Technology Solutions: Keeping Up with the Pace of Change
Founded March 15, 1978, as an independent not-for-profit organization, NCSBN was created to lessen the burdens of state governments and bring together boards of nursing (BONs) to act and counsel together on matters of common interest. NCSBN’s membership is comprised of the BONs 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 24 associate members that are either nursing regulatory bodies or empowered regulatory authorities from other countries or territories.

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

Mission: NCSBN provides education, service and research through collaborative leadership to promote evidence-based regulatory excellence for patient safety and public protection.

In This Issue

3. 2015 Testing Volume for Licensure/Registration in Canada

4. Pre-legislative Steps for States Considering Nurse Licensure Compact (NLC) Legislation

7. New Nurses: Your License to Practice Video Now Available

8. Technology Solutions: Keeping Up with the Pace of Change

18. A Global Perspective: Nursing Regulation in Singapore
   By: The Singapore Nursing Board

5. Speed Round

12. News & Notes

Hive is Here!

NCSBN’s new collaboration website, Hive, is in the final phase of development. Hive will allow you to better collaborate and keep connected with other members.

Powered by Microsoft SharePoint, Hive will:

- Allow you to edit documents right in your browser
- Provide version control
- Have familiar MS Office Toolbars
- Help track committee work, assignments and completed projects
- Spark discussions about important topics facing nursing regulation
- Be accessible from your phone or tablet

2015 Testing Volume for Licensure/Registration in Canada

Canadian students and graduates, international applicants and others looking to take the NCLEX® for licensure/registration in Alberta, British Columbia, Manitoba, New Brunswick, Newfoundland and Labrador, Nova Scotia, Northwest Territories and Nunavut, Ontario, Prince Edward Island, and Saskatchewan began the NCLEX registration process with Pearson VUE on Nov. 3, 2014.

NCSBN began administering the NCLEX-RN exam in January 2015. There were 4,701 candidates who took the NCLEX for Canadian RN licensure/registration from Jan. 1 to June 30, 2015. More than half of the volume comes from Ontario and Alberta. The numbers of candidates educated in Ontario and Alberta are 1,699 and 1,085, respectively. Northwest Territories, Nunavut and Prince Edward Island contributed the least amount of volume. It is expected that about 4,500 additional Canadian candidates will take the NCLEX during the rest of this year.
Leadership and Public Policy Conference
OCT. 27 - 29, 2015 | WEST LAKE VILLAGE, CA

This conference, for NCSBN members only, is geared towards board executives, board members and board staff who want to learn strategies and skills for use in leadership positions and public policy.

Objectives:
- Transform data into legislative strategy.
- Communicate effectively to reporters and legislators.
- Feel empowered by new methods to lead change and enact policy.
- Conduct an effective grassroots campaign.

Registration Deadline: Oct. 13, 2015

Pre-legislative Steps for States Considering Nurse Licensure Compact (NLC) Legislation

With the new NLC and advanced practice registered nurse (APRN) Compacts approved on May 4, 2015, current NLC and non-NLC states alike are beginning to plan for the anticipated adoption of one or both compacts. Support for both compacts is broad, and the comprehensive changes will enable the addition of new states to both compacts and the progression toward facilitating the increasing modernization of the mobile nursing workforce across state lines. Granted, legislative environments and support vary. NCSBN is supportive of states going forward and there are several steps states can take ahead of introducing legislation to nurture an increasingly favorable political environment and be prepared for potential hurdles.

First of all, it is crucial to educate all stakeholders in each state. Non-NLC states in particular should prioritize educating nursing constituents; since nurses in these states are not currently affected by the NLC, they must learn what it is and how it will impact their nursing practice going forward. NCSBN has a multitude of resources and fact sheets available and is willing to tailor these materials to suit the needs of particular states and interest groups. Stakeholder consensus will be fundamental when bringing the NLC forward, and building coalitions will be especially helpful when providing support and testimony.

Substantive changes to the NLC statute cannot be accepted, which board attorneys and the Attorneys General understandably can find difficult to accept. Minor changes may be acceptable, but should be reviewed by the present Nurse Licensure Compact Administrators (NLCA) Special Counsel to ensure no material deviations.

The fiscal impact of the NLC will also vary state to state, and this can be evaluated with the help of NCSBN staff in order to minimize fiscal uncertainty and construct a plan in order to mitigate potential revenue loss.

All states should consult the NLC Implementation Plan and Toolkit, enumerating the necessary steps for legislative introduction and implementation. As always, the Nurse Licensure Compact is available to provide subject matter expertise and welcomes any and all questions at nursecompact@ncsbn.org.

1. What do you do?
I work in the IT department and my job is to identify, and document business, functional and user requirements for the Optimal Regulatory Board System (ORBS) Project. My role includes interfacing with the boards of nursing by providing customer service and training.

2. What are the best and most challenging aspects of your job?
The best aspect of my job is interfacing with the NCSBN membership. This job gives me the opportunity to meet the board members and learn about their daily operations. There is a sense of excitement about ORBS from the membership and that makes me feel good about what I am bringing to the organization. The most challenging aspect of my job is taking all of the different processes from the various boards of nursing and creating a product that will be beneficial to them all.

3. If you weren’t working at NCSBN, what would your dream job be?
I love commercial aviation, I am always in awe when I see a plane glide through the sky or float down for a landing. Since I was a child, I’ve dreamed of being an airline pilot. I would spend hours on flight simulator virtually flying all over the world. If I wasn’t working at NCSBN, I would be an airline pilot.

SPEED ROUND
GET TO KNOW NCSBN STAFF:
Brian Stoudemire
Business Analyst, LMS, IT

With the new NLC and advanced practice registered nurse (APRN) Compacts approved on May 4, 2015, current NLC and non-NLC states alike are beginning to plan for the anticipated adoption of one or both compacts. Support for both compacts is broad, and the comprehensive changes will enable the addition of new states to both compacts and the progression toward facilitating the increasing modernization of the mobile nursing workforce across state lines. Granted, legislative environments and support vary. NCSBN is supportive of states going forward and there are several steps states can take ahead of introducing legislation to nurture an increasingly favorable political environment and be prepared for potential hurdles.

First of all, it is crucial to educate all stakeholders in each state. Non-NLC states in particular should prioritize educating nursing constituents; since nurses in these states are not currently affected by the NLC, they must learn what it is and how it will impact their nursing practice going forward. NCSBN has a multitude of resources and fact sheets available and is willing to tailor these materials to suit the needs of particular states and interest groups. Stakeholder consensus will be fundamental when bringing the NLC forward, and building coalitions will be especially helpful when providing support and testimony.

Substantive changes to the NLC statute cannot be accepted, which board attorneys and the Attorneys General understandably can find difficult to accept. Minor changes may be acceptable, but should be reviewed by the present Nurse Licensure Compact Administrators (NLCA) Special Counsel to ensure no material deviations.

The fiscal impact of the NLC will also vary state to state, and this can be evaluated with the help of NCSBN staff in order to minimize fiscal uncertainty and construct a plan in order to mitigate potential revenue loss.

All states should consult the NLC Implementation Plan and Toolkit, enumerating the necessary steps for legislative introduction and implementation. As always, the Nurse Licensure Compact is available to provide subject matter expertise and welcomes any and all questions at nursecompact@ncsbn.org.
As a nurse, you can dramatically improve peoples’ lives – even save lives. You also have a legacy of integrity and trustworthiness to uphold. Nursing is one of the most highly regarded professions in the country. In Gallup polls, the public consistently ranks it as the most ethical and honest profession in America.

Nurses new to practice start with a strong educational foundation for successful practice; but nursing is a lifelong learning experience. You can now view NCSBN’s new video, New Nurses: Your License to Practice, to understand nursing licensure and key points that new nurses need to know.

Nurses preparing for their first jobs will learn the ways the profession is regulated — through nursing licensure, boards of nursing and Nurse Practice Acts. The video also covers key issues of professional responsibility, including the prevention of violations of a state Nurse Practice Act, maintaining professional boundaries and nursing ethics.

View the new video, and visit our other resources and tools on NCSBN.org to access more tools that will help you advance in your career while maintaining professionalism and integrity throughout your career.

“We at NCSBN are excited to release our new video, New Nurses: Your License to Practice. It provides new graduates with valuable information on nursing regulation as they begin their careers in this highly respected profession.”

—Nancy Spector, PhD, RN, FAAN, director, Regulatory Innovations, NCSBN
Advances in technology have changed tremendously, in terms of what we’re able to offer and support. Twenty years ago, not every board had a computer. Not everyone had email. There was no central network in which everyone was connected to the Internet. NCSBN ensured that every board had a computer, built them a network and connected them. The boards were able to email and collaborate more effectively. It’s almost laughable if you think about it now, but it wasn’t that long ago and it has been a sea change.

– NCSBN CEO Kathy Apple

As Kathy Apple noted recently, much has changed over the past 20 years when it comes to technology and the tools NCSBN and boards of nursing (BONs) have available. Twenty years ago, the ability to smoothly and quickly stream a video seemed like an impossibility. The amount of data that can now be stored on the latest high-capacity SD card could have filled thousands of now-obsolete floppy disks. This pace of change continues and is the rule rather than the exception in health care. Twenty years from now, some of the technology we marvel at today will likely seem dated and quaint.

The ease with which we are able to communicate and store information presents both opportunities and risks. This is why staying on top of technological change is crucial. While some BONs have fully staffed information technology (IT) departments, others are staffed with one or two people, or are dependent on state IT staff for guidance and support. For some BONs a lack of financial and staffing resources can present a challenge to their ability to implement updated technology in a timely manner.

The good news is that NCSBN is here to help and to provide solutions for BONs. In Focus magazine spoke with Nur Rajwany, chief information officer, NCSBN, about what BONs should be aware of from a security standpoint and tools they can use to address security and communications concerns.

Technology Solutions: Keeping Up with the Pace of Change

continued on page 11
First and Foremost: Security

As with any organization, the security of systems and data are a paramount concern for BONs. “The best option is to get a certified company to do an annual penetration test of the board’s infrastructure, and a separate application penetration test,” says Rajwany. Put simply, a penetration test is a planned software “attack” on a computer system that searches for security weaknesses.

There are also other steps Rajwany recommends a BON can take, many without the need of a third party. They include:

- Avoid communicating with other BONs via regular email if the subject is of a sensitive nature.
- Do not inadvertently send Social Security numbers (SSN), dates of birth or other personally identifiable information via email to other BONs, staff or NCSBN.
- Only display the last four digits of the SSN to your board staff within your licensure application.
- Make sure your database is encrypted. Database encryption protects stored, sensitive data.
- Utilize intrusion detection and prevention systems (IDPS). An IDPS monitors network and system activity for malicious activity, and can identify, log, block and report such activity.
- Install multiple layers of firewalls. A firewall is a network security system that monitors and controls incoming and outgoing network traffic.
- Use email and botnet filters to block unwanted and potentially suspicious emails.
- Patch or update your servers to ensure that security vulnerabilities and bugs are fixed on a frequent basis.
- Make sure your computers have reputable antivirus software installed, and keep them updated to provide maximum protection.
- Make sure your computers have encryption, especially tablets.
- Any mobile device should have a mobile device management tool installed, allowing data to be wiped remotely if the device is lost or stolen.
- Do not provide the public with an option to search your website for a licensee using SSN or year of birth.
- Employ CAPTCHA code within the license-lookup feature on your website. CAPTCHA (“Completely Automated Public Turing test to tell Computers and Humans Apart”) is a challenge-response test used in computing to determine whether or not the “user” is a real person.
- Develop a robust disaster recovery plan for IT systems, which is a component of a well-defined and tested business continuity plan.
- Develop an incident response plan, which is an organized approach to addressing and managing the aftermath of a security breach or attack. The goal of such a plan should be to handle the situation in a way that limits damage and reduces recovery time and costs.

The Nursys® database coordinates national publicly available nurse licensure information. It is the only national database for verification of nurse licensure, discipline and practice privileges for RNs and LPN/VNs licensed in participating jurisdictions, including all states in the Nurse Licensure Compact (NLC). Nursys is comprised of data obtained directly from the licensure systems of U.S. boards of nursing through frequent, secured updates.
Ohio Board of Nursing Celebrates 100 Years
The Ohio Board of Nursing is celebrating its Centennial Anniversary this year! On April 27, 1915, Ohio passed the first Nurse Practice Act establishing the Nurses’ Examining Committee as part of the Medical Board. In 1941 the board became autonomous.

The first nurses were registered Jan. 11, 1916, and the first examination was administered in December of 1916. Three nurses achieved a passing score of 75 percent.

In October of 1915, “Educational Requirements for Training Schools for Nurses” were adopted. The first recorded disciplinary action was in 1939, and in 1966 it was noted in the board minutes that “the nurse and misuse of drugs” was an ongoing problem.

Practical nurses were recognized for licensure in 1955. Licensure was not mandatory for registered and practical nurses until 1967. Continuing education became mandatory in 1988.

In June of 1996, the state recognized advanced practice nursing by establishing title protection and scopes of practices. Through 2000-2009, the Board began regulating dialysis technicians, community health workers, and medication aides.

The Ohio Board of Nursing recognizes those who over the last 100 years have worked to develop effective nursing regulation in Ohio with the mission of public protection. The board is proud of its past and proud of its present work to safeguard the health of the public.

Two North Dakota Board of Nursing Leaders Win Awards
The North Dakota Center for Nursing recently presented its first Legendary Nurse Awards during North Dakota’s 100 Years of Nursing Excellence Celebration.

North Dakota Board of Nursing Executive Director, Constance Kalanek, PhD, RN, FRE, has received the Legendary Nurse Award: Founder for demonstrating exceptional leadership in the development of the North Dakota Center for Nursing. Dr. Kalanek has been involved in advocating for the development of the North Dakota Center for Nursing for more than 12 years. After a traumatic legislative session in 2003 that resulted in marked changes in the practice act, Dr. Kalanek hosted a meeting of nursing leaders, consisting of multiple organizations to develop a collaborative voice. The North Dakota Nurse Leadership Council was created after this meeting and was the precursor to the North Dakota Center for Nursing Board of Directors. She was instrumental in securing funding for the Center through submission of an Otto Bremer Grant and ultimately working with the North Dakota Board of Nursing to allocate licensure fee funding to support the work of the Center.

North Dakota Board of Nursing Associate Director, Stacey Pfenning, DNP, APRN, FNP, has received the Legendary Nurse Award: Evidence Based Practice for excellence in the promotion and utilization of evidence based practice principles in the pursuit of clinical excellence. Dr. Pfenning was instrumental in promoting Evidence Based Practice throughout North Dakota for many years. Dr. Pfenning co-created the State Online Journal club which provided an interactive forum for discussing clinical practice questions and for posting clinically appraised topics (CATs). This journal club formed the basis for the current Evidence Based Practice Resource Center at the North Dakota Center for Nursing. She has presented at many state and national conferences providing her set of evidence based practice tools to numerous nurses. Last fall, she presented a Bootcamp on Evidence Based Practice that provided participants with many tools to implement in their organization. Dr. Pfenning is a champion and truly passionate about promoting evidence-based practice.

Colleen Neubauer Wins Planner Member of the Year Award
Congratulations to Colleen Neubauer, CMP, the senior meetings manager at NCSBN, for winning the Meeting Professionals International (MPI) Chicago Area Chapter’s Planner of the Year Award.

This award recognizes a planner member who has made significant contributions to the meetings industry and is an exemplary representative of the profession. Nominees for this award are considered based on their professional experience, involvement in MPI (either locally or internationally), industry engagement, community service and recognition by their peers.
Congratulations to Our Annual Award Recipients

NCSBN recognized its dedicated and exceptional membership and guests at its annual awards ceremony. Specific award recipients included:

1. Rula Harb, MS, RN, former executive director, Massachusetts Board of Registration in Nursing, was honored with the prestigious R. Louise McManus Award. Individuals receiving this award have made sustained and significant contributions through the highest commitment and dedication to the mission and vision of NCSBN.

2. Elizabeth Lund, MSN, RN, executive director, Tennessee State Board of Nursing, received the Meritorious Service Award, which is granted to a member for significant contributions to the mission and vision of NCSBN.

3. Deborah Haagenson, RN, president, Minnesota Board of Nursing, received the Elaine Ellibee Award that is granted to a member who has served as a board president within the past two years and who has made significant contributions to NCSBN.

4. Janice Hooper, PhD, RN, FRE, CNE, board staff, Texas Board of Nursing, received the Exceptional Contribution Award, which is given for significant contribution by a member who is not a president or executive officer.

5. Patricia “Tish” Smyer, DNSc, RN, CNE, past president, Nevada State Board of Nursing, posthumously received the Distinguished Achievement Award, which is given to an individual whose contributions or accomplishment has impacted NCSBN’s mission and vision.

6. Washington State Nursing Care Quality Assurance Commission was awarded the Regulatory Achievement Award that recognizes the member board or associate member that has made an identifiable, significant contribution to the mission and vision of NCSBN in promoting public policy related to the safe and effective practice of nursing in the interest of public welfare.

Smyer’s family is pictured with Debra Scott, MSN, RN, FRE, executive director, Nevada State Board of Nursing.
Retiring NCSBN CEO, Kathy Apple, MS, RN, FAAN, was honored with the Founders Award bestowed by the NCSBN Board of Directors. This prestigious award is given only upon the occasion that an individual with ethics, integrity and sincerity has demonstrated the highest regard for the ideals and beliefs upon which NCSBN was founded.

Institute of Regulatory Excellence (IRE) Fellows

Pictured, from left to right:
Linda L. Olson, PhD, MBA, MSN, RN, NEA-BC, associate, Nursing Regulation, David MacDonald, MN, RN, professional conduct review consultant, College of Registered Nurses of British Columbia, Jackye Ward, MS, RN, NEA-BC, deputy director, Regulatory Services, Oklahoma Board of Nursing, Farah Ismail, MScN, RN, LLB, manager, Prosecutions and Monitoring, Professional Conduct, College of Nurses of Ontario, Joyce Winstead, MSN, RN, nursing practice consultant, North Carolina Board of Nursing, Joan Libner, EGD, RN-BC, CNE, associate professor and chair, Department of Nursing and Health and RN-BSN program director, Benedictine University, Lisle, Ill., and chair, Illinois Board of Nursing, Mary Fanning, DNP, RN, NEA-BC, director, Nursing Administration/ANCC Program Director, West Virginia University Hospitals and former board member, West Virginia Board of Examiners for Registered Professional Nurses.

Service awards were given to the following executive officers of BONs:

**Five Years**
- Joe Baker, Jr., executive director, Florida Board of Nursing
- Jim Cleghorn, MA, executive director, Georgia Board of Nursing
- Linda Davidson, APRN, executive director, Vermont State Board of Nursing
- Cynthia Gustafson, PhD, RN, executive director, Montana Board of Nursing
- Aurelia G. Long, RNC, WHNP FNP, past board chairperson, Northern Marianas Islands Board of Nursing
- Linda Stanger, executive director/registrar, College of Licensed Practical Nurses of Alberta
- Sue Tedford, MNSc, APN, RN, executive director, Arkansas State Board of Nursing
- Lee Ann Teshima, executive officer, Hawaii Board of Nursing
- Diane Wilson-Maté, MEd, RN, executive director, College of Registered Nurses of Manitoba
- Pamela Zickafoose, EdD, RN, NE-BC, CNE, executive director, Delaware Board of Nursing

**10 Years**
- Rula Harb, MS, RN, former executive director, Massachusetts Board of Registration in Nursing
- Betsy Houchen, JD, MS, RN, executive director, Ohio Board of Nursing

**20 Years**
- Laura Rhodes, MSN, RN, executive director, West Virginia Board of Examiners for Registered Professional Nurses
- Joey Ridener, MN, RN, FAAN, executive director, Arizona State Board of Nursing
- Katherine Thomas, MN, RN, FAAN, executive director, Texas Board of Nursing

**30 Years**
- Elizabeth Lund, MSN, RN, executive director, Tennessee State Board of Nursing

The following BONs celebrated 100 years of nursing regulation in 2015:

- Alabama Board of Nursing
- Maine State Board of Nursing
- North Dakota Board of Nursing
- Ohio Board of Nursing

To see more photos from this year’s NCSBN Annual Meeting, visit our Flickr account.
Singapore is an island city-state, strategically situated at the southern tip of the Malayan Peninsula, between Malaysia and Indonesia, with a land area of 714.3 sq. km and a population of over 5.4 million. Singapore is a multi-racial, multi-cultural and multi-religious society and has four official languages: English, Mandarin, Malay and Tamil. Most Singaporeans are bilingual in English and their respective mother tongue (Mandarin, Tamil or Malay). Singapore is a young and vibrant nation with a history of 50 years as an independent republic.

The history of nursing in Singapore dates back to 1885 with the arrival of a group of French nuns who started caring for the sick at the general hospital. The year 2015 marks 130 years of nursing in Singapore. The nursing profession remains a noble and impactful profession in Singapore. Nurses have always constituted the core of the health care workforce.

In 1916, the first apprentice-based General Nurse Training in Singapore began, followed by a formal four-year medical model nursing training at the Singapore General Hospital (SGH) in 1924. All nursing education programmes were centralised at the School of Nursing (SON) in 1978, except for psychiatric nursing at the Woodbridge Hospital.

Nursing education in Singapore continued to evolve over the years and in 1992, nursing education came under the ambit of the Ministry of Education. The Certificate Programme in SON was offered as a Diploma programme at Nanyang Polytechnic (NYP), with post-registration nursing programmes at the Advanced Diploma level. In 2000, the SON closed and the Assistant Nursing Course moved to the Institute of Technical Education (ITE), offered as a National ITE Certificate in Nursing programme.

In 2006, the Bachelor of Science (Nursing) programme commenced at the Alice Lee Centre for Nursing Studies, National University of Singapore (NUS). The Master of Nursing programme was offered in 2003 to prepare for the certification of Advanced Practice Nurses (APNs).
Nursing regulation began in 1923 with the Midwives Ordinance that required compulsory registration of midwives. The Nurses Registration Ordinance was passed in 1949 and nurses had to be registered for practice.

In 1975, the Nurses and Midwives Act (1975) was first enacted. In 1999, the Nurses and Midwives Act (1975) was repealed and a new Act was enacted by Parliament on Nov. 24, 1999. The Nurses and Midwives Act (Chapter 209) (NMA) became operational on May 1, 2000 with the establishment of the Singapore Nursing Board as a Statutory Board.

Later in 2005, the Nurses and Midwives Act was amended to amplify provisions relating to certification and regulation of the practice and conduct of APNs.

The Singapore Nursing Board (SNB) is the regulatory authority for nurses and midwives in Singapore. Its scope and functions are defined in the NMA for the purpose of registration and enrolment of nurses, the registration of midwives and the certification of APNs and related matters.

The mission of SNB is to uphold professional nursing standards and honour public trust. It does this by defining the practice and boundaries of the nursing profession including the qualifications and requirements to practice.

SNB sets and communicates standards for professional nursing practice and scope of practice. It approves and maintains the register of nurses and midwives, issues Practising Certificates, monitors fitness for practice and regulates standards for nursing education.

Singapore is a multi-racial, multi-cultural and multi-religious society and has four official languages: English, Mandarin, Malay and Tamil. Most Singaporeans are bilingual in English and their respective Mother Tongue (Mandarin, Tamil or Malay). Singapore is a young and vibrant nation with a history of 50 years as an independent Republic this year (2015).

The History of Nursing in Singapore dates back to 1885 with the arrival of a group of French nuns who started caring for the sick at the general hospital. 2015 marks 130 years of nursing in Singapore. Nurses have always constituted the core of the health care workforce.

There are 17 Board members appointed by the Minister for Health. The Board comprises the Director of Medical Services or his representative, the Director-General of Education or his representative, the Chief Nursing Officer (CNO) and 14 other members. Among these members, nine must be nurses and another two must be midwives. We have two non-nurse Board members. The CNO is also the Registrar of the Board.

A total of eight committees assist the Board with its various functions, namely:

- Registration Committee
- Education Committee
- APN Accreditation Committee
- APN Training Committee
- Finance Committee
- Audit Committee
- Complaints Committee
- Ethics Committee

As of Dec. 2014, there are a total of 37,618 nurses and midwives on SNB’s Register and Roll, including a total of 145 certified APNs.

Recent Developments

Since 2011, SNB has revised its Standards for Practice for Nurses and Midwives (2011), Standards for Nursing Education and Standards for APN Education (2011), and published Standards for Clinical Nursing Education (2012), Core Competencies and Generic Skills for Registered Nurses (RN) and Enrolled Nurses (EN) (2012) and Scope of Professional Nursing Practice statements for RNs, ENs, Midwives and APNs (2015).

In tandem with info-technology advances, SNB also launched its new website in 2011 which helps to provide more information for nurses, employers and the public. Since February 2014, SNB had also launched its new Professional Registration System (PRS). The PRS is a common system used by other health care profession regulatory boards/councils, i.e., Singapore Medical Council, Singapore Dental Council, Singapore Pharmacy Council, Optometrists and Opticians Board, Allied Health Professions Council and Traditional Chinese Medicine Practitioners Board. The system offers new functionalities and more online services to health care professionals and their employing institutions, such as online applications for registration/enrolment, practising certificate renewals and verification of registration applications.

One of the key challenges faced by the Singapore Nursing Board is managing the large number of applications of foreign-educated nurses to meet the expansion of health care facilities in Singapore.

The Board endeavours to continually improve and update its processes and guidelines and to adopt good practices in the areas of nursing regulation. Board members and management staff actively engage in meetings, visits and events relating to regulation and health care, both within the Asian and Pacific region and internationally.

The mission of SNB is to uphold professional nursing standards and honour public trust. It does this by defining the practice and boundaries of the nursing profession including the qualifications and requirements to practice.
Improving Work Processes

Rajwany recommends a variety of ways member BONs can improve their work processes, including tools and resources to help ensure sound security and communication. These tools can be accessed through NCSBN Passport, an innovative tool that makes online interactions with NCSBN easier for members (please note that some links below require an NCSBN members-only login):

1. Nursys provides online verification to a nurse seeking to practice in another state and nurse license lookup reports to employers and the general public. All information is primary source equivalent. BONs can take advantage of Nursys online license lookup, which provides employers with their licensees’ status in multiple jurisdictions. Many boards have taken advantage of this service by providing employers with a link to Nursys from their website where they display their own license lookup. Rajwany recalls that several years ago a BON experienced a shutdown of their online services due to hacking concerns. Nursys was available to the BON staff to look up their licensees so they could still conduct business. Another BON recently shut down their online license lookup and has been directing employers to Nursys for licensee lookup. This shows that Nursys can relieve some of the burden for BONs.

2. Nursys e-Notify provides free automated license and discipline notifications to nurse employers on behalf of the participating BONs. Recently, NCSBN introduced an extended marketing service that allows BONs to have NCSBN engage their hospital associations and other customers and provide eNotify demos and follow ups.

3. With Nursys Speed Memo, BONs can securely and quickly communicate about nurse license information with staff in other jurisdictions that share the same license or discipline responsibilities. This helps BONs avoid using unsecure emails.

4. Nursys Discipline Report is an important service a BON can use to determine if their licensees have been disciplined by other BONs. Any Nursys licensee participating BON can take advantage of this service.

5. NCSBN’s new collaboration wiki, Hive, allows member BONs to collaborate and stay connected. Features include the ability to edit documents within a web browser, discussion forums, accessibility on phone and tablet, and tools to assist in tracking committee work, assignments and completed projects.

6. Member Board Profiles are available in a comprehensive database that provides detailed information about NCSBN’s Member Boards.

7. The Web Surveys tool helps members solicit and share feedback with other BONs. The tool can be accessed by members here.

8. The Falsified Identity Tracking System (FITS) is a private, interactive tool for member boards to track unlicensed individuals who have misrepresented themselves and questionable nursing programs that have misrepresented their qualifications. New enhancements coming soon will allow Nursys to automatically perform searches in FITS, so users will not have to perform two separate searches.

9. Rajwany recommends BONs offer electronic licenses, validated through online license look up, via an app. This will eliminate paper wallet card licenses. New enhancement in Nursys.com will allow for license verification through QR scanning, which will allow employers to scan the licensee QR code and get a license verification on their hand held mobile scanner.

10. Another suggestion is to allow nursing programs to submit lists of graduating students electronically via a portal, instead of sending paper lists via fax or USPS mail for verification that the applicant has graduated from the nursing program. Electronic data collection allows information technology to automate backend processes.

11. Also, allow continuing education (CE) providers to award CE credits to licensees via an electronic portal, for CE verification.

12. Finally, update license renewals system to accept CE electronically during license renewal periods.

One of NCSBN’s core values is Innovation: “Embracing change as an opportunity to better all organizational endeavors and turning new ideas into action.” Keeping up with the rapid pace of change can be a challenge. But sitting still is not an option.

“NCSBN has reached out to the state boards of nursing to offer them help, to lessen the burden of government,” says Rajwany. “We keep working hard to ensure that they have the information, tools and support they need to secure their data, communicate efficiently and securely, and to do their jobs effectively.”

– Nur Rajwany
Save the Date

2016 NCSBN Midyear Meeting
March 14-16, 2016
Baltimore, MD

NCSBN WANTS TO...

Tell Your Story

We are always seeking out information and story ideas for In Focus, NCSBN’s quarterly publication. This is your chance to tell your story, highlight a board of nursing achievement or recognize a colleague. For more information contact Mike Grossenbacher at mgrossenbacher@ncsbn.org.
After 14 years of distinguished service as the CEO…
of NCSBN, Kathy Apple, MS, RN, FAAN, will retire on Sept. 30.
The framed photo was taken in 2001, when Kathy began her tenure as CEO.
We wish her the best in her retirement!