REVOLUTIONIZING
the Now - to Design
THE FUTURE
THE 2014 NCSBN ANNUAL THEME

Evoking the style, colors and spirit of the Works Progress Administration (WPA) of the 1930s, the 2014 theme, “Revolutionizing the Now to Design the Future,” takes its inspiration from the values that Depression-era artisans strove to depict in their own works – perseverance, community, optimism and the triumph of the “common man” over obstacles.

Recognition that “revolution” is necessary to craft a future where public protection remains paramount amidst the changing demands of the health care environment and evolving technology, this illustration interweaves the concept of change as a power for good and embraces the process of transformation as a positive force uniting nursing regulatory bodies in the U.S. and across the world.

In its most benign manifestation, revolution denotes change and to revolve means to turn – this illustration depicts both. The human hand is the change instrument that skillfully guides the transformation by using the tool to put the gears in motion.

The “nut” that the wrench is turning is actually an acorn, the seed from which the tree, which serves as the background image of the design, springs. The tree is rooted in the earth but reaches toward the sky, representing growth and strength, just like boards of nursing (BONs) build upon the steadfast foundations of the mission to guard the public’s safety and welfare through new and innovative means and mechanisms.

At the very base of the illustration, anchoring the design, is a globe, symbolizing the far-reaching scope that NCSBN aspires to in its vision statement to “advance regulatory excellence worldwide.” The universality of the quest to ensure public protection encompasses the contributions of the NCSBN Associate Members and emphasizes their partnership with U.S. BONs. The waves flanking each side of the globe signify the flow of ideas across the oceans and back again.

TABLE OF CONTENTS

The Year in Review .......................................... 3
Message from the CEO and President ................. 13
Operating Statements .................................... 14
Purpose and Progress ...................................... 17
Products and Services ...................................... 21
NCLEX®
   Overview .................................................. 23
   RN Pass Rates ............................................ 25
   PN Pass Rates ............................................ 27
Board of Directors ......................................... 29
Staff Members ............................................. 31
Committees .................................................. 37
Annual Meeting Highlights .............................. 41
MEMBER ACHIEVEMENTS
   Individual and Member Board Awards .............. 43
   Institute of Regulatory Excellence (IRE) ........... 45
   Centennial Celebrations ............................... 47
   Service Awards .......................................... 49
Timeline ..................................................... 53
THE YEAR IN REVIEW

The FY14 theme “Revolutionizing the Now to Design the Future” both inspired and reflected many of the activities and events that shaped the year.

An historic meeting of the governing boards of the three organizations representing the state boards that license physicians, nurses and pharmacists – the Tri-Regulator Collaborative – the Federation of State Medical Boards (FSMB), National Association of Boards of Pharmacy (NABP) and NCSBN occurred in FY14. A wide range of agenda items and continued ongoing efforts supporting greater cooperation and dialogue were discussed. Two important initiatives that came out of the meeting are the “Tri-Regulator Collaborative Position Statement on Interprofessional, Team-based Patient Care” and the “Tri-Regulator Collaborative Position Statement on Practice Location for Consumer Protection.”

The position statement on interprofessional, team-based patient care affirmed that all members of a health care team must place the best interests of the patient first and endorse “a team-based approach to patient care that utilizes the education, training, expertise and abilities of individual team members in order to deliver health care that is efficient, interprofessional, cost-effective and evidence-based.”

The practice location for consumer protection position statement established that in a consumer protection model, “health care practice occurs where the recipient of health care services is located” and “patients not residing in the location of the provider deserve the same quality of regulated practice regardless of where the provider is located.”

Historic meeting of Tri-Regulator Collaborative governing boards representing the state boards that license physicians, nurses and pharmacists in the U.S.

Photo courtesy of the Federation of State Medical Boards.
MORE THAN 104,000 NURSE LICENSURE CANDIDATES IN 10 GEOGRAPHIC LOCATIONS HAVE TAKEN THE NCLEX ABROAD.
In its continual efforts to maintain the highest level of public safety possible, NCSBN raised the passing standard for the NCLEX-PN® Examination in response to changes in U.S. health care delivery and nursing practice that have resulted in the increased acuity of clients seen by entry-level PNs. After considering all available information, the NCSBN Board of Directors (BOD) determined that safe and effective entry-level PN practice required a greater level of knowledge, skills and abilities than was required in 2010 when NCSBN instituted the previous standard.

A revised definition of the entry-level nurse in the NCLEX environment, which was the result of analysis leading to the question of what constitutes the length of the entry-level period, was approved. The designation of entry-level will now be defined as a nurse having no more than 12 months of experience; previously it was defined as a nurse having no more than six months of experience.

The Center for Regulatory Excellence (CRE) Grant Program awarded grants in FY14 totaling more than $1.3 million to four U.S. and international organizations. Since the grant program began in 2007, it has awarded almost $11 million in grants to 38 organizations. The CRE funds innovative projects that can have measurable impact on nursing regulation and can create meaningful change.
Findings of the award-winning study, “The NCSBN National Simulation Study: A Longitudinal, Randomized, Controlled Study Replacing Clinical Hours with Simulation in Prelicensure Nursing Education,” were published. The largest and most comprehensive research to date examining the use of simulation in the prelicensure nursing curriculum concluded that substituting high quality simulation experiences for up to half of traditional clinical hours produces comparable end-of-program educational outcomes to those students whose experiences are mostly traditional clinical hours and produces new graduates that are ready for clinical practice.

This study received the first Excellence in Educational Research Award, a program of the Sigma Theta Tau International (STTI) / Chamberlain College of Nursing Center for Excellence in Nursing Education, presented at STTI’s International Nursing Research Congress in Hong Kong. It was unanimously selected by the judges because it was a broad-based study with nationwide and potentially international impact on nursing education.

The International Nursing Association for Clinical Simulation & Learning (INACSL) presented the late Jennifer Hayden, MSN, RN, associate, NCSBN Research department, with the first INACSL President’s Award in recognition of her role as the project director and her leadership in bringing this seminal work to fruition.

Nursys e-Notify® is designated to be a free service for institutions that employ nurses or maintain a registry of nurses. This system provides automatic licensure, discipline and publicly available notifications quickly, easily and securely, fulfilling NCSBN’s mission to protect the public. Nursys is the only national database for licensure verification, discipline for registered nurses (RNs), licensed practical/vocational nurses (LPN/VNs) and advanced practice registered nurses (APRNs). Data are pushed directly from participating boards of nursing’s (BONs) databases through frequent, secured updates.

NCSBN received the designation of American National Standards Institute (ANSI) Accredited Standards Developer Organization. This designation is for the purpose of developing and promoting increased recognition and voluntary adoption of standards of excellence in the regulation of nursing practice through nurse licensure and competency assessment throughout the U.S. and its territories.

A white paper, Nursing Regulation Recommendations for Distance Education in Prelicensure Nursing Programs, key definitions, regulatory guidelines, and model education rule and act revisions about distance education were produced. Also, for the first time, every requirement BONs have for distance education programs is now available in one convenient location on the NCSBN website.

April 1 marked the 20th anniversary of the first NCLEX Examination administered via computerized adaptive testing (CAT). In 1994, NCSBN was the first organization to implement this technology for nationwide licensure examination. Since then, more than 4.5 million candidates for nurse licensure have taken the exam domestically and internationally.
U.S. BOARDS OF NURSING REGULATE MORE THAN 4.5 MILLION LICENSED NURSES.
CEO Kathy Apple, MS, RN, FAAN, received the 2013 Ben Shimberg Public Service Award from the Citizen’s Advocacy Center (CAC). She delivered the Ben Shimberg Memorial Lecture during the CAC annual meeting.

NCSBN debuted two new videos designed to educate nurses on a variety of issues important for safe nursing practice. The “Professional Boundaries in Nursing” video explains the continuum of professional behavior and the consequences of boundary crossings, boundary violations and professional sexual misconduct. The “Substance Use Disorder in Nursing” video helps nurse managers and nurses identify the warning signs of substance use disorder (SUD), provides guidelines for prevention, education and intervention. Supporting these two videos, NCSBN provides a variety of resources that can educate nurses about professional boundaries and substance use disorder including online courses, brochures and posters.

NCSBN has distributed more than 1.6 million outreach brochures free of charge to both the nursing community and the public at large. Brochure topics range from consumer-oriented materials like “A Health Care Consumer’s Guide to Advanced Practice Registered Nursing” and “Your State Board of Nursing Works for You: A Health Care Consumer’s Guide,” to resources specifically aimed at nurses and nursing students such as “A Nurse’s Guide to Professional Boundaries”; “A Nurse’s Guide to the Use of Social Media” and “State and Territorial Boards of Nursing: What Every Nurse Needs to Know.” Distributed to more than 4,000 hospitals, long-term care facilities, nursing schools, associations, organizations and consumer groups in the U.S., Canada and overseas, the brochures are part of NCSBN’s extensive offerings for nurses and consumers that include videos, books, research briefs, white papers and position statements.

NCSBN supports online collaboration of its membership with survey tools, wikis, discussion forums and live webinars/webcasts. Educational resources are available for both membership and external audiences in video and online course formats. User views of the 18 educational and promotional videos in the NCSBN catalog totaled 90,000 during FY14. NCSBN records presentations at its events—views of the 260 presentations from 53 past events totaled 4,800 during FY14.

Online course offerings for external audiences are available through the NCSBN Learning Extension campus located at learningext.com. NCSBN Learning Extension delivered 55,000 online courses during FY14. The online campus catalog of 52 courses covers a range of subjects, including continuing education courses for nurses, preparatory courses for licensure exam candidates, and item writing and test development courses for nursing faculty. Since its inception in 1998, the Learning Extension has reached more than 350,000 users in 120 countries.
The NCSBN Center for Regulatory Excellence Grant Program has awarded more than $11 million in grants.
The eighth group of Fellows of the NCSBN Institute of Regulatory Excellence (IRE) was inducted. The IRE began in 2004 with the purpose of providing BONs with high quality regulatory education, expanding the body of knowledge related to regulation through research and scholarly work, developing the capacity of regulators to become expert leaders, and developing a network of regulators who collaborate to improve regulatory practices and outcomes. The IRE Fellowship Program is a four-year comprehensive educational and professional development program designed for current or former regulators who want to enhance their knowledge of and leadership in nursing regulation. The program includes experiences in analyzing issues involving public policy and regulation, strategic planning, patient safety and communication. It also requires the application of evidence-based concepts in decision making and leadership.

NCSBN affirmed its endorsement of a uniform mutual recognition model for state-based nurse licensure to enhance public protection and use of telehealth technology for access to health care as well as facilitate the mobility of nurses.

Leader to Leader, the biannual newsletter for nursing educators, disseminates information and stimulates dialogue between the educational community and NCSBN. The addition of guest authors to the publication, in addition to in-depth interviews with nurse regulators brings to its readers a wealth of knowledge about new programs, projects and initiatives in nursing education.

NCSBN added to its body of research with the publication of new research briefs titled, 2013 Canadian RN Practice Analysis: Applicability of the 2013 NCLEX-RN Test Plan to the Canadian Testing Population and 2012 and 2013 Nurse Licensee Volume and NCLEX Examination Statistics.
MESSAGE FROM THE CEO AND PRESIDENT

By implementing NCSBN’s strategic initiatives for 2014–16 over the past year, the NCSBN Board of Directors (BOD), member boards (MBs) and NCSBN staff progressed toward achieving these benchmarks.

Acknowledging both legislative and media attention on health care provider interstate compacts and the importance of the Nurse Licensure Compact (NLC) in light of the movement by other allied health regulatory bodies to establish their own compacts, much of the work of the past year revolved around potential revisions to the NLC.

Leonard J. Marcus, PhD, director of the Program for Health Care Negotiation and Conflict Resolution at Harvard University, and founding co-director of the National Preparedness Leadership Initiative (NPLI) helped to shape and facilitate the discussion. This yearlong examination of the NLC was done to ensure that changes that need to be made reflect the current regulatory landscape and that all MBs have the chance to contribute to revisions.

NCSBN was granted accreditation as a Standards Development Organization (SDO) by the American National Standards Institute (ANSI), joining an elite group of organizations recognized for contributions to ensure that products, programs, services and systems are safe and perform as expected. NCSBN is the second health care regulatory body to be granted this accreditation and it affords us the opportunity to establish foundational regulatory standards.

Opening the avenues of communications amongst the full membership of the boards of directors of the Tri-Regulator Collaborative was historic. While the leadership of the Federation of State Medical Boards (FSMB), National Association of Boards of Pharmacy (NABP) and NCSBN had worked together for several years, their respective boards had not. The meeting that took place established ties and built upon work of the leadership focusing on issues of common concern, and looked for areas where the unity of the group could strengthen all.

CONTINUED ON PAGE 15
## Fiscal Year 2014 Operating Statements

### Sources of Revenue

<table>
<thead>
<tr>
<th>Source</th>
<th>Amount</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Examination fees</td>
<td>$62,350,600</td>
<td>81</td>
</tr>
<tr>
<td>Investment earnings</td>
<td>$5,036,804</td>
<td>7</td>
</tr>
<tr>
<td>Membership fees</td>
<td>$24,025</td>
<td>&lt;1</td>
</tr>
<tr>
<td>Other program services</td>
<td>$9,288,670</td>
<td>12</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>$76,700,099</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>

### Program Services

<table>
<thead>
<tr>
<th>Service</th>
<th>Amount</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nurse competency</td>
<td>$45,841,489</td>
<td>70</td>
</tr>
<tr>
<td>Nurse practice and regulatory outcome</td>
<td>$7,839,676</td>
<td>12</td>
</tr>
<tr>
<td>Information</td>
<td>$8,640,193</td>
<td>13</td>
</tr>
<tr>
<td>Management and general</td>
<td>$3,600,472</td>
<td>5</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>$65,921,830</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>

**Net Surplus**: $10,778,269

Fiscal Year Ending Sept. 30, 2014
We are justifiably proud of our groundbreaking National Stimulation Study which was published last year. This award-winning research is a seminal work that will both inform our MBs and educators and serve as a foundational study for other researchers.

Cooperation between regulators and other APRN shareholders is part of NCSBN’s strategic initiative of collaborative leadership to accomplish a crucial goal. Work continued on the APRN Consensus Model so that states adopt the regulatory requirements for licensure, accreditation, certification and education for APRNs. Nursing regulators know that the benefits will be far-reaching for health care professionals, regulators and consumers.

Implementing distance education in prelicensure nursing programs was confusing for nursing educators and an area of frustration for our MBs. The hard work of the Distance Learning Education Committee brought clarity to this complex issue with the publication of its white paper, and produced a variety of valuable resources while better fostering improved communication between the various stakeholders.
PURPOSE AND PROGRESS

The National Council of State Boards of Nursing (NCSBN®) is a not-for-profit organization whose membership comprises the boards of nursing in the 50 states, the District of Columbia, and four U.S. territories — American Samoa, Guam, Northern Mariana Islands and the Virgin Islands. There are also 21 associate members.

Founded in 1978 as an independent, 501(c)(3) not-for-profit organization, NCSBN was created to lessen the burdens of state governments and bring together boards of nursing (BONs) to act and counsel together on matters of common interest.

The member boards that comprise NCSBN protect the public by ensuring that safe and competent nursing care is provided by licensed nurses. NCSBN is the vehicle through which boards of nursing act and counsel together on matters of common interest. These member boards are charged with the responsibility of providing regulatory excellence for public health, safety and welfare. They recognize that the best way to guard the safety of the public is to ensure that nurses entering the workforce have the necessary knowledge,
SINCE ITS INCEPTION IN 1998, THE LEARNING EXTENSION HAS REACHED MORE THAN 350,000 USERS IN 120 COUNTRIES. 55,000 ONLINE COURSES WERE DELIVERED DURING FY14.
To meet that goal, NCSBN’s focus is devoted to developing a psychometrically sound and legally defensible nurse licensure examination consistent with current nursing practice. The NCLEX-RN® and NCLEX-PN® Examinations developed and administered by NCSBN are constantly and rigorously evaluated to keep pace with the rapidly evolving health care environment.

NCSBN also maintains the Nursys® database that coordinates national publicly available nurse licensure information. The NCLEX® examinations remain the instruments by which most people know NCSBN. As evidence of its long history of continual efforts to remain on the cutting edge of examination technology, NCSBN became the first organization to implement computerized adaptive testing (CAT) for nationwide licensure examinations in 1994. NCSBN also develops and administers the largest competency evaluation for nurse aides/nursing assistants (NAs) known as the National Nurse Aide Assessment Program (NNAAP®). Additionally, NCSBN develops the Medication Aide Certification Examination (MACE®), designed for NAs who choose to receive additional training to become a certified medication aide/assistant. The purpose of MACE is to ensure that individuals who administer medication to residents in assisted living facilities and comprehensive personal care homes have the basic knowledge and skills needed to perform their duties.

The ongoing assessment of these examinations includes research that gathers job analysis data from entry-level nurses and aides that ultimately contribute to refinement and adaptation of the tests. In addition, the continual refinement of the NCLEX examinations also incorporates the work of item writers, item reviewers and panels of judges made up of practicing nurses or nurse educators who work directly with entry-level nurses and aides. The item writers who create the examination questions, also known as items, and the reviewers who assess the items are responsible for the content in the NCLEX examinations. The panel of judges recommends potential NCLEX passing standards to the NCSBN Board of Directors. All of these measures, coupled with a determination to remain on the cutting edge of testing technology, ensure that the NCLEX examinations and NNAAP evaluations are an accurate reflection of current nursing practice.
There was a 70% increase in the amount of outreach materials provided from FY13 to FY14. Since 2011, more than 1.6 million brochures and posters have been distributed by NCSBN.
PRODUCTS AND SERVICES

PUBLICATIONS AND WEB RESOURCES

NCSBN produces a wide variety of publications including books, white papers, brochures and research briefs that focus on the NCLEX-RN® and NCLEX-PN® Examinations, as well as health care issues and activities, in addition to conducting its own research studies by addressing some of today’s most important nursing practice issues. These publications present in-depth information and best practice techniques to enhance perspective and contribute to the nursing knowledge base. These publications are available for download free of charge from the NCSBN website.

An online library of resources and tools also includes videos that count among its catalog subjects such as professional boundaries in nursing, substance use disorder in nursing, the Nurse Licensure Compact explained and NCLEX. Additionally, recorded webinars, toolkits and presentations are available for download.

ONLINE COURSES

NCSBN Learning Extension is a pioneer in e-learning for the nursing community, launching the first online preparation course for the NCLEX-RN Examination in 1998. Currently, more than 50 online courses are offered, promoting safe nursing practices to nurses, student nurses and nursing faculty. Rich in content and features, the online courses offer interactive and fun learning experiences, which facilitate better understanding of the topics presented.

NURSYS®

Nursys® is the only national database for verification of nurse licensure, discipline and practice privileges for registered nurses (RNs) and licensed practical/vocational nurses (LPN/VNs) licensed in participating jurisdictions, including all states in the Nurse Licensure Compact (NLC). The Nursys® Licensure QuickConfirm product allows employers and recruiters to retrieve necessary licensure and discipline documentation in one convenient location. Nursys® e-Notify, the newest product, is an innovative nurse licensure notification system that automatically provides employers licensure and publicly available discipline data as it is entered into Nursys by boards of nursing.
NCLEX® OVERVIEW

From April 1, 1994 through Sept. 30, 2014, more than 4.5 million candidates for nurse licensure have taken NCLEX® examinations via CAT. For the fiscal year ending Sept. 30, 2014, 293,750 candidates took the NCLEX-RN® and NCLEX-PN® Examinations. More than 105,400 nurse licensure candidates have taken the NCLEX® in international test centers.

**TOP FIVE COUNTRIES (WITH RESPECT TO VOLUME)**

Pass Rates – Fiscal Year 2014 – First-time Internationally Educated Candidates

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Philippines</td>
<td>Philippines</td>
<td>Philippines</td>
<td>Philippines</td>
<td>Philippines</td>
</tr>
<tr>
<td></td>
<td>1,082</td>
<td>860</td>
<td>1,091</td>
<td>1,302</td>
<td>4,035</td>
</tr>
<tr>
<td>2</td>
<td>India</td>
<td>India</td>
<td>India</td>
<td>India</td>
<td>India</td>
</tr>
<tr>
<td></td>
<td>246</td>
<td>220</td>
<td>200</td>
<td>527</td>
<td>987</td>
</tr>
<tr>
<td>3</td>
<td>Canada</td>
<td>Canada</td>
<td>Canada</td>
<td>Canada</td>
<td>Canada</td>
</tr>
<tr>
<td></td>
<td>148</td>
<td>138</td>
<td>162</td>
<td>189</td>
<td>637</td>
</tr>
<tr>
<td>4</td>
<td>Puerto Rico</td>
<td>Puerto Rico</td>
<td>Puerto Rico</td>
<td>Puerto Rico</td>
<td>Puerto Rico</td>
</tr>
<tr>
<td></td>
<td>148</td>
<td>111</td>
<td>113</td>
<td>96</td>
<td>454</td>
</tr>
<tr>
<td>5</td>
<td>South Korea</td>
<td>South Korea</td>
<td>South Korea</td>
<td>South Korea</td>
<td>South Korea</td>
</tr>
<tr>
<td></td>
<td>124</td>
<td>111</td>
<td>113</td>
<td>96</td>
<td>454</td>
</tr>
</tbody>
</table>

In this table, the number of first-time internationally educated candidates includes both RNs and PNs.

**NCLEX® PASS RATES - RN**

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>RN - Diploma</td>
<td>267</td>
<td>183</td>
<td>594</td>
<td>340</td>
<td>1,244</td>
</tr>
<tr>
<td>RN - BSN</td>
<td>4,881</td>
<td>3,676</td>
<td>16,370</td>
<td>14,399</td>
<td>56,970</td>
</tr>
<tr>
<td>RN - ADN</td>
<td>7,405</td>
<td>4,804</td>
<td>21,305</td>
<td>23,773</td>
<td>87,900</td>
</tr>
<tr>
<td>Special Program Codes</td>
<td>12</td>
<td>7</td>
<td>6</td>
<td>12</td>
<td>39</td>
</tr>
<tr>
<td>Total - First-time, U.S. Educated</td>
<td>12,565</td>
<td>8,670</td>
<td>38,275</td>
<td>43,746</td>
<td>155,585</td>
</tr>
<tr>
<td>Repeat, U.S. Educated</td>
<td>11,429</td>
<td>5,155</td>
<td>8,310</td>
<td>4,511</td>
<td>53,989</td>
</tr>
<tr>
<td>First-time, Internationally Educated</td>
<td>2,101</td>
<td>617</td>
<td>1,737</td>
<td>584</td>
<td>3,046</td>
</tr>
<tr>
<td>Repeat, Internationally Educated</td>
<td>3,366</td>
<td>550</td>
<td>2,800</td>
<td>528</td>
<td>5,084</td>
</tr>
<tr>
<td>ALL CANDIDATES</td>
<td>29,461</td>
<td>14,992</td>
<td>51,122</td>
<td>49,405</td>
<td>219,751</td>
</tr>
</tbody>
</table>

**NCLEX® PASS RATES - PN**

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>First-time, U.S. Educated</td>
<td>12,024</td>
<td>9,755</td>
<td>14,096</td>
<td>11,813</td>
<td>56,542</td>
</tr>
<tr>
<td>Repeat, U.S. Educated</td>
<td>3,844</td>
<td>1,385</td>
<td>3,531</td>
<td>1,214</td>
<td>15,255</td>
</tr>
<tr>
<td>First-time, Internationally Educated</td>
<td>218</td>
<td>116</td>
<td>214</td>
<td>115</td>
<td>1,340</td>
</tr>
<tr>
<td>Repeat, Internationally Educated</td>
<td>199</td>
<td>42</td>
<td>190</td>
<td>35</td>
<td>862</td>
</tr>
<tr>
<td>ALL CANDIDATES</td>
<td>16,285</td>
<td>11,298</td>
<td>18,031</td>
<td>13,177</td>
<td>73,999</td>
</tr>
</tbody>
</table>
SINCE 1994, MORE THAN 4.5 MILLION CANDIDATES FOR U.S. NURSE LICENSURE HAVE TAKEN THE NCLEX® EXAM VIA COMPUTERIZED ADAPTIVE TESTING (CAT).
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td># TESTING</td>
<td>% PASSING</td>
<td># TESTING</td>
<td>% PASSING</td>
<td># TESTING</td>
</tr>
<tr>
<td>Alabama</td>
<td>210</td>
<td>70.0</td>
<td>716</td>
<td>589</td>
<td>1,208</td>
</tr>
<tr>
<td>Alaska</td>
<td>25</td>
<td>80.0</td>
<td>111</td>
<td>92</td>
<td>84</td>
</tr>
<tr>
<td>American Samoa</td>
<td>–</td>
<td>–</td>
<td>–</td>
<td>–</td>
<td>1</td>
</tr>
<tr>
<td>Arizona</td>
<td>226</td>
<td>73.9</td>
<td>1,912</td>
<td>928</td>
<td>933</td>
</tr>
<tr>
<td>Arkansas</td>
<td>99</td>
<td>78.8</td>
<td>631</td>
<td>515</td>
<td>342</td>
</tr>
<tr>
<td>California – RN</td>
<td>993</td>
<td>70.0</td>
<td>2,152</td>
<td>1,894</td>
<td>3,306</td>
</tr>
<tr>
<td>Colorado</td>
<td>232</td>
<td>80.6</td>
<td>610</td>
<td>547</td>
<td>703</td>
</tr>
<tr>
<td>Connecticut</td>
<td>172</td>
<td>73.2</td>
<td>343</td>
<td>293</td>
<td>352</td>
</tr>
<tr>
<td>Delaware</td>
<td>31</td>
<td>51.6</td>
<td>151</td>
<td>128</td>
<td>152</td>
</tr>
<tr>
<td>District of Columbia</td>
<td>18</td>
<td>72.2</td>
<td>18</td>
<td>105</td>
<td>87</td>
</tr>
<tr>
<td>Florida</td>
<td>1,825</td>
<td>64.5</td>
<td>2,980</td>
<td>2,304</td>
<td>3,706</td>
</tr>
<tr>
<td>Georgia – RN</td>
<td>189</td>
<td>70.4</td>
<td>1,102</td>
<td>927</td>
<td>1,563</td>
</tr>
<tr>
<td>Guam</td>
<td>15</td>
<td>80.0</td>
<td>4</td>
<td>75.0</td>
<td>6</td>
</tr>
<tr>
<td>Hawaii</td>
<td>118</td>
<td>70.3</td>
<td>200</td>
<td>140</td>
<td>98</td>
</tr>
<tr>
<td>Idaho</td>
<td>38</td>
<td>75.8</td>
<td>262</td>
<td>236</td>
<td>227</td>
</tr>
<tr>
<td>Illinois</td>
<td>471</td>
<td>68.8</td>
<td>1,550</td>
<td>1,318</td>
<td>1,891</td>
</tr>
<tr>
<td>Indiana</td>
<td>276</td>
<td>62.7</td>
<td>961</td>
<td>817</td>
<td>1,986</td>
</tr>
<tr>
<td>Iowa</td>
<td>180</td>
<td>68.9</td>
<td>465</td>
<td>382</td>
<td>600</td>
</tr>
<tr>
<td>Kansas</td>
<td>184</td>
<td>81.5</td>
<td>414</td>
<td>320</td>
<td>1,161</td>
</tr>
<tr>
<td>Kentucky</td>
<td>140</td>
<td>79.7</td>
<td>830</td>
<td>696</td>
<td>1,187</td>
</tr>
<tr>
<td>Louisiana – RN</td>
<td>86</td>
<td>69.8</td>
<td>963</td>
<td>848</td>
<td>590</td>
</tr>
<tr>
<td>Maine</td>
<td>32</td>
<td>93.8</td>
<td>134</td>
<td>119</td>
<td>400</td>
</tr>
<tr>
<td>Maryland</td>
<td>196</td>
<td>64.3</td>
<td>999</td>
<td>825</td>
<td>890</td>
</tr>
<tr>
<td>Massachusetts</td>
<td>181</td>
<td>59.1</td>
<td>338</td>
<td>212</td>
<td>759</td>
</tr>
<tr>
<td>Michigan</td>
<td>376</td>
<td>69.4</td>
<td>1,384</td>
<td>1,195</td>
<td>1,763</td>
</tr>
<tr>
<td>Minnesota</td>
<td>107</td>
<td>57.0</td>
<td>849</td>
<td>728</td>
<td>1,395</td>
</tr>
<tr>
<td>Mississippi</td>
<td>47</td>
<td>46.8</td>
<td>418</td>
<td>345</td>
<td>1,165</td>
</tr>
<tr>
<td>Missouri</td>
<td>289</td>
<td>73.7</td>
<td>1,093</td>
<td>944</td>
<td>1,165</td>
</tr>
<tr>
<td>Montana</td>
<td>20</td>
<td>75.0</td>
<td>135</td>
<td>114</td>
<td>199</td>
</tr>
<tr>
<td>Nebraska</td>
<td>120</td>
<td>67.5</td>
<td>194</td>
<td>165</td>
<td>355</td>
</tr>
<tr>
<td>Nevada</td>
<td>101</td>
<td>66.3</td>
<td>323</td>
<td>290</td>
<td>356</td>
</tr>
<tr>
<td>New Hampshire</td>
<td>27</td>
<td>63.0</td>
<td>37</td>
<td>32</td>
<td>347</td>
</tr>
<tr>
<td>New Jersey</td>
<td>363</td>
<td>69.4</td>
<td>500</td>
<td>420</td>
<td>471</td>
</tr>
<tr>
<td>New Mexico</td>
<td>134</td>
<td>82.1</td>
<td>252</td>
<td>215</td>
<td>235</td>
</tr>
<tr>
<td>New York</td>
<td>688</td>
<td>64.1</td>
<td>1,941</td>
<td>1,593</td>
<td>1,830</td>
</tr>
<tr>
<td>North Carolina</td>
<td>125</td>
<td>73.6</td>
<td>703</td>
<td>642</td>
<td>2,640</td>
</tr>
<tr>
<td>North Dakota</td>
<td>11</td>
<td>54.5</td>
<td>86</td>
<td>74</td>
<td>375</td>
</tr>
<tr>
<td>Northern Mariana Islands</td>
<td>10</td>
<td>3.00</td>
<td>5</td>
<td>0.00</td>
<td>4</td>
</tr>
<tr>
<td>Ohio</td>
<td>1,191</td>
<td>801.3</td>
<td>1,886</td>
<td>1,523</td>
<td>1,474</td>
</tr>
<tr>
<td>Oklahoma</td>
<td>60</td>
<td>58.3</td>
<td>437</td>
<td>372</td>
<td>848</td>
</tr>
<tr>
<td>Oregon</td>
<td>111</td>
<td>84.7</td>
<td>160</td>
<td>128</td>
<td>351</td>
</tr>
<tr>
<td>Pennsylvania</td>
<td>528</td>
<td>691.5</td>
<td>1,225</td>
<td>1,065</td>
<td>2,189</td>
</tr>
<tr>
<td>Rhode Island</td>
<td>33</td>
<td>66.7</td>
<td>177</td>
<td>151</td>
<td>101</td>
</tr>
<tr>
<td>South Carolina</td>
<td>180</td>
<td>78.3</td>
<td>653</td>
<td>582</td>
<td>1,053</td>
</tr>
<tr>
<td>South Dakota</td>
<td>38</td>
<td>81.6</td>
<td>182</td>
<td>157</td>
<td>351</td>
</tr>
<tr>
<td>Tennessee</td>
<td>163</td>
<td>69.9</td>
<td>1,175</td>
<td>1,027</td>
<td>1,335</td>
</tr>
<tr>
<td>Texas</td>
<td>999</td>
<td>708.9</td>
<td>3,768</td>
<td>3,143</td>
<td>4,061</td>
</tr>
<tr>
<td>Utah</td>
<td>109</td>
<td>75.2</td>
<td>411</td>
<td>354</td>
<td>760</td>
</tr>
<tr>
<td>Vermont</td>
<td>4</td>
<td>73.0</td>
<td>11</td>
<td>110</td>
<td>176</td>
</tr>
<tr>
<td>Virgin Islands</td>
<td>4</td>
<td>50.0</td>
<td>2</td>
<td>50.0</td>
<td>2</td>
</tr>
<tr>
<td>Virginia</td>
<td>338</td>
<td>237.1</td>
<td>912</td>
<td>804</td>
<td>1,177</td>
</tr>
<tr>
<td>Washington</td>
<td>186</td>
<td>73.2</td>
<td>546</td>
<td>471</td>
<td>577</td>
</tr>
<tr>
<td>West Virginia – RN</td>
<td>59</td>
<td>54.2</td>
<td>141</td>
<td>119</td>
<td>403</td>
</tr>
<tr>
<td>Wisconsin</td>
<td>200</td>
<td>74.0</td>
<td>1,068</td>
<td>948</td>
<td>1,251</td>
</tr>
<tr>
<td>Wyoming</td>
<td>14</td>
<td>85.7</td>
<td>62</td>
<td>55</td>
<td>94</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td>12,565</td>
<td>8,670</td>
<td>38,276</td>
<td>32,415</td>
<td>50,756</td>
</tr>
</tbody>
</table>

Percentage of NCLEX® passing rates for first-time, U.S. educated RN graduates, as of 2014.
293,750 CANDIDATES TOOK THE NCLEX-RN® AND NCLEX-PN® EXAMINATIONS DURING FY14.
## NCLEX® Pass Rates – PN
### First-Time, U.S. Educated

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>North Dakota</td>
<td>20,190</td>
<td>95.3</td>
<td>95.1</td>
<td>91.0</td>
<td>92.2</td>
</tr>
<tr>
<td>Pennsylvania</td>
<td>3,071,000</td>
<td>88.9</td>
<td>88.9</td>
<td>88.9</td>
<td>88.9</td>
</tr>
<tr>
<td>Maine</td>
<td>11,190</td>
<td>95.0</td>
<td>95.0</td>
<td>95.0</td>
<td>95.0</td>
</tr>
<tr>
<td>Minnesota</td>
<td>1,519,000</td>
<td>88.9</td>
<td>88.9</td>
<td>88.9</td>
<td>88.9</td>
</tr>
<tr>
<td>Missouri</td>
<td>250,000</td>
<td>88.9</td>
<td>88.9</td>
<td>88.9</td>
<td>88.9</td>
</tr>
<tr>
<td>New Mexico</td>
<td>19,000</td>
<td>95.0</td>
<td>95.0</td>
<td>95.0</td>
<td>95.0</td>
</tr>
<tr>
<td>New York</td>
<td>29,000</td>
<td>88.9</td>
<td>88.9</td>
<td>88.9</td>
<td>88.9</td>
</tr>
<tr>
<td>North Carolina</td>
<td>143,000</td>
<td>88.9</td>
<td>88.9</td>
<td>88.9</td>
<td>88.9</td>
</tr>
<tr>
<td>North Dakota</td>
<td>20,190</td>
<td>95.3</td>
<td>95.1</td>
<td>91.0</td>
<td>92.2</td>
</tr>
<tr>
<td>Northern Mariana Islands</td>
<td>1,100</td>
<td>88.9</td>
<td>88.9</td>
<td>88.9</td>
<td>88.9</td>
</tr>
<tr>
<td>Ohio</td>
<td>855,000</td>
<td>88.9</td>
<td>88.9</td>
<td>88.9</td>
<td>88.9</td>
</tr>
<tr>
<td>Oklahoma</td>
<td>172,000</td>
<td>88.9</td>
<td>88.9</td>
<td>88.9</td>
<td>88.9</td>
</tr>
<tr>
<td>Oregon</td>
<td>156,000</td>
<td>88.9</td>
<td>88.9</td>
<td>88.9</td>
<td>88.9</td>
</tr>
<tr>
<td>Pennsylvania</td>
<td>711,000</td>
<td>88.9</td>
<td>88.9</td>
<td>88.9</td>
<td>88.9</td>
</tr>
<tr>
<td>Rhode Island</td>
<td>22,000</td>
<td>88.9</td>
<td>88.9</td>
<td>88.9</td>
<td>88.9</td>
</tr>
<tr>
<td>South Carolina</td>
<td>158,000</td>
<td>88.9</td>
<td>88.9</td>
<td>88.9</td>
<td>88.9</td>
</tr>
<tr>
<td>South Dakota</td>
<td>17,000</td>
<td>88.9</td>
<td>88.9</td>
<td>88.9</td>
<td>88.9</td>
</tr>
<tr>
<td>Tennessee</td>
<td>370,000</td>
<td>88.9</td>
<td>88.9</td>
<td>88.9</td>
<td>88.9</td>
</tr>
<tr>
<td>Texas</td>
<td>1,089,000</td>
<td>88.9</td>
<td>88.9</td>
<td>88.9</td>
<td>88.9</td>
</tr>
<tr>
<td>Utah</td>
<td>32,000</td>
<td>88.9</td>
<td>88.9</td>
<td>88.9</td>
<td>88.9</td>
</tr>
<tr>
<td>Vermont</td>
<td>4,000</td>
<td>88.9</td>
<td>88.9</td>
<td>88.9</td>
<td>88.9</td>
</tr>
<tr>
<td>Virgin Islands</td>
<td>2,000</td>
<td>88.9</td>
<td>88.9</td>
<td>88.9</td>
<td>88.9</td>
</tr>
<tr>
<td>Virginia</td>
<td>254,000</td>
<td>88.9</td>
<td>88.9</td>
<td>88.9</td>
<td>88.9</td>
</tr>
<tr>
<td>Washington</td>
<td>182,000</td>
<td>88.9</td>
<td>88.9</td>
<td>88.9</td>
<td>88.9</td>
</tr>
<tr>
<td>West Virginia – PN</td>
<td>82,000</td>
<td>88.9</td>
<td>88.9</td>
<td>88.9</td>
<td>88.9</td>
</tr>
<tr>
<td>Wisconsin</td>
<td>101,000</td>
<td>88.9</td>
<td>88.9</td>
<td>88.9</td>
<td>88.9</td>
</tr>
<tr>
<td>Wyoming</td>
<td>8,000</td>
<td>88.9</td>
<td>88.9</td>
<td>88.9</td>
<td>88.9</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>12,024,000</strong></td>
<td><strong>91.1</strong></td>
<td><strong>91.1</strong></td>
<td><strong>91.1</strong></td>
<td><strong>91.1</strong></td>
</tr>
</tbody>
</table>
NCSBN BOARD OF DIRECTORS 2013–2014

Front row, left to right: Shirley A. Brekken, Myra A. Broadway, Julia L. George

Back row, left to right: Gloria Damgaard, Ann L. O’Sullivan, Lanette Anderson, Joe Baker, Jr., Betsy Houchen, Nathan Goldman, Katherine A. Thomas, Susan K. Odom
NCSBN BOARD OF DIRECTORS

The work of the NCSBN Board of Directors remains focused on the implementation and execution of the organization’s strategic initiatives and objectives.

DURING FISCAL YEAR 2014

MYRA A. BROADWAY, JD, MS, RN
President

SHIRLEY A. BREKKEN, MS, RN
Vice President

JULIA L. GEORGE, MSN, RN, FRE
Treasurer

SUSAN K. ODOM, PhD, RN, CCRN, FRE
Area I Director

LANETTE ANDERSON, JD, MSN, RN
Area II Director

KATHERINE A. THOMAS, MN, RN, FAAN
Area III Director

ANN L. O’SULLIVAN, PhD, FAAN, CRNP
Area IV Director

JOE BAKER, JR.
Director-at-Large

GLORIA DAMGAARD, MS, RN, FRE
Director-at-Large

NATHAN GOLDMAN, JD
Director-at-Large

BETSY HOUCHEN, JD, MS, RN
Director-at-Large
NCSBN STAFF MEMBERS

AS OF MARCH 1, 2015

EXECUTIVE OFFICE

Kathy Apple, MS, RN, FAAN
Chief Executive Officer

Alicia Byrd, RN
Director, Member Relations

Joseph Dudzik, MSC, SPHR
Director, Human Resources

Lindsey Erickson, MS
Manager, Special Projects,
Executive Office

Michael Grossenbacher
Associate, Communications,
Marketing & Communications

Andrew Hicks
Associate, Member Relations

Dawn M. Kappel, MA
Director, Marketing &
Communications

Christine McNeela, PHR
Manager, Human Resources

Colleen Neubauer, CMP
Senior Meetings Manager,
Marketing & Communications

James Puente, MS
Director, Nurse Licensure Compact
(NLC), Executive Office

Greg Pulaski, MS, PMP
Director, Performance Measurement
and Standard Setting,
Executive Office

Kalona Rego
Graphic Design Associate,
Marketing & Communications

Ashby Rosenberger
Coordinator, Executive Office

Haley Streibich
Coordinator, Nurse Licensure
Compact (NLC), Executive Office

Elliot Vice
Director, Government Affairs,
Executive Office

Ann Watkins
Assistant to Chief Executive Officer

CONTINUED ON NEXT PAGE
THERE WERE MORE THAN 90,000 VIEWS OF NCSBN’S 18 EDUCATIONAL AND PROMOTIONAL VIDEOS DURING FY14.
EXAMINATIONS

Philip Dickison, PhD, RN
Chief Officer, Examinations

Melissa Cunningham
Senior Operations Coordinator, Examinations

Jessica Dangles, MS
Coordinator, Examinations

Lauren Derby, MSN, RN
RN Test Development Associate, Examinations

Melissa Franke
Product Development Manager, Examinations

Jennifer Gallagher
Operations Manager, Examinations

Jin Gong, MS
SAS Programmer, Examinations

Daniel Hydzik
Senior Operations Coordinator, Examinations

Chelsia Kelley
Manager, Examinations

Doyoung Kim, PhD
Senior Psychometrician, Examinations

Michelle Lee
Operations Coordinator, Examinations

Xiao Luo, PhD
Psychometrician, Examinations

Samantha Noworul
Operations Coordinator, Examinations

Hong Qian, PhD
Psychometrician, Examinations

Rachel Reichman, MA
Test Development Associate, Examinations

Jolene Riordan
Test Development Associate, Examinations

Logan West
Senior Operations Coordinator, Examinations

Nicole Williams, MSN, RN-BC
Nursing Content Manager, Examinations

Ada Woo, PhD, MA
Director, Measurement and Testing, Examinations

Terrence Wright, MA
Test Development Manager, Examinations

CONTINUED ON NEXT PAGE
FINANCE

Robert Clayborne, MBA, CPA
Chief Financial Officer

Johana Arnold
Accounting Coordinator, Finance

Gloria Evans-Melton, CPA
Associate Director, Finance

Steve Kaiser
Assistant Controller, Finance

Mary Trucksa
Accounting Associate, Finance

Mattie Williams
Accounting Associate, Finance

INFORMATION RESOURCES

Nur Rajwany, MS
Chief Information Officer

Jeyalakshmi Balachandran, MS
Senior Quality Assurance Analyst, ORBS, Information Technology

Rajeshwari Bommannavar, MS
Senior Developer, ORBS, Information Technology

Matthew Bunzol
Nursys® Product Support Associate, Information Technology

Shilpa Challam
Quality Assurance Analyst, Information Technology

Desiree Díaz
Nursys® Customer Service Coordinator, Information Technology

P. J. Donahue
IT Helpdesk Administrator, Information Technology

Megan Dunham
Digital Media & Design Manager, Interactive Services

Colleen Everett
Business Analyst, ORBS, Information Technology

Ben Gonzalez
Associate Infrastructure Manager, Information Technology

Dorothy Green
Nursys® Associate Operations Manager, Information Technology

Jessica Hansen
Associate Director, Interactive Services

Debbie Hart, MBA
Project Specialist, Information Technology

Albert Hincapie
Senior Developer, Information Technology

James Dean Hope
Nursys® Senior Product Support Associate, Information Technology

Mark Huffman
Project Manager, Information Technology

Angela Johnston
Business Analyst, Information Technology

Christophel Kuizon
Developer, Information Technology

Ameena Lalani
Senior Database Administrator, ORBS, Information Technology

Joshua Lingwai
Senior Lead Developer, Information Technology

Candice Mack
Nursys® Customer Service Coordinator, Information Technology

Lavanya Pathak
Quality Assurance Analyst, Information Technology

Sandra Rhodes
Project Manager, Information Technology

Hillie Rodriguez
Customer Service Coordinator, ORBS, Information Technology

Chandra Sadhangiri
Senior Developer, ORBS, Information Technology

Narender Saraswati, MBA
Program Manager, ORBS, Information Technology

Suzanne Schnite, PMP
Associate Director, Information Technology

Amanda Schreiner
Senior Associate, Interactive Services

CONTINUED ON NEXT PAGE
Zach Sears
Network Administrator, Information Technology

Rajesh Sharma
Senior Developer, Information Technology

Damon Short, MA
Senior Database Administrator, Information Technology

Nicholas Smith
Senior Systems Engineer, Information Technology

Tammy Spangler
Director, Interactive Services

Matthew Sterzinger
Manager, Application Development, Information Technology

Brian Stoudemire, MBA
Business Analyst, ORBS, Information Technology

Saule Trainys
Senior User Experience Developer, Interactive Services

Diana Valenzuela Allen, MBA
Lead Business Analyst, ORBS, Information Technology

Jordan Villarreal
Senior Systems Engineer, Information Technology

Sanjeev Yarlagadda
Senior Quality Assurance Analyst, Information Technology

Laura Jarosz
Project Specialist, Regulatory Innovations

Linda Olson, PhD, RN, NEA-BC
Associate, Nursing Regulation

Beth Radtke, MS
Associate, Nursing Regulation

Kathleen Russell, JD, MN, RN
Associate, Nursing Regulation

Josephine Silvestre, MSN, RN
Associate, Regulatory Innovations

Richard Smiley, MS, MA
Statistician, Research

Nancy Spector, PhD, RN, FAAN
Director, Regulatory Innovations

Esther White, MS
Coordinator, Nursing Regulation

Elizabeth Hua Zhong, PhD, MEd
Associate, Research

Maryann Alexander, PhD, RN, FAAN
Chief Officer, Nursing Regulation

Jill Budden, PhD, MA
Associate, Research

Maureen Cahill, MSN, APN, CNS, RN
Associate, Nursing Regulation

Lindsey Gross
Coordinator, Research

Qiana Hampton, MBA, MHRM
Coordinator, Regulatory Innovations

NURSING REGULATION

Kathleen Russell, JD, MN, RN
Associate, Nursing Regulation

Josephine Silvestre, MSN, RN
Associate, Regulatory Innovations

Richard Smiley, MS, MA
Statistician, Research

Nancy Spector, PhD, RN, FAAN
Director, Regulatory Innovations

Esther White, MS
Coordinator, Nursing Regulation

Elizabeth Hua Zhong, PhD, MEd
Associate, Research
NCSBN COMMITTEES

DURING FISCAL YEAR 2014

AWARDS COMMITTEE

Patti Clapp, Texas
Jay P. Douglas, Virginia
Margaret E. Kelly, Washington
Karen McCumpsey, Arkansas
Paula S. Schenk, Kentucky

BYLAWS COMMITTEE

Nathan Goldman, Kentucky, Chair, Board Liaison
Denise Benbow, Texas
Amy Stone Murai, Hawaii
Caron Robertson, Massachusetts

COMMITMENT TO ONGOING REGULATORY EXCELLENCE (CORE) COMMITTEE

Joey Ridenour, Arizona, Chair
Vicki Lynn Allen, Idaho
Jim Cleghorn, Georgia
Tamara J. Cowen, Texas
Barbara Damchik-Dykes, Minnesota
Kim Glazier, Oklahoma
Paula R. Meyer, Washington
Chris Sansom, Nevada
Sue A. Tedford, Arkansas
A’lise Williams, Maryland
Ann L. O’Sullivan, Pennsylvania, Board Liaison

DISCIPLINE EFFECTIVE PRACTICES SUBCOMMITTEE

Valerie Smith, Arizona, Chair
Mary Blubaugh, Kansas
Barbara Damchik-Dykes, Minnesota
Anthony L. Diggs, Texas
Lisa Ferguson-Ramos, Ohio
Lisa Griffitts, Oklahoma
Eric Holsapple, Iowa
Chris Sansom, Nevada
Lori Scheidt, Missouri
Mary Trentham, Arkansas

DISTANCE LEARNING EDUCATION COMMITTEE

Bobby Lowery, North Carolina, Chair
Cynthia Gustafson, Montana
Crystal Higgins, Nebraska
Michelle L. Mayhew, West Virginia-PN
Nancy Murphy, South Carolina
Sabita Persaud, Maryland
Paula B. Saxby, Virginia
Mindy Schaffner, Washington
Betsy Houchen, Ohio, Board Liaison

EXECUTIVE OFFICER SUCCESSION RESOURCE COMMITTEE

Libby Lund, Tennessee, Chair
Louise R. Bailey, California-RN
Mary Blubaugh, Kansas
Elizabeth Kiefner Crawford, Indiana
Deb Haagenson, Minnesota
Carina Herman, British Columbia-PN
Gloria Damgaard, South Dakota, Board Liaison

CONTINUED ON NEXT PAGE
FINANCE COMMITTEE

Julia L. George, North Carolina, Treasurer
Deborah Bell, Texas
Dean Estes, Nevada
George J. Hebert, New Jersey
Lois E. Hoell, Washington
Cynthia York, Louisiana-RN

LEADERSHIP ACADEMY COMMITTEE

Peggy C. Walters, North Carolina, Chair
Pamela Ambush-Burris, Maryland
Rene Cronquist, Minnesota
Debra Scott, Nevada
Ellen C. Watson, Vermont
Catherine C. Woodard, Washington
Pamela Randolph, Arizona, LSC Liaison
Joe Baker, Jr., Florida, Board Liaison

INSTITUTE OF REGULATORY EXCELLENCE COMMITTEE

Linda D. Burhans, North Carolina, Chair
Jessie M. Colin, Florida
Lois Kazmier Halstead, Illinois
Bonita E. Jenkins, District of Columbia
Wendy Winslow, British Columbia-PN
Linda J. Young, South Dakota

LEADERSHIP SUCCESSION COMMITTEE (LSC)

Sue Petula, Pennsylvania, Chair
Ann Coughlin, Pennsylvania
Lisa Emrich, Ohio
Tony Graham, North Carolina
Brenda McDougal, North Carolina
Mark Majek, Texas
Pamela Randolph, Arizona

CONTINUED ON NEXT PAGE
MEMBER BOARD PROFILES COMMITTEE

Rula Harb, Massachusetts, Chair
Teresa Corrado, Washington
Barbara Holtry, Oregon
Margaret (Peg) A. Sheaffer, Pennsylvania
Lee Ann Teshima, Hawaii
Katherine A. Thomas, Texas, Board Liaison

NCLEX® EXAMINATION COMMITTEE

Janice I. Hooper, Texas, Chair
M. Lynn Ansardi, Louisiana-PN
Pamela Autrey, Alabama
Tammy Claussen, Arkansas
Roseann Colosimo, Nevada
Catherine Dearman, Alabama
Lorraine Fleming, Hawaii
Ann Jones, Minnesota
Francine Kirby-Chittum, West Virginia-PN
Constance McIntosh, Indiana
Rhonda Taylor, Washington
Lanette Anderson, West Virginia-PN, Board Liaison

NCLEX® ITEM REVIEW SUBCOMMITTEE

Janzie Allmacher, Virgin Islands
Nina Almasy, Texas
William L. Anderson, Kansas
Diane D. Blier, Rhode Island
Bonnie Cone, Texas
Sheila Davis, Vermont
Mariclaire E. England, Minnesota
Sara A. Griffith, North Carolina
Georgina R. Howard, New York
Jennifer Lewis, North Carolina
Nancy McCarthy, Louisiana-PN
Gene I. Pingle, Washington
Rebecca Reese, Idaho
Brenda B. Rowe, Georgia
Felicia Stokes, District of Columbia
Rhigel (Jay) Alforque Tan, Nevada
Julie Traynor, North Dakota
Jennifer Winston, Ohio

NCSBN STANDARDS DEVELOPMENT COMMITTEE

Nathan Goldman, Kentucky, Chair
Karla Bitz, North Dakota
Peter Dennehy, Ireland
Amy Fitzhugh, North Carolina
Ruby Jason, Oregon
Barbara H. McGill, Louisiana-RN
Anne Schuchmann, Washington
NCSBN met in Chicago, Aug. 13–15, 2014, to consider pertinent association business with its member boards of nursing. There were 58 member boards represented by delegates.

Outgoing NCSBN Board of Directors President Myra A. Broadway, JD, MS, RN, executive director, Maine State Board of Nursing, stated, “Our delegate assembly members were delighted by two stellar keynote speakers who left us with much to ponder and apply to the world of nursing regulation. We learned more about the value of meta leadership from Leonard J. Marcus, PhD, Harvard School of Public Health and were taken on the photographic journey of Steve Uzzell, former *National Geographic Magazine*, and corporate and advertising photographer, who challenged the audience to experience the ‘open road’ to clear the mind and recognize the need to continually challenge one’s own assumptions.”

NCSBN will meet Aug. 19–21, 2015, in Chicago for the 2015 Annual Meeting and Delegate Assembly.
2014 award recipients: Myra A. Broadway, Ann L. O'Sullivan, and Gloria Damgaard (clockwise from right)
MEMBER ACHIEVEMENTS

NCSBN recognized its 2014 award recipients during the Annual Meeting and Delegate Assembly, held in Chicago on Aug. 14, 2014.

2014 INDIVIDUAL AWARD RECIPIENTS INCLUDE:

Myra A. Broadway, JD, MS, RN, Executive Director, Maine State Board of Nursing, honored with the prestigious R. Louise McManus Award. Individuals receiving this award have made sustained and lasting significant contributions through their deep commitment and dedication to the purposes and mission of NCSBN.

Gloria Damgaard, MS, RN, FRE, Executive Secretary, South Dakota Board of Nursing, received the Meritorious Service Award, which is presented to a member for positive impact and significant contributions to the mission and vision of NCSBN.

Ann L. O’Sullivan, PhD, FAAN, CRNP, Board Member, Pennsylvania State Board of Nursing, received the Exceptional Contribution Award, which is given for significant contribution by a board of nursing staff member who is not a president or executive officer.
Downtown Chicago was the location of the NCSBN 2014 Annual Meeting.
INSTITUTE OF REGULATORY EXCELLENCE (IRE) FELLOWS


The IRE Fellowship Program which begins a four-year comprehensive educational and professional development program designed for current regulators who want to enhance their knowledge of and leadership in nursing regulation. The program includes experiences in analyzing issues involving public policy and regulation, strategic planning, patient safety and communication. It also requires the application of evidence-based concepts in decision making and leadership.

Individuals who complete the Fellowship Program requirements are called a Fellow of the NCSBN Regulatory Excellence Institute (FRE) and are entitled to use the initials “FRE” after their name in recognition of their accomplishment.
Awards presented by NCSBN Staff

Linda L. Olson, PhD, MBA, MSN, RN, NEA-BC, Associate, Nursing Regulation, and IRE Committee Chairperson,

Linda D. Burhans, PhD, RN, FRE, CNE-BC, CPHQ, Associate Executive Director, Education & Practice, North Carolina Board of Nursing,

LEFT TO RIGHT:

Gillian Lemermeyer, MN, RN
Policy Associate, College of Registered Nurses of Alberta

Paula Meyer, MSN, RN
Executive Director, Washington State Nursing Care Quality Assurance Commission

LEFT TO RIGHT:

Erin Tilley, MN, RN
Policy Analyst, College of Nurses of Ontario

Susan Wong, MBA, MPA, RN
Former Chair, Washington State Nursing Care Quality Assurance Commission

Suzanne Wowchuk, MN, RN
Director, Registration & Professional Conduct, College of Registered Nurses of Manitoba
NCSBN is proud to acknowledge the following member boards that celebrated their 100th anniversary in 2014. We honor the many contributions they have made to nursing regulation in service to public welfare and safety. Congratulations on this accomplishment.

NCSBN Member Boards protect the public by ensuring that safe and competent nursing care is provided by licensed nurses. These boards of nursing (BONs) regulate more than 4.5 million licensed nurses.
SERVICES AWARDS

Service awards are given to the executive officers of boards of nursing to honor their commitment to nursing regulation and public protection.

5 YEARS

LEFT TO RIGHT:
Louise Bailey, MEd, RN
Executive Officer, California Board of Registered Nursing
Anne Coghlan, MScN, RN
Executive Director, College of Nurses of Ontario (Associate Member)
Mary-Anne Robinson, MSA, RN
CEO, College and Association of Registered Nurses of Alberta (Associate Member)

Jennifer L. Filippone, Chief, Practitioner Licensing and Investigations Section, Connecticut Board of Examiners for Nursing. Retired May 2014. (not pictured)

15 YEARS

LEFT TO RIGHT:
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 (not pictured)

20 YEARS

Teresa Bello-Jones, JD, MSN, RN, Executive Officer, California Board of Vocational Nursing and Psychiatric Technicians (not pictured)

Awards presented by NCSBN
President Myra A. Broadway.
ABOUT NCSBN

Founded in 1978 as an independent, 501(c)(3) not-for-profit organization, NCSBN can trace its roots to the American Nurses Association (ANA) Council on State Boards of Nursing. The impetus for its creation arose out of recognition that in order to guard the safety of the public, the regulation of nurses needed to be a separate entity from the organization representing professional nurses.

All photos from the 2014 Annual Meeting were taken by Tricia Koning Photography.
## TIMELINE

<table>
<thead>
<tr>
<th>Year</th>
<th>Event</th>
</tr>
</thead>
<tbody>
<tr>
<td>1978</td>
<td>First NCSBN Delegate Assembly called to order. NCSBN office opened in Madison, Wisconsin.</td>
</tr>
<tr>
<td>1979</td>
<td>Delegates adopted plan to revise NCLEX-RN® Test Plan. First LPN voting member recognized.</td>
</tr>
<tr>
<td>1981</td>
<td>Criterion-referenced scoring for NCLEX examination implemented.</td>
</tr>
<tr>
<td>1982</td>
<td>First NCLEX-RN® administered under new test plan. First LPN appointed to the Board of Directors.</td>
</tr>
<tr>
<td>1983</td>
<td>Nursing Practice Act and Model Administrative Rules developed.</td>
</tr>
<tr>
<td>1984</td>
<td>NCLEX-PN® Test Plan adopted.</td>
</tr>
<tr>
<td>1994</td>
<td>Computerized adaptive testing (CAT) implemented.</td>
</tr>
<tr>
<td>1996</td>
<td>NCSBN website launched.</td>
</tr>
<tr>
<td>1997</td>
<td>NCLEX®, NCLEX-RN® and NCLEX-PN® registered. Nurse Licensure Compact (NLC) adopted.</td>
</tr>
<tr>
<td>1998</td>
<td>First online NCLEX-RN® preparation course launched on NCSBN Learning Extension.</td>
</tr>
<tr>
<td>1999</td>
<td>Uniform licensure requirements adopted.</td>
</tr>
<tr>
<td>2000</td>
<td>Utah became first state to adopt the NLC.</td>
</tr>
<tr>
<td>2002</td>
<td>Public access to Nursys® implemented.</td>
</tr>
<tr>
<td>2004</td>
<td>First Institute of Regulatory Excellence held. Utah adopted the Advanced Practice Registered Nurse (APRN) Compact.</td>
</tr>
<tr>
<td>2005</td>
<td>International NCLEX® examination testing launched.</td>
</tr>
<tr>
<td>2008</td>
<td>Published The First 25 Years: 1978–2003, which explores the organization’s work from 1978 to 2003. NCSBN acquired exclusive ownership of NNAAP® and MACE®. NCSBN celebrated its 30th anniversary.</td>
</tr>
<tr>
<td>2009</td>
<td>Published Nursing Pathways for Patient Safety.</td>
</tr>
<tr>
<td>2010</td>
<td>Published first issue of Journal of Nursing Regulation.</td>
</tr>
<tr>
<td>2011</td>
<td>Implemented the Memorandum of Understanding among eight international nursing regulatory bodies. Proposed consensus model for APRN regulation.</td>
</tr>
<tr>
<td>2012</td>
<td>NCLEX-RN® selected by Canadian regulators for license requirement in Canada.</td>
</tr>
<tr>
<td>2013</td>
<td>NCSBN celebrated its 35th anniversary.</td>
</tr>
<tr>
<td>2014</td>
<td>Results of the award-winning “NCSBN National Simulation Study” published.</td>
</tr>
</tbody>
</table>
NCSBN WEBSITES HAD **12.8 MILLION** TOTAL VISITS DURING FY14 WITH A **34% INCREASE** FROM FY13.