Section III: Resources and General Information

JW Marriott Indianapolis Map, ................................................................. 235
2011 NCSBN Annual Meeting Seating Diagram, ........................................ 237
Orientation Manual for Delegate Assembly Participants, .......................... 239
NCSBN Organizational Chart, ................................................................. 247
NCSBN Bylaws, ...................................................................................... 249
NCSBN Glossary, .................................................................................. 259
2011 NCSBN Annual Meeting Seating Diagram

Delegates Row 1 (L-R):
AL, AK, AS, AZ
AR CA-RN, CA-VN, CO
CT, DE, DC, FL
GA-LPN, GA, GU, HI

Delegates Row 3 (L-R):
NE-APRN, NE, NV, NH
NJ, NM, NY, NC
ND, NMI, OH, OK
OR, PA, RI, SC

1st two rows behind ropes: Reserved for Members

Last row behind ropes: Reserved for NCSBN Staff

Delegates Row 2 (L-R):
ID, IL, IN, IA
KS, KY, LA-, LA-PN
ME, MD, MA, MI
MN, MS, MO, MT

Delegates Row 4 (L-R):
SD, TN, TX, UT
VT, USVI, VI, WA
WV-RN, WV-LPN, WI

2nd two rows behind ropes: Reserved for External Organizations and Guests

Classroom for 378
128 per 2 per G
240 per 3 per G
Orientation Manual for Delegate Assembly Participants

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

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

History

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

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

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

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

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

In 1970, following a period of financial crisis for the ANA, a council member recommended that a free-standing federation of state boards be established. After a year of study by the state boards, this proposal was overwhelmingly defeated when the council adopted a resolution to remain with the ANA. However, an ad hoc committee was appointed later to examine the feasibility of the council becoming a self-governing incorporated body. At the council's 1977 meeting, a task force was elected and charged with the responsibility of proposing a specific plan for the
formation of a new independent organization. On June 5, 1978, the Delegate Assembly of ANA’s Council of State Boards of Nursing voted 83 to 8 to withdraw from ANA to form the National Council of State Boards of Nursing.

Organizational Mission, Strategic Initiatives and Outcomes

The National Council of State Boards of Nursing (NCSBN) provides education, service, and research through collaborative leadership to promote evidence-based regulatory excellence for patient safety and public protection.

NCSBN currently has five strategic initiatives for FY 2011-2013:

- Promote evidenced-based regulation.
- Advance the engagement and leadership potential of all members through education, information, and networking.
- Provide state of the art competence assessments.
- Collaborate to advance the evolution of nursing regulation worldwide.
- Optimize nursing regulation through efficient use of technology.

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

Organizational Structure and Function

MEMBERSHIP

Membership in NCSBN is extended to those boards of nursing that agree to use, under specified terms and conditions, one or more types of licensing examinations developed by NCSBN. At the present time, there are 60 Member Boards, including those from the District of Columbia, the U.S. Virgin Islands, Guam, American Samoa and the Northern Mariana Islands. Boards of nursing may become Member Boards upon approval of the Delegate Assembly, payment of the required fees and execution of a contract for using the NCLEX-RN® examination and/or the NCLEX-PN® examination. Revisions to the bylaws by the membership in 2007 also allow for advanced practice nurse boards to become full members.

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

Associate Members are authorized nurse regulatory bodies from other countries, must pay an annual membership feed and be approved for membership by the Delegate Assembly. The following are Associate Members:

- Bermuda Nursing Council
- College of Licensed Practical Nurses of Alberta
- College of Registered Nurses of Alberta
- College of Licensed Practical Nurses of British Columbia
- College of Registered Nurses of British Columbia
AREAS
NCSBN’s membership is divided into four geographic areas. The purpose of this division is to facilitate communication, encourage regional dialogue on relevant issues and provide diversity of board and committee representation. Delegates elect area directors from their respective Areas through a majority vote of the Delegate Assembly. In addition, there are four elected directors-at-large. (See Glossary for list of jurisdictions by Area.)

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

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

OFFICERS AND DIRECTORS
NCSBN officers include the president, vice president, and treasurer. Directors consist of four area directors and four directors-at-large. Only members or staff of Member Boards may hold office, subject to exclusion from holding office if other professional obligations result in an actual or perceived conflict of interest.

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

The president, vice president and treasurer are elected for terms of two years or until their successors are elected. The president, vice president and treasurer are elected in even-numbered years.

The four area directors are elected for terms of two years or until their successors are elected. Area directors are elected in odd-numbered years. Four directors-at-large will be elected for terms of two years. Two directors-at-large will be elected in even-numbered years or until their successors are elected and two directors-at-large will be elected in odd-numbered years or until their successors are elected.

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

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

Officers and directors assume their duties at the close of the session at which they were elected. The vice president fills a vacancy in the office of president. Board appointees fill other officer vacancies until the term expires.
BOARD OF DIRECTORS
The Board of Directors, the administrative body of NCSBN, consists of eleven elected officers. The Board is responsible for the general supervision of the affairs of NCSBN between sessions of the Delegate Assembly. The Board authorizes the signing of contracts, including those between NCSBN and its Member Boards. It also engages the services of legal counsel, approves and adopts an annual budget, reviews membership status of noncompliant Member Boards and renders opinions, when needed, about actual or perceived conflicts of interest.

Additional duties include approval of the NCLEX® examination test service, appointment of committees, monitoring of committee progress, approval of studies and research pertinent to NCSBN’s purpose, and provision for the establishment and maintenance of the administrative offices.

MEETINGS OF THE BOARD OF DIRECTORS
All Board meetings are typically held in Chicago, with the exception of the pre- and post- Annual Meeting Board meetings that may be held at the location of the Annual Meeting. The call to meeting, agenda and related materials are mailed to Board officers and directors two weeks before the meeting. The agenda is prepared by staff, in consultation with the president, and provided to the membership via the NCSBN website (www.ncsbn.org).

A memo or report that describes the item’s background and indicates the Board action needed accompanies items for Board discussion and action. Motion papers are available during the meeting and are used so that an accurate record will result. Staff takes minutes of the meeting.

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

COMMUNICATIONS WITH THE BOARD OF DIRECTORS
Communication between Board meetings takes place in several different ways. The chief executive officer communicates weekly with the president regarding major activities and confers as needed with the treasurer about financial matters. Monthly updates are provided to the full board by the chief executive officer.

LEADERSHIP SUCCESSION COMMITTEE
The Leadership Succession Committee consists of eight elected members. Four members are elected from each area and are elected for two-year terms in even-numbered years. Four designated members are elected for two-year terms in odd-numbered years, and include a current or former committee chair; a board member of a member board, a staff of a member board, and a past member of the NCSBN Board of Directors. Members are elected by ballot with a plurality vote.

The Leadership Succession Committee’s function is to 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.
COMMITTEES

Many of NCSBN’s objectives are accomplished through the committee process. Every year, the committees report on their activities and make recommendations to the Board of Directors. At the present time, NCSBN has two standing committees: NCLEX Examinations and Finance. Subcommittees, such as the Item Review Subcommittee (Exam), may assist standing committees.

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

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

Description of Standing Committees

**NCLEX® EXAMINATION COMMITTEE**

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

The Examination Committee advises the Board of Directors on matters related to the NCLEX® examination process, including psychometrics, item development, test security and administration and quality assurance. Other duties include the selection of appropriate item development panels, test service evaluation, oversight of test service transitions and preparation of written information about the examinations for Member Boards and other interested parties. The committee also regularly evaluates the licensure examinations by means of item analysis and test, and candidate statistics.

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

Validating a licensure examination is an evidence-gathering process to determine two things: 1) whether or not the examination actually measures competencies required for safe and effective job performance, and 2) whether or not it can distinguish between candidates who do and do not possess those competencies. An analysis of the job for which the license is given is essential to validation.
There are several methods for analyzing jobs, including compilation of job descriptions, opinions of experts, and surveys of job incumbents. Regardless of the method used, the outcome of the job analysis is a description of those tasks that are most important for safe and effective practice. The results of the job analysis can be used to devise a framework describing the job, which can then be used as a basis for a test plan and for a set of instructions for item writers. The test plan is the blueprint for assembling forms of the test, and usually specifies major content or process dimensions and percentages of questions that will be allotted to each category within the dimension. The instructions for item writers may take the form of a detailed set of knowledge, skills and abilities (KSA) statements or competency statements which the writers will use as the basis for developing individual test items. By way of the test plan and KSA statements, the examination is closely linked to the important job functions revealed through the job analysis. This fulfills the first validation criterion: a test that measures important job-related competencies.

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

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

FINANCE COMMITTEE
The Finance Committee comprises at least four members and the treasurer, who serves as the chair. The Committee reviews the annual budget, monitors NCSBN investments, and facilitates the annual independent audit. The Committee recommends the budget to the Board of Directors and advises the Board of Directors on fiscal policy to assure prudence and integrity of fiscal management and responsiveness to Member Board needs. It also reviews financial status on a quarterly basis.

NCSBN STAFF
NCSBN staff members are hired by the chief executive officer. Their primary role is to implement the Delegate Assembly’s and Board of Directors’ policy directives and provide assistance to committees.

GENERAL DELEGATE ASSEMBLY INFORMATION
The business agenda of the Delegate Assembly is prepared and approved by the Board of Directors. At least 45 days prior to the Annual Meeting, Member Boards are sent the recommendations to be considered by the Delegate Assembly. A Business Book is provided to all Annual Meeting registrants which contains the agenda, reports requiring Delegate Assembly action, reports of the Board of Directors, reports of special and standing committees, and strategic initiatives and objectives.
Prior to the annual session of the Delegate Assembly, the president appoints the credentials, resolutions, and elections committees, as well as the Committee to Approve Minutes. The president may also appoint a timekeeper, a parliamentarian and pages.

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

The parliamentarian keeps minutes of the Delegate Assembly. These minutes are then reviewed, corrected as necessary and approved by the Committee to Approve Minutes, which includes the chief executive officer who serves as corporate secretary.
NCSBN Organizational Chart

Member Boards

Delegate Assembly

Leadership Succession Committee

Area I

Area II

Area III

Area IV

Board of Directors

Standing Committees of NCSBN

NCLEX® Examinations

Finance

Special Committees

Chief Executive Officer

Staff
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

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.

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. Definition.
(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, as a Member Board, a state board of nursing that regulates registered nurses and/or practical/vocational nurses must use one or more NCSBN
Licensing Examinations (the “NCLEX® examination”) for licensure of registered nurses and/or practical/vocational nurses, and execute a membership agreement with NCSBN specifying the terms and conditions for the use of the NCLEX® examination(s) where applicable.

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, payment of the required fees and execution of a contract for using the NCLEX® examination where 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 NCLEX® examination contracts 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 vice president 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. Qualifications.** Board Members of Member Boards and employees of Member Boards shall be eligible to serve as NCSBN officers and directors until their term or their employment with a Member Board ends. Members of a Member Board who become permanent employees of a Member Board will continue their eligibility to serve.

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

**Section 5. Election of Officers and Directors.**

(a) **Time and Place.** Election of officers and directors shall be by ballot of the Delegate Assembly during the Annual Meeting.

(b) **Officers and Directors-at-Large.** Officers and directors-at-large shall be elected by majority vote of the Delegate Assembly.

(c) **Area Directors.** Each Area shall elect its Area director by majority vote of the delegates from each such Area.
(d) **Run-Off Balloting.** If a candidate for officer or director does not receive a majority vote on the first ballot, reballoting shall be limited to the two candidates receiving the highest number of votes for each position. In the case of a tie on the reballoting, the final selection shall be determined by lot.

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

(f) 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.

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

**Section 7. Limitations.** No person may hold more than one officer position or directorship at one time. No officer or director shall hold elected or appointed office or a salaried position in a state, regional or national association or body if the office or position might result in a potential or actual, or the appearance of, a conflict of interest with the 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 office or director position, the term in their current position shall terminate at the close of the Annual Meeting at which the election is held.

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

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

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

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

**Article VI**

**BOARD OF DIRECTORS**

**Section 1. Composition.** The Board of Directors shall consist of the elected officers and directors of the 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 its annual meeting in association with the Annual Meeting. The Board may schedule other regular meetings of the Board at other times as necessary to accomplish the work of the Board. Publication of the dates for such regular meetings in the minutes of the Board meeting at which the dates are selected shall constitute notice of the scheduled regular meetings. Special meetings of the Board of Directors may be called by the president or shall be called upon written request of at least three members of the Board of Directors. At least 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 eight members elected by the Delegate Assembly. Four of the eight elected positions shall be designated members to include a past Board of Directors member, a current or former NCSBN committee chair, a board member of a Member Board and an employee of a Member Board. The remaining four members shall be elected from each of the four areas.

(b) Term. The term of office shall be two years. One half of the Committee members shall be elected in even numbered years and one half in odd number years. A committee member shall serve no more than two consecutive terms. 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 the 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.
NCSBN Glossary

A

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

Accrediting Agency
An organization that establishes and maintains standards for professional nursing programs and recognizes those programs that meet these standards. See Nursing School Accrediting Agency entry.

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

Advanced Practice Registered Nurse (APRN)
A nurse:
- who’s practice builds on the competencies of registered nurses (RNs) by demonstrating a greater depth and breadth of knowledge, a greater synthesis of data, increased complexity of skills and interventions, and greater role autonomy;
- who has been educationally prepared to assume responsibility and accountability for health promotion and/or maintenance as well as the assessment, diagnosis and management of patient problems, which includes the use and prescription of pharmacologic and nonpharmacologic interventions;
- who has clinical experience of sufficient depth and breadth to reflect the intended license; and
- who has obtained a license as an APRN in one of the four APRN roles: certified registered nurse anesthetist (CRNA), certified nurse-midwife (CNM), clinical nurse specialist (CNS) or certified nurse practitioner (CNP).

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

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


and sequence options to provide the correct answer). Any item format, including standard multiple-choice items, may include charts, tables or graphic images.

Alternative Program

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

American Academy of Nurse Practitioners (AANP)

A full-service professional membership organization in the U.S. for nurse practitioners of all specialties.

American Association of Colleges of Nursing (AACN)

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

American Association of Critical Care Nurses (AACN)

The largest specialty nursing organization in the world, representing the interests of more than 500,000 nurses who are charged with the responsibility of caring for acutely and critically ill patients. The association is dedicated to providing their members with the knowledge and resources necessary to provide optimal care to critically ill patients.

American Association of Nurse Anesthetists (AANA)

A professional association representing more than 40,000 certified registered nurse anesthetists (CRNAs) and student nurse anesthetists nationwide. The AANA promulgates education, practice standards and guidelines, and affords consultation to both private and governmental entities regarding nurse anesthetists and their practice.

American College of Nurse-Midwives (ACNM)

A professional association that provides research, accredits midwifery education programs, administers and promotes continuing education programs, establishes clinical practice standards, and creates liaisons with state and federal agencies and members of Congress. The mission of ACNM is to promote the health and well-being of women and infants within their families and communities through the development and support of the profession of midwifery as practiced by certified nurse-midwives (CNMs) and certified midwives (CMs).

American Dental Association (ADA)

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

American Dietetic Association (ADA)

The nation’s largest organization of food and nutrition professionals committed to improving the nation’s health and advancing the profession of dietetics through research, education and advocacy.

American Immigration Lawyers Association (AILA)

A national association of more than 11,000 attorneys and law professors who practice and teach immigration law. AILA member attorneys represent U.S. families seeking permanent residence for close family members, as well as U.S. businesses seeking talent from the global marketplace. AILA members also represent foreign students, entertainers, athletes and asylum seekers, often on a pro bono basis.

American Medical Association (AMA)

The national professional organization for all physicians; helps doctors help patients by uniting physicians nationwide to work on the most important professional and public health issues.

American Midwifery Certification Board (AMCB)

The national certifying body for certified nurse-midwives (CNMs) and certified midwives (CMs); formerly known as the ACNM Certification Council, Inc. (ACC). ACC’s mis-
sion is to protect and serve the public by providing the certification standard for individuals educated in the profession of midwifery.\textsuperscript{10}

American Nurses Association (ANA)
The only full-service professional organization representing the interests of the nation’s 3.1 million registered nurses. The ANA advances the nursing profession by fostering high standards of nursing practice, promoting the economic and general welfare of nurses in the workplace, projecting a positive and realistic view of nursing, and by lobbying Congress and regulatory agencies on health care issues affecting nurses and the public.\textsuperscript{11}

American Nurses Credentialing Center (ANCC)
A subsidiary of the American Nurses Association, the ANCC provides credentialing programs that certify nurses in specialty practice areas; recognizes health care organizations for promoting safe, positive work environments; and accredits providers of continuing nursing education.\textsuperscript{12}

American Organization of Nurse Executives (AONE)
A subsidiary of the American Hospital Association and a national organization of more than 7,000 nurses who design, facilitate and manage care. AONE provides leadership, professional development, advocacy and research to advance nursing practice and patient care, promote nursing leadership excellence and shape public policy for health care.\textsuperscript{13}

Americans for Nursing Shortage Relief (ANSR)
ANSR is comprised of 49 national nursing organizations that have united to address the nursing shortage and the nursing faculty shortage. Since 2001, ANSR has worked to change public policy to alleviate the nursing shortage.\textsuperscript{14}

Americans with Disabilities Act (ADA)
This federal law prohibits private employers, state and local governments, employment agencies, and labor unions from discriminating against qualified individuals with disabilities in job application procedures, hiring, firing, advancement, compensation, job training and other terms, conditions and privileges of employment. An individual with a disability is a person who has a physical or mental impairment that substantially limits one or more major life activities, has a record of such an impairment or is regarded as having such an impairment.\textsuperscript{15}

Annual Report
A yearly summary of both financial accounting information and the activities of the organization. It highlights the strategic plan and future goals, as well as discussing the environmental context in which NCSBN operates. Its primary function is to serve as a marketing communications tool to reinforce branding efforts to NCSBN’s diverse target audiences.

Application for License
The form(s) an individual submits to a board of nursing to request a license to practice nursing in that state or jurisdiction.

Application Packet
All information necessary to apply to a board of nursing for a nursing license.

APRN Annual Certification Program Survey
Results of an annual survey of APRN certification programs regarding their certification examination. Contains information such as accreditation status, credential granted, exceptions and pass rates.

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

APRN Certification Programs
Certification programs developed for APRNs. In January 2002, the NCSBN Board of Directors approved criteria for both certification programs that were developed by the Advanced Practice Task Force. The Requirements for Accrediting Agencies and the Criteria for Certification Programs represent required elements of certification programs that would result in a legally defensible examination suitable for the regulation of advanced practice nurses.

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

APRN Criterion Comparison Paper (Members Only)
A comparison of APRN certification examinations with the NCSBN criteria.

APRN ListServ
Open to board members, executive officers of boards of nursing and staff who work with APRN issues. Used for discussion of APRN regulatory issues.

Area
One of four designated geographic regions of NCSBN Member Boards.

<table>
<thead>
<tr>
<th>Area I</th>
<th>Area II</th>
<th>Area III</th>
<th>Area IV</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alaska</td>
<td>Illinois</td>
<td>Alabama</td>
<td>Connecticut</td>
</tr>
<tr>
<td>American Samoa</td>
<td>Indiana</td>
<td>Arkansas</td>
<td>Delaware</td>
</tr>
<tr>
<td>Arizona</td>
<td>Iowa</td>
<td>Florida</td>
<td>District of Columbia</td>
</tr>
<tr>
<td>California-RN</td>
<td>Kansas</td>
<td>Georgia-RN</td>
<td>Maine</td>
</tr>
<tr>
<td>California-VN</td>
<td>Michigan</td>
<td>Georgia-PN</td>
<td>Maryland</td>
</tr>
<tr>
<td>Colorado</td>
<td>Minnesota</td>
<td>Kentucky</td>
<td>Massachusetts</td>
</tr>
<tr>
<td>Guam</td>
<td>Missouri</td>
<td>Louisiana-RN</td>
<td>New Hampshire</td>
</tr>
<tr>
<td>Hawaii</td>
<td>Nebraska</td>
<td>Louisiana-PN</td>
<td>New Jersey</td>
</tr>
<tr>
<td>Idaho</td>
<td>APRN Board</td>
<td>Mississippi</td>
<td>New York</td>
</tr>
<tr>
<td>Montana</td>
<td>N. Dakota</td>
<td>N. Carolina</td>
<td>New England</td>
</tr>
<tr>
<td>Nevada</td>
<td>Ohio</td>
<td>Oklahoma</td>
<td>Pennsylvania</td>
</tr>
<tr>
<td>New Mexico</td>
<td>S. Dakota</td>
<td>S. Carolina</td>
<td>Rhode Island</td>
</tr>
<tr>
<td>N. Mariana Islands</td>
<td>W. Virginia-RN</td>
<td>Tennessee</td>
<td>Vermont</td>
</tr>
<tr>
<td>Rhode Islands</td>
<td>Oregon</td>
<td>Texas</td>
<td>U.S. Virgin Islands</td>
</tr>
<tr>
<td>Utah</td>
<td>West Virginia-PN</td>
<td>Virginia</td>
<td></td>
</tr>
<tr>
<td>Wyoming</td>
<td>Wisconsin</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Area Director
Type of NCSBN board member. A director is elected for each of NCSBN’s geographic areas: I, II, III and IV. Responsibilities include attending area meetings of the Member Boards at Midyear and Annual Meetings.

Assessment Strategies
Test service for Canadian Nurses Association.

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.

Awards Committee
A committee of NCSBN charged with selection of annual award recipients and continuous review of the awards program.

B
Blueprint
The organizing framework for an examination that includes the percentage of items allocated to various categories. Also known as a test plan.

Board Members Knowledge Network at Delegate Assembly
Provides an opportunity at Delegate Assembly for board members from the boards of nursing to network, share information and discuss emerging regulatory issues.

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

Business Book
The Business Book contains the annual proceedings of Delegate Assembly, including the Business Agenda and Standing Rules, committee recommendations, rationale and fiscal impact statement, slate of candidates, and annual reports of the president, board of directors, each standing committee, and test services.

Bylaws
The rules that govern the internal affairs of an organization.
Section III: 2011 NCSBN Annual Meeting
NCSBN Glossary

C

Canadian Nurses Association
A federation of 11 provincial and territorial nursing associations representing more than 123,000 RNs.

Canadian Registered Nurse Examination (CRNE)
The Canadian Nurses Association nurse licensure examinations.

Candidate Performance Report (CPR)
An individualized, two-page document sent to candidates who fail the NCLEX exam. The CPR reflects candidate performance on various aspects of the NCLEX exam by test plan content area.

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

Certification
The voluntary process by which a nongovernmental entity grants a time-limited recognition and use of a credential to an individual after verifying that he or she has met predetermined and standardized criteria. It is the vehicle that a profession or occupation uses to differentiate among its members using standards sometimes developed through a consensus-driven process based on existing legal and psychometric requirements.

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

Certified Funds
Certified check, cashier’s check or money order are the forms of certified funds acceptable to NCSBN.

Certified Nurse-Midwife (CNM)
Certified nurse-midwives (CNMs) are RNs with additional training around delivery of babies and providing prenatal and postpartum care to women. To become certified, CNMs must graduate from a nurse-midwifery program accredited by the American College of Nurse-Midwives and pass a national certification exam. CNMs are educated in both nursing and midwifery and can practice anywhere in the U.S. See Advanced Practice Registered Nurse entry.

Certified Registered Nurse Anesthetist (CRNA)
Anesthesia professionals who safely administer approximately 30 million anesthetics to U.S. patients each year. See Advanced Practice Registered Nurse entry.

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

Citizen Advocacy Center (CAC)
A non-profit, non-partisan community legal organization dedicated to building democracy for the 21st century. Center community lawyers and volunteers focus on strengthening the citizenry’s capacity and motivation to participate in civic affairs, building community resources and improving democratic protocols within our community institutions. Through public education, community organizing, issue advocacy and precedent-setting litigation in state and federal courts, the Center forges ahead with programs to advance civic life. The Center is a free public resource to the community.

Clinical Nurse Specialist (CNS)
An APRN who has graduate preparation (master’s or doctorate) in nursing as a clinical nurse specialist. See also Advanced Practice Registered Nurse entry.

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

continuing self-assessment by nursing education programs and the continuing growth and improvement of collegiate professional education.20

**CGFNS (Commission on Graduates of Foreign Nursing Schools) International**
An immigration-neutral nonprofit organization that is internationally recognized as an authority on credentials evaluation pertaining to the education, registration and licensure of nurses and other health care professionals worldwide. It provides products and services that validate international professional credentials and supports international regulatory and educational standards for health care professionals. CGFNS International protects the public by ensuring that nurses and other health care professionals educated in countries other than the U.S. are eligible and qualified to meet licensure, immigration and other practice requirements in the U.S.21

**Commitment to Ongoing Regulatory Excellence (CORE)**
A system of performance measurement to determine best practices for nursing regulation, initially established to implement NCSBN’s Commitment to Excellence in Nursing Regulation project.

**Compendium on NCSBN Policy and Position Statements**
Collection of NCSBN policy and position statements; updated twice a year. Available online at www.ncsbn.org/149.htm.

**Computerized Adaptive Testing (CAT)**
A testing methodology used to administer NCLEX on a computer. The computer selects the items candidates receive as they take the examination, which gives them the best opportunity to demonstrate their competence. Each examinee’s test is dynamically constructed, with each item selected to provide the maximum possible information, given responses made to previous items.

**Continued Competence Accountability Profile (CCAP)**
No longer an active project of NCSBN, this project provided a framework for the licensed nurse to document learning needs, learning plans and goals/objectives, strategies for development and evaluation of the achievements of goals/objectives. It is an expected activity of all licensed nurses to reflect upon lifelong learning activities and their application to daily practice. The profile was, in essence, the application of the nursing process to one’s own competence, professional development and accountability.

**Continuing Education Unit (CEU)**
Represents 10 contact hours in a formal education program.

**Continuous Quality Improvement Survey (CQI)**
Results of this annual survey sent to Member Boards are analyzed for program and service improvements.

**CORE Committee**
A committee of NCSBN whose purpose is to provide oversight and guide development of a performance measurement system to be utilized by boards of nursing and to identify best practices.

**CORE Reports**
Provides information and resources to NCSBN Member Boards to assist them in the development and implementation of a performance measurement system.

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

**Council on Certification of Nurse Anesthetists (CCNA)**
Responsible for the certification of registered nurse anesthetists who meet all the criteria for entry into practice as a certified nurse anesthetist (CRNA). CCNA is also responsible for the development and administration of the National Certification Examination (NCE).22

**Council on Licensure, Enforcement and Regulation (CLEAR)**
An organization of regulatory boards and agencies.
Delegate Assembly (DA)
The membership body of NCSBN comprised of 60 Member Boards. It provides direction through adoption of the mission and strategic initiatives; approves all new memberships; approves the substance of all NCLEX exam contracts between the NCSBN and Member Boards; adopts test plans to be used for the development of the NCLEX exam; and establishes the fee for the NCLEX exam. Each Member Board is entitled to two votes.

Delegate Orientation
Online continuing education course offered through NCSBN Interactive. This course is designed for boards of nursing staff members and board members who are new delegates and require an overview and understanding of the NCSBN Delegate Assembly.

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

Differential Item Functioning (DIF)
A statistical measure of potential item bias between two groups of candidates (e.g., male/female, Caucasian/African-American).

Director-at-Large
NCSBN Board of Directors position. Four directors are elected and represent the perspectives of the membership at large during meetings of the board.

Directory of Medication Aide Programs
An annual publication available on the NCSBN website with contact information for states that offer medication aide programs.

Directory of Nurse Aide Registries
An annual publication of contact information for state nurse aide registries including who maintains the registry and who investigates complaints for the state.

Disciplinary Action Information
Information pertaining to disciplinary actions taken against and reported for a nursing license.

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

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

Discipline/Investigator Conference Call
A bimonthly conference call for investigators, attorneys and board staff who work with discipline cases. The format is to have a speaker offer a short presentation, often sending out handouts in advance, and then have a speaker dialogue with participants.

Education Conference Call
A monthly conference call (except in August) for the boards’ Education Consultants and other staff who work with education issues to network and discuss education issues.

Education Information
Information pertaining to an individual’s education relative to nursing and licensure.

Education Knowledge Network at Delegate Assembly
A meeting at Delegate Assembly where board staff and board members, as well as interested external guests, network and discuss issues related to the regulation of nursing education.
E-mail Alerts
Breaking news targeted for executive officers and/or member board presidents that is beneficial and/or time sensitive as it relates to the work of boards of nursing or the external environment.

Encrypted Cookie
A small file that is stored as encrypted information on one’s computer so that others are not able to read it.

English as a Second Language (ESL)
NCSBN asks NCLEX candidates to identify their primary language. The possible categories are: (1) English; (2) English and another language; (3) another language; and (4) missing. Candidates who report their primary language as “English and another language” or “another language” are considered for research purposes to be ESL candidates.

Examinee Performance Report (EPR)
Detailed report of a candidate’s examination performance including item responses and response times.

Executive Officer Coach Program
A one-on-one program intended to enhance the professional development of a new executive officer. The coaching program provides the opportunity for an experienced executive officer to facilitate the learning process for a new executive officer.

Executive Officer Conference Call
Held every other month and designed for the executive officer of each board of nursing or one designee. The call provides for discussion of executive management.

Executive Officer Network
Comprises of executive officers of all boards of nursing or board staff members designated by the executive officer. The network provides peer support and a communications network for executive officers.

Executive Officer Networking Session at Delegate Assembly
Held every August at Delegate Assembly. This session is designed for the executive officer of each board of nursing, or one designee, and provides a peer support group and communication network for executive officers.

Executive Officer Networking Session at Midyear Meeting
Held annually at the Midyear Meeting. This session is designed for the executive officer of each board of nursing, or one designee, and provides a peer support group and communication network for executive officers.

Executive Officer Seminar
A two-day program for the executive officers of boards of nursing, designed to promote leadership and business management skill development.

F

Federation of Associations of Regulatory Boards (FARB)
An organization made up of an association of licensing boards, FARB provides a forum for individuals and organizations to share information related to professional regulation, particularly in the areas of administration, assessment and law. NCSBN holds a seat on the FARB Board of Directors.

Fellow of Regulatory Excellence Institute (FRE)
A credential bestowed upon an individual who completed the four-year comprehensive educational and professional development curriculum within the Institute of Regulatory Excellence (IRE) Fellowship Program.

Finance Committee
A standing committee of NCSBN charged to review the organization’s annual budget, investments and audit.

Fiscal Year (FY)
Oct. 1 to Sept. 30 at NCSBN.

G

Guaranteed Funds
Certified check, cashier’s check, or a money order are the forms of guaranteed funds acceptable by NCSBN.
Health Insurance Portability and Accountability Act (HIPAA)
Passed in 1996 to amend the Internal Revenue Code of 1986 to improve portability and continuity of health insurance coverage in the group and individual markets; to combat waste, fraud and abuse in health care delivery; to promote the use of medical savings accounts; to improve access to long-term care services and coverage; and to simplify the administration of health insurance; and for other purposes.

Health Resources and Services Administration (HRSA)
The agency of the federal government under the U.S. Department of Health & Human Services that includes the Practitioner Database Branch and Division of Nursing.

Healthcare Integrity and Protection Data Bank (HIPDB)
A national data collection program mandated and operated by HRSA for the reporting of final adverse actions against health care providers, suppliers or practitioners, as required by HIPAA.

HIPDB Agent Role
NCSBN is the authorized organization that the various Member Boards have designated to query or report information to HRSA on their behalf.

HIPDB Resource Pack
An assortment of resources to support Member Boards in complying with the federal mandate to report nurse disciplinary actions to HIPDB.

HIPDB Webinars
A series of conference calls, with documents available online, that are held to support the transition to reporting nurse disciplinary actions to HIPDB using HIPDB action and basis for action codes.

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

Institute of Medicine (IOM)
A nonprofit organization specifically created to provide science-based advice on matters of biomedical science, medicine and health. The IOM’s mission is to serve as adviser to the nation to improve health. IOM provides unbiased, evidence-based, authoritative information and advice concerning health and science policy to policy-makers, professionals, leaders in every sector of society and the public at large.23

Institute of Regulatory Excellence (IRE)
Created by NCSBN in 2004 to assist regulators in their professional development by providing opportunities for both education and networking. An annual conference is held to provide nurse regulators with regulatory knowledge in the areas of discipline, role development, competency evaluation/remediation strategies and organizational structure/behavior.

Institute of Regulatory Excellence (IRE) Committee
An NCSBN committee that provides an ongoing evaluation of the IRE program.

Interagency Collaborative on Nursing Statistics (ICONS)
Promotes the generation and utilization of data, information and research about nurses, nursing education and the nursing workforce. ICONS is an association of individuals from a variety of organizations that are responsible for the development, compilation and analysis of data on nurses and the settings in which they practice.

International Council of Nurses (ICN)
A federation of national nurses’ associations (NNAs) representing nurses in more than 128 countries. ICN is the world’s first and widest-reaching international organization for health professionals. ICN works to en-
sure quality nursing care for all, sound health policies globally, the advancement of nursing knowledge, and the presence worldwide of a respected nursing profession and a competent and satisfied nursing workforce.


**International Scheduling Fee**
The charge associated with scheduling an NCLEX exam appointment in an international testing center ($150 plus a value added tax [VAT] where applicable). This nonrefundable fee must be paid by credit card and will be charged when a candidate schedules an examination appointment.

**International Testing Centers**
There are Pearson Professional Center (PPC) test center locations in Australia, Canada, Germany, Hong Kong, India, Japan, Mexico, Puerto Rico, Taiwan, Philippines and United Kingdom that administer the NCLEX for the purposes of domestic licensure.

**Interprofessional Workgroup on Health Professions Regulation (IWHPR)**
A coalition of organizations representing millions of health care practitioners in more than 15 separate health disciplines.

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

**Investigator and Attorney Workshop**
Sessions focusing on meeting the educational needs of investigators, attorneys and board discipline staff. The two and one-half day meetings are held annually in the spring and present topics of interest related to the investigation, prosecution and resolution of complaints reported to boards of nursing.

**IT Summit**
The annual IT Summit is held every spring and provides member boards' technical staff the opportunity to learn what technology other boards are using and implementing. Encourages Member Board staff to learn about latest and greatest technologies while networking with their peers from other boards of nursing.

**Item**
A question on one of the NCLEX, NNAAP and MACE exams.

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

**Item Development Panels**
Comprised of volunteers who meet specific criteria to participate in the item development process.

**Item Response Theory (IRT)**
A family of psychometric measurement models based on characteristics of examinees’ item responses and item difficulty. Their use enables many measurement benefits. See also Rasch Measurement Model entry.

**Item Reviewers**
Individuals who review items developed for the NCLEX-RN, NCLEX-PN, NNAAP and MACE exams. Item reviewers must meet specific criteria in order to participate on a panel.

**Item Writers**
Individuals who write items for the NCLEX-RN, NCLEX-PN, NNAAP and MACE exams. Item writers must meet specific criteria in order to participate on a panel.

**Item Writing**
Process by which examination items are created.

**Joint Commission**
Accredits and certifies more than 15,000 health care organizations and programs in the U.S. The Joint Commission's mission is to continuously improve the safety and quality of care provided to the public through the provision of health care accreditation and related services that support performance improvement in health care organizations.

**Joint Research Committee (JRC)**
Committee consisting of three NCSBN and three test service staff members, as well as four external researchers. The committee is the vehicle through which research is funded for the NCLEX examination program. Funding is provided jointly by NCSBN and the test service.
**JONA’s Healthcare Law, Ethics and Regulation**

NCSBN has a regular column in this journal on NCSBN initiatives that are of interest to employers, attorneys and regulators. Some examples of content have included: the medication assistant curriculum; discussions of our research; articles on fraud in nursing; and discussions of our initiatives.

**Jurisdiction**

With regard to boards of nursing, jurisdiction refers to the state or territory that a board of nursing regulates. Most boards of nursing regulate all types of nurses within their states or territories. California, Georgia, Louisiana and West Virginia have separate boards of nursing to regulate RNs and LPNs/VNs.

**Knowledge, Skill and Ability Statements (KSAs)**

The attributes required to perform a job, generally demonstrated through qualifying experience, education or training. Knowledge is a body of information applied directly to the performance of a function. Skill is an observable competence to perform a learned psychomotor act. Ability is competence to perform an observable behavior or a behavior that results in an observable product.²⁶

**License**

In nursing, current authority to practice nursing as an RN, LPN/VN or APRN.

**License Information**

Information about an individual’s nursing license(s), which includes license number, license type, jurisdiction and expiration date.

**License Verification**

Proof of existing nurse licensure.

**License Verification Request**

The request for proof of licensure.

**Licensed Practical Nurse (LPN)**

A nurse who has completed a practical nursing program and is licensed by a state to provide patient care, as defined by the board of nursing.

**Licensed Vocational Nurse (LVN or VN)**

A graduate of a vocational nursing program who has passed the practical/vocational nursing examination and is licensed to administer care.

**Licensing Board**

A state’s regulatory body responsible for issuing licenses for RN and LPN/VN licensure, as well as APRN licensure/authority to practice.

**Licensure**

The act or instance of granting a license.

**Licensure By Endorsement**

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

**Licensure By Examination**

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

**Licensure Portability Grant (LPG)**

A grant NCSBN received from the Health Resources and Services Administration’s (HRSA) Office for the Advancement of Telehealth to work with state boards of nursing to reduce licensure barriers impacting telehealth and interstate nursing practice.
Logit
A unit of measurement used in item response theory (IRT) models. The logarithmic transformation of an odds ratio creates an equal interval logit scale on which item difficulty and person ability may be jointly represented.

M

Master Pool Items
NCLEX operational items. The bank of test items from which examinations are developed.

Medication Aide Certification Exam (MACE®)
The medication aide certification examination owned by NCSBN and administered by Pearson Vue.

Medication Assistant – Certified (MA-C)
A person who is certified to administer medication.

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

Member Board Profiles
An online publication that provides an overview of the regulatory environment in which the 60 boards of nursing function. This has been recently updated to include responses from all 60 boards of nursing.

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

Merchant Account
An account that enables a merchant to accept and process credit cards for payment of goods and services.

Midyear Leadership Forum
A forum presented each year at NCSBN's Midyear Meeting for presidents and executive officers with speakers addressing issues of governance and other areas of interest for nursing regulatory leaders.

Midyear Meeting
The spring meeting for all boards of nursing focusing on current initiatives of NCSBN and emerging regulatory issues.

Model Nursing Administrative Rules
Serve to clarify and further interpret and implement the Model Nursing Practice Act. Models can be used to identify essential elements needed for rules/regulations to the Model Nurse Practice Act. Rules must be consistent with the law, cannot go beyond the law and once enacted, have the force and effect of law. Available on NCSBN's website.

Model Nursing Practice Act (MNPA)
A publication of NCSBN, approved at the Delegate Assembly in Kansas City, Mo. in 2004 with additional content on assistive personnel adopted in 2005 and on criminal background checks in 2006. The Model Acts and Rules was first adopted in 1983 and created to serve as a guide to boards who were deliberating changes to state nurse practice acts and nursing administrative rules. Some boards look to the models for new ideas and different approaches for regulation. Other boards may use them in evaluating their existing regulatory language. Some boards use the framework and/or language in developing amendments and revisions to state laws and rules. The models may assist in the development of rationale for rules as part of the rule promulgation process. Models can be used to identify essential elements for legislation. While there will always be some variation with state nursing statutes, models are a way to advance a degree of uniformity among the several states to promote a common nationwide understanding of what constitutes the practice of nursing. Available on NCSBN's website.

Motion Papers
Available at Annual Meeting and used for accurate record keeping.

Mutual Recognition
A model for nurse licensure that allows a nurse licensed in his/her state of residency to practice in other compact states (both physically and electronically), subject to
each state’s practice law and regulation. Under mutual recognition, a nurse may practice across state lines unless otherwise restricted. In order to achieve mutual recognition, each state must enact legislation authorizing the Nurse Licensure Compact. See also Nurse Licensure Compact entry.

N

National Association for Practical Nurse Education and Service (NAPNES)
Advocates for the education and practice of practical/vocational nurses. It is the organization responsible for the legislation that provides for the licensure and education of practical nursing.  

National Association of Clinical Nurse Specialists (NACNS)
Enhances and promotes the unique, high value contribution of the clinical nurse specialist to the health and well-being of individuals, families, groups and communities, and to promote and advance the practice of nursing.  

National Association of Hispanic Nurses (NAHN)
Designed and committed to work toward improvement of the quality of health and nursing care for Hispanic consumers and toward providing equal access to educational, professional and economic opportunities for Hispanic nurses.  

National Black Nurses Association (NBNA)
Provides a forum for collective action by African American nurses to investigate, define and determine the health care needs of African-Americans and implement change; and to make health care available to African-Americans and other minorities.  

National Certification Corporation (NCC)
A nonprofit association that provides a national credentialing program for nurses, physicians and other licensed health care personnel who work in the obstetric, gynecologic, neonatal and telephone nursing specialties, in addition to the subspecialty areas of electronic fetal monitoring, breastfeeding, gynecologic health care and menopause.  

National Conference of State Legislatures (NCSL)
A bipartisan organization that serves the legislators and staff of the 50 states and its commonwealths and territories. NCSL provides research, technical assistance and opportunities for policy makers to exchange ideas on the most pressing state issues. NCSL is an effective and respected advocate for the interests of state governments before Congress and federal agencies.  

National Coordinating Council for Medication Error Reporting and Prevention (NCC MERP)
Works towards maximizing the safe use of medications and increasing awareness of medication errors through open communication, increased reporting and promotion of medication error prevention strategies.  

National Council Licensure Exam for Licensed Practical/Vocational Nurses (NCLEX-PN® Examination)
Used in the U.S. and by territorial Member Boards to assess licensure applicants’ nursing knowledge, skills and abilities. Boards of nursing use passing the examination to inform licensing decisions.  

National Council Licensure Exam for Registered Nurses (NCLEX-RN® Examination)
Used in the U.S. and by territorial Member Boards to assess licensure applicants’ nursing knowledge, skills and abilities. Boards of nursing use passing the examination to inform licensing decisions.  

National Council of State Boards of Nursing, Inc. (NCSBN)
A nonprofit organization whose membership comprises 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 four associate members. The purpose of NCSBN is to provide an organization through which 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.
National Federation of Licensed Practical Nurses (NFLPN)
A professional organization for LPNs, LVNs and practical/vocational nursing students in the U.S.34

National Institute of Nursing Research (NINR)
Part of the National Institutes of Health; works toward improving the health and health care of Americans through the funding of nursing research and research training. Its mission is to promote and improve the health of individuals, families, communities and populations. This mission is accomplished through support of research in a number of scientific areas. Among those areas of research are chronic and acute diseases, health promotion and maintenance, symptom management, health disparities, caregiving, self-management and end-of-life. NINR also supports the training of new investigators who bring new ideas and help to further expand research programs. The ultimate goal of NINR’s research is its dissemination into clinical practice and into the daily lives of individuals and families.

National League for Nursing (NLN)
A national organization created to identify the nursing needs of society and to foster programs designed to meet these needs; to develop and support services for the improvement of nursing service and nursing education through consultation, continuing education, testing, accreditation, evaluation and other activities; to work with voluntary, governmental and other agencies, groups, and organizations for the advancement of nursing and toward the achievement of comprehensive health care; and to respond in appropriate ways to universal nursing needs.35

National League for Nursing Accrediting Commission (NLNAC)
Responsible for the specialized accreditation of nursing education programs, both post-secondary and higher degrees. The NLNAC Board of Commissioners has authority and accountability for carrying out the responsibilities inherent in the application of standards and criteria, accreditation processes and the affairs, management, policy making, and general administration of the NLNAC. NLNAC is a nationally recognized, specialized accrediting agency for all types of nursing programs.36

National Nurse Aide Assessment Program (NNAAP®)
The nurse aide certification examination owned by NCSBN and administered by Pearson VUE.

National Practitioner Data Bank (NPDB)
A federally mandated program for collecting data regarding health care practitioners. The NPDB has been in operation for 10 years and requires medical malpractice payment reports for all health care practitioners, and reports of discipline and clinical privilege/society actions regarding physicians and dentists. Mandatory reporting of licensure actions regarding other health care practitioners, including nurses, is required by section 1921 of the Social Security Act (originally enacted in P.L.100-93, section 5). Proposed rules to implement section 1921 were published in March 2006 and final rules were published in January 2010.

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

National Student Nurses Association (NSNA)
With a membership of approximately 50,000 nationwide, NSNA mentors the professional development of future nurses and facilitates their entrance into the profession by providing educational resources, leadership opportunities and career guidance.37

NCLEX® Administration Website
Allows Member Boards to process and manage NCLEX candidate records. Member Boards use the site to perform tasks such as setting candidate eligibility status, entering candidate accommodations requests and viewing candidate results. Please note: A user name and password is needed to enter this site.
NCLEX® Candidate Bulletin
Document that serves as a guideline for candidates preparing to take the NCLEX®. Candidate Bulletins contain information regarding registration, scheduling, information on the testing experience and other useful information for candidates.

NCLEX® Candidate Services
Pearson VUE’s facility for processing registrations, scheduling candidates and responding to inquiries for the NCLEX examinations.

NCLEX® Examination Committee (NEC)
A standing committee of NCSBN that provides general oversight of the NCLEX examination process, including item development, examination security, psychometrics, examination administration and quality assurance to ensure consistency with the Member Boards’ need for examinations. This committee also approves item development panels and recommends test plans to the Delegate Assembly.

NCLEX® Examination Department
Informational Call
In order to ensure the NCSBN membership is apprised regarding the NCLEX program, the NCSBN NCLEX® Examinations Department hosts two annual informational calls for Member Boards.

NCLEX® Facts Sheets
Documents available to the general public via the NCSBN website that provide a brief summary, NCLEX volume and pass rates. It includes the volume of candidates broken out by a few subpopulations of interest, the pass rates for those subpopulations and the volume of candidates coming from other countries (top 5 only).

NCLEX® Invitational
An annual, one-day educational conference that familiarizes attendees with the components of the NCLEX exams and enlightens them about the development and administration of the NCLEX-RN® and NCLEX-PN® Examinations. The intended audience is nursing regulators, nursing educators and other stakeholders.

NCLEX® Item Review Subcommittee
An NCSBN committee that assists the NCLEX® Examination Committee with item review.

NCLEX® Member Board Manual
Provides all the information Member Board staff need to know regarding the NCLEX exam and the NCLEX process. The manual is intended for use by Member Board staff and is located on the members-only side of the NCSBN website. It is updated as changes occur to the NCLEX program.

NCLEX® Program Reports
Published twice a year for subscribing schools of nursing, reports provide administrators and faculty in nursing education programs with information about the performance of their graduates on the NCLEX exam. Included in the reports: information about a given program’s performance by the NCLEX test plan dimensions and content areas, and data regarding the program’s rank at both national and state levels.

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

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

NCLEX® Regional Workshop
A one-day conference for nurse educators held at the request and in conjunction with a board of nursing. This conference is intended to give the educators information regarding the preparation of students to take the NCLEX exam, including such topics as the test plan, alternate items, psychometrics, program reports and writing questions in the NCLEX style. The NCLEX® Regional is offered in any one of the four areas where the NCLEX® Invitational in not being held that year.
NCLEX® Registration Methods
Method(s) by which NCLEX candidates register for the NCLEX through the test service. NCLEX registrations are processed one of three ways: scan form, Internet or phone. The NCLEX registration fee of $200 is due at time of processing.

NCSBN Board of Directors (BOD)
Administrative body of NCSBN, consisting of 11 elected officers whose authority is to transact the business and bylaws of the affairs of NCSBN. The BOD is composed of the president, vice president, treasurer, four area directors and four directors-at-large.

NCSBN Interactive
Brand name for the online portal for e-learning offerings for Member Board members and staff and NCSBN staff located at www.ncsbntinteractive.org. Types of e-learning offerings include wikis, online courses, streaming videos, podcasts, recorded webinars and live webinars.

NCSBN Learning Extension
The campus for online continuing education (CE) courses for nurses, NCLEX prep for students, and test development and item writing courses for faculty. The purpose of these courses is to promote safe, effective nursing practice and build regulatory awareness. Visit www.learningext.com for the catalog and detailed descriptions of courses. The following are the courses currently being offered:

- Acclimation of International Nurses into U.S. Nursing Practice
- Assessment of Critical Thinking
- Confronting Colleague Chemical Dependency
- Delegating Effectively
- Disciplinary Actions: What Every Nurse Should Know
- Diversity: Building Cultural Competence
- Documentation: A Critical Aspect of Client Care
- End-of-Life Care and Pain Management
- Ethics of Nursing Practice
- Medication Errors: Detection and Prevention
- NCSBN 101
- NCSBN’s Review for the NCLEX-PN® Examination
- NCSBN’s Review for the NCLEX-RN® Examination
- Nurse Practice Acts CE Courses (Participants: AR, IA, ID, KY, MA, MN, MO, NC, ND, NM, NV, OH, VA, WV-PN/RN)
- Patient Privacy
- Professional Accountability and Legal Liability for Nurses
- Sharpening Critical Thinking Skills
- Test Development and Item Writing

NCSBN Learning Extension Member Board Editorial Advisory Pool
NCSBN develops several new online continuing education (CE) courses each year on topics that are important to the nursing community. These topics are selected based on feedback from surveys of Member Board executive officers. To simplify the feedback process and to increase Member Board participation, NCSBN retains a pool of volunteers that provide editorial feedback on these courses as they are developed.

NCSBN Member’s Only Website
The private side of NCSBN’s website, which provides access to nonpublic NCSBN documents, meeting minutes and works in progress. Accessible only by a preassigned password.

NCSBN Public Website
NCSBN’s public website (www.ncsbn.org) that anyone can access without a password.

NCSBN Strategic Plan
The strategic initiatives, objectives and performance measures covering a three-year period of time. Provides the direction of the organization.

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

**Nonlicensure Participating Board of Nursing**
A board of nursing that is not supplying license information on a regular basis. However, nonparticipating boards of nursing do supply information to Nursys® for disciplined nurse licenses and have access to all Nursys information.

**North American Free Trade Agreement (NAFTA)**
An agreement between Canada, Mexico and the U.S. that addresses trade in services and contains requirements and encouragement related to harmonization of qualifications for professional practice in the three countries.

**Nurse Licensure Compact (NLC)**
An agreement establishing mutual recognition and reciprocal licensing arrangements between party states for LPN/VNs and RNs. In August 2002, NCSBN delegates voted to expand the compact to include APRNs.

**Nurse Licensure Compact Administrators (NLCA)**
Organized body of nurse licensing boards that have implemented and administer the Nurse Licensure Compact.

**Nurse Practitioner (NP)**
An RN with advanced academic and clinical experience, which enables him or her to diagnose and manage most common and many chronic illnesses, either independently or as part of a health care team. An NP provides some care previously offered only by physicians and in most states, has the ability to prescribe medications. NPs focus largely on health maintenance, disease prevention, counseling and patient education in a wide variety of settings. NPs are educated through programs that grant either a certificate or a master's degree. The scope of an NP's practice varies depending upon each state’s regulations.

See Advanced Practice Registered Nurse entry.

**Nursing Assistive Personnel (NAP)**
Any unlicensed person, regardless of title, who performs tasks delegated by a nurse. Also known as unlicensed assistive personnel (UAP).

**Nursing Practice Act (NPA)**
Statutes governing the regulation of nursing practice in a jurisdiction, typically empowering a board of nursing to license individuals who meet specified requirements.

**Nursing Practice and Education Committee (NP&E)**
The former name of a standing committee of NCSBN, now called the PR&E Committee.

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

**Nursing School Accrediting Agency**
An organization that establishes and maintains standards for professional nursing programs and recognizes those programs that meet these standards.

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

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

**Nursys® Licensure QuickConfirm**
Provides online nurse license verification reports to employers and others.

**Nursys® Training**
Web conferences that are offered to Member Board users, and by special request, for licensure, discipline and other board staff, for the purpose of learning how to use Nursys.
O

Omnibus Budget Reconciliation Act of 1987 (OBRA 1987)
Contains requirements for nurse aide training and competency evaluation.

Online Nursys® Verification Request Application
The electronic application that a nurse completes to request verification of existing licenses from participating boards of nursing in Nursys.

P

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

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

Participating Board of Nursing
A board of nursing that is supplying personal, education, license and discipline information to Nursys on a regular basis.

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

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

PDF
A file format developed by Adobe Systems used to display documents. Adobe Acrobat Reader is a free program that is required to open, view and print PDF documents.

Pearson Professional Centers (PPCs)
Pearson Professional Centers are testing locations where candidates take the NCLEX exams. See Pearson Professional Testing entry.

Pearson Professional Testing Network
Network of Pearson Professional Centers (PPCs) where candidates take the NCLEX examinations. There are more than 200 domestic and 18 international PPCs that administer the NCLEX. See also Pearson VUE entry.

Pearson VUE
Contracted test service provider for NCSBN for the administration of the NCLEX, NNAAP and MACE exams.

Pediatric Nursing Certification Board (PNCB)
Provides certification services to nurses and APRNs in pediatric practice through the provision of certification exams and certification maintenance programs. The PNCB is the largest certification organization for pediatric nursing.

Personal Information
Information pertaining to an individual’s identity such as name, date of birth and gender.

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

PN/VN Knowledge Network
Provides an opportunity at Delegate Assembly for members interested in the practice and regulation of practical or vocational nurses to network and share information regarding current and emerging regulatory issues.
Podcasts
Audio programs or content delivered over the Web using streaming media or syndication formats for playback on mobile devices and/or personal computers.

Policy Conference Call
Bimonthly calls intended for executive officers (and/or their designated policy contact on staff) and Member Board presidents to focus on policy and government relations issues facing boards of nursing. Additionally, standing agenda items focus on providing members with Nurse Licensure Compact information and other externally related news that could impact nursing regulation.

Policy Perspectives
An internal newsletter intended exclusively for NCSBN membership use and insight. The publication reports on international, national and regional developments bearing on nursing regulation, including key groups and individuals influencing the direction of NCSBN policy and action.

Practice (Job) Analysis
Research study conducted by the NCLEX®, and NNAAP™ & MACE™ Examinations departments that examines the practice of newly licensed job incumbents (RNs, LPN/VNs) or new nursing assistants. The results are used to evaluate the validity of the test plans/blueprints that guide content distribution of the licensure examinations or the nurse aide competency evaluation.

Practice and Professional Issues Survey (PPI)
A survey conducted twice each year to collect information from entry-level nurses on practice activities.

Practice Consultant Conference Call
Monthly calls for boards of nursing practice consultants to discuss practice issues.

Practice Knowledge Network at Delegate Assembly
Provides an opportunity at Delegate Assembly for members interested in practice to network and share information regarding current and emerging regulatory issues.

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

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

President’s Governance Role on a Board of Nursing
An online course for Member Board presidents and members that facilitates an understanding of the leadership role of the president in the state regulatory environment. Learners earn 6.7 contact hours for completing the course.

Presidents Networking Session at Delegate Assembly
Held every August at Delegate Assembly. It provides an opportunity for presidents to network and share best practices and may include an educational program.

Presidents Networking Sessions at Midyear Meeting
Held annually at the Midyear Meeting. It provides an opportunity for presidents to network and share best practices and may include an educational program.

Pretest Items
Newly written test questions placed within the NCLEX, NNAAP and MACE exams for gathering statistics. Pretest items are not used in determining the pass/fail result.

Privilege to Practice
This refers to the multistate licensure privilege, which is the authority to practice nursing in any compact state that is not the state of residency. Additional license is not granted for this authority. See also Nurse Licensure Compact entry.

Professional Accountability and Legal Liability for Nurses
Online course offered through NCSBN Learning Extension for practicing nurses. Learners earn 5.4 contact hours for completing the course.
Professional Boundaries
The space between the nurse’s power and the client’s vulnerability—the power of the nurse comes from the professional position and access to private knowledge about the client. Establishing boundaries allows the nurse to control this power differential and allows a safe connection to meet the client’s needs. Complimentary professional boundaries materials are available from NCSBN.

Psychometrics
The scientific field concerned with all aspects of educational and psychological measurement (or testing), specifically achievement, aptitude and mastery as measured by testing instruments.

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

Quick Results Service
A service provided to candidates where they can access their “unofficial” results within two business days of taking their examination via the phone or Internet for a fee. This is only available to candidates whose licensure board participates in the service.

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

Recorded Webinar
A seminar conducted over the Web for recorded, on-demand playback of audio, video and/or presentation materials.

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

Reliability
A test statistic that indicates the expected consistency of test scores across different administrations or test forms. For adaptively administered examinations, such as the NCLEX exam, the “decision consistency statistic” is the preferred statistic for assessing reliability. NCSBN uses the Kuder-Richardson Formula 20 (KR20) statistic to measure the reliability of the National Nurse Aide Assessment Program (NNAAP).

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

Resource Manual for International Nurses
User-friendly resource on the members-only NCSBN website, which includes information on the education, English proficiency and immigration of international nurses.

Respecting Professional Boundaries
Online continuing education course offered through NCSBN Learning Extension; based on NCSBN’s video and facilitation package, “Crossing the Line: When Professional Boundaries are Violated.” Learners earn 3.9 contact hours for completing the course.

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

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

**Standard Setting Panel of Judges**
A group of individuals that contributes to the recommendation of potential NCLEX passing standards to the NCSBN Board of Directors.

**Standing Committee**
A permanent committee established by the NCSBN Bylaws.

**Statistical Criteria**
Guidelines that all proposed NCLEX items must meet in order to be operational.

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

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

**Streaming Video**
Video programs or content delivered over the Web using streaming technology. After a short period of initial buffering, the browser will play the media file and continue to play it while the rest of the file downloads.

**Taxonomy of Error, Root Cause Analysis and Practice-responsibility (TERCAP®)**
A data collection instrument designed to collect information for the purpose of identifying the root cause(s) of nursing practice breakdown. The instrument allows for standardized, comprehensive and consistent data collection concerning matters reported to boards of nursing. The aggregate data collected from participating Member Boards will be used by NCSBN for ongoing research, allowing for identification of categories of practice breakdown to better enable Member Boards to proactively protect the public health, safety and welfare of its citizens.

**Temporary License**
Temporary authorization to practice nursing.

**TERCAP® Committee**
An NCSBN committee charged with the implementation of the TERCAP project.

**TERCAP® Users’ Conference Calls**
Held every two months at 1:00 pm (CST) on the second Tuesday of odd months. Participants include executive officers, investigators, attorneys and board staff who work with discipline cases that are submitted to NCSBN through the online TERCAP data collection instrument. The purpose is to assist participants with any TERCAP related questions, share strategies on successful implementation, and have an opportunity for dialogue with new and experienced TERCAP users.

**Test Administrator (TA)**
Test service staff person who is responsible for day-to-day operation of the center and for proctoring of examinations.

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

**Test Plan**
The organizing framework for the NCLEX-RN, NCLEX-PN, NNAAP and MACE exams that includes the percentage of items allocated to various categories.

**Test Service**
The vendor that provides services to NCSBN, including examination delivery, examination scoring and reporting. Pearson VUE is the contracted test service for the NCLEX, NNAAP and MACE examinations.

**Treasurer**
NCSBN Board of Directors position that serves as the chairperson of the Finance Committee and manages the Board’s review of and action related to the Board’s financial responsibilities.
U

U.S. Department of Education (DOE)
The agency of the federal government that establishes policy for, administers and coordinates most federal assistance to education. 38

U.S. Department of Health & Human Services (HHS)
The U.S. government’s principal agency for protecting the health of all Americans and providing essential human services, especially for those who are least able to help themselves. 39

U.S. Department of Homeland Security (DHS)
Leverages resources within federal, state and local governments, coordinating the transition of multiple agencies and programs into a single, integrated agency focused on protecting the American people and their homeland. More than 87,000 different governmental jurisdictions at the federal, state, and local level have homeland security responsibilities. The comprehensive national strategy seeks to develop a complementary system connecting all levels of government without duplicating effort. Homeland Security is truly a “national mission.” 40

U.S. Drug Enforcement Administration (DEA)
Federal agency charged to enforce the controlled substances laws and regulations of the U.S. and bring to the criminal and civil justice system of the U.S., or any other competent jurisdiction, those organizations and principal members of organizations involved in growing, manufacturing or distributing controlled substances appearing in or destined for illicit traffic in the U.S.; recommend and support nonenforcement programs aimed at reducing the availability of illicit controlled substances on the domestic and international markets. 41

Uniform Advanced Practice Registered Nurse Licensure/Authority to Practice Requirements
Developed by NCSBN with APRN stakeholders in 2000; uniform requirements that established the foundation for the APRN Compact.

Uniform Core Licensure Requirements for Registered Nurse/Licensed Practical/Vocational Nurse
Developed in 1999, the requirements promote consistency in licensure requirements for initial entry into the nursing profession.

Unlicensed Assistive Personnel (UAP)
Any unlicensed personnel, regardless of title, to whom nursing tasks are delegated.

V

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

Verification Department
NCSBN employees who process nurse license verifications in Nursys.

Verification Fee
The monetary payment required from an applicant for license verification via Nursys.

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

Webcast
A seminar conducted or a program broadcasted over the Web for live, realtime delivery of audio, video and/or presentation materials.

White Paper
A detailed document issued by NCSBN, disseminated to external groups used to educate audiences about a particular topic, discuss issues or encourage dialogue about a particular regulatory subject.

Wiki
A wiki is a Web application that allows users to collaborate on content. Wikis can be permissions-enabled and monitored. Wiki users can set up e-mail notifications, conduct discussions and view/revert to past versions of pages.

Workshop on the Regulation of the Nursing Assistant and Medication Aide
Workshop presented by NCSBN each year to provide current information on regulatory issues with unlicensed nursing personnel and to provide a forum for boards of nursing and other interested stakeholders to discuss emerging issues and to network.
The National Council of State Boards of Nursing (NCSBN) provides education, service, and research through collaborative leadership to promote evidence-based regulatory excellence for patient safety and public protection.

Copyright © 2011 National Council of State Boards of Nursing, Inc. (NCSBN®)

All rights reserved. NCSBN®, NCLEX®, NCLEX-RN®, NCLEX-PN®, NNAAP®, MACE®, TERCAP® and Nursys® are registered trademarks of NCSBN and this document may not be used, reproduced or disseminated to any third party without written permission from NCSBN.

Permission is granted to boards of nursing to use or reproduce all or parts of this document for licensure related purposes only. Nonprofit education programs have permission to use or reproduce all or parts of this document for educational purposes only. Use or reproduction of this document for commercial or for-profit use is strictly prohibited. Any authorized reproduction of this document shall display the notice: “Copyright by the National Council of State Boards of Nursing, Inc. All rights reserved.” Or, if a portion of the document is reproduced or incorporated in other materials, such written materials shall include the following credit: “Portions copyrighted by the National Council of State Boards of Nursing, Inc. All rights reserved.”

Address inquiries in writing to NCSBN Permissions, 111 E. Wacker Drive, Suite 2900, Chicago, IL 60601-4277. Printed in the United States of America.