NOTICE

The complaint form can be found at:
www.nh.gov/nursing
Click on: Enforcement

As of July 1, 2015, listing of board discipline can be found on the website under Enforcement.

NH Mount Adams Summit
The mission of the Board of Nursing is to safeguard life, health, and the public welfare of the people of this state and in order to protect the people of the state of New Hampshire from the unauthorized, unqualified and improper application of services by individuals in the practice of nursing.

**Board Members**

Nora Fortin, MSN, MSN, RNC-BC  
*Chairperson*

Kitty Kidder, APRN  
*Vice-Chairperson*

Tracey Collins, MSN, CNRN, NEA

Nancy Wiggin, RN, M.Ed, C.P.P.S, NHA

Sheri Palmieri, DNP, MBA, RN, CPHQ

Ann Finn-Waddell, LPN

Beth Fersch, LPN

Cynthia Smith, LNA

Bobbi Petrin, LNA

James Kuras, Public Member

Harley Featherston,  
*Public Member*

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**FROM THE EXECUTIVE DIRECTOR**  
by Denise Nies, MSN, RN, BC

I hope that everyone has stayed safe during this past challenging winter and are now enjoying the season of Spring!

As they say on CNN, “lots of news, so let’s get to it”!

**News on APRN practice**

The Prescription Drug Management Program is in full swing and has a required enrollment for all active NH licensees that have active DEA numbers and have the ability to prescribe controlled substances, II-IV. The date by which all current licensees have to be enrolled is June 30, 2015. The program provides providers with the ability to monitor their client’s prescriptions, which is considered an effective tool in preventing abuse of controlled substances. The PDM is housed under the Board of Pharmacy Statute and Rules. This requirement will be addressed in BON rules as well.

An APRN compact was approved on May 4, 2015 by the National Council of State Boards of Nursing and state boards of nursing who are interested in this model. The model has been discussed by the board and the members of the Liaison Committee and there is a general support for pursuing legislation for NH. This compact would be new to New Hampshire but would be the same model as the RN/LPN compact. If NH adopts the new APRN compact, licensees would have greater portability of practice across state lines to states who adopt the compact. We hope to introduce legislation for this in 2017 or 2018.

HB 483- Addresses the need for workforce data for NH providers. The legislation seeks to provide the BON with the ability to determine the process for accessing workforce data from licensees. This data would be tracked by the Rural Health Initiative under the DHHS. Currently workforce data is obtained from RN/LPN licensees during the license renewal process.

**Departures from the BON:**

Robert Duhaime, Karen Baranowski and Harley Featherston will be stepping away from very long tenures with the BON. Bob served as chair and Karen as co-chair and both are actively involved in nursing at the administrative level. Karen’s background in education provided needed perspective relating to educational programs. Both brought enormous experience and talent to the board. Harley is a public member and has provided an important perspective as someone benefitting from the practice of nursing. His input and passion for public safety will always be remembered. These board members were a valuable resource to me not only when I first began this role, but have continued to be a strong support. I will always appreciate their guidance, kindness and direction. They will be missed!

Nora Fortin and Kitty Kidder have volunteered to step up into the roles of Chair and Co-Chair. Both are experienced board members who possess the needed leadership to guide the board into the future. We are also excited that Beth Fersch, LPN has received Governor’s
You can contact Board Staff on line by clicking on their email address below.

**Board Staff**

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**License Clerk**

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Laurel A. O’Connor, Esq  
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laurel.o’connor@nh.doj.gov

Sarah Howlett, RN  
Paralegal  
sarah/howlett@nh.gov

approval for another 3 year rotation on the board. Beth provides excellent insight into nursing practice and has been extremely helpful on matters of adjudication.

**NEW BOARD MEMBERS:** Sheri Palmieri and Nancy Wiggins have been nominated and approved by the Governor and Council to replace Bob and Karen. We welcome them and their expertise on the board!

**News on RN/LPN practice:**

A new RN/LPN compact has also been approved by the National Council of State Boards of Nursing and state boards of nursing who are interested in this model. Because NH is currently a compact state, there is law and rules in place for the process. The new compact is designed to tighten up some of the regulations and clarify better processes for the compact. Legislation is planned for 2016 to “repeal” the current compact and “adopt” the new compact by no later than December 2018. There will be timeframe to allow for the switchover and licensees will be notified of the specifics once the legislation is approved.

Legislation- HB 484 was introduced to the legislation to allow medication administration by LNA’s in the home setting. The BON met with the proponents of this bill on many occasions to determine the final bill wording submission. Rules are now being formulated to address nurse delegation of this task and to address this process and the educational requirements. The delegation would be limited in scope and numbers of clients and would only be delegated instances where a person is unable to take their own scheduled medications. This legislation was brought forward in an attempt to address the needs of elders living in the community. The current MNA requirement for medication administration in the LTC setting is still appropriate and in place for medication administration for large numbers of clients.

Rules Revision is now in process for Nur 300, 600, 400, and 500. The current Rules can be accessed by licensees on our website at www.nh.gov/nursing and by clicking on Nurse Practice Act. Chapters 100-800 constitute the rules. The current Statutes are identified as RSA 326-B. Overall, the purpose of the revisions is delete information that is no longer appropriate, add information that is now appropriate, and address trends in nursing practice and nursing education. The chapters being submitted will be accessible on our homepage under announcements via a link that allows the public to review the chapters and the changes. Please watch the website between June and September for these proposals. A public meeting will also be held in August and that information will be available as well.

The Practice and Education Committee review of practice advisories is almost done! This committee has been tirelessly reviewing and researching clinical questions/advisories for the purpose of updating the material for posting on the website.

I thank this committee for their hard work and effort on the behalf of the BON and licensees in the state. The board office has been working with IT to create the web page required to post these advisories. The goal is to have that completed by later fall.
State Holidays Observed
2015
Independence Day         July 4, 2015
Labor Day                Sept 7, 2015
Veterans’ Day           Nov 11, 2015
Thanksgiving            Nov 26 and 27, 2015
Christmas Day            Dec 25, 2015

HELPFUL HINTS:
When calling the Board office, please be ready to provide your name, license number and remember to have a pen and paper ready to write down the information you may be seeking.

When registering to apply for an original license or renewing a license on line, make sure to write down and keep in a safe place, your user name and password. This information will be used at every renewal period.

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BOARD COMMITTEES

Practice & Education Committee
Tracey Collins MSN, CNRN, BC
Board Representative
Emily Roy, RN, MSN
Committee Chair
Rita Anger, RN, MSN, CHPN
Bette Ann Bogdan, RN, MSN
Deborah Cantlin, RN, BSN
Linda Compton, RN, BSN, MSHCA
Jacqueline McCourt, APRN
Paula Wellde, RN, MSN
Kathleen Cummings, RN, BSN
Amy Eilertsen, RN-BC, MN
Kimberly Coffey, RN, MSN
Nancy Diamond, RN, BS

Changes in the Board office professional staff:
This past year has brought some changes of staff. Lori Tetreault, RN, BSN provided the board with 5 years of hard work and expertise in her role as the LNA program specialist. We wish her well in her position as a DON.

Carol Brody, RN, MSN assumed the role of LNA program specialist in January and has already taken the lead on a number of project pertinent to LNA practice. Carol comes with a varied background of nursing expertise that includes most recently nursing education, and home care and hospice. She is very familiar with state regulations for facilities licensing where most LNA’s are employed. Her work with and oversight of LNA’s in the home care setting has provided much insight as the work on HB 484 rules continues. Her communication skills and experience as nursing faculty assist LNA’s with better understanding of their scope and education requirements. Her work and “can do” attitude is much appreciated!

HB 2 Board Consolidation:
This past legislative session introduced a bill from Governor Hassan that proposes a consolidation of licensing boards into one agency under HB 2. The licensing boards involved have moved from their previous addresses to the Philbrook Building in the fall of 2013. What this consolidation is intended to do is to create efficiencies in work processes and put all services needed in one building. The work of the board will go on as it always has. We hope that the consolidation will serve to strengthen the board’s resources and allow us to continue to provide a level of service expected by licensees. Please note that the board office is experiencing some retirements and medical leaves this spring/summer. We are working hard to replace positions as quickly as we can. Please bear with us through this time period!

Be Well and Practice Safely!

Denise

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Pictures of Board Members at the May 2015 Meeting
APRN Liaison Committee

Kathleen (Kitty) Kidder, APRN, (Board representative)

Sean Lyons, APRN
Chair

Dorothy Mullaney, APRN

Mary Sanford, APRN

Micheline Cignoli, APRN

Susan Barnes, APRN

Julie Buelte, CNM

Mark Vojtko, CRNA
FROM THE DESK OF PROGRAM SPECIALIST IV

ANITA PAVLIDIS, MS, RN

After a long cold winter we are finally seeing the promise of spring. Spring brings the renewal of hope and for the pre-licensure programs in the state, many new graduates eager to enter the world of nursing. The national agenda for the NCSBN continues to provide support and guidance to the NHBON as they deal with similar educational trends seen across the country.

A shortage of nursing faculty continues to be an area of concern with several states addressing the problem in a variety of ways. One state approves non-nurse faculty such as pharmacists to teach under the direction of a fully qualified nursing faculty, while several states are approving faculty in a graduate program if they have completed BSN equivalency which is conditional upon completion of a degree and another, attracted qualified faculty with a significant salary increase. The NHBON supports nursing advancement and temporarily approves graduates students who have completed a BSN equivalency contingent on degree completion.

Some states permit nursing students to sit for licensure prior to completing their degree program to promote early entry into practice. Texas allows high school schools to have dual enrollment in an associate degree program so they graduate from high school with an associate degree in nursing, ready to move into nursing.

The first NCSBN Distance Education virtual conference was held in April to discuss, among several issues, quality indicators for distance education programs. The NHBON is reviewing the information provided in the conference. Because the Board office receives numerous requests from both pre- and post- licensure programs to place students within the state for their clinical experiences these guidelines will be valuable in reviewing requests and responding to in state programs considering offering a distance education component.

While some states do have jurisdiction over programs beyond that leading to initial licensure, the NHBON does not. The NHBON has jurisdiction only over pre-licensure nursing programs licensed in NH that prepare graduates to take the initial LPN or RN licensure examination. The NHBON does not approve or disapprove graduate level nursing programs, in state or out of state, regardless of teaching methodologies used. Programs over which the NHBON does NOT have jurisdiction include: RN-BSN, masters, and doctoral programs. The only exceptions are direct entry masters or doctoral programs that lead to initial licensure.

The NHBON is not imposing restrictions on post licensure out of state nursing education programs. However, there are regulations in NH which require out of state institutions that conduct educational activities in NH that require a field experience (i.e. student clinical/practicum, student teaching, internship or externship) to be approved or licensure by the New Hampshire Department of Education/Division of Higher Education/Higher Education Commission.

This is a mandate from the New Hampshire Department of Education and not associated with the NH Board of Nursing. If the education program is truly 100% online degree program that does not require a field experience, students may enroll. When considering enrollment in ANY out of state nursing program with field requirements, individuals should check with the Commission to verify approval status by calling
On the local level, NH nursing programs are busy with a number of initiatives in addition to educating students. River Valley Community College (RVCC), Claremont, has achieved Candidacy status for accreditation and is moving forward in preparation for a site visit. Rivier University nursing department applied for and received a Health Resources and Services Administration (HRSA) Workforce Diversity Grant. Through grant funding, the nursing department presented a workshop hosted by Dr. Jeffries: Nursing Student Retention: Understanding the Process and Making a Difference.

Dr. Kathleen Patenaude, nursing faculty, presented at the Spring Spotlight on Scholarship in Nursing Practice: Exploring Cultural and Clinical Immersion Experience in Senegal, West Africa. Faculty from the majority of nursing programs and a representative from practice have been meeting to assist in development of a guidelines regarding simulation in education. The final draft is anticipated to be sent to the Board for their review this summer. This collaborative project is reflective of the talent and commitment to education within the state and will help address questions from nursing programs regarding this issue.

Melinda Luther, Nursing Director of Nashua Community College and Dr. Sherrie Palmieri, Chief Nurse Administrator, Nursing and Health Professions, COCE, Southern New Hampshire University has joined forces through the NH Action Coalition with the NHBON to aggregate and trend data on the NH nurse workforce. Dr. Pamela Dinapoli, University of New Hampshire (UNH) has provided assistance with aggregating data from the survey that is part of the licensee (RN & LPN) renewal process. This data is anonymous and will be valuable in further development of reports focusing on the current nursing workforce (education, employment, years as a nurse, additional degrees, etc.) and projection of future needs. It is anticipated that initial information regarding this project will be available by fall. Lastly, the Board will be holding a Day of Discussion, directed towards nursing education, on August 27. Further details will be located on the website this summer.

As the academic year comes to an end, best of luck to all new nursing graduates and may everyone in education enjoy a well-deserved rest this summer. Until the fall...

Practice and Education Committee
Linda Compton, BSN, RN, MSHCA

Volunteering to serve on the New Hampshire Board of Nursing Practice and Education Committee (NHBON P&E committee) is a very honorable experience. It allows me the opportunity, as a nursing professional of 35 years, to offer my expertise. This 12 member standing committee has been meeting monthly. We are currently working very diligently to update the clinical advisories, so as to reflect best practice. There are various specialty areas of nursing represented on the NHBON P & E committee. We discuss practice concerns and clinical practice questions that are referred to us by the board of nursing. The committee reviews research based literature and
Audit forms can be downloaded on the Board website www.nh.gov/nursing under the “Forms, Applications & Publications” navigation tab on the homepage.

Audits may be faxed or mailed to the Board office.

Out of State Applicants and Criminal Background Checks/Fingerprints

Applicants from outside of NH will be sent fingerprint cards and authorization forms. Those applicants are asked to either use law enforcement sites in their respective states or come to NH and use a NH law enforcement site. Please send all fingerprint cards, authorization forms and fees to the Board of Nursing. The board will then send them to the NH State Police for processing.

Please plan early for this process. We have advised that the results could take as long as 2 months in some cases.

You are encouraged to complete live scan fingerprinting. Some live scan sites are located on the Board’s website at http://www.nh.gov/nursing/documents/live_scan_list.doc

If you do not find a convenient live scan site please call the NH State Police Criminal Records.

takes into consideration the specialty areas standards of care and trends by other boards of nursing. We look at the challenges that all nursing specialty areas face when providing care in their respective working environment and how these challenges affect the scope of practice of all categories of licensees. After discussion about the resources and evidence based practice literature available, scope of practice, trends from other boards of nursing, and specialty group’s standard of care, we provide an answer to the question posed. We especially take into account the provision of best practice and safe nursing and nursing assistant care for NH citizens. The Board of Nursing reviews our committee’s recommendations, and renders an official opinion. Licensees are held responsible for practicing in accordance with all advisories issued by the Board of Nursing. Serving on the NHBON P & E committee with a group of amazing professional nursing colleagues is a very rewarding experience.

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Continued Education – Audit Reminder

To assure timely renewal of your license, if selected for audit please provide your continuing education/contact hours documentation on the Continuing Education/Contact Hour Audit Form.

Documentation received other than the Audit Form will be returned to the licensee which may cause a delay in license renewal.

If your renewal application and audit forms are not received on or before midnight of your birth date, you will be practicing without a valid license and will have to reinstate your license, and pay an administrative fee if practicing during license lapse.

On-line Licensing-Renewal Reminder

Before you can renew your license on-line you must receive your renewal notice from the Board of Nursing.

Once you receive your renewal notice you can renew your license on the Board website at www.nh.gov/nursing under the Online Licensing tab in the “Quick Links” box on the right hand side of the Home Page. Before you are able to renew your license you must register on the licensing site. You must obtain a registration code from the Board office prior to being able to register. Once you obtain your registration code you can then register. Registration includes setting up a User ID and Password. This user ID and password must be used each time you renew your license on-line. Be sure to write down your User ID and Password for future reference.

To obtain your registration code:
Email the Board office at boardquestions@nursing.state.nh.us.
Provide your full name, license number and date of birth.

Clinical Practice Inquiry

All practice inquiry questions must be submitted on the Clinical Practice Inquiry Form found on the Board website www.nh.gov/nursing under the “Forms” tab. All forms submitted must include the clinical significance of the question asked. Prior to sending inquiries to the BON, please review the clinical practice advisories and frequently asked questions to ensure that your question has not been previously answered by the Board. Forms may be mailed, faxed or emailed to the Board office.
### Working with an inactive license is a Class A Misdemeanor.

Beginning October 1, 2011 all licensees who have worked with an inactive license will be posted in the Board's quarterly Newsletter. Practicing without a license, including but not limited to the situation where a license has lapsed, is unlawful under New Hampshire law and constitutes a class A misdemeanor. RSA 326-B:41, II; RSA 326-B:41-a. Pursuant to RSA 326-B:22, II, “Any person licensed who intends to continue practicing as a nurse or nursing assistant shall: (a) By midnight on his or her date of birth in the renewal year submit a completed application and fees as established by the board.” “Failure to renew the license shall result in forfeiture of the ability to practice nursing or nursing activities in the state of New Hampshire.” RSA 326-B:22, III.

When a licensee telephones the Board or presents themselves at the Board office and discloses they have worked after the expiration date of their nursing/nursing assistant license they will be required to sign an Agreement and pay all reinstatement fees and fines before they are eligible to return to work. The Agreement states that the document must be shared with the employer.

Should the licensee practice nursing a second time on an inactive license, they will be notified that their action will be reviewed by the Board at its next meeting for Board action. The license will be reinstated pending Board action.

**Pursuant to RSA 326-B:37 V:** Every individual, agency, facility, institution, or organization that employs licensed nursing personnel within the state shall report to the board within 30 days any alleged violations of the Nurse Practice Act (RSA 316-B:37, RSA 326-B:41 and Nur 402.04(b).

**Reportable violations are cited in RSA 326-B:37 II, Nur 402.04 (b) and Nur 402.04 (c).**

Any alleged violation of the Nurse Practice Act reportable to Bureau of Adult and Elderly Services (BEAS) should also be reported to the Board of Nursing.

The complaint form and guidelines can be found on Board of Nursing website [www.nh.gov/nursing](http://www.nh.gov/nursing) under Enforcement.
LNA Corner…
by Carol Brody, MSN, RN
Hello and Happy Spring!

Welcome to Carol Brody, MSN, Ed, RN
Program Specialist IV
Please let me introduce myself to you as the New Hampshire Board of Nursing’s new Program Specialist IV with the responsibility for LNA/MNA educational programs. I am excited and feel honored to be part of a professional and supportive environment. My professional experiences over the past 25 years include being an entrepreneur in home care nursing, educational teaching in ADN and BSN programs, and legal nurse consulting serving as an expert witness on numerous occasions.

I thank you all in advance for your patience and consideration while I adjust to my new position and responsibilities. I welcome your phone calls and emails at any time. I may be reached at 603-271-8282 or via email, Carol.brody@nh.gov.

Kind regards to all,
Carol Brody, MSN, Ed, RN

LNA/MNA COORDINATORS’ and INSTRUCTORS’ MEETING – September 30, 2015 (9AM to 2PM)

The annual LNA/MNA meeting has been set for Wednesday, September 30, 2015. The meeting will take place in the Education Conference Room 100, 1st floor, Walker Building, 21 South Fruit Street, Concord, NH. An email message to all LNA and MNA Program Coordinators, nurse reviewers and instructors will be forthcoming with more information and a request for attendance response. Please save the date now and plan to attend this day of opportunity for Board updates and program networking. Please contact Carol Brody, MSN, Ed, RN Program Specialist with any questions or issues you would like to see on the agenda. (603) 271-8282 or email at Carol.brody@nh.gov.

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The Rewarding Challenge of Starting an MNA Program in Northern New Hampshire
By: Gail Minor-Babin RN, MEd, CMP, Associate Professor, WMCC

The scope of practice for the Medication Nurse Assistant is directed toward collaborating with the RN for the administration of medications to support stable individual’s responses to common well-defined health problems in the long-term care facility. The MNA performs these functions under the direct supervision of an RN.

Last spring, the White Mountains Community College developed a Medication Administration Nurse Assistant Education Program. The goal of our program is ‘To prepare competent MNA’s who will function in this role in a long-term care environment and adhere to the NH BON regulations for MNA medication administration.’ In doing so, MNA’s will assist the nurse as a valuable team member in the nursing process.

The application process was daunting at first. The state regulations are very specific and require exact policy and procedural documentation for every aspect of an MNA Program. I methodically worked through the process step by step, receiving encouraging support along the way from Lori Tetreault, BSN, RN, Program Specialist at the NH Board of Nursing. In June of 2014, our 120 page Medication Administration Nurse Assistant Education Program application document was sent off to the NH BON with hopes that it would meet the regulatory and quality standard they were looking for. It was with great joy that we received notification that on July 17, 2014 our program received initial approval to offer our first course.

In the meantime, WMCC joined forces with the North Country Health Consortium and applied for a grant through the ‘Health Careers Opportunity Program Skills Training and Health Workforce Development for Paraprofessionals’. The grant was approved in September 2014 to offer North Country Health Career Initiative Program Scholarships to future LNA and MNA students that met economic or certain educational requirements. This is a wonderful opportunity for students through 2017 to receive full program scholarships.
Our first MNA class began in February, 2015 with a group well-motivated students who came highly recommended by their RN supervisors. The curriculum was intense and rigorous for them and they stepped up to the challenge. The theory portion of the class was taught at our Littleton Campus by me. We were very fortunate to have Sandra Yunghans RN, MSN, a recently retired nursing professor from our college, teach the clinical component of our program at the Country Village Health Care Center in Lancaster. Sandra set high standards and expectations for the students. She expertly taught and guided them through the steps of safely administering medications; teaching them to ‘think critically’ and ‘accurately report’ their observations to the RN.

In April, four students successfully completed our program. It was a special moment for me to hand the certificates of completion to each of these students. Our college is very proud of these caring and devoted LNA’s that stepped up to go ‘above and beyond’. I am confident they will prove to be well-trained MNA’s and a big addition to their respective long-term care facilities, assisting the supervising RN in the administration of medications.

BON Decision regarding LNA MC Role and Programs

February 6, 2015

To: All Program Directors with Current LNA MC Programs:

At the January 15, 2015 board meeting, the NH Board of Nursing voted to no longer approve programming for the LNA MC role. The decision was made based on a recommendation from a rules consultant. It is recommended that the BON include the task of medication assistance under the Nur 404 rules. The plan is to submit the rule addition for adoption in 2015.

Please note, however, that this task has always been considered a delegated task and has been subsumed under the Nur 404 delegation rules.

As a delegated task:

LNA’s may assist, observe and document medications taken by a client residing in a residential care setting or in their home as delegated by a licensed nurse. Facility policy and procedures and educational programming addressing this task are recommended.

For the Board,

Denise M. Nies  MSN, RN, BC
Executive Director
**Question:** What is the Nursing Assistant Registry?

**Answer:** The Nursing Assistant (NA) Registry is a list of individuals who have completed training and competency evaluation who the state finds to be competent to function as a nursing assistant. Successful completion of a Board approved nursing assistant program and competency test (state testing) identifies an individual as being competent to function as a nursing assistant.

**Question:** When I verify my new license online, what does “Not Licensed, Registry Only” mean?

**Answer:** “Not Licensed, Registry Only” means that you have been placed on the NH Nursing Assistant (NA) Registry. Licensure is not required to be placed on the NA Registry.

Nursing Assistant Licensure will be stated separately with a license number and status.

**Question:** Is licensure required to be placed on the Nursing Assistant Registry?

**Answer:** No. Registry findings do not require licensure of the individual placed on the registry but could involve discipline imposed by the Board of Nursing on a nursing assistant’s license.

**Question:** What information does the Registry hold?

**Answer:** The registry includes the individual’s full name, identifying information, the date the individual became eligible for placement on the registry and any finding of abuse, neglect or misappropriation of property by the individual. Registry findings may or may not include discipline placed on a license.

**Question:** Where can I access the NH Nursing Assistant Registry?

**Answer:** The Nursing Assistant Registry can be accessed on the Board of Nursing website: www.nh.gov/nursing. The registry verification link can be found on the homepage. The registry can also be accessed under the License Verification link located in the “Quick Links” box on the right hand side of the homepage.

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**HeP 805.17 Medication Services**

(af) If a resident self-administers medication with supervision, as defined in He-P

805.03(bc), personnel may be permitted to:

1. Remind the resident to take the correct dose of his or her medication at the correct time;
2. Place the medication container within reach of the resident;
3. Remain with the resident to observe the resident taking the appropriate amount and type of medication as ordered by the licensed practitioner;
4. **NOT**---(4) **Record on the resident’s daily medication record that they have supervised the resident taking his or her medication;** and
5. Document in the resident’s record any observed or reported side effects, adverse reactions and refusal to take medications and or medications not taken.

LNA’s may assist with a hand over hand technique, individuals who have physical impairment with cognitive abilities to determine medication needs. A care plan must be present which speaks to the impairment and assistance required. (BON Clinical Practice Inquiry 1998-1999)

**LNA/MNA Reminders:**

- NH has a mandatory licensing law. No person may practice as a nursing assistant without a license. The NH Board of Nursing defines "practicing" as including attendance at orientation or completing other types of non-director care activities.

- Documentation of Continued Education is required for all endorsement applications pursuant Nur 304.04(b)(4).

- Education considered as comparable for Challenge Program approval must meet the requirements of Nur 704.09 pursuant Nur 704.11.

- All questions must be answered on renewal or reinstatement applications including Nurse Supervisor and Employer. Incomplete applications will be returned which may delay renewal or reinstatement of licensure and the inability to work as a nursing assistant. Licensees working without an active license may be subject to a $50 fine for every calendar month or any part thereof, during which one practices.

- Licensed nursing assistants who are working in non-licensed positions (PCA-Personal Care Assistant) can not use work hours as active in practice requirements for renewal.

**LNA REINSTATEMENT**

**Frequently Asked Questions (FAQ’s)**

**Question:** What is reinstatement of a license?

**Answer:** Changing a inactive LNA license into an active LNA license.

**Question:** Can I complete the process online?

**Answer:** No, a reinstatement cannot be completed online. You may call the N.H. Board of Nursing (603) 271-6282 for guidance as to how to reinstate your license or you may come into the Board office and we can assist you.
CRIMINAL BACKGROUND CHECK REMINDERS

1. When completing the fingerprint/criminal background check within New Hampshire, fingerprint cards are NOT necessary. “Live Scan” fingerprinting does not require cards unless the fingerprinting is completed out of state, in which case the cards MUST be obtained from the Board of Nursing office.

2. The Board of Nursing application fee DOES NOT include the fingerprinting/criminal background check fee. Depending upon which way the fingerprinting/criminal background check is complete and the location will determine the fee. Please refer to the Board of Nursing website www.nh.gov/nursing under the “FBI Fingerprinting Requirements” in the section marked “Quick Links” for fee schedule.

3. All criminal background checks MUST be notarized.

4. “Live Scan” fingerprinting is encouraged of ALL of our applicants, as the rejection rate is much lower.

5. Please remember that most police departments charge a processing fee which varies depending on the location.

Question: Can I work in N.H. on an expired license until I have time to complete the process?
Answer: NO, you may NOT work in N.H. as an LNA on an expired license. That means you cannot work using your LNA knowledge, judgment and skills and you cannot get paid as a LNA. By working as an LNA and or getting paid as an LNA you will be subjected to administrative fines.

Question: What requirements do I need to meet in order to reinstate my LNA license?
Answer: You must have either: Completed 200 hours working as an LNA under the supervision of an licenses nurse (please be prepared to list his/her FULL name) and completed 24 continuing education hours (12 in each year). Please remember you may be asked to provide proof of your CE. hours.

OR

Have successfully completed the written and clinical competency testing within 2 years immediately prior to the date of your reinstatement application.
### New Hampshire Board of Nursing

**A Brief History of the Board of Nursing and Licensed Nursing Assistant Practice**

<table>
<thead>
<tr>
<th>Year</th>
<th>Event</th>
</tr>
</thead>
<tbody>
<tr>
<td>1907</td>
<td>First Nurse Practice Act was passed (March)</td>
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<tr>
<td>1955</td>
<td>Amendment to the Nurse Practice Act changing the name of the Board to the Board of Nursing Education and Nurse Registration</td>
</tr>
<tr>
<td>1966</td>
<td>First Newsletter of the Board was published</td>
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<tr>
<td>1975</td>
<td>New Nurse Practice Act signed into Law</td>
</tr>
<tr>
<td>1976</td>
<td>Guidelines for Nursing assistant education courses were adopted</td>
</tr>
</tbody>
</table>
| 1987 | Report of the Sunset Committee of the legislature recommends:  
Reauthorization of the Board of Nursing  
Consideration of certification of nursing assistants  
Rename the New Hampshire Nurses Regulation Board and was moved from the Department of Education to the Division of Public Health, Department of Health and Human Services |
| 1989 | Legislation authorized the Board of Nursing to regulate nursing assistant practice |
| 1990 | Certified Nursing Assistant registration program initiated  
Nursing Assistant Registry initiated |
| 1994 | Newsletter mailed to all licensees for the first time |
| 1996 | Board of Nursing web page initiated |
| 1998 | Administrative rule revision resulting in the clarification of delegation rules and 8:1 student/faculty ratio in clinical practicum sites in nursing |
| 2002 | Revisions to the Nurse Practice Act allowed:  
Change CNA’s to LNA’s  
The appointment of 2 LNA’s to serve on the Board of Nursing  
Approval of education programs for LNA’s to administer medications(MNA) |
| 2003 | First Licensed Nursing Assistants appointed to the board  
Medication Nursing Assistant legislation implemented  
First annual LNA Conference sponsored by the Board  
Administrative rules revised:  
Delegation of medication administration allowed under specific circumstances  
Continuing education and active in practice required for LNA’s |
| 2005 | Criminal Background Checks became mandatory prerequisite for licensure  
On-line license renewal implemented |
| 2006 | New Nurse Practice Act signed into Law (July 2005)  
Scope of Practice defined in the Law |
| 2007 | Development of a new LNA Role (LNA-MC) based on Assisted Living (He-P 805) Regulations(February) |
| 2008 | LNA-MC role approved for Homecare settings (February) |
| 2010 | Newsletter available on-line |
| 2013 | Administrative Rules revised with the implementation of MNA Competency Testing |
### IMPORTANT REMINDERS

**FROM THE BOARD OF NURSING**  
www.nh.gov/nursing

<table>
<thead>
<tr>
<th>PAPER LICENSES ARE NOT PROVIDED</th>
</tr>
</thead>
<tbody>
<tr>
<td>Verify and print license information using the Online Verification Quick Link on the right side of the Home Page.</td>
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<tr>
<th>RENEWAL REMINDER POSTCARDS ARE MAILED 6 WEEKS PRIOR TO MONTH OF RENEWAL</th>
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<tbody>
<tr>
<td>RENEWALS MAY BE DONE ONLINE OR RETURN POSTCARD AS DIRECTED TO OBTAIN A RENEWAL APPLICATION</td>
</tr>
<tr>
<td>Fees are to be sent with renewal applications not with the postcards.</td>
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<tr>
<th>FOR ONLINE RENEWAL – REGISTER AS A FIRST TIME USER BEFORE ATTEMPTING TO RENEW A LICENSE</th>
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<tbody>
<tr>
<td>Follow the instructions on the Online Licensing Quick link on the right side of the Home Page.</td>
</tr>
<tr>
<td>Make sure you remember your <em>username and password</em> for future use.</td>
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<tr>
<th>MAKE SURE YOU PRINT THE RECEIPT PAGE AFTER PROCESSING YOUR PAYMENT. The receipt can not be reproduced by the Board office. It is proof that payment was accepted, should there be a problem.</th>
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<tr>
<th>WHEN APPLYING FOR ORIGINAL LICENSURE ON LINE</th>
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<tbody>
<tr>
<td>Make sure you write down and save your username and password. This information will be necessary for renewing your license on line when it is renewal is due. This information is not automatically saved in the system.</td>
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<tr>
<th>CRIMINAL BACKGROUND CHECKS AND FINGERPRINTING IS REQUIRED FOR ALL INITIAL LICENCES AND ENDORSEMENTS</th>
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<tbody>
<tr>
<td>Follow the directions under the Endorsement Link. The processing time may take 4-6 weeks so plan to start the process early. Licensing will not be processed until background checks and fingerprinting results are obtained.</td>
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<tr>
<th>THE BOARD MUST BE NOTIFIED OF ALL NAME AND ADDRESS CHANGES</th>
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<tr>
<td>A $10 fee may be incurred if address changes are not made within 10 days. The Board must be notified in writing.</td>
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<tr>
<th>ACTIVE IN PRACTICE AND CONTINUING EDUCATION REQUIREMENTS INFORMATION CAN BE FOUND ON THE HOME PAGE ON THE WEBSITE</th>
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<tbody>
<tr>
<td>Click the Licensure Link on the left side of the Home Page.</td>
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</table>
NH BOARD OF NURSING

EDUCATION PROGRAMS: BOARD ACTIONS

Please refer to our website at www.nh.gov/nursing for current program status for Nursing, LNA and MNA programs:

http://www.nh.gov/nursing/educational/program-review-rn.htm
http://www.nh.gov/nursing/educational/program-review-lpn.htm

Go to www.nh.gov/nursing and click on Enforcement for information regarding disciplinary matters

Complaint Reporting

Pursuant to RSA 326-B:37 V: Every individual, agency, facility, institution, or organization that employs licensed nursing personnel within the state shall report to the board within 30 days any alleged violations of the Nurse Practice Act (RSA 316-B:37, RSA 326-B:41 and Nur 402.04(b).

Reportable violation are cited in RSA 326-B:37 II, Nur 402.04 (b) and Nur 402.04 (c).

Any alleged violation of the Nurse Practice Act reportable to Bureau of Adult and Elderly Services (BEAS) should also be reported to the Board of Nursing.

On-Line Disclaimer

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