



Palmetto Nurse

South Carolina Board of Nursing

Vol1 No1

SOUTH CAROLINA
BOARD OF NURSING
MULTI-STATE NURSE
LICENSURE
COMPACT

FREQUENTLY ASKED
QUESTIONS ON
*Continued
Competency*

RENEWAL TIME IS COMING!

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THIRD QUARTER \ FALL 2005

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Mission Statement: The mission of the State Board of Nursing for South Carolina is the protection of public health, safety, and welfare by assuring safe and competent practice of nursing.

This mission is accomplished by assuring safe initial practice as well as continuing competency in the practice of nursing and by promoting nursing excellence in the areas of education and practice. The Board licenses qualified individuals as licensed practical nurses, registered nurses or advanced practice registered nurses. Complaints against nurses are investigated and disciplinary action taken when necessary. Schools of nursing are surveyed and approved to ensure quality education for future nurses.

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The Palmetto Nurse is published quarterly by the South Carolina Board of Nursing. Each issue is distributed to every actively licensed LPN, RN, APRN, as well as to nurse employers and nurse educators. Nurses, students, and professionals from healthcare organizations turn to this publication for updates on clinical practices, information on government affairs initiatives, to discover what best practices are being implemented, and for insight into how healthcare providers are facing today's challenges.

Edition 1

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- Our mailing address is South Carolina Board of Nursing, Post Office Box 12367, Columbia, SC 29211-2367.
- Our normal business hours are 8:30 a.m. to 5:00 p.m., Monday through Friday. Our offices are closed for holidays designated by the State.

Remaining DESIGNATED STATE HOLIDAYS FOR 2005

- December 23 - Christmas Eve
 - December 26-27 - Christmas
- ## DESIGNATED STATE HOLIDAYS FOR 2006
- January 2 - New Year's Day
 - January 16 - Martin Luther King, Jr. Day
 - February 20 - George Washington's Birthday/President's Day
 - May 10 - Confederate Memorial Day
 - May 29 - National Memorial Day
 - July 4 - Independence Day
 - September 4 - Labor Day
 - November 10 - Veterans Day
 - November 23-24 - Thanksgiving
 - December 25-26 - Christmas

Visit our website at www.llr.state.sc.us/pol/nursing

The Board of Nursing Web site contains the New Nurse Practice Act, Regulations, Advisory Opinions, Licensee Lookup, Disciplinary Actions, and other information.

SOUTH CAROLINA BOARD OF NURSING MULTI-STATE NURSE LICENSURE COMPACT



What Is The Nurse Licensure Compact?

Many employers and licensees have been eagerly awaiting the Multi-state Nurse Licensure Compact (Compact) to come to South Carolina. Governor Mark Sanford signed the Nurse Licensure Compact Act into law on May 26, 2005. The full text of the act can be viewed on the South Carolina State Board of Nursing website (www.llr.state.sc.us). On September 16, 2005, the National Council of State Boards of Nursing's Nurse Licensure Compact Administrators (NLCA) admitted South Carolina into the Compact.

The South Carolina Board of Nursing is developing a plan to implement the Compact requirements to include promulgating regulations and developing policies and procedures for issuing multi-state licenses. The Board will begin issuing multi-state licenses with the renewal period beginning on February 1, 2006.

What Does a Multi-state Nurse Licensure privilege mean?

Similar to the driver's license model, the Nurse Licensure Compact (Compact) allows a Registered Nurse (RN) or Licensed Practical Nurse (LPN) who is licensed in a Compact state to practice nursing in another Compact state without having to obtain a license in the other state. A Compact (or party) state is a state that has passed legislation and has been approved by the NLCA to implement the Compact. The following states have implemented the Compact to date: AR, AK, DE, ID, IO, ME, MD, MS, NE, NM, NC, ND, SD, TN, TX, UT, VA, WI. In addition to South Carolina, the following states are in the process of implementing the Compact: NJ, NH. You may visit the National Council of State Boards of Nursing website (www.ncsbn.org) for updates as more states join and implement the Compact.

Important QUESTIONS and ANSWERS About the Nurse Licensure Compact

How will the Compact affect nurses who live in SC?

After implementation, nurses whose permanent residence is in SC will no longer maintain a license in any other party state. A nurse who resides in SC and holds an unencumbered SC nursing license will have the 'privilege to practice' in any of the other party states with their SC multi-state license. When a nurse changes residency from one Compact state to another he/she is required to apply for and obtain a multi-state nursing license in that state within **30 days**. The SC license will then be made inactive. When a nurse changes residency to a non-Compact state, he/she must apply for and obtain a nursing license in that state. The SC license will then become "valid in SC only". Nurses must meet the requirements for licensure to obtain and renew the license in the primary state of residence.

How is primary state of residence for licensure determined?

Primary state of residence means "*the person's fixed permanent and principle home for legal purposes; domicile*". Compact rules require each nurse to declare in writing his/her primary state of resi-

dence upon initial application and renewal of the nursing license. Sources of proof that can be used to verify primary residence include but are not limited to 1) driver's license; 2) voter registration card; 3) federal tax return. The Compact primary residence rule does not apply to military nurses or nurses in the federal government unless the nurse is working outside of their military or governmental position. **The current Nurse Practice Act mandates a nurse to notify the Board of Nursing within 15 days of a change of address.** Adherence to this requirement is critical with Compact implementation.

I am in the military or work for the federal government. How does the Compact affect me?

Nurses in the military or working for the federal government shall continue to be licensed in accordance with the rules of the military branch or federal government agency where employed. If the nurse has a license in a Compact state, the nurse will have the Multi-state licensure privilege to practice in other Compact states. If a nurse has a license in a non-Compact state, the Multi-state Licensure Compact rules do not apply. Should the nurse choose to work out-

side the military or federal government agency, the nurse must comply with the licensure requirements of the state. If the state has implemented the Compact, the nurse must comply with all aspects of the Compact rules.

Does the Compact affect APRNs, CRNAs, or CNMs?

The Compact does not include Advanced Practice Registered Nurses (APRNs), Certified Registered Nurse Anesthetists (CRNAs) or Certified Nurse Midwives (CNMs) at this time due to the lack of uniformity in licensure requirements and titles among states. APRNs, CRNAs, and CNMs will need to obtain state licensure or authority for advanced nursing practice in each state in which they practice.

How will SC APRNs be authorized to practice in other Compact states?

South Carolina APRNs will be authorized to practice as

Registered Nurses in party states unless they seek licensure as an APRN. The APRN's South Carolina license will be designated as a multi-state license with APRN practice privileges in "South Carolina only".

What is the accountability for practice with a multi-state licensure privilege?

It is important to understand that the Nurse Licensure Compact requires nurses to adhere to the nursing practice laws and rules of the state in which the nursing practice occurs. In the case of electronic nursing practice (telenursing), the nurse must adhere to the practice standards of the state where the client receives care. Most Boards of Nursing provide online access to their Nurse Practice Act on their websites.

Additional Questions and Answers About the Compact for Employers

What are my responsibilities as an employer in Compact implementation?

A major responsibility for employers will be to assure that every nurse employed by you is properly licensed and practices within the scope of practice defined in the Laws Governing Nursing in SC (Nurse Practice Act). It is important to visually inspect each license as nurses practicing from other Compact states may have a license that appears different from what you are accustomed to seeing for a South Carolina licensed nurse. Verification of licensure and disciplinary status will be essential to safe practice. Providing information to the nurse on the scope of practice in South Carolina will also be essential to assure safe practice. The Nurse Practice Act can be found on the Board of Nursing website. In addition, employers are asked to assist the Board of Nursing in gathering information from nurses working in this state on a license from another party state.

What is the process for notifying the Board when a nurse from a party state is employed?

The Board of Nursing has created a Multi-state Licensure Privilege Notification Form that is available for download on the website. When a nurse begins employment on a multi-state licensure privilege, the employer is asked to provide the form to the nurse for completion and to forward the form to the Board office.

How will employers and members of the public verify licensure status of nurses under the Compact?

For nurses who hold a license issued by the South Carolina Board of Nursing, employers will continue to verify licensure status via the Board's website (www.llr.state.sc.us). For nurses licensed in another Compact state and seeking employment in SC, employers may verify licenses by using the nationally coordinated licensure information system called NURSYS. Basic licensure information as

well as disciplinary status for a licensee is provided through this system. The fee to verify nurse licensure is \$5.00 per inquiry and payable with a credit card. Fees are non-refundable. The NURSYS website is located at www.NURSYS.com.

How are complaints about unsafe nursing practice handled within the Compact?

The Compact authorizes the nurse licensing board of any Compact state (home or party) to investigate allegations of unsafe practice by any nurse practicing in the state. Based upon the outcome of the investigation, a remote state licensing board may deny the nurse's privilege to practice in that state. Only the nurse's home state (state of residence) licensing board may take disciplinary action against the nurse's license. States will continue to apply the same administrative and due process procedures for imposing discipline as they have always done.

What is the process for obtaining licensure for nurses moving into SC from another party state?

There is no change in the requirements for obtaining licensure for nurses coming from a non-party state. The nurse must have a valid license to practice prior to beginning employment in this state.

How will employers be informed of new states joining the Compact?

This information will be available on the Board of Nursing's website as well as on the National Council of State Board of Nursing's website (www.ncsbn.org). It is most important that employers remain informed as other states join the Compact.

RENEWAL TIME IS COMING!

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RENEWAL TIME IS COMING!

Current South Carolina nursing licenses will expire at midnight on Sunday, **April 30, 2006**. You should receive your biennial renewal notice in February 2006. Please keep your license and personal identification number (PIN) in a safe place, as you will be using this information to renew.

There are a few changes from the last renewal. Effective this renewal, you will not be required to list the number of hours you practiced for the renewal period. You must now meet one of the Board's four requirements for continued competency. Look for more detailed information on continued competency in this issue. Do not send copies of your continued competency information to the Board. Shortly after the renewal period, we will be randomly auditing nurses licensed in South Carolina. If you are selected for audit, you will receive a letter asking you to send in the documentation to verify competency. Also, the Board will be implementing the Multi-state Nurse Licensure Compact (Compact) and you will be required to declare your official state of residency as defined by the Compact.

Advantages of Renewing On-Line (<https://renewals.llronlin.com> or visit the Board web site www.llr.state.sc.us/pol/nursing/)

- **Faster** – It takes only a few minutes to complete your renewal online. No waiting for the application to reach our office through the mail.
- **Convenient** - You can complete your renewal application 24 hours a day, seven days a week, at any location with Internet access.
- **No Lost Payments** – You can use your credit card to renew your license and will receive a receipt confirming that you have completed the renewal process and that your payment has been accepted. Don't feel comfortable giving out your credit card information over the Internet? Our Web site uses state-of-the-art security technology. This is the similar technology used by major online groups and is very safe as proven by the increases in online sales over the past few years.
- **Quicker Turn Around** –Your license is renewed as soon as your credit card clears and a printed license is mailed to you usually within five days as opposed to 7-10 days processing after your application is received in our office.
- **License Verification** - Within minutes of the printing of your renewed license, you or your employer may verify your new expiration date on the Licensee Lookup feature on our web site.

Employers are encouraged to allow their employees time to renew online on computers within their facilities. While we recognize that computers are not in all homes, most people have access through work, friends or family as well as in all local public libraries in South Carolina. We encourage you to take advantage of this wonderful, timesaving opportunity.

Paper renewal applications will be available only upon written request. If you would like a paper renewal application instead of renewing online, please send in a written request after February 1, 2005 along with a self-addressed, stamped envelope to Renewal Application Request, Board of Nursing, Post Office Box 12367, Columbia, SC 29211.

ADMINISTRATOR RETIRES

Martha Summer Bursinger, RN, MSN, MEd, retired effective October 2, 2005. Ms. Bursinger served as the administrator of the South Carolina Board of Nursing for five years. After 30 years in healthcare, 21 years of which were in nursing, she will continue her work in the health care arena in long-term care. Ms. Bursinger wishes to thank everyone at the S.C. Department of Labor, Licensing and Regulation (LLR), the Board staff, Board members, licensees and public who have made her time as board administrator a pleasant and memorable experience.

During the time Ms. Bursinger was administrator of the South Carolina Board of Nursing, the Nurse Practice Act was revised, passed legislatively, and has been fully implemented. Additionally, the Practitioner Remediation Enhancement Partnership (PREP) program has been implemented with many health care systems in the state actively participating in this patient safety effort. Also, during her time as administrator, the Governor signed the

Nurse Licensure Compact in May 2005. South Carolina was admitted into the Nurse Licensure Compact on September 16 and is in the process of implementing the Compact requirements with the 2006-2008 renewal cycle.

During the time Ms. Bursinger was administrator of the South Carolina Board of Nursing, the Nurse Practice Act was revised, passed legislatively, and has been fully implemented.

Former board administrator, Renatta Loquist, is serving as interim, part-time administrator until the position is filled. For information on the posting of this vacancy, please go to <http://www.state.sc.us/jobs/positions/P0001-32021.html>

HAVE YOU M•O•V•E•D?

Section 40-33-38 (C) of the Nurse Practice Act requires that **all** licensees notify the Board *in writing* within 15 days of an address change. So that you do not miss important information such as your renewal or other important licensure information, please be sure to notify the Board immediately whenever you change addresses. Please submit a letter including your name (as shown on your license), license number, former address and new address as well as your new telephone number and email address. You may also change your address on-line utilizing the address change form found on our web site: www.llr.state.sc.us/pol/nursing/. Failure to timely notify the Board of changes in address is also considered grounds for discipline as provided for in Section 40 33 110 (A)(26).

It is important for nurses who have elected to serve in the event of a disaster to provide the Board with updates on all of their contact information such as telephone numbers and email addresses, not just their mailing address. Current telephone numbers and email addresses will assist in contacting nurses in the event of a disaster. If our information is not current, a nurse may miss an opportunity to assist in a disaster situation.



World War II *Cadet Nurse Corps*

Originally named the Victory Nurse Corps, the Cadet Nurse Corps was born in 1943 and ended its short life in 1948, after graduating 124,000 nurses. The Corps was developed by the United States Public Health Service (USPHS) to train nurses to serve with the armed forces and to replace nurses from stateside hospitals who were serving overseas during World War II. More than 20 percent of the existing professional nurse workforce was serving with the troops on the front line. In the states, clinics were being closed, babies were delivered at home without proper care, immunizations were cancelled and hospitals were forced to close entire wards due to the nurse shortage. America needed nurses!

Hospitals, critically short of nurses, had to depend on student nurses. The Corps began immediately helping to upgrade nursing schools, libraries, housing and faculty to provide the professional nurses the hospitals needed so desperately. The Cadet Nurse Corps was, first and foremost, a scholarship program paying the Cadet's annual tuition ranging from \$50 to \$800, plus stipends averaging \$25 per month for those who could qualify for the program. After graduation, the nurses could become registered nurses, enlist in the military

as Second Lieutenants or work in essential civilian services until the war ended. Cadets were expected to graduate from the accelerated program in thirty months. They received free tuition, uniforms and room and board. In return, they agreed to serve for the duration of the war.

Technically not a part of the armed forces, the Corps was, in fact, the largest and youngest group of uniformed women to serve their country during World War II.

The Corps was formed when Congress passed provisions of the Bolton Act (also known as the Nurse Training Act), named after Congresswoman Frances Payne Bolton who introduced the bill. Bolton had long been an advocate of the nursing profession. The bill was to "provide for the training of nurses for the armed forces, governmental and civilian hospitals, health agencies, and war industries through grants to institutions providing for training and for other purposes."

The Cadet Nurses dressed in gray uniforms trimmed in red. The gray symbolized mercy, serenity and understanding. The red represented strength, courage and inspiration. The uniforms were an

important element of the recruiting campaign. Leading fashion designers were asked to design uniforms, and at a fashion show, fashion editors chose summer and winter uniforms for the Corps from the designer offerings. To further recruitment, Cadets wearing fashionable uniforms were seen on posters, in magazines, and at the movies with notable stars from the period.

The Corps offered many young women their only chance to become a nurse. However, it did require dedication and long hours. Cadet Nurses were not allowed to marry until after graduation. They attended classes and clinicals as a group, and they lived together dormitory style, sometimes in a converted wing of a hospital with “housemothers” who performed bed checks, watching for curfew violations that would result in expulsion from the Corps. Despite the rigorous demands, 65,000 young women signed up the first year and each year thereafter until the war’s end. Cadets took and signed a pledge and were issued an identification card with a serial number.

They served under commissioned officers USPHS Surgeon General Thomas Parran and Lucile Petry, the Director of the Division of Nurse Education and head of the Cadet Nurse Corps. The first Cadets assigned went to the Navy, Indian Health Services, Veterans Administration, Marine Hospital and the Public Health Service. Seven hundred were assigned to Army Hospitals.

Many of the Cadets went on to very productive and fulfilling nursing careers in both the military and civilian sectors after their service in the Corps.

Not only did the Cadet Nurse Corps provide us with excellent healthcare professionals when we needed them most, it also tremendously improved the nursing schools, facilities and faculties that were involved in the program. For a school of nursing to qualify for the Cadet Nurse Program, it had to be accredited and affiliated with a hospital approved by the American College of Surgeons. The school was also required to have adequate staff and facilities. Substandard condi-



tions in the weaker schools were improved by funding from the Corps and the advice provided by the program’s consultants.

The end of the war was also the end of the Corps. The last Cadets were admitted in October of 1945, and 1948 was the last graduating class. The Corps forever changed many schools as well *continued on the next page*

Ledenia (Hughes) Bradshaw is a 1946 graduate of the Cadet Nurse Corps. She received her education at the Baptist State Hospital in Little Rock, Arkansas. The school is now known as the Baptist School of Nursing and Allied Health. She's been a registered nurse in Arkansas since 1947.

Mrs. Bradshaw entered the program on January 15, 1944, and graduated on December 31, 1946. That was two weeks early because she had chosen to forgo her vacation that year in order to graduate earlier. Her class was the first to enter as Cadets. The courses were accelerated and the regimen was tough, with Cadets eating, sleeping—doing everything—together 24 hours a day, 7 days a week. School was in session 365 days a year, so there was very little time to call one's own.

After graduation, she accepted a position as supervisor of the newborn and premature nursery at Baptist Hospital. She was paid \$30 a month for her supervisory position. Mrs. Bradshaw's career included terms of employment at four other hospitals. Mrs. Bradshaw went to Childrens Hospital in Little Rock, Arkansas to help rehabilitate children during the polio epidemic of the early 50's.

Although Mrs. Bradshaw has not been on salary since the 60's, she continues to practice bedside nursing for her family and friends. Apparently, after what most people would consider a lifetime of service, she's still intent on making a difference in people's lives. Thank you Mrs. Bradshaw.

continued from the previous page
 as the young women who attended. Rather than the typical apprenticeship training used previously, the Corps demanded a more academic approach. Funds provided by the Corps improved and enlarged classrooms and libraries of nursing schools all over the country. The

Corps also encouraged more varied training in fields like convalescent care, public health, pediatrics, tuberculosis and psychiatric care.

With the current nursing shortage and even more frightening outlook for the future, perhaps the Cadet Nurse Corps is an idea that should be revisited.

Form 300 **CERTIFICATE OF MEMBERSHIP**
 FEDERAL SECURITY AGENCY
 U. S. PUBLIC HEALTH SERVICE
 UNITED STATES CADET NURSE CORPS SERIAL No. **2351**

MISS (NAME) Ledenia Hughes IS A MEMBER
 OF THE
UNITED STATES CADET NURSE CORPS
 AND IS ENROLLED AT Baptist State Hospital
(NAME OF HOSPITAL)
 OF Little Rock (CITY) Arkansas (STATE)

Thomas J. ... *Twice Petry ...*
DIRECTOR GENERAL, U. S. PUBLIC HEALTH SERVICE DIRECTOR, DIVISION OF NURSE EDUCATION, U. S. P. H. S.

Ledenia Hughes *Daisy ...*
(SIGNATURE OF MEMBER) (SIGNATURE OF DIRECTOR, SCHOOL OF NURSING)

DATE ISSUED Jan 15, 1944
(4409) THIS MEMBERSHIP CARD IS NOT TRANSFERABLE (COVER)

PLEDGE
 In consideration of the training, payments, and other benefits which are provided me as a member of the U. S. Cadet Nurse Corps, I agree that I will be available for military or other Federal, governmental, or essential civilian services for the duration of the present war.

U. S. GOVERNMENT PRINTING OFFICE 16-28249-1

F A Q S

FREQUENTLY ASKED QUESTIONS ON *Continued Competency*

Are Continuing Education hours now mandated by the Board of Nursing?

No, the Board of Nursing does not mandate continuing education hours (30 contact hours in 2-year renewal period). It is only one of the four options for continued competency now offered by the Board. The licensed nurse needs to select only one of these options.

What is a national nursing provider of continuing education?

The ANCC (American Nurses Credentialing Center), National League for Nursing (NLN), any national specialty organizations such as Association of Women's Health, Obstetric and Neonatal Nurses (AWOHN) or Association of PeriOperative Registered Nurses (AORN) and other similar organizations are accepted providers of continuing education. A list of accepted providers can be found under Continued Competency Criteria on our Web site. www.llr.state.sc.us/pol/nursing/.

Can Advanced Practice Registered Nurses (APRN) use their national certification in their specialty as proof of certification (option b of Section 40-33-40)?

Absolutely, since to be an APRN in South Carolina you have to have a masters and be nationally certified in your specialty. Certification or re-certification must be current during the renewal period.

Does a nurse have to sign my employer verification form?

We know nurses have non-nursing employers, and that is fine as long as the employer is able to verify nursing competency.

Where do I get the Board approved employer verification form?

It is on our Web site at www.llr.state.sc.us/pol/nursing. On the left hand side on the menu click "applications". The employer verification form is on the second page. Nurses need to be sure that their employer can, by their policies, complete and sign the form required by the Board to document practice hours. If they cannot, nurses may choose one of the other options.

Can I count taking one course in school as a nursing program under option (c) of Section 40-33-40?

No. The key word in this option is "completion." You must complete all the coursework for the program before it can count toward your continued competency requirement.

Do I have to send in all my paperwork with my renewal?

No. Do not send any continued competency paperwork with your renewal. You just mark one of the four options. Shortly after renewal, we will be randomly auditing nurses in South Carolina. If your name is selected, you will receive a letter asking you to send the documentation in to verify competency. By law, you will have five days to provide the documents. A licensee must maintain all documented evidence of compliance for at least four years.



DISASTER RELIEF • The South Carolina Board of Nursing wishes to thank all licensed nurses who have participated in and are currently participating in the relief effort in the Gulf States as well as with evacuees here in our state. Every effort has been made to disseminate information to disaster relief groups regarding those who are willing to volunteer, those who have come to us in need of nursing positions, and to continue our mission to protect the public. The Board encourages nurses who have extra skills and preparation with disaster relief to go to our Web site and select Disaster Volunteers and follow the instructions. Keeping this data is crucial to being able to assist in any disaster relief effort. You may also elect to serve as a volunteer as you renew your license online beginning in February 2006.

BOARD and COMMITTEE MEETINGS

January 26 – 27, 2006	Board of Nursing	August 4, 2006	Advanced Practice Committee
February 3, 2006	Advanced Practice Committee	August 17, 2006	Nursing Practice & Standards Committee
February 21, 2006	Advisory Committee on Nursing	August 29, 2006	Advisory Committee on Nursing
February 23, 2006	Nursing Practice & Standards Committee	September 28 – 29, 2006	Board of Nursing
March 30 – 31, 2006	Board of Nursing	October 17, 2006	Advisory Committee on Nursing
April 18, 2006	Advisory Committee on Nursing	October 19, 2006	Nursing Practice & Standards Committee
April 20, 2006	Nursing Practice & Standards Committee	November 3, 2006	Advanced Practice Committee
April 18, 2006	Advanced Practice Committee	November 16 – 17, 2006	Board of Nursing
May 25 – 26, 2006	Board of Nursing		Advanced Practice Committee
June 15, 2006	Nursing Practice & Standards Committee	December 14, 2006	Nursing Practice & Standards Committee
June 20, 2006	Advisory Committee on Nursing	December 19, 2006	Advisory Committee on Nursing
July 27 – 28, 2006	Board of Nursing		

Grandmother, mother and daughter R.N.

Jaime L. Robertson

AT SCHOOL TODAY, I helped four couples prepare to take their new babies home. Yesterday at work, I listened to an older man's story of how he fell in love with his wife 58 years ago.

When I get home at the end of the day, I am satisfied and filled with the exciting energy of nursing. I have wanted to be a nurse for as long as I can remember. There were, of course, days I thought "Doctor" would sound nice before my name, but they were few and far between.

All my life I have loved people. I was the little girl who sat down next to the older man at the park just to let him know "my grandpa had hair in his nose, too." I love making new friends, but I especially love the look in a patient's eyes when I have made a difference in his day.

Have you ever been having a bad day and looked up to see a friend's smiling face and find that your troubles suddenly seem so small? Have you been soothed by a back rub or a warm bath? I believe these comforting measures are the backbone of the nursing profession. Nurses are there to lift people up when they are feeling down and give comfort when they need a little rest.

I have always known nursing to be a proud profession. My grandmother was a nurse and so was another woman I have always looked up to with admiration, my mother Kathie Robertson.

My mom received her degree in 1980. After graduation, she was hired by a large hospital in our hometown to work in the nursery. At the time, she was six months pregnant with me. She loved her job and developed fast friends at the hospital. In February of 1981, she took what was to be a temporary leave of absence to give birth to me on April 7. One month later, she was diagnosed with malignant breast cancer.

One of my mom's nurses had this to say about my mother: "I think people thought they would help her when they came to visit,

but she had so much inner strength, people always left feeling that they were the ones being helped. She gave herself completely to others. She was just herself, just Kathie, but being 'just Kathie' was quite extraordinary. It was simply a part of her being to always be concerned about others."

She was a nurse. My mother passed away on June 27, 1982, but her memory and spirit have always been a part of my life. She is an inspiration to me.

I have a photograph of my mom holding me in one arm and her diploma from nursing school in the other, and on the back she has written, "my two greatest accomplishments." I am so proud of that picture. I get it out when I feel like nursing school is getting the best of me and I need a little boost. It usually does the trick.

Ernest Hemingway once said, "The world breaks everyone, and afterward, many are stronger at the broken places."

The experiences that people have in life shape them into the person they will become. I guess you could say I was "broken" at a very early age. The loss of my mother has impacted every aspect of my life. I learned early that nothing lasts forever; anything and everything could end in a matter of seconds. I knew this before I knew my ABC's, before I could ride a bike.

Later in my life, this death has helped me to focus on the greater aspects of living. I live for those little moments most people take for granted, which I believe is reflected in my work as a nurse. I am overwhelmed by a new dad's reaction to his new baby. I am amazed at the strength a woman has as she tells her husband he doesn't need to fight his disease anymore. I am satisfied with a simple thank you or just a look of gratitude.

As a direct result of this tragedy I have conquered, I am determined to live a full life, to extract all I can from every situation, and spread around the love I have inside. The scars I have developed

"The world breaks everyone, and afterward, many are stronger at the broken places."

—Ernest Hemingway

have only increased my strength and heightened my sensitivity.

This strength that I claim so often was tested my freshman year of nursing school. I received a call explaining that my grandma was very sick, and I should come down. So, I went. I stayed with her in the hospital about a week. I painted her fingernails, put lotion on her hands; we ate blueberry pancakes (the only thing she ate all week), had a slumber party and watched “The Horse Whisperer” (she loved Montana).

During my visit, she gave me some things she wanted me to have. One very special thing was her nursing pin. When I left the hospital for the airport, I thought it would be the last time I saw my grandma. Unlike my mother, she was not a fighter. She had given up. So I returned to school, sent letters, and called often.

In November, I received another urgent phone call, but it seemed different this time. She was in a hospice program and wasn’t expected to make it through the week. Once again, I went. There was no time for slumber parties or pancakes during this trip. It consisted mostly of watching her sleep, holding her hand and waiting for her to wake long enough to exchange a few thoughts and go back to sleep. She was awake for a while a few times, and we talked about my grandpa, my mom and her dying. She was begin-





ning to have hallucinations. She talked to people who weren't there, but seemed comforted.

One moment in particular stands out in my mind. I leaned over to give her a hug, and she looked straight up at the ceiling (obviously at something) and said, "I knew she would come." She was talking about my mother.

When I left for the airport this time, it was clear that we wouldn't see each other again. I gave her a hug, she told me to "take it easy," and I left. It was really hard to leave her there all alone. She passed away the next day. I'll always remember her hands: they never changed.

I believe that my mother gave me the strength to handle this situation, and reflecting on her courage throughout tragedy has inspired me to pursue a career in nursing. Caring for my grandma in her time of need has only solidified this calling.

To me, nursing is just that, a calling. It takes a special kind of person to be a caring nurse.

Next May, I will graduate with a Bachelor of Science degree in nursing, and I can't wait. It seems like I've been in school forever.

I have transferred schools twice, but never changed my major. I like to say that I took the scenic route. Either way, a degree in nursing is the best way I could have prepared myself for life after college.

Very few of my friends who have graduated can say they have jobs they love, much less a job in the field they studied. I will never have that problem. With a degree in nursing, I can go almost anywhere I choose, and I will definitely love my job.

The dictionary defines vocation as "a profession for which one is especially suited" or "a strong desire to do a particular type of work," and avocation as "an activity that is engaged in for enjoyment, in addition to one's regular work." For me, nursing is both a vocation and an avocation, and I can only hope that many others feel this way.

This world is in need of nurses, people who care enough to take the lives of others into their hands and hold them gently.

RETURNED CHECKS

When submitting any fees to the Board of Nursing, please be certain there are sufficient funds in your account to cover your check and that the check has cleared before closing any account. Section 40-1-50(G) of the S.C. Code of Laws states that a license shall be suspended if a fee payment is made by a check that is subsequently returned by the financial institution unpaid and is not made good within 10 days of official notification. This suspension is exempt from the Administrative Procedures Act. Unpaid checks constitute a non-payment of license fees. Notifications are sent to the address of record on the licensee's file. When a check is returned, replacement funds plus the returned check fee allowed by law must be submitted in the form of a cashier's check or money order. The Board cannot provide any further licensure services until the returned check is made good. Notice of the suspension is sent to the licensee's employer(s) if the check is not made good within 10 days of official notification.

BOARD VACANCIES

The Nurse Practice Act signed by Governor Sanford on May 11, 2004, established an additional lay member for the Board. There is currently one lay member vacancy on the Board of Nursing. An additional vacancy for a lay member will be available after December 31, 2005. Lay members represent the public at large as a consumer of nursing services and may not be licensed or employed as a health care provider. No board member may serve as an officer of a professional health-related state association. If you know someone who is interested in this lay position, please submit a letter of request, along with resume to Boards & Commissions, Governor's Office, Post Office Box 11829, Columbia, SC 29211.