2014 Report of the Board of Directors (BOD)

Highlights of Business Activities

STRATEGIC IMPLEMENTATION
This year, the BOD began implementation of the new strategic initiatives adopted by the 2013 Delegate Assembly. While all strategic directions are critically important for the BOD, advancing regulatory relevance and responsiveness to changes in health care and promoting regulatory solutions to address interstate health care delivery have been front and center of the BOD’s work this past year.

Every BOD meeting began with a scan of the current environment to be sure that issues were identified and potential action plans were developed. Common issues addressed revolved around efforts to ease the path for returning veterans who choose to pursue health care careers, legislation to adopt the APRN Consensus Model and implementation of other recommendations from the Institute of Medicine (IOM) Future of Nursing report, such as academic progression. Monitoring and reviewing potential federal legislation, especially on telehealth issues, garnered the primary attention of NCSBN’s government relations firm in Washington, D.C., and the BOD’s decision to expand NCSBN’s presence with staff and an office in the nation’s capital. It is clear that boards of nursing (BONs) must be responsive in facilitating interstate practice to ensure safe and competent nursing practice.

The BOD supported the membership discussion on potential regulatory solutions through three meetings with the Executive Officer Leadership Council facilitated by Leonard Marcus, PhD, from the Harvard School of Public Health. These discussions were immensely helpful in identifying solutions acceptable to all members for participation in the Nurse Licensure Compact (NLC). Interstate practice was the topic of discussion with other nursing organizations as well. NCSBN participated in a joint work group with the Tri-Council for Nursing on the impact of telehealth, granted the primary attention of NCSBN’s government relations firm in Washington, D.C., and the BOD’s decision to expand NCSBN’s presence with staff and an office in the nation’s capital. It is clear that boards of nursing (BONs) must be responsive in facilitating interstate practice to ensure safe and competent nursing practice.

The BOD attended to its additional responsibilities, including approval of a new passing standard for the NCLEX-PN® Examination, acceptance of the annual independent audit report, approval of two position statements with the Tri-Regulator Collaborative, and various generative discussions related to where NCSBN is headed globally, the NCSBN vision and the value of associate members.

The BOD was pleased that NCSBN was accepted as an accredited Standards Development Organization (SDO) by the American National Standards Institute. In this new role, the BOD selected the licensure requirement for a national biometric criminal background check (CBC) as the first standard to be addressed through the SDO procedure.

ADVANCED PRACTICE REGISTERED NURSE (APRN) COMPACT REVISION
The APRN Compact, adopted by the 2002 Delegate Assembly, was initially passed by three states: Texas, Utah and Iowa. This version of the APRN Compact was not implemented, partially due to the lack of uniformity of APRN licensure requirements between states. Following the adoption of the APRN Consensus Model in 2008, the compacting states identified an opportunity to address the lack of uniformity through the incorporation of the APRN Consensus Model.

A work group was formed in 2011 to revise the APRN Compact. The work group included representatives from the states of Texas, Utah, Iowa, Idaho and Arizona. The overarching goals of the work group were to improve the APRN Compact, retain or improve the positive results of the NLC, promote cooperation and information exchange between states, and facilitate mobility and access to care while providing for public protection. Member boards and various stakeholders were consulted throughout the revision process.
The proposed APRN Compact revision includes the following key provisions:

1. **Inclusion of APRN Consensus Model Licensure Requirements in Rule**
   APRN Consensus Model requirements have been included as the “Uniform Licensure Requirements,” which are the minimum requirements for a compact license. The requirements include unencumbered registered nurse (RN) licensure, graduate education from an accredited program congruent with an approved role and population foci, satisfaction of coursework requirements, and certification by a national certifying body. Additionally, the delineation between acute and primary care in pediatrics and adult/gerontology has been recognized in response to comments received from stakeholders.

2. **A Grandfathering Provision for APRNs Who Do Not Meet APRN Consensus Model Requirements**
   APRNs licensed in compact states who do not meet the requirements of the APRN Consensus Model will retain APRN licensure on a single state basis. Additionally, these APRNs may pursue single state licensure in multiple party states, provided that the applicant has qualified for licensure in that state at the time the APRN was initially licensed. This is consistent with what is recommended for grandfathering under the APRN Consensus Model.

3. **Strengthened Enforcement Provisions**
   The proposed APRN Compact includes improvements to the mechanisms that ensure compliance with the compact by member states. The procedures to be followed in the event of a failure by a party state to comply with the compact include a period of technical assistance in curing the default, improved dispute resolution processes and termination from the compact in the event no other means of compliance have been successful.

4. **Rulemaking Authority by the Interstate Commission of APRN Compact Administrators**
   Given the difficulty of implementing universal rules under the NLC, the APRN Compact Working Group has worked with Rick Masters, special counsel to the NLC, to include a rulemaking provision within the proposed APRN Compact. These rulemaking powers are based upon similar provisions in other interstate compacts that have been successfully utilized to promulgate interstate rules.

   These rulemaking powers will allow the Interstate Commission of APRN Compact Administrators to consider proposed rules as a group, which will become controlling law in all party states if approved by a majority of compact administrators. The rulemaking powers are limited under administrative procedures which incorporate well-accepted provisions from the Model Administrative Procedures Act (APA) and state APAs. The rulemaking power will allow the compact administrators the ability to collaboratively respond to changes in the field of APRN regulation and maximize uniformity.

5. **Prescriptive Authority**
   The Proposed APRN Compact includes legend drug prescriptive authority for those APRNs with compact licenses. Prescriptive authority for legend drugs may be exercised in the home state, as well as any remote state, while working under a privilege. Eligibility for controlled substance prescriptive authority shall be determined under each state’s laws and rules.

6. **CBC Requirement**
   Eligibility for membership in the proposed APRN Compact is limited to states that have implemented procedures for conducting fingerprint state and federal CBCs for all applicants for initial APRN licensure or APRN licensure by endorsement.

7. **Membership in the NLC is Not Required for APRN Compact Membership Eligibility**
   All states are eligible to join the proposed APRN Compact, without regard to whether the state is a member of the NLC.

After review and discussion at its May meeting, the NCSBN BOD moved to recommend adoption of the revised APRN Compact to the 2014 Delegate Assembly.
Recommendations to the Delegate Assembly

**Adopt the proposed revision to the NCSBN Model Practice Act and Rules.**

**Rationale:**
The proposed revision to the Model Act and Rules is recommended by the Distance Learning Education Committee addressing the issues member boards have expressed related to the regulation of distance education programs. The committee documented the issues and quality indicators of distance education programs in a white paper, and their recommendations allow for more consistency across jurisdictions.

**Fiscal Impact:**
None.

**Adopt the proposed revisions to the NCSBN Bylaws addressing the simultaneous vacancy of the president and president-elect positions.**

**Rationale:**
At the 2013 Delegate Assembly, members adopted a resolution to explore information technology available for voting by the Delegate Assembly in the event of vacancy of the president and president-elect, and to report on the advisability of amending the bylaws to allow for such electronic voting. Per the resolution, the 2014 Bylaws Committee Business Book report and recommendation fulfills the intent of the resolution.

**Fiscal Impact:**
None.

**Adopt the proposed revision to the APRN Interstate Compact.**

**Rationale:**
To provide uniform licensure requirements for licensing advanced practice registered nurses (APRNs) through a revised APRN Interstate Compact consistent with the APRN Consensus Model. The revision also includes proposed changes to improve the implementation of an interstate compact based on the experience of the NLC.

**Fiscal Impact:**
None.

**Approve the College of Licensed Practical Nurses of Newfoundland and Labrador as an associate member of NCSBN.**

**Rationale:**
The NCSBN Bylaws state that an associate member is a nursing regulatory body or empowered regulatory authority from another country or territory. The bylaws require approval of the membership by the full membership of the Delegate Assembly. The current applications for associate membership meet the qualifications as stated in the NCSBN Bylaws.

**Fiscal Impact:**
Upon acceptance each new associate member will pay a $1,500 annual fee.

**Approve the Nurses Association of New Brunswick as an associate member of NCSBN.**

**Rationale:**
The NCSBN Bylaws state that an associate member is a nursing regulatory body or empowered regulatory authority from another country or territory. The bylaws require approval of the membership by the full membership of the Delegate Assembly. The current applications for associate membership meet the qualifications as stated in the NCSBN Bylaws.

**Fiscal Impact:**
Upon acceptance each new associate member will pay a $1,500 annual fee.
Approve the Nursing and Midwifery Council of New South Wales as an associate member of NCSBN.

Rationale:
The NCSBN Bylaws state that an associate member is a nursing regulatory body or empowered regulatory authority from another country or territory. The bylaws require approval of the membership by the full membership of the Delegate Assembly. The current applications for associate membership meet the qualifications as stated in the NCSBN Bylaws.

Fiscal Impact:
Upon acceptance each new associate member will pay a $1,500 annual fee.

Approve the Yukon Registered Nurses Association as an associate member of NCSBN.

Rationale:
The NCSBN Bylaws state that an associate member is a nursing regulatory body or empowered regulatory authority from another country or territory. The bylaws require approval of the membership by the full membership of the Delegate Assembly. The current applications for associate membership meet the qualifications as stated in the NCSBN Bylaws.

Fiscal Impact:
Upon acceptance each new associate member will pay a $1,500 annual fee.

FY14 Highlights and Accomplishments

COLLABORATION WITH EXTERNAL ORGANIZATIONS

Strategic Partnership Meeting Attendance by BOD and/or NCSBN Staff
- National Governors Association (NGA)
- American Association of Colleges of Nursing (AACN)
- Citizen Advocacy Center (CAC) Annual Meeting
- National Student Nurses Association (NSNA)
- National Organization for Associate Degree Nursing (N-OADN)
- Nursing Organization Alliance (NOA) Fall Summit
- National League for Nursing (NLN) Education Summit
- Council on Licensure, Enforcement & Regulation (CLEAR) Educational Symposium
- International Nurse Regulator Collaborative (INRC)
- International Council of Nurses (ICN) Credentialing & Regulator Forum
- ICN Observatory on Registration & Licensure
- National Forum on Quality Improvement in Healthcare, Institute for Healthcare Improvement (IHI)
- Federation of Associations of Regulatory Boards (FARB) Annual Forum
- American Organization of Nurse Executives (AONE)
- Federation of State Medical Boards (FSMB)
- Healthcare Information & Management Systems Society (HIMMS)
- Tri-Regulator Collaborative Board Meeting
- Tri-Council for Nursing
GOVERNANCE AND POLICY

President Myra Broadway facilitated the orientation for the new fiscal year 2014 (FY14) BOD. Topics covered included a review of the mission, vision and values; the legal and fiduciary role and responsibilities of board members; the organizational structure, articles of incorporation, the bylaws and policy manual; nonprofit financial management; board member expectations; historical decisions made by the Delegate Assembly and the BOD; guidelines for the role of the BOD regarding requests from individual states; Delegate Assembly resolutions; and the role of the CEO and NCSBN staff. A board governance consultant met with the BOD to review and discuss the 12 principles of governance that foster exceptional boards.

The BOD reviewed and discussed an action plan for improving governance efficiency and effectiveness throughout the year.

The BOD adopted the FY14 Strategic Plan.

CEO Kathy Apple continuously reported on education and advocacy efforts in Washington, D.C., in conjunction with the Prime Policy Group, at each meeting.

The BOD reviewed and discussed an action plan for improving governance efficiency and effectiveness throughout the year.

The BOD reviewed and discussed various environmental issues at each meeting. Topics included APRN legislation; military and civilian practice and regulation; interstate compact for mutual recognition of regional education program accreditation, community paramedics, and federal legislation related to cross border telehealth practice for Medicare patients; implementation of the Affordable Care Act; new emerging health care roles; nursing education; nursing workforce; and the expansion of telehealth.

The BOD hosted a dial-in/webinar for member boards the final day of each meeting. Broadway presented the BOD’s discussions and actions taken during the meeting prior to the call/webinar, and responded to questions from participants.

The BOD held a generative discussion at each board meeting, addressing various questions relevant to the current and future work of NCSBN.

The BOD appointed members to FY15 NCSBN committees.

The BOD approved funding of $166,500 for 13 executive officers and two NCSBN BOD members to participate in executive coaching services provided by the Center for Creative Leadership over an 18-month period.

The BOD approved funding in the amount of $47,000 for an APRN Grandfathering/Endorsement World Café™ Conference for executive officers or their designee.

Per policy, the BOD is required to review the NCSBN Policy Manual every three years. The BOD reviewed, revised and approved adoption of all policies in the NCSBN Policy and Procedure Manual.

The BOD adopted proposed FY15 meeting dates, including a BOD retreat.

The BOD approved the FY14-16 Public Policy Agenda, which was revised to reflect the mission and the priorities of the organization.

The BOD moved to appoint Nathan Goldman as the chair of the NCSBN Standards Development Committee (NSDC) and that national, biometric CBCs be the initial standard for development. In addition, the BOD appointed members to the NSDC Committee.

The BOD moved to approve revisions to the identified performance measurements in the FY14 Strategic Plan. The revisions more accurately provide information related to the achievement of the desired impact of the strategic objective.
The BOD approved the position statement on Practice Location for Consumer Protection and authorized Apple to finalize the statement with the Federation of State Medical Boards and the National Association of Boards of Pharmacy. The position supports a consumer-centric model of public protection.

The BOD endorsed the Tri-Regulator Collaborative Position Statement on Interprofessional, Team-based Patient Care.

FINANCE
- The BOD approved the proposed budget for FY14.
- The BOD approved quarterly financial statements throughout the fiscal year.
- The BOD approved the proposed audit plan for FY13.
- The BOD approved the annual banking resolution authorizing the CEO to establish and maintain banking accounts.
- The BOD accepted the independent auditor’s report for the NCSBN retirement plan for the year ended June 30, 2013.
- The BOD accepted the report of the independent auditors for the year ended Sept. 30, 2013.
- The BOD reviewed and discussed the 2013 IRS 990 form.
- The BOD approved funding to have an expanded presence in Washington, D.C., with an office and a full-time government relations staff position, to ensure that policy makers and influencers are aware of the relevance of nursing regulation and state-based licensure, and to see NCSBN as a resource.
- The BOD met with NCSBN Liability Insurance Representative Sue Meyer to review and discuss NCSBN’s risk management liability insurance.
- The BOD met with NCSBN investments managers to review and discuss NCSBN’s investment portfolio and performance analysis.
- The BOD met with Plante Moran audit partners Genevieve Burns and Toni Diprizio regarding the results of the fraud risk assessment and the testing of internal controls.

TESTING
- The BOD moved to increase the NCLEX-PN® passing standard to -0.21 logits to ensure that the NCLEX-PN is a psychometrically sound and legally defensible measure of entry-level nursing competence.
- The BOD moved to authorize moving forward with continuing negotiations and exploration of discussion with other countries to utilize the NCLEX®.
- The BOD moved to continue to develop the National Nurse Aide Assessment Program (NNAAP®) and Medication Aide Certification Examination (MACE®) within the standards of a certification examination. This standard will ensure NCSBN remains a strong advocate of public safety related to the work of nurse aides/nursing assistants and medication aides/assistants.
- The BOD approved exploration of new testing products.

INFORMATION TECHNOLOGY (IT)
- Nur Rajwany, chief information officer, provided continuous operational and performance data related to Nursys® and Interactive Services throughout the year.
- Rajwany presented information resulting from exploring the possibility of exchanging licensure and discipline information between Canadian regulatory bodies and member boards.
NURSING REGULATION AND RESEARCH

- Maryann Alexander, chief officer, Nursing Regulation, presented an update on the TERCAP® project.
- Alexander provided the BOD with feedback on APRN grandfathering guidelines as finalized by members.
- Nancy Spector, director, Regulatory Innovations, presented the preliminary Transition to Practice® Phase I data analysis.
- Alexander presented a comprehensive update on all NCSBN research programs and projects for the BOD’s review and discussion.
- Alexander presented performance outcome data related to ongoing programs and projects in Nursing Regulation for the BOD’s review and discussion.

Attachments

A. Annual Strategic Plan Progress Report, October 2013 – May 2014
B. Proposed Advanced Practice Registered Nurse Compact Statute
C. Proposed Advanced Practice Registered Nurse Compact Rules
D. College of Licensed Practical Nurses of Newfoundland and Labrador Associate Member Application
E. Nurses Association of New Brunswick Associate Member Application
F. Nursing and Midwifery Council of New South Wales Associate Member Application
G. Yukon Registered Nurses Association Associate Member Application
Attachment A

Annual Strategic Progress Report,
October 2013–May 2014

The Annual Strategic Progress Report is provided as a summary of the year’s activities and accomplishments in the work toward aligning the strategies with NCSBN’s vision, mission and values, and achieving the organization’s strategic initiatives. This scorecard provides feedback around both the internal business processes and external outcomes in order to continuously improve strategic performance and results.

A. Advance regulatory relevance and responsiveness to changes in health care.

NCSBN’s purpose, vision and mission all incorporate statements about its relation to regulation and ensuring the safety and well-being of the public. With this in mind, NCSBN needs to be on the cutting-edge of knowledge regarding regulatory relevance in health care. It must play a lead role at the national level in support of state-based licensure. It must also be aware of current trends, have direct lines of communication with its stakeholders, and be able to sort through multiple dimensions of data and information. Examples include the implementation of the Affordable Care Act (ACA) and the APRN Consensus Model, nursing research, evolution of technology, the effects of cost containment, and the evolution of nursing practice.

STRATEGIC OBJECTIVE 1

Increase stakeholder awareness regarding the importance of nursing regulation by member boards.

NCSBN is interested in developing relationships and resources that target policy makers and influencers in order to realize the value of nursing regulation. To that end, these key stakeholders will be aware of the relevance of nursing regulation and state-based licensure, and see NCSBN as a resource. Leadership has met with the Prime Policy Group to develop a more aggressive education and advocacy plan with key policy makers in Washington, D.C. NCSBN has also consulted with the National Governors Association (NGA)/Department of Labor on work related to the transition from military to civilian health care careers, and presented at their Policy Academy. NCSBN also met with Ed Salsburg at Health Resources and Services Administration (HRSA) to discuss the workforce project, and the role and importance of boards of nursing (BONs) in workforce data collection. NCSBN leadership has also met with seven U.S. representatives and one U.S. senate staff member related to telehealth legislation; a member of the Office of the U.S. Trade Representative; and has been invited to the White House for a health care workforce discussion with Vice President Biden’s policy staff. The Board of Directors (BOD) formally approved a Washington, D.C. satellite office and a full-time government affairs staff position.

STRATEGIC OBJECTIVE 2

Provide members with current information and analysis on the evolving health care environment regarding the ACA and how it impacts BONs.

By improving systems for analysis and dissemination of legislative and emerging practice information, member boards are able to respond to the current health care environment and take appropriate action. NCSBN contracted with State Net for an improved system to compile and relate state legislative information to BONs. The NCSBN Nursing Regulation staff also completed its comprehensive look at this year’s Environmental Scan and distributed it to BONs for their future planning. This valuable information can be used for setting legislative agendas, strategic planning and anticipating emerging issues. An upcoming Journal of Nursing Regulation (JNR) article will focus on the ACA and regulatory implications, and a network call is planned on ACA with education, policy, practice and APRN groups.
**STRATEGIC OBJECTIVE 3**

**Advance the implementation of the APRN Consensus Model.**

One of NCSBN’s major goals is to increase the number of member boards implementing the APRN Consensus Model. Fiscal year 2014 (FY14) proved to be a very busy legislative year for advanced practice registered nurse (APRN) related issues; seven major bills have been introduced and passed by six states: Alaska, Idaho, Kentucky, Oregon, South Dakota and Utah. Three that stand out and lead to map points include: Alaska – recognizes role of certified nurse specialist (CNS) through rule; Kentucky – Senate Bill 7 grants legend prescriptive authority to APRNs who have been in a collaborative practice for four or more years, as well as establishes a Collaborative Prescribing Agreement Joint Advisory Committee; and South Dakota – Senate Bill 30, which was signed by the governor, gives APRN title to all four roles and license designation to certified registered nurse anesthetists (CRNAs). An additional 15 states have pending bills that could add map points, and an additional 17 states have bills that could add clarity or function to APRN roles. Passing them would help move states closer to alignment with consensus.

**STRATEGIC OBJECTIVE 4**

**Advance the implementation of criminal background checks (CBCs).**

NCSBN believes that establishing a national standard for CBC screening as a licensure requirement is necessary to assure that health care providers are safe and competent. These federal biometric CBCs would be utilized by nurses upon application for initial, endorsement, reinstatement and renewal of licensure, and will assure individuals with criminal histories are screened for their ability to safely practice nursing. Currently, 42 BONs are actively conducting CBCs, while 14 are not. Communication with BONs not yet performing fingerprint-based CBCs is ongoing. Of these 14, three are considering the possibility of introducing legislation. NCSBN’s Nursing Regulation department is currently working with the Council of State Governments (CSG) on production of a *Book of the States* article on the importance of CBCs on health care providers. Hawaii CBC legislation was recently introduced, but it did not progress past committee.

---

**B. Promote regulatory solutions to address borderless health care delivery.**

Defining the nurse licensure regulatory framework for borderless health care delivery over the next few years will be challenging. Where BONs can make a difference must be carefully understood. While telehealth’s influence in health care has increased over the last two decades, it has taken on new political influence that will impact the state-based licensure system. Being cognizant of the legislative process, current issues and where NCSBN can get involved and/or facilitate the process will help accelerate the achievement of desired results for BONs and public protection.

**STRATEGIC OBJECTIVE 1**

**Explore licensing options for safe and effective interstate telehealth practice.**

Providing licensure options for legal authorization for interstate telehealth practice across state lines will allow member boards to have alternatives when promoting borderless health care delivery. NCSBN has engaged the member community through various Executive Officer Forums in discussing future options and possibilities, along with licensure options. Currently, a task force is studying and updating a 1997 analysis of all known licensure models with pros and cons. NCSBN recently hosted its third Executive Officer Forum, featuring Leonard Marcus, PhD, of the Harvard School of Public Health. Agreement was also reached on revisions needed to the mutual recognition model.
STRAteGIC OBJECTIVE 2
Support the Nurse Licensure Compact (NLC).
NCSBN supports the Nurse Licensure Compact Administrators (NLCA) in meeting the contractual obligations of the NLC. Doing so helps the NLC function efficiently and effectively. To date, all contractual obligations have been identified and linked to the NLC budget. This information has been shared with the NLCA Executive Committee and has been further aligned to the NCSBN Strategic Plan.

STRAteGIC OBJECTIVE 3
Understand the current status of intercountry nursing telehealth practice.
By conducting an analysis of the current telehealth nursing practice between and among countries, member boards and NCSBN can understand the current state of international telehealth practice and its implications for licensure between and among countries. A literature review was initiated on the practice of telehealth nursing. An international study and survey regarding out of country telehealth practice is underway. A staff team has also been charged with the exploration of U.S.-based companies providing telehealth services, review of the literature, and all known activities of the International Telehealth Association.

C. Expand the active engagement and leadership potential of all members.
The success that NCSBN achieves in reaching its vision, mission and goals is directly proportional to the active engagement and leadership of its members. NCSBN is committed to developing programs and services that enhance a BON's participation and experience in sharing its time, talent, and expertise. This initiative will concentrate on such things as exploring structured methods for leadership development, implementing leadership succession planning, addressing the specific needs of the executive officer, embracing generational changes in nursing regulation and building the regulatory expertise of members.

STRAteGIC OBJECTIVE 1
Explore opportunities to increase the use of technology to enhance capability and quality of remote participation of members on committees.
By developing and implementing new participation modalities, NCSBN will be able to expand opportunities and remove barriers for active engagement of members. A task force of key staff was formed to launch the Tools of Engagement project discovery phase. Various stakeholders were surveyed and interviewed to understand issues with current tools and need and scope for new tools. Requirements were articulated and a request for proposal from vendors was completed, with product demonstrations being conducted.

STRAteGIC OBJECTIVE 2
Increase participation in NCSBN activities by individuals of member boards who have not previously been involved or whose involvement has been limited.
By analyzing the needs of nonparticipating members and recommending strategies for engagement, individuals who have not previously participated will have an opportunity for involvement in NCSBN activities and/or to utilize available resources. Discovery work has started for introducing new video conferencing and other new tools to increase engagement of members. In addition, members who were new to Passport, new to NCSBN's online presence, and/or unfamiliar with NCSBN programs and services were identified. These new Passport users, Passport administrators and associate members were surveyed to identify their needs, interests
and knowledge. Four areas of interest and topics were identified among these groups: Passport – Knowledge Networks; Website – Introduction to Programs and Services; Web Survey Tool; and Passport – New User Experience (Logging In). Webinars are being conducted with additional ones being planned to address these needs.

**STRATEGIC OBJECTIVE 3**

**Explore a structured method for leadership development.**

The Leadership Succession Committee (LSC) asked the BOD last year to explore options for the development and creation of a Leadership Academy (LA). The BOD subsequently charged a committee to look at a business plan for development of the LA. The strategy and framework developed by the committee will be presented to the BOD in May for its review and approval.

**STRATEGIC OBJECTIVE 4**

**Implement leadership succession planning.**

The LSC will recommend strategies for the ongoing sustainability and advancement of the organization through leadership succession planning. Both current and new strategies for leadership development will be explored, reviewed, evaluated and recommended for use and implementation among member boards and their staff. Considerations include Leadership Development calls, articles on leadership in *In Focus* (formerly *Council Connector*), and visibility of committee members at NCSBN conferences in order to highlight the nomination process.

**STRATEGIC OBJECTIVE 5**

**Address member board needs specific to the executive officer (EO) role.**

Developing resources on EO succession planning for use by the member boards is critical to BONs remaining on track to accomplish their vision, mission and goals. A comprehensive toolkit will be available to member boards to develop an EO succession plan. The EO Succession Committee developed an online, Web-based toolkit, and collaborated with NCSBN's Interactive Services and Marketing & Communications departments to review the document and develop Web pages. The final toolkit product was submitted to the BOD at the May meeting and the rollout to the EOs and board presidents will occur at the Annual Meeting.

**STRATEGIC OBJECTIVE 6**

**Build the regulatory expertise of members through the Institute of Regulatory Excellence (IRE).**

Each year the IRE selects a cohort of candidates to pursue a fellowship in the IRE. Over the course of four years they identify and work on groundbreaking projects that contribute value to the science of nursing regulation. The committee must select Fellows and mentors, and approve project proposals. Because of this opportunity, individuals are involved in efforts that build their regulatory knowledge, skill and ability. For 2014, nine members were selected as Fellows in the program. An IRE Conference, held for the tenth year in a row, was held in January with the theme, “New Ways of Looking at Competence.”
D. Develop competency assessments to support the future of health care and the advancement of regulatory excellence.

NCSBN is dedicated to providing state-of-the-art competence assessments that are psychometrically sound, secure and legally defensible. Maintaining the industry benchmark for consistency and value requires a team effort, as well as defining its future development and application. Areas of focus may include enhancing precision of the measurement of NCLEX® candidates through the use of technology, investigating the use of NCSBN’s exam resources to support the work of regulatory boards, and increasing the NCLEX exam’s presence within the international nursing and testing community.

STRATEGIC OBJECTIVE 1
Enhance precision of the measurement of NCLEX® candidates through the use of state-of-the-art technologies and unfolding scoring models.

NCSBN concentrates on conducting ongoing research to determine the level of clinical decision making/judgment necessary for the safe and effective practice of entry-level registered nurses (RNs) and licensed practical/vocational nurses (LPNs/VNs). RN practice analysis and RN knowledge, skills and abilities expert panels were conducted in preparation for the launch of the 2014 RN Practice Analysis survey. The charge of these two panels is to identify the activities, knowledge, skills and abilities required to deliver safe, effective entry-level nursing care. The outcome of these meetings, along with sampling, will culminate in a survey conducted in the third quarter of FY14. The results of the surveys will be used in the development of the 2016 NCLEX-RN® Test Plan and serve as a foundation in the NCLEX® Item Development Process.

NCSBN also strives to develop prototype items that use computer simulation focused on measuring clinical decision making/judgment in order to maintain a state-of-the-art NCLEX examination program. NCSBN Examination staff have created several NCLEX prototype items, which include computer simulation, have worked with the Joint Research Committee (JRC) to verify the validity of these prototypes, and have presented them to the NCLEX® Examination Committee (NEC) for their review and input.

STRATEGIC OBJECTIVE 2
Investigate the use of NCSBN’s exam resources to support the work of the regulatory boards.

By exploring the development of a psychometrically sound, legally defensible assessment to measure the competence of nurses who have had disciplinary action related to practice taken against their licenses, NCSBN will be able to provide an RN/LPN/VN disciplinary assessment with necessary regulatory sufficiency to assist member boards when making decisions relative to licensure reinstatement. Currently, an internal project team has been created, is conducting a literature review and feasibility study, and has completed a timeline and work plan for the study.

Similarly, by exploring the development of RN/LPN/VN licensure maintenance assessment tools, which can be used by nurses and member boards to help identify strengths and weaknesses related to knowledge, skill and ability necessary for safe and effective nurse practice, NCSBN will be able to provide a psychometrically sound/legally defensible assessment to support the licensure maintenance activities of the member boards. The licensure maintenance assessment tools can be used by practicing nurses to focus continuing education efforts, as well as by member boards to enhance licensure maintenance decisions.
By exploring the development of practice tests for NCLEX candidates, NCSBN will be able to provide NCLEX candidates with practice NCLEX examinations to help reduce candidate anxiety associated with sitting for the NCLEX, while providing a secondary revenue source to NCSBN. An internal project team has been created and work is underway to collect data surrounding testing industry practices as it relates to the development, launch and maintenance of practice exams.

**STRATEGIC OBJECTIVE 3**

*Increase the NCLEX® presence within the international nursing and testing community.*

By conducting market research to identify potential areas of NCLEX international growth, NCSBN will be able to provide data for informed decisions related to targeted expansion of NCSBN examination products internationally. Market research for 12 international jurisdictions is complete and a report to the BOD was provided at the February 2014 BOD meeting.

NCSBN would like to become active participants within the International Testing Commission (ITC), and therefore, increase its presence within the international testing community while providing a venue for NCSBN to influence discussions supporting licensure examinations within the regulatory environment. Collaborating with psychometricians from vendor organizations Pearson VUE and Mountain Measurement, the NCSBN Examinations staff will present the results of seven research projects to an international audience at the 2014 ITC Conference in San Sebastian, Spain in July 2014.

**E. Promote evidence-based regulation.**

Knowledge is gained through a careful and thorough attempt at conducting research, analysis, understanding and application of lessons learned. NCSBN continues an active research program with meaningful and useful projects that follow sound scientific principles. Continuing this tradition, possible issues to explore might include influencing policy through building the science of nursing regulation; developing BON performance measurement data; developing patient safety measures and activities; regulatory standards setting; and advancing evidence-based regulation in the areas of discipline, licensure, education and practice.

**STRATEGIC OBJECTIVE 1**

*Influence policy through building the science of nursing regulation.*

Research meets the needs of member boards by developing a three-year research agenda with sound scientific and regulatory relevant proposals. The agenda was presented to the BOD in July 2013; proposal development is in process.

By translating research data to policy recommendations, the NCSBN Nursing Regulation department helps provide policy recommendations that assist and influence the member boards in their decision making for evidence-based regulation. There are no planned activities until the third quarter of FY14.

**STRATEGIC OBJECTIVE 2**

*Develop BON performance measurement data.*

Increasing the clarity of the current Commitment to Ongoing Regulatory Excellence (CORE) survey questions will lead to collected data that are more accurate. The committee developed and conducted a short survey to get EO’s input on the revised CORE survey and reports. The committee also assessed the current CORE measures, using criteria, to determine if they are useful and value-added to the process. Some of the criteria include credible to stakeholders, linked to mission and goals, balanced and comprehensive, valid and reliable, timely and
actionable, resistant to goal displacement and gaming, cost sensitive, and clear regarding preferred direction of movement. A small group of CORE Committee members met to discuss using Nursys® data as a discipline measure for CORE. The group created an algorithm of what discipline action codes should be used to describe the number of nurses with disciplinary action.

The CORE Committee will conduct a focus group to search for promising practices in the area of licensure. In this way, they will identify one or more promising practices for initial application process, renewal process and endorsement process. A focus group has been identified and formed, and has established its charter and objectives.

The CORE Committee will also create an adoption plan for effective practices in the area of discipline. By doing this, they will be able to provide a plan that member boards can utilize to improve performance in the area of discipline. The committee reviewed discipline data and past focus group attendees to identify members of the subcommittee; nine members were eventually appointed. The subcommittee broke into three working groups: triage, investigation, and resolution of a case to create documents and templates on identified promising practices.

By identifying a uniform set of data measures regarding the performance of the NLC states, the CORE Committee developed a tool to collect data about the performance of the NLC. To date, the CORE Committee finalized the following four survey tools for collecting data: NLC BON Survey Compact States; NLC BON Survey Noncompact States; NLC Nurses Survey Compact States; and NLC Nurses Survey Noncompact States.

**STRATEGIC OBJECTIVE 3**

Provide accurate information about member boards through the Member Board Profiles (MBP) for use by members and the public.

It is NCSBN’s intent to periodically review and revise the MBP. The revised tool will ensure that data collected is accurate and timely, and depicts the regulatory environment of the member boards. The committee reviewed data collected from other reports along with past member board feedback. It also developed a vision for MBP, including the audience, content, online capability, executive summary and type of reports. It also developed a process for evaluation of each MBP survey section/questions and then compared all five profiles against the criteria. The committee then met with NCSBN’s Information Technology department to discuss a vision for a MBP application, development and refinement of business requirements, and chose an application launch date of September 2014.
ARTICLE I
Findings and Declaration of Purpose

a. The party states find that:
   1. The health and safety of the public are affected by the degree of compliance with APRN licensure requirements and the effectiveness of enforcement activities related to state APRN licensure laws;
   2. The expanded mobility of APRNs and the use of advanced communication technologies as part of our nation’s health care delivery system require greater coordination and cooperation among states in the areas of APRN licensure and regulation;
   3. New practice modalities and technology make compliance with individual state APRN licensure laws difficult and complex;
   4. The current system of duplicative APRN licensure for APRNs practicing in multiple states is cumbersome and redundant to both APRNs and states;
   5. Uniformity of APRN requirements throughout the states promotes public safety and public health benefits; and
   6. Violations of APRN licensure and other laws regulating the practice of nursing may result in injury or harm to the public.

b. The general purposes of this Compact are to:
   1. Facilitate the states’ responsibilities to protect the public’s health and safety;
   2. Ensure and encourage the cooperation of party states in the areas of APRN licensure and regulation, including promotion of uniform licensure requirements;
   3. Facilitate the exchange of information between party states in the areas of APRN regulation, investigation and adverse actions;
   4. Promote compliance with the laws governing APRN practice in each jurisdiction;
   5. Invest all party states with the authority to hold an APRN accountable for meeting all state practice laws in the state in which the patient is located at the time care is rendered through the mutual recognition of party state licenses;
   6. Decrease redundancies in the consideration and issuance of APRN licensure; and
   7. Provide opportunities for interstate practice by advanced practice registered nurses who meet uniform licensure requirements.

ARTICLE II
Definitions

As used in this Compact:

a. “Advanced Practice Registered Nurse” or “APRN” means a registered nurse who has gained additional specialized knowledge, skills and experience through a program of study recognized or defined by the Commission, and who is licensed to perform advanced nursing practice. An advanced practice registered nurse is licensed in an APRN role which is congruent with an APRN educational program, certification, and Commission rules.
b. “Adverse action” means any administrative, civil, equitable or criminal action permitted by a state’s laws which are imposed on an APRN by a state Board of Nursing or other authority, including actions against an individual’s license such as: revocation, suspension, probation, monitoring of the licensee, limitation on the licensee’s practice, or any other encumbrance on licensure affecting an APRN’s authorization to practice, including the issuance of a cease and desist action.

c. “Alternative program” means a voluntary, non-disciplinary monitoring program approved by a state Board of Nursing.

d. “APRN licensure” means the regulatory mechanism used by a party state to grant legal authority to practice as an APRN.

e. “APRN Uniform Licensure Requirements” means minimum uniform licensure, education and examination requirements as agreed to by the Interstate Commission of APRN Compact Administrators.

f. “Board of Nursing” or “Board” means a state’s regulatory body responsible for regulating the practice of advanced practice registered nursing.

g. “Coordinated licensure information system” means an integrated process for collecting, storing and sharing information on APRN licensure and enforcement activities related to APRN licensure laws, which is administered by a non-profit organization composed of and controlled by state Boards of Nursing.

h. “Commission” means the Interstate Commission of APRN Compact Administrators.

i. “Compact license” means APRN licensure issued by a home state which includes a privilege to practice as an APRN in any remote state in the same role and population focus as the APRN is licensed in the home state.

j. “Current significant investigatory information” means:

1. Investigative information that a state Board of Nursing, after a preliminary inquiry that includes notification and an opportunity for the APRN to respond if required by state law, has reason to believe is not groundless and, if proved true, would indicate more than a minor infraction; or

2. Investigative information that indicates that the APRN represents an immediate threat to public health and safety regardless of whether the APRN has been notified and had an opportunity to respond.

k. “Encumbered” or “encumbrance” means revocation of licensure, suspension of licensure, or licensure status that is subject to current limitation due to adverse action.

l. “Financial impact statement” means an analysis required under a state’s law whereby a government agency or Board is required to consider the estimated effect of a proposed rule on business organizations or the state economy.

m. “Home state” means the party state that is the APRN’s primary state of residence.

n. “Legend Drug” means a device or drug that is not a controlled substance and is prohibited under state or federal law from being dispensed without a prescription. The term includes a device or drug that bears or is required to bear the legend "Caution: federal law prohibits dispensing without prescription" or "prescription only" or other legend that complies with federal law.

o. “Licensure” means granting the authority to practice.

p. “Party state” means any state that has adopted this compact into law.

q. “Population focus” means a specific patient population which is congruent with the APRN educational program, certification, and Commission rules.
r. “Prescriptive authority” means the legal authority to prescribe medications and devices as defined by party state laws.
s. “Privilege to practice” means a legal authorization associated with an APRN compact license which permits an APRN to practice in a remote state in the same role and population focus as the APRN is licensed in the home state.
t. “Remote state” means a party state which is not the home state.
u. “Single state license” means APRN licensure issued by a party state which is valid only for practice within the issuing state, and does not include a privilege to practice in any other party state.
v. “State” means a state, territory, or possession of the United States.
w. “State practice laws” means a party state’s laws, rules, and regulations that govern APRN practice, define the scope of advanced nursing practice rules including prescriptive authority, and create the methods and grounds for imposing discipline. State practice laws do not include the requirements necessary to obtain and retain APRN licensure, except for qualifications or requirements of the home state.

ARTICLE III
General Provisions and Jurisdiction

a. By rule, the Interstate Commission of APRN Compact Administrators shall adopt the APRN Uniform Licensure Requirements (“ULRs”). The ULRs shall provide the minimum requirements for APRN compact licensure in party states. The Commission shall adopt rules concerning single state license eligibility for APRN licensees and applicants who do not qualify for compact licensure under the Uniform Licensure Requirements.
b. In addition to the ULRs, an applicant for compact or single state licensure must meet the home state’s eligibility requirements for licensure or renewal of licensure as well as all other applicable home state laws.
c. By rule, the Commission shall identify the approved ARPN roles and population foci for licensure as an APRN. An APRN issued a compact license shall be licensed in an approved APRN role and at least one approved population focus.
d. An APRN compact license issued by a home state shall authorize the APRN to exercise a privilege to practice as an APRN in each party state. If an applicant does not qualify for a compact license, a single state license may be issued as authorized under Commission rules and home state law.
e. Issuance of an APRN compact license shall include prescriptive authority for legend drugs, unless the APRN was licensed prior to the home state’s adoption of the compact and has not previously held prescriptive authority.
   1. An APRN granted prescriptive authority for legend drugs in the home state may exercise prescriptive authority for legend drugs in any remote state while exercising a privilege to practice under an APRN compact license; the APRN shall not be required to meet any additional eligibility requirements imposed by the remote state in exercising prescriptive authority for legend drugs.
   2. Prescriptive authority eligibility for an APRN who was not granted prescriptive authority at the time of initial licensure shall be determined under home state law.
3. Prescriptive authority eligibility for an APRN holding a single state license shall be determined under state law.

f. For each state in which an APRN seeks authority to prescribe controlled substances, the APRN shall satisfy all requirements imposed by the state in granting and/or renewing such authority.

g. An APRN compact license-holder is authorized to assume responsibility and accountability for patient care independent of a supervisory or collaborative relationship with a physician. This authority may be exercised in the home state and any remote state in which the APRN exercises compact practice privileges. For a single state licensee in a party state, the requirement for a supervisory or collaborative relationship with a physician shall be determined under state law.

h. A remote state may, in accordance with state due process laws, limit or revoke an APRN compact license-holder’s privilege to practice in the remote state and may take any other necessary actions under the remote state’s applicable laws to protect the health and safety of the remote state’s citizens. If a remote state takes action, notification of such action shall be promptly reported to the coordinated licensure information system. The administrator of the coordinated licensure information system shall ensure the home state is promptly notified of any such actions by remote states.

i. An APRN practicing in a party state must comply with the practice laws of the state in which the patient is located at the time care is provided. APRN practice includes patient care and all advanced nursing practice defined by the party state’s practice laws. Practice in a state will subject an APRN to the jurisdiction of the Board, the courts, and the laws of the party state.

**ARTICLE IV**

**Applications for APRN Licensure in a Party State**

a. In considering the approval or denial of an application for APRN licensure, a party state shall ascertain, through the coordinated licensure information system, whether:

   1. The applicant has held or is the holder of a licensed practical/vocational nursing license, a registered nursing license, or an advanced practice registered nurse license issued by any other state;
   2. An encumbrance exists on any license or privilege to practice held by the applicant; or
   3. Previous adverse action has been taken against any license or privilege to practice held by the applicant.

b. If a party state determines that an applicant is appropriate for licensure, the state shall issue a compact license or single state license, as appropriate under the Uniform Licensure Requirements. All applicants who meet the Uniform Licensure Requirements and are deemed eligible for licensure in a party state shall receive a compact license. Compact licenses may be issued with inactivated compact privileges, as required under this act or Commission rule.

   1. If a party state grants licensure to an applicant whose nursing license or privilege to practice is presently encumbered or otherwise limited in another jurisdiction, compact privileges shall be inactive until such time that all nursing licenses or privileges held by the applicant have been cleared of any encumbrances.
   2. If a party state grants licensure to an applicant whose nursing license or application was previously revoked, surrendered, or denied in another party state, compact privileges
shall be inactive until such time that the applicant would qualify for reinstatement or issuance of licensure under the previous state’s eligibility requirements.

3. If a party state grants an encumbered license to an applicant, compact privileges shall be inactive until the encumbrance has been removed.

c. An APRN granted a compact license with inactivated compact privileges under this Article may petition for an active privilege to practice as an APRN in another party state in accordance with Article V Subsection (h) of this Act.

d. An APRN compact licensee shall hold APRN licensure in only one party state, issued by the home state.

1. When an APRN compact licensee changes primary state of residence by moving between two party states, the licensee must apply for APRN licensure in the new home state;
   
   A. The APRN may apply for licensure in advance of a change in primary state of residence. New licensure will not be issued by a party state until the APRN provides satisfactory evidence of a change in primary state of residence to the new home state’s Board of Nursing;
   
   B. If the licensee obtains APRN licensure from the new home state, the APRN licensure from the former home state is no longer valid

2. When an APRN compact licensee changes primary state of residence by moving from a party state to a non-party state, the APRN license issued by the prior home state converts to a single state license, valid only in the former home state.

ARTICLE V
Adverse Actions

In addition to the General Provisions described in Article III, the following provisions apply:

a. All party state Boards shall promptly report to the administrator of the coordinated licensure information system any adverse action against an APRN’s license or associated privilege to practice, including the factual and legal basis for such action, if known. A party state Board shall promptly report any significant current investigative information yet to result in adverse action. The administrator of the coordinated licensure information system shall promptly notify the home state of any such reports.

b. A party state Board shall have the authority to complete any pending investigations of an APRN who changes primary state of residence during the course of such investigations. It shall also have the authority to take appropriate action(s), and shall promptly report the conclusions of such investigations to the administrator of the coordinated licensure information system. The administrator of the coordinated licensure information system shall promptly notify the new home state of any such actions.

c. The home state shall have exclusive power to impose adverse action against an APRN’s compact licensure. A remote state may take adverse action limited to the compact license-holder’s privilege to practice within that party state.

d. For purposes of imposing adverse action, the home state Board shall give the same priority and effect to reported conduct which occurred outside of the home state as it would if such conduct had occurred within the home state. In such cases, the home state’s law shall control in determining the appropriate adverse action.
e. Any party state may take adverse action based on the factual findings of another party state, so long as each state follows its own procedures for imposing such adverse action.

f. Nothing in this compact shall override a party state’s decision that participation in an alternative program may be used in lieu of adverse action and that such participation shall remain non-public if required by the party state’s laws. Party states must require APRNs who enter any alternative programs to agree not to practice in any other party state during the term of the alternative program without prior authorization from such other party state.

g. If adverse action is taken by a home state against an APRN compact license, compact privileges associated with the APRN’s compact license are inactivated until all encumbrances have been removed from the APRN’s license, subject to the exception in Subsection (h), below. All home state disciplinary orders which impose adverse action on an APRN’s compact license shall include a statement that the APRN’s compact privileges are inactive during the pendency of the order.

h. If a licensee’s compact privileges have been inactivated due to adverse action in the home state or any other jurisdiction, the licensee may request permission for an active privilege to practice in another party state. The licensee must receive such approval in writing from the home state and the state in which the licensee is seeking permission to practice.

ARTICLE VI
Additional Authorities Invested in Party State Boards of Nursing

In addition to any other powers granted under state law, party state Boards of Nursing shall have the authority to:

a. Issue subpoenas for both hearings and investigations, which require the attendance and testimony of witnesses and the production of evidence. Subpoenas issued by a party state Board of Nursing for the attendance and testimony of witnesses, and/or the production of evidence from another party state shall be enforced in the latter state by any court of competent jurisdiction, according to that court’s practice and procedure in considering subpoenas issued in its own proceedings. The issuing Board shall pay any witness fees, travel expenses, mileage and other fees required by the service statutes of the state where the witnesses and/or evidence are located; and

b. Issue cease and desist orders to limit or revoke an APRN’s authorization to practice in the state.

ARTICLE VII
Coordinated Licensure Information System and Exchange of Information

a. All party states shall participate in a cooperative effort to submit data to a coordinated database of all APRN licensees. This system will include information on the APRN licensure and disciplinary history of each APRN, as contributed by party states, to assist in the coordinated administration of APRN licensure and enforcement efforts.

b. Notwithstanding any other provision of law, all party state Boards shall promptly report to the coordinated licensure information system:

1. Adverse actions which have been taken against an APRN’s compact license, single state license, or privilege to practice;
2. Any current significant investigative information yet to result in adverse action; and
3. Any denial of application for licensure as an APRN, and the reasons for such denial.

c. Current significant investigative information shall be transmitted through the coordinated licensure information system to party state Boards of Nursing.

d. Notwithstanding any other provision of law, all state Boards contributing information to the coordinated licensure information system may designate information that may not be shared with non-party states or disclosed to other entities or individuals without the express permission of the contributing state.

e. Personally identifiable information obtained from the coordinated licensure information system by a party state Board shall not be shared with non-party states or disclosed to other entities or individuals except to the extent permitted by the laws of the party state contributing the information.

f. Any information contributed to the coordinated licensure information system that is subsequently required to be expunged by the laws of the party state contributing the information shall be removed from the coordinated licensure information system.

g. The compact administrator of each party state shall furnish a uniform data set to the compact administrator of each other party state, which shall include, at a minimum:
   1. Identifying information;
   2. Licensure data;
   3. Non-confidential information related to alternative program participation information; and
   4. Other information which may facilitate the administration of this compact, as determined by Commission rule.

h. The compact administrator of a party state shall provide all investigative documents and information requested by another party state to the extent allowable under state law.

ARTICLE VIII
Establishment of the Interstate Commission of APRN Compact Administrators

a. The compacting states hereby create and establish a joint public agency known as the Interstate Commission of APRN Compact Administrators.

1. The Commission is a body politic and an instrumentality of the compacting states.

2. Venue is proper and judicial proceedings by or against the Commission shall be brought solely and exclusively in a court of competent jurisdiction where the principal office of the Commission is located. The Commission may waive venue and jurisdictional defenses to the extent it adopts or consents to participate in alternative dispute resolution proceedings.

3. Nothing in this compact shall be construed to be a waiver of sovereign immunity.

b. Membership, Voting, and Meetings

1. Each party state shall have and be limited to one administrator. The head of the state Board of Nursing or his designee shall be the administrator of this compact for each party state. Any administrator may be removed or suspended from office as provided by the law of the State from which the Administrator is appointed. Any vacancy occurring in the Commission shall be filled in accordance with the laws of the compacting state in which the vacancy exists.
2. Each administrator shall be entitled to one (1) vote with regard to the promulgation of
rules and creation of bylaws and shall otherwise have an opportunity to participate in the
business and affairs of the Commission. An administrator shall vote in person or by such
other means as provided in the bylaws. The bylaws may provide for an administrator’s
participation in meetings by telephone or other means of communication.

3. The Commission shall meet at least once during each calendar year. Additional meetings
shall be held as set forth in the bylaws or rules of the commission.

4. All meetings shall be open to the public, and public notice of meetings shall be given in
the same manner as required under the rulemaking provisions in Article IX.

5. The Commission may convene in a closed, non-public meeting if the Commission must
discuss:
   A. Non-compliance of a party state with its obligations under the compact;
   B. The employment, compensation, discipline or other personnel matters, practices or
      procedures related to specific employees or other matters related to the Commission’s
      internal personnel practices and procedures;
   C. Current, threatened, or reasonably anticipated litigation;
   D. Negotiation of contracts for the purchase or sale of goods, services or real estate;
   E. Accusing any person of a crime or formally censuring any person;
   F. Disclosure of trade secrets or commercial or financial information which is privileged or
      confidential;
   G. Disclosure of information of a personal nature where disclosure would constitute a
      clearly unwarranted invasion of personal privacy;
   H. Disclosure of investigatory records compiled for law enforcement purposes;
   I. Disclosure of information related to any reports prepared by or on behalf of the
      Commission for the purpose of investigation of compliance with the compact; or
   J. Matters specifically exempted from disclosure by federal and/or state statute.

6. If a meeting, or portion of a meeting, is closed pursuant to this provision, the
Commission’s legal counsel or designee shall certify that the meeting may be closed and
shall reference each relevant exempting provision. The Commission shall keep minutes
which fully and clearly describe all matters discussed in a meeting and shall provide a
full and accurate summary of actions taken, and the reasons therefore, including a
description of the views expressed. All documents considered in connection with an
action shall be identified in such minutes. All minutes and documents of a closed meeting
shall remain under seal, subject to release by a majority vote of the Commission or order
of a court of competent jurisdiction.

c. The Commission shall, by a majority vote of the administrators, prescribe bylaws and/or
rules to govern its conduct as may be necessary or appropriate to carry out the purposes and
exercise the powers of the compact, including but not limited to:
1. Establishing the fiscal year of the Commission;
2. Providing reasonable standards and procedures:
   A. for the establishment and meetings of other committees; and
   B. governing any general or specific delegation of any authority or function of the
      Commission;
3. Providing reasonable procedures for calling and conducting meetings of the Commission,
ensuring reasonable advance notice of all meetings and providing an opportunity for
attendance of such meetings by interested parties, with enumerated exceptions designed
to protect the public’s interest, the privacy of individuals, and proprietary information,
including trade secrets. The Commission may meet in closed session only after a majority of the membership votes to close a meeting in whole or in part. As soon as practicable, the Commission must make public a copy of the vote to close the meeting revealing the vote of each administrator with no proxy votes allowed;

4. Establishing the titles, duties and authority and reasonable procedures for the election of the officers of the Commission;

5. Providing reasonable standards and procedures for the establishment of the personnel policies and programs of the Commission. Notwithstanding any civil service or other similar laws of any party state, the bylaws shall exclusively govern the personnel policies and programs of the Commission;

6. Providing a mechanism for winding up the operations of the Commission and the equitable disposition of any surplus funds that may exist after the termination of the compact after the payment and/or reserving of all of its debts and obligations;

7. The Commission shall publish its bylaws in a convenient form and file a copy thereof and a copy of any amendment thereto, with the appropriate agency or officer in each of the party states.

8. The Commission shall maintain its financial records in accordance with the bylaws.

9. The Commission shall meet and take such actions as are consistent with the provisions of this compact and the bylaws.

d. The Commission shall have the following powers:

1. The authority to promulgate uniform rules to facilitate and coordinate implementation and administration of this compact. The rules shall have the force and effect of law and shall be binding in all party states;

2. To bring and prosecute legal proceedings or actions in the name of the Commission, provided that the standing of any Board of Nursing or other regulatory body responsible for APRN practice to sue or be sued under applicable law shall not be affected;

3. To purchase and maintain insurance and bonds;

4. To borrow, accept or contract for services of personnel, including, but not limited to, employees of a party state or non-profit organizations;

5. To cooperate with other organizations that administer state compacts related to the regulation of nursing, including but not limited to sharing administrative or staff expenses, office space or other resources;

6. To hire employees, elect or appoint officers, fix compensation, define duties, grant such individuals appropriate authority to carry out the purposes of the compact, and to establish the Commission’s personnel policies and programs relating to conflicts of interest, qualifications of personnel, and other related personnel matters;

7. To accept any and all appropriate donations and grants of money, equipment, supplies, materials and services, and to receive, utilize and dispose of the same; provided that at all times the Commission shall strive to avoid any appearance of impropriety and/or conflict of interest;

8. To lease, purchase, accept appropriate gifts or donations of, or otherwise to own, hold, improve or use, any property, real, personal or mixed; provided that at all times the Commission shall strive to avoid any appearance of impropriety;

9. To sell convey, mortgage, pledge, lease, exchange, abandon or otherwise dispose of any property real, personal or mixed;

10. To establish a budget and make expenditures;
11. To borrow money;
12. To appoint committees, including advisory committees comprised of administrators, state nursing regulators, state legislators or their representatives, and consumer representatives, and such other interested persons as may be designated in this compact and the bylaws;
13. To provide and receive information from, and to cooperate with, law enforcement agencies;
14. To adopt and use an official seal; and
15. To perform such other functions as may be necessary or appropriate to achieve the purposes of this compact consistent with the state regulation of APRN licensure and practice.

e. Financing of the Commission
1. The Commission shall pay, or provide for the payment of the reasonable expenses of its establishment, organization and ongoing activities.
2. The Commission may levy on and collect an annual assessment from each member state to cover the cost of the operations and activities of the Interstate Commission and its staff which must be in a total amount sufficient to cover its annual budget as approved each year. The aggregate annual assessment amount shall be allocated based upon a formula to be determined by the Commission which shall promulgate a rule binding upon all member states.
3. The Commission shall not incur obligations of any kind prior to securing the funds adequate to meet the same; nor shall the Commission pledge the credit of any of the member states, except by and with the authority of the member state.
4. The Commission shall keep accurate accounts of all receipts and disbursements. The receipts and disbursements of the Commission shall be subject to the audit and accounting procedures established under its bylaws. However, all receipts and disbursements of funds handled by the Commission shall be audited yearly by a certified or licensed public accountant and the report of the audit shall be included in and become part of the annual report of the Commission.

f. Qualified Immunity, Defense, and Indemnification
1. The administrators, officers, executive director, employees and representatives of the Commission shall be immune from suit and liability, either personally or in their official capacity, for any claim for damage to or loss of property or personal injury or other civil liability caused by or arising out of any actual or alleged act, error or omission that occurred, or that the person against whom the claim is made had a reasonable basis for believing occurred within the scope of Commission employment, duties or responsibilities; provided that nothing in this paragraph shall be construed to protect any such person from suit and/or liability for any damage, loss, injury or liability caused by the intentional, willful, or wanton misconduct of that person.
2. The Commission shall defend any administrator, officer, executive director, employee or representative of the Commission in any civil action seeking to impose liability arising out of any actual or alleged act, error or omission that occurred within the scope of Commission employment, duties or responsibilities, or that the person against whom the claim is made had a reasonable basis for believing occurred within the scope of Commission employment, duties or responsibilities; provided that nothing herein shall be construed to prohibit that person from retaining his or her own counsel; and provided
further, that the actual or alleged act error or omission did not result from that person’s intentional, willful, or wanton misconduct.

3. The Commission shall indemnify and hold harmless any administrator, officer, executive director, employee or representative of the Commission for the amount of any settlement or judgment obtained against that person arising out of any actual or alleged act, error or omission that occurred within the scope of Commission employment, duties or responsibilities, or that such person had a reasonable basis for believing occurred within the scope of Commission employment, duties or responsibilities, provided that the actual or alleged act, error or omission did not result from the intentional, willful, or wanton misconduct of that person.

ARTICLE IX
Rulemaking

a. The Commission shall exercise its rulemaking powers pursuant to the criteria set forth in this Article and the rules adopted thereunder. Rules and amendments shall become binding as of the date specified in each rule or amendment.

b. If a majority of the legislatures of the party states rejects a rule, by enactment of a statute or resolution in the same manner used to adopt the compact, then such rule shall have no further force and effect in any compact state.

c. Rules or amendments to the rules shall be adopted at a regular or special meeting of the Commission.

d. Prior to promulgation and adoption of a final rule or rules by the Commission, and at least sixty (60) days in advance of the meeting at which the rule will be considered and voted upon, the Commission shall file a notice of proposed rulemaking:
   1. On the website of the Commission; and
   2. On the website of each party state Board or the publication in which each state would otherwise publish proposed rules.

e. The notice of proposed rulemaking shall include:
   1. The proposed time, date, and location of the meeting in which the rule will be considered and voted upon;
   2. The text of the proposed rule or amendment and the reason for the proposed rule;
   3. A request for comments on the proposed rule from any interested person; and
   4. The manner in which interested persons may submit notice to the Commission of their intention to attend the public hearing and any written comments.

f. Prior to adoption of a proposed rule, the Commission shall allow persons to submit written data, facts, opinions and arguments, which shall be made available to the public.

g. The Commission shall prepare a financial impact statement as part of the rulemaking process. The analysis shall include the impact on the affected states, the individuals required to comply with the rule, and the Commission. The Commission shall grant an opportunity for a public hearing before it adopts a rule or amendment if a hearing is requested by:
   1. At least 25 persons;
   2. A governmental subdivision or agency; or
   3. An association having at least 25 members.

h. If a hearing is held on the proposed rule or amendment, the Commission shall publish the place, time, and date of the scheduled public hearing.
1. All persons wishing to be heard at the hearing shall notify the executive director of the Commission or other designated party in writing of their desire to appear and testify at the hearing not less than five business days before the scheduled date of the hearing.

2. Hearings shall be conducted in a manner providing each person who wishes to comment a fair and reasonable opportunity to comment orally or in writing.

3. No transcript of the hearing is required, unless a written request for a transcript is made, in which case the person requesting the transcript shall bear the cost of producing the transcript. A recording may be made in lieu of a transcript under the same terms and conditions as a transcript. This subsection shall not preclude the Commission from making a transcript or recording of the hearing if it so chooses.

4. Nothing in this section shall be construed as requiring a separate hearing on each rule. Rules may be grouped for the convenience of the Commission at hearings required by this section.

i. Following the scheduled hearing date, or by the close of business on the scheduled hearing date if the hearing was not held, the Commission shall consider all written and oral comments received.

j. The Commission shall, by majority vote of all administrators, take final action on the proposed rule and shall determine the effective date of the rule, if any, based on the rulemaking record and the full text of the rule.

k. If no written notice of intent to attend the public hearing by interested parties is received, the Commission may proceed with promulgation of the proposed rule without a public hearing.

l. Not later than sixty days after a rule is adopted, any interested person may file a petition for judicial review of the rule in the United States district court of the District of Columbia or in the federal district court where the Commission’s principal office is located. If the court finds that the action of the Commission is not supported by substantial evidence in the rulemaking record, the court shall hold the rule unlawful and set it aside.

m. Upon determination that an emergency exists, the Commission may consider and adopt an emergency rule without prior notice, opportunity for comment, or hearing, provided that the usual rulemaking procedures provided in the compact and in this section shall be retroactively applied to the rule as soon as reasonably possible, in no event later than ninety days after the effective date of the rule. For the purposes of this provision, an emergency rule is one that must be adopted immediately in order to:
   1. Meet an imminent threat to public health, safety, or welfare;
   2. Prevent a loss of Commission or party state funds; or
   3. Meet a deadline for the promulgation of an administrative rule that is established by federal law or rule.

n. The Commission or committee may direct revisions to a previously adopted rule or amendment for purposes of correcting typographical errors, errors in format, errors in consistency, or grammatical errors. Public notice of any revisions shall be posted on the website of the Commission. The revision shall be subject to challenge by any person for a period of thirty (30) days after posting. The revision may be challenged only on grounds that the revision results in a material change to a rule. A challenge shall be made in writing, and delivered to the chair of the compact governing body, prior to the end of the notice period. If no challenge is made, the revision will take effect without further action. If the revision is challenged, the revision may not take effect without the approval of the Commission.
ARTICLE X
Oversight, Dispute Resolution and Enforcement

a. Oversight
1. The executive, legislative and judicial branches of state government in each party state shall enforce this compact and take all actions necessary and appropriate to effectuate the compact’s purposes and intent. The provisions of this compact and the rules promulgated hereunder shall have standing as statutory law.
2. All courts shall take judicial notice of the compact and the rules in any judicial or administrative proceeding in a party state pertaining to the subject matter of this compact which may affect the powers, responsibilities or actions of the Commission.
3. The Commission shall be entitled to receive service of process in any such proceeding, and shall have standing to intervene in such a proceeding for all purposes. Failure to provide service of process to the Commission shall render a judgment or order void as to the Commission, this compact or promulgated rules.

b. Default, Technical Assistance, and Termination
1. If the Commission determines that a party state has defaulted in the performance of its obligations or responsibilities under this compact or the promulgated rules, the Commission shall:
   A. Provide written notice to the defaulting state and other party states of the nature of the default, the proposed means of curing the default and/or any other action to be taken by the Commission; and
   B. Provide remedial training and specific technical assistance regarding the default.
2. If a state in default fails to cure the default, the defaulting state may be terminated from the compact upon an affirmative vote of a majority of the party states, and all rights, privileges and benefits conferred by this compact may be terminated on the effective date of termination. A cure of the default does not relieve the offending state of obligations or liabilities incurred during the period of default.
3. Termination of membership in the compact shall be imposed only after all other means of securing compliance have been exhausted. Notice of intent to suspend or terminate shall be given by the Commission to the governor of the defaulting state, the majority and minority leaders of the defaulting state's legislature, and each of the party states.
4. A state which has been terminated is responsible for all assessments, obligations and liabilities incurred through the effective date of termination, including obligations which extend beyond the effective date of termination.
5. The Commission shall not bear any costs related to a state which is found to be in default or which has been terminated from the compact, unless agreed upon in writing between the Commission and the defaulting state.
6. The defaulting state may appeal the action of the Commission by petitioning the U.S. District Court for the District of Columbia or the federal district where the compact has its principal offices. The prevailing party shall be awarded all costs of such litigation, including reasonable attorney’s fees.

c. Dispute Resolution
1. Upon request by a party state, the Commission shall attempt to resolve disputes related to the compact which arise among party states and between party and non-party states.
2. The Commission shall promulgate a rule providing for both mediation and binding dispute resolution for disputes as appropriate.

d. Enforcement
   1. The Commission, in the reasonable exercise of its discretion, shall enforce the provisions and rules of this compact.
   2. By majority vote, the Commission may initiate legal action in the United States District Court for the District of Columbia or the federal district where the compact has its principal offices against a party state in default to enforce compliance with the provisions of the compact and its promulgated rules and bylaws. The relief sought may include both injunctive relief and damages. In the event judicial enforcement is necessary, the prevailing party shall be awarded all costs of such litigation, including reasonable attorney’s fees.
   3. The remedies herein shall not be the exclusive remedies of the Commission. The Commission may pursue any other remedies available under federal or state law.

ARTICLE XI
Fingerprint-Based Criminal Background Check Requirement for Eligibility as Member State in APRN Compact

a. Notwithstanding any other provision herein, eligibility for membership in this compact shall be limited to those states that have implemented procedures for considering the criminal history records of applicants for initial APRN licensure or APRN licensure by endorsement.

b. Such procedures shall include the submission of fingerprints or other biometric data by APRN applicants for the purpose of obtaining criminal history record information from the Federal Bureau of Investigation and the agency responsible for retaining that state’s criminal records.

ARTICLE XII
Date of Implementation of APRN Compact and Associated Rules, Withdrawal, and Amendment

a. The APRN compact shall come into limited effect at such time the compact has been enacted into law in ten (10) party states. The provisions which become effective at that time shall be limited to the powers granted to the Interstate Commission of APRN Compact Administrators relating to assembly and the promulgation of rules. Thereafter, the Commission shall meet and exercise rulemaking powers necessary to the adoption of the APRN Uniform Licensure Requirements.

b. On the date of the Commission’s initial adoption of the APRN Uniform Licensure Requirements, all remaining provisions of the APRN compact shall come into full effect in all party states. All rules which have been previously adopted by the Commission shall come into full force and effect in all states which have enacted the compact into law prior to that date.

c. Any state which joins the compact subsequent to the Commission’s initial adoption of the APRN Uniform Licensure Requirements shall be subject to all rules that have been
previously adopted by the Commission as they exist on the date on which the compact becomes law in that state.

d. Any party state may withdraw from this compact by enacting a statute repealing the same.
   1. A party state’s withdrawal shall not take effect until six months after enactment of the repealing statute.
   2. Withdrawal shall not affect the continuing requirement of the withdrawing state’s Board of Nursing to comply with the investigative and adverse action reporting requirements of this act prior to the effective date of withdrawal.

e. Nothing contained in this compact shall be construed to invalidate or prevent any APRN licensure agreement or other cooperative arrangement between a party state and a non-party state which does not conflict with the provisions of this compact.

f. This Compact may be amended by the party states. No amendment to this compact shall become effective and binding upon any party state until it is enacted into the laws of all party states.

ARTICLE XIII
Construction and Severability

This compact shall be liberally construed so as to effectuate the purposes thereof. If this compact shall be held contrary to the constitution of any state party thereto, the compact shall remain in full force and effect as to the remaining party states.
Rule I. Definition of Terms

a. These rules adopt by reference the terms which have been defined in the Act. Additionally, the following definitions shall apply for the purpose of the compact and the rules:

b. “Coordinated licensure information system” means the nurse licensure and disciplinary database of the NCSBN known as NURSYS.

c. “Primary state of residence” means the state of a person’s declared fixed permanent and principal home for legal purposes; domicile.

d. “Public” means any individual or entity other than designated staff or representatives of party state Boards of Nursing, the Interstate Commission of APRN Compact Administrators, or the National Council of State Boards of Nursing, Inc.

e. “National certifying body” means an organization recognized by the Commission which offers a national examination and certification for an APRN role and population focus.

Rule II. APRN Uniform Licensure Requirements

As required in Article III of the APRN Compact, the “APRN Uniform Licensure Requirements” are:

a. To qualify for initial APRN compact licensure or compact licensure in a party state through endorsement, reinstatement, or renewal of an existing APRN license, an applicant shall provide evidence of:

1. Unencumbered licensure:
   A. As an RN by the state in which an application is submitted for initial APRN licensure, or
   B. As an RN and APRN in a recognized APRN role and population focus in another jurisdiction if applying for endorsement licensure;

2. Education congruent with the APRN role and population focus in at least one of the recognized population foci:
   A. Graduation from or completion of a graduate or post graduate level APRN program accredited by a recognized national nursing accrediting body congruent with an APRN role which includes at least one population focus; and
   B. Completion of a curriculum that includes, at a minimum, separate comprehensive graduate level courses in:
      i. Advanced physiology/pathophysiology, which includes general principles that apply across the lifespan;
      ii. Advanced health assessment, which includes assessment of all human systems, advanced assessment techniques, concepts, and approaches; and
iii. Advanced pharmacology, which includes pharmacodynamics, pharmacokinetics, and pharmacotherapeutics of all broad categories of agents.

3. Current certification by a national certifying body in the APRN role and population focus appropriate to educational preparation.

b. For renewal of an APRN compact license, an applicant shall provide acceptable evidence to the Board of maintenance of national certification in the applicable APRN role and population focus through an ongoing certification maintenance program of a nationally recognized certifying body.

**Rule III. Recognized APRN Roles and Population Foci**

a. An APRN granted compact licensure subsequent to the adoption of the Uniform Licensure Requirements shall receive licensure in a recognized APRN Role and one or more population foci.

b. The recognized APRN roles are as follows:
   1. Certified Registered Nurse Anesthetist;
   2. Certified Nurse Midwife;
   3. Clinical Nurse Specialist; and

c. The population foci are as follows:
   1. Family/individual across the lifespan;
   2. Adult-gerontology, primary care;
   3. Adult-gerontology, acute care;
   4. Neonatal;
   5. Pediatrics, primary care;
   6. Pediatrics, acute care;
   7. Women’s health/gender-related; and

**Rule IV. Eligibility for APRN Single State Licensure if APRN Uniform Licensure Requirements Are Not Satisfied**

a. Following adoption of the compact by a party state, each APRN license issued to an individual who does not meet the Uniform Licensure Requirements shall convert to single state status.

b. An applicant for APRN licensure by endorsement in a party state who is not eligible for a compact license under the Uniform Licensure Requirements may be considered for single state licensure.

c. Provided that any other eligibility requirements imposed by the state are satisfied, an applicant for single-state licensure under subsection (b) will be eligible for a single state license if the applicant would have met the eligibility requirements that were in effect in that state at the time of the applicant’s initial licensure as an APRN.

d. An APRN issued a single state license under this rule may hold a single state license in multiple party states.
e. If an applicant for APRN licensure was not initially licensed as an APRN prior to the Commission’s initial adoption of the Uniform Licensure Requirements, has not previously held APRN licensure in a current party state, and does not meet the Uniform Licensure Requirements, the applicant shall not be eligible for compact or single state APRN licensure in any party state.

**Rule V. Issuance of APRN Licensure by a Party State.**

a. An APRN applying for licensure in a party state shall produce evidence of the nurse’s primary state of residence. Such evidence shall include a declaration signed by the licensee. Upon request, an applicant shall provide additional evidence of primary state of residence, including, but not limited to:
   1. Driver’s license with a home address;
   2. Voter registration card displaying a home address;
   3. Federal income tax return declaring the primary state of residence;
   4. Military Form no. 2058-state of legal residence certificate; or
   5. W2 from US Government or any bureau, division, or agency thereof indicating the declared state of residence.

b. An APRN on a visa from another country applying for licensure in a party state may declare either the country of origin or the party state as the primary state of residence. If the foreign country is declared the primary state of residence, a single state license will be issued by the party state.

c. An APRN changing primary state of residence, from one party state to another party state, may continue to practice under the former home state license and associated privilege to practice during the processing of the nurse’s licensure application in the new state for a period not to exceed ninety (90) days.

d. A licensure application submitted in a party state by an APRN under investigation by the home state shall be held in abeyance and the ninety (90) day period in subsection (c) shall be stayed until resolution of the investigation. If the ninety (90) day period is stayed under this subsection:
   1. The APRN may continue to practice under a compact privilege in the state; and
   2. The authority of the new state to limit or revoke the APRN’s privilege to practice in that state shall not be affected.

e. If a party state denies licensure to an applicant who is licensed in another party state, the denying state shall notify the party state within ten (10) business days and the home state may take action in accordance with that state’s laws and rules.

f. If a party state issues a single state license, the license shall be clearly identified in all state and Information System records as valid only in the state of issuance without any associated privileges to practice in other party states.

**Rule VI. Coordinated Licensure Information System**

a. Levels of access
   1. The public shall have access to the following nurse licensure information:
A. The nurse’s name;
B. Jurisdiction(s) of licensure;
C. License classification, status, and expiration date;
D. Public and emergency orders and final disciplinary actions, as defined by contributing state authority; and
E. The status of an APRN compact license-holder’s privilege to practice in each remote state.

2. Non-party state Boards of Nursing shall have access to all NURSYS data except information that is limited by contributing party state authority.

3. Party state Boards shall have access to all NURSYS data contributed by the party states and other information as limited by contributing non-party state authority.

b. A licensee may make a written request to the home state Board to review the data relating to the licensee in NURSYS. In the event a licensee asserts that any data relating to him or her is inaccurate, the burden of proof shall be upon the licensee to provide sufficient evidence to substantiate the claim. If a claim is verified, the Commission shall remove inaccurate data from NURSYS within ten (10) business days.

c. A party state Board shall report to NURSYS within ten (10) business days:
   1. A disciplinary action, agreement or order requiring participation in an alternative program or which limits practice or requires monitoring (except confidential agreements and orders relating to participation in alternative programs which cannot be disclosed by the contributing state);
   2. Dismissal of allegations that have been previously reported;
   3. Current significant investigative information as defined by the Act; and
   4. Changes in adverse action or other licensure status.

d. Current significant investigative information shall be deleted from NURSYS within ten (10) business days upon report of: disciplinary action; agreement or order requiring participation in alternative programs; agreements which limit practice or require monitoring; or dismissal of a complaint.

e. Changes to licensure information in NURSYS shall be completed within ten (10) business days of notification by a state Board of Nursing.
Attachment D

College of Licensed Practical Nurses of Newfoundland and Labrador Associate Member Application

NCSBN Associate Member Application

Applicant Contact Information

Organization Information

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
<th>Phone</th>
<th>Fax Number</th>
<th>E-mail</th>
</tr>
</thead>
<tbody>
<tr>
<td>Paul D. Fisher LPN, CI, BAHSA</td>
<td>Executive Director/Registrar</td>
<td>709-579-3843 Ext. 22</td>
<td>709-579-3095</td>
<td><a href="mailto:pfisher@clpnl.ca">pfisher@clpnl.ca</a></td>
</tr>
</tbody>
</table>

Full Name: College of Licensed Practical Nurses of Newfoundland and Labrador

Chief Staff Person: Paul D. Fisher LPN, CI, BAHSA

Mailing Address:
9 Paton Street
St. John’s
Newfoundland & Labrador
Canada
Postal Code: A1B 4S8

City

State

Country

Postal Code

Phone Number: 709-579-3843

Fax Number: 709-579-3095

E-mail: pfisher@clpnl.ca

Web site: www.clpnl.ca

Organization Description

1. Please list all the professions your organization regulates:

   Licensed Practical Nurses (LPNs)

2. Please list the number of persons regulated (by profession):

   2400 LPNs

3. Please describe the authority under which your organization regulates:

   The Licensed Practical Nurses Act, 2005
   Government of Newfoundland and Labrador, Canada
4. Please describe why your organization wants to be an Associate Member of NCSBN:

Opportunity to network with other key stakeholders to enhance our organizations mandate of public protection.

5. Is your organization incorporated or not? If yes, are you considered for profit or non-profit?

Incorporated under the Licensed Practical Nurses Act as a non-profit organization.

6. Are you a membership organization?

All Practical Nurses in the Province of Newfoundland and Labrador are required to hold current licensure with our organization to practice nursing in the province.

Upon completion, you must submit this application form via email to memberrelations@ncsbn.org along with a copy of your Bylaws and Mission Statement as attachments.

By signing this application the undersigned understands that, if approved for membership, applicants are required to abide by NCSBN bylaws and the NCSBN Board Policy Manual. Failure to pay annual associate membership fee may result in termination of status. Decisions of the NCSBN Delegate Assembly regarding membership are final.

Signature ___________________________ Title ___________________________ Date March 10, 2014

Executive Director/Registrar
Attachment E

Nurses Association of New Brunswick Associate Member Application

**NCSBN Associate Member Application**

**Applicant Contact Information**

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>Roxanne Tarjan</td>
<td>Executive Director</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Phone</th>
<th>Fax Number</th>
<th>E-mail</th>
</tr>
</thead>
<tbody>
<tr>
<td>506 459-2858</td>
<td>506 459-2838</td>
<td><a href="mailto:rtarjan@nanb.nb.ca">rtarjan@nanb.nb.ca</a></td>
</tr>
</tbody>
</table>

**Organization Information**

<table>
<thead>
<tr>
<th>Full Name</th>
<th>Chief Staff Person</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nurses Association of New Brunswick</td>
<td>Roxanne Tarjan</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Mailing Address</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>165 Regent Street</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>Country</th>
<th>Postal Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fredericton</td>
<td>NB</td>
<td>Canada</td>
<td>E3B 7B4</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Street Address (if not the same)</th>
<th></th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Phone Number</th>
<th>Fax Number</th>
<th>E-mail</th>
<th>Web site</th>
</tr>
</thead>
<tbody>
<tr>
<td>506-459-2858</td>
<td>506-459-2838</td>
<td><a href="mailto:nanb@nanb.nb.ca">nanb@nanb.nb.ca</a></td>
<td><a href="http://www.nanb.nb.ca">www.nanb.nb.ca</a></td>
</tr>
</tbody>
</table>

**Organization Description**

1. Please list all the professions your organization regulates:

   Registered Nurses, Nurse Practitioners

2. Please list the number of persons regulated (by profession):

   Registered Nurses (RN) - 8844*   Nurse Practitioners (NP) - 114*   *as of February 2014
3. Please describe the authority under which your organization regulates:

The NANB regulatory authority is established through the Nurses Act (attached) authorized by

4. Please describe why your organization wants to be an Associate Member of NCSBN:

See attached response.

5. Is your organization incorporated or not? If yes, are you considered for profit or non-profit?

NANB is incorporated by an Act of the Legislature of New Brunswick. See Sect.3 - Nurses Act

6. Are you a membership organization?

Yes; however, membership is mandatory to be recognized as an RN or NP.

Upon completion, you must submit this application form via email to memberrelations@ncsbn.org along with a copy of your Bylaws and Mission Statement as attachments.

By signing this application the undersigned understands that, if approved for membership, applicants are required to abide by NCSBN bylaws and the NCSBN Board Policy Manual. Failure to pay annual associate membership fee may result in termination of status. Decisions of the NCSBN Delegate Assembly regarding membership are final.

Digitally signed by Rozanne Tarjan
DN: c=Canada, o=NANB Inc., ou=NCANB, cn=Rozanne Tarjan, email=rtarjan@nanb.nb.ca
Date: 2014/03/27 17:44:30 -04'00'

Signature  Title  Date

Executive Director  March 27, 2014
Response to Question # 4: Please describe why your organization wants to be an Associate Member of NCSBN:

The Nurses Association of New Brunswick (NANB), as the body responsible for the regulation of registered nurses and nurse practitioners in New Brunswick and for establishing the standards for nursing practice and education and the approval of nursing education programs is seeking Associate Membership with the National Council of State Boards of Nursing (NCSBN) to enhance our linkages with our continental peers as we both work to support and deliver quality regulatory services in the public interest.

We believe North American nursing regulators share common regulatory challenges. As partners in the implementation of a common Entry-to-Practice Exam for Registered Nurses effective January 2015, the NCSBN and Canadian registered nurse regulators, including the NANB have validated the similarity of nursing practice in our respective countries, states, provinces and territories and the NANB would welcome the opportunity to learn from, participate in and advance the work of the council informed by our similar mandates and responsibilities. In an increasingly globalized world with the expectation and requirement of mobility and professional recognition we would welcome the opportunity to contribute to the important leadership role the NCSBN already demonstrates worldwide in advancing quality nursing regulation in the public interest.

Thank you for your consideration.
Nursing and Midwifery Council of New South Wales
Associate Member Application

NCSBN Associate Member Application

Applicant Contact Information

Name                        Margaret Cooke
Title                       Dr
Phone                       +61292190213
Fax Number                  612 9281 2030
E-mail                      mcooke@hpca.nsw.gov.au

Organization Information

Full Name                    Nursing and Midwifery Council of New South Wales
Chief Staff Person           Margaret Cooke, Executive Officer
Mailing Address              Locked Bag 20
City                         Sydny
State                        NSW
Country                      Australia
Postal Code                  2000
Street Address (if not the same) Level 6, North Wing 477 Pitt Street

Phone Number                 +61292190213
Fax Number                   612 9281 2030
E-mail                       mcooke@hpca.nsw.gov.au
Web site                     www.nursingandmidwiferycouncil.nsw.gov.au

Organization Description

1. Please list all the professions your organization regulates:
   - Nursing
   - Midwifery

2. Please list the number of persons regulated (by profession): 97,824
   This consists of:
   - 87,476 individuals who are only registered as a nurse,
   - 9,720 individuals who hold registrations as both a nurse and as a midwife; and
   - 628 individuals who are only registered as a midwife.
Last year the Council received and managed 450 complaints about registered nurses and midwives. This has increased this year by over 20%.

3. Please describe the authority under which your organization regulates:

The Health Practitioner Regulation National Law (NSW) is the legislation under which the Council was established. This legislation was adopted nationally, and the Council works closely with the Nursing and Midwifery Board of Australia and the Australian Health Practitioner Regulation Agency.

Part 8 of the national legislation is different in New South Wales (NSW) compared to the other states and territories. This means NSW has continued a co-regulatory system where the councils work with the Health Care Complaints Commission in regards to the management of notifications (complaints) about registered health practitioners, whilst continuing to be part of the National Registration and Accreditation Scheme.

Any restrictions on practice imposed on nurses, midwives or students with a principal place of practice in NSW are enforceable in other states and territories, and vice versa.

4. Please describe why your organization wants to be an Associate Member of NCSBN:

As part of its strategic plan the Council seeks to research and develop a best practice approach to the regulation of nursing and midwifery and to benchmark our own performance. We believe that networking and collaboration with international regulatory authorities will be of great assistance to the Council, and that we can make a notable contribution to a professional dialogue on nursing and midwifery regulation and standards.

5. Is your organization incorporated or not? If yes, are you considered for profit or non-profit?
No. The Council is established by the Health Practitioner Regulation National Law (NSW). Its Australian Business Number is: 41 356 392 097.

6. Are you a membership organization?
No. In Australia there are two main membership bodies, the Australian College of Nursing and the Australian College of Midwives, however they do not have regulatory functions.

Upon completion, you must submit this application form via email to memberrelations@ncsbn.org along with a copy of your Bylaws and Mission Statement as attachments.

A copy of the Council’s Code of Conduct and Strategic Plan are attached. The Council was established under the Health Practitioner Regulation National Law (NSW) – the full legislation can be found at: www.legislation.nsw.gov.au. A copy of sections relating to the Council’s establishment are also attached.

The codes and standards published by the Nursing and Midwifery Board of Australia apply to nurses and midwives practicing in NSW and can be found on the Board’s website, www.nursingmidwiferyboard.gov.au

By signing this application the undersigned understands that, if approved for membership, applicants are required to abide by NCSBN bylaws and the NCSBN Board Policy Manual. Failure to pay annual associate membership fee may result in termination of status. Decisions of the NCSBN Delegate Assembly regarding membership are final.

[Signature]
[Title]

[Date]
20/4/14
## NCSBN Associate Member Application

### Applicant Contact Information

<table>
<thead>
<tr>
<th>Name</th>
<th>Joy Peacock RN MSc</th>
</tr>
</thead>
<tbody>
<tr>
<td>Title</td>
<td>Executive Director</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Phone</th>
<th>Fax Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Phone</td>
<td>867-667-4062</td>
</tr>
<tr>
<td>Fax Number</td>
<td>867-668-5123</td>
</tr>
</tbody>
</table>

| E-mail        | exec.director@yrna.ca |

### Organization Information

<table>
<thead>
<tr>
<th>Full Name</th>
<th>Yukon Registered Nurses Association</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chief Staff Person</td>
<td>Joy Peacock</td>
</tr>
</tbody>
</table>

| Mailing Address            | 204-4133 4th Ave.,                |
|                            | City: Whitehorse                  |
|                            | State: Yukon Territory            |
|                            | Country: Canada                   |
|                            | Postal Code: Y1A 1H8              |

<table>
<thead>
<tr>
<th>Street Address (if not the same)</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>Country</th>
<th>Postal Code</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Phone Number</th>
<th>Fax Number</th>
<th>E-mail</th>
<th>Web site</th>
</tr>
</thead>
</table>

### Organization Description

1. Please list all the professions your organization regulates:

   *We regulate Registered Nurses and Nurse Practitioners*

2. Please list the number of persons regulated (by profession):

   *500*
3. Please describe the authority under which your organization regulates:

The Registered Nurses Professions Act, 2012

4. Please describe why your organization wants to be an Associate Member of NCSBN:

We have heard outstanding testimonials from other Canadian Regulatory Nursing associate NCSBN members, such as the College of Registered Nurses of Manitoba, College and the Association of Registered Nurses of Alberta. As a regulatory body we are interested in pursuing regulatory excellence, having access to the latest research and networking with other regulators.

5. Is your organization incorporated or not? If yes, are you considered for profit or non-profit?

The Yukon Registered Nurses Association is a non-profit organization.

6. Are you a membership organization?

Yes we are a membership organization.

Upon completion, you must submit this application form via email to memberrelations@memberrelations.org along with a copy of your Bylaws and Mission Statement as attachments.

By signing this application the undersigned understands that, if approved for membership, applicants are required to abide by NCSBN bylaws and the NCSBN Board Policy Manual. Failure to pay annual associate membership fee may result in termination of status. Decisions of the NCSBN Delegate Assembly regarding membership are final.

Signature

Title
Report of the Bylaws Committee

Recommendation to the Delegate Assembly

Adopt the proposed amendments to the NCSBN Bylaws.

Rationale:
At the 2013 Delegate Assembly, members adopted a resolution to explore information technology available for voting by the Delegate Assembly in the event of vacancy of the president and president-elect, and to report on the advisability of amending the bylaws to allow for such electronic voting. Per the resolution, the 2014 Bylaws Committee Business Book report and recommendation fulfills the intent of the resolution.

Fiscal Impact:
None.

Background
Bylaws are significant written rules by which an organization is governed. NCSBN, as a 501(c)3 nonprofit association incorporated in the state of Pennsylvania, provides through its Articles of Incorporation the specific authority of the NCSBN membership to adopt and amend the bylaws of the organization.

The NCSBN Bylaws further articulates this authority in Article XIV, Amendment of Bylaws:

Section 1. Amendment and Notice. 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.

Section 2. Bylaws Committee. A Bylaws committee composed of board members from Member Boards and/or employees of Member Boards may be appointed by the Board of Directors to review and make recommendations on proposed bylaw amendments as directed by the Board of Directors or the Delegate Assembly.

At the 2013 Delegate Assembly, a number of proposed amendments to the NCSBN Bylaws were adopted by the membership. One of the revisions eliminated was the Board of Director (BOD) vice president position and the position of president-elect was added. Subsequently, the following resolution was passed under new business at the 2013 Delegate Assembly: Explore information technology available for voting by the Delegate Assembly in the event of vacancy of the president and president-elect, and report on advisability of amending the bylaws to allow for such electronic voting. The report is to be delivered to the Delegate Assembly at the 2014 Annual Meeting.

At the BOD meeting Sept. 27-30, 2013, the BOD appointed members to a Bylaws Committee to address a resolution made at the 2013 Annual Meeting. The BOD appointed Director-at-Large Nathan Goldman as committee chair based on his leadership of prior Bylaw Committees.
The committee held one face-to-face meeting and conducted two conference calls. The membership resolution essentially contained two components: electronic voting and a possible bylaw amendment. The committee noted that the information technology for remote electronic voting already exists and is routinely used by nonprofit associations. The committee therefore focused on a methodology of notice, solicitation of candidates and election of a president in the event of a simultaneous vacancy in the office of president and president-elect.

NCSBN Legal Counsel Thomas Abram noted that “electronic voting is permissible under the Pennsylvania Not-For-Profit Corporation Act (‘Act’).” At present, the bylaws provide that elections of officers and directors “shall be by ballot of the Delegate Assembly during the Annual Meeting.” However, the Act itself does not require voting for officers and directors at a membership meeting convened for that purpose; rather, the Act (Section 5725) provides that directors may be elected, appointed or otherwise selected “by the method or methods as shall be fixed by, or in the manner provided in, the bylaw…” Section 5758 provides that the voting rights of members “may be by ballot, mail or any reasonable means provided by a bylaw… Accordingly, although the current bylaws require voting by ballot at the Annual Meeting, the Delegate Assembly may amend the Bylaws to provide otherwise.” Abram did not find any other provision in the Act that would serve to prohibit voting by electronic means nor does the vote itself have to occur at a duly called meeting that meets other requirements for a meeting held by electronic communication.

The committee initially reviewed, discussed and revised a proposed revision to the bylaws submitted by Abram. The committee specifically reviewed the time frame required for all proper notices to the membership and adequate time for the work of the Leadership Succession Committee (LSC).

A preliminary bylaw revision was presented to the membership at the 2014 NCSBN Midyear Meeting in Kansas City, Mo. The membership feedback was summarized with the following comments:

1. Explain what happens after the Dec. 1 date; Dec. 1 to August is too long. Consider a later cutoff date than Dec. 1.
2. Why no more than two candidates?
3. What does “lot” mean? Define it.
4. If the BOD appoints, where do they appoint from?
5. Why require a petition from 10 member boards?
6. If a person is elected in the special election can they run for the regular election?

The committee discussed various dates that allow for notice, the nomination process and electronic voting in a reasonable amount of time prior to the next annual meeting where an election may be held. The committee decided to propose Feb. 1 as the new date rather than Dec. 1. The committee agreed to drop the proposed requirement for a petition from 10 member boards to initiate a special election. The committee continues to support only two candidates for office so as not to have the potential of a runoff election. When the BOD appoints to fill the presidency prior to the special election, the BOD will appoint from the current members of the BOD. The definition of “lot” will be placed in an administrative procedure after the revision is adopted by the membership. The committee also added language to clarify the situation of a person who is elected in the special election and subsequently runs for office in the regular election.

Membership feedback and committee discussion of the feedback was incorporated into a second revision. The proposed revision appears to offer efficient and clear guidance in the event of a simultaneous vacancy in the office of president and president-elect, and ensures the opportunity for the membership to select its leaders.
Highlights of FY14 Activities
Committee Charge: Explore information technology available for voting by the Delegate Assembly in the event of vacancy of the president and president-elect, and report on advisability of amending the bylaws to allow for such electronic voting. The report is to be delivered at the 2014 Delegate Assembly.

- The context and intent of the resolution and charge to the committee were reviewed and discussed.
- The committee reviewed the legal foundation per the NCSBN Articles of Incorporation related to the committee charge.
- The current state of remote electronic voting methods was discussed. Current methods do allow for remote and secure password protected voting. Voting would be based on two delegates from each jurisdiction.
- The committee explored time frames that would allow for proper notice to the membership and adequate time for the LSC to fulfill its role in recruitment and evaluation of qualifications.
- Presented preliminary revision for feedback from the membership at the 2014 Midyear Meeting in Kansas City, Mo.
- A conference call was held to discuss membership input and feedback of the proposed revision.

Attachments
A. Proposed Revision to Article V of the Bylaws – Redline Version
B. Proposed Revision to Article V of the Bylaws – Clean Copy
Proposed Revision to Article V of the Bylaws – Redline Version

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
Revisions adopted – 08/08/07
Amended – 8/13/10
Amended -08/16/13
Amended – 08/15/14

Article I

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

Article II

Purpose and Functions

Section 1. Purpose. The purpose of the NCSBN 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 that are valid, reliable, and legally defensible and in compliance with professionally accepted psychometric standards.

Section 2. Functions. The NCSBN’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 NCSBN 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. Definitions.

a) State Board of Nursing. 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.

b) Member Board. A Member board is a state board of nursing, which is approved by the Delegate Assembly as a member of NCSBN.

c) Associate Member. An Associate Member is a nursing regulatory body or empowered regulatory authority from another country or territory, which is approved by the Delegate Assembly.

Section 2. Qualifications. To qualify for approval, and to maintain membership as a Member Board, a state board of nursing that regulates registered nurses and/or practical/vocational nurses must use applicable NCSBN Licensing Examinations (the “NCLEX® examination”) for licensure of registered nurses and/or practical/vocational nurses, cause candidates for licensure in its jurisdiction to pay NCSBN the examination fee established by the Delegate Assembly, execute a current Terms and
Conditions of NCSBN Membership, as amended from time to time by Delegate Assembly, and agree to comply with all applicable terms and conditions for the use of the NCLEX® examination(s).

**Section 3. Admission.** A state board of nursing shall become a member of the NCSBN and be known as a Member Board upon approval by the Delegate Assembly, as described in Article IV and payment of the required fees, if applicable.

**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 NCSBN issues and provide diversity of representation on the Board of Directors and on committees.

**Section 5. Fees.** The annual membership fees, for a Member Board and an Associate Member shall be set by the Delegate Assembly and shall be payable each October 1.

**Section 6. Privileges.** Member Board 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 whose fees remain unpaid after January 15 is not in good standing. Any member who does not comply with the provisions of the bylaws, and where applicable, the membership agreement, 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 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 which 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 NCSBN 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 corporate secretary of the NCSBN or a delegate of another Member Board to cast its votes.

**Section 3. Authority.** The Delegate Assembly, the membership body of the NCSBN, shall provide direction for the NCSBN 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 NCSBN memberships; approve the substance of all Terms and Conditions of NCSBN Membership between the NCSBN and Member Boards; adopt test plans to be used for the development of the NCLEX® examination; and establish the fee for the NCLEX® examination.

**Section 4. Annual Meeting.** The NCSBN 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 NCSBN.

**Section 5. Special Session.** The Board of Directors may call, and upon written petition of at least ten 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 ten 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 NCSBN shall be a president, a president-elect and a treasurer.

  **Section 2. Directors.** The directors of the NCSBN shall consist of four directors-at-large, and a director from each Area.

  **Section 3. Eligibility.**
  Board Members or employees of Member Boards shall be eligible to serve as NCSBN officers and at-large or Area 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-elect.** The president-elect shall have served NCSBN as either a delegate, a committee member, a director or an officer before being elected to the office of president-elect.

  **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.**

   (i.) Voting for officers and directors shall be conducted in accordance with these bylaws and the Standing Rules. Write-in votes shall be prohibited.

   (ii.) Notwithstanding any provision of this Section, in the event there is only one candidate for an officer or director position, election for that position shall be declared by acclamation. No ballot shall be necessary.

   f) The provisions of this section shall not apply to a special election as provided in Section 8(c) of this Article.

**Section 6. Terms of Office.**

a) The president-elect, treasurer, Area directors, and directors-at-large shall be elected for a term of two years or until their successors are elected. The president shall serve for a term of two years.

b) The president-elect and the directors-at-large shall be elected in even-numbered years. The treasurer and area directors shall be elected in odd-numbered years.

c) Officers and directors shall assume their duties at the close of the Annual Meeting of the Delegate Assembly at which they are elected.

d) The treasurer and the directors shall serve no more than four-two consecutive terms in the same position excluding time served by appointment and/or election pursuant to Section 8 of this Article. The president and president-elect shall serve no more than two years one term in the same position, except when a vacancy occurs pursuant to Section 8 of this Article.

**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 NCSBN, as determined by the Leadership Succession Committee before election to office and as determined by the Board of Directors after election to office. If incumbent officers or directors win an election for another officer 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) A vacancy in the office of president shall be filled by the president-elect pursuant to subsection (b) in this section. 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.

b) If the office of the president becomes vacant, the president-elect shall assume the presidency and shall serve the remainder of that term as well as the term for which she or he was elected.

c) If the office of the president-elect becomes vacant, then the position shall remain vacant until an election can be held at the next annual meeting for the remainder of the term for which the president-elect was elected.

d) In the event of a vacancy of the president and the president-elect, the board of directors shall appoint one of its members to assume the responsibilities of the president until an election can be held for the president and president-elect position at the next annual meeting for the remainder of the term for which the president and president-elect were elected. In the event of a simultaneous vacancy in both the offices of the president and the president-elect, the Board of Directors shall take the following action:
i. In the event the simultaneous vacancies occur prior to or on February 1 in any given year, the Board of Directors shall notify all Member Boards of the simultaneous vacancies within five (5) business days of the occurrence.

ii. The notice shall specify the manner and deadline for nominating candidates for the office of the president to the Leadership Succession Committee. Nominations shall be accepted for a period of no more than twenty (20) business days. Candidates shall meet the eligibility requirements outlined in Section 3 of this Article.

iii. The Leadership Succession Committee shall review nominations received and announce a slate of no more than two candidates within ten (10) business days after the deadline for nominations.

iv. The Board of Directors shall schedule a special election by electronic voting to be held within fifteen (15) business days of the receipt of the slate. In the event of a tie, the election shall be decided by lot. The elected candidate shall serve until the next Annual Meeting.

v. The Board of Directors shall appoint one of its members to assume the responsibilities of the president until the results of the special election are final. If there are no nominations, that person shall serve until the next Annual Meeting.

vi. The office of president-elect shall remain vacant until the next Annual Meeting.

vii. At the Annual Meeting following the special election, the Delegate Assembly shall elect a president and a president-elect to fill any remainder of the term, if applicable. Otherwise, a president and a president-elect shall be elected for a regular term pursuant to Section 5 of this Article.

d) The Board of Directors shall fill vacancies in the office of the treasurer, directors at large, and area directors 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.

e) Being elected president under the special election set forth in Section 8(c) of this Article shall not preclude the person from being nominated for any office in the election under Section 5 of this Article. Time served as president as a result of a special election under Section 8(c) of this Article and time served as president or president-elect to fill the remainder of a term in either respective office, pursuant to Sections 8(c)(vii) or 8(d) herein, shall be excluded from the determination of the term served in office under Section 6 of this Article.

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 NCSBN.

Section 10. Responsibilities of the President-elect. The president-elect shall assist the president, perform the duties of the president in the president’s absence, be assigned responsibilities by the president, and assume the office of the president at the conclusion of the president’s term and fill any vacancy in the office of the president.

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 NCSBN.

**Section 2. Authority.** The Board of Directors shall transact the business and affairs and act on behalf of the NCSBN 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 and approve the NCLEX® examination test service.

**Section 3. Meetings of the Board of Directors.** The Board of Directors shall hold an annual meeting and may schedule other regular meetings 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 twenty-four 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 or 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**

**Leadership Succession Committee**

**Section 1. Leadership Succession Committee**

a) **Composition.** The Leadership Succession Committee shall be comprised of seven members elected by the Delegate Assembly. One member shall be elected from each of the four areas. Three members shall be at large members.

b) **Term.** The term of office shall be two years. Area members shall be elected in even numbered years. At large members shall be elected in odd numbered years. A committee member shall serve no more than two consecutive terms excluding time served by appointment and/or election pursuant to Section 1e. of this Article. 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. In the event there is only one candidate for a committee position, election for that position shall be declared by acclamation. No ballot shall be necessary. The Chair shall be selected by the Board of Directors.

d) **Limitation.** A member elected or appointed to the Leadership Succession Committee 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 previous election, in order of votes received. If no remaining candidates can serve, the Board of Directors shall fill the vacancy with an individual who meets the qualifications of Section 1a. of this Article. The person filling a vacancy shall serve the remainder of the term.

f) **Duties.** The Leadership Succession Committee shall recommend strategies for the ongoing sustainability and advancement of the organization through leadership succession planning; present a slate of candidates through a determination of qualifications and geographic
distribution for inclusion on a ballot for the election of the Board of Directors and the Leadership Succession Committee. 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. The Leadership Succession Committee shall determine qualifications and geographic distribution of nominations from the floor for recommendations to the Delegate Assembly.

g) Eligibility. Any board member of a Member Board or employee of a Member Board is eligible to serve as a member of the Leadership Succession Committee.

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. NCSBN, 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 NCSBN 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

■ Chief Executive Officer

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

Section 2. Authority. The Chief Executive Officer shall serve as the agent and chief administrative officer of the NCSBN and shall possess the authority and shall perform all duties incident to the office of Chief Executive Officer, including the management and supervision of the office, programs and services of NCSBN, the disbursement of funds and execution of contracts (subject to such limitations as may be established by the Board of Directors). The Chief Executive Officer shall serve as corporate secretary and oversee maintenance of all documents and records of the NCSBN 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 Chief Executive Officer, and shall set the Chief Executive Officer’s annual salary.

Article X

Committees

Section 1. Standing Committees. NCSBN shall maintain the following standing committees.

a) NCLEX® Examination Committee. The NCLEX® 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 NCLEX® Examination Committee shall advise the Board of Directors on matters related to 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 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 NCSBN’s investments and the audit. The Finance Committee shall recommend a budget to the Board of Directors and advise the Board of Directors on fiscal policy to assure prudence and integrity of fiscal management and responsiveness to Member Board needs.

Section 2. Special Committees. The Board of Directors may appoint special committees as needed to accomplish the mission of the NCSBN 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 from the membership, provided, however, that Associate Members may not serve on the NCLEX® Examination, Bylaws, or Finance committees. Committees may also include 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 designee, shall be an ex-officio member of all committees except the Leadership Succession Committee. Associate Members shall have full voting rights as committee members.

b) Term. The standing committee members shall be appointed for two years or until their successors are appointed. Standing committee members may apply for re-appointment 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.

Article XI

Finance
Section 1. Audit. The financial records of the NCSBN 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 NCSBN in all cases not provided for in the articles of incorporation, bylaws and any special rules of order adopted by the NCSBN.

Article XIV

■ Amendment of Bylaws

Section 1. Amendment and Notice. 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.

Section 2. Bylaws Committee. A Bylaws committee composed of board members from Member Boards and/or employees of Member Boards may be appointed by the Board of Directors to review and make recommendations on proposed bylaw amendments as directed by the Board of Directors or the Delegate Assembly.

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 NCSBN. The plan shall provide, among other things, that the assets of the NCSBN be applied as follows:

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

Secondly, any assets held by the NCSBN which 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 the Delegate Assembly at an Annual or legally constituted special session called for the purpose of acting upon the proposal to dissolve. A majority 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 NCSBN 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.
Special Proviso

The revised Bylaws shall become effective on the day and upon the adjournment of the 2013 Annual Meeting Session of the Delegate Assembly at which the revisions to the Bylaws were adopted by the Delegate Assembly. Officers and directors shall be elected in the years 2014-16 in accordance with the following schedule:

<table>
<thead>
<tr>
<th>Positions</th>
<th>2013 Election</th>
<th>2014 Election</th>
<th>2015 Election</th>
<th>2016 Election</th>
</tr>
</thead>
<tbody>
<tr>
<td>President</td>
<td></td>
<td>X (two-year term only; not eligible for re-election)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>President-elect</td>
<td>X (two-year term)</td>
<td></td>
<td>X (two-year term)</td>
<td></td>
</tr>
<tr>
<td>Treasurer</td>
<td>X (one-year term)</td>
<td>X (two-year term)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Director-at-Large</td>
<td>X (two-year term)</td>
<td>X (one-year term)</td>
<td>X (two-year term)</td>
<td></td>
</tr>
<tr>
<td>Director-at-Large</td>
<td>X (two-year term)</td>
<td></td>
<td>X (two-year term)</td>
<td></td>
</tr>
<tr>
<td>Director-at-Large</td>
<td>X (two-year term)</td>
<td></td>
<td>X (two-year term)</td>
<td></td>
</tr>
<tr>
<td>Area I</td>
<td>X (two-year term)</td>
<td></td>
<td>X (two-year term)</td>
<td></td>
</tr>
<tr>
<td>Area II</td>
<td>X (two-year term)</td>
<td></td>
<td>X (two-year term)</td>
<td></td>
</tr>
<tr>
<td>Area III</td>
<td>X (two-year term)</td>
<td></td>
<td>X (two-year term)</td>
<td></td>
</tr>
<tr>
<td>Area IV</td>
<td>X (two-year term)</td>
<td></td>
<td>X (two-year term)</td>
<td></td>
</tr>
</tbody>
</table>

Officer and Director Election Schedule
X – Indicates the year in which a position will be elected.
Attachment B

Proposed Revision to Article V of the Bylaws – Clean Copy

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
Revisions adopted – 08/08/07
Amended – 8/13/10
Amended -08/16/13
Amended – 08/15/14

Article I

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

Article II

Purpose and Functions

Section 1. Purpose. The purpose of the NCSBN 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 that are valid, reliable, and legally defensible and in compliance with professionally accepted psychometric standards.

Section 2. Functions. The NCSBN’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 NCSBN 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. Definitions.

a) State Board of Nursing. 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.

b) Member Board. A Member board is a state board of nursing, which is approved by the Delegate Assembly as a member of NCSBN.

c) Associate Member. An Associate Member is a nursing regulatory body or empowered regulatory authority from another country or territory, which is approved by the Delegate Assembly.

Section 2. Qualifications. To qualify for approval, and to maintain membership as a Member Board, a state board of nursing that regulates registered nurses and/or practical/vocational nurses must use applicable NCSBN Licensing Examinations (the “NCLEX® examination”) for licensure of registered nurses and/or practical/vocational nurses, cause candidates for licensure in its jurisdiction to pay NCSBN the examination fee established by the Delegate Assembly, execute a current Terms and
Conditions of NCSBN Membership, as amended from time to time by Delegate Assembly, and agree to comply with all applicable terms and conditions for the use of the NCLEX® examination(s).

Section 3. Admission. A state board of nursing shall become a member of the NCSBN and be known as a Member Board upon approval by the Delegate Assembly, as described in Article IV and payment of the required fees, if applicable.

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 NCSBN issues and provide diversity of representation on the Board of Directors and on committees.

Section 5. Fees. The annual membership fees, for a Member Board and an Associate Member shall be set by the Delegate Assembly and shall be payable each October 1.

Section 6. Privileges. Member Board 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 whose fees remain unpaid after January 15 is not in good standing. Any member who does not comply with the provisions of the bylaws, and where applicable, the membership agreement, 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 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 which 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 NCSBN 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 corporate secretary of the NCSBN or a delegate of another Member Board to cast its votes.

**Section 3. Authority.** The Delegate Assembly, the membership body of the NCSBN, shall provide direction for the NCSBN 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 NCSBN memberships; approve the substance of all Terms and Conditions of NCSBN Membership between the NCSBN and Member Boards; adopt test plans to be used for the development of the NCLEX® examination; and establish the fee for the NCLEX® examination.

**Section 4. Annual Meeting.** The NCSBN 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 NCSBN.

**Section 5. Special Session.** The Board of Directors may call, and upon written petition of at least ten 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 ten 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 NCSBN shall be a president, a president-elect and a treasurer.

**Section 2. Directors.** The directors of the NCSBN shall consist of four directors-at-large, and a director from each Area.

**Section 3. Eligibility.**

Board Members or employees of Member Boards shall be eligible to serve as NCSBN officers and at-large or Area 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-elect.** The president-elect shall have served NCSBN as either a delegate, a committee member, a director or an officer before being elected to the office of president-elect.

**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.**
   
   (i.) Voting for officers and directors shall be conducted in accordance with these bylaws and the Standing Rules. Write-in votes shall be prohibited.
   
   (ii.) Notwithstanding any provision of this Section, in the event there is only one candidate for an officer or director position, election for that position shall be declared by acclamation. No ballot shall be necessary.

f) The provisions of this section shall not apply to a special election as provided in Section 8(c) of this Article.

**Section 6. Terms of Office.**

a) The president-elect, treasurer, Area directors, and directors-at-large shall be elected for a term of two years or until their successors are elected. The president shall serve for a term of two years.

b) The president-elect and the directors-at-large shall be elected in even-numbered years. The treasurer and area directors shall be elected in odd-numbered years.

c) Officers and directors shall assume their duties at the close of the Annual Meeting of the Delegate Assembly at which they are elected.

d) The treasurer and the directors shall serve no more than two consecutive terms in the same position excluding time served by appointment and/or election pursuant to Section 8 of this Article. The president and president-elect shall serve no more than one term in the same position, except when a vacancy occurs pursuant to Section 8 of this Article.

**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 NCSBN, as determined by the Leadership Succession Committee before election to office and as determined by the Board of Directors after election to office. If incumbent officers or directors win an election for another officer 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) If the office of the president becomes vacant, the president-elect shall assume the presidency and shall serve the remainder of that term as well as the term for which she or he was elected.

b) If the office of the president-elect becomes vacant, then the position shall remain vacant until an election can be held at the next annual meeting for the remainder of the term for which the president-elect was elected.

c) In the event of a simultaneous vacancy in both the offices of the president and the president-elect, the Board of Directors shall take the following action:
   
   i. In the event the simultaneous vacancies occur prior to or on February 1 in any given year, the Board of Directors shall notify all Member Boards of the simultaneous vacancies within five (5) business days of the occurrence.

   ii. The notice shall specify the manner and deadline for nominating candidates for the office of the president to the Leadership Succession Committee. Nominations shall be accepted for a period of no more than twenty (20) business days. Candidates shall meet the eligibility requirements outlined in Section 3 of this Article.
iii. The Leadership Succession Committee shall review nominations received and announce a slate of no more than two candidates within ten (10) business days after the deadline for nominations.

iv. The Board of Directors shall schedule a special election by electronic voting to be held within fifteen (15) business days of the receipt of the slate. In the event of a tie, the election shall be decided by lot. The elected candidate shall serve until the next Annual Meeting.

v. The Board of Directors shall appoint one of its members to assume the responsibilities of the president until the results of the special election are final. If there are no nominations, that person shall serve until the next Annual Meeting.

vi. The office of president-elect shall remain vacant until the next Annual Meeting.

vii. At the Annual Meeting following the special election, the Delegate Assembly shall elect a president and a president-elect to fill any remainder of the term, if applicable. Otherwise, a president and a president-elect shall be elected for a regular term pursuant to Section 5 of this Article.

d) The Board of Directors shall fill vacancies in the office of the treasurer, directors at large, and area directors 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.

e) Being elected president under the special election set forth in Section 8(c) of this Article shall not preclude the person from being nominated for any office in the election under Section 5 of this Article. Time served as president as a result of a special election under Section 8(c) of this Article and time served as president or president-elect to fill the remainder of a term in either respective office, pursuant to Sections 8(c) (vii) or 8(d) herein, shall be excluded from the determination of the term served in office under Section 6 of this Article.

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 NCSBN.

Section 10. Responsibilities of the President-elect. The president-elect shall assist the president, perform the duties of the president in the president’s absence, be assigned responsibilities by the president, and assume the office of the president at the conclusion of the president’s term and fill any vacancy in the office of the president.

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 NCSBN.

Section 2. Authority. The Board of Directors shall transact the business and affairs and act on behalf of the NCSBN 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 and approve the NCLEX® examination test service.
Section 3. Meetings of the Board of Directors. The Board of Directors shall hold an annual meeting and may schedule other regular meetings 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 twenty-four 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 or 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

Leadership Succession Committee

Section 1. Leadership Succession Committee

a) Composition. The Leadership Succession Committee shall be comprised of seven members elected by the Delegate Assembly. One member shall be elected from each of the four areas. Three members shall be at large members.

b) Term. The term of office shall be two years. Area members shall be elected in even numbered years. At large members shall be elected in odd numbered years. A committee member shall serve no more than two consecutive terms excluding time served by appointment and/or election pursuant to Section 1e. of this Article. 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. In the event there is only one candidate for a committee position, election for that position shall be declared by acclamation. No ballot shall be necessary. The Chair shall be selected by the Board of Directors.

d) Limitation. A member elected or appointed to the Leadership Succession Committee 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 previous election, in order of votes received. If no remaining candidates can serve, the Board of Directors shall fill the vacancy with an individual who meets the qualifications of Section 1a. of this Article. The person filling a vacancy shall serve the remainder of the term.

f) Duties. The Leadership Succession Committee shall recommend strategies for the ongoing sustainability and advancement of the organization through leadership succession planning; present a slate of candidates through a determination of qualifications and geographic distribution for inclusion on a ballot for the election of the Board of Directors and the Leadership Succession Committee. 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. The Leadership Succession Committee shall determine qualifications and geographic distribution of nominations from the floor for recommendations to the Delegate Assembly.

g) Eligibility. Any board member of a Member Board or employee of a Member Board is eligible to serve as a member of the Leadership Succession Committee.

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. NCSBN, 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 NCSBN 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

Chief Executive Officer

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

Section 2. Authority. The Chief Executive Officer shall serve as the agent and chief administrative officer of the NCSBN and shall possess the authority and shall perform all duties incident to the office of Chief Executive Officer, including the management and supervision of the office, programs and services of NCSBN, the disbursement of funds and execution of contracts (subject to such limitations as may be established by the Board of Directors). The Chief Executive Officer shall serve as corporate secretary and oversee maintenance of all documents and records of the NCSBN 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 Chief Executive Officer, and shall set the Chief Executive Officer’s annual salary.

Article X

Committees

Section 1. Standing Committees. NCSBN shall maintain the following standing committees.

a) NCLEX® Examination Committee. The NCLEX® 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 NCLEX® Examination
Committee shall advise the Board of Directors on matters related to 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 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 NCSBN’s investments and the audit. The Finance Committee shall recommend a budget to the Board of Directors and advise the Board of Directors on fiscal policy to assure prudence and integrity of fiscal management and responsiveness to Member Board needs.

Section 2. Special Committees. The Board of Directors may appoint special committees as needed to accomplish the mission of the NCSBN 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 from the membership, provided, however, that Associate Members may not serve on the NCLEX® Examination, Bylaws, or Finance committees. Committees may also include 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 designee, shall be an ex-officio member of all committees except the Leadership Succession Committee. Associate Members shall have full voting rights as committee members.

b) Term. The standing committee members shall be appointed for two years or until their successors are appointed. Standing committee members may apply for re-appointment 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.

Article XI

Finance

Section 1. Audit. The financial records of the NCSBN 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 NCSBN in all cases not provided for in the articles of incorporation, bylaws and any special rules of order adopted by the NCSBN.

Article XIV
■ Amendment of Bylaws
Section 1. Amendment and Notice. 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.

Section 2. Bylaws Committee. A Bylaws committee composed of board members from Member Boards and/or employees of Member Boards may be appointed by the Board of Directors to review and make
recommendations on proposed bylaw amendments as directed by the Board of Directors or the Delegate Assembly.

**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 NCSBN. The plan shall provide, among other things, that the assets of the NCSBN be applied as follows:

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

Secondly, any assets held by the NCSBN which 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 the Delegate Assembly at an Annual or legally constituted special session called for the purpose of acting upon the proposal to dissolve. A majority 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 NCSBN 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.
**Special Proviso**

The revised Bylaws shall become effective on the day and upon the adjournment of the 2013 Annual Meeting Session of the Delegate Assembly at which the revisions to the Bylaws were adopted by the Delegate Assembly. Officers and directors shall be elected in the years 2014-16 in accordance with the following schedule:

<table>
<thead>
<tr>
<th>Positions</th>
<th>2013 Election</th>
<th>2014 Election</th>
<th>2015 Election</th>
<th>2016 Election</th>
</tr>
</thead>
<tbody>
<tr>
<td>President</td>
<td></td>
<td>X (two-year term only; not eligible for re-election)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>President-elect</td>
<td>X (two-year term)</td>
<td></td>
<td>X (two-year term)</td>
<td></td>
</tr>
<tr>
<td>Treasurer</td>
<td></td>
<td>X (one-year term)</td>
<td>X (two-year term)</td>
<td></td>
</tr>
<tr>
<td>Director-at-Large</td>
<td>X (two-year term)</td>
<td></td>
<td>X (one-year term)</td>
<td>X (two-year term)</td>
</tr>
<tr>
<td>Director-at-Large</td>
<td>X (two-year term)</td>
<td></td>
<td>X (one-year term)</td>
<td>X (two-year term)</td>
</tr>
<tr>
<td>Director-at-Large</td>
<td>X (two-year term)</td>
<td></td>
<td>X (two-year term)</td>
<td>X (two-year term)</td>
</tr>
<tr>
<td>Director-at-Large</td>
<td>X (two-year term)</td>
<td></td>
<td>X (two-year term)</td>
<td>X (two-year term)</td>
</tr>
<tr>
<td>Area I</td>
<td>X (two-year term)</td>
<td></td>
<td>X (two-year term)</td>
<td></td>
</tr>
<tr>
<td>Area II</td>
<td>X (two-year term)</td>
<td></td>
<td>X (two-year term)</td>
<td></td>
</tr>
<tr>
<td>Area III</td>
<td>X (two-year term)</td>
<td></td>
<td>X (two-year term)</td>
<td></td>
</tr>
<tr>
<td>Area IV</td>
<td>X (two-year term)</td>
<td></td>
<td>X (two-year term)</td>
<td></td>
</tr>
</tbody>
</table>

**Officer and Director Election Schedule**

X – Indicates the year in which a position will be elected.
Report of the Distance Learning Education Committee

Recommendation to the Delegate Assembly

Adopt the proposed revision to the NCSBN Model Practice Act and Rules.

Rationale:
The proposed revision to the Model Act and Rules is recommended by the Distance Learning Education Committee addressing the issues member boards have expressed related to the regulation of distance education programs. The committee documented the issues and quality indicators of distance education programs in a white paper, and their recommendations allow for more consistency across jurisdictions.

Fiscal Impact:
None.

Background
In fiscal year 2013 (FY13) the NCSBN Board of Directors (BOD) convened a Distance Learning Education Committee, which: (1) proposed model education rules; (2) developed a uniform checklist for the boards of nursing (BONs) to collect data on distance education programs in their states/jurisdictions; (3) and wrote a white paper providing evidence for BONs on distance education, highlighting the issues. While the BOD adopted the 2012-13 recommendations at its May 2013 meeting, it was clear from a membership call in June 2013, that there were outstanding issues among the members. Therefore, the Distance Learning Education Committee recommended to the BOD that the committee continue for another year to work on the outstanding issues and to build consensus among the BONs; the BOD concurred.

The Institute of Medicine’s (IOM’s) Future of Nursing report called for nurses to advance their education. Distance education courses provide tremendous opportunities for educational advancement by offering access to quality nursing education in small communities or rural areas where nursing programs don’t exist; these programs allow flexibility for those students who otherwise couldn’t attend a nursing program. Therefore, this is an opportunity to provide nurse regulators with information on distance education and the related issues, in addition to providing facts to educators about “perceived” regulatory barriers related to distance education programs, and possible solutions for the real problems. Lastly, it is an opportunity for nursing education and regulation to learn from each other as they collaborate to advance the education of the nursing workforce.

Highlights of FY14 Activities

- Identify current and evolving regulatory issues related to distance learning education programs.
  - Completed a literature review incorporating the current and evolving issues into a white paper titled “National Council of State Boards of Nursing (NCSBN) White Paper: Nursing Regulation Recommendations for Prelicensure Distance Education Programs” (Attachment A).
  - Hosted a conference call with the membership in December to further understand the issues that had been identified on the June 24, 2013 call.
  - Sent a survey to the membership to poll them on their acceptance of each of the guidelines and to elicit comments/concerns.
  - Presented the proposed guidelines to the membership at the 2014 Midyear Meeting, listened to their concerns and answered their questions.

Meeting Dates
- Sept. 23, 2013 (Conference Call)
- Oct. 7-8, 2013
- Nov. 15, 2013 (Conference Call)
- Dec. 5-6, 2013
- Feb. 7, 2014 (Conference Call)
- March 12-13, 2014
- March 25, 2014 (Conference Call)

Relationship to Strategic Plan

Strategic Initiative A
NCSBN promotes evidence-based regulation

Strategic Objective 3
Create resources for evidence-based regulation
Hosted a conference call with Marshall Hill and Russell Poulin of the National Council of State Authorization Reciprocity Agreements (NC-SARA) to learn of national issues with distance learning programs in higher education. Nancy Spector later attended a regional meeting of NC-SARA to hear about challenges from the states.

Develop recommendations for prelicensure distance learning programs.

- Developed five guidelines, along with definitions, that can create more consistency among the BONs (Attachment B).
- Designed a visual model to enhance understanding of how the home and host states can collaborate to regulate prelicensure distance education programs (Attachment A).
- Developed a timeline (to be implemented by 2020 in hope that BONs will fully adopt the guidelines by then) and strategies for adopting the guidelines, recognizing that it will take time for the BONs to implement changes (Attachment A).
- Based on the guidelines, made proposed revisions to the Model Education Rules and Act (Attachment C).

Future Activities

- Recommend adoption of the proposed Model Act and Rules revisions at the 2014 Annual Meeting.
- Approve the white paper “National Council of State Boards of Nursing (NCSBN) White Paper: Nursing Regulation Recommendations for Distance Education in Prelicensure Nursing Programs,” along with the Regulatory Guidelines for Distance Education.
- Approve NCSBN hosting a one-day virtual conference for its membership in the spring of 2015 to roll out the Distance Learning Education recommendations; present cutting-edge information on the future of prelicensure distance education programs; and discuss quality indicators of prelicensure distance education programs to consider when approving these programs.
- Convene a committee to develop regulatory guidelines for advance practice registered nurse (APRN) distance education programs based on the regulatory guidelines for prelicensure distance education programs.

Attachments

A. White Paper: Nursing Regulation Recommendations for Distance Education in Prelicensure Nursing Programs

B. Regulatory Guidelines: The Future of Prelicensure Distance Education Programs in Nursing

C. Proposed Model Education Rule and Act Revisions
Attachment A

White Paper: Nursing Regulation Recommendations for Distance Education in Prelicensure Nursing Programs

INTRODUCTION
In their mission of public protection, most boards of nursing (BONs) approve nursing education programs (Spector & Woods, 2013). Therefore, NCSBN’s Board of Directors convened a committee to identify current and evolving regulatory issues related to distance learning education programs and develop recommendations for the regulation of distance education programs. The committee was challenged to think futuristically. This white paper provides nurse regulators with information on prelicensure distance education and related issues. Further, it presents facts to educators about perceived regulatory barriers related to distance education programs and offers possible solutions to problems.

BACKGROUND
Two widely disseminated national nursing reports have called for nurses to advance their education. In 2010, the Carnegie study of nursing education (Benner, Sutphen, Leonard, & Day, 2010), which compared and evaluated nine nursing programs with excellent reputations for teaching and learning, studied the state of nursing education. Of Benner et al.’s (2010) 26 transformative recommendations, four of them support nurses advancing their education. They also made a strong case for increasing the rigor of nursing education, and integrating clinical cases and practical experiences throughout the educational process.

Likewise, the Institute of Medicine’s (IOM) Future of Nursing report (IOM, 2011) made a recommendation (key message number two) that “Nurses should achieve higher levels of education and training through an improved education system that promotes seamless academic progression” (p. 163). More specifically, it recommends that by 2020 the proportion of baccalaureate degree nurses should be 80 percent (IOM, 2011), although in 2013 the percentage of first-time, U.S. educated baccalaureate graduates taking the NCLEX was 42 percent (NCSBN, 2014). Similarly, nursing organizations have taken positions that nurses should advance their education (AACC, ACCT, AACN, NLN, & N-OADN, 2012; Tri-Council for Nursing, 2010).

In concert with these recommendations, studies have provided evidence that a higher ratio of baccalaureate educated nurses in hospitals improves patient outcomes and safety (Aiken, Clarke, Cheung, Sloane, & Silber, 2003; Aiken, Clarke, Sloane, Lake, & Cheney, 2008; Blegen, Goode, Park, Vaughn, & Spetz, 2013; Estabrooks, Midodzi, Cummings, Ricker, & Giovannetti, 2005; Friese, Lake, Aiken, Silber, & Sochalski, 2008; Kutney-Lee, Sloane, & Aiken, 2013; Tourangeau et al., 2006). Since the mission of BONs is public protection, nursing regulation supports nurses advancing their education. BONs are partnering with nurse leaders in their states/jurisdictions to develop seamless articulation tracks or other innovative models for nurses furthering their education (NCSBN, 2012c). Further, in 2010 NCSBN published a policy position statement supporting nurses advancing their education (NCSBN, 2010). Distance education courses provide tremendous opportunities for nurses by offering access to quality nursing education in small communities or rural areas where nursing programs don’t exist; they also allow flexibility for those students who otherwise couldn’t attend a nursing program.

ISSUES FOR BONS
While prelicensure distance education provides opportunities for students advancing their education, the BONs have reported having challenges with regulating distance education programs:

1. Core education requirements for approving distance education programs are needed so that states/jurisdictions are consistent when approving programs for having students in host states.
2. There is a need for licensure clarification, particularly with faculty who only teach didactic courses. There was consensus that preceptors or clinical faculty who work with patients be licensed in the host state where the patients are located.

3. BONs in certain states/jurisdictions want to know when students from out-of-state programs take clinical experiences in their states/jurisdictions.

4. Host states/jurisdictions want assurance that students participating in clinical experiences in their states/jurisdictions are being supervised by qualified faculty or preceptors.

5. BONs want to know how to communicate distance education issues with BONs that don’t have authority over nursing education.

6. BONs report that the quality of online programs is more varied than with traditional programs and have requested information on the uniqueness of the programs for evaluating the quality of distance education programs.

Another issue for BONs is the U.S. Department of Education’s proposed state authorization rules. In October 2010, the U.S. Department of Education issued program integrity rules prompted by a concern about the inconsistent quality of for-profit education programs, which account for 11 percent of higher education students, 26 percent of student loans and 43 percent of all loan defaulters (U.S. Department of Education, 2010). These rules include the 34 §600.9 (c) state authorization rule, which was tied to Title IV funding. It requires documentation of compliance with state laws in all states that offer distance or correspondence education. Because of legal challenges, at the time of this writing, the rule has not gone into effect, and the U.S. Department of Education has not indicated what the next steps might be (NC-SARA, 2014). This state authorization rule has created concern in nursing education because of the diversity of state requirements pertaining to distance education. Because some BONs also have requirements related to distance education, they also have watched this rule closely. No BON, however, has taken any action based on this proposed U.S. Department of Education state authorization rule.

Related to the diversity of rules and regulations governing distance education among U.S. states/jurisdictions, a State Authorization Reciprocity Agreement (SARA) was developed. SARA is a voluntary agreement among states that establishes comparable national standards for interstate offering of postsecondary distance education courses and programs (NC-SARA, 2014). It is intended to make it easier for students to take online courses offered by postsecondary institutions based in another state. SARA is overseen by the National Council for State Reciprocity Agreements (NC-SARA) and administered by four regional education compacts: the Midwestern Higher Education Compact (MHEC), the New England Board of Higher Education (NEBHE), the Southern Regional Education Board (SREB) and the Western Interstate Commission for Higher Education (WICHE). SARA provides clarity in authority and responsibility by shifting oversight of distance education to the home state where the educational program has legal domicile. As of this writing, seven states have joined SARA: Indiana, North Dakota, Colorado, Nevada, Idaho, Washington and Alaska; there are expectations that by 2015 there will be 20-24 states in SARA and 40-45 by 2016 (Hill, 2014).

Currently, SARA has no effect on state professional licensing requirements. NC-SARA stipulates that any college that offers courses or programs potentially leading to professional licensure must keep all students informed as to whether such offerings actually meet state requirements (NC-SARA, 2014). However, this could change in the future, so it is important for BONs to stay abreast of this initiative.

**KEY DEFINITIONS**

**Distance education in nursing** – Instruction offered by any means where the student and faculty are in separate physical locations. Teaching methods may be synchronous or asynchronous and shall facilitate and evaluate learning in compliance with BON approval status/regulations.

(Adapted from Commission on Regulation and Postsecondary Distance Education, 2013)
Clinical learning experiences – Planned, faculty-guided learning experiences that involve direct contact with patients (NCSBN Model Act, 2012a).

Encumbered license – A license with a current discipline, condition or restriction (NCSBN Model Rules, 2012b).

Faculty – Individuals employed full or part time by an academic institution that are responsible for developing, implementing, evaluating and updating nursing program curricula (NCSBN Model Rules, 2012b).

Home state/jurisdiction – The state/jurisdiction where the program has legal domicile. (Adapted from Commission on Regulation and Postsecondary Distance Education, 2013)

Host state/jurisdiction – The state/jurisdiction outside of the home state/jurisdiction where students participate in didactic coursework and/or clinical experiences. (Adapted from Commission on Regulation and Postsecondary Distance Education, 2013)

For example, if a prelicensure nursing program located and approved in Illinois were to offer either clinical or didactic nursing education in Wisconsin (either by distance education or crossing the borders for clinical rotations), the home state would be Illinois and the host state would be Wisconsin.

Preceptor – An individual at or above the level of licensure that an assigned student is seeking who may serve as a teacher, mentor, role model or supervisor in a clinical setting (NCSBN Model Rules, 2012b).

SELECTED LITERATURE REVIEW

The Context
A rapidly evolving health care environment has created an opportunity for nursing to reconsider the best methods to maximize health care delivery and health care outcomes, and to contemplate how clinicians are best educated to meet the current workforce needs (Cronenwett & Dzau, 2010). This call for a radical transformation in nursing education has led to a proliferation of the use of technology in nursing education (Powell, Darbyshire, Pollock, & Bradley, 2012).

Distance education is defined in a variety of ways in the literature and by national committees (Allen & Seaman, 2013). These definitions are similar with minor nuances. Similarities include use of innovative technologies in delivering curricular content in both synchronous and asynchronous formats. The main difference in definitions included the percentage of total curricula delivered in a distance education format ranging from a single course to 100 percent of content delivered in a distance education format. The general consensus is that distance education utilizes some degree of technology as an educational method. Moreover, the majority of the curricular content is delivered asynchronously where the teacher and learner are located in different places.

In higher education an unprecedented 6.7 million students are taking at least one online course and 32 percent of all students in higher education are taking at least one online course (Allen & Seaman, 2013). As in other disciplines, online education in nursing has increased and that rise is expected to continue (Coose, 2010). The use of distance education methodologies is becoming the mainstay of many nursing education programs. Distance education in nursing education addresses the recommendations to seamlessly educate nurses to address the exponential growth of science and technology, as well as the acuity of patients in diverse settings (Benner et al., 2010; IOM, 2011; Jones & Wolf, 2010). Moreover, distance education has allowed many nursing programs to extend their reach, making nursing education accessible to many prospective students in rural, remote settings who may otherwise lack access to nursing as a career option (Jones & Wolf, 2010).
The Future of Distance Education: Regulatory Implications

Many prelicensure nursing programs have been or are beginning to use technologies such as Blackboard platforms, social media, video conferencing, webinars and virtual clinical experiences with actual patients. One new technology is the virtual community clinic learning environment (VCCLE). This is an asynchronous, immersive environment where students interact with virtual patients (Reis et al., 2013). While traditional clinical learning experiences may provide inconsistent opportunities, virtual experiences can provide standardization in nursing education to enhance learning for required direct, patient-care encounters. Regulatory issues, however, can arise about faculty licensure or patient confidentiality.

Another innovative technology is massive open online courses (MOOCs), which are currently used in only a minority of universities, though this methodology is gaining increasing prominence (Allen & Seaman, 2013). MOOCs are aimed at large-scale interactive participation through open access via the Web. For example, one course at Stanford drew 100,000 learners (Educause, 2011). MOOCs provide excellent opportunities to students and lifelong learners, particularly during these times of massive student loan debts. There are regulatory concerns with MOOCs however, such as incidents of cheating, course variability, completion rates and lack of an ability to assess student learning (Skiba, 2012). Therefore, implications of MOOCs in nursing education related to outcome measures and quality control are yet to be determined (Zerwekh, 2011) and are important for regulators to monitor. While this model bears watching, it will likely be an important model for the future (Skiba, 2012).

Particularly relevant to BONs are technologies where students participate in virtual clinical experiences with actual patients. No matter where these faculty members are located, they must be licensed in the jurisdiction where the patients are located. As new distance education methodologies continue to evolve in prelicensure nursing education, we need to be proactive about exploring policy and regulatory implications.

Effectiveness and Use of Distance Education Programs in Nursing

The U.S. Department of Education conducted a meta-analysis of studies from 1996 to 2008, studying outcomes in face-to-face teaching versus online education (Means, Toyama, Murphy, Bakia, & Jones, 2010). They found that students in online courses modestly outperformed those in face-to-face courses. The best outcomes were achieved with students who had blended elements of online and face-to-face instructions. Similarly, in nursing most studies reveal there are no significant differences in outcomes between students taking online didactic courses versus those in face-to-face courses (Billings, Dickerson, Greenberg, Wu, & Talley, 2013). Considering the findings of the Carnegie study of nursing education (Benner et al., 2010) and the findings of Means et al. (2010), the best nursing courses might highlight a blended online and face-to-face format paired with faculty supervised clinical experiences.

Frith (2013) highlights the advantages of distance education in nursing. A major benefit, particularly when nurse leaders are calling for a more educated workforce, is that it provides access and flexibility to those students who wouldn’t normally be able to access education, either because of the students’ work or family schedules, or because there are no local programs for them to attend. Other advantages include matching learning styles, opportunity for more individualized learning, the information is linked to the student's pace and the online format offers opportunities to connect with colleagues without geographic limitations. Zerwekh (2011) adds that Web-based teaching can create deep reflection and foster meaningful exchanges.

Frith (2013) cautions that online learning isn’t for all students. The learner must be motivated and a self-starter with the discipline to learn independently. In nursing, a major limitation to online nursing education is that, since nursing is a practice profession, the student will require supervised clinical experiences with qualified faculty. There are excellent distance education programs that pair clinical faculty with students in distant states/jurisdictions, as a part of the overall curriculum. As Frith (2013) notes, learning clinical reasoning, a hallmark of nursing education, requires the presence of a teacher in the learning process. Other limitations include students having access to and knowledge of computers or mobile devices, faculty needing to
be trained in the online format, authentication of the student's work, and the requirement of an adequate infrastructure to support both students and faculty (Frith, 2013). Zerwekh (2011) also points out online teaching is no longer a human relationship, but instead a virtual exchange. She worries about the commercialization of education with administrators, vendors of software and hardware, and investors seeing it as a profit maker. Zerwekh (2011) notes that students must be brought together “…to listen beyond words, to watch faces and bodily expressions, to pick up nonverbal skills, to interact socially and therapeutically, to negotiate, to resolve conflict, and to build caring collegial community” (p. 180). She advocates some face-to-face work in blended (hybrid) courses.

Studies supporting best practices (Quality Matters, 2014) in distance education illustrate that there are ways to minimize the lack of a human touch in distance education. They stress the importance of social presence (Joyce & Brown, 2009) to assist students and instructors to optimize learning in distance education formats through increased awareness of linguistic nuances, social interaction, learning communities, instructor involvement, and prior knowledge and experiences. Joyce and Brown (2009) assert that social presence emphasizes the human characteristics in distance education by creating an awareness of the importance of critical connections and cultivating relationships in virtual learning communities, which may increase student engagement learning outcomes.

Quality Indicators

Even though it's more than 25 years old, Chickering and Gamson's (1987) seminal work on seven principles for best practices in undergraduate distance education programs is still very relevant today. When applied consistently, they result in measureable outcomes in undergraduate (Billings, Connors, & Skiba, 2001) and graduate (Broome, Halstead, Pesut, Rawl, & Boland, 2011) student learning. These principles include:

- Interaction with faculty;
- Collaboration among students;
- Active learning;
- Prompt feedback;
- Time on task;
- High expectations; and
- Respect for diverse talents and ways of learning.

Organizations have developed benchmarks or quality indicators for distance education, including the Sloan Consortium's five pillars (Sloan-C, 2013) and the Western Interstate Commission for Higher Education's (WICHE, 2011) 15 principles.

The Middle States Commission on Higher Education's Interregional Guidelines for the Evaluation of Distance Education (2011) are important for BONs to consider because they are endorsed by all regional accrediting organizations in the U.S., and all institutions that participate in NC-SARA are required to follow these guidelines (NC-SARA, 2014). These nationally accepted guidelines have nine Hallmarks of Quality, which include:

1. Online learning is appropriate to the institution’s mission and purposes.
2. Plans for developing, sustaining and expanding (if appropriate) are integrated into its planning and evaluation processes.
3. Online learning is incorporated into the institution’s systems of governance and academic oversight.
4. Curricula are coherent, cohesive and comparable in rigor to programs with traditional face-to-face formats.
5. Effectiveness is evaluated and results are used to enhance the evaluation of goals.
6. Faculty responsible for delivering the online curricula and evaluating the students’ success are qualified and effectively supported.

7. The institution provides effective student and academic services.

8. The institution provides sufficient resources to support and, if appropriate, expand its offerings.

9. The institution assures the integrity of its offerings.

Quality Matters is an external, peer review service that evaluates online and blended (hybrid) courses, using a set of eight general standards and 41 specific standards (Quality Matters, 2011). The uniqueness of Quality Matters is the concept of course alignment. This occurs when critical course elements work together to ensure desired student outcomes.

In nursing, national nursing accreditation by either the Accreditation Commission for Education in Nursing (ACEN) or the Commission on Collegiate Nursing Education (CCNE) is a nongovernmental, peer-reviewed process where nursing programs are evaluated according to national accreditation standards. Of the two national accreditors, CCNE does not have different standards for distance education programs. There is an additional criterion for distance education programs under three of ACEN’s six standards (2013).

Most BONs approve nursing education programs. Five of the 43 BONs responding to an NCSBN distance education survey in 2013 reported having additional approval requirements for distance education programs. These additional BON requirements generally addressed providing technical support.

The integration of clinical learning experiences in prelicensure nursing education is an essential element of all nursing programs (Benner et al., 2010; CCNE, 2009; NCSBN, 2005; ACEN, 2013), including distance education programs. It would not be acceptable for a prelicensure distance education nursing program to provide only didactic content via an online platform, with no supervised clinical learning experiences. Distance education programs can, and typically do, provide clinical learning experiences in host states. Students’ supervision would include the program identifying qualified clinical faculty or preceptors for the prelicensure students and maintaining oversight over the clinical faculty or preceptors, as recommended by the NCSBN Model Rule core requirements, and as required by the home state BON.

An important part of maintaining the quality of a distance education program is to have a rigorous process for identifying and measuring outcomes. One framework (Billings, 2000) that is used to assess the outcomes and practices in online nursing courses incorporates Chickering and Gamson’s (1987) seven principles for good practices. Concepts of the model include outcomes, educational practices, faculty support, learner support and use of technology. Variables are identified for each of the concepts.

**Regulatory and Education Issues with Distance Education**

Billings et al. (2013) report that some states have specific regulations for distance education programs. They caution that it is challenging to keep up with additional requirements for distance education programs in BONs. Likewise, Chappy, Stewart and Hansen (2010) write about “border wars” between states where states have different requirements. They report three major reasons why distance education nursing programs have challenges, including requiring a physical building, having various preceptor requirements and requiring a $5,000 fee.

Gormley and Glazer (2012) report three major BON issues that educators face related to distance education: (1) They state that BONs have instituted requirements based on the U. S. Department of Education’s state authorization rule that was previously discussed; yet, they assert, the U.S. Department of Education’s state authorization rule is currently not being enforced because of legal challenges; (2) BONs charge up to $750 for distance education programs teaching students in their states, and in time these charges will be prohibitive; and (3) Program details are required for program approval of distance education programs. Gormley and Glazer conclude that BONs
are becoming “roadblocks to students’ educational advancement,” citing the IOM Future of Nursing report.

Some of the regulatory issues reported above are perceived barriers and are not accurate. For example, from a survey sent to the BONs in 2013 (48 of the 59 BONs responded; the Nebraska APRN BON was not included), NCSBN collected the following data from BONs:

- No BON, as of this date, has instituted requirements based on the U.S. Department of Education’s state authorization rule. BONs are waiting to see the outcome of this rule.

- Three BONs charge nominal fees ($250-$500) for host state distance education programs. Most of the fees that are reported are from other state agencies (SHEEO, 2013). The $5,000 fee and building requirements cited above (Billings et al., 2013) are mandated by the Board of Higher Education in that state.

- Five BONs report specific requirements for distance education programs, though these are related to technical support.

- Twelve BONs approve programs that use their states/jurisdictions as host states (all 12 approve the clinical portion and five approve both the clinical and didactic portion).

- One BON limits enrollment of out-of-state students, based on clinical availability.

As stated earlier, BONs are working collaboratively with other leaders in their states/jurisdictions to meet the IOM’s Future of Nursing recommendations for advancement of nursing education. In order for BONs and educators to work collaboratively with distance education issues, it will be important to develop an ongoing relationship so that questions can be answered and problems can be solved on an ongoing basis.

From the educator perspective, Mancuso-Murphy (2007), Zerwekh (2011), and Hoffmann and Dudjak (2012) all report issues with faculty workload, both in the creation and implementation of online courses. Anderson and Avery (2008) studied faculty workload in graduate nursing courses, finding that a comparatively higher number of hours is required for preparation of online courses, a higher percentage of time is needed to evaluate student work and more time is spent in student contact. Zerwekh (2011) reports that, while faculty teaching online courses have more flexible time, often the isolation from colleagues and students can pose difficulties.

Johnson and Meehan (2013) report many faculty issues related to preparation for teaching online courses. Often faculty feel threatened as they transition from face-to-face teaching to Web-based teaching. Many have little training in the creation and management of online courses, and yet little time to learn about it. Hoffman and Dudjak (2012) find that while most of their faculty are familiar with the basic applications, such as Blackboard, there are knowledge gaps in the use of online learning tools, such as wikis, discussion boards and blogs. Another issue is the slow response of faculty to integrate new online tools into the curriculum (Skiba, Connors, & Jeffries, 2008), thus expanding the gap between digital immigrants (educators) and digital natives (millenials).

Future Research

Future nursing research for regulators should focus on how students learn best in online courses to provide evidence for BONs to incorporate into their approval processes. For example, research should address best practices in online nursing education, with an eye toward evaluating the learning experiences. The use of virtual clinical learning experiences with actual patients should be studied, along with ways to protect patient confidentiality. Research should be conducted on the effect of online courses on nursing practice. What are the best strategies to engage students to develop clinical reasoning skills and to promote patient safety (Mancuso-Murphy, 2007)?
RECOMMENDATIONS FOR THE FUTURE

After discussing the issues with BONs and external stakeholders, and reviewing the literature NCSBN’s Distance Learning Education Committee developed the following Regulatory Guidelines for Prelicensure Programs. The purpose of these guidelines is to provide NCSBN Member Boards with criteria and rationale regarding the regulation of prelicensure nursing education programs. The guidelines are proposed, with an eye to the future, to promote clarity and consistency among BONs for the regulation of prelicensure nursing distance education programs.

Realizing that it would take BONs time to study their current processes with distance education programs and then to make changes to their state’s nurse practice act and rules, if necessary, the committee recommends the guidelines be fully met by 2020 (Figure 1). This is in line with the IOM Future of Nursing recommendations for 80 percent of nurses to be educated with a baccalaureate degree by 2020, as well as the NCSBN recommendations that BONs require accreditation by 2020.

These guidelines apply to distance education in nursing, clinical experiences that cross state/jurisdiction borders or virtual clinical experiences where patients are located in another state/jurisdiction. The guidelines will be disseminated to BONs and key stakeholders to foster collaboration as nursing moves toward the future.

GUIDELINES

1. Distance learning prelicensure nursing education programs shall meet the same approval guidelines as any other prelicensure nursing education program in the home state.

The NCSBN Model Rules set forth prelicensure nursing education program core education requirements that apply when BONs approve either traditional or distance education programs (see 6.1.2 of the NCSBN Model Rules [www.ncsbn.org/12_Model_Rules_090512.pdf]). The following is a summary of these core requirements in the NCSBN Model Rules. The home state/jurisdiction will use these when approving a program that has students in host states, just as they do for traditional programs.

NCSBN MODEL RULES

The curriculum of the nursing education program includes knowledge, skills and abilities necessary for the scope and guidelines of competent nursing practice expected at the level of licensure. Curriculum components, as defined by nursing education, professional and practice guidelines, shall include:

a. Experiences that promote clinical judgment, clinical management, and commitment to improving quality and safety of the health care system.

b. Evidence-based learning experiences and methods of instruction, including distance education methods, which are consistent with the curriculum.

c. Coursework in:
   i. Biological, physical, social and behavioral sciences to promote safe and effective nursing practice.
   ii. Professional responsibilities, legal and ethical issues, history and trends in nursing.
   iii. Didactic content and supervised clinical experiences in the prevention of illness; and the promotion, restoration and maintenance of health in patients across the lifespan and from diverse backgrounds.
   iv. Faculty supervised clinical practice, which shall provide clinical hours comparable to those provided by an approved program of the equivalent size and type.
Rationale: The mode of curricular delivery does not alter the regulatory guidelines for nursing education, including distance education. The NCSBN Model Act and Rules, adopted by the NCSBN membership in August 2012, delineate required criteria for prelicensure nursing education programs.

2. The home state/jurisdiction approves prelicensure nursing education programs, including distance learning education programs.

Based on this standard, the prelicensure distance education program is approved in the home state/jurisdiction and no additional BON approvals are required. This standard encourages BONs to rely on the approval status granted by other BONs.

If a host state/jurisdiction has a complaint against a program that is approved in another state/jurisdiction, it will file that complaint with the home state/jurisdiction. It is the responsibility of the home state/jurisdiction to follow up with that complaint and take any action that is deemed necessary. In those states where the BON does not approve prelicensure nursing education programs, it will be their responsibility to contact the relevant state agencies to follow up with the complaint.

Rationale: BONs approve prelicensure nursing education programs, whether they are traditional or distance education programs, which have legal domicile in their state/jurisdiction. BONs historically have relied on the approval status granted by other BONs for prelicensure nursing education programs. In addition, BONs historically have relied on other BONs to investigate complaints and take disciplinary action when needed.

3. Prelicensure nursing education programs in the home state provide oversight over the students in the host states and are responsible for the students’ supervision.

Students are under the auspices of the prelicensure nursing education program. If BONs do not have an exemption in their law for students who are participating in clinical experiences in their state/jurisdiction, but are enrolled in a program located in another jurisdiction, they are encouraged to adopt the current language from the NCSBN Model Act, Section 10. Exemptions:

**NCSBN MODEL ACT**

No provisions of this Act shall be construed to prohibit:

- The practice of nursing by a student currently enrolled in and actively pursuing completion of a prelicensure nursing education program, or a graduate program involving nursing practice, if all the following are met:
  - The student is participating in a program located in this jurisdiction and approved by the BON or participating in this jurisdiction in a component of a program located in another jurisdiction and approved by a BON that is a member of NCSBN.
  - The student’s practice is under the auspices of the program.
  - The student acts under the supervision of an RN serving for the program as a faculty member or teaching assistant.
Therefore, the home state/jurisdiction will determine whether the program provides adequate clinical supervision of the students, just as they do with programs located in their own states/jurisdictions. Additionally, the home state/jurisdiction will establish whether clinical faculty and/or preceptors in host states/jurisdictions have adequate oversight by the nursing program faculty in the home state/jurisdiction.

Rationale: The BON approved prelicensure nursing education program is responsible for its students, regardless of the mode of education, including those students who are taking distance education nursing clinical courses in other states/jurisdictions.

4. Faculty, preceptors or others who teach clinical experiences for a prelicensure nursing education program by means of distance education shall hold a current and active nursing license or privilege to practice, which is not encumbered, and meet licensure requirements in the state/jurisdiction where the patient is located. Faculty who only teach didactic content for a prelicensure nursing education program by means of distance education shall hold a current and active nursing license or privilege to practice, which is not encumbered, and meet licensure requirements in the home state where the program is approved.

Rationale: This standard supports the regulatory framework that practice takes place where the patient is located.

a. The nurse shall be licensed where the patient is located and where patient care is regulated for protection of the patient. If a practice complaint were to occur, this allows the host state/jurisdiction the ability to investigate that complaint.

b. If there are student complaints, the host state will send them to the home state, which approves the prelicensure program and therefore is responsible for investigating and possibly sanctioning the program or the individual.

5. BONs will communicate information through their annual reports about prelicensure nursing programs that have students enrolled in clinical experiences in host states. BONs have requested data on which prelicensure programs have nursing students in clinical experiences in their states/jurisdictions. Therefore, it is recommended that BONs add a question to their annual reports, which are sent to prelicensure programs, requesting information on whether students are enrolled in clinical experiences in host states/jurisdictions. If the programs do have students in host states/jurisdictions, they are asked to list where their students are located. NCSBN will collect that data from the home states and distribute it to the host states that want it. The following is the question to add to the annual nursing education report:

a. Do you use another state/jurisdiction for prelicensure clinical experiences? If yes, please list in which states/jurisdictions they are located.

Rationale: Some BONs are interested in knowing which out-of-state/jurisdiction programs have students taking clinical experiences in their states/jurisdictions. This is also excellent national data on prelicensure education that could inform future projects or research.

**FOSTERING COLLABORATION AMONG THE BONS AND EDUCATORS**

A visual model of the Regulatory Guidelines for Nursing Education Prelicensure Distance Education Programs can be found in Figure 2. The model depicts the differences between the home state’s and the host state’s responsibilities, illustrating that it was designed to encourage collaboration among the BONs for the purpose of public protection.

The following is an actual example about how this collaboration occurred, with the outcome protecting the public: Washington and Oregon are border states and many nursing programs obtain clinical and practice experiences in the neighboring state. Nursing education staff members from the two BONs are in frequent communication about issues impacting nursing education in both states. On one occasion, the host state expressed concerns that the home state’s distance education nursing program was not following state laws regarding clinical placements. The host state’s BON filed a complaint with the home state’s BON against the home state’s distance-learning nursing program. The home state’s BON opened the complaint for investigation and
immediately contacted the nursing program. A conference call with the nursing program, the host state and the home state was conducted. The nursing program came into compliance with host state laws. The home state now includes a review of the distance learning program in its ongoing program approval process. If the home state had not had authority over nursing programs, it would forward the complaint to the appropriate state/jurisdiction agency.

NCSBN is collecting any special requirements BONs might have for distance education programs. These requirements are available online. This Web page will be regularly updated, as needed. If the distance education guidelines are adopted by all BONs by 2020, as suggested, there will be consistency among the BONs and there will no longer be the need for that Web page.

SUMMARY
There have been national calls for advancing the education of the nursing workforce, and educators and BONs are working together in statewide initiatives toward this recommendation. Distance education allows for an increased access to education and more flexibility for the learner, thus assisting with this goal. This white paper has presented the regulatory perspective of distance education programs from a variety of viewpoints. Issues were identified and evidence was presented. Recommendations were made for providing more consistency in the nursing regulation of distance education programs. A timeline and strategies for meeting these recommendations was provided, and a visual model illustrating the Regulatory Guidelines for Nursing Education Prelicensure Distance Education Programs was presented.

It is imperative for BONs and educators to work together to promote excellent learning outcomes with distance education, which in turn will improve the quality and safety of patients. Authentic conversations will be essential as we move forward together.

REFERENCES


FIGURE 1

Timeline for Adopting Distance Education (DE) Core Requirements

Example Year: 2014

FIGURE 2

Regulatory Guidelines for Nursing Education Prelicensure Distance Education Programs

COLLABORATION FOR PUBLIC PROTECTION

Accept Home State Approval
- License Preceptors or Other Clinical Faculty
- Receive a list of DE programs with students in their states
- File Complaints about DE Program or Didactic Faculty with Home State

Home State
- Approve Program
- License Didactic Faculty
- Include Number of DE Programs in Annual Report; Send to NCSBN to Compile for States
- Investigate Complaints Against Program and Didactic Faculty

Host State
- Collaborate with Home State for Public Protection

NCSBN
- 2014 NCSBN Web page lists jurisdiction requirements for DE
- 2014 Propose Delegate Assembly acceptance of DE Core Requirements
- 2014 Propose Virtual Conference on Quality Indicators of DE

BON
- 2014 States/Jurisdictions add questions to their Annual Reports on the number of DE programs
- 2014-2015 Home states adopt Guidelines of Approval and set timeline for changes
- 2015 BONs report their action steps to NCSBN
- 2016-2018 Rule/Act changes within states/jurisdictions
- 2018 Rule/Act changes in place
- 2020 DE Core Education Requirements adopted by all BONs; NCSBN Web page on individual requirements deleted

Timeline:
- 2014 NCSBN Web page lists jurisdiction requirements for DE
- 1 YEAR
- 2014 Propose Delegate Assembly acceptance of DE Core Requirements
- 2014 Propose Virtual Conference on Quality Indicators of DE
- 1-2 YEARS
- 2014 States/Jurisdictions add questions to their Annual Reports on the number of DE programs
- 2014-2015 Home states adopt Guidelines of Approval and set timeline for changes
- 2015 BONs report their action steps to NCSBN
- 2-6 YEARS
- 2016-2018 Rule/Act changes within states/jurisdictions
- 2018 Rule/Act changes in place
- 2020 DE Core Education Requirements adopted by all BONs; NCSBN Web page on individual requirements deleted

163
Regulatory Guidelines: The Future of Prelicensure Distance Education Programs in Nursing

The purpose of the Regulatory Guidelines for prelicensure nursing distance education programs is to provide NCSBN Member Boards with criteria and rationale regarding the regulation of prelicensure nursing education programs. The guidelines are proposed, with an eye to the future, to promote clarity and consistency among the BONs for the regulation of prelicensure nursing distance education programs.

Distance learning is prevalent and growing throughout the country as technology advances and the nursing profession develops new strategies to provide greater access to nursing education. The guidelines will be disseminated to boards of nursing (BONs) and key stakeholders to foster collaboration as nursing moves toward the future.

Realizing that it will take BONs time to study their current processes with distance education programs and then make changes to their state’s nurse practice act and rules, if necessary, it is recommended that the guidelines be fully implemented by 2020. These guidelines apply to distance education in nursing, clinical experiences that cross state/jurisdiction borders or virtual clinical experiences where patients are located in another state/jurisdiction.

KEY DEFINITIONS

Distance education in nursing – Instruction offered by any means where the student and faculty are in separate physical locations. Teaching methods may be synchronous or asynchronous and shall facilitate and evaluate learning in compliance with BON approval status/regulations. (Adapted from Commission on Regulation and Postsecondary Distance Education, 2013)

Clinical learning experiences – Planned, faculty-guided learning experiences that involve direct contact with patients (NCSBN Model Act, 2012a).

Encumbered license – A license with a current discipline, condition or restriction (NCSBN Model Rules, 2012b).

Faculty – Individuals employed full or part time by an academic institution that are responsible for developing, implementing, evaluating and updating nursing program curricula (NCSBN Model Rules, 2012b).

Home state/jurisdiction – The state/jurisdiction where the program has legal domicile. (Adapted from Commission on Regulation and Postsecondary Distance Education, 2013)

Host state/jurisdiction – The state/jurisdiction outside of the home state/jurisdiction where students participate in didactic coursework and/or clinical experiences. (Adapted from Commission on Regulation and Postsecondary Distance Education, 2013)

For example, if a prelicensure nursing program located and approved in Illinois were to offer either clinical or didactic nursing education in Wisconsin (either by distance education or crossing the borders for clinical rotations), the home state would be Illinois and the host state would be Wisconsin.

Preceptor – An individual at or above the level of licensure that an assigned student is seeking who may serve as a teacher, mentor, role model or supervisor in a clinical setting (NCSBN Model Rules, 2012b).
GUIDELINES

1. Distance learning prelicensure nursing education programs shall meet the same approval guidelines as any other prelicensure nursing education program in the home state.

The NCSBN Model Rules set forth prelicensure nursing education program core education requirements that apply when BONs approve either traditional or distance education programs (see 6.1.2 of the NCSBN Model Rules [https://www.ncsbn.org/12_Model_Rules_090512.pdf]). The following is a summary of these core requirements in the NCSBN Model Rules. The home state/jurisdiction will use these when approving a program that has students in host states, just as they do for traditional programs.

NCSBN MODEL RULES

The curriculum of the nursing education program includes knowledge, skills and abilities necessary for the scope and guidelines of competent nursing practice expected at the level of licensure. Curriculum components, as defined by nursing education, professional and practice guidelines, shall include:

- Experiences that promote clinical judgment, clinical management, and commitment to improving quality and safety of the health care system.
- Evidence-based learning experiences and methods of instruction, including distance education methods, which are consistent with the curriculum.
- Coursework in:
  - Biological, physical, social and behavioral sciences to promote safe and effective nursing practice.
  - Professional responsibilities, legal and ethical issues, history and trends in nursing.
  - Didactic content and supervised clinical experiences in the prevention of illness; and the promotion, restoration and maintenance of health in patients across the lifespan and from diverse backgrounds.
  - Faculty supervised clinical practice, which shall provide clinical hours comparable to those provided by an approved program of the equivalent size and type.
  - Clinical experiences, including those with preceptors, shall be directed by nursing faculty.
  - Integration of the six Quality and Safety Education for Nurses (QSEN) competencies, which include patient safety, patient-centered care, evidence-based practice, teamwork and collaboration, quality improvement, and informatics.
- Sufficient numbers of faculty who are experientially and academically qualified to meet the outcomes and purposes of the nursing education program.

Rationale: The mode of curricular delivery does not alter the regulatory guidelines for nursing education, including distance education. The NCSBN Model Act and Rules, adopted by the NCSBN membership in August 2012, delineate required criteria for prelicensure nursing education programs.

2. The home state/jurisdiction approves prelicensure nursing education programs, including distance learning education programs.

Based on this standard, the prelicensure distance education program is approved in the home state/jurisdiction and no additional BON approvals are required. This standard encourages BONs to rely on the approval status granted by other BONs.
If a host state/jurisdiction has a complaint against a program that is approved in another state/jurisdiction, it will file that complaint with the home state/jurisdiction. It is the responsibility of the home state/jurisdiction to follow up with that complaint and take any action that is deemed necessary. In those states where the BON does not approve prelicensure nursing education programs, it will be their responsibility to contact the relevant state agencies to follow up with the complaint.

Rationale: BONs approve prelicensure nursing education programs, whether they are traditional or distance education programs, which have legal domicile in their state/jurisdiction. BONs historically have relied on the approval status granted by other BONs for prelicensure nursing education programs. In addition, BONs historically have relied on other BONs to investigate complaints and take disciplinary action when needed.

3. Prelicensure nursing education programs in the home state provide oversight over the students in the host states and are responsible for the students’ supervision.

Students are under the auspices of the prelicensure nursing education program. If BONs do not have an exemption in their law for students who are participating in clinical experiences in their states/jurisdictions, but are enrolled in a program located in another jurisdiction, they are encouraged to adopt the following language from the NCSBN Model Act, Section 10.

Exemptions:

```
NCSBN MODEL ACT
No provisions of this Act shall be construed to prohibit:

a. The practice of nursing by a student currently enrolled in and actively pursuing completion of a prelicensure nursing education program, or a graduate program involving nursing practice, if all the following are met:

i. The student is participating in a program located in this jurisdiction and approved by the BON or participating in this jurisdiction in a component of a program located in another jurisdiction and approved by a BON that is a member of NCSBN.

ii. The student’s practice is under the auspices of the program.

iii. The student acts under the supervision of an RN serving for the program as a faculty member or teaching assistant.
```

Therefore, the home state/jurisdiction will determine whether the program provides adequate clinical supervision of the students, just as they do with programs located in their own states/jurisdictions. Additionally, the home state/jurisdiction will establish whether clinical faculty and/or preceptors in host states/jurisdictions have adequate oversight by the nursing program faculty in the home state/jurisdiction.

Rationale: The BON approved prelicensure nursing education program is responsible for its students, regardless of the mode of education, including those students who are taking distance education nursing clinical courses in other states/jurisdictions.

4. Faculty, preceptors or others who teach clinical experiences for a prelicensure nursing education program by means of distance education shall hold a current and active nursing license or privilege to practice, which is not encumbered, and meet licensure requirements in the state/jurisdiction where the patient is located. Faculty who only teach didactic content for a prelicensure nursing education program by means of distance education shall hold a current and active nursing license or privilege to practice, which is not encumbered, and meet licensure requirements in the home state where the program is approved.

Rationale: This standard supports the regulatory framework that practice takes place where the patient is located.
a. The nurse shall be licensed where the patient is located and where patient care is regulated for protection of the patient. If a practice complaint were to occur, this allows the host state/jurisdiction the ability to investigate that complaint.

b. If there are student complaints, the host state will send them to the home state, which approves the prelicensure program and therefore is responsible for investigating and possibly sanctioning the program or the individual.

5. BONs will communicate information through their annual reports about prelicensure nursing programs that have students enrolled in clinical experiences in host states.

BONs have requested data on which prelicensure programs have nursing students in clinical experiences in their states/jurisdictions. Therefore, it is recommended that BONs add a question to their annual reports, which are sent to prelicensure programs, requesting information on whether students are enrolled in clinical experiences in host states/jurisdictions. If the programs do have students in host states/jurisdictions, they are asked to list where their students are located. NCSBN will collect that data from the home states and distribute it to the host states that want it. The following is the question to add to the annual nursing education report:

a. Do you use another state/jurisdiction for prelicensure clinical experiences? If yes, please list in which states/jurisdictions they are located.

Rationale: Some BONs are interested in knowing which out-of-state/jurisdiction programs have students taking clinical experiences in their states/jurisdictions. This is also excellent national data on prelicensure education that could inform future projects or research.

REFERENCES:


Proposed Model Act Changes

Article VI. Prelicensure Nursing Education

Section I. Approval Standards

a. The BON shall, by rule, set standards for the establishment and outcomes of prelicensure nursing education programs, including clinical learning experiences, and approve such programs that meet the requirements of this Act and BON rule.

b. The BON shall set requirements for the continuing approval of prelicensure nursing programs.

c. The BON may deny or withdraw approval or take such action as deemed necessary when prelicensure nursing education programs fail to meet the standards established by the BON, provided that all such actions shall be in accordance with jurisdiction's Administrative Procedures Act and/or BON rule.

d. The BON may reinstate approval of a prelicensure nursing education program upon submission of satisfactory evidence that the program meets the standards established by the BON.

Rationale: This statement belongs under the approval standards, rather than in the Model Rules under faculty supervised clinical experiences (see below). The statement was reworded to be consistent with the proposed Distance Education Guidelines.

Article V. RN and LPN/VNLicensure and Exemptions

Section 10. No provisions of this Act shall be construed to prohibit:

a. The practice of nursing by a student currently enrolled in and actively pursuing completion of a prelicensure nursing education program, or a graduate nursing program involving nursing practice, if all the following are met:

1. The student is participating in a program located in this jurisdiction and approved by the BON or participating in this jurisdiction in a component of a program located in another jurisdiction and approved by a BON that is a member of NCSBN.

2. The student's practice is under the auspices of the program.
3. The student acts under the supervision of an RN serving for the program as a faculty member or teaching assistant.

4. The student in a graduate program preparing for APRN licensure must be a licensed RN and under the supervision of qualified faculty/preceptor, licensed in the state of clinical practice.

b. The provision of nursing services to family members or in emergency situations.

c. Caring for the sick when done in connection with the practice of religious tenets of any church and by or for its members.

d. The individual is engaging in the practice of nursing by discharging official duties while employed by or under contract with the United States government or any agency thereof.

e. The activities of an individual currently licensed to practice nursing in another jurisdiction, if the individual's license has not been revoked, the individual is not currently under suspension or on probation, and one of the following:

1. The individual is engaging in the practice of nursing as an employee of an individual agency or corporation located in the other jurisdiction in a position with employment responsibilities that include transporting patients into, out of, through this state, as long as each trip in this state does not exceed seventy-two hours.

2. The individual is consulting with an individual licensed in this state to practice any health-related profession.

3. The individual is engaging in activities associated with teaching in this state as a guest lecturer at a nursing education program, continuing nursing education program or in-service presentation, or the individual is teaching didactic content, via distance education, for an approved prelicensure program.

4. The individual is teaching only didactic content for an approved prelicensure nursing education program by means of distance education and will not be physically present in this state.

5. The individual is conducting evaluations of nursing care that are undertaken on behalf of a nationally recognized accrediting organization.

6. The individual is providing nursing care to an individual who is in this state on a temporary basis, not to exceed six months in any one calendar year, if the nurse is directly employed by or under contract with the individual or a guardian or other person acting on the individual's behalf.
7. The individual is providing nursing care during any disaster, natural or otherwise, that has been officially declared to be a disaster by a public announcement issued by an appropriate federal, state, county or municipal official.

Rationale: If there are student complaints, the host state will send them to the home state, which approves the prelicensure program and therefore is responsible for investigating and possibly sanctioning the program.

**Proposed Model Rule Change:**

Chapter 6 Prelicensure Nursing Education

6.1.2 Required Criteria for Prelicensure Nursing Education Programs

3. Faculty supervised clinical practice shall include development of skills in direct patient care; making clinical judgments; care and management of both individuals and groups of patients across the lifespan; and delegation to and supervision of, as appropriate to level of education, other health care providers.

   a. The program shall provide clinical hours comparable to those provided by an approved program of equivalent size and program type or, in the case of no equivalent program, clinical hours scaled relative to an approved program.
   
   b. Clinical experiences shall be supervised by qualified faculty.
   
   c. All student clinical experiences, including those with preceptors, shall be directed by nursing faculty.
   
   d. Measurement of students' competencies shall focus on the students' demonstration of care management and decision making skills when providing patient care in a variety of clinical situations and care settings.

   e. BON determines the approval process when clinical experiences cross state/jurisdiction borders, and nursing education programs shall comply with the process.

Rationale: This statement does not belong under faculty supervised clinical experiences. In discussions with the Chair of last year’s Model Rules Committee, it was decided that it should be moved to the Approval Standards of the Model Act because it is a standard, and not related to faculty supervised clinical practice.
Report of the Awards Committee

Background
The NCSBN Awards Program recognizes outstanding achievement of members and celebrates significant contribution to nursing regulation. Award recipients are selected based on the strength of the nomination in meeting the award criteria. This year the committee developed initiatives to enhance the awards program by developing a more robust awards Web page with video footage of the 2013 awards recipients and reflections of past award recipients.

This year, the committee selected an honoree in the following award categories: R. Louise McManus, Meritorious Service, Regulatory Achievement and Exceptional Contribution awards. Executive officers who have reached milestones in their careers as nurse regulators are being honored with the Executive Officer Recognition Award. Member boards celebrating their centennial and Institute of Regulatory Excellence (IRE) Fellows will also be honored during the awards presentation ceremony. The awards program will be held as a dinner event at the NCSBN Annual Meeting in Chicago. The awards will be presented by the NCSBN Board of Directors president.

Highlights of FY14 Activities
Implemented strategies developed by the committee to promote the awards program. The following strategies were developed in collaboration with the NCSBN Interactive Services department:

- Conducted videotaped interviews with past award recipients at the 2013 Annual Meeting.
- Videotaped interviews with past award recipients to produce “The NCSBN Awards Program: Reflections of Past Recipients,” a video that was posted to the awards program Web page.
- Posted award video slide shows of the 2013 recipients to the awards program Web page.
- Met with the NCSBN Marketing & Communications department to get input on the redesign of the awards narrative template.
- Completed revisions to the award narrative templates.
- Committee members promoted the awards program on the December 2013 Executive Officer Leadership Council conference call.
- Developed a sample completed narrative form that was posted on the awards program Web page as a reference.
- Communicated to the membership the launch of the 2014 awards program highlighting new enhancements for the year.
- Identified two member boards that are celebrating 100 years of nursing regulation in 2014.
- Identified executive officers who are eligible for the Executive Officer Recognition Award for five, 15 and 20 years of service.
- Staff reviewed all nominations to ensure compliance with the blind review process.
- Committee conducted a blind review of the award nominations.
- Committee selected the 2014 award recipients.
- Reported to the Board of Directors the 2014 award recipients selected by the Awards Committee.
- Sent letters of notification to the 2014 award recipients.
2014 AWARD RECIPIENTS:

R. Louise McManus Award
Myra Broadway, JD, MS, RN, executive director, Maine State Board of Nursing

Meritorious Service Award
Gloria Damgaard, MS, RN, FRE, executive secretary, South Dakota Board of Nursing

Regulatory Achievement Award
Nevada State Board of Nursing

Exceptional Contribution Award
Ann L. O’Sullivan, PhD, CRNP, FAAN, board member, Pennsylvania State Board of Nursing

Executive Officer Recognition Awards

5 YEARS
- Louise Bailey, MEd, RN, executive officer, California Board of Registered Nursing
- Anne Coghlan, MScN, RN, executive director, College of Nurses of Ontario (Associate Member)
- Jennifer L. Filippone, chief, Practitioner Licensing and Investigations Section, Connecticut Board of Examiners for Nursing
- Mary-Anne Robinson, MSA, RN, CEO, College and Association of Registered Nurses of Alberta (Associate Member)

15 YEARS
- Mary Blubaugh, MSN, RN, executive administrator, Kansas State Board of Nursing
- Shirley Brekken, MS, RN, executive director, Minnesota Board of Nursing
- Kimberly Glazier, MEd, RN, executive director, Oklahoma Board of Nursing
- N. Genell Lee, JD, MSN, RN, executive officer, Alabama Board of Nursing

20 YEARS
- Teresa Bello-Jones, JD, MSN, RN, executive officer, California Board of Vocational Nursing and Psychiatric Technicians

MEMBERS CELEBRATING 100 YEARS OF NURSING REGULATION
- Kentucky Board of Nursing
- Mississippi Board of Nursing

Future Activities
- Select the 2015 awards recipients.

Attachment
A. 2014 Awards Brochure
MISSION
NCSBN provides education, service and research through collaborative leadership to promote evidence-based regulatory excellence for patient safety and public protection.

VISION
Advance regulatory excellence worldwide.
The NCSBN awards will be announced at the 2014 Annual Meeting to recognize the outstanding achievements of NCSBN member boards and associate members. The awards are designed to celebrate significant contributions to nursing regulation.

Our goal is not only to recognize the successes of our peers, but also to learn what key factors contributed to this success. We encourage all members to nominate themselves and their peers.

Nomination Procedure and Entry Format

Please carefully read the eligibility requirements and criteria listed for each award. Only entries that meet all the requirements and criteria will be considered. Electronic submission of all nomination materials is required.

- Entries must be submitted in one complete email; partial entries will not be considered. All entries must be emailed no later than Feb. 14, 2014, to Alicia Byrd, director, member relations, NCSBN, at abyrd@ncsbn.org.
- Members may nominate themselves or others.
- Two letters of support are required. Entries must include one letter of support from the executive officer or designee. For the Regulatory Achievement Award, entries must include one letter of support from another member regulatory agency or a representative from an external regulatory agency.
- Entries must be typed and submitted on the respective award template.
- Entries must be accompanied by the official awards program cover page. Your narrative should be between 1,000 - 1,500 words and in size 10 pt. font.
- Electronic submission of all materials is required. If you use any program other than Microsoft Word, please call to be sure it is readable at NCSBN.

If you have questions about the Awards Program, contact Alicia Byrd at abyrd@ncsbn.org or 312.525.3666.
Awards Review and Selection

- To ensure a fair and equitable review and selection process, each individual nomination is subjected to a blind review by each Awards Committee member. The committee then makes the final decision about all award recipients.
- Awards Committee members are not permitted to nominate award recipients, participate in the nomination process or write letters of support during their tenure on the Awards Committee.
- Awards Committee members recuse themselves from both the blind review and the final decisions for the award recipient(s) in categories where a member from their particular jurisdiction is nominated, or in cases where they feel that they cannot be objective about the nominee.
- Entries are evaluated using uniform guidelines for each award category.
- Awards will not necessarily be given in each category.
- Award recipients will be notified prior to the NCSBN Annual Meeting and will be honored at the Annual Meeting.
- The Awards Committee can recommend that a nominee be given an award that is different from the award for which he/she was originally nominated. If this decision were made, the nominator will be contacted to determine if he/she is agreeable to having the nominee be given a different award.

R. Louise McManus Award

R. Louise McManus (1896-1993) is widely recognized as a major figure in furthering the professionalism of nursing. She worked tirelessly to produce a standardized national approach to nursing licensure. As a patient advocate, she developed the Patient Bill of Rights adopted by the Joint Commission in Accreditation of Hospitals.

ELIGIBILITY
An individual who is a member

DESCRIPTION OF AWARD
The R. Louise McManus Award is the most prestigious award. Individuals nominated for this award shall have made sustained and significant contributions through the highest commitment and dedication to the purposes of NCSBN.

CRITERIA FOR SELECTION

- Active leadership in NCSBN
- Substantial contributions to the improvement of nursing regulation
- Impacts public policy and development to enhance the health and well-being of individuals and the community
- Contributions to the mission of NCSBN over a significant period of time

AWARD CYCLE
Annually as applicable

NUMBER OF RECIPIENTS
One
### Meritorious Service Award

**ELIGIBILITY**
An individual who is a member

**DESCRIPTION OF AWARD**
The Meritorious Service Award is granted to a member for significant contributions to the mission and vision of NCSBN.

**CRITERIA FOR SELECTION**
- Significant promotion of the mission and vision of NCSBN
- Positive impact on the contributions of NCSBN
- Demonstrated support of NCSBN’s mission

**AWARD CYCLE**
Annually as applicable

**NUMBER OF RECIPIENTS**
One

### Exceptional Contribution Award

**ELIGIBILITY**
A member who is not a president or executive officer

**DESCRIPTION OF AWARD**
The Exceptional Contribution Award is granted for significant contribution by a member who is not a president or executive officer.

**CRITERIA FOR SELECTION**
- Significant contributions to NCSBN activities
- Demonstrated support of NCSBN’s mission

**AWARD CYCLE**
Annually as applicable

**NUMBER OF RECIPIENTS**
Unlimited

### Elaine Ellibee Award
(formerly Exceptional Leadership Award)

Elaine Ellibee (1924-2012) chaired the special task force that ultimately led to the founding of NCSBN and served as its first president from 1978-1979. As a registered nurse, Ellibee contributed greatly to nursing education and leadership at the local, state and national levels. She strongly believed in the importance of public protection, superior patient care and continuing education for nursing leaders.

**ELIGIBILITY**
Service as a member president within the past two years

**DESCRIPTION OF AWARD**
The Elaine Ellibee Award is granted to a member who has served as a president and who has made significant contributions to NCSBN.

**CRITERIA FOR SELECTION**
- Demonstrated leadership at the local level as the president
- Demonstrated leadership in making significant contributions to NCSBN

**AWARD CYCLE**
Annually as applicable

**NUMBER OF RECIPIENTS**
One
Regulatory Achievement Award

ELIGIBILITY
A member board or associate member

DESCRIPTION OF AWARD
The Regulatory Achievement Award recognizes the member board or associate member that has made an identifiable, significant contribution to the mission and vision of NCSBN in promoting public policy related to the safe and effective practice of nursing in the interest of public welfare.

CRITERIA FOR SELECTION
- Active participation in NCSBN activities
- Effective leadership in the development, implementation and maintenance of licensing and regulatory policies
- Active collaborative relationships among the member board or associate member, NCSBN, the public and other member boards or associate members
- Demonstrated advancement of the NCSBN mission

AWARD CYCLE
Annually as applicable

NUMBER OF RECIPIENTS
One

Distinguished Achievement Award

ELIGIBILITY
An individual or organization that is not a current member. No other award captures the significance of the contribution. May be given posthumously.

CRITERIA FOR SELECTION
- Accomplishment/achievement is supportive to NCSBN’s mission and vision.
- Long and lasting contribution or one major accomplishment that impacts the NCSBN mission and vision.

AWARD CYCLE
Annually as applicable

NUMBER OF RECIPIENTS
Unlimited

Executive Officer Recognition Award

ELIGIBILITY
Award given in five-year increments to individuals serving in the Executive Officer role.

DESCRIPTION OF AWARD
The Executive Officer Recognition Award was established to recognize individuals who have made contributions to nursing regulation as an Executive Officer.

AWARD CYCLE
Annually as applicable

NUMBER OF RECIPIENTS
As applicable

Please note: No nomination is necessary for the Executive Officer Recognition Award as it is presented to Executive Officers based on his or her years of service in five-year increments.
### Past NCSBN Award Recipients

#### R. LOUISE MCMANUS AWARD
- 2013 – Betsy Houchen
- 2012 – Sandra Evans
- 2011 – Kathy Malloch
- 2009 – Faith Fields
- 2008 – Shirley Brekken
- 2007 – Polly Johnson
- 2006 – Laura Poe
- 2005 – Barbara Morvant
- 2004 – Joey Ridenour
- 2003 – Sharon M. Weisenbeck
- 2002 – Katherine Thomas
- 2001 – Charalce Dickson
- 1999 – Donna Dorsey
- 1998 – Jennifer Booma
- 1997 – Elaine Ellibee
- 1996 – Marcia M. Rachel
- 1995 – Jean Caron
- 1994 – Joan Bouchard
- 1993 – Corinna F. Dorsey
- 1992 – Renatta S. Loquast
- 1990 – Marianna Bacigalupo
- 1988 – Joyce Schwalter
- 1983 – Mildred Schmidt

#### MERITORIOUS SERVICE AWARD
- 2013 – Constance Kalanek
- 2012 – Debra Scott
- 2011 – Julia George
- 2010 – Ann L. O’Sullivan
- 2009 – Sh sola Extrom
- 2008 – Sandra Evans
- 2007 – Mark Majok
- 2005 – Marcia Hobbs
- 2004 – Ruth Ann Terry
- 2001 – Shirley Brekken
- 2000 – Margaret Howard
- 1999 – Katherine Thomas
- 1998 – Helen P. Keefe
- 1997 – Gertrude Malone
- 1996 – Tom O’Brien
- 1995 – Gail E. McGuill
- 1994 – Billie Haynes
- 1993 – Charlie Dickson
- 1991 – Sharon M. Weisenbeck
- 1990 – Sister Lucie Leonard
- 1988 – Marylyn Mary Maillian
- 1987 – Eileen Dvorak

#### REGULATORY ACHIEVEMENT AWARD
- 2013 – North Dakota Board of Nursing
- 2012 – Missouri State Board of Nursing
- 2011 – Virginia Board of Nursing
- 2010 – Texas Board of Nursing
- 2009 – Ohio Board of Nursing
- 2008 – Kentucky Board of Nursing
- 2007 – Massachusetts Board of Registration in Nursing
- 2006 – Louisiana State Board of Nursing
- 2005 – Idaho Board of Nursing
- 2003 – North Carolina Board of Nursing
- 2002 – West Virginia State Board of Examiners for Licensed Practical Nurses
- 2001 – Alabama Board of Nursing

#### MEMBER BOARD AWARD
- 2000 – Arkansas Board of Nursing
- 1998 – Utah State Board of Nursing
- 1997 – Nebraska Board of Nursing
- 1994 – Alaska Board of Nursing
- 1993 – Virginia Board of Nursing
- 1991 – Wisconsin Board of Nursing

#### ELAINE ELLIBEE AWARD (FORMERLY EXCEPTIONAL LEADERSHIP AWARD)
- 2013 – Linda R. Rounds

#### EXCEPTIONAL LEADERSHIP AWARD
- 2011 – Lisa Kranke
- 2010 – Catherine Gissel
- 2007 – Judith Hiner
- 2006 – Karen Gilpin
- 2005 – Robin Vogt
- 2004 – Christine Alchmie
- 2003 – Cookie Bible
- 2002 – Richard Sheehan
- 2001 – June Ball

#### DISTINGUISHED ACHIEVEMENT AWARD
- 2013 – Lorinda Inman

#### EXCEPTIONAL CONTRIBUTION AWARD
- 2013 – Susan L. Woods
- 2012 – Julia Gould
- 2011 – Judith Personett
- 2010 – Valerie Smith
- 2009 – Nancy Murphy
- 2008 – Lisa Emrich
- 2007 – Peggy Fishburn
- 2005 – William Fred Knight
- 2004 – Janette Pucci
- 2003 – Sandra MacKenzie
- 2002 – Cora Clay
- 2001 – Julie Gould

#### NCSBN 30TH ANNIVERSARY SPECIAL AWARD
- 2008 – Joey Ridenour
- 2008 – Sharon Weisenbeck Malin
- 2007 – Mildred Schmidt

#### SILVER ACHIEVEMENT AWARD
- 2000 – Nancy Wilson
- 1998 – Joyce Schwalter

#### NCSBN SPECIAL AWARD
- 2008 – Thomas Abram
- 2004 – Robert Waters
- 2002 – Patricia Benner
Report of the Commitment to Ongoing Regulatory Excellence (CORE) Committee

Background
In 1998, the NCSBN Board of Directors (BOD) began the development of CORE, a performance measurement system for boards of nursing (BONs) that incorporated data collected from internal and external sources. The key element for this system for more than 15 years has been to define and measure performance based on outcome-oriented indicators to assist BONs in managing and improving long-term program outcomes, and provide accountability to the citizens of their state.

CORE incorporated surveys of BONs, as well as three external stakeholder groups: (1) employers; (2) nursing education programs; and (3) nurses. These groups were surveyed through the CORE process five times – in 2003, 2006, 2008, 2010 and 2012. Data from these surveys were used to operationalize measures of outputs and outcomes for each of the four pillars of nursing regulatory board programs: practice, nursing education, licensure and discipline. Individualized state reports were then prepared for each BON, intended to help it track its performance over time, as well as compare its own performance against that of other BONs of similar size and structure.

In fiscal years 2012 and 2013 (FY12 and FY13), the CORE Committee redesigned the entire process with the purpose of providing highly valued and useful performance information to BONs by producing a State Board of Nursing Logic Model as a performance framework to guide the entire process, mapping existing performance measures into the logic model in order to identify gaps, developing additional measures where needed, and incorporating the data from additional sources beyond the CORE surveys. The CORE Committee then focused intently on implementing the resulting enhanced CORE process. This entailed substantial redesigns of the four CORE surveys, fielding those surveys, accessing the requisite data from outside sources, and totally redesigning and producing individual state reports that present the comparative performance information clearly and concisely in order to make it meaningful for BONs.

Highlights of FY14 Activities

Charge #1: Increase the clarity of the current CORE survey questions.
- The committee systematically assessed the CORE measures.
- Revised the Nursys® data to include the number of nurses disciplined instead of the number of actions taken against discipline codes.
- Constructed a short questionnaire intended for executive officers (EOs) regarding the revised and revamped CORE process.

Charge #2: Conduct a focus group to search for promising practices in the area of licensure.
- The committee reviewed past CORE licensure data, including measures on cycle time for licensure, number of licensure applications received, and the number of licensure denials to identify “high performing” BONs and steadily improving BONs in the area of licensure.

Charge #3: Identify a uniform set of data measures regarding the performance of Nurse Licensure Compact (NLC) states.
- The committee is currently identifying a set of measures that are unique to the NLC.

Members
Joey Ridenour, MN, RN, FAAN
Arizona, Area I, Chair
Vicki Lynn Allen, RN, CLNC
Idaho, Area I
Jim Cleghorn
Georgia, Area III
Tamara J. Cowen, MSN, RN, NEA, BC
Texas, Area III
Barbara Damchik-Dykes, JD
Minnesota, Area II
Kim Glazier, MEd, RN
Oklahoma, Area III
Paula R. Meyer, MSN, RN
Washington, Area I
Chris Sansom, MSN, RN
Nevada, Area I
Sue A. Tedford, MNSc, RN
Arkansas, Area III
A’lise Williams, MS, RN
Maryland, Area IV
Ann L. O’Sullivan, PhD, CRNP, FAAN Pennsylvania, Area IV, Board Liaison
Theodore H. Poister, PhD, MPA
Consultant

Staff
Lindsey Erickson, MS
Manager, Special Projects, Executive Office

Meeting Dates
- Oct. 24-25, 2013
- Dec. 5-6, 2013
- April 17-18, 2014

Relationship to Strategic Plan
Strategic Initiative E
Promote evidence-based regulation.

Strategic Objective 2
Develop board of nursing performance measurement data.

179
EXECUTIVE SUMMARY
The committee started out FY14 looking at FY12 CORE reports, survey tools and definitions. Considering the whole CORE process was revamped in FY12 and FY13, the committee needed to find if there were areas/measures that were problematic for BONs. To find this information, the committee constructed a short questionnaire for EOs to complete. The survey contained questions regarding CORE, including participation, reports, surveys and the definitions. Based on the feedback from the EOs, the committee will make changes to the survey tools and reports for the next round of data collection.

The committee systematically assessed the CORE measures by using a methodology recommended by consultant Theodore H. Poister. Poister’s recommendation was to go through each measure and determine how it “stacks up” against the following performance criteria: credible to stakeholders; linked to mission and goals; balanced and comprehensive; valid and reliable; timely and actionable; resistant to goal displacement and gaming; cost sensitive; and clear regarding preferred direction of movement. If a measure does not fall into one of the above categories, the committee will discuss what the intent of the measure was and if it is accomplishing the goal of consumers receiving safe and competent care from nurses.

Based on feedback regarding the Nursys data in the CORE discipline state report, the committee needed to revise it to show the number of nurses disciplined, instead of the number of actions taken on an action code. A small working group of committee members met to discuss what the Nursys measure should be. The working group finalized on a basic, yet useful measure: number of nurses disciplined in FY12. The group met with NCSBN’s Chief Information Officer Nur Rajwany to discuss the steps on pulling the data. Rajwany instructed the working group to come up with an algorithm on how the data should be pulled to accurately measure the number of nurses disciplined. The working group met again to go through each Nursys measure and identify which codes are discipline codes, what time frame the discipline action should occur and how to pull the data to include unique nurses.

The committee reviewed past CORE data in order to identify “high performing” BONs and steadily improving BONs in the area of licensure. The reviewed data measures were associated with cycle time for licensure, the number of licensure applications received, and the number of licensure denials against the number of licensees in each BON. The committee reviewed what they wanted out of the focus group members as there is much variation between initial licenses, renewals and endorsements. Therefore, the committee felt that the following information would be useful information to gather from the focus group attendees: online applications vs. paper applications, if online applications improved the licensure process, the percentage of licenses granted and denied, and the impact of criminal background checks on licensure. The committee is in search of effective practices in each of the licensure areas: initial licensure, renewals and endorsements. Due to inclement weather, the committee postponed the focus group for a later date.

The committee is currently identifying measures that are unique to the NLC by reviewing past and current NLC surveys intended for BONs and nurses.

Future Activities
- Continue to refine CORE process, revise survey tools and develop new production scheme for CORE reports. Propose long-term plan for distribution and data collection for CORE surveys.
- Continue to research “big data” beyond Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) that provides evidence for long-term outcomes of the Nursing Regulation Logic Model.
- Develop a proposal for Centers for Medicare and Medicaid Services (CMS) to ask nursing regulation questions regarding safe practice on HCAHPS surveys.
- Identify needs and concerns of nonparticipating BONs to increase participation by 10 percent; conduct nonparticipating BON focus group.
- Distribute 2014 CORE surveys, collect and analyze data, and produce CORE report.
- Identify a uniform set of data measures regarding the performance of NLC states.

**Attachments**

None.
Report of the Discipline Effective Practices Subcommittee

Background
NCSBN’s Commitment to Ongoing Regulatory Excellence (CORE) is a comparative performance measurement and benchmarking process for boards of nursing (BONs) that incorporates surveys of BONs, as well as three external stakeholder groups: (1) employers; (2) nursing education programs; and (3) nurses. Data from these surveys are used to operationalize measures of outputs and outcomes for each of the four pillars of nursing regulatory board programs: practice, nursing education, licensure and discipline. Individualized state reports are then prepared for each BON, intended to help it track its performance over time, as well as compare its own performance against that of other BONs of similar size and structure.

In fiscal year 2013 (FY13), the CORE Committee was charged with validating promising practices in the area of discipline. Using CORE data, the committee identified consistently high-performance BONs and steadily improving BONs in the area of discipline. These BONs attended a focus group where they reviewed criteria to help identify promising practices, compare the process steps and policies related to the discipline process, and recommend policy or process change that could enhance other BON performance. The focus group attendees were invited to another meeting to elaborate on the discipline processes and identify steps or work processes that were the most likely candidates for performance improvement. With the information gathered from the group, a template including 10 effective practices was drafted. Though effective practices were identified, the CORE Committee had only started to get more detail on the identified “effective practice.” The committee realized that the work of the group was much more complex and may be beyond the scope of CORE charges. Therefore, in FY13 the CORE Committee recommended to the Board of Directors (BODs) a discipline subcommittee to take on the charge of creating an adoption plan for effective practices in the area of discipline.

The Discipline Effective Practices Subcommittee was approved by the FY13 BOD and serves as a subcommittee to the CORE Committee fulfilling the charge of creating an adoption plan for effective practices in the area of discipline. FY12 and FY13 focus group attendees were invited to be members of the subcommittee. The subcommittee continued the work completed by the FY12 and FY13 focus groups.

Highlights of FY14 Activities

Charge #1: Create an adoption plan for effective practices in the area of discipline.

- Reviewed and discussed effective practices identified by prior discipline focus groups.
- Identified three primary phases for processing and resolving complaints: triage/case assignment, investigation and resolution.
- Created draft templates, draft worksheets and draft directions for adoption/adaption plan.

EXECUTIVE SUMMARY
The subcommittee started their work by reviewing and discussing the following effective practices that were identified in prior focus groups:

1. Establish thresholds for disposition of complaints received.
2. Track all cases from complaint reviewed to resolution.
3. Apply BON-approved policies or guidelines to the disposition of complaints received.
4. Develop templates to facilitate processing of complaints, investigation and case resolution.
5. Develop goals for investigative cases to be completed monthly, quarterly or annually.
6. Regularly schedule meetings with investigators and attorneys to discuss:
   a. Merits of the case and case facilitation; and
   b. Productivity and performance measures.
7. Establish guidelines for BON-ordered evaluations to determine fitness for duty and/or practice competency.
8. Delegate authority through policies, guidelines or matrixes to:
   a. Executive director/administrator and/or subcommittees of the BON; and
   b. Investigator and/or key staff.

The subcommittee identified three primary phases for processing and resolving complaints: triage/case assignment, investigation and resolution. The subcommittee members shared processes and policies that enabled their BON to effectively go through the discipline process:

**Triage**
- Standardized complaint templates to promote the receipt of critical information during the submission of a complaint.
- Approved guidelines and policies for not investigating complaints below established threshold.
- Intake coordinator/triage staff understood the law (e.g., nurse practice act) and what constitutes a probable violation.
- Developed priority/risk assessment with established timelines for processing cases based upon priority/risk assessment.
- Based assignment of cases upon the expertise of the investigator.
- Initiated subpoenas relevant to the complaint at time of complaint assignment.
- Identified performance measures integrated into strategic plan and performance evaluations.
- Reviewed licensure/discipline history via Nursys.
- Do not apply Just Culture at point of triage. May be applied later after more information is received and evaluated.
- Approved guidelines and policies for expedited closure of minor issues.
- Expedited process for complaints where the respondent is admitting the allegations.

**Investigation**
- Required written notification to the respondent informing of the complaint investigation with a summary of the allegations. It's a requirement that the respondent provide a written response within a defined time frame.
- Required expert knowledge and experience of investigator. Low turnover of investigative staff enhances timely case completions.
- Assigned drug diversion, criminal, reinstatement cases to select investigator or other staff.
- Used Controlled Substances Prescription Monitoring Program (CSPMP) for cases involving diversion, prescription fraud, inappropriate prescribing/treating with controlled substances.
- Developed comprehensive investigative policies – increases staff autonomy and consistency.
- Created investigative templates (i.e., interview, investigative report, etc.).
- Agency hired attorney(s) that reported directly to them.
Incorporated outcomes throughout the process.

Delegated authority to investigator to modify the risk/priority based upon additional information received during investigation.

Delegated authority to the staff to settle cases through consent agreements (agreed orders) or alternative to discipline programs.

Held regular case management meetings with investigator.

Investigative staff performance measured in part to case completion statistics and cycle times.

**Resolution**

- Used and adhered to discipline matrix.
- Delegated authority to staff to make and accept settlement offers.
- Used standardized templates for consent agreements, letters of warning, reprimands, etc.
- Ability to add “do not admit” clause into California (e.g., “I neither admit nor deny the violations but I admit to the findings...”). Allowing the respondent limited input into the findings of fact increases case resolution before a hearing occurs.
- Hosted ongoing board member education and training.
- Delegated authority to a subcommittee of the BON, not the full BON, to review and resolve cases.
- Subcommittee of the BON met regularly (every two weeks), reviewed the investigative report and made recommendations. Mailed ballots to full BON for approval.
- Held weekly teleconferences with committee chair.
- Used emergency suspension process for high-risk cases.
- Used automatic suspension clauses in California for noncompliance.
- Required statutory authority to automatically suspend a license if mental health or substance abuse commitment.
- Used interim cease practice orders.
- Scheduled regular settlement conferences for contested cases with delegated authority to staff to offer and accept negotiated settlements.
- Tracked outcome measures.

The subcommittee divided into three working groups, triage, investigation and resolution, based on an individual’s area of expertise. The groups met and discussed their process and policies, and identified and shared initial steps for an adoption/adaption plan within each of the three areas. The three groups each reviewed and discussed potential model policies, and created templates and worksheets to help BONs. The three groups will meet again before the next subcommittee meeting to create a final adoption/adaption plan to present to the whole subcommittee.

**Future Activities**

- Roll out of the adoption/adaption plan.
- Promote the adoption/adaption plan.

**Attachments**

None.
Report of the Executive Officer (EO) Succession Resource Committee

Background
In May 2012, NCSBN received a request from a former EO to consider developing an EO Succession Planning Toolkit for member boards. Between 2010 and 2013, approximately one-third of all boards of nursing (BONs) have experienced turnover in the EO position. Further, 78 percent of all EOs reported that they do not have a succession plan in place. In response, the NCSBN Board of Directors established the EO Succession Resource Committee to create a toolkit to assist member boards in this process. The committee started with the assumption that a toolkit must be:

- Simple to use for an EO preparing for the future or for a board president or staff member thrust in the unanticipated position of finding a new EO;
- Flexible – use one or more tools; and
- Adaptable – for use by independent/umbrella/non-U.S. jurisdictions.

The toolkit is divided into two parts:

- Short term – to ensure continuous coverage of duties critical to the operation of the BON; and
- Long term – to ensure preparation for successful transition for a new EO.

The toolkit is comprised of the following:

- Short-term Succession Planning Narrative and Tools:
  - Tool #1 Designated Backup
  - Tool #2 Job Description
  - Tool #3 Responsibilities of Interim EO
  - Tool #4 Operational Information
  - Tool #5 Communication Plan

- Long-term Succession Planning Narrative and Tools:
  - Tool #6 Strategic Plan
  - Tool #7 Board/Agency Self-assessment
  - Tool #8 Staff Assessment
  - Tool #9 Annual Calendar and Key Events
  - Tool #10 Job Posting
  - Tool #11 Assessment of EO Competencies
  - Tool #12 Interview Questions for Assessment of EO Competencies
  - Tool #13 Reference Questions
  - Tool #14 Orientation Plan
  - Tool #15 New EO Development Mentor Program

Meeting Dates
- Aug. 27-28, 2013
- Sept. 23-24, 2013
- Nov. 4, 2013 (Conference Call)
- Dec. 3-4, 2013
- Jan. 22-23, 2014

Relationship to Strategic Plan

Strategic Initiative C
Expand the active engagement and leadership potential of all members.

Strategic Objective C5
Address member boards needs specific to the executive officer role.
Highlights of FY14 Activities

- Sought feedback from EO Leadership Council at the 2013 Annual Meeting EO session.
- Reviewed all documents that had been compiled to date and identified them to be included in the toolkit or archived.
- Developed short-term and long-term succession plan/diagram/tools and narrative.
- Developed goals for short-term and long-term succession plan.
- Met with the NCSBN Interactive Services department on two occasions to plan electronic development of the toolkit.
- Reviewed mock-up of short-term and long-term succession plan from Interactive Services.
- Finalized EO competencies.
- Reviewed the book Lost Knowledge to be incorporated into the toolkit.
- Updated EO tenure document.
- Reviewed How to Build the Leadership-Powered Company.
- Clarified responsibility of the interim EO.
- Developed timeline for long-term plan.
- Had a group of eight EOs beta test and provide feedback on the designated backup document and Short-term Succession Plan Diagram.
- Reviewed orientation article, “Getting the Right People.”
- Reviewed strategic plans from two BONs.
- Obtained EO job postings for reference and review.
- Revised the EO succession plan introduction.

Future Activities

- Staff to monitor the online resource for feedback throughout the first year.
- Survey EOs and board presidents after one year.

Attachments

A. Executive Officer (EO) Succession Planning Toolkit
Executive Officer (EO) Succession Planning Toolkit

In May 2012, NCSBN received a request from a former EO to consider developing an EO Succession Planning Toolkit for member boards. Between 2009 and 2014, approximately one-half of all state boards of nursing (BONs) have experienced turnover in the EO position. It is anticipated that in the next few years, a number of EOs will plan to retire. In January 2013, 78 percent of all EOs reported that they do not have a succession plan in place. In response, the NCSBN Board of Directors (BOD) established the EO Succession Resource Committee to create a toolkit to assist member boards in this process.

The intention of the toolkit is to provide a starting point for conversation and assessment between the member board and its EO. EOs, board presidents and members all have different comfort levels and different relationships depending on the individuals involved. EOs leave for a variety of reasons – planned retirement, career change and even involuntary separation. Member boards obviously have different structures that may provide limitations in notice; differing state hiring processes; varying restrictions regarding input into job descriptions, performance evaluations and feedback; and constraints on who participates in the selection process. Each of these factors, among others unique to a jurisdiction, should be considered when drafting the short-term and long-term succession plans.

The toolkit is comprised of the following:

- **Short-term Succession Planning Narrative and Tools:**
  - Tool #1 Designated Backup
  - Tool #2 Job Description
  - Tool #3 Responsibilities of Interim EO
  - Tool #4 Operational Information
  - Tool #5 Communication Plan

- **Long-term Succession Planning Narrative and Tools:**
  - Tool #6 Strategic Plan
  - Tool #7 Board/Agency Self-assessment
  - Tool #8 Staff Assessment
  - Tool #9 Annual Calendar and Key Events
  - Tool #10 Job Posting
  - Tool #11 Assessment of EO Competencies
  - Tool #12 Interview Questions for Assessment of EO Competencies
  - Tool #13 Reference Questions
  - Tool #14 Orientation Plan
  - Tool #15 New EO Development Mentor Program

Most importantly the EO Succession Plan and this toolkit are part of the overall strategic plan of each member board. This information should be emphasized during orientation for new board members, and should be readily accessible to all board members and staff. Succession planning will assist in the continuity of the operations of the BON/agency. NCSBN is committed to assisting its member boards during both this planning phase and in critical times of transition. This toolkit will be re-evaluated depending upon member feedback. The best way to solicit meaningful feedback is through use. The committee hopes that BONs/agencies find the toolkit useful. Feedback is both appreciated and welcomed.
SHORT-TERM SUCCESSION PLANNING

The purpose of the short-term succession plan is to ensure the continuous coverage of duties critical to the ongoing successful operations of the BON/agency. Short-term succession planning may be utilized by a BON/agency in the event of an illness, unforeseen accident, resignation without notice or termination of an EO. The short-term plan could also be utilized for either a temporary unplanned short-term absence of an EO or a situation where an interim EO is appointed until a permanent replacement is in place.

Ideally, all of the short-term tools should be completed as part of the BON’s/agency’s overall strategic planning process and ready for implementation at any time. Completing these tools prior to the vacancy will alleviate a great deal of stress at an already stressful time. The first steps of the short-term plan should occur within 24 business hours of the incident precipitating use of the short-term plan.

The goals of the short-term plan include:

1. Appoint a designated backup to begin the process of naming an interim EO;
2. Notify the appropriate parties of the need for change, and organize and prepare for appointing an interim EO;
3. Stabilize the internal environment;
4. Select an interim EO and determine their role; and
5. Develop a communication plan to utilize with both internal and external stakeholders.

The steps of the short-term plan will assist with the implementation of the goals and the short-term plan and are divided into categories for various board members and staff:

A. Board President, Agency Head or Staff Responsibilities

Prior to an EO vacancy occurring, the BON/agency head should establish a designated backup. States/jurisdictions should look at their statutes, rules and/or regulations that may establish a designated backup by law. For those states that do not have their backup designated by law, Tool #1, Designated Backup, can be utilized by the BON/agency to establish the appropriate personnel. A designated backup will likely be an internal staff member who will ensure that services are maintained and uninterrupted.

In an umbrella agency, the agency head would likely be the first to know of an EO vacancy. However, in an independent BON, the designated backup may notify the board president and other board members of the EO vacancy. The designated backup, with the assistance of the board president and/or agency head, would organize and prepare for a board meeting (or other process) to appoint an interim EO. This requires an understanding of the BON or agency structure.

In some states/jurisdictions, a board meeting must be held to appoint an interim EO. In that case, a representative will need to notify the board members of the need for an emergency meeting, develop an agenda for the emergency meeting and maintain compliance with any applicable open door/open meeting law provisions. In some states, the agency head and/or state personnel will appoint an interim EO. Always consult your state/jurisdiction statutes, rules, regulations and policies to determine the applicable law in your state/jurisdiction.

It is important to communicate with the internal staff the appointed designated backup until the selection of an interim EO. Communication will need to be dealt with in a factual and sensitive manner, such as in the event of death or termination. The agency head or designated backup should assure appropriate staff support, as needed. All internal staff should direct external queries to your public information officer, media relations specialist, agency head or designated backup at this time to maintain consistency in message and voice.
B. Board or Agency Responsibilities

It should be recognized that the interim EO may not possess all of the qualifications or skills required for a permanent EO. The BON/agency needs to scan the environment and determine which executive skills are important at this point in time. Some states/jurisdictions require a licensed registered nurse to serve as an EO; others do not hold this requirement. Again, it is important to review your appropriate statutes, rules, regulations and policies for this information. The board president and/or agency head will also need to determine who has the responsibility of day-to-day oversight in monitoring the work of the interim EO and establish a clear line of communication between the interim EO and board president/agency head that encourages a collaborative environment. Tool #2, Job Description, will assist in updating the role and responsibilities of the EO. This exercise will assist in re-evaluating the qualifications for a new full-time EO in the long term and fleshing out qualities needed in the short term.

Appointment of the interim EO may be done by the agency head or by a BON/agency vote in a meeting.

Some duties of the interim EO may differ from those of a full-time EO, including management of staff, hiring and firing decisions, public policy decisions, entering into contracts, etc. It is imperative that all key personnel, including the interim EO, understand the limitations of the position. Tool #3, Responsibilities of the Interim EO, will assist the BON/agency head in laying out the key functions for the interim EO.

In some states, the EO maintains the fiscal authority for the BON/agency. The interim EO must understand whether they have independent fiscal authority or must obtain authorization or co-signatures to complete transactions. In some states/jurisdictions, an agency comptroller or accountant has fiscal authority on behalf of the entire agency. This individual must be identified to the interim EO. Tool #4, Operational Information, identifies sources of BON/agency records, financial information and critical internal functions of the BON/agency.

C. Interim EO Responsibilities

A communications plan is vital for a smooth transition. The board president and/or agency head should meet with the interim EO as soon as possible to develop and implement an internal and external communication plan to announce the BON/agency temporary leadership structure, including the kind of information that will be shared and with whom. Tool #5, the Communication Plan, can serve as a framework for contacts, which individual will be contacting those identified in the plan and deadlines for the contact to occur.

The interim EO should conduct a staff meeting as soon as possible to meet staff, allow staff to introduce themselves and discuss the BON's/agency's temporary leadership structure. It is also important to quickly establish a schedule of daily or weekly meetings with the management team to minimize disruptions in quality service, continue to provide public protection and maintain business continuity. Tool #4, Operational Information, should be utilized to identify all current board members’ and BON/agency staff’s appropriate contact information.

The interim EO needs to be the one to reach out to external stakeholders, such as the state nurses association, the Center for Nursing, impaired programs (if independent) and the local organization of nurse executives, to introduce themselves and begin developing a relationship.

Once these steps have been successfully completed, the long-term succession plan steps should be initiated.
SHORT-TERM SUCCESSION

1. Appoint a designated backup to begin the process of naming an interim EO.
2. Notify appropriate parties of the need for change and organize and prepare for appointing an interim EO.
3. Stabilize the internal environment.
4. Select an interim EO and determine roles.
5. Develop communication plan and utilize with internal and external stakeholders.

**Board President, Agency Head or Staff Responsibilities**

- Appoint designated backup
  - Tool 1 Designated Backup
- Notify president or agency head of change and collaborate on next steps
- Organize and prepare for board meeting (or other process) to appoint interim EO
- Stabilize internal environment and review/assign job duties for short term redistribution

**Board or Agency Responsibilities**

- Review job description to determine minimum qualifications for interim EO
  - Tool 2 Job Description
- Appoint interim EO

**Interim EO Responsibilities**

- Develop and implement communication plan
  - Tool 5 Communication Plan
- Internal stakeholders
- Board members and board staff
- External stakeholders
- Tool 4 Operational Information
- Tool 4 Operational Information
- Clarify responsibilities of interim EO
  - Tool 3 Responsibilities of Interim EO
- Appoint or identify fiscal authority
  - Tool 4 Operational Information
Designated Backup – Tool #1

Designated Backup

The designated backup will be approved by the BON's/agency's appropriate authority and reviewed as needed, or at least annually, to make any needed changes (e.g., full BON, agency head and/or board president, etc.).

Signatories

The appropriate authority, the EO and the designated backup, if appropriate, will sign this plan.

Approved by:

_____________________ Board of Nursing on_____________________.

Jurisdiction               Date

Acknowledged by:

I acknowledge that I have reviewed this plan.

_________________________________________________________

Appropriate authority               Date

_________________________________________________________

Board President / Chair               Date

_________________________________________________________

Executive Officer               Date

_________________________________________________________

Designated Backup               Date
Job Description – Tool #2

Matching organizational needs with leadership competencies desired in the next EO is one of
the most important features of the executive search phase. This planning process provides a
unique opportunity to update the executive requirements and responsibilities. Update the job
description to ensure EO responsibilities and hiring requirements promote the organization’s
sustainability.

Attach a current EO position description. This position should be updated as needed, preferably
during the organization’s strategic planning sessions and should consider the following:

1. What are the top three to five objectives and/or challenges outlined in the strategic plan or
elsewhere that fall under the EO’s core responsibilities?

   A. ________________________________________________________________________________

   B. ________________________________________________________________________________

   C. ________________________________________________________________________________

   D. ________________________________________________________________________________

   E. ________________________________________________________________________________

2. Based on the objectives and/or challenges listed above, is there an impact on the EO’s job
description?

   A. Key competencies (e.g., skills—core leadership and management, strategic thinking, board
      oversight, staff management, agility skills, etc.)

      1. ________________________________________________________________________________

      2. ________________________________________________________________________________

      3. ________________________________________________________________________________

      4. ________________________________________________________________________________
B. Expertise and experience (e.g., regulatory, financial, communication, legislative, education, etc.)

1. ______________________________________________________________________________

2. ______________________________________________________________________________

3. ______________________________________________________________________________

4. ______________________________________________________________________________

C. Required leadership style (e.g., high control or participatory, etc.)

1. ______________________________________________________________________________

2. ______________________________________________________________________________

3. ______________________________________________________________________________

4. ______________________________________________________________________________

D. Traits not desired (e.g., poor relationship building, poor board management, etc.)

1. ______________________________________________________________________________

2. ______________________________________________________________________________

3. ______________________________________________________________________________

4. ______________________________________________________________________________
Responsibilities of Interim EO – Tool #3

Outline the key functions for the position.

1. Define interim EO key responsibilities. The interim EO is appointed by the BON/agency to fulfill executive duties until the position is filled or until the EO returns, if the vacancy is temporary.
   
   a. Outline the key interim responsibilities below. Examples of key activities are outlined. You can edit, update or add responsibilities as necessary.
      
      i. Serve with integrity and strength as the organization’s primary leader, representative and spokesperson to the greater community.
      
      ii. Support the BON/agency, including preparing executive reports and attending board and committee meetings.
      
      iii. Lead the management team.
      
      iv. Participate in the recruitment and selection for directly supervised staff.
      
      v. Manage initiatives related to organizational capacity, sustainability and strategic plan.
         
         □ Maintain accountability for current year operating budget and financial performance.
         
         □ Establish, maintain and cultivate relationships with stakeholders.
      
      vi. _________________________________________________________________________
      
      vii. _________________________________________________________________________
      
      viii. _________________________________________________________________________

   b. Outline authority and restrictions of appointed interim EO. The person appointed as interim EO shall have the full authority for decision making and independent action outlined above, except for the following which must be approved by the BON/agency:
      
      i. All financial decisions over (insert dollar amount here).
      
      ii. Issues that may negatively impact the BON.
      
      iii. _________________________________________________________________________
      
      iv. _________________________________________________________________________

   c. Determine appropriate compensation for the interim EO.
Operational Information – Tool #4

Smaller organizations (i.e., fewer than five staff members) may find this section especially helpful. In large organizations there are, typically, other staff (e.g., chief financial officer, Human Resources director, etc.) who are the custodians of the organization’s critical documents. In smaller organizations this knowledge often resides only with the EO. If the EO leaves, some of this critical information could get lost or temporarily misplaced. Consider whether capturing this information for your organization would further its sustainability in the event of unexpected EO transition.

Last updated: _____________________________________________________________

Board Records

Records may be retained in multiple sites other than the physical location of your office. Locations may include state archives, designated options, “in the cloud” or off-site storage. You may need to consult with your organization or state Information Technology (IT) staff and public records personnel to obtain some of this information.

<table>
<thead>
<tr>
<th>Statutes/Rules/ Regulations/ Guidelines</th>
<th>On-site Location</th>
<th>Off-site Location</th>
<th>Online URL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Board Minutes</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Board Seal</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Policies and Procedures</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Personnel Files</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Emergency Management/ Disaster Plan</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Financial Statements</th>
<th>On-site Location</th>
<th>Off-site Location</th>
<th>Online URL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Financial Exemption Certificate</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Budget</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Authorized Signatories

Authorized to make transfers, wire transfers: _____________________________________________

Alternative(s): ________________________________________________________________________

Authorized check signers? _____________________________________________________________

Is there an office safe? □ Yes  □ No

Who has the combination/keys? ______________________________________________________
Legal Counsel
Name: ____________________________________________

Company: ____________________________________________

Phone Number: _______________________________________

Email: ____________________________________________

Technology: Computer Systems
Name: ____________________________________________

Company: ____________________________________________

Phone Number: _______________________________________

Email: ____________________________________________

URL: ____________________________________________

Human Resources Information

<table>
<thead>
<tr>
<th></th>
<th>On-site Location</th>
<th>Off-site Location</th>
<th>Online URL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employee Records/ Personnel Files</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Payroll
Company Name: ____________________________________________

Account Number: ____________________________________________

Payroll Rep: ____________________________________________

Phone Number: ____________________________________________

Email: ____________________________________________

Long-term Facilities Information
Office Lease or Building Deed Location: ____________________________________________
### Building Management

Company Name: ________________________________________________________________

Contact Name: ________________________________________________________________

Phone Number: ________________________________________________________________

Email: ________________________________________________________________

### Office Security System

Company Name: ________________________________________________________________

Account Number: ________________________________________________________________

Representative Phone Number/Email: _____________________________________________

Broker Phone Number/Email: ______________________________________________________

### Office Security

*Example: guard, parking security*

Company Name: ________________________________________________________________

Contact Name: ________________________________________________________________

Phone Number: ________________________________________________________________

Email: ________________________________________________________________

### Other

Company Name: ________________________________________________________________

Contact Name: ________________________________________________________________

Phone Number: ________________________________________________________________

Email: ________________________________________________________________
## Insurance Information

### Directors and Officers

Company Name and Policy Number: ______________________________

Contact Name: ________________________________________________

Phone Number: ________________________________________________

Email: _______________________________________________________

### General Liability

Company Name and Policy Number: ______________________________

Contact Name: ________________________________________________

Phone Number: ________________________________________________

Email: _______________________________________________________

### Other

(example: alternative to discipline program)

Company Name and Policy Number: ______________________________

Contact Name: ________________________________________________

Phone Number: ________________________________________________

Email: _______________________________________________________

## Internal Stakeholders

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
<th>Contact information</th>
</tr>
</thead>
<tbody>
<tr>
<td>First name, last name</td>
<td>e.g., public information officer, Human Resources staff, IT staff, FMLA contact, legislative liaison</td>
<td>Email address, street address, phone number</td>
</tr>
</tbody>
</table>
### External Stakeholders

What are the critical relationships maintained by the EO? How can you spread out the accountability for maintaining each of those relationships? At a minimum, identify those critical contacts here so that they can be followed up with in case the plan is implemented.

<table>
<thead>
<tr>
<th>External Relationship that Must be Maintained</th>
<th>Who is Accountable for Maintaining Relationships</th>
<th>Contact Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>e.g., state nursing associations, key governor’s office contacts, key legislators, state center for nursing</td>
<td>e.g., current/interim EO, assistant EO, director of the agency, media or public information officer, board president</td>
<td>e.g., street address, email address, telephone number</td>
</tr>
</tbody>
</table>
Communication Plan – Tool #5

Communication is a key function of a healthy organization and is integral to the success of a transition. Assign who will contact them, how the contact will be made and how soon after the plan is implemented they will be contacted.

Example: governor, other state agencies and stakeholders, etc.

<table>
<thead>
<tr>
<th>Who is Being Contacted</th>
<th>Who is Contacting Them</th>
<th>How Will They be Contacted</th>
<th>Target Date for Contact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name, Title</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
LONG-TERM SUCCESSION PLANNING

The purpose of the long-term succession plan is to ensure preparation for the transition by developing a timeline and completing assessment tools; search for and select the EO; and successfully orient and mentor the EO. The long-term plan should be integrated into the BON’s/agency’s strategic planning process to assist in a successful process.

The goals of the long-term plan include:

1. Prepare for transition by completing the assessment tools;
2. Search for and select EO; and
3. Orient and mentor EO.

The following steps will assist with the implementation of the long-term plan and are divided into action steps rather than specific assignments. The long-term plan and its steps will likely involve discussion and decision making among more individuals than the short-term plan. It is crucial that the BON/agency and staff members be involved in this process to provide input for a successful transition. There are many pitfalls that the BON/agency could fall into. The link provided in the Executive Transition Management series provides a good overview of the common pitfalls involved in any high-level candidate search.

The strategic plan and the BON's/agency's and staff's self-assessments will help set the direction for the BON/agency and help determine the competencies needed in the new EO.

A. Step 1: Prepare

Ideally, the BON/agency has a strategic plan in place and conducts self-assessments before the EO position becomes vacant. Tool #6, Strategic Plan, contains examples from both independent boards and umbrella agencies. The strategic plan should be a living document that is reviewed on a routine basis. This document serves as the blueprint for the operation of the organization. The strategic plan should be introduced to board members as part of their orientation process. A good strategic plan will assist a new EO in understanding their role and the BON's/agency's role. One of the BON's/agency's fundamental roles is setting direction for the BON/agency. The BON/agency, working closely with the EO, should periodically review the BON's/agency's mission, values and vision; and understand its stakeholders and the internal and external operating environment.

Tool #7, Board Self-assessment, will assist the BON/agency in developing public policy and advocating on behalf of the BON/agency. The tool will also assist in identifying strengths and weaknesses in BON/agency development and effective use of meeting time. Some BONs/agencies have fiscal oversight as well. This tool also measures the BON's knowledge about the resources and services available to carry out its mission. A very important aspect of this tool is to quantify the relationship of the current BON with the current EO. This may identify areas of concern in the rapport between the BON and the EO, and measure the mutual trust and respect between them. The BON must have a clear understanding of its role and ensure that it is operating within the law.

Tool #8, Staff Assessment, allows BON/agency staff to give their input regarding the current organizational structure and the qualities they believe will lead to a successful EO transition. We suggest that the staff assessment be given anonymously to obtain the most honest and accurate evaluation possible. It is critical to include BON/agency staff as part of the assessment process as the BON/agency will need staff buy-in to position the new EO for success. A member of the BON's/agency's Succession Committee or a consultant, if utilized, should tabulate the results and identify any major staff themes. This information should then be presented to staff for discussion and identification of the skills the staff believes are required in a new EO.

Tool #9, Annual Calendar and Key Events, should be prepared at the beginning of each year to ascertain the functions important to the BON/agency. This should include the following: board meetings, committee meetings, legislative session, key NCSBN meetings, renewal periods, board anniversary and the strategic planning cycle.
Step 2: Search and Select

Selecting the right candidate may take time; however, the time is well spent in the long run to make certain that the candidate is the right fit for the BON/agency. It is vital that the BON/agency’s human resources and hiring process are reviewed as all states will have different requirements for this step.

A search committee may be appointed or convened to facilitate the transition and candidate search. The role and expectations of the search committee should be clearly defined. The BON/agency may choose to engage an executive search consultant to recruit and screen candidates. The BON/agency should work through the process that will be used for the search and selection in conjunction with their appropriate state personnel agency or other human resources personnel.

The BON/agency needs to understand the dynamics involved with any internal candidates. Internal candidates should be treated in a direct and honest manner to avoid any animosity if the internal candidate is not ultimately selected as the EO. A board member may apply for the EO vacancy. The BON/agency should understand the need for that individual to recuse themselves from any operational knowledge of the process and/or decision making while they are an active candidate to avoid any potential conflict of interest. Both board members and staff members who are active candidates should not be provided with information about the transition process that is not provided to other candidates. If an internal candidate is no longer being considered, it is appropriate to notify the internal candidate of this fact.

It is vital that the search committee be transparent about the BON's/agency's strengths, weaknesses and financial condition before the EO is appointed. The quality of information and the manner in which it is shared will be indicators to candidates about the true picture of the BON/agency.

Tool #10, Job Posting, includes two state's examples of job postings for the EO position. The job posting should be reviewed at the time of the EO vacancy to make sure that it accurately reflects the current job duties. Logistics of the job posting will vary widely between states/jurisdictions. NCSBN also posts job vacancies on its website free of charge for states to obtain a broad candidate pool. Again, states/jurisdictions should check with their human resources and/or state personnel staff for policies specific to their jurisdiction.

Assessment of EO competencies is critical when reviewing applications and in the selection of the EO to lead your BON/agency. By reviewing the strategic plan and the results of the BON/agency self-assessment and the staff assessment, you will able to identify those competencies in the list below that are critical to the BON/agency at this time. Tool #11, Assessment of EO Competencies, is the result of an analysis of the EO job descriptions and is designed to be used in conjunction with review of candidate applications to determine whether candidates meet the qualifications outlined for the role. After the review, top candidates should be interviewed in person by the BON's/agency's assigned committee or personnel. The tool may be utilized during the face-to-face interview to evaluate consistency between the application review and the in-person interview.

The competencies selected can be used in conjunction with a review of resumes and later for in-person interviews. The competencies listed in Tool #11 are cross-referenced with the interview questions found in Tool #12. A suggested interview question for each competency is identified in the right-hand column of Tool 11 and can be found in Tool #12.

Tool #12, Interview Questions for Assessment of EO Competencies, provides questions cross-referenced with the EO competencies. Following the in-person interviews, top candidates should be identified. Your state/jurisdiction may also have requirements for criminal background checks, credit checks, etc. Please check with the appropriate staff to ascertain these requirements as they will vary by jurisdiction. Reference checks should be completed on top candidates.

Tool #13, Reference Questions, may be utilized for the candidate’s current supervisor and anyone identified by the candidate as a reference. Reference checks may not field any more information other than dates of employment, but they are important in understanding the work history and
overall skill level of the candidate. These questions are provided as examples and can be used as open ended or asked on a scale. (Tools #11 – #13)

After the interview has been conducted, the BON/agency should offer the position to the top candidate. Salary and start date should be negotiated at this time. Some BONs/agencies may require a formal vote to make a job offer, while agency-driven actions may call for a member of the state personnel department to make the job offer. Salary approvals and timing vary widely between states with some states requiring approval from their governor’s office and/or state personnel/strategic hiring. The BON/agency needs to be knowledgeable about their state-specific requirements.

**Step 3: Orient and Mentor**

Proper orientation serves a variety of purposes. Orientation should enable the new EO to:

- Understand the BON's/agency's mission;
- Obtain a working knowledge of the statutes, rules, policies and procedures of the BON/agency; and
- Begin to build relationships with board members, staff and stakeholders.

The new EO should meet with the board president and/or agency head as soon as possible. This will allow the EO and the board president and/or agency head to discuss upfront the BON's/agency's goals and priorities.

Tool #14, Orientation Plan, provides a checklist of items to be considered before the start date and during the orientation process.

The EO should develop, in consultation with the board president and/or agency head, the priorities for the first six months of work. These priorities should be in writing and available to all board members and/or the agency head. At six months, the BON/agency head should execute a performance evaluation based on the priorities and the progress made to date. The EO should encourage the BON/agency to provide continuous feedback both in the first six months and thereafter.

NCSBN provides an EO mentorship program. A mentor is an experienced EO from another state who is willing to volunteer to assist during the transition. The director of Member Relations at NCSBN should be contacted to begin the process of orientation to NCSBN, which includes:

- An email to all of its members notifying them of the new EO’s name and contact information;
- New EO orientation provided once a year;
- An introduction to NCSBN and its member services;
- Availability of a series of online webinars beginning with NCSBN 101; and
- Obtaining member login information.

Tool #15, New EO Development Mentor Program, is included for reference for mentoring.
LONG-TERM SUCCESSION PLANNING

Goals:
1. Prepare for transition by completing assessment tools.
2. Search for and select EO.
3. Orient and mentor EO.

Step 1: Prepare
- Periodically review and update the BON’s/agency’s strategic plan
  
  Tool 6 Strategic Plan

Step 2: Search and Select
- Review job posting and state-specific policies
  
  Tool 10 Job Posting

- Conduct Interview
  
  Tool 11 Assessment of EO Competencies
  Tool 12 Interview Questions for Assessment of EO Competencies
  Tool 13 Reference Questions

Step 3: Orient and Mentor
- Ensure orientation plan is in place
  
  Tool 14 Orientation Plan

- Establish clear measures to evaluate the EO’s progress

- Contact NCSBN to obtain an EO mentor and attend EO orientation
  
  Tool 15 New Executive Officer Development Mentor Program

Select EO candidate

BON/agency conducts and reviews self-assessment
  
  Tool 7 Board Self-Assessment

Staff conducts self-assessment
  
  Tool 8 Staff Assessment

Identification of key events and annual calendar
  
  Tool 9 Annual Calendar and Key Events

Tool 14 Orientation Plan

Tool 15 New Executive Officer Development Mentor Program

Tool 6 Strategic Plan

Tool 10 Job Posting

Tool 11 Assessment of EO Competencies

Tool 12 Interview Questions for Assessment of EO Competencies

Tool 13 Reference Questions

Tool 14 Orientation Plan

Tool 15 New Executive Officer Development Mentor Program
**STRATEGIC PLAN – TOOL #6**

*Sample #1 (Umbrella Board)*

**Example Board of Nursing Strategic Plan 2013-2016**

Department of Health Mission: To protect, promote and improve the health and prosperity of people in ------.

BON Mission: To protect, promote and improve the health and prosperity of the people in ------ by ensuring the safety of nursing practice and integrity of nursing regulation.

BON Vision: proactive model of unsurpassed regulatory excellence

<p>| STRATEGIC INITIATIVE #1. The board of nursing promotes evidence-based regulation |
|---|---|---|---|
| <strong>Risk Assessment:</strong> | <strong>Outcome</strong> | <strong>Objectives</strong> | <strong>Tactics</strong> | <strong>Progress</strong> |
| | | | | |
| | A. Board decisions based on best practices. | 1. Explore a performance measurement system to promote regulatory excellence. | 1. Vice-chairman and executive director to attend NCSBN Midyear Meeting program on performance measurement. | |
| | | 2. Use models and resources for evidence-based regulation. | 2A. Review PAP program based on NCSBN ATD guidelines. | |
| | | 3. Identify, communicate, and promote collaboration on regulatory issues related to abuse of prescription drugs, cosmetic surgery, pain management, other. | 2B. Determine size and composition of the board and communicate to legislators and associations. Seek sponsor. | |
| | | 4. Identify licensure, discipline, practice and education trends. | 3A. Chairman serves on CSMD Committee and ------ served on BME Telemedicine Committee. | |
| | | | 3B. Provide slides on APN certification and prescribing. | |
| | | | 4. Publish licensing, discipline, practice and education trends annually. | |</p>
<table>
<thead>
<tr>
<th>Outcome</th>
<th>Objectives</th>
<th>Tactics</th>
<th>Progress</th>
</tr>
</thead>
<tbody>
<tr>
<td>5.</td>
<td>Identify information and data on continued competence.</td>
<td>5A. Publish continued competence audit reports quarterly.</td>
<td></td>
</tr>
<tr>
<td>5B.</td>
<td>Require continuing education in prescribing controlled substances.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6.</td>
<td>Reduce abuse of controlled substances.</td>
<td>6A. Assess the curriculum of schools of nursing for number of hours re abuse of controlled substances.</td>
<td></td>
</tr>
<tr>
<td>6B.</td>
<td>Collaborate with BME/BOP/DOH and other stakeholders to educate the public and curb controlled substance abuse.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**STRATEGIC INITIATIVE #2. Board of nursing advances the engagement and leadership potential of all members through education, information and networking**

**Risk Assessment:**

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Objectives</th>
<th>Tactics</th>
<th>Progress</th>
</tr>
</thead>
<tbody>
<tr>
<td>A.</td>
<td>Board members participate in activities of the board and demonstrate knowledge and application of statutes, rules and policies.</td>
<td>1. Increase knowledge of regulation.</td>
<td>1A. Hold new board member orientation prior to member’s first board meeting; provide continuing education.</td>
</tr>
<tr>
<td>1B.</td>
<td>All board members and board support staff complete PAP courses, Basics of Addiction and Prescribing Controlled Substances.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1C.</td>
<td>All board members participate in policy development.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Outcome | Objectives | Tactics | Progress
--- | --- | --- | ---
2. | Members are engaged and connected to the board.  
3. | Provide leadership opportunities. | 2. Develop and conduct board member satisfaction survey.  
3. | Provide opportunities for board members to chair committees and panels. |  |

**STRATEGIC INITIATIVE #3. Board of nursing ensures the competence of licensees.**

**Risk Assessment:**

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Objectives</th>
<th>Tactics</th>
<th>Progress</th>
</tr>
</thead>
</table>
A. Licensees demonstrate competence in nursing practice. | 1. Contract with NCSBN to provide NCLEX®.  
2. Contract with testing service to provide medication aide examination.  
3. Recruit volunteers to participate in exam service activities.  
3. Call for recruits via email and announcements at stakeholder meetings upon request of test service.  
4A. Publish links to continuing education opportunities through PAP and NCSBN.  
4B. Conduct audits to ensure compliance with continuing competence requirements. |  |
### STRATEGIC INITIATIVE #4. Board of nursing collaborates to advance nursing regulation

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Objectives</th>
<th>Tactics</th>
<th>Progress</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. Board of nursing promotes and is represented in collaborative activities.</td>
<td>1. Actively participate in the regulatory arena.</td>
<td>1. Serve on NCSBN and other regulatory related committees.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>3. Collaborate with external stakeholders.</td>
<td>3. Report semiannually to Deans and Directors, TNA, TONE.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>4. Participate in the Nurse Licensure Compact.</td>
<td>4A. Compact administrator attends all meetings of the NLAC.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>4B. Compact administrator serves on NLCA Committees.</td>
<td></td>
</tr>
</tbody>
</table>

### STRATEGIC INITIATIVE #5. Board of nursing enhances nursing regulation through efficient use of technology

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Objectives</th>
<th>Tactics</th>
<th>Progress</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. Board leverages technology to simplify regulation for users.</td>
<td>1. Maintain a comprehensive state nurse licensure database.</td>
<td>1A. Support IT transition.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>2. Contribute to a national nurse workforce data repository through collaboration with NCSBN.</td>
<td>1B. Explore options for workforce data collection and reporting.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>3. Implement a new licensure management system.</td>
<td>2. Support the daily exchange of licensure information through Nursys.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>4. Support interactive online processing of initial licensure applications.</td>
<td>3. Continue testing.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>4. Support online applications for initial licensure.</td>
<td></td>
</tr>
<tr>
<td>Outcome</td>
<td>Objectives</td>
<td>Tactics</td>
<td>Progress</td>
</tr>
<tr>
<td>---------</td>
<td>------------</td>
<td>---------</td>
<td>----------</td>
</tr>
</tbody>
</table>
| 5. Support enhancements that will provide board members, licensees and the public with electronic information. | 5A. Implement email communication with licensees.  
5B. Reduce paper by using electronic reports and records for board meeting. | | |
| 6. Promote transparency by providing information on BON website. | 6. Post meeting notices, minutes, annual reports, newsletters, legislation, new rules, board policies and education links on website. | | |
**Sample #2 (Independent Board)**

**Agency Mission**

The mission of the Board of Nursing is to assure the Citizens of ----- safe and competent practice by nurses and mental health technicians.

**Agency Philosophy**

The Board of Nursing will act in accordance with the highest standards of ethics, accountability, efficiency and openness.

The Board subscribes to the idea that safe nursing care is a public trust. We approach our activities with a deep sense of purpose and responsibility.

The public and regulated community alike can be assured of a balanced and sensible approach to regulation.

<table>
<thead>
<tr>
<th>Priority #1 Promoting Nursing and allied Health Standards; safe nursing through education</th>
<th>Performance Measure</th>
<th>Assessment</th>
<th>Date(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Nursing Initiative Grant Began Spring 2006 and was approved for 10 years</td>
<td>1. Assessment of Nursing Initiative Grant and determine next steps.</td>
<td>Collaborate with -SNA, -ONL, Tri-Council &amp; Nursing programs in ----- Review NCSBN National trends &amp; studies</td>
<td></td>
</tr>
<tr>
<td>2. Continue collaboration with other agencies to increase nurse educators in ----- by providing expertise and support.</td>
<td>Collaborate with ----- Works, -BOR, -ANA</td>
<td>Collaborate with ----- Works to assess need of employers in ----- met with ----- Works and approved interface design</td>
<td>Spring 2013</td>
</tr>
<tr>
<td>3. Evaluate new models of education keeping quality education as a priority.</td>
<td>Review NCSBN National trends &amp; studies</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Build collaborative relationships with other organizations and nurses in ----</td>
<td>1. Joint meetings with organizations and other state agencies.</td>
<td>List organizations here</td>
<td>----- Action Coalition ----- Works 4/2013 7/2013</td>
</tr>
<tr>
<td></td>
<td>2. Continue education outreach.</td>
<td>Student presentations</td>
<td>9/18/13</td>
</tr>
</tbody>
</table>
### 3. Increase in requests for new nursing programs, limited graduate employment opportunities and limited availability of adequate clinical resources.

<table>
<thead>
<tr>
<th>Step</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Gather data, review and clarify information needed to evaluate need for new programs.</td>
</tr>
<tr>
<td>2.</td>
<td>AG involvement.</td>
</tr>
<tr>
<td>3.</td>
<td>Ensure clinical resources are of sufficient number and experiences available to cover all aspects of nursing across the lifespan and accommodate the number of students in the program.</td>
</tr>
<tr>
<td>4.</td>
<td>Clinical sites.</td>
</tr>
<tr>
<td>5.</td>
<td>Determine the appropriate number of students per school.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Action</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student presentations</td>
<td>10/26/12</td>
</tr>
<tr>
<td>Student presentations</td>
<td>3/4/13</td>
</tr>
<tr>
<td>Student presentations</td>
<td>3/7/13</td>
</tr>
<tr>
<td>Individual education programs - DATL, CNE providers</td>
<td>2013</td>
</tr>
<tr>
<td>Updates in Newsletter</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Step</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Gather data, review and clarify information needed to evaluate need for new programs.</td>
</tr>
<tr>
<td>2.</td>
<td>AG involvement.</td>
</tr>
<tr>
<td>3.</td>
<td>Ensure clinical resources are of sufficient number and experiences available to cover all aspects of nursing across the lifespan and accommodate the number of students in the program.</td>
</tr>
<tr>
<td>4.</td>
<td>Clinical sites.</td>
</tr>
<tr>
<td>5.</td>
<td>Determine the appropriate number of students per school.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Action</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student presentations</td>
<td>10/26/12</td>
</tr>
<tr>
<td>Student presentations</td>
<td>3/4/13</td>
</tr>
<tr>
<td>Student presentations</td>
<td>3/7/13</td>
</tr>
<tr>
<td>Individual education programs - DATL, CNE providers</td>
<td>2013</td>
</tr>
<tr>
<td>Updates in Newsletter</td>
<td></td>
</tr>
<tr>
<td>6. Suspend approval of any new schools/programs of nursing education or increase in enrollment of existing programs pending a staff review of clinical resources for students in ----- for next 3 months</td>
<td>12/2012</td>
</tr>
<tr>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>Review workforce evaluations</td>
<td></td>
</tr>
<tr>
<td>Analyze employment rates</td>
<td></td>
</tr>
<tr>
<td>Clinical Facilities Survey</td>
<td>2/2013</td>
</tr>
<tr>
<td>Clinical Facilities Survey - Review</td>
<td>3/2013</td>
</tr>
<tr>
<td>Clinical Facilities Survey - Re-review</td>
<td>6/2013</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>4. Scope of Advanced Practice</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Review statutes and regulations.</td>
<td></td>
</tr>
<tr>
<td>Provide scope of practice statutes and regulations to the Board</td>
<td></td>
</tr>
<tr>
<td>2. Review consensus model.</td>
<td></td>
</tr>
<tr>
<td>Provide consensus model to the Board</td>
<td></td>
</tr>
<tr>
<td>3. Discussion of independent practice.</td>
<td></td>
</tr>
<tr>
<td>Provide Board with results from states who have independent practice</td>
<td></td>
</tr>
<tr>
<td>4. Review ----- APRN Taskforce proposed statute changes.</td>
<td></td>
</tr>
<tr>
<td>Provide the Board updates on the language</td>
<td></td>
</tr>
<tr>
<td>Board takes position on proposed language</td>
<td></td>
</tr>
<tr>
<td>BON support conceptually the removal of a collaborative practice agreement mandate and prescriptive authority protocol if the licensee has demonstrated through a transitional practice or experience of at least 3 years the ability to practice independently.</td>
<td>12/2012</td>
</tr>
<tr>
<td>Ad Hoc APRN Committee</td>
<td>3/2013</td>
</tr>
<tr>
<td>Ad Hoc APRN Committee - meeting</td>
<td>5/2013</td>
</tr>
<tr>
<td>Ad Hoc APRN Committee - meeting</td>
<td>7/2013</td>
</tr>
<tr>
<td>5. New LMHT schools proposal</td>
<td>1. Develop or contract license exam.</td>
</tr>
<tr>
<td>------------------------------</td>
<td>----------------------------------</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>2. Review all applications.</th>
<th>Ongoing</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>3. Update website.</th>
<th>Ongoing 7/12/13</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>6. Massage Therapist proposed language for regulation by BON</th>
<th>1. Review statutes and regulations.</th>
<th>Provide scope of practice statutes and regulations to the Board 2/2013</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Provide models from ----- and ----- 2/2013</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Provide Board with fiscal impact 2/2013</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Provide Board with all comments 2/2013</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>5. Review of comments received from the public.</th>
<th>Provide Board with all comments</th>
</tr>
</thead>
</table>

<p>| Ad Hoc APRN Committee meeting 8/2013 |</p>
<table>
<thead>
<tr>
<th>Priority #2 Fiscal Responsibilities</th>
<th>Performance Measure</th>
<th>Assessment</th>
<th>Date(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Succession Planning</td>
<td>1. Evaluate agency structure.</td>
<td>Identify critical leadership positions needed for continuity of agency</td>
<td></td>
</tr>
<tr>
<td></td>
<td>2. Develop timeline.</td>
<td>After development of timeline-education of Board &amp; staff</td>
<td></td>
</tr>
<tr>
<td></td>
<td>3. Develop education for the transfer of institutional knowledge.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>4. Develop a succession plan.</td>
<td>Staff is working on procedure manuals</td>
<td>ongoing</td>
</tr>
<tr>
<td>2. I.T. Infrastructure</td>
<td>1. Continue to identify and replace equipment that needs updated.</td>
<td>Ongoing</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Approval for funding</td>
<td>3/2013</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Data center upgrade</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>2. Review and evaluate new technology and how to incorporate into BON.</td>
<td>ongoing</td>
<td></td>
</tr>
<tr>
<td></td>
<td>-----alert</td>
<td>9/2012</td>
<td></td>
</tr>
<tr>
<td></td>
<td>1 Pads for board packets &amp; meetings</td>
<td>9/2012</td>
<td></td>
</tr>
</tbody>
</table>
### Priority #3
**Maintain Quality Customer Service**

<table>
<thead>
<tr>
<th>Performance Measure</th>
<th>Assessment</th>
<th>Date(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Phone calls</td>
<td>Returned within 1 business day.</td>
<td>Audit quarterly</td>
</tr>
</tbody>
</table>
| 2. Process all paper applications within 3 business days                              | 1. 90% of paper applications will be processed in 3 business days. | Audit 10% quarterly  
1st quarter 2012 - 97.8  
2nd quarter 2012 - 96.86  
3rd quarter 2012 - 94.66  
4th quarter 2012 - 96 |
| 2. 90% accuracy rate.                                                                | Audit 10% quarterly  
1st quarter 2012 - 56.73  
2nd quarter 2012 - 60.00  
3rd quarter 2012 - 58.53  
4th quarter 2012 - 70.13 |
| 3. License new graduates from electronic report within 3 business days               | 1. License printed within 3 business days after student passes exam. | Audit 10% quarterly  
1st quarter 2012 - 97%  
2nd quarter 2012 - 100%  
3rd quarter 2012 - 32%  
4th quarter 2012 - 88% |
| 4. Investigations                                                                    | Complete within 9 months. | Audit quarterly- over 9 months old  
January 2013 - 49% |
<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>2. Average length of Investigation.</td>
<td>Audit twice yearly</td>
<td></td>
</tr>
<tr>
<td></td>
<td>2010 - 142 days; 2011 - 98 days; 2012 - 55 days</td>
<td>Jan. 2013</td>
</tr>
<tr>
<td></td>
<td>2010 - 159 days; 2011 - 115 days; 2012 - 71 days; 2013 - 41 days</td>
<td>July 2013</td>
</tr>
<tr>
<td>5. Case(s) filed or diversion agreement signed &amp; implemented within 90 days after Assistant Attorney General receives file(s)</td>
<td>1. Timely hearings.</td>
<td>Audit quarterly</td>
</tr>
<tr>
<td></td>
<td></td>
<td>January 2013 - 100 days</td>
</tr>
<tr>
<td></td>
<td></td>
<td>July 2013 - 154 days</td>
</tr>
<tr>
<td>6. Customer Service</td>
<td>1. All customers’ service measures will be added to position descriptions and evaluations.</td>
<td>Evaluations completed twice yearly addressing audit results</td>
</tr>
<tr>
<td></td>
<td>2. Web based customer service survey.</td>
<td>Audit quarterly</td>
</tr>
<tr>
<td></td>
<td></td>
<td>12/27/12</td>
</tr>
<tr>
<td></td>
<td></td>
<td>4/25/13</td>
</tr>
<tr>
<td></td>
<td></td>
<td>7/24/13</td>
</tr>
</tbody>
</table>
**BOARD/AGENCY SELF-ASSESSMENT — TOOL #7**

1. One of the BON's/agency's fundamental roles is setting direction for the state/jurisdiction. This begins with the BON's/agency's responsibility for establishing the mission and values, and defining a vision of the future. A mission statement is a concise expression of what the BON/agency is trying to achieve and for whose benefit. This statement serves as the foundation for making decisions. The BON/agency, working closely with the EO, should review periodically.

<table>
<thead>
<tr>
<th>Please rate the BON's/agency's performance in:</th>
<th>Poor or Needs Improvement</th>
<th>Fair or Marginal</th>
<th>OK or Acceptable</th>
<th>Good or Above Average</th>
<th>Excellent or Superior</th>
</tr>
</thead>
<tbody>
<tr>
<td>Supporting the BON's/agency's mission</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Agreeing on how the BON/agency should fulfill its mission</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Periodically reviewing the mission to ensure it is appropriate</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Using the BON's/agency's mission and values to drive decisions</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

How can the BON/agency do better in this area? _______________________________________________________________
_____________________________________________________________________________________________________________
_____________________________________________________________________________________________________________

2. To carry out its role in setting direction, the BON/agency should be actively involved in strategic planning and thinking. Then, it monitors progress against that plan. The BON/agency also needs to understand its clients and stakeholders, as well as the internal and external operating environments, so that it can respond appropriately as opportunities and challenges arise. The BON/agency focuses its efforts primarily on strategic issues rather than operational and administrative matters.

<table>
<thead>
<tr>
<th>Please rate the BON's/agency's performance in:</th>
<th>Poor or Needs Improvement</th>
<th>Fair or Marginal</th>
<th>OK or Acceptable</th>
<th>Good or Above Average</th>
<th>Excellent or Superior</th>
</tr>
</thead>
<tbody>
<tr>
<td>Setting the BON/agency's strategic direction in partnership with the EO</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Focusing regularly on strategic and policy issues versus operational issues</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Understanding the needs of the agency's members and stakeholders</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Assessing and responding to changes in the BON's/agency's environment</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Engaging in an effective strategic planning process</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tracking progress toward meeting the BON's strategic goals</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
How can the BON/agency do better in this area?

______________________________________________________________

3. The BON/agency is responsible for developing public policy and advocating on behalf of the BON/agency and its members. A BON/agency's government relations activities may include monitoring regulations and legislation. The advocacy program may include written and visual communications pieces, such as annual reports, newsletters, fact sheets, press releases, Web pages and participation in agency events.

<table>
<thead>
<tr>
<th>Please rate the BON’s/agency's performance in:</th>
<th>Poor or Needs Improvement</th>
<th>Fair or Marginal</th>
<th>OK or Acceptable</th>
<th>Good or Above Average</th>
<th>Excellent or Superior</th>
</tr>
</thead>
<tbody>
<tr>
<td>Building a positive public image of the BON/agency</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Networking to establish collaborations and partnerships with other organizations</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Maintaining an open dialogue with the BON’s/agency’s members related to public policy issues</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ensuring it has the information necessary to make decisions related to public policy and advocacy</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Using an effective process to develop the BON/agency’s public policy issues positions</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Defining the role of board members related to advocacy and public policy activities, e.g., who serves as the official spokesperson, access to media</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

How can the BON/agency do better in this area?

______________________________________________________________
4. An effective BON/agency is made up of individuals who contribute critically needed skills, experience, perspective, wisdom, contacts, time and other resources to the BON/agency. The BON/agency identifies and cultivate officers, and orients and develops members to fulfill the BON's/agency's responsibilities.

<table>
<thead>
<tr>
<th>Please rate the BON's/agency's performance in:</th>
<th>Poor or Needs Improvement</th>
<th>Fair or Marginal</th>
<th>OK or Acceptable</th>
<th>Good or Above Average</th>
<th>Excellent or Superior</th>
</tr>
</thead>
<tbody>
<tr>
<td>Orienting new board members</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Providing ongoing board member development</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Utilizing the skills and talents of individual board members</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

How can the BON/agency do better in this area? _________________________________________________________________
_____________________________________________________________________________________________________________
_____________________________________________________________________________________________________________

5. The BON/agency is responsible for deciding which resources support the mission and for evaluating their effectiveness. The BON/agency works in collaboration with staff to understand the scope of the organization's resources, establish appropriate goals for quality and results, and monitor performance data.

<table>
<thead>
<tr>
<th>Please rate the BON's/agency's performance in:</th>
<th>Poor or Needs Improvement</th>
<th>Fair or Marginal</th>
<th>OK or Acceptable</th>
<th>Good or Above Average</th>
<th>Excellent or Superior</th>
</tr>
</thead>
<tbody>
<tr>
<td>Being knowledgeable about the BON's/agency's resources and services</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ensuring the BON/agency receives sufficient information related to resources and services</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ensuring the organization has adequate infrastructure, such as staff, facilities, technologies and volunteers</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>BON/Agency monitors the resources and services</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Measuring the impact of resources and services</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tracking progress toward meeting the BON's/agency's strategic goals</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

How can the BON/agency do better in this area? _________________________________________________________________
_____________________________________________________________________________________________________________
_____________________________________________________________________________________________________________
6. BONs/Agencies are responsible for preserving an organization’s resources, protecting its assets, and maintaining its legal and ethical integrity. Managing resources wisely is especially important for a government agency because it operates in the public trust. The BON/agency monitors performance against the budget throughout the year.

<table>
<thead>
<tr>
<th>Please rate the BON's/agency's performance in:</th>
<th>Poor or Needs Improvement</th>
<th>Fair or Marginal</th>
<th>OK or Acceptable</th>
<th>Good or Above Average</th>
<th>Excellent or Superior</th>
</tr>
</thead>
<tbody>
<tr>
<td>The annual budget reflects the BON's/agency's priorities</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reviewing and understanding financial reports</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Monitoring the BON's/agency's financial health</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The BON/agency has policies to manage risks (e.g., reserves, internal controls, personnel policies and emergency preparedness)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

How can the BON/agency do better in this area? _________________________________________________________________
_____________________________________________________________________________________________________________
_____________________________________________________________________________________________________________

7. The primary BON/agency-staff relationship is between the BON/agency and the EO, and the quality of this relationship is of the utmost importance. To be effective, the BON/agency and EO need a close working relationship based on mutual trust and an appreciation of their respective roles in leading the organization. As part of its responsibility for supervising the EO, the BON/agency ensures that a job description outlines duties, evaluates the EO annually and determines appropriate executive compensation.

<table>
<thead>
<tr>
<th>Please rate the BON's/agency's performance in:</th>
<th>Poor or Needs Improvement</th>
<th>Fair or Marginal</th>
<th>OK or Acceptable</th>
<th>Good or Above Average</th>
<th>Excellent or Superior</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cultivating a climate of mutual trust and respect between the BON/agency and EO</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Giving the EO enough authority to lead the staff and manage the agency successfully</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Discussing and constructively challenging recommendations made by the EO</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Formally assessing the EO’s performance</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Using evidence to support that the EO is appropriately compensated</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Planning for the absence or departure of the EO (e.g., succession planning)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
8. The BON/agency is responsible for making sure its own structures and practices fulfill its legal mandates and essential duties. This requires that the BON/agency has a clear understanding of its roles and an awareness of how these respective responsibilities may change as the organization evolves. The BON/agency also ensures that it is operating in accordance with the statues, rules and regulations and other BON/agency policies, which are reviewed and revised as necessary. The BON/agency organizes itself efficiently using committees and task forces that have written charges and capable leadership.

<table>
<thead>
<tr>
<th>Please rate the BON’s/agency’s performance in:</th>
<th>Poor or Needs Improvement</th>
<th>Fair or Marginal</th>
<th>OK or Acceptable</th>
<th>Good or Above Average</th>
<th>Excellent or Superior</th>
</tr>
</thead>
<tbody>
<tr>
<td>Carrying out the BON’s/agency’s legal duties</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Defining responsibilities and setting expectations for board member performance</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Respecting the distinct roles of the EO, BON/agency and staff</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Implementing steps to improve governance and the performance of the BON/agency</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Periodically reviewing and updating BON/agency policies and procedures</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Following and enforcing its conflict of interest policy</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reviewing its committee structure to ensure it supports the work of the BON/agency</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Using standing committees and ad hoc task forces effectively</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

How can the BON/agency do better in this area? _______________________________________________________________
_____________________________________________________________________________________________________________
_____________________________________________________________________________________________________________
9. BONs/Agencies carry out much of their work in meetings. Meetings that are carefully structured and efficiently conducted will help board members feel that their time is well spent and that the BON/agency adds value to the organization. Effective BONs/agencies have meeting agendas that focus on important issues, allows for discussion and leads to action. To ensure efficiency, board members receive and review agendas and background materials prior to the meetings. To tap into the collective wisdom of the BON/agency, pay careful attention to boardroom culture, group dynamics and decision-making processes.

<table>
<thead>
<tr>
<th>Please rate the BON’s/agency’s performance in:</th>
<th>Poor or Needs Improvement</th>
<th>Fair or Marginal</th>
<th>OK or Acceptable</th>
<th>Good or Above Average</th>
<th>Excellent or Superior</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fostering an environment that builds trust and respect among board members</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Establishing and enforcing policies related to board member attendance</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Preparing for board meetings (e.g., reading materials in advance, following up on assignments)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Using effective meeting practices, such as setting clear agendas, having good facilitation and managing time well</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Allowing adequate time for board members to ask questions and explore issues</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Efficiently making decisions and taking action when needed</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Understanding the need to base decisions on the collective good of the public</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Engaging all board members in the work of the BON/agency</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

How can the BON/agency do better in this area? ________________________________________________________________
_____________________________________________________________________________________________________________
_____________________________________________________________________________________________________________

What issues should occupy the BON’s/agency’s time and attention during the coming year? ___________________________
_____________________________________________________________________________________________________________
_____________________________________________________________________________________________________________

How can the BON’s/agency’s performance and practices be improved in the next year or two? _________________________
_____________________________________________________________________________________________________________
What other comments or suggestions would you like to offer?

_____________________________________________________________________________________________________________

_____________________________________________________________________________________________________________

<table>
<thead>
<tr>
<th>Please rate the BON's/agency's performance in:</th>
<th>Poor or Needs Improvement</th>
<th>Fair or Marginal</th>
<th>OK or Acceptable</th>
<th>Good or Above Average</th>
<th>Excellent or Superior</th>
</tr>
</thead>
<tbody>
<tr>
<td>The level of commitment and involvement demonstrated by board members</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The overall effectiveness of the BON/agency</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Do you find serving on this BON/agency to be rewarding and satisfying experience?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
STAFF ASSESSMENT – TOOL #8

Email Message to Staff

Dear Staff Member,

The agency/board members are conducting an organizational assessment before starting the search for our next executive officer. We seek your help in deciding what skills we should look for in the next executive officer. Your responses to this survey will be used to:

- Assess the current organizational environment;
- Assist and determine whether changes may need to occur; and
- Obtain a better understanding of the existing skill sets within the organization.

To complete the survey, please go to: (link to Web-based survey).

Thank you for your help!

Survey Questions

A. What do you perceive as three of our EO’s greatest achievements during his/her tenure?
   1. 
   2.
   3.

B. What elements of his/her leadership style do you most appreciate and would like to see carried forward by the successor?
   1. 
   2.
   3.

C. What three changes would help you to be more effective in your specific job? (Your responses are important to identifying BON/agency improvements that would help us be more effective in serving our clients.)
   1. 
   2.
   3.
D. What three changes would help the BON/agency be more effective in pursuing its mission to protect the public?
1. 
2. 
3. 

E. What are the top three skills that the next EO will need to have in order to be successful?
1. 
2. 
3. 

F. Additional comments:

Thank you for your help!
**ANNUAL CALENDAR AND KEY EVENTS – TOOL #9**

What key events routinely take place during the year or are coming up in the next year that directly involve the EO role? Events would include board or committee meetings, legislative session, key NCSBN meetings (such as the Annual Meeting or Midyear Meeting), renewal periods, board anniversary, strategic planning cycle, etc. What's the specific action or accountability that the EO has for that event?

<table>
<thead>
<tr>
<th>Month</th>
<th>Key Events</th>
<th>Key Associated Activities/Responsibilities (EO's Accountability or Involvement)</th>
</tr>
</thead>
<tbody>
<tr>
<td>January</td>
<td></td>
<td></td>
</tr>
<tr>
<td>February</td>
<td></td>
<td></td>
</tr>
<tr>
<td>March</td>
<td>NCSBN Midyear Meeting</td>
<td></td>
</tr>
<tr>
<td>April</td>
<td></td>
<td></td>
</tr>
<tr>
<td>May</td>
<td></td>
<td></td>
</tr>
<tr>
<td>June</td>
<td>NCSBN EO Summit</td>
<td></td>
</tr>
<tr>
<td>July</td>
<td></td>
<td></td>
</tr>
<tr>
<td>August</td>
<td>NCSBN Annual Meeting</td>
<td></td>
</tr>
<tr>
<td>September</td>
<td></td>
<td></td>
</tr>
<tr>
<td>October</td>
<td></td>
<td></td>
</tr>
<tr>
<td>November</td>
<td></td>
<td></td>
</tr>
<tr>
<td>December</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
JOB POSTING – TOOL #10
Sample #1

-------- Board of Nursing Opening
Executive Director
Interested Parties May Visit www.-----
For Additional Information Submit Resumes to
-------- Board of Nursing
P.O. Box -----
Town, State, Zip code

-------- BOARD OF NURSING

Executive Director

Are you a nurse with executive level skills and a passion for serving the public?

The ------ Board of Nursing, located in -------, is seeking an Executive Director.
The Executive Director serves as the agency head for the ------ Board of Nursing and is charged with the implementation of the ------ Nurse Practice Act for 73,000 licensed nurses.

Educational Qualifications: Minimal academic preparation is a master’s degree or equivalent in nursing from an accredited university or college. A doctorate degree is preferred.

Professional Qualifications: Five years experience in the practice of nursing, administration and organizational management. At least two years in nursing administration experience, immediately preceding the time of appointment.

For a complete position description and application information please visit www.-----
Application deadline is -----. Resumes must be submitted to:

------ Board of Nursing
P.O. Box -----
Town, State, Zip code

Sample #2
PUBLIC SERVICE EXECUTIVE 4

The ------ Board of Nursing is seeking an Executive Director. The mission of the Board of Nursing is to protect the public health, safety and welfare by ensuring that nursing is practiced by at least minimally competent licensed individuals who practice within the authorized scope of practice.

The Board of Nursing is charged with enforcing regulations for nursing education, nursing practice, and nursing continuing education in -----

The Executive Director is responsible for the administration of policies and programs of the board and for the operation of the board office. There are currently more than 61,000 active licensees in the State of -----

The duties of the Executive Director are:

Oversee the daily operations of the Board of Nursing office and provide supervision and leadership for board office staff to produce a high-performance team that carries out the board's mission and priorities. Job responsibilities include: receive all applications and fees for the
practice of nursing; keep all records pertaining to the licensing of nurses including a record of all board proceedings; determine priorities of the organization in collaboration with the board; set performance goals aligned with priorities; and manage board office staff to ensure that goals are met. The position will provide organizational framework for the conduct of board business by arranging meetings, establishing the agenda for board meetings, overseeing the preparation of materials for the Board's review, and maintaining board records. Represent the board in its role of assuring safe nursing care to the public by serving as the board's liaison to the ----- Department of Public Health, policy makers, legislative committees, professionals, and professional organizations to identify and shape policy conducive to the board's interests. Will assist the board in the development and administration of policies established to implement and enforce state law governing nurses. Oversee the enforcement of the law and rules by ensuring the continual improvement of licensing, investigative and compliance/disciplinary procedures; monitoring of sanctioned nurses according to stipulations; and providing consultation to nurses, employers, health care providers and public. The position will oversee the systems that assure nurses licensed in ----- are receiving required continuing education by implementing laws and rules related to continuing education. Oversee the accreditation process for the 104 nursing education programs by implementing laws and rules related to nursing education. The position is classified as a Public Service Executive 4 under the state of ----- classification system. The position is a non-merit at will position and serves at the pleasure of the ----- Board of Nursing. The ----- Department of Public Health provides administrative services to the ----- Board of Nursing.

Minimum Qualifications: The executive director shall be a registered nurse with a minimum of a master's degree and experience in management and administrative responsibilities.

Salary Range: -------------------

Interested applicants must send a cover letter and resume by the closing date of ----- to: -----------
ASSESSMENT OF EO COMPETENCIES – TOOL #11
A framework for assessing EO candidates against suggested EO competencies.

--------- State Board of Nursing
Evaluation of EO competencies is critical when reviewing applications and in the selection of the EO to lead your BON/agency. Please rank the applications as Weak, Adequate, or Strong.

<table>
<thead>
<tr>
<th>General Leadership and Management</th>
<th>Weak</th>
<th>Adequate</th>
<th>Strong</th>
<th>Interview Questions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mission Driven</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>General leadership and management</td>
<td></td>
<td></td>
<td></td>
<td>#1</td>
</tr>
<tr>
<td>Creating a shared understanding of organization values, goals and mission</td>
<td></td>
<td></td>
<td></td>
<td>#2</td>
</tr>
<tr>
<td>Create a culture of inquiry among BON/agency and staff</td>
<td></td>
<td></td>
<td></td>
<td>#3</td>
</tr>
<tr>
<td>Culture of transparency</td>
<td></td>
<td></td>
<td></td>
<td>#4</td>
</tr>
<tr>
<td>Synthesize and integrate diverse viewpoints</td>
<td></td>
<td></td>
<td></td>
<td>#5</td>
</tr>
<tr>
<td>Develop and implement operational policies and procedures, e.g., licensure, practice, education and discipline</td>
<td></td>
<td></td>
<td></td>
<td>#6</td>
</tr>
<tr>
<td>Hold a clear vision of the organization</td>
<td></td>
<td></td>
<td></td>
<td>#7</td>
</tr>
<tr>
<td>Leads the organization toward the vision</td>
<td></td>
<td></td>
<td></td>
<td>#8</td>
</tr>
<tr>
<td>Navigating Change</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Anticipates, plans and implements effective change</td>
<td></td>
<td></td>
<td></td>
<td>#9</td>
</tr>
<tr>
<td>Understanding the Internal and External Environment</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Adapting your leadership style to organization needs</td>
<td></td>
<td></td>
<td></td>
<td>#12</td>
</tr>
<tr>
<td>Dissect complex problems</td>
<td></td>
<td></td>
<td></td>
<td>#13</td>
</tr>
<tr>
<td>Fiscal Management</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Provides accountability for financial management, e.g., develop a budget, review and analyze financial reports and have an overall understanding of accounting principles</td>
<td></td>
<td></td>
<td></td>
<td>#15</td>
</tr>
<tr>
<td>Information Management and Technology</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Leverage technology and date for process improvement and maximization of efficiency</td>
<td></td>
<td></td>
<td></td>
<td>#20</td>
</tr>
<tr>
<td>Understand access to public records and privacy restrictions</td>
<td></td>
<td></td>
<td></td>
<td>#21</td>
</tr>
<tr>
<td>Weak</td>
<td>Adequate</td>
<td>Strong</td>
<td>Interview Questions</td>
<td></td>
</tr>
<tr>
<td>------</td>
<td>----------</td>
<td>--------</td>
<td>---------------------</td>
<td></td>
</tr>
</tbody>
</table>

### Uses Evidence-based Leadership

Identify and monitor quality improvement metrics

### Regulatory Knowledge

Demonstrates knowledge of and compliance with nurse practice act and other applicable state and federal laws

Participates in legislative process

Performs critical assessment of legislative changes/proposals

### Professionalism

Values guide decision making

Practices self-care and work-life balance

Accountable for behavior and actions

Demonstrate high standards of ethical conduct

### Effective Communication

Ability to convey message orally and in writing to individuals and groups

Communicates effectively with constituencies, e.g., legislature, agencies, organizations, educators, media and nurses

### Strategic Thinking Competencies

Models and Cultivates Continuous Strategic Thinking

Ability to frame the big picture

Support the BON/agency and staff to develop a process to create, implement, monitor and adjust strategic plan

Maintains accountability for implementation of BON's/agency's strategic plan/goals

### BON/Agency Competencies

Promoting and Reinforcing BON Accomplishments and Expectations

Orient board members to a regulatory mission

Promote BON Development

Partners with president to capitalize on board member's strengths

Provide BON/agency with tools and information to govern effectively

Provide continued opportunities for growth
<table>
<thead>
<tr>
<th>People Competencies</th>
<th>Weak</th>
<th>Adequate</th>
<th>Strong</th>
<th>Interview Questions</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Encourage BON/Agency Engagement</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Actively manages group dynamics</td>
<td></td>
<td></td>
<td></td>
<td>#43</td>
</tr>
<tr>
<td>Effective use of time management to maximize performance</td>
<td></td>
<td></td>
<td></td>
<td>#44</td>
</tr>
<tr>
<td>Assures administrative support for board members and meetings</td>
<td></td>
<td></td>
<td></td>
<td>#45</td>
</tr>
<tr>
<td><strong>People Competencies</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Relationship Management</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Demonstrates adaptive communication styles</td>
<td></td>
<td></td>
<td></td>
<td>#46</td>
</tr>
<tr>
<td>Fosters stakeholder relations</td>
<td></td>
<td></td>
<td></td>
<td>#47</td>
</tr>
<tr>
<td>Manages legislative relations</td>
<td></td>
<td></td>
<td></td>
<td>#48</td>
</tr>
<tr>
<td>Encourages shared decision making</td>
<td></td>
<td></td>
<td></td>
<td>#49</td>
</tr>
<tr>
<td><strong>Human Resource Management and Staff Development</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Establish and monitor expectations</td>
<td></td>
<td></td>
<td></td>
<td>#50</td>
</tr>
<tr>
<td>Develop a team environment and foster empowerment</td>
<td></td>
<td></td>
<td></td>
<td>#51</td>
</tr>
<tr>
<td>Coach and mentor staff</td>
<td></td>
<td></td>
<td></td>
<td>#52</td>
</tr>
<tr>
<td>Manage conflict</td>
<td></td>
<td></td>
<td></td>
<td>#53  #54 #55</td>
</tr>
<tr>
<td><strong>Cultural Competence</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Recognize and value diversity</td>
<td></td>
<td></td>
<td></td>
<td>#56  #57</td>
</tr>
</tbody>
</table>
INTERVIEW QUESTIONS FOR ASSESSMENT OF EO COMPETENCIES – TOOL #12

1. How do you balance keeping an eye on the big picture of where the BON/agency is headed versus getting involved in the detail of daily operations?

2. What is your experience in development and articulation of an organization’s mission, vision and values? How did you facilitate this process? How did you ensure alignment with the strategic plan and budget? What is your knowledge of the -----State Board of Nursing? Do you have any experience in an organization similar to this?

3. How do you use your leadership style to foster practices that enhance an organization’s creativity and innovation?

4. State governance demands more transparency, however, no amount of legislation will make our BON/agency fully transparent. Only courageous leaders and followers who are more courageous to be candid can do that. What actions would you take to encourage transparency for you, your staff and BON/agency?

5. Give a specific example of how you have helped create an environment where differences are valued, encourage and supported.

6. Describe your policy-setting experience. What characteristics do you use to be successful?

7. A vision is a general statement encompassing the direction a BON/agency wants to take and the desired end result once it gets there. What do you see as the vision of this BON/agency and what are your desired results?

8. How do you evaluate the cultural competence of an organization?

9. Describe your response to change and risk, and the best way to manage these for the BON/agency.

10. Tell us about a time when you were responsible for delivering organizational changes to your team and how you achieved team buy-in.

11. Describe a major change that occurred in a job that you held. How did you adapt to this change?

12. Describe how you display courage in your current position. Name factors that strengthen and drain your courage. Give an example of how you maintain the integrity of your team or an individual team member.

13. The complex systems we work in require us to be flexible and adaptive. What tangible strategies do you use to convey adaptability and flexibility in your work setting?

14. Describe the project or situation which best demonstrates your analytical abilities. What was your role?

15. Describe your knowledge and experience with enacting fiduciary responsibilities.

16. Give an example of a difficult financial decision you had to make within the last two years. What was the outcome and would you have done anything different?

17. With economic constraints we all are cognizant of our money management. Provide an example of a financial decision during financial constraint.

18. How do you get a job done with limited financial and personnel resources?

19. At the end of the fiscal year there are excess funds. What would you do with them?

20. Describe the role technology will play in the BON’s/agency’s future.

21. Please tell us your knowledge of the Freedom of Public Information Act and how it pertains to this organization.

22. Quality improvement metrics can be used to spot trends in performance, adjust processes per agency goals and objectives, compare to internal and external benchmarks, and predict performance. Tell us how you have used quality improvement metrics in your current or past positions.
23. Please tell us about your knowledge of the nurse practice act and state and federal laws. Give us examples of you applying the knowledge of rules and regulations.

24. Please give us examples of your involvement in the legislative process.

25. Give us an example of your ability to conduct a serious examination and judgment of proposed legislative changes.

26. Tell us about a time when you were forced to make an unpopular decision.

27. Self-care is an important aspect of stress management. How do you handle stress?

28. Give us an example when you were accountable for your actions.

29. If the board makes a decision that you feel is going in a direction which you are in total disagreement, how would you handle this situation?

30. Tell us about a time when you had to go above and beyond the call of duty in order to get a job done.

31. Give a specific example of a policy you conformed to which you did not agree. Why?

32. Can you give an example of a time that you felt you did not communicate effectively and/or accurately? How did you rectify the situation? What were the lessons learned?

33. How do you know when you are communicating effectively and accurately?

34. What partnership alliances will be important to the BON/agency in the future?

35. What has been your experience in giving presentations to small or large groups? What has been your most successful experience in speech making?

36. Tell us about a time when you had to make a decision without all the information you needed. How did you handle it? Why? Were you happy with the outcome?

37. Give us an example of the development of a strategic plan and how you supported your board and staff in the process.

38. Tell us about how you would monitor and adjust accordingly in a strategic plan.

39. What experience do you have in developing orientation relating to regulatory missions? Give an example of how you have presented orientation information.

40. We must find the best possible fit for people’s strengths and the roles we ask them to play. How can you and the board president capitalize on board members’ strengths?

41. At the foundation of effective governance is the board’s involvement. Give us examples of the tools and information you will give the board members to encourage effective governance.

42. What would you do to provide opportunities for growth for the staff and board members?

43. Important aspects of a group that works well together is how individuals interact with each other and how individuals react with the group. Give us examples of how you have managed group dynamics and describe the outcome.

44. How do you prioritize projects and tasks when scheduling your time? Give some examples.

45. How do ensure that a board meeting runs smoothly?

46. Give an example of when you had to work with someone who was difficult to get along with. How/why was this person difficult? How did you handle it? How did the relationship progress?

47. What partnership alliances will be important to the agency in the future?

48. Give us examples of your work with legislators and describe your idea of managing legislative relations.

49. Many decisions require input from others. Give an example of when you had to make a decision and how you sought input from others.
50. Give an example of how you monitor expectations for your staff.

51. Employment empowerment adds value not only to the individual employee, but to the BON/agency as well. Employees who feel empowered to make the right decisions on their own offer increased productivity and a high quality of work. How do you develop a team environment and foster empowerment?

52. Coaching and mentoring, whether on an executive level or for overall staff, are increasingly being recognized as important in employee development. Give us examples of coaching and mentoring that you have done with staff in your current position.

53. Tell of the most difficult customer service experience that you have ever had to handle – perhaps an angry or irate customer. Be specific and tell what you did and what the outcome was.

54. Give us an example of team members’ conflict which affected the work product and how you resolved the error.

55. What is your typical way of dealing with conflict? Give an example.

56. How do you evaluate the cultural competence of an organization?

57. How have you built consensus among diverse stakeholders with complex issues and what actions did you take?
REFERENCE QUESTIONS – TOOL #13

These questions are provided as examples and can be used as open ended or asked on a scale.

______________________ is a finalist for the ________________ position with the BON/agency and we would like some additional information about his/her skills and abilities as an employee.

1. First of all, in what capacity do/did you know ________________?
2. Can you tell us when this individual was employed with your company?
3. What can you tell me about his/her attendance/dependability?
4. If vacancy requires supervisory experience: (a) How many workers were supervised by this individual? (b) How would you characterize his/her performance as a supervisor? (c) How would you characterize his/her supervisory style?
5. Explain this individual’s leadership style and effectiveness in management.
6. Explain the mission of your organization and how this individual furthered it.
7. Give an example of a complex problem that _____ faced and how it was resolved.
8. What were _____’s responsibilities in regards to the financial aspects of your organization?
9. Describe _____’s responsibilities for budget development in your organization?
10. What type of computing programs and social media did _____ utilize in your organization?
11. Explain any major IT projects during _____’s tenure.
12. Describe _____’s experience in regulation, i.e., legislative process, lobbying, etc.
13. Explain your understanding of _____’s ethics and values system.
14. How would you rate _____’s communication abilities with: (a) peers; (b) co-workers; (c) outside organizations/stakeholders; and (d) supervisors?
15. If _____ was involved in strategic planning in your organization, please describe their role in development and monitoring the plan for mission-based improvement of the organization?
16. Did _____ work with a board at your organization? If so, how would you rate their effectiveness in board development and engagement?
17. Provide an example where _____ provided the board with tools and/or information to allow the board to govern effectively.
18. Please describe how _____ developed a team environment and fostered empowerment.
19. Explain how _____ recognizes and values diversity in your organization.
20. What was/is the reason for his/her separation from your company?
21. Can you tell me if there have been any disciplinary issues with this individual?
22. Would you rehire this individual?
ORIENTATION PLAN – TOOL #14

A new EO orientation introduces the new EO to the BON/agency and his or her new role. Beyond providing information about the BON's/agency's policies and procedures, an effective orientation makes the new EO comfortable and promotes the BON's/agency's culture and values. Developing and facilitating a new EO orientation takes time. Taking the time to properly orient new EOs increases their chances of being successful. This may increase the EO's retention, saving the BON/agency time and money in recruitment in the long run.

A good orientation will enable a new EO to be successful in their new position by:

- Sharing relevant BON/agency information and beginning a process of learning about the BON's/agency's mission;
- Understanding the culture of the BON/agency, including the values, behaviors, formal and informal practices; and
- Building relationships with staff, colleagues and other stakeholders.

Prior to the Start Date

There are many elements of an orientation that should be prepared in advance of a new EO starting work:

- Advise appropriate individuals of the new EO's name and start date.
- Arrange for and equip a workspace with the necessary furniture, working equipment and supplies.
- Set up email address and phone number, and prepare business cards, office keys, etc.
- Add the EO to organizational chart and appropriate internal lists, such as telephone, email and website directory.
- Prepare documents for the new EO, such as copy of job description, relevant reports and BON/agency documents.
- Ensure the BON/agency orientation manual is up-to-date.
- Contact the new EO to confirm where and when to report and where to park on the first day.
- Plan the orientation process, including what will happen on the first day, week and month.
- Determine the roles of those involved in the orientation process.

Orientation Checklist

Introductions:
- Introduce to staff, colleagues, a mentor, legal counsel, etc.
- Tour the BON/agency
- Discuss orientation process

Organizational Overview:
- Provide BON/agency overview
- Review organizational chart
- Contact NCSBN with new EO information and to establish mentor

Job Duties and Responsibilities:
- Review new EO's job description and responsibilities
- Review statutes, rules, regulations and policies
- Provide and review relevant reports and information
Discuss priorities including:
- Legislation
- Governance structure
- Board member relations
- Licensing
- Education
- Enforcement/discipline
- Practice

Meet external stakeholders
Establish feedback plan

Human Resources and Administration:
- Complete necessary paperwork for pay and benefits
- Review employee policies and procedures manual
- Review travel and reimbursement processes
- Explain absences, leave and vacation policies
- Discuss telephone and email protocol, and Internet use policy
- Review health, fire and safety procedures
- Review the performance management system
- Explain the internal communication processes, including staff meetings
- Orient to technological infrastructure (e.g., licensing system, enforcement system, etc.)
NEW EO DEVELOPMENT MENTOR PROGRAM – TOOL #15

NCSBN New EO Development Mentor Program

Purpose

The EO Network mentoring program is a one-on-one program intended to enhance the professional development of the new EO. The mentoring program provides the opportunity for an experienced EO to facilitate the learning process for the new EO.

Objectives

- Welcome new EOs to the EO Network;
- Increase awareness of resources available to the EO;
- Foster relationships with other EOs who may provide identified information appropriate to a situation; and
- Familiarize knowledge of the NCSBN governance structure.

Mentor Commitment

An EO coach encourages, supports, guides and assists the new EOs in the development of competence in the new role. A mentor is a partner with whom the new EO can create a learning connection based on mutual trust and availability, in order to seek assistance for resources, as well as express emotional tension, including perceptions about how the new EO's skill set is developing and how the role is evolving. The relationship is initiated by the mentor. Together, the mentor and new EO determine the boundaries and expectations for the relationship. Frequent and purposeful communication is essential. The mentor relationship is for a minimum of one year.

Recruitment and Assignment

Mentors should be experienced EOs who demonstrate knowledge of regulatory skills and techniques, awareness of the NCSBN governance, organization and member board services, and internalization of standards of excellence in the professional socialization to the role of EO. Mentors may volunteer or be recruited by the chairperson of the EO Network, in collaboration with the director of Member Relations at NCSBN. Members of the EO Network may recommend experienced EOs.

The mentor is assigned to the new EO by the chairperson of the EO Network, in consultation with the NCSBN Director of Member Relations.

New EO Development Mentor Strategies

The success of the mentor program is dependent on a serious commitment to develop a relationship between the mentor and the new EO. The following are some suggested strategies that may facilitate the development of the relationship. The mentor may want to develop a checklist of the strategies to help track activities.

Welcome New EO to the EO Network

- Initiate contact within two weeks of acceptance of mentor assignment.
- Contact new EO using a variety of communication tools.
- Share contact information (email address, telephone numbers for each other's administrative assistant, as well as self).
- Establish boundaries and expectations for relationship.
- Contact new EO prior to any national meeting (e.g., Annual Meeting, Midyear Meeting and others) to arrange face-to-face contact.
- Purposely introduce new EO to key NCSBN members and staff (e.g., NCSBN CEO, NCSBN Board of Directors president, area director and border states EOs).
Increase Awareness of Resources Available to the New EO

- Purposely introduce new EO to NCSBN leadership staff at national meetings.
- Facilitate orientation to NCSBN website by director, Member Relations, NCSBN.
- Identify other EOs who may be a resource for a specific topic/issue and help establish contact on an as-needed basis.
- Identify other national organizations related to regulation (e.g., CLEAR, FARB, etc.).
- Arrange face-to-face visit between new EO and mentor utilizing travel funding from NCSBN (one visit between BONs).

Foster Relationships with Other EOs that may Provide Identified Information Appropriate to the Situation

- Identify other EOs who may be a resource for a specific topic/issue and help establish contact on an as-needed basis.
- Purposely introduce new EO to key members at national meetings.

Familiarize Knowledge of the NCSBN Governance Structure

- Direct new EO to NCSBN website for information related to governance.
- Provide information related to usual national meetings of NCSBN, the purpose of each and when they occur.

New EO Development Suggested Mentoring Techniques

- Develop questionnaire to learn information that will identify key contact times.
  - Examples:
    - Learn date of the new EO’s first board meeting so that you can contact him or her before and after to offer support and encouragement, as well as to provide an opportunity for reflection.
    - Learn when legislature is in session and whether there are key legislative issues occurring so that you may identify resources and communication during session.
  - Use a variety of communications tools.
    - Examples:
      - Email
      - Telephone
      - Cards and letters
  - Share activities and events occurring in your role as this provides role identity and may guide the new EO to apply experiences shared to his or her situation.
    - Examples
      - Share a successful staff development tool.
      - Share a successful staff management experience.
  - Contact new EO prior to upcoming national meeting and share information related to purpose of meeting, type of business to be conducted, expected role and arrange contact appointment. Follow-up meeting to reflect on experience and clarify how to use the learning.
    - Examples
      - Who will be there.
      - Business conduct.
      - Expected outcomes.
REFERENCES


