



Section III 2005 NCSBN Annual Meeting

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For Resolutions policy & procedures and forms, see the Resolutions Committee Report and attachments, page 327.

Capital Hilton Hotel – Second Floor Map



Orientation Manual for Delegate Assembly Participants

The purpose of the Orientation Manual is to provide information about the mission, governance and operations of NCSBN. It is hoped that this manual will facilitate the active participation of all Delegate Assembly participants as well as the Board of Directors and committee members.

Following a brief discussion of NCSBN's history, this manual will describe the organization's structure, functions, policies and procedures.

History

The concept of an organization such as NCSBN had its roots as far back as August 1912 when a special conference on state registration laws was held during the American Nurses Association (ANA) convention. At that time, participants voted to create a committee that would arrange an annual conference for people involved with state boards of nursing to meet during the ANA convention. It soon became evident that the committee required a stronger structure to deal with the scope of its concerns. However, for various reasons, the committee decided to remain within the ANA.

Boards of nursing also worked with the National League for Nursing Education (NLNE), which, in 1932, became the ANA's Department of Education. In 1933, by agreement with ANA, NLNE accepted responsibility for advisory services to the State Boards of Nurse Examiners (SBNE) in all education and examination-related matters. Through its Committee on Education, NLNE set up a subcommittee that would address, over the following decade, state board examination issues and problems. In 1937, NLNE published *A Curriculum Guide for Schools of Nursing*. Two years later, NLNE initiated the first testing service through its Committee on Nursing Tests.

Soon after the beginning of World War II, nurse examiners began to face mounting pressures to hasten licensing and to schedule examinations more frequently. In response, participants at a 1942 NLNE conference suggested a "pooling of tests" whereby each state would prepare and contribute examinations in one or more subjects that could provide a reservoir of test items. They recommended that the Committee on Nursing Tests, in consultation with representative nurse examiners, compile the tests in machine-scorable form. In 1943, the NLNE board endorsed the action and authorized its Committee on Nursing Tests to operate a pooling of licensing tests for interested states (the State Board Test Pool Examination or SBTPE). This effort soon demonstrated the need for a clearinghouse whereby state boards could obtain information needed to produce their test items. Shortly thereafter, a Bureau of State Boards of Nursing began operating out of ANA headquarters.

The bureau was incorporated into the ANA bylaws and became an official body within that organization in 1945. Two years later, the ANA board appointed the Committee for the Bureau of State Boards of Nurse Examiners, which was comprised of full-time professional employees of state boards.

In 1961, after reviewing the structure and function of the ANA and its relation to state boards of nursing, the committee recommended that a council replace it. Although council status was achieved, many people continued to be concerned about potential conflicts of interest and recognized the often-heard criticism that professional boards serve primarily the interests of the profession they purport to regulate.

In 1970, following a period of financial crisis for the ANA, a council member recommended that a free-standing federation of state boards be established. After a year of study by the state boards, this proposal was overwhelmingly defeated when the council adopted a resolution to remain with the ANA. However, an ad hoc committee was appointed later to examine the feasibility of the council becoming a self-governing incorporated body. At the council's 1977 meeting, a task force was elected and charged with the responsibility of proposing a specific plan for the formation

of a new independent organization. On June 5, 1978, the Delegate Assembly of ANA's Council of State Boards of Nursing voted 83 to 8 to withdraw from ANA to form the National Council of State Boards of Nursing.

Organizational Mission, Strategic Initiatives and Outcomes

The National Council of State Boards of Nursing (NCSBN), composed of Member Boards, provides leadership to advance regulatory excellence for public protection.

The Strategic Initiatives for 2005-2007, adopted by the 2004 Delegate Assembly, are:

1. Facilitate Member Board excellence through individual and collective development. (Member Boards)
2. Promote evidence-based regulation that provides for public protection. (Regulatory Excellence)
3. Enhance the organizational culture to support change and innovation. (PERC)
4. Position NCSBN as the premier organization to measure entry and continuing competence of nurses and related health care providers. (Competence)
5. Advance NCSBN as the leading source of data, information, and research regarding nursing regulation and related health care issues. (Data)
6. Advance NCSBN as a key partner in nursing and health care regulation in the U.S. and internationally. (U.S./International Partner)

To achieve its strategic initiatives, NCSBN identifies expected outcomes, under which tactics for achieving these outcomes are developed, assessed and refined each fiscal year and provide the organization with a flexible plan within a disciplined focus. Annually, the Board of Directors evaluates the accomplishment of strategic initiatives and outcomes and the directives of the Delegate Assembly.

Organizational Structure and Function

MEMBERSHIP

Membership in NCSBN is extended to those boards of nursing that agree to use, under specified terms and conditions, one or more types of licensing examinations developed by NCSBN. At the present time, there are 60 Member Boards, including those from the District of Columbia, the U.S. Virgin Islands, Puerto Rico, Guam, American Samoa and the Northern Mariana Islands. Boards of nursing may become Member Boards upon approval of the Delegate Assembly, payment of the required fees and execution of a contract for using the NCLEX-RN® examination and/or the NCLEX-PN® examination.

Member Boards maintain their good standing through remittance of fees and compliance with all contract provisions and bylaws. In return, they receive the privilege of participating in the development and use of NCSBN's licensure examinations. Member Boards also receive information services, public policy analyses and research services. Member Boards that fail to adhere to the conditions of membership may have delinquent fees assessed or their membership terminated by the Board of Directors. They may then choose to appeal the Board's decision to the Delegate Assembly.

AREAS

NCSBN's membership is divided into four geographic areas. The purpose of this division is to facilitate communication, encourage regional dialogue on relevant issues and provide diversity of board and committee representation. Delegates elect Area Directors from their respective

Areas through a majority vote of the Delegate Assembly. In addition, there are two Directors-at-Large who are elected by all delegates voting at the Annual Meeting. (See Glossary for list of jurisdictions by Area.)

DELEGATE ASSEMBLY

The Delegate Assembly is the membership body of NCSBN and comprises delegates who are designated by the Member Boards. Each Member Board has two votes and may name two delegates and alternates. The Delegate Assembly meets at NCSBN's Annual Meeting, traditionally held in late July/early August. Special sessions can be called under certain circumstances. Regularly scheduled sessions are held on a rotation basis among Areas.

At the Annual Meeting, delegates elect officers and directors and members of the Committee on Nominations by majority and plurality vote respectively. They also receive and respond to reports from officers and committees and to receive a copy of the annual audit report. They may revise and amend the bylaws by a two-thirds vote, providing the proposed changes have been submitted at least 45 days before the session. In addition, the Delegate Assembly adopts the mission statement and strategic initiatives of NCSBN and approves the substance of all NCLEX® examination contracts between NCSBN and Member Boards, and adopts test plans to be used for the development of the NCLEX examination and the NCLEX examination test service and establishes the fee for the NCLEX examination.

OFFICERS AND DIRECTORS

NCSBN officers include the President, Vice President and Treasurer. Directors consist of four Area Directors and two Directors-at-Large. Only members or staff of Member Boards may hold office, subject to exclusion from holding office if other professional obligations result in an actual or perceived conflict of interest.

No person may hold more than one elected office at the same time. The President shall have served as a delegate, a committee member or an officer prior to being elected to office. An officer shall serve no more than four consecutive years in the same officer position.

The President, Vice President and Treasurer are elected for terms of two years or until their successors are elected. The President, Vice President and Treasurer are elected in even-numbered years.

The four Area Directors are elected for terms of two years or until their successors are elected. Area Directors are elected in odd-numbered years. The two Directors-at-Large are elected each year for a one-year term.

Officers and directors are elected by ballot during the annual session of the Delegate Assembly. Delegates elect Area Directors from their respective areas.

Election is by a majority vote. Write-in votes are prohibited. In the event a majority is not established, the bylaws dictate the reballoting process.

Officers and directors assume their duties at the close of the session at which they were elected. The Vice President fills a vacancy in the office of President. Board appointees fill other officer vacancies until the term expires.

BOARD OF DIRECTORS

The Board of Directors, the administrative body of NCSBN, consists of the nine elected officers. The Board is responsible for the general supervision of the affairs of NCSBN between sessions of the Delegate Assembly. The Board authorizes the signing of contracts, including those between NCSBN and its Member Boards. It also engages the services of legal counsel, approves and adopts

an annual budget, reviews membership status of noncompliant Member Boards and renders opinions, when needed, about actual or perceived conflicts of interest.

Additional duties include the adoption of personnel policies for all staff, appointment of committees, monitoring of committee progress, approval of studies and research pertinent to NCSBN's purpose, and provision for the establishment and maintenance of the administrative offices.

MEETINGS OF THE BOARD OF DIRECTORS

All Board meetings are typically held in Chicago, with the exception of the pre- and post- Annual Meeting Board meetings that are held at the location of the Annual Meeting. Board officers and directors are asked to submit reports and other materials for the meeting at least three weeks prior to each meeting so that they can be copied and distributed with other meeting materials. The call to meeting, agenda and related materials are mailed to Board officers and directors two weeks before the meeting. The agenda is prepared by staff, in consultation with the President, and provided to the membership via the NCSBN Web site (www.ncsbn.org).

A memo or report that describes the item's background and indicates the Board action needed accompanies items for Board discussion and action. Motion papers are available during the meeting and are used so that an accurate record will result. Staff takes minutes of the meeting. A summary of the Board's major decisions is provided for dissemination prior to the release of approved minutes following the next Board meeting.

Resource materials are available to each Board officer and director for use during Board meetings. These materials, which are updated periodically throughout the year, are kept at the NCSBN office and include copies of the articles of incorporation and bylaws, strategic plan, policies and procedures, contracts, budget, test plan, committee rosters, minutes and personnel manual.

COMMUNICATIONS WITH THE BOARD OF DIRECTORS

Communication between Board meetings takes place in several different ways. The Executive Director communicates weekly with the President regarding major activities and confers as needed with the Treasurer about financial matters. In most instances, the Executive Director is the person responsible for communicating with NCSBN consultants about legal, financial and accounting concerns.

This practice was adopted primarily as a way to monitor and control the costs of consultant services. Conference calls can be scheduled, if so desired by the President. Written materials are generally forwarded to Board Members in advance of the call. These materials include committee or staff memos detailing the issue's background as well as Board action required. Staff prepares minutes of the call and submits them at the next regularly scheduled Board meeting.

Board Members use NCSBN letterhead when communicating as representatives of NCSBN.

Committee on Nominations

NCSBN delegates elect representatives to the Committee on Nominations. The committee consists of four people, one from each area, who may be either Board Members or staff of Member Boards. Committee members are elected to two-year terms. One half of the committee members are elected in even-numbered years and one half in odd-number years. They are elected by ballot with a plurality vote. The member receiving the highest number of votes shall serve as Vice Chair in the first year of the member's term and as Chair in the second year of the term. The first meeting of the committee is held concurrent with the first meeting of the Board of Directors in the subsequent fiscal year.

The Committee on Nominations' function is to consider the qualifications of all candidates

for Board of Director officers and for the committee itself and to prepare a slate of qualified candidates. During the Delegate Assembly, additional nominations may be made from the floor.

COMMITTEES

Many of NCSBN's objectives are accomplished through the committee process. Every year, the committees report on their activities and make recommendations to the Board of Directors. At the present time, NCSBN has five standing committees: Examination; Finance; Practice, Regulation, and Education; Bylaws; and Resolutions. Subcommittees, such as the Item Review Subcommittee (Exam), may assist standing committees.

In addition to standing committees, special committees are appointed by the Board of Directors for a defined term to address special issues and concerns. NCSBN conducts an annual call for committee member nominations prior to the beginning of each fiscal year. Committees are governed by their specific charge, and NCSBN policies and procedures. The appointment of Committee Chairs and committee members is a responsibility of the Board of Directors. Committee membership is extended to all current members and staff of Member Boards.

In the appointment process, every effort is made to match the expertise of each individual with the needs of NCSBN. Also considered is balanced representation, whenever possible, among areas, Board Members and staff; registered and licensed practical/vocational nurses; and consumers. Nonmembers may be appointed to special committees as consultants to provide specialized expertise to committees. A Board of Director Liaison and an NCSBN staff member are assigned to assist each committee. The respective roles of Board Liaison, Committee Chairperson and committee staff are provided in NCSBN policy. Each work collaboratively to facilitate committee work and provide support and expertise to committee members to complete the charge. Neither the Board Liaison nor the NCSBN staff are entitled to a vote, but can advise the committee regarding the strategic or operational impact of decisions and recommendation.

Description of Standing Committees

EXAMINATION COMMITTEE

The Examination Committee is comprised of at least nine members. One of the committee members shall be a licensed practical/vocational nurse or a board or staff member of an LPN/VN board of nursing. The Committee Chair shall have served as a member of the committee prior to being appointed as Chair. The purpose of the Examination Committee is to develop the licensure examinations and evaluate procedures needed to produce and deliver the licensure examinations. Toward this end, it recommends test plans to the Delegate Assembly and suggests enhancements, based on research that is important to the development of licensure examinations.

The Examination Committee provides general oversight of National Council Licensure Examination (NCLEX®) process, including psychometrics, item development, test security and administration and quality assurance. Other duties include the selection of appropriate item development panels, test service evaluation, oversight of test service transitions and preparation of written information about the examinations for Member Boards and other interested parties. The committee also regularly evaluates the licensure examinations by means of item analysis, and test and candidate statistics.

One of NCSBN's major objectives is to provide psychometrically sound and legally defensible nursing licensure examinations to Member Boards. Establishing examination validity is a key component of this objective. Users of examinations have certain expectations about what an examination measures and what its results mean; a valid examination is simply one that legitimately fulfills these expectations.

Validating a licensure examination is an evidence-gathering process to determine two things: (1)

whether or not the examination actually measures competencies required for safe and effective job performance, and (2) whether or not it can distinguish between candidates who do and do not possess those competencies. An analysis of the job for which the license is given is essential to validation.

There are several methods for analyzing jobs, including compilation of job descriptions, opinions of experts and surveys of job incumbents. Regardless of the method used, the outcome of the job analysis is a description of those tasks that are most important for safe and effective practice. The results of the job analysis can be used to devise a framework describing the job, which can then be used as a basis for a test plan and for a set of instructions for item writers. The test plan is the blueprint for assembling forms of the test, and usually specifies major content or process dimensions and percentages of questions that will be allotted to each category within the dimension. The instructions for item writers may take the form of a detailed set of knowledge, skills and abilities (KSA) statements or competency statements which the writers will use as the basis for developing individual test items. By way of the test plan and KSA statements, the examination is closely linked to the important job functions revealed through the job analysis. This fulfills the first validation criterion: a test that measures important job-related competencies.

The second criterion, related to the examination's ability to distinguish between candidates who do and do not possess the important competencies, is most frequently addressed in licensure examinations through a criterion-referenced standard setting process. Such a process involves the selection of a passing standard to determine which candidates pass and which fail. Expert judges with first-hand knowledge of what constitutes safe and effective practice for entry-level nurses are selected to recommend a series of passing standards for this process. Judges are trained in conceptualizing the minimally competent candidate (performing at the lowest acceptable level), and they go through a structured process of judging success rates on each individual item of the test. Their pooled judgments result in identification of a series of recommended passing standards. Taking these recommendations along with other data relevant to identification of the level of competence, the Board of Directors sets a passing standard that distinguishes between candidates who do and do not possess the essential competencies, thus fulfilling the second validation criterion.

Having validation evidence based on job analysis and criterion-referenced standard setting processes and utilizing item construction and test delivery processes based on sound psychometric principles constitute the best legal defense available for licensing examinations. For most of the possible challenges that a candidate might bring against an examination, if the test demonstrably measures the possession of important job-related skills, its use in the licensure process is likely to be upheld in a court of law.

FINANCE COMMITTEE

The Finance Committee is comprised of at least four members and the Treasurer, who serves as the Chair. The committee's primary purpose is to assure prudence and integrity of fiscal management and responsiveness to Member Board needs. It also reviews financial status on a quarterly basis and provides the Board of Directors with a proposed annual budget prior to each new fiscal year.

PRACTICE, REGULATION AND EDUCATION COMMITTEE

The Practice, Regulation and Education Committee is comprised of at least six members. The committee's purpose is to provide general oversight of nursing practice, regulation and education issues. It periodically reviews and revises the *Model Nursing Practice Act* and *Model Nursing Administrative Rules*, and recommends white papers, guidelines or other resources to the Board of Director for Member Board use. It also reviews NCSBN research data, conducts membership surveys and disseminates information to Member Boards and other interested parties. In the past, the committee has utilized subcommittees to study various issues (e.g., continued competence,

foreign nurse issues and accreditation/approval in nursing education).

RESOLUTIONS COMMITTEE

The Resolutions Committee is comprised of at least four members generally representing each of the four NCSBN geographic areas and also includes one member of the Finance Committee. The committee's purpose is to review, evaluate and report to the Delegate Assembly on all resolutions and motions submitted by Member Boards. The committee is governed by the operational policies and procedures, the standing rules and the bylaws.

BYLAWS COMMITTEE

The Bylaws Committee is comprised of at least four members. The committee reviews and makes recommendations on proposed bylaws amendments as directed by the Board of Directors or the Delegate Assembly. The bylaws may be amended at any annual meeting or special session of the Delegate Assembly upon written notice to the Member Boards of the proposed amendments at least 45 days prior to the Delegate Assembly session and a two-thirds affirmative vote of the delegates present and voting or written notice that proposed amendments may be considered at least five days prior to the Delegate Assembly session and a three-quarters affirmative vote of the delegates present, and in no event shall any amendments be adopted without at least five days written notice prior to the Delegate Assembly session that proposed amendments may be considered at such session.

NCSBN STAFF

NCSBN staff members are hired by the Executive Director. Their primary role is to implement the Delegate Assembly's and Board of Directors' policy directives and provide assistance to committees.

GENERAL DELEGATE ASSEMBLY INFORMATION

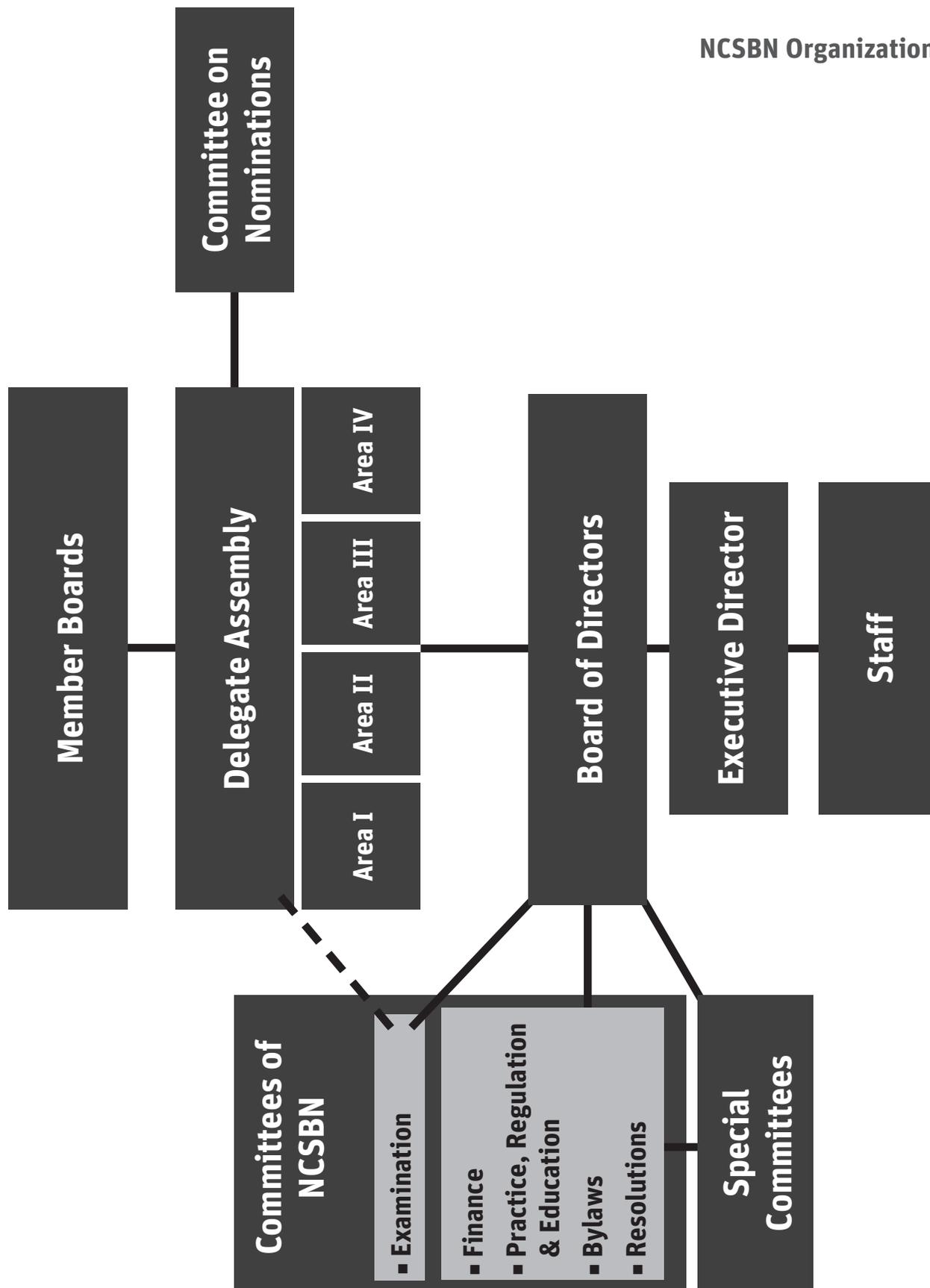
Agendas for each session of the Delegate Assembly are prepared by the President in consultation with the Board of Directors and Executive Director and approved by the Board of Directors. At least 45 days prior to the Annual Meeting, Member Boards are sent the recommendations to be considered by the Delegate Assembly. A Business Book is provided to all Annual Meeting registrants, which contains the agenda, reports requiring Delegate Assembly action, reports of the Board of Directors, reports of special and standing committees, and strategic initiatives and outcomes.

Prior to the annual session of the Delegate Assembly, the President appoints the Credentials and Elections Committees, as well as the Committee to Approve Minutes. The President must also appoint a Timekeeper, a Parliamentarian and Pages.

The function of the Credentials Committee is to provide delegates with identification bearing the number of votes that the delegate is entitled. It also presents oral and written reports at the opening session of the Delegate Assembly and immediately preceding the election of officers and Committee on Nominations. The Elections Committee conducts all elections that are decided by ballot in accordance with the bylaws and standing rules. The Resolutions Committee initiates resolutions if deemed necessary and receives, edits and evaluates all others in terms of their relationship to NCSBN's mission and fiscal impact to the organization. At a time designated by the President, it reports to the Delegate Assembly.

The parliamentarian keeps minutes of the Delegate Assembly. These minutes are then reviewed, corrected as necessary and approved by the Committee to Approve Minutes, which includes the Executive Director who serves as Corporate Secretary.

NCSBN Organizational Chart



NCSBN Bylaws

Revisions adopted - 8/29/87
Amended - 8/19/88
Amended - 8/30/90
Amended - 8/01/91
Revisions adopted - 8/05/94
Amended - 8/20/97
Amended - 8/8/98
Revisions adopted - 8/11/01
Amended - 08/07/03

Article I

NAME

The name of this organization shall be the National Council of State Boards of Nursing, Inc. (the “National Council”).

Article II

PURPOSE AND FUNCTIONS

Section 1. Purpose. The purpose of the National Council is to provide an organization through which state boards of nursing act and counsel together on matters of common interest and concern affecting the public health, safety and welfare, including the development of licensing examinations in nursing.

Section 2. Functions. The National Council’s functions shall include but not be limited to providing services and guidance to its members in performing their regulatory functions regarding entry into nursing practice, continued safe nursing practice and nursing education programs. The National Council provides Member Boards with examinations and standards for licensure and credentialing; promotes uniformity in standards and expected outcomes in nursing practice and education as they relate to the protection of the public health, safety and welfare; provides information, analyses and standards regarding the regulation of nursing practice and nursing education; promotes the exchange of information and serves as a clearinghouse for matters related to nursing regulation.

Article III

MEMBERS

Section 1. Definition. A state board of nursing is the governmental agency empowered to license and regulate nursing practice in any state, territory or political subdivision of the United States of America.

Section 2. Qualifications. Any state board of nursing that agrees to use one or more National Council Licensing Examinations (the “NCLEX® examination”) under the terms and conditions specified by the National Council and pays the required fees may be a member of the National Council (“Member Board”).

Section 3. Admission. A state board of nursing shall become a member of the National Council and be known as a Member Board upon approval by the Delegate Assembly, as described in Article IV, payment of the required fees and execution of a contract for using the NCLEX® examination.

Section 4. Areas. The Delegate Assembly shall divide the membership into numbered geographical Areas. At no time shall the number of Areas be less than three nor more than six. New members shall be assigned to existing Areas by the Board of Directors. The purpose of this division is to facilitate communication, encourage regional dialogue on National Council issues and provide diversity of representation on the Board of Directors and on committees.

Section 5. Fees. The annual member fees, as set by the Delegate Assembly, shall be payable each October 1.

Section 6. Privileges. Membership privileges include but are not limited to the right to vote as prescribed in these bylaws and the right to assist in the development of the NCLEX® examination, except that a Member Board that uses both the NCLEX® examination and another examination leading to the same license shall not participate in the development of the NCLEX® examination to the extent that such participation would jeopardize the integrity of the NCLEX® examination.

Section 7. Noncompliance. Any Member Board whose fees remain unpaid after January 15 is not in good standing. Any Member Board which does not comply with the provisions of the bylaws and contracts of the National Council shall be subject to immediate review and possible termination by the Board of Directors.

Section 8. Appeal. Any termination of membership by the Board of Directors is subject to appeal to the Delegate Assembly.

Section 9. Reinstatement. A Member Board in good standing that chooses to terminate membership shall be required to pay only the current fee as a condition of future reinstatement. Any membership that has been terminated for nonpayment of fees shall be eligible for reinstatement to membership upon payment of the current fee and any delinquent fees.

Article IV

DELEGATE ASSEMBLY

Section 1. Composition.

- (a) *Designation of Delegates.* The Delegate Assembly shall be comprised of no more than two (2) delegates designated by each Member Board as provided in the Standing Rules of the Delegate Assembly (“Standing Rules”). An alternate duly appointed by a Member Board may replace a delegate and assume all delegate privileges.
- (b) *Qualification of Delegates.* Members and employees of Member Boards shall be eligible to serve as delegates until their term or their employment with a Member Board ends. A National Council officer or director may not represent a Member Board as a delegate.
- (c) *Term.* Delegates and alternates serve from the time of appointment until replaced.

Section 2. Voting.

- (a) *Annual Meetings.* Each Member Board shall be entitled to two votes. The votes may be cast by either one or two delegates. There shall be no proxy or absentee voting at the Annual Meeting.
- (b) *Special Meetings.* A Member Board may choose to vote by proxy at any special session of the Delegate Assembly. A proxy vote shall be conducted by distributing to Member Boards a proxy ballot listing a proposal requiring either a yes or no vote. A Member Board may authorize the secretary of the National Council or a delegate of another Member Board to cast its votes.

Section 3. Authority. The Delegate Assembly, the membership body of the National Council, shall provide direction for the National Council through resolutions and enactments, including adoption of the mission and strategic initiatives, at any Annual Meeting or special session. The Delegate Assembly shall approve all new National Council memberships; approve the substance of all NCLEX® examination contracts between the National Council and Member Boards; adopt test plans to be used for the development of the NCLEX® examination; approve the NCLEX® examination test service; and establish the fee for the NCLEX® examination.

Section 4. Annual Meeting. The National Council Annual Meeting shall be held at a time and place as determined by the Board of Directors. The Delegate Assembly shall meet each year during the Annual Meeting. The official call to that meeting, giving the time and place, shall be conveyed to each Member Board at least 90 days before the Annual Meeting. In the event of a national emergency, the Board of Directors by a two-thirds vote may cancel the Annual Meeting and shall schedule a meeting of the Delegate Assembly as soon as possible to conduct the business of the National Council.

Section 5. Special Session. The Board of Directors may call and, upon written petition of at least 10 Member Boards made to the Board of Directors, shall call a special session of the Delegate Assembly. Notice containing the general nature of business to be transacted and date and place of said session shall be sent to each Member Board at least 10 days before the date for which such special session is called.

Section 6. Quorum. The quorum for conducting business at any session of the Delegate Assembly shall be at least one delegate from a majority of the Member Boards and two officers present in person or, in the case of a special session, by proxy.

Section 7. Standing Rules. The Board of Directors shall present and the Delegate Assembly shall adopt Standing Rules for each Delegate Assembly meeting.

Article V

OFFICERS AND DIRECTORS

Section 1. Officers. The elected officers of the National Council shall be a President, a Vice President and a Treasurer.

Section 2. Directors. The directors of the National Council shall consist of two Directors-at-Large and a Director from each Area.

Section 3. Qualifications. Members and employees of Member Boards shall be eligible to serve as National Council officers and directors until their term or their employment with a Member Board ends. Members of a Member Board who become permanent employees of a Member Board will continue their eligibility to serve.

Section 4. Qualifications for President. The President shall have served National Council as either a delegate, a committee member, a director or an officer before being elected to the office of President.

Section 5. Election of Officers and Directors.

- (a) *Time and Place.* Election of officers and directors shall be by ballot of the Delegate Assembly during the Annual Meeting.
- (b) *Officers and Directors-at-Large.* Officers and Directors-at-Large shall be elected by majority vote of the Delegate Assembly.
- (c) *Area Directors.* Each Area shall elect its Area Director by majority vote of the delegates from each such Area.

- (d) *Run-Off Balloting.* If a candidate for officer or director does not receive a majority vote on the first ballot, reballoting shall be limited to the two candidates receiving the highest numbers of votes for each position. In the case of a tie on the reballoting, the final selection shall be determined by lot.
- (e) *Voting.* Voting for officers and directors shall be conducted in accordance with these bylaws and the Standing Rules. Write-in votes shall be prohibited.

Section 6. Terms of Office. The President, Vice President, Treasurer and Area Directors shall be elected for a term of two years or until their successors are elected. Directors-at-Large shall be elected for a term of one year or until their successors are elected. The President, Vice President and Treasurer shall be elected in even numbered years. The Area Directors shall be elected in odd numbered years. Officers and directors shall assume their duties at the close of the Annual Meeting of the Delegate Assembly at which they are elected. No person shall serve more than four consecutive years in the same position.

Section 7. Limitations. No person may hold more than one officer position or directorship at one time. No officer or director shall hold elected or appointed office or a salaried position in a state, regional or national association or body if the office or position might result in a potential or actual, or the appearance of, a conflict of interest with the National Council, as determined by the Committee on Nominations before election to office and as determined by the Board of Directors after election to office. If incumbent officers or directors stand for election for another office or director position, the term in their current position shall terminate at the close of the Annual Meeting at which the election is held.

Section 8. Vacancies. A vacancy in the office of President shall be filled by the Vice President. The Board of Directors shall fill all other vacancies by appointment. The person filling the vacancy shall serve until the next Annual Meeting and a successor is elected. The Delegate Assembly shall elect a person to fill any remainder of the term.

Section 9. Responsibilities of the President. The President shall preside at all meetings of the Delegate Assembly and the Board of Directors, assume all powers and duties customarily incident to the office of President, and speak on behalf of and communicate the policies of the National Council.

Section 10. Responsibilities of the Vice President. The Vice President shall assist the President, perform the duties of the President in the President's absence, and fill any vacancy in the office of the President until the next Annual Meeting.

Section 11. Responsibilities of the Treasurer. The Treasurer shall serve as the Chair of the Finance Committee and shall assure that quarterly reports are presented to the Board of Directors, and that annual financial reports are provided to the Delegate Assembly.

Article VI

BOARD OF DIRECTORS

Section 1. Composition. The Board of Directors shall consist of the elected officers and directors of the National Council.

Section 2. Authority. The Board of Directors shall transact the business and affairs and act on behalf of the National Council except to the extent such powers are reserved to the Delegate Assembly as set forth in these bylaws and provided that none of the Board's acts shall conflict with resolutions or enactments of the Delegate Assembly. The Board of Directors shall report annually to the Delegate Assembly.

Section 3. Meetings of the Board of Directors. The Board of Directors shall hold its annual meeting

in association with the Annual Meeting. The Board may schedule other regular meetings of the Board at other times as necessary to accomplish the work of the Board. Publication of the dates for such regular meetings in the minutes of the Board meeting at which the dates are selected shall constitute notice of the scheduled regular meetings. Special meetings of the Board of Directors may be called by the President or shall be called upon written request of at least three members of the Board of Directors. At least 24 hours notice shall be given to each member of the Board of Directors of a special meeting. The notice shall include a description of the business to be transacted.

Section 4. Removal from Office. A member of the Board of Directors may be removed with or without cause by a two-thirds vote of the Delegate Assembly. The Board of Directors may remove any member of the Board of Directors from office upon conviction of a felony, gross misconduct, failure to perform, dereliction of duties or conflict of interest by a two-thirds vote of the Board of Directors. The individual shall be given 30 days written notice of the proposed removal.

Section 5. Appeal. A member of the Board of Directors removed by the Board of Directors may appeal to the Delegate Assembly at its next Annual Meeting. Such individual may be reinstated by a two-thirds vote of the Delegate Assembly.

Article VII

NOMINATIONS AND ELECTIONS

Section 1. Committee on Nominations.

- (a) *Composition.* The Committee on Nominations shall be comprised of one person from each Area. Committee members shall be members or employees of Member Boards within the Area.
- (b) *Term.* The term of office shall be two years. One half of the Committee members shall be elected in even-numbered years and one-half in odd-number years. Members shall assume duties at the close of the Annual Meeting at which they are elected.
- (c) *Election.* The Committee shall be elected by plurality vote of the Delegate Assembly at the Annual Meeting. The member receiving the highest number of votes shall serve as Vice Chair in the first year of the member's term and as Chair in the second year of the term.
- (d) *Limitation.* A member elected or appointed to the Committee on Nominations may not be nominated for an officer or director position during the term for which that member was elected or appointed.
- (e) *Vacancy.* A vacancy occurring in the committee shall be filled from the remaining candidates from the Area in which the vacancy occurs, in order of votes received. If no remaining candidates from an Area can serve, the Board of Directors shall fill the vacancy with an individual from the Area who meets the qualifications of Section 1(a) of this Article. If the vacancy is the Chair, the other person serving the second year of a two-year term shall be the Chair. If the vacancy is the Vice Chair, the other person serving the first year of a two-year term shall become the Vice Chair. The person filling the vacancy shall serve the remainder of the term.
- (f) *Duties.* The Committee on Nominations shall consider the qualifications of all nominees for officers and directors and the Committee on Nominations and present a slate of qualified candidates for vote at the Annual Meeting. The Committee's report shall be read at the first session of the Delegate Assembly, when additional nominations may be made from the floor. No name shall be placed in nomination without the written consent of the nominee.

Article VIII

MEETINGS

Section 1. Participation.

- (a) *Delegate Assembly Session.*
- (i) *Member Boards.* Members and employees of Member Boards shall have the right, subject to the Standing Rules of the Delegate Assembly, to speak at all open sessions and forums of the Delegate Assembly, provided that only delegates shall be entitled to vote and only delegates and members of the Board of Directors may make motions at the Delegate Assembly, except the Examination Committee may bring motions to approve test plans pursuant to Article X, Section 1(a).
 - (ii) *Public.* All sessions of the Delegate Assembly held in accordance with Sections 4 and 5 of Article IV of these bylaws shall be open to the public, except executive sessions, provided that the minutes reflect the purpose of, and any action taken in, executive session.
- (b) *Delegate Assembly Forums.* Participation in forums conducted in association with the Annual Meeting shall be governed by the Standing Rules of the Delegate Assembly.
- (c) *Meetings.* National Council, including all committees thereof, may establish methods of conducting its business at all other meetings provided that the meetings of the Board of Directors and committees are open to members and employees of Member Boards.
- (d) *Interactive Communications.* Meetings held with one or more participants attending by telephone conference call, video conference or other interactive means of conducting conference communications constitute meetings where valid decisions may be made. A written record documenting that each member was given notice of the meeting, minutes reflecting the names of participating members and a report of the roll call on each vote shall be distributed to all members of the group and maintained at the National Council Office.
- (e) *Manner of Transacting Business.* To the extent permitted by law and these bylaws, business may be transacted by electronic communication or by mail, in which case a report of such action shall be made part of the minutes of the next meeting.

Article IX

EXECUTIVE DIRECTOR

Section 1. Appointment. The Executive Director shall be appointed by the Board of Directors. The selection or termination of the Executive Director shall be by a majority vote of the Board of Directors.

Section 2. Authority. The Executive Director shall serve as the agent and Chief Administrative Officer of the National Council and shall possess the authority and shall perform all duties incident to the office of Executive Director, including the management and supervision of the office, programs and services of National Council, the disbursement of funds and execution of contracts (subject to such limitations as may be established by the Board of Directors). The Executive Director shall serve as Corporate Secretary and oversee maintenance of all documents and records of the National Council and shall perform such additional duties as may be defined and directed by the Board.

Section 3. Evaluation. The Board of Directors shall conduct an annual written performance appraisal of the Executive Director, and shall set the Executive Director's annual salary.

Article X

COMMITTEES

Section 1. Standing Committees. National Council shall maintain the following standing committees.

- (a) *Examination Committee.* The Examination Committee shall be comprised of at least nine members. One of the committee members shall be a licensed practical/vocational nurse or a board or staff member of an LPN/VN board. The Committee Chair shall have served as a member of the committee prior to being appointed as Chair. The Examination Committee shall provide general oversight of the NCLEX® examination process, including examination item development, security, administration and quality assurance to ensure consistency with the Member Boards' need for examinations. The Examination Committee shall approve item development panels and recommend test plans to the Delegate Assembly. Subcommittees may be appointed to assist the Examination Committee in the fulfillment of its responsibilities.
- (b) *Finance Committee.* The Finance Committee shall be comprised of at least four members and the Treasurer, who shall serve as Chair. The Finance Committee shall review the annual budget, the National Council's investments and the audit. The Committee shall recommend a budget to the Board of Directors and advise the Board on fiscal policy to assure prudence and integrity of fiscal management and responsiveness to Member Board needs.
- (c) *Practice, Regulation, and Education Committee.* The Practice, Regulation and Education Committee shall be comprised of at least six members. The Committee shall provide general oversight of nursing practice, regulation and education issues.
- (d) *Bylaws Committee.* The Bylaws Committee shall be comprised of at least four members. The Committee shall review and make recommendations on proposed bylaws amendments as directed by the Board of Directors or the Delegate Assembly.
- (e) *Resolutions Committee.* The Resolutions Committee shall be comprised of at least four members, including one member from the Finance Committee. The Committee shall, in accordance with the Standing Rules, review, evaluate and report to the Delegate Assembly on all resolutions and motions submitted by Member Boards.

Section 2. Special Committees. The Board of Directors may appoint special committees as needed to accomplish the mission of the National Council and to assist any standing committee in the fulfillment of its responsibilities. Special committees may include subcommittees, task forces, focus groups, advisory panels or other groups designated by the Board of Directors.

Section 3. Delegate Assembly Committees. The President shall appoint such Delegate Assembly Committees as provided in the Standing Rules and as necessary to conduct the business of the Delegate Assembly.

Section 4. Committee Membership.

- (a) *Composition.* Members of standing and special committees shall be appointed by the Board of Directors. Standing committees shall include only current members and employees of Member Boards. Special committees may also include consultants or other individuals selected for their special expertise to accomplish a committee's charge. In appointing committees, one representative from each Area shall be selected unless a qualified member from each Area is not available considering the expertise needed for the committee work. The President, or President's delegate, shall be an ex-officio member of all committees except the Committee on Nominations.
- (b) *Term.* The standing committee members shall be appointed for two years or until their successors are appointed. Standing committee members may apply for reappointment to the committee. Members of special committees shall serve at the discretion of the Board of Directors.

- (c) *Vacancy.* A vacancy may occur when a committee member resigns or fails to meet the responsibilities of the committee as determined by the Board of Directors. The vacancy may be filled by appointment by the Board of Directors for the remainder of the term.
- (d) *Committee Duties.*
1. *Budget.* Standing committees shall operate within the assigned budget for the fiscal year. Special committees will be assigned a budget to use in accomplishing the charge. Committees shall not incur expenses in addition to the approved budgeted amount without prior authorization of the Board of Directors.
 2. *Policies.* Each standing committee shall establish policies to expedite the work of the committee, subject to review and modification by the Board of Directors. Special committees shall comply with general policies established by the Board of Directors.
 3. *Records and Reports.* Each committee shall keep minutes. Special committees shall provide regular updates to the Board of Directors regarding progress toward meeting their charge. Standing committees shall submit quarterly reports to, and report on proposed plans as requested by, the Board of Directors. Special committees shall submit a report and standing committees shall submit annual reports to the Delegate Assembly.

Article XI

FINANCE

Section 1. Audit. The financial records of the National Council shall be audited annually by a certified public accountant appointed by the Board of Directors. The annual audit report shall be provided to the Delegate Assembly.

Section 2. Fiscal Year. The fiscal year shall be from October 1 to September 30.

Article XII

INDEMNIFICATION

Section 1. Direct Indemnification. To the full extent permitted by, and in accordance with the standards and procedures prescribed by Sections 5741 through 5750 of the Pennsylvania Nonprofit Corporation Law of 1988 or the corresponding provision of any future Pennsylvania statute, the corporation shall indemnify any person who was or is a party or is threatened to be made a party to any threatened, pending, or completed action, suit or proceeding, whether civil, criminal, administrative or investigative, by reason of the fact that he or she is or was a director, officer, employee, agent or representative of the corporation, or performs or has performed volunteer services for or on behalf of the corporation, or is or was serving at the request of the corporation as a director, officer, employee, agent or representative of another corporation, partnership, joint venture, trust or other enterprise, against expenses (including but not limited to attorney's fees), judgments, fines and amounts paid in settlement actually and reasonably incurred by the person in connection with such action, suit or proceeding.

Section 2. Insurance. To the full extent permitted by Section 5747 of the Pennsylvania Nonprofit Corporation Law of 1988 or the corresponding provision of any future Pennsylvania statute, the corporation shall have power to purchase and maintain insurance on behalf of any person who is or was a director, officer, employee, agent or representative of the corporation; or performs or has performed volunteer services for or on behalf of the corporation; or is, or was serving at the request of the corporation as a director, officer, employee, agent or representative of another corporation, partnership, joint venture, trust or other enterprise, against any liability asserted against him or her and incurred by him or her in any such capacity, whether or not the corporation would have the power to indemnify him or her against such liability under the provisions of Section 1 of this Article.

Section 3. Additional Rights. Pursuant to Section 5746 of the Pennsylvania Nonprofit Corporation Law of 1988 or the corresponding provisions of any future Pennsylvania statute, any indemnification provided pursuant to Sections 1 or 2 of this Article shall:

- (a) Not be deemed exclusive of any other rights to which a person seeking indemnification may be entitled under any future bylaw, agreement, vote of members or disinterested directors or otherwise, both as to action in his or her official capacity and as to action in another capacity while holding such official position; and
- (b) Continue as to a person who has ceased to be a director, officer, employee, agent or representative of, or provider of volunteer services for or on behalf of the corporation and shall inure to the benefit of the heirs, executors and administrators of such a person.

Article XIII

PARLIAMENTARY AUTHORITY

The rules contained in the current edition of *Robert's Rules of Order Newly Revised* shall govern the National Council in all cases not provided for in the articles of incorporation, bylaws and any special rules of order adopted by the National Council.

Article XIV

AMENDMENT OF BYLAWS

These bylaws may be amended at any Annual Meeting or special session of the Delegate Assembly upon:

- (a) Written notice to the Member Boards of the proposed amendments at least 45 days prior to the Delegate Assembly session and a two-thirds affirmative vote of the delegates present and voting; or
- (b) Written notice that proposed amendments may be considered at least five days prior to the Delegate Assembly session and a three-quarters affirmative vote of the delegates present and voting.

In no event shall any amendments be adopted without at least five days written notice prior to the Delegate Assembly session that proposed amendments may be considered at such session.

Article XV

DISSOLUTION

Section 1. Plan. The Board of Directors at an annual, regular or special meeting may formulate and adopt a plan for the dissolution of the National Council. The plan shall provide, among other things, that the assets of the National Council be applied as follows:

Firstly, all liabilities and obligations of the National Council shall be paid or provided for.

Secondly, any assets held by the National Council that require return, transfer or conveyances, as a result of the dissolution, shall be returned, transferred or conveyed in accordance with such requirement.

Thirdly, all other assets, including historical records, shall be distributed in considered response to written requests of historical, educational, research, scientific or institutional health tax exempt organizations or associations, to be expended toward the advancement of nursing practice, regulation and the preservation of nursing history.

Section 2. Acceptance of Plan. Such plan shall be acted upon by Delegate Assembly at an Annual or legally constituted special session called for the purpose of acting upon the proposal to dissolve. Seventy-five percent (75%) of all Delegates present at a meeting at which a quorum is present must vote affirmatively to dissolve.

Section 3. Conformity to Law. Such plan to dissolve must conform to the law under which National Council is organized and to the Internal Revenue Code concerning dissolution of exempt corporations. This requirement shall override the provisions of Sections 1 and 2 herein.

NCSBN Glossary

A

Accredit

To recognize (an educational institution) as maintaining standards that qualify the graduates for admission to higher or more specialized institutions or for professional practice.¹

Accrediting Agency

See Nursing School Accrediting Agency

ACNM Certification Council Inc. (ACC)

National certifying body for Certified-Nurse Midwives (CNMs) and Certified Midwives (CMs). ACC's mission is to protect and serve the public by providing the certification standard for individuals educated in the profession of midwifery.²

Administrative Rules

Used by boards of nursing to promulgate rules/regulations to further interpret and implement the Nursing Practice Act, as authorized in most jurisdictions. Rules/regulations cannot conflict with law and once adopted, have the force and effect of law.

Advanced Assessment Strategies: Assessing Higher-Level Thinking

Online course offered through NCSBN Learning Extension for nursing educators. Users earn 15.6 contact hours for completing the course.

Advanced Practice Registered Nurse (APRN)

A master's prepared nurse holding a graduate degree in nursing, who has completed a program of study in a specialty area in an accredited nursing program, has taken a licensing examination in the same area and has been granted a license to practice as an APRN. The hallmark of APRN practice is the assumption by the APRN of primary responsibility for the direct care of patients/clients in relation to their human needs, disease states, and therapeutic and technologic interventions. Subcategories of APRN licensure include: nurse practitioner (NP), certified registered nurse anesthetist (CRNA), certified nurse midwife (CNM) and clinical nurse specialist (CNS). A nurse seeking recognition as an APRN must be academically

prepared for the expanded scope of practice described as APRN nursing.

Agent Role

NCSBN once served as an agent for 41 boards of nursing for reporting past, or legacy data (1996-1999). NCSBN continues to serve as an agent (for ongoing discipline reporting) for 26 boards. NCSBN Member Boards continue to share discipline data through Nursys®. NCSBN is also working to obtain discipline information from states that either directly report to the HIPDB or use another agent, so that the discipline data NCSBN has is complete. Although all boards of nursing are authorized to query the HIPDB, there is also a fee; NCSBN continues to provide discipline data for use by Member Boards at no charge.

Alternative Dispute Resolution (ADR)

A forum or means for resolving disputes (as arbitration or private judging) that exists outside the state or federal judicial system.³

Alternative Item Format

Previously known as an innovative item format; an NCLEX® examination item (question) that takes advantage of technology and uses a format other than standard, four-option, multiple-choice items to assess candidate ability. Alternative item formats may include multiple-response items (requiring a candidate to select one or more than one response), fill-in-the-blank items (requiring a candidate to type in number(s) within a calculation item), hot spot items (asking a candidate to identify an area on a picture or graphic), a chart/exhibit format (where candidates are presented with a problem and use the information in the chart/exhibit to answer the problem), and a drag-and-drop item type (requiring a candidate to rank or move options to provide the correct answer). Any item format, including standard multiple-choice items, may include charts, tables or graphic images.

Alternative Program

A voluntary, private opportunity for chemically dependent nurses who meet specified criteria to have their recovery closely monitored by program staff in lieu of disciplinary action.

American Academy of Nurse Practitioners (AANP)

The largest and only full-service professional

References

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12. American Medical Association Web site. (n.d.) *About AMA*. Retrieved 4 April 2005, from <http://www.ama-assn.org/ama/pub/category/1815.html>
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membership organization in the U.S. for nurse practitioners of all specialties.⁴

American Association of Colleges of Nursing (AACN)

A national voice for America's baccalaureate and higher degree nursing education programs. AACN's educational, research, governmental advocacy, data collection, publications and other programs work to establish quality standards for bachelor- and graduate-degree nursing education, assist deans and directors to implement those standards, influence the nursing profession to improve health care, and promote public support of baccalaureate and graduate education, research, and practice in nursing — the nation's largest health care profession.⁵

American Association of Critical Care Nurses (AACN)

Provides and inspires leadership to establish work and care environments that are respectful, healing and humane. AACN is committed to providing the highest quality resources to maximize nurses' contribution to caring and improving the health care of critically ill patients and their families.⁶

American Association of Nurse Anesthetists (AANA)

A professional association representing more than 30,000 Certified Registered Nurse Anesthetists (CRNAs) nationwide. The AANA promulgates education, and practice standards and guidelines, and affords consultation to both private and governmental entities regarding nurse anesthetists and their practice.⁷

American College of Nurse Midwives (ACNM)

Provides research, accredits midwifery education programs, administers and promotes continuing education programs, establishes clinical practice standards, and creates liaisons with state and federal agencies and members of Congress. The mission of ACNM is to promote the health and well being of women and infants within their families and communities through the development and support of the profession of midwifery as practiced by certified nurse-midwives (CNMs), and certified midwives (CMs). The philosophy inherent in the profession states that nurse-midwives believe every individual has the right to safe, satisfying health care with respect for

human dignity and cultural variations.⁸

American Dental Association (ADA)

A professional association of dentists committed to the public's oral health, ethics, science and professional advancement; leading a unified profession through initiatives in advocacy, education, research and the development of standards.⁹

American Dietetic Association (ADA)

The nation's largest organization of food and nutrition professionals.¹⁰

American Immigration Lawyers Association (AILA)

A national association of over 8,000 attorneys and law professors who practice and teach immigration law. AILA member attorneys represent tens of thousands of U.S. families who have applied for permanent residence for their spouses, children, and other close relatives to lawfully enter and reside in the United States. AILA members also represent thousands of U.S. businesses and industries which sponsor highly skilled foreign workers seeking to enter the United States in a temporary or — having proven the unavailability of U.S. workers — permanent basis. AILA members also represent foreign students, entertainers, athletes, and asylum seekers, often on a pro bono basis.¹¹

American Medical Association (AMA)

The national professional organization for all physicians. The AMA serves as the steward of medicine and leader of the medical profession. The AMA speaks out on issues important to patients and the nation's health.¹²

American Nurses Association (ANA)

The only full-service professional organization representing the nation's 2.7 million registered nurses (RNs) through its 54 constituent member associations. The ANA advances the nursing profession by fostering high standards of nursing practice, promoting the economic and general welfare of nurses in the workplace, projecting a positive and realistic view of nursing, and by lobbying the Congress and regulatory agencies on health care issues affecting nurses and the public.¹³

American Nurses Credentialing Center (ANCC)

A subsidiary of American Nurses Association that provides tangible recognition of professional achievement in a defined functional or clinical area of nursing. More than 150,000 nurses throughout the U.S. and its territories in 40 specialty and advanced practice areas of nursing carry ANCC certification. While the role for nurses continues to evolve, ANCC has responded positively by the reconceptualization of certification and Open Door 2000, a program that enables all qualified RNs, regardless of their educational preparation, to become certified in any of five specialty areas: Gerontology, Medical-Surgical, Pediatrics, Perinatal and Psychiatric and Mental Health Nursing.¹⁴

American Organization of Nurse Executives (AONE)

A subsidiary of the American Hospital Association, and national organization of nearly 4,000 nurses who design, facilitate and manage care. Its mission is to represent nurse leaders who improve health care. AONE members are leaders in collaboration and catalysts for innovation.¹⁵

Americans for Nursing Shortage Relief (ANSR)

An alliance of 49 national nursing organizations and five friends of nursing organizations and companies. ANSR is committed to promoting legislative and regulatory solutions to the current and impending nursing shortage.¹⁶

Americans with Disabilities Act (ADA)

Effective July 26, 1992, this federal law prohibits private employers, state and local governments, employment agencies and labor unions from discriminating against qualified individuals with disabilities in job application procedures, hiring, firing, advancement, compensation, job training, and other terms, conditions and privileges of employment. An individual with a disability is a person who has a physical or mental impairment that substantially limits one or more major life activities; has a record of such an impairment; or is regarded as having such an impairment.¹⁷

APRN Certification Programs

In January 2002, the Board of Directors approved criteria for both the certification programs and the accrediting agencies that were developed by the Advanced Practice Task Force. The Requirements for Accrediting

Agencies and the Criteria for Certification Programs (available for download at ncsbn.org) represent required elements of certification programs that would result in a legally defensible examination suitable for the regulation of advanced practice nurses.

APRN Compact

Addresses the need to promote consistent access to quality, advanced practice nursing care within states and across state lines. The Uniform APRN Licensure/Authority to Practice Requirements, developed by NCSBN with APRN stakeholders in 2000, establishes the foundation for this APRN Compact. Similar to the existing Nurse Licensure Compact for recognition of RN and LPN licenses, the APRN Compact offers states the mechanism for mutually recognizing APRN licenses/authority to practice. This is a significant step forward for the increasing access and accessibility to qualified APRNs. A state must either be a member of the current nurse licensure compact for RN and LPN, or choose to enter into both compacts simultaneously to be eligible for the APRN Compact.

Area

One of four designated geographic regions of NCSBN Member Boards.

Area I	Area II	Area III	Area IV
Alaska	Illinois	Alabama	Connecticut
American Samoa	Indiana	Arkansas	Delaware
Arizona	Iowa	Florida	District of Columbia
California	Kansas	Georgia	Maine
Colorado	Michigan	Kentucky	Maryland
Guam	Minnesota	Louisiana	Massachusetts
Hawaii	Missouri	Mississippi	New Hampshire
Idaho	Nebraska	N. Carolina	New Jersey
Montana	N. Dakota	Oklahoma	New York
Nevada	Ohio	S. Carolina	Pennsylvania
New Mexico	S. Dakota	Tennessee	Puerto Rico
N. Mariana Islands	W. Virginia	Texas	Rhode Island
Oregon	Wisconsin	Virginia	Vermont
Utah			U.S. Virgin Islands
Washington			
Wyoming			

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Area Director

Type of NCSBN Board Member. A Director is elected for each of NCSBN's geographic areas: I, II, III and IV. Responsibilities include attending area meetings of the Member Boards at Midyear and Annual Meetings and communicating with their respective jurisdictions pre- and post- Board of Director meetings.

Assessment Strategies

Test service for Canadian Nurses Association.

Assessment Strategies for Nursing Educators: Test Development and Item Writing

Online course offered through NCSBN Learning Extension for nursing educators. Users earn 19.5 contact hours for completing the course.

B

Blueprint

The organizing framework for an examination that includes the percentage of items allocated to various categories.

Board of Nursing

The authorized state entity with the legal authority to regulate nursing. Legislatures enact the Nurse Practice Act for each state. Boards of nursing have the legal authority to license nurses and to discipline nurses for unsafe practice. The mission of boards of nursing is to protect the health, safety and welfare of the public.

Breaking the Habit: When Your Colleague Is Chemically Dependent

Video and facilitation package within NCSBN's "Professional Challenges of Nurses" series, released in 2001.

Bylaws

The rules that govern the internal affairs of an organization.

C

Canadian Nurses Association

A federation of 11 provincial and territorial nursing associations representing more than 123,000 registered nurses.

Canadian Registered Nurse Examination (CRNE)

Canadian Nurses Association nurse licensure examinations.

Candidate Bulletin

Document that serves as a guideline for candidates preparing to take the NCLEX®. Candidate Bulletins contain information regarding registration, scheduling, information on the testing experience and other useful information for candidates.

Candidate Performance Report (CPR)

An individualized, two-page document sent to candidates who fail the NCLEX® examination. The CPR reflects candidate performance on various aspects of the NCLEX examination by test plan content area.

Centers for Medicare & Medicaid Services (CMS)

An agency of the U.S. Department of Health & Human Services (HHS); formerly called the Health Care Financing Administration (HCFA).

Certification

A credential issued by a national certifying body that is used as a requirement for certain types of licensure, meeting specified requirements acceptable to the board of nursing.

Certification Examination for Practical Nurses in Long-Term Care (CEPN-LTC)

The first large-scale, national certification examination available to licensed practical/vocational nurses. Developed by NCSBN's Special Services Division, in conjunction with the National Association for Practical Nurse Education and Service Inc., to enhance the level of licensed practical/vocational nurses working in long-term care settings.

Certification Program

An examination designed by a certifying body to evaluate candidates for advanced practice nursing.

Certified Nurse Midwife (CNM)

Certified nurse-midwives (CNMs) are registered nurses who are also certified. To become certified, they must graduate from a nurse-midwifery program accredited by the American College of Nurse-Midwives, and pass a national certification exam. CNMs are

educated in both nursing and midwifery and can practice anywhere in the U.S.¹⁸

See also *Advanced Practice Registered Nurse*.

Certified Registered Nurse Anesthetist (CRNA)

Nurse anesthesia is an advanced clinical nursing specialty. As anesthesia specialists, CRNAs administer approximately 65% of the 26-million anesthetics given to patients in the United States each year.¹⁹

See also *Advanced Practice Registered Nurse*.

Certifying Body for Nurses

A nongovernmental agency that validates by examination, based on predetermined standards, an individual nurse's qualifications and knowledge for practice in a defined functional or clinical area of nursing.

Citizen Advocacy Center (CAC)

A nonprofit, nonpartisan community legal organization dedicated to building democracy for the twenty-first century. Center community lawyers and volunteers focus on strengthening the citizenry's capacity and motivation to participate in civic affairs, building community resources and improving democratic protocols within our community institutions. Through public education, community organizing, issue advocacy, and precedent-setting litigation in state and federal courts, the Center forges ahead with programs to advance civic life. The Center is a free public resource to the community.²⁰

Clinical Nurse Specialist (CNS)

A licensed registered nurse who has graduate preparation (Master's or Doctorate) in nursing as a Clinical Nurse Specialist.

See also *Advanced Practice Registered Nurse*.

Commission on Collegiate Nursing Education (CCNE)

An autonomous accrediting agency contributing to the improvement of the public's health. CCNE ensures the quality and integrity of baccalaureate and graduate education programs focused on preparing effective nurses. CCNE serves the public interest by assessing and identifying programs that engage in effective educational practices. As a voluntary, self-regulatory process, CCNE accreditation supports and encourages continuing self-assessment by nursing education programs and the con-

tinuing growth and improvement of collegiate professional education.²¹

Commission on Graduates of Foreign Nursing Schools (CGFNS)

Internationally recognized authority on education, registration and licensure of nurses and other health care professionals worldwide. CGFNS protects the public by ensuring that nurses and other health care professionals educated in countries other than the United States are eligible and qualified to meet licensure, immigration and other practice requirements in the United States. The agency provides credentialing services for foreign-educated nurses, as well as a certification program designed to predict success on the NCLEX-RN® examination.²²

Commitment to Ongoing Regulatory Excellence (CORE)

A system of performance measurement to determine best practices for nursing regulation, initially established to implement NCSBN's Commitment to Excellence in Nursing Regulation project.

Committee on Nominations

The elected committee of NCSBN responsible for preparing a slate of qualified candidates for each year's elections. Members serve one-year terms.

Computerized Adaptive Testing (CAT)

A testing methodology used to administer NCLEX® on a computer; the computer selects the questions candidates receive as they take the examination, which gives them the best opportunity to demonstrate their competence. Each examinee's test is dynamically constructed, with each item selected to provide the maximum possible information, given responses made to previous items.

Continued Competence Accountability Profile (CCAP)

No longer an active project of NCSBN, this project provided a framework for the licensed nurse to document learning needs, learning plans and goals/objectives, strategies for development and evaluation of the achievements of goals/objective. It is an expected activity of all licensed nurses to reflect upon lifelong learning activities and their application to daily practice. The profile was, in essence,

18. *All Nursing Schools Web site*. (n.d.) Retrieved May 23, 2005, from <http://www.allnursingschools.com/faqs/cnm.php>
19. American Association of Nurse Anesthetists Web site. (n.d.) *Questions and Answers: A Career in Nurse Anesthesia*. Retrieved 23 May 2005, from <http://www.aana.com/crna/careerqna.asp>
20. Building Democracy in the 21st Century – Citizens Advocacy Center. (n.d.) *About CAC*. Retrieved 4 April 2005, from <http://www.citizenadvocacycenter.org/aboutcac.htm>
21. American Association of Colleges of Nursing (AACN) Web site. (n.d.) *CCNE accreditation*. Retrieved 4 April 2005, from <http://www.aacn.nche.edu/Accreditation/>
22. Commission on Graduates of Foreign Nursing Schools (CGFNS) Web site. (n.d.) *Who we are*. Retrieved 4 April 2005, from <http://www.cgfns.org/about-who.shtml>

23. The Council of State Governments Web site. (n.d.) *Frequently asked questions*. Retrieved 4 April 2005, from <http://www.csg.org/CSG/About+CSG/faq/default.htm>

24. American Council of Nurse Anesthetists Web site. (n.d.) Council on Certification. *Council on certification of nurse anesthetists (CCNA)*. Retrieved 4 April 2005, from <http://www.aana.com/council/default1.asp>

the application of the nursing process to one's own competence, professional development and accountability.

Continuing Education Unit (CEU)

Represents 10 contact hours in a formal education program.

Council Connector

One of the main sources for information on what is happening at NCSBN. The bimonthly public newsletter contains news about committee activities, updates from NCSBN departments, information about upcoming events and other information related to the work of NCSBN.

Council of State Governments (CSG)

Provides a network for identifying and sharing ideas with state leaders and is founded on the premise that the states are the best sources of insight and innovation. NCSBN is a member at the Associate level.²³

Council on Certification of Nurse Anesthetists (CCNA)

An autonomous, multidisciplinary body existing under the corporate structure of the American Association of Nurse Anesthetists (AANA). Responsible for the certification of registered nurse anesthetists who have fulfilled educational and other criteria for the practice of nurse anesthesia. CCNA is charged with protecting and serving the public by assuring that individuals who are credentialed have met predetermined qualifications or standards for providing nurse anesthesia services.²⁴

Council on Licensure, Enforcement and Regulation (CLEAR)

An organization of regulatory boards and agencies.

Crossing the Line: When Professional Boundaries Are Violated

Video and facilitation package within NCSBN's "Professional Challenges of Nurses" series, released in 1998.

D

Delegate Assembly (DA)

The voting body of NCSBN that comprises 60 Member Boards. Provides direction through adoption of the mission, strategic initiatives and outcomes, and adoption of position statements and actions. Each Member Board is entitled to two votes.

Delegating Effectively: Working Through and With Assistive Personnel

Video and facilitation package within NCSBN's "Professional Challenges of Nurses" series, released in 2002.

Delegation

Transferring to a competent individual the authority to perform a selected nursing task in a selected situation. The licensed nurse retains accountability for the delegation.

Differential Item Functioning (DIF)

A statistical measure of potential item bias.

Direct Registration

Method(s) by which NCLEX® candidates register for the NCLEX through test service. NCLEX registrations are processed one of three ways: direct mail, internet or phone. The NCLEX registration fee of \$200 is due at time of processing.

Director-at-Large

NCSBN Board of Directors position. Two directors are elected and represent the perspectives of the membership at large during meetings of the board.

Disciplinary Actions: What Every Nurse Should Know

Online course offered through NCSBN Learning Extension for practicing nurses. Users earn 4.8 contact hours for completing the course.

Disciplinary Data Bank (DDB)

An NCSBN data management system used between 1981 and 2000 to provide a database of disciplinary actions reported by Member Boards. The DDB data was incorporated into Nursys®, which continues to provide tracking of disciplinary data reported by boards of nursing.

Discipline

The actions taken, as well as the process used, to investigate and resolve complaints received by boards of nursing regarding the practice and/or conduct of licensed nurses. Boards follow their jurisdiction's Administrative Procedures Act, as well as the State Nurse Practice Act and Nursing Administrative Rules/Regulations in providing due process (i.e., the procedural safeguards for the nurse of receiving notice, having an opportunity to respond to allegations and having a fair and objective decision-maker) in the enforcement of nursing laws and rules.

Diversity: Building Cultural Competence

Online course offered through NCSBN Learning Extension for practicing nurses. Users earn 6.0 contact hours for completing the course.

E

English as a Second Language (ESL)

Ethics of Nursing Practice

Online course offered through NCSBN Learning Extension for practicing nurses. Users earn 4.8 contact hours for completing the course.

Examination Committee (EC)

A standing committee of NCSBN. The Item Review Subcommittee is a subcommittee of the EC.

F

Federation of Associations of Regulatory Boards (FARB)

Provides a forum for individuals and organizations to share information related to professional regulation, particularly in the areas of administration, assessment and law. NCSBN holds a seat on the FARB Board of Directors.

Fiscal Year (FY)

October 1 to September 30 at NCSBN.

H

Health Insurance Portability and Accountability Act (HIPAA)

Passed in 1996 to amend the Internal Revenue Code of 1986 to improve portability and continuity of health insurance coverage in the group and individual markets; to combat waste, fraud, and abuse in health care delivery; to promote the use of medical savings accounts, to improve access to long-term care services and coverage; and to simplify the administration of health insurance and for other purposes.

Health Resources and Services Administration (HRSA)

The agency of the federal government under the Department of Health and Human Services that includes the Division of Nursing.

Healthcare Integrity and Protection Data Bank (HIPDB)

A national data collection program mandated and operated by the Health Resources and Services Administration (HRSA) for the reporting of final adverse actions against health care providers, suppliers or practitioners, as required by the Health Insurance Portability and Accountability Act (HIPAA) of 1996.

I

Incident Reports (IRs)

Reports written by test center staff regarding irregularities that may occur during an NCLEX® candidate's examination. IRs may also be generated when a candidate calls NCLEX Candidate Services or in the event that special examination accommodations are requested. IRs are entered in the Pearson VUE system so NCSBN and Member Boards can view them from the NCLEX Administration Web site.

Institute of Medicine (IOM)

A nonprofit organization specifically created for science-based advice on matters of biomedical science, medicine and health as well as an honorific membership organization. The IOM's mission is to serve as adviser to the nation to improve health. The IOM provides unbiased, evidence-based and authoritative information and advice concerning health and science

25. Institute of Medicine of the National Academies Web site. (n.d.) *About*. Retrieved 4 April 2005, from <http://www.iom.edu/about.asp>
26. International Council of Nurses Web site. (n.d.) *About ICN*. Retrieved 4 April 2005, from <http://www.icn.ch/abouticn.htm>

policy to policy-makers, professionals, leaders in every sector of society and the public at large.²⁵

Institute of Regulatory Excellence (IRE)

NCSBN created this program in 2004 to assist regulators in their professional development by providing opportunities for both education and networking.

Interagency Collaborative on Nursing Statistics (ICONS)

Member organization that meets to discuss data collection issues.

International Council of Nurses (ICN)

A federation of national nurses' associations (NNAs), representing nurses in more than 120 countries. ICN is the world's first and widest reaching international organization for health professionals. ICN works to ensure quality nursing care for all, sound health policies globally, the advancement of nursing knowledge, and the presence worldwide of a respected nursing profession and a competent and satisfied nursing workforce.²⁶

International Scheduling Fee

The charge associated with scheduling an NCLEX® examination appointment in London, Seoul or Hong Kong: \$150 plus a Value Added Tax (VAT) where applicable. These non-refundable fees must be paid by credit card and will be charged when a candidate calls to schedule their examination appointment.

International Testing Centers

The Pearson Professional test center locations in Hong Kong, London and Seoul that administer the NCLEX® for the purposes of domestic licensure.

Interprofessional Workgroup on Health Professions Regulation (IWHPR)

A coalition of organizations representing millions of health care practitioners in more than 15 separate health disciplines.

Interstate Compact

An agreement (contract, usually adopted by legislation) between two or more states that has the force and effect of statutory law.

Item

An examination question on one of the NCLEX®

examinations.

Item Development

Process by which items for examinations are created, reviewed and validated, in order to become operational.

Item Development Panels

Comprised of volunteers who meet specific criteria to participate in the item development process.

Item Response Theory (IRT)

A family of psychometric measurement models based on characteristics of examinees' item responses and item difficulty. Their use enables many measurement benefits

See also *Rasch Measurement Model*.

Item Reviewers

Individuals who review newly written items developed for the NCLEX-RN® and NCLEX-PN® examinations. Item reviewers must meet specific criteria in order to participate on a panel.

Item Writers

Individuals who write test questions for the NCLEX-RN® and NCLEX-PN® examinations. Item reviewers must meet specific criteria in order to participate on a panel.

Item Writing

Process by which examination items are created.

Joint Commission on Accreditation of Healthcare Organizations (JCAHO)

Evaluates and accredits more than 15,000 health care organizations and programs in the United States. It is the nation's predominant standard-setting and accrediting body in health care. The Joint Commissions' mission is to continuously improve the safety and quality of care provided to the public through the provision of health care accreditation and related services that support performance improvement in health care organizations.²⁷

Joint Research Committee (JRC)

Committee consisting of three NCSBN and

three test service staff members as well as four external researchers. The committee is the vehicle through which research is funded for the NCLEX® examination program. Funding is provided jointly by the NCSBN and the test service.

K

Kable News

Fulfillment vendor for NCSBN publications and “Professional Challenges of Nurses” series of video and facilitation packages. Orders can be made through NCSBN’s Web site under Resources or calling 800.765.3944.

Knowledge, Skill and Ability Statements (KSA)

The attributes required to perform a job, generally demonstrated through qualifying service, education or training. Knowledge is a body of information applied directly to the performance of a function. Skill is an observable competence to perform a learned psychomotor act. Ability is competence to perform an observable behavior or a behavior that results in an observable product.²⁸

L

Leader to Leader

NCSBN semiannual newsletter sent to nursing schools.

License

In nursing, current authority to practice nursing as a registered nurse (RN), licensed practical nurse (LPN) or advanced practice registered nurse (APRN).

Licensed Practical Nurse (LPN)

A graduate of a school of practical nursing who has passed the practical/vocational nursing examination and is licensed to administer care, usually working under direction of a licensed physician or a registered nurse.

Licensed Vocational Nurse (LVN or VN)

A graduate of a vocational nursing program who has passed the practical/vocational nursing examination and is licensed to administer care, usually working under direction of a licensed physician or a registered nurse.

Licensing Board

A state’s regulatory body responsible for issuing APRN licensure/authority to practice.

Licensure By Endorsement

The granting of authority to practice based on an individual’s licensure in another jurisdiction.

Licensure By Examination

The granting of authority to practice based on an individual’s passing of a board-required examination.

Logit

A unit of measurement used in Item Response Theory (IRT) models. The logarithmic transformation of an odds ratio creates an equal interval, logit scale on which item difficulty and person ability may be jointly represented.

M

Machine Scorable Format

Format in which an examination is scored via an automated process.

Master Pool Items

NCLEX® operational items. The bank of test items from which examinations are developed.

Member Board

A jurisdiction that is a member of NCSBN.

Model Nursing Administrative Rules (MNAR)

Served to clarify and further interpret and implement the *Model Nursing Practice Act*. Models can be used to identify essential elements needed for rules/regulations to the *Model Nurse Practice Act*. Rules must be consistent with the law, cannot go beyond the law, and once enacted have the force and effect of law. MNAR are available on NCSBN’s Web site.

Model Nursing Practice Act (MNPA)

A publication of NCSBN, approved at the Delegate Assembly in Kansas City, Missouri in 2004. The Model Acts and Rules were first adopted in 1983 and were created to serve as a guide to boards who were deliberating changes to state nurse practice acts and nursing administrative rules. Some boards look to the models for new ideas and different approaches

27. Joint Commission on Accreditation of Healthcare Organizations Web site. (n.d.) *Facts about the Joint Commission on Accreditation of Healthcare Organizations*, Retrieved 4 April 2005, from <http://www.jcaho.org/about+us/index.htm>
28. U.S. Office of Personnel Management Web site. (n.d.) *Operating Manual Qualification Standards for General Schedule Positions, General Policy and Procedures Part C and D*. Retrieved 3 June 2005, from <http://www.opm.gov/qualifications/SEC-II/s2-c-d.asp>

29. National Association for Practical Nurse Education & Services, Inc. (NAPNEP) Web site. (n.d.) *About NAPNES*. Retrieved 5 April 2005, from <http://www.napnes.org/about.htm>
30. National Association of Hispanic Nurses Web site. (n.d.) *Philosophy*. Retrieved 4 April 2005, from <http://www.thehispanicnurses.org/>
31. National Black Nurses Association, Inc. (NBNA) Web site. (n.d.) *Who Are We?* Retrieved 4 April 2005, from <http://www.nbna.org/whoarewe.htm>
32. National Certification Board of Pediatric Nurse Practitioners and Nurses Web site. (n.d.) *Welcome*. Retrieved 3 June 2005, from <http://www.people.virginia.edu/~sep3y/certification.htm>.
33. National Certification Corporation for the Obstetric, Gynecologic & Neonatal Nursing Specialties (NCC) Web Site. *What is NCC?* Retrieved 3 June 2005, from <http://www.nccnet.org/public/pages/index.cfm?pageid=61>
33. The National Coordinating Council for Medication Error Reporting and Prevention (NCC MERP) Web site. (n.d.) *About NCC MERP*. Retrieved 15 April 2005, from <http://www.nccmerp.org/aboutNCCMERP.html>
35. National Conference of State Legislatures (NCSL) Web site. (n.d.) *About NCSL*. Retrieved 15 April 2005, from http://www.ncsl.org/public/ncsl/nav_aboutNCSL.htm
36. The National Federation of Licensed Practical Nurses, Inc. Web site. (n.d.) *All About NFLPN*. Retrieved 15 April 2005, from <http://www.nflpn.org/allaboutnflpn.htm>

for regulation. Other boards may use them in evaluating their existing regulatory language. Some boards use the framework and/or language in developing amendments and revisions to state laws and rules. The models may assist in the development of rationale for rules as part of the rule promulgation process. Models can be used to identify essential elements for legislation. While there will always be some variation with state nursing statutes, models are a way to advance a degree of uniformity among the several states to promote a common nationwide understanding of what constitutes the practice of nursing. The MNPA are available on NCSBN's Web site.

Motion Papers

Available at Annual Meeting and used for accurate record keeping.

Mutual Recognition

A model for nurse licensure which allows a nurse licensed in his or her state of residency to practice in other states (both physical and electronic), subject to each state's practice law and regulation. Under mutual recognition, a nurse may practice across state lines unless otherwise restricted. In order to achieve mutual recognition, each state must enact legislation authorizing the Nurse Licensure Compact.

See *Nurse Licensure Compact* for more information.

N

National Association for Practical Nurse Education and Service (NAPNES)

Advocates the education and practice of practical/vocational nurses. It is the organization responsible for the legislation that provides for the licensure and education of practical nursing.²⁹

National Association of Hispanic Nurses (NAHN)

Designed and committed to work toward improvement of the quality of health and nursing care for Hispanic consumers and toward providing equal access to educational, professional and economic opportunities for Hispanic nurses.³⁰

National Black Nurses Association (NBNA)

Provides a forum for collective action by African American nurses to investigate, define and determine what the health care needs of African Americans are and to implement change to make available to African Americans and other minorities health care commensurate with that of the larger society.³¹

National Certification Board of Pediatric Nurse Practitioners and Nurses (NCBPNP/N)

Provides high quality certification services to nurses in pediatric practice through the provision of certification exams and certification maintenance programs. The NCBPNP/N remains the largest certification organization for pediatric nursing.³²

National Certification Corporation for the Obstetric, Gynecologic and Neonatal Nursing Specialties (NCC)

A nonprofit association that provides its buyers with national credentialing and continuing education programs in the fields of obstetrics, gynecology and neonatal care. NCC buyers are primarily inpatient obstetric nurses, women's health care nurse practitioners and neonatal intensive care nurses.³³

National Coordinating Council for Medication Error Reporting and Prevention (NCC MERP)

Formed so that leading national health care organizations could meet, collaborate and cooperate to address the interdisciplinary causes of errors and to promote the safe use of medications.³⁴

National Council of State Legislatures (NCSL)

A bipartisan organization that serves the legislators and staff of the nation's 50 states, its commonwealths and territories. NCSL provides research, technical assistance and opportunities for policymakers to exchange ideas on the most pressing state issues. NCSL is an effective and respected advocate for the interests of state governments before Congress and federal agencies.³⁵

National Federation of Licensed Practical Nurses (NFLPN)

A professional organization for licensed practical nurses, licensed vocational nurses and practical/vocational nursing students in the United States.³⁶

National League for Nursing (NLN)

A national organization created to identify the nursing needs of society and to foster programs designed to meet these needs; to develop and support services for the improvement of nursing service and nursing education through consultation, continuing education, testing, accreditation, evaluation and other activities; to work with voluntary, governmental and other agencies, groups and organizations for the advancement of nursing and toward the achievement of comprehensive health care; to respond in appropriate ways to universal nursing needs.³⁷

National League for Nursing Accrediting Commission, Inc. (NLNAC)

Responsible for the specialized accreditation of nursing education programs, both post-secondary and higher degree. NLNAC has authority and accountability for carrying out the responsibilities inherent in the application of standards and criteria, accreditation processes, and the affairs, management, policy-making, and general administration of the NLNAC. NLNAC is a nationally recognized specialized accrediting agency for all types of nursing programs.³⁸

National Nurse Aide Assessment Program (NNAAP™)

The nurse aide certification examination developed by NCSBN and Promissor.

National Practitioner Data Bank (NPDB)

A federally mandated program for collecting data regarding health care practitioners. The NPDB has been in operation for 10 years and requires medical malpractice payment reports for all health care practitioners, and reports of discipline and clinical privilege/society actions regarding physicians and dentists. Mandatory reporting of licensure actions regarding other health care practitioners, including nurses, is required by section 1921 of the Social Security Act (originally enacted in P.L.100-93, section five).

National Provider Identifier (NPI)

Planned to be a new, unique eight-character alpha-numeric identifier. Created in response to the posting of rules in the Federal Register on May 7, 1998, which proposed a standard for a national health care provider identifier and requirements for its use by health plans,

health care clearinghouses and health care providers.

National Student Nurses' Association (NSNA)

Organizes, represents and mentors students preparing for initial licensure as registered nurses, as well as those enrolled in baccalaureate completion programs and conveys the standards and ethics of the nursing profession. NSNA promotes development of the skills that students will need as responsible and accountable members of the nursing profession and advocates for high-quality health care in addition to advocating for and contributing to advances in nursing education, and developing nursing students who are prepared to lead the profession in the future.³⁹

NCLEX® Administration Web Site

Allows Member Boards to process and manage NCLEX® candidate records. Member Boards use the site to perform tasks including: Setting candidate eligibility status, entering candidate accommodations requests and viewing candidate results.

Please Note: A user name and password is needed to enter this site.

NCLEX® Invitational

An annual one-day educational conference with sessions related to the NCLEX® program and NCSBN Testing Services products and services.

NCLEX® Program Reports

Published twice per year for subscribing schools of nursing, the NCLEX® Program Reports provide administrators and faculty in nursing education programs with information about the performance of their graduates on the NCLEX examination. Included in the NCLEX® Program Reports is information about a given program's performance by the NCLEX Test Plan dimensions and by content areas, and data regarding the program's rank at both national and state levels.

NCLEX® Quarterly Reports

Reports that summarize the performance of all first-time candidates educated in a given jurisdiction and tested in a given quarter, and the national group of candidates. They also provide a summary of the preceding three quarters' passing rates.

37. National League for Nursing (NLN) Web site. (n.d.) *Bylaws*. Retrieved 3 June 2005, from <http://www.nln.org/aboutnln/Bylaws/index.htm>

38. National League for Nursing Accrediting Commission (NLNAC) Web site. (n.d.) *About NLNAC*. Retrieved 15 April 2005, from <http://www.nlnac.org/AboutNLNAC/whatsnew.htm>

39. National Student Nurses Association (NSNA) Web site. (n.d.) *NSNA Mission Statement*. Retrieved 15 April 2005, from <http://www.nсна.org/>

NCLEX® Quick Results Service

Candidates in select jurisdictions may access their “unofficial” results via the NCLEX® Candidate Web site or through the NCLEX Quick Results Line. “Unofficial” results are available two business days after taking the test. There is a charge for the service.

NCLEX-PN® Examination

NCSBN’s licensure examination for practical nurses. NCSBN’s Licensure Examinations for Practical Nurses is used in the United States and its territories to assess licensure applicants’ nursing knowledge, skills and abilities. Boards of nursing use passing the examination to inform licensing decisions.

NCLEX-RN® Examination

NCSBN’s licensure examination for registered nurses. NCSBN’s Licensure Examinations for Registered Nurses is used in the United States and its territories to assess licensure applicants’ nursing knowledge, skills and abilities. Boards of nursing use passing the examination to inform licensing decisions.

NCSBN Board of Directors (BOD)

Administrative body of NCSBN, consisting of nine elected officers, whose authority is to transact the business and bylaws of the affairs of NCSBN.

NCSBN Learning Extension

Branded name for the online campus located at www.learningext.com where NCSBN promotes educational products and provides online course access to users.

NCSBN Strategic Plan

The strategic initiatives and outcomes of NCSBN spanning a three-year period.

NCSBN Vice President

NCSBN Board of Directors leader that assists the President as needed, performs the President’s duties in the President’s absence, fills any vacancy in the office of the President until the next annual meeting and is responsible for continuing Board development.

NCSBN’s Review for the NCLEX-PN® Examination

Online course offered through NCSBN Learning Extension for NCLEX-PN® candidates.

NCSBN’s Review for the NCLEX-RN® Examination

Online course offered through NCSBN Learning Extension for NCLEX-RN® candidates.

North American Free Trade Agreement (NAFTA)

Agreement between Canada, Mexico and the United States that addresses trade in services and contains requirements and encouragement related to harmonization of qualifications for professional practice in the three countries.

Nurse Aide Registry

NCSBN publication that contains a listing of all the Nurse Aide Registries by state along with contact information for those responsible for registry maintenance and complaint investigation. Updated annually.

Nursing Assistant Workshop

An annual one-day program offered to NCSBN Members and other stakeholders to address the current regulation of nursing assistants.

Nurse Licensure Compact (NLC)

An agreement establishing mutual recognition and reciprocal licensing arrangements between party states for licensed practical/vocational nurses (LPN/VNs) and registered nurses (RNs). In August 2002, NCSBN delegates voted to expand the compact to include advanced practice registered nurses (APRNs).

Nurse Licensure Compact Administrators (NLCA)

Organized body of nurse licensing boards that have implemented and administer the Nurse Licensure Compact.

Nurse Practice Acts Continuing Education Course

Online course offered through NCSBN Learning Extension for practicing nurses. Users earn 2.0 contact hours for completing the course.

Nurse Practitioner (NP)

A registered nurse (RN) with advanced academic and clinical experience, which enables him or her to diagnose and manage most common and many chronic illnesses, either independently or as part of a health care team. A nurse practitioner provides some care previously offered only by physicians and in most states

has the ability to prescribe medications. NPs focus largely on health maintenance, disease prevention, counseling and patient education in a wide variety of settings. Nurse practitioners are educated through programs that grant either a certificate or a master's degree. The scope of an NP's practice varies depending upon each state's regulations. Unnecessary obstacles to an NP's practice contribute to the rising costs and inaccessibility of health care for all Americans.⁴⁰

See also *Advanced Practice Registered Nurse*.

Nursing Assistive Personnel (NAP)

Any unlicensed person, regardless of title, who performs tasks delegated by a nurse. Also known as Unlicensed Assistive Personnel (UAP).

Nursing Practice Act (NPA)

Statutes governing the regulation of nursing practice in a jurisdiction, typically empowering a board of nursing to license individuals who meet specified requirements.

Nursing Practice and Education Committee (NP&E)

The former name of a standing committee of NCSBN, now called PR&E Committee.

Nursing Practice and Education Consortium (N-PEC)

A group founded in 1997 that comprised 10 nursing organizations. N-PEC member representatives held four workshops and five conference calls in 2000 to draft, review and produce a consensus report. The project resulted in a 13-page series of ideas entitled "Vision 2020 for Nursing: A Strategic Work Plan to Transform U.S. Nursing Practice and Education."⁴¹

Nursing Program

The authorized state entity with the legal authority to regulate nursing. Legislatures enact the Nurse Practice Act for each state. Boards of nursing have the legal authority to license nurses and to discipline nurses for unsafe practice.

Nursing School Accrediting Agency

An organization that establishes and maintains standards for professional nursing programs and recognizes those programs that meet these standards.

Nursing Shortage

A nursing shortage occurs when the demand for nurses exceeds the supply available.

Nursys® Advisory Panel (NAP)

An NCSBN committee.

Nursys®

A database developed by NCSBN containing demographic information on all licensed nurses (in the United States) and an unduplicated count of licensees. Nursys® serves as a foundation for a variety of services, including the disciplinary tracking system, licensure verification, interstate compact functions and research on nurses.

O

Omnibus Budget Reconciliation Act of 1987 (OBRA 1987)

Contains requirements for nurse aide training and competency evaluation.

P

Panel of Judges

A panel of experts used for the standard setting process; an NCSBN panel composed of nurses who participate in the NCLEX® standard setting process.

Parliamentarian

Assists the President in presiding, ensures proper parliamentary procedure is followed and prepares a written record of the proceedings.

Passing Standard

The minimum level of knowledge, skill and ability required for safe and effective entry-level nursing practice. The NCSBN Board of Directors reevaluates the passing standard once every three years, based upon the results of a standard-setting exercise performed by a panel of experts with the assistance of professional psychometricians; the historical record of the passing standard with summaries of the candidate performance associated with those standards; the results of a standard-setting survey sent to educators and employers; and information describing the educational readiness of high school graduates who express

40. American College of Nurse Practitioners Web site. (n.d.) *NP Facts*. Retrieved 3 June 2005, from <http://www.nurse.org/acnp/facts/whatis.shtml>

41. Robert Wood Johnson Foundation Web site. (n.d.) *Grant Results Report*. Retrieved 3 June 2005, from http://www.rwjf.org/portfolios/resources/grantsreport.jsp?filename=038622.htm&iaid=137#int_appendix

42. 4 Patient Safety Web site. (n.d.)
Home Page. Retrieved 6 June 2005,
from <http://www.4patientsafety.net/>

an interest in nursing.

Once the passing standard is set, it is imposed uniformly on every test record according to the procedures laid out. To pass an NCLEX® examination, a candidate must exceed the passing standard. There is no fixed percentage of candidates that pass or fail each examination.

Patient Privacy Continuing Education Course

Online course offered through NCSBN Learning Extension for practicing nurses. Users earn 5.4 contact hours for completing the course.

Pearson Professional Testing Network

Network of Pearson Professional Test Centers (PPCs) where candidates take the NCLEX® examinations. There are over 200 domestic and three international PPCs that administer the NCLEX.

See also *Pearson Professional Testing/Pearson VUE*.

Pearson Professional Testing/Pearson VUE

Contracted test service provider for NCSBN since 2002 to assist with the NCLEX® program; the contract with Pearson Professional Testing/Pearson VUE is valid through 2009.

Pew Taskforce on Health Care

Charged by the Taskforce on Health Care Workforce Regulation to identify and explore how regulation protects the public's health and propose new approaches to health care workforce regulation to better serve the public's interest. The task force was composed of eight individuals with legal, policy and public health expertise. Its recommendations were issued in late 1995.

Plurality vote

Voting process where each voter votes for one candidate, and the candidate with the plurality (most votes) wins, regardless of whether that candidate gets a majority or not.

Practice (Job) Analysis

Research study conducted by NCSBN Testing Services that examines the practice of newly licensed job incumbents (RNs, LPN/VNs) or new nursing assistants. The results are used to evaluate the validity of the test plans/blueprints that guide content distribution of the licensure examinations or the nurse aide competency evaluation.

Practice and Professional Issues Survey (PPI)

A survey conducted twice each year to collect information from entry-level nurses on practice activities.

Practice, Education, and Regulation Congruence Task Force (PERC)

This task force no longer exists, but its recommended action plan was approved at the 2002 Delegate Assembly and will be implemented through 2010 by staff and existing committees.

Practice, Regulation and Education Committee (PR&E)

A standing committee of NCSBN, comprised of at least six members. The committee's purpose is to provide general oversight of nursing practice, regulation and education issues.

Practitioner Remediation and Enhancement Partnership (PreP)

A partnership of licensing boards and health care organizations whose goal is to jointly identify, remediate and monitor practitioners whose practice is not up to standard, but whose actions do not require discipline. This project is sponsored by the Citizen's Advocacy Center (CAC). NCSBN is a member of the national advisory board.

Prep-4-Patient Safety

A pilot project funded by a grant from the Health Resources and Services Administration (HRSA) that provides tools for state medical and nursing boards to work with hospitals and other health care organizations to identify, remediate and monitor health care practitioners (now limited to physicians and nurses) with deficiencies that do not rise to the level of disciplinary action. This improves patient safety by allowing organizations and licensing boards to work together to identify providers with clinical deficiencies in a non-punitive environment.⁴² NCSBN is a member of the national advisory board. Many boards of nursing are participating or planning to join.

President

NCSBN Board of Directors leader that guides the Board in the enforcement of all policies and regulations relating to NCSBN and performs all other duties normally incumbent upon the Board President.

Pretest Items

Newly written test questions placed within the NCLEX® examinations for gathering statistics. Pretest items are not used in determining the pass/fail result.

Privilege to practice

This refers to the multi-state licensure privilege, which is the authority to practice nursing in any compact state that is not the state of residency. Additional license is not granted for this authority.

Professional Accountability & Legal Liability for Nurses

Online course offered through NCSBN Learning Extension for practicing nurses. Users earn 5.4 CEUs for completing the course.

Professional boundaries

The space between the nurse's power and the client's vulnerability — the power of the nurse comes from the professional position and access to private knowledge about the client. Establishing boundaries allows the nurse to control this power differential and allows a safe connection to meet the client's needs. Complimentary materials available from NCSBN.

Professional Challenges of Nurses Series

NCSBN's branded name for the group of educational video and facilitation packages offered for sale at Kable News.

See also *Kable News*.

Profiles of Member Boards

NCSBN publication that provides an overview of the regulatory environment in which state boards of nursing function. Includes data by jurisdiction on board structure, educational programs, entry into practice, licensure requirements, continued competency mechanisms, nurse aide competency evaluations and advanced practice. Available for purchase through NCSBN's Web site.

Promissor™

Test service for the National Nurse Aide Assessment Program (NNAAP™). Formerly known as CAT*ASI.

Psychometrics

The scientific field concerned with all aspects

of educational and psychological measurement (or testing), specifically achievement, aptitude and mastery as measured by testing instruments.

Public Policy

Policy formed by governmental bodies. These include all decisions, rules, actions and procedures established in the public interest.

R**Rasch Measurement Model**

A logistic latent trait model of probabilities, which analyzes items and people independently, and then expresses both item difficulty and person ability on a single continuum. These models are derived not from data but from the structure necessary for measurement. The dichotomous Rasch model is the Item Response Theory (IRT) model used to the NCLEX® examination measurement scale.

Registered Nurse (RN)

A nurse who has graduated from a state-approved school of nursing, has passed the professional nursing state board examination, and has been granted a license to practice within a given state.

Reliability

A test statistic that indicates the expected consistency of test scores across different administrations or test forms. For adaptively administered examinations, such as the NCLEX® examination, the "decision consistency statistic" is the preferred statistic for assessing reliability. NCSBN uses the Kuder-Richardson Formula 20 (KR20) statistic to measure the reliability of the NNAAP™.

Resolutions Committee

Comprised of at least four members generally representing each of the four NCSBN geographical areas and includes one member of the Finance Committee. Reviews, evaluates and reports to the Delegate Assembly all resolutions and motions submitted by Member Boards. The committee is governed by the operational policies and procedures, the standing rules and the bylaws.

Request for Proposal (RFP)

S

Scope of practice

Practicing within the limits of the issued health care provider license.

Sharpening Critical Thinking Skills for Competent Nursing Practice

Online course offered through NCSBN Learning Extension for practicing nurses. Users earn 3.6 contact hours for completing the course.

Standard Setting

The process by which the Board of Directors determines the passing standard for an examination, at or above which examinees pass the examination and below which they fail. This standard denotes the minimum level of knowledge, skill and ability required for safe and effective entry-level nursing practice. NCSBN uses multiple data sources to set the standard, including a criterion-referenced statistical procedure and a Survey of Professionals. Standard setting is conducted every three years for each NCLEX® examination and each time the test plan/blueprint changes for the NNAAP™.

Standard Setting Panel of Judges

A group of individuals that contribute to the recommendation of potential NCLEX® passing standards to the NCSBN Board of Directors.

Standing Committee

A permanent committee established by the NCSBN bylaws.

Statistical Criteria

Guidelines that all proposed NCLEX® items must meet in order to be operational.

Strategic Initiative

A goal, or generalized statement, of where an organization wants to be at some future time; the end toward which effort is directed.

Strategic Objective

Desired result; a translation of the strategic initiative into tangible results, a statement of what the strategy must achieve and the elements that are critical to its success.

T

Taxonomy of Error, Root Cause Analysis and Practice Responsibility (TERCAP)

An instrument developed for NCSBN's practice breakdown research.

Test Center Administrator (TCA)

Test service staff that is responsible for day-to-day operation of the center and for proctoring of examinations.

Test Development

Process by which items for examinations are created, reviewed and validated in order to become operational.

Test Plan

The organizing framework for the NCLEX-RN® and NCLEX-PN® examinations that includes the percentage of items allocated to various categories.

Test Service

The vendor that provides services to NCSBN, including test scoring and reporting. Pearson VUE is the contracted test service for the NCLEX® examinations, and Promissor is the contracted test service for NNAAP™.

See also *Pearson VUE* and *Promissor*.

Treasurer

NCSBN Board of Directors position that serves as the Chairperson of the Finance Committee and manages the board's review of and action related to the board's financial responsibilities.

U

U.S. Department of Education (DOE)

The agency of the federal government that establishes policy for, administers and coordinates most federal assistance to education.⁴³

U.S. Department of Health & Human Services (HHS)

The U.S. government's principal agency for protecting the health of all Americans and providing essential human services, especially for those who are least able to help themselves.⁴⁴

U.S. Department of Homeland Security (DHS)

Leverages resources within federal, state and local governments, coordinating the transition of multiple agencies and programs into a single, integrated agency focused on protecting the American people and their homeland. DHS is comprised of five major divisions or directorates: Border & Transportation Security; Emergency Preparedness & Response; Science & Technology; Information Analysis & Infrastructure Protection; and Management. Besides the five Directorates of DHS, several other critical agencies are folding into the new department or being newly created.⁴⁵

U.S. Drug Enforcement Administration (DEA)

Federal agency charged to enforce the controlled substances laws and regulations of the United States and bring to the criminal and civil justice system of the United States, or any other competent jurisdiction, those organizations and principal members of organizations involved in the growing, manufacture or distribution of controlled substances appearing in or destined for illicit traffic in the United States; and to recommend and support non-enforcement programs aimed at reducing the availability of illicit controlled substances on the domestic and international markets.⁴⁶

Uniform Advanced Practice Registered Nurse Licensure/Authority to Practice Requirements

Developed by NCSBN with APRN stakeholders in 2000; establishes the foundation for the APRN Compact.

Unlicensed Assistive Personnel (UAP)

Any unlicensed personnel, regardless of title, to whom nursing tasks are delegated.⁴⁷

V

Validity

The extent to which inferences made using test scores are appropriate and justified by evidence; an indication that the test is measuring what it purports to measure. NCSBN assures the content validity of its examinations by basing each test strictly on the appropriate test plan (NCLEX-RN® or NCLEX-PN® examination) or blueprint (NNAAP™). Each test plan or blueprint is developed from a current job analysis of entry-level practitioners.

VCampus Corporation

E-learning courseware provider for online courses offered through NCSBN Learning Extension.

VisaScreen™

A screening program that certain health care professionals must successfully complete before receiving an occupational visa, including the H-1B, H-2B, TN status, and permanent (green card) visas, as required by Section 343 of the Illegal Immigration Reform and Immigration Responsibility Act of 1996 (IIRIRA). This service is provided by The Commission on Graduates of Foreign Nursing Schools (CGFNS); however, the NCLEX® examination(s) maybe used to fulfill one component of the *VisaScreen™* process. The *VisaScreen™* itself is a trademark product of CGFNS and currently is the only federally accepted organization to perform screening on nurses immigrating to the United States.

See also *Commission on Graduates of Foreign Nursing Schools (CGFNS)*.

W

White Paper

A detailed policy document issued by NCSBN, widely disseminated to external groups, to discuss issues or to encourage dialogue about a particular regulatory subject.

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NCSBN Glossary Acronyms

A

AACN

American Association of Colleges of Nursing

AACN

American Association of Critical Care Nurses

AANA

American Association of Nurse Anesthetists

AANP

American Academy of Nurse Practitioners

ACC

ACNM Certification Council Inc.

ACNM

American College of Nurse Midwives

ADA

American Dental Association

ADA

American Dietetic Association

ADA

Americans with Disabilities Act

ADR

Alternative Dispute Resolution

AILA

American Immigration Lawyers Association

AMA

American Medical Association

ANA

American Nurses Association

ANCC

American Nurses Credentialing Center

ANSR

Americans for Nursing Shortage Relief

AONE

American Organization of Nurse Executives

APRN

Advanced Practice Registered Nurse

B

BOD

NCSBN Board of Directors

BON

Board of Nursing

C

CAC

Citizen Advocacy Center

CAT

Computerized Adaptive Testing

CCAP

Continued Competence Accountability Profile

CCNA

Council on Certification of Nurse Anesthetists

CCNE

Commission on Collegiate Nursing Education

CEPN-LTC

Certification Examination for Practical Nurses
in Long-Term Care

CEU

Continuing Education Unit

CGFNS

The Commission on Graduates of Foreign
Nursing Schools

CLEAR

Council on Licensure, Enforcement and
Regulation

CM

Certified Midwife

CMS

Centers for Medicare & Medicaid Services

CNM

Certified Nurse Midwife

CNS

Clinical Nurse Specialist

CORE

Commitment to Ongoing Regulatory
Excellence

CPR

Candidate Performance Report

CRNA

Certified Registered Nurse Anesthetist

CRNE

Canadian Registered Nurse Examination

CSG

Council of State Governments

D

- DA**
Delegate Assembly
- DDB**
Disciplinary Data Bank
- DEA**
U.S. Drug Enforcement Administration
- DHS**
U.S. Department of Homeland Security
- DIF**
Differential Item Functioning
- DOE**
U.S. Department of Education

E

- EC**
Examination Committee
- EO**
Executive Officer
- EPR**
Examinee Performance Record
- ESL**
English as a Second Language

F

- FARB**
Federation of Associations of Regulatory Boards
- FY**
Fiscal Year

H

- HHS**
U.S. Department of Health & Human Services
- HIPAA**
Health Insurance Portability and Accountability Act
- HIPDB**
Healthcare Integrity and Protection Data Bank
- HRSA**
Health Resources and Services Administration

I

- ICHP**
International Commission on Healthcare Professions
- ICN**
International Council of Nurses
- ICONS**
Interagency Collaborative on Nursing Statistics
- IIRIRA**
Illegal Immigration Reform and Immigration Responsibility Act of 1996
- IOM**
Institute of Medicine
- IRE**
Institute of Regulatory Excellence
- IRs**
Incident Reports
- IRT**
Item Response Theory
- IWHPR**
Interprofessional Workgroup on Health Professions Regulation

J

- JCAHO**
Joint Commission on Accreditation of Healthcare Organizations
- JRC**
Joint Research Committee

K

- KR20**
Kuder-Richardson Formula 20
- KSA**
Knowledge, Skill and Ability statement

L

- LPN**
Licensed Practical Nurse
- LVN**
Licensed Vocational Nurse (also VN)

M

MNAR

Model Nursing Administrative Rules

MNPA

Model Nursing Practice Act

N

NAFTA

North American Free Trade Agreement

NAHN

National Association of Hispanic Nurses

NAP

Nursing Assistive Personnel

NAP

Nursys® Advisory Panel

NAPNES

National Association for Practical Nurse
Education and Service

NBNA

National Black Nurses Association

NCBNP/N

National Certification Board of Pediatric Nurse
Practitioners and Nurses

NCC

National Certification Corporation for the
Obstetric, Gynecologic and Neonatal Nursing
Specialties

NCC MERP

National Coordinating Council for Medication
Error Reporting and Prevention

NCSBN

National Council of State Boards of Nursing

NCSL

National Council of State Legislatures

NFLPN

National Federation of Licensed Practical
Nurses

NLC

Nurse Licensure Compact

NLCA

Nurse Licensure Compact Administrators

NLN

National League for Nursing

NLNAC

National League for Nursing Accrediting
Commission, Inc.

NNAAP™

National Nurse Aide Assessment Program

NNAs

National Nursing Associations

NP

Nurse Practitioner

NP&E

Nursing Practice and Education Committee

NPDB

National Practitioner Data Bank

N-PEC

Nursing Practice and Education Consortium

NPI

National Provider Identifier

NSNA

National Student Nurses' Association

O

OBRA 1987

Omnibus Budget Reconciliation Act of 1987

P

PERC

Practice, Education, and Regulation
Congruence Task Force

PPC

Pearson Professional Test Centers

PPI

Practice and Professional Issues Survey

PR&E

Practice, Regulation and Education Committee

PreP

Practitioner Remediation and Enhancement
Partnership

R

RFP

Request for Proposal

RN

Registered Nurse

T

TCA

Test Center Administrator

TERCAP

Taxonomy of Error, Root Cause Analysis and
Practice Responsibility

U

UAP

Unlicensed Assistive Personnel

V

VAT

Value Added Tax

VN

Licensed Vocational Nurse (also LVN)