
- 5/07 – 5/09    **Independence Pediatrics**, Independence, Missouri  
Pediatric Nurse Practitioner  
Primary Care Provider
- 12/03 – 5/07    **Children's Mercy Hospital**, Kansas City, Missouri  
RN/BSN  
Staff Nurse/Charge Nurse  
Inpatient Medical – Surgical Unit
- 5/02 – 5/04    **University of Missouri Kansas City**, Kansas City, Missouri  
RN/BSN  
Clinic and Outreach Nurse in Student Health and Wellness.
- 5/98 – 5/02    **Research Medical Center**, Kansas City, Missouri  
RN/BSN  
Nursery nurse in Level III Intensive Care Nursery (NICU)
- 1/94 – 5/98    **Research Medical Center**, Kansas City, Missouri  
RN/BSN  
Primary care and team-leading nursing on adult post-operative unit

CNE 138

## **CERTIFICATION / LICENSE**

Pediatric Nursing Certification Board-Certified Pediatric Nurse Practitioner  
Pediatric Nursing Certification Board-Certified Pediatric Nurse  
Missouri State Board of Nursing  
Kansas State Board of Nursing  
Basic Cardiac Life Support  
Pediatric Advanced Life Support  
Certified Pediatric Massage Therapist

## **PROFESSIONAL PRIVILEGES**

Past: Centerpoint Medical Center, Independence, Missouri  
Present: Children's Mercy Hospitals and Clinics, Kansas City, Missouri

## **COMMITTEE INVOLVEMENT**

Pediatric Nursing Certification Board, Primary Care Certification Exam Test Writer  
Children's Mercy Hospital Immunization Committee  
Children's Mercy Hospital Advance Practice Provider Education Planning Committee, Chair  
Children's Mercy Hospital APRN Annual Conference Planning Committee, Co-Chair

## **CONTINUING EDUCATION**

August 7, 2020: Stanford Online Program: Unconscious Bias in Medicine

September, 2020: Examining the Role of Social Determinants in Pediatric Health-4 hour course-  
Children's Mercy Hospital Office of Faculty Development

April 15-16, 2020: 8.0 contact hours, Clinical Pharmacology

October 2, 2020: 7.25 contact hours (2.75 hours Pharmacology content), Children's Mercy  
Pediatric Advanced Practice Nursing Conference

## **AUTHORSHIP**

Subject Matter Expert, "Family-Centered and Culturally Competent Care."  
Mosby's Pediatric Nursing Orientation online course – 2014

Learning Module Author:  
Nursing Course for Pediatric Intensive Care Nurses-"Sinusoidal Obstruction Syndrome in the  
Bone Marrow Transplant Patient"

Nursing Course for Pediatric Intensive Care Nurses-"Respiratory Complications in the Bone  
Marrow Transplant Patient"

## **PRESENTATIONS**

"Respiratory Complications in the Pediatric Hematopoietic Stem Cell Transplant Patient" –  
2015 PICU Respiratory Therapy education updates.

"Sinusoidal Obstruction Syndrome in the Bone Marrow Transplant Population" – 2015 4 Henson  
Nursing updates.

CNE 139

"Overview of Bone Marrow Transplant" – 4 Henson nursing education course – yearly 2014-2018.

"Transplant for the Non-Oncologic Patient"- 4 Henson nursing education course – 2018.

"Relapsed Acute Lymphoblastic Leukemia" – 2014 Third Palestinian Pediatric Oncology Workshop.

"Norovirus Case Study and Overview" – 2014 Children's Mercy Hospital/University of Kansas Bone Marrow Transplant journal club.

"Anaphylaxis in the Pediatric Oncology Patient Population" – 2014 education to nursing staff at Beit Jala Medical Center, Palestine.

"Mucositis in the pediatric Oncology Patient" – 2014 education to nursing staff at Beit Jala Medical Center, Palestine.

"Physical Assessment of the Pediatric Oncology Patient" – 2014 education to nursing staff at Beit Jala Medical Center, Palestine.

"Overview of Pediatric Lymphomas" – 2014 education to nursing staff at Beit Jala Medical Center, Palestine.

"Overview of Radiation Therapy"-2018 education to 4Henson nursing staff.

## **P O S T E R   P R E S E N T A T I O N**

FIT Clinical Decision-Making Unusual echocardiographic findings of myocarditis mimicking an aortic runoff lesion. American College of Cardiology annual conference, 2020. Sarah Studyvin, DO, MPH; Barbara Pahud, MD, MPH; Christine Symes, RN, MSN, APRN; Nitin Madan; MD Children's Mercy Hospital, Kansas City, MO

## **R E S E A R C H   A C T I V I T Y**

2018 Primary Investigator Pediatric Blood and Marrow Transplant Consortium Study – DonorKids Quality of Life

2019-2020 Sub-Investigator-Ansun Pharmaceuticals DAS181-3-01 Study

## **Q U A L I T Y   I M P R O V E M E N T**

Co-Lead on division wide project: "Improving Immunization Rates of children admitted to the hospital, with Infectious Disease consult"

## **A W A R D S / A C K N O W L E D G E M E N T S**

2017 Ina Culkins Nursing Scholarship Award

2015 Oncology Nurse Society – Recipient of the Josh Gottheil Bone Marrow Transplant Career Development Award

2015, 2017, 2019 Children's Mercy Hospital – Advance Practice Registered Nurse III promotion

## **P R E C E P T O R   E X P E R I E N C E**

Rush University College of Nursing – Acute Care PNP Program-Fall, 2019

Creighton University College of Nursing – Acute Care PNP Program-Winter, 2020 CNE 140  
-140-

University of Missouri Sinclair School of Nursing – Special Health Care Needs of Children



Creighton University Nursing School-Acute Care PNP student clinical preceptor – 2014

**P R O F E S S I O N A L   O R G A N I Z A T I O N   M E M B E R S H I P**

National Association of Pediatric Nurse Practitioners, Kansas City Area Special Interest Group,  
Active Member

Pediatric Infectious Disease Society

**Curriculum Vitae**  
**Gina M. Weddle, DNP, RN, CPNP AC-PC**

**Personal Data:** 913-226-4586  
gweddle@cmh.edu (work e-mail)  
gmweddle@gmail.com (home email)

**Academic and Professional Education:**

2010-2011	University of Missouri, Kansas City Doctorate of Nursing Practice
1995-1996	University of Missouri, Kansas City Post-Masters education; Pediatric Nurse Practitioner
1992-1995	University of Kansas Masters of Science in Nursing Specialty: Pediatrics
1986-1990	University of Kansas Bachelor of Science in Nursing

**Certifications:**

2000-Present	Advanced Registered Nurse Practitioner Acute care and Primary Care Certified Kansas State Board of Nursing
1997-Present	Advanced Practice Nurse Recognition Missouri State Board of Nursing
1996-Present	Certified Pediatric Nurse Practitioner National Association of Pediatric Nurse Practitioners
1993-2010	Pediatric Advanced Life Support Instructor
1991-2010	Pediatric Advanced Life Support Provider
1990-Present	Registered Nurse: Missouri
1990-Present	Registered Nurse: Kansas

**Professional Experience:**

1989-Present	Children's Mercy Hospital Current Position: Director Advanced Professional Practice and Infectious Disease PNP both inpatient and outpatient. Previous positions: Acute Care PNP with Hospitalist service, Emergency Medicine PNP, Surgery PNP. Additionally, was staff nurse in post-anesthesia care unit and the pediatric intensive care unit. Lastly was a care assistant on the infant and toddler floor as a senior nursing student.
1998-2006	Clinical Instructor University of Kansas School of Nursing Responsibilities: Clinical instructor for undergraduate nursing students in foundations and pediatric rotations.

**Membership:**

2018-present	Missouri Nurses Association Advocacy committee member
2016-present	American Nurses Association

2016-present	Kansas State Board of Nursing
2016-present	American Organization of Nurse Executives
2016-present	Advanced Practice Provider Executives
2012-present	Infectious Disease Society of America
2011-present	Pediatric Infectious Disease Society
2011-present	Society for Healthcare Epidemiology
2003-2009	American Academy of Pediatrics
1997-2004	American Pediatric Surgical Nurses Association
1996-Present	National Association of Pediatric Nurse Practitioners
	National member and Kansas City Chapter member

#### Honors:

2014	Rose Award: The ROSE (Recognizing Outstanding Service Excellence) program offers families and individuals an opportunity to make a gift and recognize employees and volunteers who provide excellent service during a child's visit to Children's Mercy
2006	National Association of Pediatric Nurse Practitioner item writer for primary care exam
1990	Sigma Theta Tau: International Honor Society of Nursing

#### Publications:

- Campbell, A., Ogokeh, C., Lively, J., Staat, M., Selvarangan, R., Halasa, N., Englund, J., Boom, J., Weinberg, G., Williams, J., McNeal, m., Harrison, C., Stewart, L., Klein, E., Sahni, L., Szilagyi, P., Michaels, M., Hickey, R., Moffatt, M., Pahud, B., Schuster., J., **Weddle, G.**, & Rha, B. (2020) Vaccine effectiveness against pediatric influenza hospitalizations and emergency visits. *Pediatrics*, Oct 5:e20201368. doi: 10.1542/peds.2020-1368. Online ahead of print.
- Rha, B., Lively, J., Englund, J., Staat, M., Weinberg, G., Selvarangan, R., Halasa, N., Williams, J., Boom, J., Sahni, L., Michaels, M., Stewart, L., Harrison, C., Szilagyi, P., McNeal, M., Klein, E., Strelitz, B., Lancombe, K., Schlaudecker, E., Moffatt, M., Schuster, J., Pahud, B., **Weddle, G.**, Hickey, R., Avadhanula, V., Wikswo, M., Hall, A., Curns, A., Gerber, S., Langley, G. (2020). SARS-CoV-2 infections in children- multi-center surveillance, United States, January-March 2020. *Journal of Pediatric Infectious Diseases Society*, June 18, online ahead of print.
- Rha, B., Curns, A., Lively, J., Campbell, A., Englund, J., Boom, J., Azimi, P., Weinberg, G., Staat, M., Selvarangan, R., Halasa, N., McNeal, M., Klein, E., Harrison, C., Williams, J., Szilagyi, P., Singer, M., Shani, L., Figueroa-Downing, D., McDaniel, D., Prill, M., Whitaker, B., Stewart, L., Schuster, J., Pahud, B., **Weddle, G.**, Avadhanula, V., Munoz, F., Piedra, P, Payne, D., Langley, G., Gerber, S. (2020). Respiratory syncytial virus-associated hospitalization among young children: 2015-2016. *Pediatrics*, 45(1).
- Monsees, E., Wirtz, A., Myers, A., Day, C., El Feghaly, R., Lee, B., Purandare, A., **Weddle, G.**, Goldman, J. (2019). Antimicrobial stewardship: on board with lean daily management systems. *Open Forum Infectious Diseases*, 6(2).
- Burns, A., Wirtz, A., **Weddle, G.**, Frank, T., Ogden, R., O'Neal, B., Goldman, J. (2019). Mandatory antimicrobial duration at the time of computerized

- physician order entry: what's the harm? *Open Forum Infectious Diseases*, 5(5).
- Goldman, J., Yu, D., Newland, J., Jackson, MA., **Weddle, G.**, McCulloh, R., Myers, A., Day, J., Lee, B. (2018). Antimicrobial stewardship in high risk pediatric patients. *Open Forum Infectious Diseases*, 5(1).
- Goldman, J., Price, M., Yu, D., Newland, J., Jackson, MA., **Weddle, G.**, McCulloh, R., Myers, A., Day, C., Lee, B. (2018). Treatment of tracheitis and antimicrobial stewardship interventions. *Open Forum Infectious Diseases*, 5(1).
- Schuster, J., Selvarangan, R., Hassan, F., Briggs, K., Hays, L., Miller, J., Pahud, B., Puls, H., Queen, M., Thompson, M., **Weddle, G.**, Jackson, M. (2017). Epidemiology and clinical course of Enterovirus D68 in hospitalized children. *The Pediatric Infectious Disease Journal*, 36(3): 290-295.
- Weddle, G.** (2017). Infections of the Central Nervous Systems in *Nursing Care of the Pediatric Neurosurgery Patient*, (3rd ed). New York: Springer Heidelberg.
- Weddle, G.**, Goldman, J., Myers, A., & Newland, J. (2017). Impact of an educational intervention to improve antibiotic prescribing for nurse practitioners in a pediatric urgent care. *Journal of Pediatric Health care*, 31(2): 184-188.
- Schuster, J., Selvarangan, R., Hassan, F., Briggs, K., Hays, L., Miller, J., Pahud, B., Puls, H., Queen, MA., Thompson., M., **Weddle, G.**, Jackson, MA. (2017). Clinical Course of Enterovirus D68 in Hospitalized Children. *The Pediatric Infectious Disease Journal*, 36(3), 290-295.
- Weddle, G.** (2017) Central Line Associated Bloodstream Infections in *Succinct Pediatrics*. Illinois: American Academy of Pediatrics.
- McCulloh, R., Koser, M., Ralson, S., Johnson, M., Hill, V., Koehn, K., **Weddle, G.**, & Alverson, B. (2015). Use of intermittent vs continuous pulse oximetry for nonhypoxemic infants and young children hospitalized for bronchiolitis: a randomized clinical trial. *JAMA Pediatrics*, 169(10), 898-904.
- Schuster, J., Miller, J., Selvarangan, R., **Weddle, G.**, Thompson, M., Hassan, F., Rogers, S., Oberste, M., Nix, W., & Jackson, M. (2015). Severe Enterovirus 68 respiratory illness in children requiring intensive care management. *Journal of Clinical Virology*, 70, 77-82
- Weddle, G.**, Hamilton M., Potthoff D., Rivera D., Jackson MA. (2014). Utilization of QuantiFERON-TB gold testing in pediatric health care professionals. *Lab Med*, 45(3), 207-210.
- Weddle, G.** & Jackson, MA. (2014). Vaccine Eligibility in Hospitalized Children: Spotlight on a Unique Healthcare Opportunity. *Journal of Pediatric Health Care*, 28(2), 148-154.
- Weddle, G.**, Pahud, B., & Jackson, MA. (2013) Mucormycosis after a tornado in Joplin, Missouri.[Letter to the Editor]. *New England Journal of Medicine*, 368(11), 1066-1067.
- Weddle, G.** (2013). Infections of the Central Nervous Systems in *Nursing Care of the Pediatric Neurosurgery Patient*, (2nd ed). New York: Springer Heidelberg.

- Weddle G.**, Jackson MA., Selvarangan R. (2012) Utility of a focused VRE screening protocol to identify colonization in hospitalized children. *American Journal of Infection Control*, 40(9), 891-892.
- Weddle G.**, Gandy K., Bratcher D., Pahud BA., Jackson MA. (2012) *Apophysomyces trapeziformis* infection associated with a tornado related injury. *Pediatric Infectious Disease Journal*, 31(6), 640-642.
- Weddle, G.**, Jackson MA., & Selvarangan, R. (2011) Reducing blood culture contamination in a pediatric ER. *The Journal of Pediatric Emergency Care*, 27(3), 179-181.
- Weddle, G.**, Jackson, MA., Cox, K., Selvarangan, R., Teasley, S. (2010). The Role of Individual Workload Perception on Performance of Phlebotomy and Blood Culture Contamination Rates. *Journal of Nursing Quality Care*, 25 (2), 176-181.
- Weddle, G.** Editorial of Article Review for Society of Hospital Medicine. September, 2004 and January, 2006.

#### **Poster Presentation:**

- Monsees, E. Wirtz, A., Myers, A, Burns, A., El Feghaly, R., Lee, B., Purandare, A., **Weddle, G.**, & Goldman, J. Antimicrobial stewardship “on board” with Lean daily management systems. Infectious Disease Society of America Annual Meeting 2019 Washington, DC.
- Goldman, J., Price, M., Yu, D., Newland, J., Jackson, M., **Weddle, G.**, McCulloh, R., Myers, A., Day, J., & Lee, B. Treatment of tracheitis and antimicrobial stewardship interventions. Infectious Disease Society of America Annual Meeting 2018 San Francisco, California.
- Goldman, J., Yu, D., Newland, J., Jackson, M., **Weddle, G.**, McCulloh, R., Myers, A., Day, J., & Lee, B. Antimicrobial stewardship in high risk pediatric patients. Infectious Disease Society of America Annual Meeting 2018 San Francisco
- Weddle, G.**, Goldman, J., Myers, A., Day, C., Yu, D., Stach, L., & Newland, J. Impact of an educational intervention to improve antibiotic prescribing for nurse practitioners in a pediatric urgent care. Infectious Disease Society of America 2014 Annual Meeting Philadelphia, PA.
- Weddle, G.**, Myers, A., Day, C., Goldman, J., Yu, D., Stach, L., & Newland, J. Variation in antibiotic prescribing practices among nurse practitioners in a pediatric urgent care center. Infectious Disease Society of America Annual Meeting 2013 San Francisco, California.
- Babbra, M., **Weddle, G.**, & Jackson, MA. Features of *Cryptosporidium* infection in hospitalized children. Pediatric Academic Society 2013 Annual Meeting Washington DC.
- Ilboudo, C., **Weddle, G.**, Selvarangan, R., & Livingston R. Daptomycin nonsusceptible and linezolid resistant *Enterococcus faecium* (VREF) bacteremia successfully treated with high dose daptomycin and ampicillin. St. Jude/Pediatric Infectious Diseases Research Conference 2013 Memphis, Tennessee.
- Weddle, G.** & Jackson, MA. Parental Satisfaction with Vaccination Services. Infectious Disease Society of America 2012 Annual Meeting San Diego, California.

**Weddle, G.,** Hamilton M., Potthoff, D., Rivera, D., & Jackson MA. QuantiFERON-TB Gold Test in Health Care Professionals at a Children's Hospital. Infectious Disease Society of America 2012 Annual Meeting San Diego, California.

Clark, S., McCauley, J., **Weddle, G.,** Hoffman, A., Herigon, J., Jackson, M., & Pahud, B. Implementation of a Hospital Based Intervention to Improve Pediatric Immunizations Rates. Infectious Disease Society of America 2012 Annual Meeting San Diego, California.

**Weddle, G. & Jackson, MA.** Vaccine Eligibility for Hospitalized Children. Pediatric Academic Society 2012 Annual Meeting Boston, Massachusetts.

**Weddle, G.,** Gandy, K., Bratcher, D., Pahud, B., & Jackson MA. *Apophysomyces trapeziformis* Infection Associated with a Tornado Related Injury. Infectious Disease Society of America 2011 Annual Meeting Boston, Massachusetts.

**Weddle, G.,** Spears, N., Hulse, K., & Jackson, MA. School Based Influenza Immunization. Infectious Disease Society of America 2011 Annual Meeting Boston, Massachusetts.

**Weddle, G.,** Garrett, J., Cox, K., & Jackson MA. Mandatory Masking (MM) for Healthcare Personnel (HCP) At Risk for Influenza. Pediatric Academic Society Conference 2011 Denver, Colorado.

**Weddle, G.,** Selvarangan, R., & Jackson, MA. Vancomycin Resistant Enterococcus Screening in a Pediatric Hospital. Infectious Disease Society of America's 2010 Annual Meeting Vancouver, Canada.

Day, JC., **Weddle, G.,** Selvarangan, R., & Jackson, MA. Spectrum of Novel H1N1 Illness in Infants 3 Months Old and Younger at a Children's Hospital. Pediatric Academic Society Conference 2010 Vancouver, Canada.

**Weddle, G.,** Jackson, MA., & Selvarangan, R. Reducing Blood Culture Contamination Rate in a Pediatric Emergency Department. Infectious Disease Society of America 2009 annual meeting Philadelphia, Pennsylvania.

**Weddle, G.,** Jackson, MA., Cox, K., Selvarangan, R., Teasley, S.: The Role of Individual Workload Perception on Performance of Phlebotomy and Blood Culture Contamination Rates. Infectious Disease Society of America 2008 annual meeting Washington DC.

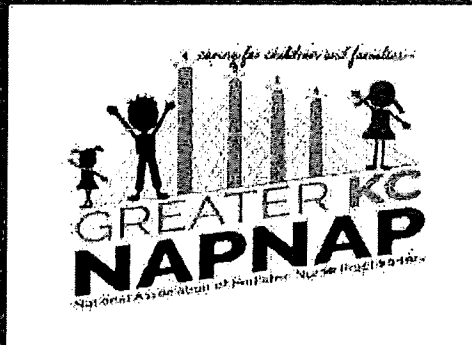
Glynn, L., **Weddle, G.,** Snyder, CL., & Ashcraft, KW.: Necrotizing Enterocolitis in Newborns with Congenital Heart Disease. American Pediatric Surgical Association 1998 annual meeting Hilton Head, South Carolina.

**Weddle, G.,** Marrow, SE., Sigalet, DL., Snyder, CL., Sharp, RJ., & Ashcraft, KW. Primary Gastrostomy Button Placement. American Pediatric Surgical Association 1997 annual meeting Naples, Florida.

#### **Presentations:**

Weddle, G. & Smith, J. APRN Consensus Model. Cerner 2019 Nursing Summit. Kansas City, MO January 2019.

- Weddle, G: Use of intermittent vs continuous pulse oximetry for nonhypoxemic infants and young children hospitalized for bronchiolitis: a randomized clinical trial. Infectious Disease Society of America National Meeting Platform Presentation. San Diego, CA October 2015
- Weddle, G: "Skin and Soft Tissue Infections". Children's Mercy APRN UCC quarterly update. March 26, 2013.
- Weddle, G: "Vaccine eligibility in hospitalized children: spotlight on a unique health care opportunity". Children's Mercy Hot Topics March 27, 2012.
- Weddle, G: "Apophysomyces trapeziformis infection associated with a tornado related injury". Kansas City Infectious Disease Society monthly meeting September 22, 2011.
- Weddle, G: "Bugs and Drugs". University of Missouri Kansas City Nurse Practitioner program September 22, 2011.
- Weddle, G: "Skin and Soft Tissue Infections". Children's Mercy Hospital 6H Update, Children's Mercy Hospital, Kansas City, MO November 12 & 17, 2008.
- Weddle, G: "Pediatric Surgical Abdomen". Children's Mercy Hospital ER Update, Children's Mercy Hospital, Kansas City, MO October 8 & 22, 2001.
- Weddle, G: "Pediatric Abdominal Trauma". Children's Mercy Trauma Review, Children's Mercy Hospital, Kansas City, MO, September 1, 1998.
- Weddle, G: "Pediatric Head Trauma". Midwest Trauma Society Education Consortium Pediatric Review, Children's Mercy Hospital, Kansas City, MO, April 9, 1998.
- Weddle, G: "Myelomeningocele". Neonatal Nursing Course, Children's Mercy Hospital, Kansas City, MO, October 30, 1997.
- Weddle, G: "Hydrocephalus and Ventriculostomies". Educational Inservices, Children's Mercy Hospital, Kansas City, MO, 2/20/97, 11/6/97, 11/20/97, 1/13/98, & 1/20/98.
- Weddle, G: "Nephrotic Syndrome". Dialysis Unit Inservice, Children's Mercy Hospital, Kansas City, MO, August 24, 1995.



Greater KC NAPNAP  
Lunch & Learn  
February 2, 2021

Trends & Updates in COVID-19 & Influenza

Presented by Christine Symes, MSN, RN, APRN & Gina Weddle, DNP, RN, CPNP-AC/PC

Christine Symes, MSN, RN, APRN

Trends & Updates in COVID-19 & Influenza

1. The learning outcomes/educational objectives for this session were met.

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Strongly disagree

2. I will be able to use this information in future practice.

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Strongly disagree



3. The speaker was interesting and held my attention.

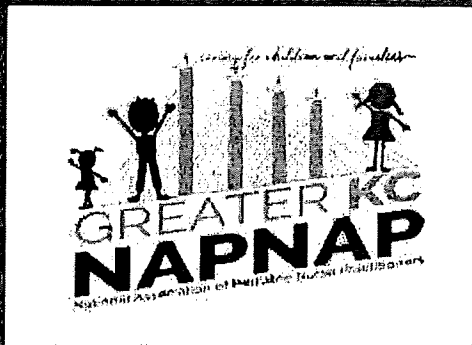
- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Strongly disagree

4. The speaker was knowledgeable in the content area.

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Strongly disagree

5. The speaker disclosed all relevant relationships.

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Strongly disagree



Greater KC NAPNAP  
Lunch & Learn  
February 2, 2021

### Trends & Updates in COVID-19 & Influenza

Presented by Christine Symes, MSN, RN, APRN & Gina Weddle, DNP, RN, CPNP-AC/PC

Gina Weddle, DNP, RN, CPNP-AC/PC

### Trends & Updates in COVID-19 & Influenza

6. The learning outcomes/educational objectives for this session were met.

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Strongly disagree

7. I will be able to use this information in future practice.

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Strongly disagree

8. The speaker was interesting and held my attention.

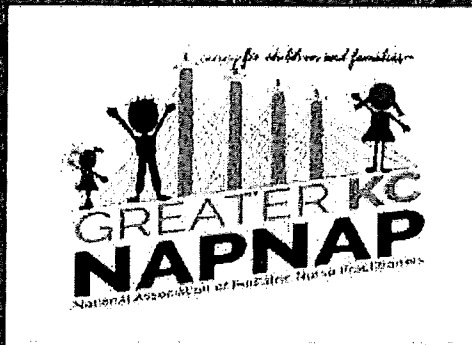
- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Strongly disagree

9. The speaker was knowledgeable in the content area.

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Strongly disagree

10. The speaker disclosed all relevant relationships.

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Strongly disagree



Greater KC NAPNAP  
Lunch & Learn  
February 2, 2021

Trends & Updates in COVID-19 & Influenza

Presented by Christine Symes, MSN, RN, APRN & Gina Weddle, DNP, RN, CPNP-AC/PC

#### Overall Evaluation

11. I would recommend this program to a colleague.

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Strongly disagree

12. The program was well organized.

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Strongly disagree

13. The program met my learning needs.

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Strongly disagree

14. The program had balance, independence, and objectivity.

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Strongly disagree

15. The online platform met my learning needs.

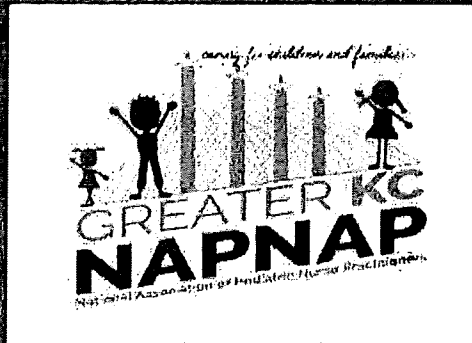
- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Strongly disagree

16. The time of the educational offering worked with my schedule.

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Strongly disagree

17. Additional comments and suggestions for future educational topics are welcome:

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Greater KC NAPNAP  
Lunch & Learn  
February 2, 2021

Trends & Updates in COVID-19 & Influenza

Presented by Christine Symes, MSN, RN, APRN & Gina Weddle, DNP, RN, CPNP-AC/PC

#### CEU Certificate

Thank you for completing the evaluation. Below is the CE certificate. **YOU MUST PRINT THIS IMAGE** prior to closing **out of this survey**. First right click and save the image to your desktop. Then print out the image from your desktop. Questions or concerns, please contact Tammie Wingert ([twingert@cmh.edu](mailto:twingert@cmh.edu)).

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**Greater Kansas City Chapter of NAPNAP**

***This certificate verifies completion of the continuing education offering titled:***

***Trends and Updates in  
COVID-19 and Influenza***

***Presented by: Christine Symes & Gina Weddle***

***1.0 Contact Hours Provided***

***February 2, 2021—1200-1300***

***Hosted Virtually***

Name of Attendee

*Tammie Wingert, MSN, RN, CPNP*

Tammie Wingert, MSN, RN, CPNP  
Program Chair

License Number

Provider Address:  
2401 Gillham Road  
Kansas City, Missouri  
64108

The Greater Kansas City Chapter of NAPNAP is an approved provider of continuing nursing education by the Kansas State Board of Nursing. This course is approved for 1 contact hour applicable for APN, RN, LPN, and LMHT relicensure. KSBN Provider Number: LT0203—0505

CNE 155

Please join us virtually on  
Tuesday, 3/9/21, from 12-1 for  
A Deep Dive into Understanding Complex Trauma  
Presented by

Becky Austin-Morris, DNP, PMHNP-BC

Hosted by the Greater KC Chapter of NAPNAP  
1 hours of CEU is available for this through the KSBON

Please use this link to register for the event:  
<https://events.eventzilla.net/e/a-deep-dive-into-understanding-complex-trauma-2138813232>

Please email Tammie Wingert ([twingert@cmh.edu](mailto:twingert@cmh.edu)) with  
any questions.

The Greater KC Chapter of NAPNAP is approved as a provider of continuing nursing education  
by the Kansas State Board of Nursing. This course offering is approved for 1 contact hours  
applicable for RN, LPN, or LMHT relicensure. Kansas State Board of Nursing Provider Number:  
LT0203– 0505



Presenter: Becky Austin-Morris, DNP, PMHNP-BC

Title: A Deep Dive into Understanding Complex Trauma

**Objectives**

1. To provide education to help APP to recognize biopsychosocial signs of trauma in their patients, coworkers and themselves.
2. To present tools and techniques they can use to help clarify diagnosis.
3. To provide tools and techniques to help patients feel safe in our care environments.

## CURRICULUM VITAE

### ***Becky J. Austin-Morris, DNP, PMHNP-BC***

23990 Haigwood Road  
Tonganoxie, KS 66086  
(P/T) 913-620-8894  
Email: [beckyaustinmorris@gmail.com](mailto:beckyaustinmorris@gmail.com)

#### **EDUCATION**

University of Missouri-Kansas City Doctor of Nursing Practice	Kansas City, MO May, 2018
University of Kansas Masters Degree in Nursing	Kansas City, KS 2011
Wichita State University Bachelors Degree in Nursing	Wichita, KS 2008
Pittsburg State University Emphasis in Psychology, Business, Law, Nursing	Pittsburg, KS 1982 – 2003
Fort Scott Community College Associates Degree in Nursing	Fort Scott, KS 1985

#### **Honors & Awards**

2019 Daisy Award – nominee  
2018 March of Dimes Nurse of the Year - nominee  
2018 Nurse Leader Excellence – Sigma Theta Tau  
2018 UMKC Vice Chancellor for Student Affairs Honor Nominee  
2011 Janssen Student Scholar – American Psychiatric Nursing Association  
Colleen P. Kosiak Clinical Excellence Award 2011  
Sigma Theta Tau International (Nursing Honor Society), Delta Chapter and Lambda Chi Chapter  
Phi Kappa Phi Honor Society (KU and UMKC)  
Golden Key International Honor Society

#### **APRN License(s)**

State of Kansas  
State of Missouri

#### **Certifications**

American Nurses Credentialing Center  
Board Certified Family Psychiatric & Mental Health Advanced Practice Nurse, since 2011  
ANCC #2011013805  
Board Certified in Psychiatric & Mental Health Nursing, 1992  
Basic Life Support (BLS)  
Pediatric Early Assessment Recognition and Stabilization (PEARS)  
MANDT Instructor

## **Professional Affiliations**

American Psychiatric Nurses Association  
Kansas Chapter – American Psychiatric Nurses Association  
American College of Healthcare Executives  
Kansas Advanced Practice Nurses Association  
Missouri Organization of Nursing Leaders  
Cardio Neurodevelopment Outcomes Collaborative  
Society of Pediatrics Nurses

## **Professional Experience**

### ***Inspired Psychiatric Care (Private Practice)***

***APRN, PMHNP-BC***

***Overland Park, KS***

***2020 to present***

- Private practice providing psychiatric evaluation, medication management, brief therapy, collaboration, and consultation across the lifespan.
- Specializing in mental health disorders of childhood, adolescence, and adulthood including anxiety, eating disorders, OCD, attention deficit disorder, developmental and intellectual disabilities, ASD, depression, Trauma/PTSD, mood disorders, post-partum issues.
- Pharmacogenomics

### ***Inpatient/Emergency Department Mental Health***

***APRN Coordinator***

***Children's Mercy Hospital System***

***Kansas City, MO***

***February 2020 to present***

### ***Behavioral Health (D&B) Clinic at Children's Mercy Health***

***APRN, PMHNP-BC***

***Multiple Locations***

***January 2016 to present***

- Out-patient mental health providing psychiatric evaluation, medication management, brief therapy, collaboration, and consultation children to young adult live and via telehealth.
- Specializing in mental health disorders of childhood, and adolescence - attention deficit disorder/hyperkinetic disorder, anxiety, eating disorders, OCD, developmental and intellectual disabilities, ASD, depression, Trauma/PTSD, mood disorders.

### ***Service Line Director, Ambulatory Administration***

***October 2016 to February 2020***

- Director of services for the Developmental & Behavioral Health Division, Division of Childhood Adversity & Resilience (Special Care and Nurturing (SCAN - child abuse & neglect; Foundations Foster Care), and Goldiloks (personalized medicine).

### ***OutPatient Behavioral Health at KidsTLC***

***APRN, PHMNP-BC***

***Olathe, KS***

***June 2015 to December 2015***

- Out-patient mental health providing psychiatric evaluation, medication management, brief therapy, collaboration, and consultation across the lifespan.
- Specializing in mental health disorders of childhood, adolescence, and adulthood including anxiety, eating disorders, OCD, attention deficit disorder, developmental

and intellectual disabilities, ASD, depression, Trauma/PTSD, mood disorders, post-partum issues.

***Psychiatric & Counseling Associates (Private Practice)***

***APRN, PMHNP-BC***

***Overland Park, KS***

***2011 to May, 2015***

- Private practice providing psychiatric evaluation, medication management, brief therapy, collaboration, and consultation across the lifespan.
- Specializing in mental health disorders of childhood, adolescence, and adulthood including anxiety, eating disorders, OCD, attention deficit disorder, developmental and intellectual disabilities, ASD, depression, Trauma/PTSD, mood disorders, post-partum issues.

***University of Kansas***

***Adjunct Faculty for the School of Nursing***

***Kansas City, KS***

***2012 to present***

***Pathways (TFI) PRTF***

***APRN, PMHNP-BC***

***Topeka, KS***

***2012 to August 2015***

- Independent contract – primary psychiatric care on site and telemedicine: assessment, diagnosis, treatment for children & adolescents experiencing psychiatric illness.
- Clinical consultation

***Johnson County Mental Health***

***APRN, PMHNP-BC***

***Olathe, KS***

***2011 to 2014***

- Providing psychiatric evaluation, medication management, coordination of care, brief therapy, and consultation. Primarily treating children and adolescents.
- Psychiatric practitioner for Adolescent Center for Treatment (Substance Abuse In-patient Facility).
- Clinical consultation

***Marillac Children's Psychiatric Hospital & PRTF***

***APRN, PMHNP-BC***

***Overland Park, KS***

***2011 to 2012***

- Primary psychiatric care: assessment, diagnosis, treatment, brief therapy, & referral for children & families experiencing psychiatric illness
- Health promotion across the lifespan
- Coordination of care with third party payers, community based providers, & agencies
- Individual & group supervision
- Clinical consultation

***Kids TLC***

***APRN-BC***

***Olathe, KS***

***2008 to 2011***

- Primary psychiatric care: assessment, diagnosis, treatment, brief therapy, & referral for children & families experiencing psychiatric illness
- Clinical assessment of all children to establish appropriateness of admission
- Health promotion across the lifespan

- Coordination of care with third party payers, community based providers, & agencies
- Individual & group supervision
- Clinical consultation

Director of Nursing / Assoc. Director of Nursing (December 2008 to August 2011)

- Responsible for inception & development of the nursing program/team for the Psychiatric Residential Treatment Programme. Recognized by State of Kansas as exemplary.
- Requested by State of Kansas SRS representatives to mentor other PRTF nursing directors within our area.
- Direction and supervision of nursing care to maintain high quality care on all units
- Responsible for providing psychiatric, mental health clinical educational and skill development of nursing staff
- Primary facilitator and contact for Child Psychiatrist (Dr. George Thompson) clinic
- Clinical assessment of children to establish appropriateness of admission
- Participated in Quality Improvement committee, Risk Management committee, Operations Team, Restraint committee, Leadership committee
- Participated & facilitated implementation of several new programs & services
- Developed treatment plans, policies, protocols, and procedures utilizing psychodynamic concepts of nursing

***Johnson County Developmental Services***

Lenexa, KS

Health Services Director

2007 to 2008

- Provided direction and clinical supervision of nursing staff, residential support staff, and work center staff (100 to 150 staff) in the provision of quality medical services to greater than 200 developmentally disabled clients.
- Responsible for nursing team program direction including expansion, and development.
- Provided education trainings for all staff including medication administration, blood borne pathogens, illness identification & treatment, and documentation
- Supervised implementation of client treatment plans, documented and evaluated treatment

***Bridges Community Care (Previously Shields Adult Care Home)***

Pittsburg, KS

Program Director

2001 to 2007

Community based service provider for developmentally disabled individual lifespan

- Directed & facilitated all operations of the agency including but not limited to licensing, program inception and development, policy and procedure formation, fiscal management, quality assurance, public relations, growth and expansion into a four county area with the addition of a second sheltered workshop and many more residential settings. The company grew from 50 clients served to more than 150, and labor force grew from approximately 75 to more than 200.
- Facilitated and directed the closure of the institution (ICFMR), moving 50 developmentally disabled adults into their own homes in the community for the first time. Procuring their residences & everything needed to provide quality, nurturing, safe residences for each of them.

- Co-directed and development of the sheltered workshop.
- Marketed and procured contract work with community businesses for the sheltered workshop staff.
- Represented the company on the local and state level with affiliates, CDDO's, Interhab, and at the State Capitol.
- Lobbied for funding, expansion of services, and awareness.
- Provided education, training, and establishment of competency for nurses, CMA's, residential care staff.
- Clinical consultation and assessment of all clients to establish appropriateness of admission and individualized program plans.
- Health promotion across the lifespan
- Facilitated & participated in Human Rights committee, Leadership committee, Affiliates committee, Health & Safety committee, Community Council, and Funding Committee.
- Demonstrated ability and understanding of developmental tasks, special needs, comorbidities, and complicated case conceptualization for patients.
- Facilitated management of all clients personal funds including account receivable & payables; daily, monthly and annual reports.

***Shields Adult Care Home A.K.A. Bridges Community Care***

Pittsburg, KS

Director of Nursing

1989 to 2001

Intermediate Care Facility for the Mentally Retarded

- Provided direction and supervision of nursing staff to maintain high quality care.
- Provided direction and supervision of CMA and CNA staff to maintain high quality 24 hour client care.
- Facilitated education, training, and establishment of competency for all client care staff
- Participated in Human Rights committee, Infection Control committee, Senior Management Team, Medication Review committee, Individual Participation Plans
- Liaison for all medical and psychiatric service providers, conferring with and supporting family and clinician contacts
- Primary nursing care with health promotion activities across the life span
- Clinical assessment of clients to establish appropriateness of admission
- Public relations

**Grants**

12/09 – 12/10	Austin-Morris, B., Assel, J. Growth of Specialized Psychiatric Units in the Residential Treatment of Children & Adolescents. REACH Community Foundation. \$135,000 (funded).
12/08 – 12/09	Austin-Morris, B., Van Murhagge, D. Promoting Comprehensive Integrated Care to the Underserved. REACH Community Foundation. \$57,000 (funded).

**Publications**

- Austin-Morris, B., et al. (August, 2020). Planning for Behavioral Health Patients. Children's Mercy Intranet. Inforgraphic.
- Austin-Morris, B., et al. (March, 2020). Behavioral Health – Patient Safety. Children's Mercy Intranet, Patient Safety Sway

Austin-Morris, B., (February, 2020). Behavioral Health – Patient & Staff Safety. Children’s Mercy Intranet. <https://sway.office.com/o2VoPIfRyKbT33fz?ref=Link>

Austin-Morris, B., (2019). Toxic Stress Education for Pediatric Practitioners: A Synthesis of the Evidence. Manuscript pending submission to the Journal of the American Psychiatric Nurses Association (JAPNA).

Austin-Morris, B., (2019) Staff Duress in Behavioral Health. Journal of the American Psychiatric Nurses Association (JAPNA).

### **Professional Activities / Appointments**

2020	Great Circle – Board of Directors
2020	Kansas Suicide Prevention Head Quarters – Board of Directors
2020	University of Kansas DNP Program - Preceptor
2020	Aligning Support Across Providers (ASAP)
2020	Employee Wellness Committee – Covid 19
2019	President Elect, Board – American Psychiatric Nurses Association – Kansas Chapter
2019	American Holistic Nursing Association Heart of KC Nursing Chapter
2019	Behavioral Health Team - Nursing Lead – TJC Regulatory Readiness CMH Organization
2019	Trauma Informed Care Workgroup – Children’s Mercy Hospital
2019	Metro Council – KC Metro Community Mental Health Collaborative
2019	Lawrence Kansas Psychiatric Mental Health Nurse Practitioner Network
2018 to present	MANDT training Advisory Committee and Curriculum Committee
2018 to present	Psychosocial Task Force – Children’s Mercy Hospital System
2018 to present	Council on Violence Prevention – Children’s Mercy Hospital
2017 to 2018	Planning committee and topic presenter for the Behavioral Health Master Class
2016 to present	American Psychiatric Nurses Association – Administrative Council Advisory Board APRN Council Advisory Panel Child & Adolescent Council Advisory Panel Institute for Mental Health Advocacy Advisory Panel, Expert Panel, and the Suicide Prevention Continuing Education Workgroup
2014-2016	Developing and facilitating the Kansas City metro Psychiatric Nurse Practitioner Network
2012 to present	University of Kansas, Preceptor for MSN and DNP candidates (on-going)
2012	American Psychiatric Nurses Association – Suicide Prevention Continuing Education Workgroup
2011-2013	Sharecare Nurse Expert (Dr. Oz initiative) – Sigma Theta Tau International
2010	Expert Panel. RN-PMH Council. American Psychiatric Nurses Association

## **Presentations**

Austin-Morris, B. (February 1, 2021) Patient & Staff Safety. APRN Fellowship. Childrens Mercy System

Austin-Morris, B. (June 25, 2020) 1:1's with Children and Adolescents Who are Admitted for Suicidal Ideation or Current Acts of Self-harm – What to Say and What Not to Say. Council on Violence Prevention. Children's Mercy Hospital

Austin-Morris, B. (February, 2020) Mental Health Awareness: A Generation in Crisis. NAPNAP Regional Conference

Austin-Morris, B. (January 2020 – ongoing) MANDT – Building Healthy Relationships

Austin-Morris, B. (January, 2020) Seasons of Learning Broadcast – Behavioral Health

Austin-Morris, B. (July, 2019) Workplace Violence

Austin-Morris, B. (June, 2019) Who do you call? Behavioral Disruptions in Healthcare Settings

Austin-Morris, B. (May, 2019) Behavioral Health Town Hall

Austin-Morris, B. (September, 2018). Building Resilience in Our Kids & Ourselves

Austin-Morris, B. (November, 2017). Toxic Stress Education for Pediatric Health Practitioners

Austin-Morris, B. (October, 2016). Psychopharmacology for General Health Care Providers

Austin-Morris, B. (March, 2014). Diagnosis and Treatment of Mood and Anxiety Disorders. University of Kansas, School of Nursing

Austin-Morris, B. (March, 2013). Diagnosis and Treatment of Psychiatric Impairments in Children & Adolescents. University of Kansas, School of Nursing

Austin-Morris, B. (May, 2011). Navigating the Psychopharmacological Treatment of Psychiatric Impairments in Children & Adolescents. Kids TLC

Austin-Morris, B. (April, 2011). Neuroleptic Malignant Syndrome: A Medical Emergency. Kids TLC

Austin-Morris, B. (March, 2011). Bipolar Disorder: Diagnostic Criteria & Practice Guidelines in Children. Kids TLC

Austin-Morris, B. (January 2011). ADHD – Screening, Clinical Presentation and Treatment in Children. TLC for Children & Families

Austin-Morris, B. (December 2010). Discharge Treatment Planning for the Nurse Manager. TLC for Children & Families

Austin-Morris, B. (December 2010). Depression: Clinical Presentation and Treatment in Children. TLC for Children & Families

Austin-Morris, B. (November, 2010). Family Therapy. University of Kansas



## **Presentations (cont'd)**

- Austin-Morris, B. (November 2010). Psychotropic Medications Used with Children: An Overview. TLC for Children & Families
- Austin-Morris, B. (October, 2010). DSM IV: What is it? How can it Help Me Understand Psychiatric Diagnosis? TLC for Children & Families
- Austin-Morris, B. (September, 2010). EPS in Children. TLC for Children & Families
- Austin-Morris, B. (October, 2009) H1N1: What Now? TLC for Children & Families
- Austin, B. (June, 2007) Understanding Grief: Supporting Families. Cornerstone Village
- Austin, B. (May, 2007) Understanding Grief. Harry Hynes Hospice
- Austin, B. (November 2007). Legal Guardianship for Individuals with Developmental Disabilities: A Guardians Perspective. Interhab
- Austin, B. (October 2007). Seizure Disorders: Identification, Management & Treatment. Johnson County Developmental Services
- Austin, B. (September, October, November, December 2007). Medication Administration Training for Residential Care Staff: Competency. Johnson County Developmental Services
- Austin, B. (October 2006). Delegation of Nursing Task to Direct Support Staff. Interhab
- Austin, B. (July 2006). Delegation of Nursing Tasks to Direct Support Staff. Kansas Developmental Disabilities Nurses Association
- Austin, B. (June 2006). PKU: Diagnosis & Treatment Protocols. Bridges Community Care
- Austin, B. (January, 2006). Understanding Developmental Syndromes. Kansas Developmental Disabilities Association
- Austin, B. (January 2006). Delegation of Nursing Task to Direct Support Staff. Tri-Valley Developmental Services
- Austin, B. (October, 2005). PKU Diet in Adults with Developmental Disabilities. Bridges Community Care
- Austin, B. (May, 2005). Vagus Nerve Stimulator (VNS) Use in Atypical Seizure Disorders. Bridges Community Care
- Austin, B. (January, 2003). Treatment of Refractory Seizure Disorder in Developmentally Disabled Adults. Bridges Community Care
- Austin, B. (February, 2001). Aggression in Developmentally Disabled Clts. Bridges Community Care

**Professional/Volunteer Experience**

2020	Testimony to KC Mayor and Council – Health Care Advocacy
2019	Stephen's Minister Always & Forever Midwest Animal Sanctuary Out of the Darkness Suicide Walk Meet the Need – Community Awareness Sunflower House Fundraiser w/Nick's Voice – Child Abuse Awareness Refresh Conference – Foster Care Families Written Testimony for Kansas House or Representatives HB 2066 Special Needs Ministry
2018	Head for the Cure 5K Nick's Voice – suicide awareness FamFest
2017	Professional advocacy, Representative Erin Davis. Advocacy for mental health, independent APRN practice, and ID/DD. Invited and arranged her presentation to the Kansas Advanced Practice Association
2017	Food Drive for Operation Breakthrough
2016 to present	Corporate Challenge
2015	3 <sup>rd</sup> Annual Kansas Law Enforcement Run to Remember
2014	Professional and Patient Advocacy trip to Washington, DC to meet with legislative advisors
2013 to present	Stop Hunger Now
2012 to 2017	Personal ministry team. Heartland Community Church
2011 to present	Various Workgroups for the APNA
2009 – 2017	Personal ministry team. Vineyard Church
2011 to 2013	ShowMe Response & United Way Volunteer
2010 to 2013	Convoy of Hope – Medical team, Prayer team volunteer
2009 – 2010	Fundraising events for TLC for Children & Families
2006 – 2013	Appointed & serve as legal guardian/conservator for developmentally disabled young adult transitioning/coaching her to where she is now her own guardian.
2008 – 2009	Kansas Developmental Disabilities Association, Vice President
2007 – 2008	Kansas Developmental Disabilities Association: Facilitated development of standardized medication training for residential support staff for the State of Kansas
2007 – 2008	Committee member – Interhab – Health issues, DD population needs throughout the life span, training, determining delegation of nursing tasks
2006 – 2007	College of Direct Support Facilitator
1998 – 2008	Special Olympics coach, volunteer & supporter
2005 – 2008	Community Council member for the CDDO of SE Kansas
2003 – 2005	Big Tent Coalition participant
2000 – 2005	Mental Health Consortium Southeast Kansas participant
1999 – 2003	Funding Committee member for CDDO of SE Kansas
1990 – 2001	Client Council Facilitator: problem solving, community employment, guardian relations, funding

## Bibliography – Mental Health March 2021

- AACAP.org. Child Abuse Resource Center. Frequently Asked Questions: What is Child Abuse? July 2016.  
[http://www.aacap.org/aacap/Families\\_and\\_Youth/Resource\\_Centers/Child\\_Abuse\\_Resource\\_Center/FAQ.aspx#question1](http://www.aacap.org/aacap/Families_and_Youth/Resource_Centers/Child_Abuse_Resource_Center/FAQ.aspx#question1)
- American Psychiatric Association. (2013). *Diagnostic and statistical manual of mental disorders* (5th ed.). Washington, DC: Author. Text citation: (American Psychiatric Association, 2013).
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Greater KC Chapter of NAPNAP  
Lunch & Learn  
March 9 2021

A Deep Dive into Understanding Complex Trauma  
Presented by Becky Austin-Morris, DNP, PMHNP-BC

Becky Austin-Morris, DNP, PMHNP-BC

#### Understanding Complex Trauma

1. The learning outcomes/educational objectives for this session were met.

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Strongly disagree

2. I will be able to use this information in future practice.

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Strongly disagree

3. The speaker was interesting and held my attention.

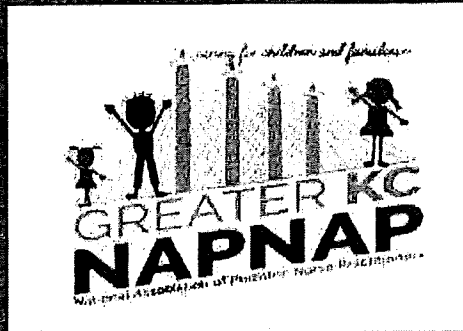
- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Strongly disagree

4. The speaker was knowledgeable in the content area.

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Strongly disagree

5. The speaker disclosed all relevant relationships.

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Strongly disagree



Greater KC Chapter of NAPNAP  
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#### Overall Evaluation

6. I would recommend this program to a colleague.

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Strongly disagree

7. The program was well organized.

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Strongly disagree

8. The program met my learning needs.

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Strongly disagree

9. The program had balance, independence, and objectivity.

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Strongly disagree

10. The online platform met my learning needs.

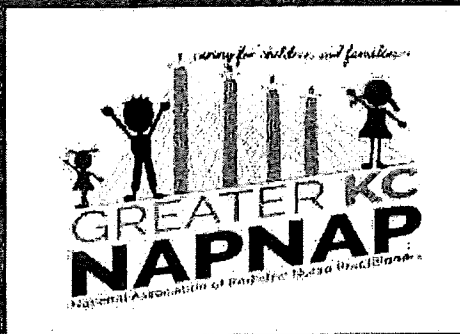
- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Strongly disagree

11. The time of the educational offering worked with my schedule.

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Strongly disagree

12. Additional comments and suggestions for future educational topics are welcome:

--



Greater KC Chapter of NAPAP  
Lunch & Learn  
March 9 2021

A Deep Dive into Understanding Complex Trauma

Presented by Becky Austin-Morris, DNP, PMHNP-BC

#### CEU Certificate

Thank you for completing the evaluation. Below is the CE certificate. **YOU MUST PRINT THIS IMAGE prior to closing out of this survey.** First right click and save the image to your desktop. Then print out the image from your desktop. Questions or concerns, please contact Tammie Wingert (twingert@cmh.edu).



**Greater Kansas City Chapter of NAPNAP**

***This certificate verifies completion of the continuing education offering titled:***

***A Deep Dive into Understanding  
Complex Trauma***

***Presented by: Becky Austin-Morris, DNP, PMHNP-BC***

***1.0 Contact Hours Provided***

***March 9 2021—1200-1300***

***Hosted Virtually***

Name of Attendee

*Tammie Wingert, MSN, RN, CPNP*

License Number

Tammie Wingert, MSN, RN, CPNP  
Program Chair

Provider Address:  
2401 Gillham Road  
Kansas City, Missouri  
64108

**Long Term CNE Provider Checklist**  
(K.A.R. 60-9-107)

**Name of Provider:** Memorial Health System, LT0292-0615 Five-Year Renewal

**Name of Program Coordinator:** Angela Smith, RN, MSN

**Date to CNE Committee:** June 16, 2021

<b>Information Required</b>	<b>Received</b>	<b>N/A</b>
Completed application for initial approval or five-year renewal for LT CNE providership shall be submitted at least 60 days before a scheduled board meeting	03/15/2021	
The name and address of the organization on the application	X	
The name and address of the department or unit within the organization responsible for approving CNE, if different from the name and address of the organization		X
The name, education and experience of the program coordinator responsible for CNE	Angela Smith, RN, MSN	
<ul style="list-style-type: none"> <li>Be a licensed professional nurse</li> </ul>	X	
<ul style="list-style-type: none"> <li>Have three years of clinical experience</li> </ul>	X	
<ul style="list-style-type: none"> <li>Have one year of experience in developing and implementing nursing education</li> </ul>	X	
<ul style="list-style-type: none"> <li>Have a baccalaureate degree (unless held this position for the provider at least five years immediately prior to January 1, 1977)</li> </ul>	X	
<b>Policies &amp; Procedures:</b>		
Written policies and procedures, including at least the following areas:		
<ul style="list-style-type: none"> <li>Assessing the need and planning for CNE activities</li> </ul>	X	
<ul style="list-style-type: none"> <li>Fee assessment</li> </ul>	X	
<ul style="list-style-type: none"> <li>Advertisements or offering announcements. Published information shall contain the following statement: "(name of provider) is approved as a provider of continuing nursing education by the Kansas State Board of Nursing. This course offering is approved for contact hours applicable for APRN, RN, or LPN relicensure. Kansas State Board of Nursing provider number: "</li> </ul>	X	
<ul style="list-style-type: none"> <li>Notice of change of coordinator or required policies and procedures. The program coordinator shall notify the board in writing of any change of the individual responsible for the providership or required policies and procedures within 30 days</li> </ul>	X	
For long term providers, the policies and procedures for the offering approval process shall include the following:		

• A summary of the planning	X	
• The behavioral objectives	X	
• The content, which shall meet the definition of CNE in KSA 65-1117	X	
• The instructor's education and experience, documenting knowledge and expertise in the content area	X	
• A current bibliography that is reflective of the offering content. The bibliography shall include books published within the past 10 years, periodicals published within the past five years, or both	X	
• An offering evaluation that includes each participant's assessment of the following:		
▪ The achievement of each objective	X	
▪ The expertise of each individual presenter	X	
An approved provider may award any of the following:		
• Contact hours as documented on an offering agenda for the actual time attending, including partial credit for one or more contact hours	X	
• Credit for fractions of hours over 30 mins to be computed towards a contact hour	X	
• Instructor credit, which shall be twice the length of the first-time presentation of an approved offering, excluding an standardized, prepared curriculum	X	X
• Independent study credit that is based on the time required to complete the offering, as documented by the provider's pilot test results		X
• Clinical hours		X
<b>Documentation of Attendance</b>		
Each provider shall maintain documentation to verify that each participant attended the offering. The provider shall require each participant to sign a daily roster, which shall contain the following information:		
• The provider's name, address, provider number, and coordinator	X	
• The date and title of the offering, and the presenter or presenters	X	
• The participant's name and license number and the number of contact hours awarded	X	
Each provider shall maintain documentation to verify completion of each independent study offering, if applicable. To verify completion of an independent study offering, the provider shall maintain documentation that includes the following:		
• The provider's name, address, provider number, and coordinator		X
• The participant's name and license number, and the number of contact hours awarded		X

• The title of the offering		X
• The date on which the offering was completed		X
• Either the completion of a posttest or a return demonstration		X
<b>Certificate of Attendance/CE Transcript</b>		
A certificate of attendance shall be awarded to each participant after completion of an offering, or a CE transcript shall be provided according to the policies and procedures of the long-term provider		
Each certificate and each CE transcript shall be complete before distribution to the participant		
Each certificate and each CE transcript shall contain the following information:		
• The provider's name, address and provider number	X	
• The title of the offering	X	
• The date or dates of attendance or completion	X	
• The number of contact hours awarded and, if applicable, the designation of any independent study or instructor contact hours awarded	X	
• The signature of the individual responsible for the providership	X	
• The name and license number of the participant	X	
<b>Recordkeeping &amp; Storage</b>		
For each offering, the approved provider shall retain the following for two years:		
• A summary of the planning	X	
• A copy of the offering announcement or brochure	X	
• The title and objectives	X	
• The offering agenda or, for independent study, pilot test results	X	
• A bibliography	X	
• A summary of the participants' evaluations	X	
• Each instructor's education and experiences	X	
• Documentation to verify completion of the offering	X	
The record storage system used shall ensure confidentiality and easy retrieval of records by authorized individuals	X	
<b>Program Evaluation Plan</b>		
For long-term providers, a copy of the total program evaluation plan	X	
<b>Two Proposed Offerings</b>		
The provider shall submit two proposed offerings, including the following:		
	Neonatal Resuscitation Program	The Other End of the Stethoscope

• A summary of planning	X	X
• A copy of the offering announcement or brochure	X	X
• The title and behavioral objectives	X	X
• The offering agenda or, for independent study, pilot test results	X	X
• Each instructor's education and experience	X	X
• A current bibliography	X	X
• The offering evaluation form	X	X

12/2018

Review Completed by Chelsey Stephenson, CNE Education Specialist on May 25, 2021.

**Reference No.:** 24848 **Date submitted:** Mar 15 11:26 2021

**radio** ~ Renewal

**Providername** ~ Memorial Health System

**providernum** ~ LT0292-0615

**legalbody** ~ ~

**address** ~ 511 NE 10th Street

**adress2** ~ Abilene, KS 67410

**telephone** ~ 785-263-6612

**email** ~ asmith@mhsks.org

**coordinator** ~ Angela Smith

**date** ~ 03-15-2021

**planningce** ~ Assessment & Planning

1. On an annual basis, a written/electronic needs assessment will be developed and conducted by the CNO.
2. Each nursing staff member will be provided the opportunity to complete a written/electronic needs assessment.
3. With every program evaluation, nursing staff will be provided the opportunity to describe educational needs.
4. A program evaluation will be provided to each participant that includes assessment of learner achievement of each objective, expertise/knowledge of each presenter.
5. On an informal basis, nursing staff are encouraged to notify the CNO of any identified educational needs.
6. Continuing education planning will consider the formal and informal feedback. The educational plan will be based upon need and gaps in practice and knowledge.
7. An education committee with representation from the nursing units may be activated to provide input on the planning and developing nursing education.
8. The CNO will collaborate with educational experts, as needed, to ensure quality education is provided.
9. Total continuing education program evaluation will occur on a scheduled, ongoing basis. All required items of the Program Evaluation will be reviewed annually. The results of the evaluation will be submitted to KSBN as required for each fiscal year, consistent with the state from July 1 to June 30.

**feeassessment** ~ 1. Fees will be assessed on each continuing nursing education offering based upon expenses. The fees will be based on the

following costs:

- a. Speaker
  - b. Facility
  - c. Program supplies and equipment
  - d. Required textbooks or articles
  - e. Any food or beverage
  - f. Number of contact hours
2. MHS staff will receive a reduced registration rate.
  3. Any required certification courses/continuing nursing education (CNE) hours will be paid by MHS.
  4. MHS staff will not be paid an hourly wage for attending the program, unless the program is required for the position.
  5. Fees may be paid by cash or check with cash being the preferred method of payment. Checks should be made payable to: Memorial Health System CNE.
    - a. Registrants will be responsible for any expenses incurred by MHS for checks returned for insufficient funds. Additional fees may be added.
  6. If written notice of inability to attend is provided at least 3 days prior to the program, the refund will be the amount of the program, less 10% for handling fee. No refund will be given after that time.
  7. Registrants/participants are expected to be on-time for CNE offerings. If a registrant/participant is more than 15 minutes late or leaves more than 15 minutes early, CNE hours will not be provided. No refund of fees will be granted.

**advertisement** ~ Advertisement

Advertisements will include the following information:

- Program Title
- Presenter (s)'s Name and Credentials
- Date(s) and Time(s)
- Location
- Course Objectives
- Cost
- Registration Information

All advertisement (i.e. brochure) will contain the following statement: Memorial Health System is approved as a provider of continuing nursing education by the Kansas State Board of Nursing. This course offered is approved for \_\_\_\_ contact hours application for APRN, RN, LPN, or LMHT relicensure. Kansas State Board of Nursing Provider Number:\_\_\_\_\_.

Advertisement will be distributed to all entities of the health system. Advertisements will be posted on each MHS nursing unit and the CNO

## Quarterly Newsletter.

Advertisements may be emailed to nursing staff with current email addresses

As appropriate, advertisements will be sent to surrounding community and/or critical access hospitals. And advertisements will be provided to individuals requesting.

**approvalprocess** ~ The CNE Program Coordinator will review each educational request/program to determine the appropriateness of the program being provided for continuing nursing education (CNE). The CNE Program Coordinator will complete a planning summary form that will be maintained with the following items being reviewed and if appropriate, approved:

- Title of the program
- Target audience
- Instructional level and appropriateness
- Number of CNE to be offered
- Behavioral objectives
- Proposed date(s) and time(s)
- Location
- Instructional materials including an agenda/outline and agenda, description of the program, and bibliography (books published within the last 10 years and periodicals/journals published in last 5 years)
- Ensure meets the definition of continuing education (KAR 65-1117)  
"...learning experiences intended to build upon the educational and experiential bases of registered professional nurse and licensed practical nurse for enhancement of practice, education, administration, research or theory development to the end of improving the health of the public"
- Qualifications of the presenter including education, experience, knowledge /expertise
- Any fees/costs
- Disclosure form
- Bibliography to ensure books are no older than 10 years and periodical no older than 5 years
- Congruent with MHS' philosophy, vision, and mission

If the course is found to not be appropriate/acceptable for CNE, the requester will be notified by the CNO. Each participant will have the opportunity to evaluate the offering (see Approval Process section above for additional information).



**contacthours** ~ The calculation method defined by the Kansas State Board of Nursing will be utilized where each 50 minutes of contact/instructional time will be equivalent to 1 continuing nursing education hour (CNE). There will be no partial credit awarded. As stated above, participants are expected to be on-time for the CNE offering. If a participant is more than 15 minutes late or leaves more than 15 minutes early, CNE credit will not be provided.

Each participant will be required to sign a roster at the beginning of each program. The participant will only be required to sign one time per day.

**verifycompletion** ~ 1. Program information will be retained electronically for a period of at least 2 years. The information to be maintained will be:

- a. Planning Summary
- b. Advertisement/Brochure/Flyer
- c. Title of Program
- d. Behavioral Objectives
- e. Agenda
- f. Bibliography
- g. Participant Course Evaluation
- h. Summary of Course Evaluations
- i. Instructor Curriculum Vitae, Resume', or similar document describing education and experience
- j. Attendance Roster including:
  - i. CNE Hours Awarded
  - ii. Date
  - iii. Title of Course
  - iv. Instructor Name
  - v. List of Names and License Numbers for all Participants Who Registered
  - vi. Signature of Participants
  - vii. Provider Name, Address & Provider Number
  - viii. Name, License Number, and Email Address of Participants Who Walk-In (as room is available)
  - ix. Signature of CNE Program Coordinator
- k. Certificate of Attendance including:
  - i. Provider Name, Address, & Provider Number
  - ii. Title
  - iii. Presenter(s)'s Name and Credentials
  - iv. Date of Program

- v. Number of CNE Hours
- vi. Attendee's Name, License Number
- vii. Signature of Program Coordinator (May be Electronic)
- viii. Instructor Contact Hours, as appropriate

**recordkeeping** ~ Certificate of Attendance will be completed prior to distribution to the participants. Every attempt will be made to provide this certificate at the end of the offering. However, any walk-ins or required changes needed to a certificate will be mailed/emailed to the participant within 10 days.

2.The electronic record storage system used shall ensure confidentiality and easy retrieval of records by authorized individuals.

3.Replacement CNE certificates may be requested in writing. There will be a \$10 replacement fee. The reissued certificate will be identified as a copy. The request will be maintained in the course file.

**noticeofchange** ~ The individual determined to be the Program Coordinator will be the Chief Nursing Officer (CNO) of MHS. The individual must also meet the following qualifications:

- a.Licensed to practice nursing in the State of Kansas
- b.Have at least three (3) years of clinical experience
- c.Have at least one (1) year of experience in developing and implementing continuing education programs
- d.Have at least a baccalaureate degree in nursing

The program coordinator will be responsible to submit any changes in the long-term providership to the Kansas State Board of Nursing (KSBN) in writing within 30 days.

**programevaluation** ~ A total program evaluation will be performed each year. Policies will be reviewed annually, as well as actions/recommendations documented.

**Submission date** ~ 03-15-2021 11:26:42

**Form ID** ~ 1672730

785-280-1357  
nurseangiej@icloud.com

2564 Highway 15  
Abilene, KS  
67410

- Integrate technology into learning via PowerPoint, Canvas, instructional videos and lab simulators
- Collaborate with other professors to ensure evidence based practice curriculum

**(PRN) Contract Nurse-Immunization/Public Health Nurse; Dickinson County Health Department; May 2014-Nov. 2104**

Under the supervision of the Health Department Deputy Director, seeks to protect the community from vaccine preventable disease by providing education and immunization services to community residents. Assesses the immunization status of clients, administers vaccines, and educate clients and caregivers about immunizations.

- Administer vaccinations and document appropriately
- Assisted in influenza vaccination clinics
- Assisted with implementation of new computerized documentation system and charting

**Nursing Coordinator/House Supervisor; Geary Community Hospital; Junction City, KS — Jan. 2014-May 2014**

Supervise day to day operations of the hospital and reports to Director of Nursing. Assists all units with medical procedures, medication administration, and patient care. Responsible for evaluating staffing and making appropriate changes.

- Cross trained to all units of the hospital (including Labor and Delivery/ Postpartum/Newborn Nursery, ICU, Surgery, Senior Health, Medical/Surgical and Emergency Room)
- Responsible for obtaining medication/mixing medication to deliver to units in absence of pharmacist
- Handled patient/family concerns
- Assists in Code Blue, Rapid Response, and other emergent events

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**Registered Nurse; USD 435; Abilene, KS — 2007-2014**

Responsible for student health needs at two elementary schools. Performed day to day care including diabetes care and insulin administration, catheterizations, medication administration, and tube feedings. Also responsible for acute emergency care as needed

- Recorded and maintained all student health records; including immunizations into state website
- Responsible for nursing care plans for students with health concerns, and IEPs
- Attending meetings with parents, staff and health professionals to coordinate student care
- Performed yearly screenings as required
- Worked with local health department and Kansas Department of Health and Environment regarding public health concerns and disease outbreaks

**Registered Nurse-Women's Health Center, Geary Community Hospital; Junction City, KS - 2005- 2008**

Responsible for laboring patient, postpartum care, healthy newborn and sick nursery, post-operative hysterectomy and gynecological surgical patients

- Assisted with building, teaching and implementing computerized documentation hospital wide
- Functioned as preceptor to newly hired nurses; day shift and night shift charge nurse
- Patient care consisted of pregnant patients up to newborn care. Functioned in Level 1/Level 2 sick nursery

**Registered Nurse, Cardiac ICU Step-down, Salina Regional Health Center; Salina, KS - 2004-2005**

Functioned as charge nurse on step-down unit; Performed patient

Closely monitor and record vitals, telemetry, and assess condition of critically ill post-operative, cardiac, and high-level patients. Draw blood from PICC and Central lines.

---

Identify, respond to, and notify physician of adverse indications. Initiated and maintained IV infusions of cardiac medications.

- Maintain crash carts, defibrillators and emergency equipment and supplies. Activate codes and manage medical emergencies until physician arrives. Update patient families on progress.
- Teach use of Patient Controlled Analgesia (PCA). Educate patients and families on medication and treatment regimens, activity level, adverse indications and complications, and follow-up orders.
- Access and update patient records including vitals, conditions, adverse reactions, medications. Adhere to HIPAA and JCAHO requirements.

#### **Education**

- Western Governors University MSN, Nursing Education, November 2017
- Western Governors University - BSN, October 2015
- Kansas Wesleyan University - Salina, KS 2002-2004; Associate Degree of Nursing
- Kansas State University - Salina/Manhattan, KS 1999-2002; A.A.S in Computer Information Systems/Computer Science Technology

#### **Skills**

State of Kansas Registered Nurse; BLS Certified; ACLS Certified; Have taken STABLE neonatal class; NRP; Cardiac Step-down certification

2564 Highway 15  
Abilene, KS 67410  
785-280-1357  
nurseangiej@icloud.com

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### **Profile**

Registered Nurse with experience dedicated to providing competent, compassionate care. Experience ranging from public health, to care in the acute setting, and management.

### **Experience**

**Registered Nurse - Memorial Health Systems Abilene KS; Dec 2014-current**

#### **Lead Clinic Nurse - Heartland HealthCare Clinic**

- Document intake and vital signs of family practice patients
- Collaborate with patients, physicians and other health team members
- Provide staff education and conduct nurse meetings as needed
- Maintain and update EMR to comply with hospital and legal requirements
- Delegate tasks as needed to ensure efficient work flow
- Update clinic policies and procedures
- Ensure adequate clinic nurse staffing/create nurse schedule
- Athena superuser, Service Excellence Advisor, QI Team Nurse
- Contribute to staff evaluations and assist in hiring of new staff

#### **PRN Registered Nurse - MHS Medical/Surgical**

- Utilized the nursing process to plan, implement and evaluate patient care
- Performed assessments and patient care; including intravenous therapy and wound care
- Supervision of certified nurse assistants

**Adjunct Nursing Professor- Kansas Wesleyan University - Salina, KS May 2016-May 2017**

- Create instructional materials for classroom lecture, as well as assessment skills lab

<b>Continuing Nursing Education</b>	BUSINESS LINE: Memorial Hospital
FUNCTIONAL AREA: MH - Nursing	EFFECTIVE as of: 8-1-15
POLICY OWNER: Nursing Administration	REVIEWED: 03/10/2021
APPLIES TO: Nursing Staff	VERSION: 2

### **PURPOSE:**

To allow the nursing staff to participate in life-long learning, a consistent process is needed for assessing, planning, and implementing nursing educational events. These events are for the purpose of building on the education and experiential knowledge of the Memorial Health System's (MHS) nursing staff while providing quality and compassionate care to patients/residents.

### **POLICY/PROCEDURE/GUIDELINES:**

#### **Program Coordinator**

The individual determined to be the Program Coordinator will be the Chief Nursing Officer (CNO) of MHS. The individual must also meet the following qualifications:

- a. Licensed to practice nursing in the State of Kansas
- b. Have at least three (3) years of clinical experience
- c. Have at least one (1) year of experience in developing and implementing continuing education programs
- d. Have at least a baccalaureate degree in nursing

The program coordinator will be responsible to submit any changes in the long-term providership to the Kansas State Board of Nursing (KSBN) in writing within 30 days.

#### **Assessment & Planning**

1. On an annual basis, a written/electronic needs assessment will be developed and conducted by the CNO.
2. Each nursing staff member will be provided the opportunity to complete a written/electronic needs assessment.
3. With every program evaluation, nursing staff will be provided the opportunity to describe educational needs.
4. A program evaluation will be provided to each participant that includes assessment of learner achievement of each objective, expertise/knowledge of each presenter.
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7. An education committee with representation from the nursing units may be activated to provide input on the planning and developing nursing education.

8. The CNO will collaborate with educational experts, as needed, to ensure quality education is provided.
9. Total continuing education program evaluation will occur on a scheduled, ongoing basis. All required items of the Program Evaluation will be reviewed annually. The results of the evaluation will be submitted to KSBN as required for each fiscal year, consistent with the state from July 1 to June 30.

#### **Fee Assessment**

1. Fees will be assessed on each continuing nursing education offering based upon expenses. The fees will be based on the following costs:
  - a. Speaker
  - b. Facility
  - c. Program supplies and equipment
  - d. Required textbooks or articles
  - e. Any food or beverage
  - f. Number of contact hours
2. MHS staff will receive a reduced registration rate.
3. Any required certification courses/continuing nursing education (CNE) hours will be paid by MHS.
4. MHS staff will not be paid an hourly wage for attending the program, unless the program is required for the position.
5. Fees may be paid by cash or check with cash being the preferred method of payment. Checks should be made payable to: Memorial Health System CNE.
  - a. Registrants will be responsible for any expenses incurred by MHS for checks returned for insufficient funds. Additional fees may be added.
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7. Registrants/participants are expected to be on-time for CNE offerings. If a registrant/participant is more than 15 minutes late or leaves more than 15 minutes early, CNE hours will not be provided. No refund of fees will be granted.

#### **Advertisement**

Advertisements will include the following information:

- Program Title
- Presenter (s)'s Name and Credentials
- Date(s) and Time(s)
- Location
- Course Objectives
- Cost
- Registration Information

All advertisement (i.e. brochure) will contain the following statement:

*Memorial Health System is approved as a provider of continuing nursing education by the Kansas State Board of Nursing. This course offered is approved for \_\_\_\_\_ contact*



hours application for APRN, RN, LPN, or LMHT relicensure. Kansas State Board of Nursing Provider Number:\_\_\_\_\_.

Advertisement will be distributed to all entities of the health system. Advertisements will be posted on each MHS nursing unit and the CNO Quarterly Newsletter.

Advertisements may be emailed to nursing staff with current email addresses

As appropriate, advertisements will be sent to surrounding community and/or critical access hospitals. And advertisements will be provided to individuals requesting.

### **Approval Process**

The CNE Program Coordinator will review each educational request/program to determine the appropriateness of the program being provided for continuing nursing education (CNE). The CNE Program Coordinator will complete a planning summary form that will be maintained with the following items being reviewed and if appropriate, approved:

- Title of the program
- Target audience
- Instructional level and appropriateness
- Number of CNE to be offered
- Behavioral objectives
- Proposed date(s) and time(s)
- Location
- Instructional materials including an agenda/outline and agenda, description of the program, and bibliography (books published within the last 10 years and periodicals/journals published in last 5 years)
- Ensure meets the definition of continuing education (KAR 65-1117)

*"...learning experiences intended to build upon the educational and experiential bases of registered professional nurse and licensed practical nurse for enhancement of practice, education, administration, research or theory development to the end of improving the health of the public"*

- Qualifications of the presenter including education, experience, knowledge /expertise
- Any fees/costs
- Disclosure form
- Bibliography to ensure books are no older than 10 years and periodical no older than 5 years
- Congruent with MHS' philosophy, vision, and mission

If the course is found to not be appropriate/acceptable for CNE, the requester will be notified by the CNO. Each participant will have the opportunity to evaluate the offering (see Approval Process section above for additional information).

### **Continuing Nursing Education Hours Awarding**

The calculation method defined by the Kansas State Board of Nursing will be utilized where each 50 minutes of contact/instructional time will be equivalent to 1 continuing nursing education hour (CNE). There will be no partial credit awarded. As stated above, participants are expected to be on-time for the CNE offering. If a participant is more than 15 minutes late or leaves more than 15 minutes early, CNE credit will not be provided.

Each participant will be required to sign a roster at the beginning of each program. The participant will only be required to sign one time per day.

### **Cancellation of Programs**

In cases of lack of enrollment, severe weather or other unexpected events, programs may be cancelled or postponed. Effort will be made to contact all the registrants. Tuition will be fully refunded.

### **Recordkeeping**

1. Program information will be retained electronically for a period of at least 2 years.

The information to be maintained will be:

- a. Planning Summary
- b. Advertisement/Brochure/Flyer
- c. Title of Program
- d. Behavioral Objectives
- e. Agenda
- f. Bibliography
- g. Participant Course Evaluation
- h. Summary of Course Evaluations
- i. Instructor Curriculum Vitae, Resume', or similar document describing education and experience
- j. Attendance Roster including:
  - i. CNE Hours Awarded
  - ii. Date
  - iii. Title of Course
  - iv. Instructor Name
  - v. List of Names and License Numbers for all Participants Who Registered
  - vi. Signature of Participants
  - vii. Provider Name, Address & Provider Number
  - viii. Name, License Number, and Email Address of Participants Who Walk-In (as room is available)
  - ix. Signature of CNE Program Coordinator
- k. Certificate of Attendance including:
  - i. Provider Name, Address, & Provider Number
  - ii. Title
  - iii. Presenter(s)'s Name and Credentials
  - iv. Date of Program

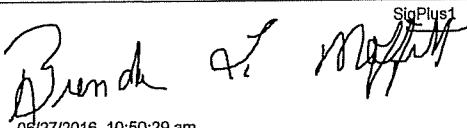
- v. Number of CNE Hours
- vi. Attendee's Name, License Number
- vii. Signature of Program Coordinator (May be Electronic)
- viii. Instructor Contact Hours, as appropriate

Certificate of Attendance will be completed prior to distribution to the participants. Every attempt will be made to provide this certificate at the end of the offering. However, any walk-ins or required changes needed to a certificate will be mailed/emailed to the participant within 10 days.

- 2. The electronic record storage system used shall ensure confidentiality and easy retrieval of records by authorized individuals.
- 3. Replacement CNE certificates may be requested in writing. There will be a \$10 replacement fee. The reissued certificate will be identified as a copy. The request will be maintained in the course file.

#### **Instructor CNE Credit**

An instructor may receive Instructor CNE hours following the guidelines of KSBN. Two (2) CNE hours may be awarded for each hour of preparation and presentation for a first time presentation. Standardized, published curriculums (i.e. ACLS, NRP) are excluded.

 <div style="position: absolute; top: 565px; left: 350px; font-size: 8px;">SigPlus1</div> <div style="position: absolute; top: 615px; left: 120px; font-size: 10px;">06/27/2016 10:50:29 am</div>	
APPROVED BY:	DATE: 6-27-16
FORMS:	
REFERENCES: Kansas Nurse Practice Act	

**Memorial Health System  
Continuing Nursing Education Total Program Evaluation**

<b>Topic to be Reviewed</b>	<b>Frequency</b>	<b>Criteria</b>	<b>Review Date&amp; Findings</b>	<b>Actions/Recommendations</b>
Policy: Continuing Nursing Education <ul style="list-style-type: none"> <li>• Program Coordinator</li> <li>• Assessment &amp; Planning</li> <li>• Fee Assessment</li> <li>• Advertisement</li> <li>• Approval Process</li> <li>• Cancellation of Programs</li> <li>• Recordkeeping</li> <li>• Instructor CNE Credit</li> </ul>	Annually in June	Meets the criteria/qualifications listed in the Kansas Nurse Practice Act.	07/01/2019	Policy reviewed and current. Change made to CNE program coordinator (new CNO Jan. 2019)
Total Program Evaluation & Effectiveness	Annually in June			<b>Completed. See above</b>

7-1-19



MEMORIAL HEALTH SYSTEM

### Sign In Roster

#### Neonatal Resuscitation Program (NRP)

12/10/2019

Holly Pomeroy, Katie Snapp, Melissa Taplin, Matt Mead

Name	Signature with Credentials	License Number	Email address

\_\_\_\_\_  
Angela Smith RN MSN  
Program Coordinator

\_\_\_\_\_  
Date

Memorial Health System is approved as a provider of CNE by the Kansas State Board of Nursing. This course offering is approved for 1.0 contact hours applicable for RN relicensure. Kansas State Board of Nursing provider number: LT0292-0615  
Memorial Health System 511 NE 10<sup>th</sup> Abilene, KS 67410



MEMORIAL HEALTH SYSTEM

## Certificate of Attendance Verification

**Memorial Health System**  
**511 NE 10<sup>th</sup> Street**  
**Abilene, Kansas**  
**785-263-2100**  
**[www.mhsk.com](http://www.mhsk.com)**

---

*Participant's Name & License Number*

*Course Title:*

*Presenter:*

*Date:*

*Location*

Continuing Education Hours:    x Hours

Instructor Contact Hours (if applicable):    X Hourse

*Memorial Health System is an approved provider of continuing nursing education by the Kansas State Board of Nursing    LT# \_\_\_\_\_*

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Angela Smith RN MSN, Program Coordinator  
Program Coordinator

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Date



# MEMORIAL HEALTH SYSTEM

511 NE 10<sup>th</sup> St.  
Abilene, KS 67410

## Continuing Nursing Education (CNE) Program Evaluation

### NRP

**Date:** December 10, 2019

**Presenters:** Holly Pomeroy, Katie Snapp,  
Melissa Taplin, Matt Mead

Please rate each of the following statements:	Strongly Agree	Agree	Neither Agree or Disagree	Disagree	Strongly Disagree	NA
1. The course content increased and/or contributed to my knowledge, skills, and abilities						
2. The textbook was useful						
3. The NRP online exam was easy to access						
4. Program was well organized						
5. Audience participation was allowed						
6. Questions were allowed and answered						
<b>Presenter:</b>						
1. The presenters were knowledgeable						
2. The presenters maintained my attention						
<b>Objectives:</b> At the end of the session, participants will be able to:						
1. Recognize principles of neonatal resuscitation						
2. Identify the need for resuscitation and how to provide initial steps of resuscitation						
3. Identify the knowledge and equipment essential to determine and provide positive pressure ventilation						

<b>Objectives:</b> At the end of the session, participants will be able to:	<b>Strongly Agree</b>	<b>Agree</b>	<b>Neither Agree or Disagree</b>	<b>Disagree</b>	<b>Strongly Disagree</b>	<b>NA</b>
4. State the knowledge and skills essential to provide chest compressions during neonatal resuscitation						
5. Name the indications for, and skills needed to provide endotracheal intubation during neonatal resuscitation						
6. Define the scope and practice the use of medications during neonatal resuscitation						
7. Differentiate the indications and skills required in neonatal resuscitation for a preterm delivery						
8. Distinguish the issues and indications for starting and stopping neonatal resuscitation at the end of life						

**Comments:**

**Suggestions of topics for future educational event:**

10-2-18





# MEMORIAL HEALTH SYSTEM

511 NE 10<sup>th</sup> St.  
Abilene, KS 67410

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## Agenda

**October 26, 2018**      **Neonatal Resuscitation Program**  
**8:00 AM – 12:00 PM**      **Conklin Conference Room**

<b>7:45 – 8:00</b>	Registration
<b>8:00 – 8:05</b>	Introductions Online exam completion verification
<b>8:05 – 8:10</b>	What NRP is and what it is not
<b>8:10 – 8:20</b>	Plan for the Day Course Requirements
<b>8:20 – 8:30</b>	What's the Baby Doing Now?
<b>8:30 – 8:45</b>	Equipment Set-Up Station
<b>8:45 – 9:00</b>	Demonstration of Simulation Debriefing Station Using Short Scenario or Video
<b>9:00 – 9:05</b>	Divide Into Teams Based on Learning Needs
<b>9:05 – 11:30</b>	Team Rotation through Performance Skills Station 1. Laryngeal Mask and Airway Station 2. Medication Skill 3. Integrated Skills Station with Simulation and Debriefing (Progression is determined by readiness of each group) <b>Break 10:00 – 10:10</b>
<b>11:30 – 12:00</b>	Evaluations & Adjournment

10-2-18

Memorial Health System is approved as a provider of CNE by the Kansas State Board of Nursing. This course offering is approved for 4.3 contact hours applicable for RN relicensure. Kansas State Board of Nursing provider number: LT0292-0615.

# "THE OTHER END OF THE STETHOSCOPE"

*An unforgettable tribute to health care professionals*



Marcus Engel, MS, CSP, CPXP provides insight and strategies for excellent patient care.

Marcus' programs help audiences to:

- Apply innovative techniques to treat patient challenges
- Discover the small things that make a big difference in patient care
- Manage the not-so-caring aspects of the health care system
- Rediscover the rewards of providing health care
- Celebrate the healing power of humor
- Balance patient care and personal concern
- Understand the unique issues surrounding trauma and loss
- Honor healthcare professionals commitment and dedication the patients they serve

*Unimaginable pain. Devastating injuries. Terrifying realization. Then, darkness. Complete and total darkness.*

## What clients have to say:

*"Without a doubt Marcus is one of the best speakers in the area of healthcare I have ever heard. I recommend him to anyone looking for a speaker who can inspire new healthcare professionals, seasoned health professionals or anyone facing adversity (and that would be all of us!)"*

Norma Stephens Hannigan, DNP, MPH, FNP-BC  
Columbia University School of Nursing  
New York, NY

*"Marcus is a master of changing culture. Every health care institution needs to hear his message."*

Scott Ellner, DO, MPH, FACS  
President, St. Francis Medical Group  
Hartford, CT

Marcus Engel speaks from experience. After being blinded and severely injured by a drunk driver, Marcus overcame unimaginable obstacles to reclaim his life.

This dramatic story inspires health care professionals to reignite their passion for providing excellent patient care.

Marcus@MarcusEngel.com  
www.MarcusEngel.com  
www.ImHereMovement.org

**Activity Title: *The Other End of the Stethoscope***  
**Learning Objectives**

Purpose: The purpose of this session is to provide insights and strategies for excellent patient care, using a foundation of compassionate communication.

Objectives	Content (Topic)	Agenda /Time frame	Presenter(s)	Teaching Methods
Convey the foundation of compassionate care: human presence.	<ol style="list-style-type: none"> <li>1) Communicate presence both verbally and physically.</li> <li>2) Utilize "I'm Here" to offer security and empathy to vulnerable patients.</li> <li>3) Recognize that many times, the healing power of human presence is the best (and sometimes only) thing a health care professional can do for a patient.</li> </ol>	15-20 min	Marcus Engel	Lecture / Discussion
Demonstrate an understanding of individual patient and family needs in a clinical setting.	<ol style="list-style-type: none"> <li>1) Effective communication requires using language and terminology that can be easily processed by the patient and his/her family.</li> <li>2) Interpret patient and family interactions with an understanding of individual backstories, cultures, and experiences.</li> <li>3) Identity retention is a critical piece of the patient experience. Asking preferences, such as how he/she would like to be addressed, instills a sense of individual care and reinforces the idea of presence.</li> </ol>	15-20 min	Marcus Engel	Lecture / Discussion

Implement best practices in patient communication	<ol style="list-style-type: none"> <li>1) Instill patient confidence by managing up (complimenting co-workers, sharing accolades of the institution, and positive reinforcement regarding excellence in patient care).</li> <li>2) Create an atmosphere of security by communicating a commitment to patient empowerment (i.e. policies, procedures, schedules, plan of care, etc.)</li> <li>3) Remember the ultimate power each health care professional holds is being present during vulnerable moments.</li> </ol>	15-20 min	Marcus Engel	Lecture / Discussion
Evaluation	Questions & Answers	Remaining Time	Marcus Engel	Q & A / Discussion

**Marcus Engel - *The Other End of the Stethoscope***  
**Abstract**

Participants of Marcus Engel's session will be reminded of the vital role they play in the healing process of patients. The lecture details the experience of a young patient during hospitalization, the care and compassion shown by health care professionals and the importance of health care professionals to be safe, secure, and appreciated in their role within this sacred field. Participants will also come away with an understanding of each patient and co-workers individuality, unique differences, and appreciation for the role every health care employee plays in the healing of patients and their families. The patient and family experience is absolutely vital in quality, competent health care.

## Marcus Engel

5793 Lake Melrose Dr.  
Orlando, FL 32829  
314-852-4494

Marcus@MarcusEngel.com  
www.MarcusEngel.com  
www.ImHereMovement.org  
www.NarrativeNursing.com

### PERSONAL STATEMENT

I believe strongly that the most life changing moments occur when we are allowed to explore honest, authentic questions and seek deeper truths. Creating atmospheres that support this type of exploration and learning environments is one of my greatest passions and skills.

Having worked with widely varied institutions and audiences, I have a keen sense of how to translate ideas and inspire creative thinking to different groups.

As a professional speaker and author for nearly 20 years, I'm able to blend evidence based knowledge with personal narratives to make information more easily understood and memorable.

### PROFESSIONAL BACKGROUND

#### Certified Patient Experience Professional

2016 – Present

*Committed to patient experience improvement, The Beryl Institute and Patient Experience Institute (PXI) are sister organizations working together in providing a framework for supporting the development of the field of patient experience. Offered through PXI, Certified Patient Experience Professional certification is an international designation intended for healthcare professionals or other individuals with a commitment and interest in patient experience improvement.*

#### Certified Speaking Professional

2015 – Present

*In the National Speakers Association (NSA), the highest designation level one can achieve is that of Certified Speaking Professional (CSP). To obtain CSP status, one must be a true professional (i.e. the speaker must deliver a set number of presentations annually, earn a set dollar amount, receive glowing reviews from meeting planners/clients, have a video or live demo reviewed by peers who are CSPs, etc.). Of the estimated 50,000 speakers worldwide, only an estimated 1,000 have ever earned the distinction of Certified Speaking Professional.*

#### Founder, I'm Here Movement

2010 – Present

*Co-founder and lead lecturer for the non-profit group, I'm Here Movement, a 501(c)3 dedicated to the cultivation of excellence in patient care with the use of communication and the practice of presence.*

#### Author

2006 – Present

*I've published four books to date, with a fifth slated for release in late 2017 and another in 2018. I'm a regular contributor to journals, magazines, newsletters and peer-reviewed periodicals.*

#### Professional Speaker and Lecturer

1998 – Present

*Weaving the art of storytelling, narrative and research to express ideas, concepts and encourage life evaluations. I have had the honor of presenting for audiences across the Nation. With a focus on healthcare and self-reflection I am able to communicate a passion for excellence with both insight and understanding.*

### ACADEMIC BACKGROUND

#### M.S., Narrative Medicine

2012

Columbia University  
Capstone: "Narrative Nursing"  
Supervisor: Dr. Rita Charon

New York City, NY

#### B.S., Sociology

2000

Missouri State University

Springfield, MO

## Marcus Engel (page 2)

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### ACADEMIC/TEACHING EXPERIENCE

University of Colorado Hospitals	2017
Linfield College	2017
Kaiser Permanente Hospital	2017
Yale New Haven Health	2016
Society of Pediatric Nurses	2016
Clemson University	2015
Midwestern State University	2015
Society of Trauma Nurses	2015
State Health Occupations Students of America "HOSA"	
Indiana	2014
Texas	2012
Nevada	2011
Georgia	2010
Barnes-Jewish Hospital/Washington University	2013
St. Francis Health Care	2013
Emergency Nurses Association	2013
Mayo Clinic	2013
Children's Hospital of Pennsylvania	2013
Faxton St Luke's Healthcare	2013
Florida Student Nurses Association	2013
Association of Critical Care Nurses	2013
Columbia University School of Nursing	2012, 2009, 2008
Montefiore Hospital	2012
University of Central Florida Department of Nursing	2012
Adventist Health Care	2012
Lancaster General Hospital	2011
National Nursing and Staff Development Organization	2011
Scripps Health Care	2011
Jackson Health Care System	2011
Accrediting Bureau of Health Education Schools	2011
Oklahoma Nurses Association	2011
Shriners' Hospital for Children	2007

### ASSOCIATIONS

American Trauma Society	2015 – Present
Society for Participatory Medicine	2015 - Present
The Beryl Institute's Speakers Bureau	2014 – Present
American Association for Communication in Healthcare	2014 - Present
Association California Nurse Leaders	2013 - Present
The Beryl Patient Experience Institute	2013 - Present
Association for Patient Experience	2013 - Present
The Association for Higher Education and Disabilities	2005 - 2017
National Speakers Association	2000 - Present
Alpha Kappa Delta (National Sociology Honors Fraternity)	1999 - Present
Kappa Sigma Fraternity	1997 - Present
Mothers Against Drunk Driving	1993 - Present

## Marcus Engel (page 3)

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### AWARDS/FELLOWSHIPS

<b>Honorary Doctorate</b>	<b>2017</b>
Philadelphia College of Osteopathic Medicine	
<b>Narrative Medicine Fellowship</b>	<b>2014-2015</b>
Columbia University New York City, NY	

### VOLUNTEER ACTIVITIES

NSA 'Certified Speaking Professional' Committee	2016 - Present
Custom Learning Systems, HCSEC Keynote	2015, 2016, 2017
The BLINK Foundation	2012 - Present
Student Nurses Association, University of Central Florida	2012 - Present
Camp Mo-Val, Senior High Counselor	2012, 2011, 2005, 2003
Central Florida Lighthouse for the Blind	2011 - Present
Shriner's Hospitals	2010, 2009, 2008
STEP (Student Transition and Education Program)	2005 - Present
American Youth Foundation	2004, 2002, 2001

### PUBLICATIONS

<i>Beyond Patient Experience</i>	Expected late 2017
<i>Everyday Inspiration</i>	2012
<i>I'm Here: Compassionate Communication in Patient Care</i>	2010
<i>The Other End of the Stethoscope: 33 Insights for Excellent Patient Care</i>	2006
<i>After This... An Inspirational Journey for All the Wrong Reasons</i>	2006

#### Journal Articles, including:

Engel, M. (2009). Beyond the Name on the Chart: The Importance of Caring for the Patient's Family. *Creative Nursing*, 15(3).

Engel, M. (2012). What's in a Name: A Question of Patient Autonomy. *Creative Nursing*, 18(3).

Moments with Marcus, In <i>Missouri Board of Nursing Newspaper</i>	2012 - Present
Engel's Insights, In <i>the Marcus Engel E-Newsletter</i>	Monthly, 2003 - Present
Marcus Engel blog	2005 - Present

### REFERENCES

**Ann Durham, RN, MSN, FNP, Esq.**  
Deputy Sector Navigator for Health, San Diego/Imperial Region  
Grossmont College, El Cajon, CA  
Phone: 619-644-7057 Email: Ann.Durham@gcccd.edu

**Catherine A. Harmer MPH, MSN, RN, NEA-BC, CPXP**  
System Director, Patient Experience  
Main Line Health, Bryn Mawr, PA  
Phone : 484-337-8146 Email: harmerc@mlhs.org

Marcus Engel, M.S., CPXP, CSP is a Certified Speaking Professional & author whose messages provide insight and strategies for excellent patient care. His keynote presentation, “The Other End of the Stethoscope” has been witnessed by tens of thousands of healthcare professionals and his books are used in scores of nursing and allied health programs to teach the basic foundations of caregiving.

As a college freshman, Marcus Engel was blinded and nearly killed after being struck by a drunk driver. Through two years of rehab, over 350 hours of reconstructive facial surgery and adaptation through a multitude of life changes, Marcus witnessed the good, the bad and the profound in patient care.

He has authored four books and is at work on a fifth, “Beyond Patient Experience” which is due out in 2019.

Marcus holds a B.S. in sociology from Missouri State University and a M.S. in Narrative Medicine from Columbia University in the city of New York. He has been awarded an honorary doctorate from the Philadelphia College of Osteopathic Medicine and is an adjunct professor at the University of Notre Dame where he teaches pre-meds the art of “being with.”

Marcus lives in Orlando, Florida with his wife, Marvelyne, and his Seeing Eye dog, Elliott. He is, in his words, a social media junkie and loves to connect with healthcare professionals nationwide. All social media information can be found at [www.MarcusEngel.com](http://www.MarcusEngel.com).



# **CE Information**

## ***The Other End of the Stethoscope*** by Marcus Engel

### **Marcus Engel Bio:**

Marcus Engel, M.S., CPXP, CSP is a Certified Speaking Professional & author whose messages provide insight and strategies for excellent patient care. His keynote presentation, "The Other End of the Stethoscope" has been witnessed by tens of thousands of healthcare professionals and his books are used in scores of nursing and allied health programs to teach the basic foundations of caregiving.

As a college freshman, Marcus Engel was blinded and nearly killed after being struck by a drunk driver. Through two years of rehab, over 350 hours of reconstructive facial surgery and adaptation through a multitude of life changes, Marcus witnessed the good, the bad and the profound in patient care.

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Marcus lives in Orlando, Florida with his wife, Marvelyne, and his Seeing Eye dog, Elliott. He is, in his words, a social media junkie and loves to connect with healthcare professionals nationwide. All social media information can be found at [www.MarcusEngel.com](http://www.MarcusEngel.com).

Marcus' books:

- "After This...An Inspirational Journey For All The Wrong Reasons"
- "The Other End of the Stethoscope: 33 Insights for Excellent Patient Care"
- "I'm Here: Compassionate Communication in Patient Care"
- "Everyday Inspiration"
- "Beyond Patient Experience" (due out soon!)

# PROMO PACKET

Marcus' goal is to leave each attendee feeling refreshed and reminded of the important work that YOU do daily! We understand that healthcare doesn't take time off. With a potentially high census, team meetings, and with life happening around us, it can be hard, at times, to sneak away to attend a session.

Well, we'd love to help!

Which is why, we've compiled the *Top 5 Tips* of what we've found to be the most effective ways of promotion to ensure that Marcus' powerful and poignant message is spread to as many ears and hearts as possible within your facility, all while you get the most bang for your buck.

We hope these tips help! If there is anything more that we can do to help in your promotional efforts, please know, *we're here...*

1. **Offer CE credits** to attendees – The credits are just a little extra incentive to attend a session, despite one's busy schedule. Included in this packet is all of the information needed to apply for credits for Marcus' keynote, "The Other End of the Stethoscope".
2. **Create a flyer** (hard copy and electronic) – Get the word out! We've attached a flyer here that should help spread the word. Please feel free to edit this doc to fit your needs exactly (your logo, times, location, etc.).
3. **Share a teaser of Marcus' story** – Leave them wanting more! Attached is the first chapter of Marcus' widely read book, "I'm Here". After reading this quick teaser of Chapter 1, your reader will be eager to sit in for Marcus' presentation to learn more about his experiences.
4. **Make an announcement** – We've found that sending out a reminder email the **day before** our event helps to create a buzz. Also, making an announcement on the loud speaker about **15-minutes prior** the start of a session helps to act as a last minute reminder to many who have gotten busy with the day.
5. **Provide food** – Food always encourages audience members to attend! Offering snacks and coffee at the back of the room always gets great feedback from attendees.
  - In addition, please note that lunch time sessions typically have the best turn out.
  - Evening sessions, though sometimes necessary to accommodate all shifts, tend to have the lowest turn out.

# *I'm Here: Compassionate Communication in Patient Care*

-Marcus Engel, 2010

## **Chapter 1**

I keep hearing sounds: a siren, the clamor of EMS workers, the click of a stretcher as the wheels fall into place. Breaking glass, a woman screaming, the CB radio squawking in the ambulance. I can't put these sounds in order. I can't listen to them. I can't pay attention to them. They just keep happening.

Someone shouts my name and orders me to lay still. The 'whoosh' of automatic doors. The taste of blood. A warm blanket. Pebbles of concrete under my hand. And pain. God help me, the pain.

I was blind – immediately, totally, permanently; though no one would say for sure until the doctors had time to do some exploratory surgery. But, I knew. Deep down, I knew.

Now, here in the emergency room, white hot pain and utter confusion were my guides on the road to hell. Hands ravaged me. Hands everywhere. Cutting off my clothes, re-positioning my body, grabbing my arms and shoving needles into my flesh. Gallons of morphine are pushed into an IV, it doesn't stop the pain, but it DOES get me so messed up on narcotics that I don't pay as much attention. The ability to think is completely shot. Memories don't hang around for more than a few seconds – then they're gone.

Exhaustion finally takes over and I fall into uncomfortable sleep. Even when I'm asleep, I hurt. The. Pain. Is. Incredible.

I awake with a mental crash landing. As soon as I grasp "this." This horror. This blackness. This rape of every square inch of my body. I'm bludgeoned into seeing white flashes of light. Not truly visual images, but the mental flashbulbs that explode with sudden pain. And they never stop. Flashbulb explosions of pain. One after another. Pain is all I know. I surrender to the pain.

"Marcus? Can you hear me?" asks a female voice.

I dip my chin. A searing jolt slices my head back into place. I gasp. As I do, the sucking sound of inhalation comes from my throat. My throat? Not my mouth?

The owner of the voice slips her fingers into my right hand. With her other hand, she lightly traces two fingers up my forearm.

"Marcus, you're in the Hospital. You were in a car accident," comes the soft voice again, "Just rest now."

I obey. Back into sleep, back to the haunted terrors of hallucination.

Maybe minutes, maybe hours later, I slam back into consciousness. I find the familiar hand from before.

Everything below the neck aches with a dull pain, and everything above burns like dipping my head into a blast furnace. Fear and hurt take over. My breathing kick starts to the rate of a sprinter. Again, those same questions come.

"Marcus? Can you hear me?"

I'll do nothing to nod again and topple that boulder of pain. Instead, I squeeze the hand. She seems to understand. "Marcus, my name is Jennifer. You're in the hospital. You were in a car accident," Without thinking, I squeeze the hand again, just to show her I'm getting it.

She pauses. She gives my hand a soft squeeze. Then, the most comforting words of all, "I'm here."

*I'm here.* I don't even know where "here" is, but I know I'm not alone. I'm hurt, I'm helpless and I'm scared. I cannot be alone. I cannot be alone. And she's here. This Jennifer girl with her soft hand and quiet voice. She's here.

Jennifer doesn't say her title, doesn't give her background nor her credentials, just bare bones information. Nothing else is necessary; and she knows it. All I need to know is that in this world of black – this ocean of pain, I am not alone.

*"I'm here." Those two little words are a verbal embrace, a warm, safe place of protection.*

*I relinquish all independence, all pride and all needs to Jennifer. Those words, "I'm here," give an anchor of security and reassurance; that reassurance is what I need most. I am not alone.*

**Long Term CNE Provider Checklist**  
(K.A.R. 60-9-107)

**Name of Provider:** Optum Infusion Pharmacy LT0271-0610 Five-Year Renewal

**Name of Program Coordinator:** Sandra Harding, BSN, RN, IgCN

**Date to CNE Committee:** June 16, 2021

Information Required	Received	N/A
Completed application for initial approval or five-year renewal for LT CNE providership shall be submitted at least 60 days before a scheduled board meeting	04/13/2021	
The name and address of the organization on the application	X	
The name and address of the department or unit within the organization responsible for approving CNE, if different from the name and address of the organization		X
The name, education and experience of the program coordinator responsible for CNE	Sandra Harding, BSN, RN, IgCN	
<ul style="list-style-type: none"> <li>Be a licensed professional nurse</li> </ul>	X	
<ul style="list-style-type: none"> <li>Have three years of clinical experience</li> </ul>	X	
<ul style="list-style-type: none"> <li>Have one year of experience in developing and implementing nursing education</li> </ul>	X	
<ul style="list-style-type: none"> <li>Have a baccalaureate degree (unless held this position for the provider at least five years immediately prior to January 1, 1977)</li> </ul>	X	
<b>Policies &amp; Procedures:</b>		
Written policies and procedures, including at least the following areas:		
<ul style="list-style-type: none"> <li>Assessing the need and planning for CNE activities</li> </ul>	X	
<ul style="list-style-type: none"> <li>Fee assessment</li> </ul>	X	
<ul style="list-style-type: none"> <li>Advertisements or offering announcements. Published information shall contain the following statement: "(name of provider) is approved as a provider of continuing nursing education by the Kansas State Board of Nursing. This course offering is approved for contact hours applicable for APRN, RN, or LPN relicensure. Kansas State Board of Nursing provider number: "</li> </ul>	X	
<ul style="list-style-type: none"> <li>Notice of change of coordinator or required policies and procedures. The program coordinator shall notify the board in writing of any change of the individual responsible for the providership or required policies and procedures within 30 days</li> </ul>	X	
For long term providers, the policies and procedures for the offering approval process shall include the following:		

• A summary of the planning	X	
• The behavioral objectives	X	
• The content, which shall meet the definition of CNE in KSA 65-1117	X	
• The instructor's education and experience, documenting knowledge and expertise in the content area	X	
• A current bibliography that is reflective of the offering content. The bibliography shall include books published within the past 10 years, periodicals published within the past five years, or both	X	
• An offering evaluation that includes each participant's assessment of the following:		
▪ The achievement of each objective	X	
▪ The expertise of each individual presenter	X	
An approved provider may award any of the following:		
• Contact hours as documented on an offering agenda for the actual time attending, including partial credit for one or more contact hours	X	
• Credit for fractions of hours over 30 mins to be computed towards a contact hour	X	
• Instructor credit, which shall be twice the length of the first-time presentation of an approved offering, excluding an standardized, prepared curriculum	X	X
• Independent study credit that is based on the time required to complete the offering, as documented by the provider's pilot test results		X
• Clinical hours		X
<b>Documentation of Attendance</b>		
Each provider shall maintain documentation to verify that each participant attended the offering. The provider shall require each participant to sign a daily roster, which shall contain the following information:		
• The provider's name, address, provider number, and coordinator	X	
• The date and title of the offering, and the presenter or presenters	X	
• The participant's name and license number and the number of contact hours awarded	X	
Each provider shall maintain documentation to verify completion of each independent study offering, if applicable. To verify completion of an independent study offering, the provider shall maintain documentation that includes the following:		
• The provider's name, address, provider number, and coordinator		X
• The participant's name and license number, and the number of contact hours awarded		X

• The title of the offering		X
• The date on which the offering was completed		X
• Either the completion of a posttest or a return demonstration		X
<b>Certificate of Attendance/CE Transcript</b>		
A certificate of attendance shall be awarded to each participant after completion of an offering, or a CE transcript shall be provided according to the policies and procedures of the long-term provider		
Each certificate and each CE transcript shall be complete before distribution to the participant		
Each certificate and each CE transcript shall contain the following information:		
• The provider's name, address and provider number	X	
• The title of the offering	X	
• The date or dates of attendance or completion	X	
• The number of contact hours awarded and, if applicable, the designation of any independent study or instructor contact hours awarded	X	
• The signature of the individual responsible for the providership	X	
• The name and license number of the participant	X	
<b>Recordkeeping &amp; Storage</b>		
For each offering, the approved provider shall retain the following for two years:		
• A summary of the planning	X	
• A copy of the offering announcement or brochure	X	
• The title and objectives	X	
• The offering agenda or, for independent study, pilot test results	X	
• A bibliography	X	
• A summary of the participants' evaluations	X	
• Each instructor's education and experiences	X	
• Documentation to verify completion of the offering	X	
The record storage system used shall ensure confidentiality and easy retrieval of records by authorized individuals	X	
<b>Program Evaluation Plan</b>		
For long-term providers, a copy of the total program evaluation plan	X	
<b>Two Proposed Offerings</b>		
The provider shall submit two proposed offerings, including the following:		
	PN & Reimbursement	Immunotherapy in Oncology
• A summary of planning	X	X

• A copy of the offering announcement or brochure	X	X
• The title and behavioral objectives	X	X
• The offering agenda or, for independent study, pilot test results	X	X
• Each instructor's education and experience	X	X
• A current bibliography	X	X
• The offering evaluation form	X	X

12/2018

Review Completed by Chelsey Stephenson, CNE Education Specialist on May 25, 2021.



**Reference No.:** 24859   **Date submitted:** Apr 13 10:29 2021

**radio** ~ Renewal

**Providername** ~ Optum Infusion Pharmacy

**providernum** ~ LT0271-0610

**legalbody** ~ ~

**address** ~ 15529 College Blvd

**adress2** ~ Lenexa, KS 66219

**telephone** ~ 816-503-1377

**email** ~ sharding@optum.com

**coordinator** ~ Sandra Harding

**date** ~ 04-13-2021

**planningce** ~ To ensure that all presentations/activities provided are planned, implemented, developed, evaluated and documented by the designated qualified RN nurse planner, a CE Content committee will meet at least semi-annually to review and update current program offerings and assess the requested needs for future offerings.

The needs assessment and evaluation tool for each presentation/activity will elicit suggestions for future CNE topics/activities. Any comments provided will be addressed with the planning committee to enhance nursing knowledge as defined by KSBN (65-1117 a). The committee will meet semi-annually to discuss suggestions received through evaluations and those suggestions received verbally by the employed host of the CNE event. These suggestions become part of the assessment of learner needs. The committee will also review all comments/concerns received by the learners, either verbally or through their evaluation documented comments, to ensure program offerings and instructors are meeting the stated learning objectives.

All courses will include a Summary of Planning; meet Behavioral Objectives per K.S.A. 06-9-105 d; include content that meets the definition of CNE; include current bibliographies—books under 10years, periodicals under 5years

**feeassessment** ~ We do not currently charge a fee for CNE. We do however provide the learners with an event flyer and after RSVP we obtain their contact information should a cancellation of the event occur.

**advertisement** ~ CNE event announcements in print form or PDF will be provided to announce a CNE offering. These announcements include the name of our organization along with the below statement:

Optum Infusion Services is approved as a provider of continuing nursing education by the Kansas State Board of Nursing. This course offering is approved for 1.0 contact hour applicable for RN, LPN, LMHT re-licensure. Kansas State Board of Nursing Provider Number: LT0271-0610

Continuing Education Hours: Minimum 1 hour in length and NO credit can be granted for completing part of a program

**approvalprocess** ~ Content committee meets at minimum semi-annually and Before each program is presented, the CNE Advisory committee will review:

- 1.Summary of Planning of all CNE courses prior to offerings
- 2.Behavioral Objectives (60-9-105 (d))- "intended outcomes of instructions stated as measurable learning behaviors"
- 3.Content (65-1117(a))- "Learning experiences intended to build upon the educational and experimental basis of the registered professional and licensed practical nurse for the enhancement of practice, education, administration, research, or theory development to the end of improving the health of the public."
- 4.Instructor's experience and education will be verified and copies of CV or Resume will be kept on file
- 5.Current bibliography to ensure references meet KAR 60-9-107 (d) (1)-(6) (A) & (B) guidelines for books (10yr) and periodicals (5yr)
- 6.Evaluation to assess learner achievement of each objective and expertise of individual presenter is assessed with an evaluation form provided to each learner after every offering

**contacthours** ~ Independent study credit hours are not available for CNE contact hours.

CNE presentations will be 1 hr in length.

Actual attendance for presentations will be awarded as follows (KAR 60-9-107 (e)):

- a.Attendees who arrive within 15min of the start of the presentation will receive full contact hour
- b.Attendees who arrive 15-30min after the start of the presentation or who leave 15-30 min prior to the end of the program will not receive credit as we do not offer partial credit for our CNE program offerings

**verifycompletion** ~ Each participant will be required to sign an attendance roster that includes the following information:

- i.Provider's name
- ii.Provider's address
- iii.Provider number
- iv.CNE Coordinator
- v.Date & Title of offering
- vi.Presenter's name
- vii.Participant's name
- viii.Participant's license number

ix. Number of contact hours awarded

A certificate of attendance will be awarded to each participant at the completion of the CNE program. Each certificate must be complete and include the following information:

- i. Provider's name
- ii. Provider's address
- iii. Provider number
- iv. Title of the offering
- v. Date of attendance
- vi. Number of contact hours awarded
- vii. Attendee's name
- viii. Attendee's license number

**recordkeeping** ~ Secure and Confidential records will be kept in electronic format on Optum Infusion Services Company "A" drive with limited access to employees. Records will be stored at a minimum of 4 years to include: course outlines, course brochures, attendance rosters, instructor resumes, certificates issued, course evaluations

**noticeofchange** ~ Optum Infusion Services will notify the board in writing of any organizational structure changes within 30 days to include change of program coordinator or any company name change

**programevaluation** ~ Optum Infusion Services will utilize a total program evaluation tool with our CE Advisory committee to ensure we are complying with accreditation rules and regulations.

The last total program evaluation review was March 2021

**Submission date** ~ 04-13-2021 10:29:15

**Form ID** ~ 1672730

# **Sandra Harding RN, BSN, IgCN**

10419 N Cherry Dr Kansas City, MO 64155 (816) 503-1377 [sharding@optum.com](mailto:sharding@optum.com)

**Summary:** As the Clinical Nurse Educator for Optum Specialty & Infusion Pharmacy, I am a subject matter expert (SME) when it comes to home infusion. I provide consultation on many clinical projects and currently manage the CE program for Optum Specialty and Infusion

CE Program Manager/Clinical Nurse Educator

- Continuing Education Program Coordinator (KSBN accreditation)
- Continuing Education course development & presentations
- Create, revise, and edit patient education materials
- Clinician in-service education
- Evidence based patient care
- IgNS and INS Standards of Care
- Advancing and strengthening provider relationships

## **Experience:**

CE Program Manager

- Maintain CE Program accreditation through KSBN
- Maintain compliance with CE Program documents and training
- Collaborate across clinical disciplines to create CE presentations that are relevant, evidence based and will promote patient care
- Maintain CE Program tracking, record-keeping, compliance and storage
- Conduct CE Presenter training and CE Content committee meetings

Nursing Supervisor/Director of Nursing for BriovaRx Infusion Services.

- Hire, train and manage infusion nursing team
- Comply with local, state and federal home health rules and regulations
- Comply with nurse practice act and company policies & procedures
- Developed and implemented Nurse Education training materials

Home Infusion Field Nurse

- Patient and Family care with the "Whole patient in mind"
- Line care: sterile technique, CVADs, Midlines and PIV, phlebotomy
- Medication knowledge to include compounding in the home setting
- Patient education

**Work History:**

Optum Specialty & Infusion Services 15529 College Blvd. Lenexa, KS 66219 913-401-2844	CE Program Manager and Clinical Nurse Educator	January 2019 to present
BrioRx Infusion Services 15529 College Blvd. Lenexa, KS 66219 913-401-2844	Nurse Educator Instructional Design Supervisor/D.O.N./Field RN	Nov.2018 to Dec 2019 Sep. 2018 to Dec 2019 Mar. 2016 to Sep.2018
North Kansas City Hospital 2800 Clay Edwards Dr. NKC, MO. 64116 816-691-1699	Staff RN	Aug. 2015 to Sep. 2017
Saint Luke's Hospital North 5830 NW Barry Rd. Kansas City, MO. 64150 816-891-6000	Staff RN	June 2014 to Oct. 2015
University of Kansas Hospital 3901 Rainbow Blvd. Kansas City, KS. 66160 913-588-5000	Unit Secretary	July 2012 to July 2014

**Education:**

Capella University Flexpath Program 225 South 6th St, Minneapolis, MN 55402	MBA Project Mngt	currently enrolled
Saint Luke's College of Health Sciences 624 Westport Rd. Kansas City, MO. 64111	B.S. Nursing	May 2014
Park University 8700 NW River Park Dr. Parkville, MO. 64152	B.A. Education	June 2007
Leilehua High School 1515 California Ave. Wahiawa, HI 96786	H.S. Diploma	June 1988

## Standard Operating Procedure-Summary of Planning

SUBJECT:	Continuing Nursing Education Program Management		
DEPARTMENT	Continuing Education Program	EFFECTIVE DATE:	April 2020

### PURPOSE

To ensure compliance with the state board of nursing in which we are approved to provide continuing nursing education.

### SUMMARY OF PLANNING

1. Planning Committee- the CNE Advisory committee will consist of CNE Coordinator, National Director of Nutritional Support, CNE Content and presenter's committee. The CNE advisory committee or CNE Coordinator will review all CNE educational programs to ensure content meets state board of nursing policy for CNE approval
2. Need Identified- List persons requesting presentation and/or need for presentation
  - Received request from area sales rep for increased training and education
  - Received request from nurses through comments written on evaluations
3. Presenter Selection- Describe presenter qualifications and/or expertise
  - Presenters are all subject matter experts in their respective fields of nutrition support for infusion; immune globulin therapy nurses and pharmacists for specialized medications and injectables.
4. Target Audience-List who will be attending presentation
  - Hospital nurses and case managers; Specialty nurses in Immunology, Oncology, Neurology, Bleeding disorders, School nurses, members of nursing societies
5. Learning Objectives Review: List who reviewed learning objectives for presentation
  - CNE advisory committee reviewed learning objectives for all approved presentations
6. CNE Content: The CNE Advisory Committee and/or Coordinator will review content to ensure program is designed to build upon the educational and experiential bases of the registered professional and licensed practical nurse for the enhancement of practice, education, administration, research or theory development to the end of improving health of the public
  - Content reviewed by CNE advisory committee at minimum annually
7. Program Length: 1 hour

## Standard Operating Procedure-Summary of Planning

8. Equipment Needed: laptop, handouts, paper, pen
9. Financial Cost: no charge to participants
10. Advertisements: Advertisement and/or brochures to be reviewed by CNE Coordinator or CNE Administrator prior to distribution.
  - CNE Coordinator received a copy of the flyer and reviewed to ensure appropriate statement was included which can be shared via email or printed and hand delivered

### REQUIREMENTS

1. All requests for a CNE presentation must utilize a CNE Program Request form, per form specific requirements, at least 4 weeks in advance.
2. The CNE Coordinator is responsible for completing summary of planning form.
3. The CNE Coordinator and/or designee is responsible for creation of all needed forms for approved request
4. The Optum host is responsible for the completion and return of all necessary documents completed by program attendees and maintains attendance tracking

### PROCEDURE

1. A CNE Program Request form is sent in to the CNE Coordinator for approval
2. The CNE Coordinator and/or CNE Advisory committee will complete summary of planning form
3. The CNE Coordinator will confirm that the identified presenter is an approved presenter and most appropriate for the requested content.
4. If approved, the CNE Coordinator and/or designee will update forms with program details and email to the requestor:
  - a. CNE Roster
  - b. Educational Activity Evaluation
  - c. Program Objectives
5. Requestor will return all above documents to the CNE Coordinator for review and Certificates of attendance will be provided
6. Electronic copies of each presentation and required forms will be saved in a secure and confidential location



## Standard Operating Procedure-Summary of Planning

SUBJECT:	Continuing Nursing Education Program Management		
DEPARTMENT	Continuing Education Program	EFFECTIVE DATE:	April 2020

### PURPOSE

To ensure compliance with the state board of nursing in which we are approved to provide continuing nursing education.

### SUMMARY OF PLANNING

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  - Content reviewed by CNE advisory committee at minimum annually
7. Program Length: 1 hour





## Standard Operating Procedure-Summary of Planning

8. Equipment Needed: laptop, handouts, paper, pen
9. Financial Cost: no charge to participants
10. Advertisements: Advertisement and/or brochures to be reviewed by CNE Coordinator or CNE Administrator prior to distribution.
  - CNE Coordinator received a copy of the flyer and reviewed to ensure appropriate statement was included which can be shared via email or printed and hand delivered

### REQUIREMENTS

1. All requests for a CNE presentation must utilize a CNE Program Request form, perform specific requirements, at least 4 weeks in advance.
2. The CNE Coordinator is responsible for completing summary of planning form.
3. The CNE Coordinator and/or designee is responsible for creation of all needed forms for approved request
4. The Optum host is responsible for the completion and return of all necessary documents completed by program attendees and maintains attendance tracking

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  - a. CNE Roster
  - b. Educational Activity Evaluation
  - c. Program Objectives
5. Requestor will return all above documents to the CNE Coordinator for review and Certificates of attendance will be provided
6. Electronic copies of each presentation and required forms will be saved in a secure and confidential location

# CE Program sign-in sheet

Title: PN Today: Challenges, safety and advances in care  
 Location: 15529 College Blvd. Lenexa, KS 66219

Presenter: Shirley Au, MS, RD, LDN, CNSC  
 Date: April 16, 2021

PRINT Participant name (License # required for CNE credit)	Title/Credentials (RN, LPN, RD, CCM)	Agency name/Facility	PRINT Email address	Contact hours awarded
1.				
License:				
2.				
License:				
3.				
License:				
4.				
License:				
5.				
License:				
6.				
License:				
7.				
License:				
8.				
License:				
9.				
License:				
10.				
License:				

Program Coordinator: Sandra Harding BSN, RN

# In Recognition of Participation

AWARDED TO:

**Sandra Example**

11111111

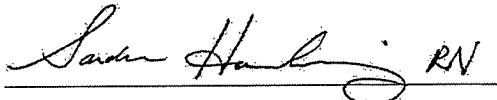
On

April 16, 2021

KSBN Certificate Renewal

Continuing Nursing Education

1.0 Contact hour



Sandra Harding BSN, RN, IgCN  
Program Coordinator



- Provider approved by the California Board of Registered Nursing. Provider Number CEP 16530 for 1.0 contact hour
- Optum Infusion Services is approved as a provider of continuing education by the Kansas State Board of Nursing. This course offering is approved for 1.0 contact hour applicable for RN, LPN, LMHT relicensure. Kansas State Board of Nursing Provider Number: LT0271-0610
- Provider approved by the Alabama Board of Registered Nursing. Provider Number: ABNP 1486 expires 11/6/21.
- Retain this certificate for 4 years.

Optum  
11000 Optum Circle, Eden  
Prairie, MN 55344

### Total Program Evaluation March 2021

Area	Frequency	Responsible Person	Criteria	Findings	Actions/ Recommendations
<b>Administration</b>	Every 6 months	CE Program Director	Review Job description(s)	Job descriptions are appropriate as well as current responsibilities.	Continue to perform assigned tasks and responsibilities
<b>Policies:</b> Assess needs, planning -written tool -evaluation summaries	Evaluation Summaries: Semi-annually  Needs/tools: Semi-annually and as needed	CE Program Coordinator & CE Committee	Review survey for appropriateness; were survey findings and identified needs from evaluation summaries used in program planning?	Company needs for Immunotherapy in Oncology met January 2021. Anti-infectives education is in process but Inotropes and inflammatory therapies education still needed along with diseases treated.	CE Committee to create CE offerings for Anti-infectives, Inotropes and Inflammatory therapy as well as additional new therapies/protocols
<b>Policies:</b> Announcement	Reviewed prior to initiation of each CE	CE Program Coordinator	Review to be certain they reflect necessary information	All announcements for CE's have included all items addressed under regulation 60-9-107b (3) C of the KSBN LT-CNE Policy requirement for announcements & advertisements.	Current process shown to be effective and will continue to utilize for future CE offerings. CE Committee to review CE offering process/requirements with employees on a semi-annual basis and as needed
<b>Policies:</b> Fee Assessment	Not applicable	Director of Clinical Resources & CE Advisory Committee	Policy meets organization and customer needs	Currently, all CE's are free	No plan for charging for CE's at this time.
<b>Policies:</b> Offering approval process	Reviewed prior to initiation of each CE	CE Program Coordinator & CE Committee	Review policies and compare to KSBN requirements	Currently compliant per KSBN policy 60-9-107b (3)(D) and 60-9-107d.	Program coordinator reviews all CE requests to ensure compliance with KSBN policy guidelines. Approvals are granted once all criteria has been met. CE Committee to

					review CE offering process/requirements with employees on a semi-annual basis and as needed
<b>Policies:</b> Awarding Contact Hours	Certificate template created prior to initiation of CE and calculated and awarded post CE per the current policy guidelines	CE Program Coordinator & CE Committee	Review agendas/ pilot test results to verify contact hours awarded; review documentation of partial credit	Agendas reviewed and appropriate for current offerings. All offerings are 1 contact hour. No partial credits were awarded that required review. All presentations have been previously timed to last 50min with 10min for Q&A	Will continue current awarding process; No partial credit awarded at this time.
<b>Policies:</b> Verifying participation/ completion	Verified after CE participation has been identified as completed per the current policy	CE Program Coordinator & CE Advisory Committee	Review rosters & certificates; ensure sign-in follows KSBN requirements	Awarded contact hours were in compliance with KSBN policy 60-9-107b (3)(E). Rosters and post evaluations were utilized to identify completion. No late arrival or early departure credit allowed as each program is allotted 1 contact hour with no partial credits given	Will continue to review rosters and certificates in relation to established requirements. Approvals are granted once all criteria has been met.
<b>Policies:</b> Record keeping	Reviewed Quarterly & PRN	Program Coordinator	Audit contents of files for compliance with KSBN requirements	Electronic copies of all KSBN 60-9-107b (3)(G) required documents are kept on a secure company drive to ensure confidentiality and retrieval by authorized individuals	Master spreadsheet holds yearly data of all program offerings and CE awarded. Will continue this process as it allows for confidentiality and easy retrieval

<b>Policies: Notification of changes</b>	Reviewed Quarterly and PRN	CE Program Coordinator	Review procedures for changes reported to KSBN	Name change reported in compliance with KSBN 60-9-107b(3)(H)	Any future applicable changes that are identified will be reported to KSBN per policy.
<b>Total Program Evaluation effectiveness</b>	Reviewed Semi-annually	CE Program Coordinator & CE Advisory Committee	Review total program evaluation & compare contents to KSBN requirements	The demand for CE offerings continues to increase. Qualified instructors have been validated and trained to assist with the demand.	Will continue to evaluate the program to ensure learning needs and KSBN requirements have been met. As demand continues to increase, plan to recruit qualified instructors and subject matter experts for the CE Advisory Committee

## Optum Infusion Pharmacy: CE invitation



Optum® Infusion Pharmacy invites you to a 1.0 contact hour continuing nursing education presentation.

Date of program: April 16, 2021

Time of program: 12:00 PM CST

Location of program: 1559 College Blvd.  
Lenexa, KS 66219

Presenter: Laura Costlow, MS, RD, LDN, CNSC

RSVP: Sandra Harding 816-503-1377

We do not charge a fee for CE and in case of cancellation — you will be notified via the contact person listed above.

**Accreditation information**

- Provider approved by the California Board of Registered Nursing, Provider Number CEP 16530 for 1 contact hour.
- Optum Infusion Pharmacy is approved as a provider of continuing nursing education by the Kansas State Board of Nursing. This course offering is approved for 1.0 contact hour applicable for RN, LPN, LMHT relicensure. Kansas State Board of Nursing Provider Number: LT0271-0610.
- Continuing education hours: Minimum one hour in length and no credit can be granted for completing part of a program.

**PN & Reimbursement:**  
a review

**Learning objectives:**

- Review general PN by payer type
- List 4 parts of medicare & coverage
- Define PEN & how it fits in "prosthetic device benefit"
- Explain latest medicare update for home PN coverage
- Review documentation needed for home PN therapy
- Discuss alternatives to PN therapy

# Laura Still Costlow

1586 Tryon Road NE  
Atlanta, GA 30319

(404) 630-7939  
lfstill@gmail.com

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## WORK EXPERIENCE

### **Regional Dietitian**

June 2015 - Present

*AxelaCare*

- Perform initial and ongoing nutrition assessments for parenteral nutrition patients
- Serves as the nutrition support expert for branches in Georgia, South Carolina and North Carolina
- Assists with training new acute infusion sales specialists and clinical liaisons
- Communicates patient updates and recommendations to clinicians and physicians
- Provide education and in-services to referral sources
- Assists with reimbursement related activity to secure home parenteral nutrition qualification

### **Nutrition Support Dietitian**

*Walgreens Home Infusion*

March 2014 – May 2015

- Perform nutrition assessments and ongoing clinical monitoring for enteral and parenteral nutrition patients of all ages
- Provide education to patients in the home setting including enteral administration, home start parenteral nutrition and Gattex therapy
- Implementation of guidelines for Enteral Coordinators, Intake Department and Sales Team to improve clinical monitoring, documentation collection and Medicare reimbursement
- Support Sales Team by serving as a clinical resource
- Developed educational tools and presented to clinicians at referral sites to improve customer relationships

### **Nutrition Support Dietitian**

*Wellstar Kennestone Hospital, Marietta, GA*

March 2009 – March 2014

- Screened all consulted patients for appropriateness of parenteral nutrition
- Responsible for nutritional assessments and managing all adult patients receiving parenteral nutrition including management of electrolytes, macronutrients and insulin added to parenteral nutrition.
- Preceptor for Pharmacy Residents during Nutrition Support rotations

### **Clinical Dietitian**

*North Fulton Regional Hospital, Roswell, GA*

June 2007 – March 2009

- Responsible for screening and assessing the nutritional status of patients of all ages and implementing interventions (enteral feedings, modified diet educations, etc.)
- Participate in daily facility wide interdisciplinary team meetings
- Served as Nutrition Department representative at Pharmacy and Therapeutics Committee meetings

## EDUCATION

### **Master of Arts in Family and Consumer Sciences – Clinical Nutrition Emphasis**

*Appalachian State University, Boone, NC*

### **Bachelor of Science in Family and Consumer Sciences – Dietetics Emphasis**

*The University of Georgia, Athens, GA*



### **PROFESSIONAL MEMBERSHIPS AND LEADERSHIP**

- Member - American Society for Parenteral and Enteral Nutrition (A.S.P.E.N)
- Board Member and Membership Coordinator - Georgia Chapter of the American Society for Parenteral and Enteral Nutrition (G.A.S.P.E.N)
- Member – Mid-Atlantic Society for Parenteral and Enteral Nutrition (M.A.S.P.E.N)

### **CREDENTIALS**

- Registered Dietitian
- Licensed Dietitian in Georgia

# Parenteral Nutrition Services

## PN and reimbursement: a review



# Objectives

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- Review of general PN coverage by payer type
- List the 4 parts of Medicare and briefly define coverage provided by each
- Define PEN and how it fits into the “Prosthetic Device Benefit”
- Explain the latest update on Medicare policy for coverage of home PN
- Review documentation required for qualification for home PN therapy
- Discuss alternatives when patients do not meet criteria for coverage

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# References

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- Centers for Medicare and Medicaid Services. Medicare managed care eligibility and enrollment. Available at: <https://www.cms.gov/Medicare/Eligibility-and-Enrollment/MedicareMangCareEligEnroll/index>. Accessed November 2020.
- Centers for Medicare and Medicaid Services. Medicare national coverage determinations manual chapter 1, part 1 (section 10 – 80.12) coverage determinations. Available at: [https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/ncd103c1\\_Part1.pdf](https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/ncd103c1_Part1.pdf). Accessed November 2020.
- Centers for Medicare and Medicaid Services. Medicare national coverage determinations. Available at: <https://www.cms.gov/medicare-coverage-database/details/ncd-details.aspx?NCDId=242&ncdver=1&DocID=180.2&SearchType=Advanced&bc=IAAABAAAA&>. Accessed November 2020.
- Centers for Medicare and Medicaid Services. Medicare part B drug regulations. Available at: [http://www.cms.gov/McrPartBDrugAvgSalesPrice/03\\_regulations.asp](http://www.cms.gov/McrPartBDrugAvgSalesPrice/03_regulations.asp). Accessed November 2020.
- Centers for Medicare and Medicaid Services. Medicare program; policy and technical changes to the Medicare advantage and the Medicare prescription drug benefit programs. Available at: <http://cms.gov/PrescriptionDrugCovContra/Downloads/CMS4085P.pdf> Accessed November 2020.
- Centers for Medicare and Medicaid Services. Medicare program – general information. Available at: <http://www.cms.gov/MedicareGenInfo>. Accessed November 2020.
- Medicare.gov. Find a Medicare Plan. <http://www.Medicare.gov/find-a-plan/questions/home.aspx>. Accessed November 2020
- National Home Infusion Association. NHIA Talk Infusion Webinar: Medicare's Changing Coverage Criteria for Parenteral and Enteral Nutrition. October 27, 2020
- Noridian Health Solutions. Retirement of parenteral nutrition Local Coverage Determination (LCD) and related policy article – effective November 12, 2020. <https://med.noridianmedicare.com/web/jadme/policies/dmd-articles/2020/retirement-of-parenteral-nutrition-lcd-and-related-pa>. Accessed November 2020.





## 2021 KSBN Long-Term CNE Provider Renewal

**Presentation Title:** Immunotherapy in Oncology

**Presentation Objectives:**

- Introduction of the immune system and how immunotherapy is used in oncology
- Briefly review cytokine immunotherapy
- Differentiate monoclonal antibodies
  - CD20 directed therapy
  - Immune Checkpoint Inhibitors
- Discuss Bi-Specific T-cell Engager (BiTE) therapy
- Understand CAR T-cell Therapy
  - How it works
  - Medications – Indications, Dosage, Administration
  - Common Warnings and Adverse Reactions
    - Signs/symptoms
    - Patient monitoring and management
    - Treatment guidelines

The content meets the definition of CNE in KSA 65-1117 as it expounds upon a nurse's knowledge of the specialized drugs in this patient population

The instructors for this presentation are all licensed Specialty Pharmacists (resume attached) who manage, consult, and fill these medications

**Presentation Bibliography:**

- ▶ <https://www.mdanderson.org/treatment-options/immunotherapy.html> retrieved February 11, 2021
- ▶ <https://www.cancerresearchuk.org/about-cancer/cancer-in-general/treatment/targeted-cancer-drugs/types/monoclonal-antibodies> retrieved February 11, 2021
- ▶ "KEYTRUDA® (Pembrolizumab): Health Care Professional Guidelines and Indications." *KEYTRUDA® (Pembrolizumab) | Health Care Professional Guidelines and Indications*, [www.keytruda.com/hcp/](http://www.keytruda.com/hcp/).
- ▶ "OPDIVO® (Nivolumab)." *OPDIVO® (Nivolumab)*, [www.opdivo.com/](http://www.opdivo.com/).
- ▶ "TECENTRIQ® (Atezolizumab) Cancer Immunotherapy: Safety & Side Effects." *TECENTRIQ® (Atezolizumab) Cancer Immunotherapy | Safety & Side Effects*, [www.tecentrig.com/](http://www.tecentrig.com/).
- ▶ Chmielowski, and Bartosz. "Ipilimumab: A First-in-Class T-Cell Potentiator for Metastatic Melanoma." *Journal of Skin Cancer*, Hindawi, 8 May 2013, [www.hindawi.com/journals/jsc/2013/423829/](http://www.hindawi.com/journals/jsc/2013/423829/).
- ▶ <https://www.drugs.com/slideshow/car-t-cell-therapy-top-10-questions-answered-1288> retrieved November 3, 2020
- ▶ <https://cellculturedish.com/fda-approves-first-car-t-cell-therapy-the-evolution-of-car-t-cell-therapy/> Oct. 2017
- ▶ <https://www.merckmanuals.com/professional/hematology-and-oncology/tumor-immunology/tumor-antigens> Nov. 2020
- ▶ <https://www.cancer.gov/publications/dictionaries/cancer-terms/def/tumor-specific-antigen> retrieved February 11, 2021



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## Holly Ouellette

12 Ferris Branch  
San Antonio, TX 78254

[hollyolet@gmail.com](mailto:hollyolet@gmail.com)  
(210) 834-0748

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### Clinical Specialty Pharmacist

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#### **Over 20 years as a pharmacist, trainer and manager**

- Certified in Specialty Pharmacy and Multiple Sclerosis Certified Specialist
- Pharmacist license held in AL, CO, IN, KS, LA, MA, MS, NV, OR, SC, TN, TX, WV
- Project Manager for the creation of a successfully launched specialty retail pharmacy.
- MTM and Immunization Certified, as well as a Pharmacist Preceptor

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### Professional Experience

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Optum Specialty Pharmacy – San Antonio, TX

**Pharmacist-in-Charge** August 2018 to present

- Oversee the business and legal requirements of a Class G(front-end) specialty pharmacy
- Organize and manage the appeals program for Optum Specialty business
  - Maintain knowledge of coverage for Medicare and commercial insurances
- Executive member of the Continuing Education (CE) program and Content Committee
  - Create content for specialty medication continuing education programs for nurses by staying up to date with new and emerging therapies
  - Facilitate CE presentations (In-person or via WebEx) for nurses around the country

**Clinical Pharmacist** January 2017 to August 2018

- Counseled patients on specialty medications (MS, Oncology, Hep C, etc.)
- Reviewed clinical information related to hepatitis C, multiple sclerosis, oncology, and autoimmune disease states to verify appropriate medication therapy
- Verified prescriptions for translation accuracy, reviewed drug interactions, communicated with physicians regarding medication therapy issues/questions

CVS Caremark – San Antonio, TX

**Consultant, Pharmacist Trainer** August 2015 - December 2016

- Facilitated training classes for new employees related to Medicare Part D coverage determination, appeals and prior authorizations.
- Evaluated students' comprehension of training information, work processes, and ability to learn new software programs. Provided feedback to management at the conclusion of each class (regarding employee performance in training, and recommendations related to their future position with the company).
- Consulted with department managers as to workflow improvement recommendations and employee relations.

The START Center - San Antonio, TX

**Pharmacist-in-charge, The START Center Pharmacy** Sept. 2013 – Jul. 2015

- Solitary pharmacist managing all aspects of a retail specialty pharmacy, emphasis on oral oncology medications
- Coordinated with nursing staff and physicians to address therapy concerns, appropriate therapy, drug interactions, etc.
- Maintained a vast understanding of Medicare parts B and D, as well as commercial insurance for medication coverage and eligibility for financial aid

**Project Manager/Pharmacist** Jan. 2011 – Sept. 2013

- Created plan and design for The START Center Pharmacy.
- Completed applications necessary for a new retail pharmacy
- Reviewed and selected a pharmacy processing software and point-of-sale system
- Worked with Human Resources to develop and modify company formulary, copay structure, and convenience of employees receiving mail order benefits onsite (at work)
- Created pharmacist and technician work manuals, standard operation guidelines, and regulations for the operation of a retail pharmacy, complying with all state/federal laws
- Worked in the IV lab pharmacy, checking chemotherapy before administration

Target Pharmacy - San Antonio, TX

**Float Pharmacist** Sept. 2008 – Mar. 2010

- Filled in as a relief pharmacist in pharmacies throughout San Antonio and outlying areas for those on vacation and/or open positions, performing all duties of a pharmacist.

**Pharmacist-In-Charge** Jan. 2006 – Sept. 2008

- Managed all pharmacy personnel in order to meet and/or exceed guest satisfaction expectations as well as sales goals
- Built relationships with fellow employees and patients.
- Functioned as a trainer for all new pharmacists in the San Antonio area.

Caremark Pharmacy – San Antonio, TX

**Trainer, Clinical Care Services** June 2004 - June 2005

- Developed training material for 2 departments, and utilized said training material to facilitate training classes for new employees.
- Re-trained current employees to ensure consistency and quality throughout the departments.

**Clinical Counseling Pharmacist, Clinical Care Services** Dec. 2002 – June 2004

- Counseled patients over the phone regarding their medications, drug interactions, possible side effects, drug identification, and medication usage.
- Verified prescription information and initiated/completed doctor phone calls regarding either prescription verification or obtaining new prescriptions for patients.

**Staff Pharmacist, Concurrent Case Management** Sept. 2001 – Dec. 2002

- Monitored patient profiles for drug interactions, high doses, and inappropriate therapies, as well as maintained prior approvals for high-dollar/specialty medications.
- Functioned as Team Mentor.

Albertson's Pharmacy – San Antonio, TX

**Pharmacist-In-Charge / Assistant Division Manager** Dec. 1997 – July 2001

- Facilitated training for and managed all pharmacy personnel as well as filled prescriptions, handled insurance issues (Medicare, Medicaid, commercial insurance) and counseled patients.
- Completed management training and functioned as assistant to the division manager.
- Mainly responsible for pharmacist hiring and training for the San Antonio area, but also ensured and supervised technician training for the division.

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**Education**

Bachelor of Science in Pharmacy

The University of Texas at Austin College of Pharmacy

CNE 236



## Course evaluation

**Title:** \_\_\_\_\_

**Date:** \_\_\_\_\_  
[month DD, 2020]

**Location:** \_\_\_\_\_

**We appreciate your  
feedback as this helps us  
prepare CE activities to  
match your learning needs.**

	Yes	No
1. Was the course content organized effectively?	<input type="checkbox"/>	<input type="checkbox"/>
2. Did the learning objectives meet your educational needs?	<input type="checkbox"/>	<input type="checkbox"/>
3. Was the instructor knowledgeable about the course content?	<input type="checkbox"/>	<input type="checkbox"/>
4. Will the knowledge you gained from this course improve patient care?	<input type="checkbox"/>	<input type="checkbox"/>
5. Was the program fair, balanced and free of commercial bias?	<input type="checkbox"/>	<input type="checkbox"/>

Please provide any comments and suggestions for future topics:

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**Long Term CNE Provider Checklist**  
(K.A.R. 60-9-107)

**Name of Provider:** Debriefing the Front Lines Inc. Initial Application

**Name of Program Coordinator:** Tara Ryan, MSN, RN, CHSE, SOAR

**Date to CNE Committee:** June 16, 2021

Information Required	Received	N/A
Completed application for initial approval or five-year renewal for LT CNE providership shall be submitted at least 60 days before a scheduled board meeting	04/13/2021	
The name and address of the organization on the application	X	
The name and address of the department or unit within the organization responsible for approving CNE, if different from the name and address of the organization		X
The name, education and experience of the program coordinator responsible for CNE	Tara Ryan, MSN, RN, CHSE,SOAR	
<ul style="list-style-type: none"> <li>Be a licensed professional nurse</li> </ul>	X	
<ul style="list-style-type: none"> <li>Have three years of clinical experience</li> </ul>	X	
<ul style="list-style-type: none"> <li>Have one year of experience in developing and implementing nursing education</li> </ul>	X	
<ul style="list-style-type: none"> <li>Have a baccalaureate degree (unless held this position for the provider at least five years immediately prior to January 1, 1977)</li> </ul>	X	
<b>Policies &amp; Procedures:</b>		
Written policies and procedures, including at least the following areas:		
<ul style="list-style-type: none"> <li>Assessing the need and planning for CNE activities</li> </ul>	X	
<ul style="list-style-type: none"> <li>Fee assessment</li> </ul>	X	
<ul style="list-style-type: none"> <li>Advertisements or offering announcements. Published information shall contain the following statement: "(name of provider) is approved as a provider of continuing nursing education by the Kansas State Board of Nursing. This course offering is approved for contact hours applicable for APRN, RN, or LPN relicensure. Kansas State Board of Nursing provider number: "</li> </ul>	X	
<ul style="list-style-type: none"> <li>Notice of change of coordinator or required policies and procedures. The program coordinator shall notify the board in writing of any change of the individual responsible for the providership or required policies and procedures within 30 days</li> </ul>	X	
For long term providers, the policies and procedures for the offering approval process shall include the following:		

• A summary of the planning	X	
• The behavioral objectives	X	
• The content, which shall meet the definition of CNE in KSA 65-1117	X	
• The instructor's education and experience, documenting knowledge and expertise in the content area	X	
• A current bibliography that is reflective of the offering content. The bibliography shall include books published within the past 10 years, periodicals published within the past five years, or both	X	
• An offering evaluation that includes each participant's assessment of the following:		
▪ The achievement of each objective	X	
▪ The expertise of each individual presenter	X	
An approved provider may award any of the following:		
• Contact hours as documented on an offering agenda for the actual time attending, including partial credit for one or more contact hours	X	
• Credit for fractions of hours over 30 mins to be computed towards a contact hour	X	
• Instructor credit, which shall be twice the length of the first-time presentation of an approved offering, excluding an standardized, prepared curriculum	X	X
• Independent study credit that is based on the time required to complete the offering, as documented by the provider's pilot test results		X
• Clinical hours		X
<b>Documentation of Attendance</b>		
Each provider shall maintain documentation to verify that each participant attended the offering. The provider shall require each participant to sign a daily roster, which shall contain the following information:		
• The provider's name, address, provider number, and coordinator	X	
• The date and title of the offering, and the presenter or presenters	X	
• The participant's name and license number and the number of contact hours awarded	X	
Each provider shall maintain documentation to verify completion of each independent study offering, if applicable. To verify completion of an independent study offering, the provider shall maintain documentation that includes the following:		
• The provider's name, address, provider number, and coordinator		X
• The participant's name and license number, and the number of contact hours awarded		X

• The title of the offering		X
• The date on which the offering was completed		X
• Either the completion of a posttest or a return demonstration		X
<b>Certificate of Attendance/CE Transcript</b>		
A certificate of attendance shall be awarded to each participant after completion of an offering, or a CE transcript shall be provided according to the policies and procedures of the long-term provider		
Each certificate and each CE transcript shall be complete before distribution to the participant		
Each certificate and each CE transcript shall contain the following information:		
• The provider's name, address and provider number	X	
• The title of the offering	X	
• The date or dates of attendance or completion	X	
• The number of contact hours awarded and, if applicable, the designation of any independent study or instructor contact hours awarded	X	
• The signature of the individual responsible for the providership	X	
• The name and license number of the participant	X	
<b>Recordkeeping &amp; Storage</b>		
For each offering, the approved provider shall retain the following for two years:		
• A summary of the planning	X	
• A copy of the offering announcement or brochure	X	
• The title and objectives	X	
• The offering agenda or, for independent study, pilot test results	X	
• A bibliography	X	
• A summary of the participants' evaluations	X	
• Each instructor's education and experiences	X	
• Documentation to verify completion of the offering	X	
The record storage system used shall ensure confidentiality and easy retrieval of records by authorized individuals	X	
<b>Program Evaluation Plan</b>		
For long-term providers, a copy of the total program evaluation plan	X	
<b>Two Proposed Offerings</b>		
The provider shall submit two proposed offerings, including the following:		
	Effective & Assertive Communication	Stress Management for Nurses

• A summary of planning	X	X
• A copy of the offering announcement or brochure	X	X
• The title and behavioral objectives	X	X
• The offering agenda or, for independent study, pilot test results	X	X
• Each instructor's education and experience	X	X
• A current bibliography	X	X
• The offering evaluation form	X	X

12/2018

Review Completed by Chelsey Stephenson, CNE Education Specialist on May 25, 2021.

**Reference No.:** 24858 **Date submitted:** Apr 13 06:14 2021

**radio** ~ Initial Application

**Providername** ~ Debriefing the Front Lines Inc.

**providernum** ~ ~

**legalbody** ~ ~

**address** ~ 9350 Pan Ridge Road

**adress2** ~ Baltimore, MD 21234

**telephone** ~ 724-448-5330

**email** ~ tara@debriefingthefrontlinesinc.org

**coordinator** ~ Tara Ryan, MSN, RN, CHSE, SOAR

**date** ~ 04-13-2021

**planningce** ~ Policy #100: Process of Assessing Need And Planning CNE

Debriefing the Frontlines, Inc. will follow a systematic process for assessing need and planning CNE offerings.

Date: \_\_\_\_\_ Reviewed: \_\_\_\_\_

Need Assessment

1. Debriefing the Frontlines, Inc. will assess need for CNE using informal and/or formal methods including:

- a. Identifying healthcare facility business needs through formal or informal survey;
- b. Performing gap analysis through individual interviews, focus groups, surveys, and self-assessments

Assessment of Training Options

1. A list of training options and needs will be generated after the gap analysis has been completed.

2. All options will be carefully evaluated to determine which are:

- a. Urgent
- b. Important
- c. Not important

3. Debriefing The Frontlines, Inc. will consider these factors when determining CEU

offerings:

- a. Does the offering provide a solution to a problem?
- b. What is the cost of the training to those participating in the offering?
- c. What is the expected return on investment those participating in the offering can expect?
- d. Does the training assist with meeting legal compliance for individual participants

or organizations?

e. After all training options have been assessed, Debriefing The Frontlines, Inc. will have a list of educational priorities suitable for individuals, departments and organizations.

#### Planning of CNE Offerings

1. The CNE Program Coordinator will then evaluate the list of educational priorities and plan CNE offerings for the upcoming year.

2. CNE offerings will be planned and scheduled with consideration given to:

a. Where will the offering be conducted?

b. How will the offering be delivered?

c. Is the offering suitable to be provided online?

d. If the offering already exists, should it continue to be offered?

#### **feeassessment** ~ Policy #101: Process For Fee Assessment

Participants will be aware of the cost of any CNE offering and the process for refunds at the time each offering is announced.

Date: \_\_\_\_\_ Reviewed: \_\_\_\_\_

#### Fee Assessment

1. Debriefing the Frontlines, Inc. will designate a fee for each CNE offering and publish the fee and refund policy at the time the offering is formally announced.

2. The fee for each offering will vary depending on cost of speaker(s), venue, advertising, etc.

3. The fee for the offering will be collected at the time of registration and will be payable electronically or with check via mail.

4. Payment of the fee secures registration for the offering.

#### Refunds

1. If a participant is unable to attend the offering as scheduled, refunds will be issued as follows:

a. Notice received up to 7 days prior to scheduled event: 100% refund

b. Notice received less 7 days prior to scheduled event: 0% refund

2. Refunds will be made within 14 days of receipt of notice.

#### Insufficient Funds

1. A \$35 fee will be assessed for any payment received that is returned to the organization for insufficient funds in addition to the fee for the offering.

2. A participant may not attend an offering until fees have been paid in full.

#### **advertisement** ~ Policy #102: Process For Advertisements or Announcements

CNE Offerings will be advertised.

Date: \_\_\_\_\_ Reviewed: \_\_\_\_\_

**Advertisements or Announcements**

1. Debriefing the Frontlines, Inc. will advertise CNE offerings in a variety of ways, including:

- a. On the internet via website, social media and email
- b. Radio
- c. Television
- d. Print advertising
- e. Mail

2. Published information shall contain the following statement:

a. Debriefing the Frontlines, Inc. is approved as a provider of continuing nursing education by the Kansas State Board of Nursing. This course offering is approved for \_\_\_\_contact hours applicable for RN, LPN, or LMHT relicensure. Kansas State Board of Nursing Provider Number: \_\_\_\_\_

**approvalprocess ~ Policy #103: Process For Offering Approval**

Debriefing the Frontlines, Inc. will approve offerings using a standardized system to ensure each offering is appropriate.

Date: \_\_\_\_\_ Reviewed: \_\_\_\_\_

**Approval Offering**

1. Each CNE offering submitted to the CNE Program Coordinator must include:

- a. Summary of planning
- b. Behavioral Objectives
- c. Content shall meet the definition of CNE in KSA 65-1117(a) which states:

Continuing nursing education means learning experiences intended to build upon the educational and experiential bases of the registered professional and licensed practical nurse for the enhancement of practice, education, administration, research or theory development to the end of improving the health of the public.

- d. Instructor's education and experience documenting knowledge/expertise
- e. Current bibliography (books 10 years, periodicals 5 years)
- f. Offering evaluation that includes assessment of learner achievement of each objective, expertise of individual presenters

**contacthours ~ Policy #104: Process For Awarding Contact Hours**

Debriefing the Frontlines, Inc. will award contact hours to participants for completion of full program offering or partial completion of offering.

Date: \_\_\_\_\_ Reviewed: \_\_\_\_\_

**Awarding Contact Hours**

1. Participants completing an entire program offering will be awarded one contact hour based on 50 minutes of participation in a learning



experience.

2. Credit for fractions of hours will be awarded to those completing an entire program offering as follows:

- a. 15 minutes – 0.25 contact hour
- b. 30 minutes – 0.50 contact hour
- c. 45 minutes – 0.75 contact hour

Instructor credit will be awarded as follows:

- d. 2.0 contact hours for each hour of first time presentation of an approved offering, excluding standardized prepared curriculum (e.g. ACLS, PALS, TNCC, ENPC, MANDT, etc)

3. Independent study credit will be awarded based on time required to complete the

offering as documented by Debriefing the Frontline, Inc.'s pilot time test results a. Pilot test time results will be measured as follows:

- i. A small group of pilot testers representative of the target audience will document time needed by each to complete the offering;
- ii. The CEU Program Coordinator will discard the highest and lowest times, total all remaining times and divide by remaining number of testers to determine the average time needed;
- iii. Contact hour credit will be awarded as per this policy.

4. Contact hours for clinical hours will not be awarded.

Partial Credit

1. Partial credit will be awarded as follows for late arrival or early departure:

a. Participants arriving late or leaving early will note and initial either time of late

arrival or early departure;

b. Time for breaks will be subtracted from total hours the participant was present at the offering.

c. Total number of minutes attended will be divided by 50 to calculate the number

of contact hours to be awarded to participants.

**verifycompletion** ~ Policy #105: Process For Verifying Participation and Completion of The Offering

Debriefing the Frontlines, Inc. will verify participation and completion of offerings by participants.

Date: \_\_\_\_\_ Reviewed: \_\_\_\_\_

Verifying Participation – Online Offerings

- 1. Participants will register for course offerings electronically.
- 2. Online course settings will not allow participants to advance to post-

test and program

evaluation without first viewing course content in its entirety.

3. Participants will be required to take a post-test and score 80% or greater to be awarded

a Certificate of Continuing Nursing Education.

Verifying Participation – In Person Events

1. Participants will register for course offerings electronically.

2. Participants will sign in upon arrival for the event and again after lunch and/or each

subsequent day to verify attendance.

3. Participants will complete a program evaluation at the end of the offering.

Verifying Participation – Independent Study

1. Participants will register for course offerings electronically.

2. Participants will document and submit an Independent Study Verification Form.

Documentation will include:

a. Provider Name, Address, Provider Number, Name of Program Coordinator

b. Title of offering

c. Date offering completed

d. Name of presenter(s)

e. Participant name, email and license number

f. Participant Signature

g. Participants will email the completed form to:

tara@debriefingthefrontlinesinc.org

3. Participants will be required to take a post-test and score 80% or greater to be awarded

a Certificate of Continuing Nursing Education.

a. Upon receipt of the Independent Study Verification Form by Debriefing the

Frontlines, Inc., participants will receive a link to complete the online post-test

for the offering.

b. A score of 80% or greater is required for awarding a certificate of continuing nursing education.

c. Upon successful completion of the post-test participants will receive a certificate

of continuing nursing education electronically.

d. Debriefing the Frontlines, Inc. staff will document post-test score, contact hours awarded, and date on the Independent Study Verification Form.

e. The Independent Study Verification Form will then be scanned into the confidential and secure online records storage system to be maintained per policy.

Policy #106: Process For Issuing Certificates of Completion  
Debriefing The Frontlines, Inc. will issue certificates of completion to participants based on verification of participation in offerings.

Date: \_\_\_\_\_ Reviewed: \_\_\_\_\_

Issuing Certificates of Completion For Online Offering

1. Participants completing an online offering will be required to take a post-test.
2. A score of 80% or greater is required for issuing a certificate of continuing nursing education.
3. Certificates of Completion will be provided electronically to participants completing online offerings.

Issuing Certificates of Completion For In Person Offering

1. Participants completing an in person offering will be required to sign in upon arrival, after lunch, and each subsequent day.
2. Certificates of Completion will be provided electronically to those participants with verified participation in each in person offering.

**recordkeeping** ~ Policy #107: Process For Record Keeping And Storage  
Debriefing the Frontlines, Inc. will retain appropriate records for each offering, and store records securely and in a manner that makes them easily retrievable by authorized personnel.

Date: \_\_\_\_\_ Reviewed: \_\_\_\_\_

Record Keeping And Storage

1. Debriefing the Frontlines, Inc. will retain the following records for each offering for a period of two years:
  - a. Summary of planning
  - b. Copy of announcement/brochure
  - c. Title and objectives
  - d. Offering agenda
  - e. Pilot time test results if independent study
  - f. Bibliography
  - g. Summary of participant evaluations
  - h. Each instructor's education and experience
  - i. Documentation to verify completion of the offering
  - j. Records will be stored electronically on a secure site with password protected

access to be retrieved easily as needed by authorized personnel.

**noticeofchange** ~ Policy #108: Process For Notice of Change of Coordinator or Required Policies

The CNE Program Coordinator will notify the Kansas State Board of Nursing in writing of any change to CEU Program Coordinator or required policies and procedures within 30 days.

Date: \_\_\_\_\_ Reviewed: \_\_\_\_\_

Process for Notifying Kansas State Board of Nursing of Changes

1. The CNE Program Coordinator will notify Kansas State Board of Nursing of any change to CEU Program Coordinator or required policies and procedures within 30 days.

2. Written notification will be mailed to: Kansas State Board of Nursing  
Landon State Office Building  
900 SW Jackson Street  
Suite 1051

Topeka, Kansas 66612-1230

**programevaluation** ~ Policy #109: Total Program Evaluation

Debriefing the Frontlines, Inc. will complete a total program evaluation annually and include findings in the annual report to Kansas State Board of Nursing.

Date: \_\_\_\_\_ Reviewed: \_\_\_\_\_

Process for Total Program Evaluation

1. The CNE Program Coordinator will complete a total program evaluation at least annually and submit findings in the annual report to the Kansas State Board of Nursing.

2. The total program evaluation will include:

a. "a systematic process by which an approved provider analyzes outcomes of the

overall continuing nursing education program in order to make subsequent

decisions"(60-9-105 (s))

3. The total program evaluation will include evaluation of:

a. Program administration, including program coordinator's responsibilities

b. Program management, including policies and procedures

c. Total program evaluation, including the ability of the plan to measure the overall

effectiveness of the providership.

4. At least annually Debriefing the Frontlines, Inc. will complete a total program evaluation.

5. The CNE Program Coordinator will include the total program evaluation findings that will

be included with the annual report submitted to the Kansas State Board of Nursing.

**Submission date** ~ 04-13-2021 06:14:25

**Form ID** ~ 1672730

**Tara Ryan, MSN, RN, CHSE, SOAR**

9350 Pan Ridge Road

Baltimore, MD 21234

Personal: 724-448-5330

Personal Email: [tara@debriefingthefrontlinesinc.org](mailto:tara@debriefingthefrontlinesinc.org)

### **EDUCATION**

2011    **MSN**, Duquesne University, Nursing Education

2008    **BSN**, Duquesne University, Nursing

2004    **Diploma**, Citizens School of Nursing

### **ADDITIONAL EDUCATION**

**2019** Mindfulness Certificate Program  
New Skills Academy

**2019** Online Edge Certificate Program  
Comprehensive program of professional development for online instructors and course designers

**2013 – 2014** New Faculty Academy: The Pedagogy of Higher Education – Finding Joy and Success in Teaching, Florida Gulf Coast University

### **CERTIFICATIONS**

Clinical Healthcare Simulation Educator (CHSE)  
Expires November 2022

Survivors Offering Assistance in Recovery (SOAR)  
Obtained Sept 2014, no expiration

### **PROFESSIONAL/RESEARCH AREAS OF SPECIALIZATION**

**Clinical** - Critical care, Burn Trauma ICU, Medical ICU  
Community outreach related burn prevention, peer counseling related to body image

**Academic -** Simulation – In addition to teaching, experience includes simulation curriculum design per INASCL standards, simulation evaluation, accreditation preparation, creating and managing a simulated participant program, mentoring faculty new to simulation

#### **ACADEMIC APPOINTMENTS**

- 2015 – 2020** Clinical Assistant Professor/ Simulation Lab Coordinator/Standardized Patient Coordinator (2018 – 2020)  
Towson University, Department of Nursing
- 2015 – 2016** Adjunct Clinical Faculty, University of Maryland School of Nursing
- 2014 – 2015** Clinical Educator II, MedStar SiTEL Simulation Institute  
Technology Learning Lab, Washington DC
- 2012 – 2014** Instructor/Simulation Lab Coordinator, Florida Gulf Coast University, Estero FL
- 2007 – 2010** Adjunct Clinical Faculty, Community College of Allegheny County, Pittsburgh, PA

#### **OTHER PROFESSIONAL POSITIONS HELD**

- 2020 – Present** Founder and President 501c3 non-profit organization  
Debriefing the Front Lines, Inc  
*Heal the Healers Project*
- 2013 - 2015** Registry Float Pool (Supplemental Staffing) ICU/IMC/PCU  
University of Maryland Medical Center
- 2010 – 2014** Registry Float Pool (Staffing Resource Center) ICU/Burns/IMC/PCU  
Lee Memorial Hospital, Fort Myers, FL
- 2010** Registered Nurse, travel nursing in 3 states
- 2004 – 2010** Clinical Nurse II/Resource Nurse Burn Trauma ICU/PCU  
West Penn Hospital Burn Trauma Center, Pittsburgh, PA

#### **SCHOLARSHIP & GRANT**

- 2020** Awesome Baltimore Grant – Debriefing the Front Lines, Heal the Healers, \$1,000
- 2019** Breathe for Change Scholarship Recipient, \$2,200

Wellness, social emotional learning and yoga teacher training for academic educators

- 2019**      **Ryan, T. (PI)** Maryland Clinical Simulation Resource Consortium, Equipment Award \$44,000
- 2017**      **Ryan, T. (PI), Twigg, R. (Co-I)** Maryland Clinical Simulation Resource Consortium (MCSRC) Equipment and Award. Investigator. \$100, 625.99

#### PUBLICATIONS

- 2014**      **Ryan, T.** Prescription for Living. *Pinnacle Magazine*. May, Fort Myers, FL
- 2013**      **Ryan, T.** Teaching with your Mouth Shut. *Pinnacle Magazine*. Fort Myers, FL

#### PRESENTATIONS

- 2020**      **Ryan, T.** (virtual presentation) Debriefing the Front Lines, Inc.  
Information Session: Healing and Human Connection, *Lake Hills Garden Club*
- 2020**      **Ryan, T.** (virtual presentation) Debriefing the Front Lines. Inc.  
Creating a Psychologically Safe Space for Group Debriefing, *WellSpan Health*
- 2019**      **Ryan, T.** (poster) The New Reality, Acting the Part in Psychiatric Nursing Simulation.  
Presented at the Institute of Educators Conference, University of Maryland
- 2018**      Burgess, A., Rhodes, B. & **Ryan, T.** The Use of Low Fidelity Simulation in the Classroom as an Effort to Bridge the Theory Practice Gap. Institute of Educators, University of Maryland School of Nursing.
- 2018**      Stone, H. Austin, N., Burgess, A., & **Ryan, T.** OB Emergencies in EMS



Presentation for the Baltimore County Fire Department EMS Academy,  
Pikesville, MD.

- 2018**     **Ryan, T.** Meditation Immersion, Ryan, T. (workshop series presenter) Public Health Month,  
Towson University, Towson Maryland
  
- 2017**     Stone, H. Austin, N., & **Ryan, T.** OB Emergencies in EMS Presentation for the  
Baltimore County Fire Department EMS Academy, Pikesville, MD.
  
- 2017**     Kent, V., Park, H., **Ryan, T.** Current Status of Nursing Education & Accreditation  
in United States. Kyungpook National University, College of Nursing. South Korea
  
- 2014**     **Ryan, T.** (*poster*) How Can Educators Instill and Improve Self-efficacy in  
an Effort to Better Prepare Graduates for the Working World? Presented at  
Florida Gulf Coast University Student Engagement and Retention Conference.  
Esterro, FL.
  
- 2013**     **Ryan, T.** (*invited podium*) From Tragedy Emerges Strength: Surviving a Burn  
Injury. Florida Gulf Coast University University Faculty Education Summit.  
Esterro, Florida
  
- 2013**     **Ryan, T.** Fluid Resuscitation in Burn Patients. (*podium*) Presented at Florida Gulf  
Coast University College of Health Professions Interprofessional Lecture Series,  
Esterro, FL.
  
- 2013**     **Ryan, T.** The Pedagogy of Clinical Simulation. Florida Gulf Coast University  
College of Health Professions, Faculty Lecture Series. Esterro, FL.
  
- 2007**     **Ryan, T.** (*podium*) Managing and Treating Inhalation Injury Western  
Pennsylvania Hospital Residency Day. Pittsburgh, Pennsylvania.

#### **HONORS & AWARDS**

- 2019**     Innovation in Teaching Award: Playing the Part, Using Simulation in Psychiatric Nursing
  
- 2013**     Scholarship Recipient of the New Faculty Academy: The Pedagogy of Higher Education

Finding Joy and Success in Teaching, Florida Gulf Coast University

2008 Recipient of Sigma Theta Tau, Epsilon Phi Chapter Academic Excellence Award

**SERVICE**

**University**

**Towson University**

2019 – Present National Student Nurses Association, Towson University Chapter (TUSNA)  
Faculty Advisor/Health Screen Lead Faculty

2019 – Present University Salary Review Committee

2016 – Present American Academy of University Professors (AAUP), member

2018 – 2019 University Retrenchment Committee, member

**Towson University College of Health Professions**

2018 University System of Maryland Simulation Task Force Towson University  
College of Health Profession Representative

2017 CHP Interprofessional Showcase, presenter

**Towson University Department of Nursing**

2019 – Present Simulation and Technology Committee, chair

2017 – Present Student Affairs Committee, member

2016 – Present Undergraduate Curriculum Committee, non-voting member

2017 – 2018 Student Affairs Committee, chair

2018 Search Committee for Simulation Technologist, member

2018 Open House for perspective student and families, faculty representative

2017 CHP Interprofessional Showcase, coordinator of nursing breakout session

**Florida Gulf Coast University**

2012 – 2014 University Academic Integrity Committee, member

2012 – 2014 University Sexual Misconduct Committee, member

2012 – 2014 Undergraduate Admissions and Progressions Committee

**Discipline/Professional Service**

<b>2002 – Present</b>	Phoenix Society for Burn Survivors, member and certified peer counselor
<b>2008 – Present</b>	Sigma Theta Tau, Epsilon Phi Chapter, member
<b>2012 – Present</b>	Society for Simulation in Healthcare, member
<b>2012 – Present</b>	Florida Nurses Association, member
<b>2005 – 2014</b>	American Association of Critical Care Nurses, member

**Community Service**

<b>2019 – Present</b>	National Alliance of Mental Illness (NAMI) Crisis Resource Helpline Volunteer
<b>2008 – Present</b>	Burn Concern Support Group, senior member and peer mentor

# Total Program Evaluation

Area	Frequency	Resp. Person	Criteria	Findings	Actions/ Recommendations
Administration			Review job description		
Policies: Assess need, planning - written tool - evaluation summaries			Review survey for appropriateness; were survey findings and identified needs from evaluation summaries used in program planning		
Policies: Fee Assessment			Policy meets organization and customer needs		
Policies: Announcement			Review to be certain they reflect necessary information		
Policies: Offering approval process			Review policies and compare to KSBN requirements		
Policies: Awarding contact hours			Review agendas/pilot test results to verify contact hours awarded; review documentation of partial credit		
Policies: Verifying participation/ completion			Review rosters and certificates; compare to KSBN requirements		
Policies: Record keeping			Audit contents of files for compliance with KSBN requirements		
Policies: Notification of changes			Review procedures for changes reported to KSBN		
Total Program Evaluation effectiveness			Review total program evaluation and compare contents to KSBN requirements		

# Attendance Roster

Title:

Presenter:

Contact Hours: 1.0

Date:

Provider #: XXXXXXXX

CNE Provider: Debriefing the Front Lines, Inc.

CNE Program Coordinator: Tara Ryan, MSN, RN, CHSE, SOAR

Participant Name	RN or LPN	License Number	Email Address	Contact Hours Awarded

# Effective & Assertive Communicaton

## For Nurses

Being able to communicate effectively and say what you mean is what assertive communication is all about. When we say what we mean in ALL situations we can decrease our stress by fully expressing our thoughts, ideas and feelings. This class is for you if you want to learn more effective and stress reducing ways to express yourself!

### Learning Objectives:

- Identify three different types of communication
- State five benefits of assertive communication
- Communicate effectively and create assertive statements with ease

REGISTER NOW at <http://bit.ly/xyzxyz>

***This offering is FREE and will be provided online.***

Debriefing the Frontlines, Inc, is approved as a provider of continuing nursing education by the Kansas State Board of Nursing. This course offering is approved for 1.0 contact hours applicable for RN, LPN, or LMHT relicensure, Kansas State Board of Nursing Provider Number: XXXXXXXX

# Effective & Assertive Communication For Nurses

Presenter: Tara Ryan, MSN, RN, CHSE, SOAR

## Objectives:

Upon completion of this program participants will be able to:

- Identify three different types of communication
- State five benefits of assertive communication
- Communicate effectively and create assertive statements with ease

## Summary Of Planning

Even before the COVID-19 pandemic nurses were dealing with high levels of stress from a variety of issues in the workplace. Debriefing the Frontlines, Inc. works with more than 350 nurses across the USA who are struggling with managing stress effectively. Two common sources of frustration for these nurses are 1. being able to voice their need for time off and 2. being able to say no to a request to work additional shifts. This offering, Effective & Assertive Communication For Nurses, is designed to teach nurses how to say what they mean in all situations so that they can clearly voice their needs and take care of themselves.



## Outline

- 1) Introduction
- 2) 3 Different Types of Communication
  - a) Passive
  - b) Assertive
  - c) Aggressive
- 3) 5 Benefits of Assertive Communication
  - a) Increased Confidence & Self-Esteem
  - b) Less Anxiety
  - c) Less Depression
  - d) Greater sense of being in control or self-advocating
  - e) Improved Relationships
- 4) 3 Common Reasons We Fail At Being Assertive
  - a) Feelings of guilt related to rejecting others
  - b) Nervousness/Anxiety
  - c) Vulnerability
- 5) The Temporary Discomfort Of Being Assertive
- 6) Basic Structure For Forming Assertive Statements
  - a) I feel "x" when you "y" in situation "z," and I would like....
- 7) Why Nurses Need Assertive Communication Skills
- 8) Preparing To Get Started Using Assertive Communication
  - a) Practice forming assertive statements
  - b) Practice saying them out loud to a good friend or your spouse
  - c) Take time to get your thoughts together when you encounter a difficult situation
- 9) NO FAIL Formula To Use When Calling A Physician
  - i) Introduce self with title and employer
  - ii) State who you are calling about
  - iii) Give brief and relevant historical information as needed (Patient had TLHR on date, etc)
  - iv) State the problem patient is having; what you have done; and outcome.
  - v) Make a recommendation
  - vi) Read orders back to physician
  - vii) Thank physician for their time
- 10) Summary

## Bibliography

Adanza, K., Espy, L., & Worthington, S. (2019, December 12). 20 Easy-to-Use Assertive Communication Skills for Confidence and Respect. Retrieved January 20, 2020, from <https://projectbliss.net/assertive-communication-skills/>

Beqiri, G. (2018, November 9). Saying no: Improve assertive communication to reduce stress. Retrieved January 20, 2020, from <https://virtualspeech.com/blog/assertive-communication-reduce-stress>

Gillihan, S. (2018, January 18). 5 Benefits of Asserting Your Needs-and How to Start Today. Retrieved January 20, 2020, from <https://www.psychologytoday.com/us/blog/think-act-be/201801/5-benefits-asserting-your-needs-and-how-start-today>

Mushtaq, B. (2018, May 21). Assertiveness In Nursing. Retrieved January 20, 2020, from <https://crimsonpublishers.com/cojnh/pdf/COJNH.000561.pdf>

Stressed out? Be assertive. (2017, May 9). Retrieved January 20, 2020, from <https://www.mayoclinic.org/healthy-lifestyle/stress-management/in-depth/assertive/art-20044644>

Wignall, N. (2019, December 11). Assertiveness: A Complete Step-by-Step Guide [2020]. Retrieved January 20, 2020, from <https://nickwignall.com/assertiveness/>

## Debriefing the Frontlines, Inc – Department of Continuing Nursing Education

COURSE TITLE: Effective & Assertive Communication For Nurses

DATE: \_\_\_\_\_

### INSTRUCTIONS:

Your opinion of this continuing education activity is important in planning future educational activities. Please indicate how you rate the activity in the categories listed below by circling the number which indicates your response to each statement.

1 = Strongly Disagree 2 = Disagree 3 = Agree 4 = Strongly Agree.

Please make any written comments on the reverse of this form.

\*\*\*\*\*

### RELATIONSHIP OF OBJECTIVES TO OVERALL PURPOSE/GOAL(S) OF THE ACTIVITY:

In general, the below listed objectives were reflective of the overall purpose/goal of the activity. 1 2 3 4

#### Overall Purpose/Goal:

To educate participants on benefits of assertive communication and how to communicate assertively and effectively.

\*\*\*\*\*

### LEARNER'S ACHIEVEMENT OF OBJECTIVE OF THE CONTINUING EDUCATION ACTIVITY:

Objective 1: Identify 3 different types of communication 1 2 3 4

Objective 2: State 5 benefits of assertive communication 1 2 3 4

Objective 3: Communicate effectively and create assertive statements with ease 1 2 3 4

\*\*\*\*\*

### TEACHING EFFECTIVENESS OF EACH INDIVIDUAL FACULTY MEMBER/PRESENTER: Tara Ryan, MSN, RN, CHSE, SOAR

The presentation was organized and easy to follow. 1 2 3 4

The teaching methods were appropriate for the subject area and content. 1 2 3 4

The speaker demonstrated knowledge/expertise in the topic. 1 2 3 4

The content was based on current professional/scientific information. 1 2 3 4

The speaker clarified content in response to questions. 1 2 3 4

The speaker demonstrated regard for previous knowledge and experience of the learner. 1 2 3 4

The presentation level was appropriate for the background and experience of the learner. 1 2 3 4

The speaker was confident speaking before an audience. 1 2 3 4

The speaker exhibited enthusiasm for the topic. 1 2 3 4

\*\*\*\*\*

### FUTURE LEARNING OPPORTUNITIES THAT WOULD BE BENEFICIAL INCLUDE:

\_\_\_\_\_

# CERTIFICATE OF CONTINUING EDUCATION

First Name

Last Name

License #: XXXXXXXXXX

Date: 00/00/0000

has successfully completed

Effective & Assertive Communication For Nurses

and has been awarded 1.0 contact hour.

---

Tara Ryan, MSN, RN, CHSE, SOAR  
CNE Program Coordinator

Debriefing the Frontlines, Inc, Dept of Continuing Nursing Education  
9350 Pan Ridge Road, Baltimore, MD 21324 Provider #: XXXXXXXX

## CNE Offering Evaluation

Approved for Presentation? All questions must be answered "Yes" for offering to be approved.	<input checked="checked" type="checkbox"/> Yes  <input type="checkbox"/> No	
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Title Of Offering: Effective and Assertive Communication for Nurses

Date Received: April 11, 2021

Date Reviewed: April 11, 2021

*Sarah Ryan, MSN BC.*

Signature, CNE Program Coordinator

## CNE Offering Evaluation

Criteria	Yes/No If no, please provide Recommended Action.	Recommended Action
Summary Of Planning Provided	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Behavioral Objectives Included	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Content Meets Definition of CNE as per KSA 65-1117(a)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Instructor's education and experience is suitable to the offering	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Current bibliography is provided (books 10 years, periodicals 5 years)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Offering evaluation includes assessment of learner achievement of each objective, expertise of individual presenters	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Offering is suitable for online presentation	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Approved for Presentation? All questions must be answered	<input checked="" type="checkbox"/> Yes <input type="checkbox"/>	

# **Stress Management**

## **For Nurses**

Nurses today are living in a state of chronic stress. As a result many nurses suffer from depression, anxiety, heart disease, and more. Nurses in training are not prepared for the long-term stress they will encounter in the workplace. This course will provide participants with with basic stress reducing strategies they can easily implement every day.

### **Learning Objectives:**

- Identify the effects of chronic stress on physical and emotional health
- Understand the unique risk for nurses to develop chronic stress
- Understand types of coping including prevention coping & promotion coping
- State 3 strategies to reduce overall stress

**REGISTER NOW at <http://bit.ly/xyzxyz>**

***This offering is FREE and will be provided online.***

Debriefing the Frontlines, Inc, is approved as a provider of continuing nursing education by the Kansas State Board of Nursing. This course offering is approved for 1.0 contact hours applicable for RN, LPN, or LMHT relicensure, Kansas State Board of Nursing  
Provider Number: XXXXXXXX

# Stress Management

*For Nurses:*

Presenter: Tara Ryan, MSN, RN, CHSE, SOAR

## Objectives:

Upon completion of the offering participants will be able to:

- Identify the effects of chronic stress on physical and emotional health
- Understand the unique risk for nurses to develop chronic stress
- Understand types of coping including prevention coping & promotion coping
- State 3 strategies to reduce overall stress



## Summary of Planning

Two problems, nursing turnover and nursing retention have existed for decades. The challenges faced while navigating a worldwide pandemic in the last year have further increased the stress and workload of nurses in facilities. Debriefing the Frontlines Inc. works with more than 350 nurses across the USA. The nurses report fatigue, high levels of stress, frequently working with less than optimal staffing, and having little time off to restore themselves. This course offering is designed to assist nurses to reduce their stress and improve coping.

## Outline

- 1) Introduction
- 2) What is stress?
  - a) Definition
  - b) Three types of stress
    - i) Acute
    - ii) Episodic Acute
    - iii) Chronic
- 3) Is All Stress Bad?
  - a) When Is Stress Positive?
  - b) What Kind of Stress Is Negative?
- 4) Effects of Stress on Physical and Emotional Health
  - a) Acute Stress
  - b) Chronic Stress
- 5) Nurses In A State of Distress
  - a) % of nurses reporting moderate-high level stress
  - b) How nurses are coping with stress
  - c) Health Implications For Nurses Under Stress
- 6) How To Move From Distress To De-Stress
  - a) Coping Skills
    - i) Prevention Focused Coping
    - ii) Promotion Focused Coping
  - b) Assertive Communication
  - c) Self-Care: The Missing Link
    - i) Relaxation techniques
    - ii) Plan to enjoy time off
    - iii) Learn to say "No"
- 7) Summary

## Bibliography ~

5 Things You Should Know About Stress. (2019, November 1). Retrieved January 20, 2020, from <https://www.nimh.nih.gov/health/publications/stress/index.shtml>

Brusie, C. (2019, April 7). Study Reveals Alarming Statistics on Nurse Burnout. Retrieved January 20, 2020, from <https://nurse.org/articles/nurse-burnout-statistics/>

Erenfeld, T. (2018, December 7). The Three Types of Stress. Retrieved January 20, 2020, from <https://www.psychologytoday.com/us/blog/open-gently/201812/the-three-types-stress>

Gooch, K. (2018, April 24). Study: 92% of nurses report moderate-to-very high stress levels. Nurses' stress levels and coping mechanisms influence their health, according to a study published in Nursing Research and Practice. Retrieved January 20, 2020, from <https://www.beckershospitalreview.com/human-resources/study-92-of-nurses-report-moderate-to-very-high-stress-levels.html>

Hall, E. D. (2019, June 18). Coping with Work Stress. Retrieved January 20, 2020, from <https://www.psychologytoday.com/us/blog/conscious-communication/201906/coping-work-stress>

Staff, M. C. (2019, May 23). 3 simple strategies to help you focus and de-stress. Retrieved January 20, 2020, from <https://www.mayoclinic.org/healthy-lifestyle/stress-management/in-depth/3-simple-strategies-to-help-you-focus-and-de-stress/art-20390057>

Werneburg, B. L. (2016, December 30). 3 ways to become more stress resilient. Retrieved January 20, 2020, from <https://www.mayoclinic.org/healthy-lifestyle/stress-management/in-depth/3-ways-to-become-more-stress-resilient/art-20267213>

## Debriefing the Frontlines, Inc – Department of Continuing Nursing Education

COURSE TITLE: Stress Management For Nurses

DATE: \_\_\_\_\_

### INSTRUCTIONS:

Your opinion of this continuing education activity is important in planning future educational activities. Please indicate how you rate the activity in the categories listed below by circling the number which indicates your response to each statement.

1 = Strongly Disagree 2 = Disagree 3 = Agree 4 = Strongly Agree.

Please make any written comments on the reverse of this form.

\*\*\*\*\*

### RELATIONSHIP OF OBJECTIVES TO OVERALL PURPOSE/GOAL(S) OF THE ACTIVITY:

In general, the below listed objectives were reflective of the overall purpose/goal of the activity. 1 2 3 4

#### Overall Purpose/Goal:

To educate participants on effects of stress on overall health and strategies to decrease stress.

\*\*\*\*\*

### LEARNER'S ACHIEVEMENT OF OBJECTIVE OF THE CONTINUING EDUCATION ACTIVITY:

Objective 1: Identify effects of chronic stress on physical and emotional health 1 2 3 4

Objective 2: Understand the unique risk for nurses to develop chronic stress 1 2 3 4

Objective 3: Understand types of coping including prevention coping and promotion coping 1 2 3 4

Objective 4: State 3 strategies to reduce overall stress 1 2 3 4

\*\*\*\*\*

### TEACHING EFFECTIVENESS OF EACH INDIVIDUAL FACULTY MEMBER/PRESENTER: Teresa Sanderson, RN, CCM

The presentation was organized and easy to follow. 1 2 3 4

The teaching methods were appropriate for the subject area and content. 1 2 3 4

The speaker demonstrated knowledge/expertise in the topic. 1 2 3 4

The content was based on current professional/scientific information. 1 2 3 4

The speaker clarified content in response to questions. 1 2 3 4

The speaker demonstrated regard for previous knowledge and experience of the learner. 1 2 3 4

The presentation level was appropriate for the background and experience of the learner. 1 2 3 4

The speaker was confident speaking before an audience. 1 2 3 4

The speaker exhibited enthusiasm for the topic. 1 2 3 4

\*\*\*\*\*

### FUTURE LEARNING OPPORTUNITIES THAT WOULD BE BENEFICIAL INCLUDE:

---

# CERTIFICATE OF CONTINUING EDUCATION

First Name

Last Name

License #: XXXXXXXXXXXX

Date: 00/00/0000

has successfully completed

## Stress Management For Nurses

and has been awarded 1.0 contact hour.

---

Tara Ryan, MSN, RN, CHSE, SOAR,  
CNE Program Coordinator

Debriefing the Frontlines, Inc, Dept of Continuing Nursing Education  
9350 Pan Ridge Road, Baltimore, MD 21324 Provider #: XXXXXXXX

## CNE Offering Evaluation

Criteria	Yes/No If no, please provide Recommended Action.	Recommended Action
Summary Of Planning Provided	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Behavioral Objectives Included	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Content Meets Definition of CNE as per KSA 65-1117(a)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Instructor's education and experience is suitable to the offering	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Current bibliography is provided (books 10 years, periodicals 5 years)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Offering evaluation includes assessment of learner achievement of each objective, expertise of individual presenters	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Offering is suitable for online presentation	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Approved for Presentation? All questions must be answered	<input checked="" type="checkbox"/> Yes <input type="checkbox"/>	

## CNE Offering Evaluation

"Yes" for offering to be approved.	<b>No</b>	
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Title Of Offering: Stress Management for Nurses

Date Received: April 11, 2021

Date Reviewed: April 11, 2021

Laura Ryan MSW PhD

Signature, CNE Program Coordinator