

September 2025

Kansas NURSING NEWS

The Official Publication of the Kansas State Board of Nursing



The Strategic Future of Nursing Regulation in Kansas

this issue-

The Strategic Importance of the Regulation of Nursing Practice

Strategic Healthcare Leaders in Kansas– Nurse Education Program Administrators



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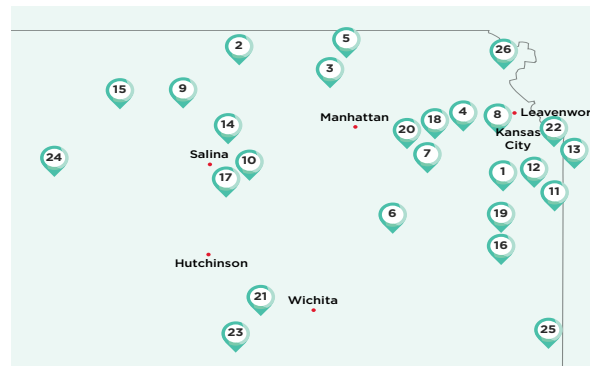


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Kansas NURSING NEWS

September 2025 | VOL. 1 NO. 3

Landon State Office Building
900 SW Jackson, Ste. 1051
Topeka, KS 66612-1230
Office Hours: 8:00 am – 4:30 pm

<https://ksbn.kansas.gov/>

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BC
Term: 07/01/2025- 06/30/2029

Brenda Sharpe, MS, Public Member
Re-Appointed



Board members listed right to left - Back Row; Tosha Fields, Belinda Katz, Brenda Sharpe, Melissa Oropeza, Adri Gouldsmith, Ruth Burkhart, Steven Peterson

Front Row: Amy Hite, Andrea Watson, Michelle Terry

KSBN Committee and Board Meetings:

YouTube recordings of past KSBN Committee and Board meetings are available on the KSBN website and on the ks nursing YouTube channel.

<https://www.youtube.com/@ksnursing>

All meetings are open to the public and are held at the Landon State Office Building, 900 SW Jackson, Topeka, Kansas 66612.

Schedule for 2025-2026 Meetings

Mon. December 8

9 am - Investigative Comm.

Tues. December 9

8:30 am to 12 pm
Education Comm. Room 509

12:30 pm to 2 pm
DNE & IV Therapy Comm. Room 509

2 pm to 3 pm – APRN Comm. Room 509

3 pm to 4 pm - Practice Comm

Wed. December 10

8:30 am to 9 am
Finance & RM Committee – Room 560

9:15 am – until finish
Board - Room 509

Mon. March 23

9 am - Investigative Comm

Tues. March 24

8:30 am to 12 pm –
Education Comm – Room 509

12:30 pm to 2 pm -
DNE & IV Therapy Comm – Room 509

2 pm to 3 pm – APRN Comm – Room 509

3 pm to 4 pm -- Practice Comm

Wed. March 25

8:30 am to 9 am –
Finance & RM Committee – Room 560

9:15 am – until finish –
Board - Room 509



DISCLAIMER CLAUSE

The *Kansas Nursing News* is published quarterly by the Kansas State Board of Nursing. Feedback regarding this publication may be communicated directly to the Kansas State Board of Nursing by contacting Andy Martin, 785-296-5062, andrew.martin@ks.gov. For advertising rates and information, contact Michelle Gilbert, 1-800-561-4686 ext. 120, mgilbert@pcipublishing.com.

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EDITION 03

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Table of CONTENTS

Thoughts from the Executive Administrator	5	"My Reason Why"	
Contact Us	8	Celebrating School Nurses.....	20
How to Amend the Kansas Nurse Practice Act & Licensed Mental Health Technicia Act.....	10	Strategic Healthcare Regulation Leaders in Kansas.....	22
CE Broker	11	The Future of Nursing Education: Qualified Faculty and Instructors	24
Kansas State Board Of Nursing Strategic Plan	12	Kansas State Board of Nursing Meeting.....	26
The Strategic Importance of the Regulation of Nursing Practice	14	Disciplinary Actions	30
The Art of Asking Questions FAQs	18		





Carol Moreland, MSN, RN
Executive Administrator

Hello everyone,

Fall 2025 brings changes at the Kansas State Board of Nursing (KSBN). We have three Board members who are leaving the board and will be missed: Julianna Rieschick RN, Michaela Hysten RN and Lori Owen LPN. We appreciate the expertise they have shared with the Board during their time as Board members. There are three new Board members joining the Board starting July 1, 2025. They are Tosha Fields, RN, Steven Peterson, RN and Belinda Katz, LPN. We look forward to getting to know them. We appreciate their willingness to share their expertise and knowledge with KSBN.

We continue to have one public member Board member vacancy. Board members are appointed by the Governor and applications for appointment to be a KSBN Board member are located on the Governor's website (<https://www.governor.ks.gov/serving-kansans/office-of-appointments>). If you have questions regarding Board membership and responsibilities, please email me at: carol.moreland@ks.gov.

KSBN conducted a strategic retreat in April to review the last three years and plan for the next three years. The Board revised their mission statement to include everyone in Kansas, not just the citizens of Kansas. The revised mission is to protect and promote the welfare of the people of Kansas. The vision is to uphold the highest standards and secure public trust. The core values are integrity, transparency, respect, collaboration and growth. The priorities for the years of July 1, 2022, through June 30, 2025, included: 1) Promoting nursing and allied health standards; safe nursing through education, licensure and regulation; 2) Fiscal and human resources responsibilities; and 3) Maintain quality customer service. KSBN continues to make strides forward in each of these areas.

The KSBN Strategic Plan for 2025 – 2028 is provide for you on page 12 of this publication. The priorities and strategic objectives include:

1. Promoting Nursing and allied health standards; safe nursing through education, licensure, and regulation
 - Enhance collaborative relationships with other nursing and health-related organizations and other state agencies in Kansas
 - Systematic evaluation of advanced practice nursing
 - Retain independent status of the Board of Nursing
 - Legislative engagement

2. Fiscal and human resource responsibilities

- Develop succession plans for key board members and ensure orientation occurs for all board members that includes information about the responsibilities of serving as a board member to strengthen board governance and operations

3. Enhance services

- Review and adjust areas within the licensing department that can be altered or changed to maximize the performance of staff and to increase efficiency
- To increase communication between departments within the agency so that the application/licensure process remains seamless
- Review disciplinary outcomes as determined by the Investigative Committee/Board against violations alleged to develop a Sanction Reference Guide
- The Investigative division staff will work collectively with agency IT, general counsel and Executive Administrator to enhance means to respond to practice related inquiries
- Enhance transparency and understanding of nursing education data by developing and disseminating accessible, evidence-based insights and key outcome indicators that inform KSBN stakeholders and support improved educational outcomes and decision-making over the next three years

View a PDF copy of the KSBN 2025 to 2028 Strategic Plan by visiting the KSBN website at <https://ksbn.kansas.gov/wp-content/uploads/Misc/StrategicPlan.pdf>



Email any ideas for content you would like to see in the future KSBN newsletters to me at carol.moreland@ks.gov. Thank you for all you do in caring for the people of Kansas and your continued support of the nursing regulation in Kansas and KSBN.

Carol Moreland, MSN, RN



Nursing License Renewal Schedule

If your license expires on:
(Please refer to the Check Status
of Expiration to verify your
expiration date.)

You should receive
your yellow renewal
notice postcard by:

Your properly
completed renewal
application should be
in the Board office by:

September 30, 2025	July 15, 2025	August 15, 2025
October 31, 2025	August 15, 2025	September 15, 2025
November 30, 2025	September 15, 2025	October 15, 2025
December 31, 2025	October 15, 2025	November 15, 2025
January 31, 2026	November 15, 2025	December 15, 2025
February 28, 2026	December 15, 2025	January 15, 2026

Total Count of Active

Last Updated 05/15/2025

LICENSE TYPE	COUNT
Registered Nurse - Multi-State	21068
Registered Nurse - Single-State	32018
Registered Nurse - Temporary	38
Licensed Practical Nurse - Multi-State	2639
Licensed Practical Nurse - Single-State	6453
Licensed Practical Nurse - Temporary	8
Nurse Practitioner	8649
Nurse Practitioner - Temporary	30
Clinical Nurse Specialist	315
Nurse Midwife	131
Nurse Midwife - Temporary	1
Registered Nurse Anesthetist	1352
Registered Nurse Anesthetist - Temporary	5
Licensed Mental Health Technician	32
Total	72739

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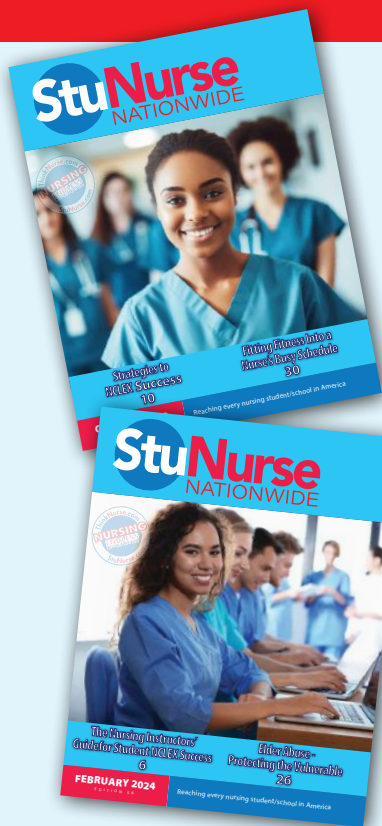
The Board continues to receive reports of malicious actors calling pharmacists and pharmacy technicians, representing themselves as staff members of the Board

or other federal agencies. These actors indicate there are complaints, investigations or outstanding disciplinary actions pending against licensees and registrants. In most cases, malicious actors are able to spoof caller ID or mask email addresses and may even have publicly available licensee names and license numbers.

These inquiries are fraudulent!

Please remember:

- Notification of disciplinary action will always be made by mail or email to your address of record.
- If a Board staff member calls you, you will always be allowed to terminate communication.
- If you are unsure of the validity of a call or email, contact one of the direct email addresses or phone numbers on the Board's website to ensure legitimate communication.
- The Board website is updated regularly with staff contact information.



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Hiring Simulation Clinician Ottawa, KS

Neosho County Community College is hiring a Simulation Clinician for the Ottawa Campus. M.S.N. required and participation in continuing education to further implementation of simulation lab. At least two years of recent nursing experience in a hospital or similar health care facility and/or recent nursing education experience preferred.

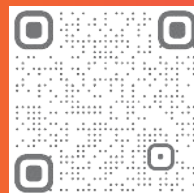
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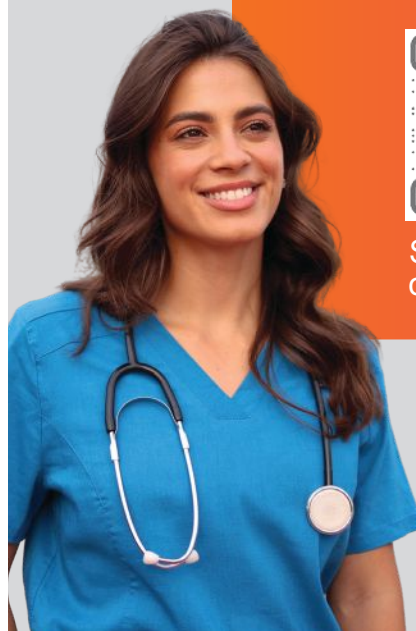
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KSBN is requesting all general questions and inquiries be made to
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If you know the department or person you would like to contact, please email or dial them directly at the address or phone number listed below.

Please do not email or call different KSBN staff members with the same question.

- If you leave a message, allow 2 business days for a response.
- If you do not get a response, call the general number again and ask for assistance with follow-up.

NAME	FUNCTION	EMAIL ADDRESS	PHONE
Licensing			
Barb Bigger	Senior Admin Asst. – Fingerprints, Renewals or Reinstatements.	barbara.bigger@ks.gov	785-296-2926
Karen McGill	Senior Admin Asst. – Initial and Foreign Educ	karen.mcgill@ks.gov	785-296-2453
Jackie Mercer	Senior Admin Asst.— Name or address changes	jackie.mercer@ks.gov	785-296-2967
RaeAnn Byrd	Supervisor – Advance Practice Endorsement	raeann.byrd@ks.gov	785-296-6573
Legal Discipline			
Megan Barber	Senior Adm Asst	megan.e.barber@ks.gov	785-296-4325
Rachel Kenney	Assistant Attorney General	rachel.kenney@ks.gov	
Samantha Harrington	Assistant Attorney General – Part-time	samantha.harrington@ks.gov	
Sydney Winslow	Assistant Attorney General– Part-time	sydney.winslow@ks.gov	
Investigation			
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Christy Ryan	LPN Investigator	christine.ryan@ks.gov	
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Mara Hurley	Special Investigator	mara.hurley@ks.gov	
Linda Davies	Practice Specialist	linda.davies@ks.gov	
Education			
Janelle Martin	Education Compliance Officer – Nursing Schools	janelle.martin@ks.gov	785-296-5036
Stacy Johnson	Senior Admin Asst – Continuing Nursing Education	stacy.johnson@ks.gov	785-296-3782
Information Technology			
Anthony Blubaugh	Applications Developer	anthony.blubaugh@ks.gov	785-296-3928
Kolton Colhouer	eGov Support Analyst	kolton.colhouer@ks.gov	785-296-2240
Administration			
Sharon Oxby	Senior Admin Asst. – Phone Operator	sharon.oxby@ks.gov	785-296-1817
Jill Simons	Executive Assistant – Returned Checks	jill.simons@ks.gov	785-296-5752
Andy Martin	Public Information Officer	andrew.martin@ks.gov	785-296-5062
	KORA Requests	Ksbn.kora@ks.gov	785-296-8401
Adrian Guerrero	Director of Operations	adrian.guerrero@ks.gov	785-296-5935
Carol Moreland	Executive Administrator	carol.moreland@ks.gov	785-296-5752

*The mission of the Board of Nursing is to protect and promote the welfare of the people of Kansas.
 Our vision is to uphold the highest standards and secure the public trust.*



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How to Amend the Kansas Nurse Practice Act & Licensed Mental Health Technician Act

The Kansas Nurse Practice Act (KNPA) and including the Licensed Mental Health Technician Act is comprised of statutes and regulations. These are reviewed by the Board on a regular basis to determine if a revision is necessary. The process to make changes includes working in partnership with state legislators and other stakeholders. In short, revisions to statutes require a senator or a representative to propose a bill. Revisions to a regulation require approval by the Joint Committee on Administrative Rules and Regulations and the Board. Here is an introduction to these two processes.

Statutes:

- Statutes are legislation that has been passed and signed into law by the Legislature and Governor
- May be new legislation of an amendment of a current statute
- The Legislature or Board decides revision language for an existing statute or language for a new statute
- KSBN or someone requests an introduction of a bill that will contain the language needed and a Legislator introduces the bill into either the House of Representatives or the Senate
- The bill is assigned to a legislative committee, if approved by the Committee Chair
 - In the House health bills are often assigned to the Health and Human Services Committee
 - In the Senate health bills are often assigned to the Public Health and Welfare Committee
- The bill is given a hearing in the committee, which consists of testimony given by interested parties
- The bill is worked by the committee, which consists of committee discussion and vote to move the bill favorably out of committee, or no action is taken on the bill. The committee also can amend the bill before the bill is moved out of committee.
- The bill is put on the calendar to be worked in the full chamber and may be passed out of the chamber
- The bill then starts the same process in the other chamber
- After the bill passes both chambers, it is sent to the Governor for signature
- The governor can veto or sign the bill
- If vetoed, the Legislature can override the veto with enough votes

- If signed, the bill has an effective date on which it will be implemented
- When a statute is passed KSBN staff update the NPA on our website, put information on our website and publish the revisions in the next newsletter

Regulations:

- Appropriate KSBN committee agrees upon language for the revision of an existing regulation or language for a new regulation
- Board members agree upon proposed changes
- Proposed changes reviewed and approved by Department of Administration, Attorney General and Division of Budget
- Published in Kansas Register with 60-day period for public comments and public hearing date
- Notice of 60-day comment period and public hearing date placed on KSBN website
- Presentation to Joint Committee on Administrative Rules and Regulations of proposed revisions when scheduled
- Public hearing held
- All comments received are reviewed by the Board members
- Board members vote to adopt, make more revisions, or make no changes to the regulation
- The regulation changes if adopted are published in the Kansas Register
- Regulation changes are effective 15 days after publication in the Kansas Register

It is important to remember that KSBN is committed to implantation of the KNPA as defined in legislation, in partnership with the executive, legislative and judicial branches of government defined by the Kansas and United States Constitutions. All regulations must be supported by an authorizing statute and must be in alignment and not contradict any other statutes.

View the Kansas Nurse Practice and Licensed Mental Health Technician Acts on the KSBN Website located at <https://ksbn.kansas.gov/npa/>. This page provides links to a PDF of the KNPA and to all Kansas Statutes and Regulations.

This article was written by Carol Moreland, MSN, RN, KSBN Executive Administrator.

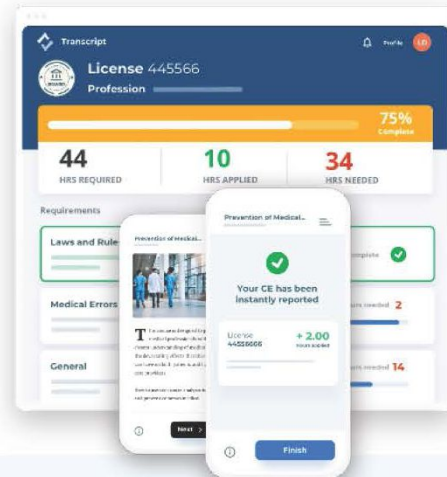


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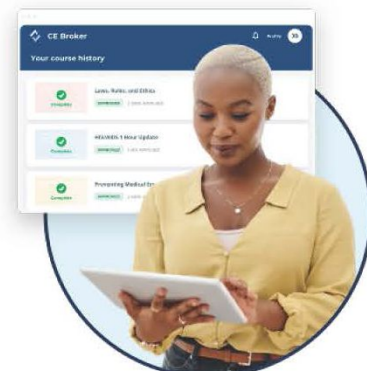
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KANSAS STATE BOARD OF NURSING

STRATEGIC PLAN

July 1, 2025 – June 30, 2028

Mission: The mission of the Board of Nursing is to protect and promote the welfare of the people of Kansas.

Vision: To uphold the highest standards and secure the public trust

Core Values:

- Integrity – We act with honesty, sincerity, and fairness
- Transparency – We promote open and effective communication through the ongoing interchange of ideas and information
- Respect – We understand each individual has an important role to play in achieving our goals
- Collaboration – We recognize the value of involving key stakeholders in the decision-making process
- Growth – We support continuous learning to advance individual and organizational development

Priority #1: Promoting Nursing and Allied Health Standards; safe nursing through education, licensure, and regulation

Strategic Objectives

1. **Enhance collaborative relationships with other nursing and health-related organizations and other state agencies in Kansas**

OUTCOME MEASURES

- a. Strategically identify, strengthen, and prioritize partnerships in nursing regulation
- b. Communicate updates and changes and share reliable and valid data re: nursing licensure and education from KSBN to other nursing and health-related recipients of data
- c. Establish links on the website to the KSBN newsletter, updates, and proposed changes to regulations and Nurse Licensure Compact (NLC) information
- d. Develop methods and metrics in which information about the agency could be marketed to consumers, which will increase stakeholder knowledge of the board's work and positive impact on the citizens of Kansas
- e. Provide outreach education to the Kansas Hospital Association and its members regarding licensure, discipline, and other nursing-related regulatory topics as requested
- f. Expand engagement efforts: legislative, public/private, key systems, and the administration
- g. Communication and education re: e-Notify

2. **Systematic evaluation of advanced practice nursing**
OUTCOME MEASURES

- a. Continue with the five-year review of advanced practice statutes and regulations
- b. Review and monitor statutory changes for advanced practice nurses in Kansas
- c. Monitor the progress of the APRN consensus model and national progress of the APRN compact, and report back annually to the board or when changes occur
- d. Develop methodologies for Kansas APRN scope-of-practice questions

3. **Retain independent status of the Board of Nursing**
OUTCOME MEASURES

- a. Monitor legislation introduced during the legislative session
- b. Monitor performance metrics for the agency and adjust processes as needed to improve outcomes
- c. Promote the agency to consumers and key stakeholders
- d. Explore software or web-based services that could provide dashboard-style metrics regarding agency performance

4. **Legislative Engagement**
OUTCOME MEASURES

- a. Develop a legislative agenda
- b. Pursue strategic engagement through key partnerships and education campaign
- c. Consider structure and staffing to support these efforts

Priority #2: Fiscal and Human Resource Responsibilities

Strategic Objectives

1. **Develop succession plans for key board members and ensure orientation occurs for all board members that includes information about the responsibilities of serving as a board member to strengthen board governance and operations**

OUTCOME MEASURES

- a. Identify key board member positions that require a succession plan (officers and committee chairs)
- b. Develop succession plans for key board member positions identified
- c. Develop succession planning at the board and staff level
- d. Consider utilization of committees for pipelining
- e. Build stronger understanding and relationship with Governor's Appointments Office

- f. Develop onboarding process for board members
 - Complete orientation for each new board member before their first board meeting
 - Assign a board member mentor to each new board member
 - Offer the option of observing in the agency for board members
 - Develop an orientation evaluation that can be distributed to board members immediately after orientation, at six months, and one year
- g. Provide additional training for board members regarding board meeting information technology resources (perhaps a follow-up orientation meeting after the first board/committee meeting)
- h. Enhance and maximize effectiveness of committee and board meetings
- b. Provide education via newsletter and website with answers to common questions by identifying the reference in the Kansas Nursing Practice Act
- c. Standing agenda item on Practice Committee quarterly meetings to review the common questions and trends identified
- d. Research the process for other BONs in responding to practice related inquiries

5. **Enhance transparency and understanding of nursing education data by developing and disseminating accessible, evident-based insights and key outcome indicators that inform KSBN stakeholders and support improved educational outcomes and decision-making over the next three years.**

OUTCOME MEASURES:

- a. Launch an online dashboard of nursing education data by 4th quarter of year 1 to promote easy access to key data
- b. Conduct 3 – 4 stakeholder webinars/workshops (at least annually) focused on interpreting and applying the education data to assist with informed decision making
- c. Publish an enhanced annual nursing education outcomes report with trend analysis, starting in Year 1 and track views/downloads year-over-year

6. **Evaluate and address the implications of the Nurse Licensure compact on nursing education by analyzing workforce mobility trends and preparing nursing graduates for multistate practice readiness over next 3 years.**

OUTCOME MEASURES:

- a. Develop and launch an annual survey by end of Year 1 to assess recent graduates' awareness of multistate licensure opportunities and responsibilities
- b. Offer an annual opportunity for nursing faculty on the implications of the NLC and strategies for preparing students for multistate practice.

7. **Enhance services by offering quarterly education to long term CNE providers and IV Therapy providers to increase their knowledge on statutes and regulations and promote compliance**

OUTCOME MEASURES:

- a. Conduct a survey annually of the long term CNE providers and IV Therapy providers to understand their learning needs
- b. Trend the compliance with the requirements of 5-year renewal for long term CNE providers to assist in identifying educational needs
- c. Trend the compliance with the requirement of submission of an annual report and submitting an annual fee to assist in identifying educational needs

Priority #3: Enhance Services

Strategic Objectives

1. **Review and adjust areas within the licensing department that can be altered or changed to maximize the performance of staff and to increase efficiency**

OUTCOME MEASURES:

- a. Monitor the trend of performance metrics of the licensing department and identify factors that may be affecting changes in the metrics
- b. Develop and offer a customer service survey that is available for election completion and submission. Monitor results and identify areas in which the staff can make changes and increase efficiency

2. **To increase communication between departments within the agency so that the application/licensure process remains seamless**

OUTCOME MEASURES:

- a. Add communication among departments within the agency as a standing agenda item on Leadership Team meetings
- b. Ensure all departments within the agency are consulted before changes are made to understand the impact on all departments

3. **Review disciplinary outcomes as determined by the Investigative Committee/Board against violations alleged to develop Sanction Reference Guide.**

OUTCOME MEASURES:

- a. Trend disciplinary outcomes as determined by the Investigative Committee/Board against violations alleged
- b. Research the practice of other BONs nationally as to their practice with sanction reference guides

4. **The Investigative division staff will work collectively with agency IT, general counsel and Executive Administrator to enhance means to respond to practice related inquiries.**

OUTCOME MEASURES:

- a. Record and trend the practice related inquiries the agency receives

The Strategic Importance of the Regulation of Nursing Practice

The School House Rock video “I’m just a bill” depicts the process by which law is made. Law, however, is not made in 3 minutes and 3 seconds, as found on YouTube. To change law is another lengthy process summarized on page 10 of this publication that requires a concern to be presented, research regarding the concern, and then education to determine what/how and if changes are needed. The Kansas Nurse Practice Act is comprised of both Statutes (K.S.A.) and Regulations (K.A.R.). To change law is another lengthy process that requires a concern to be presented, research regarding the concern, and then education to determine what/how and if changes are needed.

With a renewed mission to protect and promote the welfare of the people of Kansas, the Kansas State Board of Nursing (KSBN) is reminded of the four pillars of the practice of professional and practical nursing identified in the KSBN Seal: Legislation, Education, Licensure, and Discipline.

One of the strategic functions of the Board is to lead and manage nursing regulation in partnership with the Kansas executive, legislature and judicial branches of government as defined by the Constitution of the State of Kansas. The intent of this function is to create a healthy balance between individuals working in the nursing profession, and other members of the Kansas healthcare regulation community; with an unwavering commitment to protecting and promoting the welfare of the people served by people practicing nursing in Kansas. This is accomplished through the implementation and enforcement of Kansas statutes and regulations established in the Kansas Nurse Practice Act (KNPA) as the standards for professional and practical nursing practice, education, licensure, and discipline.

The truth is everyone in Kansas has an important role to play in the future of the health and welfare of Kansas; however, healthcare providers are a critical part of the system. The number of licensed healthcare providers in our healthcare system tells the story. For every 1 doctor licensed in Kansas there are 6.5 nurses, 1.5 pharmacists or pharmacy technicians, 0.5 dentists or dental hygienists, 0.2 social workers, and 0.2 physical therapists. In short, licensed nurses make up most healthcare providers in Kansas. Nurses are working in various employment sectors. The Bureau of Labor Statistics in 2024 indicates that over 60% of RNs work at the bedside in hospitals. Other work settings include education, informatics, legal, consulting, case management, public health, government, insurance, pharmaceutical companies, policy, schools, research, and administration. (nurse journal staff, 2021). The practice of nursing has evolved significantly since

Florence Nightingale to include non-bedside jobs, that still rely on the nurses’ skills, education, training, and experience.

So how is the “practice of nursing” defined in the Kansas healthcare regulatory system? The KNPA has both statutes and regulations that address this question.

K.S.A. 65-1113. Definitions. (d) Practice of Nursing.

(1) The practice of professional nursing as performed by a registered professional nurse (R.N.) for compensation or gratuitously, ..., means the process in which substantial specialized knowledge derived from the biological, physical, and behavioral sciences is applied to:

- the care, diagnosis, treatment, counsel and health teaching of people who are experiencing changes in the normal health processes or who require assistance in the maintenance of health or the prevention or management of illness, injury or infirmity;
- administration, supervision or teaching of the process as defined in this section; and
- the execution of the medical regimen as prescribed by a person licensed to practice medicine and surgery or a person licensed to practice dentistry.

(2) **The practice of nursing as a licensed practical nurse** (L.P.N.) means the performance for compensation or gratuitously, except as permitted by K.S.A. 65-1124, and any amendments thereto, of tasks and responsibilities defined in paragraph (1), which tasks and responsibilities are based on acceptable educational preparation within the framework of supportive and restorative care under the direction of a registered professional nurse, a person licensed to practice medicine and surgery or a person licensed to practice dentistry.

K.A.R. 60-3-109a. Standards of Practice

(a) Each registered professional nurse shall be familiar with the Kansas nurse practice act, the standards of practice of the profession and the code of ethics for professional nurses.

(b) Each licensed practical nurse shall be familiar with the Kansas nurse practice act, the standards of practice and the code of ethics for practical nurses.

In the healthcare system of Kansas nurses are the health information and communication system between individuals needing healthcare and other healthcare providers and resources. A nurse does not need to be paid to be “practicing nursing” or to do nursing education of family, friends, co-workers or neighbors on health issues. Nurses talk with people (physically or in person) in their home, school, church, work, and in the neighborhood grocery store. Nurses talk

with people telephonically or on the phone in Kansas and in other states or countries. Nurses listen (physically or telephonically) to how people might need medical care, or how they are responding to treatment. All of this might be the practice of nursing in Kansas or in another state.

What is the meaning of the K.S.A. 65-1166. Nurse Licensure Compact (NLC) on the Practice of Nursing in Kansas?

In 2019, the Kansas legislature passed and the Governor signed into law the Nurse Licensure Compact or K.S.A. 65-1166, to align Kansas licensing standards with other NLC states,

The NLC also enables nurses, who hold a Multi-State License, to provide nursing services to patients located across the country without having to obtain additional licenses. In the event of a disaster, nurses from multiple states can easily respond to supply vital services. Additionally, almost every nurse, including primary care nurses, case managers, transport nurses, school and hospice nurses, among many others, needs to routinely cross state boundaries to provide the public with access to nursing services, and a home state multistate license with a "Privilege to Practice" in other NLC host states facilitates this process.

As demonstrated on the NLC Map a RN or LPN with a Multistate License in Kansas is has the "Privilege to Practice" nursing in the 43 states and the same is true in Kansas for any nurse with a RN or LPN multistate license in any of the other 43 NLC states has the "Privilege to Practice" in Kansas.

This article was written by Linda Davies, MSN, BSN, RN, KSBN Practice Specialist and assisted by Andy Martin, MA, MHSA, JD, KSBN Public Information Officer.

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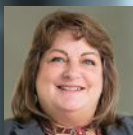
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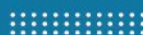


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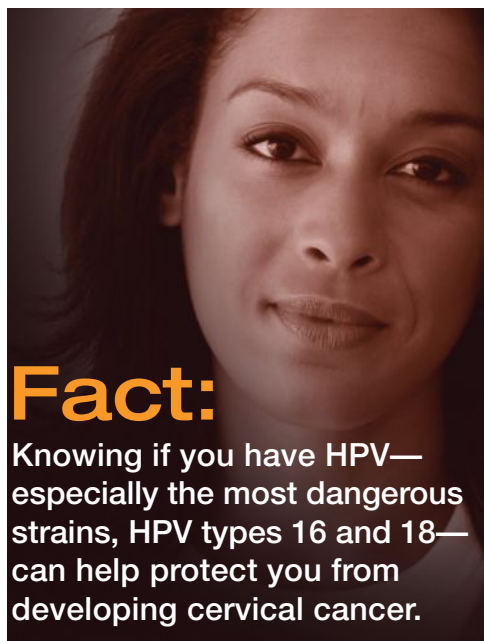
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The Art of Asking Questions

FAQs

Practice Corner

Kansas Law prohibits the Kansas State Board of Nursing ("KSBN") staff from providing legal advice to members of the public. KSBN staff may provide references to the Kansas Nurse Practice Act, which is available online at <https://ksbn.kansas.gov/npa/>. This assistance should not be taken as legal advice, or as a complete reference to all relevant laws or regulations governing a particular situation. Responses given by KSBN staff shall not be binding on the Board and should not be taken as an official KSBN decision. If you believe you need legal advice, you should consult, at your own expense, a licensed attorney.

How do I open a business? How do I close a business?

KSBN staff receive inquiries from nursing professionals and attorneys in Kansas asking for guidance in setting up or closing a business. KSBN staff have not authority to interpret the Kansas Nurse Practice Act, which is law. The KS Nurse Practice Act does not address this topic. However, KS Business One-Stop – website <https://ksbiz.kansas.gov/> might be of assistance to your inquiry.

Can KSBN answer Predetermine License Questions?

KSBN staff have no authority to predetermine licensure. KSBN staff cannot and do not advise on how to answer an application question. Please note that application questions may have changed. Determination of licensure is an authority granted only to the Board, and only after the application for licensure has been received. Please review the KSBN website as it pertains to legal history. <https://ksbn.kansas.gov/legal-background-info/>

Can KSBN Advocate for the Nursing Profession?

KSBN has no statutory authority to advocate on issues associated with or relating to the nursing profession. KSBN encourages nurses to get involved in their local and national associations and organizations: American Nurses Association (ANA), Kansas Nurse Association (KSNA), Kansas Association of Nurse Practitioner (KAPN), Kansas School Nurse Organization (KSNO), Kansas Organization of Nurse Leaders (KONL), etc. This list is not all inclusive as a licensee may have specialized training for which membership in certain associations and organizations may be open. KSBN has statutory authority to implement and enforce the Kansas statutes and regulations established in the Kansas Nurse Practice Act (KNPA) as the standards for professional and practical nursing practice, education, licensure, and discipline.

What is the meaning of a Kansas Nurse License Number?

Authorizing Statute is K.S.A. 65-1117 and K.A.R. 60-3-108 detail the expiration of a license number. But what do the numbers mean?

The first 2 digits reference license type: LPN, RN, APRN, RNA.

These are the most common:

23 = LPN by exam in KS

24 = LPN by endorsement in KS

13 = RN by exam in KS

14 = RN by endorsement in KS

53 = APRN by exam in KS

43 = RNA by exam in KS

The last 3 digits reference the licensee's birth month (01-12) and year of birth; odd (1) or even (2).

Example 1: license number is 13-111111-042.

This is an RN licensed by exam in KS, that expires in April of every even year.

Example 2: license number is 53-111111-121

This is an APRN licensed in KS that expires in December of every odd year.

Example 3: license number is 24-111111-112

This is an LPN licensed in KS by endorsement into KS that expires in November of every even year.

How can this information be used to PREVENT hiring an IMPOSTER?

An Employer or anyone concerned can compare the last three digits of the license number to the nurse's date of birth on government issued ID (i.e., driver's license). If birth month (01-12) and year of birth (1 or 2) do not match there might be a concern of fraud or nurse impersonation.

This article was written by Linda Davies, MSN, BSN, RN, KSBN Practice Specialist, and Andy Martin, MA, MHSA, JD, KSBN Public Information Officer

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“My Reason Why” Celebrating School Nurses

KSBN staff attended and hosted an exhibitor table at the 36th Annual Statewide Summer Conference for Kansas School Nurses in July 2025 in Wichita, KS. The theme was “*Navigating School Nurse Practice – Toward Brighter Futures*”. Objectives of the conference that resonated for why KSBN chose to attend included 1) locate laws and standards impacting school health programs and the school nurse; and 2) define delegation and implications to nursing practice in the school setting. The KSBN staff at the exhibitor table met a lot of passionate school nurses, listened to current practice concerns, made available information on NURSYS eNotify, Delegation of Tasks, and pamphlets on Mental Health.

In an age where nursing workforce can move between, in and out of the nursing profession, coupled with the ever changing landscape of laws, policies, budgets that affect this movement, the question was posed to those attending as to *why they chose school nursing, and specifically why they stay?* The KSBN staff asked for comment only, not identifying information. Not everyone who stopped at the exhibit table completed the drop off card, but many took them so they could think about their *why*. The comments left on the cards were not surprising, rather there was an unexpected contender for the #1 reason why school nurses choose to be school nurses. The general themes for the reasons given centered on kids, family/home life, and

advocacy/passion. Who knew there would be a tie for the #1 “why”. Not surprising the lead comments centered on “for the love of kids!” Endearing comments included “can’t walk down the hallway without getting a hug!” and another stated “I want to work with patients that ask me what my fourth favorite color is!”.

The second contender for the #1 reason nurses choose school nursing is not because of the summer breaks and improved home life schedule. That might influence a nurse to take a position, but that was not a contender for a top spot at all. The tie belongs to the fact that they (school nurse) are passionate about advocating for the kids and families they serve. They want a better environment, they want to ensure kids are healthy to learn, to serve the community as a whole, they believe students need all the support they can get to make it through school, and they want to assist children excel and learn to speak out. One comment sums it up “because children deserve a VOICE!”

Kudos to the School Nurses in the State of Kansas! Your heart is in the right place. Kids are the future and deserve a solid foundation from which to grow. Thank you for your service.

This article was written by Linda Davies, MSN, BSN, RN, KSBN Practice Specialist



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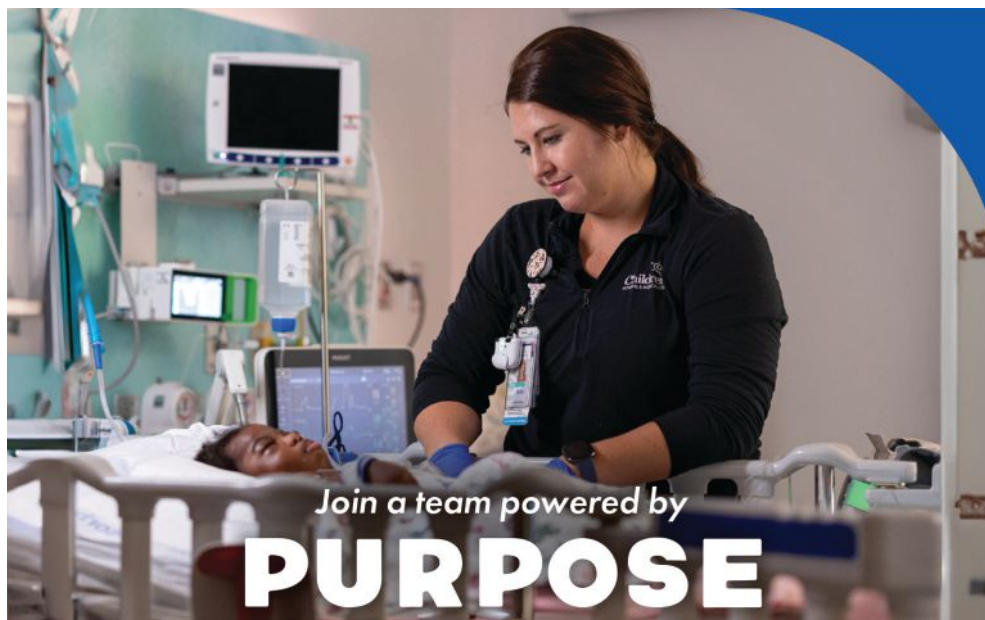
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Strategic Healthcare Regulation Leaders in Kansas - Nurse Education Program Administrators

There is an argument that one of the most strategically important roles in the Kansas healthcare delivery system is the healthy development of new nurses through the institutions of higher learning who have agreed to take up the responsibility of recruiting, training, educating, mentoring and ultimately evaluating if a person is ready to take a national licensure exam and be licensed by the Kansas State Board of Nursing (KSBN) as defined by the Kansas Nurse Practice Act (KNPA).

The Board currently approves 66 pre-licensure programs (43 institutions) that include: baccalaureate degree-nursing programs; associate degree programs, and practical nursing programs; there are also 15 approved graduate nurse programs (8 schools) that include: nurse practitioner, nurse midwife, and registered nurse anesthetist for a total of 81 programs approved by the Board. KSBN is grateful to the nurse educators who over the past 100 years have facilitated the learning of thousands of nurses. The purpose of this article is to recognize the 81 hidden heroes of nurse regulation in the State of Kansas; the Nursing Education Program Administrator as defined in the Kansas Nurse Practice Act (KNPA).

Qualifications for a Program Administrator. In addition to being a licensed nurse in good standing in Kansas, one of the first and for most General Responsibilities of a Program Administrator or Director (in cooperation with the faculty of the program) is to comply with the KNPA. Administrators and directors must be knowledgeable about KNPA and to ensure that the faculty members are also knowledgeable about and follow the KNPA requirements for “nursing practice” as defined in K.S.A. 65-1113 (d) and summarized in another article in this newsletter. This is no small or easy task.

K.A.R. 60-1-104(s) created by the KSBN states “Nursing program administrator” must be an individual with successful experience in administration or teaching nursing and with a graduate degree in nursing. However, an individual with successful experience in administration or teaching whose graduate degree is not in nursing and was conferred on or before July 1, 1999, is acceptable. Administrators have the primary responsibility and must dedicate time for effective

and continuous oversight of a nursing program, including the following:

- (1) verification that the nursing program complies with the nursing act and the board’s regulations;
- (2) assurance that nursing program and educational outcomes are met;
- (3) assessment of and recommendations for material, human, and clinical resources for effective nursing program implementation;
- (4) collaboration with faculty for continuous nursing program improvement; and
- (5) responsibility for the development and implementation of the nursing program.

Orientation of Faculty and Preceptors Recruited. As defined in K.A.R. 60-2-102 a Program Administrator is responsible for documenting that their nursing education institution implements the following:

- Orientation plan for new faculty (all)
- Mentoring plan for new faculty – administrative and teaching responsibilities
- Curriculum is current and being evaluated continuously
- Testing process/policy in place, with testing analysis
- Nursing Faculty Handbook and Nursing Student Handbook are current and contain all required policies

As noted in another article in this issue of the Kansas Nursing News K.A.R. 60-2-103 (2) & (3) defines the important role of the Program Administrator in overseeing Preceptors. This includes documentation that Preceptors meet program requirements, have a written plan for how preceptors are selected and documents completion of a preceptor orientation.

Clinical Resources and Nursing Curriculum. To have a KSBN approved nursing education program, a Program Administrator must be able to demonstrate that the clinical resources required by K.A.R. 60-2-105 include:

- Clinical contracts that are current and signed
- Observational experiences – no more than 15% of hours for any one course

- Precepted experiences – no more than 20% of clinical hours of the total clinical hours in the nursing program (excludes capstone)
- Simulation – no more than 50% of clinical hours for any one course
- Program Approval by KSBN and/or another accrediting agency

Perhaps the most daunting and overwhelming expectation of a nursing education program administrator is the oversight and approval of all the curriculum used by faculty as required in K.A.R. 60-2-104. This includes:

- Direct clinical instruction as an integral part of the program
- Didactic content and clinical experience to meet objectives
- Oversee development and implementation of a written plan that: provides evidence of program evaluation and effectiveness, and is used for ongoing program improvement

Nursing Regulation and Accreditation. It is noted that as defined in K.S.A 65-1119 (g) (1-3) Schools of nursing which have received accreditation from a board recognized national nursing accreditation agency can file all reports from the accreditation agency and any notice of any change in school accreditation status. The board may grant approval based upon evidence of such accreditation. However, schools of nursing holding approval based upon national accreditation are also responsible for complying with all other requirements as determined by rules and regulations of the board. The board may grant approval to a school of nursing with national accreditation for a continuing period not to exceed 10 years.

KSBN has:

- 24 Practical Nurse level programs - none are accredited at this time.
- 24 ADN programs - all but 2 are accredited
- 18 BSN programs are or are pursuing accreditation.
- All 8 of our schools with graduate programs are accredited

The bottom line is that there are 81 nursing programs with masters or doctoral prepared nursing education program administrators in Kansas who are leading 350 nursing faculty in facilitating the healthy, effective and efficient learning of the 1,800 potential RNs and 700 potential LPNs each year. Every ten years these schools add an estimated 25,000 potential new nurses to the healthcare industry in Kansas and other

states make up a third of the nurses licensed in the State of Kansas every year.

Thank you, Nursing Education Program Administrators, for all you do for the health and welfare of the people of Kansas.

This article was written by Janelle Martin, RN, BSN, MHSA, KSBN Nursing Education Program Compliance Officer.

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The Future of Nursing Education: Qualified Faculty and Instructors

The Kansas State Board of Nursing (KSBN) 2023 to 2024 Nursing Education Annual Report summarized data from 66 pre-licensure programs (43 institutions) that include: baccalaureate degree-nursing programs; associate degree programs, and practical nursing programs; and 15 approved graduate nurse programs (7 schools).

This Annual Report documented that these schools had been approved to admit 5,572 people as nursing students in Kansas. Schools reported that they were able to find and admit 4,381 qualified applicants based on the KNPA and individual school admission policies. This demonstrates that Kansas schools of nursing were able to find qualified students who not only meet qualifications for admission but are predicted to be successful in completing their education and becoming a licensed nurse in Kansas to fill seventy-nine percent (79%) of the potential nursing career and learning opportunities.

One of the hidden issues in this nursing profession development process is that each of these schools still need to have qualified and experienced faculty to provide the didactic classroom education and hands-on clinical training needed as defined by the KNPA.

The KSBN 2024 Nursing Education Annual Report documented that for the 2023-2024 school year there were 326 Nursing Instructors (Full-time, Adjunct, Part-time, Contract) educating nursing students. Based on numbers reported by nursing program administrators, only one-third of these instructors were able to meet all the basic minimum statutory and regulatory expectations for being a nurse educator in Kansas. The KNPA provides two different processes to help schools to manage this administrative and educational challenge and still be fully compliant with KNPA faculty expectations.

One option is for schools to recruit, hire, train and mentor nurses who are willing to pursue additional education to become masters prepared nurses who would then qualify per regulation to teach in professional nursing programs (associate and bachelor's degree programs). In 2024, 80 instructors agreed to this alternative by agreeing to a Faculty Degree Plan for a graduate program and approval by the Education Committee

of the KSBN as defined by K.A.R. 60-2-103 (b)(ii). This data suggests that almost 25% of all instructors are teaching under a Degree Plan and are committed to completing additional education to be qualified to teach nursing in Kansas within the next five years.

The other option is for nursing schools to recruit and hire experienced nurses and submit a Hire Exception to KSBN that explains why they do not have a qualified applicant, rational for the need to hire this applicant, what the qualifications are for this recruit to teach, and what they are doing to find qualified faculty as defined by K.A.R. 60-2-103 (c)(2). In 2024 schools of nursing submitted Hire Exceptions for 125 instructors. This suggests that almost 40% of nursing instructors were teaching under a Hire Exception. Further, it can be argued that 63% of the nursing instructors in Kansas during the 2023-24 academic year, did not meet the initial requirements for faculty as defined in Regulation; however, with the additional regulations allowing for degree plans and exceptions, schools were able to have the faculty needed to educate students in Kansas nursing programs.

Become a Preceptor of Nursing Practice in Kansas

There is an argument that one of the most overwhelming and daunting challenges for the Kansas healthcare delivery system is the cultivation and development of new nursing instructors. As defined in K.A.R. 60-2-102 a Program Administrator is responsible for recruiting, hiring and orienting nurse instructors.

Just like any leadership development process the ability to identify, inform, invite, involve and allow them to invest in becoming qualified and competent to take actions they are motivated in, believe in, and value is easy. One of the most accessible and basic recruiting opportunities for potential and future nurse educators is to find nurses who might be interested in becoming a nurse preceptor.

K.A.R. 60-1-104 (t) defines "Preceptor" to mean "a registered professional nurse who is not employed by the nursing education program but who provides clinical supervision for nursing students in nursing courses taken during the nursing education program. Nothing in this definition shall be

construed to prohibit any contracted affiliating agency's registered professional nurses from assisting with clinical activities selected by the nursing education program faculty. The program faculty shall not be required to be in the affiliating agency's facilities but shall be immediately available by telephone."

As noted in another article in this issue of the Kansas Nursing News K.A.R. 60-2-103 (a) (2) and (3) for professional nurse programs, and K.A.R. 60-2-103 (b) (2) and (3) for Practical nurse programs define the important functions of the Program Administrator in overseeing Preceptors. In short, both RN and PN preceptors must be licensed as an RN in Kansas and have completed a preceptor orientation. Being a preceptor with a school of nursing provides a framework and support for exploring what it might be like to be a nursing instructor through "clinical supervision." Not all schools choose to use preceptors as a resource for learning about nursing practice. However, becoming a preceptor can provide an excellent career development opportunity for an interested and qualified professional nurse. Preceptor requirements provide a pathway for career development. Functioning as a Preceptor is an option for evaluating if a nurse would like to become an adjunct part-time clinical instructor and explore the educational requirements and expectations needed to become a part-time or full-time nursing instructor.

The need for qualified and experienced nursing faculty and instructors is significant and the opportunity for growth and development of nursing and the welfare of Kansas is great. Please contact your local nursing school to learn more about how to become a RN or PN nursing preceptor.

This article was written by Janelle Martin, RN, BSN, MHSA, KSBN Nursing Education Program Compliance Officer, assisted by Andy Martin, MA, MHSA, JD, KSBN Public Information Officer



Hiring Nursing Faculty Ottawa, KS

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Kansas State Board of Nursing

March 26, 2025

Committee Reports:

Education Committee Report:

Approved from the Consent Item Agenda

- Nursing Education Staff Report
- 2025 Nursing Education Program Site Visit schedule
- Petition Summary to test for nursing licensure in Kansas 11/16/24 through 2/21/25
- Draft Regulation Review Approval K.A.R. 60-17-106, 60-17-107, 60-17-108, 60-17-109, 60-17-110 and 60-17-111.

Accept the initial site visit report with recommendations for Washburn Tech, ADN program with a follow-up site visit to be done after the first graduation.

Accept the reapproval site visit report with recommendations for Hutchinson Community College, ADN program for the time period of national accreditation and PN program and reapprove for five years.

Approve the unscheduled site visit report for Donnelly College, and to place both RN and PN programs on conditional approval, and cease admissions for at least six months, with a site visit to be done before re-starting admissions.

Approve the Major Curriculum Change Request from

- Pittsburg State University BSN program, to increase the number of yearly admission seats from 95 students to 120.
- University of Kansas, BSN program to:
 - Increase admissions from 150 per year to 240 per year in the traditional undergraduate program on the Kansas City campus.
 - Allow NURS 327, 334, 471, 476 and 478 in either in-person or hybrid modality.
 - Change the clinical hour to credit hour ratio from 4:1 to 3:1 resulting in the reduction of the programs overall clinical hours from 720 to 540.
- Cloud County Community College, ADN program to:
 - Allow bilevel designation for the ADN program permitting students to sit for the NCLEX-PN after completion of the first year of the program
 - Continuing program enrollment with up to 100 admissions annually for 1st and 2nd year
 - Approve the initial application for a PN program and approve admissions to start Fall 2025 with a site visit to be done prior to full approval of the PN level as a program approved for NCLEX-PN applicants.
- Manhattan Area Technical College, ADN program, to eliminate NUR 201 and change NUR 220 (Nursing Across the Lifespan) to NUR 221 (Nursing Access the Lifespan) and increase the course credit hours from 10 to 12 credit hours.
- Kansas Wesleyan University, BSN program to change the delivery method of NURS 250, Introduction to Professional Nursing, from online to hybrid option.
- University of Saint Mary, BSN program to:
 - Increase the credit hour of NU (AT) 325 from 5 credit hours to 6 credit hours
 - Reduce the credit hour of NU (AT) 305 from 5 credit hours to 4 credit hours

Approve the use of the Occupational English Test (OET) as an approved English Language Proficiency test for Internationally Educated Nurses seeking Kansas licensure to include the HRSA standards (reading, writing, listening at 6.5 and speaking at 7.0).

Approve International Education Evaluations (IEE) request to be added as an approved credentials evaluation provider for internationally educated applicants seeking Kansas licensure.

Reapprove the Graduate APRN Programs on Full Approval Status from January 1st, 2025, through December 31st, 2026.

Approve a cohort of 20 for Fort Scott Community College, ADN program for Fall 2025 with a site visit to be done after completing all recommendations.

Investigative Committee Report: The Investigative Committee report was accepted by the consensus of the Board.

CNE/IV Therapy Report: Approved the Consent Item Agenda which includes:

- IOA Statistical Report
- Single Providers Approved 8/24 – 03/25
- Provider Relinquishments
- K.A.R. 60-12-104, 60-12-105 and 60-12-106 Final Comment Review.

Approve the Long-Term Provider 5-Year Renewal Application from

- Professional Continuing Education, LT0053-0949.
- Advent Health Ottawa, LT0055-0905.
- Blue Valley School District, LT0174-0261 once appropriate bibliography information is received.
- Kansas City Chapter NAPNAP, LT0203-0505 and from Susan B. Allen Memorial Hospital, LT0075-0905 once appropriate sample certificate and roster are received.
- Nursing CE Central, Soma Therapy and LaVeta Jarrett, and Tri State Academy.

APRN Committee Report: A. Hite, vice-chairperson, gave the APRN Committee report. (See Committee Report) The APRN Committee report was accepted by the consensus of the Board.

Approve the Consent Item Agenda APRN Programs approved for Licensure

Practice Committee Report: Draft Regulation Review Approval: K.A.R. 60-7-101, K.A.R. 60-7-102, K.A.R. 60-7-103, K.A.R. 60-7-104, K.A.R. 60-7-105, K.A.R. 60-7-108, K.A.R. 60-7-109, K.A.R. 60-7-110, K.A.R. 60-7-111.

Finance Committee Report: The Finance Committee report was accepted by consensus of the Board.

Renamed the Finance Committee to Finance and Risk Management Committee and further recommend that the full Board modify the Articles of Incorporation to include the new duties and responsibilities of this committee as proposed by management.

There were three Executive Sessions: Pursuant to K.S.A. 75-4319(b) (2), it was moved that the Board recess into executive session for 30 minutes and reconvene at 11:40 p.m. The remote meeting will

continued on page 28

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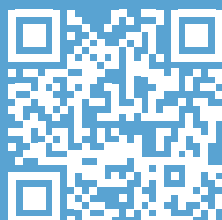
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continued from page 26

be reconvened by Zoom and in Room 509, Landon State Office Building, 900 SW Jackson, Topeka, Kansas 66612 as stated in the notice of the meeting that was sent to individuals who requested the notice and as published on the Board's website at: www.ksbn.kansas.gov.

Board designated and delegated to the Chair of the Investigative Committee the Board's authority to:

1. Make a reasonable grounds determination pursuant to K.S.A. 65-1120(b), and amendments thereto, of the Kansas Nurse Practice Act regarding matters that have been recommended for emergency proceedings by disciplinary counsel.
2. Act as Presiding Officer pursuant to K.S.A. 77-514(g) and 77-551(a) and (c) and amendments thereto, of the Kansas

Administrative Procedures Act, to review, decide issue and amend any orders on all matters that have been investigated for any alleged violation of or compliance with the Kansas Nurse Practice Act or regulations adopted thereunder and has been recommended for emergency proceedings by counsel, including.

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Name	City, State, Zip	License #	Case #	Effective Date	Outcome
Jennifer Hale	Columbus, KS 66725	13-86418-102	2025-261-0	5/20/2025	Fine, CNE
Stacy Gillen	Wichita, KS 67217	23-43155-071	2024-176-5	5/27/2025	Revoked
Martin Koehn	Topeka, KS 66609	23-28732-122	2025-200-0	5/28/2025	Fine, CNE
Tammy Alderdice	Hutchinson, KS 67502	13-73228-041	2024-695-0	5/28/2025	Fine
Joseph Woods	Salina, KS 67401	23-55087-051	2024-580-0	5/28/2025	Suspended
Kandis Attwood	Hays, KS 67601	13-151585-022	2025-95-0	5/28/2025	Suspended
Jeremy Spillman	Mission, KS 66205	23-31002-112	2023-683-7, 2025-88-0	6/4/2025	Suspended
Stacy Schaefer	Topeka, KS 66618	23-29034-012	2020-703-8, 2022-407-8, 2023-103-8, 2024-103-8	6/9/2025	Revoked
Rachel Snyder	Stockton, KS 67669	13-124333-012	2023-632-0	6/10/2025	Suspended
Shannon Henderson	Independence, MO 64052	13-151369-092	2023-21-7	6/11/2025	Suspended
Rhiannon Speers	Osage City, KS 66523	24-48304-112	2022-49-8, 2024-889-0	6/11/2025	Suspended
Gretchen Hunt	Salina, KS 67401	13-98424-041	2024-225-3, 2025-117-0	6/16/2025	Fine, CNE's
Kimberly Winkley	Raymore, MO 64083	14-99813-032, 53-46168-032	2024-581-0	6/17/2025	CNE
Rachel Holthaus	Topeka, KS 66604	13-85582-062	2023-277-8	6/18/2025	Suspended, Fine, CNE
Benedict Isidro	Merriam, KS 66202	14-116466-122	2024-668-0	6/23/2025	Suspended
Becky Howerton	Highland, KS 66035	23-26116-111	2024-667-0	6/27/2025	Suspended
Rachelle Karol	Bel Aire, KS 67220	13-140932-012	2021-37-0, 2022-251-5, 2022-609-5, 2023-874-5, 2024-628-5, 2025-168-5	7/1/2025	Revoked
Wayne Russell	Columbia, MO 65202	24-18953-062	2022-125-0	7/1/2025	Denied
Amy Hoover	Lawrence, KS 66049	13-103435-012	2021-519-8, 2023-670-7	7/1/2025	Suspended, Limited
Angela Crawford	Kansas City, MO 64012	14-134414-082	2024-253-0	7/2/2025	Fine, CNE
Michaela Cigainero	Chanute, KS 66720	13-132701-041	2025-349-0	7/3/2025	Fine, CNE
Joshua Conner	Canon City, CO 81212	24-44288-062	2024-909-0	7/9/2025	Fine, CNE
Haley Nelson	Salina, KS 67401	13-133557-071, 23-46164-071	2024-386-9, 2024-387-9, 2025-388-0	7/9/2025	Fine, CNE's
Alan Shanklin	Topeka, KS 66614	13-148811-041	2021-549-8	7/10/2025	Surrendered
Stephanie Sisk	Topeka, KS 66614	13-112043-011, 53-76421-011	2025-154-0	7/14/2025	Fine, CNE
Bradley Young	Garland, KS 66741	14-63550-071, 53-78117-071	2023-237-6	7/17/2025	Surrendered/Revoked
Mary Barba	Topeka, KS 66605	23-36338-082	2023-196-8	7/29/2025	Revoked
Angela Kahle	Oakley, KS 67748	13-91493-102	2025-89-0	8/1/2025	Fine, CNE
Mark Sandman	Leavenworth, KS 66048	13-114122-041	2023-425-7	8/1/2025	Limited, CNE's
Shanda Zimmerman	Wellington, KS 67152	13-115286-102	2025-367-0	8/1/2025	Suspended

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